The Improving Nutrition through Community based Approaches (INCA) project (May 2017-May 2020) implemented by Caritas Bangladesh with technical support from United Purpose aims to address the high levels of stunting and malnutrition in 11 selected Upazila under the districts of Bhola, Laxmipur and Noakhali in south-central Bangladesh. The project funded by the United States Agency for International Development (USAID) works at health facility, community and household level to improve nutrition among pregnant and lactating women and children during the crucial first 1,000 days of life, from conception up until two years old.

The project is implementing targeted nutrition-specific and sensitive interventions at household and community level that will leverage and build on existing government, USAID and other donor efforts in the field of nutrition, healthcare, WASH and agriculture. The project works with 401 health facilities which includes Community Clinics (CCs), Union Health and Family Welfare Centers.

**Specific Objective**

The specific objective of this activity is to improve nutritional practices during the first thousand days of life.

**Beneficiaries & target areas**

The 11 targeted Upazila in Bhola, Laxmipur and Noakhali districts (Bhola Sadar, Daulatkhan, Burhanuddin, Tazumuddin, Lalmohan, Char Fasson & Manpura; Kamalnagar & Ramgati; Subarnachar & Hatiya) have 782 villages under the administration of 106 Unions.

These particularly vulnerable districts have high rates of poverty and stunting rates are also a cause for concern. At any given time there are an estimated 150,000 ‘1,000 day households’ that are at risk and need special care and support.

**Intermediate results:**

1. Improved knowledge of communities on proper nutritional requirements during the first thousand days of life.
2. Increased access to and use of health and nutrition services at targeted health facilities

**Sub intermediate results include:**

- Increased access to nutrition knowledge at community level
- Increased dissemination of quality nutrition information from targeted health facilities
- Increased support to families through community nutrition support groups
- Increased coordination between community nutrition promoters and targeted health facilities
- Increased awareness of community about availability of health services at community level
- Increased capacity of health service providers and facilities in the community
Key Interventions

Community level/Household level
1. 1000 days HH registration
2. Individual Counseling
3. Group Counseling
4. Courtyard session
5. Promoting low cost hand washing
6. Referral to Health Facility
7. Promoting homestead gardening, poultry rearing, aquaculture

Community based health facility level:
1. Orient frontline worker of community based health facility
2. Assisting to register pregnant mother to the health facility
3. Assisting to conduct group counseling to mothers on IYCF and maternal nutrition
4. Assisting to conduct GMP to Children
5. Assist to data entry, record keeping and documentation
6. Collect service delivery data from Health Facility by Project staffs

Community Support Group:
1. Formation of Community Nutrition Support Group (CNSG)
2. Orient Community Nutrition Support group on Nutrition
3. CNSG member to facilitate courtyard session
4. Referral by CNSG member
5. Follow up facility based nutrition service by CNSG

General Activity:
1. Conduct Community based Nutrition day with the help of CNSG member and Health facility staff
2. Jointly observe World Heath Day and Global Breastfeeding Week organized by GOB.
3. Assist GOB Health Facility during EPI, NID, VAC and De-Worming Campaign.
4. Participate at local health Coordination meeting organized at community, Upazila and district level.
5. Participate at CSG Meeting

Methodology
- The project identified and trained female ‘Community Nutrition Promotors’ (CNPs) from the communities who will conduct monthly household visits to targeted 1,000 day households for vital one to one counseling on diet, IYCF and care according to specific needs.
- Social Behavior Change Communication (SBCC) modules and materials identified, adapted, developed and distributed during various community awareness events including courtyard meetings and monthly community Nutrition Days.
- Government Health facility personnel are trained on nutrition and supported by the project and Community Nutrition Support Groups established and trained.
- Women’s Information Centres (WIC) have been established in remote areas with limited access to community clinics.
- An innovative App and Dashboard developed to track nutrition and health status of target households for use by CNPs as well as health facility staff.