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Bangladesh, Malnutrition

Ending Malnutrition in Bangladesh

There are around 163 million people living in Bangladesh. Out of that, 82% of people live on less than \$2 every day; 41% live on less than \$1 a day. Their struggles amount to 36 million people in Bangladesh who don't ingest enough to lead a normal and healthy life. However, it is also a leader in fighting hunger and plays as a role model for other countries fighting hunger as well. Food production has quadrupled in the last 40 years and continues to grow. A United Nations report highlights Bangladesh as one of the bright spots in the global effort to end world hunger by 2030. The report said that, "Bangladesh has cut hunger by more than half since 2000" (Abdallah, 2015). "Between 1990 and 2011, it decreased the number of underweight children by 25 percent and infant mortality by 50 percent" (Abdallah, 2015). This achievement has only been matched by five other countries. An individual reading this may think why should the world focus on a leader in world hunger than a follower? Bangladesh's efforts are not seen by the world yet, but if we continue to strive to help those 36 million people still hungry, there will be attention brought to the fact that world hunger can be ended. The famous quote, "finish what you started", should be applied by finishing the hunger in Bangladesh. The efforts that started after Bangladesh's independence in 1971 should be respected and continued, and all of this will result in the end of hunger in Bangladesh. Hunger in Bangladesh will be ended by 2030 through cash transactions that will go toward helping women and empowering them to strive towards a healthier life for themselves and their families.

Bangladesh is a small country in southern Asia, home to around 163 million people, according to the 2016 census. About 35% of this is urban and 65% is rural. Bangladesh has a densely populated floodplain delta with 1,062 people per square kilometer (PRB, 2012). It commonly suffers from natural disasters such as floods, cyclones, and drought, and is also vulnerable to the growing effects of global climate change. Bangladesh has a typical monsoon climate with moderately warm temperatures and high humidity. The tendency to natural disasters, distribution and quality of agricultural land, access to education and health facilities, level of infrastructure development, employment opportunities, and dietary and caring practices are the main factors of food insufficiency in Bangladesh. The use of agricultural land is 68.3% (PRB, 2012). More than 200 million farmers have an average farm size of less than one hectare. A hectare is 107,639 square feet. Rice, Jute, and tea dominate agriculture exports, but rice is grown almost entirely for domestic consumption, while jute and tea are the main export earners. The government in Bangladesh is led by the prime minister and cabinet is the supreme decision-making body. It is a parliamentary democracy because the popular party with the highest members in parliament form the government with the leader as prime minister or chancellor. This is the government, climate, and geography of Bangladesh.

A typical family in Bangladesh and their lifestyle is different from life in America and solutions to ending world hunger can result from studying these families. An average household size is 4.5 people. Houses are usually rectangular and made out of dried mud, bamboo, or bricks. They are usually built on high wooden platforms to keep above the flood line. Inside these houses, there is normally little interior decoration except the minimal furniture consisting of low stools and thin bamboo mats that families can use to sleep on. A separate, smaller mud or bamboo structure could be used for the kitchen. In the kitchen,

a typical family diet consists of a meal usually made with a spicy curry, rice, roti (a whole wheat circular flatbread that is eaten with the curry), and dal (a thin soup based on beans such as lentils that can be poured over rice). Rice and fish are the foundation of these meals. Since Bangladesh has so many rivers, families get their fish supply from them. To cook the fish, many women use a traditional Bangladeshi stove, made from mud or can be dug into the ground. The stove includes a place for fire (usually heated by wood, sometimes wrapped in cow dung so it burns slower) with an impression or opening in which to place the pan. Women use a traditional boti (knife) to cut the vegetables and meat. More than 70 percent of Bangladesh's population and 77 percent of its workforce lives in rural areas. To support their families, nearly half of all of Bangladesh's workers and two-thirds in rural areas are directly employed by agriculture, and about 87 percent of rural households rely on agriculture for at least part of their income. However, Bangladesh's workforce of around 87 million is largely uneducated. Primary education is free for all children in Bangladesh, from grades one through five. By law, children between the ages of six and ten must attend school. However, around 5 million children remain uneducated because of poverty or hard to reach areas where these families live in. 20 million people do not have access to safe water, and 63 million people don't have access to a toilet. Another barrier a typical family could face is the cost of food. A basic diet for a family of three cost \$67 a month to a recent analysis by the Center of Policy Dialogue, a respected research organization based in Dhaka, the nation's capital. Life can be tough for a typical family in Bangladesh because of the expense of food, lack of sanitation, and the environment where they live in.

Rates of malnutrition in Bangladesh are among the highest in the world, with six million children estimated to be chronically undernourished. Chronically malnourished, or stunting, is a form of growth failure. The decline in chronic malnutrition seen before – from 60% in 1997 to 41% in 2011 – appears to be slowing down. Currently, 36 percent of children under-five are too short for their height or stunted and 33 percent are underweight. In Bangladesh, malnutrition is caused by multiple factors. The primary causes are diseases and insufficient intake of food. The other causes of malnutrition include the inability of households to grow and/or purchase enough food for their needs; poor maternal and child-care practices, including insufficient breastfeeding, and insufficient supply of food for adolescent girls, and pregnant and lactating women. Malnutrition in a child means that they are more likely to face cognitive impairments, short stature, low resistance to illnesses, and a higher risk of diseases and death throughout their lifetime. Malnutrition also presents numerous threats to women. It weakens women's ability to survive childbirth, makes them more vulnerable to infections, and leaves them too weak to recover from illness. Malnutrition reduces a women's productivity and ability to care for their families. Malnutrition is a serious problem in Bangladesh and finding a way to end it could take us one step higher to achieving the goal of ending hunger.

When one thinks of the word malnutrition, the image of starving children could be pictured in one's head. However, the nutrition status of mothers have not been given sufficient attention, and their health is the key element to ending hunger in Bangladesh. Empowering them by giving them the knowledge to support themselves and their children will result in decreased malnutrition rates. Silvi, an eight-month-old baby, and her mother, Maya, live in a small village in one of the poorest regions in Bangladesh. Maya remains frightened and helpless for her baby and her future with questions swarming in her head like “will her baby be healthy enough to support herself when she grows up?” and “Will she have to get married at a young age, like I did, at 16 to help herself?”. But with the right kind of support, Maya will be at peace and her little girl will have a healthier and better life for herself. Growing evidence has shown that sufficient nutrition before birth and the two years later has lasting effects on a child's intelligence and brain development. When these women are properly fed and exposed to learning on how to take care of their young, children can reach their full potential. Therefore, investing in early childhood

nutrition and cognitive development (CNCD) is crucial to reducing poverty in Bangladesh where 36% of children below the age of 5 are stunted and maternal nutrition remains poor. Unfortunately, poor families like Maya's are not utilizing services that could be available to them. The reason could be parents that like Maya have not turned to programs aimed at raising awareness of CNCD unless they are accompanied by reasons to improve nutrition at home. Research has found that conditional cash transfers can change behaviors and lead to better human growth outcomes. In Bangladesh, there have been two vital programs that have led to a decrease in malnutrition rates. The first program, Shombhob ("possible" in Bangla), had reached more than 14,000 poor households. Mothers received cash if they attended counseling sessions to improve their children's nutrition and cognitive development and utilized children's growth monitoring services offered by community clinics. This work was evaluated with support from SAFANSI. The evaluation found that Shombhob had improved mothers' knowledge of the health benefits of exclusive breastfeeding for infants in the first six months and improved children's intake of high-protein food. The second program is Jawtno ("care" in Bangla), which provided cash transfers to 600,000 poor families to provide they used prenatal care and children's growth monitoring services which were offered by community clinics. The program also stressed that mothers were to participate in counseling sessions that stress the importance of cognitive stimulation to boost children's development. The cash transfers are given in exchange for the women to do the following: Receiving antenatal care up to 4 times during pregnancy; attending monthly growth monitoring and promotion services for infants between 0-24 months; attending quarterly growth monitoring and promotion services for children aged 2-5 years; attending monthly health education sessions on child nutrition and cognitive development. During enrollment, fingerprints are collected from women and ISPS cash cards are distributed accordingly. When a woman wants to collect her payment, her fingerprint and ISPS card will be verified and used as identification. Jawtno also have safety net offices. A safety net officer will monitor attendance and payments closely through a Program Management Information System. The funding of this program came from the government of Bangladesh and the World Bank today. The World Bank has committed \$300 million for the program, which will benefit over one million children. The program has been implemented in 43 Upazilas (a geographical region in Bangladesh used for administrative or other purposes) with a high prevalence of poverty and malnutrition in seven districts: Jamalpur, Mymensingh, Sherpur, Gaibandha, Kurigram, Lalmonirhat, and Nilphamari. The project is funded by the UK Children's Investment Fund Foundation and partnered with the Directorate General of Health Services, the Postal Directorate, and the Bangladesh Bureau of Statistics. The policies and base for this project are already set, however, the project will need to be expanded in order to succeed in ending malnutrition in Bangladesh. Districts such as Dinajpur, Gaibandha, Rangpur, Bandarban, Khagrachari, Kishoreganj, and Magura will also need to be addressed because of the rates of poverty in these areas as well. Despite the progress that could be illustrated by this program, barriers of sexism stand in the way. Women in Bangladesh still have a lower social status than men. This sexism is embedded in cultures and traditions that view women as social and economic burdens and place greater value for men. Because daughters have less access to food, health services, and education, women are seen as low from one generation to the next. Bangladesh has one of the highest rates of child marriage below the age of 15 in the world. This illustrates how much more needs to be done to empower women in Bangladesh. Girls who marry young typically give birth at younger ages, increasing the risk of poor growth of a baby which leads to stunting at birth. Child marriage also leads to adolescent girls dropping out of school which then restricts their social development. The total commitment for this project will be around \$300 million, but the end result will benefit over 1 million children; 600,000 poor mothers will be expected to receive cash transfers; and 2.7 million poor people across 43 Upazilas in northern Bangladesh will benefit from improved capacity of local level government to deliver safety net programs.

Bangladesh is known as the leader in striving to end world hunger, however, it is also known as having the highest rates of malnutrition. Fortunately, there is a way to reduce rates of malnutrition and create healthier lives for women and their families across Bangladesh: cash benefit programs. The explanation of the program, Jawtno, will work to educate women on child nutrition and cognitive development and help over one million children. However, in a survey, no one has heard about the program. During further research, it is seen that many families don't even realize that programs like Jawtno are available for them in their local community clinics. That is why it is extremely important to raise the publicity of this program through well-developed organizations such as UNICEF. UNICEF focuses on promoting the rights and well-being of children in everything they do along through publicizing different issues and the option for viewers to donate to specific programs or countries. It is a well-known organization that works in 190 countries and territories. Now, if a big and well-known organization like UNICEF can publicize Jawtno and help guide people to donate towards the program, Jawtno can increase to different districts and countries that are also battling with malnutrition. Another program is Zonta that focuses on empowering women which is critical to give the confidence women may need in a sexually segregated environment. Finally, The Hunger Project, a global and non-profit organization committed to helping families lead a healthy and fulfilling life. The Hunger Project is also in Bangladesh which makes it a key organization for raising awareness in the country itself about malnutrition and how Jawtno can help end it. Without the help of these programs, families will not be able to reach out to Jawtno without any knowledge of what the program offers and how it can help them in the future. In addition to these key programs; the use of local newspapers; blogs; speeches in community centers, places of prayer, schools; social media; and proposing relations with other programs that are also focusing on Malnutrition in different countries, the opportunities to inspire different people to help all around the world are endless. There are around 795 million people undernourished in this world, and the United Nations have predicted that a cost of "\$30 billion per year" to eradicate world hunger. That also means that the project will not die out in the long run because every year, people around the world can donate to reach up to \$30 billion to end hunger. The U.S. defense budget was \$582.7 billion in 2017, and the budget for ending hunger globally is a measly \$30 billion in comparison. That is the goal set for every year, and Jawtno is a big part of that goal along with different organizations and the public. \$30 billion every year with the help of society, cities, states, territories, countries, and 7.6 billion people, world hunger will be ended. By 2030, Bangladesh could be known as the number one leader in ending hunger. As Norman Borlaug once said, "Man can and must prevent famine tragedy in the future", and with the help of Jawtno, hunger will be ended across Bangladesh, and eventually, globally.

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