## Ministry of Health and Family Welfare Endorses Food Plate as a Counseling Tool for Pregnant and Lactating Women

As part of its efforts to improve dietary diversity, the SHIKHA project is expanding the use of a food plate designed as an innovative counseling tool for pregnant women in rural Bangladesh. The newest version of the plate has been endorsed by the Ministry of Health and Family Welfare (MOHFW) and will soon be reaching both pregnant and lactating women throughout the country.

## **Developing the Food Plate**

As the SHIKHA project was beginning in 2013, its field workers identified a need for standardized counseling tools to promote dietary quality among pregnant women. According to the most recent Bangladesh Demographic and Health Survey, 19 percent of married women of reproductive age (15–49 years) are considered undernourished. Undernourished pregnant women are at greater risk of having fetuses with intrauterine growth retardation, babies with low birth weight, and preterm deliveries. Studies report that higher dietary diversity is strongly associated with nutrition sufficiency and micronutrient adequacy, and that intake of foods rich in micronutrients (e.g., milk, vegetables) during pregnancy is associated with increased birth size.

Project staff initially used a printed job aid to explain the importance of a diversified diet, but the staff had difficulty using the job aid and pregnant women had trouble retaining



the information. Through extensive literature review and expert consultation, in 2014 SHIKHA developed and produced a food plate to be used as a counseling tool. The plate's design was based on research on desirable dietary patterns for Bangladesh, conducted by the Bangladesh Institute of Research and Rehabilitation in Diabetes, Endocrine, and Metabolic Disorders (BIRDEM) and the Bangladesh Rice Research Institute (BRRI), with support from the Ministry of Food and the Food and Agriculture Organization of the United Nations (FAO). Based on field findings and additional expert consultation, SHIKHA designed and produced an improved version of the plate in 2015.

(For more information, see "Designing a food plate for dietary counseling of pregnant women in Bangladesh" on page 116 of the May 2016 issue of Field Exchange: http://files. ennonline.net/attachments/2504/FEX-52-Web\_SHARE.pdf.)

## **Receiving Positive Responses**

Preliminary results from an endline household survey for the SHIKHA project showed that the mean dietary diversity score of pregnant women in the project area improved significantly to 4.76 in 2015–2016, from a baseline score of 4.28 in 2013–2014. (This finding was at least partially due to the use of the food plate as a counseling tool.)

The plate was also highly valued by the project's frontline workers and beneficiaries. Nargis Jahan, a nutrition worker (pusti karmi) in Babugonj, said that "the plate helped us in explaining to the pregnant woman and her family members what she should eat, and they can see the food groups and the message and can remember them easily." Lutfun Nahar, a community health volunteer (shasta sebika) in Babugonj, stated that "when we ask pregnant women to eat more they eat more rice, but after introduction of the food plate we can demonstrate that they should fill half of their plate with rice and remaining half with foods from other varieties." Rexona







Begum, a pregnant woman in Uzirpur, expressed that "this is very easy to understand and memorize what should I eat with rice."

Several organizations have shown interest in using the food plate in their own nutrition education and counseling efforts, including FAO, which secured several thousand plates for its "Integrated Agriculture and Health-based Interventions for Improved Food and Nutrition Security in Selected Districts of Southern Bangladesh" project.

## **Expanding Use for Lactating Women**

In its final year, SHIKHA has been working with the Bangladesh government to explore opportunities for wider use of the tool. The Institute of Public Health Nutrition (IPHN) and the National Nutrition Services reviewed the plate in a technical review meeting on February 3, 2016. Experts at the meeting proposed that a similar plate be designed for both pregnant and lactating women, that the messages on the plate be more action-oriented, and that a few images of food on the plate be added or changed. They also recommended that the new plate be produced for nutrition educators at all agencies working in Bangladesh, including frontline workers of government agencies.

The plate was modified according to these recommendations and was discussed further on March 23, 2016, at a meeting of the MOHFW's Information Education and Technical Committee, headed by the additional secretary, Ms. Roksana Quader. The committee approved the modified plate and accompanying instructions for health and nutrition workers on how to use the plate for counseling, with only a few minor changes.

On May 22, 2016, the food plate for pregnant and lactating women and accompanying instructions were formally inaugurated and handed over to MOHFW officers at the district and sub-district levels. Dr. Binoy Krisna Biswas, divisional director of health services at the MOHFW, presided over the ceremony. Mr. Bashudev Ganguly, additional secretary of the MOHFW; Mr. Abdul Malek, joint secretary of the MOHFW; and Dr. Moudud Hossain, program manager of the National Nutrition Services were present as chief and special guests at the event, respectively.

The MOHFW and the National Nutrition Services are now planning to use the plate throughout Bangladesh. Nutrition projects from both government and nongovernmental agencies are also introducing the new, approved plate in their programs.

