Nutrition Report

Nutrition learning study
Qualitative Insights Report
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Executive Summary

According to the Global Nutrition Report 2020, one in nine people are still undernourished, meanwhile one in every three people is either overweight or obese. 149 million children under 5 years of age are still affected by stunting globally. In the 2014 Kenya Demographic and Health Survey (KDHS), Kenya still faces the burden of malnutrition with 26% of children less than five years old stunted, 11% underweight, and 4% wasted. Child feeding practices and maternal nutrition have been suboptimal; exclusive breastfeeding was at 61%, minimum acceptable diet at 22%, while 9% of women of reproductive age (WRA) were underweight.

The Feed the Future Kenya Crops and Dairy Market Systems Activity focuses on promoting consumption of diverse, safe, and nutritious foods especially among women and children aged 6-23 months. This is to be achieved primarily through nutrition education and household training. KCDMS has engaged private sector actors through a grant mechanism to implement nutrition training alongside production technology adoption and other market systems activities. The training is conducted through a cascade train the trainer (ToT) model.

KCDMS through Busara Center for Behavioral Economics has engaged with nutrition grant partners (AGRiSS, CMAD and SAI) and FIPS-Africa to carry out two learning studies. The first learning study assesses the participants’ experience, the knowledge retention and effectiveness of the training materials. The second learning study aims at understanding the impact of the training and whether it is conditional on having access to income-generating activities as well. This is a quantitative study with a representative sample of ~ 1200 spread across the country.

The first learning study is conducted in two phases. The first phase of the Agri-nutrition learning study 1 took a non-experimental approach due to non-random assignment of training methodologies (talking books and dialogue cards) to assess the efficacy of the training methodologies in delivering agri-nutrition training to farmers. This phase had the following key objectives:

To understand the impact of the nutrition training on farmer knowledge, attitudes, and stated practices around nutrition and household management

To understand farmers’ experience of the training, and to provide insights on the usefulness of the training material delivered through talking books and agri-nutrition community dialogue cards.

In this first phase, we were not able to conduct a causal evaluation due to non-random assignment of the training methodologies (talking books and dialogue cards). Instead we opted to a qualitative approach, planning on conducting focus group discussions mixing groups with participants from different training groups. Due to the Covid-19 pandemic and the restrictions in movement this was not possible. We therefore carried out in-depth phone interviews where we interviewed a total of 30 participants (24 female and 6 male), from two different implementing organisations.

The second phase of the Agri-nutrition learning study 1 will aim to understand the best training methodology through a causal evaluation which will help us to:

- **Understand the impact that different training methodologies (talking books and dialogue cards) have on farmer knowledge, attitudes, and practices compared to the standard training methods**
- **Understand farmers’ satisfaction with the training to enable us to distinguish the preferences between talking books and community dialogue cards**

Given this context, this report therefore outlines the findings from the first phase of Agri-nutrition learning study 1.

Overall, we find the two training methodologies, the community dialogue cards and the talking books, to successfully complement each other. Participants find the added audio element to make the sessions more entertaining and easier to remember. Based on the responses, we recommend a few technical adjustments to the talking books (increased sound and ensuring sufficient batteries) before the usage is scaled up.

As previously stated, the design of the training was based on a cascade model, of training participants eventually becoming trainers themselves. We find that there is an additional ‘cascade’/layer, as the farmers being trained share the knowledge with their families/communities after the training. This can be utilised to spread the knowledge even more in an efficient and empowering way. The effectiveness of this element may be increased if more take-home materials can be distributed, and participants can have access to the audio skits after the training sessions. In the Agri-nutrition panel surveys, we will be collecting data on the multiplier effect of the Agri-nutrition training which will provide further insights on this.

The majority of the participants said that they had covered more than eight out of the fourteen Agri-nutrition topics. Most of the training sessions were conducted on a weekly basis depending on availability of group members and different group agreements and they covered one topic per training session.

With regards to participants’ training experience, most of them said they had a positive training experience. Almost all the participants said that they had been empowered through increased knowledge and that at the time of our interview, the majority reported that they were consuming balanced diets in their households. Interestingly, we see that the participants valued being trained as a group. The majority said that they enjoyed getting multiple and educative perspectives from their fellows.
In terms of knowledge retention, we find recall of topics trained across talking books and dialogue cards to be the same. The topics commonly mentioned include balanced diets, complementary feeding for children 6-23 months, food preservation and storage, good hygiene practices, diet for pregnant women, care for newborn and adolescent nutrition. This explains that both training methodologies are effective at disseminating knowledge across a wide range of topics. However, we do not find evidence of participants having adopted the behavior promoted in the gender roles and nutrition topic where training participants were encouraged to support each other in enhancing nutrition for their respective households. We note that changing gender roles was not the main objective of the training offered hence this could be an area of further exploration.

Overall, the participants felt empowered by their gained knowledge, and have taken pride in further sharing the lessons learned. However, participants report lack financial resources as a barrier to fully implement the lessons in their lives.
Background of the study

The 2017 Feed the Future Kenya Crops and Dairy Market Systems’ activity (KCDMS) baseline Knowledge, Attitudes, and Practices (KAPs) survey showed that the level of a household’s agri-nutrition knowledge influences a household’s food production, storage, and consumption patterns. This demonstrates potential for improving nutrition through education. The main KCDMS agri-nutrition objective is to promote consumption of diverse, safe, and nutritious foods especially among women and children aged 6-23 months. This is to be achieved through nutrition education and household training and participation in improved productivity, economic empowerment income generating activities through KCDMS support. KCDMS has engaged grant partners, who are private sector actors to implement agri-nutrition training programs as well as engage participants in production and sales of produce hence aligning with pathways to nutrition outcomes. The training is implemented using a cascade train the trainer (ToT) model. In order to facilitate this KCDMS trained a group of people, who then train a larger group of people, who finally train the affiliated farmers in various aspects of agri-nutrition.

KCDMS through Busara Center for Behavioral Economics has engaged with nutrition grantees (AGRISS, CMAD and SAII) and FIPS-Africa to carry out two learning studies. The first learning study was to be done through a quick and simple data collection process after the training had taken place, and was dependent on randomly assigning farmers to various training methods. However, due to the non-random assignment of the farmers to the training methods, we were unable to carry out experiments with AGRISS, CMAD and FIPS-Africa to identify the causal effects of the potential differences between talking books and dialogue cards. We, therefore, changed the approach of the first learning study to have two phases to fit the different ways farmers were assigned to the training methodologies:

The first phase employed a qualitative approach with AGRISS, CMAD and FIPS-Africa. This was not a causal study therefore not possible to give a comparison between the talking books and the dialogue cards. This phase assesses the efficacy of the agri-nutrition training to farmers and explores participants’ training experience and the knowledge retention. It is important to note that, due to this approach, this phase, therefore, focused on the depth of insights and not the quantity of participants. Further, the research conducted in this phase has the following key objectives:
To understand the impact of agri-nutrition training on farmer knowledge, attitudes, and stated practices.

To understand farmers’ experience with participating in the training, and to provide insights on the efficacy of the talking books and agri-nutrition community dialogue cards.

In the months of December 2019 and April 2020, KCDMS engaged Busara to carry out the first phase of the first learning study. In December 2019, we held 2 focus group discussions. In total we targeted 16 participants who had undergone KCDMS agri-nutrition and animal nutrition training through FIPS-Africa. 1 focus group discussion was held with farmers who had undergone animal nutrition training while the other one was held with participants who had undergone agri-nutrition training.

In April 2020, we targeted participants who had strictly undergone agri-nutrition training. The initial plan was to carry out focus group discussions with participants to understand their experiences and knowledge retention. Given the COVID-19 pandemic and the restrictions in movement this was not possible. We therefore opted to carry out in-depth phone interviews with individual farmers who had participated in the training instead. We interviewed a total of 30 participants (24 female and 6 male), 15 from AGR ISS (one of the KCDMS grant partners) and 15 from FIPS-Africa (an implementing partner on the KCDMS activity).

The overall question of interest in this report is understanding the effectiveness of the training by KCDMS using both agri-nutrition community dialogue cards and talking books through AGR ISS and FIPS-Africa, and the following section will further describe the methodology and findings of the study.
The Busara Center for Behavioral Economics carried out in-depth interviews to understand knowledge retention and training experience. This was done with the farmers who have been trained using the talking books and the dialogue cards by KCDMS grant partner, Agriculture Improvement Support Services (AGRISS) and subcontractor, Farm Input Promotions Africa (FIPS - Africa). AGRISS and FIPS are some of the partners carrying out training using the agri-nutrition community dialogue cards and talking books under KCDMS.

We employed a non-experimental methodology due to the non-random assignment of the training materials. The non-random assignment of the talking books prevents us from obtaining causal effects of the potential differences in our outcome measures (such as knowledge retention) as these differences are likely to be caused by the components that influenced who got talking books. For instance, we found talking books were often distributed to the trainers who were perceived as more qualified. This means that a direct comparison of knowledge retention between participants who received training through talking books, and participants who did not will be influenced by the fact that the trainers with talking books were generally more qualified - leading to an upward bias in the estimates of added benefits of talking books.

Instead, we applied a qualitative approach focusing rather on the depth of the insights than the quantity of the participants. Due to the COVID-19 pandemic, we were unable to conduct the focus group discussions as earlier planned. To ensure data collection could continue smoothly while ensuring the safety of both the participants and field officers alike, we opted for in-depth phone interviews.

Busara carried out 30 phone interviews with participants who had undergone agri-nutrition training through AGRISS and FIPS in Homabay and Kakamega counties respectively between the 10th to 17th of April 2020. We received the lists of all the participants who had undergone training using both the talking books and the dialogue cards from AGRISS and FIPS-Africa. The sample was then randomly selected from these lists.
We made a total of 171 phone calls to get the 30 participants. This was because the majority of the participants were unreachable via the phone possibly because their phones were out of charge and they could not easily access the charging services because of the covid-19 pandemic. Some also recorded numbers of their group leaders who could not get to them easily due to movement restrictions and social distancing measures. In total, we interviewed 24 women and 6 men. Each in-depth interview was approximately 1 hour long and was conducted in Swahili, English or Luo depending on the respondent’s preference.

A general overview of what was asked in the discussion guide include:

demographic data, training experience and knowledge retention.

The study instrument is annexed to this report. We used data stripping and thematic data analysis techniques to identify patterns within and across data in relation to training experience, views and perspectives, knowledge retention, behavior and practices around nutrition. We had 2 analysts conduct the analysis which was reviewed by a qualitative specialist. Before reporting the findings we had a discussion around the themes to ensure consensus.
Findings

The findings have been organized across the following themes:

- Demographics
- Training Experience
- Knowledge Retention Assessment
Demographics

In total, we interviewed 30 participants - 15 from AGRISS and 15 from FIPS. We had 24 women and 6 men participate in the study.

- The majority of the participants were above 35 years old with the youngest being 20 years and the oldest being 70 years old
- Almost all of them were married.
- The majority of the participants had attained primary level education.
- Almost all the participants were farmers, with a few of them engaging in small scale businesses like food retailing and sale of second-hand clothes.
- The participants reported owning a total land size of between 0.5-1.5 acres, bringing the average of land owned to 1.39 acres. Most of them built homesteads and used the remaining portions of land for farming.
Figure 1 shows the distribution of participants across the different age groups.

The majority of the participants had attained primary level of education.

Figure 2 illustrates the distribution of education levels.

The next section captures the general training experiences, perceptions and perspectives on the agri-nutrition community dialogue cards, and the talking books, areas of improvement for both training materials and ways the overall training experiences can be improved.
All the participants had been receiving training for the past six months at the time of the interview. However, a number of them could not recall the organization that conducted the training, but they could easily remember the trainer. Most of them said that they did not attend some of the sessions because of illness or other commitments and almost half of the participants said they had covered more than 8 agri-nutrition topics. The majority of the participants said that they received the training once per week (they mentioned different days of the week depending on their availability and different group agreements). Some mentioned biweekly and others once in a month.

Most of the participants reported to have undergone both theoretical and practical training sessions and preferred that kind of training approach as it enables them to visualize and understand the content better.

“We used to go to the field in the farms to be trained as we see what is done and then later have a class training. So it was both practical and theory.” 37 year old female respondent, FIPS-Africa

The majority of the participants said that they mostly covered one topic per training session.
i. Overview of training materials

a.) Agri-nutrition community dialogue cards:

A set of cards which were developed by the Ministry of Health (MOH) and Ministry of Agriculture, Livestock and Fisheries (MOALFi) for use as a community resource to train households on agri-nutrition. The cards cover nutrition sensitive topics. They are packaged into 14 modules:

- Introduction to nutrition-sensitive agriculture
- Dietary diversity - introduction to the 10 food groups
- Nutrition for pregnant women
- Nutrition for breastfeeding mothers
- Feeding infants 0-6months
- Appropriate complementary feeding for children aged 6-23 months
- Adolescents nutrition
- Food production and access
- Use of appropriate food preparation methods to preserve nutrients
- Food processing, preservation and storage
- Appropriate technologies in food production, preparation and storage
- Safe water sourcing and use for production and domestic purposes
- Appropriate sanitation and hygiene practices
- Gender roles and nutrition
b.) Talking books:

This is a radio-like gadget with pre recorded training content. The content is derived from the agri-nutrition dialogue cards. It was translated in Swahili in the form of skits by the Centre for Behavior Change Communication (CBCC).

![Talking books image]

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c.) Nutrition charts:

These are visual aids given to participants to take home during the training sessions. They have content on dietary diversity and complementary feeding for children aged 6-23 months.

![Nutrition charts image]
We sought to understand the experiences the participants had during the agri-nutrition training to determine areas for improvement for future training. Majority of the participants said that they had a good experience, and that they are now able to eat balanced diets and ensure balanced diets for their families too.

“*I was happy when I got those teachings since I am able to eat a balanced diet and my family is happy too.*”

*70 year old male respondent, FIPS - Africa*

**Positive experiences**

**Empowerment through increased knowledge:** Every participant in our study reports to have learned a lot from the sessions and have started incorporating the lessons into their daily livelihoods. We find that participants share what they have learned with their families. For the women, some mentioned that before the training they felt inferior to other women because they had little knowledge on nutrition. However, the training sessions made them feel equipped and empowered.

“*The training has united us as women. I am not educated and I used to feel inferior to other women but now after the training, I feel empowered.*”

*30 year old female respondent, AGRIS*

**Group training aspect:** Another positive feature of the training is the group training aspect. The participants said they enjoyed getting multiple and educative perspectives from their fellows.

“*In a group, you can ask questions and get responses from your fellow group members. There is this sharing of information when we are interacting.*”

*35 year old male respondent, FIPS - Africa*
Areas of improvement

Despite the good experiences reported by the participants during the interviews, some pointed out potential areas for improvement as highlighted below:

Allowances and refreshments: Some participants said that they had to travel long distances to attend the training sessions. They mentioned that this was a burden and they would benefit from allowances and/or refreshments in future training sessions.

“It would have been good if we had been given some allowances or even refreshments like sodas. Other people think that we were given some money like allowances in those trainings.”
45 year old female respondent, AGRISS

Unfriendly trainers: We had a case where a participant reported that the female trainer had been rude and did not know how to communicate with the elderly in the group.

“Our female trainer does not know how to talk to grown-ups. She was talking rudely to us...”
20 year old female respondent, AGRISS

Cancelled training sessions: For some groups, training would happen only if there was quorum - there had to be a minimum of 15 people. In some instances there were 10 people in attendance but this wasn’t deemed sufficient for the session to go ahead. This would demoralize the people in attendance. In the future, the participants urge the trainers to carry on with the training no matter the number to motivate them to keep attending the sessions.

“The challenge is that we were to be a minimum of 15 people. So when we were 10 people, they could not have a session so it could demoralise those who attended.”
45 year old male respondent, FIPS - Africa

Allocation of sufficient training time for practical demonstrations: Some participants wished to have more time allocated to the sessions to allow for demonstrations on how to apply what they had learned to their own farms. This could also mean that they want more of the practical aspect of the training.

“I did not get to understand everything because the trainer would only teach for 30 minutes, so I would like for a much longer time during the sessions.”
20 year old female respondent, AGRISS
Lack of finances: We had quite a number of participants mentioning that they had difficulties in applying the knowledge gained due to lack of finances.

“In general, some participants lack food so even if you talk to them about nutrition, it doesn’t add value since they cannot afford the food. They may be willing to practice but they do not have the money and they are very poor.”

35 year old male respondent, FIPS - Africa

Inadequate distribution of charts: During the training sessions, the participants were given the nutrition charts (introduction to complementary feeding and the 10 food groups) to take home for reference. Out of the 30 we interviewed, four participants did not receive these reference materials and all of them were FIPS-Africa trainees.

“No. They were few. We were to wait for more charts to be delivered. Only three or four people received.”

49 year old female respondent, FIPS - Africa

Majority of the participants said that they had a good experience, and that they are now able to eat balanced diets and ensure balanced diets for their families too.
ii. Participants’ views on training materials

Assessing training materials is an integral and critical part of any learning process. It is essential to understand whether the goals of the lessons are being met and to identify areas of improvement.

Training participants found the combination of two training methodologies work well to complement each other, as the talking books provide an entertaining element whereas the dialogue cards and charts help with visualization.

**Training experience using the Talking Books**

The participants referred to the talking books as “Digisomo”. The trainers used varying approaches to delivering the content; some trainers would have the audio skits play and engage them in discussions during or after the training sessions while other trainers would do a classroom training of the content, then later play the audio skits for the participants.

“It would start with a song and after the song, he would select the lesson of the day and a play would start.”

*49 year old female respondent, FIPS - Africa*

Participants generally enjoy the edutainment aspect of the talking books. They enjoy entertaining and engaging lessons. For purposes of sharing the information with the community at large, knowledge retention, and reference at home, some participants wished to have portable audio skits they could take with them after the training sessions.

**Benefits of using the Talking Books**

The majority of the participants who liked the talking books said they enriched their nutrition knowledge. The skits/plays also helped to enrich the training sessions by making them both interesting and understandable.

“The plays made the training very interesting and easily understandable.”

*30 year old male, FIPS - Africa*

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3 Edutainment is any material that is intended to be both educational and entertaining.
All the participants said that they found sessions delivered through the talking books very helpful. In order for us to get a better sense of whether the talking books provided additional value in some topics rather than others, we asked the participants which audio skits they could remember. The top of mind recall topics were: Nutrition for pregnant and breastfeeding mothers and complementary feeding for children between 6-23 months. Other topics mentioned included: Preparation of nutritious foods, food preservation, adolescent nutrition, and how and what to grow in a kitchen garden. As we see a high variety of topics mentioned, we believe the training was delivered effectively across this broad range of topics.

“I can remember Maria was from maternity and she was interacting with someone from the market when she had gone to buy some food. She was being advised on what to eat so that the child can get enough milk. Also, there was the part of the teenagers and what they should feed on. There was a girl who wanted to eat mandazi and she was being advised on what to eat.”
35 year old male participant, FIPS - Africa

A participant recounting the audio skits. We find that audio skits support people in remembering the lessons as stories.

Areas of improvement for the Talking Books

Two main areas of improvement for the talking books are sound volume and battery life. Some participants said they struggled hearing the content as the talking books were not audible enough. Others report that the talking books sometimes just went off.

“The teacher came with it and placed it on the table and put it on but mostly it was inaudible.”
45 year old female participant, AGRISS

“There was a time it could go off maybe because of the battery. They could use a good radio with enough power.”
70 year old male participant, FIPS-Africa

Participants training in a church center using the talking book
iv. Training experience using the Agri-Nutrition Community Dialogue Cards

The majority of the participants said that the trainers would come with the “book that had pictures” - the agri-nutrition community dialogue cards. In a typical training session the trainer would show them the pictures and engage everyone in group discussions around what they were seeing. The trainer would also clarify the areas that the participants had not understood.

“The trainer taught while showing us the images on the book and would follow with questions after the lesson was over.”

30 year old female participant, AGRISS

“He could give the cards to go round as we observed them and he explains what they are about.”

57 year old male participant, FIPS - Africa

Participants like the agri-nutrition community dialogue cards because they are visual, illustrate the different food groups, and how to plan for meals. The participants requested if more dialogue cards could be printed so as to share the information with family members back at home.

“They teach you and you see what you are being taught on the card. With the radio, you just listen but you don’t see what you are being taught.”

49 year old female participant, FIPS - Africa

Benefits of using the Dialogue Cards

Most of the participants reported having had an entertaining and helpful training experience with the agri-nutrition community dialogue cards as the pictures on the cards helped them to visualize the content.

“When you just tell someone this is an avocado without showing them, they might not know what that is and some may know it. Showing them the pictures makes them know what exact fruit the trainer is saying and will also stick in their minds.” 45 year old female participant, FIPS - Africa
We were also interested in finding out which topics they recalled the most from training to find out which topics were effectively delivered using the dialogue cards. The participants recalled what a balanced diet is, complementary feeding for children aged 6-23 months, food storage and preservation, good hygiene practices in the community, diet for pregnant women and care for newborns, kitchen gardening, and adolescent nutrition - which similar to the talking books, illustrates the dialogue cards being useful in a wide range of topics.

**Areas of improvement for the Dialogue Cards**

Participants did not express any dissatisfaction with the Agri-nutrition dialogue cards. We noted during the phone interviews that some of the participants confused the dialogue cards with the nutrition charts.
Knowledge Retention Assessment

This section aims to assess knowledge gained from each of the 14 agri-nutrition training modules. The overall assessment is that the training sessions focusing on nutritional principles based on facts were very successful as there was higher retention of knowledge and higher adoption, whereas the sessions on gender roles and nutrition were less successful as there was less retention of knowledge and lower adoption.

We do also find some persistent perceptions of how the fetus will grow too big, if pregnant women eat a lot.
I. Goals around nutrition

We asked the participants to share with us what their goals around nutrition were. These are general findings and all gravitate towards the following themes:

**Balanced diet:** Most participants said their priority is taking care of their families, ensuring they have the right food to eat, and always ensuring that they have balanced meals.

**Knowledge sharing:** They said that their ultimate goal is to protect their families against lifestyle diseases by sharing what they had learned about nutrition.

**Farming:** Some participants were enthusiastic about subsistence farming not only because it is a source of obtaining fresh produce but also a cheaper source of balanced meals. Some said it would be a great source of income as well.

II. Nutrition and common food sources

Generally, the take-home message from this session was why good nutrition is important.

When asked about the key principles women should follow when selecting foods, the majority of the participants gave correct answers. All the responses given were themed around variety and assortment of food in their diets and the importance of having a kitchen garden. They said that it was important to prepare food in clean environments and eat foods from the 10 food groups and if not possible, from at least 5 food groups.

“Like today I can eat eggs with kales, tomorrow I will have to look for another type of food like fish. You cannot eat the same type of food every day. You have to change your diet to have a better life.”

*45 year old female respondent, AGRISS*

“Women need to consider the 5 categories of food which include proteins, vitamins, and carbohydrates.”

*35 year old female respondent, AGRISS*

Many felt encouraged to practice good nutrition as it is crucial for healthy bodies and growth, giving the body energy and preventing lifestyle diseases.
“When you eat well, you will have clean blood and add more life to yourself.”
70 year old male respondent, FIPS - Africa

They attributed malnutrition to inadequate intake of a variety of foods, failure to follow good farming practices, drought conditions, and inadequate financial capability which hinders access to a variety of foods.

“Most of the people are poor and cannot afford to buy the food items needed for a balanced diet.”
50 year old female respondent, FIPS - Africa

iii. Pregnant and breastfeeding mothers

Almost all the participants could recall what the diet of a pregnant and breastfeeding mother is. It is worth noting that all six men we interviewed gave in-depth responses as to what pregnant and breastfeeding mothers should feed on.

“They need to eat fruits, groundnuts, and porridge since this will help the child to be born in good health. Also, they should be eating frequently in small portions since the unborn baby relies on the mother for food.”
52 years old male respondent, FIPS-Africa

“They should eat fruits and two extra meals from the regular three meals per day plus the snacks”
35 years old male respondent, FIPS-Africa

The foods that most participants put emphasis on were proteins such as meat, fish, chicken, beans, and eggs, vitamins such as fruits and generally meals cooked with minimal oil.

We also noted that quite a number of participants mentioned additional actions breastfeeding mothers should take to ensure well-being of the child. They include:

- Ensuring that the breastfeeding mother and the baby are clean
- Observing environmental hygiene
- Knowing how to hold the baby and bonding with him/her while breastfeeding.
- Importance of postnatal care
Most of them reported that during the training, they were told to ensure that the breastfeeding mother should also feed well and regularly as the baby largely depends on breast milk for the first six months.

Some of the participants also reported that they were trained to always ensure that a breastfeeding mother and the baby always slept under a mosquito net to avoid the contraction of malaria, to do light physical exercises to energize the body.

We sought to understand if the participants knew or were aware of some of the challenges that face pregnant and breastfeeding mothers and how they would deal with the challenges. Most of the participants were aware of the common challenges and also listed some of the ways to deal with the challenges. Below are some of the ones that were commonly mentioned:

Lack of appetite and nausea: This was the main challenge reported to affect pregnant and breastfeeding mothers which end up affecting blood and energy levels. In order to counter this, they said the mothers should eat fruits, take groundnut porridge, and visit medical facilities to seek appetite boosters and medication. They can also curb this by eating small quantities of food.

“If she has no appetite for spinach, she can take another vegetable that will give her the same nutrients she could have gotten from the food she has lost appetite for.”

37 year old female respondent, FIPS - Africa

Cravings: The participants who mentioned this challenge said that mothers tend to crave non-food items like stones locally known as “odowa” which end up affecting their pregnancies. They said that this can be tackled by ensuring that they have balanced meals that are rich in the nutrients they need. Despite the training, some participants still believed in pregnancy myths, such as cravings can make mothers overeat and this may cause complications during birth.

“A child can overgrow in the stomach so at the time of birth, there can be complications. So the pregnant woman should not eat too much. We were told that for a pregnant woman, digestion does not happen rapidly. It happens slowly so that the unborn child can eat too.”

30 year old female respondent, AGRISS

Inadequate access to food: Some participants said that another challenge that pregnant and breastfeeding mothers face is that some women can not access balanced meals because they lack the financial capability. This makes them overwork - which could eventually lead to miscarriages. They also said that others who may have inadequate access to food may have no option but to eat whatever is readily available which oftentimes is not a balanced diet.
Low immunity: Other participants reported that another challenge is that the pregnancy itself alters the immune system and mothers making them susceptible to diseases. They said that this can be curbed by eating healthy and making consistent visits to the medical facilities for antenatal care.

Overburdened with house chores: Some participants said that despite the condition pregnant and breastfeeding moms are in, they still get overburdened by house chores which then becomes a challenge. Majority of them said that in such instances, these women should get support from their family members.

“A pregnant woman should not be stressed, performing a lot of chores and bending all the time. She should also get support from extended family when it comes to food.”

45 year old female, AGRISS

Loss of blood during pregnancy: A number of participants said that some mothers lose a lot of blood while giving birth or during miscarriages. The participants said that this could be avoided by eating foods rich in iron throughout the pregnancy.

“They face blood problems and complications when giving birth. They can solve this by eating foods that have iron like greens, this will help in increasing blood.”

45 year old female respondent, AGRISS

“For me, I went to the hospital and I was given medication to add blood to my body. I was also told to take fruits that add blood to the body. I had this problem.”

60 year old female respondent, FIPS-Africa

Lack of information: We also had instances where some participants said another challenge that pregnant and breastfeeding mothers face is the lack of information. They said that most pregnant and breastfeeding mothers are not aware of the kind of foods they should eat and do not know how to maximize the resources they already have on their farms. A participant mentioned that some breastfeeding mothers who had not undergone nutrition training and had little knowledge on nutrition were still inclined to cultural beliefs such as feeding the infant porridge within the first few weeks after birth. They had been taught that this was detrimental to the baby’s well-being.
iv. Feeding infants 0-6 months

We noted that all participants we interviewed knew that infants between 0-6 months should be fed on breast milk exclusively. Participants said that breastmilk is itself a holistic and balanced diet and that it keeps the child healthy and strengthens immunity by protecting him/her from infections. They also said that breastmilk had all the nutrients that were critical for the infant’s mental development and building the body. The other benefit of breastmilk mentioned was that it generally helps to keep the infant active.

“Breast milk has all the nutrients needed for a child that is why they need to feed on it for 6 months. Also, the milk is in good temperature needed for the child. It also connects the mother to the child and creates love.”

49 year old female respondent, FIPS - Africa

v. Complementary feeding for children aged 6-23 months

We also evaluated participants’ knowledge on appropriate complementary feeding practices for children who are above 6 months to 2 years. Participants said that apart from breastmilk, these children should be fed on soft and warm foods. They should be fed in small quantities but frequently. There was frequent mention of dairy products, starches such as ugali and rice, beans, nuts, green grams, eggs, meat and fish, fruits such as bananas, avocado, oranges, and vegetables. From these mentioned foods, we see that participants learned that children above 6 months of age should eat a variety of foods from at least 7 food groups which is the recommended minimum dietary diversity for children aged 6-23 months.

“Cereals, beans, milk, dairy products, eggs and meat. The child should be fed on food that she/he can easily digest and there are 7 groups of food the child should be fed on.”

35 year old male respondent, FIPS - Africa
Majority of the participants said that they were told to consider a number of things while feeding the baby complementarily. These include:

- **The need to create a mother-child bond while feeding the baby**
- **Ensuring the baby feeds sufficiently and frequently.** We did not check the adequacy of quantities of food fed to the babies according to the recommended infant and young child feeding guidelines. We will be keen to incorporate this in the second phase of the study.
- **While feeding they should give the child water**
- **They should feed babies when they are active and awake and not when sleepy**
- **Mothers should also measure the weight of their babies during visits to the clinic.**

### vi. Adolescent nutrition

During our phone interviews we teased out what the participants had learned about adolescent nutrition:

The majority of the participants reported that;

- **Adolescents should regularly eat balanced diets to help them grow, give them the energy to perform heavy tasks and protect them from infections.**
- **The foods they take should be of at least five food groups. Adolescent girls should eat foods rich in minerals because of the monthly menstrual cycle.**
- **They should keep clean, exercise often, and help with chores around the house like kitchen gardening to facilitate food production.**

### vii. Food production, access, preparation, preservation and storage

All of our participants said they sourced their foods from their farms and the market. In a bid to ensure they have a variety of foods to eat, they all grow food crops and keep livestock. The commonly mentioned food crops are maize, vegetables, beans, sweet potatoes, groundnuts, green grams, millet, cassava, tomatoes and onions and livestock such as chicken, cows, goats and sheep.
When asked about how they ensure that they have access to food throughout the year, the majority of the participants said that they farm continuously, taking into account the seasons, harvest and store excess produce for future use. Others said that they practise multi-cropping in seasons to ensure they have a variety of produce and supplement what they can’t produce in the farm by purchasing from local markets.

“We have dry and wet seasons. So I do plan my schedule by ensuring that I farm at the right time. Like now, I am planting maize and beans. In August I will harvest them and store them then plant other types of crops that I will harvest in December.”

30 year old male respondent, FIPS - Africa

Some are casual labourers and they channel the income they get towards food purchasing. While some plan for the future in advance and purchase food in bulk in cases where there’s looming shortage of food.

We further sought to understand some of the food preparation, preservation and storage techniques they had picked from the training sessions. One of them was proper cooking of meals. The majority of the participants said it was important to observe hygiene - both personal and environmental - while preparing meals.

The majority of them said that vegetables should be washed before being cut and should not be overcooked. They also added that meat should be cooked until it’s tender and soft and should not overcook.

We had quite a number of participants mention steaming of vegetables so as to avoid loss of nutrients and to ensure food should always be covered. They also reported to have been trained to ensure sweet potatoes are not peeled and should be cooked in their natural form because the skin contains nutrients.

“I cover it [sweet potato] with banana leaves and another lid without peeling it while cooking. So that it doesn’t lose the nutrients. I add some salt on it as well.”

50 year old female respondent, FIPS - Africa

The other technique the participants learned during the sessions was food preservation and storage; food should be dried before storage. It can also be properly packaged in sacks and stored on raised grounds like on a plywood inside the house. After harvesting, ash or pesticides should be sprayed on the food. Other methods mentioned were salting, freezing and roasting.
viii. Gender roles and nutrition

The purpose of training on gender roles and nutrition was to encourage participants to consider nutrition responsibilities as a shared responsibility between men and women. However, it is worth acknowledging that traditional gender roles are deeply rooted in the society, and it was not the expectation that this would all change after one session.

Yet, we aim to get insights on whether the participants are now sharing tasks in their household and to get their perceptions of gender roles in availing and preparing nutritious foods for their households to be.

Generally, both men and women had similar traditional views as to what men’s roles are in the society. They perceive men as the providers in any household. They either purchase the food and cooking materials like firewood or provide money for their purchase. Participants say that the men should also support in food storage and preservation. They are viewed as performers of heavy household tasks in the community such as taking care of livestock and farming the land. It was also interesting to see how men viewed other men on matters gender roles and nutrition. They said other men were irresponsible, demanding and did not provide or support their families in any way.

“Men are bad people. They walk around the whole day or take alcohol and later come back to demand for food.”

57 year old male respondent, FIPS - Africa

In regards to women’s roles in the society, both genders had similar traditional views as well. Women are viewed as the nurturers of households. Their roles are preparing and preserving the food, taking care of the family members and ensuring they have eaten. As well as replenishing groceries, performing the household chores and taking care of the kitchen garden.

“...Although men do not like being in the kitchen, it is the wife’s department.”

70 year old male respondent, FIPS - Africa

Notably, few of our participants perceived the roles of women and men as a shared responsibility. The few who felt this said that providing for a household should be a shared responsibility between the man and the woman.

“Should sit down and make decisions together and work together, to feed their family, They can also farm together or do a business together.”

45 year old female respondent, AGRISS
In as far as the gender roles are concerned, we probed the participants what they deem as challenges being faced by the women in the community. Domestic violence was one of the challenges regularly mentioned - participants said that some women were living with stuffy and unapproachable partners. This eventually leads to constant failure to agree with their partners on how to provide for the family.

“Disagreements with men when it comes to food. A woman can have a harsh husband and you will have to figure out how to live with him. Kids ask their mothers for food. They don’t ask their fathers.”

38 year old female respondent, FIPS - Africa

Most participants also said that women wish to, but may not be in a position to, give their households a variety of meals because of financial constraints. The other major challenge is women living with alcoholic or unsupportive partners. Some have partners who do not have a source of income. Therefore, women often find themselves taking up more responsibilities. In as much as both men and women perceive women as the nurturers of households, women feel overburdened by these cultural and societal expectations.

“When the husband has no source of income or is an alcoholic, the woman will be left with all the household responsibility of taking care of the family.”

29 year old female respondent, AGRiSS

Some women said that other women did not have adequate information on nutrition which is a challenge and poses a health risk to the entire household. One respondent said that she took the initiative to educate other women in her local market on nutrition.

“We used to teach other women on nutrition in the market where they are doing their businesses. We could teach them on nutrition and balanced diets.”

51 year old female respondent, AGRiSS

After assessing what they had learned during the training sessions, we interviewed them about their daily lives and whether they were applying these lessons and the challenges they were facing in applying these lessons. This next section captures the feedback we got.
Application of lessons learned

Balanced meals: The majority of participants reported to have applied lessons on good nutrition/balanced diets, food preparation and techniques for kitchen gardening. They were doing so frequently, with the majority saying everyday. They were now planning diets, planting different types of crops, had begun rearing chickens, supplementing their diets with farm produce, generating income from farm produce, and sharing knowledge with the other family members who had not attended the training sessions.

“I have farmed different types of vegetables. I have planted different types of fruits for my family. I also have chicken that gives us eggs."
37 year old female respondent, FIPS - Africa

As much as participants were very receptive of the agri-nutrition training, there are a number of barriers which were a hindrance to the application of these nutrition lessons. They include:

Inadequate financial capability: Quite a number of participants said that they do not have enough money to buy food and buy proper farming tools for subsistence farming.

“Some people lack food so even if you talk to them about nutrition, it doesn’t add value since they cannot afford the food.”
35 year old male respondent, FIPS - Africa

While those who practice subsistence farming said that they still had to supplement the produce they got from their farms with food from the market which is costly.

“Like spinach, I can get from my farm but there are other things I cannot get from the shamba that I need to buy.”
45 year old female respondent, AGRiSS

Health conditions: Others said that they experienced challenges achieving their nutrition goals because of their health conditions, deterring them from farming and providing meals for their households and making it costly for the family unit to prepare balanced meals.
Limited access to healthy food: We had participants who said they could not apply the lessons because they could not access fresh food because the market was too far.

“It is hard because the market is far so getting a variety of foods is hard.”

57 year old female respondent, FIPS - Africa

Destruction of crops by pests and unfavourable weather: Some said the climatic conditions were unpredictable - either too much rain or unfavorable drought conditions. This restricted them from practising subsistence farming consistently. Others said pest attack was also an issue, affecting their food production.

“Pests that affect the crops and also there can be too much rain that destroys the crops.”

37 year old female respondent, FIPS - Africa

Farming resources: Some said they needed farming resources that would enable them to practise kitchen gardening such as wheelbarrows to transport fertilizers to the farm, water cans for irrigation, seedlings (fruits, vegetables, cereals, sweet potato, nappier) and spray pumps. They also wanted to be trained on additional content such as poultry and vegetable (bulb onions and cabbages) farming.

“I would like to get spray pumps since at times there is drought and the spray pumps can help me with watering the crops.”

37 year old female respondent, FIPS - Africa

Domestic violence: This was one of the challenges regularly mentioned as participants said that some women were living unapproachable partners which eventually led to constant failure to agree on how to provide food for the family. This poses a barrier to adoption of the recommended nutrition practices.
Conclusion

In conclusion, we note that,

- The participants appreciate the KCDMS initiative of providing agri-nutrition training.
- Almost all the participants fully grasped content on good nutrition, what a balanced meal looks like and how to prepare one. They could also easily recall the training sessions on nutrition and common food sources, pregnancy and breastfeeding diet and infant and complementary feeding. This shows that the two methodologies were effective in delivering training across a broad range of topics.
- Some participants still cannot tell the difference between the agri-nutrition community dialogue cards and the nutrition charts. Most, when asked, said they liked the dialogue cards but what they actually meant is the nutrition charts.
- Some participants are still not comfortable with their group structures because of their big sizes which hinders them from getting what the trainers are teaching especially if the audio skits are playing.
- As much as participants enjoy the entertaining aspect of the talking books, audibility still remains a challenge.
- Women feel overburdened by cultural and societal expectations linked to gender roles and nutrition where women are always viewed as the nurtures of the household. They would really like to see men take on a shared responsibility.
Based on our research findings, we do recommend the following to better the participants’ training experiences in the future for consideration by KCDMS. The recommendations have been categorized into knowledge retention, operational and other actions KCDMS can take to better the lives of the participants.
Knowledge Retention

Accessing audio materials at home: Based on our study findings, the participants generally have the willingness to learn. It is impractical to print out enough agri-nutrition community dialogue cards and provide talking books to each participant. KCDMS could explore the possibility of deploying an IVR system which is automated and will interact with the callers. It will also enable us to gather instant information on what topics participants dial in to and the exact content they listen to. We will be able to analyse this information as the calls get routed to us.

Multiplier effect: We also noted that the participants were eager to share knowledge with their family members and the community at large. By ensuring sufficient take-home materials for the participants, we can support them in doing so.

Refresher training: A large number of participants were interested in having refresher training and specifically on adolescent nutrition to enforce knowledge retention.

Gender roles and nutrition: Majority of the participants enjoyed lessons being delivered using the talking books because of the entertaining element. We saw that this enabled them to retain and apply the lessons. For future training sessions, we recommend leveraging the talking book to deliver lessons on gender roles and nutrition to encourage awareness and retention. Also, more men need to be trained on gender roles and nutrition to encourage adoption of the recommended nutrition practices in their households.

Operational

Group structure: Something we picked out from our analysis is that the participants enjoyed being trained in groups as they appreciated multiple perspectives from other group members. However, some participants who were trained using the talking books struggled with getting the content because of how big and noisy the groups were. We recommend close-knit groups for participants who will be trained using the talking books so as to encourage participation.

Clear rules for cancelation: Communicating clearly when trainers should be and should not be cancelling training sessions.

Improving audibility and charge on talking books: Another area for improvement would be to nudge the trainers to adequately prepare for the training sessions by ensuring that the talking books have enough charge. There are instances where participants reported interruptions to training because the talking book died as it was not sufficiently charged for the session.
Other actions to take to improve participants’ lives

Focus on women’s wellbeing: Domestic violence came up frequently in challenges for women. Future training may need more focus on gender equality. The other way to ensure women’s wellbeing is by economically empowering women by increasing their income generating activities. This will improve their financial capability and they will be able to provide balanced meals to their families with ease.

Additional training on poultry farming: The majority of the participants we interviewed are farmers and they expressed the willingness to learn about poultry farming. This will encourage variety in access and food production for their households and will empower them to start small-scale poultry businesses.
Areas for further research

We identified the areas we could explore further, which gives us an opportunity to generate further insights, adding to the richness of the study. They include:

**Multiplier effect:** We noted that the participants were eager to share knowledge with their family members and the community at large. In our next studies, we propose to ask the participants about the sizes of their families to estimate the reach of the program at community level.

**Complementary feeding for children aged 6-23 months:** The next studies will incorporate checks for quantities of food given to children aged 6-23 months and if they follow WHO guidelines.

**Distance to the market:** We had participants who said they could not apply the lessons because they could not access fresh food because the market was too far. In our next studies, we propose to ask the participants how far the markets are and where they source their food from if not the local markets and their farms. This could be a potential business opportunity for women as they can start selling produce to community members who can't access the market easily.

As a parting shot, the participants largely appreciated the follow-up. They thought the sessions were interesting and informative and were eager to resume. They are also keen to receive findings from Busara and asked if KCDMS could give them more training material to go home with to act as daily reminders.
Annexes

Research tool
INTRODUCTION AND CONSENT

My name is (XXXX) working with Feed the Future Kenya Crops and Dairy Market System Activity (KCDMS) activity which is a program of the USAID. The activity aims at addressing global food security challenges, hunger and eradication of poverty. One of the activity’s interventions is promoting good nutrition at household level. The purpose of my call today is to assess progress with this particular intervention.

Before we continue I would like to ask you a few questions;

a.) Were you trained on Agri-nutrition by (XXXX) using a Digisomo / Talking book? (Yes/No)
b.) Were you trained on Agri-nutrition by ...(Mention AGRISS or FIPS) using dialogue cards? (Yes/No)

If No to any of the questions above, thank the respondent and inform her/him that we will contact her/him later for an interview then call another respondent.

If yes to both a & b then continue.

I would like to ask you a series of questions related to nutrition. Your participation in this activity is purely voluntary. There are no foreseeable risks for you if you choose to participate in this study. You will receive Ksh. 300 as a token of appreciation for participating in this study and the information you provide will be valuable to improve strategies to support thriving communities like yours. The interview will last approximately 45 minutes to 1 hour. We would also like to record the interviews to capture more information from our conversation that will be useful when we write the report. Should you feel uncomfortable, you can request that the recording be turned off before you speak. The information you provide in the recordings as well as in the phone conversation will remain private and confidential and will only be used for the purposes stated earlier. Following the interview, the notes, recordings and transcripts will be preserved as records. If you are not comfortable with this, you may at any point of the interview request that certain parts of the interview be deleted afterwards. When we present the insights we give, we will not include your personal information, so feel free to give us any opinions you have without fear of being identified.

Do you give consent to take part in this study?

| YES | NO |

Do you give consent for this conversation to be recorded?

| YES | NO |
SECTION A: INTRODUCTION AND CONSENT

1: Date of Interview (MM/DD/YY):
2: Time start: Time end:
3: Enumerator’s Name:
4: Enumerator’s Phone Number:
5: Respondent’s Full Names:
6: Respondent’s Phone Number:
7: Respondent’s highest level of education:
8: Main Occupation: 1=Casual labour; 2=Farmer; 3=salaried labourer; 4= Business; 5=Student; 6= housewife; 8= other (specify)………
9: Respondent’s Gender: Male [ ] Female [ ]
10: Respondent’s Age Range □ 15-29 years □ 30-49 years □ above 49 years
11: Marital status: Single [ ] Married [ ] Divorced [ ] Widowed [ ]
12: County: Kakamega [ ] Bungoma [ ] Vihiga [ ] Kisumu [ ] Siaya [ ] Migori [ ] Homabay [ ]
13: Sub County:
14: Sub Location:
15: Ward:
16: Village:
17: Total land size in acres: 18: Land under farming in acres:

SECTION B: TRAINING

Have you received any training-on Agri-nutrition in the last 6 months?

YES [ ] NO [ ]

If yes by whom?

Tick all appropriate

Agriculture Improvement Support Services (AGRISS)
Farm Input Promotions Africa (FIPS)

2. How frequently were you trained?
   a.) Once a week
   b.) Once every 2 weeks
   c.) Once a month
   d.) Other (Specify): ………

3. How would you describe the training you received?
   a.) Theoretical
   b.) Practical
   c.) Both theory and practical
4. What training approach do you prefer?
   a.) Theory
   b.) Practical only
   c.) Both theory and practical

5. Tell me about the last time you were trained using a talking book. How was it used?
   a.) What was your learning experience using the talking book?
   b.) Which Audio skits do you remember from the Talking Books?
   c.) Was the talking book helpful? If yes, what about it was helpful?
   d.) Please describe how a typical lesson was conducted
      i. How many Modules/topics of the card did your trainer go through with your group?
      ii. How many Modules/topics were trained per meeting session?

6. Tell me about the last time you were trained using the Agri Nutrition Community dialogue cards. How was it used?
   a.) What was your learning experience using the Agri Nutrition Community Dialogue Cards?
   b.) Please describe how a typical lesson was conducted
      i. How many Modules/topics of the card did your trainer go through with your group?
      ii. How many Modules/topics were trained per meeting session?
   c.) What topics were most beneficial? Please list them if you can remember
   d.) Did you receive any Charts to take home for reference?
   e.) Which Charts did you receive? (A wheel of the 10 food groups or the complementary feeding charts)
   f.) Was the training using the Agri Nutrition community dialogue card helpful? If yes, what about it was helpful?

7. Between the talking books and the Agri Nutrition Community dialogue cards, which one do you prefer?
   a.) Why do you prefer that method?

8. Please share any experiences you have had with regards to receiving agri-nutrition training through KCDMS.
   a.) What would you change about how the information was delivered using the talking book?
   b.) What would you change about how the information was delivered using the Agri Nutrition Community Dialogue Cards?
   c.) What good experiences can you share? From group training, as an individual, for your community?
   d.) Was there any experience that was not good?
   e.) Did you and your family practice any of the nutrition lessons and recommendations?
   f.) Is there anything else you would like to share?
SECTION C: IN-DEPTH INTERVIEW

1. What goals do you have around nutrition?
   a.) What are the challenges that you face towards achieving these goals?
   b.) What do you think are your personal strengths that will help you achieve your goals?

2. I am now going to ask you questions about the general topics you have covered in your training:
   a.) Nutrition and common food sources:
      i. What are the key principles/factors that women should follow when selecting foods?
      ii. Why is good nutrition important?
      iii. What do you think causes malnutrition and how can you prevent it?
      iv. What has been your overall takeaway from this session?

   b.) Pregnant and breastfeeding mothers:
      i. What are some of the foods that a pregnant woman should eat?
      ii. What nutrition challenges may affect a pregnant woman and what can she do to deal with these challenges?
      iii. What are some of the foods that a breastfeeding mother should eat?
      iv. What additional actions should a breastfeeding mother take to ensure her well being and that of her newborn child?
      v. What has been your overall takeaway from this session?

   c.) Feeding infants 0-6 months and complementary feeding for children aged 6-23 months
      i. What are the benefits of breastmilk to an infant?
      ii. What should a baby who is 6-23 months be fed on?
      iii. Once the child is above 6 months, complementary feeding in addition to breastmilk should be added.
      iv. What are some of the important things to think about when complementary feeding a baby?

   d.) Adolescent nutrition
      i. Why is it important to also consider what adolescents eat?
      ii. What should an adolescent do so as to ensure they have good nutrition?
      iii. What has been your overall takeaway from this session?

   e.) Food production and access
      i. Where do you source the food that your family eats?
      ii. What are some of the examples of food crops and livestock that you can keep to ensure you have a variety of foods to eat?
      iii. How do you ensure the food produced is available to the household throughout the year?

   f.) Food preparation, preservation and storage
      i. What food preparation or cooking methods help in preserving the nutrients in the food?
      ii. Could you mention key hygiene practices that one should consider during food preparation?
      iii. Describe the different ways in which various foods can be preserved
g.) **Gender roles and nutrition**

   i. What roles do men play and what roles to women play in:
      a.) Access to and availing nutritious foods for the household?
      b.) Preparation of nutritious foods?
   
   ii. What challenges do women in your community experience in as far as the above roles are concerned?
   
   iii. In what ways can men and women work together to improve the nutrition and health status of their families and communities?

3. Tell me about the last time you applied a lesson in planning your diet?
   a.) Which lesson did you apply and how did you apply it?
   b.) How effective was this lesson?
   c.) How often do you apply these lessons?
   d.) Did you experience any difficulty while applying the lesson?
   e.) Are there any resources you need to help you implement these lessons better?

4. Are there parts of the training that you require more clarity on, or additional training that you may require? If yes, which one(s)?

5. Thank you very much for attending today’s discussion.
   a.) Is there anything else about the training that we should know?
   b.) Is there anything you would like to ask us?