Government versus NGO efficiency, Bangladesh

Summary of published paper

It is often assumed that during emergencies, nutrition and food interventions can be more efficiently managed by NGOs than by government. A recent study on an integrated nutrition programme in Bangladesh may challenge this assumption, even though the programme was conducted in a non-emergency setting. The study also found that the supplementary feeding component of the intervention was very costly in terms of providing calories. Given the limited data in the public domain on the costs (and cost-efficiency) of emergency supplementary feeding programmes, the findings may be of interest to emergency programme planners.

The Bangladesh Integrated Nutrition Programme (BINP) was adopted to improve the nutritional status of the population, especially of women and children, through community based nutrition interventions. The community based nutrition component focuses on growth monitoring of children, dissemination of nutrition-related information and supervised supplementary feeding of target women and children in Community Nutrition Centres (CNCs) at village level. The government has adopted the National Nutrition Programme (NNP) based on experiences and lessons learned from the BINP, and intends to provide a similar mix of services to those being delivered under the BINP. Scaling up the activities to the whole country will cost approximately 150 million dollars a year.

The BINP experimented with two models of delivery, one using government management structures and the second using non-governmental organisations (NGOs) working in the local community. A recent study has compared the efficiency of the government of Bangladesh (GOB) and NGO management in the provision of nutrition services and involved a detailed costing to estimate cost of delivering nutrition services from the CNCs. The number of individuals enrolled, the number actually participating in the programme, and person-days of service delivered were used as effectiveness measures.

Thirty-five CNCs were randomly selected from five BINP areas, of which 21 were in GOB-run areas and 14 in NGO-run areas. The cost of providing nutrition services per enrollee was US$24.43 for GOB-run CNCs and US$29.78 for NGO-run CNCs.

The analysis implies that the NGO facilities are not more efficient in the delivery of nutrition services when cost per person/days of service delivered is considered. One potential criticism of this type of comparison is that it assumes enrolment and participation without looking into potential mis-targeting. If the expected enrolment is calculated by using prevalence of malnutrition rates found by the BINP, it is clear that enrolment rates were lower in GOB facilities and higher in NGO facilities than otherwise expected for rural Bangladesh. However, enrolment does not equal participation. Re-estimating the cost-effectiveness measures with expected enrolment numbers makes the NGO facilities even less efficient compared to GOB facilities.

On average, the BINP delivered food supplementation of 480 kcals per participant at a cost of about US$0.25 per day. Allowing for administration and management costs, the actual food cost becomes US$0.20 per participant per day. If the project were to use this amount of money to buy rice from the local market, the calorie content of the rice would be more than 2000 kcals. Unless the food supplementation process generates other types of benefit, such a high level of cost cannot be justified. The study authors conclude that even if other benefits such as nutrition education and community involvement are generated, policy makers should compare a programmes' relative efficiency and effectiveness with its separable components, to determine whether concentrating on specific components will generate higher levels of social benefits per dollar spent.

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