















Rabeya Begum carefully listens during a courtyard nutrition session in the remote sub district of Dacope in south west Bangladesh. Led by an exuberant community nutrition facilitator, mothers with children aged under two, grandmothers and a number of fathers - closely follow the preparation and cooking of khichuri – an indigenous dish made of rice, lentils and seasonal vegetables. The mothers, like Rabeya, are all involved in a 15 month nutrition safety net cash transfer activity - designed to reduce stunting in children by targeting pregnant and lactating women with chronic food insecurity living under the lower poverty threshold. Hossain, Rabeya's healthy 6 month old son, is about to transition to complementary feeding - therefore, the session is of particular importance to Rabeya who is attending with Kabir, her husband and her mother in law. Rabeya, attentive and quietly confident, has attended five courtyard sessions covering a range of topics such as breastfeeding and essential WASH practices and is keen to point out that she, Kabir, and her mother in law consult closely with the community nutrition facilitator to ensure that Hossain, her six month old is healthy and happy. 'The facilitator visits my house regularly to help me and my husband understand the importance of early and exclusive breast feeding and how this helps Hossain grow to be a strong baby. I also learnt about

position and attachment for breastfeeding. Initially old fashioned, my mother in law now values the community nutrition facilitators advice. Our neighbors also ask us for advice on how to breastfeed and care for their babies – this is a great source of joy for both me and my mother in law.'

Living below the lower poverty line of \$1.80 per day, Rabeya and her family struggled to survive in the past on the meagre income of daily wage labor - often the only source of income for families in extreme poverty in south west Bangladesh. Circumstances changed dramatically when Rabeya enrolled in USAID's nutrition safety net cash transfer activity, led by World Vision Bangladesh. Rabeya received a project sponsored SIM card linking her to formal financial services - a first for her – and was able to receive monthly e money cash transfers of BDT 2,200 (\$USD 27.5). Rabeya spends a proportion of the money on food and significantly is also able to save on a monthly basis - something she has never been able to do in the past.

More importantly, Rabeya attends monthly Growth Monitoring and Promotion sessions to accurately chart Hossain's height and weight. During these sessions and also the household visits undertaken by community nutrition facilitators, Rabeya and her family are able to continuously absorb breast feeding messages which they put into practice. With the money I receive through the cash transfers, my husband and I go to the market to purchase fruit, meat and green vegetables. We realize that in order to breast feed Hossain properly – I have to regularly eat nutritious food. We ensured that Hossain only had breast milk and nothing else for the first six months. If we had any concerns - we immediately reached out to the community nutrition facilitator who advised and reassured us.' Having access

to critical health information and a local community nutrition facilitator - is a catalyst for families such as Rabeya's - helping to dispel traditional beliefs. When Hossain was born with a low birth weight, rather than supplement breast milk intake with any other food, Rabeya immedi-

ately fed him colostrum and breastfed exclusively. 'My husband would make sure that I ate apple, pulses, eggs, fish and meat so I could breastfeed properly and increase my milk production.'

Over 14,000 extreme poor women across four sub districts in south west Bangladesh have received the monthly cash transfers along with targeted behavior change communication through courtyard sessions and household visits - led by a dedicated cadre of frontline volunteer facilitators. This is a significant feat given that women and children in southwest Bangladesh are particularly vulnerable, where issues in maternal and child health and nutrition are exacerbated by poor Water, Sanitation and Hygiene (WASH) conditions and climatic adversity.

Since receiving the cash transfers, Rabeya has sought post natal care and regularly attends monthly Growth Monitoring and Promotion (GMP) sessions at her local community clinic to track Hossain's growth and development. Early evidence shows improved health seeking behaviors with 93% of cash transfer participants attending the GMP sessions, 46% seeking ante natal care and 28% seeking post natal care. Data also shows that 57% of cash transfers are used to purchase nutritious food further underscoring the positive effects of the cash transfers and targeted behavior change communication.

Nutrition safety net cash transfers designed to improve nutritional intake and reduce stunting in children under 2, shows that targeting transfers to women can improve children's well-being -in the form of investments on children's health and nutrition and bring down the cost of financial inclusion for women. To effectively influence the

nutritional status of the most vulnerable women and children under 2, a key learning so far is that cash transfers will have to be supplemented with intense behavior change efforts such as household visits and courtyard

> sessions - which will help sustain the impact of improved nutrition and health seeking behaviors for women like Rabeya and future generations

like Hossain.



About 'Nobo Jatra-new beginning'

'Nobo Jatra-New Beginning' is a five year USAID Food for Peace Title II Development Food Security Activity that seeks to improve gender equitable food security nutrition and resilience in southwest Bangladesh. World Vision Bangladesh (WVB), together with the World Food Programme (WFP) and Winrock International and 3 local partner NGOs, implement the project, integrating interventions in Maternal Child Health and Nutrition, Water Sanitation and Hygiene, agriculture and alternative livelihoods, Disaster Risk Reduction, good governance and social accountability and gender to achieve its objectives. Nobo Jatra is implemented in partnership with the Ministry of Disaster Management and Relief (MoDMR) of the Government of Bangladesh in Dacope and Koyra Upazilas in Khulna and Shyamnagar and Kaliganj Upazilas in Satkhira.