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Academy for Educational Development, Inc.
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TRIP REPORT

SWAZILAND

September 23 - October 2, 1992

Joan Schubert

NUTRITION COMMUNICATION PROJECT

**Academy for Educational Development
1255 23rd Street, N.W.
Washington, DC 20037**

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ABBREVIATIONS

AED	Academy for Educational Development
HEU	Health Education Unit
HPN	Health, Population and Nutrition
IEC	Information, Education and Communication
KAP	Knowledge, Attitudes and Practices (Studies)
MOAC	Ministry of Agriculture and Cooperatives
MOH	Ministry of Health
NCP	Nutrition Communication Project
NNC	National Nutrition Council
SBIS	Swaziland Broadcasting and Information Service
SINAN	Swaziland Infant Nutrition Action Network
SSRU	Social Science Research Unit (Univ. of Swaziland)
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development

EXECUTIVE SUMMARY

Joan W. Schubert, Senior Program Officer with the Academy for Educational Development (AED), travelled to Swaziland September 23 - October 2, 1992, on behalf of AED's Nutrition Communication Project (NCP). In collaboration with AED communications consultant Dr. Edward Douglass, Schubert planned and facilitated a five-day workshop to develop a communications strategy and creative brief for the Swaziland Improved Young Child Feeding Project (Weaning Project).

Twelve representatives of the Ministry of Agriculture and Cooperatives (MOAC) participated in the workshop, held from September 28 - October 2, 1992. Many of the participants also participated in a complementary radio production workshop facilitated by Dr. Douglass the following week.

During the workshop, participants were guided through a process for developing the creative brief and communications strategy which included the following:

- overview of the Weaning Project goals and objectives, including the growth stunting problem in Swaziland;
- principles of Nutrition communications strategy design;
- review of research findings carried out by the project over the past several years;
- identification of key infant feeding problems, target groups and linked behaviors based on the research;
- exercises to prioritize problems;
- creating action-oriented messages;
- "SMART" objectives;
- bringing it all together: preparing the communications strategy and creative brief.

Overall, sessions were highly participatory with a great deal of emphasis put on small group work and discussion. The workshop closed with a small, informal ceremony attended by USAID/Health and Population Officer, Anita Sampson.

I. INTRODUCTION

At the request of the U.S. Agency for International Development (USAID) in Swaziland, the Swaziland National Nutrition Council, and the Home Economics Section of the Ministry of Agriculture and Cooperatives (MOAC), Joan W. Schubert, Senior Program Officer with the Academy for Educational Development (AED), travelled to Swaziland September 23 - October 2, 1992, on behalf of AED's Nutrition Communication Project (NCP). Schubert is currently based in Yaoundé as an Information, Education and Communication Specialist for the Cameroon Maternal and Child Health Care Project and was formerly AED's HEALTHCOM resident advisor in Zaire.

The purpose of the assignment was to plan and facilitate a five-day workshop to develop a communications strategy and creative brief for the Swaziland Improved Young Child Feeding Project (Weaning Project) in collaboration with AED communications consultant Dr. Edward Douglass. This was successfully carried out with the full participation of twelve participants representing the MOAC at the national and regional levels, including a radio specialist with Save the Children. Dates of the workshop were September 28 - October 2, 1992.

Many of the participants also participated in a complementary radio production workshop facilitated by Edward Douglass the following week. They were able to immediately use the creative brief and communications strategy to focus program content and design. (The radio workshop is described by Douglass in a separate trip report.)

II. HIGHLIGHTS OF CONSULTANCY

Both Schubert and Douglass arrived Wednesday, September 23, which allowed time for briefings and discussion with key contacts representing the Home Economics Division and The National Nutrition Council, as well as USAID/Mbabane Health and Population Officer Anita Sampson.

By Friday, the workshop schedule—including goals and objectives—had been prepared and approved. Sessions were subsequently planned, handouts organized, and logistics finalized for the workshop which officially began Monday at 2:00 pm and ended Friday at noon.

Eleven of the twelve participants who attended the workshop were from the Home Economics Division of the MOAC. They included a mix of national level coordinators, regional home economics officers and their assistants. Some joined the group as late as Wednesday due to other work obligations. Unfortunately, representatives invited from the Ministry of Health did not attend the workshop because of other responsibilities.

Participants were guided through a process for developing the communications strategy and creative brief which included the following:

- overview of the Weaning Project goals and objectives, including the growth stunting

problem in Swaziland;

- principles of Nutrition communications strategy design;
- review of research findings carried out by the project over the past several years;
- identification of key infant feeding problems, target groups and linked behaviors based on the research;
- exercises to prioritize problems;
- creating action oriented messages;
- "SMART" objectives;
- bringing it all together: preparing the creative brief and communications strategy.

Overall, sessions were highly participatory with a great deal of emphasis put on small group work and discussion. Assignments completed by trainees were typed up and returned for their review and comments on a daily basis. In this way, with a bit of polishing, work completed could be inserted almost directly into the final texts for the creative brief and communications strategy.

Participants approached the work with enthusiasm and genuine interest. Numerous ideas on how the Weaning Project could better tap the multitude of community outreach and training activities regularly organized by the MOAC were explored. Suggestions included theater, well-baby contests, and better diffusion of messages through women's clubs and churches. Ways to use such events to capture and record interesting material for radio were also discussed and incorporated into the final communications strategy.

The workshop closed with a small, informal ceremony attended by USAID/Health and Population Officer, Anita Sampson. Certificates of achievement were awarded to all participants and closing remarks made. As a special touch, Sampson unveiled a drawing of what had become the logo for the workshop—a chubby, bright-eyed "fresh" baby, encouraging a renewed commitment by all participants to promoting better child feeding practices in Swaziland.

More details about the participants and workshop content—including exercises, handouts and drafts of the creative brief and communications strategy—are included as appendices to this report.

Schubert would like to extend particular thanks to the National Nutrition Council, the Home Economics Division of the MOAC, USAID/Mbabane, NCP and, of course, Edward Douglass, for their contributions and excellent work, not to mention spirit, which helped to make this workshop a success.

APPENDIX A

LIST OF CONTACTS

Ministry of Agriculture and Cooperatives

Mr. Dickson Khumalo, Senior Agriculture Officer

Mr. Magalela Ngwenya, Chairman, National Nutrition Council and Chief Projects Officer

Mrs. Christabel Motsa, Principal Home Economics Officer

USAID Mission to Swaziland

Mrs. Anita Sampson, Health, Population, and Nutrition Officer

APPENDIX B

LIST OF PARTICIPANTS

COMMUNICATIONS STRATEGY DEVELOPMENT WORKSHOP

Juliet Aphane, Project Coordinator, Senior Home Economics Officer, Home Economics Section, Ministry of Agriculture and Cooperatives

Zodwa Baartjies, Acting Regional Home Economics Officer, Shiselweni

Bongekile Dlamini, Assistant Home Economics Officer, Manzini Region

Francesca Groening, Regional Home Economics Officer, Manzini

Gloria Masuku, Assistant Home Economics Officer, Lubombo Region

Pumla Maziya, Regional Home Economics Officer, Lubombo

Phumzile Mdziniso, Regional Home Economics Officer, Hhohho

Ruth Mkhwanazi, Assistant Home Economics Officer, Shiselweni Region

Philile Shongwe, Information Officer, Save the Children

Busi Similane, Assistant Home Economics Officer, Hhohho Region

Nikiwe Thwala, Assistant Home Economics Officer, Hhohho Region

Nenekazi Zwane, Assistant Home Economics Officer/Communications, Home Economics Section, Ministry of Agriculture and Cooperatives

APPENDIX C

NATIONAL NUTRITION COUNCIL

**WEANING PROJECT
COMMUNICATION STRATEGY DEVELOPMENT WORKSHOP**

**PROGRAM SCHEDULE
September 28 - October 2, 1992**

MONDAY, 28 SEPTEMBER

- 12 00 Welcoming remarks
- 12 30 Introductions: Participants and Facilitators
- 13 00 LUNCH
- 14 00 Highlights of The Weaning Project: The Issues, Objectives, Where we stand
- 15 00 Workshop Goals and Objectives; Presentation of Schedule
- 15 30 Effective Health Communications: An Overview
- 16 00 Key Concepts Linked to Effective Communications
- Group Work: The "Buzz Words"; consumer, target group, audience segmentation, behaviour, strategy, communication channels, product, objective, pretest, impact, tone, and more
- 16 45 Summary and distribution of participant feedback form: "How Are We Doing?"

TUESDAY, SEPTEMBER 29

- 08 30 The Communications Strategy: Five Essential Steps
- 08 45 Video: "HealthCom: Communication for Child Survival"; Discussion
- 09 30 "Getting at the Root of the Under-Nourishment Problem;"
Focus on identifying target groups and behaviours. Group and Individual Work: Weaning Project Research Review

- 10 15 **TEA BREAK**
- 11 30 **Group presentations; discussion and summary**
- 13 00 **LUNCH**
- 14 00 **Identifying and Evaluating Behaviours: Group Discussion and Exercise**
- 16 45 **Summary and "How Are We Doing?"**

WEDNESDAY, SEPTEMBER 30

- 08 30 **"SMART" Objectives**
- 09 15 **Review of Key Project Messages. Turning messages into action: Group Work and Discussion**
- 10 30 **TEA BREAK**
- 10 45 **Review of Key Project Messages, continued**
- 13 00 **LUNCH**
- 14 00 **Introduction to the Creative Brief**
- 14 30 **Development of the Creative Brief: Group Task**
- 15 30 **TEA BREAK**
- 16 45 **Summary and "How Are We Doing"**

THURSDAY, OCTOBER 1

- 08 30 **"Fine Tuning" the Creative Brief**
- 09 00 **The Communications Strategy: An Overview**
- 09 45 **Group Task: Development of the Communications Strategy**
- 10 30 **TEA BREAK**
- 10 45 **Continued Group Work**

13 00 LUNCH

14 00 Refining and Polishing the Strategy

15 30 Presentations of the First Drafts: The Integrated Communications Strategy and the Creative Brief

16 00 TEA BREAK

16 45 Summary and "How Are We Doing?"

FRIDAY, OCTOBER 2

08 30 Final Polishing Continues

10 00 TEA BREAK

10 15 Presentations: The Creative Brief and The Communications Strategy Discussion and Comments

12 00 Closing Remarks; Well wishes to participants

13 00 LUNCH

APPENDIX D

MATERIALS DISTRIBUTED TO PARTICIPANTS

Rasmuson, Mark, et al. Communication for Child Survival, Chapter 5, "Strategy Development"

Koniz-Booher, Peggy, et al. Eds., Q/A on Infant Feeding: A Panel of Experts Takes a New Look

Green, Cynthia P., Media Promotion of Breastfeeding: A Decade's Experience.

National Nutrition Council, Key Results of the Swaziland National Nutrition Status Survey Results

National Nutrition Council, Assessment of Infant and Young Child Feeding Practices and Recommendations for their improvement: Summary Report, 1988.

Webster, Fredrich, "Message Design," adapted from Marketing Communication, Ronald Press, 1971.

APPENDIX E

NATIONAL NUTRITION COUNCIL

WEANING PROJECT COMMUNICATION STRATEGY DEVELOPMENT WORKSHOP Co-Operative Development Education Centre September 28 - October 2, 1992

PURPOSE:

The purpose of the Weaning Project Communication Strategy Workshop is to work with a team of 16 home economics and health professionals to develop a creative brief and an integrated communications strategy which will further the objectives of the Weaning Project. The Project seeks to promote better infant feeding practices which address the growth stunting problem of infants and children which has been identified in Swaziland.

OBJECTIVES:

By the end of the workshop the participants will:

- * Describe the basic process of implementing a communications strategy including the five essential steps;
- * Describe the elements of a creative brief and the purpose it plays in an integrated communications strategy;
- * As a team, participate in the process of developing an integrated communications strategy in support of the Weaning Project;
- * As a team, develop a creative brief for the Weaning Project.

APPENDIX F

NATIONAL NUTRITION COUNCIL

IMPROVED YOUNG CHILD FEEDING PROJECT (THE WEANING PROJECT)

PROJECT GOAL:

To improve young children's (0-24 months) nutrient intake and thus reduce growth faltering and early childhood stunting.

PROJECT OBJECTIVES:

1. To launch an information effort to create awareness about the importance of child feeding and general child care.
2. To train and support all principal suppliers of information on child feeding in their efforts to encourage the above practices.
3. To effect changes in attitude and knowledge critical to achieving the practice change.
4. To effect changes in child feeding practices.

APPENDIX G

THE WEANING PROJECT

COMMUNICATIONS STRATEGY DEVELOPMENT WORKSHOP

The Big Ideas That Really Matter

Audience Centered . . .

Is our programme built on how the **audience** understands the problem and does it provide something they want and believe in?

Targeted . . .

Is our **audience segmented** in groups of people that we can reach and influence with our messages? Are our **objectives** narrow enough to be achievable, and are they phased in ways which permit us to measure whether they are being achieved?

Comprehensively Planned . . .

Have we considered **all the factors** that influence behaviour change: the behaviours themselves; the obstacles our audience will face in using these new practices; the means to distribute information and products to the right people, on time; and the means to inform, motivate, and teach our audience about the new behaviours in ways which are both accurate and persuasive?

Integrated . . .

Are we using more than one delivery system: mass media, interpersonal, and print? Do these channels **interact** to support each other with the same clear message?

Data-based . . .

Do we have data to support and guide our basic decisions? Are we relying too heavily on experience, intuition, and anecdotes? And, are we willing to **recognize our mistakes** and use existing data to make needed mid-course changes?

APPENDIX H

IMPROVED YOUNG CHILD FEEDING PROJECT

CREATIVE BRIEF

TARGET AUDIENCE: Primary: Rural women of child-bearing age
Secondary: Rural grandmothers

OBJECTIVES: By the end of 1993:

- 10% of rural women of child bearing age will know how to correctly measure their children's foods and give daily quantities as recommended by the National Nutrition Council
- 30% of rural women of child bearing age will feed their children solid and semi-solid foods from the child's own bowl
- 40% of rural women of child bearing age will give their child thick (rather than thin) *indengane*
- 20% of rural women of child bearing age will encourage their children to take sour foods to restore the child's appetite during and after illness
- 20% of rural women of child bearing age will breast feed exclusively for the first four to six months of the baby's life

OBSTACLES:

It is expected that certain beliefs, cultural practices, pressures, and misinformation may stand in the way of a mother adopting the above recommended feeding practices.

For example, the research tells us that many mothers think or feel that they do not have the time for these feeding activities. Measuring is a new concept for most mothers. Some mothers believe that if children are fed so much, they will become obese. Because of the drought, some families may not be able to follow all of these feeding recommendations. Mothers may believe the costs of these practices -- in time and resources -- will be heavy. Finally, bottle feeding with thin *indengane* is popular with mothers and child minders because it is so easy.

Tradition teaches that there should be one bowl for all the children so that children learn to share and not be greedy and selfish. Tradition also says that the child who eats sour foods will suffer heartburn. Some religions prohibit giving certain kinds of sour foods. Finally, many people believe that in the past there was less disease and they wonder why they should

leave their traditional feeding practices and adopt new ones.

The recommendation advocating sour foods represents a message change by health educators who, in the past, discouraged mothers from giving sour foods. This change may result in credibility problems.

KEY PROMISE: By following the recommendations for correct feeding, mothers will enjoy the pleasure of having healthy, bright, energetic, happy children. Rural mothers use the term "fresh" to describe such children.

SUPPORT STATEMENTS/REASONS WHY:

- By measuring and giving the recommended quantities of food, your baby will grow bigger and stronger.
- If you spend some time now feeding your baby correctly, you will spend less time and money in the long run caring for a sick child.
- A well-fed child will be healthier and will do better in school.
- A well-fed child will grow to be a person who will be able to take good care of you later in life.
- Make sure your baby gets his share; give him his food in his own bowl.
- There are a variety of sour foods which will restore appetites; choose one that agrees with your baby.
- New studies are showing us that sour foods do promote better appetites and also that they keep better in your home.
- Exclusive breast feeding has many advantages for you: less expense, ready to serve, promotes love between you and your baby. Nature made it the perfect, complete food for babies; gives you time to rest.
- Feeding the child from the "family pot" reduces food costs. (i.e., rather than purchase/fix special foods)

TONE: Positive. Encouraging. Emotional (sometimes). Personal (sometimes)

MEDIA: ● Interpersonal: face-to-face counselling, small group instruction, drama, feeding demonstrations, poetry contests, dance, puppetry, and other innovative media

- **Mass Media:** Radio (spots, programmes); Tikhatsi (newspaper)
- **Print materials:** teaching flip charts, counselling cards, reminder cards, poster

CREATIVE CONSIDERATIONS: An attack on traditional beliefs would be counter-productive.

Rural women enjoy songs, singing, and Swazi dancing.

Many rural women tend not to like glossy, slick, modern things.

Messages will be delivered through complementary media at designated times during the year as indicated in the Communications Strategy in order to maximise the persuasive effect on the target audience(s).

All messages will be presented in SiSwati.

APPENDIX I

NATIONAL NUTRITION COUNCIL

IMPROVED YOUNG CHILD FEEDING PROJECT

INTEGRATED COMMUNICATIONS STRATEGY

Draft

The purpose of the integrated communications strategy is to provide a management tool to coordinate and consolidate the communications efforts of a number of organisations which are committed to solving the growth stunting problem in Swaziland.

Experience and evaluation work throughout the world have repeatedly shown that when the same message reaches a target audience through more than one channel of communication, the impact is far greater than if the message had been transmitted independently and without coordination. This strategy has been developed with this principle in mind.

The Creative Brief which is attached serves as an integral component of the strategy, highlighting key elements.

MESSAGE DELIVERY STRATEGY:

An important component of the strategy is the message delivery schedule which appears below. The schedule spells out the different themes which will be given priority attention through the various media at different periods of the year. The schedule is crucial to the success of the strategy in that it provides a framework for the national and regional levels to consolidate efforts and reinforce messages through multiple channels.

The periods of intense communications activities on specific messages do not preclude the continuous flow of information, advice, and encouragement to the target audiences on the full compliment of messages recommended by the National Nutrition Council to improve young child feeding.

Message Delivery Schedule

1992 1993 -->

Desired Behaviours O N D J F M A M J J A S O N D

Breast Feed Exclusively X X X

Give Energy-Dense Foods X X X X X

Give Measured Quantities of Food/Feed in Child's Own Bowl X X X X X X

Give Sour Foods to Children During Illness and Recuperation X X X X X X X

OPERATIONAL STRATEGY:

In order to facilitate the operational plan for the strategy, the National Nutrition Council Communications Task Force will be formulated. Members of the task force will represent:

- Ministry of Agriculture, Home Economics Section
- Ministry of Health, Public Health Unit
- Ministry of Health, Health Education Unit
- SINAN (Swaziland Infant Nutrition Action Network)
- Save the Children Fund
- Ministry of Information and Broadcasting: Head of SiSwati Programmes
- Sebenta National Institute

Purpose: The National Communications Task Force shall:

- Provide a management tool to co-ordinate and consolidate the nutrition communications efforts of a number of organizations which are members of the National Nutrition Council
- Be responsible for drawing a schedule for message delivery
- Be responsible for the monitoring and evaluation of the communications strategy
- Have a final decision on posters and print materials which will be used nationally after the materials have been developed and pre-tested at the regional level

- Draw a budget for posters and print materials development and production
- Cover periodic meetings with Regional Communications Task Forces
- Be responsible for drafting press statements for approval by the Chairperson of the National Nutrition Council

The Regional Communications Task Forces shall consist of officials from the National Nutrition Council member organizations who are at the regional level.

The Regional Communications Task Forces will:

- Coordinate regional nutrition communications activities
- Monitor and evaluate communications activities
- Liaise and attend periodic meetings with the National Communications Task Force
- Be responsible for the development and pre-testing of posters and print materials at the regional level

BEHAVIOURAL STRATEGY:

Rural women of child bearing age are the primary target group for the communications strategy. Grannies are a secondary target, given their strong influence in the family on child rearing practices.

A discreet number of ideal behaviours were selected as priority messages for activities and are reflected in the message delivery strategy.

These behaviours were determined based on several criteria including potential for improved health, ease of performance, availability, cost in time, cost in resources, acceptability by individuals, acceptability by family/community, and potential for personal reward. The key ideal behaviours to be addressed include:

- correct measuring of child's food and give recommended daily quantities
- child always to be fed thick *indengane*
- child to be fed from his/her own bowl
- child will be encouraged to take sour foods to restore appetite during and after illness
- exclusive breast feeding for the first four to six months of a child's life

MEDIA MIX STRATEGY:

An innovative mix of media will be used to reach mothers and grannies with messages. Specific activities will be planned and integrated into the regional and national action plans to be prepared in late 1992 - early 1993. The respective Communications Task Forces will be responsible for planning and coordinating these activities nationally and in the regions. Examples of the wide variety of possibilities for message dissemination are described in the following paragraphs.

Radio spots and at least two fifteen minute programmes including recorded interviews, dramas, debates, songs, and poetry will be prepared and broadcast weekly. Personal testimonies by mothers, grannies, and traditional healers about why they believe in better infant feeding and how to do it will also be prepared.

Community drama will be organized where the actors are the mothers themselves. Baby weighing contests including the distribution of simple prizes and flyers on better feeding practices will be organised.

The counselling cards will continue to be used in health centers and clinics to advise mothers about good feeding practices. Reminder cards about good infant feeding will be distributed to mothers following health talks and community events to help mothers recall messages.

A popular Swazi newspaper, Tikhatsi, will be invited to publish poems developed during contests by school children on such themes as energy dense foods. These poems will also be broadcast on the radio. Appealing notices motivating mothers to tune in to the weekly radio programmes on health could also be printed in the newspaper.

Traditional healers who were recently trained by SINAN to serve as breast feeding counselors for their communities will be encouraged to advise mothers on better infant feeding and provided with reminder cards for distribution.

Modules on better infant feeding will be developed to be included in the regularly scheduled programmes for the training of agricultural extension workers, rural health motivators, and members of mothers support groups.

MONITORING STRATEGY:

Monitoring of activities will be done on a systematic basis at the regional and national levels.

At the regional level, monitoring will be carried out by the agricultural extension workers and rural health motivators who have been trained in these skills. Several monitoring tools will be used, some of which may also double as group awareness builders or activities.

These include:

- **Interviews** with mothers will be held at regular meetings for Zenzele groups, during clinic visits, and women's prayer groups
- **Home visits** will be conducted where interviews, discussions and observations will be carried out.
- **Baby competitions** will allow opportunities to check if the growth monitoring process has been followed correctly and if the baby is doing well. The mothers will also be interviewed to find out what they know about infant feeding and to assess listenership

of the project radio spots and programmes.

At the national level several monitoring tools will be used to assure that programme activities are on track. Examples of these tools are as follows:

- **Interviews and groups discussions (focus groups)** will be held with rural women and home economics staff with technical assistance from the national level to gain insight into progress being made on the various strategy objectives.
- **A survey** on rural women's knowledge, beliefs and stated practices about infant feeding will take place at the end of 1993 to gather information about programme impact. Questionnaires will be prepared and circulated to all home economics staff who will participate in gathering information for the survey. Results will be analysed at the national level and used for 1994 project planning purposes.

APPENDIX J

COMMUNICATION STRATEGY DEVELOPMENT WORKSHOP

PROBLEMS AND BEHAVIOURS

Group 1

MAJOR PROBLEM: Infants were not exclusively breast fed

BEHAVIORS LINKED TO THE PROBLEM:

1. Colostrum discarded
Target: Mothers and grandmothers
2. Giving of non-breast milk
Target: Mothers, fathers, child minders, grannies
3. Pre-lacteal feeds given to infants
Target: health workers, mothers, grandmothers, traditional healers

DESIRED BEHAVIOURS:

1. Give colostrum
2. Exclusive breast feeding from birth to 4-6 months
3. Breast feeding initiated within 30 minutes of birth

OBSTACLES:

1. Mothers feel what they're doing is fine as it was the case traditionally. Colostrum was considered as dirty milk; Fear of the unknown by giving colostrum (a taboo)
2. Giving of water before breast feeding thought be important for cleaning the throat and stomach. Child cried too much when mother tried exclusive breast feeding.
3. Motherhood begins early. Young mothers tend to accept without questioning the practices recommended by their mothers and grandmothers.

MAJOR PROBLEM: No recuperative feeding

BEHAVIOURS LINKED TO THE PROBLEM:

1. Assistance with child care (child care behaviour by child minder is not appropriate)

Target: Mothers, grannies, baby minders

2. Children eat from a common plate

Target: Grannies, mothers, fathers, child minders

3. Children with poor appetites are not encouraged to eat

Target: Mothers, grannies, child minders

DESIRED BEHAVIOURS:

1. Mothers should feed the children or leave clear instructions with child minder
2. Children's food must be measured and they must use their own bowls
3. Mothers should give sour foods such as *emasi*, *liphalishi*, and *incwancwa*

OBSTACLES:

1. Mothers feel they are too busy.
2. Tradition says, "One plate for all."
3. Mothers don't like *incwancwa*. They say it causes heartburn.

MAJOR PROBLEM: Poor sanitation

BEHAVIOURS LINKED TO THE PROBLEM:

1. Families do not use pit latrines
Target: whole family
2. Poor refuse disposal
Target: family
3. Poor water storage (Family members do not store water in sanitary way.)
Target: whole family

DESIRED BEHAVIOURS:

1. Families should build pit latrines.
2. Families should dig rubbish pits.
3. Store and cover water in clean

OBSTACLES:

1. Mothers are not members of organised groups

Group 2

MAJOR PROBLEM: Food not energy-dense

BEHAVIORS LINKED TO THE PROBLEM:

1. Babies given thin *indengane*
2. Hardly give *liphalishi* to babies
3. Mums use bottles

DESIRED BEHAVIOURS:

1. Give babies thick *indengane*
Target: Mothers, child minders
2. Give *liphalishi* softened with malt and relish
Target: Mothers, child minders
3. Feed with a cup and spoon (i.e., the food should be thick enough that it can't be feed with a bottle.)
Target: Mothers, child minders Secondary Target: Grannies, Men

OBSTACLES:

1. Food scarcity, wastage, obesity, cost, time (perceived?)
2. Obesity, scarcity (perceived?)
3. Wrong advice from elders; time

MAJOR PROBLEM: Food is not measured

BEHAVIOURS LINKED TO THE PROBLEM:

1. Mothers giving too little for age/meal
2. Mothers not giving enough meals a day
3. Mothers offer food in a common bowl

DESIRED BEHAVIOURS:

1. Start with smaller amounts; increased with age
Target: Mothers, child minders
2. Increase number of feeds as baby grows
Target: Mothers, child minders
3. Feed from own bowl
Target: Mothers, child minders Secondary Target: Grannies, Men

OBSTACLES:

1. Lack of awareness/motivation
2. Belief, greediness, selfishness
3. Food scarcity, wastage

MAJOR PROBLEM: Hygiene

BEHAVIOURS LINKED TO THE PROBLEM:

1. Families do not use pit latrines
2. Mothers do not cover food
3. Surroundings are not cared for properly

DESIRED BEHAVIOURS:

1. Build pit latrines; use pit latrines
Target: Men, women, grannies, child minders, children
2. Cover/protect all foods
Target: Men, women, grannies, child minders, children
3. Clean all surroundings, houses
Target: Men, women, grannies, child minders, children

OBSTACLE: Lack of awareness of co-relationship between hygiene and nutrition

APPENDIX K

COMMUNICATION STRATEGY DEVELOPMENT WORKSHOP

BEHAVIOR PRIORITISATION EXERCISE

Points	Behaviour
39	Children's food must be measured and children must use their own bowl - Group 2
39	Give child thick <i>indengane</i> - Group 1
38	Mothers should give sour foods - Group 2
38	Feed with cup and spoon (food must be energy-dense) - Group 1
36	Give <i>liphalishi</i> softened with malt and/or relish - Group 1
36	Exclusive breast feeding, birth to 4 to 6 months - Group 2
35	Give colostrum - Group 2
33	Start with smaller amounts of food; increase amounts with age - Group 1
33	Breast feed within 30 minutes after birth - Group 2
32	Feed baby from own bowl - Group 1
31	Increase number of feeds as baby grows - Group 1
30	Mothers should feed children themselves or leave clear instructions for child minders - Group 2

HYGIENE

Points Group 1	Behaviour	Points Group 2
28	Build Latrines	22
39	Use Latrines	38
41	Cover All Foods	26
32	Clean All Surroundings	38