



Discussion Paper BRIEFS

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Discussion Paper 170

From Research to Program Design: Use of Formative Research in Haiti to Develop a Behavior Change Communication Program to Prevent Malnutrition

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Positive changes in child health and nutrition are manifested in many forms, including improved growth and development and reduced morbidity and mortality. Each child health outcome results from complex interactions between community, familial, and caregiver resources that, in turn, lay the ground for either optimal or poor caregiving behaviors.

Background: Purpose of Behavior Change Communication Programs

For children to grow normally, there are many parental caregiving behaviors related to food that are essential to ensuring adequate nutritional intake: obtaining and selecting foods that meet nutritional requirements, preparing them safely and in a form that is appropriate for the child's age, and feeding them in a manner that encourages adequate intake. To engage in these critical caregiving behaviors, parents need access to the foods their children require; fuel, water, and other materials to prepare and preserve these foods; and the time and energy to carry out the activities. They also need knowledge. These are essential underpinnings of nutrition and health-giving behaviors, and the prerequisites for child health and well-being. Because caregiving behaviors are the links between resources, knowledge, and child health, programs that seek to improve child health and nutrition must, by definition, change caregiving behaviors. Programs that aim to improve child outcomes by improving childcare behaviors are collectively referred to as behavior change communication (BCC) programs.

Purpose and Methodology of This Study

This paper summarizes findings from a formative research study conducted in Haiti to develop a BCC strategy to improve infant- and child-feeding practices and to reduce childhood malnutrition. It also

describes the tools developed to facilitate decision-making and effective use of formative research for program planning.

The study used formative research methods that included individual and group interviews, food rating exercises, and participatory recipe trials. The aims of the study were to

1. Study current infant- and young child-feeding practices in the Central Plateau of Haiti;
2. Identify individual, household, and community factors that may facilitate or constrain adoption of recommended behaviors; and
3. Use the information from the formative research to prioritize behaviors to be targeted and design an effective BCC strategy.

Results

The study revealed some nonoptimal infant and young child-feeding practices in this part of rural Haiti, such as low rates of exclusive breastfeeding, early introduction of nutrient-poor gruels, and the scarcity of nutrient-dense foods such as animal products in the diet. A number of constraints were also identified that may limit the ability of families to engage in optimal feeding practices. These include the early resumption of work outside the home by women, which is driven by economic necessity and results in frequent and sometimes

long separations of the mother from her young infant. The lack of time to prepare special complementary foods for the child, the perception that 12-month-old infants are ready to consume the family diet, and the low availability of micronutrient-rich foods (animal-source foods in particular) are additional constraints on poor families to achieving optimal child-feeding practices.

The “decision tool” developed, based on the formative research results, proved extremely useful, especially for identifying priority areas of intervention.

The data also highlighted some facilitating factors that could be used to design locally relevant and powerful communication messages. The few mothers who reported having exclusively breastfed their infants, for example, emphasized that this practice improved their infants' health and reduced healthcare costs. Similarly, the absence of cultural restrictions regarding feeding animal-source foods to infants and young children, and the knowledge among some mothers that these foods are good for children, are positive factors likely to facilitate behavior change related to these practices. The recipe trials also provided valuable insights regarding feasible, affordable, and acceptable recipes for enriched complementary foods that could be promoted through the BCC intervention.

Organization of Results into a "Decision Tool"

To simplify interpretation of the findings, we organized the information gathered into a *decision tool*. This tool consists of a matrix containing the following elements:

1. A goal to achieve,
2. Practices to promote to achieve this goal,
3. Current practices in the population studied,
4. Facilitating conditions for behavior change, and
5. Issues that may affect the capacity for behavior change (e.g., potential constraints).

A second, complementary matrix summarizes the constraints and facilitating factors identified for the

different practices and includes columns to identify programmatic options (either within or outside of the current program context) to alleviate some of these constraints or to optimize use of facilitating factors in promoting behavior change.

Conclusion

The use of formative research for program design proved extremely useful, especially for identifying priority areas of intervention. The decision tool developed in this study helped to structure the large amount of data gathered, and it allowed presentation of the information in a systematic, clear, and easy-to-grasp manner. The tool also proved valuable in discussions related to program planning, as it helped build consensus and set priorities for action in the short and long term.

In Haiti, the tool was used after World Vision's five-year program cycle had been established. This limited the flexibility of the program to design interventions that are outside of their current mandate. In the future, formative research and the type of decision tool developed in this study should be used to plan forthcoming program cycles. This would help ensure that constraints to behavior change are addressed through appropriate programmatic interventions, even if these may be outside of the usual scope of activity of the implementing agency.

Keywords: child-feeding practices, childhood malnutrition, caregiving behaviors, formative research, program design, Haiti

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