



FOOD AND
NUTRITION
TECHNICAL
ASSISTANCE

Final Workshop Report

Process for the Promotion of Child Feeding (*ProPAN*):

Methods and Tools to Develop Behaviour Change Strategies in Infant and Young Child Feeding

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Acronyms

AED	Academy for Educational Development
AIEPI AINM-C	Atención Integrada de las Enfermedades Prevalentes de la Infancia y la Atención Integral de la Niñez y la Mujer en la Comunidad
AINM-C	Atención Integral de la Niñez y la Mujer en la Comunidad
BCC	Behavior Change and Communication
CBGP	Community-Based Growth Promotion
CD	Compact Disk
FANTA	Food and Nutrition Technical Assistance Project
IEC	Information, Education and Communication
IIN	Instituto de Investigación Nutricional
LQAS	Lot Quality Assurance Sampling
M & E	Monitoring and Evaluation
MCH/N	Maternal and Child Health and Nutrition
MSPAS	Ministerio de Salud Pública y Asistencia Social
NGO	Non-Governmental Organization
PAHO	Panamerican Health Organization
<i>Pro</i> PAN	Process for the Promotion of Child Feeding
PROSAN	Programa de Seguridad Alimentaria Nutricional
PVO	Private Voluntary Organization
TIPS	Trials of Improved Practices
UNICEF	United Nations Children's Fund
URC	University Research Corporation

USA	United States of America
USAID	United States Agency for International Development
WHO	World Health Organization

I. Executive Summary

The Process for the Promotion of Child Feeding (*ProPAN*) Workshop took place in Guatemala City, Guatemala from March 13 to 17, 2006. The overall purpose of the workshop was to train participants in the use of *ProPAN* in order to learn and apply methods in formative investigation and strategies in education and communication to improve results in behavior change among program beneficiaries. The lead facilitator for the workshop was Hilary Creed-Kanashiro of the Nutrition Research Institute of Peru. The workshop was co-facilitated by Elena Hurtado of USAID/URC/Calidad en Salud, Guatemala and Monica Woldt of FANTA/AED, with technical and logistical support from FANTA consultant Eugenia Saenz de Tejada. Funding for the workshop was provided by the United States Agency for International Development (USAID). Workshop participants included 28 health and nutrition advisors, health educators, program managers, nutritionists, health supervisors, and community facilitators from four Title II PVOs, as well as personnel from the Ministry of Health of Guatemala, and various organizations working in nutrition and food security in Guatemala (Annex 2).

The workshop was structured around the Process for the Promotion of Child Feeding (*ProPAN*) methodology developed by the Pan American Health Organization (PAHO), Emory Rollins School of Public Health (USA), the National Institute of Public Health of Mexico, and the Nutrition Research Institute of Peru. *ProPAN* describes the process for developing an appropriate behavior change and communication strategy in infant and young child feeding, providing its users with a step by step process for investigating nutritional and dietary problems and tools to design and evaluate interventions to address the identified problems. The workshop incorporated a combination of technical presentations, application of tools and concepts through small and large group sessions, presentation of working group results in plenary, participatory discussion, socio-dramas, and games to enhance participant comprehension and practical use of the various methods.

The workshop covered the agenda topics (Annex 1) as planned, including: behavior change theories, and participant experiences with behavior change in their personal life and work; guiding principles in complementary feeding and responsive feeding; description of ideal practices, actual practices, and gaps in knowledge on complementary feeding among the beneficiary population; formative research techniques for discovering actual practices and the “why” behind them; behavior analyses to prioritize practices to promote via determination of feasibility and impact; recipe trials; trials of improved practices; development of communication strategies; counseling; and monitoring and evaluation.

The workshop concluded with each Title II working groups presenting their plans for formative investigation, communication strategy, implementation, and monitoring and evaluation, and schedule of activities, with particular emphasis on successful activities incorporated from past experience and new activities based on the workshop results. In general the plans that were presented and the identified techniques to fill gaps in knowledge appeared to be well on track.

The final workshop evaluation demonstrated a high degree of satisfaction among workshop participants. Responses regarding participants' opinions about the workshop processes and facilitators were consistently marked as "Very Good" or "Good" and all respondents said that in general they were "Very Satisfied" with the workshop and that it was very relevant to their work.

Key successes of the workshop included:

- In-country workshop preparation time which allowed the external consultant an opportunity to meet with key stakeholders and the Title II Final Evaluation Team, which proved vital for fine-tuning of the final workshop program.
- Daily evaluations which allowed the facilitation team to clarify participant questions and resulted in the addition of some creative activities to enhance participant understanding.
- Organization of daily icebreakers and reviews of previous day's activities by participating organizations, which brought much fun and dynamics to the workshop, and also gave participant organizations a chance to reinforce key concepts with their peers via games and questions.
- The workshop content was ordered according to the modules outlined in the *ProPAN* manual and this proved very useful as a structure for the program and also as a guide that made logical sense to participants.
- *ProPan* matrices helped participants organize their thoughts and processes, leading to better comprehension of how all the pieces fit together.
- Working group were formed by institution or organization, but also, depending on the objective, formed by grouping individuals from different organizations in order to foster an atmosphere of openness and collaboration.
- The venue received much positive feedback, especially the excellent food for the breaks and lunches, and the special effort put into the decorations for each lunch.
- The final presentations were an important opportunity for the organizations to demonstrate their understanding of the various concepts, to make a first attempt at combining the concepts and methods into one coherent strategy, and to help them achieve an important step in the developing of their future work plans.

One limitation of the workshop was the lack of time to practice all techniques presented and include a field practice. The *ProPAN* training has been conducted in the past as a two week course, and in the future, if organizations are willing to allocate the time, it could be conducted as a two week course, including field practice.

One key recommendation is that institutions and organizations involved in the workshop be encouraged to work together and opportunities provided to share their experiences and results after they have conducted the formative investigations. This will help to standardize and coordinate interventions for better potential adoption of practices by the target populations.

II. Background

Child Health and Nutrition in Guatemala

Despite some progress made in the area of child health and nutrition in the past few decades, Guatemala still demonstrates a great need to improve the health situation for children. Malnutrition and illness are still serious problems for young children, and the combination of poverty, poor feeding practices, infections and various other socio-economic factors negatively influence child growth and mortality. Recent statistics show that infant mortality in Guatemala is 35 deaths per 1,000 live births,¹ and 49% of children less than 5 years of age are chronically malnourished (height-for-age Z-score < -2 SD), with rates among indigenous populations almost double that of non-indigenous (ladino) groups (69.5% vs. 35.7%). Twenty-two percent of children under five in Guatemala are underweight, and in some rural areas of Guatemala the percentage is 31%. Anemia is also a serious problem among children -- 26% of children 6-59 months of age are anemic.² Consequences of anemia include impaired cognitive development, and evidence also exists that it may result in reduced growth and increased morbidity.

Title II Development Assistance Programs

USAID and its Title II Cooperating Sponsors design and implement multisectoral development programs to address one or more components of food insecurity. These may include activities in health and nutrition; agriculture; infrastructure development; and income-generation. Maternal and Child Health and Nutrition programs are key to an integrated development approach. They address food utilization by populations to improve their health and nutrition status, with a focus on reducing malnutrition among young children and women in their childbearing years. Some MCH/N interventions include exclusive breastfeeding, appropriate complementary feeding, increased micronutrient consumption, and prevention and treatment of preventable childhood diseases. In Guatemala, one important strategy that incorporates these interventions and that has become the cornerstone of programming to prevent and treat child malnutrition is community-based growth promotion (CBGP). In Guatemala there are four Title II cooperating sponsors, CARE, CRS, Save the Children and SHARE. They all include an MCH/N component in their programs, and they all incorporate CBGP in their MCH/N strategies. The Guatemala Title II program benefits approximately 167,845 children less than three years of age and women of reproductive age in more than 1,209 communities in highly food insecure regions of Guatemala.

Community-Based Growth Promotion in Guatemala

CBGP involves collecting and using data on children's growth to enable families to make decisions to improve children's nutritional status using locally available resources.³ The strategy employs problem-solving methods, including 1) regular assessment of child

¹ UNICEF Information by Country, <http://www.unicef.org/infobycountry/index.html>, retrieved December 3, 2004.

² Guatemalan Ministry of Public Health, National Micronutrient Survey, 1996.

³ Promoting the Growth of Children: What Works" by Griffiths, Dickin and Favin, World Bank, 1996

growth, 2) decision-making and action needed for the child, 3) decision-making and action at the community and program level to integrate and target available services and resources in order to motivate and enhance actions in the household, and 4) follow-up/feedback on the effects of actions taken.⁴ An essential component of CBGP is improvements in behaviors to address inadequate feeding practices, which involves both participatory family education and individual counseling and negotiation. The Ministry of Health of Guatemala has adopted CBGP as a national level strategy to prevent child malnutrition.

FANTA Technical Assistance to the Guatemala Title II Program in MCH/N

In February of 2005, FANTA, the Guatemalan Ministry of Health, USAID/URC/Calidad en Salud, and the USAID Mission in Guatemala hosted a one-day workshop to consolidate the formation of a Title II working group in Guatemala, an activity which forms part of FANTA's scope of work for technical assistance to three countries in the region, Guatemala, Honduras and Nicaragua. The working group includes experts in maternal and child health and nutrition from various government and private, non-profit sectors, and specifically includes Cooperating Sponsors of the USAID P.L. 480 Title II Development Assistance Programs.

Through a series of working group meetings, FANTA guided the working group in the development of a work plan to improve implementation of the MCH/N component of the Title II program, focusing primarily on effective implementation of community-based growth promotion. The workshop described here is in response to needs outlined in the work plan, and specifically, needs related to improvement of the implementation of behavior change and communication strategies, and achieving behavior change objectives, within the MCH/N component of the Title II program.

The *ProPAN* workshop took place in Guatemala City, Guatemala from March 13 to 17, 2006. The workshop was sponsored collaboratively by the Food and Nutrition Technical Assistance (FANTA) Project of the Academy for Educational Development (AED) in Washington, DC and USAID/URC/Calidad en Salud, with funding provided by the United States Agency for International Development (USAID). Workshop participants included 28 health and nutrition advisors, health educators, program managers, nutritionists, health supervisors, and community facilitators from the four Title II PVOs, as well as personnel from the Ministry of Health of Guatemala, and various organizations working in nutrition and food security in Guatemala (Annex 2). The overall purpose of the workshop was to train participants in the use of *ProPAN* in order to learn and apply methods in formative investigation and strategies in education and communication to improve results in behavior change among program beneficiaries.

⁴ PVO-NGO Experiences with AIN-C in Honduras, Participatory Study, by Serpa and Joya de Suarez, CORE Group, Aug. 2003.

III. Methods

The lead facilitator for the workshop was Dr. Hilary Creed-Kanashiro, Senior Investigator of the Nutrition Research Institute of Peru. Co-facilitators included Elena Hurtado of USAID/URC/Calidad en Salud, Guatemala, and Monica Woldt of FANTA/AED, USA, with technical and logistical support from FANTA consultant Eugenia (Kena) Saenz de Tejada. The agenda for the workshop was developed by Dr. Creed-Kanashiro in close consultation with co-facilitators, USAID Mission staff and the Final Evaluation Team for the Title II Program, which had just concluded its activities.

The workshop agenda (Annex 1) was structured around the Process for the Promotion of Child Feeding (*ProPAN*) methodology developed by the Pan American Health Organization (PAHO), Emory Rollins School of Public Health (USA), the National Institute of Public Health of Mexico, and the Nutrition Research Institute of Peru. *ProPAN* describes the process for developing an appropriate behavior change and communication strategy in infant and young child feeding. It provides its users a step by step process for investigating nutritional and dietary problems and provides the tools to design and evaluate interventions to address the problems that have been identified. The *ProPAN* method was selected because of its comprehensive nature – it guides users through four modules on: 1) the use of quantitative and qualitative methods to identify nutrition and feeding problems, the practices behind them and the context in which they occur, 2) testing the acceptability and feasibility of potential practices, foods and food preparations through behavior and recipe trials, 3) design of an intervention plan including strategies, activities, materials and methods, and 4) development of a monitoring and evaluation plan including design of indicators and selection of evaluation design. The focus of this workshop was complementary feeding, as this is an area that has not been adequately addressed by various organizations and institutions within Guatemala, and requires specific attention in future interventions.

The workshop incorporated a combination of technical presentations, application of tools and concepts through small and large group sessions, presentation of working group results in plenary, participatory discussion, socio-dramas, and games to enhance participant comprehension and practical use of the various methods that were shared. Objectives of the workshop were reviewed daily, and linked to the various activities that had already been conducted or were planned for each day, in order to help participants clearly see where the workshop was in terms of its progress, and where it was headed.

Daily evaluations (Annex 5) provided participants with an opportunity to provide feedback on presentations and activities, as well as evaluate sessions that were most useful, issues that required more clarification, and any comments regarding the venue, logistics, coffee breaks and lunch, etc. The daily evaluations were used the following day to clarify participant questions via discussion and by adding new activities to improve understanding and use of tools. Various examples of the latter include: adding back to the program the exercise on the use of the “photo-projection” technique, adding an exercise on the use of “The Right Tool for the Job” to help participants link behavior change activities to key factors identified through the “Doer/Non-Doer Analysis”,

conducting a group exercise on the use of the monitoring and evaluation planning tool, and providing a summary tool for planning an IEC/ Behavior Change strategy.

Each day a participating organization took responsibility for presenting a summary of the previous day's activities, which was conducted via various types of interactive games, answering questions about the content of the prior day. This activity served to engage participants in temporary roles of facilitation, and helped workshop facilitators identify questions and areas for strengthening. In the future, it is recommended that the facilitation team quickly review the daily evaluations with the organization that will provide the summary the following day, in order to highlight questions that require clarification. The methods used for presenting the daily summaries were very creative and proved very useful.

In addition, each day one organization took responsibility for preparing ice-breaker exercises to keep the atmosphere of the workshop dynamic. Organizations again proved very creative in the various activities they used to engage participants and brought a great deal of energy, laughter and spirit to the event. This activity once again engaged participants as active facilitators and served to create cohesion among the participants.

Inputs necessary to tailor the workshop to the specific needs of the participants were received through meetings with USAID Mission staff, as well as members of the Title II Final Evaluation Team that had just completed their analysis of successes and areas for improvement in the Title II program. These inputs were most useful and considered an essential component to the success of the workshop. In particular, close communication with Dr. Judiann McNulty, the health and nutrition specialist on the Title II Final Evaluation Team, was very useful. Dr. McNulty emphasized findings in the following topics, which were also points of focus during the workshop:

1. Feeding practices, especially knowledge and promotion of foods rich in micronutrients (animal products and vegetables and fruits), production of the latter foods through the agricultural component of the Title II program, and the best selection/purchase of nutrient rich foods using available resources.
2. Feeding style and responsive feeding which are unaddressed in the projects to date.
3. Counseling techniques based on local barriers and motivators among child caretakers in order to improve early breastfeeding, exclusive breastfeeding and complementary feeding, as counseling on these topics has not been conducted effectively in the past.
4. Appropriate selection and prioritization of the behaviors to be changed and the age range of children for whom the behaviors are most critical. The latter needed to be revisited as the behaviors promoted in the past have been too general and not appropriately prioritized, and the critical age range for targeting infant and young child feeding practices has not been selected on the basis of a systematic review of the actual situation, hence resulting in inadequate impact on the prevalence of chronic malnutrition.

As mentioned above, the workshop content was discussed with USAID Mission staff, including Julia Maria Asturias, Dr. Baudilio Lopez and Dr. Fidel Arévalo. The conversation confirmed Dr. McNulty's priorities and concerns, and emphasized the urgent nature of the workshop given Guatemala's position as a country with one of the highest percentages of children under five years who are chronically stunted (height for age Z-score < -2 SD) in the world. During the meeting USAID Mission staff also emphasized the integration of project components: appropriate complementary feeding practices (MCH/N) with agricultural and animal production to improve food security; the need to build on counseling materials developed by the Ministry of Health for AIEPI-AINM-C and already used by the NGOs, and the need for coordination and standardization of approaches, methods and messages received at the community level by the different organizations. USAID Mission staff and the workshop facilitation team also discussed the prioritization of infant feeding practices and behaviors to be promoted, the need for recommendations and messages to be based on evidence (e.g. the WHO/PAHO guiding principles for complementary feeding) and the need for quality indicators for monitoring and evaluation.

Materials given to the participants during the workshop

All workshop participants were provided with a binder that contained the following materials,

- Workshop objectives
- Agenda
- PowerPoint presentations and handouts for each day
- Guiding Principles for Complementary Feeding of the Breastfed Child, PAHO/WHO and
- *ProPan*: Process for the Promotion of Child Feeding, PAHO, 2004.

A CD of all materials is also available upon request.

IV. Results and products

Objectives of the workshop

The principal objective of the workshop was to utilize *ProPAN* to learn and apply methods in formative investigation and develop strategies in education and communication to achieve improved results in behavior change in infant and young child feeding practices among program beneficiaries.

The specific objectives of the workshop included:

1. Update participants in complementary feeding, especially WHO's Guiding Principles in infant and young child feeding
2. Become familiar with the steps and methods to develop a behavior change strategy using *ProPAN*
3. Learn qualitative techniques and tools to diagnose the barriers and opportunities to practicing ideal behaviors among program beneficiaries
4. Utilize Trials of Improved Practices

5. Design interventions with a focus on behavior change
6. Become familiar with and improve communication techniques to achieve behavior change
7. Develop monitoring and evaluation indicators for a behavior change strategy
8. Estimate costs for developing and implementing a behavior change strategy
9. Create a framework for a plan with inputs, methods and steps necessary to develop a behavior change strategy in complementary feeding.

Expectations of participants

At the beginning of the workshop an exercise was conducted to evaluate how the participants' expectations for the workshop related to the proposed objectives. As part of a "getting to know one another" activity, participants paired up according to matching puzzle pieces, and shared general facts about each other, as well as their written workshop expectations. After sharing results with the rest of the group, each individual matched their expectations with the workshop objectives that had been taped on the walls of the meeting room. The vast majority, 95%, of the expectations could be matched with the stated workshop objectives. Those objectives for which there were most expectations were #3 related to learning qualitative techniques and tools to diagnose barriers and opportunities to practicing ideal behaviors (14 of 44), and #5 regarding the design of interventions with a focus on behavior change (9 of 44).

Behavior change: theories and participant experiences

Elena Hurtado of USAID/URC/Calidad en Salud started off this portion of the workshop with an exercise which gave participants the opportunity to interview one another about experiences in behavior change in their personal lives (Annex 3). Some examples shared by the participants included the desire to drive more slowly, and to reduce carbohydrate consumption in the daily diet. Together participants discussed motivating factors and individuals that influenced their decisions to make such behavior changes, the consequences that they expected if they followed through on the behavior change, and their success and barriers in maintaining the behavior. The activity helped participants reflect on the barriers and motivators to behavior change in their own lives, and was a useful segue to a review of theories in behavior change presented by Hilary Creed-Kanashiro.

Theories presented included the Health Belief Model, the Theory of Reasoned Action, the Social Cognitive Theory and Stages of Change Theory, and Fishbein's Integrated Model for Behavior Change, the latter which brings common points of various models together. The presentation was followed by a useful discussion of difficulties that the participants have experienced in behavior change in their work, including lack of thorough knowledge of the "problem" by both the population and service providers, lack of identification of tangible benefits to motivate change, lack of use of empowering methods, lack of inter-institutional coordination, lack of an overall behavior change strategy, poor management, lack of prioritized actions and no sharing of results among stakeholders. The participants reflected upon those aspects they tend to mention that "lay blame" on the beneficiary population, versus those that each organization has the power to change within itself.

Complementary feeding and responsive feeding

Following a brief presentation of the conceptual framework, structure, and methods of *ProPAN*, with a focus on its use in complementary feeding, Hilary Creed-Kanashiro led participants through a thorough review of WHO/PAHO's Guiding Principles for complementary feeding, including their scientific basis. Initially, the session began with the participant's description of a typical day's feeding pattern for a rural Guatemalan infant of 7 – 8 months of age. The typical feeding pattern for such a child starts with breastmilk, followed by coffee with pieces of bread, later a bit more breastmilk, then thin porridge (usually corn), tortilla with bean broth for lunch, and breast milk three more times before the child's day is over. As the workshop progressed, facilitators and participants alike referred to this example to compare ideal practices to actual practices, since it presents a scenario that the PVOs encounter daily in their work.

A good portion of time was then spent presenting and reinforcing the WHO/PAHO Guiding Principles for Complementary Feeding of the Breastfed Child, based in part on recommendations provided by the Title II Program evaluators to update and standardize participants in this area. Special emphasis was placed on prioritizing interventions for caregivers of infants less than one year of age in order to have a greater impact on levels of chronic malnutrition. Emphasis was also placed on local food sources rich in micronutrients and animal source foods. Specific concepts and practices were reinforced through a) a participatory demonstration of food consistency and an infant's gastric capacity, and b) a team competition for consolidating knowledge of micronutrient rich foods.

In addition, feeding styles and responsive feeding were addressed via a presentation on the topic, a Linkages/AED video on responsive feeding that had been filmed in Guatemala and Brazil, and discussion of the video. Reference was made to responsive feeding throughout the workshop given the lack of Title II program attention to this very important area.

Analysis of the current situation in intervention communities

A principal objective of the workshop was to assist participants in the development of behavior change strategies in complementary feeding for ongoing and future projects. The first step in the development of a behavior change strategy is to define current complementary feeding practices and compare them with ideal practices as presented in the previous session. The reasons why caregivers do what they do also needs to be understood in order to appropriately prioritize behaviors and formulate specific recommendation and messages to influence behavior change.

In order to facilitate this process of analyzing what program beneficiaries are actually doing and why, the workshop participants, grouped by institution, with Ministry of Health staff altering between forming a group and integrating with the other groups, began filling in 6 columns of Matrix 1, which can be found in Annex 4. The matrix lists each of the appropriate complementary feeding practices in the first column of "Ideal

practice”. The participants fill in the second column labeled “Actual or current practice” corresponding to each ideal practice, to the best of their ability. The next column of the matrix indicates the source of the information on actual practices, to evaluate its veracity. Gaps in information are described in the following column. In turn, the same process was followed for analyzing the reasons for these practices: what are the reasons why mothers do the current practices that they do, what is the source of this information and what further information is required to identify and understand the reasons more fully.

Two of the groups presented their matrices, both emphasizing the information needed in order to complete the matrix. The remaining groups offered their comments, but the general consensus was that each group had information that they needed to collect in order to fully complete the matrix and obtain a better understanding of actual practices and the “why” behind them.

Formative research (Module I of ProPAN)

The process of gathering data to complete the information required above is called formative research, or the collecting of information that gives “form” to an intervention in terms of behaviors and practices, the reasons for these behaviors and practices, and prioritization of behaviors to be recommended. Formative research also helps select the best channels and media to have the greatest impact on the adoption of appropriate practices by the target population.

Various formative research techniques and tools were presented and discussed. These included quantitative and qualitative methods: surveys, 24-hour recall of food intake of infants and young children, free listing of foods, market survey and best (nutrient) buy concept, exploration of perceived attributes of micronutrient rich foods, photo-projection, interviews, focus groups, observations and the Doer/Non-doer Analysis of the BEHAVE Framework developed by AED with funding from USAID. It was stressed that a mix of these methods can be used to elucidate the information required to learn of the actual practices and the reasons for these practices as well as the potential for change.

Exercises and socio dramas were used to observe and practice some of the techniques, especially the forms and instruments which were new to the participants. These included: attributes of foods using selected micronutrient rich foods, photo-projection using photos of young children to explore with caregivers their motivation, expectations and perceptions of “good” and “poor” feeding practices, and observation of a simulated feeding episode to observe feeding styles.

Monica Woldt walked participants through the background and philosophy of the Doer/Non-Doer Analysis, as well as the steps for using the technique, using as an example a Doer/Non-Doer survey on the behavior “eating breakfast” that had been completed by the participants on the first day of the workshop. Participants’ actual (anonymous) responses to the survey were used in a coding exercise, and the results of the survey were presented in both table and bar graph form to assist participants in visualizing the results, interpreting them, and applying them to potential project activities.

Following the review and application of formative research techniques, participants continued completing Matrix 1 in their organization-specific working groups, this time identifying the research techniques that they would use to fill in the gaps regarding the “what” and “why” behind actual behaviors of project beneficiaries (Annex 4). Next, the working groups focused on Matrix 2 (Annex 4) and the barriers and facilitators of behavior change for each of the listed ideal practices. This matrix was challenging to fill in given the formative investigations that each organization needs to complete. All four PVOs presented their matrices with their proposed activities, which took into consideration their acknowledged gaps in information. The matrices were considered very useful and will be fully completed by each organization once they have been able to apply their selected methods for information acquisition.

Behavior Analysis

Elena Hurtado presented tools that can be used to identify ideal behaviors with the greatest potential for adoption by program beneficiaries. The tools guides users in an analysis of ten criteria for feasibility of change: positive consequences, compatibility with knowledge, similarity of the actual behavior to the ideal behavior, costs related to the ideal behavior, complexity, frequency of the ideal behavior, duration of time the ideal behavior should be practiced, impact of the ideal behavior, and whether the ideal behavior is observable. Each criterion for an ideal behavior is scored according to a pre-defined scale and the total score for each behavior is compared to select those with the highest feasibility for change. Hilary Creed-Kanashiro presented a modified example of this behavior analysis technique for complementary feeding practices from Peru, graphing feasibility and impact of specific behaviors in order to select those with both the highest feasibility and the greatest impact on health/nutrition.

Recipe trials and trials of improved practices (Module II of ProPAN)

When participants have collected and analyzed the results of their formative investigations on perceived attributes, market surveys, local production, availability, cost, seasonality and acceptability of foods, they will have vital information to identify the potential micronutrient rich foods for promoting in their interventions. Participatory recipe trials with mothers and other caregivers give project staff ideas on beneficiary-determined ways to combine and prepare foods by modifying currently used preparations, through the addition of a nutritious ingredient, or finding new ways of combining different foods. Workshop participants reviewed the objectives, methodology, analysis and interpretation of the results of recipe trials via a simulated, participatory recipe trial session. Discussion included the application and use of this technique in the participants’ work context, specifically for the nutritional enhancement of current recipes, as well as its use as an intervention tool and group exercise with mothers to stimulate ideas for developing nutritionally enhanced food preparations for young children.

Trials of Improved Practices (TIPS) is the next logical step following recipe trials, and is designed to test the feasibility of adoption of recipes. Actually TIPS is used not only to test the feasibility of adopting recipes, but also adopting various ideal practices. TIPS is used to test practices with high potential impact, to help select the most acceptable practice where a few alternatives exist, and to be certain of the feasibility of a practice

before promoting it on a large scale. The TIPS methodology, application, and analysis of results from Peru were presented by Hilary Creed-Kanashiro, and examples of its use in Guatemala were shared by Elena Hurtado, as well as by Maritza Méndez de Oliva of the Ministry of Health of Guatemala, who presented a specific example of its use to test the acceptability of Vitacereal.

Health education approaches

Different approaches of health education, ranging from the most traditional, vertical “education” methods, to behavior change communication (BCC), to popular education were presented and critiqued. This stimulated discussion regarding the need to combine and integrate technical approaches such as BCC with aspects of community empowerment in order to achieve results that can be sustainable over time.

Communications strategy and plan (Module III of ProPAN)

Elena Hurtado presented the stages in the process of developing a communication strategy and shared various forms to facilitate this process (Annex 4). Four specific steps in the design of a communication strategy were presented: 1) Analysis of the situation (what is the problem, what factors affect it, and who is most affected – audiences), 2) Communication strategy (who should participate in the solution, what is the objective, what are the practices to be promoted, what messages will be given, how will they be communicated), 3) Execution plan (how will the strategy be carried out, what material, human and financial resources are necessary) and 4) Monitoring and Evaluation Plan (how will success be measured).

This was followed by a presentation by Monica Woldt on the selection of appropriate activities based on target audience, the specific behavior, and key factors that are found to influence the behavior through Doer/Non-Doer Analysis. A resource from the BEHAVE Framework called “The Right Tool for the Job”, which provides examples of activities that address identified benefits and barriers, was shared with participants. The tool provides a list and description/examples of various types of activities, and the determinants that are addressed via the activity. Participants had the opportunity to apply the tool through a group activity, in which they selected activities to promote the behavior that had been analyzed through the Doer/Non-Doer Survey. The exercise proved to be most illustrative and helpful to the participants.

Hilary Creed-Kanashiro rounded out the portion of the workshop on development of behavior change and communication strategies with a successful experience from Trujillo, Peru: *Improving Infant Nutrition through an Educational Intervention in the Health Services and the Community*. This project gave an example of how improved nutrition education and counseling at the health facility level in a peri-urban population of Peru led to improved feeding patterns and dietary intake and a reduced prevalence of chronic malnutrition among infants and young children less than 18 months of age. Numerous aspects of the intervention were noted and discussed as being specifically relevant to the participants. These included: the standardization of recommendations and messages among all health personnel, the selection of key messages including one referring to feeding style and another to nutrient rich foods, the importance of the

formative research and the behavior trials and behavior analysis to select priority recommendations, the necessity to focus on very young infants (5 – 7 months), the improved, simplified counseling by health personnel, the use of demonstrations and incorporation of group child development activities, and lastly, the fact that a “nutrition culture” was adopted by the entire health facility, and not only by specific nutrition agents within the health facility.

Individual counseling

One of the recommendations of the Title II Final Evaluation Team for the Title II PVOs was to strengthen the counseling skills of community health volunteers. There was particular concern that although individual counseling is one of the principal tools used in AIEPI AINM-C for behavior change in feeding practices, few improvements have been seen to date. The workshop allowed participants the opportunity to review counseling in light of behavior change theories, and reflect more deeply on the skills required for successful counseling at the community and health facility level.

The session began with a mime of a poor counseling scenario compared to a good counseling scenario. For this particular mime, particular emphasis was placed on observing non-verbal communication between the counselor and care-taker, and the feelings of the “mothers” or “caretakers” in each situation.

Subsequent topics presented and discussed during the session were: skills for listening and learning, skills for building confidence and giving support and skills for giving information. For each of these specific skill sets, participants analyzed short dialogues illustrating contrasting counseling styles, which were read by the participants themselves and discussed.⁵

Monitoring and evaluation (Module IV of ProPAN)

Monica Woldt led participants through the basic concepts of monitoring and evaluation (M&E) within the context of *ProPAN*. Key points included the need for a monitoring and evaluation plan to be designed before program implementation, and designed in a way to provide timely data to modify the program as needed throughout its implementation. The key steps to developing an M&E system are to: 1) specify the objectives of the program, 2) identify inputs, processes, products, effects and impacts of the program, which translates into resources, activities, results, behavior change at the population level and changes in well-being at the population level, and 3) design of the M&E system. The presentation also helped participants differentiate between monitoring and evaluation, and define the characteristics of a good indicator. A planning tool for developing the M&E system was presented (Annex 4) and the participants worked together with the facilitator to fill in the tool for one sample activity. Following, the participants started completing their monitoring and evaluation plans within their working groups.

Final presentations of the different Private Voluntary Organization (PVO) plans

⁵ The source of the pre-written dialogues was a WHO counselling course for complementary feeding.

The final objective of the workshop was to “create a framework for a plan with inputs, methods and steps necessary to develop a behavior change strategy in complementary feeding”. Workshop facilitators guided the working groups to present the following: plans for formative investigation, communication strategy, implementation plan, monitoring and evaluation plan, and schedule of activities, with particular emphasis on successful activities incorporated from past experience and new activities based on the workshop results.

The workshop concluded with a presentation by each Title II working group on the plans for the next stage of their projects. The workshop facilitators provided suggestions to each group, incorporating the emphases mentioned by the USAID Mission and the Title II Final Evaluation Team. The plans demonstrated to varying degrees the application of the processes and methodologies learned during the workshop. There were obvious limitations regarding the level of detail each team could present given the gaps in information they will need to fill using formative investigative techniques. However, in general the plans that were presented and the identified techniques to fill gaps in knowledge appeared to be well on track. The Ministry of Health of Guatemala requested that following the collection and analysis of the information from the formative investigations, there be a meeting to share the experiences and results of each team.

V. Workshop evaluations and participant comments

The results of the final workshop evaluation (Annex 6) demonstrated a high degree of satisfaction among workshop participants. Responses regarding participants’ opinions about the workshop processes and facilitators were consistently marked as “Very Good” or “Good” and all respondents indicated that they were “Very Satisfied” with the workshop.

A few comments from participants include:

Thanks to FANTA for providing PROSAN the opportunity to participate in this workshop, that has been so useful for the work we do. I want to thank the organizers, Monica and Kena, especially, for having brought an expert in this field, Hilary Creed-Kanashiro. She is an excellent facilitator!!!!

I want to take advantage of this opportunity to thank you for the invitation to the workshop. It was really magnificent. I believe that the workshop met everyone’s expectations and that is truly a great achievement.

The workshop was very interesting -- fabulous the form in which it was managed. It motivated us much, given the importance of this type of investigation for behavior change, not only in nutrition, but in other areas as well.

Excellent logistics: photocopies, resources, the hotel, the organization, and the ease with which facilitators made changes when they detected weaknesses.

Thank you for having facilitated the workshop. We have learned a lot. It is a great challenge to take this to our communities and implement what we have learned.

Our thanks and congratulations, the expectations (of the workshop) have been met. We need to have energy now to implement all that we have learned.

Bringing this theme to the table was very important in order to not lose it from our vision. Thank you.

May God bless you and thanks for sharing with us your experiences – both are a light for our people.

Participants mentioned the following as being most useful/what they liked most about the workshop (see Annex 6 for complete list):

- The progression of the program based on the workshop objectives and the combination of the theoretical and the practical.
- “The theme was very relevant for our food security program.”
- The integration of knowledge and information in order to develop the behavior change and communication plan.
- The techniques and tools for diagnostics, the formative investigation, and behavior change, etc.
- Sharing among organizations and the ample experience of the facilitators.
- “All the topics were interesting, although the most important for me was the one related to responsive feeding.”
- “The order in which the different themes were presented and the exercise to design the plan because it permitted us to order and unify all that we learned during the week.”

Participants were encouraged throughout the workshop to provide suggestions for improvement. Some suggestions for improvement that were included in the final evaluation are (please see Annex 6 for complete list):

- Standardize processes and indicators (across organizations)
- Include a field practice/follow-up
- At some point, present in more depth the application of strategies in behavior change.
- Perhaps more case studies, investigations or experiences.
- Strategies for more community impact.
- “I really liked the exercise that was done today (day 5) with the whole group (filling in the monitoring and evaluation matrix together as a group), it was very enriching, and could be applied in place of the small group exercises that were done on previous days.”
- Provide more bibliographic references and reading material.

- Do not assume that participants already know the topics that are presented, remember that the participants have come to learn.
- The synthesis or summary of each theme each day.

As a part of the final workshop evaluation participants also had an opportunity to suggest other things about behavior change, or topics in general, that they would like to learn more about in the future. Some responses included (see Annex 6 for all responses):

- The methodology LQAS.
- Epi Info.
- How to evaluate behavior change sustained over the long term.
- Focus more on social, economic, and political aspects in order to be able to conduct a more in depth diagnostic exercise.
- “Advances and changes in behavior change so we are always up to date.”
- More about monitoring and evaluation, anthropometry, and growth curves.
- “More experiences in the application of the methodology in our country, and experiences in the application of what was learned by the workshop participants.”
- How to measure satisfaction among mothers in terms of behavior change
- Investigative methods, distinct from formative research.

VI. Successes and limitations

Successes

1. In-country workshop preparation time

The external consultant had one week in-country prior to the workshop to meet with the complete facilitation team, various stakeholders, and the Title II Final Evaluation Team. This proved vital for fine-tuning of the final workshop program tailored to participant needs, as well as the needs of the USAID Mission in Guatemala.

2. Daily evaluations

The facilitation team reviewed the daily evaluations and comments of the participants and used these to clarify issues or follow up on questions the following day. This resulted in the addition of several creative activities to enhance participant understanding, such as the exercise to use the “Right Tool for the Job” from the BEHAVE Framework, during which teams were assigned a “consulting job” to assist PVOs in Guatemala to increase the percent of staff who ate breakfast before work, which was the topic of the Doer/Non-Doer Analysis survey. The activity allowed participants to use the data that had been collected and analyzed, and revealed a number of misunderstandings about the “Non-Doers” in the Doer/Non-Doer Analysis.

3. Participation by organizations

Participant organizations selected activities they would be in charge of during specific days of the workshop, namely, icebreakers and the review of the previous day’s activities. The organizations were very creative in their activities, and very enthused. This not only brought much fun and dynamics to the workshop, but also gave

participant organizations a chance to test the knowledge and understanding of their peers as they reviewed the past day's activities via games and questions.

4. Facilitation

The facilitation methods included a healthy combination of theory and practice which was well appreciated by the participants.

5. Content

The workshop content was ordered very logically according to the modules outlined in the *ProPAN* manual and this proved very useful as a structure for the program and also as a guide that made sense to participants. Participants felt that the inclusion of detailed information on current concepts of complementary feeding and responsive feeding was very beneficial. Also, the use of the Linkages video on responsive feeding that had been filmed in great part in Guatemala received many good reviews the first day of the workshop. The use of mixed media for the workshop was definitely advantageous and effective. In addition, the use of actual data collected from workshop participants made the Doer/Non-Doer Analysis particularly appealing to some participants, and in the words of one participant, provided something personally "tangible" they could identify with and making them feel "involved" in the process.

6. Matrices

The matrices, many from the *ProPan* manual, were useful to guide processes during the workshop, especially during the group work. They helped participants organize their thoughts, leading to better comprehension of how the information fit together.

7. Working groups

Working group were formed by institution or organization, but also, depending on the objective, formed by grouping individuals from different organizations in order to foster an atmosphere of openness and collaboration.

8. Final presentations

The final presentations were an important opportunity for the organizations to demonstrate their understanding of the various concepts and to make a first attempt at combining the concepts and methods into one coherent strategy. The presentations also helped participants achieve an important step in developing their future work plans.

9. Venue

The venue received much positive feedback, especially the excellent food for the breaks and lunches, and the special effort put into the decorations for each lunch.

Limitations

1. Time

For some of the components the facilitation team felt that it would have been convenient to have more time for the participants in order to practice the techniques.

For example it would have been helpful to have had practice of some of the new aspects discussed for counseling. Ideally all the techniques presented and discussed would have been accompanied by practice exercises, and in addition there would have been one or more field exercises, if more time had been allotted to the workshop. The *ProPAN* training has been conducted in the past as a two week course, and in the future, if organizations are willing to allocate the time, it could be conducted as a two week course, including field practice.

2. Air conditioning

The air-conditioning, either too high or non-existent, was a problem the hotel acknowledged. Attempts were made to adjust the system, and when contacted, the “Captain” in charge of the meeting rooms was very responsive, but this is one area the hotel will definitely need to work on in the future.

VII. Recommendations

This was an excellent opportunity for staff from the Ministry of Health and PVOs to work more closely in the development of formative investigations and project activities. The institutions and organizations involved in the workshop should be encouraged to continue to work together and opportunities should be provided to share their experiences and results after they have conducted the formative investigations. This will allow an opportunity to standardize and coordinate interventions for better potential adoption of practices by the target populations.

For future trainings of this nature each organization should encourage the participation of national level staff responsible for making central level decisions and planning, as this will enhance application in future programs. Facilitators are willing to provide guidance via internet to each PVO team in order to assure that workshop tools and methods are applied appropriately.

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Annex 1: Agenda (Translated)

**Process for the Promotion of Child Feeding (*ProPAN*):
Methods and Tools to Develop Strategies in Behavior Change in Infant and
Young Child Feeding**

Program, Guatemala, March 13-17, 2006

Monday, March 13

Time	Theme/Activity	Responsible party
8:00	Welcome and workshop inauguration	Julia Maria Asturias, USAID Monica Woldt, FANTA
8:30	Presentations and workshop expectations	Monica Woldt, FANTA Kena Saenz de Tejada, FANTA
9:20	Workshop objectives	Hilary Creed-Kanashiro, IIN Peru Elena Hurtado, Calidad en Salud
9:45	Announcements about the workshop structure	Monica Woldt, FANTA
10:00	<i>Break</i>	
10:15	Interviews of personal experiences in behavior change	Elena Hurtado, Calidad en Salud
11:00	Review of theories in behavior change	Hilary Creed-Kanashiro, IIN Peru Elena Hurtado, Calidad en Salud
11:30	Difficulties in behavior change in work with your beneficiary populations: discussion	Hilary Creed-Kanashiro, IIN Peru Elena Hurtado, Calidad en Salud Monica Woldt, FANTA
12:00	Conceptual Framework for <i>ProPAN</i>	Hilary Creed-Kanashiro, IIN Peru Elena Hurtado, Calidad en Salud
12:15	Typical day (food intake) for a 7-8 month old child	Hilary Creed-Kanashiro, IIN Peru
12:30	Where we are headed: Ideal practices in complementary feeding	Hilary Creed-Kanashiro, IIN Peru
13:00	<i>Lunch</i>	
14:00	Where we are headed: Ideal practices in complementary feeding (continuation)	Hilary Creed-Kanashiro, IIN Peru
14:30	Micronutrient rich foods: exercise	All
15:00	Where we are headed: Ideal practices in responsive feeding	Hilary Creed-Kanashiro, IIN Peru Elena Hurtado, Calidad en Salud
15:30	Care and Feeding Video, Linkages Project, and discussion	Monica Woldt, FANTA Kena Saenz de Tejada, FANTA Elena Hurtado, Calidad en Salud
16:00	Where we are and what we know: Analysis of the actual situation, information gaps about actual behaviors, and why people do what they do	All

16:50	Daily evaluation and short survey	Monica Woldt, FANTA
17:00	<i>Break</i>	

Tuesday, March 14

Time	Theme/Activity	Responsible party
8:00	Review of day one	CRS
8:15	Panorama of day two: objectives and activities	Monica Woldt, FANTA
8:30	Where we are and what we know: continued	All
9:30	Sharing our experiences	All
10:00	<i>Break</i>	
10:15	Review of activities in formative investigation in <i>ProPAN</i> : Techniques and tools to understand our beneficiary population Investigative tools 1: -Surveys -24-hour recalls -Free lists -Market surveys -Food attributes -Photo projection	Hilary Creed-Kanashiro, IIN Peru
11:15	Practice exercise with food attributes and photo projection	Hilary Creed-Kanashiro, IIN Peru
12:00	Investigative tools 2: -In-depth interviews -Focus groups -Observation	Elena Hurtado, Calidad en Salud
12:30	Reading, Module 1 of <i>ProPAN</i>	All
13:00	<i>Lunch</i>	
14:00	Doer/Non-Doer Analysis	Monica Woldt, FANTA
15:00	Activities to fill information gaps	All
16:00	Barriers and opportunities for change	All
16:45	Daily Evaluation	Monica Woldt, FANTA
17:00	<i>Break</i>	

Wednesday, March 15

Time	Theme/Activity	Responsible party
8:00	Review of day two	Participating institution
8:15	Panorama of day three: objectives and activities	Monica Woldt, FANTA
8:30	Sharing our experiences: How we are going to collect the data to fill information gaps	All
9:15	Analysis of behaviors: a) Criteria b) Experience in Peru	Elena Hurtado, Calidad en Salud Hilary Creed-Kanashiro, IIN Peru
10:00	<i>Break</i>	
10:15	Recipe trials	Hilary Creed-Kanashiro, IIN Peru
11:00	Trials of improved practices and experiences in Guatemala and Peru	Elena Hurtado, Calidad en Salud Ministry of Health of Guatemala Hilary Creed-Kanashiro, IIN Peru
12:30	Reading: Module 2 of <i>ProPAN</i>	All
13:00	<i>Lunch</i>	
14:00	Introduction to different foci in education and communication	Hilary Creed-Kanashiro, IIN Peru
14:30	Stages in the process of communication Design of a strategic communication plan -Audiences -Behaviors of emphasis -Analysis of behaviors -Objectives of communication	Elena Hurtado, Calidad en Salud
15:10	The right tool for the job (BEHAVE Framework)	Monica Woldt, FANTA
15:30	Operational plan in communication -Adaptation to the local situation -Schedule of activities -Budget and costs	Elena Hurtado, Calidad en Salud
16:50	Daily evaluation	Monica Woldt, FANTA
17:00	<i>Break</i>	

Thursday, March 16

Time	Theme/Activity	Responsible party
8:00	Review of day three	Participating Institution
8:15	Panorama of day four: objectives and activities	Monica Woldt, FANTA
8:30	Successful experiences, Peru	Hilary Creed-Kanashiro, IIN Peru
9:15	Introduction to counseling	Hilary Creed-Kanashiro, IIN Peru
10:00	<i>Break</i>	
10:15	Counseling	Hilary Creed-Kanashiro, IIN Peru Elena Hurtado, Calidad en Salud
13:00	<i>Lunch</i>	
14:00	Design of implementation plans	Elena Hurtado, Calidad en Salud All
16:00	Monitoring and evaluation plans	Monica Woldt, FANTA Hilary Creed-Kanashiro, IIN Peru
17:00	<i>Break</i>	

Friday, March 17

Time	Theme/Activity	Responsible party
8:00	Review of day four	Participating institution
8:15	Panorama of day five: objectives and activities	Monica Woldt, FANTA
8:30	Design of monitoring and evaluation plans	All
10:00	<i>Break</i>	
10:15	Preparation of final presentations	All
12:00	Presentations	All
13:00	<i>Lunch</i>	
14:00	Presentations	All
14:40	Evaluations	Monica Woldt, FANTA
15:00	Closing ceremony	Monica Woldt, FANTA Hilary Creed-Kanashiro, IIN Peru

Annex 2: List of Participants (Translated)



FOOD AND
NUTRITION
TECHNICAL
ASSISTANCE

Process for the Promotion of Child Feeding (ProPAN): Methods and Tools to Develop Strategies in Behavior Change in Infant and Young Child Feeding

PLACE AND DATE: Marriott Hotel, Guatemala City, March 13-17, 2006

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Annex 3: Individual interviews on personal experiences in behavior change (Translated)

Guatemala, March 2006

**Individual Interview
Personal Experiences in Behavior Change**

1. In the last year have you changed or tried to change a behavior or practice?

IF THE RESPONSE IS NEGATIVE, ASK:

Have you ever changed or tried to change a behavior?

2. What behavior did you change or try to change?

3. What motivated you to make, or try and make, the behavior change?

4. Where or how did you learn about this behavior change? (*source of information*)

5. How did you decide to change this behavior? Did someone influence your decision?

6. Do you recall the first time you practiced the new behavior? (*trial of new behavior*)

7. What things facilitated the change in behavior?

8. What things made the behavior change more difficult?

9. How long have you maintained the behavior change? Did you change your behavior completely or partially? Have you had a relapse or regression in the behavior change? How have you managed this?

10. Have you told other people about the change you have made? To whom? What have they said? (*advocacy*)

11. Have you experienced positive effects as a result of the change? Which ones? (*consequences*)

12. Can you summarize in a sentence the change and the principal benefit that you obtained from it?

Annex 4: Key matrices (Translated)

<u>Ideal practice: complementary feeding and responsive feeding</u>	Actual practice: What is done now?	Source of information	What information is missing?	Activities to obtain the information	Why do they do what they do?	Source of information	What information is missing?	Activities to obtain the information
All children are fed with the recommended number of meals of adequate consistency during the day: 6 – 8 months: 2 + 1 snack 9 – 12 months: 3 + 1 snack 12 – 23 months: 3 + 1 snack								
All children are fed with meat, viscera, fish, poultry or egg every day								
All children are fed with fruits and vegetables rich in vitamin A every day								

<p><u>Ideal practice: complementary feeding and responsive feeding</u> All children are fed with beans in pureed form and not just bean broth</p>	<p>Actual practice: What is done now?</p>	<p>Source of information</p>	<p>What information is missing?</p>	<p>Activities to obtain the information</p>	<p>Why do they do what they do?</p>	<p>Source of information</p>	<p>What information is missing?</p>	<p>Activities to obtain the information</p>
<p>All children be helped and motivated during feeding time in order that they eat until they are satisfied (responsive feeding)</p>								

Matrix 2

Actual practices, barriers, facilitators and implications for the intervention

For group work on Day 2
 First copy the column from “Actual practices” from Matrix 1.
 Second, fill in the columns regarding barriers and facilitators.

Ideal practice: <u>complimentary feeding</u> <u>and responsive feeding</u>	Actual practice: What is done now?	Barriers to change	Facilitators	Implications for the intervention, messages, activities, etc.
All children are breastfeed until 24 months of age				
All children initiate complementary feeding with semi-solid foods at six months of age				
All children receive an adequate amount of food at each meal				

Ideal practice: complimentary feeding and responsive feeding	Actual practice: What is done now?	Barriers to change	Facilitators	Implications for the intervention, messages, activities, etc.
<p>All children are fed with the recommended number of meals of adequate consistency during the day: 6 – 8 months: 2 + 1 snack 9 – 12 months: 3 + 1 snack 12 – 23 months: 3 + 1 snack</p>				
<p>All children are fed with meat, viscera, fish, poultry or egg every day</p>				
<p>All children are fed with fruits and vegetables rich in vitamin A every day</p>				

<u>Ideal practice:</u> <u>complimentary feeding</u> <u>and responsive feeding</u>	Actual practice: What is done now?	Barriers to change	Facilitators	Implications for the intervention, messages, activities, etc.
All children are fed with beans in pureed form and not just bean broth				
All children be helped and motivated during feeding time in order that they eat until they are satisfied (responsive feeding)				

Local Adaptation of IEC/BCC Strategies

Area: _____ District: _____ Community: _____
 IEC Strategy for: _____

IEC tactics that will be used	What will it be done for?	Who will do it?	With whom will it be done?	With what frequency will it be done?	Where will it be done?	How many times will it be done?	Training needed?	Material and financial resources
Advocacy, assembly, forum								
Mass media (community radio, etc)								
Interpersonal communication Counseling in health services								
Interpersonal communication Counseling in the community								
Interpersonal communication Group communication								
Support groups								
Campaign, fair or other special event								
Educational entertainment								

IEC/CC Workshop – Development of a Strategic Communication Plan
 PROEDUSA with technical assistance and funding from USAID/URC/Calidad en Salud

Implementation Schedule – IEC/BCC Strategy

TASK:

Make a list of the activities and define groups, organizations or responsible parties, and dates for initiation and termination.

Activity	Beginning date	End date	Responsible party
Finalizing IEC strategy			
Formative investigation			
Workshops for the adaptation of the strategy to needs of the group or organization			
Design of materials			
Technical review of materials			
Testing of materials			
Production of materials			
Distribution of materials			
Training for . . . in			
Development of forms for monitoring and evaluation			
Monitoring			
Evaluation - implementation - analysis - report			

IEC/CC Workshop – Development of a Strategic Communication Plan
PROEDUSA with technical assistance and funding from USAID/URC/Calidad en Salud

Budget – IEC/BCC Strategy

1. What are the levels of funding available for the strategy/project?
2. What are the levels of financing required for the strategy?
3. Where can financing be obtained?

TASK: Prepare a budget for the design, implementation, monitoring and evaluation of the strategy.

Entry	Cost	Number and or time	Total
ADMINISTRATION - Personnel - Team meetings - Communication - Materials			
FORMATIVE INVESTIGATION - Investigations/ interviewers - Forms - Transport - Per diems			
DEVELOPMENT OF MATERIALS - Sketch artist - Graphic designer - Photographer - Camera operator - Interlocutors - Taping session			
PRODUCTION AND REPRODUCTION OF MATERIALS - Printing - Taping/recording study	(unit cost of material	x number required)	
DISTRIBUCION DE MATERIALES - Launching event - Packaging - Transport - Courier			

Entry	Cost	Number and/or time	Total
TRAINING ACTIVITIES - Workshops - Study tours - Visits			
COMMUNITY ACTIVITIES - Meetings			
MONITORING AND EVALUATION - Base line survey - Supervising and monitoring visits - Final evaluation survey			

IEC/CC Workshop – Development of a Strategic Communication Plan
PROEDUSA with technical assistance and funding from USAID/URC/Calidad en Salud

Summary of the IEC/BCC Strategy

Audience	Behaviors to promote	Content/ Messages	Communication tactics and materials				Monitoring
			Mass media	Interpersonal communication group talks and individual	Counseling at vaccination posts	Alternative means	
Mothers of children less than 5 years of age							
Fathers, caretakers, and other family members							
Institutional health providers							
Community health providers							
Local radio owners and representatives							
Community: authorities, health leaders, health committees, organized groups							

IEC/CC Workshop – Development of a Strategic Communication Plan
 PROEDUSA with technical assistance and funding from USAID/URC/Calidad en Salud

Annex 5: Daily evaluation form (example) and final evaluation form (Translated)

Process for the Promotion of Child Feeding (*ProPAN*): Methods and Tools to Develop Strategies in Behavior Change in Infant and Young Child Feeding

Program, Guatemala, March 13-17, 2006

Evaluation of Day 1: Please indicate your level of satisfaction with each presentation or activity and offer your ideas for improvement.

A. Personal interview of experiences

Very dissatisfied 1	Somewhat dissatisfied 2	Neutral 3	Somewhat satisfied 4	Very satisfied 5
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Suggestions to improve this activity:

B. Review of theories of behaviour change

Very dissatisfied 1	Somewhat dissatisfied 2	Neutral 3	Somewhat satisfied 4	Very satisfied 5
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Suggestions to improve this activity:

C. Conceptual framework of *ProPAN*

Very dissatisfied 1	Somewhat dissatisfied 2	Neutral 3	Somewhat satisfied 4	Very satisfied 5
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Suggestions to improve this activity:

D. Ideal behaviours in complementary feeding

Very dissatisfied 1	Somewhat dissatisfied 2	Neutral 3	Somewhat satisfied 4	Very satisfied 5
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Suggestions to improve this activity:

E. Ideal behaviours in responsive feeding

Very dissatisfied 1	Somewhat dissatisfied 2	Neutral 3	Somewhat satisfied 4	Very satisfied 5
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Suggestions to improve this activity:

4. What did you find the most useful about today?

5. What is confusing or not clear?

6. Please add suggestions or recommendations about the venue, breaks, lunch, the workshop process, etc.

Process for the Promotion of Child Feeding (*ProPAN*): Methods and Tools to Develop Strategies in Behavior Change in Infant and Young Child Feeding

Program, Guatemala, March 13-17, 2006

1. Workshop processes and facilitation

Please mark with a check (✓) in the parentheses under the option that reflects your opinion about the workshop:

Very Bad (1)	Bad (2)	Good (3)	Very Good (4)
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a. Clarity of presentation of workshop objectives	[]	[]	[]	[]
b. Presentation of workshop (organized and interesting)	[]	[]	[]	[]
c. Relevance of theme to work	[]	[]	[]	[]
d. Sensitivity of facilitators to the needs of participants	[]	[]	[]	[]
e. Capacity of facilitators to encourage participation of workshop participants	[]	[]	[]	[]
f. Maintenance of workshop schedule	[]	[]	[]	[]
g. Coffee breaks and lunch	[]	[]	[]	[]
h. Workshop venue	[]	[]	[]	[]

3. In general, indicate your level of satisfaction with the workshop

- [] 1 Very dissatisfied
- [] 2 Somewhat dissatisfied
- [] 3 Somewhat satisfied
- [] 4 Very satisfied

4. What did you like most about the workshop?

5. What can be improved in the future?

6. What other things would you like to learn in the future about behavior change?

Thanks for your collaboration!

Reflection about the workshop

Letter to my Boss

Dear Boss:

It was an excellent idea for you to support me in my participation in this workshop because:

1. _____
2. _____
3. _____

Adapted from: Applying the BEHAVE Framework, A Workshop on Strategic Planning for Behavior Change, Facilitator's Guide, April 2004, downloadable at: <http://www.coregroup.org>

Annex 6: Final workshop evaluation results (Translated)

	# Responses “Very Bad”	# Responses “Bad”	# Responses “Good”	# Responses “Very good”
a. Clarity of presentation of workshop objectives	0	0	6	14
b. Presentation of workshop (organized and interesting)	0	0	3	17
c. Relevance of theme to work	0	0	5	15
d. Sensitivity of facilitators to the needs of participants	0	0	4	16
e. Capacity of facilitators to encourage participation of workshop participants	0	0	7	12
f. Maintenance of workshop schedule	0	0	8	12
g. Coffee breaks and lunch	0	0	1	18 (one response of “10”)
h. Workshop venue	0	0	1	19

In general, indicate your level of satisfaction with the workshop:

1. Very dissatisfied = 0
2. Somewhat dissatisfied = 0
3. Somewhat satisfied = 0
4. Very satisfied = 19 (one response of “10!”).

What did you like most about the workshop? (each mentioned once)

- The development of the program on the basis of the objectives and the combination of the theoretical and the practical.
- The theme was very relevant for our food security program.
- The forms and tools that were provided.
- Learning and getting to know various points of view, experiences of other organizations, etc and the energy (encouragement) of the facilitators.
- All of the participants had the same objective to help the most needy.
- The relevance of the theme to my work.
- The new investigative techniques.
- The integration of knowledge and information in order to develop the behavior change and communication plan.
- The whole workshop was excellent, but what I liked most was the “All of the Strategy” because it is applicable to our reality.
- The techniques and tools for diagnostics, the formative investigation, behavior change, etc.
- Sharing among organizations y the ample experience of the facilitators.
- The *ProPAN* methodology.
- All the topics were interesting, although the most important for me was the one related to responsive feeding.
- The topic of the workshop and the food and refreshments.
- The presentations by the experts.
- Behavior change
- The use of participatory methods and the richness of the techniques about behavior change included in *ProPAN*.
- Knowing the importance about density.
- The focus on behavior change with useful tools.
- The order of the different themes and the exercise to design the plan because it permitted us to order and unify all that we learned during the week.

What can be improved in the future? (each mentioned once)

- Standardize processes and indicators.
- Include a field practice.
- Follow-up.
- At some point, present in more depth the application of strategies in behavior change.
- Time, one week is much time.
- Present a real proposal.
- Perhaps more case studies, investigations or experiences.
- Share experiences in the implementation of the workshop content.
- Strategies for more community impact.
- I really liked the exercise that was done today (day 5) with the whole group (filling in the monitoring and evaluation matrix together as a group), it was very enriching, and could be applied in place of the group exercises that were done on previous days.
- Provide more bibliographic references and reading material.
- Establish a time limit for group presentations.

- Despite that it was very interesting, some people, especially those that work with the Ministry of Health, cannot participate 100% of the time during a workshop that is so long and extends for the whole day for a whole week. It occurs to me that perhaps we could negotiate hours in a future occasion.
- Do not assume that participants already know the topics that are presented, remember that the participants have come to learn.
- The synthesis or summary of each theme each day.

What other things would you like to learn in the future about behavior change? (each mentioned once, unless noted)

- The methodology LQAS (mentioned twice).
- This does not correspond to another workshop or learning exercise, but instead to applying the actual knowledge to a strategic program plan and to the institution.
- Behavior change in management
- Epi Info.
- Design of strategies including evaluation indicators for IEC.
- Focus on rights and responsibilities.
- How to evaluate how to sustain behavior change over the long term.
- Focus more on social, economic, and political aspects in order to be able to conduct a more in depth diagnostic exercise. Advances and changes in behavior change so we are always up to date.
- More about monitoring and evaluation, anthropometry, and growth curves.
- Successful experiences at the national and international levels.
- More experiences in the application of the methodology, better if it was in our country, and experiences in the application of what was learned by the workshop participants.
- Satisfaction among mothers in terms of behavior change, and how to measure this.
- IEC/BCC and *ProPAN*.
- I believe what was included in the workshop was very valuable. Perhaps it would have been worthwhile to include field practice.
- Investigative methods, distinct from formative research.
- Application at the level of attitudes of public service providers, mental health providers, and those in charge of health personnel at the various levels of service provision.
- Now that we have the theory, a practical workshop would help to fix our knowledge and develop our abilities.