

From whom do mothers receive their nutrition knowledge? Participatory stakeholder analysis in northern Benin



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Introduction

- Child Feeding (CF) is one of the triple reproduction roles of woman, who do this based on their knowledge and capacities.
- However, little information is available about how this knowledge builds up and from whom the women receive information and advice.
- Learning about different actors involved and their roles would be useful to facilitate future nutritional education interventions.



Methods

- Transdisciplinary project in peri-urban (PU) and rural (R) area in Banikoara and Nikki Communes.
- Stakeholder analysis conducted by developing series of Venn diagrams with mothers (N=6), fathers (N=3) and managers of government structures / non-governmental organizations (NGOs) (N=5).

Study aims to identify stakeholders and their importance in mothers' acquisition of CF knowledge.

Results

The picture below presents a Venn diagram (VD) made by mothers..



Picture 2: Explanation of Venn diagram process with mothers in Gougnirou



Picture 3: Mother in Gougnirou making Venn diagram

Highlights

For mothers acquiring knowledge on feeding children under 5 years:

- This was complemented by individual interviews (N=17) and focus group discussions (N=9).
- Recordings of interviews were transcribed and analyzed using content analysis with MAXQDA software.

Results

According to Picture 1, to acquire knowledge about CF, mothers of children under 5 years refer to stakeholders in the following priority:

- 1- Mother-in-law
- 2- Oldest woman in the household
- 3- Father-in-law
- 4- Brother-in-law ⁵
- 5- Husband ^{1,4}
- 6- Community Health Volunteer (CHV)
 7- Doctor ⁸

Picture 1: Venn diagram made by mother at Gougnirou, Banikoara

Three main actors important in CF knowledge acquisition by mothers:



Four types of relationships between the mothers and the other stakeholders:

- Family members are the first source
- Older generation has great influence
- CHVs are more important in rural than in peri-urban area



8- Traditional practitioner ⁷
 9- Friend ^{6,4}

► 10- NGO

The superscript numbers indicate the variation in the priority (position) of the stakeholders in other VDs.

Main differences between the Venn diagrams

Mothers & fathers

For the fathers, they are primary stakeholders but they recognize that, due to their absence from home, their wives are much closer to the mothers-in-law.

"First, the wife comes to see her husband and the husband sees his father and then his mother." (Participant 1, fathers VD1, R1)

"They are always together, even at this time, if something happens, we are not at home, so she will ask the motherin-law first." (Participant 3, fathers VD3, R3)

Acquisition of information (advice, knowledge)

Provisioning (financial/food)
 Childcare (e.g. washing, dressing)
 Medical treatment of children

Picture 4: Focus group discussion with fathers in Nimbéré Peulh

Acknowledgement

The NaviNut project is funded by the Federal Ministry of Food and Agriculture (BMEL) based on a decision of the Parliament of the Federal Republic of Germany via the Federal Office for Agriculture and Food (BLE). • Mothers in rural & peri-urban area

In peri-urban area, the Social Promotion Centre (SPC) is added as stakeholder instead of the CHVs in rural areas

"Here, we have CHVs, but they are not so important because they don't have medical inputs like those in the village." (Participant 3, mothers VD1, PU1)

