

Rapid Assessment of Nutrition

for Nutrition relevant Projects/Programs in Developing Countries
Guidelines and Procedures

Version 1

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Table of Contents

Foreword

Many organizations working in the field of development cooperation have recently been emphasizing the improvement of planning procedures (project identification and design) in an attempt to relate development projects closer to the actual needs of target groups. Planning systems have been introduced, and discussion of "ownership" has gained significant importance. This discussion is based on the conviction that the success (sustainability) of projects strongly depends on the capacities and commitment of local institutions to take over the responsibility for the management of the overall project cycle (identification/design/implementation).

The manual **RAN** has to be seen in that framework. It concentrates on nutrition intervention projects/programs which will gain an increased importance in the near future in responding to the major challenges of poverty alleviation and improving the nutritional situation of a considerable part of the population living in developing countries.

Since a goal of **RAN** is to deliver guidelines for an assessment of the initial nutritional and poverty situation of a population group living in a specific geographic area, it is particularly related to the project identification and pre-feasibility phase within the Overall Project Cycle. **RAN** is not meant to serve as a substitute for a baseline survey, but it can help to gain a preliminary understanding of a situation, at reasonable and justifiable costs. Thus it can provide a more objective basis for the decision on how to address nutrition/poverty related problems in a specific situation.

The guidelines should primarily serve as a tool for assessing the nutrition related aspects of a situation, but they can also be used to ensure that poverty related issues will be more seriously considered in the identification and design of development projects/programs.

Improving and securing the nutritional situation of underprivileged population groups, as well as alleviating poverty, are important development goals of German Technical Cooperation. One instrument to achieve those goals is the implementation of nutrition projects. The mission of these projects is to achieve sustainable improvements in the nutritional situation of parts of the population lacking in resources.

The causes of poverty and of nutritional deficiency can differ substantially, and there are usually <u>several</u> reasons responsible for these conditions. Therefore, nutrition security and poverty alleviation projects and programs have to address several problems at the same time. However, the recognition of multicausality in project planning carries the risk of dissipation by frittering away time and resources. Therefore, the main causes of nutrition insecurity and poverty have to be identified to give priority project activities that address these main problems.

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Table of Contents

Foreword
Acknowledgements
Table of contents

Introduction

- 1. What is **RAN**?
- 2. What is **RAN** useful for?
- 3. When is **RAN** carried out?
- 4. Who is **RAN** for?
- 5. How is **RAN** structured?
- 6. How long does RAN take?
- 7. What materials are required?

Part A Data collection at macro, meso, and micro level

- 1. Objectives of surveying information at national level
- 2. <u>Information from governmental officials</u>
- 3. Citing of secondary data
- 4. Data input into analysis forms (AF)
- 5. Selection of communities
- 6. Structure of organizations (GO/NGO) at village/suburb level
- 7. Institutions responsible for project

Part B Implementation of rapid assessment at the community level

- 1. Data collection in the community
- 2. Selection of community representatives
- 3. Selection of households
- 4. Methods for RAN in communities
- 5. Data input into survey forms (SF)
- 6. Scheduling of activities for RAN in communities

Part C Analysis and reports

- 1. Body stature of schoolchildren
- 2. Data processing
- 3. Reliability
- 4. Ranking of indicators variables
- 5. Presentation of findings
- 6. Monitoring and checking of RAN

Appendices

- 1. Selected observations and questions
- 2. Survey forms (SF)
- 3. Analysis forms (AF)
- 4. Measurement of body stature of schoolchildren
- 5. Literature for further study

Introduction

- 1. What is RAN
- 2. What is **RAN** useful for?
- 3. When is **RAN** carried out?
- 4. Who is **RAN** for?
- 5. How is **RAN** structured?
- 6. How long does **RAN** take?
- 7. What materials are required?

1. What is RAN?

RAN is formed from the words: Rapid Assessment of Nutrition for Nutrition Relevant Projects/Programs in Developing Countries

- Rapid: survey that needs not more than three weeks
- Assessment: quantitative and qualitative data collection, not a formal survey
- Nutrition: not limited only to food supply and intake, but also includes other factors responsible for an
 unacceptable nutritional situation and poverty, such as infectious diseases, other environmental factors and/or
 poor caring capacity

RAN is an exploratory survey for <u>initial</u> assessment of the absolute poverty and the nutritional situation of a population group living within a defined geographical area.

In **RAN**, statistical data, as well as opinions, are collected, and both types of information are compiled. In the analysis and presentation of data, the principle prevails that the information from which opinions are formed is complementary to statistical data and is equally valuable.

Sometimes the collected data cannot be brought into harmony at first sight, but may even appear to be contradictory. This inconsistency can be misleading, causing exclusive priority to be given to **one** point of view, while the other points of view are neglected. The instrument **RAN** should help to avoid this "one sided" interpretation.

RAN

- builds on statistically <u>and</u> anthropologically obtained information
- relies on the user's readiness to learn from the existing situation,
- helps to make decisions by visualization of assessment results, and
- focuses at target groups at the community level.

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2. What is RAN useful for?

RAN has the objective of identifying a potential project location, rapidly assessing the existing local nutritional situation and related poverty factors of selected communities in order to plan/recommend measures to improve the nutrition situation and to alleviate poverty.

RAN involves an analysis of the existing situation to induce a systematic clarifying and decision making process. Therefore it does not aim to first to come to agreement or to built up a homogeneous picture, but to present the complexity of the reality, which can differ a lot, depending upon the point of view and the interest of the observer. The planning team has the task to use all information sources available and to systematize the collected information. Thus it is important to analyze the situation from different point of views. In detail, **RAN** includes

- assessment of the overall conditions at the national, provincial and district level relevant to the poverty and nutritional situation in a potential project region,
- collection of preliminary information on the magnitude and severity of nutritional problems in potential project locations,
- identification of potential project location,
- integration of the opinion of the potential target groups and their representatives (participatory approach) on
 the type, scope, and importance of the nutritional problems and their underlying poverty related factors,
 and
 - the potential resources,
- definition of the risk groups particularly faced with poverty and a poor nutritional status,
- identification of important nutrition related **problems** and their **possible causal relationship**,
- provision of an initial basis for the implementation of a nutritional baseline survey.

In summary, it is therefore possible:

- Ø to determine the **factors** responsible for the nutritional problems and related poverty factors by using survey methods (quantitative approach),
- \emptyset to obtain the **perception** of the potential target population on their poverty and nutrition situation (qualitative approach),
- Ø to collect information on the **considerations of decision makers** at the national, provincial and local levels on strategies of poverty alleviation and nutritional security regarding the project/program area (political approach)

The Rapid Assessment of Nutrition - RAN - does <u>not</u> aim to obtain quantitatively assured data. For this purpose, a baseline survey should be used later (at the beginning of the project implementation phase). The main purpose is to obtain basic data for the project and for further decision making about nutrition related objectives/strategies. It provides an initial basis for the later implementation of a nutritional baseline survey.

3. When is RAN carried out?

The starting point of a project is the project idea. Once the project idea is evaluated to be relevant and realistic, and an organization is interested in further follow up of the idea for project development, **RAN** is the instrument to be used for **Project Identification**, because it combines the assessment of secondary data, official opinions and the perception and expectations of the potential target groups. Furthermore, this pre-feasibility study may include alternative analyses and suggestions about the project goal, possible interventions, and resource allocations.

The overview presented in following figure shows how **RAN** is integrated into the project identification phase of the Project Cycle of a Nutrition Intervention / Poverty Alleviation Project.

Project Cycle for Nutrition and Poverty Oriented Projects/Programs

Project Phase Instrument

Project idea

Project - RAN

identification

Decision about purpose of nutrition/poverty project/program

Project design BASELINE SURVEY and (conceptualization) participatory planning

Decision about project strategy

Project implementation

Desired project impact

A project starts with a project idea and ends when the jointly-planned project impact has been reached. The project life-time can be subdivided into phases, such as identification, conceptualization and implementation.

RAN is an <u>instrument for the project identification</u> which should be carried out right at the beginning of a project, after the formulation of a project idea.

4. Who is RAN for?

The **guidelines** are aimed primarily at specialists assigned to conduct a **feasibility study of a new nutrition relevant project**. This usually refers to an <u>interdisciplinary team</u>, such as nutrition specialists, agricultural specialists, forestry experts, health experts, and sociologists.

The assessment team should include local specialists, assigned by the institution(s) that will implement the project. Expertise of the local conditions, political and cultural, as well as mastery of the local language of the target group, is essential for the feasibility study.

Specialized knowledge on quantitative research methodology is required, as well as experience in qualitative and participatory appraisal methods and analysis of information.

External facilitator(s) may be necessary to provide the know how for guiding the interdisciplinary team during the feasibility study, detailed analyzing and final report writing.

5. How is RAN structured?

RAN occurs in three steps:

- **Step 1** Data collection at capital and provincial/district level (government, institutions and NGOs)
- **Step 2** Collection of information in a predefined urban or rural community/area (local government and NGO representatives, and people)
 - **Step 3** Data analysis and preliminary report for discussion with representatives of relevant national

organizations

6. How long does RAN take?

This type of rapid assessment usually takes no more than three weeks. Of course, the time required depends primarily on the:

- professional experience,
- knowledge of local language,
- general experience with RAN instruments
- of the planning/assessment team.

The scheduling of a assessment must allow enough time for individual and group reflection. Too often there is the danger of overemphasizing data collection and thereby neglecting the learning and identification process.

The scheduling of **RAN** must include time for the gathering of information from <u>all</u> of the following sources:

- the national government offices, institutions and NGOs in the capital of the country,
- the local government offices, institutions and NGOs in the provincial or district capital, if the prospective intervention area is concentrated outside the national capital, and
- the population, NGOs and the local governmental representatives in the selected suburb, town, or rural community.

At the end of the assessment, a short report summarizing the fact-finding is produced and discussed with representatives of the organizations that will likely be involved in the project.

The most time-consuming and painstaking part is undoubtedly the assessment among the communities. Although transportation and living conditions among the most needy groups are often poorly developed, this important part of the assessment must not be neglected due to time constraints. In order to record the broadest possible diversity of situations, four or five communities with the **greatest possibility of heterogeneity** (ethnic, socio-economic, infrastructure situation, etc.) should be sought out to assess the variability of the living conditions in the proposed project area.

The following chronological diagrams present two examples for scheduling the activities in rural (Fig. 2) and urban areas (Fig. 3). If communities in urban areas are to be identified and investigated, the time required is shorter because fewer travel days are needed. **At least two specialists from different disciplines** should be engaged in the **RAN** mission. As the topic of relevance and interest are identified in "question guides" prior to the assessment and tasks are distributed between team members, several persons or groups can be interviewed at the same time. In the example given here, an exploratory mission in a rural area will take a total of 19 days. Time taken for activities which do not need to be carried out at the potential study site, such as

- preparation for the assessment, and
- detailed analysis and final report writing

are not included in this example.

Two examples of the chronological order of a survey in a community are presented below.

Fig. 2 Scheduling of activities for a finding mission in a rural area

Activities	Mo Tu We Th Fr Sa Su Mo Tu We Th Fr Sa Su Mo Tu We Th Fr Sa

Search and study of literature												
Search and study of reports from international organizations												
Collection of information at national government offices												
Talks with representatives of government offices and NGOs												
Analysis of information												
1st interim report												
Travel to provincial or district capital												
Talks with local representatives of government offices and NGOs												
Analysis of information												
Selection of 4 rural communities												
Finalization of questionnaires*												
2nd interim report												
Travel to the selected communities												
Assessment in the 4 communities												
Return travel to the capital												
Initial analysis of the survey, preparation summarized report												
Discussion with relevant organizations												
Detailed analysis												
Final report												
											,	

^{*} Finalization of questionnaires according to Appendices 1 "Selected observation and questionnaires"

Fig. 3 Scheduling of activities for a finding mission in an urban area *

Mc	Tu	We	Th	Fr	Sa	Su	Мо	Tu	We	Th	Fr	Sa	Su	Мо	1
													J		

^{*} Because in urban areas heterogeneity among communities is often greater than in rural ones, assessment of 5 communities is recommended.

7. What materials are required?

In accordance with the concept of a rapid assessment, the use of equipment should be kept to a minimum. However, the following items should be taken into the assessment area:

- Multiple copies of the adapted questionnaires/discussion guides and the survey/analysis forms. The blank Survey Forms (SF-1 to SF-12) as well as the Analysis Forms (AF-1 to AF-6) are available here. Other languages (French, Spanish) can be obtained from GTZ. The forms should assist the surveyor documenting and analyzing the data. The forms should be modified and adapted to meet the needs of the current assessment team before to take to the field.
- 2. A **portable microcomputer** for direct data entry and preliminary analyses of the data. The <u>NutriSurvey</u> program of this homepage can be used to **analyze the anthropometric data of the schoolchildren**.
- 3. A Microtoise measuring tape (Holtaine) for recording the body stature of schoolchildren

^{**} Finalization of questionnaires according to Appendices 1 "Selected observation and questionnaires"

Part A: Data collection at macro, meso, and micro level

- 1. Objectives of surveying information at national level
- 2. Information from governmental officials
- 3. Citing of secondary data
- 4. Data input into analysis forms (AF)
- 5. Selection of communities
- 6. Structure of organizations (GO/NGO) at village/suburb level
- 7. Institutions responsible for project

1. Objectives of surveying information at national level

The surveying of data relevant to nutrition in the national capital and, if necessary, a provincial or district capital has the following objectives:

- Characterization of the overall conditions responsible for the poverty situation;
- Comparison between the province/district, or the city, and the rest of the country;
- Identification of particularly needy regions, or urban districts;
- Identification of communities for further assessments at the community level.

2. Information from governmental officials

Discussions with governmental officials from different, responsible sector departments and with the planning authorities (at national and provincial/district level) are necessary to clarify from their point of view

- the overall conditions responsible for the poverty situation;
- the problems of the provinces/districts, or the city, in comparison to those of the country as a whole;
- the regions, or urban districts, which are particularly needy;
- the communities recommended/appointed for further assessment at the community level.

3. Citing of secondary data

It can be assumed that in almost all countries some information is available on the nutrition and health of its population, the climate, agricultural production, and socioeconomic and cultural characteristics. There are

Part A Data collection at macro

three sources of information which can be partly exploited <u>before</u> travelling to the partner country to carry out the assessment:

- scientific literature
- data from national reports and/or international institutions
- empirical reports on the experiences of experts in the partner country.

In the partner country in addition to government offices, the statistical bureau, the bureaus of multilateral and bilateral donor organizations, universities, research centers, and NGOs can serve as valuable sources of information.

These secondary data provide **starting point information** for the **RAN** and are important **complementary information** for analysis and interpretation of the data collected in the field.

Once again, it should be emphasized that the search for and analysis of secondary data requires that the specialists be well acquainted with developing countries in general and the national language in particular. Knowing at which institution and from which person information is available, which information is credible and which is less plausible, how information is to be arranged, and how to set priorities demands fingertip sensitivity and a good "sixth sense." Obviously, the perfect use of an instrument, such as a manual, can never substitute for these abilities.

4. Data input into analysis forms (AF)

The Analysis Forms (<u>AF-2 to AF-7</u>) should be filled out step-by-step based on information gather at the governmental level, institutions and NGOs before the survey starts in the communities.

Data should be organized into three categories:

- National average,
- Provincial data from the province in which the project will be undertaken,
- Rural district, or urban area, data from the district or area in which the project will be undertaken.

Comparing these data, compiled on the same form, facilitates the

- identification of limited resources and problems in the projected province, rural district or urban area
- selection of a very poor region where the community appraisal should take place
- justification of the selected area for implementation of a future project.

These findings are compared later on with the average of the assessment findings in the 5 communities.

5. Selection of communities

Before the multi-disciplinary team goes to the field, the communities for data collection have to be selected. It is obvious that data cannot be obtained from all communities in a potential project region. Instead, information can only be collected from a limited number of sample communities. Therefore **4 communities should be selected** for assessing the nutritional and poverty situation.

The following criteria should be used for the selection of communities (villages or urban districts):

- the poorest communities with the least access to resources, and therefore the greatest need;
- from among these poorest communities, the ones with the greatest economic heterogeneity to secure a broad picture about existing resource utilization.

Data from impact indicators (e.g. nutritional status) as well as causal factors (e.g. availability of resources to cover basic needs), used in comparison with average data for the province or district, can serve as **poverty indicators for the selection of communities**. These data should then be entered onto a map (poverty mapping).

6. Structure of organizations (GO/NGO) at village/suburb level

The organizational structure of Governmental (GO) and Non-Governmental Organizations (NGO) at the community level gives important information about the potential organizational support for developing a project proposal. If time is available, the different representatives of the communities (key informants as well as community members {male/female}) should be asked to rank the existing organizations according to their perceived importance. For this exercise Venn Diagramming is suggested.

7. Institutions responsible for the project

Suggestions should be made about institutions which could potentially be responsible for the project, at the district level for implementation and at the national level for political responsibility.

Part B

Part B: Implementation of rapid assessment at the community level

- 1. Data collection in the community
- 2. Selection of community representatives
- 3. Selection of households
- 4. Methods for **RAN** in communities
- 5. Data input into survey forms (SF)
- 6. Scheduling of activities for **RAN** in communities

1. Data collection in the community

In addition to the secondary data already collected, primary data must also be obtained. It should not be assumed that reliable descriptions of the actual situation of the most needy are available.

Surveying qualitative data requires proper knowledge of sociological survey methods, a high degree of social and gender sensitivity, and considerable time.

2. Selection of community representatives

RAN does not demand the recording of statistically representative data. Because much of the information recorded from the community reflects the subjective opinions of the community representatives and members, it is recommended that at least 2 representatives of a community be interviewed concerning the same topic.

The selection of community representatives for interviewing depends on the structure and situation of the community. In each community the survey team has to decide whom they want to interview and on which topics. Table 1 should serve as a guide for selecting community members from whom to seek detailed data. In communities lacking health posts, it is impossible to interview health personnel. Depending on the culture and religious adherence, religious leaders can be asked to provide information.

As much information as possible should be obtained on the type of poverty and nutritional problems encountered and their causes. Apart from the point of view submitted by the professional specialists and the community representatives, mothers and fathers can contribute further information or a different perception of their situation. Basically, all surveyed persons should be encouraged to explain their problems, views and practices in interviews and group discussions. In most cases it is appropriate to interview women and men separately.

Information should be collected from specialists, by observation, and by interviewing community members and community representatives. Table 1 summarizes the types and sources of information that should be gathered. A description of the different methods for information collection is given on the following two pages.

The surveying of the body stature of children in the first year of school should be included in the process of ascertaining the nutritional situation of the population in selected communities, as this data provides an

objective indication of the poverty situation in the community.

Table 1: Types and sources of information on the nutritional situation and poverty in communities

Type of information	Cn	Soi	ırce	of i	nfori	mati	on
Type of information	Sp	Myr	R	R	Н	F	M
Size of population Type of community Size of families Female headed households	x	X X X	X X X	X X X	X X X		
Ethnic groups Religious groups Language groups		X X X	x	X X X	х	X X X	X X X
GOs/NGOs at community level		x	х	х	х	х	х
Birth rate Child/infant mortality Major causes of death Nutritional status Disease situation Health services (quality and use) Supplementation program Food program	x	X X X	X X X	X X X X	X X X X X X		X X X X X X
Economically active population Economic activities Migration (extent and reasons)		X X X	X X	X X X		X X	X X
Agriculture for subsistence/trade Land ownership relationships Availability of food at the household level		X X X		x		X X X	X X X
Food consumption habits Breast-feeding, weaning and supplementary feeding practices Feeding habits/taboos Distribution of food within the family			X X X	X X X	X X	x	X X X
Literacy rate (m:f) Access to schools (m:f) Access to education - Decision making at hsh/family level Formal/informal education (m:f)		x x	x x	x x		x	х
Time spent for Drinking water/fuel other productive activities						X	X

Part B Implementation of rapid assessment at the community level

Water supply Energy supply	X	X X		X X		X X	X
Governmental structure Formal and informal organizations and groups	x	x	x	x	x	x	x

Sp - Professional specialist, Myr - Mayor, R - Religious leader, T - Teacher, H - Health service, F - Father,

- Mother, m:f = male:female

3. Selection of households

Observations of households should establish the type of economic heterogeneity that prevails in the community. If there is a large gap between rich and poor, there are at least potential resources available which can be built upon for improvement of living conditions and nutritional status. The identification of poor and rich households can be made by poverty/wealth ranking.

To determine the **socio-economic heterogeneity** of a community, the <u>household of the community leader</u> (as one of the better situated households) should be compared with <u>two poor households</u>. The selection of the two poor households should be made by the community leader.

4. Methods for RAN in the communities

Primary data can be collected through interviews, observations, and measurements. For the rapid assessment referred to in this manual, two types of semi-structured interviews for asking questions are recommended: the individual interview and the group discussion/mapping.

Fig. 4 Selection of assessment method according to item and source of information

Assessment method	Item of information	Source of information
Individual interview	General social, economical, agricultural, health and nutritional information	Community leader, health and agricultural workers, teachers, religious leaders.
Group discussion	Beliefs and habits, norms and values, perception of own problems and potentials	Target population (young/old, male/female)
Mapping (Venn Diagram, calendars)	Perceived importance of organizations (GO/NGO) working within community Gender specific - seasonal agricultural Production/activity - seasonal health status/food availability - seasonal workload	
Observation	Living conditions	In each case, 1 rich and 2 poor households in 5 communities
Measurement	Body stature	Children in first year of school

Semi-structured interviews

Semi-structured interviews should be conducted in the selected communities. In contrast to structured interviews with pre-formulated questions or unstructured conversations, in a semi-structured interview the topic for discussion should be selected without defining the exact type of questions to be asked. This has the advantage of allowing the given topics to serve as a "guide" for obtaining the desired information, while permitting the necessary flexibility by adapting questions to the given situation. In order to carry out semi-structured interviews, a checklist should be prepared for the theme to be discussed. Questions should be phrased in such a manner that they are

- easily understood,
- not suggestive,
- "open questions" (what?, when?, where?, why?, how?)

a) Individual interview

Individual interviews are carried out with key informants (community heads, religious leaders, teachers, health workers, agricultural advisors, etc., - select at least 2 key sources of information for each topic of interest.). These key sources are recommended because of broad knowledge about the community, awareness of nutritionally relevant science, ability to influence opinions, and communication skills. From these people it is possible to accumulate considerable information in a short time. Nevertheless, care must be taken in evaluating the information. These key sources of information usually come from the wealthier and better educated sections of the community which have their own interests, and are often prejudiced in their opinions. Therefore, the opinions of the key informants must always be compared with the opinions of the target population. Although it may seem that there is not enough time to listen to community members, a chat during a lunch break or in the evening before going to bed often offers a splendid occasion for collecting information.

The information obtained during individual interviews is then transferred to the Survey Forms (SF-1, SF-3, SF-4, SF-5) provided in the annex.

b) Group discussion

In **RAN**, only a few individual interviews can be held with each target population because of time constraints. Community members should be interviewed in a group discussion. Differing views, experiences, and practices can be established from group discussions. With the use of sensitively applied guidance, discussion can yield information on the determining factors for **RAN**, (e.g. position of women, work loads, and the situation, knowledge, and practices of nutrition).

In a discussion participants should represent all members in the community as much as possible. Despite this, sector representatives with specific knowledge should not take part in a group discussion with community members. Occasionally it is necessary to divide the discussion into defined groups (old, young, men, women), because the presence of community members who are dependent on one other or who are separated by tensions can hinder the exchange of information. Both mothers and fathers should be encouraged to discuss their working environment, earning opportunities, agricultural production.

If there are sufficient survey team members available and the members of the discussion group agree, it is helpful for a team member other than the moderator to take down the answers. This allows the spokesperson time to concentrate on the dialogue, and the discussion is not interrupted by pauses needed to write down answers. It is also possible that the target group will allow the use of small tape recorders.

<u>Visualization</u> using **Mapping** methodology helps a group or individual explore a topic more deeply and discuss it over a certain time frame. Different calendars can be built (agricultural, health/nutrition, gender specific work loads) by different discussion groups of the same community, each with the help of a facilitator from the survey team. Question guides, developed beforehand by the survey team, help to obtain the needed information, which later can be compared with information from the other surveyed communities. Furthermore a 'Venn Diagram' helps to draw a picture about the organizations (GO/NGO) working within the community and their

Part B Implementation of rapid assessment at the community level

perceived importance by the target groups (institutional ranking).

The information obtained during the group discussions and the mappings will be transferred to the prepared Survey Forms, provided in the appendix (e.g. SF-6, SF-7, SF-8, SF-9, SF-10, SF-12), which facilitates the comparison between the different communities and helps to draw further conclusions.

Direct observation in households and measurements

The scientists' observations during the visit to the selected communities can assist in gaining a more objective view of a situation. For example, mothers often do not perceive the nutritional situation of their children as serious, because they have had no opportunity for comparison. All children in the region are of similar small size, or have frequent diarrhea or respiratory illnesses, so their child is considered "normal."

The Survey Forms (SF-1, SF-2, SF-3, SF-10) can be useful for documenting observations made by the professional specialists themselves.

In particular the measurement of the body stature is suitable for obtaining an initial impression of the current nutritional situation. Stunting (short stature) in children suggests chronic undernourishment and can be taken as a poverty indicator because it reflects environmental, health and nutrition conditions in which these children have lived in the past. For practical reasons, therefore it is recommended that body stature of children in the first school class (age 6-9) be measured in the local school and these data then related to the date of birth of each child (height/age). Body stature is easily measured with a tape (Microtoise **measuring tape** (Holtaine)), and requires only a little training. Exact instructions for measuring the body stature are presented in Appendix 5.4

After the measurement of body stature for each child, the following data need to be filled into the survey form SF-10:

- name, or number for the child
- sex
- age (date of birth, if available)
- height (stature)
- community.

5. Data input into survey forms (SF)

Information obtained in the communities should be documented using standard survey forms as much as possible. This helps to structure and standardize the information collection and makes the work of collecting and analyzing information considerably easier.

When making **observations of households**, the Survey Form (SF-2), in which the **living conditions** of a wealthier household and two poor households are recorded, should be used. The information summarized on this form should be used as indirect socioeconomic indicators.

In the survey forms the assessment results of all 4 communities (community A - D) are presented, and the similarities and differences between communities can be ascertained directly from the survey forms.

The Survey Forms (SF-1 to SF-12) are shown in Appendix 2. However, theses forms should be adapted and filled in according to the assessment needs of the particular project. Topics which are irrelevant should be neglected, important issues which are not considered should be included.

Рап В

6. Scheduling of activities for RAN in communities

Because of the many tasks which need to be carried out by the interdisciplinary survey team during the visit in a community, the schedule of activities should be followed closely in order to avoid the risk of time passing too quickly and plans being cast aside unintentionally.

For optimal efficiency, the activity schedules are divided among the surveyors. They should <u>coordinate previously</u> who will interview whom or guide the group discussion. The following activity schedule presents an example of tasks for <u>one team member</u>. Another surveyor could carry out at the same time interviews with the teachers and the measurements of the school children, and in the afternoon he/she can lead a group discussion, meanwhile a third person could be in charge of agricultural topics, interviews with the representative of the agricultural services and group discussion and mapping with farmers. At the end of the day sufficient time should be allocated to thank the community members for their participation.

Travel time to and from the community and the documentation of the gathered information at the end of the day should be taken into consideration. In summary much time can be gained if the tasks are well planned and organized. However, a well organized schedule should not be counterproductive to a <u>relaxed</u> procedure during the visit in the community.

Fig 5. Activity Schedule for RAN in Communities (Example for one of the team members)

Activities					Tim	е					
Houvides	8	9	10	11	12	13	14	15	16		
All team members participate	All team members participate										
Introduction of the surveyors to the community leader											
Tasks for one of the team member	sks for one of the team members										
Interview with the community leader											
Observation of the household of the community leader and 2 poor households											
Interview with the health service personnel											
Lunch break											
Group discussion with women (e.g.nutrition/health related topic)											
All team members participate											
Information of community members											
Travel to the next community											
Documentation of the information											

Part C: Analysis and reports

- 1. Body stature of schoolchildren
- 2. Data processing
- 3. Reliability
- 4. Ranking of indicators variables
- 5. Presentation of findings
- 6. Monitoring and checking of RAN

1. Body stature of schoolchildren

The easiest and most reliable way of assessing the nutritional situation of a community is by taking a particular body measurement. Many studies have shown that children who grow up under poor conditions suffer from an inadequate food intake and repeated infectious diseases that lead to body growth failures. This growth faltering process can be observed in the long term and becomes increasingly irreversible after the age of one and a half years. The age related height (h/a) of a preschool child is internationally recognized as a very appropriate indicator for the nutritional situation and the underlying situation leading to poverty.

Although strong genetic disposition influences anthropometric data in individuals, this phenomena disappears when observations are taken of a population (*Of course, populations exist with strong genetic differences in body measurements, such as pygmies. Nevertheless these are rare exception that are not discussed here).* The observation of anthropometric indices in children figures most prominently as an indicator of the nutritional situation of a community, as the nutrient requirements are highest and diseases appear most frequently while a child is growing, and thus problems in provision for this group become apparent at a particularly early stage.

It has become internationally accepted that a population is indicated as stunted if more than 2.5% of their individuals have a ht/age index less than the standard deviation of -2 (-2s) in comparison to the reference population. The worse the nutritional situation and the poorer the community, the higher is the prevalence of stunting in children.

Because it would not be possible to assemble enough pre-school children on the one day visit, and because their age determination would be more difficult, the prevalence of stunting among the children in the community should be estimated from the anthropometric data collected from children in the first grade in the local school. Additionally the assessment of age related height will be more accurate in the school children, because birth certificates normally are required for school entry.

Furthermore, differences in prevalence of stunting between boys and girls should be identified. These analyses can be carried out by the NutriSurvey software (Individual part/anthropometry in children).

2. Data processing

In addition to the Survey Forms (SF), Analysis Forms (AF) are available in Appendix 3. These forms help standardize and structure processing the collected data.

The analysis forms enable

• the visualizing of the seasonality in the survey region. They present temperature changes, the rhythm in cultivation of the major crops and livestock farming, food price fluctuations, and the availability of food at the household level throughout the year. The workloads of women, the incidence of illnesses and the nutritional status during the course of a year are also recorded. So, for example, times of abundance or acute deficiency in food availability, and the seasonality of illnesses and risks of malnutrition, as well as whether, and when, the workload of women or men would allow further income generating activities can directly be identified. a comparison of national and regional data of the agriculture, health status, and economic, educational and demographic data of the region.

In this way, it is also possible to find out the deficits and acute malnutrition, high rates of birth/mortality, increased unemployment and migration, etc. which justify the future project region.

3. Reliability

Reliability should be established by the abundance of primary and secondary data. In regard to this, **RAN** is not aimed at obtaining quantitatively assured data. However, by surveying variables from different government sectors at the national and provincial/district level, as well as at non-government organizations, information is obtained from a wider base and does not depend on a few subjective opinions.

At the community level, it is important to obtain the most comprehensive picture of the prevailing situation possible by interviewing different community leaders and the future target groups, as well as from observations by the specialists themselves.

4. Ranking of indicators - variables

The selected indicators identify the population of a future project region, define the population in comparison to national standards, and provide indications of their state of nutrition.

Table 2. Variable-Indicator Table

Variable	Indicator	Information content			
Population density	No. of population/km ²	Population pressure Population distribution			
Population growth	Birth rate/death rate	Health/nutrition status Hygienic conditions Medical care			
Ethnic groups	% of local population	Influence on agricultural and consumer habits Distribution of food within family, taboos			
Religious groups	% of local population	Influence on agricultural and consumer habits Distribution of food within family, taboos			
Formal Education	Illiteracy (%, m/f) Primary school graduates (%, m/f) Secondary school graduates/further education (%, m/f) Primary school attendance rate (m/f) Primary school dropout rate (m/f)	Influence from school education of parents on nutritional status of children Income levels of parents Child labor Selection of communication strategies			
Informal Education	Spoken, written language	Influence on possibilities and strategies for communication Obstacles to literacy (for men/women)			

		Agricultural production			
Climate	Temperature (days of frost/month) Rainfall (mm/month) Dry weather (weeks) Flooding (weeks)	Food production Food prices Availability of food at the household level Illnesses Nutritional status			
Agricultural cultivation structure	% arable land % cash crops % subsistence culture Agricultural yield/ha Agricultural self-sufficiency (%) Agricultural imports (%) Livestock farming (livestock/ha) Land owner right Women in agricultural work (%	Food production Division of labor Sources of income Food prices Availability of food at the household level Nutritional status			
Agricultural extension services	Agricultural advisors (technicians/region, m/f, Agricultural promoters/community, m/f)	Agricultural production Food production Food storage/availability at the household level			
Illnesses	Preschool children (< 5 years) Schoolchildren (5 - 14 years) Mothers Endemic illnesses among entire population	Health status Nutritional status Hygienic conditions Health care/immunization coverage			
Health infrastructure	Hospitals (beds/capita) Health centers/capita Health posts/capita Doctors/capita Nurses/capita Health assistants/capita	Preventative/curative health care Health status Nutritional status			
Traditional health services	Healers (% use by population) Traditional midwives (% use by population)	Health status Nutritional status			
Preventative health services	Mother/child advisory service/center Nutrition advisory service/center Family planning/center Supplementary feeding program/center Feeding program/center%	Health status Nutritional status Birth rate			
Family Planning	Families Contraceptives used	Child spacing			
Employment	Economic activities (m/f) Unemployment rate % of women in employment Migration rate Seasonal migration rate Income/capita Minimum wage (m/f) Credit Time spent at work (m/f) Seasonality	Sources of income, earnings Time and physical burden on men/ women			

Living conditions	Building materials used Bedrooms/family members Water/electricity supply Sanitary facilities Location of kitchen (inside/outside house) Food storage Luxury goods	Health status Nutritional status Social status Family income Health status Nutritional status Hygienic conditions Availability of food in the household
Anthropometric measurements	Body stature of schoolchildren (6-9 years)	Nutritional status
Nutritional practices	Breast-feeding/weaning practices Infant supplementary feeding Staple foods % of daily supply Seasonality Special foods Prestige of foods Distribution of food within family Food taboos	Nutritional status Health status
Poverty perception	% poverty Causes of poverty	Relative poverty

5. Presentation of findings

5.1. Final information for relevant institutions

The findings of **RAN** should be presented and discussed with relevant institutions and decision makers regarding the nutritional and poverty situation of a potential target population. In particular, the following items should be considered (detailed explanation see below point 5.3):

- Description of the situation by sectors;
- Description of the situation from the community point of view;
- Result of anthropometric measurements;
- Point of view of policy makers (national, regional, and local);
- Proposal of project purpose.

5.2. Final report

The report on the nutritional and poverty-related situation of a potential target population should contain the following points:

- Overall political and socioeconomic conditions
- Description of the situation by sectors
- Selection of the project location
- Description of the situation from the community point of view
- Point of view of policy makers (national, regional, and local)
- Result of anthropometric measurements
- Proposal for project purpose
 - Problem tree
 - Analysis of resources
 - Analysis of alternatives

- Proposals for baseline survey and in depth cause analysis
- Summary

5.3. Items included in oral and written information

a. Description of the situation by sectors

Initially a general overview of the national situation and of particularly needy areas should be formulated on the basis of the obtained demographic data and statistics on agriculture and health. Questions asked explicitly of government representatives from government sectors and NGOs concerning the existence of deprived regions should also be used as further criteria for the selection of a province/district and the communities to be investigated (AF-2 to AF-6).

b. Description of the situation from the community point of view

In describing the situation from the point of view of the community, overriding consideration should be given to how the community views its situation, which problems it identifies, and how it assigns priority to them (obtained by individual interviews and the different group discussions in the villages).

Through group discussions, among others, the surveyors obtained gender specific information about food production systems and other income generating activities of the community members, their work loads and responsibilities towards their families and the community. They also have gained insight into the situation of women, one of the highest risk groups, their social status, and the opportunities to provide the basis needs for their families. The supply of food and the seasonal availability of food on the household level are important indicators of the nutritional conditions of the inhabitants. Nutritional habits and taboos provide further indicators of the nutritional status, and thereby also influence the health status of children and infants, in particular, as well as of mothers.

Information on the most frequent illnesses, community health care, school attendance rate of children, and living conditions are further indicators which help to determine the poverty level of the population and the social structure. In doing so, it is necessary to take into account ethnic background and religious beliefs: (SF-1 to SF-9; AF-1 and AF-7).

c. Point of view of policy makers (national, regional, and local)

The rapid assessment includes interviews with policy makers from the different governmental sectors, as well as with planning authorities, depending on the assessment area (rural/urban) on the national, regional and local levels. At the end of the mission an initial analysis of the assessment should take place, be summarized and discussed with the relevant organizations. These initial and final discussions will help to determine the framework for the future project/program.

d. Result on anthropometric measurements

To get a first, objective impression on the nutritional situation in each of the selected communities, the body stature of schoolchildren (first grade of school) should be measured and the prevalence of stunting described. It should also be explored whether stunting differs between genders.

e. Proposal of project/program purpose

The <u>project/program purpose</u> describes the intended impacts or the anticipated goals of the project/program as a precisely stated condition. The project/program purpose contributes to achieving the <u>overall goal</u>.

Taking the first 4 points above into consideration the project/program purpose should be defined. A tool for analyzing the existing problems and for identifying and discussing potential alternative solutions is the building of a 'problem tree' (hierarchy of problems), which can afterwards be transformed into a hierarchy of objectives. The set of objectives is then analyzed and suitable alternatives for the future project/program are recommended.

f. Proposal of problem tree

To analyze the major existing <u>problems</u> a "problem tree" should be built, which tackles the problems at their <u>roots</u> - their <u>cause</u> and looking at their <u>effect</u>. In the problem tree, the problems apparent in a province or district should be visualized collectively. In doing so, equal consideration should be given to information from the individuals and communities as to the data provided by each government sector. The problem tree provides a **description of the situation from the point of view of the surveyors**.

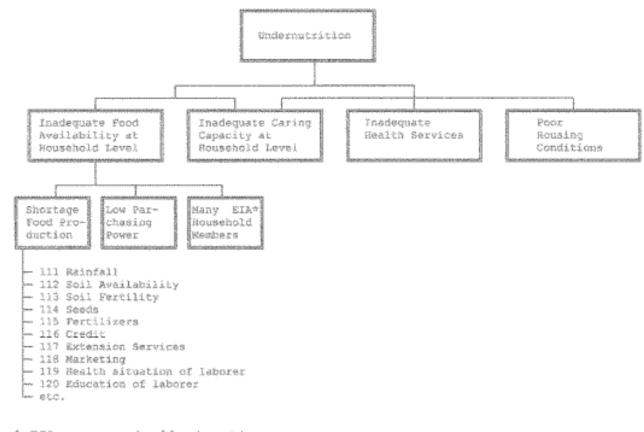
The major causes of poverty and poor nutritional conditions are described in the following problem tree (Diagram 1). This problem tree presents only some factors and describes the related causes only for one branch. The analysis thus attempts to extract typical perspectives of the situation which in reality is very complex. These characteristics then become tangible

Part C Analysis and reports

and can be analyzed and worked on by the team of specialists.

Diagram 1. Problem tree for undernutrition

(Example)



* EIA: economically inactive

The impact of one specific problem on the overall living conditions depends strongly on the characteristics of the existing situation (ecological, cultural, economic, political etc. conditions) and therefore the problem tree should illustrate some "typical" relations. The assessment team should concentrate on the visualization of the main problems which later are transformed into an **objectives tree**, indicating **potential alternatives**.

g. Analysis of alternatives

In the analysis of alternatives, possible intervention measures for improvement of the current situation of the population are discussed. Interventions should be planned, initiated and maintained as self help activities in order to sustain future measures. Furthermore it is indispensable for the future program that the measures considered are those directly aiding the improvement of the nutritional condition of the target population.

The chief criterion when evaluating and selecting alternatives is whether the project/program is expedient and realistic.

h. Selection criteria to define a nutrition intervention project/strategy

The following criteria are important in defining the project/strategy:

- 1. Resources available
- 2. Problem awareness of the target groups
- 3. Probability of achieving objectives
- 4. Political feasibility
- Capacity of local institutions to manage the nutritional intervention program
- 6. Self-help potential
- 7. Sustainability
- 8. Cost-benefit ratio
- 9. Time horizon

Part C Analysis and reports

Social risks

i. Proposals for baseline survey and in depth cause analysis

As mentioned earlier, **RAN** cannot substitute the baseline survey. For this reason, a statistically reliable nutritional survey should be conducted during the first months of a newly undertaken project, and especially **before** the beginning of large scale intervention measures in the project region.

Nevertheless, **RAN** can be used to draw up proposals as to what areas should be given particular emphasis in the baseline survey, and where it is necessary to carry out in depth cause analysis in addition to the baseline survey. With help of the Fact-Hypotheses-Matrix, which shows the hypothetical as well as the verified cause-impact relationships, it is possible to draw valuable conclusions about what information is still needed.

j. Summary

WHY the project/program should be carried out

WHAT the project/program is expected to achieve

HOW it is going to achieve these results

WHICH external factors are crucial for the success of the project/program

HOW the success of the project/program can be assessed

WHERE the data can be required to assess the success

WHAT the project/program will cost

6. Monitoring and checking of RAN

RAN requires the collection of much information within a short time. There is always the possibility that due to the specific conditions of the process of project finding it is not possible to collect all information which is desired. However, in this case it is necessary to show what information is lacking and to explain the reason for information gaps.

Table 4 gives an overview of the situation of data collection and analysis which can be used by the specialists involved in the project investigation and by those at the responsible headquarters. The check list contains only those parts of the rapid assessment which are written down/visualized, and which are part of the reporting to Headquarters. The specialist team should indicate whether or not each activity has been fulfilled, if not should explain the reason. The responsible individuals at headquarters then has the opportunity to monitor data collection and analysis, and the recommendations of the specialist team.

Examples for monitoring:

- 1. respective survey forms have been adapted to the existing situation and filled out,
- 2. the situation is described from the point of view of the different sectors (e.g. health, agriculture) on national, regional and local level.

Table 4. Monitoring and check list of RAN for the specialist team itself and headquarters

Tasks	Rapporteurs	Headquarters
Survey Forms (SF-1 to SF-11)		
Analysis Form Forms (AF-1 to AF-10)		
Description of the situation by the sectors national provincial local		
Description of the situation from the community point of view (interviews/group discussions)		

Part C	Analysis and reports

Anthropometric measurements	
Definition of the project purpose	
Problem tree	
Fact-Hypotheses-Matrix (FaHM)	
Analysis of alternatives	
Proposals for baseline survey and in depth studies	

- 1 fulfilled
- 0 not fulfilled, please give the reasons at the bottom of the page

Appendices

- 1. Selected observations and questions
- 2. Survey forms (SF)
- 3. Analysis forms (AF)
- 4. Measurement of body stature of schoolchildren
- 5. Literature for further study

1. Selected observations and questions

A list of key points is provided for observation by the surveyor team (I-1) as well as for the interviews (key informants of the community)(I-2) and the group discussions (community members)(I-3). Based on this list of key points the team members should discuss and select - before they start the community assessments - which topics are relevant and should be emphasized

At least two representatives in a community should be interviewed on each issue to avoid too personal views and interpretations on the subjects.

- The survey team should decide beforehand: which representatives from the community should be selected for the interviews (I-2), and which of the corresponding subjects are of primary interest and can be best addressed by these particular respondents.
 - which points are most important for the group discussions (I-3). According to the size of the survey team, several group discussions could be planned to run simultaneously which survey team member will interview which community representatives and guide which group discussion & mapping.
- Questions selected for use in a specific RAN must <u>be adapted</u> to the group being interviewed and the socioeconomic situation of the community.
- The questions should be formulated during the course of conversation, based on the question guide, but should not be read.

I - 1 Observations by the Surveyor Team

- 1. Type of community
 - Type of settlement (urban, sub-urban, semi-rural, rural, dispersed, dense, etc.)
 - Type of economic activity (agriculture, agro-forestry, agro-fisheries, estates, etc.)
- 2. Living conditions (assessment based on three houses in the community)
 - General conditions of the house (ranking)
 - Size of house, number of bedrooms, location of kitchen
 - Building material used for floors, walls, and roof
 - Drinking water supply

- Energy supply
- Sewage disposal

3. Agriculture

- Cultivation pattern
- Food/cash crops
- Horticulture, intensive or extensive agriculture
- Livestock

4. Health services

- Weight check cards
- Immunization cards
- Oral rehydration treatment salt packages
- Scales
- Books with disease statistics

5. Infrastructure in the community

- School
- Health posts and centers
- Shopping facilities (shops, market)
- Drinking water supply, sewage disposal
- Refuse disposal
- Energy supply
- Transportation (roads, water)
- Police station
- Postal services

I - 2 Semi-structured Interviews

A) Questions for a community leader (L)

- 1. Demographic structure
 - Size of population (men/women, schoolchildren)
 - Family size
 - Ethnic groups

- Religious groups
- Existing governmental institutions
- Other organized groups (NGO's such as saving and credit groups, political groups, mother clubs, boy scouts, etc. and their importance)
- Spoken and written languages
- 2. General living conditions in the community
 - Changes in the community (during the last 10-20 years)
 - Main problems in the community (actual)
 - Main problems in living together in the community and family
 - Income situation
 - Migration to and from the community
 - Infrastructure in the community: (places of worship, schools, health posts and centers, agricultural bureau, shopping facilities (shops, market), drinking water supply, sewage disposal, energy supply, transportation (roads, water), police station, postal service)
- 3. Situation of the economically active population (by age and gender)
 - Economic activities (main types, major employers, unemployment and under-employment, daily wage, seasonality, gender specificity, rural and/or urban)
 - Migration pattern (seasonality, gender specificity).
- 4. Agricultural situation
 - Cultivation pattern (food/cash crop)
 - Land ownership/access to land (average of agricultural land/ownership men/women)
 - Proportion of women engaged in agricultural work and paid employment
 - Rating of agricultural advisory services
 - Rating of credit system, if any
 - Availability of food at the community and household level (own production/purchased food, seasonality, food storage)
 - Food price fluctuations over the past year
- Access to schools
 - Literacy rate (gender specific)
 - Formal/informal education, further schooling
 - Rating of school situation
- Nutritional and health situation
 - Marriage age

- Major illnesses
- Main causes of death
- Rating of health system (government, traditional)
- Position of family planning
- Rating of family planning program, if any
- Rating of food program, if any

B) Questions for teachers (T)

1. School situation

- Access to schools, longest distance from school (time and distance)
- Number of teachers/school child & their professional background
- Number of school children (male/female) (schooling rate, dropout rate, absence, reasons for dropping out and absence)
- Illiteracy and formal school education in the community, detailed according to women and men, and economic, ethnic, and religious grouping
- Further schooling (male/female)
- Rating of school situation

2. Nutritional situation

- Availability of food at the community and household level (own production/purchased food, seasonality, food storage)
- Food price fluctuations over the past year
- Rating of breast-feeding and infant nutrition
- Rating of nutrition for pregnant women and nursing mothers
- Comments concerning distribution of food within the family
- Rating of food program, if any

3. Health situation

- Marriage age
- Major illnesses
- Main causes of death
- Rating of health system (government, traditional)
- Position of family planning
- Rating of family planning program, if any

4. Agricultural situation

- Main problems in agriculture
- Rating of advisory system, if any
- Rating of credit system, if any
- Proportion of women engaged in agricultural work and paid employment respectively
- 5. Situation of water supply and sewage and refuse disposal
- 6. General living conditions in the community
 - Changes in the community (during the last 10-20 years)
 - Main problems in the community (actual)
 - Main problems in living together in the community and family
 - Income situation
 - Migration to and from the community
 - Opinion as to whether women are adequately represented in society

C) Questions for a representative of the health system (H)

(government/traditional)

- 1. Health service situation
 - Number of permanent health staff
 - Professional background of staff members
 - Access to health station, longest distance and time to health station
 - Number of persons cared for
 - Daily visiting rate (infants, schoolchildren, women, men, the elderly)
 - Nearest hospital
 - Medicinal supplies
 - Rating of health system (government, traditional)
 - Cooperation between health centers/posts and traditional midwives and healers
 - Position of family planning
 - Rating of family planning program, if any
 - Rating of immunization program, if any
 - Rating of food program, if any
- 2. Health situation
 - Major illnesses and main causes of death, broken down by
 - infants and women

- social groups
- Proportion of undernourished children

3. Nutritional situation

- Availability of food at the community and household level (own production/purchased food, seasonality, food storage)
- Food price fluctuations over the past year
- Rating of breast-feeding and infant nutrition
- Rating of nutrition for pregnant women and nursing mothers
- Viewpoints concerning distribution of food within the family
- Rating of food program, if any
- 4. Situation of water supply and sewage and refuse disposal

5. General living conditions in the community

- Changes in the community (during the last 10-20 years)
- Main problems in the community (actual)
- Main problems in living together in the community and family
- Marriage age
- Agricultural situation
- Income situation
- Migration to and from the community
- Rating of the workload of women

D) Questions for religious leaders (R)

1. Religious situation

- Access to places of worship, longest distance and time to place of worship
- Number of members of the community who regularly attend religious services (reasons for absence: seasonality, gender or age specific reason)
- Rating of religious situation

2. Nutritional situation

- Availability of food at the community and household level (own production/purchased food, seasonality, food storage)
- Viewpoints concerning distribution of food within the family
- 3. Health situation

- Major illnesses
- Main causes of death
- Rating of health system (government, traditional)
- Position of family planning
- Rating of family planning program, if any
- 4. Agricultural situation
 - Main problems in agriculture
- 5. General living conditions in the community
 - Changes in the community (during the last 10-20 years)
 - Main problems in the community (actual)
 - Marriage age
 - Rating of the school situation
 - Income situation
 - Moving to and from the community
 - Rating of the workload of women

I - 3 Group Discussions with Community Members

The following questions are only suggestions and only the most relevant questions should be selected. The two first questions should always be asked in the **RAN**. Further questions and topic should be selected according to the interest/ the focus of your specific RAN. Your team should agree upon the most needed questions and formulate then the respective question guide. - If your RAN team consists of several members, you might initiate 2-3 group discussions and mappings at the same time.

General situation

- Major problems of the community
- Major problems of the household
- Migration / seasonal migration
- Income generating activities
- Daily work distribution gender specific (work in agriculture, seasonality, child care)
- Water / energy supply
- Perception of services
- Distribution of poverty

Food

Main staple foods and their availability during the year (enter in: "Agricultural calendar")

- Frequency of consumption
- Importance of food (valorization)
- Own production/purchased where?
- Food storage
- Water source and water availability during the year
- Breastfeeding behavior (colostrum / weaning practices / food taboos)
- Nutritional condition of the children and recommendations for improvements

Health

- Ideal number of children for a family gender difference
- Age an infant receives a name
- Signs of whether a child is healthy or sick
- Major illnesses suffered by children and women in the community (seasonality?), enter in: "health calendar"

Type of illness

Symptoms

Incidence

Causes

Treatment

- What can a pregnant woman do to have a healthy child?
- Health service, (distance, expected/existent quality of service, recommendations for improvement)

Agriculture

- Tenure structure of farmed arable land
- "Agricultural calendar"

Main crops - cash/food crop

Main demand for labor (men/women, children, seasonal changes)

Diseases

Fertilizer

Marketability

Livestock

Property & responsibility

Main demand for labor (men/women, children, seasonal changes)

Diseases

Feeding

- Marketability
- Access to credit system (male/female), recommendations for improvement
- Access to agricultural advisory system, recommendations for improvement

2. Survey Forms (SF)

The survey forms which can be downloaded here (<u>survey-forms.doc</u>) should assist in the **implementation of surveys**. The survey forms should be considered as an aid. If necessary, they should be <u>adapted</u> to the specific situation of a survey, and not be considered binding.

The survey forms are provided to

- guide you again on the points considered as important for observation, interview and group discussion
- fill in the results of the observation, semi-structured interviews and group discussions with community members of all communities.
- visualize the results obtained in all communities, to compare them and to identify weaknesses and strengths.
- include the available resources and existing habits in the analysis of alternatives

3. Analysis Forms (AF)

The Analysis Forms compare data from National Average, Province and District to identify limited resources and problems, and to help justify the selected area for the future project/program implementation. These data are later compared with the assessment findings in the 5 communities. They can be downloaded here (analysis-forms.doc)

In general at the District and Communities level, the socioeconomic situation of the population and the supply of resources should be <u>worse</u> than at the National Average and Province level, to be sure/justify having selected an area with poverty conditions.

A picture of seasonality in the future project area is given on the summarizing form (AF-1), which includes data about climatic conditions, agriculture, health conditions, nutritional status, and gender specific work load. The seasonality data should be obtained at the district level from the different sectors (agriculture, health) and be verified by the assessment data at the community level. The form shows the interrelation between climate, agricultural production and food prices, availability of food, and health and nutritional situation of the main target groups. The work load of women influences their caring capacity and limits further income generating activities.

4. Measurement of body stature of schoolchildren

The standing body height (stature) of the schoolchild is measured in a standing position (Survey Form SF-10). The child should stand without shoes on a level floor and should lean with its back against a wall. The child then draws himself or herself to full stature without raising the shoulders, with hands and arms hanging relaxed, with the feet flat on the ground. The legs and heels should be placed against each other. The buttocks, shoulder blades and head should rest against the wall. The estimated line between the eyes and the auditory passages should be level with the floor.

The stature should be measured using a microtoise fixed to the wall (to the nearest 0.1 cm). If a microtoise is not available, a wooden rule or a measuring tape (preferable a tape made out of fiberglass) should be placed against the wall. When measuring stature, the measuring tapes or wooden rules in which a device is placed on the head when the tape or rule is fixed to a wall should not be used, and the scale should commence at 0 cm at the floor. Otherwise the result can be about 1 cm short.

A wooden or metal right angle should be employed in measuring. This instrument is places lengthwise against

the measuring tape on the wall and is pressed gently against the head so that the stature can be read on the measuring tape in cm.

Measuring tapes are sometimes calibrated in inches and centimeters on the same side. These can be confusing during measurement.

5. Literature for further study

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