



Women Improving Nutrition
through Group-based Strategies

Impacts of nutrition-intensification efforts integrated into a women's self-help group-based livelihood project on women's nutrition: evidence from India



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Photo by Kalyani Raghunathan

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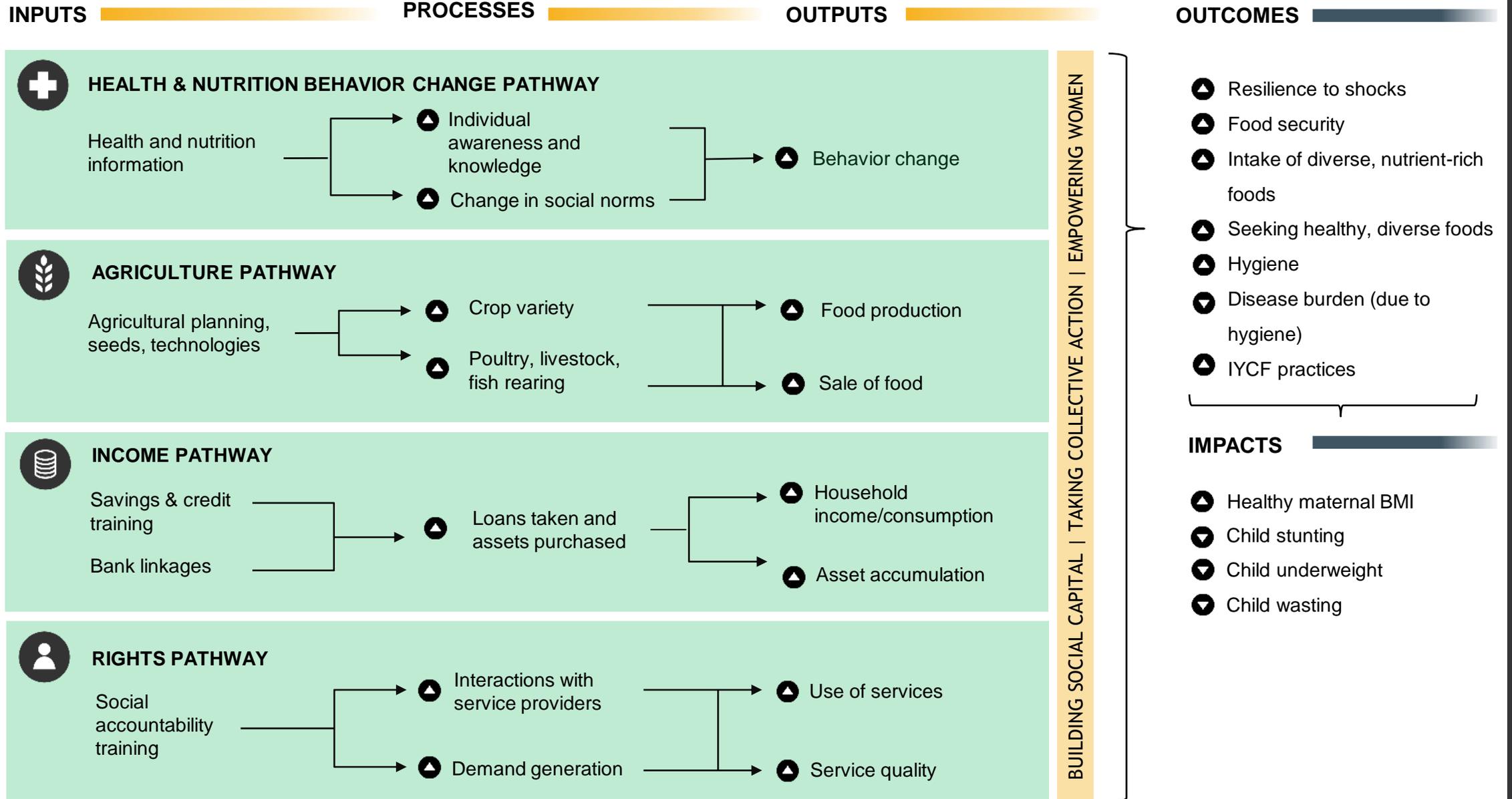
Thematic Parallel Session: Women's empowerment in agriculture and nutrition | July 1, 2021

WINGS overview

- Our work under WINGS had three components:
 - I. **Develop a conceptual framework** and **synthesize the literature** around women's groups and nutrition outcomes
 - II. Conduct a rigorous impact evaluation that **provides evidence on pathways**
 - III. **Highlight relevant lessons** for investments in women's collectives in India and worldwide

- Most of the evidence on women's groups is from South Asia; there is obvious interest in what can be adapted—and eventually scaled up—in Africa

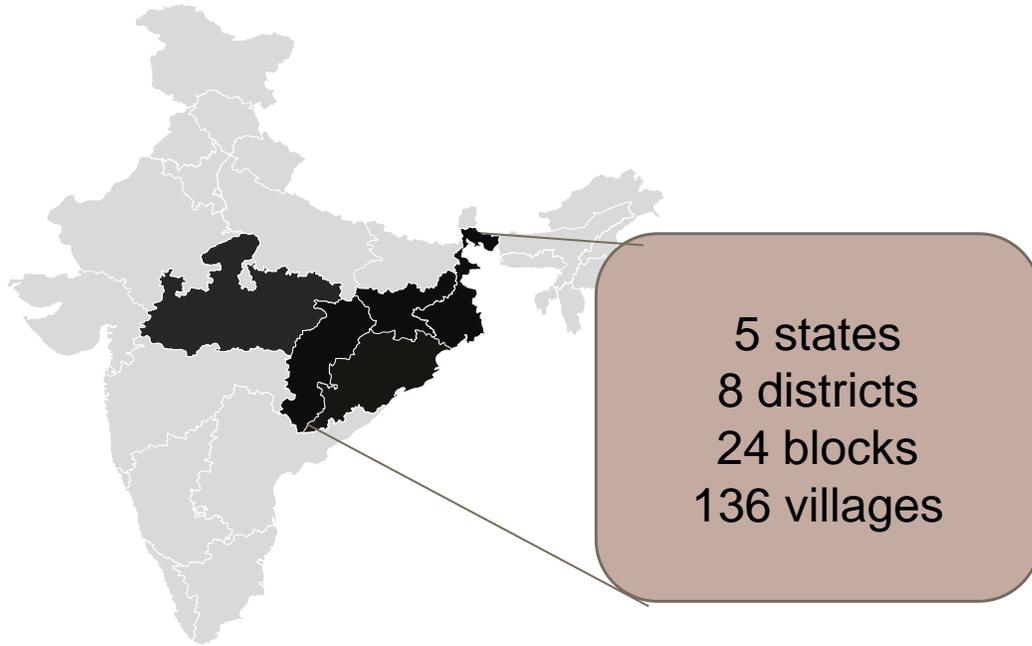
- Yet, evidence on **the pathways** through which women's collectives can help achieve desired outcomes is limited



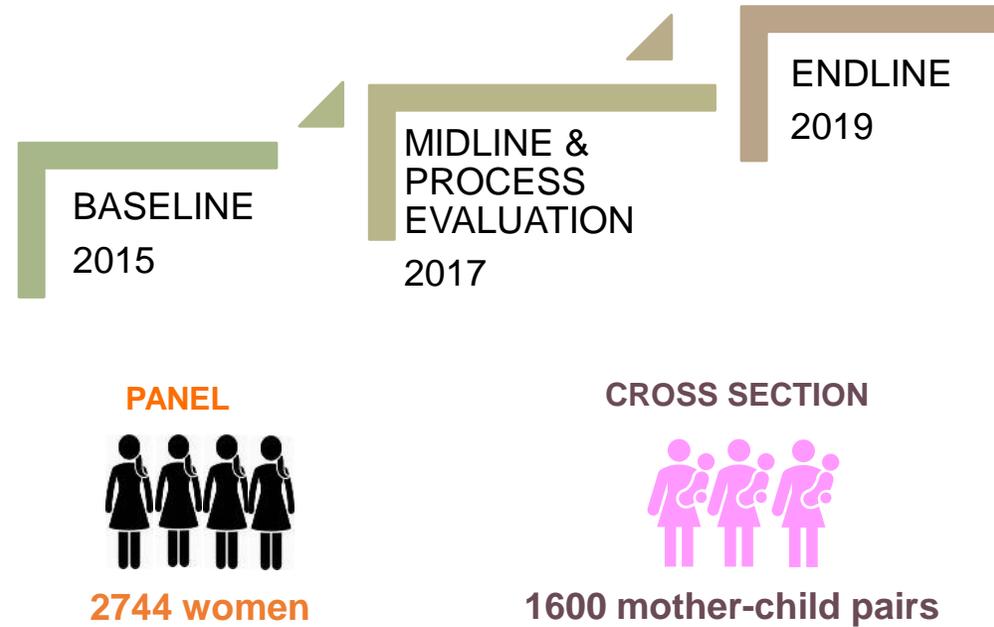
Impact evaluation of the Nutrition-intensification (NI) model



- Layering of nutrition behavior change communication (BCC) onto the existing PRADAN SHG platform.
- Poshan Sakhis convene SHG meetings and provide information on health and nutrition practices
- This nutrition BCC integrates all 4 of PRADAN's areas of focus – livelihoods, health, entitlements and gender – into the nutrition messaging.
- Additional focus on community engagement and strengthening of higher-level federations



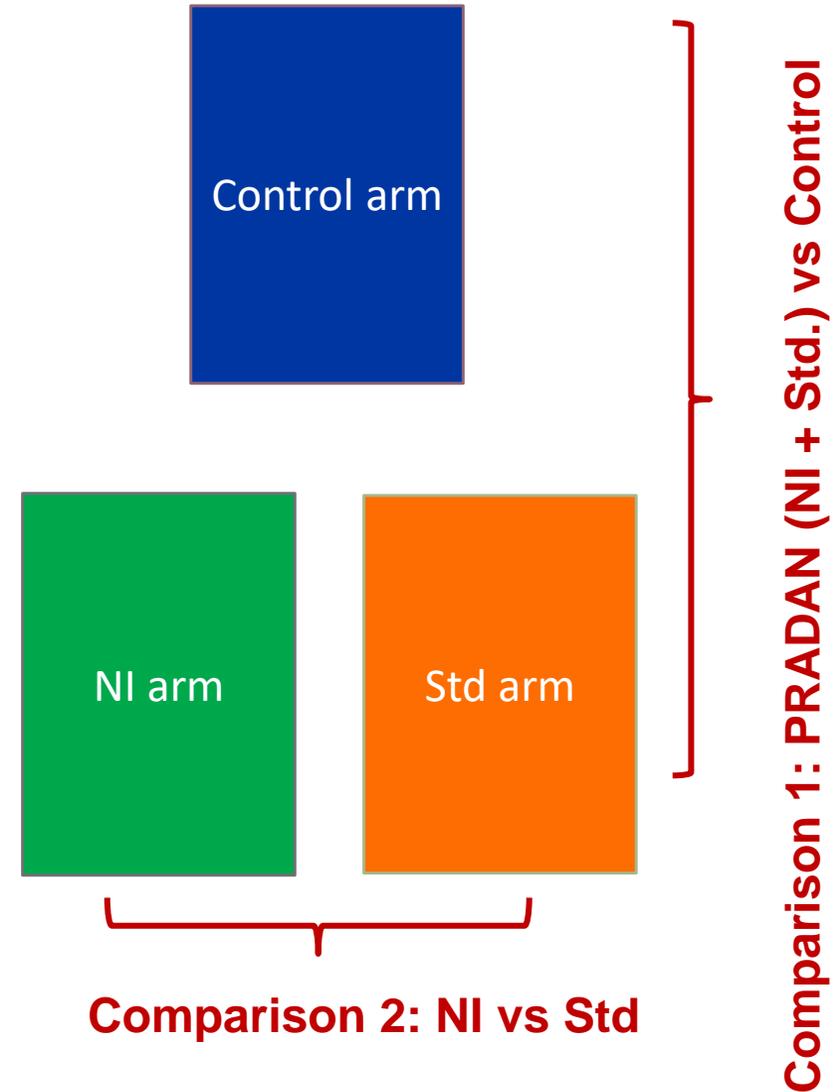
- States and districts were purposively chosen in consultation with PRADAN
- Three blocks were selected in each district – control, PRADAN’s standard model (Std), and the PRADAN NI model
- 5 villages selected at random from each block in the PRADAN arms, 7 from the control blocks



- Ever-married women aged 15-49 yrs were eligible for inclusion in panel survey: 2015, 2017, 2019
- Woman with a child aged 6-23 months (not in the panel survey) eligible for inclusion in cross section survey *only in* NI and Std arms: 2017, 2019
 - CS survey is a repeated cross section, NOT a panel

WINGS evaluation design

- Primary outcomes: women's BMI and dietary diversity
- Main research questions:
 - What was the **impact of PRADAN's interventions (Std & NI)** on the outcomes of interest relative to the control? (Comparison 1)
 - What was the **added impact of the NI interventions** over and above PRADAN's core model? (Comparison 2)





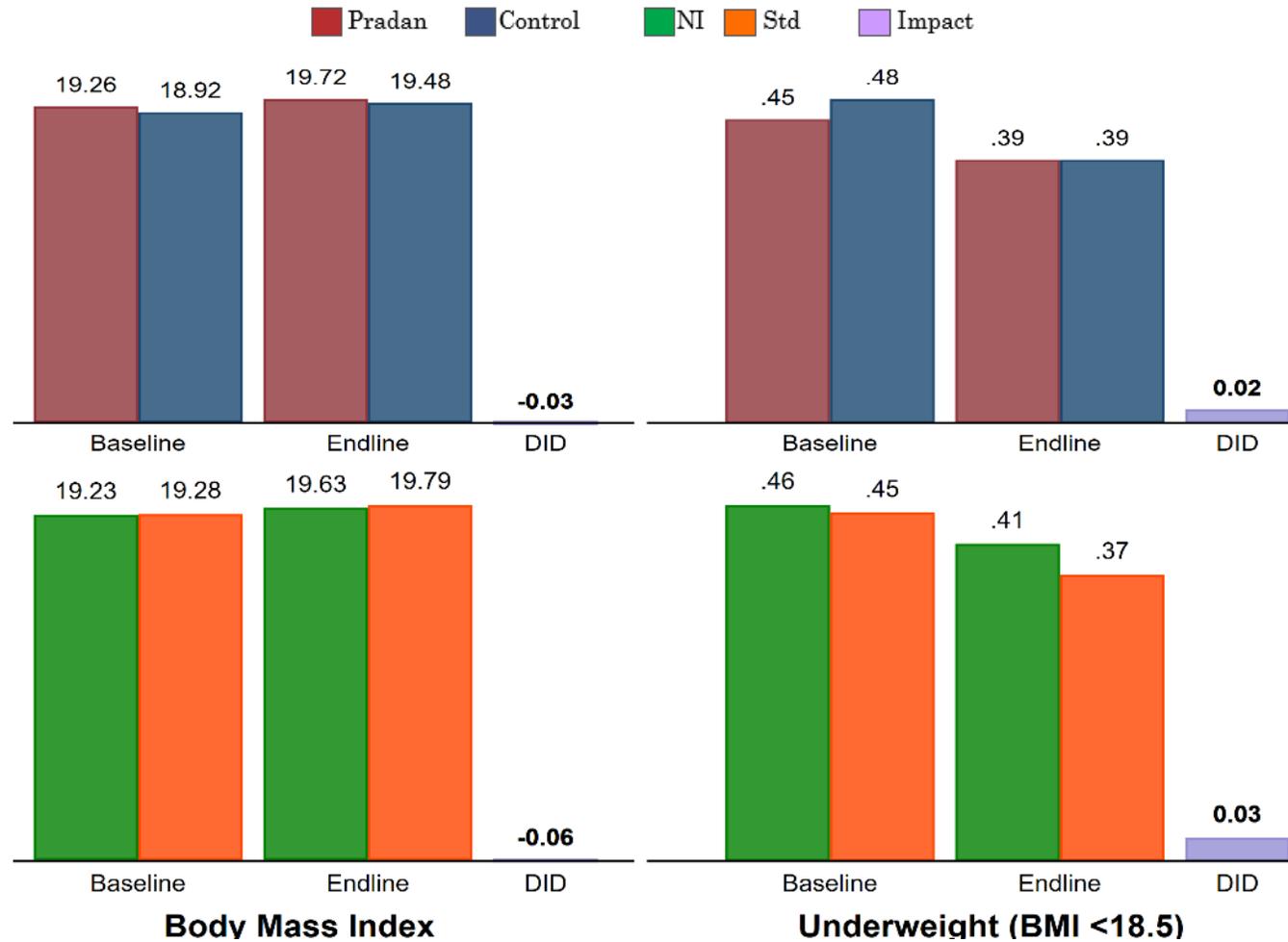
Impact results

Primary outcomes: women's BMI and dietary diversity



Women's anthropometry

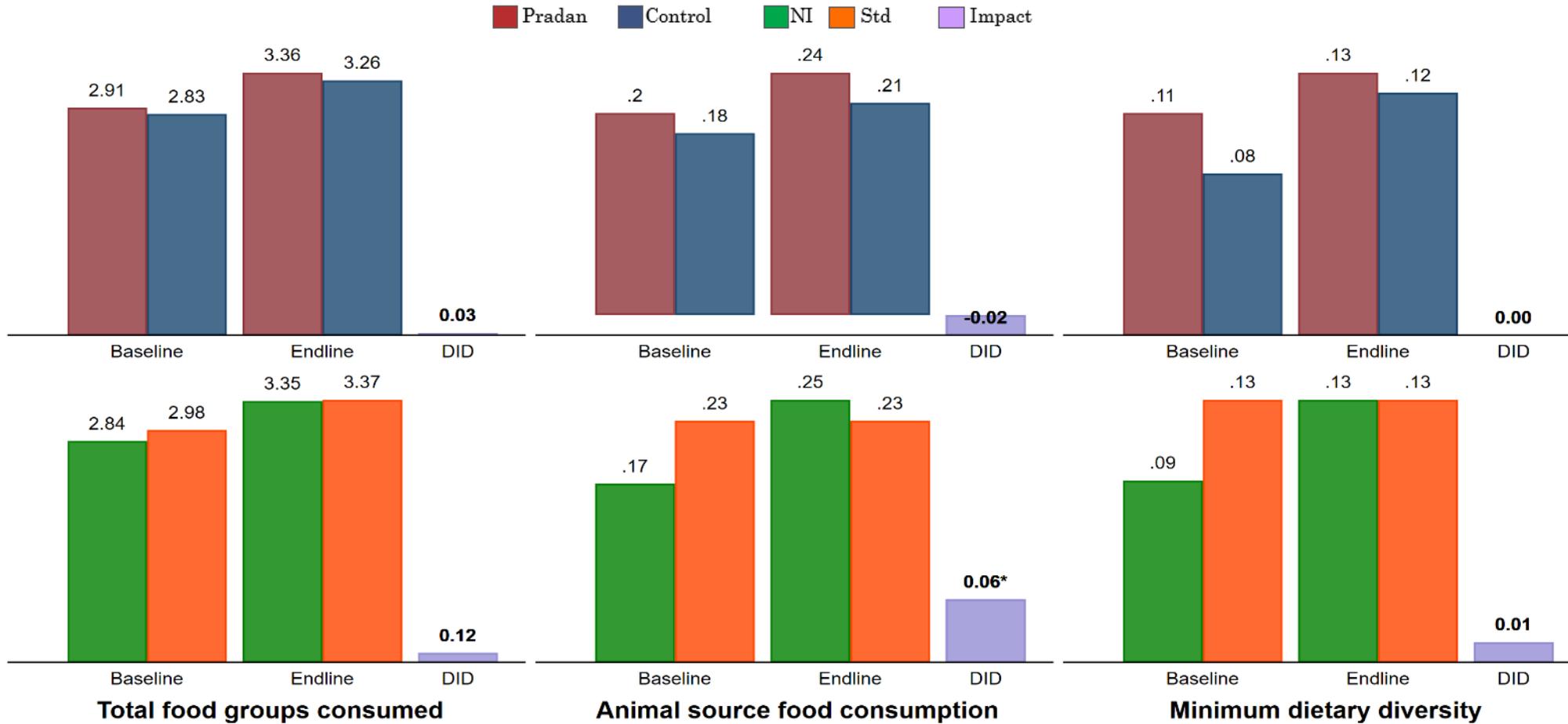
No impacts on women's BMI or likelihood of being underweight





Women's diet

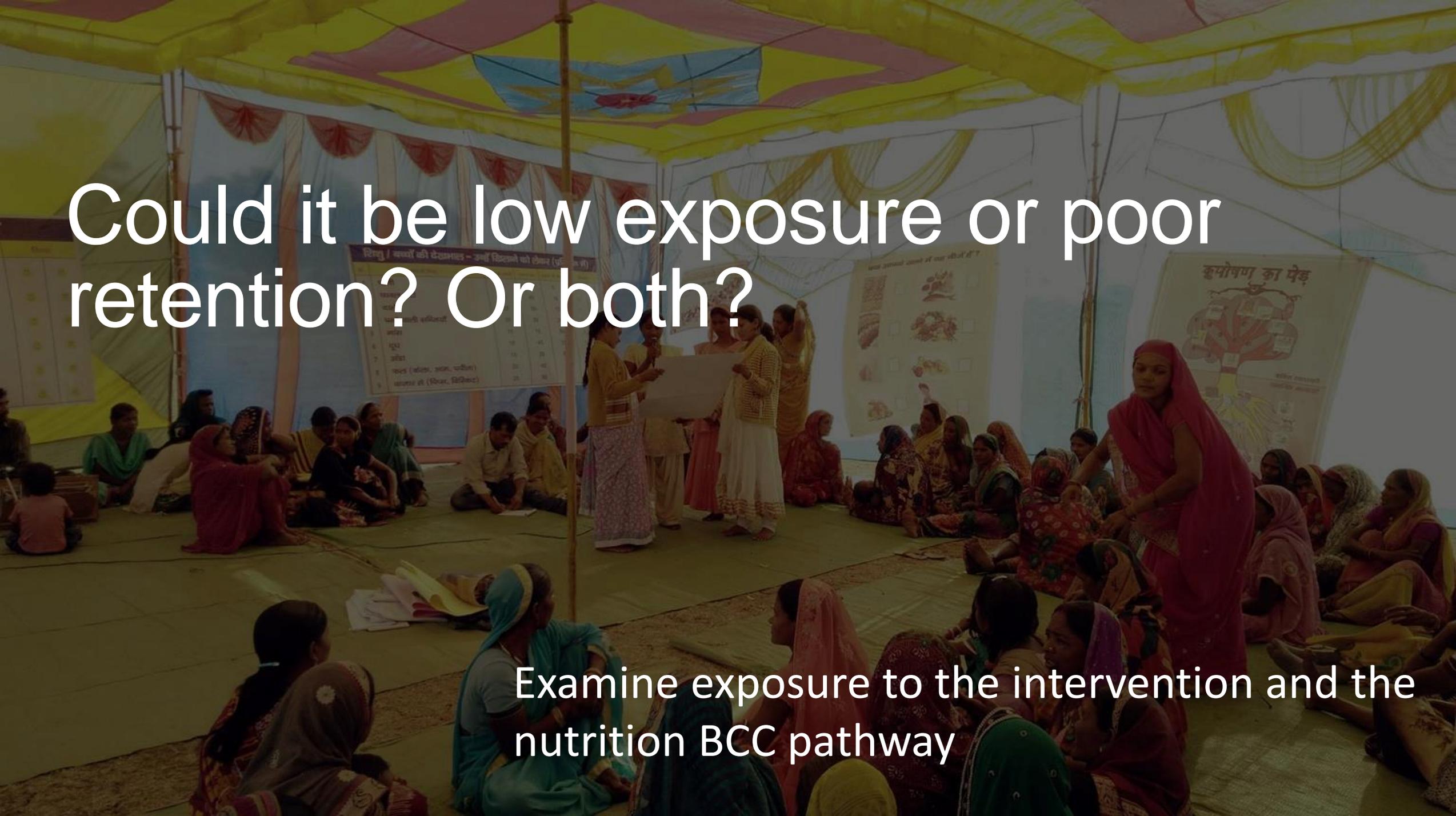
No impacts on women's dietary outcomes



Note:

1. Total food groups consumed is calculated out of 10 possible food groups consumed yesterday
2. Minimum dietary diversity is defined as consuming 5 out of 10 possible food groups consumed yesterday

*p<0.1, **p<0.05, ***p<0.01

A community meeting is taking place under a large tent with a yellow and pink striped canopy. The interior is decorated with colorful bunting. Several educational posters are displayed on the walls. One poster on the left is titled 'विषु / कार्यों की देखभाल - उर्जा दिखाने की शीट (प्रति 1000)' and lists various activities. Another poster in the center shows illustrations of fruits and vegetables. A third poster on the right is titled 'दुपोषण का पैर' and features a tree diagram. A group of women, some wearing headscarves, are seated on the floor, listening to a presentation. A woman in a white and yellow sari is standing and holding a large white sheet of paper, possibly a poster or a list. Other women are standing and looking at the paper. The overall atmosphere is one of a community education session.

Could it be low exposure or poor retention? Or both?

Examine exposure to the intervention and the nutrition BCC pathway

Exposure to the intervention

- Exposure to intervention specific messages is highest in the NI arm, but is still consistently low at <25% of the sample
- Exposure to messages on child feeding was very uniform across arms. Exposure to complementary feeding messages was low at ~40%. Other messages had been heard by ~60% or more women.
- Exposure to messages on early marriage & pregnancy was also similar across arms. Reasonably high for most messages except safe contraceptive methods.

Retention of messages

- No impacts on knowledge on breastfeeding, animal source food feeding, WASH practices and nutrition for pregnant women & anemia



Exploring the other pathways

Summary of results along the other pathways-1

Agriculture

- Positive impact on food security
- Positive but small impacts on awareness of home gardens and on cultivating home gardens all year-round – slightly larger for NI vs Std.
- Positive impacts on the cultivation of fruits and vegetables in the home garden in the NI arm versus the Std arm

Income

- Positive impacts on animal source food consumption in the PRADAN vs control arm, and on total and food consumption expenditure in NI vs Std arm.
- Positive impacts on number of types of assets and productive assets owned in the Pradan arm vs control arm.
- Negative impacts on number of small livestock assets in the NI vs Std Arm

Summary of results along the other pathways-2

Rights

- Positive but small impacts on awareness of government schemes (excluding maternity schemes) in NI vs Std.

Women's empowerment

- The overall composite measures indicate that empowerment has improved over time in all arms
- We see large improvements in women's and men's 5DE scores, and a reduction in intra-household inequality
- Overall, however, the intervention does not appear to have differentially impacted the cross-cutting pathway of empowerment

What can we take away?

Targeting and participation



- Important to tailor the messages being delivered to the *type* of group being targeted
- Even with the 'right' messages to the 'right' people, impact depends on *intensity* – how many women are participating in these groups
- Very little evidence that diffusion is actually happening!

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Going beyond the woman



- 'It takes a village to raise a child' - it also takes a village to change norms
- Nutrition-related decisions are not made by the woman only
- Often men control resources, mothers-in-law control decisionmaking
- It is important that messages reach and involve all members of the family
- And also, other members of the community

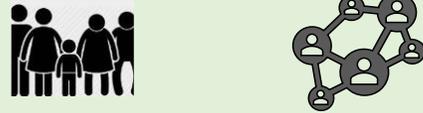
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BCC improves knowledge...



- ...But knowledge does not necessarily result in action
- We need fewer studies showing that first link (BCC to knowledge)
- ...and more investigating the second link
- What are the barriers and facilitators to adoption of improved practices? How can these be eased?
- Specifically, resource constraints, time constraints, cognitive burdens, supply side constraints

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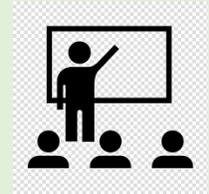
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Pedagogical methods



- What other innovative methods can one explore to deliver knowledge?
- Community needs assessment for tailoring information
- Participatory methods, e.g. PLA – evidence that these work well
- Hands-on practical demonstrations (cooking demos, recipe sharing, healthy eating fairs etc)

Our partners and our team

It takes a village...

- **PRADAN:** Avijit Choudhury, Madhu Khetan, block team leaders
- **PHRN:** Vandana Prasad, Aditi Hegde, Haldhar Mahto, Ganapathy Murugan
- **OPM:** Prabal Singh, Vineet Keshaw, Ishleen Sethi, Nayan Kumar, Rituparna Sanyal, Arpita Ghosh
- **IFPRI:** Neha Kumar (co-PI), Agnes Quisumbing (co-PI), Purnima Menon, Samuel Scott, Kalyani Raghunathan, Shivani Gupta, Giang Thai, Mrignyani Sehgal, Samyuktha Kannan, Alejandra Arrieta, Amir Jilani, Tarana Chauhan, Suman Chakrabarti, Shinjini Pandey, Nicole Rosenvaigue, Wilmer Gutierrez
- **IFPRI affiliates:** Carly Nichols, Kenda Cunningham, Gargi Warble, Parul Tyagi, Kripa Rajagopalan

