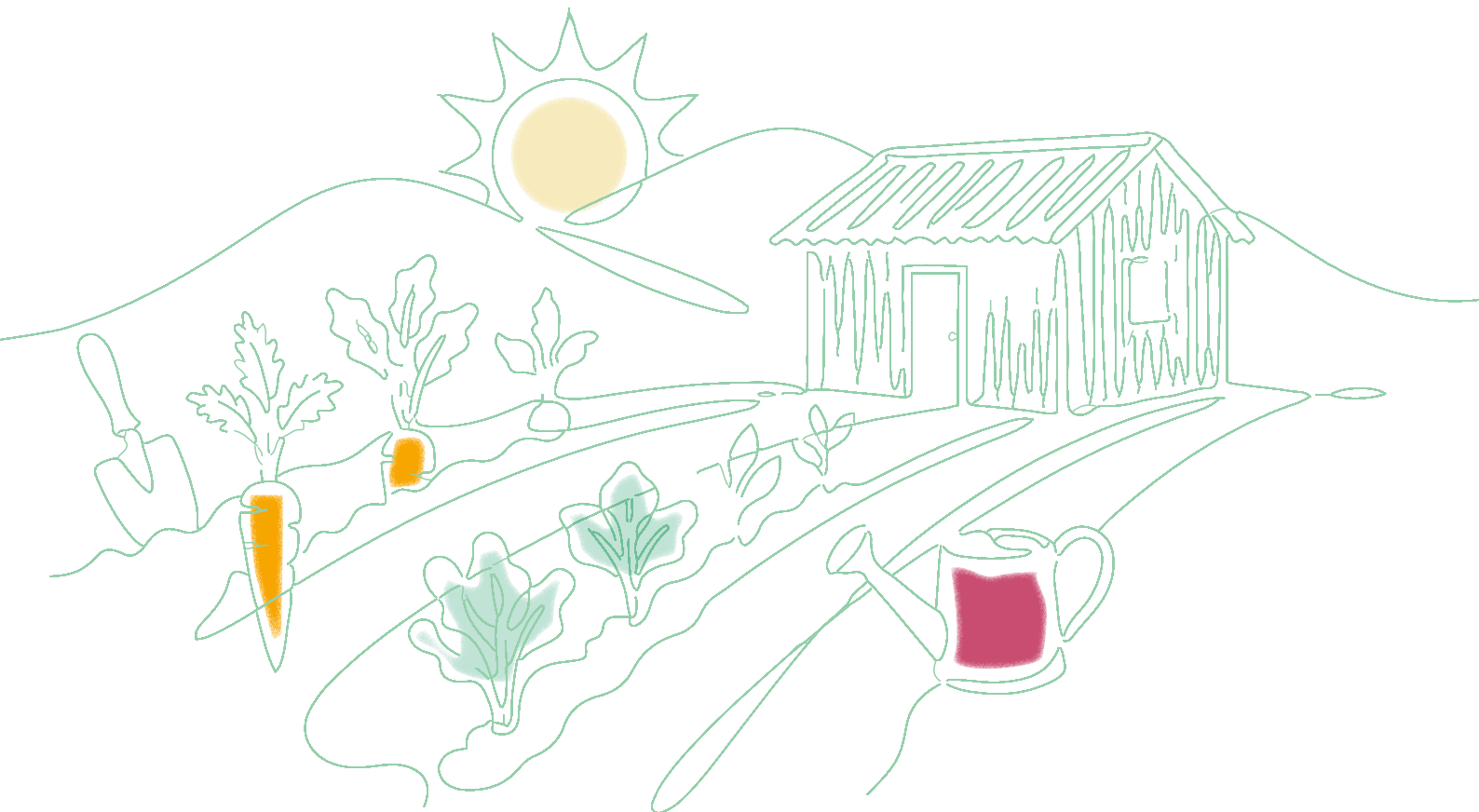


LEVERAGING THE POWER OF EMPLOYERS: ADOPTION AND GROWTH OF WORKFORCE NUTRITION IN BANGLADESH

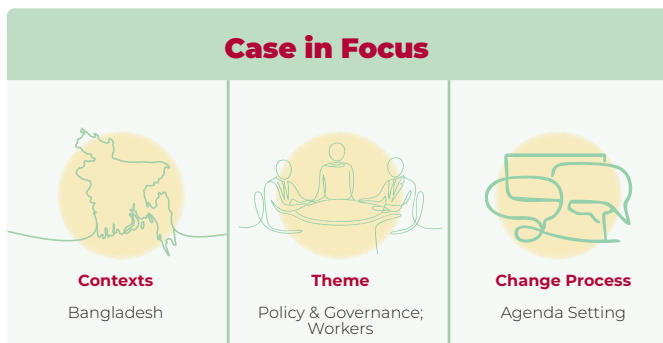


The workplace can be an important environment to influence nutrition and food choices. This case study examines the potential to use workplaces and employers as leverage points for improving nutrition and fostering larger food system shifts by considering efforts made by individual employers in Bangladesh and how these have been expanded and supported under government leadership through the National Workforce Nutrition Alliance. It shows how a novel concept can gain traction and explores how it could potentially be institutionalised in policy.

Motivation

Many different sectors and actors have a role to play in food systems transformation; among these, employers are often overlooked. Yet adults can spend over two-thirds of their waking hours at work, making the workplace an important environment to influence health, knowledge, and choices, including those related to food. Investing in nutrition can yield benefits for workers in terms of better health and well-being, and for the employer in terms of worker motivation, performance, and reduced absenteeism. They can also have wider consequences: as large purchasers, companies can play a major role in influencing supply chains, and the knowledge and habits workers acquire in the workplace can percolate into their lives outside of work, potentially also influencing their families' food choices and health.

This case study examines how companies in Bangladesh have taken steps towards supporting workers' nutrition – and how this is beginning to be institutionalised through a National Workforce Nutrition Alliance.



Case Study Context

In the context of the case study, 'workforce nutrition programmes' refer to interventions to improve workers' nutrition within the work setting, including providing healthy food at work, educating workers on nutrition topics, providing access to nutrition-related health screening and counselling, and/or supporting breastfeeding at work. The focus is on Bangladesh, a country that has experienced rapid recent economic growth but is still challenged by poverty and malnutrition. An estimated 12% of women are underweight and about a quarter of young children are stunted, while diabetes prevalence has risen steadily in recent years.

The case study is based on eight interviews conducted in 2025 with company managers, government officials, an NGO representative, and an academic researcher, all active in workforce nutrition in the country. Interviews were audio-recorded, transcribed, and thematically analysed; they were complemented by in-depth document review.



This case study was developed as part of the 'Exemplars of Food System Change' project of the Nourishing Food Pathways programme, which seeks to document examples of food system transformation in action and explore what enables and holds back change. You can access all the case studies here: <https://www.gainhealth.org/exemplars>

RESULTS

Recognising worker nutrition and wellbeing as a priority

Foundational to the rise of workforce nutrition programmes in Bangladesh was coalescing understanding among stakeholders of the burden of malnutrition in the country, the potential of workplaces as an intervention setting, and the win-win scenario for both businesses and workers (and more broadly populations and economies) if workforce health were improved through improved nutrition. In addition to this formal narrative, interviewees identified a wide range of potential benefits, including those to companies, workers, their families, and society as a whole. Stakeholders were generally confident about both the importance and the benefits of workforce nutrition. The financial bottom line for both workers and the company – that good nutrition could be affordable, and that it could pay off – was particularly resonant.

That said, challenges also arose in framing the problem and getting others on board. In particular, factory owners often had limited time and interest to engage; approaches thus needed to be adapted to provide a ‘quick pitch’, clear actions, and demonstrable results. In addition, both workers and factory owners tended to focus on immediate and visible safety and health challenges, such as work-induced pain or workplace injuries; as malnutrition is less perceptible, it had a tendency to be de-prioritised.



Support for workforce nutrition was bolstered by evidence of the potential practicality of successfully implementing interventions through a 2014 pilot study; this was used to demonstrate results, leading to more businesses coming onboard. A larger study in 2015-17 then demonstrated reductions in workers’ anaemia levels, further solidifying the case and gaining wider stakeholder support. In the words of one interviewee, *‘it takes some time, but everybody agrees about the importance of workforce nutrition’*.

Focusing events and societal conditions create the right context for change

The uptake of workforce nutrition in Bangladesh was very much facilitated by the central role of garment manufacturing in the country’s economy: the sector is estimated to account for over 80% of export earnings, bringing in nearly 50 billion dollars in 2023. About 3 million workers are employed in the sector. In addition, since the sector is export-oriented, clients (buyers of finished clothing in destination countries) tend to be particularly concerned about labour conditions. This was underlined by a tragic 2013 event: an eight-storey building in Dhaka housing several garment factories, Rana Plaza, collapsed, killing over 1,100 people. The event triggered new scrutiny of poor worker conditions in the country – and of the international brands and retailers that relied on them. This created fertile ground for many kinds of worker-wellbeing-focused interventions, including workforce nutrition. A decade later, the COVID-19 pandemic re-focused attention on the plight of lower-wage workers, particularly in crowded factory settings, likely helping to maintain momentum on worker wellbeing initiatives.

However, this strong focus has also had downsides: the emphasis on garment factories, which employ considerably less than a tenth of Bangladesh’s workers, may leave other sectors behind. Leveraging the international attention on export firms risks omitting workers in domestically oriented sectors – who may be more vulnerable to begin with.



Getting the capacity and resources in place at the factory level

Adoption of workplace nutrition interventions at the business level was facilitated by company culture and management support. This included the belief that a healthy and motivated workforce is fundamental to the success and sustainability of a business, a commitment to compliance with labour laws and Corporate Social Responsibility practices; cultures of continuous workforce training and development; and brand awareness. As one interviewee explained, *'[O]ur commitment to worker health and well-being stems from a deeply rooted company culture. The management and founders firmly believe that a healthy, motivated workforce is fundamental to sustainable business success.'*

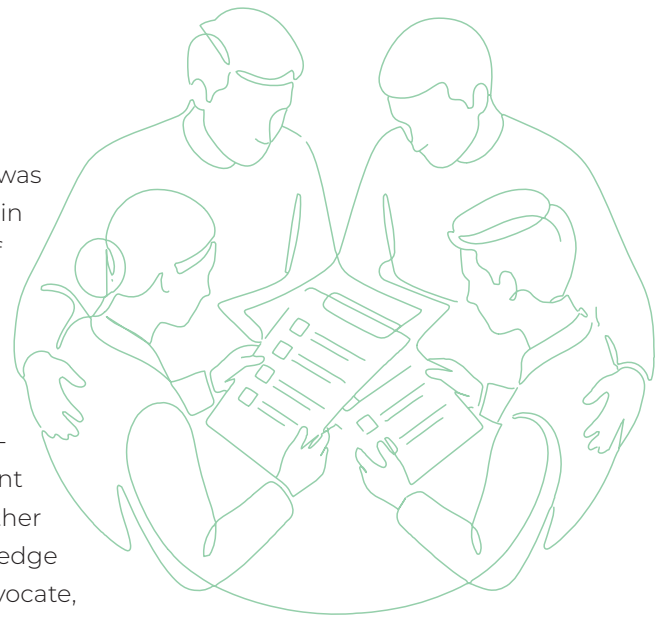
In addition, larger factories already had well-established workflows for the management of large-scale projects, which made it easier to implement and monitor workforce nutrition activities, and increasing automation made it easier for managers to release workers from the production process, such as to take breaks for meals. Finally, most large workplaces already had existing canteens, break rooms, and training spaces, as well as on-staff medical experts, which they could enlist to implement workforce nutrition activities.

The process was not seamless. For example, factory leaders soon realised that major changes to canteen menus could be met with worker resistance, which could disrupt their operations. Where workers needed to take time out for activities like nutrition education, compromises had to be made with colleagues focused on increasing production. However, where these hurdles were overcome, early-adopting factories could become powerful advocates for and demonstrators of workforce nutrition approaches.



Building a coalition to support broader adoption

Building on a Global Workforce Nutrition Alliance that was started in 2019, The National Workforce Nutrition Alliance in Bangladesh was launched in 2022 by the Department of Labour (one of the two departments of the Ministry of Labour and Employment), with technical and financial support provided by GAIN Bangladesh. As of July 2025, the Alliance had 270 organisational members, reaching over 234,000 workers. The Alliance provides access to resources (such as guidebooks) and training and development opportunities for employers and other actors; brings together stakeholders with a broad range of backgrounds for knowledge exchange and resource sharing; and has the capacity to advocate, exert influence, and enable systemic solutions. As one interviewee noted, *'the Alliance enables collaborative, system-level solutions when it is 'so difficult to independently do all the positive things for the worker by only the government or only the development organisation. No one can alone solve these issues'*. Its knowledge and training infrastructure is used to support employers to introduce practices at their sites so they can learn from one another's mistakes and best practices.



The flagship work of the Alliance is the in-depth training and support provided to factories that commit to improving the nutrition of their workforce, including training company-level peer educators, providing information, communication, and promotional materials, and offering support in handling challenges and maintaining engagement and motivation. Interviewees provided overwhelmingly positive reports of the working relationships and dynamics within the Alliance, with employers feeling that their ideas were taken on board; government representatives finding easy agreement between employers and workers and experiencing employers as (uncharacteristically) responsive; and academics finding their perspectives enriched by others' ideas while being trusted in their expertise. Despite these successes, the Alliance to date has been dependent on donor funding, and its long-term sustainability in the absence of this remains to be seen. Moreover, Bangladesh has been in political turmoil since a popular uprising in 2024, and this instability may risk weakening government commitments to food systems topics broadly, as well as its leadership on workforce nutrition specifically.

Future institutionalisation – openings and challenges

To ensure workforce nutrition in Bangladesh endures even in the absence of external donor support will require institutionalisation. At the company level, some companies had been able to institutionalise nutrition issues within Occupational Safety and Health policies and training, or through specific pre-existing roles like that of the factory doctor. However, these are not widespread, and in many cases the continuation of programmes depends on the personal commitment of the management.

At the policy level, workforce nutrition is currently not well integrated into Bangladesh's key policies and strategies. Occupational Safety and Health policy in Bangladesh does include some relevant provisions, such as requiring canteens and medical examinations, and it has been put forward as one potential 'home' for workforce nutrition within well-enshrined policies. However, there are barriers and limitations to this, including challenges of introducing nutrition provisions in labour laws that needs to cover all settings in the country, the perception that nutrition is a minor issue when compared to more severe labour law violations like injuries, and the large size of the country's informal labour force. Inspectors with the Department of Inspection for Factories and Establishments currently play a crucial role in ensuring compliance with Occupational Safety and Health legislation in the country and could potentially be used as a conduit for enforcing workforce nutrition approaches – however, these inspectors already have heavy workloads, with their checklists containing as many as 100 items.

In terms of translating the (modest) benefits of workplace-specific changes like healthier meals into broader changes in workers' behaviours and food choices as a whole, one key barrier remains: workers' poverty. As one interviewee noted, *'[O]ne thing is very difficult. Our people ... [are] too poor and they work hard [the] whole day. They ... [cannot] manage their family... It is the big problem ... [how to manage] nutrition ... with the cheap, with the poor income.'*

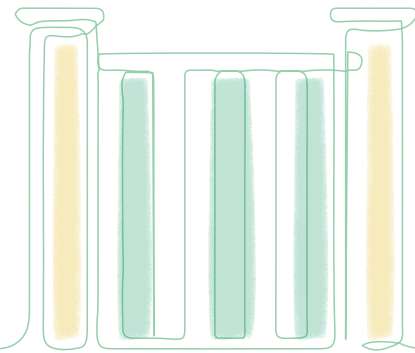
BARRIERS AND ENABLERS TO CHANGE

The adoption and growth of workforce nutrition in Bangladesh was facilitated by:

- *A strong narrative supporting the case for workforce nutrition, bolstered by scientific evidence as well as diverse stakeholders' own perceptions of advantages*
- *An expansive and collaborative Workforce Nutrition Alliance providing shared resources*
- *Companies' own infrastructure, and learning from the examples of other successful companies through the Alliance*

Barriers it faced included:

- *Emphasis by both workers and employers on more immediate occupational health issues, like injuries and pain*
- *Needing to mitigate any negative impacts on factory production levels*
- *Focus on limited number of (primarily export-oriented) sectors*
- *Workers' low purchasing power, which limits their food choice options at home*
- *No clear route for institutionalisation of the approach in policy*



Conclusion

Workplaces and employers can be powerful leverage points for enacting changes, but they have been underemphasised in work on food system transformation. This case study examined the uptake and growth of workforce nutrition approaches in Bangladesh, both at the company level and through a thriving National Alliance. The results showed the importance of a strong narrative to set the agenda on the topic, as well as the robust coalition created by the Alliance and its knowledge-sharing resources; it also highlighted some limitations of the approach to date, such as a limited sectoral focus, as well as potential ongoing barriers, such as unclear institutionalisation. Importantly, for workplace interventions to be able to foster truly systemic changes, they may need to adopt a broader 'food systems' approach, considering not only nutrition but also issues like environmental sustainability and equitable food supply chain practices, while seeking to leverage their large purchasing power to motivate broader market-level shifts in practices.



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