IMPROVING NUTRITION PROGRAMMES

an assessment tool for action

USERS' TRAINING MANUAL
IMPROVING NUTRITION PROGRAMMES
an assessment tool for action

USERS' TRAINING MANUAL

Mickey Chopra
Smruti Patel
David Sanders
School of Public Health
University of the Western Cape

FOOD AND AGRICULTURE ORGANIZATION OF THE UNITED NATIONS
Rome, 2006
<table>
<thead>
<tr>
<th>Topic</th>
<th>Title</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACKNOWLEDGEMENTS</td>
<td>.......................................................................................... v</td>
<td></td>
</tr>
<tr>
<td>FOREWORD</td>
<td>............................................................................................. vii</td>
<td></td>
</tr>
<tr>
<td>PREFACE</td>
<td>............................................................................................. ix</td>
<td></td>
</tr>
<tr>
<td>ACRONYMS</td>
<td>............................................................................................ xii</td>
<td></td>
</tr>
<tr>
<td>TOPIC 1</td>
<td>Course Orientation ........................................................................ 1</td>
<td></td>
</tr>
<tr>
<td>TOPIC 2</td>
<td>Producing an Assessment Framework ............................................ 5</td>
<td></td>
</tr>
<tr>
<td>TOPIC 3</td>
<td>Participatory Monitoring ................................................................ 21</td>
<td></td>
</tr>
<tr>
<td>TOPIC 4</td>
<td>Using Participatory Methods for Collecting Information ................. 35</td>
<td></td>
</tr>
<tr>
<td>TOPIC 5</td>
<td>Techniques for Preparation of Assessment ..................................... 43</td>
<td></td>
</tr>
<tr>
<td>TOPIC 6</td>
<td>Basic Data Analysis and Interpretation ......................................... 63</td>
<td></td>
</tr>
</tbody>
</table>
We would like to express our appreciation to the donor, the authors and to all those who contributed at different stages of this work.

This manual was developed under a Letter of Agreement between FAO and the University of the Western Cape’s School of Public Health, South Africa, with funding from the FAO-Netherlands Partnership Programme (FNPP).

The authors, Mickey Chopra, Smruti Patel and David Sanders, School of Public Health, University of the Western Cape, have put their best energies together to help to make this manual possible and useful. Thanks to each of them who gave their time, knowledge and, above all, their positive attitude which was crucial to the completion of this work: Guy Nantel, Senior Nutrition Officer and Irela Mazar, Nutrition Officer, Nutrition and Consumer Protection Division of FAO, for their detailed comments and suggestions on earlier drafts, their support and advice, Prakash S. Shetty, Nutrition Planning, Assessment and Evaluation Service (AGNA) of this Division, for his keen insight and advice and for working closely with us throughout its preparation. This volume would not have been completed without their guidance.

We would like to acknowledge the design and layout done by Butler Design (www.butterdesign.co.za). Within FAO, we appreciated the assistance provided by Omar Bolbol and Cristina Veiga, Electronic Publishing Policy and Support Branch, in the preparation of this manual.
FAO has developed a methodology that allows countries to carry out in-depth assessments of their community-based food and nutrition programmes. This was done by carrying out an analysis of a number of successful programmes in developing countries, for the purpose of identifying and understanding best practices which contribute to improving the impact and sustainability of such programmes. Based on the lessons learned from them, a technical guide entitled *Improving Nutrition Programmes: an Assessment Tool for Action (AT)* was developed and published by FAO.

The University of the Western Cape’s School of Public Health (UWC) has collaborated closely with FAO throughout this process. At a users’ workshop held in Cape Town, participants agreed that pilot testings of the AT should be carried out as a first step in its dissemination. It was also felt that a users’ training manual would be very helpful for future users.

This training manual has thus been developed with the purpose of enhancing the capacity of the members of assessment teams to conduct nutrition programme assessments, founded on a common understanding of concepts which underpin effective and sustainable community-based nutrition programmes. The skills developed through training and the experience gained from undertaking assessments will facilitate good implementation of programmes and projects to improve nutrition. Besides nutrition planners, other people with planning and programmatic responsibility who are concerned about poverty alleviation and overall development can, and should, take part in a programme’s assessment. A thorough examination and analysis of the data thus obtained can then be followed by the elaboration of an action plan for improving the impact and the sustainability of community-based nutrition programmes.

We believe that this manual will contribute to making the AT more user-friendly and help maintain a better focus on the assessment process. Together they will be valuable tools for all those involved in assessing community-based food and nutrition programmes, which are crucial in the fight against poverty. Nutritional well-being is an important and fundamental step in achieving the First Millennium Development Goal of eradicating extreme poverty and hunger. In fact, incorporating nutritional objectives and components into development policies and programmes can be fairly easily achieved when considering nutritional improvement as a key outcome of development plans, or as an important component of a poverty alleviation strategy.

Prof. David Sanders
Director
School of Public Health
University of the Western Cape
Cape Town, South Africa

Kraisid Tontisirin
Director
Nutrition and Consumer Protection Division
FAO
This manual accompanies the FAO methodological guide “Improving Nutrition Programmes: an Assessment Tool for Action”. The purpose of this assessment tool is to contribute to strengthening community-based food and nutrition programmes. It is based on a clear, step-by-step analysis of programmes by analysing their programme design-level features; macro and microenvironments respectively, bearing in mind their impact and sustainability.

Use of the tool for nutrition programme assessment is expected to contribute to the strengthening of food and nutrition security programmes, with the underlying assumption that community-based and participatory food and nutrition programmes are the most effective and sustainable. The tool is designed to strengthen macro-micro linkages for the purpose of policy formulation and resource allocation, to forge partnerships and alliances between government, civil society and the private commercial sector and to encourage participatory development within the context of decentralized administrative structures.

The tool is directed to programme managers with a stake in improving the nutritional status of a population as a necessary step in the development process and is intended to help them strengthen their support for community-based programmes where adequate nutritional status is an issue.

To achieve this, it is clear that the assessment needs to be conducted by a team - preferably one that includes not just nutrition workers but also those from related sectors. Such a team needs to be orientated thoroughly before starting the assessment.

The overall aim of this manual is to prepare an assessment team to conduct the programme assessment following the steps outlined in the Assessment Tool.

This manual is written for the Assessment Leader to develop the capacity of the assessment team to conduct the assessment in a rigorous, efficient and systematic manner. It covers the following areas:

- the importance of conducting an assessment, especially in a participatory manner;
- common nutritional concepts and outline of the problem;
- the conceptual framework to guide the assessment;
- outline of the information to be collected;
- data collection methods that could be used in collecting data;
- planning for data collection;
- analysis of data using a SWOC/T framework.

**OBJECTIVES**

By the end of this topic trainees should be able to:

- Identify important success factors for large-scale nutrition programmes.
- Produce a comprehensive framework to guide the assessment of community-based nutrition programmes (CBNP).
- Have an understanding of, and respect for, local knowledge and skills and acquire skills to facilitate local knowledge and participation in the assessment.
- Make relevant recommendations for improving impact and sustainability of the CBNP based upon the results of the assessment.
The manual is divided into six topics, to be taught over 3 to 5 days. The package can be adapted to the level of the learners involved and the amount of time available. A field visit is recommended. Each topic consists of key issues, case studies, ideas for discussion related to conducting an assessment, trainer’s notes and a set of handouts for the learners. A series of overhead transparencies have also been prepared to assist you.

In addition, you need to prepare the following for each learner:

- a copy of the FAO publication “Community-based Food and Nutrition Programmes: What Makes Them Successful. A Review and Analysis of Experience” (FAO, 2003);

Here is an example of how a three-day workshop could be organized using this manual.

### DAY 1

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>09.00</td>
<td>TOPIC 1: Course Orientation</td>
</tr>
<tr>
<td>10.00</td>
<td>Tea break</td>
</tr>
<tr>
<td>10.15</td>
<td>TOPIC 2: Producing an Assessment Framework</td>
</tr>
<tr>
<td>13.00</td>
<td>Lunch break</td>
</tr>
<tr>
<td>13.45</td>
<td>TOPIC 2: continued</td>
</tr>
<tr>
<td>15.00</td>
<td>Tea break</td>
</tr>
<tr>
<td>15.15</td>
<td>TOPIC 3: Participatory Monitoring</td>
</tr>
<tr>
<td>16.30</td>
<td>WRAP UP</td>
</tr>
</tbody>
</table>

### DAY 2

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>09.00</td>
<td>TOPIC 4: Using Participatory Methods for Collecting Information</td>
</tr>
<tr>
<td>10.00</td>
<td>Tea break</td>
</tr>
<tr>
<td>10.15</td>
<td>TOPIC 5: Techniques for Preparation of Assessment</td>
</tr>
<tr>
<td>13.00</td>
<td>Lunch break</td>
</tr>
<tr>
<td>13.45</td>
<td>TOPIC 5: continued</td>
</tr>
<tr>
<td>15.00</td>
<td>FINAL PLANNING</td>
</tr>
<tr>
<td>Time</td>
<td>Session</td>
</tr>
<tr>
<td>-------</td>
<td>----------------------------------------------</td>
</tr>
<tr>
<td>09.00</td>
<td>TOPIC 6: Basic Data Analysis and Interpretation. Introduction</td>
</tr>
<tr>
<td>09.15</td>
<td>TOPIC 6: Session 1: Reporting Back on Field Work Experiences</td>
</tr>
<tr>
<td>10.00</td>
<td>Tea break</td>
</tr>
<tr>
<td>10.15</td>
<td>TOPIC 6: Session 1 continued</td>
</tr>
<tr>
<td>10.45</td>
<td>TOPIC 6: Sessions 2 and 3: Preparing and Analysing Data</td>
</tr>
<tr>
<td>12.45</td>
<td>Lunch break</td>
</tr>
<tr>
<td>13.30</td>
<td>TOPIC 6: Session 4: Interpretation of the Results</td>
</tr>
<tr>
<td>14.30</td>
<td>TOPIC 6: Session 5: Writing of a Research Report</td>
</tr>
<tr>
<td>15.00</td>
<td>Tea break</td>
</tr>
<tr>
<td>15.15</td>
<td>TOPIC 6: Session 5 continued</td>
</tr>
<tr>
<td>17.30</td>
<td>PLENARY</td>
</tr>
<tr>
<td>Acronym</td>
<td>Description</td>
</tr>
<tr>
<td>---------</td>
<td>-------------</td>
</tr>
<tr>
<td>CBNP</td>
<td>community-based nutrition programme</td>
</tr>
<tr>
<td>CBFNP</td>
<td>community-based food and nutrition programme</td>
</tr>
<tr>
<td>DRI</td>
<td>dietary reference intakes</td>
</tr>
<tr>
<td>FAO</td>
<td>Food and Agriculture Organization of the United Nations</td>
</tr>
<tr>
<td>FGD</td>
<td>focus group discussion</td>
</tr>
<tr>
<td>GMP</td>
<td>growth, monitoring, promotion</td>
</tr>
<tr>
<td>NSA</td>
<td>nutritional situational assessment</td>
</tr>
<tr>
<td>PAME</td>
<td>participatory monitoring and evaluation</td>
</tr>
<tr>
<td>PEM</td>
<td>protein, energy, malnutrition</td>
</tr>
<tr>
<td>PRA</td>
<td>participatory rural appraisal</td>
</tr>
<tr>
<td>RDA</td>
<td>recommended dietary allowance</td>
</tr>
<tr>
<td>UNICEF</td>
<td>United Nations Children’s Fund</td>
</tr>
<tr>
<td>VIPP</td>
<td>visualization in participatory programmes</td>
</tr>
</tbody>
</table>
OBJECTIVES

By the end of this topic trainees should be able to:

- Name their fellow participants
- Explain the objectives and purpose of the workshop
- Discuss their expectations and concerns
- Understand the methodology to be used in the training.

TIME: 2 hours

TOPIC OVERVIEW

Session 1: Word of Welcome (45 minutes)
Session 2: Workshop Expectations, Concerns and Objectives (45 minutes)
Session 3: Workshop Methodology (30 minutes)

MATERIALS

Writing pads, pens, Visualization in Participatory Programmes (VIPP)* cards, flipchart, masking tape, markers, pins, brown paper, glue, overhead projector, overhead transparencies, transparency pens.

*Note: VIPP is a people-centered approach to planning, training and other group events.

HANDOUT

Handout 1.1: Workshop Methodology

TRANSPARENCY

Transparency 1.1: Objectives of the Workshop

ADVANCE PREPARATION

Prepare and photocopy handout and make transparency
PROCEDURE

Session 1: Word of Welcome and Introduction...........................................................45 minutes

Step 1: Activity - Welcoming participants
A) Begin this session by officially welcoming trainees to the course/workshop. If there is an outside guest, invite him/her to speak.
B) Give a brief overview of the course/workshop and the programme.

Step 2: Activity - Introducing each other
A) Explain to participants that since they will be together it is important for them to get to know each other, their interests, likes and dislikes.
B) Divide the group into pairs who do not know each other well. Tell the groups to find a place in the room where they can interview each other. The interview should take about 5-10 minutes. Each person should find out the following about their partner:
   • name;
   • what name he/she would like to be known by in the workshop;
   • likes/dislikes;
   • experience in conducting assessments;
   • experience in nutrition;
   • an adjective that describes the person.
C) When participants have finished interviewing each other, ask for a volunteer to introduce his/her partner. Do this until everyone has been introduced. The facilitator has the opportunity when the introductions are going on to ask for more information and to encourage participants to find out more about each other. Each presentation should not last longer than three minutes per person.
D) At the end of the introductions, remind participants to find out more about each other during nutrition breaks, over meals and during their free time.

Session 2: Workshop Expectations, Concerns and Objectives........................................45 minutes

Step 1: Listing participants’ expectations and concerns
A) Hang up two cards: Expectations and Concerns. Give participants two sets of cards and ask them to write their expectations and concerns about the workshop on the different coloured cards and then hang them under the correct heading. Tell participants to write one idea per card, but to write as many cards as they need.
B) Ask for one or two volunteers to read the cards under Expectations. When all the cards under that heading have been read, ask for a volunteer to synthesize what the cards are saying and pull out any cards that repeat what has already been said. Do the same for Concerns.
C) Encourage trainees to explain why they have such concerns and what they think should be done to allay these concerns.
Step 2: Activity - Workshop objectives

A) Explain to participants that, as the organizers of the course/workshop, you have tried to anticipate what professional expectations participants might have and, on that basis, you developed the workshop objectives.

B) Display Transparency 1.1 with the workshop objectives on it. As you present the objectives of the workshop, compare them with their expectations and point out the close links between the two. Point out also that the workshop may not be able to meet all the personal expectations.

C) Ask participants if there are any objectives that are not clear and if there are any objectives they would like to add or delete, based on their expectations. Mention that the objectives will guide the deliberations of the workshop and that participants should monitor how well they are being achieved during the course/workshop.

Session 3: Workshop Methodology.................................................................30 minutes

Step 1: Activity - Learning about participatory learning

A) Distribute Handout 1.1. Explain to participants that the methods that will be used in this training are participatory learning methods. Ask them to read the handout which explains why such an approach has been adopted.

B) Ask: “Are there any questions about the handout?”

Step 2: Activity - Organizing times and committees

A) Explain to the trainees that in view of the amount of work arising from the workshop objectives and their expectations, it is important to agree on the procedures of the workshop. To do this, ask trainees to negotiate the following times:

- starting time in the morning;
- break time in the morning (how long?);
- lunch time (how long?);
- break time in the afternoon (how long?);
- end of the day.

Also ask participants about times for working in the evenings and on weekends. Once this has been agreed, point out that the time must be respected and can only be changed after renegotiation.

B) As part of setting the tone or climate of the workshop, mention to the trainees that this is a participatory workshop. This means the trainees must play an active role in the planning, organization, management and evaluation of the workshop. Tell the trainees that the success of the workshop depends on how well they do this. To enable trainees to participate actively there are two committees that must be established, namely the Steering Committee and the Social Committee. Ask for volunteers for these two committees.
HANDOUT 1.1

Workshop Methodology

There are a number of principles which underlie the approach that we have taken in this training course. These are:

- Enjoyment: People learn best when they are enjoying the learning process.
- Experience-based: There is a recognition that all the participants have been involved in tackling malnutrition and therefore have substantial experience to draw upon. By sharing and comparing approaches, participants acknowledge each other as invaluable sources of information.
- Participatory: For nutrition programmes to be a success there is a need for participation from those affected. This course encourages learners to develop communication skills to facilitate participation. Learning activities encourage cooperative group work and listening skills.
- Analytical: The process aims to develop learners' critical thinking and planning skills. Participants will learn basic nutrition and programme knowledge so that they can effectively assess, plan and implement comprehensive nutrition programmes.
- Africa: All of the data and examples are based upon experiences in Southern Africa. There is also an emphasis on oral communication and sharing of stories as a means of learning.


TRANSPARENCY 1.1

Objectives of the Workshop

Workshop Goal

To be able to conduct assessments of community-based nutrition programmes using participatory research methods.

Workshop Objectives

By the end of the workshop, you should be able to:

- Identify important success factors for large-scale nutrition programmes.
- Produce a comprehensive framework to guide the assessment of community-based nutrition programmes (CBNP).
- Have an understanding of, and respect for, local knowledge and skills and acquire skills to facilitate local knowledge and participation in the assessment.
- Perform an assessment of a community-based nutrition programme.
- Make relevant recommendations for the sustainability and success of the CBNP based upon the results of the assessment.
TOPIC OVERVIEW

Session 1: What Makes a Programme Successful? (120 minutes)
Session 2: Common Nutrition Concepts (45 minutes)
Session 3: The Nutrition Situation (60 minutes)
Session 4: Developing a Conceptual Framework (90 minutes)

MATERIALS

Flipchart, pens, VIPP cards, masking tape, overhead projector, transparencies

HANDOUTS

Handout 2.1 FAO Case Studies
Handout 2.2 Community-based Food and Nutrition Programmes: What Makes Them Successful. A Review and Analysis of Experience
Handout 2.3 Summary of Success Factors
Handout 2.4 Definitions of Key Terms in Nutrition
Handout 2.5 Example of a Problem Tree

TRANSPARENCIES

Transparency 2.1 Underweight and Stunting Rates by Province
Transparency 2.2 Mean Intake of Vitamin A and Iron by Province and Age Group
Transparency 2.3 UNICEF Conceptual Framework
Transparency 2.4 Conceptual Framework, Functional and Productive Capacity, Nutritional Well-Being
Transparency 2.5 UNICEF Triple A Approach
Session 1: What Makes a Programme Successful..........................................................120 minutes

Step 1:

Point out to participants that community-based food and nutrition programmes have been implemented in many countries. They have in common nutrition or nutrition-related objectives, be it the broad objectives of reducing the prevalence of malnutrition or improving household food security, or more specific objectives related to a single micronutrient or a single nutrition activity such as the promotion of breastfeeding. There are now a number of successful programmes and a close examination and analysis of these can help us to understand the process of achieving success. Distribute Handout 2.1, FAO Case Studies.

Step 2:

Explain the reasons for undertaking these case studies. Distribute Handout 2.2, Community-based Food and Nutrition Programmes: What Makes Them Successful – a Review and Analysis of Experience. Divide participants into groups of 5-7 people. Distribute one of the FAO case studies accompanying this manual to each group and give them the following instructions:

- Read the case study carefully.
- What were the factors which made this programme successful?
- What could be done to improve the programme?
- You have 45 minutes.

Share their responses in plenary (30 minutes)

Step 3:


Give them 20 minutes to look through it.

Compare it with the responses from the participants and ask if they have any questions. Encourage the participants to read this publication more carefully in their own time. Distribute Handout 2.3 Summary of Success Factors.

Step 4:

End this session by reminding participants of the rationale for this assessment. The purpose of this assessment is to contribute to strengthening community-based food and nutrition programmes. It is based on a clear, step-by-step analysis of programmes by analysing their macro- and microenvironments, and programme design-level features, bearing in mind the likely sustainability of the programmes.
**Session 2: Common Nutrition Concepts.................................................................45 minutes**

**Step 1: Activity - Defining the terms**

A) Remind participants that they all come from different backgrounds and it is important as a team that they come to a common understanding of the different definitions used in nutrition and what are the common reasons for malnutrition in the local communities. In this way they will be in a better position to assess the quality of the community-based programme.

B) Write ‘Nutrition’ on the flipchart and ask the following question: “What words or phrases come to mind when you think of the word ‘nutrition’?”

Get 3 or 4 participants to come and write up their ideas.

C) Now use these words and phrases to come up with a short definition of nutrition. Write up and discuss various suggestions. Rewrite these until you have a good working definition that everyone is happy with. Make sure that the definition refers not just to the food people eat, but also to how food is used to produce energy to maintain life and growth. An example of a definition: ‘Nutrition is the outcome of the food eaten (the diet) and it manifests as good growth and energy to conduct activities and fight infection’.

**Step 2: Activity - Clarify malnutrition terms**

A) Add ‘mal’ to the beginning of the word ‘nutrition’ on the board. Ask what ‘mal’ means. Then, ask: “What does ‘malnutrition’ mean?” Make sure that participants understand that malnutrition is ‘bad’ nutrition, which includes over- and undernutrition.

B) Ask: “What terms are used to describe the different forms [or manifestations?] of malnutrition?”
Write these on coloured pieces of paper and stick them up.

<table>
<thead>
<tr>
<th>Undernutrition</th>
<th>Underweight</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stunting</td>
<td>Wasting</td>
</tr>
<tr>
<td>Marasmus</td>
<td>Kwashiorkor</td>
</tr>
<tr>
<td>Micronutrient deficiencies</td>
<td>Overnutrition</td>
</tr>
<tr>
<td>Micronutrients</td>
<td>Macronutrients</td>
</tr>
</tbody>
</table>

C) Organize groups of three or four and give them the following task:

- Discuss what these nutritional terms mean.
- Write your definition or explanation of each term on a piece of white paper.

D) Collect the pieces of coloured and white paper to use for the next task. Tell groups to check their definitions for a few minutes with those in Handout 2.4 Definition of Key Terms in Nutrition.

Step 3: Activity - Check understanding of nutrition terms

- Fold up and randomly distribute all the pieces of coloured and white paper to the participants.
- Ask someone with a coloured piece of paper to read aloud what it says.
- Ask the person who has the correct definition of this term on a piece of white paper to stand up and read it aloud.
- Ask the group if this is the correct definition.
- Repeat this until all the coloured pieces of paper are finished.
- Ask if these terms are now clear to everyone.

Session 3: The Nutrition Situation.................................................................................................60 minutes

Step 1: Size of the nutrition problem in South Africa

Activity - Introduction to session

Inform participants that the aim of this session is to give them an overview of the size and distribution of the problem of malnutrition in their country or region. Point out that we use anthropometric measurements of children as a proxy measure/indicator for the nutritional status of the population.

Activity - Identifying the size of the problem

A) Show Transparency 2.1 Underweight (weight-for-age) and Stunting (height-for-age) Rates by Province

B) Ask: “What do these graphs tell us about the distribution of undernutrition in South Africa?”
C) Point out that Northern Cape, North West and Northern Provinces have high rates of underweight and also high rates of stunting. Remind participants that stunting is related to long-term undernutrition when children fail to grow taller due to chronic (or long-term) undernutrition as a result of the poor quality of their diet and/or frequent or chronic illness.

D) Show participants Transparency 2.2 Mean Intake of Vitamin A and Iron by Province and Age Group. Ask: “What do you notice about the distribution of micronutrient deficiency?”

E) Point out that the distribution is similar to underweight and stunting and shows that micronutrient deficiency is mostly linked to poverty and poor diet.

F) Discuss the situation of malnutrition in South Africa in general (and in the provinces/regions, in particular, where the training and/or programme is being conducted/implemented).

G) Point out the links between malnutrition and poverty. Eventually poverty results in not having enough to eat or limiting dietary variety. Thus the manifestations of malnutrition are indicative of a problem further “up the line”, food insecurity in this case.

**TRAINERS NOTE**

- This example is from South Africa but we would obviously encourage you to collect the relevant information for the particular area that you are training in.
- Alternatively you could use the PROFILES (*) presentation that might have been prepared for advocacy purposes.

(*) Profiles is a nutrition advocacy process designed to demonstrate the contribution that improved nutrition can make to human and economic development. Profiles uses country specific data and interactive computer-based models to project the consequences of sub-optimal breastfeeding practices and inadequate dietary practices on mortality, illness, health care costs and fertility.

---

**Session 4: Developing a Conceptual Framework ........................................................90 minutes**

**Step 1: Definition of the problem statement**

Explain to the group that a problem-tree analysis is carried out to help identify the causes and consequences of a particular problem that the group feels needs to be urgently addressed. If more than one high-priority problem is identified, there has to be consensus building on which problem the group (i.e. the Assessment Team) will analyse. Everyone should also clearly understand what is meant by a consequence and by a cause of the problem. At the outset, the process of developing a problem tree starts with a statement about the main problem to be investigated, i.e. the core or the focal problem. For example, in the case of this Assessment Tool, the problem statement could be something like: “There is a high incidence of undernutrition and malnutrition which needs to be permanently corrected”, or “The programme [that you are assessing] is not achieving improved nutrition or is not sustainable”, or “Increasing agricultural production has not achieved better access to food by the poorest communities/households”. The statement needs to be written out and put on a board or wall. This will constitute the surface on which the problem tree will be developed.
Step 2: Identifying the consequences of the problem

Each member is given one card on which she/he writes what is perceived as one consequence of the problem. If the Assessment Team is small, such as only five or six members, each member may fill in more than one card in order to identify several consequences. Each consequence should be written down on a separate card, and be described in a maximum of 5-7 words (in one word if possible) and written in large characters to be readily readable by other members when the cards are put up above the statement of the basic problem. Cards that refer to the same or very similar consequences can be grouped together and, if needed, re-labelled based on consensus within the Team.

Step 3: Identifying the causes of the problem

Identifying causes follows a similar process. This is the main purpose of the analysis, so more time and energy needs to be devoted to this aspect. Identification of causes is crucial to developing strategies and designing actions to eliminate or mitigate the problem (if the underlying hypothesis of the problem is correct). Again each member is given one or more cards to write down succinctly what are the underlying causes of the problem and these cards are placed below the statement. An example of a problem is shown in Handout 2.5 An Example of a Problem Tree. This should be distributed once the team has completed this step.

Step 4: Building a hierarchy of the causes of the problem

In the group discussion that follows, causes are clustered and, if needed, each cluster is renamed. A hierarchy of causes is established, from those most immediate to the problem, down to the fundamental causes. Links can also be established among the causes themselves. This forms the conceptual framework. Put up Transparency 2.3 UNICEF Conceptual Framework to show the group how the causes are linked. The cause is in turn related to a variety of underlying factors. These factors are illustrated in Transparency 2.4 Conceptual Framework, Functional and Productive Capacity, Nutritional Well-being. This is important because where there are links among causes, several parallel actions may be required to eliminate the problem.

Step 5: Using the problem tree to identify actions

The Team should return to the problem tree after completing each assessment section. Based on its assessment, the Team may wish to add or remove causes. Then the problem tree and the assessment can be used to identify actions relevant to each section.
FAO Case Studies

Programmes Selected for the In-depth Case Studies in AFRICA

- KENYA - Applied Nutrition Project - Makueni District: (F)
- MADAGASCAR - Expanded School and Community Food and Nutrition Surveillance and Education Programme (SEECALINE): (N, F, CP/D)
- ZIMBABWE - Community Food and Nutrition Programme (CFNP): (F, CP/D)

Programmes Selected for the In-depth Case Studies in ASIA

- BANGLADESH - Bangladesh Integrated Nutrition Programme (BINP): (N, CP/D)
- PHILIPPINES - Programme on Good Nutrition for Health (LAKASS): (N, CP/D)
- SRI LANKA - Samurdhi (prosperity) - National Programme for Poverty Alleviation: (CP/D)

Programmes Selected for the In-depth Case Studies in LATIN AMERICA

- BRAZIL - Child Pastorate Programme: (N, CP/D)
- HONDURAS - Rural Development Project for Southern Lempira Department (PROLESUR): (F, CP/D)
- MEXICO - Education, Health and Nutrition Programme (PROGRESA): (N, CP/D)

Legend of Objectives:

Community Participation or Development: (CP/D)
Food or Food-related: (F)
Specific Nutrition: (N)

Community-based Food and Nutrition Programmes: What Makes Them Successful
A Review and Analysis of Experience

Why the Case Studies?

- To gather experiences on, and learn from community-based food and nutrition programmes (CBNPs) in developing countries.
- To obtain and widely share a comprehensive and in-depth understanding of what works in CBNPs and understand why.
- To obtain inputs for the preparation of a comprehensive programme assessment guide/tool, based on methodologies applied and developed while undertaking the case studies.
Successful interventions and programmes are conceived and implemented in a decentralized manner, centering on the community and encouraging community participation. A number of key features which are a part of all successful nutrition programmes can, therefore, be highlighted.

**Supportive Policies and Vision:** Senior management must provide the support and framework for the implementation of nutrition programmes. This may sometimes require nutrition workers to advocate for increased resources and/or changes in policy.

**Community Participation:** This is important in every step of planning, implementation, and at all levels of decision-making. It is especially important to involve the community in participatory situation assessments based on the UNICEF Conceptual Framework and Triple A Cycle. Show Transparency 2.5. The level of community participation is often highly variable (see box: Levels of Community Participation, Section I of the Assessment Tool) and it is considered to be at its best when community mobilization is achieved.

**Intersectoral Collaboration:** It is recognized that the causes of malnutrition are the responsibility of many different sectors. Through collaboration and cooperation, programmes not only save resources but are also more effective.

**Targeting of the Intervention:** Programme beneficiaries must be properly targeted to ensure that those at highest risk benefit from the programme’s inputs and resources, as well as to maximize the programme’s cost efficiency and effectiveness. Most often this means targeting young children (under 3 years) and women.

**Management:** Programmes which have been thoroughly and clearly planned before implementation and have good supervision and management systems are more likely to succeed. This includes planning for adequate human and other resources.

**Support Systems:** Programmes quite often fail because there has not been enough attention paid to the activities which support the main activity. For instance, a successful growth promotion programme requires good supervision, working scales, supply of drugs, etc.

**Monitoring and Evaluation:** This entails developing a simple health information system to provide essential information on programme progress and impact. This information should be regularly reviewed by managers and supervisors and used to address and rectify programmatic issues.
Definition of Key Terms in Nutrition

**Nutrition** is the study of the foods, the nutrients and other substances therein; its functions, actions, interactions and balance in relation to health and disease; the process of ingestion, digestion, absorption, transportation and utilization of nutrients and the excretion of end-products. Nutrition refers also to the social, economical, cultural and psychological meaning of food.

**Diet** is the overall pattern of food intake in an individual, including the choice of foodstuffs, and the size and time of meals in one day.

**Foodstuffs** are the edible parts from plants and/or animal origin appropriate and fit for human consumption.

**Nutritional care** is the application of the science of human nutrition to assist individuals in the choice of food and the acquisition of food to nourish their bodies in health and disease and throughout the life cycle.

**Nutritional status** is the health status of the individual as influenced by the utilization of nutrients. Nutritional status is assessed using anthropometric assessments, biochemical analysis, clinical observations and dietary information.

**Nutrients** are the smallest particles in food that must be provided to the body in adequate amounts. They include protein, fats and fatty acids, carbohydrates, vitamins, minerals, water and fibre.

**Health** is a complete state of physical, psychological and social well-being and not merely the absence of disease.

**Malnutrition** is the impairment of health resulting from a deficiency, excess or imbalance of nutrients.

**Underweight** refers to a person’s weight being too low for his/her age.

**Stunting** refers to a person’s height being too low for his/her age (very short).

**Wasting** refers to a person’s weight being too low for his/her height (very thin).

**RDA** refers to recommended dietary allowances of nutrients.

**DRI** refers to dietary reference intakes.

**Epidemiology** is the study of the distribution and determinants of health-related events in a population.
Macronutrients are carbon-containing compounds (energy providing) of which the body requires large amounts and includes proteins, carbohydrates and fats.

Micronutrients are substances of which the body requires only small amounts and include vitamins and minerals.

Incidence is the number of new cases arising in a given period in a specified population.

Prevalence is the total number of cases at a specific point in time in a specified population.
### TRANSPARENCY 2.1

Underweight (weight-for-age) and Stunting (height-for-age) Rates by Province

<table>
<thead>
<tr>
<th>Province</th>
<th>Underweight</th>
<th>Stunting</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eastern Cape</td>
<td>7.1</td>
<td>20.5</td>
</tr>
<tr>
<td>Free State</td>
<td>14.3</td>
<td>29.6</td>
</tr>
<tr>
<td>Gauteng</td>
<td>8.8</td>
<td>20.4</td>
</tr>
<tr>
<td>KwaZulu-Natal</td>
<td>6.0</td>
<td>18.5</td>
</tr>
<tr>
<td>Mpumalanga</td>
<td>4.2</td>
<td>26.4</td>
</tr>
<tr>
<td>Northern Cape</td>
<td>23.7</td>
<td>29.6</td>
</tr>
<tr>
<td>Northern Province</td>
<td>15.0</td>
<td>23.1</td>
</tr>
<tr>
<td>North West</td>
<td>15.3</td>
<td>24.9</td>
</tr>
<tr>
<td>Western Cape</td>
<td>8.3</td>
<td>14.5</td>
</tr>
</tbody>
</table>


### TRANSPARENCY 2.2

Mean Intake of Vitamin A (RE) and Iron (mg) by Province* and Age Group (n=2868) as Determined by the 24-H-R

<table>
<thead>
<tr>
<th>Nutrient</th>
<th>1 – 3</th>
<th>4 – 6</th>
<th>7 – 9</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vitamin A</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Highest</td>
<td>WC, G/teng, NP</td>
<td>WC, G/teng, NC</td>
<td>MP, NP, WC</td>
</tr>
<tr>
<td>Lowest</td>
<td>MP, NC, NW</td>
<td>MP, FS, NW</td>
<td>KZN, G/teng, NW</td>
</tr>
<tr>
<td>Iron</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Highest</td>
<td>NP, WC, KZN</td>
<td>NP, WC, KZN</td>
<td>NP, WC, KZN</td>
</tr>
<tr>
<td>Lowest</td>
<td>NC, FS, EC</td>
<td>FS, NC, EC</td>
<td>NC, FS, NW</td>
</tr>
</tbody>
</table>


Provinces (*): EC = Eastern Cape, FS = Free State, G/teng = Gauteng, KZN = KwaZulu/Natal, MP = Mpumalanga, NC = Northern Cape, NP = Northern Province, NW = North West, WC = Western Cape

RDAs: Iron = 10 mg for all age groups considered.
Vitamin A = 1-3 yrs (400 RE); 4-6 yrs (500 RE); 7-9 yrs (700 RE) respectively.
TRANSPARENCY 2.3

UNICEF Conceptual Framework

MALNUTRITION

Immediate Causes

- Inadequate Dietary Intake
- Disease

Inadequate Education

Underlying Causes

- Insufficient Household Food Security
- Inadequate Maternal and Child Care
- Insufficient Health Services & Unhealthy Environment

Resources & Control

Basic Causes

- Political and Ideological Superstructure
- Economic Structure
- Potential Resources
Conceptual Framework, Functional and Productive Capacity, Nutritional Well-being

- **INSTITUTIONAL CAPACITY**
  - Control and Management of Resources

- **DELIVERY AND EMPOWERMENT CAPACITY**
  - Health Services
  - Adequate, Safe and Varied Food Intake
  - Access to a Staple and Varied Food Supply
  - Water and Sanitation
  - Education
  - Family Caring Capacity

- **OUTCOMES**
  - Freedom from Disease
  - Appropriate Food Assimilation and Utilization
  - Capacity to Thrive

- **BASIC FACTORS**
  - Political, Economic and Socio-cultural Environment

- **UNDERLYING FACTORS**
  - Potential Resources
    - People
    - Natural Resources
    - Agricultural Land
UNICEF Triple A Approach
OBJECTIVES

By the end of this topic trainees should be able to:

• State the reasons for conducting an assessment.
• Contrast traditional and participatory approaches for conducting assessments.
• Describe how participatory methods can be used to perform an assessment.

TIME: 6 hours 10 minutes

TOPIC OVERVIEW

Session 1: Importance of Conducting an Assessment (45 minutes)
Session 2: Limitations of Traditional Approaches to Assessment (60 minutes)
Session 3: Role of Participatory Approaches Towards Conducting an Assessment (75 minutes)
Session 4: Principles of Participatory Research (60 minutes)
Session 5: Different Forms of Participation (60 minutes)
Session 6: Differences between Participatory and Traditional Approaches (70 minutes)

MATERIALS

Writing pads, pens, VIPP cards, flipchart paper, masking tape, markers, pins, brown paper, glue, overhead projector, overhead transparencies, transparency pens, paints and paint brushes.

HANDOUTS

Handout 3.1 Four Generations of Project Assessment
Handout 3.2 Principles of Participatory Research
Handout 3.3 Characteristics of Participatory Assessment
Handout 3.4 (a) Differences between Conventional and Participatory Assessment
(b) Level of Participation in Assessment

TRANSPARENCIES

Transparency 3.1 Ten Reasons for Conducting an Assessment
Transparency 3.2 Disadvantages of Traditional Approaches to Assessments
Transparency 3.3 The Banking Approach
Transparency 3.4 The Problem-based Approach
Transparency 3.5 The Participation Ladder
PROCEDURE

Session 1: Importance of Conducting an Assessment.................................................45 minutes

Step 1: Why assess?
A) Ask the group: “Why do we conduct programme assessments?”
B) Write their responses on a flipchart. Summarize by showing Transparency 3.1 Ten Reasons for Conducting an Assessment.
C) Point out that sometimes assessments are performed because it is something demanded by funders or is required before more funding is released.
D) Another common reason for performing assessments is to judge whether a programme has been successful or not. Ask: “Why is it often difficult to judge whether a programme has been successful?”
E) Point out that an important reason why it is difficult to judge success is because success and failure can mean different things to different people at different times. Understanding who the audiences are for the assessment and what their expectations of the assessment are is important to establish when starting any sort of assessment.

TRAINER’S NOTE
Why do we need an assessment?
The purpose of a programme assessment is to provide a broad overview and understanding of the context and funding of the programme, as well as its internal functioning. It allows selection of priority problems for action and proposals for interventions through reaching consensus among parties, making optimal use of available resources in the community and in the public services.

Session 2: Limitations of Traditional Approaches to Assessment..............................60 minutes

Step 1: The four different phases of assessment research
A) Divide into groups of six and distribute Handout 3.1 Four Generations of Project Assessment. Give the following instructions:

- Read the handout and construct a timeline which plots the four phases with a brief summary of each phase. List the disadvantages of the first three generations of assessment (20 minutes)
- Discuss the responses in plenary.

B) Show Transparency 3.2 Disadvantages of Traditional Approaches to Assessments and discuss each of the points with groups. Explain the Banking Approach - Transparency 3.3 and the Problem-Based Approach - Transparency 3.4.
Session 3: Role of Participatory Approaches Towards Conducting an Assessment........75 minutes

Ask the group: “What are the possible benefits of involving people participating in the nutrition programmes in this assessment?” List their responses on a flipchart.

Replies should include:

1. Programme managers have a great amount of experience and insight into what works and what does not work and why.
2. Programme managers are often in the best position to identify critical problems in the programme.
3. Involving programme managers in planning projects can increase their commitment to the project/programme.
4. Involving programme managers can help them develop technical and management skills and so increase the impact of the programme.

Session 4: Principles of Participatory Research.............................................60 minutes

A) Inform participants that to achieve this goal will require changes in the ways in which research is conducted. To illustrate this, perform the following role play:

Role play of traditional survey questionnaire:

- We are conducting a study into the quality of the nutrition services at this clinic and have decided to focus upon the quality of the growth promotion. Can I ask you a few questions?
- Did you have your child weighed during your last visit to the clinic? If yes, who did the weighing?
- Did the scales work? Was the weight plotted correctly? Did anybody tell you the weight of the child?
- Can you tell the weight of the child? Can you read the growth chart?

After the role play answer the following questions:

- What kind of participation is being shown here?
- In what way does this disempower the respondent?
- How would you redesign this study so that it leads to more empowerment of the respondent?

Summarize.

B) Point out that in this assessment we are using the term ”Assessment” and not the term “Evaluation”. This is because the latter term is usually considered more threatening to those involved in programme activities. In this sense the assessment they are performing is more in line with the participatory principles outlined in Handout 3.2: Principles of Participatory Research.

Summarize this session by reminding them that this assessment is not intended for judging past performance but rather for taking stock of the current situation and looking for possibilities for improvement.
Session 5: Different Forms of Participation

Divide into groups of five - each has a flipchart paper, markers and paints. Give them the following task:

Create a poster which captures your experience and understanding of participatory research. Start by each person talking about their definition of participatory research through sharing experiences of engaging with members of communities. Then decide upon a common image or situation or slogan that best captures these experiences (30 minutes).

Share the posters in plenary.

A) Ask the participants to brainstorm the main features of community participation. If they are struggling refer them to the images on the posters. List their suggestions on a flipchart.

B) Then distribute Handout 3.3 Characteristics of Participatory Assessment and Transparency 3.5 The Participation Ladder. Explain the different types of participation.

C) Give the groups the following task: Examine each of the posters in turn and decide where each should go on the ladder of participation (20 minutes).

TRAINER’S NOTE

Point out that while the ideal is to have a community driven process this is not always possible to achieve. We often have to start near the top of the continuum because years of neglect and poverty mean that communities quite often need to start with the partnership and assistance of outsiders such as ourselves. The use of this table (Transparency 3.5) is for us to be aware of what level of participation is currently occurring in our programmes and how we can move it down the continuum towards greater community participation.

Session 6: Differences between Participatory and Traditional Approaches

A) Ask the participants to use Handout 3.3 Characteristics of Participatory Assessment and distribute Handout 3.4 (a) Differences between Conventional and Participatory Assessment and (b) Level of Participation in Assessment.

B) Give the following instructions to the groups: read Handout 3.3 and complete the two tables in Handout 3.4 (a) and (b).
### Topic 3

**TRAINER’S NOTE**

Make sure table (a) Handout 3.4 looks similar to this

<table>
<thead>
<tr>
<th>WHO</th>
<th>Conventional</th>
<th>Participatory</th>
</tr>
</thead>
<tbody>
<tr>
<td>External outsiders</td>
<td>Predetermined indicators of success</td>
<td>Community members, project staff facilitator</td>
</tr>
<tr>
<td>WHAT</td>
<td>Predetermined indicators of success</td>
<td>People identify their own indicators of success</td>
</tr>
<tr>
<td>HOW</td>
<td>Focus on ‘scientific objectivity’; distancing of evaluators from other participants; uniform complex procedures; delayed limited access to results</td>
<td>Self-assessment; simple methods adapted to local culture; open, immediate sharing of results</td>
</tr>
<tr>
<td>WHEN</td>
<td>Usually upon completion of project/programme</td>
<td>More frequent small-scale assessments</td>
</tr>
<tr>
<td>WHY</td>
<td>Accountability, usually to determine if funding continues</td>
<td>To empower local people to initiate, control and take corrective action</td>
</tr>
</tbody>
</table>

**TRAINER’S NOTE**

Photocopy the tables in Handout 3.4 so that each group has a full set. THIS MUST BE DONE BEFORE THE SESSION BEGINS. Judge the completed tables according to the following table: Levels of End-user Participation in Assessment. It should be noted that we are using the term “Assessment” and not the term “Evaluation”.

---

25
## LEVELS OF END-USER PARTICIPATION IN ASSESSMENT

<table>
<thead>
<tr>
<th>Dimensions of Assessment/ Levels of Participation</th>
<th>Low</th>
<th>Medium</th>
<th>High</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Assessment initiator</strong></td>
<td>Commissioned or obligatory assessment typically part of programme development. Meets institutional needs. Assessment done to, on or about people</td>
<td>External assessor invites end-users to assist in one or more assessment task(s)</td>
<td>Assessment in which end-users collaborate with external facilitator or among themselves to assess, review and critically reflect on strategies formulated for them.</td>
</tr>
<tr>
<td><strong>Purpose</strong></td>
<td>Justify or continue funding. Ensure accountability levels of funding or sustained support.</td>
<td>Gain insights into development activity from end-users’ perspective. Shift focus from institutional concerns to end-user needs and interests</td>
<td>Promote self-sufficiency and sustainability by linking end-users to assessment planning cycle. Develop relevant, effective programme decision-making based on end-user views, opinions and recommendations. Increase ownership in and responsibility for success-failure of development interventions</td>
</tr>
<tr>
<td><strong>Question-maker(s)</strong></td>
<td>Agency heads, administrators, outside clientele, persons and distances from assessment site.</td>
<td>End-users with external assessor at various stages of assessment generally determined by the assessor.</td>
<td>End-users, external facilitator, persons most affected by development intervention.</td>
</tr>
<tr>
<td><strong>Method(s)</strong></td>
<td>Established research designs, statistical analyses, reliance on various quantitative methods. Product (findings) orientated (mathematical in nature). Dominated by math whiz kids.</td>
<td>Qualitative methods favoured but also include quantitative methods. Values a process focused on open-ended inquiries. Uses methods that give voice to voicelessness.</td>
<td>Relies on highly interactive qualitative methods but does not disregard quantitative tools. ‘The process is the product’. Inventiveness and creativity encouraged to adapt the methods to the context being assessed.</td>
</tr>
<tr>
<td><strong>Assessor’s versus facilitator’s role</strong></td>
<td>Assessor takes lead in designing assessment. Formulates questions/survey forms with no input from those assessed. Steers by setting design. Assumes objective, neutral, distant stance.</td>
<td>Assessor works collaboratively at various stages with end-users. Is partner in assessment and imparts assessment skills. Shares lead with end-users.</td>
<td>Assessor becomes more of a facilitator. Facilitator acts as catalyst, confidante and collaborator. Takes lead from end-users. Has few if any pre-determined questions.</td>
</tr>
<tr>
<td><strong>Impact/outcome</strong></td>
<td>Reports, publications circulated in-house. Findings rarely circulated among end-users. Findings loop into planning stage with little input from end-users.</td>
<td>Shared data-gathering but limited participation in data analysis. End-user views loop into planning stage. Increased understanding of end-user experiences.</td>
<td>End-user more capable of meaningful decision-making based on effective involvement in assessment. Findings become property of end-users or community. Participation in analysis is critical.</td>
</tr>
</tbody>
</table>

**HANDOUT 3.1**

**Four Generations of Project Assessment (Guba and Lincoln)**

First generation assessment emerged in the 1900s and may be characterized as measurement-oriented. It is associated with the tradition of educational research and scientific management in business and industry. Tests were commonly used to measure the progress of students in schools or to determine the most productive methods to make working environments more efficient and effective. The role of the evaluator was generally technical - to provide and apply tools or instruments for measurement.

Second generation assessment focused more on description and led to programme assessments. This tradition of assessments emphasized the achievement of objectives and the analysis of programme strengths and weaknesses, that were utilized to guide refinements and revisions. The role of the evaluator became essentially that of describer, although earlier technical functions were also retained.

Third generation assessment included judgement as an integral part of assessment. Judgement required that the programme objectives themselves be taken as problematic; hence, goals and not simple performance were subject to assessment. The development of standards against which the judgement can be made assumed prominence. Consequently, evaluators also assumed the role as judges and helped ‘clients’ (decision-makers for whom the assessments were ultimately geared) determine standards for judgement.

Fourth generation assessment refers to the most recent evolution in assessment practice. Its key emphasis is on assessment as a process of negotiation, incorporating various stakeholders more centrally into the assessment process. Fourth generation assessment takes into account stakeholders’ consensual and competing claims, concerns and issues. It recognizes that people’s diverse perspectives and interests are shaped in a major way by their particular value systems which, in turn, are influenced by their specific physical, psychological, social and cultural contexts. Through negotiation, fourth generation assessment helps identify a course of action for stakeholders. The evaluator plays a role primarily as a facilitator or ‘orchestrator’ in the negotiation process with stakeholders, who participate in the design, implementation and interpretation of the assessment as full partners.

Adapted from: Campos and Coupal (1996) and Guba and Lincoln (1989).

**HANDOUT 3.2**

**Principles of Participatory Research**

- **A defined methodology and systemic learning process:**
  The focus is on cumulative learning by all participants, which include both professional trainees and local people. Given the focus of these approaches as systems of joint analysis and interaction, their use has to be participative.

- **Multiple perspectives:**
  A central objective is to seek diversity, rather than simplify complexity. This recognizes that the different individuals and groups make different evaluations of situations which lead to different actions. Everyone’s views are affected by with interpretation, bias and prejudice and this implies that there are multiple possible descriptions of any real-world activity. Everyone is different and important.
Group learning process:
All involve the recognition that the complexity of the world will only be revealed through group analysis and interaction. There are three possible mixes of investigators: those from different disciplines, from different sectors and from the outside (professionals) and the inside (local people). Within each of these there are other types of mixes, for example, not all local people in a 'community' are the same.

Context specific:
The approaches are flexible enough to be adapted to suit each new set of conditions and actors, and so are multiple variants. Encourage your participants to invent new methods, terms and names, as this will encourage a greater sense of ownership.

Facilitating experts and stakeholders:
The methodology is concerned with the transformation of existing activities to try to improve people's situation. The role of the external 'expert' is best thought of as helping people carry out their own study and so achieve something. Encourage your participants to think of themselves as facilitators of other people's learning, particularly when they get to the village or urban neighbourhood.

Leading to change:
The participatory process leads to debate about change, and debate changes the perceptions of the actors and their readiness to contemplate action. The process of joint analysis and dialogue helps to define changes, which would bring about improvement and seek to motivate people to take action to implement the defined changes. This action includes local institution-building or strengthening, so increasing the capacity of people to initiate action on their own in the future.

**HANDOUT 3.3**

**Characteristics of Participatory Assessment**

Among the distinguishing characteristics and advantages of participatory assessment are:

**Collaborative:**
- The process of collaboration to define and achieve assessment objectives and process is often more important than the methods used or the outputs achieved.
- Usually collaboration improves the quality of the output, the relevance and interpretation of the findings.
- Collaborative decision-making among all those affected by a project includes all local stakeholders as well as programme and project staff.

**Builds local capacity:**
- Participatory assessment should help build the capacity of stakeholders to reflect, analyse and take action.
- Regardless of external organization needs, project recipients should be involved in understanding the internal dynamics of their project, its successes, its failures and solutions for overcoming obstacles.
- Participatory assessment provides stakeholders and beneficiaries with basic tools to make decisions and to introduce corrective actions.

**Problem-solving orientation:**
- Participatory assessment should help develop lessons learned that can lead to corrective action by communities.
• When project stakeholders are involved in analysing problems, constraints or obstacles, they are able to offer more appropriate solutions.

Generates knowledge:
• Participatory assessment aims to generate knowledge among local stakeholders. When communities are actively involved in data-collection processes, information is transformed into knowledge and usually leads to self-sustaining actions.

Releases creativity:
• Participatory assessment methods are creative and fun. Learning in this environment builds self-esteem and confidence essential for initiating action. People become involved in defining and carrying out the work.
• Through the participatory process, tasks such as mapping, drawing and sorting pictures release such energy and enthusiasm that the challenge often becomes less obvious bringing the process to a close, rather than struggling to keep it going.
• This enthusiasm can often provide 'spin-offs' in the form of locally-initiated development processes.

Promotes effectiveness:
• The results of participatory assessment should provide stakeholders and programme managers with information on the degree to which project objectives have been met and how resources have been used. Answers to these questions help programme managers and local stakeholders make critical decisions about implementation processes, usually without any need for 'expert' opinions.
• Participatory assessment generates useful lessons and can provide participants with tangible and realistic tools for better managing their project or programme with or without donor support.

Creates ownership:
• If the ownership of the development process from inception through to final assessment lies with the local stakeholders, the sustainability of projects through the introduction of locally-developed sustaining actions becomes much more likely.

Empowers:
• Participatory assessment should help stakeholders value their own experience and knowledge and, in the process, empower them to transform their environment.

Uses multiple methods:
• Participatory assessment methods are eclectic (i.e. they borrow from many disciplines) and can be adapted to meet the specific job at hand.
• If available tools are considered inappropriate, new tools are created.
• Validity and reliability are achieved through the use of multiple methods and by including different users and stakeholders in arriving at consensus views.

Forward looking:
• Because all the stakeholders share in decision-making, the process of participatory assessment can lead to corrective action by project recipients in ways that make sense to them. Participatory assessments not only look into the past, but also guide stakeholder-developed projects into the future.

Involving 'experts' as facilitators:
• The role of the external 'expert' is to facilitate shared decision-making throughout the entire process of participatory assessment, including identifying the purpose of the assessment and selecting methods of data collection and analysis, field implementation, and disseminating and acting upon findings.
(a) Differences Between Conventional and Participatory Assessment

<table>
<thead>
<tr>
<th></th>
<th>CONVENTIONAL</th>
<th>PARTICIPATORY</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>WHO</strong></td>
<td>External outsiders</td>
<td></td>
</tr>
<tr>
<td><strong>WHAT</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>HOW</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>WHEN</strong></td>
<td></td>
<td>More frequent small-scale assessments</td>
</tr>
<tr>
<td><strong>WHY</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
(b) Level of Participation in Assessment

<table>
<thead>
<tr>
<th>LEVEL OF PARTICIPATION</th>
<th>LOW</th>
<th>MEDIUM</th>
<th>HIGH</th>
</tr>
</thead>
<tbody>
<tr>
<td>ASSESSMENT INITIATOR</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PURPOSE</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>QUESTION-MAKERS</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>METHODS</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ASSESSOR’S ROLE</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>IMPACT/OUTCOME</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**TRANSPARENCY 3.1**

**Ten Reasons for Conducting an Assessment**

The reasons are:
- Achievement (see what has been achieved).
- Measuring progress (according to the objectives of the programme).
- Improving monitoring (for better management).
- Identifying strengths and weaknesses.
- Seeing how effective the programme has been.
- Cost benefit.
- Collecting information (to plan and manage programme activities better).
- Sharing experiences.
- Improving effectiveness.
- Allowing for better planning.

**TRANSPARENCY 3.2**

**Disadvantages of Traditional Approaches to Assessments**

Traditional approaches have:
- Proven costly and ineffective in terms of measuring and assessing project achievements.
- Failed to involve actively project beneficiaries and others who may be directly affected by monitoring and evaluation.
- Focused upon outsiders who increasingly control and conduct assessment, removed from the ongoing planning and implementation of development initiatives.
- Served primarily as a tool to control and manage programmes and resources, alienated intended beneficiaries and others involved in programme planning and implementation from taking part in project appraisal.
- Emphasized quantitative measures tending to ignore qualitative information which helps provide a fuller understanding of project outcomes, processes and changes.

**TRANSPARENCY 3.3**

**The Banking Approach**

- Education is understood as mere transfer of pre-existing "knowledge" from teachers to students.
- Teachers make "deposits" into the relatively empty accounts of the students.
- Those deposits take the form of "cultural capital" which when accumulated confer the privileges of traditional education.
The Problem-based Approach

Problem-based is an approach to learning focusing on the process of solving a problem and acquiring knowledge. The approach is also inquiry-based when trainees (participants) are active in creating the problem.

Participants are presented with a problem and they begin by:

- organizing any previous knowledge on the subject;
- posing any additional questions, and
- identifying areas that need more information.

Participants devise a plan for gathering more information, then do the necessary research and reconvene to share and summarize their new knowledge.

The Participation Ladder

<table>
<thead>
<tr>
<th>LEVELS OF COMMUNITY PARTICIPATION</th>
<th>INVOLVEMENT OF LOCAL PEOPLE</th>
<th>RELATIONSHIP OF RESEARCH/ACTION TO LOCAL PEOPLE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Passive</td>
<td>token representatives are chosen but no real input or power</td>
<td>ON local people</td>
</tr>
<tr>
<td>Consultative</td>
<td>tasks are assigned with incentives; outsiders decide the agenda and direct the process</td>
<td>FOR local people</td>
</tr>
<tr>
<td>For material incentives</td>
<td>locals’ opinions are asked; outsiders analyse and decide on a course of action</td>
<td>FOR/WITH local people</td>
</tr>
<tr>
<td>Functional</td>
<td>local people work together with outsiders to determine local priorities; responsibility remains with outsiders for directing the process</td>
<td>WITH local people</td>
</tr>
<tr>
<td>Interactive</td>
<td>local people and outsiders share their knowledge to create new understanding and work together to form action plans, with outsider facilitation</td>
<td>WITH/BY local people</td>
</tr>
<tr>
<td>Self-mobilization</td>
<td>local people set their own agenda and mobilize to carry it out in the absence of outsider initiators and facilitators</td>
<td>BY local people</td>
</tr>
</tbody>
</table>
OBJECTIVES

By the end of this topic trainees should be able to:

• List the essential steps in conducting an assessment.
• Outline the genesis of participatory rapid appraisals.
• Outline the key personal behaviours that are important for PRA researchers.

TIME: 6 hours 30 minutes

TOPIC OVERVIEW

Session 1: Steps in Conducting an Assessment (90 minutes)
Session 2: Participatory Rapid Appraisal (180 minutes)
Session 3: Skills Required for Assessment (120 minutes)

MATERIALS

Flipchart, pens, slides, cards

HANDOUT

Handout 4.1 Steps in Conducting a Participatory Assessment
Handout 4.2 Steps in Establishing a Participatory Monitoring System

TRANSPARENCY

Transparency 4.1 Pillars of Participatory Rural Appraisal (PRA)
PROCEDURE

Session 1: Steps in Conducting an Assessment............................................................90 minutes

Step 1: Activity - Steps in conducting a situational assessment

A) Divide the participants into groups of five. Ask them to complete the following task:
   Write down the following steps that are needed to conduct a programme assessment. However they are in the wrong order! Sort them into the correct order.

1. Bring together a multi-sectoral team.
2. Come to a common understanding of the importance of using participatory methods for conducting a situational assessment.
3. Formulate the aims and objectives for the Nutritional Situational Assessment (NSA).
4. Determine the framework.
5. Identify what information is already available and what is required.
6. Determine the methodology that will be used and collect the missing information.
7. Analyse the information.
8. Review the information with all the assessment participants.
9. Define priorities.
10. Compile, write and disseminate the report.

TRAINER'S NOTE

You are strongly advised to copy each of these steps onto separate pieces of paper for each group (of course without the numbering).

B) Inform the participants that there are usually four major steps in conducting participatory assessment:

1. Identification of objectives and indicators.
2. Gathering data.
3. Data analysis.
4. Sharing information.

C) Emphasize that the first step is the most important. The first thing is to establish the objectives of the intervention. This involves identifying the various stakeholders and asking them the following questions:

   Why is the intervention being carried out?
   How will it be incorporated into the project or health service?

D) After clarifying the objectives the appropriate indicators must be selected. Ask the group: What should be the criteria in selecting indicators?
If you have a fairly experienced group, they should mention the SMART criteria (specific, measurable, action-orientated, realistic and time-framed); others may mention that the indicators need to be valid, cost-effective and simple.

Complete this session by distributing Handouts 4.1 and 4.2 that summarize the steps needed to conduct participatory monitoring and assessment activities.

**Session 2: Participatory Rapid Appraisal.................................................................180 minutes**

Show Transparency 4.1 Pillars of Participatory Rural Appraisal (PRA) and take them through each of the three pillars:

- **Personal Behaviours/Attitudes:** Knowledge is created through active interaction with local people. This requires changes in attitude and behaviour of the researchers: a change from domination to facilitation.
- **Sharing:** Forming partnerships and sharing of knowledge and methods is an essential element of PRA.
- **Methods:** The emphasis upon visual methods allows local people to more easily participate in the research process.

**TRAINER’S NOTE**

**Procedure in Drawing Time Lines**

- Introduce the purpose of the exercise that they are about to do with the PRA team or community.
- You may for example ask the community to help in identifying the major events that happened in the community, say 15 to 20 years ago.
- Use secondary data if available to assist in recalling some of these events.
- Ask one of the members of the PRA team to draw a long line either on the ground or on a flipchart. At the far end of the line, they should put an object to indicate or signify an event at the beginning of the reference period. In the corresponding column they could put something to indicate how such an event affected them.
- At successive points on the line, different members of the community plot other events. People should be allowed to use any object(s) that they wish to signify an event or time at which such event happened.
- Make sure that the stick or pen is passed on from one person to another. Also listen carefully to the points raised about how the events affected the community.
- Give assistance to the community where it needs it. This can be by asking questions such as “around the time the country got independence, what major events took place in this community?”
- At the end of the exercise, ask whether anyone may wish to add to the information already generated. Ask a volunteer from among the community members to read back the history they have just constructed.
- If the time line was drawn on the ground, transfer it to paper and give a copy of this to the community to keep.
Session 3: Skills Required for Assessment

Step 1: Activity - Skills required for assessment

A) Explain to participants that this session is about the skills required for collecting good-quality data for the assessment.

B) In buzz groups, ask participants to list the attitudes and behaviours that are important in order to collect good-quality data for the assessment and why these attitudes and behaviours are important.

Make sure the following attitudes and behaviours are mentioned:
- be curious
- be humble
- be observant
- facilitate (not directive)
- have respect
- be prepared but stay flexible, relaxed and creative
- communicate clearly
- listen to others.

C) Explain to participants that listening is one of the most important skills required for sensitization and mobilization. Tell them that in order to appreciate the importance of good listening skills we will practice listening to each other.

Break participants into pairs. Write up the following instructions:
- One person will be the listener and the other will be the speaker.
- Ask the speaker to talk for three minutes about something good that happened to them recently.
- The listener should remain silent, but show that he is listening.
- Then switch roles and repeat the exercise.

D) Bring participants back together and ask them what their partner said and to list the different ways that they knew their partner was listening to them.

E) Summarize by reminding participants that active listening is more than just hearing what others say. It involves listening in a way that communicates respect, interest, and empathy. These three things can be conveyed through both verbal and non-verbal communication.

- Examples of verbal cues are: “Mmm, hmmm. Yes, I see” or repeating what the person has just said.
- Examples of non-verbal cues are: not interrupting the speaker, nodding your head and smiling, leaning forward, maintaining eye contact (if appropriate) and avoiding distractions.

If the participants are struggling with this question you might give them a couple of examples:
- We might believe that our knowledge is better than local knowledge.
- We might not have the patience or time to listen to all the voices.
- It might be easier to talk to people who are easily accessible (i.e. who live near the road).

F) Complete this session by stressing that it is only through continual reflection of the role and behaviour of ourselves as researchers and facilitators that we can best reduce the biases in conducting participatory research.
Steps in Conducting a Participatory Assessment

**Step 1: Review objectives and activities**

The community’s long-term and immediate objectives and the activities should be reviewed at this meeting.

- If Participatory Assessment, Monitoring and Evaluation (PAME) has been used, the objectives and activities established during the participatory project development process can be reviewed.
- If the activities have not been participatory, the objectives, as established by outsiders, can be reviewed.

**Step 2: Review of purpose of assessment**

*Why are we doing an assessment?* The participants will need to define the exact reasons for the assessment.

*What do we want to know?* This is the process of defining the broad categories of issues that you want the assessment to give you answers on.

**Step 3: Develop assessment questions**

The detailed questions must be designed in a way that will provide you with an indication of how well the project has fared on each broad category as defined in Step 2.

**Step 4: Decide who will do the assessment**

In the larger group meeting, decide who will do the assessment and who will want to know the results. It may be decided to include the whole community (especially if it is small), or only the beneficiaries, or delegate the responsibility for the assessment to a smaller assessment team.

- The composition of the Assessment Team should be decided by the larger group at this first meeting.
- If it is known that some minority groups will not be represented, the facilitator may encourage the participation of spokespersons from these groups on the Assessment Team.
- The Assessment Team may include beneficiaries, those who may be disadvantaged by an activity, community members and other affected groups.

The larger group also decides who needs the results of the assessment and when the results should be ready. This will depend on who needs the information to make decisions and when decisions are to be made.

**Step 5: Identify direct and indirect indicators**

For each assessment question, direct and indirect indicators are chosen.

- Direct indicators are pieces of information that expressly relate to what is being measured. For example, if information on crop yields is required, this is exactly what we will measure.
Indirect indicators are essential pieces of information, chosen from among many possible pieces of information, to serve as substitutes or proxies to answer questions and/or respond to statements that are difficult to measure. For example, instead of the direct indicator of income, indirect indicators of poverty chosen by stakeholders might be:
- persons are poor if they have insufficient income to meet basic needs;
- persons are rich if they can hire labour.
This type of indicator is obviously only locally specific and cannot be generalized.

Three important questions to be answered when defining the key indicators are:

What do we want to know?
What are the many pieces of information that could tell us this?
What are the few pieces of information (key indicators) that will tell us this?

Establishing good indicators will reduce the amount of information that has to be collected.

**HANDOUT 4.2**

**Steps in Establishing a Participatory Monitoring System**

**Step 1: Discuss reasons for monitoring**

Review the benefits and purpose of monitoring so that stakeholders can decide whether monitoring will help them.

**Step 2: Review objectives and activities**

If PAME has been continually used, the insider objectives and activities will have been established during the participatory development planning process.

If insiders have not previously been involved, the objectives and activities as established by outsiders can be reviewed and discussed by insiders. A participatory assessment may be necessary if insider and outsider objectives are very different.

**Step 3: Develop monitoring questions**

Discuss the information needed to help you know if activities are going well. Focus on the questions:

What do we want to know?
What do we monitor that will tell us this?

The facilitator can write (or draw) on large sheets of paper, or a blackboard, monitoring questions generated around each objective and activity. There should be agreement by the group on each monitoring question. If many questions are generated they can be ranked in order of importance.

**Step 4: Establish direct and indirect indicators**

For each monitoring question, determine direct and/or indirect indicators that will answer the monitoring questions (see section under participatory assessment for a more in-depth discussion regarding indicators - refer to Handout 4.1, Step 5).
Step 5: Decide which information-gathering tools are needed

For each indicator or monitoring question, the most appropriate information-gathering tool must be chosen. Remember one tool can gather information that answers many monitoring questions.

Step 6: Decide who will do the monitoring

Monitoring is not a specialist’s job, but may require input from people with specific skills such as bookkeeping or engineering. It will also require a certain amount of time commitment from people.

Step 7: Analyse and present results

It is important that information monitored be analysed at specific times throughout the activities. The analysis can be discussed at community meetings, posted or put in community newsletters. The community will then know whether or not activities are progressing as planned or if changes or modifications are required.

Step 8: Identify the information sources for evaluation questions

For each key indicator you now need to define a mix of information resources that you can use or ask. If an existing participatory process is in place, especially a participatory monitoring system, much of your information may be obtained here. If information is not easily available, then an appropriate mix of participatory tools can be used or developed.

Step 9: Determine the skills and labour that are required to obtain information

The Assessment Team must decide which skills and resources are available to them:

What resources do we need?
What resources do we have, or can we develop?
What other resources do we need to get?

Step 10: Determine when information gathering and analysis can be done

Specific dates and deadlines need to be agreed upon for each phase of the assessment.

Step 11: Determine who will gather information

Each member of the Assessment Team must be allocated specific tasks.

Step 12: Analyse and present results

When all the tasks have been completed, it will be necessary to analyse and synthesize information for presentation. The participatory analysis tools described can be used to facilitate the analysis process.

The Assessment Team can decide what will be the best way to present results, given the audience for whom the results are intended, the resources and time available.
Pillars of Participatory Rural Appraisal (PRA)

The Three Pillars of PRA

**OBJECTIVES**

By the end of this topic trainees should be able to:

- Do a structured observation.
- Do a key informant interview.
- Conduct a focus group discussion (FGD).
- Collect data for assessment.

*TIME: 7 hours 30 minutes plus field visit*

**TOPIC OVERVIEW**

Session 1: Structured Observations (90 minutes)
Session 2: Key Informant Interviews (180 minutes)
Session 3: Focus Group Discussions (60 minutes)
Session 4: Preparation for Collection of Data (120 minutes)
Session 5: Field Visit

**MATERIALS**

Flipchart, pens, masking tape, cards, markers, overhead projector, transparencies, transparency pens

**HANDOUTS**

Handout 5.1 Steps in Preparing a Structured Observation
Handout 5.2 Guidelines for Growth Monitoring and Promotion
Handout 5.3 Sample Checklist on Post-natal Care
Handout 5.4 Role Play Card for Key Informant Interview
Handout 5.5 How to Conduct Key Informant Interviews and Observations
Handout 5.6 Task Box for Key Informant Interviews and Observations
Handout 5.7 Tasks for Organizing and Conducting Focus Group Discussions (FGDs)
Handout 5.8 Types of Questions in FGDs
Handout 5.9 Plan of Action for Data Collection

**TRANSPARENCY**

Transparency 5.1 Advantages of Structured Observations

**REFERENCES**
Session 1: Structured Observations

Step 1: Activity - Identifying assessment techniques

A) Ask: “What nutrition services are offered as part of the Community-Based Nutrition Programme (CBNP)?” Write their responses on the flipchart. The following could be listed:

• growth monitoring and promotion;
• immunization services;
• management of severely malnourished children;
• management of children with diarrhoea;
• ante- and post-natal care;
• primary school nutrition programme;
• Protein Energy Malnutrition (PEM) scheme;
• community-based nutrition projects;
• water and sanitation facilities and hygiene education.

B) Ask: “In what ways can we gather information in order to assess nutrition services?” The following methods should be noted:

• observations
• interviews
• records review
• focus group discussion.

C) Divide participants into four groups. Give one method to each group. Give each group the following task:

“What information, useful for doing a nutrition assessment, can be collected using the method you have been given?”

Allow 10 minutes for this activity.

The following points should come out:

Observations
Possible uses are to:
• follow a client through an activity at the clinic;
• observe provider/client interaction;
• observe the health worker providing services;
• observe specific procedures, for example, growth monitoring;
• check on the availability/adequacy/utilization of supplies, equipment and materials;
• check on routine activities such as maintaining the cold chain.

Interviews
Possible uses:
• to obtain specific information about services from clients, health workers, community members and from the health management team members such as provincial and regional personnel.
Record review
Possible uses:
• clients’ files and charts for number of cases treated with a certain condition such as diarrhoea or malnutrition, and how treatment has been conducted;
• attendance records for number of cases seen during each month, number of cases put on Protein Energy Malnutrition Scheme.

Focus group discussion
Possible uses:
• to obtain views and opinions of community members about service provision;
• to obtain views and opinions of health service providers about service provision.

Step 2: Activity - Performing observations

Ask three participants to prepare and perform the following role play that takes place at the clinic.

A mother has come to the clinic to have her baby weighed. The health worker does not greet the mother, she weighs the baby fully dressed. The health worker does not plot the child's weight correctly on the chart but just writes it down and then does not give any feedback to the mother. Improvise other bad behaviour on the part of the health worker.

B) After the role play, ask participants the following questions:

What was this role play about?
What did the health worker do?
What should the health worker not have done?
What should the health worker have done?

C) Ask what technique they used to evaluate this role play. Observation, ask: How did you assess whether it was a good or bad consultation?

D) Point out that they first imagined what a good consultation consisted of and then check it against what was happening. Explain to participants that to do an assessment they need to use a standard or guideline which identifies the procedures that should be followed and then to write a checklist against which they can check whether these activities occur.

Step 3: Activity - Preparing observation checklist

A) Explain that a structured observation is used to learn about actual conditions and practices in the field. Structured observations are different from ordinary observations because the evaluator is systematically looking at specific behaviours, activities and procedures. The most frequently-used instrument for collecting data during a structured observation is a checklist. Where the description is factual and accurate, structured observations enable the evaluator to describe a programme thoroughly and carefully.

B) Display Transparency 5.1 about the advantages of collecting and using observational data.

C) Distribute Handout 5.1 Steps in Preparing a Structured Observation. Take participants through it and clarify any issues.
D) Explain that the first step in developing an observational checklist is to first establish what should be the ideal situation. Distribute Handout 5.2 Guidelines for Growth Monitoring and Promotion (GMP) and take participants through it. Explain to the participants that this is a sample guideline for assessing GMP programmes, and that they will have to develop similar guidelines for other types of nutrition-related services during the training. Point out that where there are no guidelines or procedure manuals, the district health team should develop their own.

E) Divide the participants into groups of five. Give each group the following instruction:
- Using Handout 5.2 and Handout 5.3 (which is an example of a checklist) draw up an observation checklist that could be used to assess the quality of growth monitoring. You have 20 minutes to do this.

F) Get each of the groups to visit the other groups and examine their checklists to see what differences there are.

G) Finish this session by pointing out the need to be inconspicuous and the need to blend in with the environment when doing an observation. Ask the participants the ways in which they may introduce themselves to those whom they are going to observe, in order to minimize the problems of changing behaviour as a result of observation.

Session 2: Key Informant Interviews.................................................................................................................. 180 minutes

Step 1: Activity - Introduction

A) Ask: “What are key informant interviews?”

B) Summarize the responses by stating that key informant interviews are interviews with people who have been especially selected because they might have special in-depth experience or knowledge.

C) Then ask: “What are the reasons for doing key informant interviews?” Write their responses on the flipchart.

The following points should come out:

- to reveal knowledge, attitudes and practices regarding the provision of health services;
- to gather information on current practices and problems;
- to identify the resources available to solve these problems;
- to gather people’s perceptions concerning the provision of health services.

Step 2: Activity - Identifying key informants

A) Explain to participants that key informant interviews involve direct questioning, using structured and open-ended questions with one subject at a time. Ask: “Who in the community and the health services might be able to provide important information about the nutrition situation in the community?”
• people who work within the community and have a professional understanding of the issues: for example, school teachers, clinic nurses, social workers, etc.;
• people who are recognized as community leaders and seen to represent a section of the community: for example, councillors, traditional leaders, church leaders;
• people who are important within informal networks and often play a central role in local communications: for example, shop owners, old women in the community, income-generation project leaders.

Step 3: Activity - Identifying skills needed for conducting interviews

A) Divide the participants into four groups. Give each group Handout 5.4 Role Play Card for Key Informant Interview. Give each group the following tasks:

- Ask two members of your group to read out the interviews in Handout 5.4 Role Play Card for Key Informant Interview.
- Write down all the differences between the two interviews.
- Now write down all the qualities which are needed to conduct a good interview.

You have 30 minutes for this task.

Share the qualities of a good interviewer in plenary. The following points should come out:

- articulate
- humble
- honest
- modest
- be aware of the needs of other people
- patient
- flexible
- clear on the purpose of research
- considerate.

B) Distribute Handout 5.5 How to Conduct Key Informant Interviews and Observations. Ask each of the participants to read out one paragraph at a time. Clarify any issues that participants may have.

C) Explain to the participants that the interviewer's attitude is very important, not only because it must actually be an invitation for the interviewee to talk, but because the interviewee (unconsciously perhaps most of the time) imitates the interviewer's attitude. Ask participants to brainstorm about what the interviewer's attitude towards the interviewee should be. Write responses on the flipchart. The following answers should come out:

- giving attention and showing interest;
- maintaining eye contact with the interviewee;
- using appropriate voice;
- displaying an open inviting posture.

Step 4: Activity - Developing interview schedules

A) Point out that there are several types of questions that should be included in an interview. These are:

- descriptive or open-ended questions are used to obtain information on facts, opinions and sensitive issues; these questions request an account of an event through probing;
• structured or close-ended questions are used when the range of possible responses is known;
• contrast questions which ask the difference between one or more events or objects;
• 'why questions'; these ask respondents to explain the reasons for a situation or an action.

B) Using the same four groups of participants as before, give each one the following four topics taken from the Assessment Tool: programme relevance, community activities, mobilization and macro-policy, programme management. Then give them the following tasks:
• develop an interview guide for key informant interviews in order to gather information to assess your chosen topic;
• you will be expected to share your interview guide with the rest of the class by conducting interviews in role plays.

Allow 60 minutes for this activity.

C) Get each group to present their interview schedule in the plenary through a role play.

D) After each of the role plays have been presented, ask participants to comment on the strengths and weaknesses of the role play.

E) Finish this session by distributing and reading out Handout 5.6 Task Box for Key Informant Interviews and Observations. Ask participants if they have any questions about the handout.

Session 3: Focus Group Discussions.............................................................................60 minutes

Step 1: Activity - Introduction

A) In groups of three, ask participants to come up with a definition of what focus group discussions (FGDs) are and to state when they should be used. Write their responses on flipcharts and ensure the following points come out:
• FGDs are a qualitative method of assessment.
• They use group dynamics and the flow of discussion to probe deeply into beliefs and concepts people have about a particular subject.
• They are held with small groups of people who have similar characteristics.
• FGDs are led by a moderator who uses a question guide to introduce the topics of interest.
• The discussion may either be taped or written down by a recorder.

B) Distribute Handout 5.7 on how to organize and conduct focus group discussions and read through it with the participants noting the preparation tasks, the implementation tasks and the analysis tasks. Clarify any questions they may have.

C) Distribute Handout 5.8 on the different types of questions that are asked in FGDs. Go over each one, giving examples.

D) Ask participants if they have experience doing FGDs, and how they were used. Ask them if they can think of other ways to encourage group participants to speak freely and informatively about nutrition and related issues. Ask them if they can think of times that FGDs should not be used.
Step 2: Activity - Skills needed for conducting FGDs

A) Ask participants to brainstorm about the skills needed to facilitate a group discussion. List their responses on the flipchart. The following points should come out. The facilitator should:

- be a good listener; not dominate the discussion;
- encourage all members of the group to contribute to the discussion;
- be a good timekeeper; be alert to people's reactions in the group;
- be able to probe for further information;
- be able to keep the discussion on the topic.

B) Ask participants to brainstorm about the role and skills of a good note-taker (recorder). The following should come out.

The recorder should:
- be attentive;
- know what points are key and relevant to write down;
- be a quick and able writer;
- be able to summarize and interpret the discussion.

Step 3: Activity - Performing an FGD

A) Divide participants into two groups.

Give them one of the following subjects:
- access to nutrition services;
- assessing programme interventions.

Give them the following tasks:
- prepare a question guide for an FGD for the topic that you have been given;
- decide who will be the facilitator and the recorder;
- conduct the focus group discussion with six to eight members of the other group.

B) Ask the participants what went well, what did not go well and how it could be improved.

C) Complete this session by explaining to participants that once the FGD has been conducted, they need to analyse the results. Remind them that it is important to capture the opinions expressed during the discussion and not try to quantify how many people gave opinions.

D) Also point out the FGDs may be used to develop and test nutrition messages. When this is done, it is useful to record the exact phrases and words that were used by community members or health workers. Clarify any questions the participants may have about FGDs.

Session 4: Preparation for Collection of Data

Step 1: Activity - Organizing a field visit

A) Explain to participants that during the last topic they identified key areas of the information pyramid that needed to be completed. During this topic they have learnt about and practised a few ways of collecting this information. They have also prepared a few interviews and observation guides. It is now important to develop further guides and to test these first before going around the district.
B) Part of your preparation for the workshop includes organizing a field visit for the participants to go out and test some tools. The field visit should include a couple of primary health care clinics where the participants will have the chance to interview health workers and mothers. You should now give some background to the participants about the field visits (i.e. how large are the clinics, what services do they offer, information about the communities they service, etc.).

C) Tell the participants that they will now prepare to test their tools by going out on the field visits.

D) Divide the participants into their teams and give them the following instructions:

- What information do you need for the assessment?
- How will you collect this data?

Put your suggestions in a table like this:

<table>
<thead>
<tr>
<th>Assessment information</th>
<th>What would you like to know</th>
<th>How will you collect it</th>
</tr>
</thead>
<tbody>
<tr>
<td>Macro policy</td>
<td>Is there appropriate legislation to support nutrition in place? (i.e. fortification, breastmilk substitutes, etc.)</td>
<td>Interviews with key informants/Review of legislation</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>What resources are given to CBNP?</td>
<td></td>
<td>Review of budget allocation</td>
</tr>
</tbody>
</table>

Allow 45 minutes for this activity.

E) Ask each group to present their checklist to the plenary and discuss. Encourage participants to question the other groups about their ideas. Ensure that the methods for collecting the data are within the capacity of the team to use:

- prepare the appropriate data collection tool to collect the data;
- decide who will be the subjects, when the data will be collected and by whom.

Allow 1 hour for this activity

F) Visit each group and make sure that they have finalized the data collection tool and have planned who they will interview/observe and that they have assigned tasks.

Allow 15 minutes for this activity.

**Session 5: Field Visit**

**Step 1: Activity - Carrying out the field visit**

Ask the participants to spend the day collecting data according to the plan they have worked out in Session 4.

This activity requires one full day.
HANDOUT 5.1

Steps in Preparing a Structured Observation

1. Decide if structured observations are needed and can be done, considering available resources.
2. Generate a list of potential key behaviours that can be observed.
3. Choose an observation method either a checklist, coded behaviour records or delayed reports that are filled in after the observation is made.
4. Decide how long each observation must be in order to yield good data.
5. Determine how many observations are needed.
6. Prepare a plan for conducting observations by determining who/what to observe, where and when.
7. Prepare the observers’ recording sheets, if needed.
8. Choose/train observers.
9. Inform staff about planned observations.
10. Conduct observations that you have planned.
11. Code, clean and process data.
12. Formulate conclusions and recommendations.
13. Share the results with the community.
14. Use the results for planning, implementation or further assessment.

HANDOUT 5.2

Guidelines for Growth Monitoring and Promotion

1. Greet the mother or caregiver.
2. In a polite way, find out what service(s) the mother has come for and direct her there.
3. Discuss the general welfare of the child and other family members since the last visit. Ask:
   
   Has the child been well?
   Has the child been growing well?
   Are there any developmental milestones such as starting to crawl, appearance of new teeth, starting to sit up alone?
4. Set the scale to zero or check that it is at zero as you ask the mother to remove the child’s clothes.
5. Help the mother to correctly place the child on the scale (all parts of the child’s body should be on the scale).
6. Read the weight correctly when the numbers on the scale stop fluctuating.
7. As you record the weight and plot the weight-for-age on the child’s health card by connecting the dot at the previous point, tell the mother to take the child off the scale.
8. Ask the mother to dress the child.
9. Show the mother the card and see if she can interpret it correctly. For example, if the child has gained or lost weight since the last visit. Praise her for doing so.
10. If the child has gained weight, commend the mother and reinforce this behaviour. If the child has lost weight, find out from the mother if she knows the reasons why, for example, if the child has been ill or any other problem.
11. Ask the mother about current feeding practices, for example, exclusive breastfeeding or weaning practices. Enquire about the availability/affordability of staples and specifically oily foods and cheap sources of protein (e.g. beans, sour milk, etc.). Then give proper advice (praise her for good practices).

12. Advise the mother how she may improve her feeding practices (i.e. active feeding).

13. Check if Vitamin A supplement has been given and ask about access to Vitamin A-rich foods (e.g. pumpkin, pawpaw, carrots, etc.)

14. Check if the immunization record is accurate and up-to-date. Advise her accordingly.

15. Ask the mother if she has any questions or concerns regarding her child.

16. Ask the mother if she has any questions or concerns about family planning. Advise her accordingly.

17. Advise the mother when the child is due for the next visit.
Sample Checklist on Post-Natal Care

<table>
<thead>
<tr>
<th>Name of observer</th>
<th>Date</th>
<th>Location/clinic</th>
</tr>
</thead>
</table>

| 1. Post-natal care for the mother                                               |                                                                     |                 |
| Did the service provider:                                                        | Yes | No                          |                 |
| Greet the mother?                                                                |         |                             |                 |
| Ask about general health of mother and child?                                    |         |                             |                 |
| Ask mother about her diet?                                                        |         |                             |                 |
| Ask mother about baby’s eating patterns?                                         |         |                             |                 |
| Encourage exclusive breastfeeding up to 6 months?                                |         |                             |                 |
| Encourage mother to breastfeed when she/baby are unwell?                         |         |                             |                 |
| Provide appropriate counselling on mother’s diet during lactation?               |         |                             |                 |
| Encourage the use of locally-available foods (energy-rich foods)?                |         |                             |                 |
| Encourage cultural practices that promote consumption of important foods for lactating mothers? |         |                             |                 |
| Discourage dietary taboos that restrict important foods for lactating mothers?  |         |                             |                 |
| Provide iron and/or folic acid tablets?                                          |         |                             |                 |
| Provide nutrition supplements?                                                    |         |                             |                 |
| Examine for engorged breasts, cracked nipples or abscesses?                      |         |                             |                 |
| Provide warning signs that indicate that the mother should seek help?            |         |                             |                 |

| 2. Post-natal care for the baby                                                  |                                                                     |                 |
| Did the service provider:                                                        |                     |                 |
| Weigh the baby?                                                                  |                     |                 |
| Encourage the mother to take the child for growth monitoring?                    |                     |                 |
| Check if baby is immunized?                                                      |                     |                 |
### Role Play Card for Key Informant Interview

<table>
<thead>
<tr>
<th><strong>A “BAD INTERVIEW”</strong></th>
<th><strong>A “GOOD INTERVIEW”</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Mama Ngumbela</strong></td>
<td><strong>Mama Ngumbela</strong></td>
</tr>
<tr>
<td>Good morning, Mama Dlamini. The government needs information about how you people feed your children, so I would like to ask you some questions.</td>
<td>Good morning, Mama Dlamini. My name is Mama Ngumbela. I am from the Ministry of Agriculture, Home Economics Division. I wonder if you could help me. I am asking all the mothers in the village about foods they use for feeding their children. Might I ask you too?</td>
</tr>
<tr>
<td><strong>Mama Dlamini</strong></td>
<td><strong>Mama Dlamini</strong></td>
</tr>
<tr>
<td>I’ll try to help you but as you can see I’m rather busy. I have to go to the market in a few minutes.</td>
<td>I’ll try to help you but as you can see I’m rather busy. I have to go to the market in a few minutes.</td>
</tr>
<tr>
<td><strong>Mama Ngumbela</strong></td>
<td><strong>Mama Ngumbela</strong></td>
</tr>
<tr>
<td>Well I am afraid I must have this information today and I can’t come back later.</td>
<td>I appreciate that you’re busy Mama Dlamini with so many fine children to care for. I’d gladly come back at a more convenient time, but unfortunately I’ve got to get the information today. The questions won’t take a minute.</td>
</tr>
<tr>
<td><strong>Mama Dlamini</strong></td>
<td><strong>Mama Dlamini</strong></td>
</tr>
<tr>
<td>What can I tell you, I am only a humble person?</td>
<td>What can I tell you, I’m only a humble person?</td>
</tr>
<tr>
<td><strong>Mama Ngumbela</strong></td>
<td><strong>Mama Ngumbela</strong></td>
</tr>
<tr>
<td>That’s right you really know what’s going on, but the government has to check on it from time to time. Now I suppose you feed your children mainly on maize without anything added?</td>
<td>Of course, but your opinion is important. Well, can I start by asking what’s the main food you feed your children?</td>
</tr>
<tr>
<td><strong>Mama Dlamini</strong></td>
<td><strong>Mama Dlamini</strong></td>
</tr>
<tr>
<td>Well, I do my best, but at this time of the year there is hardly any food to be found around here.</td>
<td>Maize porridge</td>
</tr>
<tr>
<td><strong>Mama Ngumbela</strong></td>
<td><strong>Mama Ngumbela</strong></td>
</tr>
<tr>
<td>I’m sure there are some things to be had somewhere, but wait a minute while I write that down. I haven’t got much time. Perhaps you could tell me what foods you eat which have a high protein content.</td>
<td>Thank you. And do you ever add anything to it?</td>
</tr>
<tr>
<td><strong>Mama Dlamini</strong></td>
<td><strong>Mama Dlamini</strong></td>
</tr>
<tr>
<td>I’m sorry, I don’t understand what you mean.</td>
<td></td>
</tr>
<tr>
<td><strong>Mama Ngumbela</strong></td>
<td><strong>Mama Ngumbela</strong></td>
</tr>
<tr>
<td>Well, never mind. How much money does your husband earn every month?</td>
<td></td>
</tr>
<tr>
<td><strong>Mama Dlamini</strong></td>
<td><strong>Mama Dlamini</strong></td>
</tr>
<tr>
<td>He is a bus driver.</td>
<td></td>
</tr>
<tr>
<td><strong>Mama Ngumbela</strong></td>
<td><strong>Mama Ngumbela</strong></td>
</tr>
<tr>
<td>Excellent. Thank you again Mama Dlamini. I’m leaving now, thank you very much for your time. Goodbye.</td>
<td></td>
</tr>
</tbody>
</table>
Key informant interviews and observations are techniques for identifying problems and potential solutions. Interviews may be carried out in the clinics or at the hospital, in the school or in the community during several visits. Observations and assessment of nutritional status and diet can be conducted during the same visit. The length of time and number of visits depends on what is being observed or discussed and on the participants’ reactions. If a visit is too short, participants may not have the time to relax and provide in-depth information. If a visit is too long, or too many visits are made, participants may become frustrated by the inconvenience.

Prior to initiating an interview, it is important to establish credibility and a level of acceptance with the person being interviewed. Visit the formal or informal community leader to ask for his or her permission to carry out research in the community and explain why the information is being collected. Some programmes may want to hold a community meeting to introduce the interviewers before field work begins. In other places, the interviewers may make brief introductory household visits. It is not always advisable to identify the interviewers by profession, especially if they are doctors or nurses, because this can bias people’s responses.

Establishing a friendly relationship with participants generally is not difficult if interviewers are sympathetic and speak the local language. Once rapport is established, the interviewee will not feel she must treat the interviewer like a guest, but will go about her usual chores, leaving the interviewer to complete notes or to help.

The in-depth interviews usually are held in the home or around the hospital, clinic or housing compound. Specific interview topics, such as food preparation, are discussed in the kitchen area so that the actual utensils used to prepare and serve the food can be observed. This facilitates conversation and permits the interviewer to compare reported practices and beliefs with actual behaviour.

Dietary recalls require greater concentration by participants. These are conducted in the most comfortable environment possible, at a time when participants are not distracted by other tasks.

An interviewer who is in the house repeatedly or for an extended period can introduce discussion about the neighbours or local problems to divert the conversation but still reveal the participants’ views. Remember, it is fine just to relax. If the mother sits in the shade for a minute to shell peas, sit with her. Let her begin the conversation.

Similarly, it is important to interview health workers in privacy and this may require negotiation with the health facility management and arrangement of a time when the health worker can be spared from normal duties. Every effort should be made to conduct the interview in a quiet, private area.

Start the interview with the basic questions listed earlier: name, address and family composition. Then guide the conversation by asking different types of questions, probing and requesting clarifications. Be careful to keep these questions free of suggestions of correct or desired responses.

Unlike formal surveys where responses are brief, in-depth interviews encourage clarification of what each person says. Ask the respondent to explain the full meaning by repeating or rephrasing a question. Questioning does not have to stick to the guides. In-depth interviewing involves probing for information on new themes and issues as they emerge. If people are reluctant to talk because they do not think they have any information to offer, give assurance that their views are of great interest and importance.
Decide whether the in-depth interviews are to be taped. Extensive note-taking helps to get the most out of the interviews but it is difficult to take extensive notes and listen attentively at the same time. If the field team lacks prior experience with note-taking, it is worthwhile to tape the in-depth interviews. In this case, field workers listen to the tapes after an interview and add details to their field notes as required. Transcribing the tapes is not necessary.

Interviews are summarized immediately so that decisions about modifying guides and exploring new lines of inquiry are made and acted on.

Structured observation is a method for obtaining information about specific practices (food distribution at meal time, where the baby is in relation to the mother throughout the day, or food preparation by the mother, for example). Open observation is when interviewers notice something casually (the presence of a food or other products in the home, for example). Observations conducted during the interview capture the context in which behaviours occur and identify new behaviours or new issues not discussed in the question guide. Observations may confirm or contradict what the respondent reports during the interview and are an extremely important part of the home interview.

Here are some additional points to remember about how to conduct structured observations and key informant interviews:

- Make sure you introduce yourself and the members of the team to the person(s) you are interviewing and/or observing.
- Explain the purpose of your visit and note that it will not interfere with routine or on-going activities.
- Point out that you want to learn more about their activities with a view to improving the nutritional status of the district.
- After the interview or observation, quickly check to ensure that you have all the information you need.
- Thank the person for giving you the time to be with them.
Task Box for Key Informant Interviews and Observations

### Preparation Tasks

<table>
<thead>
<tr>
<th>Task</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prepare the protocol and guides</td>
<td>question and observation guides</td>
</tr>
<tr>
<td>Revise the research plan</td>
<td>ensure that sample is suitable for question guides</td>
</tr>
<tr>
<td>Train the field team</td>
<td>developing relationship questioning and probing recording and forms unbiased observation what to look for structured forms</td>
</tr>
<tr>
<td>Test and revise the protocols and guides</td>
<td>to refine and correct and to familiarize trainees to estimate amount of time needed for each interview</td>
</tr>
<tr>
<td>Draft a field plan based on the research plan and results of testing the protocol</td>
<td>specify number of respondents per group (age, respondent category, etc.) in each visit plan now to recruit respondents and divide the interviews among the field team members</td>
</tr>
</tbody>
</table>

### Implementation Tasks

<table>
<thead>
<tr>
<th>Task</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recruit the households</td>
<td>select households obtain informed consent</td>
</tr>
<tr>
<td>Conduct household interviews and observations</td>
<td>interview and record findings observe household, feeding episodes, etc.</td>
</tr>
<tr>
<td>Conduct interviews with other respondents</td>
<td>select participants in research plan categories conduct interviews, but usually not observations</td>
</tr>
</tbody>
</table>

### Analysis Tasks

<table>
<thead>
<tr>
<th>Task</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Analyse the interviews and observations</td>
<td>initial analysis sort groups, summarize by themes, interpret, compare with interview findings examine new issues raised</td>
</tr>
<tr>
<td>Develop recommendations</td>
<td>list possible and plausible recommendations</td>
</tr>
</tbody>
</table>
**HANDOUT 5.7**

**Tasks for Organizing and Conducting Focus Group Discussions (FGDs)**

<table>
<thead>
<tr>
<th>Preparation Tasks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Design the FGD protocol and develop the plan</td>
</tr>
<tr>
<td>determine questions</td>
</tr>
<tr>
<td>choose type of participant</td>
</tr>
<tr>
<td>choose sites</td>
</tr>
<tr>
<td>Decide who will conduct the FGDs</td>
</tr>
<tr>
<td>identify moderators and note-takers</td>
</tr>
<tr>
<td>Develop the question guides</td>
</tr>
<tr>
<td>specify the key issues and questions</td>
</tr>
<tr>
<td>Train the moderators and note-takers</td>
</tr>
<tr>
<td>discuss the roles of the moderator and the note-taker</td>
</tr>
<tr>
<td>teach discussion techniques</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Implementation Tasks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recruit the participants</td>
</tr>
<tr>
<td>choose participants with similar characteristics</td>
</tr>
<tr>
<td>Conduct the FGDs</td>
</tr>
<tr>
<td>provide an introduction guide and record the discussion debrief</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Analysis Tasks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do initial analysis in the field</td>
</tr>
<tr>
<td>transcribe the tapes or prepare notes</td>
</tr>
<tr>
<td>summarize each FGD</td>
</tr>
<tr>
<td>Sort and summarize the results</td>
</tr>
<tr>
<td>identify themes and trends</td>
</tr>
<tr>
<td>compare and contrast groups</td>
</tr>
<tr>
<td>Write a brief summary of the results</td>
</tr>
<tr>
<td>highlight how the results reinforce, conflict or add to earlier findings</td>
</tr>
</tbody>
</table>
Types of Questions in FGDs

Asking why
The focus group discussion is not just another way to do a survey. The moderator’s job is to generate a discussion that will probe deeper into common child-feeding practices and the perceptions and reasons behind them. For example, “Why do women generally believe they must...?”

Clarifying an answer
If more information is needed after an explanation has been given by a participant, ask others for clarification. For example, “Please tell me what Tola means when she says...”

Substitution
Use the words of one of the participants to help clarify the original issue. However, take care not to change what is at the heart of the topic.

Polling
This technique will help enliven a discussion or turn the group’s attention away from someone who may be dominating the discussion. Go around the group, asking each participant to express an opinion, but remember that the objective is to have a discussion among participants, not an in-depth interview with each participant. Use this to spark debate on divergent opinions.

Contrasting
During the conversation, different opinions or practices may be mentioned for the same problem or situation. Try to draw out the differences without making anyone feel uncomfortable and ask the group’s opinion about these contrasting views.

Projection
Use pictures or a story to present a particular situation that participants can discuss without having to use themselves as examples. For example, show photos of children and ask participants to imagine what these children’s lives are like and what makes them healthy or unhealthy, or ask the group to complete a story that reflects decision-making on a relevant issue. You could describe a family situation that participants can identify with, explain a problem that the family is facing and then ask the group to make up an ending to the story that solves the problem.

Concluding remarks
At the end of the session, ask participants what they think about what was discussed and whether they have additional comments. Often, when participants see that the formal session is over, they begin to speak more frankly than they do during the session.
## Plan of Action for Data Collection

<table>
<thead>
<tr>
<th>DATE</th>
<th>ACTIVITY</th>
<th>WHO</th>
<th>WHEN</th>
<th>WHERE</th>
<th>DATA TO BE COLLECTED</th>
<th>HOW</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Advantages of Structured Observations

Gives more detailed and context-related information.

Permits collection of information on facts not mentioned in a questionnaire.

Permits tests of reliability of responses to questionnaires.

Data are collected in the field where the action is.

The observer is better able to understand the context within which programme activities occur.

The observer may note things that may routinely escape the participants of the programme.

The observer can directly experience the programme, thereby making the most of an inductive discovery-oriented approach.

The observer can learn about things that participants may be unwilling to talk about in an interview.
REFERENCES


Other useful references are:


OBJECTIVES

By the end of this topic trainees should be able to:

• Describe their field work experiences.
• Explain how to prepare data for data analysis.
• Summarize quantitative and qualitative data.
• Interpret qualitative and quantitative data especially with respect to the sustainability of the programme.
• Write a report.

TIME: 7 hours 30 minutes

TOPIC OVERVIEW

Session 1: Reporting Back on Field Work Experiences (90 minutes)
Session 2: Preparing Data for Data Analysis (60 minutes)
Session 3: Summarizing Qualitative and Quantitative Data (60 minutes)
Session 4: Interpretation of the Results (60 minutes)
Session 5: Writing of a Research Report (180 minutes)

MATERIALS

Cards, flipchart, masking tape, pens, markers, transparencies, overhead projector, transparency pens.

HANDOUTS

Handout 6.1 Analysing Qualitative Data
Handout 6.2 Summary of Qualitative Data
Handout 6.3 Summary Matrix on Responses on Knowledge, Attitudes, Beliefs, and Practices on Breastfeeding
Handout 6.4 Example of a Master Sheet
Handout 6.5 Example of Tallies, Ranges, Percentages, Ratios, Rates, Frequencies, Tables and Measures of Central Tendency
Handout 6.6 How to Make Your Organization Sustainable
Handout 6.7 Strategies for Sustainability
Handout 6.8 General Points on Writing a Report

TRANSPARENCIES

Transparency 6.1 Rules of Report Writing
Transparency 6.2 Main Components of a Research Report
ADVANCE PREPARATION

Photocopy handouts and prepare overhead transparencies. Assign participants specific data collection techniques the night before so they can prepare for the information session. Plan and organize a role play involving a focus group discussion on a topic of participant’s choice to be performed during one evening.

PROCEDURE

Session 1: Reporting Back on Field Work Experiences..............................................90 minutes

Step 1: Activity - Introducing the module

A) Write up on a large piece of paper the objectives for the module as outlined on the previous page.

B) Ask if anybody has any questions about the objectives.

C) Briefly go through the outline of the different sessions.

Step 2: Activity - Capturing field experiences

A) Introduce the session by explaining to participants that field work to gather information on nutrition-related activities is one of the most challenging activities in the planning cycle. Point out that it is important to capture these experiences so that we can learn more from them. In this session, we will share some of the experiences we have had in collecting our information.

B) Divide the participants into the same groups that went out and collected the information. Ask participants to prepare a brief report on their field work experiences by answering the following questions:

- What did you do during field work?
- What went well during field work?
- What did not go well during field work?
- What would you do differently next time?
- What did you learn?

Allow about 60 minutes for participants to prepare their report.

C) Ask participants to present their reports in plenary. Make sure you probe participants and find out the following:

Did you get all the information and cooperation you wanted?

Note any emerging issues or surprises. Discuss these after the presentations.
Session 2: Preparing Data for Data Analysis...............................................................60 minutes

Step 1: Activity - Differences between quantitative and qualitative data

A) Start this session by explaining what the difference is between qualitative and quantitative data:

- Quantitative research is mostly interested in measurement and quantification of data. The data is in the form of numbers.
- Qualitative research differs in that it is usually more interested in the experiences of people and their actions in the context of the lives they lead. The data is in the form of words and stories.

B) Point out that qualitative data is usually obtained through:

- open-ended questions
- loosely structured interviews
- focus group discussions
- observations.

C) Explain that for both qualitative and quantitative data the data first needs to be sorted into categories then summarized and then interpreted. The next few activities will take the participants through a process of ordering, summarizing and interpreting both quantitative and qualitative data.

Session 3: Summarizing Qualitative and Quantitative Data.....................................60 minutes

TRAINER’S NOTE
Analysis of Data

- The next two sessions are optional. If the group is experienced in research they can probably go straight to Session 4.
- In our experience participants struggle with summarizing qualitative data and we, therefore, recommend that Session 2 is completed.

Step 1: Activity - Analysing qualitative data

A) Explain that qualitative data is recorded in narrative form and is often used to describe:

- certain procedures in greater depth;
- beliefs and knowledge related to health issues among the population.

B) This data is also well-suited for exploring the reasons for certain behaviour or the opinions of respondents on certain sensitive issues.

C) Remind participants that the first step in analysing data is the review of objectives for data collection. For qualitative data this is followed by classifying data based on the objectives of the study.
D) Distribute Handout 6.1 which gives examples of data collected from mothers, fathers and grandmothers on breastfeeding practices, beliefs, behaviour and knowledge. Explain to the participants that in this handout, data has been classified according to the objectives of the assessment, i.e. to identify knowledge, attitudes, beliefs and practices of different respondents on breastfeeding.

E) Distribute Handout 6.2. Go through the steps involved in summarizing the data. Explain that the responses of different groups are then summarized and displayed on a matrix sheet.

F) Draw the matrix on Handout 6.3 with only the top heading written in and ask the participants, in buzz groups, to complete the matrix. They have 15 minutes.

G) Distribute Handout 6.3 and go through the matrix.

Step 2: Activity - Analysing quantitative data

A) Explain to participants that when analysing quantitative data the first step is to order the data according to the objectives of the assessment. Examples of objectives are to:

- describe variables, for example the distribution of malnourished children in a certain population;
- look at the differences between groups, for example differences between mothers who breastfeed and those who do not;
- determine associations between variables, for example mother's level of education and length of breastfeeding.

B) Explain that these categories are then put on a master sheet. Distribute Handout 6.4 which gives an example of a master sheet. Go through the handout with the participants.

C) Break the group into groups of 5 and ask participants to display their data on a master sheet. Allow 30 minutes for this activity. Allow each group to give feedback.

Step 3: Activity - Summarizing quantitative data

A) Remind participants that after ordering the data the next step is to summarize the data.

B) Explain to participants that from the master sheet it is easy to count the numbers of different answers obtained.

C) Point out that there are several numerical measures that can be used to analyse data. These include:

- tallies
- percentages
- ratios
- frequencies
- ranges
- measures of central tendency (include the mean, median and the mode).

D) Break participants into groups of 4.
E) Distribute Handout 6.5. Using responses on Handout 6.4 ask the group to compile the following:

- tallies
- percentages
- frequencies
- measures of central tendency.

F) Share their results in plenary and ensure that everybody is clear about the different terms.

**Session 4: Interpretation of the Results...................................................60 minutes**

**Step 1: Activity - Interpreting results**

A) Point out that once the data is presented it has to be interpreted and used to draw conclusions. Explain that interpretation of data depends on the objectives of the project.

B) Refer participants back to the Assessment Tool, Annex 1. This provides the key pieces of information that need to be identified from the analysis.

C) To reach this the participants must consider the data for each section in turn and decide what are some of the strengths and weaknesses of the programme. An important question that must be answered by the assessment concerns the sustainability of the programme.

D) Ask: “What do you understand by the term sustainability?” Have the cofacilitators write their responses on the flipchart. The following points should come out:

- Programme continuity or sustainability refers to the capacity of a programme to continue functioning, supported by its own resources (human, financial, material) after external sources have ended.

- The programme is able to continue its activities and meet its objectives year after year, to make plans for the future and fulfil those plans despite changes in the outside environment.

- The programme can develop diversified financial support so that its existence is not threatened by the loss of a single funding source.

E) Explain to participants that sustainability has become a priority of government agencies, private organizations and donors, all of which are seeking to establish a solid foundation for the future. There are three components of organizational sustainability:

- a stable organization;
- a clear demand for the services provided by the organization;
- the ability to exert greater control over resources.

Distribute Handout 6.6 How to Make Your Organization Sustainable and go through it with participants. Answer any questions they may have.

F) Put up three cards with the following headings:

- programmatic/institutional sustainability;
- financial sustainability;
- political sustainability.
Explain that these are three key issues to consider for programme sustainability and that without any one of the three, no programme can succeed.

Divide participants into three groups and assign one type of sustainability to each group. Tell the groups to brainstorm a list of inputs that lead to either programme, financial or political sustainability. The following responses should be mentioned:

Programmatic/institutional sustainability:
• community participation in the planning, implementation, monitoring and evaluation processes;
• community recognition of real need;
• technically competent staff;
• good management systems (including monitoring and evaluation);
• appropriate interventions that have been properly phased in;
• appropriate programme linkages;
• commitment to achieve the goal and objectives of the programme.

Financial sustainability
• varied funding sources;
• budget within the reach of the community;
• revolving funding;
• donations in kind;
• subsidized services.

Political sustainability
• politically feasible;
• support of community leaders;
• enabling/conducive macroenvironment;
• political goodwill.

G) In the same three groups, assign one of the components of sustainability to each group and ask: “What does the data that has been captured and analysed tell you about each of the three components of sustainability for the CBNP?”

H) To assist them suggest that they conduct a SWOC analysis and take them through the following steps:

- On a large board or wall, draw the following blank table:

<table>
<thead>
<tr>
<th>Strengths</th>
<th>Weaknesses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Opportunities</td>
<td>Constraints</td>
</tr>
</tbody>
</table>

On a flipchart, write the words Strengths, Weaknesses, Opportunities and Constraints at the top of four pages (one on each page).
Starting with Strengths, ask each group to identify the strengths of the assessment section under discussion, for example: “What are the main strengths for the financial sustainability of the programme?”

You should allow a minimum of 30 minutes for this part of the process. Allow more time if you observe that individuals/groups are still adding items to their list.

Working with the whole Assessment Team, list all identified strengths on the relevant page of the flipchart. Through discussion, narrow down the list by crossing out repeated items, dropping those that the Team decides are inappropriate, and combining others that are similar. Try to make sure that all members of the Team contribute to the discussion. When the list is final, transfer the agreed items to the blank table prepared (see above).

Repeat the process in order to identify strengths and then weaknesses for the other two components of sustainability. The results of the SWOC analyses will form an excellent basis for decisions on what actions are needed to improve your programme.

After the discussions, redistribute the participants into three new groups and ask: “What are some of the strategies that could be used to achieve sustainability for your component?” To assist them, distribute Handout 6.7 Strategies for Sustainability.

Allow 30 minutes and discuss in plenary. When discussing possible opportunities, you should consider circumstances or potential factors that could be exploited so as to improve the impact or sustainability or cost-effectiveness of the programme you are assessing. Here are some examples of opportunities:
- Planned decentralization or the establishment of municipal development committees can be exploited to strengthen community-based activities.
- A new agricultural production programme could be used to improve food security in your programme’s catchment area, or to provide technical expertise to community-based activities.
- Your government is revising its human resource development programme.

For each of these opportunities the groups should be encouraged to think of the possible constraints and then to formulate strategies that would overcome these possible constraints.

Conclude this session by clarifying any points about programmatic/institutional, financial or political sustainability.

Session 5: Writing of a Research Report

Step 1: Activity - Thinking about the reader of the report

A) Explain to the participants that one important aspect of research is disseminating the results, and that results can be disseminated through a written report. Explain that before a report is written it is important to know the following:

Who is the reader?
Why does she or he want to read the research report?
B) Ask participants to brainstorm in buzz groups what questions should be answered by a written research report? The following points should be raised:

- Why did you start doing the research?
- What did you do?
- What did you find out?
- What does it mean?

C) Explain that the participants should bear in mind that the reader is:

- short of time
- has many other things to attend to
- probably less familiar with the research topic.

D) Put up Transparency 6.1 Rules of Report Writing and go through the rules with the participants. Distribute Handout 6.8 General Points on Writing a Report.

**Step 2: Activity - A closer look at the different components of a report**

A) Ask participants to think about what the components of a research report should be.

B) Write their responses on a flipchart. Put up Transparency 6.2 Main Components of a Research Report and go through the components of a research report.

C) Break the participants into their data collection groups and ask them to analyse, interpret and write a short report on the data they have collected during their field work.

- Allow participants 120 minutes for the activity.

D) Share some of their presentations in plenary.
Analysing Qualitative Data

Responses from Mothers on Knowledge, Attitudes, Beliefs and Practices on Breastfeeding

- In our village every new-born is breastfed.
- When mothers go to work, they leave their babies with other relatives, who then feed them with a thin cereal-based gruel.
- Working mothers have to go back to work as soon as they are feeling better, because they do not get paid for maternity leave.
- The age of introduction to new foods varies, it ranges from birth to about seven months, because there are different reasons why babies are given other food besides breastmilk.

Responses from Fathers on Knowledge, Attitudes, Beliefs and Practices on Breastfeeding

- Traditionally children are given breastmilk immediately after birth.
- Due to several reasons some children have to be bottle-fed.
- The most common reason for bottle-feeding is that girls have children while they are still young and they have to leave the babies with their parents to go back to school.
- We do not think it would be appropriate for another mother from the community to breastfeed other parents’ babies. It is just not done, it is against our culture.
- We can afford to buy infant formula, so we do not understand why children should not be bottle-fed.

Responses from Grandmothers on Knowledge, Attitudes, Beliefs and Practices on Breastfeeding

- We would like to see all infants being breastfed, but the modern way of doing things does not allow this.
- We do look after the babies and feed them when their mothers are not around.
- The mothers sometimes have their own engagements to attend to, hence they have to leave the babies under our care, such as:
  - leaving to seek for work in the cities
  - returning to school
  - visiting their own parents
  - visiting their husbands at work, in the cities.

Summary of Qualitative Data

With qualitative information it is not possible to perform complex statistical analyses, because the data is descriptive (words not numbers).

However statistical frequencies can be used to itemize some of the characteristics of the groups studied and beliefs, knowledge, attitudes and behaviour. Tabulations can also be used; an example is given below on examining behaviour and knowledge of breastfeeding by different groups within the community.

Handout 6.1 gives the information collected from fathers, mothers and grandmothers on knowledge, attitudes, perceptions and behaviour on breastfeeding.
The information on Handout 6.1 can be categorized and summarized in a table as shown in the following steps:

- classify the three groups.
- categorize their responses as follows:
  - age of introduction of fluids (other than breastmilk);
  - reason for not breastfeeding;
- analyse for behaviour on breastfeeding by categorizing the responses.

### HANDOUT 6.3

**Summary Matrix on Responses on Knowledge, Attitudes, Beliefs and Practices on Breastfeeding**

<table>
<thead>
<tr>
<th>Caregivers interviewed</th>
<th>Age of introduction of fluids (other than breastmilk)</th>
<th>Reasons for not breastfeeding</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mothers (6)</td>
<td>As soon as the mother feels ready to work</td>
<td>Mothers either to go back to school or seek employment</td>
</tr>
<tr>
<td>Fathers (4)</td>
<td>Immediately after birth</td>
<td>We can afford to buy infant formula, so we do not understand why children should not be bottle-fed</td>
</tr>
</tbody>
</table>
| Grandmothers (30)     | Soon after birth                                      | • leaving to seek for work in the cities  
                        |                                                                       | • returning to school  
                        |                                                                       | • visiting their own parents  
                        |                                                                       | • visiting their husbands at work in the cities |
## Example of a Master Sheet

<table>
<thead>
<tr>
<th>Respondent number</th>
<th>Q1: age in months</th>
<th>Q2: sex</th>
<th>Q3: breastfed</th>
<th>Age in months when solids introduced</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>M</td>
<td>F</td>
<td>Yes</td>
</tr>
<tr>
<td>1</td>
<td>7</td>
<td>x</td>
<td>x</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>3</td>
<td></td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>3</td>
<td>6</td>
<td></td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>4</td>
<td>3</td>
<td></td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>5</td>
<td>10</td>
<td></td>
<td>x</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>2</td>
<td></td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>7</td>
<td>4</td>
<td></td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>8</td>
<td>3</td>
<td></td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>9</td>
<td>7</td>
<td></td>
<td>x</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>9</td>
<td></td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>11</td>
<td>4</td>
<td></td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>12</td>
<td>3</td>
<td></td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>13</td>
<td>1</td>
<td></td>
<td>x</td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>9</td>
<td></td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>15</td>
<td>14</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>6</td>
<td></td>
<td>x</td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>8</td>
<td></td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>18</td>
<td>7</td>
<td></td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>19</td>
<td>12</td>
<td></td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>20</td>
<td>3</td>
<td></td>
<td>x</td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td>8</td>
<td>6</td>
<td>6</td>
</tr>
</tbody>
</table>
Examples of Tallies, Ranges, Percentages, Ratios, Rates, Frequencies, Tables and Measures of Central Tendency

Question: Did the mother breastfeed her youngest child?

Responses:
- Yes
- No
- Don't know

Tallies

Definition of tally: the act of counting

Ranges

A range is a statistical measure of the dispersion of observation values in a data set, determined by taking the difference between the largest and the smallest observed value.

Percentages

A percentage means part of something in relation to its total, which is normally taken to mean 100 (or 100 percent).

Calculating a percentage: Divide the number of people or things in a group by the total number in that group and multiply by 100, an example is given below.

Percent of mothers who breastfed:

Total number of responses from caregivers = 20
Total number of mothers who breastfed their children = 8
Therefore, percentage of mothers who are breastfeeding their children = 8/20 x 100 = 40 percent
Ratios

A ratio is a numerical expression which indicates the relationship in quantity, amount or size between two or more parts. Ask the participants to look at Handout 6.4 Example of a Master Sheet, and determine the ratio of males to females.

The answer is 8 males to 12 females
Ratio = 2 : 3

Rates

Rate refers to the frequency of occurrence of an event (usually expressed with respect to time or some other known standard). A rate is estimated by taking the number of events in a given period and dividing it by the population at risk during that period.

Frequencies

Preparing frequencies: frequency tables are usually arranged from a large quantity of numbers. The frequency tables can be arranged by undertaking the following steps:

1. Organize your numbers into groups (include the whole range of numbers from the smallest to the largest).

Example: the age of children (in months) included in the survey

<table>
<thead>
<tr>
<th>Age in months</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-4</td>
<td>9</td>
<td>45</td>
</tr>
<tr>
<td>5-9</td>
<td>8</td>
<td>40</td>
</tr>
<tr>
<td>10-14</td>
<td>3</td>
<td>15</td>
</tr>
<tr>
<td>Total</td>
<td>20</td>
<td>100</td>
</tr>
</tbody>
</table>

2. All the groups should be of the same width (the groups should be equally wide to allow for comparison).
3. Avoid overlaps (each number should belong to one group).
4. Record numbers using selected groups (record and count the number of children in each group).
5. Add and check the results obtained (the total number should be similar to the number of observations or interviews done).
6. Display the results into a frequency table or distribution, with a title describing the contents.
Tables

Preparing tables: both words and numbers can be presented in tables. For example, number of clients who attended maternal and child health services in the five years can be presented as follows:

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Growth monitoring</td>
<td>120</td>
<td>156</td>
<td>200</td>
<td>198</td>
<td>220</td>
<td>894</td>
</tr>
<tr>
<td>Immunizations</td>
<td>320</td>
<td>450</td>
<td>580</td>
<td>600</td>
<td>720</td>
<td>2,670</td>
</tr>
<tr>
<td>Antenatal care</td>
<td>150</td>
<td>330</td>
<td>320</td>
<td>500</td>
<td>536</td>
<td>1,836</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>590</td>
<td>936</td>
<td>1,100</td>
<td>1,298</td>
<td>1,476</td>
<td>5,400</td>
</tr>
</tbody>
</table>

Source: Compiled by the main author from various sources.

Points to remember when presenting tables:

1. Each table should have a full title that explains the contents (who; what; when; where). Use capital letters for the word TABLE, then give it a number.
2. Give clear, full labelling. Use capital letters for headings in boxes and at the beginning of important words.
3. Titles and labels should be outside the frame or box which surrounds the information.
4. Provide a key to explain symbols.
5. List the information source, such as where, when, how and by whom was the information obtained, so that reference can be made in case further information is required.
6. Provide footnotes where necessary for additional comments.
7. Accompanying text must describe and discuss the key results.
8. Using asterisks can help to highlight important results.

Measures of Central Tendency

Explain to the participants that the measures of central tendency include the mean, median, and the mode. Explain that the mean is widely used and that it contains more information because the value of each observation is considered in its calculation. The mean, median and mode are the measures of central tendency, used for analysing quantitative data.

Mean

The mean is usually referred to as an average. It is the sum of group measurements divided by the total number of these measurements. It is usually near the middle of all the measurements or numbers being studied and can be calculated as follows:

Example of calculating the mean:
For ten children attending a growth monitoring clinic in one session, their ages in months were:
5, 7, 5, 3, 6, 8, 6, 4, 4, 2. The mean age of these children is:
Number of children = 10
Sum of their ages = 50
Therefore, the mean age is = 50/10 = 5 months
Median
The median is the value that divides a distribution into two equal halves. The median is useful when some measurements are much bigger or much smaller than the rest. To obtain a median, do the following:

- List all the observations (from the lowest to the biggest).
- Count the numbers of the observations (n).
- The median value is the value belonging to the observation number (n+1)/2.

For example the median for the following numbers:
5, 7, 5, 3, 6, 8, 6
3, 5, 5, 6, 6, 7, 8
The median value belonging to the observation number:
(7 + 1)/ 2 = the fourth one, which is 6

Note: For even numbers divide the total number of observations by 2.

For example:
5, 7, 5, 3, 6, 8, 6, 4
3, 4, 5, 5, 6, 6, 7, 8
The median is 51/2.

Mode
The mode is the most frequently occurring value in a set of observations.

For example:
If the ages of 11 mothers attending antenatal care are:
21, 32, 20, 21, 34, 23, 21, 19, 23, 22, 21
[in ascending order 19, 20, 21, 21, 21, 21, 22, 23, 23, 32, 34]
The mode is 21.

HANDOUT 6.6

How to Make Your Organization Sustainable

Develop Organizational Stability
- articulate a clear mission;
- develop strong, innovative leadership;
- recruit and reward excellent staff;
- strengthen management systems at all levels;
- be responsive to changing environments and clients’ needs.

A Clear Demand for the Services Provided by the Organization
- understand client needs and how to meet them;
- provide high-quality services;
- market services effectively.

Achieve Greater Control Over Resources
- broaden the resource base;
- find ways to reduce costs;
- develop a mechanism that provides information on programme costs;
- plan and monitor expenditures;
- base decisions on actual programme results.
## HANDOUT 6.7

### Strategies for Sustainability

**Programmatic/Institutional Sustainability**
- develop a programme/institutional vision, mission and values;
- develop technical competency among the staff;
- develop programme/institutional monitoring and evaluation systems;
- conduct performance reviews;
- be flexible and adapt to the changing internal and external environment.

**Financial Sustainability**
- initiate income-generating projects, fund-raising campaigns, and other self-sustaining activities;
- solicit in-kind support from the community and other organizations;
- network and collaborate on similar interventions with other agencies;
- get programme support from other donors, the corporate and private sectors;
- provide technical assistance to other organizations;
- set up a fee for service system.

**Political Sustainability**
- advocate for community and government support for the programme;
- ensure community and government participation in all facets of the programme;
- network and collaborate with other agencies;
- form pressure/lobby groups for your programme;
- complement and supplement long-term policy issues;
- use the media to publicize programme activities.

## HANDOUT 6.8

### General Points on Writing a Report

There are some general points which you will find useful whatever the type of report you are writing and whatever the audience. These are listed below.

**Keep it short**
Very long reports tend to be used less than short ones. Who has time to read a long report?

**Keep it clear**
The report is supposed to be read and understood. Avoid very technical words and jargon. Use simple, clear and precise words wherever possible.

**Use short sentences**
Try to use not more than 20 words (and if possible fewer than 16) in each sentence. Use positive sentences. Do not put a lot of ideas in one sentence.

**Plan spacing and layout**
For a clearer layout, break up the text into short paragraphs to help the reader. Present only one idea in each paragraph.

**Use sub-headings**
These help people to remember what they read and make the report more interesting.
Emphasize key points
   Use larger letters, underline changes in type style and use stars (asterisks), dots, boxes, etc., to emphasize key points in the report.

Use a running commentary
   In a wide margin beside the main text of the report present the key points from the text in the form of a running commentary.

Use listing and checklists
   Information can be presented more concisely and absorbed more easily if it is presented in a list form. It also saves space and the reader’s time.

Avoid long footnotes
   Present additional information or references very briefly. Try not to use footnotes.

Edit your report carefully
   If possible leave a day between completion of the report and its final editing. This will be very helpful as it will allow you to take a fresh look at it.

What the Report Needs to Contain

Front cover
   - Title, name and location of programme.
   - Names of those who carried out the evaluation.
   - Names of those with whom the programme is linked, such as ministries, agencies, etc.
   - Period covered by the report.
   - Date report completed.

Summary
   - A brief one or two-page overview of the report is useful for busy readers and those who wish to study it in more detail.
   - Explain the purpose of the evaluation; for whom it was carried out; how; where; when; major results; conclusions; recommendations.
   - Write the summary list last.
   - A question-and-answer style, or a specially designed diagram or table of the information, may be useful.

List of contents
   - A list of contents in clear, logical order will help the readers to find sections of special interest to them.

Background information
   - This puts the programme into perspective and shows its origin, objectives and evolution.
   - Explain briefly when, why and how a programme began, who was involved by type/age/group/training/number, etc.
   - Which were the priority objectives?
   - Which were the main activities and resources involved?
   - The length of this section will depend on the objectives of the report and the space available.
     Programme proposals, plans, reports, minutes of meetings, memos, etc., can be used to provide information.
   - Ensure this section does not overlap with other sections (for example, manpower and resources).
   - Different opinions may have to be ironed out or presented as they are.
Purpose of data collection methods chosen
- Explain the purpose of the data collection and state the intended audiences.
- Be clear about what it is not intended to do.
- Explain briefly the reasons for the particular evaluation plan and the methods used to obtain the information.
- Include samples of methods used where necessary (for instance, questionnaires and an appendix).
- Mention problems of manpower, finance, physical resources and political context (where appropriate). This can be drafted at the planning stage.

Outcome of using the methods
- Where and how were the evaluation methods developed and tested before use?
- How was the information collected and by whom, and which methods were used?
- How reliable and valid did they prove to be?
- Include any timetable or evaluation schedule in an appendix.
- Also mention unintended results, if appropriate.

Results of data collection and analysis
- After the analysis of the facts, figures and information collected, tables, graphs, test results, etc., can be prepared and included.
- You may also want to include typed examples from tape recordings, illustrations or photographs. These can often convey a particular point which cannot be expressed in any other form, for example numerically.
- Briefly describe the methods you used to analyse the information, either with the results or at the beginning of the section.

Conclusions: these may include the following
- To what extent have the programme objectives been achieved?
- Which aspects of the programme (such as planning, management, monitoring training, field activities, etc.) are strong, and which need to be strengthened?
- Have human and material programme resources been used efficiently?
- How has the programme changed with time?
- What are the financial costs and benefits?
- What predictions can be made for the short/long-term future of the programme?
- Most important of all, what effect or impact is the programme having?

Recommendations
- On the basis of your conclusions what course(s) of action are proposed?
- How are these to be implemented, by whom and when? List your recommendations.
- This may be the part of the report which some people read first. It may be the only part which they read. Identify the priority recommendations.
TRANSPARENCY 6.1

Rules of Report Writing

- Simple. Keep it short.
- Justify. Make no statement that is not based on facts.
- Quantify. Avoid "large", "small", instead say "almost 75 percent", "one in three", etc.
- Be precise and specific.
- Inform, not impress. Avoid exaggeration.
- Use short sentences.
- Aim to be clear, logical and systematic in your presentation.

TRANSPARENCY 6.2

Main Components of a Research Report

- Title or cover page.
- Executive summary.
- Acknowledgements (optional).
- Table of content.
- List of tables, figures (optional).

1. Introduction.
2. Objectives.
3. Methodology.
4. Findings and conclusion.
5. Discussion.
7. References.

Annexes (e.g. data collection tools, such as questionnaires, additional tables).