

**Community perception on the Muktagacha
Pilot Nutrition Initiative of BRAC**

**Masuma Khatun
SM Ziauddin Hyder**

April 1996

**BRAC
Research and Evaluation Division
66, Mohakhali C/A, Dhaka-1212
Bangladesh**

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Executive summary

This study was carried out to determine community perception regarding food supplementation project of BRAC. Specifically three groups of population: supplemented mother and their elderly family member, mother of the supplemented children and the GC members. The study selected all three project area in Muctagacha thana under Mymensingh district. Information were collected through Focus Group Discussion (FGD) and In-depth interview using check list. For the propose of this study three FGD for GC member and three FGD for mothers of the supplemented children (one group for each area) and total of 15 supplemented mothers and their elder family member were randomly selected for in-depth interview.

Findings revealed that in all areas most of them were very much well aware of the propose of providing with food supplementation to those particular population during specific period of time (pregnancy and lactation) the common answers they cited were:

- “The mothers and children are supplemented because they weigh less than the required level and if the mother and child weigh less than the requirement they would get sick very often.”
- “The mothers need special care and extra food during pregnancy and lactation. it is needed for the well-being of both the mother and the infants. Otherwise they would have sick baby.”

All the mothers and their elder family members found to be very mobilized specially the husbands, they seemed to give special attention during this period. One of them has stated:

“Before I didn’t know that during pregnant and lactating period my wife needs extra foods which I know now because of BRAC. But I can hardly manage 3 times meals per day for all household members. I ask her to eat more leafy vegetable which is available at the backyard.”

Discussing with the mothers of the supplemented children revealed that the children like the food very much and their taste and preference has changed. For instance before introduction of this supplemental food to the children they were given only rice powder with molasses, but now they prefer to take mixture of rice, pulse (powder) and molasses with fresh soybean oil which is provided by the program to the children everyday. Even after graduating from this program, mothers had to prepare the food at home because the children ask for it. Not only the mothers of the supplemented children also the other mothers living in the community, to them this food was believed to be tasty and nutritious which attracted them to prepare the same food for their children even they were healthy. Although this project had brought about changes in food habit of the children but still it is a good change because this supplemental food is very nutritious, easily available non-perishable and easy to prepare.

Regarding GC members perception, majority of them expressed their concern about the monetary benefits they were getting out of the supplementary food preparation and distribution. Some of them even stated that their husband teases them because they don't get enough monetary benefit. According to them if they prepare food for five mothers in one day, that day they don't find the time to prepare food for their family and sometime their husband get angry. Still they would like to work hard if they could earn fair return out of it. Another study¹ also revealed, including opportunity cost for time - they (GC member) allocate for purchasing, preparation and distribution of supplemental food, they earn negative return. It was found that per packet return of food of mothers and the children were Tk. -1.50 and Tk. -1.80 respectively. In spite of time constrain, hard work and negligible cash benefits, according to them they really enjoy working for the program, because of their work poor mothers and the malnourished children get some food everyday and community people are getting influenced about the extra food and caring needed during pregnant and lactating period and for the sick children.

¹Assessment of supplemental foods in Muktagacha Pilot Nutrition Initiative of BRAC, July 1996.

INTRODUCTION

Background

BRAC has been operating a Pilot Nutrition Initiative in three areas of Muktagacha thana under Mymensingh district since 1993. The project primarily aims to improve nutritional status of women, adolescents and children under two years of age through providing nutritional awareness to the beneficiaries and also to the community as a whole. Food supplementation to the pregnant/lactating mothers, adolescent girls and children under two years of age is viewed, in addition to supply a part of the extra nutritional requirement, as a vehicle to communicating nutritional messages with the target beneficiaries. The project is being operated as an integral part of BRAC's on-going health and development intervention.

Like other development interventions of BRAC, the Nutrition Initiative was meant to increase the participation of the community in programme implementation, monitoring and evaluation. Perception of the service recipients on different programmatic activities indicates the level of their satisfaction and, thus, may be considered as an indicator to assess the success of the intervention. To date, no systematic assessment has so far been done on the perception of the community regarding the Pilot Nutrition Initiative. In order to gather some understanding on this issues, the Research and Evaluation Division (RED) of BRAC has undertaken an in-depth study in the three project areas of Muktagacha thana.

General Objective

This study was aimed to gather understanding on perception of both the service recipients and providers on the food supplementation project of BRAC's Pilot Nutrition Initiative.

Specific Objectives

Specifically, the study was aimed to investigate the perception on the food supplementation component of the Initiative of the:

1. currently enrolled pregnant and lactating mothers and their elder family members;
2. mothers of the currently supplemented children; and
3. Gram Committee (GC) members.

Definition of Terms

Gram Committee (GC) :

A village committee consists of 9-11 female members, selected from the members of the BRAC Village Organization (VO) who were interested to work voluntarily. Basically this committee was organized to assist the food supplementation program and there were a total 158 GCs in 158 villages under the project. GC members are the one who purchase, prepare and distribute the supplementary food to the beneficiaries with close supervision of the Shastho Karmi (SKs).

Target population (Beneficiaries) :

Three groups of population were targeted for this supplementation project which included pregnant/lactating mothers; adolescent girls and children under two years of age. Following criteria were used to select the target population :

1. BMI less than 18.5 of pregnant/lactating mothers.
2. All adolescent girls enrolled in BRAC schools in the program areas.
3. Children under two years of age:
 - Low birth weight babies were directly enrolled in the program at the age of 6 months;
 - children under 12 months of age who did not show a gain of 500 gm between three successive weighing; and
 - children aged 1-2 years who did not show a gain of 300 gm between four successive weighing.

Shastho Karmi (SK):

Village based married women with minimum of 8 years of schooling who are full-time paid workers of BRAC. There is one SK in each village and a total of 158 Sks are currently working as community health workers in the project area. The basic responsibilities of Sks are to look into the health and nutrition needs of the community specifically registration of new pregnancies, births, deaths, impart health and nutritional education and assisting the food supplementation program.

MATERIALS AND METHODS

Study Design

Study Area

This study was conducted in three areas of Muktagacha thana, such as, Paratangi, Chechua and Gaptali where the Pilot Nutrition Initiative was in operation.

Study Population

The study population included the GC members, pregnant/lactating mothers and mothers of the supplemented children who were enrolling in the supplementation program and their elderly family members.

Data Collection

A mixture of qualitative techniques such as focus group discussion (FGD), in-depth interview and informal discussion were used to gather the required data. Structure checklists were used to collect data using FGD and in-depth interview.

RESULTS

Perception of mothers, husbands and elderly family members regarding the food supplementation

In-depth interviews were conducted to investigate the mothers' and their elderly family members' perception on the food supplementation. They were asked the reasons for supplementing the mothers and children and how they felt about that. The most frequently reported comments of mothers, husbands and elderly family members are summarized below:

- “The mothers and children are supplemented because they *weigh less* than the required level.”
- “The mothers need special care and *extra food* during pregnancy and lactation. It is needed to enhance the level of well-being of both the mothers and infants. The mothers would give birth of sick baby if they are not given enough food.”
- “Both the mother and child would get sick very often if they weigh less than the required level.”
- “The supplementary food is good for brain development of the child.”
- “If a mother takes extra food during pregnancy and lactation she would have healthy and brilliant baby.”
- “During our time there was no system of feeding mothers by someone from outside the home, because enough fresh food was available for home consumption. Now, because of population increase and lack of money, we have too little food to continue three meals per day. So, the mother and baby become sick very often. The Moa supplied by BRAC is very good for both the baby and the mother.

Mother in law (76 yr. old)

- “Before I didn’t know that my wife needs extra food during pregnancy and lactation. I have known the fact from BRAC. But I can hardly manage 3 meals per day for all the household members. I ask her to eat more leafy vegetable which is available at the backyard.”

Husband

All the mothers and their husbands found to be very supportive to the programme except for one mother-in-law who was found very conservative about participating in the programme but interestingly the mother did everything in relation to programme participation without informing the mother-in-law. According to the mother “If she knows that I attend all the BRAC activities including taking Moa she will perhaps kick me out of the house although my husband supports me to do so .”

Comments of the mothers of the u-2 children

The mothers were asked why their children were given food and what do they feel about it. Majority of the mothers reported that:

- the food was good for the health and the children needed extra food supplied by the feeding centers (FCs) together with the food given at home because they were sick and were not growing up adequately for their age.
- The food was tasty and believed to be nutritious which attracted other mothers living in the community to prepare the same food for their children irrespective of the nutritional status.
- The mothers whose children had graduated from the project, if they could afford, prepared the same food because the children asked for it and the ingredients were available and the food was easy to prepare.

Some typical comments of the mothers

- “ We did not take proper amount of food while we were pregnant. Due to that reason we have sick (less weight and height for age) baby who need extra food and care (*adore*) at home. Otherwise, they would not grow properly. The supplementary food is good for our children’s health and they love to eat it everyday”.
- “Before we did not give importance of child feeding specially when the child was sick. Because of the BRAC programme we are now able to know whether the child is healthy or not by weighing them every month. If the child do not grow well, we try to give them nutritious food at home such as fresh soybean oil with rice and powder. Previously, we used to feed them only mixture of rice powder with molasses”.

Perception of the GC members.

A total of 3 Focus Group Discussions (FGDs) were conducted (one FGD in each area) to know the perception of the GC members regarding the food supplementation program. The GC members were asked about what did they feel about the daily activities in relation to the food supplementation program and the benefits they received from the program. Following are some statements which were stated by majority of the GC members during the FGDs:

- “ In spite of time constrain, hard work and negligible cash benefits, we really enjoy working for the food supplementation program. Because of our work, poor mothers and the malnourished children in our village are getting some food everyday.”
- “We used to get enough benefit by feeding the adolescent girls. It was being stopped by BRAC. Now a days we are not much benefited by only feeding the mothers and the children. Give us some extra work so that we would be able to earn money for our families”
- “We do not feel like working now because we do not get enough benefit out of it like before. Furthermore, sometimes our husbands tease us for being economically unproductive“

- “We are willing to work hard if we get money because we are very poor. For feeding the mothers and the children, we only work hard without receiving adequate return”
- “ Because of BRAC’s presence the number of pregnant mothers has been reduced in the village. Right now there are only 3 pregnant mothers in this unit and this number is too low to make benefit by feeding them”

Some of them even stated that their husband teases them because they did not receive enough cash benefits out of their work in relation to food preparation and distribution . According to them, if they prepared food for five mothers in one day, a little time was left to prepare food for their family members and sometimes their husbands got angry for the delayed food preparation. However, they liked to continue to work hard if they could earn a fair amount of return out of it.

DISCUSSION

This report made an attempt to explore the perception of the community about the food supplementation component of the Pilot Nutrition Initiative of BRAC being implemented in Muktagacha of Mymensingh district. In-depth qualitative research techniques were used to know the perception of the three groups of population - supplemented mothers and their elder family member, mother of the supplemented children and the GC members of the program area. This section summarized and interprets the major findings of this study.

In-depth interview with the mother and their family members showed that all of them are vary much well aware of the purpose of providing food supplementation to those particular population groups during specific period of time (pregnancy and lactation) the common answers they cited were:

- “The mothers and children are supplemented because they weigh less than the required level.”
- “The mothers need special care and extra food during pregnancy and lactation. it is needed for the well-being of both the mother and the infants. Otherwise they would have sick baby.”
- “If the mother and child weigh less than the requirement they would get sick very often.

Discussing with the husbands of the supplemented moths, they seemed to give special attention during this period. One of them has stated:

- “Before I didn’t know that during pregnant and lactating period my wife needs extra foods which I know now because of BRAC. But I can hardly manage 3 times meals per day for all household members. I ask her to eat more leafy vegetable which is available at the backyard.”

Discussing with the mothers of the supplemented children also showed that the taste and preference of the children had changed. For instance, before introduction of this supplementary food to the children they were given only rice powder with molasses, but now they prefer to take mixture of rice, pulse (powder) and molasses with fresh soybean oil which is provided by the

program to the children everyday. Even after graduating from this program, mothers had to prepare the food at home because the children asked for it . It seems that the project had brought about some positive changes in food habit of the children probably because this supplementary food is very nutritious, easily available, non-perishable and easy to prepare.

Regarding the GC members perception, majority of them expressed their concern their about the monetary benefits they were getting out of the supplementary food preparation and distribution. Some of them even stated that their husbands teased them because they did not get enough monetary benefits. According to them, if they prepared food for five mothers they could not find enough time to prepare food for their family members during the same day and sometime their husbands got angry for such delayed cooking. Despite the limitations, they preferred to work hard if they could earn fair amount of return out of it. Another study done on the same programme revealed that including the opportunity cost for time they (GC member) allocated for purchasing, preparation and distribution of the supplementary food, they earned negative return. However, in spite of all the limitations such as time constraints, hard work and negligible cash benefits, they really enjoy working for the program. This was in fact due to the belief that because of their hard work, poor mothers and the malnourished children received some food everyday and also the community people were getting influenced about the extra food and caring need during pregnancy and lactation.