OVERVIEW Nutrition at the Center (N@C) is an innovative five-year (2013-2017) program designed to develop, document, and disseminate highly effective and efficient integrated approaches that substantially and sustainably improve nutritional outcomes for mothers and children. With generous support from the Sall Family Foundation, N@C aims to reduce anemia in women (age 15-49 years) and stunting and anemia in children (age 0-24 months) in Bangladesh, Benin, Ethiopia, and Zambia by integrating maternal, infant and young child nutrition and health (MIYCN), water, sanitation, and hygiene (WASH), food security, and women’s empowerment.

Midterm Review
In Bangladesh, N@C operates in the northeast haor region of the country where it is flooded four to six months of the year. N@C has been using a multi-sectoral approach to improve nutrition, including mainstreaming nutrition services within community-level maternal and child health service delivery outlets; collaboration with sector organizations; and use of organized community groups. In an effort to assess the progress of these ongoing N@C activities and understand how to improve the processes and long-term impact of the program, N@C undertook a Midterm Review (MTR) in December 2015.

OBJECTIVES
Specifically, the MTR aimed to: (1) assess progress towards N@C program objectives to date; (2) assess the learnings from the process of multi-sectoral programming; (3) assess the reach of the program to date; (4) assess the efficiency of implementing partners; and (5) learn ways we can improve the program.

METHODS
The MTR was conducted in Derai and Bishwambarpur sub-districts of Sunamganj district. Nikli and Itna sub-districts of Kishoregonj district were included as comparison areas. Data collection consisted of surveys with poor and extremely poor family members and mothers group members, focus group discussions with community clinic groups and other formed (grandmother, father, adolescent girl) groups, and in-depth interviews with group leaders, community leaders, Ministry of Health service providers, supervisors, program staff, and peer organizations. The tools for data collection were developed by N@C (CARE USA and CARE Bangladesh), program staff in Bangladesh assisted with sample selection, and an external consulting firm was hired to for data collection and analysis to complete the MTR. Results presented in this brief include data from N@C’s 2014 Baseline survey. MTR results used a different sampling frame; therefore, Baseline data comparisons are indicative only.

84% Of mothers reported practicing improved and acceptable WASH behaviors.

“We now participate in multi-sectoral activities that we did not do before N@C,” reports a Ministry of Health representative.
RESULTS
Overall, the MTR demonstrates progress towards a change in selected behaviors to improve health and nutrition for women and children in target areas.

Maternal Health & Nutrition
Maternal health has improved through increased knowledge of and access to antenatal care (ANC). The use of ANC during pregnancy from “any provider” has reportedly reached approximately 80% (38% at Baseline). Consumption of iron tablets during pregnancy, to reduce anemia, has reached 85% in N@C intervention areas. Most women of the reproductive age get iron tablets at an ANC visit, so consumption was likely much lower at Baseline.

Infant & Young Child Feeding
Relative to other N@C countries, exclusive breastfeeding practices were high in Bangladesh. Even so, the MTR indicates that N@C has increased exclusive breastfeeding, which was reported at 90% in program areas (76% at Baseline). Mothers in N@C groups have also been educated on the benefits of colostrum for newborns—it contains antibodies to protect against disease—and giving colostrum to newborn babies has reached universal coverage reported at 100% (approximately 75% at Baseline).

Food Security
Community members throughout Derai and Bishwambarpur have participated in N@C’s promotion of home gardening activities—including 1,400 poor households that received seeds for gardening. Eighty-five percent of MTR respondents reported having a home garden and/or household poultry to produce a variety of vegetables and animal source foods in their home (33% at Baseline). Of those, 92% of N@C group members reported being able to provide diverse diets for their children.

Water, Sanitation & Hygiene
The majority of mothers engaged with N@C reported practicing improved and acceptable WASH behaviors — 100% of respondents reported washing hands with soap and water after defecation (33% at Baseline). There were differences seen in WASH practices of N@C intervention areas compared to control areas with water and soap for handwashing observed in 60% of households (33% in control), and water containers covered in 88% of intervention households (67% in control areas).

A local peer organization reported that, “N@C’s work with community clinics and support groups is very good.”

Women’s Empowerment
MTR findings on women’s empowerment and gender equality demonstrated increased knowledge and improved practices. Approximately 85% of women reported having the ability to visit a health clinic at her own will (21% at Baseline). More than 70% of women reported participating in community meetings, up from 45% at Baseline. Women empowered to make breastfeeding and complimentary feeding decisions was 85% at MTR, (74% Baseline) and more than 85% of women reported that husbands beating wives is never warranted (approximately 55% at Baseline).

Priorities Going Forward
MTR findings suggest that the project is on track towards improving health, food security, WASH, and women’s empowerment behaviors. Child health has been linked to proper feces disposal, and this is an area N@C will focus on in the coming months. Current relationships with government are strong, however N@C is working toward strengthening monitoring in community clinics in order to better serve pregnant and lactating mothers, adolescent girls, and children.