About USAID Advancing Nutrition

USAID Advancing Nutrition is the Agency’s flagship multi-sectoral nutrition project, led by JSI Research & Training Institute, Inc. (JSI), and a diverse group of experienced partners. Launched in September 2018, USAID Advancing Nutrition implements nutrition interventions across sectors and disciplines for USAID and its partners. The project’s multi-sectoral approach draws together global nutrition experience to design, implement, and evaluate programs that address the root causes of malnutrition. Committed to using a systems approach, USAID Advancing Nutrition strives to sustain positive outcomes by building local capacity, supporting behavior change, and strengthening the enabling environment to save lives, improve health, build resilience, increase economic productivity, and advance development.

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An overview of this module: The goals of this module are to learn about the behaviors prioritized from module 1, determine whether research is needed to fill any gaps in understanding that would limit or accelerate the uptake of the behaviors, and plan this research, if needed. In this module, you will review existing literature about the prioritized behaviors, looking for information about why they are or are not practiced. Then, you will outline key gaps to determine the extent of formative research needed, develop research questions, and select research methods.

Before you begin this module: Collect existing literature, including peer-reviewed articles and policy and program documents. It is important that these resources are context-specific; however, information on similar contexts may also be helpful.

The output of this module: Formative research plan
By the end of module 2, you will have a better understanding of the behaviors that you prioritized in module 1. The output is a research plan to guide your formative research, including questions and methods.

Steps in this module:
2.1 Review existing literature on priority behaviors to determine whether research is needed.
2.2 Design research questions and plan formative research.

2.3 Select formative research methods.

2.4 Complete the research plan.

BACKGROUND

After reviewing existing data, you may decide that additional research is needed to understand what people are willing and able to do in their context, who they need to support them in these actions, and how. This early research is called formative research because it is essential to “forming” or shaping the program activities. Formative research is a key part of understanding the context for complementary feeding and identifying local solutions to feeding challenges:

• The interplay between individuals, families, and the food environment means that there are many possible ways to achieve intended outcomes.

• Focusing the research on behaviors and factors (barriers and enablers that prevent or support practice of the behavior) and engaging caregivers and influencers in the research brings a human-centered approach to program development. This approach can evoke participant groups’ perspectives on the factors that prevent or support priority behaviors, their social networks, and systems as well as suggest needed modifications in products and services.

• Formative research can also reveal actions that other people need to do to overcome barriers.

There are many types and methods of research. Some types are needed to better define the behaviors, while others illuminate the factors that affect them and identify specific actions that people are willing and able to do. This module focuses on the latter—listening to the voices of those who will deliver or participate in the program so that it is designed to fit the context.
2.1 REVIEW EXISTING LITERATURE ON PRIORITY BEHAVIORS TO DETERMINE WHETHER RESEARCH IS NEEDED.

Start by reviewing existing research conducted in or near the program area as well as national policy and program documents, and interview expert informants to understand what is known about each priority behavior and the factors (barriers or enablers) that prevent or support each priority behavior. Factors fall across three levels, as seen in figure 1: structural, social, and internal. To get a complete picture, look at family and community systems, markets, services, and governmental and nongovernmental programs that affect complementary feeding. UNICEF’s Action Framework for Complementary Feeding (annex 2) maps the roles of food, health, WASH, and social protection systems in improving young children’s diets in the complementary feeding period (UNICEF 2020). Consider the following questions: What has been tried to improve young child feeding practices and with what results? Which sectors were involved? Why were some activities successful in changing practices while others were not?

![Figure 1. Factors That May Prevent or Support Complementary Feeding Behaviors]

**Structural**

Optimal complementary feeding practices may depend on the availability and accessibility of safe, affordable, and diverse foods.

- Do these foods have limited availability (seasonally or year-round)?
- Specifically, are animal-source foods or other foods that are high in micronutrients available?
- Do families have access to them?
- Do they have a place to safely store them for the lean seasons?
- Do families have access to tailored, age-specific counseling to help them solve problems related to recommended feeding practices?

**Social**

Complementary feeding behaviors are often highly influenced by household decision-making and power dynamics, gender roles, and women’s empowerment as well as cultural norms.

- Do caregivers want to share tasks?
- Would additional family support give caregivers more time to feed children?
- Are gender roles limiting which food is left for the children?
- Do cultural norms (e.g., certain foods will spoil children, children cannot digest certain foods, certain foods are not appropriate for children) limit feeding?
- Do parenting norms lead to appeasing children with highly processed, packaged foods?

**Internal**

Attitudes and beliefs can influence complementary feeding behaviors as well.

- Do attitudes or beliefs about being a parent motivate practices, such as seeking safe food for children?
- Do caregivers have the confidence to feed their child food of appropriate consistency based on age, or to feed a baby who is fussy and appears to be rejecting food?
- Do caregivers have the skills and time to prepare a diverse range of foods in an appropriate way for their children, and the skills and confidence to use responsive feeding?
When reviewing the literature, it is also important to identify who must support the practice of this behavior and what actions must they take. Similar to the factors, influencing actors can be described across three different levels: institutional, community, and household.

- Institutional-level influencers: policymakers, market actors, and health workers
- Community-level influencers: neighbors and leaders, both those in official positions and influencers
- Household influencers: family systems and individual members who need to support primary caregivers to feed children in a way that primary caregivers want. The specific actions that are needed and feasible depend on the social and cultural context. Support may include task sharing, providing inputs and resources, or social support (Martin et al. 2020). USAID Advancing Nutrition’s Program Guidance on Engaging Family Members in Improving Maternal and Child Nutrition (2020) includes recommendations for how to engage family members, starting with formative research and throughout the program.

Fill in the research table (worksheet 2.1 below) using data and research collected for each priority behavior. Descriptive data on behaviors, or what people do, are often available through literature and program reports. Also try to answer questions related to “why” people practice behaviors. For example, you may find in the literature that few caregivers feed their children diverse food each day. This is the “what”—as in what people do or not. But why? The “why” may be that caregivers do not feed children diverse food each day because they do not have access to these foods in the home or markets. But this still does not get to the root of the issue. Are the foods not accessible because of costs or because the local markets do not offer choices? Or because caregivers do not decide what food to purchase for the family? Or, if foods do become available, why do they now have access?

When filling in the research table, also ask “how” questions. Using the example above for “why” questions, this question could be: How could caregivers get better access to diverse foods? Or how could families shift to give women more decision-making ability around food purchases? You may find that some literature does not answer the “why” or the “how” questions. These are gaps to find answers for during formative research.

KEY CONSIDERATION. The article “Exploring the Influence of Social Norms on Complementary Feeding: A Scoping Review of Observational, Intervention, and Effectiveness Studies” by Kate Dickin et al. (2021) identifies a need for more programming to influence social norms that influence complementary feeding. The review highlighted social norms that can influence the complementary feeding behaviors; who is responsible for child feeding and parenting; and family and gender dynamics around complementary feeding. Norms centered around—

- what children are fed
- when and how are children fed
- frequency of feeding
- responsive feeding, interaction, and encouragement
- hygienic preparation of foods for children
- person responsible for child feeding
- food preparation and feeding roles
- decisions about child feeding, provision of food for households, and food allocation.

Consider which social norms influence the behaviors and how they are practiced when reviewing the literature and planning formative research.
KEY CONSIDERATION. People and their environments are ever changing. It is not a guarantee that once they adopt a behavior, they will maintain it. For the best chance of sustained behavior change, consider factors at the social (e.g. norms, gender dynamics) and structural levels (e.g. accessibility, service experience), not only internal knowledge and attitudes, to ensure the environment around them is shaped to support practice of the behavior.

Worksheet 2.1 Research Findings: Analysis of Factors

<table>
<thead>
<tr>
<th>Nutrition Behavior &amp; Steps:</th>
<th>Types of Factors*</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>What categories or types of barriers or enablers prevent or support practice of the behavior?</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Factors</th>
<th>Supporting Actors &amp; Actions</th>
</tr>
</thead>
<tbody>
<tr>
<td>What prevents people from—or supports people to—practice the behavior now?</td>
<td>Who needs to do what to address the factor?</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Structural</th>
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<tbody>
<tr>
<td>Accessibility</td>
</tr>
<tr>
<td>Provider competencies</td>
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<tr>
<td>Service experience</td>
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</tbody>
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<table>
<thead>
<tr>
<th>Social</th>
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</thead>
<tbody>
<tr>
<td>Family and community support</td>
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<tr>
<td>Gender</td>
</tr>
<tr>
<td>Norms</td>
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<table>
<thead>
<tr>
<th>Internal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attitudes and beliefs</td>
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<tr>
<td>Self-efficacy</td>
</tr>
<tr>
<td>Knowledge</td>
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<tr>
<td>Skills</td>
</tr>
</tbody>
</table>
By reviewing the completed tables, the project team can evaluate if there are research gaps that require formative research and whether additional stakeholders should be part of the process. Areas in the table that are blank, have incomplete information, or raise new questions after the desk review indicate gaps that require further information and need special attention during formative research, especially when you cannot adequately answer “why.”

If research on factors and supporting actors is not available or possible, the Global Nutrition Behavior Profiles may contain regional or global research you can use until learning from program implementation can be incorporated (The Manoff Group n.d. (a)).

If you decide to conduct formative research, continue with this module. While you may not need additional formative research on “why,” it is usually necessary to obtain family and community input through consultations or informal discussions to guide the strategy and then continue to module 3.

For example, UNICEF workshops engaged mothers to talk about how they feed their children and the challenges they face in providing high-quality nutrition. Specifically, mothers shared views on their access to and knowledge of food and nutrition and experiences and aspirations for their children’s, their own, and their family’s consumption practices. Published as a companion report to The State of the World’s Children 2019, the findings identify commonalities and divergences between mothers’ knowledge and experiences in different settings (Schmied et al. 2020).
2.2 DESIGN RESEARCH QUESTIONS AND PLAN

FORMATIVE RESEARCH.

One focus of the research, if needed, could be on gaps in understanding priority behaviors that you identified in module 1. If you were missing important data for prioritization, such as behavior prevalence, be sure to include research questions that will provide you with information about current behavior practices in your formative research plan.

Focus the research on factors that prevent or support the priority behaviors to understand the root causes of why people practice these behaviors, what improvements they would be willing to try, and how. Just like with the literature review, answering “why” and “how” questions with program participants helps you understand specifically how to refine priority behaviors and the factors preventing or supporting these behaviors that are key to improving that behavior. The Factors That Influence Multi-Sectoral Nutrition Behaviors tool summarizes factors from the research table and can be used to make sure the various types of factors are covered in the research questions. There are a few key considerations to take into account:

- **You may find you have more research questions than it is possible to answer given time and resource constraints.** Prioritize research questions by looking across the research tables you completed in module 2 for any major gaps across the different behaviors and levels of factors.

- **Be sure your questions take into account what you already know.** For example, if you are focused on getting caregivers to feed children animal-source foods, and you already know that fathers have the role of purchasing meat, fish, and eggs in markets, asking the question, “Why don’t mothers purchase eggs in markets?” will not provide you with any new information. Instead, you could ask, “Why don’t fathers purchase fish and eggs in markets?” or “Why don’t caregivers feed their children fish and eggs that fathers bring home from the market?”

- **Think about research questions by participant groups.** Be sure to separate each participant group into different segments. A segment is a group of people defined by characteristics that affect child feeding. The specific characteristics used to define segments are those that are expected to reflect differences in the priority behaviors, such as geographic area, rural versus urban residence, ethnicity, religion, age of child, gender of child, situation of family or child, etc. Often, geographic areas are the first unit for segmentation, such as different regions or rural and urban areas. Create more specific groupings within each of those units by the next level of segmentation, such as religion. See Designing by Dialogue pages 4.9–4.15 for guidance and examples of sampling frames (Dickin, Griffiths, and Piwoz 1997).
2.3 SELECT FORMATIVE RESEARCH METHODS.

There are a variety of methods to gather the information required to fill in the gaps as needed for sound programming decisions. Formative research can be qualitative, quantitative, or a mix of both:

• Qualitative in-depth interviews and focus group discussions can be helpful when you want to know why participants practice current behaviors and variations in the perspectives of different groups or individuals. These methods will be particularly helpful when looking at family systems, gender expectations, and norms and beliefs.

• Other methods, such as Trials of Improved Practices (TIPs) or recipe trials, engage participants and communities to identify and test specific local solutions and feasible behaviors, or what people are willing and able to do in their context.

• Quantitative surveys, dietary analysis, and market surveys can give you information on what behaviors are practiced, the nutritional adequacy of the child’s diet, and the availability and the costs of different foods, respectively.

Annex 3 and the Formative Research Decision Tree tool provide a complete list of the various types of research methods and their use and a guide for how to choose the appropriate methods for your research question.
2.4 COMPLETE THE RESEARCH PLAN.

*Worksheet 2.2 serves as a way to pull the various pieces of this module together. More detailed steps for planning and conducting research for complementary feeding can be found in The Basics: Planning for Formative Research for Infant and Young Child Feeding Practices (USAID IYCN Project 2011) and are outlined in annex 3.*

**Worksheet 2.2 Research Plan**

<table>
<thead>
<tr>
<th>Types of Information</th>
<th>Research Questions</th>
<th>Methods</th>
<th>People/Places to Include</th>
<th>Questions to Ask</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perceptions of childcare and feeding</td>
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<tr>
<td>Current behaviors</td>
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<td></td>
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<tr>
<td>Opportunities to improve behaviors</td>
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</table>

Use module 3 to analyze the research and translate the findings from the research into strategy.
ILLUSTRATIVE STORY:
MARYAM AND BRIAN DESIGN A COMPLEMENTARY FEEDING PROGRAM

Preparing for Research
Maryam and Brian begin module 2 by completing a research findings table for each priority behavior. They start with the behavior: “Caregivers use a variety of nutrient-rich foods each day in meals and snacks, with emphasis on children under 12 months.” Existing research in the program area shows that four factors prevent caregivers from doing this behavior, including lack of access to affordable or appropriate eggs, fish, or meat options for young children; lack of family support to prioritize food for children; beliefs about what children under 12 months should eat; and skills to prepare eggs, fish, and meat for children (completed worksheet).

Although the existing research suggests some reasons why caregivers do not feed animal-source food to children, especially those under 12 months of age, Maryam and Brian see from the table that there are still gaps. What would caregivers be willing to do? What could family members do to support caregivers? What could market vendors do to increase access?

In preparation for the formative research, Maryam and Brian face some resistance because team members do not see the value and feel that if they just tell caregivers to feed children animal-source food, it will be enough. They explain to the team that for behaviors to shift it is important to make sure caregivers have the opportunities, motivation, and skills needed—in addition to knowledge—to practice the behavior. The research will help them better understand these factors.

Maryam and Brian prepare the research plan, developing research questions and methods by asking themselves a series of questions. Existing data show that households have access to nutritious foods such as small fish and milk, but do not feed these to young children. The team sees that they need qualitative data to better understand why caregivers do not feed these foods to children, as well as what caregivers and influencers are able to change. They also see the need for a quantitative survey of markets to understand market availability of all types of nutritious food, at what prices, by season of the year.

In the research plan (see sample plan), they fill in the following information:

**Column 1.** Research Questions: What are the gaps in existing research? What do we need to know more about?

**Column 2.** People to Include: What actors should we include?

**Column 3.** Methods: What type of information is needed?

**Column 4.** Questions to Ask: To answer questions about “why” caregivers practice behaviors or not, they selected interviews as the research method. To answer questions about “what else?”, the team chose focus group discussions. Finally, to answer questions about “how” caregivers could try new behaviors, the team planned recipe trials.

With the research plan, the team also discusses sampling. Some team members ask for sampling caregivers in all of the districts in the program area. Maryam recommends sampling in a few districts that could represent other districts. This way, they could include caregivers of children at different ages for the interviews and recipe trials. The team looks for contextual similarities and differences across districts, including ethnicity, religion, livelihood, and proximity to markets among others. They see that livelihoods and proximity to markets could be the biggest differences among families in the program area, so select districts to represent these variables.
CHECKLIST

Did you:

☐ Determine whether formative research is needed based on existing data, by priority behavior?

If research is needed, did you:

☐ Plan research to fill gaps with age and context-specific considerations?
☐ Determine research questions and methods?
☐ Complete a research plan?
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