



A typical CLP (2.1) first tier core participant at baseline

The story of Habiza

Background

As a core participant of CLP 2.1 Habiza received a cow during the first phase of the CLP2 Asset Transfer Project (ATP). This is the first cohort of six, which will gradually rollout CLP's package of support to core participating households between 2010 and 2016.

The Story of Habiza

Abandoned by her husband when she was eight months pregnant, Habiza (30) now lives with her son (6) in a small jute stick hut in Parul (Fulchhari Upazila, Gaibandha district). Habiza's son attends one of BRAC's primary schools, for which she pays 50-100 Taka per month.

Socio-economic Status

- The household has no tube well or sanitary latrine.
- The household is raised during CLP1.
- Before joining CLP, the household had no assets that could be of real value.
- In May 2010, household income was 300 Taka (in-kind). They spent 80 Taka on health, oil and spices.
- The household has no savings.



Habiza with her 6 year old son in front of her house.

Before joining CLP, Habiza and her son faced severe poverty and frequently suffered hunger. In May 2010, Habiza received a cow from CLP, at the cost of 15,500 Taka. She also received vegetable seeds for her homestead garden and a CLP poultry model house for her 4 poultry birds. As a result, Habiza is more optimistic about the future. She hopes that her cow will give birth to several calves, which will produce enough milk to consume as well as sell. In the long term she plans to sell her cow for an expected 25,000-30,000 Taka, which she would invest in land. However, Habiza's main worry at the moment is her son's health. He suffers from an eye disease, which forces Habiza to spend most of her money on treatment, leaving her with no opportunity to save.

Nutritional Status

- Habiza has a BMI* of 22.2 which means that she has a healthy height and weight balance as the normal BMI is 18.5+.
- Habiza's haemoglobin level is 125 g/l, which means that she is not anaemic** as the anaemia threshold is 120 g/l.
- The asset transfer baseline data show that Habiza and her son cope with food shortages by eating less frequently and less quantity of food six days a week, which means that their daily food consumption is usually insufficient.
- The survey reports that the household members eat rice regularly and leafy vegetables three days a week and oil four days a week when they can afford to.

* Body Mass Index (BMI): is calculated as weight (kg) divided by height (m²).

**anaemia is an iron deficiency, measured from the haemoglobin levels in a blood sample (grams per litre).

Since their participation in CLP, Habiza and her son eat larger meals. However, they are still unable to eat three meals a day on a regular basis or to diversify their diet. Their main obstacle is Habiza's son's deteriorating health. As Habiza explains: "We continue to eat insufficient food, as my son is sick and I am trying to pay for his treatment. I still don't have enough money to go to a good doctor with him. During the last 4 weeks I spent 350 Taka on medicines, but my son's condition is getting worse every day." Habiza adds: "How can I move forward without providing my child with proper health care?"



Empowerment Status

- Although Habiza and her son are eligible for the Government Vulnerable Group Development (VGD) and Vulnerable Group Feeding (VGF) card, they have not received this support, as they are unable to pay the bribes demanded by officials.
- The household knows how to access and have accessed primary education service, an NGO health worker, village doctors and birth registration but they don't know how to access the secondary education, government health workers, death registration or government livestock and agriculture extension services.
- Habiza is not a member of any social or community group.
- Habiza is aware of the existence of a law against dowry and domestic violence and knows the legal age of marriage for girls but not for boys.
- Habiza is very confident in talking to men who are not a member of her family or village and taking action against violence/abuse from people outside her household; she does not feel confident about visiting a doctor, going outside of her village alone, participating in a village *shalish** or taking a loan. She is quite confident to make small and large economic decisions alone and to take action against violence/abuse from other family members.

* *Shalish* is an informal village level judicial system in which village elders and the concerned parties gather to resolve local disputes.



Habiza in her new homestead garden

Despite her grim situation, Habiza feels respected by her community. According to her, this can be explained by the fact that she teaches 20 to 30 people in her community to recite the Quran. Aside from fulfilling her religious duty, Habiza believes that she is an honest person who has never harmed anyone. Nevertheless, she believes that if her economic situation improves, people would treat her even better. She is determined to overcome these challenges independently.

Tajmary Akter
Intern, Innovation Monitoring and Learning Division.

This case study is the first in a series of longitudinal case studies, which will follow the same households' progress under CLP2 until 2016. The information draws upon baseline data collected in April/ May 2010, in addition to an interview conducted in September 2010. The interview took place shortly after the first asset transfer and the commencement of CLP