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**Women and Infant Nutrition Field Support Project (WINS)**

**Technical Assistance Visit by  
the WINS Project Deputy Director  
to Burkina Faso**

February 14 to February 25, 1994

**SUBMITTED BY:**

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## **I. BACKGROUND**

At the request of l'Association pour la Promotion de l'Alimentation infantile au Burkina (APAIB) and with the concurrence of the U.S.A.I.D. mission, Dr. Judith A. Ricci (WINS Project Deputy Director) travelled to Burkina Faso for two weeks from February 14 to February 25, 1994. During the second week of her technical assistance visit, she was joined by the Reverend Olivia Holmes (WINS External Consultant and Qualitative Research Methods Specialist).

## **II. PURPOSE AND SPECIFIC OBJECTIVES OF THE TRIP**

The purpose of the WINS Deputy Director's trip was to assist APAIB with finalizing all preparations for the start-up of the APAIB/WINS program's operation research activities with Save the Children Federation (SCF) in March 1994.

The specific objectives of the visit were to:

1. meet with the Director of APAIB (Mrs. Binta Barry), the SCF Burkina Faso Country Representative (Mr. Adam Keehn), the APAIB/WINS Program Coordinator (Dr. Inoussa Kaboré), and other members of APAIB to review changes made to the APAIB/SCF/WINS operations research protocol by the WINS team in Washington since the protocol's first draft (October 1993);
2. work with APAIB to identify and select six fieldworkers for the operations research data collection (data collectors and field supervisors);
3. travel with APAIB to Bazega province (one of SCF's two intervention zones in Burkina Faso) to:
  - observe SCF's ongoing activities
  - discuss the research protocol with the SCF field team in Saponé, and
  - determine the extent of SCF's planned participation in the program's operations research activities; and
4. review the operations research protocol (including focus group guide) with the WINS qualitative research methods specialist and finalize preparations for the consultant's qualitative research methods workshop.

### **III. ACTIVITIES**

#### **A. Meetings with APAIB**

The WINS Deputy Director reviewed the APAIB/WINS/SCF operations research protocol with APAIB members (Mrs. Binta Barry, Dr. Inoussa Kaboré, and Mr. Léon Sanon) and the WINS external consultant (Rev. Olivia Holmes) to ensure that all revisions to the first draft (October 1994) by the WINS team in Washington had been noted and communicated clearly. Refer to Appendix A.

The WINS Deputy Director and the Director of APAIB discussed the need for revising the APAIB/WINS program's first year work plan due to a number of scheduling conflicts that have arisen regarding planned training activities. Alternates to conduct the computer training workshop originally scheduled for two weeks during January 1994 were reviewed, as were plans for the program management workshop to be conducted by CESAG trainers in Ouagadougou.

The WINS Deputy Director and APAIB members (Mrs. Binta Barry and Dr. Inoussa Kaboré) met with Mr. Joseph Ouedraogo (Director of FIDEXCO, the local firm contracted by the Education Development Center, Inc. to financially manage the WINS Project's in-country field expenses) to discuss i) wire transfers to the WINS Project's in-country bank account, and ii) FIDEXCO's procedures for paying in-country field expenses.

#### **B. Meetings with APAIB and SCF**

The WINS Deputy Director met with APAIB members (Mrs. Binta Barry and Dr. Inoussa Kaboré) and Mrs. Maria Kéré (Acting SCF/Burkina Country Representative)<sup>1</sup> to i) review and finalize preparations for the APAIB/WINS program's collaboration with SCF in their Bazega province intervention zone; and ii) brief her on the objectives of the APAIB/WINS team's planned visit to Bazega province.

The WINS Deputy Director and Qualitative Research Methods Specialist also met with APAIB members (Mrs. Binta Barry and Dr. Inoussa Kaboré) and the SCF field team in Saponé to:

- i) review and finalize the APAIB/WINS program's preparations for collaboration with SCF in Bazega province;
- ii) organize logistics and schedule training activities for focus group leaders and supervisors to be conducted in Bazega province;

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<sup>1</sup>Mr. Adam Keehn (SCF/Burkina Country Representative) was on home leave in the United States during the technical assistance visit.

- iii) provide SCF's Health Information Systems Coordinator with sampling criteria to select community members to participate in focus groups conducted during training sessions; and
- iv) observe an SCF "animatrice" conduct a nutrition lesson with mothers in the village of Doulougou (Bazega province).

The WINS Deputy Director also interviewed five candidates to serve as focus group leaders in Bazega province to determine i) their experience in conducting focus groups and ii) their availability during the time period scheduled for training and field work. Dr. Kaboré also interviewed the candidates and assessed their fluency in Mooré (the language of the Mossi spoken in Bazega province).

### **C. Meetings with APAIB and Africare**

The WINS Deputy Director and APAIB members (Mrs. Binta Barry and Dr. Inoussa Kaboré) met with Ms. Dellaphine Rauch-Houekpon (Africare/Burkina Country Representative) and Ms. Wendy Greene (Africare's Program Coordinator in Zorgho) to:

- i) discuss the current status of Africare's Phase II child survival activities in Ganzourgou province;
- ii) identify the next steps in the APAIB/WINS program's collaboration with Africare; and
- iii) review Africare's draft of a memorandum of agreement between the APAIB/WINS program and Africare/Burkina.

Africare reported that its Phase I evaluation and Phase II baseline surveys had been completed and their results were available for interpretation. Africare requested that, if time permitted, Dr. Ricci meet a second time with Ms. Greene to help Africare define the focus of its nutrition programming activities and identify the next steps in the APAIB/WINS program's collaboration with Africare. APAIB, WINS, and Africare representatives agreed during the meeting that they would postpone further discussion on the Memorandum of Agreement until a collaborative operations research protocol and work plan had been drafted.

The WINS Deputy Director met a second time with Wendy Greene to:

- i) review the results of Africare's Phase II baseline survey;
- ii) identify constraints to optimal maternal and child health that Africare would like to address collaboratively with APAIB/WINS; and

- iii) outline a strategy for operations research leading to an intervention in Africare's field site in Ganzourgou province.

The outcome of this meeting was a decision to focus APAIB/WINS technical assistance in the following areas: i) increasing colostrum use; ii) strengthening Africare's prenatal care program by increasing its availability and access to pregnant women and improving its quality; iii) strengthening Africare's "well baby" program by increasing the availability of and access to growth monitoring and promotion (GMP) sessions and improving the quality of post-measurement nutrition counselling and follow-up. In addition, specific emphasis will be placed on developing nutrition education interventions for women and children that are separate from prenatal visits and GMP sessions so that village counsellors will be able to sustain nutrition activities without reliance on prenatal visits and GMP.

Operations research will be conducted to answer critical questions needed to design a strategy to improve Africare's program in the above three areas. Refer to Appendix B for a preliminary list of operations research questions.

#### **D. Meetings with U.S.A.I.D./Burkina**

The WINS Deputy Director met with Ms. Neen Alrutz (U.S.A.I.D. Technical Advisor for Child Survival) to debrief her on activities conducted during the course of the technical assistance visit and introduce her to Rev. Olivia Holmes. APAIB members (Mrs. Binta Barry and Dr. Inoussa Kaboré) also participated in the meeting.

#### **IV. ACCOMPLISHMENTS**

The WINS Deputy Director achieved the goal of her trip which was to assist APAIB with finalizing all preparations for the start-up of the APAIB/WINS program's operation research activities with Save the Children Federation (SCF). Other specific accomplishments include assisting APAIB in

- obtaining key informant data during field visits to Saponé and Doulougou that would assist APAIB and SCF in writing culturally appropriate and sensitive questions for focus group discussion guides to be finalized during APAIB/SCF/WINS operations research training in March 1994; and
- identifying data collectors and supervisors (four focus group leaders and two field supervisors) and securing their participation in the APAIB/SCF/WINS operations research activities (training and field work) scheduled to begin in Bazega province on March 3, 1994

The WINS Deputy Director also advanced the APAIB/Africare/WINS collaboration by assisting

Africare in identifying its specific needs for APAIB/WINS technical support and planning follow-up technical assistance to be provided by the APAIB/WINS Program Coordinator in April 1994.

## **V. NEXT STEPS/FOLLOW-UP ACTIONS**

1. Plans for the APAIB/WINS program's operations research activities with SCF were finalized during the technical assistance visit. They will occur as follows:
  - February 25, 1994 to March 2, 1994: Training of trainers workshop in qualitative research methods for APAIB members and representatives of the SCF and Africare field teams (in Ouagadougou)
  - March 3 to 8, 1994: Training of APAIB/SCF/WINS operations research data collectors and supervisors in focus group data collection techniques (in Saponé, Bazega province)
  - March 21, 1994: Start of APAIB/SCF/WINS operations research data collection in Bazega province (2-3 weeks)
2. APAIB will draft a Memorandum of Agreement between the APAIB/WINS program and SCF/Burkina which describes each partner's contribution to the collaboration.
3. The next WINS technical assistance visit to Burkina Faso will occur in mid-April (approximately) to assist APAIB with the i) analysis of focus group data, and ii) design of a cross-sectional survey to verify the results of focus group data in the entire SCF intervention zone.
4. APAIB will work with Africare in April to draft an operations research protocol, first year work plan, and Memorandum of Agreement for the APAIB/Africare/WINS collaboration. Operations research in Ganzourgou province is tentatively planned to start in May 1994.
5. The Director of APAIB and APAIB/WINS Program Coordinator will meet with other members of APAIB to determine their availability for training workshops (computer operation, program management, document management and dissemination, quantitative research methods, etc.) and revise the APAIB/WINS program's first year work plan to reflect the scheduling changes.
6. APAIB will estimate in-country program expenditures for the next three months (March to May 1994) and communicate these monthly projections to the WINS Deputy Director to ensure that EDC will be able to transfer funds in a timely manner to cover payment of APAIB/WINS program field expenses as they are incurred.

# APPENDIX A

**DRAFT**

**January 31, 1994**

**APAIB/SCF/WINS OPERATIONS RESEARCH PROTOCOL  
BAZEGA PROVINCE, BURKINA FASO**

**APAIB:**

**Dr. Inoussa Kaboré  
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**Dr. Judith Ricci  
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Appendix A Draft Focus Group Discussion Guide

## **I. INTRODUCTION AND BACKGROUND**

In Burkina Faso, recently conducted nutritional status surveys estimated that approximately 40 percent of children less than five years of age exhibited signs of malnutrition. Consequently, an urgent need exists in this country for targeted interventions to improve the nutritional status of this vulnerable subgroup of the population.

However, appropriate and acceptable interventions to improve nutritional status require careful planning, information gathering, design, and implementation because the etiology of child malnutrition is not simple. It is often characterized by the complex interaction of many factors that center around insufficient food availability, high rates of illness, and suboptimal behaviors (especially child feeding practices) which are integrally linked to the specific environment (social, cultural, economic, etc.) of affected populations. In addition, appropriate and acceptable interventions involve communities in both problem identification and solution development. This increases the likelihood of program success and sustainability because communities participate in the program and thus, have an investment in it.

In Burkina Faso, l'Association pour la Promotion de l'Alimentation infantile au Burkina (APAIB) will collaborate with the Women and Infant Nutrition Field Support (WINS) Project and Save the Children Federation/Burkina Faso (SCF) to develop and implement an intervention to improve the nutritional status of infants and young children in Bazega province. Each organization contributes uniquely to this collaborative program. APAIB, an indigenous private voluntary organization, will manage the program and provide expertise in the promotion of optimal infant and young child feeding practices, particularly breastfeeding. The WINS Project, a nutrition field support project funded by the Office of Nutrition at the United States Agency for International Development (USAID), will technically and financially support APAIB. SCF, a United States-based PVO, works within the broader context of rural development and has established strong ties to the communities of Bazega province where it has been working since 1987. SCF will introduce APAIB to the communities residing in their intervention area and will facilitate APAIB's work in the region.

## **II. STATEMENT OF THE PROBLEM**

In January 1993, a baseline health and nutrition survey conducted by Save the Children Federation in Bazega province revealed the following specific constraints to optimal infant and young child feeding:

- All mothers initiated breastfeeding. However, only half started immediately after the infant's birth, i.e. fed the infant colostrum.
- Timing of the child's dietary supplementation varied significantly among

mothers. Almost 60 percent of mothers report supplementing infants between four and six months of age; almost 30 percent report supplementing before four months, and almost 10 percent after six months.

- During episodes of diarrhea, 34 percent of mothers restricted breastfeeding and 54 percent reduced the frequency of feeding solid or semi-solid foods to the sick child.

APAIB will address these particular constraints to optimal infant and young child feeding in Bazega province by designing and conducting operations research that will lead to the development of an intervention to increase the nutritional impact of SCF's ongoing programs in Bazega province.

The operations research will be conducted in two phases. The first phase of research involves information gathering. Additional data will be collected to complement and supplement existing information. The research will examine community perceptions of infant and young child feeding practices, including their perceptions of current practices and recommended "optimal" practices and their descriptions of the reasons for their views. Communities will also be asked to participate in the identification of appropriate and acceptable solutions to the problems they identify.

In the second phase, the alternative solutions developed during phase 1 will be field-tested and evaluated. Again, community input will be sought during the evaluation process. Those solutions evaluated as the most appropriate and acceptable to the communities will be finalized and scaled-up for SCF to implement in Bazega province.

### **III. OPERATIONS RESEARCH: PHASE I**

#### **A. RESEARCH METHODS**

Operations research data will be collected using the following three research methods:

- key informant interviews
- focus groups
- cross-sectional survey

**Key informant interview** data will be collected first to provide community-level background information for i) selecting categories of individuals to participate in focus groups who will be able to provide the type of information sought by the research; ii) formulating culturally appropriate questions (using local terminology) for focus group

discussions and the survey questionnaire; iii) analyzing and interpreting focus group and survey data in the appropriate context; and iv) developing the intervention to improve infant and young child feeding practices.

Focus groups will be conducted next to obtain community members' input on a number of topics related to infant and young child feeding practices. In particular, the focus groups will concentrate on understanding community members' perceptions of i) "appropriate" and "inappropriate" feeding practices; ii) their constraints to optimal feeding practices; and iii) their needs to overcome these barriers.

A quick cross-sectional survey will follow the focus groups. It will be conducted on a representative sample of community members to assess the entire community's agreement with information obtained during the focus groups. This information will help to prioritize the constraints identified by focus group participants based on the percentage of community members who share the same opinion. The survey will also provide an opportunity to collect other information that may be needed to answer the research questions.

The operations research will involve eight (8) SCF intervention villages. The focus group discussions will be conducted in four (4) villages. The cross-sectional survey will be conducted in all eight (8) villages. These include the four focus group villages plus an additional four randomly selected SCF villages.

## **1. Key Informant Interviews**

If data are not already available, key informants will be interviewed to obtain community-level information on a number of topics including food availability (including types of foods grown, types of foods purchased, and costs), health care services, agricultural practices (including the agricultural cycle and extension services), and local income-generating schemes. In addition, they will also help to identify men and women who most often advise mothers on appropriate child care practices.

This data that will assist in subsequent stages of the operations research including: i) the selection of categories of individuals to participate in focus groups who will be able to provide the type of information sought by the research; ii) the formulation of culturally appropriate questions (using local terminology) for focus group discussions and the survey questionnaire; iii) the analysis and interpretation of focus group and survey data in the appropriate context; and iv) the development of appropriate and acceptable intervention to improve infant and young child feeding practices.

The key informant interview guide will be developed in February during the technical assistance visit of the WINS Project qualitative research methods specialist.

## **2. Focus Groups**

### **a. Sampling**

#### **i) Village Level**

Four (4) SCF villages will be selected for the focus group research based on number of resident households at the time of the SCF 1993 Bazega province census. SCF currently works in 18 villages located in the "départements" of Saponé, Ipelcé, and Doulougou.

Villages with the largest number of households will be included in the sample. Number of households is the primary criterion for selecting the focus group villages because they will also participate in the later cross-sectional survey. Therefore, each village must have enough resident households to permit the selection of two independent samples of households with children under four years of age.

According to the March 1993 census report ("Rapport de l'Enregistrement familial - 1993"), the four villages with the largest number of households are Nionsha (498 households), Targho (470 households), Sagabtinga-Yarcé (422 households), and Babdo (312 households).

#### **ii) Individual Level**

Four (4) focus groups will be conducted in each of the four villages. Each group will consist of eight to ten individuals who will be selected by SCF personnel with the assistance of community leaders according to the following criteria - gender, ethnicity, socioeconomic status, and experience with feeding and caring for children. Separate focus groups will be conducted for each of the following groups of individuals:

- Men who advise mothers on matters related to child care
- Women who advise mothers on matters related to child care
- Breastfeeding women with a child between six and 36 months of age
- First time mothers with an infant younger than six months of age

Men's opinions are sought because they often are the principal decision-makers on the purchase of goods, use of services, and allocation of resources. Although men will not be asked to discuss infant feeding practices, per se, they will provide critical information on resource availability and use, and household decision-making, particularly as it affects children. Further, because men frequently advise women, it

is important to understand their beliefs and rationale for making decisions in order to develop appropriate solutions to the problems identified by the research.

The three groups of women or girls are differentiated by level of experience in feeding and caring for children based on the assumption that knowledge and practices progressively change as women become older and more experienced. Even though many of the most experienced women are no longer directly involved in the care of children, their input is important because they often advise younger mothers on child care issues.

#### **b. Discussion Topics**

Focus group leaders will conduct discussions following the Focus Group Discussion Guide (Appendix A) which will be revised and finalized during training. The Guide will serve two functions:

- i) to ensure that each discussion leader consistently asks and obtains responses to the same questions, and
- ii) to assist focus group leaders with formulating questions that will provide the specific information needed to meet the goals of this research.

The focus group guides will provide a framework for the discussions. However, focus group leaders will need to formulate their own specific questions to probe participants. Because a large part of successful focus group research relies on the skill of the discussion leaders, focus group leaders will receive intensive training as described in section III.A. of this protocol.

#### **i) Women**

Focus group discussions with women will provide data to answer the following four general research questions:

- How are children three (3) years of age and younger currently being fed?
- How do focus group participants perceive the recommended "optimal" feeding practices?
- What barriers prevent participants from feeding their children "optimally"?
- What would participants require in order to feed their children according to the recommended "optimal" practices?

Focus group leaders will probe participant to obtain specific information on the following topics:

- Determinants of colostrum use
- Determinants of supplementary feeding practices
- Perceptions of healthy and unhealthy children
- Feeding practices during children's illness and convalescence
- Intrahousehold food distribution practices
- Child caregiving practices
- Women's use of time

#### ii) Men

Focus groups with men will complement the discussions with women. They will provide data to answer the following three general research questions:

- How do men influence the feeding of infants and young children?
- How would men, as decision-makers and controllers of resources, potentially affect women's adoption of "optimal" feeding practices?
- What would men need to encourage women to adopt "optimal" child feeding practices?

The focus group leaders will probe men with questions on the following topics:

- Household decision-making
- Child care practices
- Women's use of time

#### c. Data Analysis and Interpretation

Each pair of focus group leaders will conduct one focus group per day, lasting no more than two hours. A discussion of this duration will produce at least 40 to 50

pages of transcript. At the end of each day, the focus group team will prepare a summary of the information they collected that day and will begin to translate and transcribe the taped discussions into French. On the following day, the leaders will complete the French transcription of the previous day's discussion. The APAIB/WINS Program Coordinator (with assistance from other APAIB members and SCF personnel, if needed) will periodically check the quality of the translation and transcription of the discussions.

Following this sequence (one day to lead the discussion group followed by one day for transcription), the leaders will require eight days to complete the focus group work in each village. After all focus groups have been completed, the French transcripts will be reviewed and analysis will begin.

After all focus group transcripts have been prepared for analysis (in approximately late March or early April), the WINS Project will provide in-country technical support to assist with the analysis of focus group data. The external consultant will work with the APAIB/WINS Program Coordinator and the six focus group leaders to i) discuss the process and content of the focus groups; ii) get the focus group leaders' assessments of what was said; and iii) verify conclusions drawn in their daily summaries. Coding will be completed and an analysis grid will be developed and completed using the coded transcriptions. A preliminary set of findings will be prepared based on this analysis.

### **3. Cross-Sectional Survey**

The purpose of the survey is to i) quantify public opinion on the principal responses to questions posed during in-depth focus group discussions for the entire SCF intervention community; and ii) collect supplementary quantitative data that could not be obtained using focus group research methods. This includes socioeconomic and demographic data as well as some additional data on child feeding and caring practices and women's time.

The survey data will be used to i) correct or reenforce the interpretation of focus group results; ii) prioritize the constraints to optimal infant and young child feeding practices; and iii) develop appropriate and acceptable solutions focusing on the most important problems as perceived by the entire community.

#### **a. Sample**

##### **i) Village Level**

The survey will be conducted in eight (8) SCF villages: the four focus group villages

(Nionsha, Targho, Sagabtinga-Yarcé, and Babdo), and another four randomly selected villages within the SCF intervention area.

## **ii) Individual Level**

The sample within each village will be selected from primary sampling units defined by the four classes of focus group participants, i.e. male heads of concessions, older women, breastfeeding women, and adolescent girls. The February 1993 SCF census will be updated with new births and then, will be used as the sampling frame for this component of the research. Only households with children under four years of age will be included in the sampling frame. For samples selected from the four focus group villages, households that contributed participants to the focus group research will be excluded from the sampling frame.

### **b. Questionnaire Development**

The APAIB/WINS Program Coordinator and a WINS Project external consultant will develop the questionnaire in late March or early April after focus group data have been analyzed and interpreted. The questions will ask respondents to agree or disagree with information collected during the focus groups and to contribute any additional information. The questions may follow the format of "strongly agree, somewhat agree, somewhat disagree, or strongly disagree," if this format is culturally appropriate. If it is not, another partially open-ended structure will be developed so that responses can be ranked during analysis and associated with socioeconomic and demographic characteristics of respondents (age, gender, ethnic group, etc.).

The questionnaire will be pretested and finalized before training of data collectors begins. Once finalized, the questionnaire will be translated into the appropriate local languages (e.g. Mooré and Fulfubé).

### **c. Data Collection**

Each household in the sample will be visited by a data collector (the same women who collected focus group data), an SCF "animatrice," and a community leader to inform households about the study, ask them to participate, and set a time for the interview. Mothers of young children will be asked to respond to questions. Data collectors will note whether fathers are present or absent during questioning to help control for their affect on mothers' responses.

#### **d. Data Analysis**

Data will be entered into the computer in coded format and analyzed using EpiInfo. Simple descriptive statistics (means and standard deviations, frequency distributions) will be generated first. Then bivariate comparisons will be made to examine the association between responses to questions and demographic and socioeconomic variables.

### **B. TRAINING**

#### **1. Key Informant Interviews**

A WINS external consultant specializing in qualitative research methods will work with APAIB members for approximately three (3) weeks in February and early March 1994. During this period, the consultant will i) conduct a training of trainers workshop in Ouaga to train five (5) members of APAIB in qualitative research methods including key informant interviews; and ii) assist APAIB with developing the key informant interview guide. After training and preparation of the interview guide, APAIB will conduct the key informant interviews before the focus group research methods and discussion guides are finalized.

#### **2. Focus Groups**

##### **a. Selection of Supervisors and Data Collectors**

Four (4) focus group leaders and two (2) supervisors will be recruited and trained for the research. These include three (3) women and one (1) man (for the focus groups with male heads of "concessions"). The team will be recruited from a pool of focus group researchers previously trained by either SCF or the Nutrition Communication Project (NCP). Preference will be given to those who have previous experience working either in Bazega Province or in other nutrition research activities. Each focus group leader will work with a reporter who will be either an SCF employee (if available) or another fieldworker.

##### **b. Development of the Focus Group Training Manual**

APAIB will develop the focus group training manual with technical assistance provided by a WINS external consultant. The manual will be developed following the WINS qualitative research methods workshop in February 1994. In October 1993, APAIB and WINS developed a preliminary focus group guide that contains a number of very specific focus group questions that can be modified and included in the training

manual as examples of probing questions.

The focus group guide and training manual will be pretested and finalized before beginning to train focus group leaders. Both the guide and manual will be translated into the appropriate local languages (e.g. Mooré and Fulfubé) for use by focus group leaders during training and in during focus group discussions.

### **c. Training**

A WINS external consultant will work with APAIB members for approximately three (3) weeks in February and early March 1994. During this period, the consultant will i) conduct a training of trainers workshop in Ouaga to train five (5) members of APAIB in qualitative research methods (first week); ii) assist APAIB with developing the focus group training manual (second week); and iii) participate with APAIB members in the training of focus group leaders (third week).

The one-week training of trainers qualitative research methods course will cover a variety of qualitative research methods (for example - pile sorts, free listing, and triadic comparisons) in addition to social marketing research (focus groups). The training will describe how to collect, tabulate, analyze, and interpret data collected by each of the methods and will present criteria for choosing a method (for example - research setting and purpose of the research).

The training of focus group leaders will be carried out by the APAIB/WINS Program Coordinator and APAIB members with technical support from the WINS external consultant. Focus group leaders will be trained in the field and will be required to make home observations. Because focus group leaders will need to probe participants with a sufficient number of appropriate targeted questions, they must be fully aware of and sensitive to the realities of local village life. Home visits will give focus group leaders an opportunity to observe local child feeding and caring practices and other more general household interactions and activities.

## **3. Cross-Sectional Survey**

### **a. Selection of Supervisors and Data Collectors**

The four focus group leaders and two supervisors who participated in the focus group research will also collect the survey data.

## **b. Development of the Data Collection Manual**

The data collection manual will be developed by the APAIB/WINS Program Coordinator with technical assistance provided by a WINS external consultant. The manual will be developed in April after the survey questionnaire has been designed.

The manual will be pretested and finalized before the training of data collectors begins. Once finalized, the data collection manual will be translated into the appropriate local languages (e.g. Mooré and Fulfubé) for use during training and for reference during data collection.

## **c. Training**

The APAIB/WINS Program Coordinator and other APAIB members will train six data collectors. Trainers will explain the goals of the research and the purpose of the survey. They will also describe appropriate techniques for collecting quantitative survey data stressing the importance of objectivity when asking questions and responding to the questions of study participants.

Data collectors will review the questionnaire with the trainers and have the opportunity to practice collecting data with them so that their techniques can be corrected before the survey starts.

## **C. SOLUTION DEVELOPMENT**

All information obtained from the key informant interviews, focus group discussions, and survey questionnaire will be reviewed and analyzed together. A final report will summarize the findings and conclusions of this phase of the operations research activities in Bazega province. This report will be presented during round table discussions with i) members of the communities involved in the research; and ii) members of the international development community working in Burkina Faso.

In the first round table, members of APAIB and SCF will return to the eight villages to present and discuss the report with community leaders. The objectives of the meeting are to i) gauge community members' agreement with the report's conclusions; ii) obtain additional insights from the community's perspective; and iii) solicit the community's suggestions for possible solutions to the problems identified by the research.

In the second round table, representatives of APAIB, SCF, WINS, the Ministry of Health, Africare, and USAID will review the findings and conclusions of the research,

and minutes from the round table with community leaders. They will then prioritize the problems according to a set of mutually agreed criteria. These may include i) the significance of the problem in meeting the goal of the research activities (i.e. improving infant and young child feeding practices); ii) the prevalence of the problem; and iii) the feasibility of addressing the problem within a designated time frame.

Round table participants will then discuss alternative intervention strategies and begin to identify potential solutions. Solutions will be placed into one of three categories: i) those that require testing before application; ii) those that can be applied directly without testing; and iii) those that require additional information before testing or application. Alternative solutions will be field-tested to compare factors such as cost and ease of implementation. Field testing will provide a means to assess the relative merits of the solutions before recommending any one(s) for integration into the SCF program (see section VI. below).

Following the round table, a working group composed of APAIB, SCF and WINS representatives will develop protocols for those solutions that require field-testing. Protocols will include procedures for sampling, implementation and evaluation.

#### **IV. OPERATIONS RESEARCH: PHASE II**

##### **A. SOLUTION TESTING**

Solutions will be field tested and evaluated to assess their relative acceptability, feasibility, cost, and potential effectiveness in resolving problems identified in findings of the focus group and survey research. Field tests will be conducted in the same eight villages in which the research was conducted.

Focus group discussions will be conducted in an additional four villages to assess the acceptability of the proposed solutions to those communities.

##### **B. INTEGRATION OF SOLUTIONS INTO SCF PROGRAMS**

The outcome of the research will be the recommendation of activities that focus on improving the feeding and caring of infants and preschool-aged children that will strengthen the nutritional impact of SCF's program in Bazega province.

A final report will be prepared by a working group of representatives from APAIB, SCF, WINS, and Ministry of Health personnel in Bazega province. The report will summarize the process of field-testing and evaluating alternative solutions and will discuss the relative feasibility and effectiveness of each one. The report will also

include recommendations for implementing the selected solutions as well as those solutions that could be directly implemented without field-testing. The report will also recommend next steps for those solutions that require additional work or information prior to field-testing, implementation, or both.

The operations research findings and recommendations will be shared with other members of the international development community working in the health and nutrition sectors in a national dissemination seminar to be held in Ouagadougou at the end of the program.

**APPENDIX A**

**Draft Focus Group Discussion Guide**

## **FOCUS GROUP GUIDE FOR WOMEN**

(TO BE REVISED DURING TRAINING)

Key topic questions are indicated by a dash (-) and boldface  
Probing questions are indicated by a dot (●)

### **Feeding Practices and Problems**

#### 1. **Colostrum Use**

[Either before holding the focus groups or as a the first question, learn what local terms is for colostrum.]

**-Some women give [colostrum] to their children. Why do they?**

- What do you think about this?
- How would you convince another mother to give [this substance] if she didn't want to or was afraid to?

#### 2. **Breastfeeding**

**-What are the advantages of breastfeeding: for women? for your children?**

- What advice have you been given about feeding your newborn? By whom? Was it useful?
- What advice would YOU give to a new mother about breastfeeding?--What about insufficient milk? What about when the child refuses to nurse?...

**-What are the major problems you have with breastfeeding?**

- What about when you are doing your work at home?
- What about when your are doing your work out of your home?
- What about when your aren't doing there?
- What about when you aren't feeling well?
- What about when you seem to have less milk than usual?
- What do you do if your child refuses to nurse?
- What about having enough time to breastfeed?
- Does your work change during certain seasons of the year and how does this affect breastfeeding?
- What about when you don't have enough breastmilk?

#### 3. **Introduction of other foods**

**- Why do children need food in addition to breastmilk?**

**- What advise would you give other mothers about introducing other foods to their children?**

- Would this change depending on how old the child is?
- Would this change if the child was a girl or a boy -- under what circumstances would this happen?

**- What are the major problems you have with introducing new foods to your children?**

- What time?
- What activities prevent you from feeding your children?
- What if the child refuses it?
- What about the season of the year?

- What about what foods are available?
- What about what foods can be eaten by young children?

4. End of breastfeeding (weaning)

- Why should children be weaned?
  - How should children be weaned from the breast?
  - How does weaning affect a child's health and nutrition?
  - How does weaning affect the mother?
- What are the major problems you had with breastfeeding your children?

5. Feeding when ill

- Should a child be fed differently when she is ill?
- What are the major problems mothers have feeding an ill child?
  - What would you advise your neighbor to feed her sick child?
  - How do children change their eating or breastfeeding when they are ill?
  - Some say that children become sick after breastfeeding stops. Do you share that opinion? If yes/no, why?

6. Feeding when recuperating

- How does feeding change when a child is recovering from an illness?
- What are the major problems feeding a child who is recovering from an illness?
  - How does a child react to food and eating when she is feeling better?
  - How would you advise your neighbor to feed her child when the child is feeling better?

7. During pregnancy

- How does pregnancy affect women's eating habits?
- What are the major problems women have getting enough to eat when they are pregnant?
  - How does eating affect the [fetus] baby?
  - What foods are they not allowed to eat during pregnancy? (try to determine if they are allowed to eat foods which are rich in iron)
  - Some women feel more hunger when they are pregnant. What can they do to satisfy that hunger? Are there reasons why they cannot satisfy that hunger?

8. During lactation

- How does breastfeeding affect a mother's eating habits?
- What are the major problems breastfeeding causes for mothers?
  - What can she do to meet those needs?
  - What food are they not allowed to eat when breastfeeding?
  - How does her work affect her breastmilk (quantity and quality)?

## Constraints (time, money, food, social support, labor demands and own health)

### 1. Information Sources

- Where do women get information on feeding their children?
- Of these, which sources give the most useful information to mother?
  - What information were you given on how to feed your children? By whom? Was it useful?
  - What information were you given about your eating while you are pregnant or nursing? By whom? Was it useful?
  - When you have problems with feeding your child or questions about how to do it best, who gives you the most useful information or help? Why is it most helpful?

### 2. Mothers' Health and Nutrition

- If a mother is not eating enough, how does that affect her feeding her children?
- If a mother is not feeling well, how does that affect her feeding her children?
  - Under what circumstances do you notice that you have less breast milk?
  - Why does that occur? What do you do to help stimulate production?
  - What about the food you eat (quantity or quality)?
  - What about after she has given birth?
  - Do women reduce their work load after they have delivered a baby?
  - If so, what tasks do they no longer do? Who does them?
- If a mother isn't eating enough, how does that affect what she normally does?
- If a mother isn't feeling well, how does that affect what she normally does?
  - What about feeding and caring for her children?

### 3. Knowledge

- How do you know if your child gets enough to eat?
- How do you know if your child is growing well?

### 4. Age (of mother and child)

- Do younger women in your community feed/care for their children differently than the older women do?
  - If so, how?
  - Why do you think that happens?
  - Have you changed the way you feed your youngest child from the way you fed your first child? Why? In what way?

### 5. Gender of child

- Under what circumstances are boy children fed differently than girls?
  - Have you ever noticed that that occurs in your community? Why does it?

## What do Women Feel THEY Need to Overcome Constraints?

- What would be needed to encourage women to feed [colostrum] to their newborns?
- What would help women the most to breastfeed their children in the best way?
- What would help women the most in feeding their children in the best way?

- What about making sure there's enough food to eat?
  - What about changing the work women do? or the way it is done?
  - What about having others help?
- What would help women the most so they feel well when they are pregnant?
- What about the work they do when they are pregnant?
  - What about health care?
  - What about what they eat?
- What would help women the most so they feel well when they are breastfeeding?
- What about the work they do?
  - What about what they eat?
  - What about health care?

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## **FOCUS GROUP GUIDES--FOR MEN**

(TO BE REVISED DURING TRAINING)

Key topic questions are indicated by a dash (-) and boldface

Probing questions are indicated by a dot (●)

### **Their Role in Child Care and Feeding**

- Under what circumstances do you care for your children?
- Under what circumstances do you feed your children?
  - Of the food your family eats, which do you provide?
  - Of these, does your wife provide any? If yes, which?
  
- What decisions do you make in the care and feeding of your children?
- What decisions does your wife make?
- What decisions you make together?
- What about food availability?
- What about who eats what food?
- What about when your children are ill?
- What about when your wife is ill? pregnant?

### **What Constraints do they perceive in feeding and caring for children?**

#### 1. **Problems in Feeding and Caring for Children**

- What problems do YOU face in assuring that your children are cared for and fed in best manner?
- What problems do women face in feeding and caring for their children in the best manner?

#### 2. **Women's health and nutrition**

- How does your wife's health affect her caring for and feeding your children?
- How does your wife's eating affect her caring for and feeding your children?
  - What about after she has give birth?
  - Do men in your community feel women's work should change after she has given birth?

#### 3. **Child's health and nutrition**

- What can you do to make sure your children are eating well?
  - How do you know if your child is growing well?
  - If your child is not eating well, what might be the reasons?
  - Who decides when a child should not be breastfed any longer?

#### 4. **Advice**

- What information have people given you about how your children should be fed?
  - What did they say? Was the information useful? helpful?

- Who would you recommend that your wife should go to if she needed advice on how to best care for and feed your children?
- What advice do you give your wife regarding the feeding of your children?
  - What advice would you give a father who notices his child is not eating well? not eating enough?

**What is needed to reduce constraints?**

- What would you need to ensure your family has enough food to eat?
  - What could you do to ...
  - What could your wife do to...
  - What could your community do to...

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## **APPENDIX B**

## **APPENDIX B**

### **Preliminary List of Questions for APAIB/Africare/WINS Operations Research**

#### **Colostrum Use**

- Why do mothers reject colostrum?

#### **Prenatal Care**

- What activities currently comprise an Africare prenatal care visit?
- What constraints do Africare "animatrices" and "concierges" currently experience in conducting regularly scheduled prenatal care visits and follow-up visits with pregnant women?
- What is the content of the counselling provided by Africare's "animatrices" and "concierges" during prenatal care visits?
- Why do the "animatrices" and "concierges" think that pregnant women do not come for prenatal care?
- What are pregnant women's constraints to obtaining prenatal care?
- What do pregnant women think is the purpose of prenatal care visits?
- What are the dietary practices of women during pregnancy and lactation?

#### **"Well Baby" Care**

- What activities currently comprise an Africare growth monitoring and promotion (GMP) session?
- What constraints do Africare "animatrices" and "concierges" currently experience in conducting regularly scheduled GMP sessions with mothers and children?
- What is the content of the counselling provided by Africare's "animatrices" and "concierges" to mothers during GMP sessions?

- Why do the "animatrices" and "concierges" think that mothers do not bring their children to GMP sessions?
- What are mothers' constraints to taking their children to GMP sessions?
- What do mothers think is the purpose of GMP?
- How and what do mothers feed their children during health and illness?