



Impact Report 2023

From Evidence to Scale

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**Kokeb Berhanu,
Country Director Ethiopia:**

“This year has been a journey of progress amidst challenges. The Max Foundation Ethiopia team, alongside our partners, proudly celebrate the milestones achieved thus far – extending WASH access to 7,700 people, providing 33,000 with food and nutrition services, engaging 96,000 caregivers in behavioural change with improved WASH and improved nutrition actions, and expanding the Healthy Village Programme into the Tigray Region of Ethiopia, where interventions are critically needed post-conflict.

We have embraced adaptability and learned a great deal from navigating through the challenges, ranging from high inflation to conflict. Grateful to the Embassy of the Kingdom of Netherlands, which stands as more than a donor; they are indeed a partner continuously offering us the flexibility and the collaborative spirit to co-create solutions.

What I know for sure is that our challenges do not define us; but rather present an opportunity to deliver innovatively in 2024 and beyond, driven by our ambition of a healthy start for every child.”



**Riad Imam Mahmud,
Country Co-director Bangladesh:**

“We embrace the power of innovation, data and entrepreneurship, as the catalysts of progress and change. We aim to go beyond the boundaries of convention and dare to envision a world where the challenges of healthy growth of children are met with ingenuity and determination.

We strive to raise awareness globally, ensuring that every child in every country thrives, without facing the lasting impact of stunting. Let’s dream boldly, create passionately, and unite our ideas to pave a brighter future for all children.”



**Tariqul Islam,
Country Co-Director Bangladesh:**

“What instils pride in me about Max Foundation is its effectiveness in global development stems from its ability to cultivate community-based entrepreneurs, provide them with innovative business strategies, and thereby contribute meaningfully to early childhood health through sustainable and scalable development initiatives.”

Max Foundation

in 2023

A year of shifts

In 2023 we made headway despite significant challenges. Droughts and floods caused by climate change increasingly affected food security as well as water, sanitation, and hygiene (WASH) facilities, while worldwide conflicts caused disruptions of supply chains and rising prices.

Civil conflict in Ethiopia led to internal displacement, travel restrictions, and the destruction of critical infrastructure and social service institutions. This has seriously hampered our programme implementation and forced the country team in Ethiopia to adapt to the continuously changing circumstances.

The political dynamics within the Netherlands have been shifting too, with implications for aid allocation and policy frameworks.

As political landscapes continue to evolve, our ability to remain adaptable has become even more crucial. It has therefore also become increasingly important to demonstrate our effectiveness and create evidenced approaches, emphasized in Max Foundation's core approach: **from evidence to scale**.

This approach is articulated in our new, comprehensive Max Foundation strategy (2024-2030), developed in 2023. Max Foundation will position itself as 'design lab': crafting, evidencing and scaling innovative solutions in WASH, nutrition, food security and maternal health, with the ultimate goal of improved child health.

 *Dehininet Gizachew with her ten month old son in East Gojam, Ethiopia.*

Innovation and entrepreneurship

In 2023, we found that **business-driven solutions** work! As well as increasing access by working with entrepreneurs and local government, Max Foundation aims to foster an aware customer base willing to invest in affordable and safe water and sanitation products and services. In 2023, households themselves invested more than **1.7 million euros** in WASH and nutrition related products and services.

In turn, this motivates entrepreneurs to keep their business going. In a recent survey amongst female micro-entrepreneurs in Bangladesh – selling hygiene, health, and nutrition products and services – **86% of respondents' businesses were still active** two years after Max Foundation's programme ended!

Our commitment to business-minded solutions was further evidenced by **the inauguration of Max TapWater**, our social water enterprise in Bangladesh, which significantly expanded access to safe and affordable tap water with 40 piped water grids operational in 2023. This serves 7,423 people with piped water at home.

We also received the **prestigious Rotman Prize for Innovation** in 2023. This award by Grand Challenges Canada, one of the largest impact-first investors in Canada, honours the innovation with the largest **sustainable increase in lives saved or lives improved** over the past year.

The Rotman Family Foundation highlighted the importance of business in building a better society: *"by working closely with local entrepreneurs, suppliers, NGOs, community members and governments, the Healthy Village approach has demonstrated that everyone has a role to play in saving and improving children's lives."*



 Micro-entrepreneur showing one of the products she sells in Bangladesh.

Learning and adaptation

We believe that through cooperative learning, real systems change can be brought about. And we're making steps! In Ethiopia, the government's digital health system has now officially included height in its stunting measurement amongst children – where they initially only measured weight. Our Ethiopian team also organised [a climate resilience learning event](#), where 50 stakeholders from various sectors developed roadmaps to address climate-related challenges.

We believe in the power of these learnings to adapt our approaches to different contexts, and maximise the impact we can create. The Healthy Village Urban programme in Bangladesh for instance, aims to **adapt our successful Healthy Village approach** → **which led to a 50% decrease of stunting amongst children in rural areas of Bangladesh** from rural to (peri-)urban settings.

In 2023 we also began exploring opportunities of bringing the Healthy Village approach to a new country. In September, we visited Burundi to assess local needs and discuss how our approach could be implemented there, particularly given the country's high rates of stunting (up to 60% in some areas – which are the highest rates in the world). We believe that our community-driven approach, emphasizing learning and entrepreneurship for sustainable change, could have a significant impact.



 Primary school student in Southern Bangladesh

At the same time, we continue to look inward. After the midterm review of our consortium Right2Grow took place in 2023, the project team took deliberate actions to further align its governance with **shift-the-power principles**. Concretely this means that actors in the countries where we implement are now in the lead, and learning for greater impact is better streamlined.

We extend our heartfelt gratitude to everyone who contributed to Max Foundation's endeavours in 2023. From our dedicated donors who sustain our mission, to our colleagues around the world. Special thanks to our partner organizations for their great work on the ground, and to the volunteers and interns who generously dedicate their time to our cause. Lastly, we express our appreciation to all stakeholders, including government representatives, local entrepreneurs, communities, and households, for their collaboration in working towards ensuring a healthy start for every child. Your support and partnership are invaluable for making a positive impact in the lives of children.

We hope you'll enjoy reading this impact report. We are eager to connect, collaborate, and advance our efforts together in 2024. Whether it's through sharing learnings or joint initiatives, we look forward to working with you to further scale effective approaches and make a meaningful difference in the year ahead.



Joke Le Poole
Co-director



Marjolijn Wilmink
Co-director

What's at stake?



Child Health

Despite positive trends in child health worldwide, progress is too slow. Undernutrition remains a major global public health challenge. In 2022, an estimated 22% of children under 5 were → **stunted*** due to chronic undernutrition. In Ethiopia the average was 39%, and in Bangladesh this was 26%.

45% of deaths among children under 5 were linked to undernutrition (which includes stunting, wasting and underweight): it increases the risk of infectious diseases, and children who are undernourished are more likely to die from common childhood illnesses such as pneumonia, diarrhoea, and malaria. It can lead to long-term health problems, including stunted growth, cognitive impairment, and reduced immunity.



*A child affected by stunting is too short for their age, and can suffer severe and irreversible physical and cognitive damage. The devastating consequences of stunting last a lifetime and are found to even affect the next generation.

Addressing undernutrition, and specifically stunting, is critical for a healthy start in life! Solving it requires a multi-faceted approach, including:



Nutrition

Nutritional intake is the most obvious factor: access to a diverse and nutritious diet (both how much and what you eat) is essential for healthy growth and development. However, food and nutrition security are increasingly fragile due to extreme weather events, climate change and other shocks.

Population suffering from undernourishment:

11% in Bangladesh

22% in Ethiopia (undernourishment has decreased in the last couple of years, but still affects the population)

Population experiencing moderate or severe food insecurity:

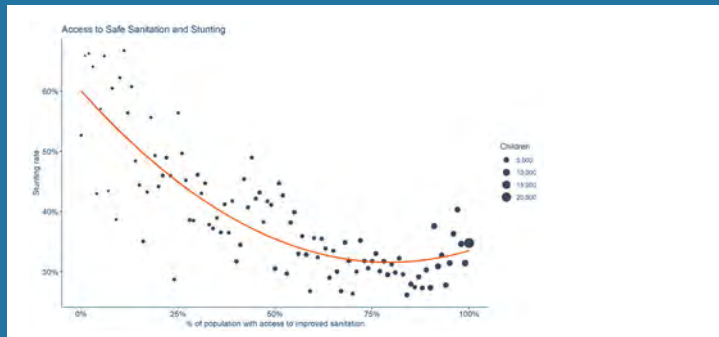
31% in Bangladesh

58% in Ethiopia



Water, sanitation and hygiene (WASH)

A critical factor in the problem of stunting is the negative effect that the lack of safe WASH has on child health. Our data in Bangladesh showed a very direct correlation between improving community-wide levels of sanitation and stunting reduction.



Poor access to WASH contributes to diseases and infections, which affect the body's ability to absorb nutrients. Unsafe water and hygiene conditions are still responsible for the deaths of around 1,000 children under 5 every day.

People having access to safely managed drinking water:

59% in Bangladesh
13% in Ethiopia

People having access to safely managed or basic sanitation services:

31% in Bangladesh
9% in Ethiopia



Maternal and adolescent Health

To prevent undernutrition in children, we must also address it in **adolescent girls and women**. It is estimated that of the stunted children under 2 worldwide, about half become stunted in the womb and the first 6 months of life, when a child is fully dependent on the mother for nutrition. There is a window of opportunity to impact child **growth in the critical first 1,000 days, from conception to age 2**.

2 million neonatal deaths occur annually, and over 80% of these can be easily prevented or treated.

We can most effectively work towards a healthy start for every child, by facilitating:



adequate maternal nutrition before/during pregnancy and while breastfeeding;



safe, nutritious, and diverse foods in early childhood, and improved agriculture;



a healthy environment, including access to basic water, hygiene and sanitation services and products.

Did you know...



Women and girls are disproportionately affected by lack of access to WASH; in over 85% of households in Ethiopia, they are the ones to collect water. For half the households, a single round trip takes over 30 minutes.

Women and girls are also affected more by food insecurity. **Between 2019 and 2021 this global gender gap more than doubled**, from 49 million more girls & women suffering from food insecurity than boys & men, to **126 million** globally, as they were disproportionately affected by the impact of the COVID-19 pandemic on livelihoods, income and access to nutritious food.



Weather-related disasters have increased by almost 35% since the 1990s. Climate change exacerbates water and food insecurity, especially in rural and poor communities.

Increased temperatures coupled with decreased rainfall will cause an additional **4.8 million children to be under-nourished by 2025**. The increase in flooding also increases the disease burden on everyone in the community, especially the most vulnerable such as children.

 *Woman collecting water in Southern Bangladesh*



What do we do about it?

To achieve our ambitious goals on child health, our strategy comprises four interconnected approaches. Developed over years and informed by our experience, this strategy outlines how we'll drive transformation through 2030. These four approaches provide a roadmap for our efforts, ensuring consistency while producing significant results.



 Father plotting his child's growth in East Gojam, Ethiopia

1 Integrating for impact

The determinants of child health are multifaceted and so are our approaches and programmes. We integrate components of Water, Sanitation & Hygiene (WASH), Food & Nutrition Security (FNS), and Maternal & Adolescent Health (MAH), along with gender equality, social inclusion, and climate change resilience through a nexus approach. Tailoring interventions to local contexts, we prioritize based on needs, potentially integrating additional elements where relevant like urbanization, conflict fragility, or digitalization.

In this way we drive sustainable change: turning the strong effects of intergenerational health into a positive cycle, with each generation of healthy children raising a new generation of even healthier children in the future.



 A Community Support Group meeting in Bangladesh

2 Strengthening systems for resilience

We aim not only to implement projects but also to catalyse systemic change for maximum impact. Sustainable impact requires all stakeholders within the system, including caregivers, entrepreneurs, civil society organizations, financial institutions, and the public sector. By empowering and enhancing their roles, capacities, and relationships, we foster functional systems that support child health.

Embracing the adage “It takes a village to raise a child,” we collaborate with all levels of government to cultivate an environment conducive to child health. We facilitate favourable conditions for entrepreneurs and communities to voice their concerns, devise solutions, and collectively improve their well-being, through informing and engaging officials from local to national levels.



 *Muluwork selling nutritional powder at her shop in East Gojam, Ethiopia*

3 Applying a market system approach

Max Foundation views entrepreneurs as agents of change. We influence the actions and incentives of businesses and market actors to achieve lasting outcomes for our primary beneficiaries: children and their communities.

We cultivate the demand for health products and services within communities, guiding individuals to invest in these essentials. To meet the increased demand, we support micro- and small enterprises to supply affordable health-related goods and services locally, addressing supply-side challenges to facilitate their expansion and integration into supply chains.

Collaborating with financial institutions, we facilitate an enabling environment for entrepreneurship, offering financial instruments to fuel growth and sustainability. Additionally, we innovate business solutions to adapt to changing circumstances, transitioning successful models into scalable social enterprises like Max TapWater.



 *Two children outside in Patuakhali, Bangladesh*

4 Building evidence for scale

Through every programme we build and contribute to evidence on what works (and what does not work) in improving child health, which we then also share with others, to increase our combined impact. For that reason, we put a lot of emphasis on continuous learning.

By carefully managing an iterative process of designing, implementing, innovating, learning, collecting evidence and disseminating our lessons learnt with stakeholders, we aim to improve our interventions, share effective ones with the sector, and convince other stakeholders to replicate and scale good practices.

We closely measure the effects – positive/negative, intended/unintended – our programmes have on stakeholders. By analysing these data, we strengthen learnings and help identify areas for improvement. These data will help us test hypotheses and build the evidence base on what works.

A healthy start for every child

Mission

A healthy start for every child in the most effective and long-lasting way

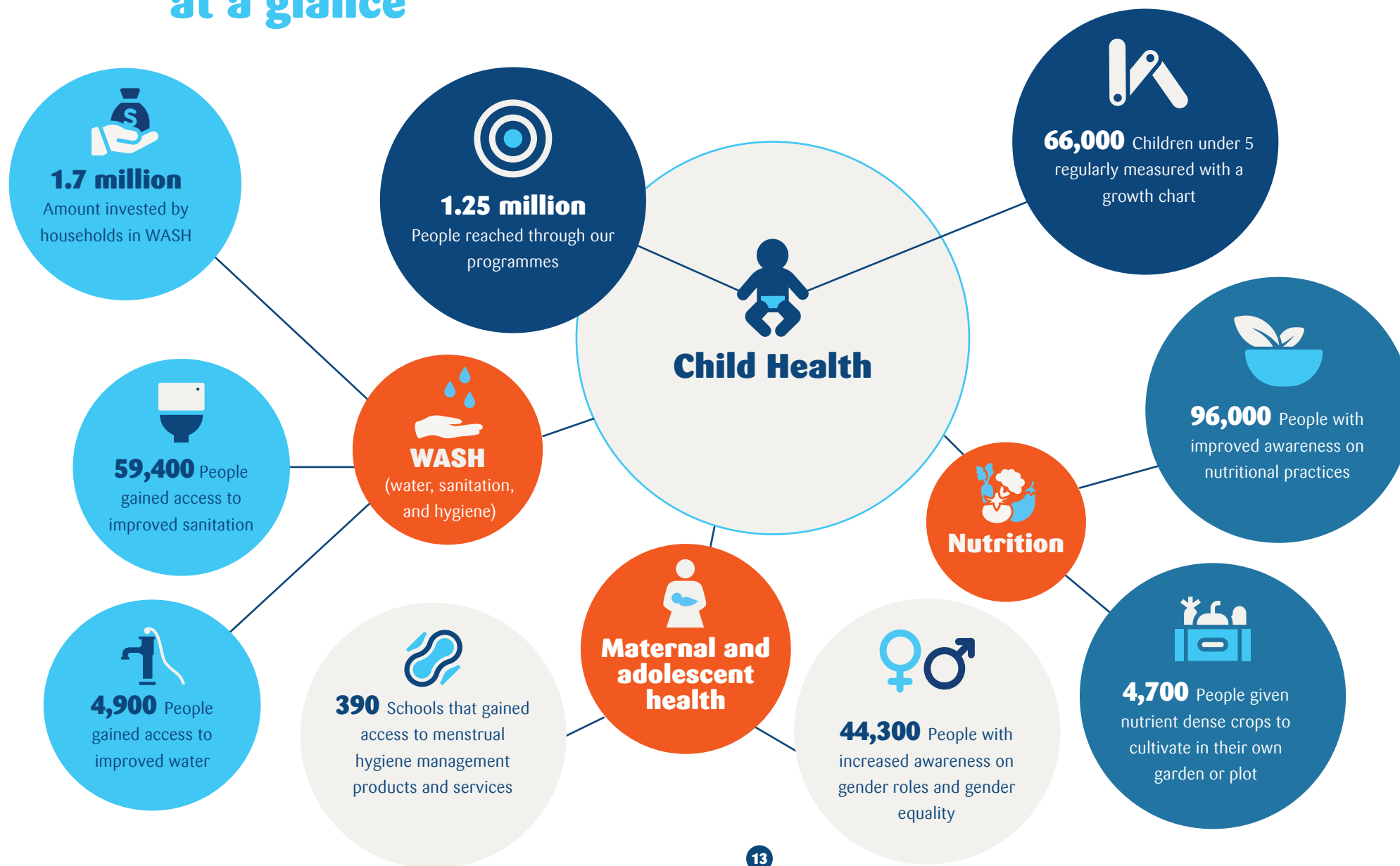
Vision

A world where easily preventable diseases are no longer a cause for child mortality

 School children in Southern Bangladesh

2023

at a glance



15

team members in Ethiopia (including 1 Young Expert)



10

team members Max Tapwater



3

interns and volunteers



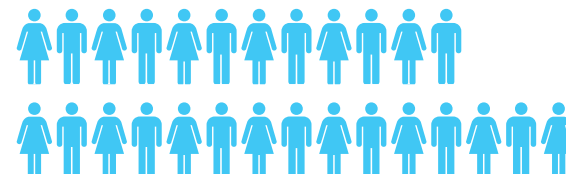
1

Young Expert, through the Young Expert Programme (YEP), supported by the Dutch government



27

team members in Bangladesh



13

team members in the Netherlands



5

board members



191

implementation staff (from partner NGOs in Bangladesh and Ethiopia)

January



We updated our Theory of Change, to include how we engage with stakeholders to scale our approaches. Find it on our [website](#)!

February

A Joint Progress Monitoring visit with local government officials took place in Ethiopia.

March



- We celebrated the [official inauguration](#) of Max TapWater in Bangladesh!
- Our consortium Right2Grow spoke on the importance of community involvement at an event during the UN Water Week in New York

May

At the 'All systems Connect' conference in The Hague, we presented at three different sessions: as Max TapWater; with our consortium Right2Grow; and as Max Foundation on collaborative WASH and Health systems.

April



We welcomed a new board member on (urban) programmes, data & partnerships: Claudio Acioli!

June

Right2Grow started the midterm data collection process in all six countries! This data will help us prove why amplifying community voices is effective in the journey towards zero undernutrition.

July



We received a new grant from Grand Challenges Canada for our Healthy Village Urban programme.

August



- The CEO of our social enterprise Max TapWater, Saiful Islam, pitched at World Water Week in Stockholm!
- Max Foundation presented at the Agenda for Change breakfast

September



Co-CEO Joke Le Poole and Senior Portfolio Manager Leen Noltes visited Burundi and Uganda as part of a scoping visit to identify the potential for new partnerships and programme implementation.

October

- Our consortium Right2Grow hosted an event in The Hague, focusing on the role of women in local advocacy, and the impact of an integrated approach in child health
- We presented our programmes' impact at the MicroNutrient Forum

November



- Max Foundation Ethiopia organised a [climate resilience learning workshop](#) with Plan International Ethiopia
- We presented our Healthy Village findings at the R4NUT (Research for Nutrition) conference in Paris
- Right2Grow hosted a Global Learning Week in Uganda, attended by Max Foundation staff from the Netherlands, Ethiopia, and Bangladesh

December

- **Max Foundation wins the prestigious [Rotman innovation of the year award!](#)**
- We published our new [strategy](#), for 2024 – 2030

Hard

learnings

A

Adaptive management for Healthy Village in Ethiopia



 Tiringo with her son at her home in East Gojam, Ethiopia

In 2023 our Healthy Village Programme team in Ethiopia encountered substantial obstacles. From the outset, challenges such as limited groundwater availability, scarcities in essential inputs, and the skyrocketing prices of construction materials presented barriers. Furthermore, the escalation of conflict in the Amhara region from the latter half of the year, leading to the declaration of a state of emergency.

This volatile situation tested our ability to implement and gave rise to numerous complications. Transportation restrictions, cash transaction limitations, bans on public gatherings, and internet access constraints, coupled with the closure of local government structures and educational institutions, disrupted our operations significantly. Moreover, the conflict inflicted damage upon health facilities, further hindering our progress.

Our consortium partners demonstrated remarkable adaptability, successfully executing the majority of the planned activities. Additionally, the Embassy of the Kingdom of the Netherlands displayed commendable flexibility, understanding, and support throughout, playing a pivotal role in sustaining the project in challenging circumstances. Furthermore, governmental entities at various levels exhibited steadfast commitment to facilitating our work, from federal to local level. The community's engagement was equally commendable, evidenced by their substantial contributions of materials and labour towards the construction of WASH facilities.

Despite the challenges, we (with our partners) could still achieve most of our 2023 objectives. This underscores the resilience of the team and the communities where we work, and has provided invaluable insights for future interventions.

B Max Tap Water: balancing social impact and return on investment



 *Bristi Khatun cleaning with her tap installed by Max TapWater*

In 2021, we launched Max TapWater in Bangladesh, a social enterprise aimed at providing rural households with accessible, safe, and affordable tap water. Through the construction of mini grids for piped water distribution and connection to homes, Max TapWater ensures people have reliable access to safe water, with households paying a fair tariff for usage (which is recently supported by water meters). All profits generated by Max TapWater are reinvested to maintain and expand piped water grids, extending the reach of safe water provision to more people.

Balancing the pursuit of programme targets with the establishment of a sustainable business model is posing a challenge, as achieving high impact numbers (# of new grids and households getting access to safe water) may conflict with Max TapWater's needs for obtaining long-lasting paying customers in its work areas. Building new grids is often not the challenge, rather finding the right places with enough customers who want to pay for a safe water connection long term. Water is a public good which is often expected to be provided for free, especially when NGOs are involved.

Max TapWater is committed to sustainable use of groundwater and therefore piloted and introduced household level water meters – as water consumption by individual households proved to be too high in some cases. Following installation of meters, people became more accountable for their water consumption and hence, wastage of water reduced significantly. In 2023 Max TapWater shifted from fixed tariffs for households (based on household size) to piped water tariffs based on real consumption. The consumption-based tariffs have not been easily accepted by all Max TapWater customers. To overcome this, Max TapWater has implemented various measures, including awareness raising on the importance of avoiding water wastage and high water consumption, and the opportunity for customers created by the new consumption-based tariffs, to pay less if they manage to reduce their water consumption.

Prices of construction materials and labour increased dramatically, which has increased costs significantly and affected the financial business model of MaxTapwater. These dilemmas underscore the challenges faced by social enterprises in and outside Bangladesh. Max Foundation is keen to link up with learning platforms with other social enterprises operating in the public goods space – not only discuss the key challenges of social enterprises, but to co-create concrete ways forward.

C

Shifting the Power: how to walk the talk



 Development Agents under the government structure in Ethiopia, teaching farmers about natural resource conservation

Shifting the Power is a key approach of the Right2Grow programme and should also be reflected in the global governance structure. Right2Grow has indeed been successful in establishing an effective partnership, enhancing capacity and joint decision making on key programme issues, but the consortium experienced some coordination and governance hurdles in the first 2.5 years of the programme.

This was confirmed in the mid-term review that took place in 2023, and as a result the consortium drastically adjusted its governance and coordination structure in 2023. This has helped to improve and simplify decision-making and coordination. It is now a more country-led structure, aligned with the Shift the Power approach.

Local partners in implementation countries are now driving the decision-making processes at multiple levels, including strategic planning, technical implementation, operational decisions, and representation in Country Steering Committees. This demonstrates a tangible shift of power from international to local actors. In the six programme countries, Right2Grow is implemented by a total of 45 community based organisations, who have themselves now engaged a total of 1,108 local community-based organisations.

Moreover, capacity building sessions, for example training local community-based organisations in budget tracking has empowered them to advocate for better domestic financing of nutrition and WASH.

Our work in action

- 1 Integrating for impact
- 2 Applying a market system approach
- 3 Strengthening systems
- 4 Building evidence for scale

Our work in action

1 Integrating for impact

Integrating for impact

Applying a market system approach

Strengthening systems

Building evidence for scale



The world's problems are multifaceted, and so are our approaches. This is why we integrate them for maximum impact.

Stunting is a fitting example of a multifaceted problem, as it is influenced by three main factors:

1. nutritional intake of the mother as well as the child,
2. the body's capacity to absorb these nutrients, and
3. health of the mother and child.

Preventing stunting is done most effectively by addressing these critical factors simultaneously.

We adapt as needed, adding elements where they are critical for lasting success, such as food security and climate resilience.

 Health extension worker measures the circumference of a child's arm in Ethiopia

How did we support communities in integrating for impact in 2023?



With frequent communal child growth monitoring sessions; caregivers are actively involved in tracking their children's health and development. This is a powerful trigger for behaviour change in WASH, nutrition and health practices, and we combine it with education on healthy behaviours, as well as strengthening demand for and access to products and services.

more than
66,000
people reached
under 5 were
monitored

These monitoring sessions also provide a wealth of growth data on a large (statistically relevant) number of children!

more than
96,000
people reached
with nutrition
awareness
campaigns



We support farmers and households to increase their crop production and create homestead gardens for fruits and vegetables, to lower the costs of healthy and nutritious meals for their families.



more than
59,400
people reached
with improved
sanitation

We train local sanitation entrepreneurs, who sell and install latrines to households at an affordable, locally determined price. Trained 'sweepers' empty the latrines safely, to minimise risk of contamination.



School WASH is indispensable for effective learning, enrolment, and retention of girls. In our programme areas, gaps were identified such as unclean school latrines, lack of handwashing and menstrual hygiene management facilities, resulting in school children resorting to open defecation, and girls avoiding school during menstruation. We ensured access to sanitary napkins supplied by local entrepreneurs and sales agents, as well as providing (free) sanitary napkins in schools and healthcare facilities.

more than
390
schools reached
with menstrual
health management
training



Our work in action

Integrating for impact

Integrating for impact in practice

Bushra is a healthy 5-year-old girl. And if you were to meet her today, you probably would not expect that she had faced health challenges in her earlier years. Born in the Patuakhali district in the southern coastal belt of Bangladesh, she is the daughter of Narul, a small-scale poultry farmer, and Mahinur, who runs the household. For a long time, residents from Bushra's village relied on unsafe drinking water. Private and secure latrines were rare and regular handwashing with soap was not a standard practice. As a result, waterborne diseases such as diarrhoea continued to negatively affect the health of young children, including Bushra, who often fell ill during the early years of her life. At the age of 2, her weight and height were measured for the first time during one of the courtyard sessions. It was then that her parents learned that she was too short for her age – a condition known as stunting.

Integrated community action

Upon discovering that Bushra was stunted, her mother Mahinur began attending the courtyard sessions regularly. There, essential WASH and nutrition practices were promoted together, which helped Mahinur identify the underlying causes of her daughter's undernutrition. She received information on increasing dietary diversity, safe disposal of faeces, regular handwashing and safe food preparation and storage. Plus, where possible, parents and caregivers exchanged information through peer-to-peer learning. The diet of a healthy child living in the same community served as a model for improving diets among undernourished children. This shows that the ingredients of a healthy diet can be sourced from best practices and resources that are locally available.

As a result of the training, Mahinur set up basic handwashing basins in both her kitchen and her dining area – constructed and installed by local entrepreneurs using locally

 *Woman washing her face with Max TapWater tap in Bangladesh*

sourced materials. The entire family now washes their hands with water and soap at least five times a day. Bushra's growth was regularly measured during community growth monitoring sessions, where Mahinur also received counselling tailored to her daughter's growth trend. By 3 years of age, Bushra was no longer stunted. Her mother proudly shares:

“Now Bushra practices handwashing and hygiene regularly and she is studying attentively. It really made a difference in her life.”

The Right2Grow programme has supported 63,254 households in the Patuakhali district to enhance their health and hygiene practices. This is helping to reduce the incidence of waterborne diseases like diarrhoea in the area.

What gets measured, gets noticed

In the Right2Grow programme, the wealth of growth data that is collected during GMP (Growth Monitoring and Promotion) sessions is used for decision-making and accountability at the individual, community and national level. By combining data from children living in the same community, issues become more visible and better understood. Growth data can serve as compelling evidence to support communities in advocating for improved service delivery. As indicated by a staff member from Max Foundation Bangladesh: *“Child growth monitoring can be a trigger for community action on WASH and nutrition. With the right systems in place, this can lead to powerful local knowledge, showing people that they can advocate for improvements themselves.”*

An even stronger case can be made when data on children's nutritional status is supported by financial evidence on public WASH and nutrition spending. Through workshops on budget monitoring and expenditure tracking (BMET), Right2Grow

supports communities and local civil society to track financial investments in nutrition and WASH, and influence future decision-making in the public sector.

According to the Scaling Up Nutrition (SUN) Movement, visibility about where public investments are being made is a crucial first step in engaging across sectors. By fostering more open dialogue about spending on WASH and nutrition, countries will discover greater efficiencies between WASH and nutrition programmes, maximising value for money and delivering more effective services to communities.

Adopting a multisectoral approach to reduce the interconnected drivers of undernutrition requires effective coordination. When resources and expertise between interlinked sectors such as WASH and nutrition are bundled, nutrition impacts can be maximised. Right2Grow promotes collaboration across sectors to break down the silos between WASH and nutrition actors, who typically operate with separate budgets and policies to provide services.



 Bushra with her mother Mahinur Begum in Bangladesh

**Text taken and adapted from the Right2Grow article: [‘Bridging the Silos’](#)*

Programme factsheet



Programme aim:

The consortium uses a multisectoral, community-led approach that integrates WASH and nutrition actions to ensure that every child can reach their full potential. In the journey towards zero undernutrition and zero people without access to WASH, the voices of communities and civil society organisations are crucial. With Right2Grow, we help to create the right conditions for people to raise their voices, so they can advocate for their rights to fair and equitable service provision. This includes support for civil society organisations, as well as for local government. Furthermore, we advocate at national level for better policies to improve undernutrition at children, targeting both WASH and nutrition.

Partners:

A Strategic Partnership with Action Against Hunger, CEGAA South Africa, the Hunger Project, Save the Children, and World Vision

In Bangladesh we work with the local partner Society Development Agency (SDA), and in Ethiopia with the Organization for Rehabilitation and Development in Amhara (ORDA).

Location:

Right2Grow is active in Bangladesh, Burkina Faso, Ethiopia, Mali, South Sudan, and Uganda. Max Foundation is active in Ethiopia and Bangladesh.



Our work in action

2 Applying a market system approach

Integrating for impact

Applying a market system approach

Strengthening systems

Building evidence for scale



Max Foundation champions entrepreneurs as catalysts for positive change. We influence businesses and market players to deliver lasting benefits for our primary stakeholders: children and their communities.

We create demand for healthy products and services in communities through behaviour change and education campaigns. Our experience and data show people will pay for goods and services that improve their lives once they see the benefits. Simultaneously, we support supply chain actors, aiming to enhance the usability, accessibility and affordability of healthy products and services. We do this by training and supporting entrepreneurs, who also help drive demand via product promotion. This way, local entrepreneurs become the catalysts for change.

Creating self-sustaining market systems, which align the interests of all stakeholders, is key to long-lasting impact.

 *Entrepreneurship association members present their plans, progress, and business models*

How did we support a market systems approach in 2023?



Female micro-entrepreneurs living in the communities they work in are trained by Max Foundation to extend their supply, with goods ranging from menstrual hygiene products, to soap, to nutrient-enriched foods. In 2023, 763 entrepreneurs were involved in our programmes.

more than
763
entrepreneurs were
involved in our
programmes

In a recent survey of our previous programme areas, 86% of respondents were still active as micro-entrepreneurs two years after Max Foundation's programme ended!

34

active entrepreneurship
associations in our
programme areas



We also help these entrepreneurs to form associations through which they can more easily negotiate with local governments, as well as suppliers and (micro) finance institutions. Sweepers, who clean latrines, and sanitation entrepreneurs, who produce sanitation hardware, have also formed their own associations with our support.



1.7 million
being invested by
households in WASH
and nutrition

We helped increase household investments in WASH products by increasing both supply and demand: supply through training of entrepreneurs, and demand by creating an aware customer base that is willing to invest in affordable and safe water and sanitation products and services because of the health benefits - but also other motivators such as convenience and status.



Our social enterprise spin-off Max TapWater connects household in rural Bangladesh with safe and affordable running water at home through piped water grids that bring safe water from a deep tube well straight to people's homes. In the upcoming 3 years, we aim to provide access to tap water for 20,000 people in Bangladesh. In 2023, Max TapWater built 20 new piped water grids.

Max TapWater built
20
new piped
water grids



Applying a market system approach

Applying a market system approach in practice

Panna Akter is a mother of two, living with her husband, Nuruzzaman, who works as a pesticide vendor in the nearby market. Panna is a Community Support Group (CSG) president, elected by fellow committee members, and thus plays a crucial role in her community's development. She organizes meetings within the community and monitors the progress of courtyard sessions.

Their family lacked access to a safe water supply in their house, necessitating water collection from distant sources. Due to their economic hardship, they were unable to afford a safe water source such as a deep tube well (DTW). During periods of illness, acquiring sufficient water posed a significant challenge, often requiring considerable time and effort. At night and during the rainy season, Panna often resorted to using pond water near her home, which posed health risks due to its impurities. Consequently, her family members occasionally fell ill with water and faecal-borne diseases, which also incurred extra expenses. Despite good tailoring skills which could create an income, Panna faced time constraints from water collection, childcare, and other chores.

Action and changes

Due to Panna's involvement in the CSG, she has gained extensive knowledge on various topics including safe water, sanitation, hygiene, gender equality, women's empowerment, child and maternal nutrition, entrepreneurship, and life skills. During her tenure as president, a session was held in the community to raise awareness about piped water, highlighting its significant benefits. Subsequently, the CSG committee drafted a proposal for a piped water scheme to provide safe water. A piped water grid was installed in her community in January 2023. This has enhanced the quality of life of Panna Akter and her fellow community members.

 *Woman standing by her Max TapWater connection*



Applying a market system approach

With the convenience of piped water supply at her household, Panna was motivated to transform her lifestyle. Upon gaining access to running water, she upgraded her latrine to a new, improved, and hygienic one, with a concrete floor. Additionally, she invested in establishing a bathing area for women with piped water connection, costing approximately 350 euros, and she set up a handwashing station.

This has made maintaining personal hygiene easier, including bathing, and handwashing. With time freed up from water collection, Panna has been able to become a successful tailor in the community, attracting a growing number of female customers. This endeavour earns her around 25 euro per month. She also has more time for caring for her children and cultivating seasonal vegetables and fruits in a nutrition plot. Occasionally, she generates additional income by selling surplus produce. Her community role and increased income generation has also shifted her own family dynamic, with her having an expanded role in decision-making about the family and home.

“The installation cost of a deep tube well, approximately 680 euro, was entirely beyond our means. However, thanks to the introduction of piped water, we now have access to safe water at all times, a feat that was previously unimaginable. This has elevated my social standing within the community and among relatives.”

Involving others

Panna Akter encourages fellow courtyard members to initiate changes themselves, emphasizing that a healthy environment fosters the well-being and success of children. She inspires other mothers to improve their WASH facilities, highlighting the affordability and benefits of utilising the piped water system.



Child shows her hands while washing them at a tap from a piped water scheme, in Patuakhali, Bangladesh

In the spotlight:



Max TapWater connects households to easily available and safe water at an affordable price through piped water grids. In rural Bangladesh, less than 2 percent of people has access to on-premise piped water free of contamination.

Piped water grids run by government or NGOs fail to scale up because they do not recover operational costs nor the capital investment. At the same time, private tubewells are expensive and only available to a limited group of rich customers.

Max TapWater is a social water enterprise. The business model aims to recover operational and capital investments, at a per capita cost that is lower than its competitors. After cost recovery, all profits go towards upkeep and management of the piped water grids and towards building new grids in new communities, so that we can serve more people with safe water.

Each grid currently covers around 50 households, which pay a monthly fee for their connection. In the future, we aim for 80 to 100 households to be connected to a single grid.



 Max TapWater water tower

In the spotlight:



Having a tap water connection is about more than just safe water:

- It saves women and girls 1.5 hours every day in time not spent fetching water, which they can now spend earning income, doing homework, growing vegetables, or just with loved ones.
- It means women and girls are no longer at risk of experiencing harassment when collecting water.
- With a water connection in the house, households are triggered to invest in better sanitation. On average, each household invests an additional 100 euro to improve sanitation at home. This creates additional business for sanitation- and other micro-entrepreneurs.



 Girl shows bathroom with a shower connected to a Max TapWater piped grid



 Max TapWater team showing a grid map

Our work in action

3 Strengthening systems

Integrating for impact

Applying a market system approach

Strengthening systems

Building evidence for scale



To build systems that last, communities, governments, partners in the development sector, civil society organisations and the private sector must be aligned and involved from the start. That's why Max Foundation aims to mobilise everyone around the goal of child health, and not just as recipients but active participants who own the process. This is a crucial step to building more resilient and stronger communities.

We work with all levels of government to create a conducive environment for child health. By informing and engaging officials, from the local to the national level, we can support them in creating the right conditions for entrepreneurs and communities to lead healthy lives and develop solutions themselves to make that possible.

 Workae Wale is a government Health Extension worker at a Health Center in Ethiopia

How did we support systems strengthening in 2023?



We always work with representatives from government. In Ethiopia for instance, we work with existing structures that bring extension workers from the national governments into communities, to support on health and agriculture. We support those extension workers with tools and techniques that will improve child health.

we trained
170
additional extension workers

we continued to support the
443
reached previously

local governments in our programme areas in Bangladesh increased their budget allocation for nutrition and WASH services by more than **4%** on average.



Systemic change on a government level can be identified through budget lines: where is public money being spent? In our programmes, we work together with civil society to demand an increase in access to important goods and services from their local governments.

we helped establish
259
VESAs



In Ethiopia, we helped with the establishment of Village Economic and Social Associations (VESAs). These are informal groups, established to engage in savings and lending activities with the purpose of investing in WASH and nutrition products. This is done based on principles of group transparency and accountability, to create a strong savings culture in the community. Many of the members are pregnant women and mothers who lack financial means to meet their WASH and nutrition needs.

reaching around
7100
people

who saved more than
37,000
euro



With our Healthy Village approach, we focus our efforts on a village level, as our data shows that children have less risk of being stunted if their village has high levels of hygiene. Local governments officially declare a village 'Healthy' once everyone (90%+) meets and maintains key indicators on WASH, nutrition, and maternal and adolescent health.

Over the course of 2023, **53** new villages were declared healthy throughout our programmes. In total there were **462** Healthy Villages in 2023.



Strengthening systems

Strengthening systems in practice

Biyadige Ayalew, 40, was born and raised by farmer parents in East Gojam, Ethiopia. Following in his parents' footsteps, Biyadige is also a farmer. On his one-hectare land, he grows teff, wheat, corn, horsebean, and peas. He also grows vegetables including cabbage, beets, and green pepper. He uses half of his harvest for his household and sells the rest. In his backyard, Biyadige has also recently been working on beekeeping.

But Biyadige is not just a farmer. He has been volunteering as a kebele (local government) administrator for almost three years at Tejbahir kebele. As a kebele administrator, Biyadige mobilizes community members for development works like natural resource conservation. He also looks over the health, and education sectors of the kebele. "I do all this not because I get paid for it, I don't. But I want to leave my mark in my community. I aspire to see a change. My wish is to see the people in my community break out of poverty and build better lives for themselves," he says.

Working with the government

Biyadige works with professionals the government assigns to teach the farmers on how to use scientific methods of farming, including terracing and traditional irrigation systems. He also facilitates tree seedling preparation for planting in the rainy season. He also mobilizes people to plant trees.

Yinges Biyadego, 32, is one of the Development Agents under the government woreda structure (the government layer above the kebele), who works with Biyadige. A graduate in Natural Resource Conservation and Utilization Management, Yinges stresses the need to teach the community about natural resource conservation. "To create a healthy village, we need to work on climate change. We need to work towards soil and forest conservation. The community must be made aware of health packages and implement them," he says.

 *Biyadige Ayalew, kebele administrator in East Gojam, Ethiopia*



Strengthening systems

Challenges in nutrition

Biyadige states that in Tejbahir community “we don’t have the habit of eating nutritious food. Pregnant mothers don’t eat any different. Children don’t get eggs, meat, and vegetables. I want to see a change in this area,” he says. The most common meal in Tejbahir is injera (a flatbread made with teff flour) with Shiro stew (a mixture of chickpea flour, spices including berbere, garlic, and cumin).

Health extension workers regularly teach the community about sanitation and hygiene. Alongside the efforts by the health extension workers, Biyadige also tries to facilitate awareness during religious gatherings. He mentions the main challenge he faces in his work is inspiring behavioural change in the community. “I wish people practice what we teach them; that they build toilets and use them properly; that there will be a habit of proper handwashing, using soap, and practice of proper waste disposal. I wish to see the people bringing about a behavioural change,” he says. Biyadige works towards being an exemplary citizen by practicing what he teaches. “I can’t tell people to do something that I don’t practice myself. I need to be an exemplary leader, so I make sure I practice the hygiene and sanitation guidelines,” he says.

As a father of four children who are 20, 17, 13, and 8 years old, Biyadige says he raises his children with nutritious food and “I wish children in my community would grow up eating proper nutrition, drinking clean water, and with access to quality education so that they have a better future,”.



Yinges Biyadego, development agent under the government woreda structure



Programme factsheet

Programme aim:

With our Healthy Village approach, we focus our efforts on a community level, as our data shows that children have less risk of being stunted if their community has high levels of hygiene. This approach engages everyone to work towards the final goal of child health: from entrepreneurs to households, from farmers to local governments, from civil society organisations to schools.

Local governments officially declare a village 'Healthy' once everyone (90%+) meets and maintains key indicators, on access to and use of safe WASH, regular growth monitoring of children, a sufficient, nutritious diet particularly for mothers and children, pre- and post-natal care, and menstrual hygiene management.

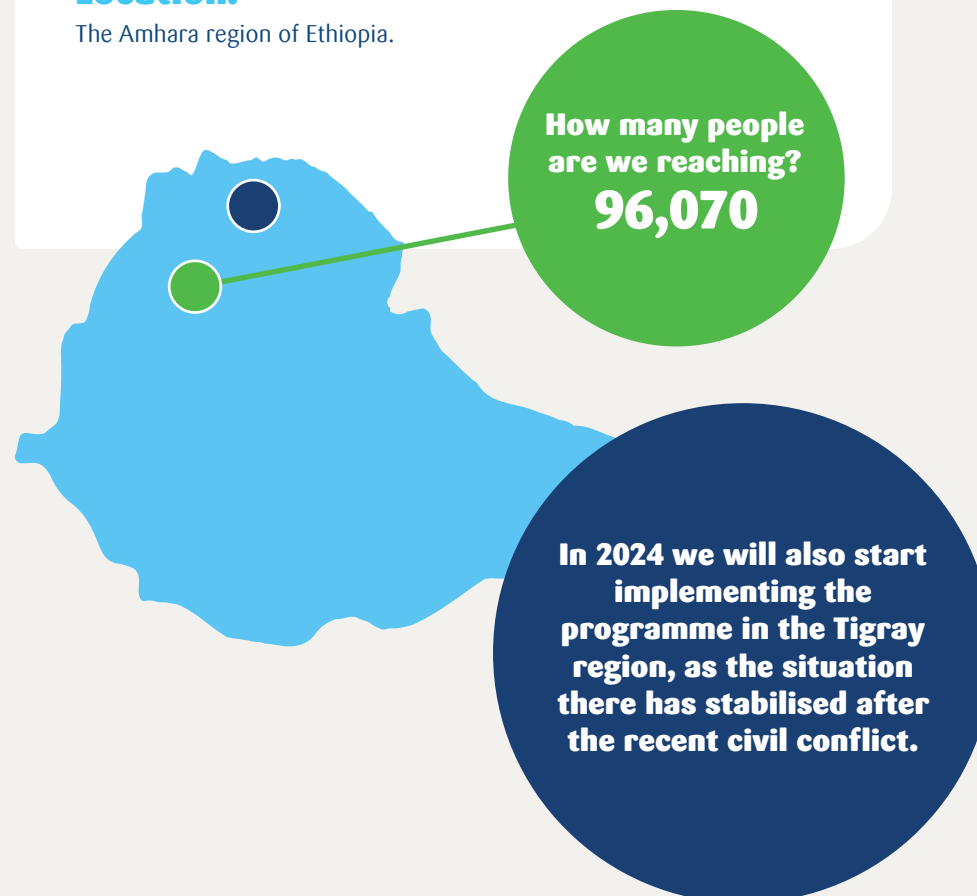
The design and implementation of the Healthy Village Ethiopia programme is aligned with the Ethiopian government's development agenda and priorities, and will be used as a case-study for stunting reduction which can be replicated.

Partners:

This programme is developed with Plan International Netherlands, and implemented by iDE Ethiopia and the Organization for Rehabilitation and Development in Amhara ORDA

Location:

The Amhara region of Ethiopia.



Our work in action

4 Building evidence for scale

Integrating for impact

Applying a market system approach

Strengthening systems

Building evidence for scale

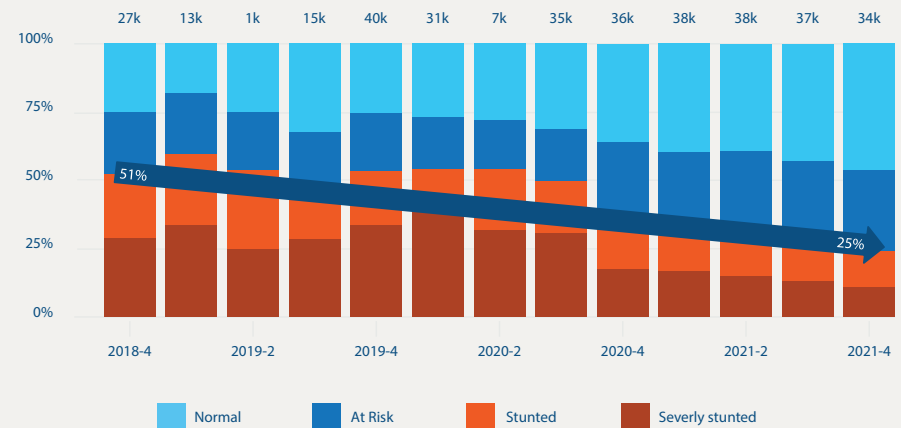


 Andualem Anteneh, a teacher in East Gojam, Ethiopia, poses outside of rooms ready for renovation to be menstrual health management rooms

A good system of data collection, analysis, and visualisation is essential to learn, understand and improve, but also to prove that our approach is impactful. This opens pathways to talk with local and national governments about how to improve child health more effectively in their policies and programmes.

By tracking progress of our flagship Healthy Village programme between 2016 and 2021 (reaching 1.2 million people in rural Bangladesh) we created one of the biggest databases on stunting

worldwide, with more than 500,000 child measurements. The results showed a halving of the stunting rate in our programme areas. We use this data to show the effectiveness of our work and scale the impact to other regions and countries!



This data provides evidence for what works in child health, and what doesn't. The evidence we have on what approach does work, we want to scale and adapt to other regions, situations, and countries. In Bangladesh for instance, this was achieved in rural areas. We have adapted and are now implementing the approach in urban and peri-urban settings, where stunting rates are over 30%.

How did we build evidence for scale in 2023?



Our online **Healthy Village Tracker**, developed by Max Foundation Bangladesh, feeds data into a centralised database. This data is then visualised on the Healthy Village Tracker Dashboard. This tool makes it easy for local governments and civil society organisations to see which areas are performing well and which may need additional support and resources. Tracking 1,674 villages covering 62 municipalities, it becomes a valuable tool for regional decision- and policy making.

In total more than
2000
facilitators and
government officials
gave been trained in
its usage

These datasets are also publicly available – we currently have 11 datasets openly shared for anyone to access.

In 2023,
we developed

9

learning briefs, from climate adaptation, to female leadership, to private sector engagement.



We established a clear learning agenda for the coming years, zooming in on different parts of our approach, and how these can help to improve achieve child health.

In 2023,

35 out of 40

participating Union Parishads organised communal budgeting and planning sessions



In Bangladesh Union Parishads (local government bodies) have started organising participatory budgeting & planning sessions with civil society organisations, giving them the opportunity to lobby for their priorities.



We have seconded staff to the Ethiopian Federal Ministry of Health as well as the Amhara Regional Health Bureau for the Seqota Declaration Unit, which is tasked with implementing the Ethiopian commitment to end undernutrition by 2030. We directly support the Ethiopian government's capacity to take action to improve child health, and integrate Healthy Village into government systems, rather than just giving them recommendations.

In 2023
two staff
seconded to national
and regional
governments

On top of that, the Ethiopian government has agreed to integrate length measurements in their stunting data, beginning with a trial in the regions where we work. Previously they only regularly collected data on weight. Length data was only collected every 5 years, and was not included in the database. To tackle undernutrition, it is important to include this data (especially during the critical first 1,000 days of a child's life)



Building evidence to scale

From evidence to scale in practice

In 2023 we ramped up the Healthy Village Urban programme, including gathering data to tailor the programme to the exact needs and demands of that area, and better ensure sustainable impact. This process was initiated together with local government. In early 2023, the 'Slum Development Officer' and a councillor of the Lalmonirhat Municipality in Northern Bangladesh gathered data on child health in the area to inform the development of Healthy Village Urban implementation plans.

At the same time, Community Support Groups (CSG) were formed with the help of municipal ward councillors. In rural settings there are three CSGs per municipal ward. In urban areas however, and especially in rapidly growing and changing slums, defining these groups and where they are active works differently, and we had to adapt the structure of these community groups to match the lives, habits, connections and networks of the people in the urban communities where we work.

This brought to light some of the issues people in peri-urban contexts and slums face that rural households do not. These include inadequate space for handwashing basins and for installing latrines in a suitable location. Also, permanent housing can't be built - as people don't have ownership of land in informal settlements or slums, and there is frequent migration due to seasonal work and natural disasters. This makes people less willing to invest their own facilities. On top of that, it can be hard to find public spaces to hold the courtyard sessions that are crucial in awareness spreading on topics such as WASH, nutrition, and maternal health - typically easy to organise in a rural setting.

Despite this challenge local partner ESDO managed to conduct awareness raising courtyard sessions, including demonstrations on dietary diversity to encourage people to add varied and nutritious items to their children's daily food consumption. They found that some of the most vulnerable, poorest households in these areas need

 *Tanjila plotted her child's measurements on Growth Monitoring cards in Bangladesh*



extra support, for example to access basic health and hygiene products and services. The government launched a social safety net programme that provides allowances to widows, expecting mothers, and the elderly to meet their basic needs, and we provided them with data on where those subsidies were most needed.

Kachon Bagum is a CSG president. She said that in urban areas space is a big concern – for instance to install latrines and to be able to maintain safe distance from them. She strongly believes that change can be made through people's ability to engage with the public and private sector to ensure adequate resources, which is why she continues to raise her voice on behalf of the community.



 Community Support Group meeting held in Bangladesh



 Frontline staff training in the Healthy Village Urban programme areas

Entrepreneurship also plays a role in awareness and community activation. A great example is that of Sreemoti Lata Rani, a 35-year-old woman living in a peri-urban community. Sreemoti learned about the 'Health Promotion Agent' business model through one of the arranged courtyard settings. She jumped at the opportunity of becoming an entrepreneur: with an initial investment of 5,000 BDT, she purchased health supplies such as baby diapers, soap, saline, sanitary pads, and Moni Mixed (a micronutrient powder) for children. Selling these products during courtyard sessions and door-to-door in the village, she offers essential materials at affordable prices.



Building evidence to scale

Sreemoti's entrepreneurial venture has had a profound impact on her community. By providing essential health supplies conveniently and affordably, she has enhanced community members' access to critical resources. Her net monthly revenue of 1200 to 1500 BDT significantly contributes to her family's well-being and economic stability.

On a local government level, steps are being taken as well. Union Chairman Md. Sirajul Haque Khondoker stated that they already created an action plan to declare all communities and villages in their Union as a healthy village, and that, on top of the social safety net previously mentioned, this year's municipal budget has included funds for health and WASH, including subsidies for building latrines, which are built by local entrepreneurs we also train.

This way, data and evidence on the new implementation area, as well as engagement and participation of all stakeholders involved – and agility from the implementing partners – makes it possible to adapt our approach in a way that it can be most effective at a different scale.

 *Samsul Haque, Sanitation Entrepreneur in Bangladesh, proudly displays his product*



Building evidence
to scale

Programme factsheet

Programme aim:

With Healthy Village Urban in Bangladesh, we took the Healthy Village approach which was proven to be effective in rural settings, and adapted it to urban and peri-urban settings in Bangladesh. In doing so, we trained all relevant local stakeholders on behaviour change tools but adapted for an urban context, for example by focusing more on messaging via entrepreneurs, clinics, and digital tools, rather than through village courtyard sessions.

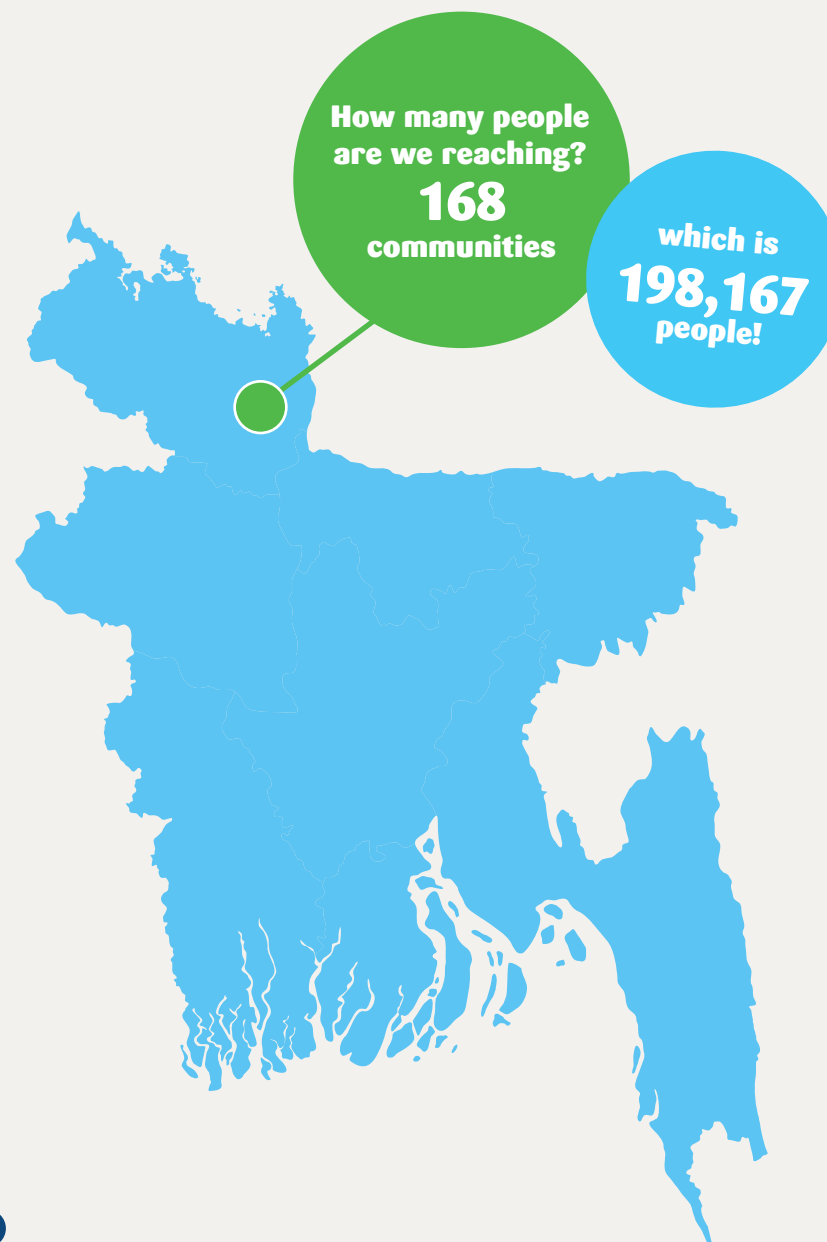
On top of an adapted context, this programme also adds a focus on children with disabilities and their access to a healthy start in life – for example by linking these households to specific government safety net services and health-specific subsidies.

Partners:

ESDO, the Eco-Social Development organisation.

Location:

Flood-prone Lalmonirhat District of Northern Bangladesh



A word from the supervisory board



 *Tiru Ayele, making a traditional basket called 'Sefed' in East Gojam, Ethiopia*

Max Foundation has grown into a successful NGO with strong management; both centrally and in the countries in which it operates. The Board decided to adapt its governance accordingly. In the new structure, the current Board, consisting of Claudio Acioly, Joris Kaak, Margot Quagebeur, Femke Rotteveel, and Marleen van Thienen, becomes the new Supervisory Board. The Co-Directors Joke le Poole and Marjolijn Wilmink become the new Executive Board. This new structure became effective February 28, 2024.

In 2024, both Marleen and Margot will reach the end of their second term. Spring of 2024, we will start the search for their replacements. Femke, Joris, and Claudio, who started respectively May 2022, December 2022, and January 2023, are still in their first term of three years. The Board convened eight times in 2023.

The Board is excited about the way Max Foundation is developing. Full-heartedly, we approved the new Strategic Plan, which was developed by team in the Netherland in close cooperation with the country teams, and the plan for expansion into Burundi, a country in which Max Foundation sees large opportunities to use its innovative and evidence-based approach in helping local communities in fighting stunting.

Also, the Board enthusiastically supports the further development of the Max TapWater initiative, which was set up as a social enterprise in separate legal entity. We see that Max TapWater's activity in setting up small, locally operated tap water networks can significantly improve health and sanitation in rural communities. And as a result of that, Max TapWater has become an integral part of Max Foundation's approach to improving child health and life expectancy.

Our major concern was the developments in Ethiopia, where war reached the areas in which Max Foundation is working in with its partners. We had to suspend the programmes to ensure the safety of our local staff. We hope that situation will change for the better soon, allowing us to restart our activities fully.



Joris Kaak

Chair of the Supervisory Board

What's next?

Looking forward to 2024, Max Foundation is poised to build on the presented achievements with even greater vigour and ambition. We recognize we must address the impact of climate change and conflicts, to overcome the obstacles they present.

We will celebrate what we have achieved in the past 20 years, but also harvest insights and evidence from two decades of Max Foundation. A central tenet of our strategy for the coming year(s) is our commitment to data-supported approaches and collaborative learning. We recognize that real change requires collaborative efforts that can jointly scale evidenced approaches. We will look for this collaboration in our future programmes, and will also continue to operate as design lab to generate and test more innovations that can positively impact child health.

We aim to expand our work to Burundi, and also enlarge our project portfolio in Bangladesh and Ethiopia. Our focus will sharpen on fostering resilient local systems capable of sustaining our efforts, ensuring that every child has the opportunity to grow up strong and healthy. Localisation remains high on the agenda, through our existing work and strong belief in community-led development, and partnerships with local civil society and businesses, and hopefully new collaborations.

What we do, and what we accomplished in 2023, wouldn't be possible without you: our donors, partners, colleagues and volunteers. Thank you for all that you have contributed to help us help the communities we serve. Together, we stand ready to tackle the challenges ahead and seize the opportunities to create lasting change in the lives of children.

We invite you to join us in this journey, whether through collaboration, support, or shared learning. Together, let us work towards ensuring a healthy start for every child, laying the foundation for a healthier future for generations to come.

 *Children playing football in Patuakhali, Bangladesh*

Together, let's scale what works for child health

 Baby playing with toys in Patuakhali, Bangladesh

Donors

We are incredibly grateful to the donors that made our work possible in 2023:



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Woman with her child in Patuakhali, Bangladesh

Statement on integrity:

Max Foundation applies an integrity & safeguarding policy, through which we seek to ensure the well-being and protection of women, children, and other vulnerable groups who work for Max Foundation or come into contact with our programmes, from exploitation or abuse. New Max Foundation employees and staff of our partner NGOs declare to have read, understood, and adhere to the Code of Conduct, which includes our Integrity & Safeguarding policy, but also gives guidance on how to formally and safely issue complaints (through a Whistle-blower and Complaints policy).

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Sources

Danaei G et al (2016). Risk Factors for Childhood Stunting in 137 Developing Countries: A Comparative Risk Assessment Analysis at Global, Regional & Country Levels. PLoS Medicine 13(11): e1002164.DOI:10.1371/journal.pmed.1002164

Fanzo, J., Davis, C., McLaren, R., & Choufani, J. (2018). The effect of climate change across food systems: Implications for nutrition outcomes. Global food security, 18, 12-19.

FAO, IFAD, UNICEF, WFP and WHO. 2023. The State of Food Security and Nutrition in the World 2023. Urbanization, agrifood systems transformation and healthy diets across the rural-urban continuum. Rome, FAO. <https://doi.org/10.4060/cc3017en>

United Nations Children's Fund (UNICEF). (2023). Undernourished and Overlooked: A Global Nutrition Crisis in Adolescent Girls and Women. UNICEF Child Nutrition Report Series, 2022.

United Nations Children's Fund (UNICEF). (2021). World Health Organization, International Bank for Reconstruction and Development/The World Bank. Levels and trends in child malnutrition: key findings of the 2021 edition of the joint child malnutrition estimates. Licence: CC BY-NC-SA 3.0 IGO.

United Nations Children's Fund (UNICEF). (2023). Triple Threat: How disease, climate risks, and unsafe water, sanitation and hygiene create a deadly combination for children.

https://epi.gov.et/wp-content/uploads/2023/03/FNS_baseline_survey_preliminary_findings.pdf

WHO (2008) Safer water, better health: Costs, benefits and sustainability of interventions to protect and promote health.

World Bank. (2018). Precarious progress: A diagnostic of water supply, sanitation, hygiene, and poverty in Bangladesh. WASH poverty diagnostics. The World Bank

As well as the following databases and articles: World Bank, Oxfam, WHO, JMP, Our World in Data, World Bank