
Bangladesh's Family Welfare Visitors: Getting Nutrition Messages to the Right Clients at the Right Time

By SPRING/Bangladesh



A Family Welfare Visitor uses mid-upper arm circumference (MUAC) tape to regularly screen the growth of children in her area.

"I am applying the knowledge gained from SPRING/Bangladesh's training and supportive supervision. I am enjoying this job because I am working in a position where I can really make a difference. It's a very satisfying feeling!"

**--Moshammat Dilruba,
Family Welfare Visitor, Betagi upazila, Barisal**

Bangladesh's Family Welfare Visitors (FWV) are the frontline providers responsible for addressing a range of health issues. Best known for their efforts to improve access to family planning services, they also provide pregnancy care and health services, such as growth monitoring and nutrition counseling, among other tasks. They are, therefore, a critical access point for families seeking basic health services.

FWVs are stationed primarily in remote areas at union health and family welfare centers (UHFWCs) throughout Bangladesh, under the Directorate General of Family Planning. Funded by the U.S. Agency for International Development (USAID), the Strengthening Partnerships, Results, and Innovations in Nutrition Globally (SPRING) project in Bangladesh is supporting FWVs who work in more than 300 UHFWCs in Khulna and Barisal divisions.

SPRING recently interviewed Moshammat Dilruba, an FWV from Betagi *upazila* in Barisal division who has received support from SPRING over the past two years. "I took part in a four-day SPRING training in June and July of 2014. The training was a big learning experience for me and I am continuing to reap the benefits from it," says Dilruba. Dilruba also receives regular supportive supervision visits from SPRING staff and her government supervisor to ensure that she is providing high-quality nutrition services and counseling to her clients.

Dilruba explains that the training has helped her to think about how to provide messages on nutrition and hand hygiene in a way that is contextualized and natural for the mothers: "I encourage them to wash their hands regularly, especially before eating

and after using the toilet. I also remind the mothers to wash their own hands before feeding their babies.”

Breastfeeding is a commonly discussed topic critical to the population SPRING/Bangladesh targets. Dilruba explained that she often has to clarify misconceptions on exclusive breastfeeding to her patients: “I tell them that exclusive breastfeeding for six months is the best approach. There is even no need for water. In addition to breast milk, it is important to include complementary foods from six months onwards.”

When the discussion shifts to proper growth, Dilruba takes out the mid-upper arm circumference (MUAC) tape from her handbag to tell us that she is regularly monitoring children’s growth and providing counseling based on the results. Dilruba sees 40 to 50 women a day, many of whom are pregnant, lactating, or caring for a small child. The knowledge she has gained about quality nutrition services and counseling has helped her get the right message to the right patients at the right time.

Dilruba enjoys high job satisfaction because she helps people in her own community. “I am enjoying this job because I am working in a position where I can really make a difference. It’s a very satisfying feeling!”

SPRING has trained over 300 FWVs like Dilruba since March 2012. SPRING uses the Government of Bangladesh’s basic nutrition curriculum to ensure



One of the union health and family welfare centers (UHFWC) that SPRING supports across Khulna and Barisal divisions.

that all frontline health workers follow standard practices and guidance on nutrition services and counseling. The training, coupled with supportive supervision visits and coordination meetings, provides FWVs with regular monitoring and coaching so that they can deliver quality nutrition services and counseling to families in these remote communities.

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