BANGLADESH
ENDING HUNGER & UNDERNUTRITION
CHALLENGES & OPPORTUNITIES

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SCOPING REPORT FOR ROUNDTABLE DISCUSSION
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**Compact2025**, launched in November 2015, is a bold new initiative for ending hunger and undernutrition by 2025. It brings stakeholders together to set priorities, innovate and learn, fine-tune actions, build on successes, and synthesize shareable lessons to accelerate progress. A version of this document was drafted to inform the Compact2025 roundtable discussions held in Dhaka, Bangladesh, on May 5, 2016. The document has been subsequently revised and updated according to inputs from the roundtable discussions.
Preface

Compact2025, launched in November 2015, is a bold new initiative for ending hunger and undernutrition by 2025. It brings stakeholders together to set priorities, innovate and learn, fine-tune actions, build on successes, and synthesize shareable lessons in order to accelerate progress.

Eliminating hunger and undernutrition in 10 years is a huge task, but it can be accomplished. Brazil, China, Peru, Thailand, and Vietnam have each dramatically reduced hunger and undernutrition in a relatively short time. Learning from their and others’ experiences and leveraging strong commitments from the global community to end hunger and undernutrition make it possible to accelerate progress even further. Compact2025’s approaches include the following:

Engaging countries: Success in ending hunger and undernutrition depends on country-owned and country-led strategies and investments. Compact2025 begins with an initial focus on four countries—Bangladesh, Ethiopia, Malawi, and Rwanda—and will then scale up to include additional countries.

Stimulating knowledge and innovation: Compact2025 will create a Knowledge and Innovation Hub, which will have four areas of focus: Stimulating innovation, communicating research on what works, synthesizing lessons, and collecting data and monitoring progress.

Supporting existing initiatives and partnerships: Compact2025 will not compete with but rather complement and support existing global, regional, and national initiatives to accelerate progress with data, knowledge, capacity, communications expertise, innovation, and research support.

Compact2025 is designed to accelerate progress. It assists countries to refine and implement their road maps for action toward ending hunger and undernutrition by 2025. It is for this reason that Compact2025 starts the process in each focal country with a draft scoping study that serves as input for a roundtable discussion. The draft scoping study provides an overview on where the country stands, who the major stakeholders are, and where the key gaps are that hold back progress.

Accordingly, Compact2025 and partners organized a roundtable discussion in Dhaka, Bangladesh on May 5, 2016 to set the critical groundwork for assessing how to end hunger and undernutrition in Bangladesh by 2025. The roundtable identified key knowledge, policy, and implementation gaps as well as opportunities, potential synergies, and priority areas for action. This finalized scoping study includes input received during the event and serves as an outcome for the roundtable discussion.

In Bangladesh, commitment to ending hunger and undernutrition is strong among the many actors working on related issues, and it is imperative that they all work together toward the 2025 goal. Bringing together over 100 government and nongovernment stakeholders across several key sectors, the roundtable discussion is a first step for Compact2025 to support Bangladesh in accelerating progress toward ending hunger and undernutrition.
Executive Summary
Bangladesh has made significant gains in reducing hunger and undernutrition. Despite improvements in addressing their underlying causes, however, both hunger and undernutrition remain serious challenges. Undernutrition results in severe human and economic costs—for example, Bangladesh loses an estimated 2–3 percent of gross domestic product (GDP) due to productivity losses resulting from undernutrition. For Bangladesh to meet its goals and end hunger and undernutrition by 2025, progress must be accelerated.

Bangladesh’s policy environment for food security and nutrition has evolved in recent years. Under its Vision 2021, Bangladesh experienced impressive economic growth and reached lower-middle-income status. The 7th Five Year Plan provides the framework for development goals, including those related to food security and nutrition. Further sectoral and cross-sectoral plans, including the National Food Policy and its Plan of Action and the Country Investment Plan, provide goals, targets, and indicators for food security and nutrition. While food security and nutrition are priorities in Bangladesh’s policies and programs, scope exists for greater coordination among the many sectors and actors involved in formulating and implementing them.

A draft scoping report was prepared to inform the roundtable discussion by providing an overview of the food security and nutrition challenges and opportunities in Bangladesh. It reviews the current food security and nutrition policy landscape across key sectors and actors in Bangladesh as well as critical knowledge, policy, and implementation gaps. Additionally, the scoping report presents a SWOT analysis (strengths, weaknesses, opportunities, and threats) that crystallizes the main elements that drive or hamper food security and nutrition in the country. To determine what is holding back progress, this report identifies several key research and action gaps, including understanding linkages across agriculture and nutrition as well as between nutrition and social protection, and building the evidence base for impacts of key nutrition interventions.

As informed by the roundtable discussion held on May 5, 2016, this report identifies five major recommendations for accelerating progress to end hunger and undernutrition in Bangladesh:

1. Fill data and knowledge gaps
2. Make strategies, policies, and programs more nutrition-driven
3. Empower women, smallholders, and consumers
4. Fine-tune, consolidate, and operationalize policies
5. Improve coordination and engage with non-traditional partners

To help implement these recommendations and to support the acceleration of progress toward ending hunger and undernutrition in the country, Compact2025 will establish a Knowledge and Innovation Hub in Bangladesh.
Overview of Bangladesh’s food security and nutrition challenges

While hunger and undernutrition are still serious problems in Bangladesh, the country has made strong progress to reduce both. Underlying these gains have been advances in poverty reduction and consistent economic growth, as well as improvements in other important areas like parental education, health, sanitation (Headey et al. 2015).

Yet recent data on nutrition programs and outcomes point to persistent challenges that must be addressed for Bangladesh to reach its full potential and achieve national and global goals. Data captured from the 2014 National Demographic and Health survey point to this conclusion, as does the Bangladesh Integrated Household Survey (BIHS), which was designed and supervised by the International Food Policy Research Institute (IFPRI) and administered by the Data Analysis and Technical Assistance (DATA).

This section of the scoping report discusses the current poverty, food security, and nutrition situation in Bangladesh, along with past trends and progress.

Poverty

Bangladesh is a lower middle-income country with high—but declining—rates of poverty. The proportion of the population living under $1.25 a day fell from 63 percent to 44 percent between 1995 and 2010 (Figure 1).1 The majority of the population lives in rural areas where the incidence of poverty is higher compared to urban areas. Nearly 50 percent of those employed in the agriculture, forestry, and fisheries sector are below the national poverty line (Bangladesh Bureau of Statistics 2013).

Sustained economic growth was fundamental to the reduction in poverty: from 2000 to 2014, Bangladesh averaged a gross domestic product (GDP) growth rate of 5.7 percent (World Bank 2016b). GDP per capita rose steadily: from 1990 to 2013, GDP per capita rose from $848 to $3,171 (in purchasing power parity). Yet the 2013 figure is less than the average GDP per capita in South Asia in the same year ($4,807).

Figure 1 GDP per capita and poverty headcount ratio at $1.25 a day, 1990–2013

Source: IMF (2015); World Bank (2016).

The average annual share of government agricultural expenditure in total expenditure in Bangladesh was 9 percent from 2008 to 2012, third highest among all countries in that time (FAO 2013). Intensity of

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1 Using the upper national poverty line, the poverty headcount ratio was 56.8 percent in 1991/92; 50.1 percent in 1995/96; 48.9 percent in 2000; 40.0 percent in 2005; and 31.5 percent in 2010.
agriculture expenditures as a percentage of GDP is growing. From 2000 to 2011, it increased from 0.37 percent to 0.91 percent, which is nearly the 2011 average for South Asia (0.97 percent) (IFPRI 2015). Underinvestment in agricultural research and development (R&D) is pervasive—Bangladesh’s 2012 agricultural R&D intensity ratio of 0.4 percent is very low, especially in the context of rapid population growth, a shrinking natural resource base, and the adverse impacts of climate change. Yet Bangladesh averaged an agricultural growth rate of 4.4 percent from 2007–2014, up from 2 percent in the 1970s and 1980s (BBS 2011). Bangladesh’s relatively high agricultural growth rate exceeds that of South Asia, which was 3.3 percent from 2007-2014 (World Bank 2016b).

**Food security**

The country has made great strides in improving food security and reducing hunger. From 1990/92 to 2014/16, prevalence of undernourishment—fell by half, from 32.8 percent to 16.4 percent—a sign of strong, yet incomplete progress (Figure 2). The total number of undernourished people in Bangladesh has fallen as well, from 36 million to 26 million from 1990/02 to 2014/16 (FAO 2016).

![Figure 2 Undernourishment in Bangladesh](image)

**Source:** FAO, IFAD, and WFP (2015).

Food production and productivity have increased in Bangladesh. Food crop production has grown—rice production grew nearly 40 percent and vegetable production grew over 30 percent from 2000 to 2014. Yields also rose for rice (27 percent) and vegetables (63 percent). Per capita supply of rice rose slightly from 1,688 kilocalories per day to 1,711 kilocalories per day from 2005 to 2013, while per capita supply of vegetables grew by 85 percent in the same time period (FAO 2016).

Fish is of particular significance in the Bangladeshi diet and economy. Fish is the third most commonly consumed food in Bangladesh, after rice and vegetables (Roos, Islam, and Thilsted 2003). As of 2013, fish provided 51 percent of daily animal-sourced protein (FAO 2016). Roughly 20 percent of the Bangladeshi population has one or more ponds (Belton 2011) that provide fish for consumption and sale. From 2000 to 2014, fish production nearly doubled and currently contributes 4.4 percent to Bangladesh’s GDP (Azad 2014).

Bangladesh has made progress in reducing its food deficit, but as of 2015 the average undernourished person would require 116 kilocalories more per day (according to the average dietary energy

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2 Undernourishment refers to the proportion of the population whose dietary energy consumption is on average less than 1,804 kilocalories per person per day as defined by the Food and Agriculture Organization (FAO). Individual calorie intake is estimated from household food consumption data.
requirement estimated by the Food and Agriculture Organization (FAO) to be lifted out of hunger. From 2005 to 2013, per capita supply of proteins increased slightly, from 52 grams to 56 grams per day. In comparison, the per capita average for southern Asia hovered above 60 grams per day, which includes countries such as India (60 grams per day) and Pakistan (65 grams per day).

In Bangladesh, access to food remains a challenge. Although aggregate food supplies and caloric intake have increased, the large poor population is food insecure as people lack the resources to access an adequate diet (Magnani et al. 2015). As of 2012, the lowest income quintile of the population spent 62 percent of their income on food (Ahmed et al. 2013). The highest shares of expenditures on food are in the Sylhet region (64 percent) and the lowest are in the Chittagong region (56 percent). Among the various food groups, there were relative reductions in the shares of total food expenditures on oil, meat and eggs, and cereals, with gains in pulses, vegetables, and milk and milk products from 2005 to 2010 (Magnani et al. 2015).

Nutrition and diet outcomes
Bangladesh has made progress in improving nutrition outcomes, but the country still faces severe challenges, particularly among children under five years of age. About 45 percent of all child deaths in developing countries, including Bangladesh, can be attributed to undernutrition (Black et al. 2013). Child undernutrition in the form of stunting—low height for age—is associated with adverse outcomes related to slow physical and cognitive development. As a result, stunted children experience both short- and long-term consequences such as low school attainment, low productivity as an adult, and low lifetime earning potential (Hoddinott et al. 2013).

In Bangladesh, the prevalence of under-5 stunting, or low height for age, dropped steadily from 48 percent to 36 percent from 2005 to 2014 (Figure 3). Prevalence of child stunting varies by demographics: it is more prevalent in rural areas (37 percent) than urban areas (31 percent), and among the poorest quintile (49 percent) compared to the wealthiest quintile (19 percent) (WFP 2012).

Figure 3 Prevalence of under-5 stunting (%)


Bangladesh has shown mixed results regarding other indicators of undernutrition: As of 2014, 14 percent of children under five are wasted (low weight for age). Furthermore, 44 percent of women of reproductive age are affected by anemia—below the South Asia prevalence of 53 percent (WHO 2015). Additionally, as of 2013, 30 percent of Bangladeshi children under five are Vitamin A deficient. Furthermore, many of the stunted children in Bangladesh also suffer from high rates of zinc deficiency. Bangladesh does not yet face an obesity problem, as only 1.5 percent of boys and girls are obese. However, with nearly one in five adult women considered overweight or obese, a nutrition transition toward more obesity may be underway (Khan and Talukder 2013).
At the district level, child stunting is concentrated in the Sylhet (50 percent), Barisal (40 percent), and Chittagong (38 percent) divisions. The lowest prevalence of stunting is seen in the Khulna division (Figure 4). While the eastern divisions (namely Sylhet and Chittagong) face more severe child stunting challenges than their western counterparts of Khulna and Rajshahi, the scenario reverses when looking at poverty (Figure 5; WFP 2012). Although Khulna has one of the highest poverty rates, it has the lowest stunting rate among divisions in Bangladesh (WFP 2012). Clearly factors contributing to undernutrition lie beyond household income levels.

**Figure 4 Prevalence of under-5 stunting by district (%), 2010**

Figure 5 Poverty map by district (% of population poor), 2010


Research suggests women’s empowerment can play a role in explaining this mismatch. The Women’s Empowerment in Agriculture Index (WEAI) shows that the Sylhet division has the lowest level of women’s empowerment (11 percent of women are empowered) followed by Chittagong division (12 percent of women are empowered), although these two are the richest divisions (Sraboni, Quisumbing, and Ahmed 2014). IFPRI research also shows that women’s empowerment is significantly associated with diet quality and household food security (Sraboni et al. 2014).

Undernutrition has severe social and economic costs—for developing countries, as a conservative estimate, costs can amount up to 2–3 percent of GDP annually. Undernutrition costs Bangladesh more than 7,000 Crore Taka ($1 billion) due to lost productivity annually, and even more in health care costs.
Nutritional outcomes depend on several key underlying determinates, including dietary diversity and quality. Diets in Bangladesh are dominated by cereals, with little diversification. As of 2011, 19 percent of available calories were from non-staple foods. In 2013, of the 2,450 available kilocalories per day, 1,711 kilocalories/day were from rice alone (FAO 2016). Only 25 percent of children's diets have adequate dietary diversity, meaning a minimum of four food groups out of seven are consumed on a daily basis (FAO 2014). For the average rural household, about 71 percent of calories come from rice, with the poorest quintile far more dependent on rice (78 percent) than the highest quintile (63 percent) (Ahmed et al. 2013). Availability of fruits and vegetables increased from 65 to 137 grams per capita from 1991 to 2011, but this is still below the South Asia average in 2011 (348 grams per capita).

Access to improved water, sanitation, and hygiene (WASH) infrastructure is highly associated with better nutrition, especially reductions in child stunting (Spears and Haddad 2015). Access to safe drinking water and sanitation has slowly improved in Bangladesh. From 1990 to 2015, safe drinking water coverage increased from 68 percent to 87 percent. Within the same period, adequate sanitation coverage increased from 50 percent to 89 percent (WHO/UNICEF JMP 2015). The practice of open defecation has all but disappeared, and one study found that access to clean WASH facilities for rural children had a roughly 50 percent improvement in height-for-age scores compared with control children without such access (Huda et al. 2012).

Parental education—and particularly maternal education—is also associated with lower rates of child stunting (Semba et al. 2008). In Bangladesh, children of mothers with no education are much more likely to be stunted (47 percent) than children whose mothers have completed secondary and higher education (18 percent) (National Institute of Population Research and Training 2014). From 2008 to 2012, female secondary education enrollment increased from 47 percent to 57 percent in the country.

In South Asia, women’s low status and persistent gender gaps in health and education contribute to chronic child malnutrition (Smith et al. 2003) and food insecurity (von Grebmer et al. 2009), even as other determinants of food security, such as per capita incomes, improve. Addressing gender gaps is key, as women’s empowerment has been shown to improve nutrition (Malapit and Quisumbing 2015), as well as food security (Sraboni et al. 2013, 2014). Overall, Bangladesh ranked 64 out of 145 countries in the World Economic Forum Global Gender Gap Index, and the country has reduced gender gaps in education and politics.

Strategies, policies, and programs to address food security and nutrition

The Government of Bangladesh is firmly committed to ending hunger and undernutrition. As such, priority has been given to further strengthen and harmonize government efforts to ensure food security and nutrition for all. The government is doing this by revisiting all existing policies and strategies related to food security and nutrition in Bangladesh.

\[3\] Developed by the World Economic Forum, the Global Gender Gap Index ranks economies on how well they leverage their female talent pool based on economic, educational, health-based, and political indicators.
This section describes the current policies, programs, strategies, and action plans of the government and development partners to ensure food security and nutrition in Bangladesh. The National Food Policy (NFP) and its Plan of Action (POA) and the Country Investment Plan (CIP) are the major policy and planning documents for achieving food security and nutrition. Additionally, the National Agricultural Policy, the Health, Population, Nutrition Sector Development Programme (HPNSDP), the Seventh Five Year Plan, and the Post 2015 Development Agenda are other government policy and action plans that prioritize food security and nutrition along with the major specific objectives.

National development frameworks

The national development framework for Bangladesh is its Vision 2021, which sets the policy objective of transforming Bangladesh into a middle-income country by 2021 and includes goals regarding food security and nutrition (Planning Commission, Government of Bangladesh 2012). It is implemented by a Perspective Plan (2010-2021) and two Five Year Plans—6th (2011-2015) and 7th (2016-2021).

Vision 2021 aims to eliminate food deficiency and attain self-sufficiency in food production to meet the nutritional requirements of the population. Some key targets include achieving self-sufficiency in rice production, diversifying agricultural crops, forming production and marketing cooperatives, and encouraging agricultural R&D for increasing productivity. Further goals, targets, and priorities are in place for the fisheries and livestock subsectors. In the context of rural development, key strategies include establishing a powerful autonomous local government body for providing coordination among private and public rural development institutes.

In the context of improving the population’s nutritional status, Vision 2021 aims to ensure pure drinking water, improve knowledge of balanced diets and nutrition and diversify the dietary pattern of the population through diversification of agriculture. Additional goals related to education, poverty reduction, social protection, sanitation, and sustainable development are also relevant to food security and nutrition.

The 7th Five Year Plan (SFYP) builds off the previous five-year plan, which saw Bangladesh become a lower-middle-income country. SFYP centers on three themes: (1) economic growth and poverty reduction; (2) inclusion of all citizens in the development process; and (3) sustainable development that is resilient to disasters, climate change, and urbanization. The food security strategy under the Seventh Five Year Plan is in line with the National Food Policy (NFP 2006) and the National Food Policy Plan of Action (2008-2015), both of which preceded the SFYP. Twenty-six key areas of interventions were identified, with more than 300 action items, of which some were prioritized.

Bangladesh prioritizes goals with global perspectives with a view to integrating Sustainable Development Goals (SDGs) into the national development framework as well as to continue the ongoing work for completing the unfinished agenda of the Millennium Development Goals (MDGs). Bangladesh has proposed 11 goals in the post-2015 period. The third and fourth goals of the Bangladesh Post 2015 Development Agenda are aligned with SDG 2 and SDG 3 (Figure 6).

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4 To provide a coherent set of priority investment programs to improve food security and nutrition in a comprehensive and integrated manner, IFPRI conducted a CIP policy analysis. See Ahmed, A.U., N. Aberman, M. Jabbar, and N. Akhtar. 2011.
5 Bangladesh has already achieved lower-middle-income status according to the World Bank.
Sectoral and cross-cutting policies and action plans

The National Agricultural Policy’s (NAP) overall objective is to “to make the nation self-sufficient in food through increasing production of all crops, including cereals, and ensure a dependable food security system for all.” The NAP was approved in 2013 with the objectives of: sustainable and profitable agricultural production; development and dissemination of new technologies; increases in productivity; employment and income generation; competitive agriculture through commercialization; adaptation to climate change and sustainability of agricultural system; agricultural marketing to ensure better prices both for farmers and consumers; enhancement of production quality to meet export standards; opportunities for agro-processing industries; encouraging production of diversified nutritious crops; and empowering women, encouraging their participation in production and marketing for income generation, and ensuring their nutritional status for improving food and nutrition security.

Under the Ministry of Health, the Strategic Plan for Health, Population, Nutrition Sector Development Programme (2011-2016) sets Bangladesh’s policy intentions regarding nutrition and food safety and aims to “ensure quality and equitable health care for all citizens by improving access to and utilization of health, population and nutrition services and the development objective is to improve both access and utilization of such services, particularly for the poor.” Key strategies to improve nutrition include: (1) mainstreaming nutrition services, (2) micronutrient supplementation, (3) treatment of severe acute malnutrition, (4) behavior change communication to promote good nutritional practices, (5) coordination of activities across different sectors, and (6) mainstreaming gender into nutrition programming. The Bureau of Health Education and the Consumer Association of Bangladesh will be partners in this program. Priority food safety interventions include:

- Raising awareness of relevant stakeholders on food safety and hygienic practices, including hand washing.
- Developing a food safety policy along with the action plan for implementation.
- Establishing a central food testing laboratory and strengthening the capacity of scientists and technicians.

In compliance with the Bangladesh Food Safety Act, the Food Safety Authority enforces regulations and procedures for safety standards. The Food Safety Authority helps to coordinate activities of the various agencies and organizations engaged in controlling food safety, and consists of representatives from nine
ministries and divisions, and will include representatives from municipalities.

The National Nutrition Policy, introduced in 2015, is designed to improve nutrition among the poor, especially mothers, children, adolescent girls, and vulnerable sectors of society. It is also designed to promote national development through healthier diets and improved living standards (Badiane et al. 2016).

To provide food security actors in Bangladesh with a strategic orientation in food security planning, Bangladesh designed and approved the National Food Policy (2006) and National Food Policy Plan of Action (2008-2015). The National Food Policy was formulated by the Ministry of Food and Disaster Management (MoFDM)/Food Planning and Monitoring Unit (FPMU). The NFP’s overarching goal is “to ensure dependable food security for all people of the country at all times,” as embedded in its three core objectives:

- NFP Objective 1: Adequate and stable supply of safe and nutritious food
- NFP Objective 2: Increased purchasing power and access to food of the people
- NFP Objective 3: Adequate nutrition for all individuals, especially women and children

Table 1 in the Annex describes areas of interventions under each NFP objective.

The Plan of Action (PoA) identifies relevant actors and suggests a set of policy targets and indicators to monitor progress in the implementation of the National Food Policy. In line with the National Food Policy (2006), the Plan of Action (PoA) was prepared by four Thematic Research Teams (food availability; physical and social access to food; economic access to food; nutrition/utilization of food), involving officials of 11 line ministries/agencies, under the leadership of the Food Planning and Monitoring Unit (FPMU) of Ministry of Food and Disaster Management (MoFDM) and overall guidance of the Food Policy Working Group (FPWG).

The National Food Policy Capacity Strengthening Program (NFPCSP), implemented by FAO, has been assisting the Food Planning and Monitoring Unit (FPMU)/Thematic Research Teams with preparation of the Plan of Action, including provision of methodological support to the policy review work and drafting of the Plan of Action document, as well as facilitation of related Food Planning and Monitoring Unit/Thematic Research Team meetings, technical seminars, and workshops.

The Bangladesh Country Investment Plan for Agriculture, Food Security and Nutrition (CIP) provides a strategic and coherent set of 12 priority investment programs to improve food and nutrition security in Bangladesh. It is in line with the 6th Five Year Plan, and is the investment arm of the National Food Policy. It is meant to coordinate resources and investments as well as monitor and evaluate those investments. Its overall goal is in line with the National Food Policy, and uses three proxy indicators to determine success: (1) prevalence of undernourished people, (2) prevalence of stunting, and (3) prevalence of underweight children under five years of age.

The CIP addresses the three dimensions of food security—availability, access, and nutrition—in an integrated way. It aims at linking these three dimensions, in particular by shaping food availability proposals (mostly related to agriculture) so that they enhance access and improve nutrition of the most food insecure and malnourished. The CIP focuses on those investments having a direct impact on food availability, access, and utilization, leaving out broader items for which other mechanisms are more adequate. Public goods financed by the CIP aim to: (1) directly increase production of, access to, and
balanced utilization of nutritious food; (2) enable increased investment by smallholder producers; (3)
encourage/leverage private investment through the promotion of public-private partnerships. The areas
of intervention under each objective of CIP and responsible parties are listed in Table 2 of the Annex.

A description of the roles of different government sectors in improving nutrition is provided in Table 3 of
the Annex, while a matrix of policies, programs, strategies, and actions for food security and nutrition in
Bangladesh is provided in Table 4.

Looking forward: upcoming food security and nutrition plans
The Food Planning and Monitoring Unit under the Ministry of Food drafted a new food policy that has
yet to be approved by the Government of Bangladesh. In light of the new draft National Food Policy, the
Ministry is preparing a new Plan of Action (PoA) and CIP, expected to be completed by the end of 2016.
The exercise is funded by the United States Agency for International Development (USAID) and the
European Union under a program called Managing Undernutrition Challenges (MUCH), while the
Technical Assistance is being provided by FAO.

Stakeholder mapping
The mandate for development in Bangladesh, including ensuring food security and nutrition, comes
from the Prime Minister’s Office. A number of line ministries are involved with nutrition, with the
Ministry of Women and Children Affairs, Ministry of Health and Family Welfare, Ministry of Agriculture,
and Ministry of Food playing key roles. Governance of food security and nutrition also involves non-
governmental bodies through various working groups (Figure 7).

Under the Ministry of Food, the National Food Planning and Monitoring Committee (NFPMC) provides
overall leadership and oversight in the formulation and implementation of food security and nutrition
policies. The Committee is headed by the Minister of Food as its chairperson and includes five Ministers
(Ministers of Finance, Commerce, Agriculture, Local Government, Rural Development and Cooperatives,
and Disaster Management and Relief) along with Secretaries from nine ministries, including the Ministry
of Health and Family Welfare. The Director General of Food Planning and Monitoring Unit (FPMU) under
the Ministry of Food serves as the Member-Secretary of the National Food Planning and Monitoring
Committee. The Committee (NFPMC) is expected to: (1) monitor the overall food security situation on a
continuous basis; and (2) advise the government to take appropriate decisions for action based on food
production, stock, and demand information and issues related to all other aspects of the food situation,
including overall food management.

The three coordination mechanisms between the Government of Bangladesh and development partners
are: The Local Consultative Group (LCG) Plenary, the Aid Effectiveness Unit (AEU) in the Economic
Relations Division (ERD) of the Ministry of Finance, and the LCG Working Groups. In addition,
development partners coordinate amongst themselves through two mechanisms—the Local
Consultative Group Development Partners Planning Committee and seven-member Local Consultative
Group Executive Committee (EXCOM). The LCG is composed of the Secretary, Economic Relations
Division, and 49 Bangladesh-based representatives of bilateral and multilateral development partners,
including five international financial institutions, 13 UN agencies with representational officers in
Bangladesh, and the UN Resident Coordinator.
Figure 7 Architecture of nutrition governance in Bangladesh

Source: Adapted slightly based on Rashid and Manandhar (2013).
Tables 5A and 5B in the Annex describe major programs and policies of development partners and other stakeholders regarding food security and nutrition in Bangladesh.

Local Consultative Group (LCG) Working Groups are designed to contribute towards effective and coordinated implementation of national plans, strategies, and programs. To facilitate in-depth dialogue and collaboration on specific sectors and thematic areas, 18 LCG Working Groups are in operation. The World Health Organization (WHO) is the chair of the Health, Nutrition, and Population LCG Working Group while FAO chairs the Agriculture, Food Security, and Rural Development LCG Working Group. The two Committees are co-chaired by Government of Bangladesh representatives from the Ministry of Health and Social Welfare and the Ministry of Agriculture, respectively.

Research institutes are also key stakeholders that conduct research, provide policy support, and strengthen stakeholders’ capacity. Over the past three decades, the International Food Policy Research Institute (IFPRI) has had a strong presence in Bangladesh, generating evidence-based research results on critical issues influencing food security and nutrition. Since October 2010, IFPRI has scaled up its support in Bangladesh with the Policy Research and Strategy Support Program for Food Security and Agricultural Development (PRSSP), funded by USAID. The program fills the need for demand-driven food and agricultural policy research in response to CIP. Its main objectives are to enhance the efficiency of food production and marketing, accelerate income growth of the poor, and improve nutrition for vulnerable groups.

Agricultural productivity and growth largely depend on the ability of policymakers to make timely and informed decisions. To generate high-quality empirical evidence on a consistent basis needed to achieve this, USAID supported the establishment and operation of the Agricultural Policy Support Unit (APSU) within the Ministry of Agriculture through IFPRI-PRSSP. Launched in 2012 and with technical assistance from IFPRI, APSU provides policy recommendations in response to short-term challenges, carries out in-depth analysis to be used as a basis for generating policy options that will address medium- and long-term challenges, and evaluates policy impacts.

Knowledge and action gaps
Despite the existing wide range of policy tools, strategies, programs and interventions for addressing food insecurity and undernutrition in Bangladesh, knowledge as well as action gaps and challenges to ending hunger and undernutrition in the country still remain. This section describes the potential knowledge gaps and emerging challenges and opportunities in the area of research, policy, and program implementation. Potential synergies and priority areas for research, policy, and investment in food security and nutrition are highlighted here.

Nutrition challenges in Bangladesh tend to be addressed through determinates such as dietary intake, feeding practices, and health status. The broader determinates, such as agriculture and other non-food environments, are relatively neglected, however (BRAC-LANSA 2015).

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6 They are: Agriculture, Food Security and Rural Development; Water Management; Water Supply and Sanitation; Education; Health, Nutrition and Population; Energy; Transport and Communication; Urban; Poverty; Gender; Governance; Aid Effectiveness; ICT-Digital Bangladesh; Macroeconomic; and Disaster and Relief Fund. There is also one region-specific Working Group for addressing development issues in the Chittagong Hill Tracts.
Knowledge gaps
The main knowledge gaps identified in this study are around how to accelerate progress in nutrition, building a resilient agriculture and food system, maximizing synergies across sectors, and improving governance and capacity.

Accelerating progress in nutrition
While there is still work to be done, Bangladesh has experienced impressive reductions in undernutrition. To sustain and even accelerate progress, more research is needed, particularly around the following questions:

- How can Bangladesh sustain its impressive progress in reducing child stunting (that is, a 3 percent drop between 2013 and 2014)?
- Why are areas of highest poverty experiencing a lower incidence of child stunting, and vice versa?
- What are the key food-based and non-food-based nutrition-driven interventions needed to make the biggest impacts on reducing undernutrition?
- What are the most cost-effective, nutrition-specific interventions that can make big impacts? For example, is fortification, biofortification, or nutrition supplementation more effective?
- Behavior change communication (BCC) has been shown to be effective in enhancing impacts of nutrition interventions, but it is costly. How can the cost be reduced when BCC is scaled up?

Building productive and resilient agriculture and food systems
As exhibited by the experiences in China and Vietnam, agriculture has the potential to promote economic growth and alleviate poverty more than other sectors (Fan, Hazell, and Thorat 1999; Fan, Olofinbiyi, and Gemessa 2015). Improving agricultural yields and farmer incomes can improve food availability and access throughout the country. Yet Bangladesh’s agriculture sector is vulnerable to climate change and extreme weather events. It will be critical to build a more resilient agriculture and food system with long-term strategies (for example, inclusive growth, climate resilience, well-functioning markets, and trade and reserve systems).

Regarding building resilient agriculture and food systems for better nutrition, some knowledge gaps are:

- What policy and institutional supports are needed to generate new yield-enhancing technologies adapted to local contexts, keeping in mind food safety?
- How can Bangladesh adapt and mitigate the impacts of climate change, which threatens agricultural growth and productivity—particularly through adverse impacts on boro rice production?
- What policy and institutional changes are required to improve technology dissemination through revamps of the existing agricultural extension system?
- What are the physical and socioeconomic constraints for maximizing agricultural growth across regions? (A granular regional disaggregated analysis is required for this research.)
- How can farm mechanization be further promoted, along with complementary services of repair and maintenance of farm machinery?

Agriculture-nutrition linkages
Knowledge gaps lead to missed opportunities due to a lack of understanding the agriculture-nutrition pathways in Bangladesh. As agriculture is a key source of livelihoods for a large portion of the population
and also provides food for rural households, it has a unique role to play in addressing Bangladesh’s nutrition challenges. For example, recent studies suggest that agricultural diversification leads to dietary diversity of children, women, and other household members (Carletto et al. 2015).

Two new projects on the agriculture-nutrition linkages have been initiated in Bangladesh. The Agriculture Nutrition and Gender Linkages (ANGeL) project is jointly funded by the government of Bangladesh and USAID under IFPRI’s Policy Research and Strategy Support Program (PRSSP). The project is implemented by the Bangladesh Ministry of Agriculture through its Agricultural Policy Support Unit (APSU) in collaboration with HKI. The second project, Targeting and Realigning Agriculture for Improved Nutrition (TRAIN), is funded by BMGF and DFID and implemented by BRAC. The objective of both projects is to address evidence gaps on the effects of agricultural interventions on maternal and child nutrition. In particular, randomized controlled trials (RCTs) will be used to assess the impact of incorporating a maternal and child health and nutrition BCC platform in agricultural interventions to promote production diversity and income generation. This research also has a significant gender component, explicitly recognizing the importance of gender along the agriculture-nutrition impact pathways and of women’s empowerment as key to reaching those outcomes. Both of these projects were launched in 2015 and will complete their baseline surveys in 2016.

Key research gaps on agriculture-nutrition pathways include:

- Understanding how farming households use their agricultural income (for example, on nutrition/nutrition-related investments).
- Identifying opportunities to strongly link the agriculture and food system to nutrition.
- Examining ways in which the status of women in agriculture affects households’ expenditures on food, health, and education, internal allocation of resources, childcare feeding practices, and women’s own health.
- Using dietary diversity and women’s empowerment as outcomes.

Nutrition, health, and social protection

There is strong research-based evidence that integrating nutrition into social safety nets in Bangladesh can significantly improve child feeding practices, reduce child stunting, and improve household dietary diversity (Ahmed et al. 2016). More research is needed on the combination of modalities for effectively improving child nutritional status. Also needed is a greater understanding of the complex relationships between impacts of social protection and safety net programs on food security and women’s empowerment, and on finding synergies between the nutrition and health communities. Against this background, several specific research areas are suggested:

- How can social protection address short and long term shocks and stresses associated with climate change, while boosting productivity and nutrition?
- What are the incidence and significance of local economy effects of social transfers in rural areas?
- How can health communities most effectively incorporate nutrition education when delivering health services to their patients?

Governance and capacity

There is very little research to indicate the nature or severity of the consequences of poor governance on agricultural and rural development in Bangladesh. Various types of misgovernance could negatively
impact agricultural production and economic welfare. IFPRI research shows that misappropriation or leakage in the public food distribution system could lead to considerable losses of resources (Ahmed et al. 2004). Such losses may appear to be less significant than those imposed by inappropriate economic policies of earlier years, such as government monopoly over the supply of modern agricultural inputs and the food rationing system, the latter was abolished in the early 1990s (Ahmed 1992).

Further, understanding about nutrition and agriculture-nutrition linkages could be improved among individual stakeholders from village to state level (community-level workers, farmers, NGO workers, and civil servants) (Gillespie et al. 2015). As mentioned, the ANGeL initiative provides an opportunity to fill these gaps. Research capacity is also deteriorating due to a “brain drain” and the consequent employment of underqualified personnel.

Policy gaps and opportunities
The historical tendency has been to focus on staple crop production in Bangladesh. As identified in Leveraging Agriculture for Nutrition in South Asia (LANSA) stakeholder consultations, a common perception of nutrition is that as agriculture provides food and income, it is sufficient for good nutrition. Few respondents mentioned other pathways through which agriculture can impact nutrition (for example, through women’s empowerment and/or control of resources) (Gillespie et al. 2015). While the government and several other organizations are making efforts to recognize the importance of dietary diversification and nutrition-driven approaches, formalizing this broader approach in upcoming strategies, plans, and policies can help fill this policy gap.

Biofortification has strong potential to improve nutrition in Bangladesh. IFPRI’s HarvestPlus works with the Bangladesh Rice Research Institute (BRRI) and the International Rice Research Institute (IRRI) to develop high-zinc rice. This variety provides up to 60 percent of daily zinc needs and it is high yielding and disease and pest resistant. To date, three zinc rice varieties have been released, two of which are already available to farmers to plant during either the Aman or Boro seasons. The third variety is being disseminated this year. Policy support for the goal of reaching 1.4 million Bangladeshi farming households with zinc rice by 2018 will be crucial (HarvestPlus 2015).

Additionally, although Bangladesh has witnessed improvements in nutrition- and health-related measures over the past decade, there is still a need to:

- Develop a detailed costing and implementation plan for a priority package of key nutrition-specific interventions at the country level. Prevention should be a central aspect of the package of interventions, with curative interventions integrated.
- Promote the development of further evidence on those interventions and strategies that, thought plausibly effective, might currently be controversial (such as micronutrient powders, strategies for addressing acute malnutrition, etc.).
- Recognize and address the role of factors such as social protection, food security, women’s empowerment, and agricultural and price policies, as not doing so can compromise efforts driven solely by direct interventions.
- Develop a national monitoring and evaluation system to ensure that evidence on programs, policies, and problems is used to recalibrate and adjust policies and program priorities.
- Develop and agree upon a framework for coordinating the work of all partners and identify one national coordinating authority with a broad multisectoral mandate that is empowered to take on stewardship of the nutrition movement. Finding and sustaining strategic partnerships for ensuring coordination of multiple activities is key to success.
- Empower women, girls, and boys through continued support for the secondary school stipend program and through focused health, nutrition, and empowerment programs.

- Improve women’s nutrition and health through interventions (for example, access to adequate and diverse diets in the home, increased access to and use of iron-folate supplements and to antenatal care) and through innovative approaches to shift social norms related to gender norms that are detrimental to women’s health.

- Address poor hygiene by scaling up access to hygienic latrines and to improved sources of water in rural and urban areas, and raise widespread awareness of appropriate hygiene and stool disposal practices to reduce contamination.

- Ensure appropriate and adequate treatment for severe acute undernutrition by scaling up best practices within the current health system.

Implementation gaps and opportunities
In Bangladesh, while collaboration between sectors is improving, especially at the policy level, coordination is still largely absent (Gillespie et al. 2015). Bangladesh should revitalize its intersectoral mechanisms for reducing malnutrition. Undernutrition is caused by a powerful and broad set of forces, and a strong alliance of actors from different sectors is needed to overcome it—everyone has a role to play. While mechanisms are in place to engage, at the moment it is not clear how strong these cross-sectoral alliances really are. Influence and pressure from the media and civil society seem to have positively influenced accountability mechanisms in Bangladesh (Gillespie et al. 2015).

Additionally, the coverage of nutrition-relevant programs must increase. The 2014 National Demographic and Health Survey shows that only 23 percent of infants are fed appropriately; the percent of babies under six months of age that are being exclusively breastfed is declining; 38 percent of children under five did not receive a Vitamin A supplement in the last six months; and less than half of all children with diarrhea received zinc supplements. These programs and practices should aim for 90 percent coverage or full coverage.

SWOT analysis
Bangladesh has strengths, weaknesses, opportunities, and threats (SWOT) to achieving the goal of ending hunger and undernutrition by 2025. This SWOT analysis includes Bangladesh’s internal strengths and weaknesses relevant to achieving this goal, as well as the external or global opportunities that may be helpful, and threats that may impede progress (Figure 8).
**Figure 8 SWOT analysis of Bangladesh’s ability to end hunger and undernutrition by 2025**

<table>
<thead>
<tr>
<th>Strengths</th>
<th>Weaknesses</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Strong and sustained economic growth</td>
<td>• Unfavorable land tenure arrangements</td>
</tr>
<tr>
<td>• Government commitment to evidence-based policy making</td>
<td>• Low levels of women's empowerment</td>
</tr>
<tr>
<td>• Highly suitable for investment, e.g. in biofortification interventions</td>
<td>• Weak access to improved WASH</td>
</tr>
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<table>
<thead>
<tr>
<th>Opportunities</th>
<th>Threats</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Momentum from MDGs/SDGs and commitment from development partners</td>
<td>• Natural disasters and climate change</td>
</tr>
<tr>
<td>• Strong set of NGOs</td>
<td>• Population growth/changing demographics</td>
</tr>
<tr>
<td>• Huge potential for rural nonfarm sector</td>
<td>• Rising land constraints</td>
</tr>
</tbody>
</table>

**Strengths**

Bangladesh’s economy is growing steadily at about 6 percent a year, which is helpful for reducing hunger and undernutrition—people can afford to buy better food, and the government has more resources via taxes to provide better services. In terms of policy making, the Government of Bangladesh is open to using evidence to inform and evaluate its programs and policies—a strength that is evidenced by Bangladesh’s strong nutrition data collection.

Bangladesh’s medium-/long-term national development policy (Perspective Plan of Bangladesh 2010-2021: Making Vision 2021 a Reality) prioritizes nutrition. While more must be done to ensure that policies and programs are nutrition-driven, important steps have been taken. The government has instituted a separate budget line for nutrition, which enables transparency and accountability for spending. Policy makers in Bangladesh benefit from regular nutrition surveys that are representative at the national level. Additionally, Bangladesh’s constitutional protection of the right to social security is promising. Another important strength of Bangladesh is the resilience of its people to natural and man-made disasters.

**Weaknesses**

Unfavorable land tenure arrangements is a challenge in Bangladesh. In rural Bangladesh, 57 percent of households do not own any cultivable land (Ahmed et al 2013). Land rights are insecure in large measure due to a land titling and registration system beset by inefficiencies and prone to corruption. Further, while Bangladesh has reduced or eliminated the gender gap in politics, discriminatory practices against women continue, and such practices increase vulnerability to hunger and undernutrition of women and their families.

Additionally, though it has improved in recent years, access to improved sanitation facilities is low, at 61 percent (WHO/UNICEF/JMP 2015). Coverage of nutrition interventions is insufficient, as revealed in the
2014 National Demographic and Health Survey. Bangladesh has a relatively weak enabling environment for the private sector. According to the *Ease of Doing Business* rankings, Bangladesh is ranked 174 of 189 economies, with particular challenges to businesses in “Getting electricity” and “Enforcing contracts” (World Bank 2016a).

**Opportunities**

Bangladesh has a strong set of NGOs that provide services in conjunction with the government and can also promote accountability of the government and development partners. Mobilizing them to focus on nutrition would be a great opportunity to accelerate progress toward ending hunger and undernutrition. Bangladesh also has strong and committed development partners. With their financial and technical support, accelerated declines in undernutrition are possible.

There is great potential for growth within the rural nonfarm sector and its drivers such as farm mechanization. IFPRI research in Bangladesh shows strong effects of nonfarm income on poverty reduction as well farm income and dietary diversity. Additional sectors that have strong potential for both poverty, hunger, and undernutrition reduction include aquaculture, livestock and poultry, and food crop value chains.

**Threats**

As identified in the Perspective Plan of Bangladesh, the country faces persistent challenges in achieving food security including: “(a) natural disasters and consequent crop losses; (b) fluctuations in food prices caused by volatility in the international markets; and (c) failure to steady maintenance of domestic stocks…” It should be noted that there are arguments for and against maintaining steady domestic food grain stocks. IFPRI research shows that the benefits of price stabilization through maintenance of large public food grain stocks in Bangladesh are small (Goletti 2000).

Climate change is also a current and emerging threat. Future threats to Bangladesh’s food security and nutrition include urbanization, the prevalence of overweight and obesity, and rising land constraints amidst a growing population.

**Five major recommendations**

Recommendations resulting from the Bangladesh roundtable discussion to address challenges, fill gaps, and exploit opportunities to accelerate progress, include:

1. **Make strategies, policies, and programs more nutrition-driven**

Strategies, policies and programs across sectors should be more nutrition-driven, and food security and nutrition should be placed in a broader policy context. For example, instead of directing agricultural strategies toward self-sufficiency goals, the focus should be on food security and nutrition outcomes. Agricultural investments are still targeted toward conventional staple crops. While this was appropriate in the past, increased investments in more nutritious foods are needed today. Through policy changes, incentives should be improved for farmers to increase productivity and agricultural production diversity. Nutrition-driven agricultural interventions such as biofortification should be scaled up.

Social protection policies and programs should also become more nutrition-driven: For example, programs can focus on delivering more nutritious foods, and policies can target nutrition as a
measurable outcome. Further, social protection should integrate interventions that boost agricultural productivity—drawing from Ethiopia’s Productive Safety Net Programme, for example—and amplify impacts on nutritional outcomes using BCC. Other sectoral programs such as school feeding programs can also become more nutrition-driven by delivering more high-nutrient foods, thereby contributing to health and nutrition outcomes while creating more demand for such foods.

2. Empower women, smallholders, and consumers
Women empowerment is a key pathway to improving nutrition, and more must be done to address social constraints that trap girls and women in cycles of hunger, undernutrition, and disempowerment. The case of Syllhet, where the lack of women empowerment appears to explain the high rates of child stunting, reinforces the need to empower women and girls. Interventions should target girls and adolescents with a focus on improving their nutrition, access to health services, and educational status. School feeding programs should extend to secondary schools to encourage families to keep adolescent girls (and boys) in school. Doing so can help delay early marriage while continuing education, as well as provide nutritious foods. Social change should be promoted to address child and adolescent marriage and its underlying causes (e.g. the dowry system). Gender-friendly work climates should also be promoted, and women should be further integrated into the labor market.

Small farmers must be supported through better land tenure systems that allow for ownership and leasing of land. Consumers should be made aware of the importance of nutrition, gender equality, and water, sanitation, and hygiene. Furthermore, food safety should be improved with support for smallholders to upgrade and comply with quality standards, and education for consumers in food preparation.

3. Fine-tune, consolidate, and operationalize policies
There are many promising strategies, policies, and plans in Bangladesh that can help to accelerate progress. The new National Social Security Strategy, Food and Nutrition Security Policy, and Country Investment Plan have been drafted and approved. However, these plans must be operationalized with fast and effective implementation, guided by action plans. These action plans should integrate better use of technology to improve service and information delivery while reducing leakage.

Further, many policies should be fine-tuned or consolidated. Subsidies on water, land, energy, and fertilizers that support the production of conventional staple crops should be re-directed toward more nutritious crops. Policies should be better targeted by focusing on areas and groups suffering most severely from hunger and undernutrition. For example, there is a need for policies that target vulnerable people living in urban areas. Additionally, good existing policies should be consolidated: There is a plethora of safety net programs in Bangladesh, but just 10 of them account for more than 90 percent of total expenditures, thus spreading resources too thin for the remaining programs.

4. Improve coordination and engage with non-traditional partners
No one sector or organization in Bangladesh can end hunger and undernutrition alone: Coordination is key to complement each other’s efforts while avoiding duplication. The Country Investment Plan, a rallying point for active participation from multiple stakeholders, is a good start. However, even more coordination is needed. The Local Consultative Groups (LCGs) facilitate coordination between development partners and government, but convening of the LCGs for agricultural and rural
development are becoming less frequent. The LCG meetings should be revived and frequency of meetings should be increased.

Further, more engagement is needed with non-traditional partners. The private sector has a key role to play in advancing food security and nutrition, and there is need to improve the enabling environment for private enterprises to thrive. For example, inclusive food value chains should be developed with improved rural-urban market linkages. Agricultural mechanization should be further expanded. Farmer associations should also be strengthened.

5. Fill data and knowledge gaps

There are several data gaps that must be filled in order to generate evidence to inform strategies, policies, and programs. While, for example, some sex-disaggregated data is available in Bangladesh through IFPRI’s nationally representative surveys, even more is needed, as is more data on dietary diversity. The institutional capacity of the national statistical system, the Bangladesh Bureau of Statistics (BBS) of the Ministry of Planning, needs to be strengthened to collect the needed data at regular frequencies and publish the data in a timely manner. Further, a better understanding of where undernutrition exists—for example, in certain regions or in urban slums—as well as more data on its underlying determinants can indicate the nature and severity of undernutrition in different contexts.

More research is needed to improve the effectiveness and efficiency of policies and programs. For example, while research shows that combining cash transfers with behavior change communication (BCC) interventions can have big impacts, the program is very expensive. More work is needed on how to improve such programs’ cost-efficiency while retaining their benefits. Further, more research is needed to understand and overcome the social and political barriers to accelerated progress. For example, greater transparency and understanding of the political economy landscape in the country can help improve accountability of elected officials for nutrition outcomes.

Filling data and knowledge gaps requires sustained investments in R&D and upgraded knowledge management and information-sharing systems. More investment is also needed to further develop rice varieties for sustainable intensification without high capital requirements. There is also a need for better systems to share data, knowledge, and lessons learned both among and between stakeholders and sectors. One example could be creating a database of research findings to inform policy formulation and programming. Monitoring and evaluation systems that have feedback mechanisms to inform programs at all levels should be improved.

Conclusion

Bangladesh has made good progress in reducing poverty, hunger, and undernutrition in recent decades. National commitments buttressed by support from numerous partners and stakeholders who work at national and subnational levels throughout the country help advance food security and nutrition. For Bangladesh to meet its goals to eliminate hunger and undernutrition by 2025, however, progress must be accelerated.

There are many opportunities to fill gaps in policy, implementation, and research in order to accelerate progress. Across all sectors, strategies, policies, and programs can be fine-tuned and made more nutrition-driven. Operationalizing newly revamped policies, including the Country Investment Plan and Food and Nutrition Security Policy, will be key to translate plans into action. Coordination across sectors...
and stakeholders can help to accelerate progress by leveraging synergies and reducing duplication of efforts. In particular, the private sector should be engaged in order to play a bigger role in developing inclusive value chains that deliver on nutritional and health outcomes.

Collecting more sex-disaggregated data along with data on urban undernutrition can help to generate evidence to inform strategies, policies, and programs. More research is needed on improving the cost-efficiency of effective interventions, such as bundling cash transfers with behavior change communication. Providing mechanisms for tracking and monitoring will be critical for learning, correcting, and improving programs and interventions and for effective scale-up of successes. Stimulating innovations for new solutions in policy, technology, and implementation and sharing knowledge on what works and can help fill these gaps within Bangladesh and beyond.

Responding to the needs identified at the roundtable discussion, Compact2025 aims to set up a Knowledge and Innovation Hub in Bangladesh, ideally within the Prime Minister’s Office in partnership with relevant ministries and stakeholders. The hub will work to support country goals, processes, and programs with demand-driven research and innovation for the purpose of accelerating progress. It will help to collect data, strengthen capacities, and enhance tracking and monitoring systems. With a focus on South-South learning, the hub will synthesize lessons and compile, share, and communicate information and best practices within Bangladesh and beyond. It will also leverage existing networks, including the Regional Strategic Analysis and Knowledge Support System (ReSAKSS) in Asia. Outputs of the hub will include a freely accessible website, which will be set up so that it can be used by farmers and individuals in local communities through their mobile phones. A follow-up roundtable will be held in 2017 to reconvene stakeholders, evaluate progress, identify action gaps, and fine-tune next steps toward ending hunger and undernutrition by 2025 in Bangladesh.
References


Rashid, I., and M. Manandhar. 2013. Facilitating Multisectoral Coordination for Nutrition. UN REACH.


## Table 1 National Food Policy (NFP) objectives and areas of intervention

<p>| Areas of Intervention |<br />
|-----------------------|-----------------------|
| <strong>NFP Objective 1:</strong> Adequate and stable supply of safe and nutritious food | <strong>NFP Objective 2:</strong> Increased purchasing power and access to food of the people | <strong>NFP Objective 3:</strong> Adequate nutrition for all individuals, especially women and children |
| 1.1. Agricultural research and extension | 2.1. Agricultural disaster management | 3.1. Long-term planning for balanced food |
| 1.2. Use and management of water resources | 2.2. Emergency food for public stocks | 3.2. Balanced and nutritious food for vulnerable people |
| 1.3. Supply and sustainable use of agricultural inputs | 2.3. Enabling environment for private food trade and stock | 3.3. Nutrition education on dietary diversification |
| 1.4. Agricultural diversification | 2.4. Effectiveness of targeted food security programs and other safety nets | 3.4. Food supplementation and fortification |
| 1.5. Agricultural credit and insurance | 2.5. Income generation for women and the disabled | 3.5. Safe drinking water and improved sanitation |
| 1.6. Physical market infrastructure | 2.6. Agro-based/Agro-processing/Medium and small enterprise (MSME) development | 3.6. Safe, quality food supply |
| 1.7. Agricultural marketing and trade | 2.7. Market-driven education, skills, and human development | 3.7. Women and children’s health |
| 1.8. Policy/regulatory environment | | 3.8. Promotion and protection of breastfeeding and complementary feeding |
| 1.9. Early warning system development | | |
| 1.10. Producer price support | | |
| 1.11. Public stock management/price stabilization | | |</p>
<table>
<thead>
<tr>
<th>Programme Title</th>
<th>Main Institutions Involved</th>
</tr>
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<tbody>
<tr>
<td><strong>Food Availability</strong></td>
<td>1. Sustainable and Diversified Agriculture through Integrated Research and Extension National Agricultural Research System, Universities, Private Sector, Department of Agricultural Extension, Department of Livestock Services, Department of Fisheries, Food Division, Local Government Engineering Division, Agriculture Sector Programme Support, Mass Media, Disaster Management Bureau, Directorate of Relief and Rehabilitation, Department of Environment, Bangladesh Agricultural Development Corporation, Center for Environmental and Geographic Information Services, Institute of Water Modelling, Barind Multipurpose Development Authority</td>
</tr>
<tr>
<td>2. Improved Water Management and Infrastructure for Irrigation Purposes</td>
<td>Bangladesh Agricultural Development Corporation, Department of Agricultural Extension, Bangladesh Water Development Board, Local Government Engineering Division, Barind Multipurpose Development Authority</td>
</tr>
<tr>
<td>3. Improved Quality of Input and Soil Fertility</td>
<td>Bangladesh Agricultural Development Corporation, Bangladesh Chemical Industries Corporation, Seed Certification Agency, Department of Agricultural Extension, Department of Livestock Services, Department of Fisheries and Private Sector</td>
</tr>
<tr>
<td>4. Fisheries &amp; Aquaculture Development</td>
<td>Department of Fisheries, Bangladesh Fisheries Development Corporation, BFRI, Universities and Private Sector, Ministry of Local Government, Rural Development and Cooperatives</td>
</tr>
<tr>
<td>5. Livestock Development, with Focus on Poultry and Dairy Production</td>
<td>Department of Livestock Services, Bangladesh Livestock Research Institute, Universities, and Private Sector</td>
</tr>
<tr>
<td><strong>Food Access</strong></td>
<td>6. Improved Access to Markets, Value-addition in Agriculture, and to Non-farm Incomes Department of Agricultural Marketing, Department of Agricultural Extension, Department of Livestock Services, Department of Fisheries, AIS, BFDC, BSTI and Private Sector</td>
</tr>
<tr>
<td>7. Strengthened Capacities for Implementation and Monitoring of NFP and CIP Actions</td>
<td>Food Planning and Monitoring Unit, Food Division National Agricultural Research System Institutes, and Universities</td>
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<tr>
<td>8. Enhanced Public Food Management Systems</td>
<td>Food Directorate, Bangladesh Agricultural Research Council</td>
</tr>
<tr>
<td>9. Institutional Development and Capacity Development for More Effective Safety Nets</td>
<td>Disaster Management and Relief Division, Dept. of Women Affairs, Disaster Management Bureau, MSW</td>
</tr>
<tr>
<td><strong>Food Utilization</strong></td>
<td>10. Community-based nutrition programmes and services Directorate General of Health Services, Department of Agricultural Extension, Department of Fisheries, Department of Livestock Services, Bangladesh Agricultural Research Institute, BINA, Universities, BANHRDB, BNNC</td>
</tr>
<tr>
<td>11. Orient Food and Nutrition Program through Data</td>
<td>Food Division, Bangladesh Bureau of Statistics, Department of Agricultural Extension, Department of Livestock Services, Department of Fisheries, DGHS, BANHRDB, BARC, Bangladesh Agricultural Research Institute, BRRI, BNNC, INFS, BAU</td>
</tr>
<tr>
<td>12. Food Safety and Quality Improvement</td>
<td>Food Division, BSTI, DGHS, Private Sector, BCSIR, AEC</td>
</tr>
<tr>
<td>Domain</td>
<td>Role and Activity Toward Scaling Up Nutrition</td>
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</table>
| Education                      | • Incorporate nutrition and hygiene education in curriculum, including school vegetable garden and cooking demonstrations  
• Ensure regular “Health and Nutrition Days” in the school calendar  
• Ensure completion for girls education at least up to high school  
• Promote and protect good dietary practices among children in places where there are school feeding programs  
• Improve sanitation facilities in schools  | Education, Health and Family Welfare, Information                                                                                                                                                                                                                                                                                                                             |
| Water and Sanitation           | • Contribute to increased levels of handwashing and hygiene  
• Ensure availability of safe drinking water  
• Improve availability of sanitary facilities in different settings  
• Prioritize the availability of water to women for agriculture and fishing                                                                                                                                                                                                                                      | Local Govt., Rural Development, Health & Family Welfare, Water Development                                                                                                                                           |
| Food                           | • Ensure improved availability of diverse foods of quality  
• Promote best practice to ensure food safety in agriculture sector, food processing industries, food distribution system, and food value chain  
• Ensure adequate food safety regulatory framework in place and monitored                                                                                                                                                                                                                                          | Food, Industry, Disaster Management, Fisheries & Livestock, Health & Family Welfare, Agriculture                                                                                                                   |
| Agriculture, Fisheries and Livestock | • Improve production of diversified food (sources of animal protein)  
• Empower women to access agricultural extension services, resources  
• Incorporate basic nutrition into agricultural extension training and tasks  
• Build agricultural extension and agriculture input supply system to ensure nutrition is considered in planning and implementation                                                                                                                                                                           | Agriculture, Fisheries and Livestock, Water Development                                                                                                                                                         |
| Women and Children Affairs     | • Emphasize empowerment of women to make decisions about their own and their children’s well-being  
• Highlight child marriage/early pregnancy and childbearing, and their harmful implications for nutrition  
• Ensure 6-months of fully paid maternity leave is implemented in all sectors                                                                                                                                                                                                                                         | Women and Children Affairs, Health and Family Welfare                                                                                                                                                      |
| Industry                       | • Increase availability of fortified staples (for example, salt and oil)  
• Adhere to high standards in advertising/marketing, focus on children                                                                                                                                                                                                                                                                                                        | Industry, Food, Agriculture                                                                                                                                                                                  |
| Environment, Forestry and      | • Restore or enhance natural resources  
• Protect forests, promote forest-derived foods to benefit poor/ women                                                                                                                                                                                                                                                                                                           | Environment and Forestry Chittagong Hill Tracts                                                                                                                                                             |
| Natural Resources | • Secure ownership, access, and management rights to land and other productive resources for poor or marginalized groups (for example, ethnic minorities, emergency-affected populations)  
• Promote pro-poor, efficient, and integrated management of water resources including control for negative impacts, such as waterborne diseases  
• Mitigate risk and manage water-related shocks (for example, droughts, floods, water insecurity) through adequate infrastructure, storage and flood control, and supporting adaptation to the effects of climate change  
• Strengthen early warning and nutrition surveillance systems  
• Increase collaboration with other sectors and joint programming to increase household/community resilience, especially in emergencies  
• Develop monitoring & evaluation systems to include nutrition-relevant indicators  
• Protect, promote, and monitor rights and non-discrimination: right to adequate food and to be able to feed oneself in dignity; and all other related rights (employment, children’s rights, women’s rights, water rights; focus on marginalized groups, poor households, and women)  
• Uphold refugee and humanitarian laws in protracted crises | Women and Children Affairs |
<table>
<thead>
<tr>
<th>Policy/Strategy/Programme/Action</th>
<th>Implementing Institutions</th>
<th>Policy Objectives</th>
<th>Areas of Interventions</th>
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<tbody>
<tr>
<td><strong>National Food Policy (NFP)</strong></td>
<td>MoA, NARS, DAE, BARC, MoFL, AIS, SRDI, DoF, DLS, Private Sector, NGOs, Development Partners, BADC, BMDA, BWDB, WARPO, PDB, REB, MoFL, DOF, DLS, MoL, MoEF, MoI, MoC, BBMDA, DAM, Ministry of Land</td>
<td>Adequate and stable supply of safe and nutritious food</td>
<td>• Agricultural research and extension</td>
</tr>
<tr>
<td></td>
<td>MoFDM/DMB, Agricultural Research Institutes, MoA/DAE, MoFL, MoWR, MoLGRDC/LGD, MoF, SAARC, MoL, PKSF, NGOs, Private sector, Development Partners, MoFDM, MoSW, MoA, MoC, MoF, MoHFW</td>
<td>Increased purchasing power and access to food of the people</td>
<td>• Use and management of water resources</td>
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<td></td>
<td>APSU (MoA), MoHFW/WHO, FPMU (MoFDM), WFP, MoA (DAE), MoFL, MoHFW (Bureau of Health Education; HNPSP), BNHC, BBS, FAO, HKI, IPHN, Research organizations (IFST, ICDDR, B), Academic Institutions (INFS), NFPCSP, Development Partners</td>
<td>Adequate nutrition for all individuals, especially women and children</td>
<td>• Supply and sustainable use of agricultural inputs</td>
</tr>
<tr>
<td></td>
<td>NARS Institutes, Universities, DAE, DLS, DoF, FD, LGED, AIS, Mass Media, DMB, DRR, DOE, BADC, ECGIS, IWM, BMDA, BADC, DAE, BWDB, LGED, BMDA, BADC,</td>
<td></td>
<td>• Agricultural diversification</td>
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<td>• Agricultural credit and insurance</td>
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<td>• Early warning system development</td>
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<td>• Producer price support</td>
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<td>• Public stock management/price stabilization</td>
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<td>• Agricultural disaster management</td>
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<td>• Emergency food for public stocks</td>
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<td>• Enabling environment for private food trade and stock</td>
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<td>• Effectiveness of targeted food security programs and other safety nets</td>
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<td>• Income generation for women and the disabled</td>
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<td>• Agro-based/Agro-processing/ MSMEs development</td>
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<td>• Market-driven education, skills, and human development</td>
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<tr>
<td><strong>Country Investment Plan (CIP)</strong></td>
<td>NARS Institutes, Universities, DAE, DLS, DoF, FD, LGED, AIS, Mass Media, DMB, DRR, DOE, BADC, ECGIS, IWM, BMDA, BADC, DAE, BWDB, LGED, BMDA, BADC,</td>
<td>Increasing food availability</td>
<td>• Sustainable and diversified agriculture through integrated research and extension</td>
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<td>• Improved water management and infrastructure for irrigation purposes</td>
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</tbody>
</table>
| National Agricultural Policy (NAP) | To make the nation self-sufficient in food through increasing production of all crops, including cereals, and ensure a dependable food security system for all | • Sustainable and profitable agricultural production  
• Development and dissemination of new technologies  
• Increase in productivity, employment, and income generation  
• Competitive agriculture through commercialization  
• Adaptation to climate change and sustainability of agricultural systems  
• Agricultural marketing to ensure better prices for both farmers and consumers  
• Enhancement of production quality to meet export standards  
• Opportunities for agro-processing industries  
• Encouraging production of diversified nutritious crops |
| Health, Population, Nutrition Sector Development Programme (HPNSDP) | Mainstreaming of nutrition services with particular attention to micronutrient supplementation; treatment of severe-acute malnutrition; promotion of good nutritional | • Nutrition interventions into health and family planning services  
• Provision of community-based nutrition services  
• Food safety and hygienic practices including handwashing  
• Strengthened capacity of scientists and technicians |
• Water and sanitation  
• Food  
• Agriculture, fisheries, and livestock  
• Women and children affairs |
| --- | --- | --- | --- |
| Post 2015 Development Agenda (P2015DA) | Ministry of Planning, MoA, MOHFW | To integrate Sustainable Development Goals (SDGs) into the national development framework as well as to continue the ongoing work for completing the unfinished agenda of Millennium Development Goals (MDGs) | • Sustainable food security  
• Universal access to health & family planning services |
<table>
<thead>
<tr>
<th>Programme</th>
<th>Collaborative Agencies</th>
<th>Objectives</th>
<th>Areas of Interventions</th>
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<tbody>
<tr>
<td><strong>Scaling up Nutrition (US-AID &amp; DFID)</strong></td>
<td>Multi-sectoral and multi-stakeholder collaboration between 13 ministries and 10 departments as well as donors, United Nations (UN) agencies, academia, the Nutrition Working Group, and the Civil Society Alliance (CSA for SUN). Strong internal coordination occurs between the MoHFW and the Ministry of Food and Disaster Management (MoFDM).</td>
<td>Mobilize a global collective action against malnutrition, particularly in children.</td>
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</tbody>
</table>
| **Feed the Future** | USAID | Targeting investments in specific regions for maximum impact. These statistics reflect the realities of Bangladesh and the results of Feed the Future’s work there.  
- **Goal:** Reduce prevalence of poverty in Feed the Future target regions by 20 percent.  
  *2011 baseline:* 40.2 percent  
  *2017 target:* 32.4 percent  
- **Goal:** Reduce prevalence of stunting in children under 5 years old in Feed the Future target regions by 20 percent.  
  *2011 baseline:* 38.1 percent  
  *2017 target:* 30.5 percent | ● Increase on-farm productivity  
- Increase investment in value chains  
- Generate income  
- Improve nutrition status for mothers and children  
- Enhance policy and planning capacity  
- Enhance agriculture innovation capacity  
- Scale proven technologies to smallholder farmers  
- Promote gender integration in agriculture and increase women’s empowerment  
- Coordinate with the Global Climate Change Initiative and collaborate with the Global Health Initiative |
<p>| <strong>REACH (Renewed Efforts Against Child Hunger and Undernutrition)</strong> | FAO, UNICEF, WFP, IFAD | Scale up proven and effective interventions addressing child undernutrition through the partnership and coordinated action of UN agencies, civil society, donors, and the private sector, under the leadership of national governments. |  |</p>
<table>
<thead>
<tr>
<th>Programme</th>
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<tbody>
<tr>
<td>IFPRI Policy Research and Strategy Support (PRSSP)</td>
<td>IFPRI</td>
<td>The project will facilitate the policymaking process, stimulate policy dialogue, and communicate evidence-based research findings to relevant Ministries of the Government of Bangladesh and other stakeholders.</td>
<td>Provide policy advisory services, carry out research in collaboration with national institutions for developing evidence-based policy options, and improve the effectiveness of the delivery of food-policy related information to decisionmakers and other stakeholders.</td>
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<tr>
<td>Projects</td>
<td>Other Agencies</td>
<td>DFID</td>
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<tr>
<td>Strategic Partnership to support BRAC in delivering progress towards the MDGs in Bangladesh and to support its Institutional Development (NGO &amp; DPS)</td>
<td>BRAC, DFID, and Aus AID</td>
<td>Supporting BRAC’s Development Programme in providing basic health-care services, education, water and sanitation and improving the livelihoods of the poorest and most marginalized people in Bangladesh.</td>
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<tr>
<td>Health, Nutrition and Population Sector Programme (HNPSP)</td>
<td>• International Bank for Reconstruction and Development</td>
<td>To create a sustainable improvement of the health, nutrition and family welfare status to the population of Bangladesh, especially for those most vulnerable (for example, the poor, women, children, and the elderly).</td>
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<tr>
<td>Health Sector Development Programme (HSDP)</td>
<td>• Other</td>
<td>Improve access to and utilization of essential health, population, and nutrition services, particularly by the poor.</td>
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<tr>
<td>Urban Primary Health Care Project 2 (UPHCP2)</td>
<td>• Asian Development Bank, Centre for Health and Population Research</td>
<td>Improved access to and utilization of efficient, effective, and sustainable good quality primary health care services for the poor in urban areas covered by the project, with a particular focus on women and girls.</td>
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<tr>
<td>Safe Motherhood in Rural Communities CSCF385</td>
<td>• Donor Country-based NGO</td>
<td>To contribute to building effective demand for and delivery of health services in rural communities.</td>
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</tr>
<tr>
<td>Joint UN Accelerating Progress towards Maternal and Neonatal Mortality and Morbidity Reduction Project</td>
<td></td>
<td>Improve community maternal and neonatal health practices and utilization of quality maternal and neonatal health care and services, particularly among the poor and excluded.</td>
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</tr>
<tr>
<td>Maternal, Neonatal and Child Survival Project</td>
<td>• BRAC</td>
<td>To improve community maternal, neonatal, and child health practices, and increase utilization of quality care and services by the poor and socially excluded.</td>
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<tr>
<td>Accelerating Improved Nutrition for Extreme Poor in Bangladesh</td>
<td></td>
<td>To reduce undernutrition in extreme poor household in Bangladesh. Improved nutrient intake and health status of adolescent girls, pregnant and breastfeeding women and young children.</td>
<td></td>
</tr>
<tr>
<td>Urban Health: Strengthening Care for Poor Mothers and Newborns in Bangladesh</td>
<td>• GoB &amp; Donors</td>
<td>To improve maternal, newborn, and reproductive health services for the urban poor in Bangladesh by unifying and expanding quality clinical and community outreach services, which will benefit over a million couples with modern family planning methods and will contribute to over 98,000 births attended by skilled providers by April 2018</td>
<td></td>
</tr>
</tbody>
</table>
**Ending the Cycle of Undernutrition in Bangladesh - Suchana**

- Centre for Health and Population Research
- NGOs and Civil Society

Significant reduction in incidence of stunting amongst children under two years of age in Sylhet and Moulvibazar districts of Sylhet division in Bangladesh and catalyze support across government and other stakeholders for a coordinated, multi-sectoral approach to undernutrition at the national level.

### CIDA

<table>
<thead>
<tr>
<th>Projects</th>
<th>Implementing/executing agencies</th>
<th>Objectives/Types of Activities</th>
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</thead>
<tbody>
<tr>
<td>Joint Government of Bangladesh-UN Maternal and Neonatal Health Project</td>
<td>UNFPA</td>
<td>The project takes place at the local level in districts and communities and focuses on poor and marginalized populations. It includes activities such as: (1) providing training and information for mothers about harmful health practices and the need to use and demand better services; (2) providing technical assistance and support to improve local-level planning by the government; (3) supporting coordination between NGOs and the government to develop better services; and (4) providing training to improve the skills of doctors, nurses, and other community-based health personnel.</td>
</tr>
<tr>
<td>Human Resources for Health</td>
<td>Cowater International Inc. &amp; GoB</td>
<td>It provides technical assistance, equipment, and teaching and learning aids to the Ministry of Health and Family Welfare to improve the quality of education for nurse midwives and community skilled birth attendants. It also provides support to the Ministry to rationalize the rules for recruiting, posting, promoting and training nurse midwives.</td>
</tr>
<tr>
<td>Maternal and Child Health in Chittagong District</td>
<td>IDRF (International Development and Relief Foundation)</td>
<td>It aims to improve maternal and infant health through interventions that address medical, cultural, and social factors affecting maternal and child health in 100 villages of Chittagong District in Bangladesh.</td>
</tr>
<tr>
<td>Bangladesh Health Commodities</td>
<td>UN-Office of Programme, Planning, Budget and Accounts</td>
<td>This project improved the quality and delivery of health services appropriate to the needs of the poor, in particular women and children. It consisted of providing reproductive and child health commodities, mainly essential drugs, vaccines, and contraceptives.</td>
</tr>
<tr>
<td>Improving Health and Nutrition for Hard-to-Reach Mothers and Young Children</td>
<td>UNICEF - United Nations Children’s Fund</td>
<td>It aims to improve the health of mothers, newborns, and children under five to improve children's growth and reduce death in 14 poor districts in Bangladesh.</td>
</tr>
<tr>
<td>Support to the Health Sector Development Program</td>
<td>World Bank</td>
<td>Project seeks to improve the health of the population in all districts of Bangladesh by strengthening the Bangladesh Ministry of Health and Family</td>
</tr>
<tr>
<td>Access to Health and Education for all Children and Youth with Disabilities</td>
<td>Queen's University</td>
<td>Welfare's management of the public health care system and by improving public health services. This project aims to secure a better future for children and youth with disabilities in Bangladesh by increasing access to health, education, and protection services for 13,000 children and youth with disabilities, particularly girls.</td>
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<tr>
<td>Community-Led Health in Bangladesh</td>
<td>HOPE International Development Agency</td>
<td>This project aims to improve maternal, newborn, child and adolescent health in three union parishads (UPs) in southern and central Bangladesh.</td>
</tr>
<tr>
<td>Increased Maternal and Child Health Access</td>
<td>Primate's World Relief and Development Fund</td>
<td>This project aims to improve health among mothers, newborns, and children under the age of five in 130 Bangladeshi villages.</td>
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**FAO**

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<tr>
<th>FAAO Priority</th>
<th>Outcome</th>
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| Priority 1: Reduce poverty and enhance food security and nutrition (access and utilization) | Outcome 1A: Strengthened national capacity for devising pro-poor, equitable food security and agricultural development policies and social safety nets.  
Outcome 1B: Opportunities created for on- and off-farm effective employment for men and women, to improve livelihoods, nutritional status and reduce pressure on natural resources.  
Outcome 1C: Enhanced food utilization and household nutritional status through improved awareness and “nutrition-friendly” diversification.  
Outcome 1D: Enhanced women’s participation in agricultural activities, access to productive resources and entrepreneurship development. |
| Priority 2: Enhance agricultural productivity through diversification/intensification, sustainable management of natural resources, use of quality inputs and mechanization | Outcome 2A: Improved dialogue to reconcile environmental and production concerns where there are multiple options for land (and other NR) use.  
Outcome 2B: Strengthened technical capacity (institutional and individual) for developing and implementing sustainable production programs.  
Outcome 2C: Sustainable increase of production in livestock, dairy, poultry, horticulture and aquaculture sectors are identified and promoted through improved technology, better health, and resilient management practices.  
Outcome 2D: More sustainable capture fisheries promoted through stock assessment, improved technology, and better natural resources management policies and practices.  
Outcome 2E: Sustainable surface water irrigation promoted. |
| Priority 3: Improve market linkages, value addition, and quality and safety of the food system | Outcome 2F: Sustainable natural resources management practices promoted for protection of environment and conservation of natural resources and biodiversity.  
Outcome 2G: Farm mechanization promoted and disseminated to enhance agricultural productivity and intensification.  
Outcome 3A: Farmers groups/associations strengthened for transfer of knowledge and improved access to markets and input delivery.  
Outcome 3B: Policy dialogue established on supporting an enabling environment for agri-business development.  
Outcome 3C: Enhanced private sector-producer linkages for development of food products value chain  
Outcome 3D: Technical assistance provided on storage technologies for reduction of post-harvest loss and preservation of micronutrients.  
Outcome 3E: Improved quality and safety of food systems at national and local level. |
| Priority 4: Further improve technology generation and adaptation through better producer-extension-research linkages | Outcome 4A: Capacity of relevant institutions to deliver integrated extension services strengthened.  
Outcome 4B: Strengthened research-extension-farmer linkages at different tiers of the national system.  
Outcome 4C: Increased support for partnerships in advanced agricultural research including biotechnology. |
| Priority 5: Increase resilience of communities to withstand 'shocks' such as natural disasters, health threats and other risks to livelihoods | Outcome 5A: Improved household coping strategies in specific vulnerable areas to natural disasters and climate change impacts (flood, drought, salinity).  
Outcome 5B: Strengthened preparedness and response to humanitarian crises in a strategic and coordinated manner through the Food Security Cluster (FSC).  
Outcome 5C: Consolidation and institutionalization of standard tools for consolidated food security analysis to inform policy and programming in humanitarian, transition and development action.  
Outcome 5D: Effective containment and control of the most serious Transboundary Animal Diseases (TAD) - as well as newly emerging diseases.  
Outcome 5E: The One Health strategy for Bangladesh is promoted and action plans are developed and implemented to address health risks at the animal-human-ecosystem interfaces. |
Outcome 5F: Institutional capacity is developed to provide an adequate response to foodborne illness outbreaks and food safety emergencies.

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<tr>
<th>Name</th>
<th>Areas of Interventions</th>
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<tr>
<td><strong>GIZ</strong></td>
<td>Support to the Health Sector Programme:</td>
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<tr>
<td>Implementing agencies:</td>
<td>Providing assistance to government to improve access to relevant and essential services, particularly for the poorest and most vulnerable people, and to encourage people to make greater use of those services.</td>
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<tr>
<td>Ministry of Health and Family Welfare (MOHFW)</td>
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<tr>
<td><strong>IFPRI/PRSSP</strong></td>
<td>ANGeL (Agriculture Nutrition and Gender Linkages) and TRAIN (Targeting and Realigning Agriculture for Improved Nutrition) objectives are to address evidence gaps on the effects of agricultural interventions on maternal and child nutrition.</td>
</tr>
<tr>
<td><strong>UNFPA</strong></td>
<td>UNFPA, Bangladesh is using a rights-based approach to addressing sexual and reproductive health in collaboration with the government and other UN organizations honoring the country’s commitment to the UN Secretary General’s Global Strategy for women’s and children’s health.</td>
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<tr>
<td><strong>WFP</strong></td>
<td>Improving Maternal and Child Nutrition</td>
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<td>Feeding School Children</td>
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<td>Preparing for Disasters and the Effects</td>
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<td>Helping The Government To Reduce Poverty of Climate Change</td>
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<td>Assisting Refugees and Ultra-Poor in Cox’s Bazar</td>
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<td>Rice Fortification</td>
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<td><strong>UNICEF</strong></td>
<td>Neo-natal Health</td>
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<td>Maternal Health</td>
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<td>Child Nutrition</td>
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<td>Prevention of Infant &amp; Child Diseases</td>
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<td>Water, Sanitation &amp; Hygiene for Children</td>
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