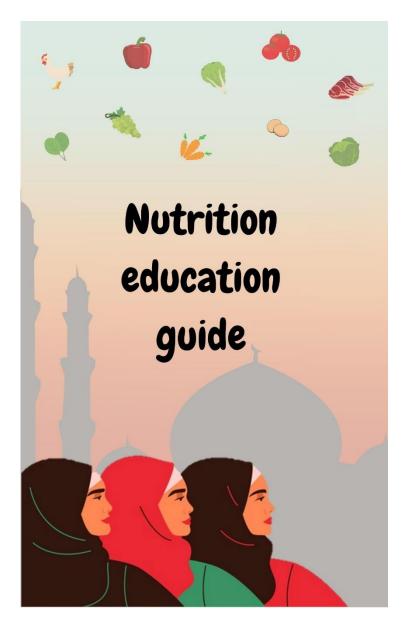
Village of Peace: Nutrition education in Afghanistan

Report on review and redesign of nutrition training materials developed by Village of Peace



Team number: 3158

Project name: Promoting good nutrition in a humanitarian emergency: what are the most effective methods, tools, and approaches?

Team members: Anastasia Astuti, Tjarda Bergsma, Ayusha Chalise, Sanne Haanstra, Sophia Khosravi, Joëlle Stoop, Tinka Suijten & Anna Vos

Commissioner: Katherine Pittore & Julia Glaser, Wageningen Centre for Development Innovation, commissioned by Village of Peace (VoP) and the Science Shop of Wageningen University June 2023

Colophon:

This report (product) is produced by students of Wageningen University as part of their MSc-program. It is not an official publication of Wageningen University or Wageningen UR and the content herein does not represent any formal position or representation by Wageningen University.

© 2023 Anastasia Astuti, Tjarda Bergsma, Ayusha Chalise, Sanne Haanstra, Sophia Khosravi, Joëlle Stoop, Tinka Suijten & Anna Vos. All rights reserved. No part of this publication may be reproduced or distributed, in any form of by any means, without the prior consent of the authors.

Katherine Pittore, Wageningen Centre for Development Innovation:

Email: katherine.pittore@wur.nl

T: +31(0)317 488822

M: +31(0)628 397857 (also WhatsApp)

Julia Glaser, Wageningen Centre for Development Innovation:

Email: julia.glaser@wur.nl

T: +31 317486781

M: +31628864327 (also WhatsApp)

Anastasia Astuti, Project Manager:

Email: anastasia.anastasiakarinadewiastuti@wur.nl

T: +31 623565569

M: +43 6609616093 (WhatsApp)

Sanne Haanstra, Secretary:

Email: sanne.haanstra@wur.nl

M: +31621341152

Source illustration cover page:

Example for cover of a handbook that could be used by VoP, made by the team in Canva

List of Abbreviations

| ВСС | Behaviour change communication | | |
|--------|--|--|--|
| FAO | Food and Agricultural Organization | | |
| FBDGs | Food-based dietary guidelines | | |
| GoIRA | Government of the Islamic Republic of Afghanistan | | |
| HDG | High Diversity Gardening | | |
| IPC | Integrated food security Phase Classification | | |
| Kcal | Kilocalorie | | |
| NGO | Non-Governmental Organization | | |
| NNS | National Nutrition Survey | | |
| SBCC | Social and behaviour change communication | | |
| SEM | Socio-Ecological Model | | |
| UNICEF | The United Nations International Children's Emergency Fund | | |
| USAID | The United States Agency for International Development | | |
| VoP | Village of Peace | | |
| WASH | Water, Sanitation and Hygiene | | |
| WFP | World Food Program | | |
| WHO | World Health Organization | | |

Executive summary

This report presents a review and redesign of the nutrition training materials of Village of Peace. Village of Peace is a Non-Governmental Organization that works in Afghanistan on two main challenges that the country faces: food insecurity and malnourishment. Village of Peace's goal is to tackle these challenges by targeting widows and orphans through nutrition and gardening trainings. The widows are targeted because they are a part of the most vulnerable segment of the population while the orphans can attend these trainings to relay information to the widows. Directly targeting widows is not possible due to the restrictions of the Taliban. Providing nutritional education alongside training in food production can promote self-sufficiency and resilience in communities, which can ultimately reduce dependency on external aid over time.

The nutritional training materials have been reviewed and redesigned because they lack academic substantiation, and it is uncertain whether they are in line with international guidelines. The materials have been reviewed and redesigned on the basis of information that has been gathered with literature reviews, documentation analyses, and interviews. In the report, the following research questions will be answered:

- 1. What are the training materials of VoP and what information do they contain?
- 2. What are the (inter)national guidelines for optimal nutritional intake and status, young child feeding and WASH practices?
- 3. What are the ways comparable organizations in Afghanistan employ BCC?
- 4. In what ways can the nutrition training materials developed by VoP be improved according to the Afghan cultural context, international guidelines and BCC principles?
- 5. What are the possibilities and considerations for upscaling VoP's activities and nutrition training?

The review and redesign are based on the following information. First, majority of the people in Mazari-Sharif, one of the areas in which Village of Peace operates, face food insecurity. This situation is influenced by the political, social and economic context of Mazar-i-Sharif. Other important contextual factors that have been considered are the diet of the people in Mazar-i-Sharif and their nutritional deficiencies. Second, the review and redesign are based on the national and international nutrition guidelines on dietary intake, child feeding practices, breastfeeding, food preparation and water, sanitation and hygiene practices. These guidelines are retrieved from the Food and Agriculture Organization, the World Health Organization, the United Nations Childrens' Fund and the Ministry of Public Health in Afghanistan. Third, the general principles of behavioural change communication have been applied to the redesign. In the review, the positive and the negative aspects of the training materials are pointed out. In the redesign (chapter 4.4), practical recommendations are given for improvements in the contents and teaching methods of the training materials.

The review and redesign contain the following recommendations, regarding the contents (what the message is), tools (how the message is presented) and training methods (how the message is conveyed).

Regarding the contents:

- It is good that some macronutrients micronutrients are already highlighted in the training materials. However, there are still some lacking. Therefore, the recommendation is as follows:
 - Include carbohydrates and fats
 - o Include minerals, particularly iron, iodine, and zinc
 - Focus on vitamin A and D
- It is good that the importance of a varied diet is emphasized. However, it is not specified what this varied diet consist of; in what proportions it should be consumed; and what the nuanced differences are in the diet for women, men, girls and boys. Therefore, the recommendation is as follows:
 - o Add what the varied diet consists of
 - Make a visualization of food groups and the corresponding nutrients/foods
 - o Add proportions of food groups that should be consumed daily
 - o Add gender and life stage specific information on nutrient deficiencies
- There is some information on breastfeeding in the training, but it is not comprehensive enough. Therefore, the recommendation is to elaborate on breastfeeding education in the domains of:
 - Feeding frequency/age
 - o Introduction of solids (when, how and what)
 - Hunger and fullness cues
 - o Proper breastfeeding techniques
 - Food preparation for infants
- It is good that a variety of symptoms of malnourishment is included in the training, instead of
 focusing merely on height and weight. However, the consequences of malnourishment during
 pregnancy are not included. Therefore, it is recommended to include this information in the
 training as well.
- There are various instructions for food preparation and food safety included, but they are not
 in line with the (inter)national guidelines. Furthermore, Water, Sanitation and Hygiene
 practices, and food storage practices, are not yet included in the materials. Therefore, the
 recommendation is as follows:
 - Change information on food preparation in accordance with (inter)national guidelines
 - Include WASH practices
 - Add information on food storage

Regarding the tools:

- It is good that Village of Peace provides a manual for the nutrition education staff. However, they do not provide a handbook with visuals for the participants after the training so that they can remember information. Therefore, it is recommended to develop a handbook or small booklet with visuals for the participants for them to take away after the training.
- It is effective that Village of Peace uses visuals in their training. However, they are not simple enough, nor self-explanatory. Furthermore, the visuals are not culturally appropriate. An example of a culturally appropriate visual can be found in Figure 8. The recommendation for the visuals is as follows:
 - Make the visuals simple with no text with language they speak for familiarity
 - Make the visuals self-explanatory
 - Prioritize the Do's instead of the Don'ts
 - o Make the visuals more culturally appropriate

Regarding the training methods:

- According to behavioural change communication principles, it is important to first identify
 opportunities, motivations and barriers for change for the targeted population. Therefore, the
 recommendation is to first identify limitations or motivations for behaviour change before
 designing an intervention.
- It is good that storytelling and roleplay are used as teaching methods. However, both storytelling and roleplaying games are only included in the training for the women. Therefore, the recommendation is to include storytelling and roleplay in the training for men as well.
- It is good that games are included in the training. There is no further recommendation.
- It is good that workshops are included in the training. However, they lack interactive discussions with trainers and the participants. Therefore, the recommendation is to add space for discussions in small groups, questions and clarifications.
- It is good that cooking is included in the training since it is an effective way to engage with participants and enhance learning. However, it is only included at the end of the training. Therefore, the recommendation is to make cooking a larger part of the training.
- It is wise to ask the target population how they would like to be helped. This is not included yet. Therefore, the recommendation it to add focused group discussions on how the target population would like to learn and be trained.
- Religious leaders can play an important role in disseminating training information. They do not
 play a role yet. Therefore, the recommendation is to give a role to religious leaders in
 disseminating training information.
- It is good that the training includes a part with reflection at the end. This should be sustained and even expanded, since the trainees will be stimulated more to think about what they have learned and how they can share it with others. Therefore, the recommendation is to make reflection and evaluation a bigger part of the training.
- An important part of Afghan society is the communal lifestyle. This characteristic should be taken into account when giving the training, by increasingly encouraging ownership building, which directly relates to knowledge sharing and peer learning. Therefore, the recommendation is to focus on ownership building when emphasizing the importance of the dissemination of information.

After the review and redesign, the possibilities and considerations for upscaling the activities of Village of Peace are presented. This report will give the commissioner more insights in the strengths and shortcomings of nutritional training materials based on aforementioned information and give Village of Peace practical ideas for how to improve their materials.

Table of Contents

| 1. | L. Introduction | 1 |
|----|--|----|
| | 1.1 The Current Situation in Afghanistan | 2 |
| | 1.1.1 Socio-political context: for women | 2 |
| | 1.1.2 Economic context | 3 |
| | 1.1.3 Health Crisis | 3 |
| | 1.1.4 Environmental Effects | 4 |
| | 1.2 NGO: Village of Peace | 5 |
| | 1.2.1 High Diversity Gardening & Nutrition Education | 5 |
| | 1.3 This report: Analysing VoP's Nutrition Education Materials | 6 |
| | 1.3.1 Theoretical framework | 6 |
| | 1.3.2 (Inter)national guidelines | 6 |
| | 1.3.3 Contextual considerations: Afghan diets, Islam food | 6 |
| | Islam | 6 |
| | Diet | 7 |
| | 1.3.1 Research Questions | 8 |
| | 1.4 Report Structure | 8 |
| 2. | 2. Theoretical framework | 9 |
| | 2.1 What is BCC? | 9 |
| | 2.1.1 Behaviour change techniques | 9 |
| | 2.1.2 Strategies and important considerations | 10 |
| | 2.1.3 Examples of BCC in programmes | 11 |
| | 2.1.4 BCC and the VoP project in Afghanistan | 11 |
| | 2.2 The Socio-Ecological Model of Health | 12 |
| | 2.3 Conclusion | 13 |
| 3. | 3. Methodology | 14 |
| | 3.1 General remarks about interviews | 14 |
| | 3.2 Training materials VoP | 15 |
| | 3.3 (Inter)National guidelines | 15 |
| | 3.4 Employment of BCC | 16 |
| | 3.5 Review, redesign and upscaling | 16 |
| | 3.6 General limitations | |
| | 3.7 Conclusion | 17 |
| 4. | l. Results | 18 |
| | 4.1 Training materials VoP and their contents | 18 |
| | 4.1.1 Nutritional training materials | 18 |

| | Why do we need a healthy diet? | .18 |
|---|--|------|
| | What is a healthy diet? | .19 |
| | How do we prepare a healthy diet? | . 20 |
| | Baby feeding | .21 |
| | 4.1.2 High diversity gardening training materials | .21 |
| | 4.1.3 Interim conclusion | .22 |
| 4 | 2 (Inter)national guidelines | . 23 |
| | 4.2.1 International dietary guidelines | .23 |
| | 4.2.2 National food-based dietary guidelines for Afghans by FAO 2016 | .24 |
| | 4.2.3 Breastfeeding Practices and Introducing New Foods | .25 |
| | 4.2.4 Food safety, food preparation and WASH | .28 |
| | 4.2.5 Interim conclusion | .28 |
| 4 | 3 Employment of BCC | . 29 |
| | 4.3.1 Organizations working with BCC | .29 |
| | 4.3.2 Interim conclusion | .29 |
| 4 | 4 Review and Redesign | .30 |
| | 4.4.1 Content: What is the message? | .30 |
| | Macronutrients | .30 |
| | Micronutrients | .30 |
| | Dietary diversity | .31 |
| | Infant nutrition: Breastfeeding & Food transition | .32 |
| | Symptoms of Malnourishment | .33 |
| | Food preparation, Food safety & WASH practices | .33 |
| | Food storage | .35 |
| | 4.4.2 Tools: How is the message presented? | .35 |
| | Teaching guides | .35 |
| | Visuals | .35 |
| | 4.2.3 Methods: How is the message conveyed? | .38 |
| | Behaviour change communication | .38 |
| | Storytelling & Role-playing | .38 |
| | Games | .39 |
| | Workshops | .39 |
| | Cooking | .40 |
| | Focused group discussion | .40 |
| | Religious leaders | .40 |
| | Reflection and evaluation | 41 |

1. Introduction

In Afghanistan, nearly 20 million people are currently food-insecure, constituting 52.6% of the population, while 6 million people are facing famine-like conditions (WFP, 2023). According to the Integrated Food Security Phase Classification (IPC, 2023), the level of food insecurity experienced in the Northern region of Mazar-i-Sharif is classified as critical. Female-headed households (widows, and single women with dependents), however, are disproportionately affected by food shortages, where the prevalence of food insecurity reaches 100% (Amnesty International, 2023; IPC, 2023; WFP, 2023). As of April 2023, approximately four million Afghan children and women suffer from acute malnutrition (IPC, 2023). Restrictions imposed by the Taliban on women's rights to go to school, university, work, or move freely, severely limit the capacity of (widowed, or single) women to feed themselves, or their children (Amnesty international, 2023; UNICEF, 2023a). Restricted and monitored media, and bans on female NGO workers, also provide for difficult circumstances to supply aid (UNICEF, 2023a; UNICEF, 2023b).

This report aims to identify methods, tools, and approaches for providing effective nutrition education in the humanitarian emergency in Afghanistan, specifically in the Mazar-i-Sharif region. This is accomplished through analysis of the nutrition (training) materials employed by the NGO, Village of Peace (VoP). The remaining introduction explains the current context in Afghanistan relating to: socio-political, economic, health, and environmental aspects, focusing on widows and orphans where available data allows. Followed by an introduction of Village of Peace and their activities regarding food security through the coupling of High Diversity Gardens (HDG) and nutrition education. Concluding with concepts considered in the review and redesign of VoP's nutrition training materials - comprising international nutrition guidelines and contextualities of Afghan culture (role of Islam in food practices and nutrition, and current diets in Afghanistan), and the research questions answered in this report. Definitions of terms used can be found in Appendix A.

1.1 The Current Situation in Afghanistan

To communicate the nuance of the current situation in Afghanistan, this report prefaces with an introduction to illustrate the socio-political, economic, and environmental parameters that characterize Afghanistan, to the extent that available resources allow. The focus of this report is on the city of Mazari-Sharif, in the northern province of Balkh (indicated in Figure 1). Where data is available, figures will be used focusing on this region, where unavailable, national statistics will be used to sketch the general, national context. Food security is considered a pillar of a nation's economic development (Todaro & Smith, 2009), the key features of which include the availability, affordability, and accessibility of domestic food supply (FAO, 2021). The following sections will be aligned along these 3 factors characterizing a nation's level of food insecurity.



Figure 1. Map of Afghanistan, with Balkh province and Mazar-i-Sharif. From Nelson (2010).

1.1.1 Socio-political context: for women

Following the end of the American war in 2021, and at the beginning of the Taliban takeover, Afghanistan was a nation that saw 2 million widows in its population (Watson Institute, 2022). Since 2021, the Ministry of Women's Affairs has been shut down, women have been barred from secondary and tertiary schooling, subjected to enforced dress codes, enforced mandatory chaperones to be permitted leave their homes, and face restrictions on working outside the home (including female NGO workers) (Amnesty International, 2023). The past 2 years have seen a significant shift in the socio-political climate in Afghanistan as a whole, while women and children have become especially vulnerable in the capacity to maintain their own livelihoods through such times. Such changes in Afghan society directly affects widows' accessibility and affordability of food; limited movement outside the home affects food purchasing opportunities, and limitations or bans on working severely affect widows' financial capacities to afford food.

1.1.2 Economic context

Economic welfare for many Afghans has seen unstable circumstances for over 30 years, where the proportion of the population living under the poverty line was 62% prior to 2001 and had drastically increased to 92% in 2022 (Watson Institute, 2022). Following the war, purchasing power parity in Afghanistan also dropped, resulting in significant economic barriers to purchasing food by cash, especially for daily wage workers (Human Rights Watch, 2022). Poverty, or household income, is shown to be one of the strongest drivers of food insecurity and malnutrition in Afghanistan (Samim et al., 2021; Leppäniemi et al., 2023). Such household-level economic indicators do not bode well for fostering household capacity to endure further food insecurity.

The wider Afghan economy has also experienced significant obstacles - such as the freezing of foreign financial reserves (which further limit the nation's capacity to import food or other necessary supplies), significant increases in domestic food prices, and decreases in household incomes (FSIN, 2022). Afghanistan's economy contracted for two years consecutively, by 20.7% in 2021, and further by 3.6% in 2022 (UNICEF, 2023b). Infrastructure in Afghanistan, including peoples' homes, have been severely destroyed due to the war (Essad et al., 2021), as well as crucial power lines (Kumar, 2021). A significant majority (89.5%) of Afghanistan's economy comprises agricultural production (WTO, 2022) - where almost one third of total agricultural output is opium, and another third is wheat production (UNODC, 2022a; UNODC, 2022b). Increased prices and total area cultivated for opium production, reduces wheat production, resulting in further rising domestic food prices (UNODC, 2022b), further exacerbating availability of food (wheat production), and affordability. Furthermore, the majority of agricultural outputs are exported to neighboring countries (WTO, 2022), partially due to the lack of infrastructure (refrigeration/electricity and storage), as well as higher potential profits from sales abroad, given financial constraints experienced among the Afghan public. Such macroeconomic dynamics further exacerbate the availability and affordability of food domestically.

1.1.3 Health Crisis

Afghanistan currently experienced significant increases in the number of people with disabilities and mental health issues, such as depression and post-traumatic stress disorder. A significant corpus of literature illustrates the severe effects of conflict in mental health (Amowitz et al., 2004). Research by BMC psychiatry published in 2021 concluded that out of the 4445 adults surveyed in 8 provinces, 80% of the people live in "very dangerous" areas, 64.67% of the Afghan population had personally experienced at least one traumatic event; 78.48% had witnessed one such event; 60.77% of the sample experienced collective violence in relation to war, and 48.76% reported four or more of such events (Masfety et al., 2021). As this research was published in the year 2021 before the Taliban takeover, it is important to consider the likelihood that these numbers have risen. Due to the high prevalence of mental health needs, in addition to the large number of people left disabled by conflict, a significant proportion of the population is unable to access employment or other basic needs, resulting in loss of livelihoods. It is reported that 80% of the adults in Afghanistan have one or the other forms of disability (HI Institute, 2022).

Additionally, malnutrition is the leading risk factor of death for women and children in Afghanistan, accompanied by a significant pressure from rising obesity rates, and further pressures on existing health conditions in Afghanistan (Leppäniemi et al., 2023; Metro South Health, 2016). Food insecurity in Balkh province, the focus of this paper, was classified as critical by the IPC; the fourth highest classification of 5 (IPC, 2023). According to the National Nutrition Survey (NNS) from 2013, women of reproductive age (WRA) experienced widespread micronutrient deficiencies; where 40.4% were anemic, 23.4% had a zinc deficiency, 11.3% had a vitamin A deficiency, and 64.7% had severe vitamin D deficiencies (Kim et al., 2020; Ministry of Public Health [Afghanistan] & UNICEF, 2013). More than a third of children under 5 are moderately or severely underweight, 60% are stunted, and 13 % are considered wasted (Ministry of Public Health [Afghanistan] & UNICEF, 2013). Health issues including diarrhea, malaria, diabetes, and acute respiratory infections were among the severe consequences, as are the prevalence of increased dietrelated non-communicable diseases (IPC, 2023; Global Nutrition Report, n.d.; Leppäniemi et al., 2023). The IPC further found that acute and chronic malnutrition are above global and regional averages in Afghanistan, where more than 19 provinces experienced rates of acute malnutrition over 20%. All provinces were found to have high and very high classifications (as per the WHO) of chronic malnutrition among children under 5 years of age, while only 16% of children (aged 0 to 23 months) are fed with a minimally acceptable diet. Leppäniemi et al. (2023) also showed that inadequate food when young can lead to higher risk of diet-related non-communicable diseases later in life. Such mental and physical health crises have also exasperated the food insecurity status of vulnerable people in Afghanistan.

1.1.4 Environmental Effects

It is estimated that approximately 70% of Afghans live and work in rural areas, mostly on farms, and 61% of all households derive income from agriculture (The World Bank, 2018). In 2021 alone, more than 80% of the population was affected by severe drought which contributed to a decline in food production and perpetuated food shortages for over 22.8 million people (IFRC, 2021). The staple crop of the country, wheat, was expected to decrease in production by 16 to 27%, increasing the necessity for higher food imports due to inappropriate water supply following drought conditions (Relief Web, 2021). Particularly in the Balkh province, farmers are unable to access floodwater from the river due to low precipitation, this has resulted in the loss of livestock and drying of pasturelands. Even though drought circumstances look more positive than the last three years, farmers of Balkh province are troubled by Moroccan Locusts feasting on their harvest, threatening the little chance of improvement in food security they have (Al Jazeera, 2023). The currently experienced environmental factors in Afghanistan provide for impractical circumstances in improving accessibility or affordability of food.

A second significant barrier to achieving food security in Afghanistan is found in the flooding events that have occurred throughout the nation (UNICEF, 2023a; UNICEF, 2023b). The effects of flooding on household incomes in Afghanistan have shown to extend to long-term incomes, as well as decreasing long-term nutrient intake (Oskorouchi & Sousa-Poza, 2021; Samim et al., 2021). All factors discussed above illustrate an ineffective social-political, health, or environmental climate for widows to maintain the capacity to foster the well-being of themselves, or their own households.

1.2 NGO: Village of Peace

VoP is a Dutch-based, Afghan-run, Non-Governmental Organisation (NGO) that operates in Afghanistan, aiding Afghan households' capacities to help themselves live through the instability occurring in Afghanistan, relating to food insecurity. The projects of VoP include activities focusing on textiles, horticulture, livestock, construction, and business - all targeted at "the most vulnerable population groups in Afghan society" (women, widows, orphans, and war victims) (VoP, 2020, p. 3; WFP, 2023). The objective of VoP is to enable "a full life for the most vulnerable and poorest people" of Afghanistan (VoP, 2020; 3). The scope of this report woth thus be limited to nutrition education targeting peoples who fall under this umbrella description. According to VoP Project Developer Dr. Smit, VoP aims "to get five million malnourished children sustainably food secure". Village of Peace aims for a holistic approach in its operations by providing a High Diversity Garden beginner's package (elaborated on below) to each participant - containing all necessary gardening supplies to start a home garden - as well as complementary nutrition training focused on teaching essential nutritional needs, to ultimately increase access to nutrition rich foods, improved diet, and improved food security (VoP, 2020, p. 7). Thereby increasing households' capacities to withstand the current situation in Afghanistan.

1.2.1 High Diversity Gardening & Nutrition Education

The focus of this report is on nutrition education provided by VoP. However, in their operations, the considered nutrition education is exclusively a component of a High Diversity Home Garden project. Participants receive supplies and seeds to commence their own home gardens, including high diversity nutrients and vitamins, to supplement their diets and increase accessibility to nutrient rich foods. VoP aims to provide a holistic approach, where supplies are provided to participants as well as accompanying education in caring for their gardens, and how to reap maximum nutritional benefits from the foods that they grow and prepare. Participants are taught about direct seeding, transplanting, cultivating land, and the benefits of crop rotation (VoP, 2015).

The complementary portion of the home gardening training focuses on nutrition education, where it is explained to participants how nutrition is gained from food. The education section consists of several parts: why do we need a healthy diet, what is a healthy diet, how to prepare a healthy diet, and baby feeding. Teaching occurs through various methods, such as storytelling, games, action cards, and cooking (VoP, n.d.).

1.3 This report: Analysing VoP's Nutrition Education Materials

This report will analyze the preexisting nutrition training materials employed by VoP and redesign the materials according to the principles of Behavioural Change Communication (BCC), internationally accepted nutrition guidelines, and contextual considerations.

1.3.1 Theoretical framework

In this analysis, two theoretical frameworks will be used that are applied to the context of the Afghan widows, in addition to the review and redesign of the nutrition training materials used by VoP. The first framework regards BCC: its main principles, techniques and strategies will be applied to review and redesign of the current materials. The second framework is the Socio-ecological Model of Health, from here on referred to as SEM. This model will be applied to the context of the Afghan widows and to what extent their dietary habits are influenced by the different levels of the SEM.

1.3.2 (Inter)national guidelines

The analysis as well as the redesign are informed by international nutrition literature and guidelines. This report considers nutrition guidelines constructed by the WHO, and the National Food-based Dietary Guidelines for Afghanistan specifically, designed by the FAO. The criteria considered along aforementioned guidelines covers nutritional intake, infant nutrition, and food preparation practices.

1.3.3 Contextual considerations: Afghan diets, Islam food

Islam

Afghanistan is a nation with a rich history related to its food and food practices, cultural and traditional beliefs about food ingredients, as well as food practices playing a significant role throughout Afghan society. Most of the Afghan population (99,8%), follows the Islamic faith (The ARDA, 2020) and therefore most also adhere to the strict accompanying eating habits, including but not limited to, observing Ramadan. The main principles are halal and Toyyiban. Halal means not prohibited by the Quran and hadith. Toyyiban means generally good, suitable, consumable, and not harmful. In general, Islam does not specify how the food should be prepared for consumption. However, for food to be halal, the food may not contain pork, or any forms of alcohol, as well as procurement of food has occurred in a halal way; the person does not steal it from another one, and the way the animal is slaughtered must also be based on Islamic traditions (Syaugi, 2020).

Diet

Afghan meals largely consist of bread, rice, meats (lamb, mutton, and beef most often; goat less common; seafood mostly absent), kidney beans, chickpeas, lentils, vegetables (eggplant, spinach, potatoes, carrots, onions, cucumbers, fresh mint and coriander), and nuts (dates and other dried fruits) (Metro South Health, 2016). Sugar-sweetened tea is also a common drink, where soft drinks are more popular among younger Afghans.

The Afghan diet is largely characterized by staples, such as wheat (bread) and rice. Wheat alone constituted the largest area cultivated in Afghanistan, as well as the main food source for the local population (UNODC, 2022a). Among the poorest 20% of the Afghan population, many lived on diets that were three-quarters wheat - a number that remains at one-third for the average proportion of wheat in full daily caloric intakes (Leppäniemi et al., 2023). Dizon et al. (2019) found that Afghan families tended to overspend on staples and protein products, while underspending on dairy and vegetable food ingredients.

Although a significant portion of the Afghan agricultural economy produces grapes, nuts, and vegetables (89.5% of Afghanistan's GDP) (WTO, 2022), food insecurity remains a persistent issue which has resulted in a widespread lack of nutritional diversity for many citizens (Samim et al., 2021). This lack of dietary diversity can also be seen in Table 1, which shows the average number of days different food groups are consumed within one week. Sacrificing dietary diversity in favor of increasing or maintaining caloric intake in response to shocks, has been a looming issue in Afghanistan for over a decade (D'Souza & Jolliffe, 2014).

Table 1. The average number of days different food groups are consumed within one week in Afghanistan. Adapted from Ministry of Public Health [Afghanistan] & UNICEF (2013).

| Cereals (Bread, wheat, rice, maize etc.) | Tubers (potato, sweet potato, etc.) | Pulses and nuts (beans, lentils, peas, peanut, etc.) | Vegetables | Fruits | Meat, fish and eggs (all types) | Dairy and dairy products (Milk, yogurt, cheese, other milk products) | Sugar, Honey | Oil, Fats |
|---|---|---|------------|--------|---|--|-----------------|--------------|
| 6.8 | 3.1 | 1.8 | 2.4 | 2.9 | 1.9 | 4.4 | 5.3 | 6.6 |

Malnutrition is the leading risk factor of death for women and children in Afghanistan, accompanied by a significant pressure from rising obesity rates (Leppäniemi et al., 2023; Metro South Health, 2016). Today's situation regarding food security is still dire for more than two thirds of the Afghan population who need emergency food aid (WFP, 2023; Samim et al., 2021).

1.3.1 Research Questions

In analyzing the existing nutritional training materials employed by VoP, as well as constructing recommendations for redesigns to improve efficacy, the following three research questions will guide this report:

- 1. What are the training materials of VoP and what information do they contain?
- 2. What are the (inter)national guidelines for optimal nutritional intake and status, young child feeding and WASH practices?
- 3. What are the ways comparable organizations in Afghanistan employ BCC?
- 4. In what ways can the nutrition training materials developed by VoP be improved according to the Afghan cultural context, international guidelines and BCC principles?
- 5. What are the possibilities and considerations for upscaling VoP's activities and nutrition training?

1.4 Report Structure

The report is structured as follows: first the theoretical framework will be explained - delving into BCC and SEM; next, the methodology section will elaborate on the tools and processes used in answering our core research questions; followed by the outputs that provide answers to our three research questions; and the review & redesign of nutrition education materials; concluding with a discussion and conclusion of the findings considered.

2. Theoretical framework

This section will elaborate on the theoretical frameworks that will be used in this report. First, the BCC framework will be discussed. Then, the SEM will be explored.

2.1 What is BCC?

Behavioural change communication is "an interactive process with communities (as integrated with an overall program) to develop tailored messages and approaches using a variety of communication channels to develop positive behaviours; promote and sustain individual, community and societal behaviour change; and maintain appropriate behaviours" (Nancy & Dongre, 2021, p. 3). Behavioural change communication focuses on promoting and stimulating positive change in the attitudes and behaviour of people by using persuasive communication. It specifically looks at promoting those behaviours that seem to be the most promising in being able to reduce barriers – like resistance to change – to development (Ashiekpe, 2012). Behavioural change communication can be used in for example health programs (Laverack, 2017; Ngigi & Busolo, 2018) or development programs (Rahman et al., 2016; Workicho et al., 2021). These programs use tailored messages, and they try to provide a supportive environment through which individuals and even communities are persuaded to make positive behaviour changes (Briscoe & Aboud, 2012). Inspiring behaviour change in food practices, like encouraging people to extract more nutrients from their food by not cooking it for too long, can lead to an improvement in their nutritional status. This section will further discuss BCC: first, several behaviour change techniques will be explored. Then, strategies and important considerations will be discussed. Last, examples will be given of BCC in programs.

2.1.1 Behaviour change techniques

Behaviour change communication can entail different techniques. Abraham and Michie (2008) have investigated which behaviour change techniques – or which combinations of – enhanced effectiveness, and they gathered 26 behaviour change techniques that have been used in interventions (Table B1, Appendix B). For example, these techniques include providing information on consequences of certain actions or inactions, prompting self-monitoring of behaviour, providing general encouragement or prompting practice. So, what can these different behaviour change techniques entail in practice? Providing information on consequences of certain actions or inactions can entail that a trainer tells the trainees what can happen if they act – or do not act – a certain way. In a nutrition training, this can mean that the trainer tells the trainees that if they do not change their food practices, their children are more likely to become malnourished or that their health is more likely to deteriorate in the long term. It can also mean that the trainer tells the trainees that if they cook their vegetables too long, they will extract less nutrients out of it. Prompting practice, for example, can mean that, during a training, one puts the trainees in a situation in which they can directly act out the inspired behavioural change. In a nutrition training, this can mean that the trainer lets the trainees cook. During this practice, the trainees can act out the desired behavioural change about which they just have been told; for example, to not peel all their vegetables, because in some peels, there are a lot of nutrients.

Furthermore, Abraham and Michie argue that there is a common language needed in the domain of behaviour change techniques in interventions, but they also state that "audience characteristics are crucial to effectiveness" (Abraham & Michie, 2008, p. 386). This implies that behaviour change techniques need to be made specific for local contexts and that they must be tailored to those contexts.

2.1.2 Strategies and important considerations

Next to these different possible techniques, there are various strategies that can be used to bring about change. These strategies entail the message that is given, the medium that is used, and the person who delivers the message. It is important to clearly state the strategies that have been used in BCC programmes, so that the behaviour changes can be traced back to the strategies. It would thus be useful if a project incorporates a clear explanation with their used strategies and behaviour change techniques in its action plan. However, measuring of baseline and possible effects is rarely done in emergency settings, like humanitarian situations, therefore it is hard to establish the impact of the BCC (Kurdi et al., 2020; Vujcic et al., 2015). Different strategies can be connected to different theories. For example, if a programme uses the Elaboration Likelihood communication theory, it will be crucial for the message and the recipient's willingness and ability to elaborate the message to match (Briscoe & Aboud, 2012). In the context of a nutrition training, this would mean that the message has to match the willingness of the recipients to act on the message. If the message of a nutrition training is that the trainees need to change their daily food practices, this message should incorporate an argumentation that matches the recipients' challenges. For example, the message that improved cooking practices will eventually result in more healthy children, is likely to match the recipients' willingness to act on the message, if the recipients are mothers who want to take good care of their children.

Another important consideration for including BCC in programmed comes from West et al. (2020), who created a behaviour change wheel. They derive this from 19 major frameworks on behavioural change. The process contains the following steps: first, one has to analyse the capability, motivation and opportunity that are required to enact the desirable behaviour. Second, one has to map these requirements and connect them to the relevant types of intervention (training, incentivization, etc.) and the types of policies that are best suited to deliver the intervention (regulation, communications and marketing, etc.). These two steps then form the basis for a more detailed and concrete plan for an intervention strategy and its implementation, that includes which behaviour change techniques should be used. However, in the context of Afghanistan, this might be more difficult. Due to the restrictions of the Taliban, there are less possibilities for carrying out these specific steps. However, it would still be useful to identify the limitations and motivations for the targeted population with regards to changing nutrition and health practices.

Furthermore, BCC becomes more effective when the following factors are considered: the domestic cultural context; the deliverance of the message to primary and secondary audiences; and the use of different ways of communication, like interpersonal communication, folk and traditional media, and mass media. However, taking these different factors into account makes implementing interventions also more challenging (Kurdi et al., 2020; Vujcic et al., 2015; WHO, 2008). Taking into account the domestic cultural context makes the BCC thus more effective. For Afghanistan, this could be done by using religious leaders, trained health workers, family health action groups and radio messages (Newbrander et al., 2013). For widowed women who cannot leave their homes, which is the case in Afghanistan, trainings incorporating BCC would have to take a different form. If they have a radio or a phone, the messages using BCC can be

delivered through those channels. Furthermore, religious leaders also still play a big role in Afghanistan. If they would be willing, they could deliver messages using BCC principles in nutrition and health, in such a way that widows are also reached. Despite the women not being able to leave their homes, there might be still some possibilities to get some messages of the training across to them.

2.1.3 Examples of BCC in programmes

A lot of studies have been performed on effective BCC and nutrition (especially in children). These have found that effective BCC can lead to improvements in child feeding and hygiene practices, and thereby decrease diarrhoeal morbidity and lead to improvements of other health outcomes (Kurdi et al., 2020). Additionally, nutrition behaviour change communication interventions improve child anthropometric outcomes (Mahamud et al., 2021). On the other hand, Saaka et al., (2021) found that using radio for nutrition education was effective in improving nutritional knowledge but had little effect on nutritional status. However, adding BCC in addition to food vouchers in Ethiopia improved child-feeding practices and decreased child malnutrition more then with vouchers or BCC alone (Han et al., 2021).

Behaviour change communication is crucial to, in addition to nutrition and WASH interventions, improve food security (Haselow et al., 2016). However, there is a lack of evidence if adding BCC to agricultural interventions adds an additional advantage (Kennedy et al., 2018) and if this is also the case in a humanitarian crisis context (Prudhon et al., 2017). Nevertheless, a lack of evidence does not necessarily mean that there is a lack of impact. Ruel et al. (2017) for example show that adding nutrition education to agricultural interventions can lead to an improvement in nutrition outcomes. So, although the evidence on the impact of BCC in agricultural interventions is contested, there is still reason to argue that it might have positive effects.

2.1.4 BCC and the VoP project in Afghanistan

Behaviour change communication interventions are designed to assess the behaviour of people and explain the reasons for their behaviour before demonstrating a solution (Ngigi & Busolo, 2018). The report starts with the assessment of the current situation of Afghanistan, and Mazar-i-Sharif as closely as possible. As mentioned by (Albright & Farquhar, 1998), the first step in BCC is to not find a solution rather to gauge the knowledge and attitude. Therefore, we started with identifying the various elements in the current scenario that came in the way of women attending the trainings. After understanding the current scenario, the training materials were reviewed to identify what are the gaps in the delivery of the training materials in compliance with BCC. It is important to identify and support the specific knowledge and skills needed to support new behaviours (Pratt & Bowman, 2008). Hence, identifying that the Afghan people live a very engaged communal life was an important outcome that led to the second step i.e., engaging community actors.

As part of the redesign, it was pointed out that the training for orphans from widowed households is a great way to engage community actors when the direct beneficiary is not able to. This is also in compliance with fundamentals of BCC where community actors are actively engaged and prompted to contemplate the change they need. Besides, the recommendation for the trainings also suggests engaging other community actors and leverage the communal lifestyle of the Afghan people.

For change to be sustainable and accepted by the community, engagement of the actors should be meaningful the socio-cultural context must be considered. Therefore, our recommendation for the training includes persuading the participants to contemplate the learnings through culturally appropriate action cards where they can relate and identify themselves to. This also prompts them to take action on their own cultural space where they can sustain the change in question (Yüksek et al., 2013). Besides, cultural appropriateness, recommendation about incorporating a different storytelling instead of the one in the training guide to be more relatable to the male participants is based on the premise of showing a practical way forward to the participants (Banerjee et al., 2013).

2.2 The Socio-Ecological Model of Health

Besides the BCC framework, the SEM is also a relevant theoretical framework. It is a theory that is used for understanding human development. The SEM was first introduced as a conceptual model in the 1970s. In this model, the individual is in the centre of several circles, or spheres, by which it is influenced. The first circle contains the microsystem, which is closest to the individual and has the strongest influences. This system contains the relationships and interactions of the immediate surroundings of the individual. The second circle contains the mesosystem. This system includes interactions that are beyond the immediate interactions: these are interactions with for example contacts at work, school or with the neighbourhood. Then comes the exosystem, which exerts positive and negative forces on the individual, like community contexts. The ecosystem is followed by the macrosystem, which includes cultural, societal and religious influences and values. The SEM states how health is influenced and affected by interactions of the individual with its closest relations, the community and the environment, which includes the social, political and physical components (Kilanowski, 2017). Since the introduction of the model, the SEM has been modified and updates for different applications. For example, both the WHO and US Centers for Disease Control and Prevention use the model, showing how complex human interactions and multiple dimensions influence the behaviours of an individual. Figure 2 shows an example of how the SEM can look like, as used by the CDC. The terminology for the middle levels can be altered, depending on the application of the model and the user's needs (Lee et al., 2017).



Figure 2. Socio-ecological model: framework for prevention, Centers for Disease control. Reproduced from Lee et al. (2017).

A practical example of the application of the SEM is presented in the article by Robinson (2008). She shows how the dietary behaviours, and fruit and vegetable intake of low-income African Americans are strongly influenced by an interplay of personal, cultural, and environmental factors. These factors can be described and categorized according to the levels of influence as conceptualized by the SEM: the intrapersonal level (which includes taste preferences and habits), the interpersonal level (which includes interactions with friends, family and peer groups), and the organizational, community and public policy levels (which include environmental factors affecting food availability and access). This model thus contributes to a better understanding of the factors and barriers that influence dietary behaviours. In the context of dietary habits of low-income African Americans, the SEM can contribute to providing guidance for developing intervention strategies that are culturally appropriate and sensitive for the African Americans.

The SEM can also be applied to the situation in Afghanistan. The dietary habits and intake of the widows and their children are influenced by the intrapersonal level, the interpersonal level, the organizational level, the community level and the organizational level. This will be further discussed in Chapter 8.

2.3 Conclusion

In this chapter, BCC as a theoretical framework has been discussed. Behavioural change communication is used in health and development programmes to inspire and encourage behavioural change in people. It can entail different techniques, like providing information on consequences of certain actions or inactions or prompting practice. There are various strategies that can be used for BCC, like which medium is used to deliver the message. It is important to use the behaviour change wheel when wanting to design an intervention that includes BCC. It is also important to take the cultural context of the target region into account when designing an intervention. Moreover, behavioural change communication can lead to improvements in nutrition outcomes. Besides the BCC framework, the SEM was also discussed. This is a model with several levels, depicting different spheres of influence on the development or health of an individual. Both of these theoretical frameworks will be applied to the project in the rest of the report.

3. Methodology

In this chapter, the methodology that was applied to answer the main research questions and sub questions will be discussed. Different methods were used for each sub question, which will be explained below, divided into sections of data collection and analysis, ethical considerations and limitations. A table with a reference list per chapter can be found in Appendix C.

3.1 General remarks about interviews

Ten in-depth interviews (characteristics can be found in Table 2) were performed to aid answering research questions or to get new insightful ideas. Interviewees included nutrition experts who have worked in global nutrition areas and developing countries, however none of them had experience with nutrition in Afghanistan. An interview with a trainer from VoP in Afghanistan related to innovative teaching methods, particularly in the community. Students from Afghanistan and a photographer who provide cultural insights and contextual understanding. Interviews were conducted via video conferencing, or through text message (due to bad internet connections), depending on the interviewees' availability and preferences. The interviews were semi-structured, an agenda and the list of questions were written beforehand and if feasible shared with the interviewee. This method allowed for openended discussions and exploration of critical themes. The interviews were executed by the whole team, or by a designated small group of team members, whereby roles were determined beforehand. In case an interview was held online, it was recorded and automatically transcribed with the interviewees' permission (these can be found in Appendix E). In case an interview was via telephone, notes were made by one of the team members.

Oral informed consent was obtained from all interviewees, ensuring their rights and privacy were respected. Anonymity was maintained by assigning pseudonyms or using identifiers agreed upon with the interviewees.

Table 22. Interviewee characteristics. Full transcripts of each interview can be found in Appendix E (except for P10).

| Participant | Gender | Interview format | Characteristics | | |
|-------------|-----------------------------|------------------|--|--|--|
| P1 | Male | Video call | Part of the VoP based in the Netherlands and worked on | | |
| | | | developing the training materials | | |
| P2 | Female Video call Student a | | Student at Wageningen University and Research who was | | |
| | | | born in and has lived in Afghanistan | | |
| Р3 | Male | Video call | Student at Aalborg University Copenhagen who was born in | | |
| | | | and has lived in Afghanistan | | |
| P4 | Male | Whatsapp | A photographer who is based in Mazar-i-Sharif | | |
| P5 | Three males | Video call | One is program manager of VoP and is based in America. The | | |
| | | | other two work with VoP on the ground in Afghanistan | | |
| P6 | Male | Video call | A global health specialist who also has expertise in teaching | | |
| | | | methods and indigenous communities | | |
| P7 | Female | Video call | Professor at Wageningen University and Research specialized | | |
| | | | in global nutrition | | |
| P8 | Male | Video call | Part of the VoP based in the Netherlands and worked on | | |
| | | | developing the training materials | | |
| P9 | | | Works at Wageningen University and Research and is working | | |
| | | | on translating FBDG to nutrition education materials for the | | |
| | | | rural household in Ethiopia | | |
| P10 | Male + | Video call | Both gave nutrition training for VoP in Afghanistan before the | | |
| Female | | | Taliban took over | | |

3.2 Training materials VoP

To answer the question about what the training materials of VoP are and what their contents are, the nutrition and HDG training guide of VoP was analyzed and summarized with a document analysis. A total of 5 sources were used. An interview with P1 was conducted to gain more information on the high diversity gardening training materials. Limitations to this method could be that the training guide is not up to date with the training they are giving, this can lead to a distorted view of reality.

3.3 (Inter)National guidelines

What are the (inter)national guidelines for optimal nutritional intake and status and young child feeding and WASH practices? For this question a rapid literature review was done on international and national guidelines, for nutrient intake, child feeding practices, and WASH practices. Electronic databases, such as PubMed, Scopus, Web of Science, Google Scholar and academic databases, were utilized to identify relevant publications. Additionally, specific databases such as the World Health Organization (WHO) Data collection and the FAO were consulted. Key words used to compose the search queries were "nutritional international guidelines, "food-based dietary guidelines in Afghanistan", "child feeding practices in Afghanistan", "international guidelines for child feeding practices", "women and child health care in Afghanistan", "malnutrition", "undernutrition", "malnutrition burden of disease", "foodborne disease", "WASH", "food preparation guidelines". There was a total of 20 relevant sources that were utilized in the report. Additionally, interviews were conducted to gain new insights for this subquestion.

For analysis of this section a narrative synthesis was used, which consisted of getting a comprehensive understanding of this research question by summarizing literature findings.

It is important to take into account that the international guidelines are formulated by western organizations. This could impose challenges when applying these guidelines in the context of Afghanistan, therefore national guidelines are also important to consider.

3.4 Employment of BCC

To answer the research question, of what are ways comparable organizations in Afghanistan employ BCC, a google search was conducted on organizations working on nutrition and BCC in Afghanistan, using the search terms "organizations food security Afghanistan", "organizations nutrition education Afghanistan", "organizations Afghanistan" AND "behavioural change communication", and searching on their website/materials for BCC. This led to a total of 7 sources. To analyze the BCC practices used by these organization a narrative synthesis was executed. Even though there are various organizations still active in Afghanistan aiming to achieve food security. It has turned out difficult to find information of how small organizations use BCC, therefore the bigger organizations that use a BCC approach were looked at: these are the FAO and the United States Agency for International Development (USAID). These big organizations are western organizations, which could impose challenges when using their methods in the context of Afghanistan.

3.5 Review, redesign and upscaling

The technique that was applied in this section is concurrent triangulation. Concurrent triangulation uses both qualitative and quantitative data, analyzing for areas of agreement and disagreement, leading to one recommendation. The information gathered from the introduction, theoretical framework, the previous sub questions, and interviews was used for identification of the areas of agreement and disagreement. From this integration, specific recommendations for the current context were constructed. All this was done to answer the following subquestions:

Firstly, what changes can be made to improve the nutrition training materials according to international guidelines, the domestic context, and the operation and values of VoP?

Secondly, to what extent can the current communication methods of VoP be improved according to the general principles of BCC?

And lastly, what are potential ways to upscale the nutrition training materials to target a bigger population in Afghanistan/Mazar-i-Sharif?

For this part Jstor, Researchgate, WUR library, ScienceDirect and Google Scholar were used as databases. Additionally, the Village of Peace website was the part of review resources. The following key terms were used: "upscaling of organizations"; "engagement in learning education" "salt iodization Afghanistan", "oil fortification Afghanistan", "hidden hunger", "malnutrition in pregnancy", "vegetable oil", "WASH Afghanistan" "Restrictions for Women in Mazar-I-Sharif" and "Malnutrition in Mazar-I-Sharif". This led to a total of 40 sources.

To be more precise the following interviews were used for these sections. Interviews P1 and P8 are used for the section teaching guides, where the information from the interview is used to consider the recommendation for that section. The interview of P1 and P8 is also used for the upscaling section,

where the information from the interview is used to determine the degree of upscaling preferred. The interviews of P5 and P10 are used for the recommendations about storytelling and gave insights about current storytelling used for the nutrition training. The interview of P6 is used for advice on the games and the focused group discussion section. Additionally, some remarks made by the other interviewees were considered and sparked new thoughts, however these were not used to write these sections directly.

A limitation was that the preexisting VoP training materials were being reviewed and redesigned. These were however, designed for widows, even though, these trainings are currently taught to men.

3.6 General limitations

As all of the authors are based in the Netherlands, our methods carried out online from gathering literatures to interviewing people, rather than being in Afghanistan, experiencing the culture and context. Additionally, none of us speak the respective languages of the communities that are trained. It is also notable that one of the limitations of the report is that it is highly based on literature reviews alone and other methods account for a smaller portion of the report. Besides, that the literature review has heavy influence of organizations that are not from Afghanistan but international organizations and bodies that operate there. Additionally, although there are regional differences in what laws Taliban have imposed and how it affects socio-political aspect of Mazar-i-Sharif district, there was very limited data available in English about the specific city. Additionally, data that was available was from for the Taliban takeover, which could affect relevance of the data in the current situation in Afghanistan.

3.7 Conclusion

In the end, all information from each sub question was gathered and integrated to answer the main research question. What are the recommendations for improving the nutritional training materials of VoP in alignment with international guidelines and utilizing BCC to foster long-term food and nutrition security for widows and orphans in Mazar-i-Sharif in Afghanistan?

4. Results

This chapter will discuss the results. First, the contents of nutrition training materials and the HDG training materials will be summarized. Second, the (inter)national guidelines on nutrient intake, young child feeding practices, including breastfeeding, and food safety and WASH practices are discussed. Last, the nutrition training materials are reviewed and redesigned, and possibilities and considerations for upscaling the activities of VoP will be discussed.

4.1 Training materials VoP and their contents

4.1.1 Nutritional training materials

The nutritional training is designed by VoP to instruct widows on how they can improve their diet and how that contributes to the improvement of their own health, but also the health of their children. The aim of this training is to teach the widows about the importance of healthy food and help the women apply the knowledge in practice. Most of the widows are illiterate, therefore, the training is mostly designed without the use of written text. They teach the widows primarily by playing games, actively working with food, and using action cards. Materials from the nutrition training can be retrieved from the VoP Teacher Guide (VoP, n.d.).

Why do we need a healthy diet?

The first part of the training explains health problems that can arise due to a lack of nutrition, also known as malnourishment. The malnourishment action card (Figure 3) explains what the most common symptoms are of malnourishment and emphasizes the importance of observing the child: how do they look (skin, eyes, teeth, body fat) and their degree of activity.

The different symptoms visualized on the action card are:

 Respiratory infections: It is more difficult for the body to fight off viruses when it does not get enough nutrients.
 When you are healthy there is less chance you will get sick, or you will recover way more easily. Symptoms that can occur are coughing, sneezing, running nose and fever.

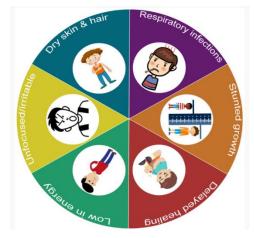


Figure 3. Action card on malnutrition. From VoP (n.d.).

- Stunted growth: Nutrients are very important to grow and develop in a healthy way. Without enough and nutritious food children will be skinnier, but also shorter.
- Delayed healing: when the body 'damages' either due to a virus/bacteria or a wound, it needs to heal. For this healing different nutrients and enough nutrients are needed to heal properly.
- Low in energy: A lack of nutrients can lead to decreased activity, due to tiredness.
- Unfocused/irritable: A lack of nutrients can lead to a bad mood and less concentration. This can mainly be observed in school, but also during other activities.
- Dry skin and hair: A lack of nutrients can have an influence on the condition of the hair and skin of the child. The hair and skin will appear very dry and damaged.

The training on nutrients emphasizes the importance of nutrients for our cells to function properly. For example, the fuel to our cells are vitamins, minerals, protein and energy. It also highlights that food is very important for our brain development, muscular growth, ability to focus, and energy levels in order to perform activities and to sleep well. Also, food is not only needed to grow but also to stay healthy (VoP, n.d.).

What is a healthy diet?

This part mainly describes what is best to eat and why that is needed. The basics of a healthy diet is explained according to an action card categorized by nutrient group (Figure 4). Teachings are provided on the different groups of nutrients and their health outcomes.

The nutrients shown on the action card are:

- Energy: energy is needed for physical activities and is present in all the food we consume. Energy makes us able to move, but also keeps our body warm.
- Protein: protein is needed to build body cells and repair when damaged, e.g., muscle cells and brain cells. Proteins are also needed for a lot of other molecules, among which enzymes and hormones used for different body processes.
- Vitamins: they have various functions within the body and are very important to grow and maintain health.
- Vitamin A: needed for the functioning of the eye, immune system, develop a healthy skin and grow.
- Vitamin C: important for the health of the bones, teeth and blood vessels. It is essential for wound healing and brain functioning.
- Vitamin E: is essential for the health of our red blood cells and protects against cell damage
- Vitamin D: is very important for the strengthening of our bones.

This part of the training is also supported by a game. This game focuses on making the link between nutrients and the food itself. Participants need to match the nutrient with the food that contains most of that nutrient.

The basic dietary rules are as follows:

- Variation is very important. You need different foods to receive all nutrients, that is why you need a bit of everything.
- Eat a lot of fruit and vegetables and less things that contain a lot of sugar or flour.
- Drink a lot, since this is very important to stay healthy.

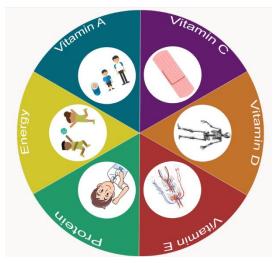


Figure 4. Action card on nutrients. From VoP teacher quide. From VoP (n.d.).

How do we prepare a healthy diet?

This part of the training mainly discusses how a healthy diet can be applied in practice, since they now know how to stay healthy and feed their children. This is done by playing multiple games and partaking in discussions on how to prepare food. There is also an action card on this part that visualizes the rules for food preparation (Figure 5).

The game is about shopping at the bazaar to compose a healthy meal. They will get a specific budget and need to think about how to spend this in a smart way. The idea is that they will need to buy enough food for one day and it needs be a variation of meals.

The activities described on the action card are:

- Eat fresh: include fresh ingredients, like fruits and vegetables, since those contain many healthy nutrients.
- Waste less: there are various vegetables and fruits where you can use multiple parts of. In that way you do not throw food away which is actually edible.
- Cook shorter or steam: For some vegetables it is necessary to cook them since otherwise you will not be able to digest them. If you cook them for too long the important nutrients will decrease. Therefore, it is necessary to cook the vegetables as long as needed or even steam them.
- Eat it raw: many vegetables can be eaten raw, which means that no nutrients are lost due to cooking.
- Less sugar, salt, oil: consuming too much sugar is bad for our health, so is too much salt.
- Eat the peel: many fruits and vegetables contain the highest amount of nutrients within their peel.
 Therefore, it is important to consume them with peel, but only if the structure is edible and the taste is good.

The other game teaches which vegetables to cook, and which foods can be consumed without needing to peel it. After the game, the women will cook together and think about the best ways to prepare the food. They then would discuss together what meals can be made from the ingredients. For this part of the training, a video is shown with cooking instructions.

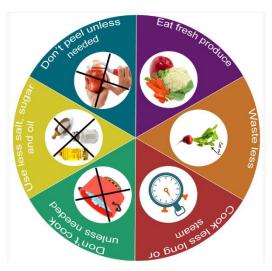


Figure 5. Action card on food preparation. From VoP teacher guide. From VoP (n.d.).

Baby feeding

The last part of the training focuses on how to feed babies and the transition between breastfeeding and solid foods. It is mainly described by an action card. The action card (Figure 6) contains different stages of a baby's life:

- 0 months: baby will drink only breastmilk around 8 times a day
- 3 months: baby will drink breastmilk around 5 times a day and a bit of sweet mashed fruit
- 5 months: baby will eat more mashed fruits or vegetables as a main meal and for the rest breast milk
- 10 months: mainly eat solid foods and drink breastmilk once a day
- 12 months: only eat solid foods. Let the child drink from a cups so it trains their mouth muscles.
- No salts, herbs and only products that are easy to digest.



Figure 6. Action card on child feeding. From VoP teacher guide. From VoP (n.d.).

4.1.2 High diversity gardening training materials

High diversity gardening (HDG) is one of the projects carried out by the VoP as an effort to improve food security in a sustainable and long-term manner. In the project, the widows and orphans are trained on how to do intelligent and sustainable gardening in their gardens. The project also teaches them the role and importance of the plants they grow for their health. A record number of 200 beneficiaries participated in this project in 2022 (Lagerwerf, 2022). In his interview with us, P1 and P8 from VoP, stated that the HDG project is also part of the nutrition improvement training project. Village of Peace uses a holistic approach in implementing its activities. The trainers have previous training on the values of the Afghan people to reach a common language, and then they are trained in leadership, as P1 and P8 explained in his first interview (full interview transcripts are available Appendices E1 and E8).

In general, VoP (2015) explained that the HDG training was divided into four main sections, as follows. The first lesson is about introducing HDG. Village of Peace explained that they focus on utilizing the land around the house, which is convenient for the community, and planting simple plants that the widows and orphans can harvest for own consumption. In the future, this can result in people not having to spend money on groceries at the bazaar while still meeting their daily food needs from their garden. In lesson two, the VoP focused on how to plant. Starting with when to plant vegetables using two systems, namely direct seeding, and transplanting, and then how to cultivate the land using spacing and the benefits of crop rotation.

In lesson three, the training explained the further knowledge regarding gardening. The widows and orphans learn to care for plants with four main topics: irrigation, weeds, and weeding mulching, and plant fertilization. Lesson four deals with harvests. Village of Peace not only provides the widows and orphans with training on how to harvest vegetables but also provides information on how to store crops and store seeds.

4.1.3 Interim conclusion

This section discusses both the content of the nutritional training guide developed by VoP and the high diversity gardening training materials. The nutritional training section gives a short overview of different parts of the training: why do we need a healthy diet, what is a healthy diet, how to prepare a healthy diet and baby feeding. The overview includes the information about nutrition, the games and action cards used in the training. The part about the high diversity gardening training materials gives a short overview of the different lessons that are described in the training guide. The guide focusses on the entire process from utilizing the land until harvesting and storage of the crops/seeds and all the steps in between. Chapter 7 elaborates on the gaps in the nutrition guide and how VoP can improve the guide. The high diversity gardening training materials will not be further discussed since it is outside the scope of the report.

4.2 (Inter)national guidelines

This chapter summarizes the international and national guidelines on nutritional intake, infant nutrition, and food preparation practices. The information presented in this chapter is important to identify limitations to the current nutrition training materials by VoP and serves as the foundation for providing suggestions for improvement of these materials.

Adhering to a nutritionally adequate diet throughout all life stages is necessary to maintain health. Furthermore, it is vital for facilitating proper bodily function, for example by supporting cognitive development, regulating optimal functioning of the immune system, and promoting cardiovascular health (Casas et al., 2018; Prado & Dewey, 2014; Munteanu & Schwartz, 2020). Hence, consuming a nutritionally adequate diet can prevent malnutrition and protect against the development of non-communicable diseases, such as cancer, diabetes, and cardiovascular disease (WHO, 2020).

Malnutrition can be defined as "deficiencies, excesses or imbalances in a person's intake of energy and/or nutrients" (WHO, n.d.). Malnutrition can be divided into undernutrition and overnutrition. Undernutrition can be characterized by (micro)nutrient deficiencies. Additionally, undernutrition can result in being underweight, i.e. having a low weight for age, stunting, having a low height for weight, and wasting, having a low weight for height. Underweight, stunting, and wasting are three basic measures commonly used to indicate undernutrition in childhood (Maleta, 2006).

Altogether, malnutrition and related diseases represent a large burden of disease, thereby causing a considerable social and economic burden as well. Now that the importance of good nutrition has been established, the rest of the section will discuss the following topics: first, the international guidelines for nutrition will be discussed; secondly, the national guidelines will be outlined; breastfeeding practices and introducing new foods; and lastly, food safety, WASH practices and food storage will be discussed.

4.2.1 International dietary guidelines

The WHO (2020) recommends a healthy diet for adults according to the following international guidelines: 2 cups of fruit (4 servings), 2.5 cups of vegetables (5 servings), 180g of grains, and 160 g of meat and beans per day. Red meat can be eaten 1-2 times per week, and poultry 2-3 times per week. Daily intake of fruit and vegetables should be at least 400g per day (starchy roots such as potatoes, sweet potatoes, cassava are not classified as fruit or vegetables). Less than 5% of total energy intake should come from free sugars, no more than 5-10% from simple carbohydrates, and less than 30% from fats (unsaturated fats are preferable to saturated and trans-fats). Saturated fats should be no more than 10% of total energy intake and trans-fats no more than 1%. No more than 5g of salt should be consumed per day and salt should be iodized. The estimated average requirements of various micronutrients, depending on the population group, are displayed in Table D1 (Appendix D). Adequate micronutrient intake is essential for growth and development, metabolism and disease prevention (Shergill-Bonner, 2017). However, the recommended energy and macro and micronutrients intake vary for different population groups. For example, pregnant and lactating women should raise their energy intake and increase intake of certain macro and micronutrients (refer to Table 3, Table D1, and Table D2).

4.2.2 National food-based dietary guidelines for Afghans by FAO 2016

The national food-based dietary guidelines (FBDGs) for Afghans designed by the Food and Agriculture Organization (FAO, 2016) are based on food availability and cultural eating patterns in the country. The dietary guidelines portray the different nutritional needs during different stages of life, ranging from conception to old age. Specifically, the guidelines include pregnant and lactating women, and infants and young children, who are considered the most vulnerable population to encounter difficulties meeting their nutritional needs in Afghanistan. The guidelines for Afghans were established to meet the following objectives:

- 1. "Encourage healthy food choices in terms of variety, quality, and quantity;
- 2. Ensure dietary adequacy to prevent undernutrition and micronutrient deficiencies, especially among children, and pregnant and lactating women; and
- 3. Prevent overweight and obesity, which then could decrease the risks of chronic, non-communicable diseases."

There are three different typical daily energy requirements for Afghans, depending on age, gender, and levels of physical activity. These requirements are averages of energy intake needed for a healthy lifestyle (Table 3). According to the FAO (2016), sedentary or light physical activity is defined as "people doing jobs that do not require much physical effort, or people who are not required to walk long distances". Heavy physical activity is defined as "people who engage regularly in strenuous work or leisure activities for several hours" such as walking long distances to get to one's work. Moderate physical activity is defined as "people whose lifestyles are more strenuous than those in the sedentary category, but not as demanding as those who do heavy physical activity."

Table 3. Daily energy requirement for different population groups. Adapted from FAO (2016).

| Population group | | Daily energy need (kcal) |
|--|---|--------------------------|
| Children 2-5 years | | 1300 |
| Children 6-9 years | | 1600 |
| Children 10-12 years | | 2000 |
| Adolescents 13-18 years Adults | (Light physical activity) | 2200 |
| Adolescents 13-18 years Adults Pregnant and lactating wome | (Moderate to heavy physical activity) | 2800 |
| Pregnant and factating wome | <u>:11 </u> | |

Based on the energy intake levels, there are different recommended proportions of macronutrient, specifically the percentage of the diet that should be composed of carbohydrate, protein, and fat (refer to Table D2, Appendix D). This is further broken down into the number of serving sizes for different food groups, seen in Table D3 (Appendix D). Serving sizes are dependent on the specific caloric value of a food group. It is important to note that reported values are *estimates* of the approximate amounts of food needed for each food group every day. In Table D4 (Appendix D) examples of commonly eaten foods in Afghanistan to gain understanding of what is meant with one serving size are shown.

According to the FAO (2016), the general dietary guidelines advised for Afghan citizens are as follows:

- 1. "Eat different types of food daily" from each food group: meat, fish and eggs; fats and oils; cereals and tubers; fruits; vegetables; dairy; pulses, beans, nuts and seeds (general proportions are represented in Figure 7).
- 2. "Eat different types of fruit and vegetables daily."
- 3. "Eat lean meat, poultry, fish, eggs and dairy products."
- 4. "Reduce sugar intake and avoid sweet, carbonated beverages."
- 5. "Use less salt and eat fewer fatty foods and highly processed foods."
- 6. "Pregnant and lactating women should increase intake of all the food groups daily, especially foods rich in iron" such as kidneys, offal, heart, chicken giblets and hearts.
- 7. "Give infants only breast milk for the first 6 months of life."
- 8. "From 6 months onward, feed infants and young children different nutritious foods in addition to breast milk and continue breastfeeding until 24 months."
- 9. "Use clean and safe water for handwashing, drinking, and food preparation."
- 10. "If you live a sedentary life, do some physical activity for at least 20-30 minutes daily"

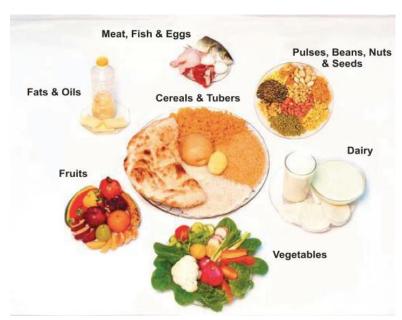


Figure 7. Visual representation of a healthy diet in Afghanistan indicating the approximate proportions of each food group. Adapted from FAO (2016).

4.2.3 Breastfeeding Practices and Introducing New Foods

Optimal breastfeeding practices are critical to prevent undernutrition in children and promote healthy growth and development. Breast milk provides important nutrients and energy while also preventing against gastrointestinal infections and reducing new-born mortality. In 2018, the WHO designed and distributed a handbook outlining Mother and Child Health for women in Afghanistan (WHO, 2018b). This handbook was designed in collaboration with The Ministry of Public Health in Afghanistan and addresses extensively all topics relevant for women and children. Relating to nutritional education before, during, and after pregnancy, the handbook provides step-by-step instructions for parents. Nutrition information for the mother is also included regarding pregnancy and breastfeeding, frequencies and routines. The

handbook overall, aims to improve the linkage between health care providers, women, families and communities (WHO, 2018a). It provides opportunity for trained health providers and community workers to record the health and growth conditions of mothers. Majority of the information on breastfeeding practices and introducing new foods is retrieved from this handbook.

The WHO and the United Nations International Children's Emergency fund (UNICEF) recommend breastfeeding within 1 hour of birth and continue breastfeeding for the first 6 months of a new-born's life (WHO, 2021). Breastfeeding should be performed from both breasts while powder and bottled milk is not advised for the child (WHO, 2018b). According to the WHO (2018b), mothers are advised to do the following during breastfeeding:

- 1. Get in a comfortable position for the baby to attach to your breast.
- 2. Position the baby's head and body so it is in a one-line position (Figure 8).
- 3. Hold the baby close to you.
- 4. Place baby's face against your breast so that their chin is touching your breast and their nose is facing your nipple.
- 5. Ensure that the baby's mouth is wide open with their lower lip stretched out so that most of the areola (dark part around the nipple) can be inserted into the baby's mouth (Figure 9).



Figure 8. Muslim women demonstrating the correct and incorrect way of holding a child while breastfeeding. Adapted from FAO (2016).



Figure 9. Visual representation of the correct and incorrect way of positioning the child's mouth while breastfeeding. Adapted from FAO (2016).

During the first few days of life, the child may want to eat as often as every one to three hours. During the first weeks to six months of a child's life, babies on average will be fed every two to four hours, however, some babies may need to be fed every hour at times or during longer intervals of four to five hours. On demand feeding is recommended, meaning to breastfeed the baby when they are hungry. In total, babies will be fed about 12 times in 24 hours within the first six months, at least 8 times during the day and no less than four times during the night (WHO, 2018b). As babies grow, they will gradually be able to drink more breast milk at each feeding. Babies will stop eating when they are full and seem to be content and drowsy after feeding (CDC, 2021).

At 6 months old, mothers should start introducing nutritionally adequate and safe complementary (solid) foods while continuing breastfeeding for up to 2 years old. The National FBDG for Afghans revised by the FAO (2016) recommends that Afghan babies 6 months old should be introduced with iron-rich cereals, vegetables, fruit, and meat while being breastfeed. Foods should be introduced one at a time and should be semi-solid (FAO, 2016). It is advised to feed infants with a diverse diet, such as animal source food, staple food, legumes, seeds, and foods rich in vitamins and minerals (WHO, 2018b). It is important to start with small amounts of food and increase gradually as the child gets older. Sugars and salt should not be added to complementary foods (WHO, 2021). Cow's milk should not be given as a drink until the child is 1 years old, however, cooking with cow's milk is acceptable (NHS, 2022). Refer to Table 4 on the texture, frequency, and amount of food that should be given to young children, depending on their age.

Table 4. Recommended texture, frequency, and amount of food given to young children according to age. Adapted from FAO/UNICEF (2008).

| Age | Texture | Frequency | Amount at each meal |
|-----------------|---|---|--|
| 6 months | Soft porridge, well mashed vegetables, meat, fruit | 2 times per day plus frequent breast feeds | 2-3 tablespoons |
| 7-8 months | Mashed foods | 3 times per day plus frequent breast feeds | Increasing gradually to 2/3 of a 250 ml bowl |
| 9-11 months | Finely chopped or mashed foods, and foods that baby can pick up | 3 meals plus 1 snack between meals plus breast feeds | ¾ of a 250 ml bowl |
| 12-24 months | Family foods, chopped or mashed if necessary | 3 meals plus 2 snacks between meals plus breast feeds | One full 250 ml bowl or more |

As infants are being introduced to solid foods, mothers should practice responsive feeding: feed infants directly and provide assistance, feed slowly, encourage eating, talk with the child, and maintain eye contact. It is advised to increase food consistency and variety over time as the child begins to eat more frequently. During illness, it is important to increase fluid intake including more breastfeeding, and offer soft, favourite foods (WHO, 2021). Breastfeeding intervals will change as they grow, therefore, mothers should carefully follow signs of hunger and breastfeed on demand (CDC, 2022).

It is critical to understand children's hunger cues to respond and breastfed the infant. Between birth and 5 months old, children may be hungry if they put their hands to their mouth, turn their head towards the mother's breast or the bottle, puckers/smacks/licks their lips, and/or has clenched hands. The child may be full if they close their mouth, turns their head away from the mother's breast or the bottle, and/or

relaxes their hand. At 6 months to 23 months old, the child may be hunger if they reach for or point to food, opens their mouth when offered a spoon or food, gets excited when they see food, and/or use hand motions or make sounds to let you know they are hungry. The child may be full when they push food away, close their mouth when offered food, turn their head away from food, and/or use hand motions or make sounds to let you know they are full (CDC, 2021).

4.2.4 Food safety, food preparation and WASH

Food can be contaminated with natural toxins, environmental toxins, or process contaminants. Foodborne diseases, which result from the consumption of contaminated foods, are estimated to amount to an annual 600 million cases and 420.000 deaths worldwide (WHO, 2015). Adequate food handling is important to ensure the safety of consumed foods and to prevent the onset of foodborne diseases. On a global scale, international food standards, guidelines, and practices have been established in the Codex Alimentarius (FAO/WHO, n.d.). These regulations predominantly cover food production and trade. Besides the global level, various guidelines have been established (to promote food safety) with respect to practices by the consumer. For example, the WHO has established ten "Golden Rules" to prevent

1. "Choose foods processed for safety"

common errors regarding food preparation (PAHO, n.d.):

- 2. "Cook food thoroughly"
- 3. "Eat cooked foods immediately"
- 4. "Store cooked foods carefully"
- 5. "Reheat cooked foods thoroughly"
- 6. "Avoid contact between raw foods and cooked foods"
- 7. "Wash hands repeatedly"
- 8. "Keep all kitchen surfaces meticulously clean"
- 9. "Protect foods from insects, rodents and other animals"
- 10. "Use safe water"

Guidelines regarding safe WASH are often regarded when considering food safety. These guidelines do not specifically target food safety but aim to create and/or maintain a healthy living environment and to support human health in general. Nevertheless, safe and adequate WASH is essential to achieve (global) food security. Specifically, WASH is implicated with food availability, as water is needed for food production, and the utilization of food (WASH Advocates, 2013; USAID GlobalWaters, 2013). Inadequate WASH is linked to the onset of diarrhoea and infectious diseases, which are estimated to contribute to 50% of malnutrition cases in children worldwide (Prüss-Üstün et al., 2008). Water, sanitation and hygiene practices are indeed included in the WHO's Golden Rules regarding food preparation, as well as the report on the national FBDGs for Afghans by the FAO (Guideline 9; 2016).

4.2.5 Interim conclusion

This section reviews the international and national dietary guidelines for a healthy diet. This includes recommended energy intake, proportions and quantities dietary intake from macro and micronutrients. Information on breastfeeding practices and introducing new foods is also included in this section. Lastly, food safety, food preparations and WASH practices are highlighted as an important topic to cover in the trainings (further discussed in Chapter 8).

4.3 Employment of BCC

Behaviour change communication is often an important part of development programmes or interventions (Briscoe & Aboud, 2012; Rahman et al., 2016). There are various organizations still active in Afghanistan aiming to achieve food security. It has turned out difficult to find information of how small organizations use BCC, therefore we will look here at bigger organisations that use a BCC approach: these are the FAO, the United States Agency for International Development (USAID) and Action Against Hunger.

4.3.1 Organizations working with BCC

The FAO works together with the Government of the Islamic Republic of Afghanistan (GoIRA) to combat food insecurity and malnutrition. The FAO states that behaviour change communication is needed both in forms of mass media and interpersonal communication. They coordinate this with the GoIRA, specifically the ministry of Agriculture, irrigation and livestock and Ministry of Public Health. The Ministry of Public Health developed a Nutrition Promotion and Social and Behaviour Change Communication Strategy, on which the FAO strategy is based. The goal will be to improve both nutrition and hygiene practices, of which the hygiene practices will need to be implemented at schools. (IRA, 2018) To improve nutrition they have developed some materials and provide practical nutrition education by cooking classes and school gardens. (FAO, 2005)

The USAID has developed a Food Security and Nutrition Public Awareness and Advocacy Framework and Plan for 2018 until 2023. In this plan, they make use of a social and BCC approach, from now on referred to as an SBCC approach. With their plan, the USAID wants to inspire change for improvements in food security at all levels. For this, they use SBCC. They systematically identify important barriers to and motivators for change, after which they can design a set of interventions and activities that inspire and support positive behaviour in the people and commitment from the governing parties to also aspire change. Then, they can implement these interventions and activities. Behavioural change communication is a key component of SBCC: it can "encourage changes in knowledge, attitudes and practices at the individual and community levels" (USAID, 2018, p. 4). Their framework also includes education and nutrition advocacy materials.

Furthermore, Action Against Hunger is also active in Afghanistan in the domain of nutrition and health amongst others. Both for their Nutrition and Health program and their Food Security and Livelihoods program, they use different BCC approaches (Adams, 2020). Specifically, in their Nutrition and Health domain, the Action Against Hunger team trains community health workers so that they can educate parents — both mothers and fathers — or caregivers about the benefits of improved nutrition and breastfeeding. This way, the children can grow up strong and healthy. The community health workers also teach the parents how they can see whether their children are malnourished at home. This way, Action Against Hunger tries to encourage and promote good behaviour in the domain of health, nutrition and breastfeeding (Action Against Hunger, n.d.).

4.3.2 Interim conclusion

This section discusses several organizations working with BCC in Afghanistan, to give a short overview of what has been done in Afghanistan so far with regards to BCC. VoP already incorporates some principles of BCC, but they could improve on it. This will be further elaborated upon in Chapter 8.

4.4 Review and Redesign

The following section will review VoP's current nutrition training materials and discuss recommendations for the redesign thereof. The training materials will be critically evaluated based on their compliance with the context, the (inter)national guidelines, and the main principles of BCC, as outlined in the previous chapters. Gaps and limitations will be identified to subsequently provide suggestions for improvement of the nutrition training materials. First, the content of the nutrition training materials, including the information presented on the action cards and in the teacher guides, will be addressed. Then, we will review how the information is presented on the action cards and in the teacher guides. Lastly, the methods by which the training is conducted, i.e., the activities, will be discussed. Next to reviewing and giving recommendations for the nutrition training materials, this chapter will discuss the possibilities for upscaling of VoPs nutrition education activities.

4.4.1 Content: What is the message?

Macronutrients

When comparing the nutritional status of Afghan people to the nutritional training materials of VoP, substantiation for the targeted nutrients can easily be provided. Promoting adequate intake of protein, along with sufficient total energy intake, is important to aid the prevention of undernutrition and maintain health. Both aspects are already emphasized during the nutrition training, also substantiated with the use of action cards on different nutrients. However, the nutrition guide is focuses specifically on protein and lacks completeness on macronutrients. There are also other macronutrients, such as carbohydrates and fats, which are essential but not mentioned in the training. This would be an area of improvement that can add value to the training. We suggest incorporating information on carbohydrates and fats and add it into a visualization of the nutrients.

Micronutrients

The targeted micronutrients are deemed suitable, as deficiencies of these micronutrients have been established by the NNS (Ministry of Public Health [Afghanistan] & UNICEF, 2013). Vitamin D and A is well emphasized, and an important vitamin to focus on since it is highly prevalent among Afghan women of reproductive age and children aged 0 to 59 months. However, there are some limitations to the nutrition training materials of VoP regarding the included micronutrients. The training materials solely focus on the vitamins, whereas the NNS has also reported high prevalence of several mineral deficiencies. For example, anaemia and iron deficiency anaemia are common in Afghanistan. Additionally, zinc and iodine deficiency were found to be fairly common (Ministry of Public Health [Afghanistan] & UNICEF, 2013). The national FBDGs (FAO, 2016) do emphasize the importance of adequate iron intake for both pregnant and lactating women (Guideline 6), as well as infants and young children (Guideline 8). Village of Peace does not include the intake of iron, iodine, and zinc in their training materials. Targeting this condition and these nutrients might considerably aid in decreasing the prevalence of malnutrition in Afghanistan. Therefore, we suggest the inclusion of minerals, specifically, iron, zinc, and iodine. Furthermore, we suggest that VoP consults the qualitative data they gather(ed) from regional hospitals to confirm the prevalence of mineral deficiencies in Mazar-i-Sharif. For iron, iodine, and zinc, the following information could be visually presented and/or described in the nutrition training material and is in accordance with the (inter)national guidelines:

Iron

Iron is an important component of the blood. Iron deficiency (anaemia) is characterized by amongst others weakness and fatigue. Food groups rich in iron include meat, fish, poultry, eggs, dairy products, vegetables, nuts, and legumes. However, iron from meat, poultry, and fish can be more easily absorbed than iron from vegetables and cereals. (FAO, 2016; National Institutes of Health, 2023)

Zinc

Zinc is important for the fighting off infections, making proteins, healing wounds, and for development. In children, symptoms of zinc deficiency include the increased occurrence of infections, diarrhea, and impaired growth. Zinc deficiency in pregnant women may cause low birthweight of their babies. Food groups rich in zinc include meat, fish, and seafood. (FAO, 2016; National Institutes of Health, 2022a)

Iodine

lodine is important for maintaining thyroid function and aiding growth and development of children. Iodine deficiency may cause enlargement of the thyroid gland (goiter), retarded growth, and diminished intelligence. Food groups containing considerable amounts of iodine include fish, seafood, and eggs. (FAO, 2016; National Institutes of Health, 2022b)

Next to the inclusion of these minerals in the nutritional training materials, VoP may consider promoting the use of iodized salt, as this can substantially contribute to achieving an adequate iodine intake. The NNS (Ministry of Public Health [Afghanistan] & UNICEF, 2013) already stressed that the national program regarding salt iodization – salt iodization is mandatory in Afghanistan since 2011 (Global Fortification Data Exchange, n.d.) – should be strengthened. Likewise, the Afghan FBDGs state that iodized salt "should be used" (FAO, 2016, p. 12). Iodized salt can be recognized by the packaging: the packaging should include the notion that the salt is fortified with iodine, the quantity of iodine, and optionally contains a mark from a recognized certification body (Afghanistan National Standards Authority, 2014).

Dietary diversity

One of the main coinciding messages from both VoP's nutrition guide and the Afghan national guidelines is the importance of dietary diversity. The importance of a varied diet is emphasized during several parts of the training. However, what is not specified in the nutrition training is what a varied diet is consists of. The nutrition guide does focus on the importance of vegetable/fruit consumption, but not on other products like nuts/seeds, meat, poultry, dairy or eggs. The nutrition guide is also very focused on nutrients. It is important for people to learn and understand why they need to consume specific nutrients, but the practicality for the incorporation of this information on nutrients needs to be considered. Detailed information on health benefits is not the most important for people to learn. At the end of the day: people eat food and not nutrients. What lacks in the nutrition guide is an appropriate visualization of food and the nutrients it contains, shifting the focus more towards informing people about food. Therefore, we suggest focusing on the food and which nutrients they contain. It is still important to give information on the health influences of the different nutrients, but is better to replace the visualization of them with pictures of food. Hereby we come to the point of a suggestion for the nutrition action card (Figure 4). For this we suggest starting with a visualization of food groups and specify which nutrients belong to those food groups.

We suggest dividing the food groups into fruit, vegetables, cereal (bread, rice, maize, barley)/tubers (potatoes), pulses/nuts (beans, lentils, peas, peanuts etc.) and meat/fish/eggs. As outlined in the previous two sections, we recommend focusing on are the macronutrients (carbohydrates, fats and protein), vitamins A and D and minerals iron iodine and zinc. For the cereal/tubers group it is suggested to specify carbohydrates, fats, protein. It is suggested to specify fats, protein, carbohydrates, vitamin A, vitamin D, zinc, iodine and iron for the pulses/nuts group. For the fruit/vegetable group vitamin A, vitamin D, zinc, iodine and iron will be specified with foods that contain it. For the meat/fish/eggs, protein, fats, vitamin A, vitamin D, zinc and iron will be specified. It is suggested to visualize which specific foods – e.g., vitamin A is in spinach, red pepper, tomato, lettuce etc. – belong to the individual nutrient. So, in conclusion, we recommend making a visualization of food groups, which are more specified into the nutrients that belong to them together with the specific foods. Upon that, we suggest making a visualization of the proportion of food groups that should be consumed in a diet daily, i.e. the percentage of the diet or total energy intake that should come from carbohydrates, fats, and protein. We recommend that VoP expands the information on the best sources of the indicated nutrients according to the availability in Mazar-i-Sharif. Moreover, the visualizations should include the foods that are common to the region, ensuring recognizability.

As VoP training materials are designed to support widows and orphans, their nutrition information is already directed towards the gender specific diets of widows, and the age specific diets of orphans. The areas for improvement lie in the nuances of micro- and macronutrient disparities between women and men, girls and boys. Almost all women suffer from vitamin D deficiencies (95%), 40% are anaemic, and such nutrient deficiencies may be passed on when pregnant. These are also indicators to emphasize nutrient intake in (young) girls, such as iron. The shortcomings in nutrition education that fail to include the abovementioned nutrients (micro- and macronutrients) should be addressed in relation to the deficiencies and needs of widows and orphans specifically.

Infant nutrition: Breastfeeding & Food transition

Another part of the nutrition training focuses on child feeding and the transition from breastfeeding to solid foods. The nutrition guide on child feeding suggests to exclusively give breastfeeding during the first three months and then start with the introduction of solid food (mashed fruit) after three months. International guidelines, however, advise to exclusively breastfeed throughout the first six months and from then on, start with the introduction of solid foods. The VoP nutrition guide for child feeding suggests mothers to breastfeed eight times a day during the first three months. The Afghan Mother and Child handbook (WHO, 2018b) recommends feeding a child of minimal eight times during the day, and not less than four times during the night. The handbook (WHO, 2018b) as well as the WHO (2019) advise mothers to give breastfeeding on demand, indicating that cues the infant gives is very important to observe. The guide does not mention any hunger and fullness cues. The nutrition guide also states to give infants solid foods, exclusively, at 12 months old, while the WHO advises breastfeeding at least until 12 months old, but that it is more beneficial up to two years old. The nutrition training also lacks information on how to breastfeed and its proper techniques. For infants of six months old, the FAO (2016) recommends having two meals a day (besides breastfeeding) while the nutrition guide advises to start with this amount of food already at five months old. For infants of 12-24 months old it is suggested to give three meals a day with two additional snacks, while the nutrition guide does not specify how many times per day a meal will be given.

The current breastfeeding and food transition (for infants) information in VoP's nutrition education finds its totality in one action card pie chart displaying solid food introduction (Figure 6), and a second A4 with text outlining the accompanying stages (ages) of food transition. Such materials are insufficient in communicating the guidelines for maternal and child health, regarding breastfeeding by the WHO (2021), as there is currently a lack of food preparation and guidelines for safe food introduction to infants. The pie chart is unclear in what foods are appropriate for an infant, and the available text does not exceed the depth of information that is provided in the pie chart. Working with groups of women who are mostly illiterate does pose an obstacle in conveying reproducible information, however, information regarding breastfeeding and food introduction can provide more depth and range in information, even in face-to-face teaching.

Breastfeeding education should include the age and time intervals of breastfeeding, when and how to introduce food to babies, the types and texture of food which should be introduced, and the number of meals that should be given. The training should also indicate the hunger and fullness cues of children and introduce the proper techniques of breastfeeding. It is important to emphasize that breastfeeding should be on demand and the focus should be on the hunger and fullness cues of the baby. Information should be in line with the international and national guidelines. Recommended information to include in the nutrition guide should be retrieved from 4.2.3.

Symptoms of Malnourishment

The action card on the most common symptoms of malnourishment (Figure 3), and the corresponding explanation provided in the teacher guide, are useful for conveying the need for and importance of adhering to a nutritionally adequate diet. It is important to educate the participants on the variety of adverse health consequences of malnourishment, and not merely focus on height or weight. As mentioned by the Global Nutrition professor that was interviewed (P7, full interview transcript is presented in Appendix E7), mothers may "have the idea that if the stomach is filled, that is good enough". On the contrary, malnourishment with respect to micronutrients can exist in absence of energy deficiency. This principle is known as "Hidden Hunger", and relates especially to vitamin A, iron, iodine, and zinc deficiencies (Lowe, 2021). So, inclusion of multiple symptoms of malnourishment in the nutrition training material, as well as noting that malnutrition is not always clearly visible, is appropriate. Additionally, information on the consequences of malnourishment during pregnancy is lacking and should be included. Inadequate intake of micronutrients, for example folate, can have detrimental effects on fetal development (Black, 2001). VoP may consider including information about the adverse effects of malnourishment during pregnancy.

Food preparation, Food safety & WASH practices

The action card regarding food preparation (Figure 5) still requires change to be in accordance with (inter)national guidelines. For example, VoP includes the actions "Don't cook unless needed" and "Cook less long or steam", whereas the WHOs "Golden Rules" recommend to "Cook food thoroughly" and to "Reheat cooked foods thoroughly". A balance between these guidelines, in order to gain optimal nutritious value from a food product yet to not compromise food safety, is essential. In addition, the action card indicates that less salt, sugar and oil should be used. It is critical to understand how this suggestion is interpreted, and to what extent it discourages people to consume especially salt and oil. For example, intake of iodized salt may substantially contribute to achieving an adequate intake of iodine. Also, as

mentioned in the national guidelines, fats and oils are essential to health and makes for a considerable increase in total energy intake due to their high caloric density. The teaching guide states that "Vegetable oil is a very unnatural, sometimes even toxic product that we should use as little of as possible". This is a rather tough and largely false statement. Vegetable oil contains high amounts of (poly)unsaturated fatty acids, which are associated with beneficial effects regarding, amongst others, cardiovascular health, cognitive function, and fetal and infant development (Lunn & Theobald, 2006). Furthermore, fats and oils can contribute to the intake of vitamins, specifically vitamin E, and to the absorption of fat-soluble vitamins in general. Additionally, fortification of oil with vitamin A and D is mandatory in Afghanistan since 2018 (Global Fortification Data Exchange, n.d.), but implementation of this program is still weak (World Food Program, 2021). The action card also includes "Waste less", "Eat fresh", and "Don't peel unless needed". Overall, these suggestions are well-substantiated in the teacher guide. Though, eating 'fresh' may be complicated by the lack of adequate refrigeration. Additionally, it should be noted that some foods, especially those that are raw, may contain substances, otherwise known as anti-nutrients, that impede the absorption of micronutrients (Nath et al., 2022; Harvard T.H. Chan School of Public Health, n.d.). For example, cruciferous vegetables such as cabbage contain glucosinolates, which may impede the uptake of iodine (Harvard T.H. Chan School of Public Health, n.d.). Besides anti-nutrients, specific combinations of food can result in impaired nutrient intake. As an example, the FBDGs mention the inhibitory effect of tea and coffee on iron absorption and advice that these "should not be taken for two hours before or after a meal with iron containing foods" (FAO, 2016, p. 12).

The nutritional training materials include limited information on WASH practices, while this is one of the national guidelines (Guideline 9: Use clean water and safe water for handwashing, drinking and food preparation) and covered by the WHO's "Golden Rules" for food preparation. We suggest expanding the information given on food preparation and include more information regarding food safety and WASH practices. Corresponding to the (inter)national guidelines (FAO, 2016; WHO, n.d.), the following messages could be included:

Cook food thoroughly

It is important to know that various foods need to be properly cooked in order to prevent the onset foodborne illness due to contamination of these products.

• Separate raw foods from cooked foods

Keeping cooked foods away from raw foods (that should still be cooked) is important to avoid cross-contamination.

• Wash hands frequently (relevant?)

Frequently washing hands contributes to sanitation in general and may prevent the onset of foodborne illness due to the transfer of contaminated material.

• Use clean and safe water

Having clean and safe water to drink and to use for food preparation is essential to maintain health and prevent the onset of for example diarrheal diseases.

Information on how to make water safe, as outlined in the FBDGs, may be included as well. These include for instance boiling water and using clean containers for storing water (FAO, 2016).

Additional information on WASH may, for example, be retrieved from the manual "Afghanistan National Guidelines for WASH in Emergency" (UNICEF & Afghanistan WASH Cluster, 2020).

Food storage

The nutritional training materials do not include information on ways to properly store food. We suggest adding this information to the nutrition training. For example, the Afghan people might benefit greatly from learning about Kangina, a component of Afghan culture, regarding food storage. People who do not have access to electricity or refrigerators may be able to use this approach, which has been thoroughly studied and developed, to endure harsh winters and other situations that require them to preserve their food for a longer period.

4.4.2 Tools: How is the message presented?

Teaching guides

The teachers' guide serves as a document to be used by the trainers to facilitate the trainings developed by VoP, therefore it is essential that the guide is simple for the trainers, while the activities are still relevant to the trainees. The training was initially designed to cater to the widows directly but now it is catered to orphans from widowed households whereby the widows are reached indirectly. The guide sequence is coherent, and the content is rich. However, there are many aspects that can be revised in the guide so that it could potentially be deemed more useful. There are elements in the training guide that are not necessarily suitable for the male audience because the characters of storytelling as well as the training sequence can be more women oriented.

Village of Peace currently employs teaching manuals for their nutrition education staff; however, they do not provide handbooks where participants can remember information or track their own progress. In Afghanistan, increased maternal health literacy is known to be significantly related to pregnancy outcomes, and increased vegetable and fruit consumption (Rostamzadeh et al., 2022), a tool such as a handbook may provide women the opportunity to take further ownership of their nutrition/permaculture education through a modern combination of mentoring by experts and distance-learning (Sharma et al., 2021). The low levels of literacy among Afghan women in rural contexts do pose an obstacle, as text-based information in booklets are limited, but selective portions of the visual education can be concentrated to construct a simpler, summarized tool for each widow. Such a booklet may also provide participants with a sense of tangible ownership to see their own nutritional health and planning, similarly to P1 and P8's explanation of the use of participation certificates to foster a sense of self-confidence.

Visuals

The communities where VoP targets their activities are those where illiteracy rates are high and so it is effective to use visuals as a tool to relay messages. Pictures can help those with low literacy better understand messaging and instructions especially when combined with spoken instructions and locally produced print material that is culturally relevant is easier for them to accurately interpret and recall than foreign produced materials as mentioned in the literature review by (Cheng, 2014) covering working modules of various organizations in Africa. This is especially so for action cards; visuals should be more compelling and relevant to the relevant context. Visuals should also be representative of the portion of the diet the specific nutrient holds. The visuals should be simple yet complete in their message and as self-explanatory as possible. As noticed by our interviewee who was involved in the development of the Ethiopian FBDGs (P9, full interview transcripts are presented in Appendix E9), the use of a pie chart is not appropriate. It implies a numerical proportion or distribution while this is not intended for the elements presented in action cards. Therefore, readjusting the proportions of the nutrients in the action cards can

be one of the ways of strengthening visual messaging. An example can be seen in Figure 10. The visuals should also be directed in a way that prioritizes 'DOs' over 'DON'Ts'. Examples of an Action Card that emphasize DOs regarding increasing dietary diversity is shown below in Figures 11 and 12 (only conceptual sketches). The action cards on child feeding (Figure 6) and food preparation (Figure 5) contain various elements that have been striked through. This is not recommended, as it may cause incorrect interpretation of the message. For example, the advice "use less salt, sugar and oil" could be misinterpreted as "use no salt, sugar and oil". The use of strikethroughs could be counterproductive with respect to achieving an adequate nutritional intake, as previously outlined in section 8.1.5. This concern was also raised by the Global Nutrition professor we interviewed (P7, Appendix E7). The concepts below offer visual layout alternatives. Ultimately, Afghan people with communications knowledge must finalize designs to assure appropriate representations and cultural interpretations.

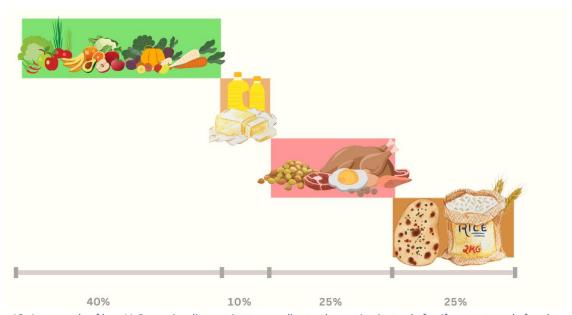


Figure 10. An example of how VoP can visualize nutrients according to the portion instead of uniform portrayal of each nutrient category



Figure 11. Conceptual idea to teach "More nutritious foods, Less empty calories"



Figure 12. Baby feeding stages visual

In addition, the visuals on the action cards are not culturally representative of Afghanistan and its people. These concerns were shared by amongst other interviewees P7 and P9. The visuals are largely representative of Western cultures. The redesigning of the action cards should be done by a domestic artist or communication expert so that the images depict the children, men and women of Afghanistan and the texts are in the respective languages of the communities (for visual familiarity even though many may not be able to read). Similarly, the clothes and the body language depicted on the people in the visuals should also be mindful towards the culture of Afghanistan, because learning is more effective when it is relatable. For instance, the action card with malnutrition (Figure 3) has Western looking children, and the action card for baby food (Figure 6) depicts a woman openly breastfeeding and without a headscarf. Alternative depiction of breastfeeding can be done as Figure 8. The discrepancies with the domestic culture in the trainings distances the trainees from the learning process.

4.2.3 Methods: How is the message conveyed?

Behaviour change communication

There are several gaps in the nutrition training materials in terms of alignment with BCC principles. In BCC, it is important to first identify limitations or motivations for behaviour change in relation to the context one wants to operate in (West et al., 2020), which is also referred to as formative research (Frick & Reigeluth, 1999). This has not been implemented yet in the project of VoP. It is needed for the training to become more suitably targeted to the needs of the people from the target region and contribute to inspiring change in people's behaviour. This is for example done by Nutrition International (2019), who first analyse the situation on the ground and then do formative research, before creating the actual intervention. In the project of VoP, this would mean that the staff of VoP, or the staff of the sister NGOs, should identify what limits and motivates Afghan people to change their behaviour in the domain of nutrition, including feeding practices, diet and cultural habits. For this step, there is research needed that looks into the behaviours of the targeted Afghans. If the VoP staff cannot do this themselves, they can perhaps employ a researcher to do this for them. Then, if the limits and motivations are identified, these can be considered when making the training and implementing it. Then, the training can become more suitably aimed to the needs of the people that are targeted and contribute to inspiring change in peoples' behaviour.

Storytelling & Role-playing

The storytelling method used in the training is an excellent approach to nutrition training as it is inherently designed to be engaging, as well as providing space for relatability among the participating women. Particularly, a story being told of a widow and her child makes it more effective because others can picture themselves in the situation as people remember more if they actively engage in actions by saying and doing (JICA, 2021). The women are led to a discussion where they are asked to identify if they see the common traits in the malnourished child with their own children which gives a great point of reference and relativity. Such storytelling and role-playing activities are vital in the education-real life connection for the participants. The storytelling, however, ends after the scenes have been acted out, where continuing the sequence of storytelling further into the training would provide for a coherent and engaging learning opportunity for the participants.

In our interview with P8 and the some of the domestic staff of Peace Village for Afghanistan Development Organization, the sister NGO of Village of Peace, they shared that after the Taliban ban on women's work, they have only been able to train men. They also shared that the storytelling part of the training guide is not implemented anymore, rather it is a straightforward training of relaying nutrition education to the participants. The storytelling part does not appeal to the only male trainees as they do not relate to the women centered storytelling and cannot make anything out of the roleplay. The storytelling can be revived with a male storyline as they can also suffer from nutrition deficiency, malnutrition, etc. Now, the training guide is more centered towards women, it would help to develop it in a way that directly caters to the men while also keeping in mind that they will disseminate the information later to the widows. There are several examples of how this could be done. in the first part of the training, which is about the importance of a healthy diet, the story can take the standpoint of a man having to provide for his family. The story in the reflection portion, in which one looks back on the training, could take the standpoint of an orphan telling his mother all about what he heard in the training. If the employed nutrition trainers can share stories themselves, focused on the men, which fits in their culture, a learning environment

would be created that includes all involved. The storytelling will then lead to a better memory of the information the men learned in the training. However, visuals should not be left out of the storytelling – as P10 mentioned, visuals are imperative, even after storytelling, and should be included in all forms of training.

The trainings are allocated for household with widows, but the receivers of the training are men, who are usually the sons of the widows in question. The training is designed for them to relay the learning outcomes to their mother later, however, some emphasis can be given to their engagement in the family nutrition status. As said by (Kuyper & Dewey, 2012) engaging men in child nutrition interventions could thus have many benefits, such as improving knowledge and skills of both caregivers, potentially reducing women's burden of care work, increasing women's social support within the household and improving men's ability to bond with and support their family.

The current situation with male participants also challenges the trainers to encourage them to share their knowledge to their mothers as well. Keeping cultural appropriateness and acceptance in mind, the current action cards and role-plays are not suitable for men. The training also lacks efforts to prime the attendees to share the information or knowledge to the widows in their households.

Games

The game section of the training is very purposeful and engaging (P6). To place the nutrients alongside vegetables and fruits, is a great way to begin learning. However, nutrient names are still quite technical for participants to remember, as they are not common colloquial words. The second game about buying nutritious meals for a day in the market is also very relevant and visual for the trainees. It enables them to gauge the market and can cater to their own needs. This game is very contextual as the participants can remember the things they bought in the training and practice it again at the market when they need to shop for their families. The third game about the food preparation and the need for peeling or not peeling is useful however, it seems more like a discussion than a game. Here, there is little focus on how they can implement this in real life and lacks example led learning (P6). Overall, activities that provide practice (repetition with the intent of improving) in an engaging and interactive way, will provide the longest lasting results as per our interview with P6. P6 similarly stated that activities that do not have a predetermined ending provide for a greater invitation for participation and engagement by learners, such games provide exactly that. Also according to the principles of BCC, games are an effective way of stimulating behavioural change. The games simulating the fake bazaar, link well with a behaviour change technique mentioned earlier: prompting practice. If people are stimulated to practice or rehearse encouraged behaviours, like with games, it will help them repeat that behaviour later in real life.

Workshops

The workshop is an opportunity when the widows to practice their knowledge to real life and exchange the idea of cooking (VoP, 2015). The workshop lacks interactive and small-group discussions with trainers and participants. By missing out on such interactions, engagement of the trainees to identify the necessary actions and information is limited. To provide a space for questions and clarification is needed. Widows will also be able to express their difficulties in person with the trainers in a small group that they trust, therefore, the trainers could also reflect on which way they could improve as the workshops are occurring.

Cooking

We suggest making cooking a component of every part of the training, instead of only at the end. The trainers can show recipes, or instruct the trainees on them, which contain the vegetables and other ingredients that contain the vitamins and minerals that are taught in the training. It would be most useful if the recipes also contain the ingredients that the trainees grow in the HDG. Showing them these recipes, will give them ideas on which things to cook at home. Furthermore, during the cooking, other instructions that have been given in the training – like not boiling the vegetables too long, or not peeling everything – can be repeated during the cooking instructions, while everyone is cooking. With the active engagement of the participants, their memory of the lessons learned during the training can be improved. Moreover, the cooking also fits well with BCC principles. Women cooking together after having had an instruction video, links with the behaviour change techniques of providing instructions and demonstrating the behaviour, which prioritizes engagement in learning (Haynes-Maslow et al., 2020), which is a vital pillar of community education also according to Dr. P6.

Focused group discussion

According to interview P6, who speaks from his (now retired) career in global health for the Ministry of Foreign Affairs (The Netherlands) and rural community education, building ownership — of not only sharing knowledge but also learning — grows from asking the people you would like to help, how they would like to be helped. Therefore, conducting Focus Group Discussions with the orphans on how they would like to learn about their own nutrition can provide meaningful outcomes. A focus group discussion with 8 to 10 participants can be effective when they share what are the most comfortable and lasting ways for them to learn. This part of the process can also contribute to the ownership principle mentioned previously. Developing a training after asking the trainees their insights on how they would like to be trained, gives them the chance to see their learning methods being implemented and to feel more in charge of their own futures, ultimately increasing encouragement to participation.

Religious leaders

We believe it is important for religious leaders to play a role in disseminating training information, in addition to the people that already have been trained. As religion plays a large role in the lives of the Afghan population, religious leaders hold a prominent and respectable position throughout Afghan society. They can use this position to influence behavioural change in the domain of eating healthily and fostering food security measures. Since they are already integral members of society, they will hold more credibility than any external NGO worker. This is also in line with the ways of working of VoP: not becoming too involved with giving the trainings and disseminating information, but aiding groups of Afghan NGOs and people to help teach each other. There are several examples of this. In Nigeria, religious leaders were used to influence women's behaviour with regards to family planning and the use of contraceptives – this turned out to be crucial for the increase of contraceptive uptake (Adedini et al., 2018). Another example, also from Nigeria, is the Alive & Thrive initiative, who wants to scale up interventions in the domain of infant and young child feeding. Among other strategies, they benefit from the community mobilization activities that have been organized by religious and community leaders (Flax et al., 2022). Village of Peace could thus meet with religious leaders and ask them to participate in delivering messages on the importance of good nutrition and a healthy diet.

Reflection and evaluation

The inception of reflection on and evaluation of the material offered is a positive development that should be sustained. Reflection will be more fun and valuable if it is used in an interactive way. This not only asks what has been learned but also trainers can ask follow-up questions related to how they can share the information or knowledge they get with others. Consequently, this training will be beneficial not only for the people participating in the training but also for other people who have yet to have the opportunity to be able to take part in this activity.

In addition, the reflection and evaluation portion of the training is crucial for long-term understanding and practice of knowledge and skills learned. Therefore, the reflection and evaluation part of the training can be redesigned to reflect on learning and application in their real lives. In this part, the trainees can be asked to reflect on their current behaviour, in line with their resources available: What do you already have that you can work with? How can you share this information with your mothers and other family members? It is paramount to ensure that whatever they hear and learn in the training, they are given the opportunity to take it away with them. Gordijn et al. (2018) described that people could use ORID. It is an abbreviation of objective, reflective, interpretative, and decision. The widows are urged to listen to, and share perceptions and emotional responses, to refrain from passing judgment throughout the discussion, and to obtain a larger and deeper knowledge of the experience. There are five simple questions that could be useful from this method, as follows:

Objective level

The widows will receive the question, "what did we do?"

Reflective level

The widows will be asked, "what is your feeling?"

Interpretative

The trainer will ask, "what did we learn?"

Decisional level

The widows will think about, "how will you apply this?"

Another way to stimulate interactive reflection is by reflection with images. Gordijn, et al. (2018) explained that the participants can express their feelings and opinion about the lesson that they learned from pictures. It also could create interactive discussion and a simple way to remember which material that they receive (Gordijn, et al. 2018). Such an activity should keep the lessons learned from the action cards close to its design.

Ownership building

A very important aspect of the Afghan lifestyle is that they live a communal life. Therefore, this characteristic of the Afghan community can be taken advantage of to disseminate information and to encourage peer learning with one another. Widows and orphans can spread knowledge from the training to other peers. As they interact with each other on a day-to-day basis, whether it is in a market, madrasa or the mosque, exchange of insights that they have learned will spread the word and create a chain of spreading knowledge. Studies have linked psychological ownership to more knowledge sharing, as psychological ownership enhances information exchange and positively relates to knowledge sharing (Pittino et al., 2018). A sense of ownership and responsibility for the people who receive the training, will encourage them to spread their knowledge with others, therefore considering ideas like distribution of certificates for all the trainees would be a symbolic representation of knowledge gained.

Currently, the training is given by male trainers to male trainees who are orphans from the widowed households, therefore, it is crucial to consider the interaction between these men and the widows in question. OXFAM's Gender Action Learning System emphasizes that the trainers should encourage the trainees to keep a diary of learning (Reemer & Makanza, 2014). Since we are in an environment where most if not many are illiterate, they can be prompted to illustrate what they have learned in the diary so that they can share among each other and share with the widows in their households later.

This also relates to principles of BCC: behaviours are changed more easily when the style of communication fits the domestic culture and context. A second positive aspect is that the people who give the training, are trained by the staff of VoP, so that they have similar instructions and approaches. In this way, they have created a common language within the organization of VoP with its sister NGOs – this is also significant, since there is a need for a common language in behaviour change techniques in interventions to effectively communicate.

4.4.4 Upscaling

This section will discuss the possibilities for upscaling of VoP nutritional education activities. In the interview, P8 shared that he would not be satisfied with VoP's effect in Afghanistan until the whole population had been helped - all five million orphans were fed, and all households were able to maintain their own food security sustainably. To reach such a goal, upscaling would need to be maximized. However, he also explained that upscaling would need to maintain the emphasis on local ownership, so that the local Afghan NGOs can take responsibility of feeding the children and creating sustainable food secure livelihoods themselves. These are two important aspects in VoP's ideas on upscaling: wanting to have as much impact as possible, while simultaneously maintaining as much local ownership as possible. How can these ideas be translated into a practical approach to upscaling?

There are different layers to be dissected in the upscaling of VoP. First and foremost, activities must be locally owned to match the values of VoP – which includes the importance of local ownership. This would mean that VoP itself does not inherently grow as an NGO, but its relationships and networks with and among Afghan NGOs would expand. Increasingly building relationships and establishing networks, also outside of Mazar-i-Sharif and the Bamyan province, would then be the primary step. Furthermore, as P1 and P8 stated, VoP prefers advertising of the trainings to occur via word of mouth and real-life examples, as they believe this would create sufficient intrinsic motivation among the people who require aid, resulting in a long-lasting impact and behavioural change. This would be a more spontaneous and locally

induced form of upscaling. For effective upscaling, other ways of advertising the nutritional training and the HDGs might also be needed – but actual upscaling for organizations such as VoP may be a complex dilemma as they value sustainability and local ownership. VoP does not want to compromise its values, but that is something that might happen with upscaling (Palzkill & Augenstein, 2021), when the nutrition training and its activities have to become more effectively structured and centrally organized. Thus, the degree to which VoP wants to have their trainings upscaled, should also be in line with their values – specifically local ownership and sustainability – and ways of operating.

The next layer regards upscaling of nutritional education activities themselves. The taught trainings should contain materials that have been standardized for Afghanistan and the relevant activities. The training manual for trainers should be easily accessible and understandable, as well as the action cards. Then, the education activities can be upscaled throughout Afghanistan.

Furthermore, there are additional challenges that come with the endeavour of upscaling. Firstly, VoP is a small organization. If it would be upscaled, even if it is mostly an expansion of their networks and relationships in Afghanistan, the threat of losing oversight increases. This would happen sooner because of the lack of administration personnel and higher degree of activities and networks to maintain. Village of Peace would have to expand, which means they would require more funding. Another consideration concerns the current lack of official evaluation of the nutrition training. VoP, as P1 and P8 stated, has a different vision of what an outcome of a project should be than the donor community, as well a different vision of what an impact evaluation should look like. There have not been any official impact evaluations of the nutrition training so far. This might pose as an obstacle in the upscaling process. A last consideration that needs to be taken into account is the take-over of the Taliban and how that political and social instability will evolve in the near future. Village of Peace has already stated that they want to work with the Taliban and be as transparent as possible, emphasizing the need for facilitative relationships with government in achieving any kind of progress locally. They fulfil their objectives by meeting the Taliban and talking with them, to maintain a functional relationship with them, as P1 and P8 explained. However, they also do not know how the Taliban will evolve in the future. Whether the restrictions in Mazar-i-Sharif will stay the same or change to be stricter or more lenient – it will have an influence on the degree to which VoP can maintain operations in Afghanistan. All things considered greatly affect their aspirations for upscaling.

To conclude; while upscaling seems an attractive endeavour, VoP's activities still require careful considerations that need to be thoroughly examined. It may lead to the conclusion that there are not as many possibilities as they would desire, but areas for growth are realistically possible. However, since local ownership forms an important part of their values – VoP requires that their main activities are driven by their local sister NGOs, and they want local Afghan NGOs to expand – there are more possibilities than if they would operate on their own. Together, the Afghan NGOs have more reach and have the potential to have a bigger influence on the local circumstances than a single foreign NGO.

4.4.5 Interim conclusion

Table 53. Summary of the recommendations for improvement of the content, tools, and methods of the nutrition training from Village of Peace.

| Applies to: | Recommendation | | | | | | |
|-------------|---|--|--|--|--|--|--|
| | Include information on carbohydrates and fats | | | | | | |
| | 2. Include information on minerals, particularly iron, iodine, and zinc | | | | | | |
| | 3. Focus on food rather than nutrients: make a visualization of food groups | | | | | | |
| | corresponding to each nutrient | | | | | | |
| | 4. Include advice on the proportions of food groups that should be consumed | | | | | | |
| | 5. Include gender and life stage specific information | | | | | | |
| | 6. Include what a varied diet consists of | | | | | | |
| | 7. Elaborate on breastfeeding education | | | | | | |
| Content | a. (Correct) Feeding frequency/age | | | | | | |
| | b. Include hunger and fullness cues | | | | | | |
| | c. Add proper breastfeeding techniques | | | | | | |
| | d. Introduction of solids: when, how, and what | | | | | | |
| | e. Add food preparation for infants | | | | | | |
| | 8. Include more information on malnourishment during pregnancy | | | | | | |
| | Clarify information on food preparation (align with (inter)national guidelines) | | | | | | |
| | 10. Include information on WASH practices | | | | | | |
| | 11. Include information on food storage | | | | | | |
| | 12. Develop a visual handbook for the participants of the training | | | | | | |
| Tools | 13. Prioritize the Do's instead Don'ts in the visuals | | | | | | |
| | 14. Make the visuals culturally appropriate, self-explanatory, no text | | | | | | |
| | 15. Identify limitations or motivations for behaviour change | | | | | | |
| | 16. Include storytelling for men | | | | | | |
| | 17. Make cooking a more prominent part of the training | | | | | | |
| Methods | 18. Include focused group discussions | | | | | | |
| | 19. Establish a role for religious leaders in disseminating training information | | | | | | |
| | 20. Stimulate interactive reflection and evaluation | | | | | | |
| | 21. Certificate distribution to the participants and utilization common language | | | | | | |

This section summarizes the previously described recommendations with respect to the improvement of VoPs nutrition training materials. The recommendations for the training are divided according to the component of the training they apply to either the content, tools, or methods (Table 5). With respect to upscaling, there are some possibilities. Hereto, VoPs training materials should be standardized for Afghanistan and manuals should be easily accessible and understandable, while emphasizing local ownership. Ensuring the materials are understandable, recognizable, and culturally accepted may stimulate spontaneous scaling. Challenges for upscaling are the possibility of losing oversight, requiring additional funding, respecting the social and political situation, and the lack of impact assessment.

5. Discussion

In Chapter 2, the theoretical frameworks have been discussed. The principles of BCC have been applied to the nutrition training materials throughout the document. The SEM also can be applied to the context of Afghanistan and the training materials. The dietary habits, the vegetable and fruit intake, and food practices of the widows and their children are influenced by all the levels of the SEM, one more than the other. For the intrapersonal level, the widows are influenced by their individual nutritional knowledge and daily dietary habits. For the interpersonal level, the widows are influenced by interactions with their social networks: this could be friends, family and/or neighbours. The interactions they have with these people about food and cooking influence their own dietary habits. Lastly, the last levels, the organizational, community and public policy levels, all have a more indirect but still impactful influence on the widows. These include community contexts – the specific socio-political and economic characteristics from the Mazar-i-Sharif region can influence the widows; religious and cultural values – the Islam and its related values influence part of the diet of the women and their habits; and the political instability, relating to the take-over of the Taliban and the differences between regions in the strictness of the regulations, also influences the possibilities of the women for following the VoP training and being able to grow vegetables in their HDG. Taking into account all these different levels as influencing factors in the widows' lives, offers guidance for better understanding the factors that influence the women's dietary behaviours. The application of the SEM on the dietary habits of the Afghan widows is thus a first step in identifying the limitations and behaviours for behavioural change.

Our team is composed of multidisciplinary students with International Development and Nutrition and Health backgrounds; thus, we had a diverse perspective and approach to executing this ACT project. However, one of our biggest limitations was our inability to be immersed in the local context. Our methods were carried out online by gathering literature, reviewing training materials, and interviewing people. This approach might have introduced misconceptions and nonapplicable trainings that were recommended in this report. For instance, some of the literature reviews were influenced by non-local, international organizations that operate in Afghanistan but do not originate from the local context. The international guidelines are formulated by western organizations and do not specifically focus on regional contexts. Additionally, data that was available was from for the Taliban takeover, which could affect relevance of the data in the current situation in Afghanistan. Some of the interviewees were not from Afghanistan but shared insights based on their experiences and knowledge. With the interviews, however, we have done a great deal of incorporating information from Afghans. We interviewed Afghan people based in Afghanistan, Europe, USA and Brazil which broadened our perspectives of the local context. We also interviewed many experts from different backgrounds who were able to substantiate our findings from literature. Considering the ethics of the case, it is important that providing a nutrition training to a community fits their situation and does not impede personal freedoms. Ultimately, our work could not be reviewed by local trainees to determine whether the recommended trainings would be suitable to be applied in the local context.

Another limitation was that we were reviewing and redesigning preexisting VoP training materials designed for widows, however, these trainings are taught to men. It is unknown whether this information would be received and perceived well by male orphans to be passed on accurately to the widows. This indirect contact with widows makes it challenging to target them with our intended trainings. Regardless, our general recommendations for improvement can be applied for either male or female trainees, however, how the content is presented may need to be adjusted based on whether men or widows are participating in the training. This adjustment is necessary to ensure the indented message comes across in the most appropriate and apparent way. Since VoP has not yet conducted impact assessments of their nutritional trainings and does not have baseline data collection, the effectiveness of the training remains unknown. Additionally, the suggestions for improvement of the training provided in this report are not guaranteed to improve the effectiveness of the training. we chose to forego a complete redesign of the teacher training guide, since P8 mentioned the teacher guide was incomplete, nor fully updated.

Lastly, team members of this project do not speak the local language which posed some challenges to determine suitable interviewees. However, we did manage to have a translator in an interview with a past Afghan trainer, which significantly helped us understand how the past trainings looked like. It would have added more value if we could have interviewed more Afghans currently living in Afghanistan to gain more insight in the current training situations. This would have been more achievable if there were no language barriers. Additionally, there were very limited data in English on the Mazar-i-Sharif district, which made it challenging to understand what the most suitable recommendations would be given the region and its common practices. Moving forward, our work should be reviewed by local trainers and adjusted to best suit the region.

6. Conclusion

This section will summarize the findings of the report. The aim of this report was to review and redesign the nutrition training materials, developed by VoP, according to: the cultural context of Afghanistan; the diet and nutritional deficiencies of the people in Mazar-i-Sharif; the (inter)national guidelines on dietary intake, child feeding practices, breastfeeding, food preparation and water, sanitation and hygiene practices; and the principles of BCC. This aim was reached by first gathering information on these topics by doing literature reviews, document analyses and conducting interviews. The theoretical frameworks on BCC and the SEM have been used to put the results in an academic context. The review and redesign of the nutrition training materials are based on the results that have been found. The recommendations are based on the gaps in the nutrition training materials that have been found in the review. After the recommendations, the report presents the possibilities and considerations for upscaling the activities of Village of Peace. This report has hopefully given the commissioner more insights in the strengths and shortcomings of nutritional training materials based on aforementioned information, and will hopefully give Village of Peace practical ideas for how to improve their materials.

References

- Abraham, C., & Michie, S. (2008). A taxonomy of behavior change techniques used in interventions. *Health psychology*, *27*(3), 379. https://doi.org/10.1037/0278-6133.27.3.379
- Action Against Hunger (n.d.). Nutrition & Health. Retrieved June 28, 2023, from https://www.actionagainsthunger.org/our-solutions/nutrition-health/
- Adams, J. (2020). Behaviour change: a step by step guide for interventions. Action Against Hunger. Retrieved June 28, 2023, from https://knowledgeagainsthunger.org/wp-content/uploads/2020/08/2020-ACH-Behaviour-Change-Guide.pdf
- Adedini, S. A., Babalola, S., Ibeawuchi, C., Omotoso, O., Akiode, A., & Odeku, M. (2018). Role of religious leaders in promoting contraceptive use in Nigeria: evidence from the Nigerian urban reproductive health initiative. *Global Health: Science and Practice*, 6(3), 500-514. https://doi.org/10.9745/GHSP-D-18-00135
- Afghanistan National Standards Authority. (2014). *Iodized Edible Salt Specification*. Retrieved June 28, 2023, from https://extranet.who.int/nutrition/gina/en/node/26062
- Albright, C. L., & Farquhar, J. W. (1998). Principles of Behavior Change Communication. In *Introduction to Clinical Medicine* (pp. 762-767). Philadelphia: BC Decker, Inc.
- Al Jazeera. (2023, June 15). Photos: Locusts destroy Afghanistan crops amid severe food crisis. Al Jazeera. https://www.aljazeera.com/gallery/2023/6/15/photos-locusts-destroy-afghanistan-crops-amid-severe-food-crisis
- Amnesty International (2023). Amnesty International Report 2022/23: The State of The World's Human Rights (POL 10/5670/2023). Amnesty International Ltd. p. 64-67.

 https://www.amnesty.org/en/location/asia-and-the-pacific/south-asia/afghanistan/report-afghanistan/.
- Amowitz, L. L., Heisler, M., & Lacopino, V. (2004). A Population-Based Assessment of Women's Mental Health and Attitudes toward Women's Human Rights in Afghanistan. Journal of Women's Health. https://doi.org/10.1089/154099903768248285
- Ashiekpe, J. A. (2012). Behavioural Change Communication Strategies his for Enhanced Corporate Communications and Sustainable Development in Nigeria. *Journal of Contemporary Communication*, 1(1), 1-19.
- Banerjee, S. K., Andersen, K. L., Warvadeka, J., & Pearson, E. (2013). Effectiveness of a Behavior Change Communication Intervention to Improve Knowledge and Perceptions About Abortion in Bihar and Jharkhand, India. *International Perspectives on Sexual and Reproductive Health,*, 39(03), 142-151. doi: 10.1363/3914213
- Black, R. E. (2001). Micronutrients in pregnancy. *The British journal of nutrition, 85*(S2), S193–S197. https://doi.org/10.1079/bjn2000314

- Briscoe, C., & Aboud, F. (2012). Behaviour change communication targeting four health behaviours in developing countries: a review of change techniques. *Social science & medicine*, 75(4), 612-621. https://doi.org/10.1016/j.socscimed.2012.03.016
- Casas, R., Castro-Barquero, S., Estruch, R., & Sacanella, E. (2018). Nutrition and Cardiovascular Health. Int J Mol Sci, 19(12). https://doi.org/10.3390/ijms19123988
- Centers for Disease Control and Prevention (2021). Signs Your Child is Hungry or Full. Retrieved June 21, 2023, from https://www.cdc.gov/nutrition/infantandtoddlernutrition/mealtime/signs-your-child-is-hungry-or-full.html
- Centers for Disease Control and Prevention (2022). How Much and How Often to Breastfeed. Retrieved June 21, 2023, from https://www.cdc.gov/nutrition/infantandtoddlernutrition/breastfeeding/how-much-and-how-often.html
- Cheng, L. (2014). Effective print material for low-literacy populations: Literature review and guidelines:

 Literature Review Overview. http://africasoilhealth.cabi.org/wpcms/wp-content/uploads/2014/06/Effective_print_material_for_low_literacy_farmers.pdf
- Dizon, F., Herforth, A. & Wang, Z. (2019). The cost of a nutritious diet in Afghanistan, Bangladesh, Pakistan, and Sri Lanka. *Global Food Security, 21*, 38-51. https://doi.org/10.1016/j.gfs.2019.07.003
- D'Souza, A. & Jolliffe, D. (2014). Food insecurity in vulnerable populations: coping with food price shocks in Afghanistan. *American Journal of Agricultural Economics*, *96*(3), 790-812. https://doi.org/10.1093/ajae/aat089
- Essad, M. Y., Hasan, M. M., Islam, Z., Riaz, M. M. A., Aborode, A. T., & Ahmad, S. (2021). COVID-19 and multiple crises in Afghanistan: an urgent battle. National Library of Medicine. https://doi.org/10.1186%2Fs13031-021-00406-0
- Flax, V. L., Ipadeola, A., Schnefke, C. H., Kwasu, S., Mikail, A. A., Bose, S., Brower, A.O. & Edwards, S. (2022). Complementary feeding social and behavior change communication for fathers and mothers improves children's consumption of fish and eggs and minimum meal frequency in Kaduna State, Nigeria. *Current Developments in Nutrition*, 6(5), nzac075. https://doi.org/10.1093/cdn/nzac075
- Food and Agriculture Organization of the United Nations (2005). Supporting Household Food Security, Nutrition and Livelihoods in Afghanistan 2005-2008. Retrieved June 12, 2023, from https://www.ipcinfo.org/fileadmin/user_upload/fsn/docs/FAO%20Afg%20Nutrition%20&Livelihoods 0808.pdf
- Food and Agriculture Organization of the United Nations/UNICEF (2008). Healthy Food, Happy Baby, Lively Family: Improved Feeding Practices and Recipes For Afghan Children and Mothers. Retrieved from June 12, 2023, from https://www.fao.org/ag/humannutrition/15403-0397cd6b1f6ca0073374b4c8c9f642644.pdf

- Food and Agriculture Organization of the United Nations (2016). *National Food-Based Dietary Guidelines* for Afghans A Manual. Retrieved June 5, 2023, from https://www.fao.org/3/i5283e.pdf
- Food and Agriculture Organization of the United Nations. (2021). Global Strategic Framework for Food Security and Nutrition (GSF). Committee on World Food Security (CFS). https://www.fao.org/fileadmin/templates/cfs/Docs2021/GSF/NF445 CFS GSF 2021 Clean en. pdf
- Food and Agriculture Organization/World Health Organization. (n.d.) *About Codex Alimentarius*. Retrieved June 12, 2023, from https://www.fao.org/fao-who-codexalimentarius/about-codex/en/
- Frick, T. W., & Reigeluth, C. M. (1999). Formative research: A methodology for creating and improving design theories. *Instructional-design theories and models: A new paradigm of instructional theory*, *2*, 633-652.
- FSIN. (2022). Regional overviews of food crises in 2022: Asia. Food Security Information Network. https://www.fsinplatform.org/sites/default/files/resources/files/GRFC2023-regional-asia.pdf
- Global Fortification Data Exchange. (n.d.). *Dashboard: Country Fortification Afghanistan Fortification Dashboard*. Retrieved June 28, 2023, from https://fortificationdata.org/country-fortification-dashboard/?alpha3 code=AFG&lang=en
- Global Nutrition Report (n.d.). *Afghanistan: The Burden of Malnutrition at a Glance*. Retrieved June 16, 2023, from https://www.globalnutritionreport.org/resources/nutrition-profiles/asia/southern-asia/afghanistan/
- Gordijn F., Eernstman, N., Helder, J., & Brouwer, H. (2018). *Reflection Methods; Practical guides for rainers and facilitators: Tools to make learning more meaningful*. Wageningen Centre for Development Innovation. https://doi.org/10.18174/439461
- Han, Y., Kim, H., & Park, S. (2021). The Roles of Nutrition Education and Food Vouchers in Improving Child Nutrition: Evidence from a Field Experiment in Ethiopia. *Journal of Health Economics*, 80, 102545. https://doi.org/10.1016/j.jhealeco.2021.102545
- Haselow, N., Stormer, A., & Pries, A. M. (2016). Evidence-based evolution of an integrated nutrition-focused agriculture approach to address the underlying determinants of stunting. *Maternal and Child Nutrition*, 12, 155–168. https://doi.org/10.1111/mcn.12260
- Harvard T.H. Chan School of Public Health. (n.d.). *Are Anti-Nutrients Harmful?* The Nutrition Source. Retrieved June 22, 2023, from https://www.hsph.harvard.edu/nutritionsource/anti-nutrients/
- Haynes-Maslow, L., Jones, L., Morris, L., Anderson, A., & Hardison-Moody, A. (2020). Development and evaluation of a family-based cooking and nutrition education program. *The Journal of Extension*, *58*(3), 16. DOI: 10.34068/joe.58.03.16
- HI Institute. (2022, August 11). Taliban Takeover 1 year on: The situation is worse than ever and people with disabilities are the hardest hit | HI. Handicap International. Retrieved June 13, 2023, from

- https://www.hi.org/en/taliban-takeover-1-year-on--the-situation-is-worse-than-ever-and-people-with-disabilities-are-the-hardest-hit
- Human Rights Watch. (2022, August 4). Economic Causes of Afghanistan's Humanitarian Crisis. Human Rights Watch. Retrieved June 12, 2023, from https://www.hrw.org/news/2022/08/04/economic-causes-afghanistans-humanitarian-crisis
- IFRC. (2021, December 2). Afghanistan: Worst drought and hunger crisis in decades. IFRC. Retrieved June 16, 2023, from https://www.ifrc.org/press-release/afghanistan-worst-drought-and-hunger-crisis-decades
- IPC (2023). Afghanistan IPC Acute Malnutrition Analysis. Integrated Food Security Phase Classification. Retrieved June 16, 2023, from https://www.ipcinfo.org/ipc-country-analysis/details-map/en/c/1156185/?iso3=AFG
- IRA (2018). Afghanistan food security and nutrition strategic plan. Retrieved June 12, 2023, from https://faolex.fao.org/docs/pdf/afg191005.pdf
- JICA. (2021). Healthy Village Facilitator's Guide: Health Communication for Behaviour Change (Health Promoting Village Project Japan International Cooperation Agency). Ministry of Health and Medical Services, Solomon Islands.

 https://www.jica.go.jp/Resource/project/solomon/002/materials/ku57pq00003um0e9-att/Communication for Behaviour Change.pdf
- Kennedy, E., Stickland, J., Kershaw, M., & Biadgilign, S. (2018). Impact of Social and Behavior Change Communication in Nutrition Sensitive Interventions on Selected Indicators of Nutritional Status. *Journal of human nutrition*, 2(1). https://doi.org/10.36959/487/279
- Kilanowski, J. F. (2017). Breadth of the socio-ecological model. *Journal of Agromedicine*, 22(4), 295-297. https://doi.org/10.1080/1059924X.2017.1358971
- Kim, C., Mansoor, G. F., Paya, P. M., Ludin, M. H., Ahrar, M. J., Mashal, M. O., & Todd, C. S. (2020). Review of policies, data, and interventions to improve maternal nutrition in Afghanistan. *Maternal & Child Nutrition*, 16(4), e13003. https://doi.org/10.1111/mcn.13003
- Kumar, R. (2021, July 15). Taliban targeting Afghanistan's crucial power, IT infrastructure | Taliban News. Al Jazeera. https://www.aljazeera.com/news/2021/7/15/taliban-afghanistan-it-electricity-power
- Kurdi, S., Figueroa, J. L., & Ibrahim, H. (2020). Nutritional training in a humanitarian context: Evidence from a cluster randomized trial. *Maternal and Child Nutrition*, *16*(3). https://doi.org/10.1111/mcn.12973
- Kuyper, E., & Dewey, K. (2012). Fathers support infant and young child feeding: Their contributions to better outcomes. *Program in International and Community Nutrition of University of California-Davis*. https://www.aliveandthrive.org/sites/default/files/attachments/Literature-Reivew-Dads.pdf

- Lagerwerf, L. (2022, June 14). Life Changing Training- Sadia's Story. *Village of Peace*. Retrieved June 12, 2023, from https://villageofpeace.org/2022/06/14/life-changing-training-sadias-story/?lang=en
- Laverack, G. (2017). The challenge of behaviour change and health promotion. *Challenges*, 8(2), 25. https://doi.org/10.3390/challe8020025
- Lee, B. C., Bendixsen, C., Liebman, A. K., & Gallagher, S. S. (2017). Using the socio-ecological model to frame agricultural safety and health interventions. *Journal of agromedicine*, 22(4), 298-303. https://doi.org/10.1080/1059924X.2017.1356780
- Leppäniemi, H., Ibrahim, E., Abbass, M. M., Borghi, E., Flores-Urrutia, M. C., Dominguez Muriel, E., ... & Al-Jawaldeh, A. (2023). Nutrition Profile for Countries of the Eastern Mediterranean Region with Different Income Levels: An Analytical Review. Children, 10(2), 236.
- Lowe N. M. (2021). The global challenge of hidden hunger: perspectives from the field. *The Proceedings of the Nutrition Society, 80*(3), 283–289. https://doi.org/10.1017/S0029665121000902
- Lunn, J. & Theobald, H.E. (2006). The health effects of dietary unsaturated fatty acids. *Nutrition Bulletin*, 31, 178-224. https://doi.org/10.1111/j.1467-3010.2006.00571.x
- Mahumud, R.A., Uprety, S., Wali, N., Renzaho, A.M.N., Chitekwe, S., (2021). The effectiveness of interventions on nutrition social behaviour change communication in improving child nutritional status within the first 1000 days: Evidence from a systematic review and meta-analysis.

 Maternal & Child Nutrition 18. https://doi.org/10.1111/mcn.13286
- Maleta, K. (2006). Undernutrition. *Malawi medical journal: the journal of Medical Association of Malawi,* 18(4), 189-205. Retrieved June 7, 2023, from https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3345626/
- Masfety, V. K., Keyes, K., Karam, E., Sabawoon, A., & Sarwari, B. A. (2021). A national survey on depressive and anxiety disorders in Afghanistan: A highly traumatized population. BMC Psychiatry, 21(314). https://doi.org/10.1186/s12888-021-03273-4
- Metro South Health (2016). Afghan food and cultural profile: dietetic consultation guide. The State of Queensland. https://metrosouth.health.qld.gov.au/sites/default/files/dietetic-profile-afghan.pdf
- Ministry of Public Health [Afghanistan], & UNICEF. (2013). National Nutrition Survey Afghanistan (2013): Survey Report. Retrieved June 7, 2023, from https://reliefweb.int/report/afghanistan/national-nutrition-survey-afghanistan-2013
- Munteanu, C., & Schwartz, B. (2022). The relationship between nutrition and the immune system [Review]. *Frontiers in Nutrition*, 9. https://doi.org/10.3389/fnut.2022.1082500
- Nancy, S., & Dongre, A. R. (2021). Behavior change communication: Past, present, and future. *Indian Journal of Community Medicine: Official Publication of Indian Association of Preventive & Social Medicine*, 46(2), 186. doi:10.4103/ijcm.IJCM_441_20

- Nath, H., Samtiya, M. & Dhewa, T. (2022). Beneficial attributes and adverse effects of major plant-based foods anti-nutrients on health: A review. *Human Nutrition & Metabolism*, 28, 200147. https://doi.org/10.1016/j.hnm.2022.200147
- National Health Service (2022). Your baby's first solid foods. Retrieved June 21, 2023 from https://www.nhs.uk/conditions/baby/weaning-and-feeding/babys-first-solid-foods/#:~:text=You%20might%20want%20to%20start,as%20broccoli%2C%20cauliflower%20and%20spinach
- National Institutes of Health. (2022a). *Zinc Health Professional Fact Sheet*. U.S. Department of Health and Human Services, National Institutes of Health, Office of Dietary Supplements. Retrieved June 21, 2023, from https://ods.od.nih.gov/factsheets/Zinc-HealthProfessional/
- National Institutes of Health. (2022b). *Iodine Health Professional Fact Sheet*. U.S. Department of Health and Human Services, National Institutes of Health, Office of Dietary Supplements. Retrieved June 21, 2023, from https://ods.od.nih.gov/factsheets/lodine-HealthProfessional/
- National Institutes of Health. (2023). *Iron Health Professional Fact Sheet*. U.S. Department of Health and Human Services, National Institutes of Health, Office of Dietary Supplements. Retrieved June 21, 2023, from https://ods.od.nih.gov/factsheets/Iron-HealthProfessional/
- Nelson, S. S. (2010). Ex-Warlord Helps Afghan Province Make Progress. *NPR*. https://www.npr.org/2010/01/12/122486923/ex-warlord-helps-afghan-province-make-progress
- Newbrander, W., Natiq, K., Shahim, S., Hamid, N., & Skena, N. B. (2013). Barriers to appropriate care for mothers and infants during the perinatal period in rural Afghanistan: A qualitative assessment. Global Public Health, 9(sup1), S93–S109. https://doi.org/10.1080/17441692.2013.827735
- Ngigi, S., & Busolo, D. N. (2018). Behaviour change communication in health promotion: Appropriate practices and promising approaches. *International Journal of Innovative Research and Development*, 7(9).
- Nutrition International (2019). Behaviour Change Intervention Toolkit. Retrieved June 28, 2023, from https://www.nutritionintl.org/wp-content/uploads/2019/02/BCI Tool-kit Digital NI 2019.pdf
- Oskorouchi, H. R., & Sousa-Poza, A. (2021). Floods, food security, and coping strategies: Evidence from Afghanistan. Agricultural Economics, 52(1), 123-140.
- PAHO. (n.d.). *WHO "Golden Rules" for Safe Food Preparation*. Retrieved June 7, 2023, from https://www.paho.org/en/health-emergencies/who-golden-rules-safe-food-preparation
- Palzkill, A., & Augenstein, K. (2021). Upscaling sustainable niches: How a user perspective of organizational value logics can help translate between niche and system. In *Business Models for Sustainability Transitions: How Organisations Contribute to Societal Transformation* (pp. 229-248). Cham: Springer International Publishing.
- Pittino, D., Martínez, A. H., Chirico, F., & Galván, R. S. (2018). Psychological ownership, knowledge sharing and entrepreneurial orientation in family firms: The moderating role of governance

- heterogeneity. *Journal of Business Research*, *84*, 312–326. https://doi.org/10.1016/j.jbusres.2017.08.014
- Prado, E. L., & Dewey, K. G. (2014). Nutrition and brain development in early life. *Nutrition Reviews*, 72(4), 267-284. https://doi.org/10.1111/nure.12102
- Pratt, C., & Bowman, S. (2008). Principles of Effective Behavior Change: Application to Extension Family Educational Programming. *Journal of Extension*, 46(5).
- Prudhon, C., Benelli, P., Maclaine, A., Harrigan, P., & Frize, J. (2017). Informing infant and young child feeding programming in humanitarian emergencies: An evidence map of reviews including low and middle income countries. *Maternal and Child Nutrition*, 14(1), e12457. https://doi.org/10.1111/mcn.12457
- Prüss-Üstün, A., & World Health Organization. (2008). Safer water, better health: costs, benefits and sustainability of interventions to protect and promote health. In. Geneva: World Health Organization. Retrieved June 14, 2023, from https://apps.who.int/iris/handle/10665/43840
- Rahman, A., Leppard, M., Rashid, S., Jahan, N., & Nasreen, H. E. (2016). Community perceptions of behaviour change communication interventions of the maternal neonatal and child health programme in rural Bangladesh: an exploratory study. *BMC health services research*, *16*(1), 1-13. https://doi.org/10.1186/s12913-016-1632-y
- Reemer, T., & Makanza, M. (2014). GENDER ACTION LEARNING SYSTEM PRACTICAL GUIDE FOR TRANSFORMING GENDER AND UNEQUAL POWER RELATIONS IN VALUE CHAINS. OXFAM Novib. https://www.oxfamnovib.nl/Redactie/Downloads/English/publications/150115 Practical%20gui de%20GALS%20summary%20Phase%201-2%20lr.pdf
- Relief Web. (2021, December 2). Afghanistan: Worst drought and hunger crisis in decades. IFRC.

 Retrieved June 16, 2023, from https://www.ifrc.org/press-release/afghanistan-worst-drought-and-hunger-crisis-decades
- Robinson, T. (2008). Applying the socio-ecological model to improving fruit and vegetable intake among low-income African Americans. *Journal of community health*, *33*, 395-406. https://doi.org/10.1007/s10900-008-9109-5
- Rostamzadeh, M., Ezadi, Z., Hosseini, M., & Husseini, A. A. (2022). Maternal health literacy and pregnancy outcomes in Afghanistan. *Journal of Education and Health Promotion*, 11(1), 421.
- Ruel, M. T., Quisumbing, A. R., & Balagamwala, M. (2017). Nutrition-sensitive agriculture: what have we learned and where do we go from here? International Food Policy Research Institute. Retrieved June 28, 2023, from https://ebrary.ifpri.org/utils/getfile/collection/p15738coll2/id/131461/filename/131673.pdf
- Saaka, M., Wemah, K., Kizito, F., & Hoeschle-Zeledon, I. (2021). Effect of nutrition behaviour change communication delivered through radio on mothers' nutritional knowledge, child feeding practices and growth. *Journal of Nutritional Science*, 10. https://doi.org/10.1017/jns.2021.35

- Samim, S. A., Hu, Z., Stepien, S., Amini, S. Y., Rayee, R., Niu, K., & Mgendi, G. (2021). Food insecurity and related factors among farming families in Takhar region, Afghanistan. *Sustainability*, *13*(18), 10211. https://doi.org/10.3390/su131810211
- Sharma, J., Ludin, H., Chauhan, M., & Zodpey, S. (2021). Public health nutrition in Afghanistan-policies, strategies and capacity-building: current scenario and initiatives. *Eastern Mediterranean Health Journal*, 27(7), 728-737.
- Shergill-Bonner, R. (2017). Micronutrients. *Paediatrics and child health*, *27*(8), 357–362. https://doi.org/10.1016/j.paed.2017.04.002
- Syauqi, M. I. (2020). Makna "Halalan Thayyiban" dalam Al-Qur'an. NU Online. Retrieved June 19, 2023, from https://islam.nu.or.id/tafsir/makna-halalan-thayyiban-dalam-al-qur-an-IQ1AD
- The ARDA. (2020). *National Profiles | World Religion*. Association of Religion Data Archives. https://www.thearda.com/world-religion/national-profiles?u=1c
- The World Bank. (2018, May 6). Unlocking the Potential of Agriculture for Afghanistan's Growth. World Bank. Retrieved June 16, 2023, from https://www.worldbank.org/en/country/afghanistan/publication/unlocking-potential-of-agriculture-for-afghanistan-growth
- Todaro, M. P., & Smith, S. C. (2009). Economic development. Pearson education.
- UNICEF. (2023a). Afghanistan Appeal. UNICEF. https://www.unicef.org/appeals/afghanistan#download
- UNICEF. (2023b). Afghanistan Humanitarian Situation Report: April 2023. (No. 4). UNICEF. https://www.unicef.org/documents/afghanistan-humanitarian-situation-report-no4-april-2023
- UNICEF & Afghanistan WASH Cluster. (2020). *Afghanistan National Guidelines for WASH in Emergency*. Retrieved June 28, 2023, from https://reliefweb.int/report/afghanistan/afghanistan-national-guidelines-wash-emergency
- UNODC. (2022a). Opium Cultivation in Afghanistan: Latest findings and and emerging threats. United Nations Office on Drugs and Crime (UNODC). https://www.unodc.org/documents/cropmonitoring/Afghanistan/Opium_cultivation_Afghanistan_2022.pdf
- UNODC. (2022b). UNODC Research Brief: Does the increase in opium poppy cultivation contribute to food Insecurity in Afghanistan. Retrieved June 16, 2023, from https://www.unodc.org/documents/data-and-analysis/Afghanistan/WheatVersusOpiumPoppy Afg.pdf
- USAID (2018). Afghanistan Food Security and Nutrition Agenda. Food Security and Nutrition Public Awareness and Advocacy Framework and Plan, 2018-2023. Handout. Retrieved June 12, 2023, from https://scalingupnutrition.org/wp-content/uploads/2018/10/AFSeN-A-Food-Security-and-Nutrtion-Public-Awareness-and-Advocacy-Plan.pdf

- USAID GlobalWaters. (2013). Water, Sanitation, and Hygiene: Essential Components for Food Security. Retrieved June 12, 2023, from https://www.globalwaters.org/resources/assets/water-sanitation-and-hygiene-essential-components-food-security
- Village of Peace. (2015). High Diversity Gardening Implementation Curriculum. Village of Peace.
- Village of Peace. (2020). Project Combatting malnutrition: Afghanistan Food Security. Village of Peace. https://villageofpeace.org/wp-content/uploads/2021/10/Projectplan-Foodsecurity-v3-ENG HR.pdf
- Village of Peace. (n.d.). Healthy food Happy child: Teacher Guide. Pilot II.
- Vujcic, J., Ram, P. K., & Blum, L. (2015). Handwashing promotion in humanitarian emergencies: strategies and challenges according to experts. *Journal of Water Sanitation and Hygiene for Development*, 5(4), 574–585. https://doi.org/10.2166/washdev.2015.009
- WASH Advocates. (2013). Global Food Security: The Critical Role of Water, Sanitation, and Hygiene (WASH). Retrieved June 12, 2023, from https://www.fsnnetwork.org/resource/global-food-security-critical-role-water-sanitation-and-hygiene-wash
- Watson Institute (2022). BY THE NUMBERS: Afghanistan before and after 20 years of war (2001-2021) |

 Costs of War. The Watson Institute for International and Public Affairs. Retrieved June 12, 2023,
 from https://watson.brown.edu/costsofwar/Afghanistanbeforeandafter20yearsofwar
- West, R., Michie, S., Rubin, G. J., & Amlôt, R. (2020). Applying principles of behaviour change to reduce SARS-CoV-2 transmission. *Nature human behaviour*, *4*(5), 451-459. https://doi.org/10.1038/s41562-020-0887-9
- Workicho, A., Biadgilign, S., Kershaw, M., Gizaw, R., Stickland, J., Assefa, W., Abuye, C., Woldegiorgis, B., Berhanu, L. & Kennedy, E. (2021). Social and behaviour change communication to improve child feeding practices in Ethiopia. *Maternal & child nutrition*, *17*(4), e13231. https://doi.org/10.1111/mcn.13231
- World Food Programme. (2021). Fill the Nutrient Gap (FNG) Afghanistan Brief: The Potential for Fortification. Retrieved June 28, 2023, from https://docs.wfp.org/api/documents/WFP-0000132368/download/
- World Food Programme. (2023). WFP Afghanistan: Situation Report. Retrieved June 16, 2023, from https://www.wfp.org/countries/afghanistan
- World Health Organization. (2008). Learning from large-scale community-based programmes to improve breastfeeding practices. World Health Organization. https://apps.World Health Organization.int/iris/handle/10665/44011
- World Health Organization. (2015). World Health Organization estimates of the global burden of foodborne diseases: foodborne disease burden epidemiology reference group 2007-2015. World Health Organization. Retrieved June 12, 2023, from https://www.World Health Organization .int/activities/estimating-the-burden-of-foodborne-diseases

- World Health Organization. (2018a). Promoting Maternal and Child Health Care in Afghanistan. Eastern Mediterranean Regional Office. Retrieved June 21, 2023, from www.emro.World Health
 www.emro.World Health
 www.emro.world:organization.int/afg/afghanistan-news/promoting-maternal-a-child-health-care-in-afghanistan-news/promoting-maternal-a-child-health-care-in-afghanistan-news/promoting-maternal-a-child-health-care-in-afghanistan-news/promoting-maternal-a-child-health-care-in-afghanistan-news/promoting-maternal-a-child-health-care-in-afghanistan-news/promoting-maternal-a-child-health-care-in-afghanistan-news/promoting-maternal-a-child-health-care-in-afghanistan-news/promoting-maternal-a-child-health-care-in-afghanistan-news/promoting-maternal-a-child-health-care-in-afghanistan-news/promoting-maternal-a-child-health-care-in-afghanistan-news/promoting-maternal-a-child-health-care-in-afghanistan-news/promoting-maternal-a-child-health-care-in-afghanistan-news/promoting-maternal-a-child-health-news/promoting-maternal-a-child-health-news/promoting-maternal-
- World Health Organization. (2018b). Mother and Child Health Handbook. Islamic Republic of Afghanistan: Ministry of Public Health. http://www.mchhandbook.com/book/afghanistan/
- World Health Organization (2019). Breastfeeding. Retrieved, June 7, 2023, from https://www.who.int/health-topics/breastfeeding#tab=tab 1
- World Health Organization. (2020). *Healthy diet*. Retrieved June 7, 2023, from https://www.World Health Organization .int/news-room/fact-sheets/detail/healthy-diet
- World Health Organization. (2021). *Infant and young child feeding*. Retrieved June 7, 2023, from https://www.World Health Organization.int/news-room/fact-sheets/detail/infant-and-young-child-feeding
- World Health Organization. (n.d.). *Malnutrition*. Retrieved June 7, 2023, from https://www.World Health
 Organization .int/health-topics/malnutrition
- World Trade Organization (2022). *Trade Profile: Afghanistan*. Retrieved June 16, 2023, from https://www.wto.org/english/res e/statis e/trade profiles list e.htm
- Yüksek, S., Feuerhahn, S. B., & Leuphana University Lüneburg. (2013). Culture-Specific Objectives of Change Communication: An Intercultural Perspective. *JOURNAL OF MANAGEMENT AND CHANGE*, 30(31), 180-193.

Appendices:

A: List of definitions

Table A1. List of definitions

| BCC | An interactive process of any intervention with individuals, group, or community to develop communication strategies to promote positive health behaviours which are appropriate to the current social conditions and thereby help the society to solve their pressing health problems. This is achieved through the effective communication strategies and systematic information dissemination through interpersonal communication as well as with the help of print-visual-audio and new age media (<i>Behaviour Change</i> |
|-----------------------|---|
| | Communication (BCC) – National Health Mission, 2020). |
| HDG | A project where participants are trained in smart and sustainable vegetable gardening in their own garden. Furthermore, participants learn how healthy food contributes to a healthy body (Lagerwerf, 2022). The vegetables in the HDG, which contain all the essential nutrients for a healthy diet, are specifically tailored to meet the nutritional needs of the Afghan people. The sought-after nutrients include proteins (found in soy and beans); iron (found in spinach); vitamin A (found in tomatoes); vitamin C (found in cabbage); and vitamin E (found in paprika) (VoP, 2020). |
| Nutritional Education | A special nutritional learning plan for targeted individuals, using the diverse methods of interaction, educational game and role-playing, storytelling, and participation in practical workshops. The curriculum has three elements: Increase awareness of the dangers of malnutrition, learn about healthy nutrition and diet and entrench the basic principles of healthy food preparation and hygiene (VoP, 2020). |
| Widows | Woman whose husband have passed. In the specific context of VoP interventions, it means women whose husbands are dead and not allowed to participate in the workforce under the current Talban regime. |
| Orphans | the sons of the widows who are 16 years of age or above. They are also integrated in the nutritional education activities of VoP, where they act as a conveyer between VoP and the widows. |

B: BCC table

Table B1. 26 Behaviour change techniques. From Abraham & Michie (2008).

| | recinique (meoreucai framework) | Definition |
|-----|--|---|
| 1. | Provide information about behavior- health link. (IMB) | General information about behavioral risk, for example, susceptibility to poor health outcomes or mortality risk in relation to the behavior |
| 2. | Provide information on consequences. (TRA, TPB, SCogT, IMB) | Information about the benefits and costs of action or inaction, focusing on what will happen if the person does or does not perform the behavior |
| 3. | Provide information about others' approval. (TRA, TPB, IMB) | Information about what others think about the person's behavior and whether others will approve or disapprove of any proposed behavior change |
| 4. | Prompt intention formation. (TRA, TPB, SCogT, IMB) | Encouraging the person to decide to act or set a general goal, for example, to make a behavioral resolution such as "I will take more exercise next week" |
| 5. | Prompt barrier identification. (SCogT) | Identify barriers to performing the behavior and plan ways of overcoming them |
| 6. | Provide general encouragement. (SCogT) | Praising or rewarding the person for effort or performance without this being contingent on specified behaviors or standards of performance |
| 7. | Set graded tasks. (SCogT) | Set easy tasks, and increase difficulty until target behavior is performed. |
| 8. | Provide instruction. (SCogT) | Telling the person how to perform a behavior and/or preparatory behaviors |
| 9. | Model or demonstrate the behavior. (SCogT) | An expert shows the person how to correctly perform a behavior, for example, in class or on video |
| 10. | Prompt specific goal setting. (CT) | Involves detailed planning of what the person will do, including a definition of the behavior specifying frequency, intensity, or duration and specification of at least one context, that is, where, when, how, or with whom |
| 11. | Prompt review of behavioral goals. (CT) | Review and/or reconsideration of previously set goals or intentions |
| 12. | Prompt self-monitoring of behavior. (CT) | The person is asked to keep a record of specified behavior(s) (e.g., in a diary) |
| 13. | Provide feedback on performance. (CT) | Providing data about recorded behavior or evaluating performance in relation to a set standard or others' performance, i.e., the person received feedback on their behavior. |
| 14. | Provide contingent rewards. (OC) | Praise, encouragement, or material rewards that are explicitly linked to the achievement of specified behaviors |
| 15. | Teach to use prompts or cues. (OC) | Teach the person to identify environmental cues that can be used to remind them to perform a behavior, including times of day or elements of contexts. |
| 16. | Agree on behavioral contract. (OC) | Agreement (e.g., signing) of a contract specifying behavior to be performed so that there is a written record of the person's resolution witnessed by another |
| | Prompt practice. (OC) | Prompt the person to rehearse and repeat the behavior or preparatory behaviors |
| | Use follow-up prompts. | Contacting the person again after the main part of the intervention is complete |
| | Provide opportunities for social comparison. (SCompT) | Facilitate observation of nonexpert others' performance for example, in a group class or using video or case study |
| | Plan social support or social change. (social support theories) | Prompting consideration of how others could change their behavior to offer the person help or (instrumental) social support, including "buddy" systems and/or providing social support |
| 21. | Prompt identification as a role model. | Indicating how the person may be an example to others and influence their behavior or provide an opportunity for the person to set a good example |
| 22. | Prompt self-talk. | Encourage use of self-instruction and self-encouragement (aloud or silently) to support action |
| 23. | Relapse prevention. (relapse prevention therapy) | Following initial change, help identify situations likely to result in readopting risk behaviors or failure to maintain new behaviors and help the person plan to avoid or manage these situations |
| 24. | Stress management (stress theories) | May involve a variety of specific techniques (e.g., progressive relaxation) that do not target the behavior but seek to reduce anxiety and stress |
| 25. | Motivational interviewing | Prompting the person to provide self-motivating statements and evaluations of their own behavior to minimize resistance to change |
| 26. | Time management | Helping the person make time for the behavior (e.g., to fit it into a daily schedule) |
| 26. | Time management | Helping the person make time for the behavior (e.g., to fit it into a daily schedule) |

Note. IMB = information-motivation-behavioral skills model; TRA = theory of reasoned action; TPB = theory of planned behavior; SCogT = social-cognitive theory; CT = control theory; OC = operant conditioning.

C: Reference list per chapter

Table C1. Reference list per chapter, including the total amount

| Chapter | References used | Total amount |
|------------------------|---|--------------|
| 4.1 Training materials | Interview P1, P8 | 5 |
| VoP and their | Lagerwerf, 2022 | |
| contents | VoP, 2015 | |
| | VoP, n.d. | |
| 4.2 Guidelines | Casas et al, 2018 | 20 |
| | CDC, 2022 | |
| | FAO, 2016 | |
| | FAO/UNICEF, 2008 | |
| | FAO/WHO, n.d. | |
| | Maleta, 2006 | |
| | Munteanu & Schwartz, 2020 | |
| | NHS, 2022 | |
| | PAHO, n.d. | |
| | Prado & Dewey, 2014 | |
| | Prüss-Üstün et al., 2008 | |
| | Shergill-Bonner, 2017 | |
| | USAID GlobalWaters, 2013 | |
| | WASH Advocates, 2013 | |
| | WHO, 2015 | |
| | WHO, 2018a | |
| | WHO, 2018b | |
| | WHO, 2020 | |
| | WHO, 2021 | |
| | WHO, n.d. | |
| 4.3 Organizations BCC | Action Against Hunger, n.d. | 7 |
| | Adams, 2020 | |
| | Briscoe & Aboud, 2012 | |
| | FAO, 2005 | |
| | IRA, 2018 | |
| | Rahman et al., 2016 | |
| | USAID, 2018 | |
| 4.4 Review, Redesign, | Interview P1,P6, P7, P8, P9, P10 | 40 |
| Upscaling | Adenini et al., 2018 | |
| | Afghanistan National Standards Authority, 2014 | |
| | Black, 2001 | |
| | Cheng, 2014 | |
| | FAO, 2016 | |
| | Flax et al, 2022 | |
| | Frick & Reigeluth, 1999 | |
| | Gordijn et al., 2018 | |
| | Global Fortification Data Exchange, n.d. | |
| | Harvard T.H. Chan School of Public Health, n.d. | |
| | Haynes-Maslow et al., 2020 | |
| | JICA, 2021 | |

| | Kuyper & Dewey, 2012 | |
|----------------|--|---|
| | Lowe, 2021 | |
| | Lunn & Theobald, 2006 | |
| | · | |
| | Ministry of Public Health [Afghanistan] & UNICEF, 2013 | |
| | Nath et al., 2022 | |
| | National institutes of health, 2022a | |
| | National institutes of health, 2022b | |
| | National institutes of health, 2023 | |
| | Nutrition International, 2019 | |
| | Palzkill & Augenstein, 2021 | |
| | Pittino et al., 2018 | |
| | Reemer & Makanza, 2014 | |
| | Rostamzadeh et al., 2022 | |
| | Sharma, 2021 | |
| | UNICEF & Afghanistan WASH cluster, 2020 | |
| | VoP, 2015 | |
| | West et al., 2020 | |
| | WHO, 2018b | |
| | WHO, 2019 | |
| | WHO, 2021 | |
| | WHO, n.d. | |
| | World Food Program, 2021 | |
| Discussion and | 170110 1 000 1 10g10111, 2021 | 0 |
| Conclusion | | |
| Conclusion | | |

D: Nutrition tables

Table D1. Dietary reference intakes of micronutrients for various population groups.

| | | | Nutrient | | | | | | | | | |
|---------------|-----------|---------|------------------------|-----------|-----------|-----------------------|-----------|----------|------------|-----------------------|------------------|------------|
| | | | Vitamin A | Vitamin C | Vitamin D | Vitamin E | Vitamin K | Thiamine | Riboflavin | Niacin | Pantothenic acid | Vitamin B6 |
| | | | (RAE/day) ^a | (mg/day) | (μg/day) | (mg/day) ^b | (μg/day) | (mg/day) | (mg/day) | (mg/day) ^c | (mg/day) | (mg/day) |
| | Infants | 0-6 mo | 400* | 40* | 10* | 4* | 2.0* | 0.2* | 0.3* | 2* | 1.7* | 0.1* |
| | Infants | 7-12 mo | 500* | 50* | 10* | 5* | 2.5* | 0.3* | 0.4* | 4* | 1.8* | 0.3* |
| | Children | 1-3 y | 210 | 13 | 10 | 5 | 30* | 0.4 | 0.4 | 5 | 2* | 0.4 |
| | Children | 4-8 y | 275 | 22 | 10 | 6 | 55* | 0.5 | 0.5 | 6 | 3* | 0.5 |
| | | 9-13 y | 445 | 39 | 10 | 9 | 60* | 0.7 | 0.8 | 9 | 4* | 0.8 |
| | Males | 14-18 y | 630 | 63 | 10 | 12 | 75* | 1.0 | 1.1 | 12 | 5* | 1.1 |
| Life Stage | | 19-30 y | 625 | 75 | 10 | 12 | 120* | 1.0 | 1.1 | 12 | 5* | 1.1 |
| | Females | 9-13 y | 420 | 39 | 10 | 9 | 60* | 0.7 | 0.8 | 9 | 4* | 0.8 |
| | | 14-18 y | 485 | 56 | 10 | 12 | 75* | 0.9 | 0.9 | 11 | 5* | 1.0 |
| Group | | 19-30 y | 500 | 60 | 10 | 12 | 90* | 0.9 | 0.9 | 11 | 5* | 1.1 |
| | | 31-50 y | 500 | 60 | 10 | 12 | 90* | 0.9 | 0.9 | 11 | 5* | 1.1 |
| | | 14-18 y | 530 | 66 | 10 | 12 | 75* | 1.2 | 1.2 | 14 | 6* | 1.6 |
| | Pregnancy | 19-30 y | 550 | 70 | 10 | 12 | 90* | 1.2 | 1.2 | 14 | 6* | 1.6 |
| | | 31-50 y | 550 | 70 | 10 | 12 | 90* | 1.2 | 1.2 | 14 | 6* | 1.6 |
| | | 14-18 y | 885 | 96 | 10 | 16 | 75* | 1.2 | 1.2 | 13 | 7* | 1.7 |
| | Lactation | 19-30 y | 900 | 100 | 10 | 16 | 90* | 1.2 | 1.2 | 13 | 7* | 1.7 |
| | | 31-50 y | 900 | 100 | 10 | 16 | 90* | 1.2 | 1.2 | 13 | 7* | 1.7 |

Table D1. Continued

| | | | Nutrient | | | | | | | | | | |
|-------|-----------|---------|----------|-----------------------|-------------|----------|----------|----------|----------|----------|-----------|-----------|----------|
| | | | Biotin | Folate | Vitamin B12 | Iron | Iodine | Selenium | Zinc | Calcium | Magnesium | Potassium | Sodium |
| | | | (μg/day) | (μg/day) ^d | (μg/day) | (mg/day) | (μg/day) | (μg/day) | (mg/day) | (mg/day) | (mg/day) | (mg/day) | (mg/day) |
| | Infants | 0-6 mo | 5* | 65* | 0.4* | 0.27* | 110* | 15* | 2* | 200* | 30* | 400* | 110* |
| | illiants | 7-12 mo | 6* | 80* | 0.5* | 6.9 | 130* | 20* | 2.5 | 260* | 75* | 860* | 370* |
| | Children | 1-3 y | 8* | 120 | 0.7 | 3.0 | 65 | 17 | 2.5 | 500 | 65 | 2000* | 800* |
| | Ciliaren | 4-8 y | 12* | 160 | 1.0 | 4.1 | 65 | 23 | 4.0 | 800 | 110 | 2300* | 1000* |
| | | 9-13 y | 20* | 250 | 1.5 | 5.9 | 73 | 35 | 7.0 | 1100 | 200 | 2500* | 1200* |
| | Males | 14-18 y | 25* | 330 | 2.0 | 7.7 | 95 | 45 | 8.5 | 1100 | 340 | 3000* | 1500* |
| | | 19-30 y | 30* | 320 | 2.0 | 6 | 95 | 45 | 9.4 | 800 | 330 | 3400* | 1500* |
| Life | Women | 9-13 y | 20* | 250 | 1.5 | 5.7 | 73 | 35 | 7.0 | 1100 | 200 | 2300* | 1200* |
| Stage | | 14-18 y | 25* | 330 | 2.0 | 7.9 | 95 | 45 | 7.3 | 1100 | 300 | 2300* | 1500* |
| Group | | 19-30 y | 30* | 320 | 2.0 | 8.1 | 95 | 45 | 6.8 | 800 | 255 | 2600* | 1500* |
| | | 31-50 y | 30* | 320 | 2.0 | 8.1 | 95 | 45 | 6.8 | 800 | 265 | 2600* | 1500* |
| | | 14-18 y | 30* | 520 | 2.2 | 23 | 160 | 49 | 10.5 | 1000 | 335 | 2600* | 1500* |
| | Pregnancy | 19-30 y | 30* | 520 | 2.2 | 22 | 160 | 49 | 9.5 | 800 | 290 | 2900* | 1500* |
| | | 31-50 y | 30* | 520 | 2.2 | 22 | 160 | 49 | 9.5 | 800 | 300 | 2900* | 1500* |
| | Lactation | 14-18 y | 35* | 450 | 2.4 | 7 | 209 | 59 | 10.9 | 1000 | 300 | 2500* | 1500* |
| | | 19-30 y | 35* | 450 | 2.4 | 6.5 | 209 | 59 | 10.4 | 800 | 255 | 2800* | 1500* |
| | | 31-50 y | 35* | 450 | 2.4 | 6.5 | 209 | 59 | 10.4 | 800 | 265 | 2800* | 1500* |

Notes:

Presented values indicate the estimated average requirement (EAR) or the adequate intake (AI; marked by an asterisk (*)). The EAR is the average daily nutrient intake level estimated to meet the requirements of half of the healthy individuals in a group. The AI is established when evidence is insufficient to develop an RDA, and indicates the level of intake that is assumed to ensure nutritional adequacy.

- a As retinol activity equivalents (RAEs). 1 RAE = 1 μg retinol, 12 μg β-carotene, 24 μg α-carotene, or 24 μg β-cryptoxanthin.
- b As F-tocopherol for EARs. As α -tocopherol for Als. (++)
- c As niacin equivalents (NE). 1 mg of niacin = 60 mg of tryptophan. 0-6 months = preformed niacin (not NE).
- d As dietary folate equivalents (DFEs). 1 DFE = 1 μg food folate = 0.6 μg of folic acid from fortified food or as a supplement consumed with food = 0.5 μg of a supplement taken on an empty stomach.

Adapted from: Dietary Reference Intakes (DRIs): Estimated Average Requirements; Dietary Reference Intakes (DRIs): Recommended Dietary Allowances and Adequate Intakes, Elements; and Dietary Reference Intakes (DRIs): Recommended Dietary Allowances and Adequate Intakes, Vitamins. Food and Nutrition Board, National Academies. Retrieved, June 2023, from https://ods.od.nih.gov/HealthInformation/nutrientrecommendations.aspx.

Table D2. Macronutrient intake according to the reference categories. Adapted from FAO (2015).

| Catergory | Nutrient class & % energy intake | Nutrient o | distribution |
|---------------|-------------------------------------|------------|--------------|
| | (kcal) | | (gram) |
| 1300 kcal/day | Carbohydrate (57%) | 741 | 185 |
| Protein (13%) | | 169 | 42 |
| Fat (30%) | | 390 | 43 |
| 2200 kcal/day | Carbohydrate (60%) | 1320 | 330 |
| Protein (15%) | | 330 | 82 |
| Fat (25%) | | 550 | 61 |
| 2800 kcal/day | Carbohydrate (60%) | 1680 | 420 |
| Protein (15%) | | 420 | 105 |
| Fat (25%) | | 700 | 78 |

Table D43. Numbers of servings from different food groups needed for the three energy levels. Adapted from FAO (2015).

| | 1 | Three energy level | s | |
|-------------------------------|---------------------------------|--------------------|-----------|--|
| Food group | 1300 kcal | 2200 kcal | 2800 kcal | |
| | Number of food servings per day | | | |
| Cereals and tubers | 2.5 | 6 | 8 | |
| Pulses, beans, nuts and seeds | 0.5 | 1.5 | 2 | |
| Dairy (milk and products) | 2 | 3.5 | 4 | |
| Meat, fish and eggs | 1.5 | 2 | 2.5 | |
| Fruit | 2.5 | 2.5 | 3 | |
| Vegetables | 2.5 | 3 | 3 | |
| Fats and oils | 4.5 | 5.5 | 7 | |

NOTES: 1600 kcal level: same number of servings of pulses, meat, fruit and vegetable groups as 1300 kcal, plus 1.5 serving more of cereals, 1/2 serving more dairy and fats than the 1300 kcal level. 2000 kcal level: same number of servings of dairy, fruit, vegetables and fats as 2200 kcal level, but 1/2 serving less of cereals, pulses and meat than 2200 kcal level.

Table D4. Serving sizes for different food groups. Adapted from FAO (2015).

| Cereals and | 1 serving = 140 kcal. 140 Naan (50 g piece); 24 3 cup (125 g) cooked brown or white rice; 14 4 Naan (50 g piece); 24 3 cup (125 g) cooked brown or white rice; 14 4 |
|----------------------------------|--|
| tubers | cup (40 g) raw brown or white rice; 1 small potato boiled (160 g boiled weight); 1 medium sized potato raw (200 g including skin); $^{\sim}$ 2/3 cup (90 g) cooked macaroni or spaghetti; $^{\sim}$ 1/4 cup raw macaroni or spaghetti (40 g) |
| | 1 serving = ~140 kcal. |
| Pulses, beans, nuts and seeds | $^{\sim}1/2$ cup (100 g) boiled lentils/peas (chickpeas, green peas)/mung beans; $^{\sim}1/4$ cup (40 g) raw dry lentils/peas (chickpeas, green peas)/mung beans; 20 g walnuts; 30 g almonds or pistachios; 2 tablespoon (30 g) sesame seeds. |
| | 1 serving = ~70 kcal. |
| Dairy (milk and products) | $^{\sim}$ / $_{2}$ cup whole cow's milk or goat's milk; $\frac{1}{2}$ cup sheep milk or buffalo milk; 15-20 g whole milk powder (which when reconstituted makes $\frac{1}{2}$ cup of liquid milk); $^{\sim}$ / $_{2}$ cup (120 g) plain yoghurt made from whole milk; 20 g cottage cheese; 20 g sweetened condensed milk. |
| | 1 serving = ~70 kcal. |
| Meat, fish and eggs | 30 g cooked lean beef or lean lamb; 55 g raw lean beef or lean lamb; 30 g cooked chicken (stewed, meat only); 60 g raw chicken breast without skin or 30 g raw chicken legs without skin; 1 large, hardboiled egg;30 g-60 g cooked fish (cooked with dry heat); 50 g boiled beef liver; 55 g raw beef liver; 30 g cooked lamb liver;50 g raw lamb liver. |
| | 1 serving = ~80 kcal. |
| Fruit | 1 small apple with peel; 1 small banana; 1 pear; 2 tablespoons ($^{\circ}30g$)dried fruit e.g. raisins; 1 large slice melon; 3 large pitted, dried dates ($30g$); 2 small plums or apricots; $^{\circ}100g$ grapes. |
| | 1 serving = ~35 kcal. |
| Vegetables | 1 cup cooked vegetables, 1/2 cup raw vegetables, although it will depend on the vegetable, for example: 1 cup boiled beetroot slices (85 g) or 1/2 cup raw beetroot; $^{\sim}1$ cup (100 g) boiled okra or raw okra, or $^{\sim}1$ /4 cup fried okra (25 g); $^{\sim}1$ cup (100 g) boiled carrot slices or raw carrot slices; $^{\sim}1$ cup boiled, mashed pumpkin or 1,5 cup raw pumpkin. |
| | 1 serving = ~45 kcal. |
| Fats and oils | 1 teaspoon vegetable oil (5 g); ~1 teaspoon butter (6 g); 1 teaspoon ghee from cow's milk (5 g); 1 teaspoon sheep fat (rump) (5 g). |

Notes: An empty cup = 250 ml; 1 teaspoon = 5 ml; 1 tablespoon = 15 ml. The weight of each food will depend on its density (for example, the weight of 2/3 cup of cooked macaroni is only 90 g, while the weight of 2/3 cup cooked rice is 2125 g. This is because macaroni has a smaller density than rice, so a smaller mass (weight) is needed to make up the same volume

E: Transcriptions

Disclaimer: the interview transcripts have been adapted for relevance and readability purposes.

E1: Interview P1

P1 is part of VoP based in the Netherlands. He has worked on developing nutritional training materials.

Q: Can you introduce yourself?

A: Oh, yes. Well, good morning, everyone. It's a privilege to meet you all, I'm very excited about what you all going to do. To be quite honest, I have no idea what that would be. Of course, I was informed that Kat will bring you on board, but it will be lovely if you can tell me a bit more about what you're going to do and how you're going to do it. My name is Jaco. It's the Dutch people think it's Jakko. But it's not, I'm not Dutch. It's 'Jaku'. I was born and grew up in Malawi, that's in Central East Africa. And my parents are South African. So that's where the Dutch name I think comes from. And, yes, I am very happily married. I've got four beautiful kids, and I am passionate about our work in Afghanistan, you probably know much more about the work that I do than I do, because you study in an agricultural orientated university, whereas my background is liberal arts and sciences. So that's also why we called in some help. What else? I'm an assistant professor at the University of Utrecht, in the department of interdisciplinary social sciences. And then I also work for Village of Peace. There I am the project manager of all the food security projects, I'm supposed to develop them. And I do that with a lot of passion. I love my job. As already indicated, our goal is to get five million malnourished, children sustainably food secure. There are about eight million people currently starving to death in Afghanistan. So our work appalling, to me at least is very valuable. We very firmly believe in local ownership, local management, local budgeting, local directors, local NGOs. That's the only way in which you can really get a system sustainable, because as long as we keep on funding and helping from abroad, local livelihoods will never really be able to grow and function well. So our villages of peace in Afghanistan, they're not ours. They are locally owned and locally managed. We work in like a family of NGOs. And then I have the privilege to go this sometimes, before Corona I went at least four or five times per year. And then Corona happened and no one went nowhere. And then two weeks ago, I came back from Afghanistan, my first trip since Corona, and takeover. And our projects are going very well. So also, the Taliban also negotiated that women can work again. So that's also wonderful. Yeah, so that's a bit about me. short introduction about village of beasts. Yeah. What do you want to know?

Yeah, thank you very much for your introductions. Actually. Last week, on Friday, we had a meeting with the Commissioner, I think that you already knew about this. And yeah, we also received some information about, like a brief information about village of peace, actually. But then, because we also need to know more about what are you doing there and the situation on the ground, we invited you. And also actually, from the meeting that we understood that we need to improve the training based on like a, like a kind of weak way and also be heavier communications change. And yeah, and also, I think that yesterday, I sent to you some of the questions, but I think that we can ask you now for that question. So maybe some of you, do you want to ask the question?

Q: Yeah, I have one question. I'm going to ask him, because he said the projects are going to be well, I'm sure you saw last time?

A: Yes.

Q: Nice. I just had a question about you mentioned that your last trip, that your projects are going well, in Afghanistan at the moment, what do you guys base this on? Because our commissioner told us that there's very little recontacting of families that are held. So I was just curious, do you revisit the people that you've helped to see how their interventions are going? Or how do you approach it?

A: We never have contact with, well, we barely have contact with the beneficiaries. First, I have to say that I hate the term beneficiary, because it seems then as if you are the saviour, and there's someone who benefits from you going there. That's not, that is not our vision. So the reason why we have limited contact as far as possible, is so that the beneficiaries that we do have, that they work with our Afghan colleagues. We want the face of everything to be Afghan, primarily because all ownership is in Afghanistan. But also because we don't want to create the idea among any local community that it's a foreign project, so that they can also take ownership of what they do, and to not keep on perpetuating the image that that Westerners come from afar. And then they kind of help poor, non-Western people out of poverty. So that's why we do limit contact, we do receive monthly reports on how the projects are going. And those monthly reports, I, of course, always read them. We visited our training centre with our training garden. And it's going very well over there. And we also had the opportunity to speak to a few beneficiaries. This is the

second time since 2016, that we've actually spoken to beneficiaries themselves, otherwise we ask our local colleagues to handle all their communication. The reason why it's going well is firstly, because it's going and at this point in Afghanistan, everything that's still up and running is already a miracle. So that is why it's going well, because it's still functional. And other than that, we also got our we work with MOU's, all NGOs need to draft a memorandum of understanding that needs to be approved by the government for every single project. The local government approved our project that we're starting up now. We're still waiting for a while, it is still in the process of waiting for approval, but the previous one they approved. And what else, the training with their beneficiaries are also continuing and going very well. So that's why I say it's going well.

Q: Okay, that's good to hear. Thank you. I had a question. Do you have any estimate of how many beneficiaries are currently associated with Village of Peace at the moment on ground? And there are location specific issues. So far, we only have regional locations, but I'm sure the whole region is not covered? Or are there specific locations within the channel?

A: It's a difficult question to answer. And I'll explain why. We believe in long term relationships. So if we have beneficiaries, okay, we work specifically with widows, and a small group of farmers in the pasture every year, we train about 150 new beneficiaries. But as far as possible, we try and maintain the relationship that we build with them. The reason why we do so, is so that our people, our local colleagues always have access to them. So when there's a problem, when they struggle, that they always know that we are there, and we are willing to help other NGOs. Also sadly, NGOs, like bigger NGOs, like the UN, because it's the UN is nothing else than an international NGO. It's not a government. They have a project, the project runs for a year or two years and then when the money's up, the project is done and there is no contact anymore to beneficiaries. So there's also no follow up. We believe that that is not a very wise approach. So we try and foster long term relationships so that when beneficiaries do get into trouble or if they need more information, then it's always possible to contact us or our people regularly, they go back, they visit the visit the beneficiaries. The problem even now is that women are not allowed to work for NGOs. Before our next project proposal is not approved, our women can also not work. Although I already negotiated it with a local government, the NGO first needs to have all the MOU's to be approved. For that reason, our women can't go and visit the widows. So if they are in specific regions, they do go and visit the women. However, that is a bit difficult at the moment. I did think I sent you our most recent project proposal and they'd stipulate how many farmers and widows or orphans are there, we now call them orphans of age. So it is, we take an orphan of 16 years or older, who is able to read and write, whose mother is a widow, and then we train the orphans, so that the mother, who is a widow, can benefit indirectly, so that he can inform his mother about what he learned. So we're trying to get to the widows in an indirect way, because we can't make them part of the project directly. So orphans who are at a working age, which is 16; we try and include them. So it is a bit difficult to tell you exactly how many people we have. They are all in that specific region. It's both province and the Bamyan province, if I remember correctly, that the beneficiary zone will live in. Is that concrete enough?

Q: Yes. Thank you very much. So I had a follow up question. So I assume that trainings can be recurrent as well. Or they can be what? Like recurring? Is it repeatedly taught to the same people over time?

A: Yes, yes, training can definitely be recurring. And we want, once beneficiaries, once the project duration is over, we have a one year project in which we train them. And then we have a second year in which we do a lot of follow up. And then after the second year, we also try and do follow up at least once every few months. And then there's everything that needs to be, or anything that they still struggle with in of course, the training that they received, that part will be repeated one on one.

Q: Thank you. I have a question. How specific how exactly do you provide these trainings? Like what is the methodology behind

A: Yes, the methodology is quite, it's that 98% of all widows are illiterate. So if you think about training, don't think written information, and don't think sitting in, in a well, classroom setting like you're doing now. The training we devised is a lot of interaction, it's a storytelling culture. So we work a lot with stories. We take success stories of what really happened. Positive stories with impact, and then we work that into the training. We work a lot with games. So one of the games for example, is, they can read money. So as the amount of money they do, they do have a basic grasp of that. Numbers. They do have a basic grasp of numbers, so we give them money, and then we give them action cards. They work a lot with action cards in Afghanistan. It's basically just a card with a picture, or action, or an image like pictograms. And then we teach them during the training, they learn a lot about nutrients and then we group the nutrients by pictures. So all the green protein, the beans, the legumes, the soya, chickpeas, all that will be on one action card with the prices. And then we teach them about your nutrients and what nutrients are necessary. The greatest deficit is protein, iron, vitamin A, E, C, and D. So those are the six priorities that we work with. All of that goes on to pictures. And then they get an amount of money, fake money, just to play with. And then we say okay, go and see if you can buy everything that's on all the cards to put together a cheap as possible menu, but with the nutrients that you need. And then we make a big game of it and they love playing games, they love this type of interaction. Also, a lot of role playing. So our trainers were all women, at the moment sitting at home. So our agricultural, local agricultural manager, and his sidekick will

now have to present the training to farmers. Luckily, though, they are much acquainted with the training, but then the women would need roleplay. Stories. So that is how they learn.

Q: Thank you. Yeah. The Commissioner, Julia, mentioned something about that most of the training is done over phone nowadays. Is that still the case? Or are they more able to visit homes?

A: The women aren't able to visit the widows who were our beneficiaries. They're not allowed to go anywhere, without a machram. Now, a machram is a male who's supposed to chaperone you and, it needs to be either older sons, so you reached, at least he reached puberty, or a brother or an uncle or father, but a male. You are allowed to go a certain distance out of your house compound, for example, to the bazaar if it's not further than a certain amount, or if it doesn't exceed a certain distance. What that distance is really depends on the local Taliban and how they interpret Sharia law and the Quran. So I can't give you a specific distance. In Kabul, it's up to 40 kilometers in Mazar Sharif, it's 400 meters. So it really depends on the local, okay, the Taliban is not a consolidated unit. So depending on the province, they have different rules and regulations, and they're still fighting about it. So we have to work with a local situation. But the telephones that, we did give the women smartphones, and they were able to do that, they didn't know how to work it because they're illiterate. But then our people would call them and then they would walk around, put on, switch on the camera, or just pick up if it's a video call. And then literally, with a camera, show their little plot where they're doing their vegetable gardening, and then get advice through that. Some of them still do have smartphones, others don't, we can visit some, we can't visit the others. But since the new round will be with farmers and older or working age orphans, it will be face to face at our training centre. However, the program is of course, geared towards helping illiterate women, especially widows, and we're trying to get them back. So that is what we still aim for. An evaluation and improvement of that training, and that program towards women who are illiterate, whom we know at the moment. It's not possible. But we're negotiating and we're positive. Sometimes through phones, sometimes not. Depending on the local situation.

Q: Can I ask you a question? So do you think it's like, what's the timeline? Do you think it's possible in the in the near future to target the widows again? Or isn't that possible at all? Or how do you see it yourself?

A: Well, it's, there is a hypothetical answer. And then there's concrete answer. That hypothetical answer is, the moment the West and the UN and everyone who is meddling in, would just stop meddling and leave the country alone, the sooner that the Taliban would ease up their regulations. When there was the Taliban take over, women were still able to go to school, they were still able to go to university and they were still allowed to work. The more the international community put pressure on the local government to give more freedom, the more they clamp down to show the international community that they really don't care what they think. Sovereignty for them is exceptionally important. So we've seen a number of times that NGOs, who push an agenda, they are kicked out. We go there, and I said, we want to serve you. We want to work with your rules, with your regulations, you are in charge at the moment. I really, I really don't care, who's the legit, legitimate government or who is not. And I think it's rather selfish, or selfish, it's rather entitled to think that you can dictate how countries are ruled. And if, well, if Germany would come back and say to the Netherlands, we're going to install our new German government over here, then I'm sure that the Dutch will also be pissed. So the sooner the international community would stop with pushing an agenda, the sooner we'll have more space, but I don't see that happening soon. So it depends on how the local government interprets the Quran and the statutes of the emirate, and whether they have a caliphate as an ideology or an emirate, there's also a difference. So in Kabul, where we did have a centre not at the moment, there women, widows would probably be able to work again soon, because girls are already going to school in Kabul again, and women already going back to university in Kabul. Mazar-i-Sharif is completely different. It's a more radicalized branch of the Taliban. That's where we are. So we are not currently asking or negotiating for women to come and for them to become the primary beneficiaries, not at the moment, we still, we first want to make sure that our working relationship goes well, and that they are happy with what we do. And then we can continue with the next phase. So currently, we negotiated that our women can come back to work. It's a new project for breastfeeding, and malnourished mothers whose breast milk is not rich enough, or does not contain all the necessary nutrients. But of course, men can't teach breastfeeding mothers. So then we need our women back and they agree to that. So it really depends. Sorry, I can't give you any concrete information. You need to be like water. You need to be able to flow everywhere at every , at any point and go with, with however the geography dictates.

Q: I have another question. Just like a practical matter. So you guys do a lot of different kinds of activities. I was just curious, are the home gardens inherently connected to the nutrition training, meaning someone who receives nutrition training has also received a home garden setup?

A: Yes.

Q: So that nutrition training does not happen on its own ever?

A: No, we firmly believe in an holistic approach. The sooner, the sustainability... You would know that, in order to reach a point of complete sustainability, you need the entire system and chain, production chain, all the variers to change, you need the most sustainable. So the more people see that holistic picture of what it means to be sustainable, the more they'll grasp the concept of becoming sustainable. So if they do enrol in our project, they first get the value training, the value training is, is something we all have to do, so that we create a common language through which to talk, so that we know that we work based on the same values. Our values is good leadership, it's being hospitable, it's about being transparent. So they have to go through the value training, because then if anything happens, we fall back on the values and our local, the local NGOs, our sister NGOs, they are ardent supporters of the value training, because that also gives them a language to commune a similar language through which they talk about what we do with the beneficiaries. They do their value training, then they get their agricultural training, the high diversity gardening we call it. And then they get the nutrition training, and they get the hygiene training. And with the hygiene training it, the hygiene training also implies a food preparation. For example, a lot of peels are thrown away, but those peels are perfectly healthy. And actually, you should eat the peel of a cucumber, because it's good for you. We also teach them to less boil, rather steam, rather cook shortly in water than boiling it to death for three hours, then you lose the nutrients. And if you do use a lot of water, then make a soup out of it as opposed to throwing it away. Wash everything. It sounds, it sounds incredibly basic. But remember that the women are illiterate, and do not have any form of schooling or education, and neither do their parents or their grandparents or the generations before them. So to them, it's all new. So it's a complete package.

Q: Then I also have another question. So it's a bit anecdotal, because it makes me think about where I'm from. I'm from Nepal. Because in the past, there are also lots of NGOs working with rural communities. So I have worked with some NGOs, who work in rural areas, catering to like, any trade people and asking them to come to trainings, even though these trainings are meant to, like, empower them, and the incentives are already what they will receive at the end of the training, is already incentive enough. But people are so busy with their lives, they have to, you know, do farming, or you know, there is not enough incentive for people to actually come and learn. So do you have any type of incentive for people who come? An incentive just to attend? Because like, because after they attend, they will know that there was an incentive. But is there any other specific incentive, like, for example, in about people get paid to attend trainings by NGOs and INGOs? You know, because they just cannot afford to live their daily life and attend this training. So is there an incentive or, that you have had to do so far?

A: That is an exceptionally good question. Well, as I mentioned, we really try and work through relationships. So the first few rounds were rather difficult for the same reasons that you indicate. But after that, we ask people who were doing well, who went through the training who benefited from the training. For example, one mother, she sat at home having nothing to do, her oldest son was 10, he worked in a brick factory, carrying tons of bricks every day, from the morning to the evening, and his only payment was two flatbreads per day, which is of course, nothing else than slavery. And her other two children were at home. After the training, within two years, she raises enough money with her garden, she also plants saffron. She's now sending the two younger kids to school with the money she makes herself, and her son stopped working in the brick factory, and is now helping his mother in the garden. Of course, this is a success story. And you don't always end up with a success story. And you shouldn't portray your NGOs as a as an NGO with answers to all the problems, because you never do. But those kinds of amazing individuals who are really doing it well, we asked them to go and talk to possible future beneficiaries about what we do. And then we work, go through, we work with word of mouth. So a number of women, before we even start the project, they come to us and say hey, you help my neighbour, her children. Their health improved considerably. Can I please join the project? So we really try and motivate the people who, who did go through the project to talk about it to being, what's it, hospitable. That's, that's one of our values. So we also do everything open source. We always ask our beneficiaries to talk to their neighbours about to talk to their family members about it to show them what they have learned, so that it becomes an organic network training as opposed to learning everything from us. It's also very dangerous, I think for an NGO to hold all the expertise to themselves. I've never presented a training ever in Afghanistan because our, the local sister NGO, people do the training. That is already an incentive if it doesn't come from, from, from a Western person with white skin. That helps. It really makes the power, this distance, easier to deal with. So the first is, we do it word from word of mouth, and we ask people to teach, stop teaching other people. That's one of our values. So that that creates an incentive, because then they know it's a different approach. It's not, I go there, I get something, and it's done. It's relational. And it's word of mouth. The next is, all training is always done by local people. We never get involved in the training, of course, we help with developing the training and workshopping the training and running pilots giving feedback, receiving feedback, but we never do the training. That's another incentive. And then the third is, we try and make it as easy as possible for women, for example, if they do come for four days of training, we try and ensure that there's always someone to look after the children and to entertain the children in a healthy constructive way while they are there. That's another. Yeah. I think that that's it.

Q: Yeah. Thank you very much. I have another question. Is there also a focus on teaching the younger kids that do go to school something about nutrition or not?

A: No, we don't, we don't have any training at the moment for children, we try... if you want to, if you want to change an entire country, start with the mothers. The mothers are the primary caretakers generally. And even in Western countries, we all shout 'gender equality, gender equality', but women are still the primary caretakers. And if you send your children to a daycare, well guess what, 80% of the women of the people working at the daycare will be mothers or women. And it's not that I said, it's not a value judgment. I'm not saying it's right or wrong. What I'm saying is: start with mothers, because they are generally, usually, especially in the developing in developing countries, the Global South, they also the primary caregivers. So we always focus on Mothers, because mothers raise children of whom some will become sons, which is very important in certain cultural contexts. And if the sons have the information, then it goes to politics, it goes to economy, and if women have the information, it goes to their children. So we, as far as possible in all forms and ways, we focus on mothers. And I don't use this language, if I am in Afghanistan, but it's nothing else, than empowering women to be the motor of change in local communities. You can do it with a father, but within a patriarchal society, if you empower a father, he will empower his son. If you empower a mother, she will empower her children. If you give information to a father, he will pass it on to his son and his uncle. If you give information to a mother, she will pass it on to all her children, because that's how they function in the kind of situation and cultural context in which we work. So yes, at the moment, we don't work with children also, because they can't yet sustainably contribute. And if we would start working with children, then there is a very big possibility that they will be expected to help in gardens, and we don't want them to help in gardens, we want them to go to school

Q: I really appreciate what you've been saying. Because that's also something we very much learn here about targeting women and see the effect is really tenfold. I just have one question. Do you have any experiences with that this maybe play out plays out negatively, in the sense of yes, if you help a woman she will help her children and the effect is bigger. But is it also maybe not targeting... training towards women and increasing the burden that is already on their shoulders taking care of their children? Does that ever come into play?

A: It does come into play and I think the extreme example is in countries like the West, where... We think we are empowering women because women can now enter the marketplace. But at the same time, we are disempowering other countries who are sending women to act as nannies and au pairs and primary caregivers. So you're empowering a certain group of already privileged women at the expense of other families. So yes, definitely, it only creates a vacuum somewhere else. And all the women are then sucked... I think, especially if you look at Indonesia and the amount of women that Indonesia sent abroad, to work as cleaners, primary caregivers, nannies, housekeepers. And then their own children end up without mothers. So yes, there is an extreme, but at the same time, our own project — of course, now it's a different situation, but it was geared towards widows — and the responsibility of taking care of their family and children were already on themselves. So it, temporarily, it may be difficult, because they need to take care of their children, they need to move, they need to learn. But the benefits, and the impact, certainly up until this point in our context outweighed the cons of the situation.

Q: Okay, yeah, absolutely. So it's a bit of a trade off. But ultimately, it's very much worth it.

A: It is a trade-off, it is a trade-off. But I think, and there's also links with the incentive; one of the major problems of kitchen gardening and these small scale agricultural projects is quite often that it doesn't include a cash crop. If, so women - if you are illiterate, and you don't understand how money works, you think selling your products and getting money is worth more than the product itself. So then you end up with money, but then you need to buy back your products. And money is fleeting, whereas the product leads to health, you can't buy that health with money. You can't. So including a cash crop, which is for us, it's saffron, it's strawberries, it's strawberries, aside from cotton, if they do have a bit more space, including those cash crops also work as an incentive, because then they have the vegetables, the nutrients, but they also have something to sell with which they can raise money. So then we take away the desire to sell them the nutrient rich products in order to raise money, sell the saffron, which you're not going to use in any case for yourself. And then you do have money to send your kids to school; this the story that I told you about the widow sending her own kids to school, she's doing it the saffron. And that also, if you think about the trade-offs, that is very helpful, because then you're not only giving livelihood in the sense of healthy nutrients, but you're also providing the possibility to elevate someone out of poverty. And that, to me is worth so much more than not making the trade-off. And the women staying in the situations they are in... at some point you need to break the cycle of violence and injustice and poverty. But you need to do... women need to take ownership of breaking that cycle. I can't do it for anyone else. You can't, you can't break the cycle for anyone else if they are not intrinsically motivated. And the cash crop helps them to make that decision when they are thinking about whether it's sensible or not.

Q: Yeah, I was wondering why those specific regions are the ones you are concentrating on to intervene?

A: The regions, the regions are completely the pain dependent on where we have our sister NGOs. We follow a certain strategy. Our sister NGOs, not us, they go and look for people who are already doing something for local communities with their own money, their own time and their own energy. That tells us that they already have a heart for their people, a heart for the country.

Then they will build relationship with those people who are already doing something out of their own means. And then, once we... and this is a process, this is a big problem with NGOs, they always go in and they think they have the answers. They implement and then they leave. This is not how... that this is a very Western concept. If you work in in communal cultures, like Afghanistan, you need to know that it goes through connection, through relationship and you need... don't microwave the situation, slow cook. Slow cook is always better than microwave. So then we build relationships with the people who are already doing something, and we never give money, we don't give money, we build relationships. And once there is a relationship, and once they... then we say, okay, but don't you want to become a sister NGO? And then they say, well, we're interested. And then we say, well, do the culture, or the value training. And then see, this is the basis, this is our language, this is our DNA as an organization, do you want to join? And then they say, yes, we want to join. Then we say, okay, put up your own NGO, with your own name, Village of Peace attached to it. But it's, you take ownership, it's your NGO, you're going to manage it. And then they come up with the project proposals, we don't. We say, what do you want to do? What's on your heart for you, for your people? So this is why we are confined to certain areas, because we refuse to put up an NGO, if we don't have a local individual with a passion and a heart for the local people, and with a vision to change the country in a sustainable way. So before we then find that person in a new region, we're not going to that region. Sorry, this was the long answer.

Q: So essentially, village, a piece is not necessarily only an NGO that operates, but it's more of a facilitator of a network of NGOs for a common goal, so to speak?

A: Yes, you can see Village of Peace in... that we are an international NGO. But then we have, yeah, well, the UN is trying to work with the concept of NGO clusters, that you work as a cluster together. So you can say that we are facilitating the growth of a cluster of NGOs. We like to see it as a family. We're a family of NGOs, with a certain culture, and a certain way of doing things, and a certain vision. And if there are NGOs who are interested, but they want to do it in a different way, then we say well, thank you very much, but this is how we do it. And we don't make that final decision. Our local colleagues, they make these calls, because they know their local situation, obviously much better than we do.

Q: Thank you. One last question. What is the language of training?

A: At the moment, it's usually Dari, which is, which is the Afghan dialect of Persian. In Iran, they speak Farsi. In Afghanistan it's Dari, but it's basically like Flemish Dutch and Netherlands Dutch, so it's just accent differences. And we may start training in Pashtu, the other language, but that, but that will be a political call, because the Taliban, or the ethnic group that they — with a stronghold in the Taliban is the Pashtu. So at the moment, it's also politically advantageous to train in Pashtu. So we may consider that.

Q: Thank you. I also had another question. I'm just curious, how do you measure improvement with this project going on? Like how do you know, you know, the different interventions are... you mentioned like the fact that is already going on, it's a great sign, but how, is there a way you guys measure improvement long term?

A: I am... I have to shake all the academic scientific boxes now with my answer. We have lost funding because I refused to measure success and improvement and progress in the way that Western donors wanted me to do so. And I'll tell you why. We do, we do track medical indicators. So not, not with a high diversity garden at this moment, but with our peanut paste project with our soy rice new project, we take the width of the wrist. And we measure height, we measure weight, and we see if there's a progress. So we have growth charts, and we do monitor the medical indicators. However, the question is, what do you see as... what is your end goal? Do you have a short term end goal? So at the end of a project, a woman is able to manage her own garden? Is that success, at the end of a project? Or do you measure success in another way? Well, we measure it, and I definitely measure it, in a completely different way. The scientific way would be: okay, the woman has got the skills, and she's got the knowledge and she's able to do it herself. That would be in a very nuanced way what the scientific community would see as progress and success. When I was in Afghanistan now, I spoke to one of the beneficiaries. He went through our training four years ago, a farmer man, he went through our training four years ago, and he always kept a good relationship with our agricultural manager, local agricultural manager. He went to visit his sister who's living, I don't know 60 to 80 kilometres away from where he lives. And he, because we also teach them how to recognize the signs of malnutrition. He saw his sister's son, so his nephew, and he was sick. And he thought, okay, but this kid obviously is suffering from malnutrition. And her husband, his brother in law, had a big piece of land, but they only planted staples. So it's potatoes, rice, or wheat. That's what they plant. Then he started telling them about what he learned about nutritional variation, about the advantages of vegetables, of greens, of green protein. And composting, because we also teach composting and mulching, they also do that about. He also told them about the economic advantages of making your own compost as opposed to having to buy fertilizer. And then he started training them in how to do the high diversity gardening that he learned. In his own way, not our way, not the perfect coaching and training that we gave. His own, call it illiterate way, and localized hybrid form. Long story short, about six months later, he went back. The boy was completely healed from malnutrition, he was playing around and they all started doing vegetable gardening. And the neighbours in the surrounding areas, they were so impressed with the health improvement of all the children living at that specific compound, that they also started

planting vegetables. They also started planting green proteins. And they also started talking about nutrients. My question is, which is more successful: if by word of mouth local communities start to teach and train one another, and based on own initiative and intrinsic motivation, they pass on the knowledge they have, even though it's not perfect, even though it's incomplete; or at the end of the project, if you can say a woman has got the knowledge and the skills and she's able to do it herself? I think the latter is much more successful, because that's how you, how you change the country. And that's also what our values are. So yes, we do measure success. And we do track our progress. We have to because we work with donors. But how communities changed based on peer education, and communal and local word of mouth education, to me at least, is much, much more successful than giving a training and giving someone a diploma at the end and saying yes, you did it. But we do track the indicators. Sorry, again, a very long winded answer, but it's part of our philosophy.

Q: Thank you. I was wondering if you would be able to provide us with a list of the Afghan NGOs you work with. Maybe later, if that's possible?

A: Yes, I can. It's only at the moment only three operational. Two, two were, they were five, but two were temporarily suspended, because the directors and staff had to be evacuated because they were on the hit list. But please, if you have any questions like this, just put it in writing and send me an email because otherwise I forget.

Q: Yeah, okay. My other question was, what do you see as the long term goal of Village of Peace?

A: Long-term goal? Well, it's to get five million malnourished children sustainably food secure, and providing their mothers and parents with sustainable livelihoods. In all our projects, we're putting up a peanut paste project at the moment. And I don't know if you know, that the UN uses a lot of peanut paste to get malnourished children healthy again, it's fortified. So they add minerals, nutrients, sugar, we're doing that as well. But we're putting up a local factory. That will end the... we already, we did a pilot project, it was very successful. That's why the Taliban invited me to come to Afghanistan to talk about the project. But the machines will be locally sourced machines. The peanuts are locally sourced; the nutrients, the sugar, locally sourced, oil is locally sourced. We're training farmers to plant peanuts. So we're, if we're talking about food security, of course, it's not just getting someone healthy, who's unhealthy because of malnutrition. It's about boosting the local economy in such a way that local people benefit from it, because it's the local economy, to create local livelihoods. As long as you need to import anything, you will never get the circle round. I don't want to import anything. We provide a lot of emergency aid. We feed about 5000 people a day with emergency aid, but I hate the fact that I need to import emergency aid. Emergency aid needs to be produced locally as well. Otherwise, you always have a dependent relationship, and every single country deserves to have sovereignty and be independent of other countries. What was the question again?

Q: I have one more question. So you briefly mentioned that you focus on these five vitamins, including protein and four vitamins. So I was wondering – protein I get, but for the vitamins, like what is it based on? The fact that you focus on these four vitamins?

A: Oh, it's based on a number of factors. The first factor is, I went to all the local hospitals asking people: what's the main reason for malnutrition. And they all identified iron, protein, vitamin A, D, C, and D. So that is what I got from the hospitals. But then also, and this is, this is devastating, but 20%, that's one in five of all Afghan children, die before the age of five, because of malnutrition related diseases. The most common malnutrition related disease is pneumonia. So it means that pneumonia kills more children in Afghanistan than the war over the past almost 50 years. Pneumonia killed more children. So the list is, we also then include other crops that will boost the immune system, because if you if you boost the immune system, it means that the immune system is stronger when having to fight pneumonia. And so the first factor is the list that I received from hospitals. The second factor is that it needs to be an immune boosting diet to fight pneumonia. And then finally, we also include other crops, that's not necessarily part of the list, but to help the bodies of children to fight other diseases. For example, eyesight, almost, what was it, 23, 24% of Afghans have eyesight problems because of Vitamin A deficiency. So that's also why we include lots of vitamin A vegetables in the diet. Sorry, and that the first reason for all forms of malnutrition is a lack of protein. That's always the number one reason and that's why we focus a lot on green protein. And chickens.

Q: I just have one nice question, what is currently, do you see the biggest challenge or obstacle you're facing right now? Moving the project either forward or expanding or upgrading your operating agenda?

A: The biggest obstacle, and that's what I think what Kat and Julia are focusing on, is the fact that we don't have a baseline or a system in which to monitor our progress and impact. I told you what we see as change and progress. But at the same time, it's also important to, for our donors, at least, to know that we that we do make progress. And then another reason is that we managed to get a few families sustainably food secure for \$2.50 a day, and they raised that \$2.50 themselves with their cash crops. So it is possible for a family in Afghanistan to be completely food secure, with only \$2.50 a day. And we know this works,

because we spoke to the families, our colleagues informed us about all the nitty gritty of how they did it. But we don't have a system in place to check that and prove that and verified empirically. So that's the biggest challenge. We need a system to create a baseline and then to measure, to set off against the baseline, whether we're making progress, if that makes sense.

Q: Yes, one last question basically. So it sounds like you guys very much think about being independent and letting the participants be very autonomous and deciding for themselves. But a large part of what we will be doing for you, is aligning these type of activities along with current international development or operational practices. Most of these practices, however, are dictated by the UN or organizations from the UN. How much do you see Village of Peace really aligning with UN because like you said, UN is very project based. And it's also not a not for profit organization. So sometimes profit is also just there main activity. So how do you see this?

A: So we don't, we don't have any problem working with the UN. In Bamyan, we work with them with budgets of up to two and a half million. So that's for clean water and sanitation. It's not food security. Well, that is food security, because you need clean water, but okay. No, we don't have any problem in working with others and aligning with others. Maybe, maybe they can learn from us. Sorry, I don't want to sound arrogant, but the approach by a number of, of, of international NGOs is still too much rooted in Western thought and paradigm.

Yes. Yeah, I think it's mostly for... some of us here, do the study international development. And I think for me personally, this is the first time I've actually gotten to know about an organization that explicitly makes the country of focus their own agents of their future, which is I think, very respectable and very impressive. So this has been very educational for us.

A: Thank you. I have a bit longer than an hour if you do so. If you have any other questions, now would be the time to ask.

Q: I have another question, if you don't mind, and you're having the time anyway, just out of curiosity. We were told by the commissioner that village a piece was started with an idea because - please correct me if I'm wrong - your father worked in Afghanistan and had very intense knowledge, or somebody had experienced in Afghanistan and they wanted to start an NGO for themselves. How did this come to be?

A: Okay, okay. Well, not my father. My father has been to Afghanistan more than once. Everything that, that I'm doing now in Afghanistan, he did in Malawi. So I'm basically just following in his amazing footsteps. But it's the current Village of Peace, Laurens, my boss, his father in law started Village of Peace. And it happened as follows: his father in law always had a passion for Afghanistan, and always wanted to go there. But because of all the war dan the upheaval he never... and the Russian occupation and the English occupation, he never had the opportunity to go to Afghanistan. And then in the Netherlands, but in the Netherlands, he worked a lot with Afghan refugees: helping Afghan refugees to settle, to study, to work, to build a livelihood in the Netherlands, to build up their lives again, as it were. And then he met an Afghan from Mazar-i-Sharif, Intizar, was his name. And he and Intizar became very close friends. And then after four years of living in the Netherlands, Intizar really felt that he wanted to go back to his country after fleeing because of political persecution. He wanted to go back to Afghanistan, to well, to start building his own country, and to contribute to development in Afghanistan. That was a very brave choice, because he knew that if he stayed one year longer in the Netherlands, he would have received permanent resident ship and nationality. And if you leave before five years, you never, never, never get asylum, again, anywhere in the European Union. So he consciously went back knowing that he would never be able to enter the European Union again. Still he went back. And because of his own political, or not, because he was a political refugee, he had to maintain a very low profile in Afghanistan. So he didn't have contact with, with Pete, the guy who started Village of Peace. And then after returning to Afghanistan, seven years later, then he got hauled off beat again. And then he said, Pete, I'm now working within the NGO, and I have the opportunity to invite you to come to Afghanistan. We had this dream of starting something in Afghanistan, now is the time. And then Pete went to Afghanistan. He met Intizar in Afghanistan, but Intizar is already almost a grandfather. While he, by then he was also a grandfather, Pete is also grandfather. So Pete started the NGO with Intizar's son in law and daughter, okay, who's Farid, who's the director of our Village of Peace in Mazari-Sharif, where we work.

Wow, what a story. Thank you. That's quite interesting.

A: So, yes, I believe in local. It's, and I've said this more than once, but it's quite arrogant to think that, that you can go into another country with a mandate from an international organization, and expect to be welcomed, and expect your own ideas to work over there. It's a ridiculous thought. I don't know a single developed country who will stand for this, I don't know a single developed country who will say yes, come into my country and teach me how to grow, to develop. I don't know, it's really quite ridiculous. And of course, we do understand the need, they do not have the finances to do this. And a lot of the expertise they also do not have, but we do it in an equal partnership. And all the ideas come from Afghanistan. It needs to be local ideas that we then work with. And always local ownership. We've also bought land, we've put up a home for widows and orphans, but it's all locally owned.

Even though all the finances come from the Netherlands, because if you don't have... Before you don't let go of ownership you always meddle. So if everything that we do in Afghanistan is in the name of Afghans and they have all the ownership, then you are forced to work on the basis of a good relationship and friendship and brotherhood, because you don't own it, even though you paid for it. And freedom of choice for us is incredibly important. So if any one of our NGOs would say: we don't want to work with you, then we bless them. And we say: you are more than welcome. You are the owner, it's your NGO. That's fine.

It's an impressive way of working really, it can't be easy, but I think you just get long lasting results.

A: Yeah, it's not easy. But there's also a reason why we are still operational in Afghanistan, and most of the other NGOs left. And there's also a reason why the Taliban invited us to come and support the local projects, and not the UN. We don't have a cent and they have millions. Other questions?

Q: Yeah. I'm just curious how you got involved with the village of peace. And how did that come about?

A: Well, when I was, okay, very short version. I grew up in, as I said, in Malawi, and when I was eight years old, there was a famine, and I saw children dying of starvation in the street. Obviously, that really had a lot of impact. And so when I was eight years old, I decided to devote the rest of my life to fighting malnutrition among orphans. And I do not have a hard science brain. So I studied language, culture, anthropology. And then when I was finishing up my PhD, many years ago, I thought: okay, I'm almost done with my PhD, I want to start doing something with malnutrition, because that's always been my life's dream. And then - but I didn't want to work for the UN. Sorry, I'm not trying to bash the UN, they also do a lot of amazing good work. So please don't – this is not UN bashing. This is just a different vision of development. Other things they do, that's got nothing to do with development, they do fantastically, so I'm not trying to bash them. But if you give 10 euro to UNICEF, maybe 50 cents will reach the child. The rest of the money will go up into hotel costs and fancy cars and security details and networking, lunches with champagne. Sorry, I'm not going to give money to that. So I didn't want to work for an international NGO that operates in this way. I'm not saying there's anything wrong with it. It's just not my vision. I think also, growing up in Malawi, and seeing so often how projects go completely sideways... And then I read an article in Al Jazeera, the news centre, I read about malnutrition in Afghanistan. And at that point, it was one of the worst countries with regards to statistics on malnutrition. So I thought, well, if that is the worst place that you can possibly be, then I'm going to start in Afghanistan. I never thought about Afghanistan ever before in my life. And then two weeks later, I met Pete because he's my father in law's best friend. So network, relationship, family, and then I decided to go and have a coffee with Pete. I never, never thought or dreamed of working for Village of Peace. And he only just started, it wasn't even a year. I think he's been in Afghanistan, then only once or something. And then he said: well, why don't you come and work for Village of Peace? And then I said: well, I'm a cultural anthropologist. I know nothing of food security. And then he said: well, you have the heart. That's, that's how it started.

Q: Yeah. Fascinating. What a story, what an organization. What an operation. So, so deep, but it's been great. Yeah, it's truly very inspiring. But I also wanted to ask, if there is a possibility for us to get in touch with someone on ground, one way or the other or phone call?

A: There is a possibility, but I would like to know what the goal is, and I'll tell you why. I put up a research institute, specifically for focusing on food security in Afghanistan. So if anyone of you at some point will start with a master's degree, please contact me and I will organize a wonderful practical, what do you call it internship. At Seeds, Afghanistan, which is the new research institute for food security in Afghanistan. We only focus on food security in Afghanistan, and it needs to be practical. It's open source, it must be open source so that any other NGO can use it. I won't publish it on my website, of course, the standard needs to be high, so that other NGOs can use it. But it needs to entail a practical component, which means that if you do write a thesis, at the end of the thesis, I need something that I and other NGOs can directly put into practice, to bridge the gap between science and practice. And for this Institute, a number of students, current master students and PhD students, have already had a lot of contact with our people on the ground. So I don't want to stretch our capacity locally too thin. So yes, of course, we can arrange contact, but it would... it will depend on how much time they have available, and whether they are still open for more contact. Because we've... one of my students that I supervise, she just did a round of three interviews with beneficiaries and two surveys. I can give you that data if you want it. I don't know if it will be interesting for you. But yes, so we can arrange contact, but it will depend on how much time it will take. And it will depend on what the purpose will be of the contact. Yeah, I think

Q: Yeah, I think what would be really useful would to have access to some more resources, I think now is our goal.

A: What I can do, what I can do is to arrange that you can speak to our agricultural expert who's running the practical side of things. His comprehension of English is good, he still struggles to speak English, but he understands a lot, but our office manager will also be able to join in and his translations excellent.

If someone is there, who can speak Urdu, I can speak Urdu to them.

A: That may be possible, we do have two people who are able to speak Urdu.

Yeah, I can speak Urdu. It's nice, if that is easier, or if it helps in the process

A: It is. I'll ask. email, put it in the email.

Q: I will send you email a little questions from us. And also, this has been very, very insightful. So maybe, while we are doing everything, when we come up with something, maybe through everything, can we have another meeting with you for an hour or so?

A: Yeah. Yes.

Q: That's great. Okay, and I think, would you be open as well to give us some feedback on our process as well, because I think that would be really useful to have your point of view whether we're moving in the right direction?

A: Yes. So could you quickly just explain, again, to me, what, what the purpose is of what you're doing?

So our understanding of the main goal of our contribution to the Village of Peace is to improve on the nutritional aspect of the education program. So our understanding is that there is education provided on the nutritional aspect, but it's, there's a lack of, or there's a lack of the link between nutrition and the international guidelines behind that. So we're trying to match that and making sure that the education is valuable in that way. While still considering the practicalities, because we can design like, this is a perfect diet or something, but it still needs to be practice. Go and can be used. So that's also like a huge part of it. Yeah, yes.

A: Well, perfect. That sounds wonderful that will help. And don't worry, we're not angry. We're not arrogant. We'll, we're always open to new suggestions and ideas and learning. It's also part of our value. And so never, never hesitate to critique. As long as it as long as it's constructive, and it's brought in a positive spirit, please feel free to, to throw in anything.

Thank you. Yeah, thank you. Yeah, thank you very much. Yes. Really insightful. today. We received a lot of information and inspiration actually. We will glad to contact you again, for the questions, and also maybe other information. Or maybe if we want to have another meeting, maybe we could, you know, contact you again. Thank you very much for your time. I know that it's like, it's not, it's more than one hour, but it's really insightful. We are so grateful that you spend your time with that. Yeah, I hope that you have a great day. Yes. Thank you very much for your time. Yeah, and see you!

E2: Interview P2

P2 is a student at WUR who was born in and has lived in Afghanistan.

Q: Okay, thank you for joining again, Lima. So, the meeting is recorded, recorded from now. Okay. Thank you. So, at first, I think we should do a bit of more general introduction of each other. What what do you study? What do you do in that connection?

A: Shall I start? Yeah. Okay. So as it's relevant to this project, let me start a little bit early. So, I was born in Afghanistan, and in the capital, and my parents were also from the capital and my extended family is a little bit more dispersed. So, I have family from other provinces as well. And everybody grew up there, they went away for their studies, but they have a really deep sense of the culture. And that's the culture also I grew up with. Unfortunately, we had to flee the country, when I was very young, I was about three, three years old when we left. So even though I wasn't growing up in the country, I did grew up with the culture very much. So it's still my first language, I'm still very familiar with all cultural elements. And that is going to be the perspective that I can share information from. In preparation with this talk, I also talked to my parents and some older family members, to get some ideas about the food culture with a little bit more firsthand sources and a little bit more accurate and up to date information as far as I could. And then coming to the Netherlands.

I'm going to skip ahead a little bit. I did my bachelor's in biotechnology. And I'm finishing up now my master's in biotechnology as well. Next to that I have some work experience in financial administration, I work now with a nonprofit called that we were foundation. That was just under operational system there. Yeah. And that's, I think, all information background for me.

Q: Yes, thank you very much. It's very nice that you took your time out to identify sources and firsthand knowledge for us. We really appreciate it. And yeah, so today, we're just going to, it looks like that you're already familiar with what we are going to talk about today are just going to ask you some context, context related questions about the food habits there so that we can use it for our, for our project, are you aware what we are doing?

A: So as far as I understand the project, this, it's an initiative to help the people with very low general mobility and ability to partake in Afghan society the way it is right now to help them have more food security. So that's mainly women and children, if I understand correctly.

Q: Yes, women and children more specifically widow and orphans. So, what we're trying to do is creating or trying to improve the education and training material that we have, that already exists that is already being done to provide more sense of food security and to just in general, just make everything better and easier for them to have access to it. And we're also trying to make their guidelines in line with international guidelines if they match or not. And for that, we see if the food habits and they're even considered in the international guidelines, you know, because I think it's important. So that's why we are having this conversation with you today. And So, should we start Sophia? Or do you want to say something?

No, you mentioned the project really well. Yeah, so our main focus is to improve their nutritional programme and, and part of this NGO also helps with implementing home gardens, to the widows. So they they can grow their own crops. And then from that a lot of the nutritional education is surrounded by that concept of what they're growing at home, but also in their general diet. And hopefully, through this, like, we're trying to develop educational material to hopefully change their behaviours or make them more educated so they can make better choices for them, and further households as well. Right.

Right. Great. So yeah, we're going to ask you a few questions. And because we are working for the region, Mazar e Sharif. We understand that you're not from there. And maybe some questions may be specific enough for you to be aware or maybe if our questions, makes you uncomfortable, please feel free to refrain from answering it. As you already said, you're from Kabul, and family is from your family has a scattered background. Can you give us a general overview of your idea about the region? Mazar-I-Sharif, what is your background? Or what do you know about this place?

A: So from what I know contextually about Mazar-I-Sharif is that it is considered a while this is before, of course, the current situation. So what I'm talking about is more, I would say 2010. And earlier, going back for about, I think, 40-50 years. And in that zeitgeist, as Mazar-I-Sharif is considered a cultural hub, it is considered somewhere with a lot of specialty when it comes to rugs and saffron. And it is usually held in high regard in terms of freedom and general development. And contrasting that is also that it's called Sharif is basically a suffix that denotes some type of place of pilgrimage of, or some holiness. So, so on one hand, it has a bit of like a religious centre, but also very cultural, and its exports also very, you know, in general, just a place to go and place to go see, and a place to go travel. And generally, just a big hub in the area as a city.

Q: So from what we know, and from what we've interviewed someone who's working in this project, he told us that each local governance of Taliban determines the freedom that women exercise in these specific areas. So as far as you where do you know, how is the current state of women in Mazar-I-Sharif?

A: I don't have any information on the current state of women in Mazar Sharif. The information that I have that could be slightly more relevant is that I have an uncle that I speak to who lives in Kabul, he is he runs a little shop, have imported goods from Iran, and he used to be an attorney at Law. I also have an aunt who is a retired district attorney. And from what I hear from them who are both in Kabul, is that the general situation in the bigger cities, in more central cities, is that the safety is a lot better than what it used to be under the previous government. The whole situation of being stopped being robbed, being abducted, but mainly the same situation when it comes to bombing and suicide attacks, all of that has eliminated completely. But when it comes to personal freedoms, especially for women, everything is very much restricted. And there's a lot of leeway for extremely conservative families to keep the women completely restricted in almost every way. So, these are situations that I'm hearing. I'm also hearing Is that in the more remote areas where there is just a need for labour women work. And they're not restricted from that work. But this is usually labour work menial work, and more agricultural work from there where it is needed, they work. But there are also a lot of very remote areas that are completely unaffected when it comes to governmental ordinance and governmental control, because they have their own little like, yeah, political ecosystem. From when it comes to countryside, and cities.

Q: Yes. So you would consider Mazar-I-Sharif as one of the big cities, right? Yes. I mean, we're not going to make an assumption based on this, but we're just trying to see what direction to look into. Because the information that you just gave us, I think we can look more into it and identify. So because I know Afghanistan is a very diverse country is quite diverse. Do you also

have diversity in terms of food consumption about the food that you eat in different regions? Or is it uniform across the country? What does it look like?

A: Um, it is extremely diverse, although, because some areas are just in very poor connection to other areas because of the geographical landscape. But the bigger cities that I'm familiar with, like when you look at Northern places, if you look at Central or southern places. Or if you look at very like, bordered spaces, it can, they can have a very internal culture, like when you see look at places that border very closely to China, they're very different than places that border to Iran. But when it comes to the food and food staples in general food culture, from my albeit limited perspective, there's a lot of overlap, especially when you look out across borders, the Central Asian region, whether that's Iran or Afghanistan, or even place like Tajikistan, the general food system and food culture is very similar, I would say, which just means that the basic staple is rice. Meat is a considered somewhat of a luxury food, but also something that as soon as you can afford it, you should eat. So it's luxury, just because it's a little bit more expensive. But somebody who doesn't eat meat is considered very unfortunate. Most people who have a basic standard of living, they do eat meat.

And food is also very, very important when it comes to hospitality. And that hospitality is very, very important when it comes to identity. If you are a person who considers themselves an individual and has a certain type of identity within a within a community, it's very, very important to have a sense of hospitalityand have people over. It is considered very generally in the culture that somebody lends you lends you courtesy when they come over, it's not so much considered that the person hosting is making the effort of hosting and having good food having a lot of food basically and nice everything. But it is considered the effort of the person coming visiting because they are coming over. So, when it comes to that type of mindset, in which identity, hospitality and food are interconnected, it is the same in all those regions. And when it comes to the actual food that people eat, it is based around rice, and meat and vegetables are usually side dishes, but not subtle at all. So that is when it comes to like I would say the general way family base.

In this situation, we're talking about orphans and widows. And I can make a side note about a food that is considered very simple, or very osterious or even poor people food. It also it is also considered what is the right way to say that. It's kind of like fries and mayonnaise, you know, it is considered like a food that you should eat every day, but it's not really looked down on. And one of those food basically is for instance, *Kuruti* and *Kuruti* is just a bread sliced up in a bowl. And then you you have a product that they call in Afghanistan they call it Kru and it's basically a side project from making a milk or making not making milk but using milk for making butter or using milk for making cheeses. And then you have like the whey left and then they dry the whey they salt it.

And as just then the side product. So would you do in those days, you just take sliced bread, and you take this sauce, you heat it up, you put it over, then you slice onions over it, consider the classic poor dish, but everybody likes it. So, when it comes to like food, that's more ostereos or more, because they're poor, it's not looked down on. So when you if you live live a very simple life, and you eat beans, and you eat this Kuruti and you eat just a little bit of vegetables that's not considered poor yet, I would say. So you can really push your food habits towards less and less expenses, and still not feel like you are at the bottom of society.

Q: Yes, that's quite a lot of information for us. And would you say that people eat, eat meat that is homegrown, or they buy it? You know, for example, I'm from Nepal, farmers, we also eat a lot of rice. But most of the families have a land, like most agricultural land where they get the rice from, and they get meat also from their own domestic product. So, is it the same to you? Does it differ ruler urban settings? Or how does it look like? How do you have to have access to this type of food? You know, because meat is even though it's considered sort of a luxury, it is still one of the basic elements of your diet and these vegetables? Maybe it's locally grown, or people buy it? How do people access this food?

A: Yeah, that's a great question. I hope you don't mind that I'm really expansive. I just push in any information that seems slightly relevant. You can just strike it from the record if it's not important enough. But when it comes to meat and access to meat, I would say that there's kind of a strong divide, I would say the people who are most affluent and have the most opportunity, they just go to a meat shop, and they go to a butcher. Especially because if you can afford meat, then you also got to take a lot of pride in the quality of meat. And the person and the person and we have a culture around that. Which you can kind of compare with somebody who really likes barbecues, right? I got this nice cut from this nice person. I know one, his cows are like this, his lambs are like that. And also, speaking of lamb, lamb is something that's considered a luxury food. But it's also something that if you'd like to host you would give it to your guests. So, there's like the top rung, I would say who eat lamb who go to a meat shop, and they're able to have the food culture that is so meat. And then there's the middle group, which is a lot poorer, and they only eat the meat that they have that they grow themselves. But then they only eat it when the animal is just completely, completely old. And just towards the end of its life. But then, from what I understand these people are usually they have nomadic life, but they

didn't have a countryside life. And since that they don't have a lot of developed systems of refrigeration. So what they do is they, they slaughter the animal and they cut up it and they cut it up. And then what they usually do is a system of drying. And that's called a *Ghosta Khaub* call, or it's called beef, meat jerky, basically, or meat, tough, tough meat. And it's very salted type of meat. And it's also very coveted. It's also the obsession of meat, but the quality of the meat tends to be very low. And also, it is something that is not done out of appetite.

So it's something that comes along very. So it's in that situation, I think of the lower section of people who just really can't afford any meat at all. And they usually get it as handouts. Because there's also a strong Islamic tradition, of course, and in the Islamic tradition, when you want to do something good. You do what is called *Hairat*. And that is that you either give staples like rice and lentils and sugar and stuff like that to poor people, but it's also extremely common, if you can afford it to slaughter animals and distribute the meat over poor people. In fact, my family has done this a couple of times where they asked my uncle to facilitate this and this is done when it's Eid basically so after Ramadan, this is done sometimes to as a sign of gratitude to God, when something goes well.

With, let's say, your child to graduate school or marrys, at marriages, they do this as well. And they also do it when something bad has been averted. So I have been in a car accident with my mother. And then what they did is that they hired a butcher, to kill and distribute the meat of the two cows. W"ich is in their idea as to that the car accident didn't turn out bad and everybody survived, and everything went well. So there are ways for poor people to get food to get meat. But of course, it's extremely limited to the situation and the situation of people who want to do that charity.

Q: So you said that lamb is more luxury than other type of meat? What are the other kinds of meat that are consumed?

A: That's a great question. So I will say if I make a little tier list in terms of status, and how attractive and appealing and fancy just have meat. Lamb at the absolute bottom, especially young lamb, and then you have beef, in general, there's also a culture of eating more parts of animals like tongue is eaten. I think lungs are also sometimes they also eat part of the day make stew of the head, they make stew out of the feet, with grains. So beef is very, very common. And then lower on the tier is chicken chicken is also eaten. And I think those are the main ones, there is no really eating of other animals. And that's also because in the Islamic tradition, there are very, very strong ideas on what's common and uncommon. So I think most of the food as far as I'm aware, especially in urban areas is just completely restricted to this. Eggs are also a big deal. Dairy is not that much of a big deal. Homemade cheeses are something that women usually do. But as there's no cheese culture, there is no dairy culture at all.

Q: So you've so you would say this type of meat hierarchy is common for everywhere in Afghanistan? Or is it specific to where are you from your culture.

A: Um, I am not quite sure. Because from what I understand, there's a huge generalisation in the south, chicken is preferred a lot, for some reason. But usually just because of the cost and the accessibility, I would imagine that this type of hierarchy just really holds up because lamb is of course small, the investment revenue is very low, so it's a luxury product. And then chicken is very easy to grow and very easy to keep. And the eggs are of course, also a source of sustenance. So, I would imagine that this when it comes to accessibility, this is pretty much widespread.

Q: Okay, thank you very much. This is a lot of meat. But now we want to also speak about things that you can grow in your garden because like we are talking about this project, which trains people to have their own garden. It's called high diversity garden. So, do you know of any you know, food in your diet that are like common, which you think can be grown in your house by yourself? I'm sure like you don't have a holistic you know, you don't have it to the nail but from general like yeah, what do you think?

A:Alrighty. So even though meat, rice or staples vegetables have a role to play. And I think the most common vegetables that people eat are green beans, red beans. Tomatoes are used a lot when it comes to making the tomato sauce because the standard vegetable dish is a korma is basically tomato sauce with potatoes or beans or something of the sort. So, potatoes, tomatoes, beans, I was extremely common. But then I think pumpkin I can think of a couple of dishes with pumpkin as well. And then you have eggplant, aubergine, and zucchini. I think these are the ones although zucchini is a little bit on the edge there. So, you can use usually use it as a substitute for eggplant. But it's not a strange to the Afghan food culture. It's not a stranger. I think those are the closest one I can think of. Yes, I am, of course. Sorry to interrupt, I just wanted to finish that onions were also used in the end the tomato sauce very commonly. And there's also a bit of a strange thing where people eat as a snack sometimes, especially when they travel, they eat bread and onion. They just take raw onion with them, and they take bread, and they just slice it up and eat it because you keep can keep it and people have a culture of travelling long distances, usually by foot or just with one companion animal. So onions are also very useful.

Q: Yeah, Sophia, do you have any questions. I had a question. Are there certain foods that are stigmatised? Or people have like a certain notion like oh, no, like that is not good for you, or that kind of mentality behind certain foods.

A: Aside of course, pork. There is no real big, stigmatised food. Aside of pork and other animals besides chicken and beef, there's nothing really stigmatised. I am really racking my brain, anything else stigmatised? No? No, there is a bit of a culture it's a landlocked culture. So when it comes to seafood, there's a lot of hesitation. And a lot of like, oh, I don't know about this. People do eat fish, freshwater fish, because of the rivers of course. But even in that the fish culture is so limited that nobody really knows any other fish per se, except just like fish. That's it? What are we eating tonight fish and like that's all the information you need. Um, so I would say you see a seafood is maybe a little bit of suspicion. But when it comes to things, you can harvest and vegetables, there is nothing that I can imagine that will be stigmatised. But I can imagine that people would not be very receptive to new foods there is general because it is such a big central thing to the general culture, social culture. I don't think people will be very receptive to trying new exotic ingredients or new very easy to grow but not common ingredients.

Q: You mentioned that vegetables were usually a side dish. Are vegetables regarded as like the, at least prioritised usually in a dish?

A: I don't think so. Usually you do have vegetables that are a little bit more starchy starting from green beans on very starch of course, but they're a little more high tier those are considered a little bit more main dish. Because you can make the tomato sauce korma out of those and then you have like fresh, fresh vegetables that are made for salad. And that's actually the only very common vegetable side dish is just salad and salad usually consist of cucumber tomato and lettuce. So, it's very basic.

Q: I also wanted to ask you about spices masalas I don't know if you understand masala, is a huge part of the South Asian food making culture because if you just have good ingredients and you don't have masala it makes no difference. And because masala also carries a lot of nutrients and nutritional value. It's of interest to us. So, are there any staples, spices or masalas that you think we should know of?

A: That's a great question. Yes, I do think there are some spices that you need. So the spices that are common ground coriander seeds. Fresh herbs like coriander and chia a little bit less. But a Parsley is very common. There was one more that a *Dil* is very common because there was also used to make *chutneys out of* I would say the two models fresh herbs are dill, coriander and then when it comes to ground spices ground coriander seeds are very common black peppers very common. Dry pepper, paprika, powder, salt of course. What else? There's a type of powder. I'm not sure what it's made of, but it's very sour. And it is purplish. I can't think of the name I doubt I wouldn't know it any much. Um, what do ya good? That's what it's called an in Afghan language, but it is basically a part of a grape. It's our but I think if you have different types of pepper, paprika powder, and ground coriander seed I think that's a basic the basic set.

Q: So according to the according to your answer that I shared a while ago, it's people are not receiving of newer ways of eating or new ingredients, new food products? How many times is it culturally expected for people to eat in a day? Because I see that food is a huge part of culture. So how many times are you expected to?

I think it differs on your socio economic status. If you're a little bit higher when it comes to socio economic situation, then you're expected to eat twice a day. And usually that's twice hot. So you eat around breakfast is not really that big of a thing. The classic thing is sweet tea with a fresh bread, or bread in general. A fresh bread and black sweet tea. And then one hot meal usually in the afternoon and one hot meal at night. And that's usually consists of rice and a warm side dish. But if you are more on in like the labor lifestyle, where you're just working hard, then usually have one hot meal. And that's in the evening. And your, your other meal is probably something like bread and tea, maybe like something small on the side. And they will just have one meal. But then at the meal time is also considered always a mode of everybody coming together and everybody taking a little time to relax and socialize. And the food is very central to that. So even if you're poor, you are going to try to have a little bit more of like side dishes limit extra, a little bit maybe fruit next to it and stuff like that. So yeah, I think that differs twice or once. With twice eating hot twice. It's not strange, having like about 12 o'clock having like rice and maybe some like curry style food next to it and then doing the same thing like seven, eight o'clock in the evening.

Q: I guess you just mentioned fruit, what are the most common or most available most accepted fruits that people consume?

So apples are very common fix. They're not very common because they are tasteful. But once they're in season, they're pretty much everywhere. Mangoes are imported from Pakistan, usually. And they are considered a very summery fruit that most people have access to. Pomegranate is something that people eat a lot. And there's also Wild Growth of pomegranate. And a lot of people go up to the mountains and then pick them up and come back to the cities and sell them. And Bhangra also has, it's very

seasonal. So once it ends, it's everywhere. And it's incredibly accessible. Maybe cheaper is not the right word right now. But I think from early on once it was there it was it was very accessible. And there were from what I hear factories that are only in, in process when pomegranate is is available because there's just such a huge quantity that it needs to be industrially processed. Um, so pears are common as well. Apples I mentioned. Oranges are also pretty common among them imported from China sometimes they are found within a country. Um yeah, I think I think that's, that's most, there's also thing about dried fruits. Dried fruits are very, very common. And they're also harvested during the warmer months to keep for the winter months. Because basically the one snack the one thing that's always available during the winter is dried fruit. So that's a lot of industrial "moreby" I'm not sure what it is, it is like this tiny little dry the black fruit with it looks almost a little bit like a berry. But it's very hard to chewy. That walnuts are very common. Pistachios are very common as dried fruit. Dried little nuts, extremely common. And that is a big part of cultural life in the winter. And it's also something you also always put on table if somebody's coming to see you, someone walks in and or you sometimes when you meet people in the street, the first thing you do is ask them, Hey, would you like to come over for dinner, we just come over to eat at our place. And it doesn't matter what you have, or what you don't have how rich or poor you are, it's just considered a point of like personal integrity almost to be able to invite people over. But then it's also very much understood that people just invite you out of courtesy. So you would never accept them first availability. And then so let's say you do get somebody to come into your house and they do accept the first thing you give them is tea and dried fruit. So dried fruits are a big part of, of general social culture.

Q: That's great. Do people dry their own fruit and keep it in their house? Or is it bought? Mostly what do you think?

People who do some sort of work, agricultural sales, sometimes agricultural connection they do for themselves. But then there's also a system in which a lot of people who do agricultural work, do it for the land owner. And then the land owner gets the bigger part. And then the smaller part is for the people working in the land, but they don't have to pay for it. And then so it was usually in like city areas, people have to buy it, but it's usually pretty cheap. And it's something that almost everybody has. if you have some type of financial stability, which is not very common, especially now. But a lot of people have any type of connection to anyone who works the land, they just get it through connections.

Q: Okay. Thank you. Yeah, I just have one last question for you. So you shared that rice is the staple food. And I also found through other sources that wheat is the most grown crop in Afghanistan for at least it's the most grown food crop. So what would you say are the basic building blocks of your diet? Again, I know you've answered this in different questions.

The main building blocks of food if we go back to Staples, it's exactly we said wheat. wheat is in the sense it's bread. And it didn't come to my mind at this table because I was thinking about plate. But bread is extremely common. So you have it for breakfast just bland. You have if you're traveling you have it with you with like onions people have bread with grapes as a snack, which I'm not sure about the taste of but people like it. And then the rice is the second big staple, meat if you can afford it in any way possible, you're going to have some meat and then I would say starchy vegetables are very common like potatoes and beets. And then you have a little bit less starchy but still savory, like beans. And then you have fresh vegetables which are a very common side dish, which is basically tomato, cucumber and lettuce. And then you would also have some fruits and fruits would be apples seasonal fruits in the summer that which would be a mango and figs, pomegranates and pears are also very common of course. Oranges are also common. There's also a specific way of keeping grapes. Grapes are also very common. There's a very old traditional system where they make clay pots and it's made in a specific way where the grapes can stay fresh after six seven months and then in the summer you break them and then you can eat them again. So the grapes there accompany also dried as raisins which goes into the category of dried fruits and dried fruits, as a way it comes to hospitality culture is very important, which are raisins, dried nuts. There's also an ominous there's a type of almond or dried that that is glazed with like melted sugar, it's called "noucla", also very, very common. Little bit fancier, a little bit more expensive, but still very expensive. So I said dried nuts. I said raisins, pistachios, almonds, Yep, those are the main dry food ones. And then when it comes to spices, you have that coriander seed, which is very important. A sour type of dried part of a grape, which is common. Salt and pepper. Cumin is also common. Paprika powder is common. And I think and tea of course. I didn't mention tea yet but tea is a huge part of the culture. But that is also usually either domestic production, or directly from bordering countries. I think that covers everything. Yes.

Q: Thank you very much. Also, one follow up question based on your answer, because you told us that people store meat, the dry meat, the salty type of meat, which is like in places where they don't have appropriate storage infrastructures. And then you just also mentioned that people store grapes in a clay pot and use it for next season. Right? So are there other foods storing traditional indigenous way of doing it that you're aware of? Maybe we can help identify?

Great question. Great question. Yes, the always a story. What is most commonly done so there's the drying of the meat there is keeping in Brian, that is something people do. They dry usually like drying when it comes to dried fruit and stuff is just done, done

very common like just in areas in the sun. So they use the sun for that. I imagined the brine. Some places they keep things in animal fat and oil as a matter of preserving. Another way of preserving is using salt. Especially when it comes to rice, rice a staple, it's very important to keep well. And what they do is they put a lot of a lot of they put salt and they mix it. Other ways, more rural places have more ingenious ways of doing things. There is a way that I've heard this is kind of I'm not sure how common this is, there is a way of storage where you just have a big room actually the Afghan word for or the Farsi word for fridge is "yagchal". And the "yaghcal" is a system is very old, old, old, maybe ancient way of system of keeping image, you have a big round room. And I think it is made out of like ceramic or some type of Earth wear and then you have walls and walls and walls and walls. And inside, there's so much isolation that inside is extremely cold. And I'm not sure if you can keep ice there. But it's around those temperatures. So just around below above zero degrees, if I'm not mistaken. This is something that's been passed on and on and on as as an example of rural or Central Asian ingenuity. So I wouldn't be comfortable making hard claims on its on its functionality, but you know that it's something that's very famous, and culturally very important. But because it takes a relatively big space, it's not incredibly common. It's something that requires like a like a communal effort, so to speak. But when it comes to most common ways and most mobile ways of doing it, it is drying brine and fat and using the sun

Q: Thank you very much. That was quite insightful. Overall, also, whatever you gave us, I think we we are very happy about it. And we can do a lot with it. Thank you very much. And thank you for your time. I have one last question for you. Because yeah, thank you for all this information. Very nice to hear from you. But part of our part of our project is this challenge to try to target and change their behaviours with this nutritional education that we're hoping to revise and improve on. But regarding, like the culture, I was just wondering if new information is received by the people there, what it is, is it common for them to come together in group and share this kind of information or you know that like, we're targeting women because they're usually had heads of the household and so they kind of determine what food is being made or what how the household is being operated. So are there other ways that you see culturally that would be effective to spread this within them?

Um, so it sounds like communal or conviviality is extremely central a central, it doesn't matter which level or which space of the general society you are in, you're always going to have a communal space. And I think looking for those communal spaces is very important. And I think finding somebody who speaks their language to introduce that knowledge is very important. So if you go to people one on one, they might be very receptive and very open. But then if you don't put it into the communal space, it's just not going to get picked up. Because that's where life really happens. Everybody goes to their own house, and then they come back, that's where any type of processing or understanding or any type of process really takes place. So I can't give any specific examples of like this place, or this time or this event. But I think daily life is spent in those communal spaces. So if you find their daily life, you will be sure to find some point in which everybody of that community comes together. And so finding somebody who's close to the communities, especially speaks the language, especially who speaks the local dialect. So Mazeri-f-Sharif, there's a delicate Missouri. And if you find somebody who can speak Missouri, which is very, very close to the central way of speaking of Farsi, it will help a lot. But if you live there to have a little section of people who speak Pashto, then it's very important to have somebody who speaks Pashto, they'll, because people there's politeness is such a big thing. They will be receptive. Yes, of course. Thank you so much. And but when it comes down to actually implement hands, like oh, I don't know, let's just try it on stuff first, and then we'll see about. So I think, if I imagined this situation, a couple of barriers to be broken with is break the politeness barrier to make sure that it can be implemented the cultural barrier, which is basically dialect and language, and then the daily spaces, the other speakers, I cannot imagine them spaces that are not communal.

Q: Yes, so are these communal spaces different for men and women?

Yes, I would say so. For men, if you're looking for a for a very, like certain communal space, and discern, it would be the prayer houses, the masjid, if they meet each other there, at least every Friday, but most likely daily. And for women, it is much more diffuse for women, it is more going to meet each other going to see each other going to, to work on the fields together, going to the town square together, doing groceries together. So for women, it's much more social, and you have to make those connections, it comes very naturally, of course, because the husband knows people and you have people in the family. And you're very close with your in laws all the time. So for women, it's around house, their house, and the houses and houses of the family, which is usually very close to each other. But for men, it would be the place of prayer. And if there are people who work at the markets, that would be a man, usually, and the markets they also a very strong, cohesive social system, where people just know each other, and they kind of take care of each other bring food for each other. Those are the places of work which are very social.

Yes. And for children. I'm just curious, are these spaces already separated for children based on their sex or work?

Great question. Yes, usually they are because there's also a culture of men or fathers, bringing very, very young children with them, to introduce them into the culture and to give them basically exposure to how to behave themselves and what the people

are like, and to just put their kid into the culture to be able to function as individuals. Well, rarely soon, and to have a position within the cultural dynamic. So that when you grow up, people know who you are, and you know who people are. Both those things are very important. And that happens from the age of 23 or 24. And it's not considered like labor, it's more of a little bit of an errand boy, where your dad tells you go get this, go get that, say hi to him, say hi to that. So there's some labor involved. But it's more that this is the way in which fathers take care of their sons. And it's also a way of child rearing, generally, generally child rearing. And girls, then usually, especially now, they just stay home with the mom. And they are also put into that female social system, where they also are supposed to learn how to behave and what to do and run the little errands of grab this and do that. And it's just considered the system of child rearing.

Q: Yeah, I just had, I don't know, if it's something probably maybe a little bit out of your scope. You mentioned that people are usually resistant to new trying new foods during this new concept. Do you see that as well with like, new information? And like resistance with that as well?

Yeah, absolutely. I would say so. Generally, any new thing that comes in is not received very well, there is a very old tradition of resisting anything that is more foreign than anything that they know. So there are usually culturally, around most with most people, they're pretty good connections across the border, when it comes to Pakistan, they are active people are usually very receptive of Iranian culture and cultural elements from Iran, especially in the cities. Although there is an exception to that, of course, as well. But then, could you repeat your question? So as I don't stray away too far?

Q: Sure. Yeah. I was just wondering if there's if there's resistance to new information, or how they would perceive new information, or what would be like the best way to spread new knowledge practically?

Yeah. So the worldview is a little bit conservative, a little bit? Conservative? Of course it is. But I think I would call it more protective of their own way of living. So it's not so much that people are. Well, there's also a sense of suspicion, especially after on all governmental systems basically being people marching in with guns and saying we're in charge now. So people are a little bit hesitant, anything that is too foreign and to abroad. But also that there's a very strong insistence on their own way of living, because that's what got them through all of these difficult decades. So I think if you were looking for ways in that, eradicate that suspicion, I would say going through a local culture, but especially going through religion. Religion is so interweaved in everything people do in their language and their gratitude in their systems of social life in their food, in their daily rhythm. If we can find some way of a local person integrating it within their religious practices, or the local culture, that is going to be really good. But generally, there is something that especially that isn't very, very like Central, you're a Central Asia, and you bring it in, people will meet it usually with some type of suspicion. Yeah, I don't think there are any exceptions to that because it's also of course, a country which most of us especially the city parts have been dealing with a lot of different systems that promise a lot of different things. And nothing has ever really worked out. So the only thing people trust is what they have and what they know.

E3: Interview P3

P3 is a student at Aalborg University, Copenhagen who was born in and has lived in Afghanistan. Q: Do you mind if I record the meeting for us?

A: Yes. Please continue. So, regarding their economic classification, I think their food habit is a bit different as well. So I can speak generally like, probably from a middle class economy, perspective, like their food habit are usually like, a lot of vegetables and rice. In terms of vegetables, people eat eggplants, ladies finger(Okra) and also, different types of vegetables like Spanish, carrots and we eat a lot of Rice as well. Like I can say people eat a lot of rice.

Also meat people are very interested into eating meat but the thing is meat is expensive compared to vegetables in Afghanistan. That is surprising as like here in European countries I found like meat to be a bit cheaper than usual because in Afghanistan meat is expensive. People are very interested in eating meat, but it's expensive. So I can say that meat is not like a big portion of their meal habits. And also, we have two big meals per day, which is for lunch and dinner. For morning we are eating light food or light meal I can say like, which is basically fried eggs, bread, tea. Yeah, people ate a lot of bread, a lot of bread, which is made of wheat.

Q: Where are you from in Afghanistan, because that will also help us contextualize?

A: basically, I am from Gaznipur but I, I lived most of my life in Kabul

Q: So when, you came for DCLead, you were based in Kabul? You were working from there. I saw your LinkedIn that you worked for the President of Afghanistan.

A: Yeah, I was working there as as a consultant in terms of e-governance in Afgnaistan. I was working there for two years and befre that I was working in US based campaigns and other NGOs.

Q: The student that we interviewed before you, she told us that the regulation set by the Taliban government is different in each province or it can differ from place to place. Do you know how it looks like in Mazar-I-Sharif? Do you know about it from where you come from, or from whatever you have heard, based on people you keep in touch with? Do you know how it looks like for them?

A: Regulation for what? regulation is specifically for food or in general?

Q: No in general to be able to go out work or to, to go out without, without a male companion up to what distance and then to be able to work in primary schools? And this is this type of things, you know, she said because it was it was different from place to place. And if if you are aware of these differences in different places, can you tell us about it?

A: I can say that's true, because like, I have heard. In northern part of Afghanistan, there are mostly people living who are not very educated, not very open minded. Mostly, like people are very close minded. Also, so the Taliban can put very restricted rules over there as well. So and, and like and other provinces. I think I can't say it's kind of the same a bit less restriction but in Kabul compared to other provinces, there is less restrictions over there. Because this is because of the media because in Kabul, the capital of Afghanistan most of the media are active. Or atleast people have somehow access to the internet or other channels of social media they can for instance, actually say to the world that that is happening. That's why they are not putting very restricted rules there but still the rules are very strict. The girls are not allowed to go to school. Not allowed to go to University. Compared to other provinces, I can say it's as less strict but still quite strict.

Q: Okay, can you tell us culturally, what does the traditional Afghan diet look like? What are the key ingredients in it? What it is composed of? How do you proportionate? Like, do you eat rice and then a side of a vegetable and then another vegetable? And then meat? How do you balance the diet? Traditionally?

A: Yep. Our main ingredients are in the meal that we are eating are, as I said, are mostly vegetables and rice. Like in terms of how we prepare the rice for instance, it's mostly we have two type of rice that we are cooking with. One type of it's very popular is called *Pulau*. And the other one is simple one. The popular one is made of carrots raisins and some other vegetables I think. it's the thing is the only thing which Afghan food is most of them are fried. We use a lot of oils while cooking the food which is not good for health and outside the rice, we are usually people are usually making *Korma*. Which is sometimes made, it's made of vegetables. And sometimes people make korma with chicken or beef with chickpeas and such kind of thing. So regarding the food that we have also we have other two popular food which is a type of dumpling one of them have minced beef or minced chicken fillings with some other vegetables like chickpeas, tomato sauce. We have another type of dish, which is for vegetarian is called the *Aushak* and it's made of different veggies and yoghurt on it chickpeas on it and tomato sauce.

Q: Would you say that the food habit or the platter of regular Afghani family looks different in different region or is it the same across the country?

A:I can say it's a little bit different people from the northern part of Afghanistan they eat a lot more meat I can say and also a bit more spicy food. I can say people from Balkh or Majar-I-Sharf they eat a little bit spicy food compared to the central part of Afghanistan. More rice because they they like that part of Afghanistan like Mazar-I-Sharif, like people grow up a lot of fried rice in their own field. And that's why they have very good quality rice and they eat water price.

Q: Do you still have family and relatives back in Afghanistan and do you? what do they tell you about how the situation of food security looks like? I mean They may not explicitly speak to you about food security, but, you know, to, you know, describing the situation there, how do they tell, like the availability of food and the prices? And how is it? How does it look?

A: Yes, all my family is back home. From my family, I can say that the economic situation is a bit better because me and my brother is working. Other than that, and generally, food prices are more getting expensive, after the Taliban took control of Afghanistan,

everything is getting expensive. Because there is a I can say, because there is no job for anyone, there's a lot of unemployment right now. And everything is getting very expensive. Food security, as compared to previous years, it's really difficult right now, like I can sell a lot of people are facing hunger, and in rural parts of Afghanistan, and rural provinces of Afghanistan, in northern part of Afghanistan, are also in the southern part.

Because like, I cannot say that, like, there are some specific provinces, where rich people are living now, like an each Province, Afghanistan, poor people are there. So in terms of food security, the situation is getting worse. And like I can say the prices getting expensive. Two times two is compared to previous government.

Q: So can you tell us about how many times it is culturally expected for people to eat? How many meals a day? Is it culturally suggested that you eat in a day?

A: Thee times, I think that's the most common thing, breakfast, lunch, dinner. But it may change during the Ramadan time, which is fasting time for the people. I think during that time, the two times or one. So during the fasting time I think a food habits of the people get changed a little bit, people trying to eat better food, food, which is way more with nutritional food, I can say because don't get hungry or don't affect on them a lot more energy.

Q: So the previous student that we spoke to, she told us, like people in Afghanistan are not accepting of change. And they don't want to change their cultural way of life and their traditional values and the their life that they lead with discipline of the religion of the Islamic religion. So do you think the people at home are like that? Or do you have a counter argument to this?

A: No, I say that's not true. Because the reason that people don't want to change is not they to change. The reason is that they don't have the awareness and knowledge. And when, for instance, if someone don't know that this food, for instance, basic example is harmful for their health, they eat just because of the taste of it. So they don't know how harmful it is for their health. So I can say most of the people cannot change because of the conflict and war that we have back in the country. Like a lot of people had not access to the schools, education and also the education system, I can say at least at the rural area, we are not good. So people are lacking of awareness and lacking of knowledge. It's not because of the people don't want to change. They are they are changeable. That it's it requires a lot of like, How can a systematic or coordinated or managed way of raising their awareness?

Q: Yes, thank you very much, because we are whatever, the NGO, the Dutch NGO that works with other local NGOs in Afghanistan understand they are working with behaviour change communication. So mean to influence people to make home gardens and education, through education. They're not building those gardens, but they are reaching out to widows and orphans, and then training them through different ways so that they can make home gardens. So do you think in a general sense, like a household or a family has the resources to make a home garden because you would need at least a rooftop or a space to make this type of garden? So do you think the families have this type of resources in general? Like, how do you see.

A: Compared to apital of Afghanistan, I can say houses or homes are built in a way that they have less space or garden to plant, whatever they need, like vegetables or other things. But and most of the homes of, of Afghanistan, like every houses are structured in a way that they have a back yard. And they can they have, at least in their own houses, they have the space to plant plant vegetables or other things.

So the problems that they don't I think is there is right now in Afghanistan, there is drought, and there is a shortage for water and lack of awareness I can say. Yeah and probably, lack of having money, like people, like at least poor people are struggling or struggling to find, like work or finding at least some money to feed to your childrens or family. So I think they cannot think of planting something into the garden. Yes, but if if some NGOs raised their awareness says, I can say that could be helpful.

Q: Yes. Thank you. When we spoke to this student, she also told us that there are various traditional ways of storing food. Like for example, there is clay or some type of pot where you can put grapes with oil or something or other fruits that they store for a long time. And there is a Persian word for refrigerator for fridge that Afghan people also use this. And t they make they store their meat or food like that, and they dry their meat in the sun. And it's like salty and this type of like, food storing, that are very traditional.

Yeah, I can say that's true. And most of like, Afghan big problem is shortage electricity. Like because of that we hold back in Afghanistan, at least we can, people don't don't preserve their food for longer time. So they cook for one time they consume it because we don't have much electricity. In the capital people do have electricity. And I can say maybe probably about 70% of them are using the refridgerator or freezer for preserving for keeping their food. For rural area if for instance, they want to keep your food maybe they were thinking about some way traditional, for instance that you said for keeping meat for longer time. Then they dry the meat put salt and keep in the sun. I think and rural area people are doing this because of shortage of electricity. And Afghanistan wthe bad thing is that we are actually planting a lot of fruits and veggies we cannot preserve it. Then we have to like export it to neighbouring countries like Pakistan or Iran and they preserve it during the winter. They send those we just pack in Afghanistan with much higher prices because we don't have electricity

Q: Are there any food items that are used more than the others? I know you already gave us some list of food that you consume on a daily basis and how that looks like. But are there any food items that are used more than the others? And are there more? You know, for example, in Napa, we eat a lot of rice rice goes with everything every three times a day, you can eat rice, and that's like, identity of Nepali people. And like for Italians, it's like pasta or pizza or something like this, you know?

A: I can say in Afghanistan, it's kinda goes the same, Rice. We eat a lot of rice, and bread. If people are not eating a lot of bread at least we have bread with every meal, we have bread with breakfast, lunch, dinner, no matter what. Even with rice, you eat bread. That was kind of my habit as well.

Q:Is the bread more like Western bread? Or is it like a roti or naan?

A: It's it's actually non not Western type of bread. Like it's usually made of wheat only. And the way of the the way that they cook or on the different in some of them are steamed some are some of them are thicker, thinner, and people are used for burgers. Such kind of thing.

Q: Is there any thing else that you think that you should tell us? Because I feel like you've answered all our questions very precisely. And I have run out of questions. So is there anything based on what we have asked you you think would be a valuable piece of information for us?

A: are you trying to figure out that find out the what kind of food people are using generally?

Q: Yeah, we're finding out what is common there. So that the NGO when they want to help people with food security programmes, that they that they only choose, like appropriate things for Afghanistan, that they don't come with things from, you know, the Netherlands or Copenhagen, for example, but that they adjust their programme, specifically. So we're trying to find out basically as much about the context that we can, and this is the central part mostly.

A: Okay, I share, I will share with you one of the research done in Australia, I think, based on Afghan people who are migrated here, you can find, like very like I went through a scan, I think it was, you can find very good information from there. But regarding to the NGOs, helping poor people, I think they should think about of what kind of nutritional food they can hold for the people which be helpful for the children and their family. And also, they should consider it a little bit about the taste of it as well. I think a few years ago, American based NGOs tried to do the same thing like help the people with the more nutritional food. But because of the taste as people was not very familiar with the taste of it, they were not interested of consuming food. If the NGO can come with nutritional food, with kind of similar taste, then that will be very helpful. I will share that paper with you. And maybe that would be helpful.

Q: Thank you very much. So yes, what we are trying to gather information about is what are the food that is available locally, so that a balanced nutritional diet can be created within the home garden that they are going to make? And yes, and also trying to see if it matches with the guidelines of food intake, not just in terms of specific food but in terms of nutritional value in terms of daily nutrition, intake of fat, or protein or vitamin vitamins and things like this. So we're trying to see what are the varieties of food available and if it can be mixed together from the food that is already available there to give them a healthy diet.

A: Yeah, in summary will say and like people are like in general accustomed with veggies, rice, and meat but it is a bit expensive for the people, they cannot buy it. So, at least for the poor people for veggies are using, as I mentioned, different type of

vegetables. And common food is still I I can say about that which one of them is dumplings and pulau. Another one is this Korma that we usually make out of veggies and meat. The way that people are cooking the food is they use a lot of oil, which is not good. And also people are frying the foods a lot, which is not good, which NGO can help and raise awareness general, don't don't use a lot of oil, which is not good, healthy wise as well. And also economy keywords as well. And don't fry your food a lot, which is also consumption of electricity can also help us it's not nutritionall for the people.

Q: I think because especially because you mentioned the US NGOs already, I'm sure that Afghanistan also has a very different experience now with NGOs, that there might be a little bit a higher level of distrust towards them, and rightly so. Is there something that that local programmes in Afghanistan really prioritise that you basically know of to connect with their own community to help people of their own region perhaps?

A: Like people Afghanistan, one thing is that they are socially connected with each other. Now, also, most of the time, they are dependent on their locals. Yeah, they're more socially dependent on each other. Mostly, in some region, there are some people who kind of kind of lead the community as a leader.

Q:Thank you very much!. And if you find any thing, or if you come across something in your mind, if you remember something suddenly, then you can always tell me about it.

A: Sure, I'm curious about because in Afghanistan, a lot of projects are like, a lot of NGOs are implementing different projects that can I can say that some most, some of them are not very beneficial. I don't know if it's because of not collaboration of the lupins peoples or not, our muscles of the angels will because like, understanding context, having the information from the region is very important as well. So yeah, I will try my best to share whatever information I come across with. If you have more specific information, if you analyse this interview or whatever to or come up with something else and you need to cross examine, you can cross check with me.

Q: Yes, thank you. And to give you a bit more context, that NGO that we're working with was actually invited by the government of Balkh province. So the programme officer, he went to Afghanistan last month and he met met someone some leader of the province it it was on his LinkedIn also I can share it with you if you want to.

A: That would be nice.

Q: I also asked you if you knew someone from Mazar Sharif and if you know someone and if they are willing to speak to us.

A: I know some people, which is kind off I think it would be nicer to appeal to people who are a bit educated and also know the context. Also Maybe it would be nicer if you interview very non educated people as well. Very, like bad economic situation. We can compare what these people are thinking what data people think. I will try to find people that you can speak to.

E4: Interview P4

P4 is a photographer who is based in Mazar-i-Sharif. We were able to contact him via WhatsApp. Q: What does a regular plate of food of a person from Mazar-i-sharif look like? What vegetables or meat they consume daily?

A: people based on their income have kinds of food on their tables, such as the most they eat egg, milk, oiled bread, based on season they II find kinds of foods like Shirpira, Gor, Moraba (and I know u don't understand these foods I tell u in its own name in Dari) afternoon and evening they regularly eat rice, beans like Bamia, Lobia, Nakhood, and french fries, Qorma, and meat but not most and they eat Chicken mostly. About vegetables; tomatoes, cucumber, other green vegetables like mint.

Q: What are the most commonly available crops that people eat?

A: animal crops, energy drinks, cream of milk, Chaka, sugar, rice, pottage, egg, biscuits, cake and many other but rarely they use like butter, meggi, olive,.

Q: What is the situation of food prices in the city? How expensive is it for people to buy food?

A: for most of the people it's not good and It's been always fine for those who have it and rich people makes it expensive for low range people; the situation has not been fine for most people. It's very expensive and thats why people eat very less and work very alot in here.

Q: Is there a scarcity of water in the city? Any signs of drought?

A: In some very far areas of the city yes but to all, no sign of drought.

Q: After the Taliban takeover, what are the rules for women or widows to go out of the house? Are they allowed to visit the mosque by themselves? Do they meet with other women in the mosque if they are allowed to go?

A: Women are allowed to go outside and no problem but with Hijab and in long distances like provinces; has to be with a man and in some cities, this also not take seriously like here in Mazar. Sunni women doesn't go to mosques here mostly, but Shia people can go and there is no problem at all.

Q: Do you have access to regular electricity or internet? What is the most popular social media?

A: Since it looks like u ask this question directly from me; I am gonna answer it as yes I do have access but unfortunately, it's expensive in comparison of many other countries, the most used social media in here are Facebook, Tiktok, Youtube, Whatsapp, Instagram, Messenger, Imo.

Q: Do women/ widows use these social media platforms?

A: yes, as long as they can afford it.

Q: Can I ask you something more specific about widows there?

A: Yes.

Q: Are the regulations for the widows different than other women?

A: Not any specific.

Q: Are they allowed to work if there is no income source in the family?

A: Yes but not any type of work, since the collapse of the gov, woman jobs are very in low access.

Q: How is their social interaction or social wellbeing? Are they in close interaction with other women or family members?

A: if it's this question is about after collapse of the government; no difference that may cause about their social wellbeing.

Q: Is it acceptable culturally to seek for marriage again after the husband dies?

A: Yes

Q: Is there any protection or support for widows without a son and with just daughters?

A: Actually Idk specifically but there are NGOs who really focuses more such families.

E5: Interview P5

P5 is the program manager of VoP, who is based in America. He was accompanied by two collegues who work with VoP on the ground in Afghanistan.

Q: I'm very glad that we can meet all of you here. And maybe you can introduce what are you doing in in village of peace? I mean, the program manager but maybe you can explain a bit more related to your work.

A: Yeah, thank you so much. So as I said, I am right now doing the work with village of peace North American as a program manager, and as well as my other role with PVDAO, one of our organizations which is located in Afghanistan, north side of Afghanistan, and my role is there is as a donor relationship. And the same thing, program manager, I was director of PVDAO for

a long time. And since I left the country, because the collapse happened, I had to leave my country. And I got to the United States. So that's why I changed my position. And actually, the board's changed my position, and I had to resign from that position. But I'm a donor relationship. And as well as the program manager for PVDAO and Program Manager for village of peace, not American. So we are working really closely with the Jaco, Lawrence and some other friends and member of the village of peace. I'm really glad that you're working. And you're thinking about Afghanistan and preparing training. If I don't mistake so maybe. I think you're working on the breastfeeding training, right.

Thank you so much. This is Omid Basharyar, our project manager in Balkh province, north of Afghanistan. I'm distributing the soy arrives to the malnourished small children in Mazar-i-sharif. Our product target is to distribute to 1080 malnourished children, distribution of soy and rice in Balkh province and with our orders and immigration clinic with my team we are distributing the soy and rice in all distribution time. We screen the malnourished children, now we achieved our goal, because we are the last month of our project. The result is very good, very good. And we found out that those children are now cured.

At first, I'm very glad to see all of you. And I'm very thankful for your time. I'm Tabish Rahim and I am working in FSP project or food security project in TbU. And also, I was working since 2017, up to now with more than 1000 beneficiary, all of these beneficiary related to the nutrition pots, because we explained to them the food security knowledge and also the nutrition training for them. And I'm working as a project manager in this office. And this year we design a project and are working with 100 farmers with 50 orphans children. All of these beneficiaries achieve the food security knowledge or maybe nutrition training, hygiene training. And I'm very glad to see you and be here with you.

Let me explain some more about PVDAO. PVDAO was established in 2017. And we got a license from the Ministry of Economy of Afghanistan. And with the license that we have, we are able to work in four major sectors, health, education, agriculture, and community. So fortunately, since we started our organization, so we start with a food security project, food distribution project and we are working for woman self sufficiency project, we give training for a woman to be self sufficient. So as seen, our project is ongoing, we have three projects in Afghanistan. Yeah, so food security project, the goal is for food security project is to train a farmers and actually, before we were training in giving training for widows, to know, the benefit of the benefit of vegetables, and how they can use it for their healthy food and all as well as how they can have their own profit from the crops that they had. Because now the Taliban, unfortunately, banned the female staff, therefore, we are not able to give directly the training with the widows, but now we, actually did a smart way to find the orphans instead of widows, and we are going to give the training for orphans, and the orphans can transfer the training or deliver the widows. In this way we can achieve access to the widows and we are giving the training. This is the food security activities. And for the soy and rice, we are receiving soy and rice from the United States and then distributing for the malnourished children in Afghanistan. Right now, we are covering like 1050 malnourished children, and we are distributing soy and rice for them. And we are working on the second phase or third phase of this project. Because as you know, lots of people more than 22 million people or living in a very bad situation, I mean, the hunger situation and lack of food. We are trying to see when we have 22 million people without food or living in a really bad economic situation, how they can feed their kids. So this is the one important and a big issue for causing the malnourished or nutrition problem. But we are trying to do our best to help people but you know, the help that we're doing this is not enough for this amount of people. But at least it's good that we still can help somehow the people. We are also giving training for the mothers of the children. So that awareness training, how they can use the soy, rice project and how they can use the, you know, mono pack and potato powders. And for the next phase of this project, we are actually planning to cover 3150 malnourished, children, 3150 woman, to give them training. We will have three or four trainings, one of the training will be how to use them, the soy, rice and mono pack. And the second training will be the five core values that we have in our organization. The third training will be the breastfeeding training that you are working on. And the fourth training will be the generally nutrition training that our female staff right now they're receiving the training from the other organization and it will take few more weeks to finish the training phase. And then we will set and talk about how we can conduct this training for our beneficiaries. Maybe we will have some good materials from that organization. Actually that organization I think received material from the UNICEF as I mentioned on previous in my email. So the UNICEF is one of the biggest organization, UN organization that provides service for malnourished children and nutrition problems. But unfortunately, nowadays, the service that they have, that's not enough. And that's why we are also trying to bring some opportunities for malnourished children. So fortunately, my role right now is to coordinate among village of peace and PVDAO. And also with other organizations, relationship with donors, but it not only village of peace, we also have some other donors. So my one of my role is, or activity or job description is to connect donors with PVDAO and village of peace, as well as reporting for village of peace, and making programs, idea, proposal, budget, these kinds of things for village of peace, I mean, the work area that they have in Afghanistan. So this is my general responsibility right now. And I'm living, as I said, in the United States, and I just come here about 10 months ago. So I'm really new here. Well, again, glad that you're thinking that you're helping village of peace, because I'm also a member of village of peace, and I really thankful for that.

Q: In your nutrition trainings, do you have a collaboration with other organizations, only for nutrition trainings or also for other trainings?.

A: Actually, they have collaboration with us. And a few weeks ago, I sent some emails with different organization that they are working in a nutrition field. But one of them answered my email and said, Yes, we have services we have training, but this is not for trainers, this is for the beneficiaries. I said, maybe its good that if he can join or send our trainers to get the training, you know, because it's still we keep our female staff to work for us. Otherwise, they are not allowed to work. But they are working from home not coming into the office. But we try to find some possibility for them to make their capacity building and to find a way that how they can join us to work again. So I don't know if you're aware or not. Taliban allows the two sectors to work with: health sectors and education. So the our trainers were busy with the food security projects, but now we try to find another ways. We wanted to train them and to start working in the health sector, then they were allowed to work. It's a little smart way. But we have to do that. And of course they are not, like nurses or nutrition specialists, but at least they are they can work with us as a community mobilizer. So they can be involved with the community, and with the beneficiaries. So now they're under the process, and they are learning in that learning process. And they're receiving training. That organization really helped us to allow to send them to participate in the training. So their project is from UNICEF, the project is not from their own donors yet.

Q: So you explained earlier that you target the sons of widows so that they can train their mothers, so does this leave out women who have no son widows with only daughters? Or how do you reach those women who have no son or have only daughters?

A: That's really good question. A few days ago, someone else also asked me the same question. Well, actually, the plan is to give training for widows, but somehow, right now we do not have access with the widows and we tried to find a way at least, you know, there are many widows but we targeted 90 people. Although we had more than hundreds widows in our previous phase of the projects. But now we had to find a way to reach them out. So, right now unfortunately, we only can do for 90 orphans, which is that at the age of about 14, so then they can share the, the training for their mothers. But the plan is that, for the future, we want to cover the widows once we are allowed to sort another project in the health sector. So we will involve the widows, and they will get the training from us. Actually, not only widows, but we want to help the woman who are pregnant, or the woman who has small kids, this is our plan for the future.

Q: So as far as I understand, BV, do is PVDAO is sister NGO, with village of peace?

A: Yes, yes. You know why? Because we cannot work in Afghanistan with the same name with the same logo, everything. But we try to find a way that we register another NGO. And so now we can we can work in Afghanistan. So actually PVDAO received funds from village of peace for their projects. Of course, we have some other donors. But the main donor is village of peace. And, yeah, and PVDAO is an operation. And the full name of PVDAO means peace village for Afghanistan development organization. Actually, we don't have a website, because, you know, all our activities posted to the village of peace, because we are Yeah, what do you call it sister village of peace?

Q: So now you do the trainings, the orphans, have meeting in one place? Or do you use like internet or something to give the training?

A: the widows and orphans, get training in different places, because sometimes we join with the farmers. But the reason this was input for this reason, we separate the groups and they are friends, get on the place, different place training, the farmers also same. And also, we say to orphans, the training they receive from our site, they must share this knowledge to their mothers. The structure for training is to form groups of different areas and I think 15 to 20 people in one group, the next group, we have 15 to 15 to 20 people to participate in in the group. And, we have farmer groups and orphan groups. So they these are separate. So they're not in the same. But, you know, we don't give the training online, but we go physically and the beneficiaries participating in a group where the group is located in the villages, or in some, some houses or mosque or someplace from the community. So, they all they all come together in one group, and the trainer goes there and give the training for them. And then they deliver the training for their mothers.

Q: How do you communicate with the beneficiaries? I mean, when you want to give the training, how you communicate with them? Is it through like a message?

A: Well, actually, I didn't get the point, you What do you mean by communicate, because we are going there at the training, the trainers are going physically and participate in a group and give training face to face for them, this is not something online. There is one other thing for half the female staff that we have, they are in contact with widows, not only with the new beneficiaries but also with our previous beneficiaries, so they are in touch with them. And because we have a lot or many beneficiaries in the past, so we give them training, and they are now doing by themself, and they have their own plots and, and crops. So therefore, to encourage them keep continue their works, we have to be in touch with them at least for six more months. Therefore, they are there working with them, and they are in touch and they are communicating through phone. So sometimes, they also can go personally, I mean, but not from the officers of PVDAO, because we are not officially allowed to go and communicate or sit with the female beneficiaries. But we have contact with them with previous beneficiaries, the female staff has actually, and we are receiving reports from them and pictures from their crops and their plots. This is the structure for the training and the communication ways.

Q: I think what we also want to understand is how you make this message that there is training happening. So we should join, you know, how do you get this message to the farmers? Or the orphans? How do you how do they know about the training in the first place? Or because everyone is from the community, they just talk and share the message with each other? Or how does this happen?

A: You know, in every project, there is action plan. So, we have already the action plan and the action plan prepared when we finalize or prepare the proposal. So and at the same time, we have weekly plan monthly plan, and we gave them the schedule. So they already knows which day which time is there courses. In this way, we have the courses or group weekly, so that the group is regularly so every day, the training trainers, monitors and also the project manager, they are going together to the community every day. They have groups, and they have scheduled and they know, which day, which group is and which address, so they're familiar with that. And because already they talked with the community, elders and participants.

Q: We also had this interview with another Afghan student. And he told us that people in Afghanistan use social media and the IT sector in Afghanistan had done very, very well. And it's still not as what people from the outside think. So what do you have to say about this? Do you use social media? And what app or Facebook Messenger emo to talk to each other? Or how do you know, on a regular basis communication?

A: Well, I personally I use with my team or all staff through zoom, team, WhatsApp, sec, now. I don't use a email anymore. But the team also has WhatsApp signal, these kinds of things. But this is in the city centre that we have possibility, the one who interview with you or you interview with him. So maybe he is right or she's right. But unfortunately, it's only in a city, not in the villages. We have lots of illiterate people in the community. This is one issue. The other thing, we don't have possibility for them, Afghan people are really poor. So Afghans are not only in the city, we have a lot of Afghan population that are living in area in the villages. They don't have this much possibility to have access. But in the city. Yeah. The people are really watching movies you know, they are using the social media a lot. But in the villages. Actually not. Even sometimes, it's worse than before. Some people are saying that, maybe the situation is not so much bad as people are saying, but I'm not agreeing with them. You know, right now, the Taliban have the media under their own control. You know, the media is not allowed to announce anything that is happening. Unfortunately, the situation is much worse than before. And we have a lot of problems. But at the same time, we see the needy people, and the people who really need. And that's why we are working really hard to reach people and to help them. And this is the really exactly this is the right time to help people and to bring services for them.

Q: I have another question about the nutrition training and the type of food that you introduce to the people who receive training. They have vitamins, and then energy, protein, and this type of food, I also saw the list of food that you give to them. Is this list made from food that is already available in the region? Or how did you make the list and when they are asked to prepare food from this list, is it similar to what Afghan food is culturally like or is it different from that?

A: Well, let me clarify here something about food security project in the food security project the is to help people and to help widows and orphans to b decrease the number of malnourished children and also by giving the training about protein and vitamins, these kind of things, we want to give them knowledge how they can help themselves, especially in the anaemia problems. So we want to give them training to use the vegetable foods and to reduce the number of anaemia issues and also the nutrition problem. We help them to learn how to have income from their crops, this is the second thing that we want to do but for the food and regard the foods. Yeah, we try to have the list of the food that we are normally and regularly using in Afghanistan. And for example, beans we have, which is full of protein and vegetables, you know, like, you know, spinach this kind of thing has

with has iron so it can really help the anaemia problems and issues and as well as the carrots with vitamin A and these kinds of things that's available in Afghanistan. We put it in the training. Afghanistan is a very poor country and as you know 95% of Afghans don't have enough food in Afghanistan. In about 7 million children and mothers are malnourished, in Afghanistan. For the children we saw in the distribution area, we saw two big problems for the malnourished children, one is when mothers are pregnant, sometimes they don't have food, sometimes they don't have a guide for themselves. Therefore the children are already born malnourished. The women also don't know about breastfeeding. About 12% of children in Afghanistan get breastmilk from there mother up 2 years. So when we distribute the soy and rice in the area, we collect all the parents of that area. Fortunately the women are allowed to work in the health sector and then our trainer can train about how to prepare and cook the rice and give nutrition training. The nutrition training is about breastfeeding and food that is necessary for health, especially during pregnancy. There is lack of awareness, the economic crisis and poverty are increasing the number of malnourished children in Afghanistan. From 2021 up to 2022 the number increased with 32%. Based on the first quarter of 2023 this has increased with 16%. Because the mothers don't know about the feeding, one is they need food, most of them don't have it and if they have it they don't know how to get the nutrients out of it for themselves and their children. About 4 million children under the age of 5 years old are malnourished children. This is the big problem in Afghanistan and in our province, Balkh province, every day hundred children are brought into the hospital, they have a big malnourishment problem and are hospitalized.

Q: We would like to ask about the methods of the training that you use. So what we know that you use of storytelling, and games, and I think that it's really nice that you have it. Can you share to us what the beneficiaries like from that method? I mean, which methods that suit them? What do you think about which method that it's really helpful for beneficiaries to understand the knowledge that they have?

A: The other problem in Afghanistan is the education and the people don't have education, they are not graduated from school. They can not read. Because of that we are we have them do this, the first one we have a banner and picture for the training and the trainer shows the picture and tells the meaning of the nutrition training. After that, they are showing how to train the parents, so the parents to know about the nutrition. And the next one, after we distribute the service for 17 weeks, we spend a part on pregnancy. When the parents come with their children there are screened and then after that our trainer, trains them and they receive our service. After that they ask the parents about the effect of the training and after that they know how the parents can implement the nutrition training in his child and themselves.

Q: So I asked him Which method that they use. And they explain us about the training they use, like cards and pictures. I mean, with the pictures to the beneficiaries. Do you have any additional points for that?

A: Yes, what they say that that's true, the method that we have. So we are using the take action cards teaching cards as well as before we were doing the roleplay demonstration. Yeah, of course, when we have the female staff training and we did that for the woman. And I don't know right now, what and how they want to do that. But the method that we have, we are using the take action cards, teaching cards. And also we are trying to explain the training materials in their own language. I mean, we don't want to explain that, really, literally. We want to explain the training you know, in their own languages, I mean really simple and really locally. You know, because we want them to get the point and learn really easily. This is the method that we have for our beneficiaries in the community. Of course, we have chapter we have chapters.

Q: So that means right now you do not do the mother with child nutrition, lack of nutrition that roleplay the story, the theatre you don't do that anymore?

A: No, I think because we had this what for the woman or for the widows in the community, but I don't think we do it currently. Oh, okay. Yeah. So he actually wanted to explain about overall the activities. And I told him specifically the question is about the method and also the roleplay, he mentioned that yes, we can do the roleplay right now even when we are doing the games. Because, as I said before, most of the people are the beneficiaries are illiterate people and when you're doing the training practically they learn well, instead of teaching them from the chapters. We always want to analyse and to summarize the lesson and use to game roleplay take action course teaching cards, different ways to teach them well.

Q: Yes. I actually had an idea yesterday when I was reading your training guide, I will maybe share with you a little bit and then you can tell me if it is a practical idea or not. Is it? Does that work?

A: Okay, yeah. So

Q: because you, you start the training with some role playing, and then this mother has a malnourished child, and then everybody is asked to look at the child and see what if they identify their own children like that, or not, if they have the same characteristics or not. And then the play stops there. But what I thought was, was that you can continue this play, and then ask, at the end of the training to with their food card, and with everything that they have to make a meal, or like, what should you include in a meal for you to, you know, help this child improve, and then when they put the ingredient together, when they put everything together? And whoever does it the best can be like, it can be like a small competition where people you know, do it for fun, and whoever makes the best arrangement gets like a small prize or something chocolate or something.

A: Yes, exactly. That's the training that we have. But we conducted that training before for widows. But as long as we were working with the main orphans, so some training is not possible to give them especially when the you know, the mother with a malnourished kids. So that's not possible to them. But But what we are doing now, we, for example, separate all the participants in two groups, one group, the group that the farmers or the widows who are really hard workers, and they tried to plant and try to take care of the crops and give water at the same time, you know, in the meantime and in the right time, and take care of that and get the point that training and do exactly what we give them or what we taught them. But the other group is not you know, they're not taking care of their crops and they're not cleaning their houses their kitchen and they're not selling In the, their crops, and also they're not using the vegetables. So at the end, we will talk about the result, what will happen if, you know, if you're working or taking care of everything and doing exactly what the training says, and other ports, if you're not doing the same thing. So what will happen, of course, the result is clear. So right now we are teaching like this. But before we did all the lessons, all the ports that we had, we had all played the action card games, everything. That was possible because we had our woman beneficiaries, but unfortunately, now we don't. So we only have men and also our friends. So we try to give them training. But of course, again, if if the taller one allows us to give training for the woman, or if we start on other projects, for the woman, and also for the widows, of course we want, we want to do the same thing with them. Because this is really, we got a good result from this way. And this made it and it's really catchable for the beneficiaries. Yeah. Okay.

E6: Interview P6

P6 is a Global Health Specialist, who also has expertise in teaching methods in indigenous communities.

A: It's a very challenging environment you're dealing with. It's not a stable community, there's a lot of external pressures that have sprung this community, left, right and centre. So I can see that it is difficult. The theatre is is a way of communicating and making sensitive issues that normally individuals will have difficulty presenting in public but are then dealt with behind the front door or in private, or are ignored all together, and then they're suddenly going. yeah. So to use theatre as a mode, I think is a clever way of doing it. Yeah, you're not the first one. Do you know the book Theater for Change? By Robert Landy?

Q: We do not, we will look into that. Is that helpful?

A: That that is that that's the standard book, Theater for Change, education, social action and therapy. Don't read it all, of its effect book with a lot of self congratulatory things, typical American literature, but there are few interesting things in it that are worthwhile. Okay, I have used theaters a lot, not to say I am not a theatre person at all. But I've used other people. And there are a few ground rules that you need to take into consideration if you want to enter into that modality. If you enter it, haphazardly, like I used to do it in the beginning, when I was working on HIV AIDS, my aim was to do something about promiscuity in rural African communities as part of the HIV AIDS messages. That was the starting point. It blew up in my face because it didn't work. It became a show. And everybody laughed their head off. But it didn't lend the message. You see, especially there was a group of men who were performing all the thing because he thought it was the man that needed mainly to change. And so the king, one woman, one man dressed up as a woman, and everybody could see he was dressed up. That by itself was the humor of the whole thing. And everybody remembered that he dressed up as a very strange, completely wrong. So again, a high entertainment value, but no educational value. Okay. Since that time I have learned. Have you identified what you want to teach?

Q: We do. It's very, very basic nutritional education. So it's mainly, less oil is one of the main messages, don't boil things if you don't need to. And I think your eat things raw where possible, things like that. So very, and also,

A: And that's based on what?

Q: Some of these things are not based on anything. That's also part of our consultation, we have to align what they're already doing compared to guidelines that actually exist. So most things that we're taking are from the FAO and UNICEF, I think. And the WHO.

A: Is there, is malnutrition a problem?

Q: Yes. Highly. Yes.

A: And what kind of malnutrition?

Q: Deficiencies. So, particular deficiencies and also stunting rates are really high in Afghanistan.

A: Stunting is one thing, so from breastfeeding to solid food is that the issue? That's one of the issues that's a normal one, or the total lack of protein nutrition, or is it protein energy, nutrition?

Q: Protein, energy nutrition.

A: The typical of course, your core type of type of things, although not necessarily the marasmus type of malnutrition type of thing, I got you. The main thing that you need to work on on this thing is that you need to find this group who does the actual theater, right. Okay, what is your thoughts on that?

Q: Yeah if you say it like that, then I would think education groups that maybe already do that type of thing in Afghanistan, but maybe not necessarily nutrition. Because that those are people who are a lot more accustomed to the local customs, but also, you know, politeness, but also understanding maybe in the area, things like that.

A: The next question would be, and that's a more basic question, Are people known with the phenomenon of theater, that's important one, you see, in the in the African setting that I came from, yeah, theater was often used to mimic the situation. So it actually linked up very close. But that may not be the same in our community, in a lot of communities there are... my son, he is an associate professor in Sydney. And he's been working on on theater for change in rural communities, in fishing communities in Melanesia. So I can give you the link later on. But there it was very successful, and it worked. The lessons that you need to work on is, is the form of education by theater. Is it, does it link up with something to Oh, yeah, fine, I'm happy. Because otherwise, you will have the whole group of holy shit what's happening to me? Now what? Look at know what all these people are doing? And then the form becomes more overwhelming than the content. You need to work on that.

Q: So I just had a question. Because you mentioned when you first started, the theater work, it didn't really work as successfully as you wanted to, but then afterwards, did you make some changes and ways that it did work? And how did that? How did those change? What changes did you do to to make it more successful?

A: I started talking to the community first. I had group discussions with men and women separately, that was on HIV and mind you that's, that's a, it's a very sensitive issue, because it has to do with sexuality, it has to do with a lot of cultural or sensitive issues. So I had a focal group discussion with two groups, separately in certain community. And then once we got from there, we got the few outspoken people and say, All right, would you be willing to join in, in doing this theater and taking up roles? And that took a while? And then finally, yeah, let's do that. And then it started coming from there. And then the actual contents was different from the script that I originally envisioned myself. And that was interesting. So they find their own ways of going about it. Yeah, by pressing the message. Okay, one of the most interesting things that they said is that we should not make a theater with a solution. Because if it's a theater with a solution, then you don't leave any space for your audience to make up their own mind. And an audience that makes up his own mind is a powerful audience. It's just as if you sit in an intellectual room, and you have a very bright professor who explains the world of left, right and center everything, and there's no room for you to make your own views on it. The middle has been internalized. And that's an interesting phenomenon. That came up strongly. So they say, We should, we should do something. And then after a few trials, they came very interesting by saying they were interacting with the community, with your audience. For example, there was a guy who has been very peculiar and promiscuous, and you say, Alright, guys, you think I'm on the right way? And then the audience, we're getting in there and said, Yeah, go for it, man. And the other one said this. And that's the learning. Yeah. Then all of a sudden things are going on. And that's what we call a kind of interactive theater. It requires skill. Of course, it could end up in a shouting match. It needs, it needs managing, and you need

to have certain actors with maturity, who stand off over the thing and keep the good good trek alive. But it can be done. But it depends very much on the point it.

Q: Sorry, I just wanted to ask though those were led by all locals?

A: Yes, all locals. I was sitting there on the sideway only as I was representing the Ministry of Health at the time, I was just sitting on the sideline to see how the process was going. It was done in the local languages. Well, mind you. It was all done in bomba.

Q: Is it also an issue there in that in the regions that you were that literacy is not very high? So that's why theater is so..

A: Exactly, yeah. Okay. And it's Africa. It's a very oral tradition. Yeah. So everything storytelling is a big thing. Right. Now, once a day, I'm not sure in Afghanistan, but if oral storytelling is very important, and many times in, whether it's a lot of NFL pietism, their storytelling is enormous. And the amount of information that those people can retain, is incredible. It's far better than you and I we are doing, we rely more on the stuff that we write down, right? Yeah. But they retain things the most smallest details. And they will go and amplify for for for many, many things, and also telling the story from one to the next. In our culture, we add always something on it. And at the end of the chain, the story is quite different from the original one. In African storytelling, the story line remains almost untouched. That's an interesting phenomenon. Therefore, the stories that been told, are not been amplified, or perhaps a little bit anecdote to reduce it up. But the main storyline remains the same, like I seem to speak. And you can use that in your theater. Again, that depends on on on the people in your community in Afghanistan, as well. But did they know that?

Q: Yeah, yeah. No, that's a good start, though. I'm sure there's some elements of storytelling within Afghan communities, because there has to be because they're very, also socially tight knit. So I'm sure that we can, that's a very good point, thank you for sharing that with us. It really gives us a good place to, to move on from.

A: Because if you and then the next point is that if you want change to take place within the community, you need to recruit your players from that community, or close to it. Right. So that you don't ... even this the same year, I mean, I always would say, suppose the world looks different. And you're in Wageningen, and then all of a sudden, there's a group from Nairobi, coming to Wageningen wanting to tell you to behave differently. They are going to tell you of not going to McDonald's anymore. Because it's bad for you. Right? Yeah. And they'll do a nice play. But still, there are people from from Africa. Now, I can tell you, most of the people there. So who the hell, why do they think they can have the guts to tell us what to do? What if the same story is being told by your own people? Then your acceptance is better.

Q: Did you particularly target leaders of that group or people that are well known in those communities? Or did that not so much matter? When it came to...

A: It did matter. You take people who are automatically have a leadership role, but not a formal one. You have the formal leaders and you had the popular ones similar to what you have in high school, right? And then you popular girls and guys, and this and that, right? Once you have those ones on the line, everybody is more or less willing to go and it's a delicate process. The preparation is as important than the actual play. The actual play will always be different than how you envision it. And that's not an issue, the issue is that it will stimulate a discussion towards the right end.

Q: Is there a way you measure how successful this theater message that you're trying to spread to these people? If if they actually...

A: It's tricky. It's a tricky thing. We have done many of them before, after things, questionnaires and how these things are done. And then there's a lot of pleasing, pleasing the people who are doing all the things right when they say give you all the polite answer. But whether it is really changes that it's the difficult thing, because what you're doing is you want to influence behaviour. Well behaviour doesn't change, snap over that is to come in here later on. So do not expect an immediate impact. If you do, then you're on the wrong track. This reqires consultation, and many times .. for nutritionally in particular, is the similar things as we see in our culture. If a daughter becomes pregnant, and she's struggling with the upbringing, of a child, goes back to her mother. How do you do that? That's an important resource. For the elderly women, they have an important resource to actually say how to do it, how not to do it. That's that's sometimes the mistake that people say, Oh, these old these old ladies, they are so traditional, they're not willing to change. It's not always true. Sometimes it is. And then they're entrenched. And they are these,

these these stubborn type of people. But there are some wise ones that can actually work on that. And yeah, you have to explore that. Yeah, many times if you allow them themselves to make a choice. Who do you think among yourself is the best actor? Simple thing and then sit back and see what surfaces? And from there you come around.

Q: So it's kind of a very important balance of very good planning, but also a good level of patience and adaptability to work, and taking what goes, okay. That's complicated. But it's, it's good. Are there any things that you could tell us that you've seen in your career that maybe that you've experienced, but also maybe that you've seen other NGOs do, generally what explicitly doesn't work in relief situations? So which kind of setups inherently are doomed to fail that you might see the UN do quite often?

A: What do you mean by relief situation?

Q: So I know you worked on Ebola. So I'm not sure if that's considered a disaster relief response, emergency response?

A: Yeah, the main thing is that most NGOs, and this NGO you working with has a different approach, I checked them out. And I think they're a much better NGO than your average, your Save the Children, UNICEF, UN and all the rest of it. They (UN, Save The Children, etc.) come in for the quick buck. They get and they want, quick, immediate results. And then within half a year, look what we have done ABCD. And they got the flag. And before you know it after a year or two, they're gone and then moved on. This is different. If that's the intention, then theater and the approach that you want to do is not the right one. You actually have to stick with this for some time. And guide them through the process. While they are steering the process. That's the important part. You can adjust it you can say this, that, but let them determine the pace. Most problems are occurring that NGOs are determining the pace. They don't do it for themselves, but they do it mainly because of the funding for two years. And after two years, it's finished. So it's not an accusation towards NGOs in general or UN. But it's mainly because they are all restricted by their sources and personnel and all those things.

Q: In that sense, this NGO does do quite a okay. They're very focused on the long term very focused on the lasting effects. Do you think personally then that things like home gardens and then teaching people or giving them nutritional training related to those home gardens would be an appropriate response in Afghanistan?

A: I think its part of their work? Home gardens is part of their work?

Q: Yes.

A: I think the most important thing is don't take too much on your plate. If you have a very broad message, then that may get lost in translation. So to say, you use the term, try to focus your your thing. For example, if you can say, all right, if you want to use the transition from breastfeeding to solid, if that's an issue, or you want to say right, no you're using the wrong food, or you use your your maize or your millet, whatever you have, mix it up with some vegetables, this this type of thing, or some other things you can actually take but limited to a small little thing. Use that one as a base. Yeah, you're giving giving say like, it's worthwhile to kitchen chickens for an egg. But, you know, goats are permitted within the same.. we don't need to talk about pigs, we agree, goats are permitted within the setting, although you must be careful, because goals can be very destructive for.. but if they keep goats, if they keep animals that you can actually say, then you can see along those lines. Fish is an important one for nutrition. In many cultures, fish is considered a dangerous food for children. And you will want to explore that if that's the perception there as well.

Q: Yeah, we'll look into that.

A: ... and then you have to say, sources of milk, it was about to explore, right? In Afghanistan, camel milk is an excellent source of nutrition. Replenishes with very high fat levels as well. And sometimes it is the camel milk is only reserved for men. In some countries, that's the case. I'm not sure it's in Afghanistan, because I haven't worked there. But it's worthwhile to figure it out. Where are certain foods going, and use that as an input.

Q: Those are some good points. What are the some that you've experienced.. Because Islam is also a very predominant religion in Sierra Leone?

A: That's right.

Q: Are there things that you have found that in the realm of using existing community structures, existing networks, are there certain traditions or such within Islam that can also really help as teaching opportunities? Is this something that you've ever come across?

A: To start with the Islam, has the Quran? And the Quran by itself, if you read the Quran correctly, which in my work, I had to do it. It's a very good book for public health. Mohamed already said during the big outbreak of cholera in Medina, this is way before antibiotic way before anything. He already found out that the oral anal transmission and hygiene was the source of cholera. And he invented that rule that the right hand was for eating and the left hand was for the toilet. That's why the right and left are so strictly separated in Islam. And it has a beautiful purpose. Never touch your food with your left hand because that's your dirty hand. Eat with your right hand. It's small little thing with everything in inverted.. so there are very helpful ways and for that, always try to speak to the local Islam guide the guy who does it. And say this is what we're dealing with. What is the Quran say? Give it to them. Let them make the ... don't come up as with with with your ideas of explaining the Quran, because it looks, it looks strange. It's like someone from Wageningen giving you a lecture on what the Quran is like. Nobody would appreciate that. You know, ask and listen to what these people have to say.

Q: We need to look into that. I don't think we have time to read the whole Quran and go through that.

A: Right? I can I can believe it. Yeah, it's principles that I'm going to give you, and it's worth to look at.

Q: That's very, very clever. Yeah, I think that's also probably the best way as well, in Afghanistan, because we've read that, over 90% are Muslim. Yeah, we have the differences between the Shia, the Sunnis, but still, it is all centered around the Quran. So this is fantastic.

A: Nobody said the thing is, in our Western culture, we have a predominantly negative influence, negative perception of love. I have worked with, with Muslim communities, private even and I'm quite positive, the position of women is much better, according to strict Islamic thing, what has happened and evolved over the period and some groups have actually made use of ..., but it's not the original Islam. The original Islam is much more tolerant, much more assertive, and things like that. So again, the local explanation of the Quran, it may be something you can use, or need to avoid, depending on the situation.

Q: I had a question. I was wondering, a little bit back to the beginning of theater and the trainings, I was wondering, are there other trainings that you did with the local people rather, other than the theater and role playing?

A: We use, because I, initially, we left them alone. And it became a chaotic thing. And the message didn't come across. So we used students from Amsterdam theatre training, she gave instructions on how to do what, and you need that, that needs to be some kind of structure - in Dutch some kind of regie, some kind of directing of the script, the deal, now this one is done. Not to hang on too much on one chapter, but to get moving on, not to let the play go on to the next morning. But you know, I've had a good timeline in it all these type of little things. Also, that the different roles are, are well, well, well given out that everybody knows what he has to say. And we used somebody that and she was involved in a lot of street theater. And there, again, is the interactive thing. I was looking for the interactive thing. So as soon as I saw that the audience was commenting on what's happening there, then I was happy, because then I see when they're engaged, you're not sitting there absorbing the material, but they were commenting, they were saying they were common among themselves. And all of a sudden it became a community of Yeah.

Q: That's quite clever, then what it also can be an idea to get if it's in a country where that's possible, obviously, where they have their own groups of theatre students, because then maybe there theater interpretation is..

A: For sure. That's preferable. Because they know what the things are. And by all means, use them. Yes.

Q: Yeah. Okay, that's, that's a very good, practical way of doing it. I think that's correct. Yeah. Okay. Do you have any more questions? This has been very helpful so far.

A: I will send you the link of the project that my son worked on. Yes. in Vanuatu, you know, with Vanuatu Yeah, yeah. If not be doing it down before us to get it. I tend to I tend to forget all the things. I know it's terrible, but the things happen.

Q: We are not in a rush.And I had another question How, based on your experience, how do you deal with people, or the community being resistant to learning new information or training or interventions?

A: What do you mean by resistance?

Q: They're not interested in what you're trying, trying to do there? Or, particularly, we're trying to teach nutritional education to these Afghan people. So I'm wondering if there's, how do you deal with people who are not interested in your training?

A: If they're not really interested in your methods, then there's something wrong with your method. Okay, if they're not interested in your subject, then then there's a deeper problem. If malnutrition is not regarded as a problem in that community, you have you have a deeper problem. And that cannot be solved by simple theatre. Yeah, that requires a much more social engagement. That is a long term process. If people say, Oh, well, I got children, but three out of four, they die. And I couldn't care less. It's rare. I have rarely seen it like that, does in war-torn communities, it can, you can have some kind of, depressive state, and then there is a deeper psychological and sociological problem going on that cannot be addressed by this method. So you basically deal and I think it's an excellent question, you put those two feet, if there is no interest in the subject, you want to address then don't do it. Then you have to go back to the drawing table and say, All right, how can we otherwise and that requires a deeper consultation with the community asking them what, what is important to them? What is not important to them? And give them the sensation that they are the ones to determine. Most resistance that I have noticed, are due to the fact that some agencies come marching in, tells them what is good for them, and basically say, take it because we got the money, and then you get all the goods. And then they say, Okay, yeah, we have no choice. They accept the goods. They don't change their behaviour. Simply because the process was the due process was not followed. These people need to be in charge and need to feel the control there as well.

Q: So, it's kind of what you said would summarize it well, is that we guide but they steer it themselves?

A: That's a very good summary.

Q: Yeah. Okay. Yeah, that's a good way to put it. I think that's also, that's very nice to hear as well, because I think that's what the NGO is trying to do. And then I think for us, really, it's just to add a little bit of like, you can also do this. So I think, yeah, this conversation has been very, very helpful. You've told us a lot that a sets us on a really good direction, so very, very good. Thank you.

A: So methodology wise, you can look up in the theater for change. That's a basic textbook where a lot of things are there. Although, I don't quite all agree, but anyway, you'll come to that when you read it. Use your common sense. Always keep in mind, how would you be feeling from outside would come and tell you what to do. What not to do. That's that puts you down in a more modest listening mode and from there. Okay.

Q: Thank you so much. We appreciate your time and it was very this was a nice conversation. Yeah, I enjoyed it a lot. So thank you very much.

E7: Interview P7

P7 is an associate professor at WUR, specialized in Global Nutrition

Q: The people we are targeting are often illiterate. Village of Peace has some visual materials we are working on. Do you have any ideas on something that could be helpful regarding the use of visual materials?

A: Well, visual information is very, very useful for illiterate populations. But you have to be really careful with the cultural context, because things that we think is logical, or if we see a picture, and we think it's clear that it's a cucumber, people may think differently. So, I think it is really important that any visual material is passed through the local communities to face validity, to see if they recognize it in the intended way. And whether it doesn't have any strange connotations, so that you are sure that your

material will be acceptable as well. So that's one thing that springs to my mind. I guess with illiterate populations, personal contact is also very important. I don't know how currently this NGO works with the local population. But if in one way or another, they could organize small groups of villagers, maybe men, maybe women, I guess a mixture is not possible at the moment. So maybe, first groups of men and then see if they can get access to the women as well, to talk with them and to provide verbal information to these women. And also, to teach them how to cook proper meals for their children within the local circumstances within the possibilities that they have the foods that are available to still provide a nutritious meal, I think the power of education and skills is really something to consider focussing on. I come across many situations, but not necessarily the same in Afghanistan, because I've never been there. So that is something you need to take into account. So, I don't know the local situation. But what I come across oftentimes is that women simply don't know what is good for their children. So, they have the idea that if the stomach is filled, that is good enough. Also, they sometimes underestimate the situation of the children because they compare their children to others in the same community. And those are also undernourished. So that child doesn't seem to be very different from the rest. So, they think their child is doing well. So that's also a misconception that may need to be taken away. So, your plan is to develop visual communication materials?

Q: Yes, they have some action cards. But we are thinking about maybe suggesting a redesign of those.

Yes, and I'm thinking about it. Because I guess that any materials that mothers could use themselves to teach each other would also be valuable. And that can be books that are maybe entertaining. But also, educational books with a lot of pictures that the women like because the story is nice. But there should be a storyline, I think. But some of the women could possibly be educated to use them with their peers in the village so that you have peer to peer communication, which in this situation may actually work. But yeah, it all depends on the opinion of the men, I suppose. Yeah, so the men should be tackled first.

Q: So, this is the current action card for food prep. They have some words on there as well. But yeah, it's in English here. Yeah, I don't really like this, but I don't know what your ideas about this action card are?

A: Okay, let me ask: Why don't you like it?

Q: Well, I think it's a bit unclear because it says partly don't cook. But yeah, some products should be cooked. I think it's really unclear. What products need to be cooked for example, and what not. And it's really generalized.

A: Yeah, it's very generalized. And also the pictures I think, I'm not sure if they match with the local culture. Depends on where you are probably. And the messaging is also I see use less salt, sugar and oil. But you may know that iodized salt is also very important. So, there should be a double message. Use iodized salt but don't use too much. And not just use less so because if they leave out a salt from their diet at all, they may end up with no iodine.

Q: We also feel like some of them, they also have other action cards, don't really target the problems that they face.

A: Who has developed this, by the way? This NGO?

Q: Yes, we think so.

A: Okay. And they want to have it updated? Or they want to have your opinion on this?

Q: Yes. So, this is one of the things they use for teaching. But they also do games and roleplay. They've also asked us to provide some more academic substantiation to the materials they already have.

A: I see.

Q: This is, for example, the one on malnourishment. Again, I think it's not really clear when you just look at the pictures and what they mean.

A: Yes, stunted growth, I see their picture. That's also something that is really difficult, but that's exactly what I just explained. Because people will compare their child with the other children in a community, and then they don't see a difference. And they

will think "Oh, my child is fine". Because they don't see the difference. So, I wonder if a picture of a growth chart would be better in this case. But I don't know if they would understand a growth chart either.

Q: There is also a card on nutrients. For example, here is where we would maybe suggest putting iodized salt. And maybe also, we are thinking about putting the products that contain those vitamins in there. So, it's more visual.

A:It's very random. So why vitamin A, vitamin C, vitamin D? It's all necessary, but I think iron should be there. Because that is one of the main problems.

Q: Yes, that is exactly what we will include in our review. That they focus mainly on the vitamins. While, based on a National Nutrition survey, anaemia and iron deficiency anaemia, as well as iodine and zinc deficiency are also prevalent in Afghanistan. So, we already suggest that they should also focus on the minerals more. Because that's not really included.

Yes. And is this targeting children under five years of age specifically, or is it targeted just in general? You know, that? Yes, I think it's mostly targeted to women and children.

And do you know, if Afghanistan has any food based dietary guidelines developed?

Yes, they do. They have a report from 2016.

Okay. So, I think it would be important to very closely connect to the food based dietary guidelines. They may already have visual materials as well. Because if everyone is developing their own visuals, it may also lead to confusion. So, my advice would be first to look at what is already there, and then as closely as possible, connect to that. Have you been able to look at that?

Yes, we did look at the National Food Based dietary guidelines. But I'm not sure if they really say which vitamins should be targeted...

Yes, it's very much food based, usually. But that is maybe easier than to explain about vitamins and minerals. That can always be an extra 'layer'. That's possible.

Q: Would you suggest focusing more on the foods and macronutrients because in the end, they eat the foods?

A: Exactly. Educating on vitamins is good, but only if you already have a certain basis. And I think it's more important to focus on the foods. Because that is what people know. And vitamin D is very abstract. So, they will not exactly know what it is where you get it from. So, I'm afraid that yes, certainly with the pictures that are here indeed, if you would add foods, it would already be a little bit better. But for vitamin D, that's also difficult because you don't get much vitamin D from food, it's more from the sun. So that has to do also with cultural habits, with clothing and things like that. So, yeah, my advice would be if there are food based dietary guidelines, look how far they are with implementing them. If there's already communication materials developed. And, if so, try to use it as much as possible. And if you think there's something important lacking, you can still add a card like this, but I would almost suggest having one card per vitamin, because there's so much to tell about each vitamin. And this is totally unclear and random.

Q: I must say that they do have a teaching guide where they explain the action cards. So, they know a bit more information than just the cards. But I agree that it's not totally clear. And I think it should be more practical, like which vegetables or which product you actually need to consume to achieve an adequate intake of these vitamins.

A: Yeah, exactly.

Q: This is for example the explanation *showing teacher guide* together with the action cards of the vitamins. But then it stays limited to, for example, "vitamin A prevents eye problems promotes a healthy immune system helps the body grow and develop neural cells keep healthy skin". So, it's really basic still, but there is a bit more info.

A: It's really community based. I think they are most helped with information about what foods should I eat and what foods should I combine in a meal. To talk about the macronutrients, like "carbohydrates give you energy" and "protein builds the body" that that is fine. But the vitamins I think that's a pity because you distract people's minds with these details information and they can't do anything with it.

Q: There is one more action card I would like to show. This is their action card for baby foods. We personally think it's a bit unclear. Because, for example, if you look at the action card for three months, it almost looks like you give the three months old baby a meal.

A: That is totally wrong.

Q: When you read the text, it says mashed banana or something like that. But we still think that's not in line.

A: No, no, not even water. So, yeah, this gives really the wrong impression.

Q: And also for 13 months, like, no salt. It's also kind of hard to understand, I think, because it's also for the other months.

A: Yeah. And I don't know what herb it is, but maybe something they use. I don't know. But yeah, salt is an issue because of the kidney function. So, I see where that comes from. Yeah, but I don't know if they have a salt shaker like this in the first place. And maybe there's more important things to say what you should do at 13 months and not what you should not do.

Q: Yes. And because for example for breastfeeding, we could find some guidelines that said like the first six months exclusively and like that. But most of the guidelines say on-demand breastfeeding for that period. Are there also guidelines for like, how many times a day or ...?

A: You could look up the infant feeding guidelines by WHO/FAO? I think there's also guidance on the number of feedings. It depends a little bit on the baby as well, of course, but I think from six months onwards till 12 months, you're slowly declined the number of feedings, till two times per day. So, at six months, it can still be four times per day, but at 12 months, it's two times per day. And then the advice is to continue breastfeeding till until 24 months, which I also don't see reflected here yet.

Q: Do you have any experience in a similar project maybe in another country? And like in your experience, what are effective teaching methods?

A: I will say effective teaching methods are surely those that are in person. And the teaching should come from somebody people trust and know preferably. People that are also in the community. So, those that know the culture well, and also know what questions mothers do have. Written teaching methods generally do not work, but it depends of course, on your target population, because if you have an educated population, it may also work. People like to be entertained. So, humour always helps, everywhere. But you have to understand what is humorous to people, because you can also be very wrong there. And everywhere people care about their child's development. So that is something that is really shared in all cultures. So, people care about their child's development, and they are seeking the best for their child. That is something that can be used.

What I'm thinking of I have a colleague from Ethiopia. He has worked on developing the food based dietary guidelines for Ethiopia, including also visual communication materials. So, I could refer you to him to also have an interview with him because he has had first-hand experience of how to develop communication materials. And I'm sure he would also be able to help you with those cards and advise you on that. Would you be interested to have an interview with him?

Q: Yes, that will be nice. We're only just a bit limited with time. I think it will be very nice. But because also, I don't think that the food based dietary guidelines for Afghanistan really provides visual materials.

A: Yes, that's possible sometimes. The first step, of course, is to have those food based dietary guidelines and then they need to be translated. And that is another step. Because the, the visual communication material is what you need for communicating the messages to the to the population. And that is something that is often not being implemented. I can imagine it's not the first thing the Afghani government would think about now. But yeah, you can try to find out how far they are in the process. If there's any steps being taken. Ask around if that is the case or not, because sometimes there's also international and NGOs or FAO for instance, helping with that. So it may be that there isn't already something going on. And then it would be good to connect your NGO with that process because that is what they can use in the future.

Q: So, currently, VoP does not really evaluate the effectiveness of their training, because it's just really difficult. We also asked someone from Village of Peace how they gathered information on the nutritional status, so they know which nutrients they would need to target. They mentioned that they collect information from the nearest hospital. Do you have any ideas on how they could evaluate the effectiveness of the nutritional training?

A: Ideally, you would like to go to the health posts in the villages and to do some measurements yourself. So, to see whether these children are being stunted before and after you implement an action like this, an education program. To see if it is effective or not. But I guess that will be quite difficult under the circumstances. I'm not sure if there's any other NGOs that do any surveys. Under the circumstances, I can imagine that UNICEF is maybe there or maybe others who implement surveys, that could also be DHS, the health surveys that are conducted every five or 10 years, and I don't know, when Afghanistan had the last one. So, you can use that as a baseline and then see, but if it's a very targeted action in a certain area or certain villages, I think the focus should be on those villages. If you cannot go out there to measure, then the only way to evaluate is, maybe, to count how many education sessions have taken place. So, it's more the delivery of the action that you can evaluate, but maybe not so much the uptake.

Q: That's what they focus on now. So, it's already an achievement like the engagement, to reach as many people as possible with their nutrition training.

A: Yes, so that's under the circumstances the most you can do probably.

E8: Interview P8

P8 is part of VoP based in the Netherlands. He has worked on developing nutritional training materials.

Q: Yeah, we can start with our we have kind of a list of questions that we wanted to ask you.

And we were looking at the action cards as part of the training and since the women are illiterate, or we're working with the population that don't have that formal education. I was wondering, there are words on the action cards, along with the picture, so how does that work?

A: When you're doing the training, the nutritional training is done, sometimes also for students in terms that they have, or for older orphans, who did have the opportunity to go to school. So it's, we work with pictures, because of course, they can identify the pictures, but we also have words on the pictures also for the trainers.

Because sometimes, if you work with a specific nutrient thing, it's easy to affect one nutrient for the other, or you think that I don't know, beans represent something, but we're focusing on protein at the moment, but it's also protein in other food stuffs. So that's also to help the trainer so that they don't get confused. But for the widows, it's specifically the pictures that we work with.

Q: Sorry, I just had a question, because the majority that we see right now, the training is composed of these action cards. And we also did some research about how powerful storytelling and theatre and role playing can be. Is that also a major part of the training? Or do you see that we had this perspective of taking that route? And emphasizing that way of, of teaching? Do you think that's a good direction to take?

A: It is a good direction to take and we already do it. If it's not in the current it's good that you are doing this audit of what we do because we've developed the loss process I realize now, but that's not part of the of the training manual at the moment. Our trainers would roleplay and give a little kind of theatre presentation of real actual stories that happened with of course the poor people as permission. So they always start with a little short skit of five minutes in which one person learns something else and the other person starts asking questions about because your children look healthier than mine. Why do they look healthier? Well, it's because I did this and this and this, and can I show you and then they kind of play out the act out a bit of the training. So we already incorporated that. If it's not in the current manual, then it's because we didn't update it to that extent yet. But if you want to include that more, or if you want to hear the actual, of course, you're more than welcome to do so. If you want the actual skits that they do perform, then you have to contact Farid for it. The problem is that the amazing couple of the wife of the couple who did this, she, they were evacuated, and they're currently in Brazil. But I think that they would be very, very happy to talk with you about this. Razma was the was the lady who worked on this, and she was exceptionally well at doing so. So you can contact for it. And then you can get the actual stories used. And then see how those stories work and all the elements of the stories and then take that further.

Q: Our approach to this, since you also mentioned how important it is to work with the locals and leaving it up to them to give this sort of guidance, and then letting them decide how they want to present it to their people and how they think it would work. How it would work best to present this new information. Is that also the approach that you take?

A: I had one of my colleagues in the Netherlands, she's a nurse with a master's degree in cultural anthropology focusing on permaculture and communities who practice permaculture. And the two of us came up with the initial training ideas and the groundwork the research in the local communities, we wrote something and then we sent it to Afghanistan, and then they reworked it, then we present a pilot, we get feedback, then we rework it, then we send it back to Afghanistan, then they rework it, then we do a second pilot, and one when everyone is happy, then they do the training.

So this is also part of other how interesting the process can be. Because we tend to want to document everything, but once the training is in Afghanistan, and they are trainers in each time, they kind of add their own flavour, depending on the situation, depending on the widows, depending on their educational level. So that's also why, for example, the scripts that they perform, are not necessarily in the training because they take the training, and then they make it their own, which is also something we encourage.

Q: yesterday, we met Farid, and he said that the situation now is that for the woman, it's not possible to go out and then they give the trainings to the orphans, particularly the male and that's why we had an idea that we will make like a review and also the redesign to the widows and orphans. But then we also give like a sum of points of recommendations for the current trainings particularly with the boys. That's the that's the idea now but also we will let you know about the action cards particularly so it means that it is in Arabic or in English?

A: Actually, it's Persian. Persian, you have two dialects Dari and Farsi. Farsi is spoken in Iran and Dari is spoken in Afghanistan, but written with Arabic alphabet.

Q: For others questions, guys, do you have any?

A: Perhaps good to know, we are not willing to compromise on educating or the education of women. But of course the major stakeholder is the Taliban, and we can't get around them. And we would much rather have their goodwill and work with them than work against them, which is in any case, a futile endeavour. So we decided provisionally to include male orphans, because they can of course give information to their mothers, we also include farmers at the moment, a lot of them are illiterate. Farmers, because their children learn, hopefully, then you can have a new generation who does things in a new way. So our compromise is literally waiting it out until women are allowed to work again. In Mazar Sharif, women are not allowed to work. But in, for example, Kabul women already working again, girls are going to school and women are going to university. So we hope that in time, even if it takes another five years, women will be able to work again. But we are also currently in the process of getting a grant from the UN that will enable us to supervise 40, local NGOs in Afghanistan working on food security. So this is a recent development. But if the UN agrees, which will be wonderful, then this training that you are working on now, we can also pass that on to close 40 other NGOs and trained them in how to do the training. So that may also be something that's helpful for you to keep in mind that the audience, or the target group, at least make may increase to not only widows or orphans of age, but also other NGO workers who of course are professionals.

Q: You mentioned that you want to work with the Taliban, what do you mean by that?

A: work with them means that you go and you drink tea, and you cultivate goodwill. Of course, there's not a single policy they have that I agree with. But because we go and drink tea, and because we don't do anything behind their backs, we are able to put up hopefully, before the end of the factory to reduce being at peace with the capacity to feed 50,000 children. So in working with the Taliban, I don't at all say that we that we are in agreement with any of their policies. But you have to be transparent in what you do as an NGO, because that's also one of our values. And of course, we're also not going to compromise on our values. So why other NGOs started hiding what they're doing and doing things in secrecy. We invited the Taliban to come and see what we do. Because in this way, you create goodwill, and they hosted us wonderfully. I was in Afghanistan a few weeks ago specifically because we are open and transparent about what we do and how we do things. And I even negotiated with him the possibility of women working again for our NGO, which is something they appreciate because I'm not doing it behind their backs. So with working with goodwill through transparency. Is that a good answer?

Q: We were like, amazed that you do you are able to work with them and have a good relationship with them. And we were kind of like wondering if there is almost like a negotiation, like you said, to try to convince them. In particular, we're working on the breastfeeding practices as part of the nutrition training, and the males are attending these trainings. So we were kind

of wondering, like, how effective that would be to relay that sort of information back to the widows. And if they ever attend these trainings?

A: This is this is just wonderful that you are bringing this up. Women, even in Mazar-i-Shariff are allowed to work within the medical sector. So when I was in Afghanistan, a week before I left for Afghanistan, I had this epiphany of why didn't we develop a program to help breastfeeding mothers though the nutrition for breastfeeding mothers. Obviously, if the mother is malnourished, the baby will also been malnourished, because what she ingests ends up in the milk. So the quality of the milk is not at all good enough or healthy enough. Not nutrition, rich enough. So I spoke to someone at Utrecht University who gave me a lot of information on this. And then in Afghanistan the director of economy, all NGOs are registered with the Department of Economic Affairs. At the end of each conversation that we have, I asked the Taliban so how can we how can we best serve your people? I don't want to say how do we best serve you because I don't want to serve them. But I want to serve Afghan people. So ask them, how can we best serve your people. And then he mentioned the nutrition or nutrition and breastfeeding. And obviously, because I just spoke to an expert on the field, I had a lot of ideas. So he gave us permission to let our female colleagues work. Again, if we can come up with a good program for breastfeeding. So if you can expand on that one page we have on breastfeeding, then we may actually be able to get our amazing female colleagues back working before the end of the year. That would be an amazing, amazing, amazing step forward. Because what we do have with regards to breastfeeding isn't is much too little. It's part of a bigger training, but it's dismissible. It's that little, but women are allowed to work then men are not in the training when they talk about breastfeeding.

Q: When you mean women are allowed to work, attend the trainings?

A: Women are allowed to work within the medical sector. So female doctors, nurses, clinicians, even as a female hospital administrator, so working in Mazar-i- Sharif, so when if it's within the medical sector, they are allowed to work now breastfeeding, if we register it with a ministry of health as a health project, then our female colleagues can give the training again, that means that they can work. Now male orphans would be attending those trainings. Not if you present the breastfeeding as a sub module, but for that, you will have to of course flesh it out a lot more and I don't know if you have the time or energy or space to do so. But that will be possible. Then the women can go to the to the widows homes and present the breastfeeding nutrition training at their homes for example, because that's how they do things currently that is allowed. And then you can also just perhaps drop something about high diversity gardening while you're at it. And for that, you need goodwill so yeah that would be amazing. The problem is we can't register an agricultural project under the Ministry of Health. It's too far apart. So that's where the idea of breast milk and nutrition for breastfeeding mothers come from.

Q: But would it then be possible to also register a nutrition program for children? In general, with the health department's or is that too far fetched?

A: No, no, it's not too far fetched. The challenge is that the current administration, similar to the previous administration, don't sign in or use, you need to sign a memorandum of understanding for every project, if it's a small scale project. The reason is, it takes a lot of time, a lot of energy hours of work, and a lot of administration to get projects approved. Now, if you present a nutrition program for children, and you only have 50 children in the program, then they're not going to register it because the impact is not enough. They want big impact. They want big projects, because there's a lot of famine and starvation and problems. But that creates a difficult situation for NGOs, like a religion of peace, who did not have the funding for it. That is why up until this point, we presented our trainings kind of as a package with and you get to agricultural training, and you learn about nutrition and food preparation. Because with various smaller modules, you can create a bigger, a bigger project with which you can raise money, because if you then go and get do fundraising in the Netherlands, people are very excited about, let's say, nutrition for children, and they would give 5000 euro and then someone else gives, I don't know, 30,000 for diversity gardening, and that's where you can work with smaller packages. Within a bigger curriculum, it's easy to raise money. So if we do this breastmilk, for example, then the impact, or the eventual impact, will have to be big enough to convince the Taliban to sign the MOU. So lots of red tape.

Q: If I may say something on that, if I may play devil's advocate for a second, we had a meeting with a former Ministry of Health of foreign affairs, all that stuff. And he said he complimented the village of peace greatly. But the only thing he said is kind of the opposite of what you said. And I'm curious what you what you would say to that is he said, don't go too broad. If you go too broad, you run the risk of losing oversight, or just doing too much. Is that something that you think you guys could maybe run into? Or do you think, especially because it's so connected, it works?

A: He certainly makes a good point. We are not at this point. Afraid of running that risk simply because our NGOs way too small. If you're working with USAID, for example, or operation mercy or the World Food Program, then you're talking about a budget of 5 million or in excess of 5 million, then the oversight and administration becomes extremely difficult. But we have 350 roundabout beneficiaries per year in the agricultural program. So losing oversight at this point is definitely another risk. However, it is something that you need to keep in mind. And but for example, for the peanut pace project, we only had 110 children. And those 110 children came from families, which means that you're only working with a few families. So the scale is I mean, one person can actually do everything at this point, so because of the small scale.

Q: Okay, thank you. Yeah, that actually kind of naturally goes into one of our questions already. To what degree would you or would you guys want to see village of peace upscaled in their activities? In Afghanistan? Where would it where would you be happy or where would you say like this? I don't want to go bigger than this because then it becomes an issue.

A: It's a very tricky question to answer because there are more than one answer to that question. You'll have first the first question is we won't be satisfied before we didn't change the entire country. I will never be satisfied before I don't change the entire country. Our goal is to get 5 million orphans sustainably food secure. 5 million. So obviously, we want to upscale as much as we possibly can. That being said, we would rather have local Afghan NGOs helping us to reach that goal than reaching it ourselves. Otherwise, we're also not true to our own value of local ownership. That, which is why we are exceptionally happy about the possible profit prospects of having those 40 NGOs and helping them and coaching them. Because that increases in an indirect way, our impact. And I would much rather have local NGOs reach that 5 million than doing it myself. Because it creates local ownership. And I want Afghanistan to become an example of food security, and how it's making local people the motor of change how it's possible to do without a top down approach. So we want to upscale as much as we possibly can. But we also know that our preference would be to partner with other local NGOs in order to reach that goal. And having local people reach that goal. And also the fact that it may take another 50 years, but that's okay, because I'm going to reach the age of 160. So there's just too much life to live within 120 years, I'm not going to settle. So yes, the think big, as big as possible, but not necessarily that we will be the implementing NGO. That's also why we do everything open source, once you presented is amazing, I'm going to publish it open source online so that everyone can use it.

Q: Okay, that's a good answer. So it's a upscale value, not necessarily your own operation, but upscale value in Afghanistan?

A: Upscale value in Afghanistan and make the training, give it a format that others can use it as well, that's accessible. And I don't know, tweak and change and improve so that we can create more impact. But for example, where the manual is a bit fuzzy, or it's unsure, or you need to add still, the skits that they play out, in this way, improve on what we do, by all means, because then you give other possible other NGOs, other partners a better package to work with.

Q: I have a question about those NGOs. Is it possible for you to provide us with a list of those NGOs?

A: Our NGO director from Bamiyan, he's a UN implementation partner, we're not, he does it much better than we do. So he is the one who applied for village of peace International. So that's the Netherlands side. He's the one that that applied for us to get that position. But we first need to write the proposal it's going to take months before that is done so there's no way that we can get access to that information at this time. What you can do is perhaps look at Akbar you know about foundation. Akbar is a massive kind of like an umbrella organization for NGOs and NGOs register with Akbar who then coordinate locally so if you look at their website and maybe they will be a list of an index with NGOs.

Q: jumping in with a quick question that we still have, we were talking to people who were experts in in Africa, we know that's not entirely comparable. But we were trying to take inspiration from how close knit and socially connected people are in their communities, and also how kind of social hierarchies play a very big role in how communities are organized. For example, in Ethiopia, they have a lot of chiefs and stuff like that. And I think there were some similarities to what we found in Afghanistan. So building on that the people we talked to, they kind of did like a thing where they just go into communities, and they build trust over time very slowly. But then they found ways to use existing social networks to share things or to share health knowledge it was in that case, is that also something that would be possible in Afghanistan? Are there maybe social networks of women that they are able to connect and share information with each other?

A: It's certainly something you can look into. It's a promising idea. Of African community they are very close knit communities, but also exceptionally segregated. The challenge is not finding a network, the challenge is finding a network that can overcome the segregation. When women of course, have friends and family, but they are severely limited in their mobility. And finding the opportunity to go visit someone else is exceptionally difficult because of course, you need your Maharani to go with you, your chaperone. But I would, also advise you to speak to Razma, the lady I spoke about, she will be able to give you a lot of information on the networks because I know that our local colleagues already work with networks. Now with a network don't think you need to see it as family connection networks, not interest group networks or hobby networks or any of these Western ideas. Pursue the matter that would be interesting to know.

Q: We were talking about as a group, how it would be valuable to perhaps talk to a local who are doing these trainings, but we did hear from you in our initial meeting how challenging that could be. And you did mention that there were some students who were working with you and also getting some information from the locals. We were wondering, could we perhaps get in contact with the students to gain more information from the locals or from their interviews that they had or any resources are there if we would not be able to directly speak to or contact a local?

A: Well, certainly, but you will have to organize that with Farid. Up until this point, I never orchestrated or managed any local initiatives and working with students and other partners. As I said, I never conducted any training in Afghanistan because we always leave that up to our local partners. So you can speak to fight it. But there are a number of you need to also speak to Mrs. Omrani, she's got vast experience in working with high diversity gardening and working with widows and her English is also very good. So I would then advise that you start with Mrs. Omrani. And with Razma. I will, email you the names, we use that chat function, they're so silly that I can't find it. Now, okay. I'm If you speak to them, they will be able to also give you very valuable information. And maybe I'm lobbying at the moment. But maybe if you start with a breastfeeding, idea program something, then one of you might also be able to take that further for an internship, for example, and then take what you put into the bigger package with smaller modules, but then rework it in order to become a bigger project that we can run because then we can get more women involved. So that is an idea to think about.

Q: So I had a question regarding the content of the nutritional training materials. So you mainly focus on energy, protein, and for vitamins and iron?

A: I made a few changes in your proposal, I added iron as well, I will send you back the proposal.

Q: Okay, because that was exactly the question I wanted to ask because we found in the National Nutrition survey, that anaemia, iron deficient anaemia, zinc deficiency, and iodine deficiency are also fairly prevalent. So we are wondering why visual piece does not target the minerals yet?

A: Yes, we do work a lot with iron, spinach is very high on our agenda. For example, other vegetables contain more iron, but spinach is one that is easily grown locally. And that you can also easily reproduce the seeds yourself. So that's why we work with spinach, but if there are any minerals or anything that we are still missing, then please add and go wild. The list that we got was based on our qualitative research, I went to all the hospitals speaking to the nutritional experts, and then got this information from them. But if they but if there's anything that that we didn't include that should be included iodine I hear then by all means add.

Q: I have an additional question. Right now, these action cards are the main thing you showed up. But for example, a book or something with that information in there is also an option or is it to fake a book? Yeah, with only visuals then not with text, but like, in a children's book style or something? That's something that you can spreads to them then or is that not possible?

A: That would definitely be possible. I never thought of that. That could be a wonderful idea. But then I would have it designed locally, of course. We had some very enthusiastic person helping us in the Netherlands and this person did an amazing job but all the other characters were white. That's counterproductive.

Yeah, we're we were having some issues with action cards, but you will probably hear all about that in the report itself.

You are welcome to critique. Yes, so you can definitely think about that.

Do you have any additional questions guys?

Q: Know this idea regarding upscaling how we could encourage the locals to wider spread the information and from the trainings were thinking of like incentives to give them if they teach others or the more or people they teach and they come back? I don't know with like signatures or some I don't know some something saying that like, I taught 10 or 12 people or however would that be even practical to do something like that? Or how, do you encourage them currently to spread the knowledge that they have not only to the to the widows, but on a wider scale?

A: We, of course, did think about incentives. But from experience, we learned that there is also counterproductive to the idea of ownership. Ownership is something that develops over time. And it's something that based on a positive experience and breakthrough. And when you see improvement in health, in our case, so we do have a number of people who already teach the story that I told you about the widow who, then asks her neighbour, why are your children healthy, that is an actual story that really happened. And this widow, we didn't have space in our project for another beneficiary. So this widow went to a neighbour and her neighbour taught her everything and her children improved, their health improved significantly. With significantly I mean that they even stopped eating. They couldn't, they didn't even have an appetite anymore to eat, they were so malnourished. And then after six months, they were eating solid foods again. And they actually wanted to eat which is amazing. But that didn't come through an incentive that that happened, because there was intrinsic motivation, and an experience of ownership. And within that experience of ownership, there was a success story. So you take ownership of something you did yourself, which helped, and of which you witnessed the impact. If you work with incentives, for example, signatures or something like that, it becomes a kind of like a monetary money making model, I know you're not working with money, then. But it, the incentive is there not ownership anymore, or the end goal will not be ownership. The end goal is the more signatures I collect, the more benefits I get, which again fosters the dependency that people have on NGOs, and the international community. And I don't even want them to be dependent on NGOs, even though we're a sustainable development NGO, I don't want them to be dependent on us, I want them to be able to stand on their own feet. So with incentives, you may be able to spread the information faster, but you won't be able to spread ownership and taking responsibility for yourself and intrinsic motivation. If that makes sense. So word of mouth based on impact we have come to learn is, is the better way it's it takes time. But then again, slow cooked food is always better than microwave nonsense. So we slow cook.

Q: Okay. Is it also because we also think about if we can give like a certificate to the beneficiaries, if they like accomplish this training? That is also possible like that, or it's is it the same with the sense of like Sophia mentioned?

A: No, that is definitely possible. I think that team in Mazar-i-Sharif did it in the past. They would take photos and give everyone a certificate that says you completed the training well done. And that that is actually wonderful, because it's not an incentive, but it does acknowledge a warehouse value. These are women who I mean the stories generally, a man wants a younger wife. So he basically just kicks it out with the children and then she's on the street. These are women who are abused mentally, physically, in certain areas of Afghanistan. It's not even okay to call your wife by a name you have to talk about the one with a dark hair. So they are dehumanized to the extent of not being even called by their names in public, you would scream how you were the white or whether or not, bring me tea. It shameful to even mention your wife's name in public spaces. So they are completely dehumanized. So then acknowledging, and achievement instills a lot of self value. And that is beautiful. Because he doesn't work like an incentive. What we also did at some point is we gave them trees as a, to congratulate them on completing the course not as an incentive to come, they don't know that they're getting trees, but it was a walnut tree, a pistache tree and an almond tree. All three nut trees are indigenous to Afghanistan. So they grow well locally. And of course, they're packed full of vitamins and minerals and protein. However, we realized later that a number of widows don't have this was my idea to, I call it food forestation. So I want to forest Afghanistan with food. And so we had this idea of, we don't have space to do reforestation, so we'll do food forestation. But a lot of widows don't have the knowledge to take care of the trees. And a lot of them don't have enough space. So now we're giving them three to five chickens once they complete the training, which also helps a lot. That doesn't mean that I'm giving up on my food forestation plan, because I never give up on my plants. But we'll have to find a new way in which to incorporate trees. The reason why I'm very happy about trees is that potentially you have seasonal food and a big harvest for the following 50 to 60 years without having to do too much, especially with walnut trees. But that will take some more time. And I think that's a good idea. Really? Yes. Um, yeah. Okay. Do you have any other questions?

Q: I think we have a question about the NGOs. We were wondering, what do you look for in NGOs, when you partner with them, just any local NGOs.

A: With regards to the new UN working together, we have no idea that I assume that will basically be a list of Here you go, here's the NGOs. Coming to, or looking at other NGOs, we local, but also our values, that is incredibly important. Because if we don't share the same values, we don't have a mutual language, to talk about what we do in how we do it. So we work with an NGO in America feed the hungry, it's called. And we get about two containers of emergency rice, potatoes, soy meals, and with that we can feed 1000s of people every year. That's wonderful. It's an American NGO. But that is because there aren't any local NGOs who can produce emergency aid. And the feed the hungry gives it to us free of charge. For a small IGF, that's always a good thing. Even American NGO wants to give you containers full of food for at no cost. They are even transported all the way into Afghanistan. We don't even have to do that. But that's because we share values. So if we look at local NGOs, it must be an NGO with who we share the same values. There must be a relationship that goes beyond a professional relationship. We want friendship, we want sustainable friendships. We also worked with a Korean NGL at some point, who did everything like us locally. That's why we worked with him. But we also specifically look at local NGOs or individuals who already started doing something out of their own means before they had any help or support. The reason why this is an incredibly important indicator for us, for the potential of partnering with someone else is because then they do it for well, basically because they love their country and they love their people. And that compassion is something that is quite often missed. International NGOs tend to hire expertise and experience but not compassion. You can't see on an CV if someone has compassion. But you can quite often work better. With someone who's got a lot of compassion, I would rather work with someone with compassion with no training and no experience and no skills and take 10 years to train them. And they work from their hearts, then getting someone with a lot of experience and a lot of expertise, but rotten values. So if we find local initiatives, people who already out of their own salaries out of what they have help, then we partner with them rather than bigger organizations. One winter, it was a much colder winter, that's before the Taliban takeover. We heard about a local person, I mean, he didn't even have a high profile job, he didn't have money. But he saw a lot of people started dying because of the cold of hypothermia. And he started collecting cloaks and blankets and stuff from people yet. I know this got nothing to do with food security, but it may be a good example. And he started going around collecting old gloves. Now old clothes in Afghanistan, you really have to see tattered clothes full of holes, which is 20 years old, because people don't have anything. So if they give something away, it will be that he started collecting this. And literally going to the streets, finding people living on the streets and giving them blankets and jackets and stuff. But he did that on his own initiative. That was such an amazing example of a local individual with compassion, that we decided to raise money. And we were able to raise a few 1000 euro, which enabled our team in Mazar-i- Sharif to buy four truckloads of blankets to hand out to people, especially women living on the streets with children. And they did that with him. And we made him the face of the old project. I mean, we raised the money, we did the coordination, we basically did everything, but we made him the face of what we did, because it was his initiative. It was his idea. And we want the local community to look towards him as someone with compassion, someone with a heart. So this is an example of how we would rather partner. It's not food security, but this was such an amazing opportunity that we decided to do it nonetheless. Does that make sense?

Q: Okay, Yeah do you have any comments for our work?

A: The only comment was, an invitation would be if there is anyone who wants to pick up on a breastfeeding project for a possible practical internship, then please let me know. And if there's more than one person, then we can always make it a group effort. That would be wonderful, because I don't have anyone yet to do it. But I want my colleagues to work again. So we can create internship. That's it.

Q: Would that be on shot term basis right?

A: Yes, that will be short term. You know, take two three months and see what comes out on the other hand, and if it's not completely fully prepped, project with a manual then I have something to start with. At least then there will be a proper foundation. No other I'm very, very happy with what you're doing and I look forward to the end result.

E9: Interview P9

P9 works at WUR and is working on translating FBDG to nutrition education materials for the rural households in Ethiopia.

Q: Can you tell us about your experience with and your knowledge about developing the food based dietary guidelines?

A: So far, I have mostly been working on dietary guidelines. But currently, I'm also taking another assignment more on translating the dietary guideline for specific rural households in Ethiopia to develop nutrition education material for the households, because dietary guidelines can be used by anyone. It can be used by expert group or for teaching for example. It could be for nutrition or health or agriculture professionals or it can be used also for other types of policy and program tools. It can act in different ways. So, if it has to be used by the community it may require further translation. Those guidelines into more simplified nutrition education materials. So that's what I am planning to do. So, I will try to explain briefly, what are the key steps we followed during the development of dietary guideline. So, the first part was mainly setting objectives for the guidelines and also defining what are the key messages that will be addressed in the dietary guideline. So, those are the first two objectives we would like to meet. To do that, the first thing what we did is asking ourselves: What are the key diet related health and nutrition problems in Ethiopia? So, we want to know that. The second question is: How are these problems related to diet? What type of diets will be a risk or preventive factor for the problem itself? So, to do that, we try to look at the burden of disease database and other dietary assessment reports. Also, we conducted secondary data analysis from the existing data to understand more the current diet related issues or problems, and diet related non-communicable disease problems. Then, once we identified that, we also asked: What are the key dietary factors that are risk for those problems and how diet also be a preventive factor for these problems? So, we identified these two things in our review (we did a systematic review). And after that, we came up with a list of priorities, priority problems, and the list of technical recommendations, what are the technical recommendations related to diet? Then, once we have those priority problems and recommendations, we set our objectives for the dietary guideline and then we also translated the technical recommendations into public message. So, these are the brief first part of the food based dietary guideline work. Then, once we finalize this part, which took us a little bit more than a year. Then we ask another question: How can we further translate the message we or the dietary guideline into more specific message and add a quantity in it? Like if it is about fruits, then the amount, the daily requirements of fruits, for different population groups. So, this was more of trying to understand the current dietary intake using the 24 hour recall data. Then, we also optimized diets. So, we use linear programming to come up with optimized diets that will meet the daily energy and nutrient requirements. So, with linear programming, we are able to add on our message the daily requirements for different food groups. Then after that, we have to also detail it, yeah, we can have a general message, but it's always good to have some detailed tips how consumers can achieve those messages, and what are the tips that will help them to improve their practice. So, we also further elaborate the guideline. Finally, we compiled it. So, throughout this process, so the compilation was a certain part, but throughout this process, we have been also in consultation with different stakeholders like Ministry of Health, Ministry of Education and also Ministry of Agriculture plus different universities who have a nutrition or food science program in Ethiopia and also other international organizations who are mainly working on nutrition related programs. So, their feedback was also included in the different stages of the process we followed. Besides that, we also conducted a qualitative study to understand the level of understanding of our message. Like how consumers will understand our message, is our message culturally appropriate to educate them? Because according to their culture, is it acceptable or not? Or if our dietary recommendation is feasible in terms of time or cost wise if they are able to afford it or not. So, we asked those questions using focus group discussion and also key informant interviews. Based on their feedback, we also adapted the dietary guideline and some of our process during our development, so we did that in between the development process. So, in short, those are the things.

Q: How to develop these visual materials, considering the target population is illiterate?

A: Well, for that one we also did some qualitative study. So, first, I was collaborating with designers, graphic designers. So, this graphic designer, they also came up with a tool to collect some data from the from the consumers themselves. So, this information was about the representation of different food groups like and the characters. Like, when they think of for example, cereals, what kind of do they think what kind of character they can give for cereals? If it is a human being for example, is it a male character or a female character? What kind of behaviour do they assume? So, something like that. Also, they asked some knowledge questions about food group and also the colour representation of the different food crops. Based on that, the graphic designer developed some graphics. Then once they developed these, we also tested those graphics during our qualitative study. One of the main messages was, yeah, these are nice, but it is not something appropriate for the culture. That was the main message. So, they want us to adapt it further with more common way of graphic design in Ethiopia. So, after that we started looking at the different nutrition education material available in Ethiopia and how they design the graphics. We used most of the concepts during our graphics development and we adapted the graphics based on the current nutrition education material. So, that was the main way we developed. Then we also further tested that. Finally, we included the final or the one which are most suitable for the guideline. But still we have a lot of graphics that were not completely used because we thought it is much more appropriate for the nutrition education material actually instead of the guideline itself. So, that was experience. But for your case, I think also check the existing

materials and see how they design graphics and maybe that will help you to further develop similar graphics. But, maybe with much better illustration so you can illustrate, or you can explain it in a better way but use the same type of graphic design.

Q: These are the action cards from Village of Peace. We don't think they are really culturally appropriate at the moment. Can you share your opinion on these action cards? (*Shows action card food preparation)

A: Okay maybe my first maybe comment is: What does the circle represent? Normally you know, we use this kind of circle and portion you know also like for example in Dutch food-based dietary guideline, the circle the proportion is more represented by the size of the piece which represents the if it is more vegetable then it will be much larger. But here I don't see that kind of representation. So, I'm not sure why it is even here in the first place a circle. Previously in the dietary guideline it was used as a pyramid but now they are changing this pyramid because of the misunderstanding into circle which is more of representing the plate. So, using a circle might not be a good way. Instead, maybe it can be used another way. ... For example, it says use less salt and sugar and oil, but it is marked with an x. It's not the same, like, use less and x is not the same. I don't know. So, those are the things you for the detail. Because when someone sees a picture, he must have at least some similar interpretation. So, maybe what you can do is you can develop this graphics without any word in it. And maybe you can ask someone to explain what this graph means for them and then get the matching word. Maybe, you can also ask the same person to give them the message and to give you some illustration of graphics. And yeah, how do they interpret it? How do they suggest the graphics will be for your specific message? Then, maybe make a comparison about it. And in that way, you can improve the graphics. But I understand also, you know, you also mentioned, it is hard to make a study at community level, so the only options you have is maybe first do your graphics and some of the message as much as possible here with any group. And maybe if you are able to find few people from Afghanistan, who live here, then maybe that will be also your way of maybe contact them and get their feedback, what they think and what needs to be improved based on their understanding of the culture in Afghanistan.

Q: What about the action card for symptoms of malnourishment?

A: Yeah, maybe you can explain this at the beginning when you explain the importance of the diet or the consequences right? These are more of the malnutrition or the consequences and how they can identify or ...?

This is used by the trainers to explain to the community that these are the symptoms of malnourishment. So, they are aware of it.

Yes, that is good. Those circle images are okay to use. But I don't know if this big circle is representing anything or? Putting everything in a circle, I'm not sure what it means exactly. But there are other cartoons, maybe it's good to make it a bit bigger and visible, so that at least they can understand a bit of it. It's always hard to read or for someone who doesn't read to understand with a small picture and the exact illustration with this cartoon pictures. But if you make it in different way and a bigger size it might help. Also, maybe arrange it in a different way. Maybe first about the concept of nutrition or malnutrition and how they can identify malnutrition in their community, then come to the diet issues like: What are the dietary advices? And what is diet etc. Then those are the things. Maybe you can also tell them about foods and food groups and explain them the different food groups and how they can identify. Then, you can maybe go to your message at the end. Give it a bit of more structure and then the graphics maybe in a different way. It's good to have these illustrations for them for malnutrition, but yeah, maybe put it in a different way instead of everything encircled.

Q: What about the nutrient action card?

A: Yeah, this is too hard to understand. Like, I don't know what even it means for them to know about vitamins, minerals.

Well, the minerals aren't even in here. The minerals are missing.

Yeah, they are not there. But also, the vitamins maybe... The important ones, it is good, like the energy and protein, you already mentioned it in the above, like the some of the symptoms, maybe mentioning some of the symptoms, when someone is energy deficient or doesn't have enough protein that might help. And also, instead of mentioning like vitamin this vitamin that, just mention some of the symptoms and what actions they have to do. Like exposing for sunlight is important, then you will be protecting, not having these kinds of symptoms.

This is indeed, more like, what's the function of a vitamin and why is important. We also think it's more practical to have like different foods that contain these vitamins. That is easier to understand probably.

Yes. Instead of going into detail on the vitamins, I mean, just vitamins, things like that. Even the one who can read and write cannot fully understand what it means. We I mean, we nutritionists always thought it's easier, but for people. Yeah, it's not easy to understand what it means exactly for them. So yeah. It's better to explain in food and also the consequences related to not having such kind of foods.

Q: What do you think about the action card on baby food/feeding? They basically say, at zero months, breastfeed eight times a day, and then at three months, switch to five times a day. And in the guide they say mashed banana. Then they go on, and then at 13 months, they say limit salt and herbs.

A: Yeah, this message is not in line with WHO recommendations. So that is one and yeah, it seems like I don't know what is your target group for this work?

It's widows and children. But they can't give the training to the widows at the moment. So, at the moment they give the training to farmers and working-age orphans.

Farmers means the husbands?

Yes, or family of the widows. But this is because of the Taliban, and they really want to get back to the widows, but they are in discussion with Taliban about this.

So okay, but still let it be structured in a way. What are the messages for children? What are the messages for the mothers? Give it a different structure. It can be done by the mothers but yeah, when it is for children give it a different structure. Also, the main the message about breastfeeding has to be the right one, this is not correct. I will explain about breastfeeding and the initiation of breastfeeding. And also, the indication of complementary feeding in that area, and then up when it comes to the complimentary food, I will give more elaboration about the type of diets they have to include. And when they start, what should the nature of the diet look like? And when they are grown up, and how they should improve their quantity, in what age. Those are the things you may require to dig into and give the right information for the children. Yes, those types of things. But isn't it like, Afghanistan is a Muslim country?

It is, yes, it is a Muslim country.

Right. So, I assume I assume covering is very important for some right. Because like, you know, when the pictures are depicted, it has to be within the culture. Like if they have a culture of covering, then we have to have someone who is covering and also feeding the child, then they can associate this these pictures or illustration their practice. But if your show them with someone who is uncovered here, then the message can be also misinterpreted. It can be easily misinterpreted. Imagine someone in the community is going to teach them then they can take it completely wrong. Instead of they assume, teaching about the food, they may think like: Oh, now they are teaching our woman not covering themselves. So, it can get easily misinterpreted. So those things you have to pay attention to. And also, the foods, make sure as much as possible to include some of the most commonly traditional foods or common foods from the country. For which you have to dig a bit more into the Afghanistan traditional foods or usual diets, maybe just even from Google and see what can be included.

Now, you know, at least I know your target group. And also make sure you have a clear objective: What do you want really to achieve with this guideline, with this education material? If you want. So, make a clear objective, because that will really help you in a way you are meeting your objective, or you are specifically targeting the message that requires to meet your objectives. If you want to improve the dietary diversity or we want to improve the dietary diversity, or within the dietary diversity or if you want to improve certain food groups, or if you want to improve a certain micronutrient intake, then those key objectives will help you in a way you can shape your message or target those messages in your nutrition education material. Also, try to dig more into the nutrition education materials available in the country and try to match with what you have done so far, and how much they are compatible or what is new about your nutrition education material and what has been done so far. It shouldn't necessarily be completely new. I encourage you to make sure you harmonize it in a way with how messages are already available in the country. At the same time, you can also add more information which can be related to your objectives maybe.