MARKET PURCHASE MOTIVATIONS AMONG RURAL MEN IN THE KHULNA DISTRICT OF BANGLADESH

A QUALITATIVE STUDY
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ABOUT SPRING

The Strengthening Partnerships, Results, and Innovations in Nutrition Globally (SPRING) project is a five-year USAID-funded Cooperative Agreement to strengthen global and country efforts to scale up high impact nutrition practices and policies and improve maternal and child nutrition outcomes. The project is managed by JSI Research & Training Institute, Inc., with partners Helen Keller International, The Manoff Group, Save the Children, and the International Food Policy Research Institute. SPRING provides state-of-the-art technical support and focuses on the prevention of stunting and maternal and child anemia in the first 1,000 days.

RECOMMENDED CITATION


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SPRING

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CONTENTS

Acronyms.............................................................................................................................................. 7

Executive Summary .................................................................................................................................. 9
  Objectives........................................................................................................................................... 9
  Methods............................................................................................................................................... 9

Results................................................................................................................................................ 10
  Conclusions and Recommendations ................................................................................................. 13

Background........................................................................................................................................... 17

Methods................................................................................................................................................ 21
  Focus Groups ..................................................................................................................................... 21
  In-Depth Interviews ............................................................................................................................ 22
  Participant Characteristics .................................................................................................................... 23
  Study Limitations ................................................................................................................................. 23

Men’s Practices in Purchasing Foods ..................................................................................................... 25

Men’s Perceptions of Nutrition ............................................................................................................... 28

Foods for Children ................................................................................................................................. 29

Conclusions and Recommendations .................................................................................................. 37

References............................................................................................................................................. 43
ACRONYMS

AIS: Agriculture Information System
ASF: animal source foods
FNS: farmer nutrition school(s)
FGD: focus group discussion
HKI: Helen Keller Institute
IFPRI: International Food Policy Research Institute
MOHFW: Ministry of Health and Family Welfare
MNWP SUN: National Nutrition Working Group, Scaling Up Nutrition
NGO: nongovernmental organization
RCHCIB: Revitalization of Community Health Clinics in Bangladesh
NGNESP: NGO Gardening and Nutrition Education Surveillance Project
SMS: short message service
SUN: Scaling Up Nutrition
USAID: U.S. Agency for International Development
WEAI: Women’s Empowerment in Agriculture Index
EXECUTIVE SUMMARY

The Strengthening Partnerships, Results, and Innovation in Nutrition Globally (SPRING) project is a five-year global nutrition project funded by the U.S. Agency for International Development (USAID) and managed by JSI Research & Training Institute, Inc., with partners Helen Keller International (HKI), The Manoff Group, Save the Children, and the International Food Policy Research Institute (IFPRI). SPRING provides state-of-the-art technical support and focuses on the prevention of stunting and maternal and child anemia in the first 1,000 days. SPRING/Bangladesh seeks to improve the nutritional status of women and children by improving nutritional practices, increasing dietary diversity and food quality, and decreasing the burden of disease in Barisal and Khulna Divisions. The program addresses the need for increased dietary diversity and food quality by introducing and promoting the cultivation of nutrient-dense foods (primarily fruits and vegetables), poultry rearing, and fish farming, to increase the availability of nutrient-dense foods within the household, thereby increasing women and children’s access to higher-quality foods. Success in increasing dietary diversity and food quality will require that members of households either: (1) grow and consume homegrown produce of higher nutritional value than normally present in their diets, or (2) use income gained from improved agriculture in ways that improve dietary diversity and food quality. This study addresses the second category of household action by providing insights into men’s purchasing motivations to help develop promotional strategies to encourage their nutritious or nutrition-positive purchases.

The decision-making processes that farm households follow are complex, and perhaps more so in Bangladesh. In general, men are responsible for the majority of interactions with society outside the extended family. That is, men are the ones who use household income to buy food at the market. Assuming that men and women may have different motivations for making various decisions around marketing, understanding who participates in specific decisions is essential in determining whose motivations SPRING’s social and behavior change communication (SBCC) initiative should attempt to influence.

OBJECTIVES

This research sought to identify and explore men’s motivations for specific food purchases from the market. The study strictly refers to men’s purchasing behavior and is presumed to represent the case of food purchase using income gained from staple or other row crop production (i.e., non-homestead production) or the primary source of household income.

METHODS

A focus group discussion (FGD) approach was selected to investigate social norms and perceptions about men’s market behavior in rural Bangladesh. The purpose of the focus group was to create categories of market purchases (e.g., items purchased by “good” or “bad” husbands, or items for infants and young children), and categories of foods (e.g., essential foods, desirable foods, unpleasant, children’s foods).
Participants were recruited from four purposefully selected areas within SPRING working areas in Khulna Division, with two villages in Rupsa Union (Noihati and Shreerampur) and two villages in Phultala Union (Hazrapara and Pariardanga). SPRING identified participants from beneficiary lists who met the selection criteria of: a) participation in the SPRING-led homestead gardening intervention; b) two-parent household; c) parents of an infant/child younger than two years; d) not currently pregnant; and e) wife’s age between 18 and 35 years.

RESULTS

MEN’S PRACTICES IN PURCHASING FOODS

The male head of household is responsible for making food purchases at the market for his family. If for any reason he cannot go, another man in the family, such as a son or father, will take on that responsibility. Rarely will his spouse go to the market in his place. There are examples of women making purchases, but in these instances, certain conditions seem to be important, such as a market being very close to the home and the man being preoccupied with work, or being away from home.

The frequency of market visits depends on available cash; a close relationship exists between when a man is paid and how often he goes to the market. Day laborers tend to go to the market daily, whereas salaried workers go monthly to purchase bulk essentials like rice or pulses and return more frequently for smaller items and perishable foods.

Essential purchases are mostly food items that men feel must be purchased immediately when they are needed. These include rice, pulses, cooking oil, soap, and onions. Although fruit and eggs are considered costly, men will sometimes buy both for children, which suggests that they may view these as essential for children.

If men have “extra” money, they tend to buy more regularly purchased items (e.g., four kg of rice instead of two) rather than more expensive or higher-quality items. Purchasing higher-quality or desirable foods (e.g., beef and poultry) was noted by some, but desirability is determined by taste rather than nutritional value. This suggests that interventions to increase household income will likely not lead to increased dietary diversity in the absence of behavior-changing activities that promote the use of additional income to purchase diverse foods.

Food prices influenced whether the participants purchased certain vegetables or fish for their family, and also seemed to influence perceptions of nutritional value. A common perception is that more expensive foods or bigger foods have better nutrition and taste. Furthermore, the purchase of less or more expensive items is considered a reflection on a man’s socioeconomic status, making the purchase of low-cost items embarrassing. Participants projected this idea on to the quality of foods. For example, more expensive vegetables were thought to have more and better vitamins.
When making choices at the market, the participants felt that a man would choose quantity over quality, especially if that decision saved money for more/other food items.

**MEN’S PERCEPTION OF NUTRITION**

According to the study participants, nutritious foods are vegetables (“vegetables with vitamins” like sweet gourd and pumpkin), fish, eggs, pulses, milk, and fruit. When they were asked to clarify what is meant by “nutrition” or “nutritious,” the participants showed little knowledge of specifics beyond an appreciation for vitamins. Men know vitamins are important; however, there is no understanding of what nutrition really is. There was a strong perception of vegetables as a good source of vitamins; in contrast, animal source foods (ASF) were seen as unhealthful and less nutritious than vegetables.

The participants considered fruit to be a good buy for children’s nutritional needs. Imported fruit and local fruit were seen as separate categories. Imported, more expensive fruit, such as apples and grapes, were frequently mentioned as nutritious.

The participants believe that nutritious foods impart physical and mental strength, provide energy, support health, and promote intelligence. The participants were emphatic that they wanted to provide good food for their children. Doctors and scientists are trusted sources of nutrition information.

A remarkable variety of foods were perceived as “bad.” The participants expected foods to make them feel good. Bad feelings, sensations, and illness influenced their opinions of “bad” food, with bad feelings ranging from illness to discomfort, such as gas. Unseen or imperceptible factors like chemical additives or pesticide contamination also influenced the participants’ opinions about bad food.

**FOODS FOR CHILDREN**

The participants reported that they bought specific foods for children, such as milk, eggs, fruit, fish, rice, potato, and banana. Khechuri, a mixture of pulses and rice, usually with vegetables added, was considered a nearly ideal food for children.

Most participants agreed that sick children do not like to eat and frequently lose their appetite, so they try feeding different items. The foods that men provided in order to coax a sick child into eating included cake, biscuits, buns, bananas, and snack foods. The participants showed a clear consensus that when a child refuses to eat, sweets are offered. According to the participants, getting a child to eat anything was more important than getting them to eat nutritious foods.

Not surprisingly, the perception that children love eating sweets is strong, although men recognize that children like some other foods as much as sweets. These foods include fruit (grapes, oranges, tomatoes, mangos, apples, and pomegranates), vegetables (carrots and pumpkins), and ASF (eggs and milk). Although these foods are perceived as equally convenient to purchase as sweets, men perceive them to be expensive.
There was a strong distinction between “outside” foods and foods prepared in the home. The participants described outside foods as packaged and imported foods. Outside foods could be either processed or fresh. The participants felt that children develop less interest in eating rice and vegetables if they fill up on outside foods like chips and biscuits. Generally, the participants felt that buying biscuits, cake, and other outside foods for their children was wrong, but most said they did it anyway.

**PURCHASE MOTIVATIONS: PROMOTING HAPPINESS, AVOIDING CONFLICT**

Giving children cake, biscuits, and other sugary foods, collectively referred to here as sweets, was very common, even though the participants seemed to know they were not nutritious foods good for children. The most important motivations for giving children sweets were emotional triggers: sweets made the child and the father happy. The findings indicate that the participants prioritized familial wellbeing and happiness above other things, even over health considerations.

To achieve this happiness, men tend to give their children sweets when children cry, or when they are pestering their mother (e.g., a hungry child cries and disturbs his mother while she prepares breakfast). Men’s perceptions that sweets are inexpensive, easy to obtain (e.g., from tea stalls), and convenient “single portion” foods appear to facilitate their use as a pacifier for children—despite perceptions that sweets are bad, causing upset stomach, worms, diarrhea, and dental caries and also spoiling appetite.

Additionally, the participants discussed giving sweets to children to satisfy their own happiness and reported that sweets as a “must buy” at the market. Most feel nothing is sacrificed to buy them. Others acknowledge they buy smaller quantities of staple foods, fruits and vegetables. Some sacrifice purchasing betel leaf and cigarettes.

The participants highly valued being good husbands to their wives in order to keep the family happy and avoid conflict. According to the participants, a good husband responds to his wife’s wants and wishes, especially with regard to purchasing the food items she requests.

Joint decision making about food purchases is valued to keep the family happy and at peace. There appears to be a high degree of discussion about market purchases between men and women. Men believe that making decisions together is a key element for a happy and peaceful home.

Buying fresh vegetables that are clean, shaped right, and without infection is a sign of a clever buyer and a good husband. Men that purchase good combinations of foods are clever. A clever buyer knows which vegetables match with which fish. A clever buyer takes care to get value for money; for example, he will sort out potatoes before he purchases them and not be tricked by a lower per unit price and buy something that he will have to discard. A clever husband pays “some extra attention to...good [shopping] and must follow quality and quantity both.”

Men’s marketing choices reflect, positively or negatively, on their image in the community as well. What men buy influences how their neighbors see them. A responsible husband makes wise purchases and thus projects a good image in the community (perhaps explaining the fact that none spoke of tobacco purchase, despite the high national prevalence of cigarette smoking).
Although the male head of the household is the final authority on which food and non-food items are bought at the market and when they are bought, women seem to have a say in what is purchased, and men appreciate women’s guidance.

CONCLUSIONS AND RECOMMENDATIONS

Five recommendations are proposed for promoting the purchase of nutritious foods by men, specifically for pregnant and lactating women and children under two years. One of these recommendations is for social change, and four are for behavior change communications. The social change recommendation addresses an issue that underlies all of the behaviors to be promoted, and a successful campaign to promote this social change would be expected to also substantially improve behavior change. All of the proposed recommendations for social and behavior change will need to evoke men’s primary motivation: that men ideally strive to achieve happiness in their home and avoid conflict.

SOCIAL CHANGE RECOMMENDATION

Currently, men’s perceptions of “nutrition” are based on many misunderstandings and misconceptions about what foods are nutritious, what makes a food nutritious, and the cost of purchasing a nutritious diet for children under two years of age and girls/women of reproductive age. For example, men are not aware that nutritious food includes not only vegetables but also ASF. These misconceptions limit the potential of behavior change communications to promote nutritious diets, since men are unaware of the necessary elements for creating a nutritious diet. Creating an environment that promotes pro-nutrition market purchases will require change on the social level by redefining the social norm of what nutrition is.

Achieving a major change in the perception of what “nutrition” means is indeed ambitious, but the widespread belief that vegetables are highly nutritious—presumably the result of previous campaigns promoting vegetable consumption—suggests that similar success may be possible for promoting new concepts of what nutrition is and how it can be obtained.

Five themes that emerged from this study underscore some key areas where social change can support the promotion of food purchase and child feeding practices that are associated with better nutritional outcomes for women and children: (1) men believe that less expensive foods are less nutritious; (2) men believe that nutritious foods are expensive and thus are not a “good buy” given restricted resources; (3) men believe that only wealthy families can afford nutritious foods, and they would not purchase “poor man’s food”; (4) while aware of the nutritional value of vegetables, men do not consider ASF as an important source of “nutrition”; and (5) men believe that they must give sweets to children because this is the only effective way to pacify them and keep them happy. By promoting the following five themes as alternatives, a positive social environment can be created to support the adoption of new marketing and child feeding practices:

1. Foods that are less expensive are not necessarily less nutritious.
2. Nutritious foods can be inexpensive and a “good buy.”
3. Wealthy families purchase highly nutritious inexpensive foods such as small fish and eggs.

4. There are many ways to meet nutritional demands of children under the age of two.

5. Children need not only vegetables but also ASF (animal source foods) for better nutrition.

BEHAVIOR CHANGE RECOMMENDATIONS

1) **Behavior: Fathers Purchase a Wider Variety of Foods**

The current practice of purchasing the same selection of foods, and the belief that nutritious foods are expensive, both limit dietary diversity. Even when men have extra money, they purchase more of the same foods rather than foods with a higher nutritional value. With extra money, men should be encouraged to purchase more small fish, local fruit, and eggs in addition to normal market purchases to feed a wider variety of foods to pregnant and lactating women and children under the age of two.

2) **Behavior: Not to Fill Up Children on Sugary Snacks**

Men are feeding children first thing in the morning before food is prepared (before meals) to distract children who disrupt the mother’s cooking, and to pacify an impatient child who is hungry for breakfast. Men reach for sweets as a snack food because they are easy, accessible, and affordable.

3) **Behavior: Tea Stall Owners and Distributors Offer Nutritious Snacks for Children that Fathers Can Buy**

Currently, men buy sweets for their children at the local tea stall. Buying sweets is convenient and quick and provides an opportunity for men to visit a popular social outlet. If equally inexpensive and convenient, but more nutritious, snacks were available at the tea stall—snacks that would pacify children—men likely would purchase them because they know that sweets are not the best option for children’s nutrition. Instead of purchasing sweets, men could buy local fruit or other nutritious snacks for children.

Engage tea stall owners and food distributors to ensure a communal understanding of what a nutritious snack is and why it is important for children. Tea stall owners must stock (or continue to stock) the identified nutritious snack. It is important to ensure limited disruption to the current practices of men and ensure tea stalls do not lose business.

4) **Behavior: Fathers Purchase Nutritious Snacks for Children**

Instead of purchasing sweets, men could buy local fruit, pitha or other nutritious snacks for children. Engage tea stall owners and food distributors to ensure buy in and an understanding of what the nutritious snack is and why it is important for children. Tea stall owners must stock (or continue to stock) the identified nutritious snack. It is important to ensure limited disruption to the current practices of men and ensure tea stalls do not lose business.
5) **Behavior: Make Homemade Nutritious Snacks for Children**

Currently men buy and give sweets to children because they are easy, accessible, and cheap foods that children love. Instead of purchasing sweets for children, men can purchase ingredients for women so every week they can make a homemade nutritious snack food. One option could be “improved” pitha. Pitha is a widely popular food in Bangladesh made of various combinations of flour, molasses, and other ingredients. Recipes vary considerably, but existing recipes can be modified (or recipes that are more nutritious can be promoted) to create a more nutritious alternative to the nutritionally inadequate snacks men currently provide. Ideally, the alternative pitha would need to keep well so that women could prepare it infrequently (i.e., once each week), to ensure that preparing the snack would not excessively burden women as well as to help meet the requirement that the snack is conveniently available when a child needs pacifying.
BACKGROUND

The Strengthening Partnerships, Results, and Innovation in Nutrition Globally (SPRING) project is a five-year global nutrition project funded by the U.S. Agency for International Development (USAID) and managed by JSI Research & Training Institute, Inc., with partners Helen Keller International (HKI), The Manoff Group, Save the Children, and the International Food Policy Research Institute (IFPRI). SPRING provides state-of-the-art technical support and focuses on the prevention of stunting and maternal and child anemia in the first 1,000 days. SPRING/Bangladesh seeks to improve the nutritional status of women and children by improving nutritional practices, increasing dietary diversity and food quality, and decreasing the burden of disease in Barisal and Khulna Divisions. The program addresses the need for increased dietary diversity and food quality by introducing and promoting the cultivation of nutrient-dense foods (primarily fruits and vegetables), poultry rearing, and fish farming, to increase the availability of nutrient-dense foods within the household, thereby increasing women and children’s access to higher-quality foods. Success in increasing dietary diversity and food quality will require that members of households either: (1) grow and consume homegrown produce of higher nutritional value than normally present in their diets, or (2) use income gained from improved agriculture in ways that improve dietary diversity and food quality. This study addresses the second category of household action by providing insights into men’s purchasing motivations to help develop promotional strategies to encourage their nutritious or nutrition-positive purchases.

The decision-making processes that any farm household follows are complex, and the processes are perhaps even more complex in Bangladesh. In Bangladesh, men are generally responsible for the majority of interactions with society outside the extended family. That is, men buy seeds and other inputs for cultivation, men perform most field crop work (fields lie outside the homestead), men are responsible for selling the farm’s produce, and men are the primary food purchasers for the family. Research has explored whether men’s roles change when crops and livestock are produced within the homestead, and therefore women have more responsibility for the work of cultivation or rearing, and perhaps more say in the crops planted, inputs acquired, products sold, and food purchased. Even in the homestead production setting, however, women are unlikely to be the decision makers concerning the purchase of food from the market because these purchases are ultimately made by men, regardless of whether women have input into the decision (Quisumbing and de la Brière 2000).

A number of factors influence household food purchases, including income, food prices, parental education, nutritional knowledge, culturally based customs, and food preferences (Bouis and Novenario-Reese 1997). Several models that describe the process of consumer choice have been proposed and tested, and these models suggest
that there are a wide range of factors beyond knowledge that influence what people spend their money on. For example, making expenditures can serve to establish an individual’s status relative to others in her or his peer group, and not making specific purchases may be associated with a loss in status (Hopkins and Kornienko 2004). Vegetables are considered lower-status foods in Bangladesh (Bouis and Novenario-Reese 1997; Greiner and Mitra 1995). Purchasing some low-cost nutritious foods (e.g., dark green leafy vegetables) may be considered a lower status activity than purchasing other foods that are higher in price.” When shopping at the market, men might be influenced by “what others will think” rather than by nutritional benefits.

Furthermore, studies have shown that when shoppers consider the trade-offs between giving up familiar items, their comfort with the status quo can favor small rather than large changes in purchases (Tversky and Kahneman 1991). Importantly, a family’s use of income to purchase nutritious foods, while desirable for the promotion of better nutrition, may pose some financial risk for poor households if in doing so they sacrifice food or nonfood items that are more important to the family’s livelihood or survival.

Several studies have examined household food expenditures in Bangladesh from an economic standpoint (e.g., Ahmed 1993, and many others) by assessing income elasticities associated with expenditures on various food items. These elasticities, however, simply describe cross-sectional relationships in purchasing practices at different levels of income, not the motivations behind making the purchases or the influence of the household’s own food production on the purchases. No studies exist to describe the relationship between income and the purchase of nutritious foods, or foods containing specific nutrients. Evidence exists to suggest, however, that the income elasticity for food purchases is higher than for purchases of clothing, housing, durable goods and other items (Han and Wahl 1998). On one hand, this may indicate that perceived need for specific foods makes those foods more desirable for purchase; on the other hand, this may indicate that clothing, housing, durable goods, and other items have the highest priority, and food expenditure increases only when income rises above a threshold amount necessary for meeting these basic needs.

The source of a household’s income may influence the types of purchases made with that income. Study from HKI’s NGO Gardening and Nutrition Education Surveillance Project (NGNESP) in Bangladesh demonstrates households’ purchasing behavior in the context of additional income gained specifically through homestead gardening. Results from NGNESP and other similar studies have shown that the majority of households use income gained through participation to purchase supplementary food items, such as meat, fish, and cooking oil (Kiess et al. 1998), with as many as 70 percent of households using income from homestead gardening to purchase additional food for the household (Talukder et al. 2010). Other uses of income derived from gardening included essential household expenses and investment in productive assets, including reinvesting in gardening (Kiess et al. 1998). While this may simply reflect the higher income elasticity of food items in comparison with nonfood items, it may also reflect the fact that women tend to have more input into or control over the use of income gained through homestead production.

Income that is under the control of women has been shown to translate more efficiently into positive household health and nutrition outcomes than income under the control of men (Haddad and Hoddinott 1994). In Bangladesh, cultural norms may work against female control of income as these cultural norms value female seclusion and
tend to undervalue female labor (Haddad and Hoddinott 1994; Smith, Ramakrishnan, et al. 2002; Thomas 1997). Although in the poorest households, women are actually fairly active in the agricultural sector as day laborers (Sraboni, Quisumbing, and Ahmed 2012). Studies by IFPRI in Bangladesh of USAID’s Feed the Future initiative intervention areas found low levels of women’s empowerment in agriculture, with 80 percent of women not rated as empowered according to the women’s empowerment in agriculture index (WEAI), and nearly half of women stating that they felt they had little input in decisions relating to agricultural production (Ibid). The report also concluded that women lack control over household resources. Women’s relatively low level of control over household income may strongly influence the types of purchases—especially food purchases, made at the market.

Obviously, when determining whether a food to be purchased from the market is “worth the price,” a consumer weighs a variety of factors like quality, taste, and preference. Nutritional value is an important factor in this assessment (Variyam et al. 1999; Block 2002; Block 2003; Chowdhury et al. 2009; Birol et al. 2011), but knowledge of the nutrient content of foods is generally low in low-income settings. Nutrition education may have substantial potential for influencing food purchase choices to support improved diets.
METHODS

This study focuses exclusively on men’s purchasing behavior and is presumed to represent the case of food purchase using income gained from wage labor or, to a lesser extent, staple or other row crop production (i.e., non-homestead production) and wage labor in Khulna, Bangladesh.

The study employed two data collection methods to triangulate information on food purchasing decisions and motivating factors: the first was focus group discussions (FGDs) to elucidate participants’ categorizations of purchases and motivations; the second was in-depth interviews with a subset of FGD participants to obtain greater detail about their own specific motivations for different categories of market purchases.

Four sites were purposefully selected within SPRING working areas in Khulna Division, with two villages in Rupsa Union (Noihati and Shreerampur) and two villages in Phultala Union (Hazrapara and Pariardanga). The villages were selected based on their participation in the SPRING homestead food production intervention. SPRING recruited FGD participants from their beneficiary lists using the selection criteria of: (a) household’s participation in the SPRING-led homestead gardening intervention, (b) two-parent household, (c) parents of an infant/child younger than two years, (d) wife not currently pregnant, and (e) a wife of reproductive age (between 18 and 35 years old).

FOCUS GROUPS

The FGD approach was selected to investigate social norms and perceptions about men’s market behavior in rural Bangladesh. A topic guide was designed to generate discussions about marketing behavior. The topics in the guide included perceptions about foods in the market, foods bought specifically for women and children, and general market purchase habits. The guide included questions designed to promote discussion about foods that are considered nutritious, foods that are appropriate for children and/or women, staple foods and “luxury” foods, and so forth. Picture cards of local food and non-food items were used to facilitate discussion using a card sort approach. Participants sorted cards into groupings such as: items people usually buy, items bought when resources are scarce, and items bought when resources are plentiful. The purpose of the card sort was to generate discussion about the participants’ rationale for classifying items in specific categories, not simply to understand their opinion concerning the items.
A moderator, notetaker, and supervisor led the FGDs. Prior to conducting the FGDs, the supervisor briefed the moderator and notetaker on maternal, infant, and young child feeding issues; the SPRING project; and the objectives and purpose for the research. The moderator translated the topic guide into Bangla and reviewed it with the supervisor prior to the first FGD.

Each of the four FGDs was held in the courtyard of a dwelling centrally located in each village and each group consisted of approximately 10 men. All of the discussions were recorded on a laptop computer using an external microphone, and the notetaker used these recordings to create transcripts in English. The moderator created a summary for each FGD, after which the team analyzed the transcripts and summaries in order to synthesize a final, combined report.

Preliminary findings were presented to the project managers and other stakeholders who are working in the nutrition sector in Bangladesh and were the basis for concepts to explore in the in-depth interviews.

**IN-DEPTH INTERVIEWS**

A subset of 24 men from the focus groups was selected for in-depth interviews. This subset was selected randomly from the FGD participant lists to include six men from each of the four villages. In each of the four villages, a team of three interviewers and one supervisor conducted the interviews.

The study supervisors developed the interview questionnaire based on a review of the translated FGD transcripts and summaries of each FGD created by the moderator. Prior to conducting the interviews, the supervisor held a two-day training to brief the research team on maternal, infant, and young child feeding issues, SPRING, and the objectives and purpose for the research.

The interviews focused on the participants’ own perceptions and practices around nutrition and food, with extensive probing concerning the rationale for categorizing market items and foods, and about their personal motivations for purchases within these categories. The following key concepts, identified in the FGDs, were explored with special emphasis on individual motivators and behaviors:

- Perception of vegetables and animal source foods (ASF) as nutritious foods
- Foods that are good for children
- Rationale for giving children different types of food
• Purchases sacrificed in order to purchase special foods for children
• Women’s role in food purchasing decisions
• Value of purchases in terms of quality and quantity
• Qualities of a good husband

The in-depth interviews were conducted in Bangla, from a structured Bangla-language questionnaire, and responses were translated to English directly following the interviews to allow for same-day review.

After the completion of all interviews, all responses were organized by question, after which the responses were entered into a matrix organized by themes based on the concepts noted above (e.g., foods for children, or qualities of a good husband). Subsequently, final summaries were created for each concept to organize and analyze findings. Social and behavior change recommendations were made by The Manoff Group, with input from the SPRING/DC and SPRING/Bangladesh teams and were based on key findings for the promotion of nutritious or nutrition-positive purchases and actions. The recommendations are based on the motivational factors that were identified in the study.

PARTICIPANT CHARACTERISTICS

The villages selected for this study were somewhat atypical: despite being located in a rural agricultural area, nonfarm occupations predominated (e.g., brick field laborer, van puller). Phultala Union is fairly well off by rural standards, and participants’ occupations and education reflected this. Pariardanga village participants were masons, teachers, and students, and all were educated to class three or higher. Hazarapara village participants were farmers, fishermen, and factory workers, and all were educated to class two or higher. In comparison, Rupsa Union is poorer. Noahati village participants were primarily van or cart pullers, although all but one reported some education. In Shreerampur, participants were brickfield workers and van pullers, with half of the group self-reporting as illiterate. All Shreerampur participants were squatters on government land.

STUDY LIMITATIONS

Due to the size and scope of the study, caution should be exercised when generalizing the findings beyond Khulna, Bangladesh. However, to the extent that men’s marketing practices are consistent throughout Bangladesh, the results could prove useful for promotional activities in other areas of the country.
RESULTS

MEN’S PRACTICES IN PURCHASING FOODS

The male head of household is responsible for making food purchases at the market for his family. If for any reason he cannot go, another man in the family, such as a son or father, will take on that responsibility. Rarely will his spouse go to the market in his place. There are examples of women making purchases, but in these instances, certain conditions seem to be important, such as a market’s proximity to the home and the man being preoccupied with work, or being away from home. “I go to the market when we need boro jeenish [literally “big things”; bulk items—rice, oil] but when we need choto jeenish [small things], like vegetables, my wife buys them from a nearby location.”

In Hazarapara village, which is somewhat peri-urban, roving vendors sell vegetables directly to households. When this occurs, women can buy vegetables without leaving the homestead. Participants related that they leave money for their spouse to make purchases from vendors, but according to one participant: “If a man is around, he will help negotiate the price.” Consensus in this village was that the door-to-door vendor system is a positive development, as it allows daily vegetable purchases, which results in consumption of fresher produce and a better combination of curry and vegetables (the wife who does the cooking, chooses the vegetables to “match” the curry).

FREQUENCY OF MARKET VISITS

There is a close relationship between when a man is paid and when he goes to the market to shop. Men paid monthly salaries go to the market monthly to purchase bulk essentials, like rice or pulses and more frequently for smaller items and perishable foods. Men who are paid weekly follow a similar pattern on a weekly basis, while others, especially day laborers, go to the market daily without distinguishing between “big thing” and “small thing” purchases. In general, money is spent as it is earned on daily and weekly household needs, most frequently on food items. Local markets can be weekly or daily, and this may also influence when men go to the market.

ESSENTIAL PURCHASES

Across all four FGDs, participants discussed and classified similar items identified by the household as essential. Generally, the classification of essential seems to be influenced by household need and available income (i.e., one person’s luxury may be considered essential by another). Essential purchases at the market were mostly food items, such as staples bought in bulk and vegetables and fish purchased daily. The participants reported buying heavier items, such as rice and pulses, spices, and garlic, weekly or monthly in bulk. Although households typically consume rice three times a day, most purchase it weekly. Other essential items purchased immediately when needed included cooking oil, soap, and onions. The participants sometimes bought fruit and eggs for children, even though they were considered costly, suggesting that some consider these essential purchases for children.
PURCHASES MADE WITH EXTRA MONEY

Most participants reported that when households have more money on hand than usual, they spend the extra money immediately rather than save it. The overall consensus was that the items men purchase with surplus funds are not different from those normally purchased—they simply buy more of the items they usually buy, such as vegetables and rice, rather than additional or higher-quality items. For example, a man will buy 4 kilograms (kg) of rice, even though he usually buys 2 kg, rather than, for example, buying fish and the usual 2 kg of rice. Depending on the household’s needs, men may also use surplus funds to pay off or pay down loans or buy clothes for children, soap, furniture, or other household items like utensils or pans. This suggests that interventions to increase household income will likely not lead to increased dietary diversity in the absence of behavior-changing activities that promote the use of additional income to purchase diverse foods.

A secondary, less-common theme that emerged in the FGDs was the use of surplus income to buy beef and poultry. These foods were identified as higher-quality foods in terms of nutrition and/or foods perceived as more desirable to eat. Notably, when purchasing these foods, the participants did not consider the nutritional value of the foods to be a motivating factor. That is, among those who made these purchases, the primary motivation was a simple desire to consume beef or poultry rather than the nutritional value of those foods.

Finally, the participants reported that most households try to keep a one-month supply of rice as a safety net. The participants felt that households that always have extra money might save extra money, but none of the participants considered themselves in an income bracket to be able to do this.

PRICE AND PERCEPTION OF VALUE (NUTRITIONAL OR OTHERWISE)

Food prices influenced whether the participants purchased certain vegetables or fish for their family, and also seemed to influence perceptions of nutritional value. A common perception is that more expensive foods have better nutrition and taste. FGD participants quoted a Bengali proverb, “Shastaar duur abostaa,” which means that cheap items must be bad. “We put low-price vegetables in the bag immediately after buying to avoid others seeing my inability to buy standard vegetables.” Low-price vegetables include cabbage, amaranth, and green leafy vegetables such as pui shaak (Malabar spinach), data shaak (Chinese spinach), ghatii shaak, kodhu shaak, and kochu shaak (taro leaves). These items, which are, in fact, valuable in terms of nutritional content, were thought to be less nutritious than more expensive items.

Furthermore, the purchase of less or more expensive items is considered a reflection on a man’s socioeconomic status, making purchase of low-cost items embarrassing. For example, participants reported that green leafy vegetables are commonly purchased at the market because of their low cost, but they are identified as “food for poor people” and are not valued as nutritious foods. One participant was embarrassed to buy green leafy vegetables and said he “hides them in a bag so his neighbors don’t see.”

Conversely, the desire for and appeal of expensive food items was projected to also mean that a food was of better quality, with more nutritional value. One participant offered: “Good things are more expensive.” The participants reported a strong
preference to purchase and eat expensive vegetables that they thought to “have more vitamins” if possible. These types of perceptions have an impact on nutritious food purchases.

TASTE PREFERENCES

The items that were purchased for adults—primarily for taste—are chewing gum, meat, eggs, and pulses for curry. One participant strongly advocated for musk melon as a food purchased primarily for its taste. Foods that the participants considered to be primarily for men’s taste included tea, foods that have a hot taste, and sweets. Foods that the participants considered to be preferred by women included dry fish and foods with a sour taste, like local fruits (tatul and amraa), mango (presumably green mango), pickles, and olives.

Not surprisingly, different groups cited different foods as desirable primarily for taste, but consensus was fairly uniform about gender-based differences in taste preference. Notably, something that is nutritious was not associated positively with taste.

QUALITY: MORE EXPENSIVE AND BIGGER ITEMS ARE BETTER

The idea that a man could buy a low-cost item that would also be nutritious was not something that most of the participants had considered. The participants voiced a willingness to buy such an item, “if in fact, it exists.” One participant observed, for fairly obvious reasons: “It is better for us if we can buy good things at less cost. We will buy the same food with equal nutritional value at a lower price where there will be savings. Definitely we would then be able to buy other food.” Although the participants agreed in principle to make these kinds of purchases, this contradicted other statements concerning the desire to avoid “cheap” or “poor man’s food.” Another common notion was the idea that big items are better. One participant gave the example of fish: “Big fish are better than small fish.” Another related this idea to nutrition: “Big and expensive vegetables have more vitamins than small or cheap vegetables.”

QUANTITY: MORE FOR LESS EQUALS MORE FOOD FOR THE FAMILY

According to some of the participants, the more food a man can provide for his family the better. Although saving money was rare, one participant said, “If we buy more with less money we can save. The food can be taken for a greater number of days.” Getting more food for the family was very important: “As we are people earning low income, if we buy more, it is better for us. If there is more food, it can be consumed for a longer period of time.”

When making choices at the market, the participants felt that a man would choose quantity over quality, especially if that decision saved money for more/other food items, and even if it meant purchasing “bad” foods. As one man offered, “I buy tomatoes even if slightly rotten because there is a mix of good and bad. Then I buy rice if money remains in my hand.” Importantly, the participants’ preference for quantity coincided with their beliefs about nutritional value, as some felt that more food was better for nutrition: “Foods contain more nutrition if there is more in quantity.”
MEN’S PERCEPTIONS OF NUTRITION

WHAT IS NUTRITION?
According to the study participants, nutritious foods are vegetables (“vegetables with vitamins” like sweet gourd and pumpkin), fish, eggs, pulses, milk, and fruit. When they were asked to clarify what is meant by “nutrition” or “nutritious,” the participants showed little knowledge of specifics beyond an appreciation for vitamins. “Vitamins are in vegetables” was common knowledge. Although one participant stated “we can get vitamins from eggs, meat, and big fish,” most opinions ran to vegetables as nutritious foods, with little appreciation of the nutritional value of ASF. For example, several participants strongly declared that meat and peanuts were bad foods for children. Furthermore, participants offered many examples of nutrition-related knowledge that simply was wrong. One example was: “Sweets are good for children because these raise their intelligence.” Another participant stated that bananas “have iron, calories, and give the body strength.” While bananas do contain iron, they are not a particularly good source.

The participants considered fruit to be a good buy for children’s nutritional needs. “Fruits are very, very good for health.” Imported fruit and local fruit were seen as separate categories. Imported, more expensive fruit, such as apples and grapes, were frequently mentioned as nutritious. The local fruits listed included kul borroi, guava, green coconut, tomato, banana, carrot, papaya, pomegranate, and mango. Since imported fruit is more expensive, it was often noted by the participants as being more nutritious.

WHAT DOES NUTRITION DO?
The participants believe that nutritious foods impart physical and mental strength, provide energy, support health, and promote intelligence. The participants were emphatic that they wanted to provide good food for their children. For example, “vegetables are palatable to have and always good for health of everyone, even for a newborn baby,” and “all green leafy vegetables are good for high vitamins.” There was some consensus that green leafy vegetables were highly nutritious. For example, some of the participants thought that green leafy vegetables helped the eyes and the brain work better and were the “best foods” to eat. “They have vitamin C and are better than other vegetables.” However, as noted earlier, some of the participants were ashamed to purchase green leafy vegetables because they were cheap to buy, and they perceived other vegetables, ones that were more expensive, to be more nutritious.

HOW DO MEN KNOW WHAT NUTRITION IS?
When asked the source of information they rely on to inform them about nutritious foods, the participants identified scientists, doctors, and family members. “These foods are good because scientists say it is so.” One participant said he read the information about nutritious foods in a book. The opinions of doctors were valued above other sources of information.
BAD FOODS FOR THE HOUSEHOLD
A remarkable variety of foods were perceived as “bad.” The participants expected foods to make them feel good. Bad feelings, sensations, and illness influenced their opinions of “bad” food, with bad feelings ranging from illness to discomfort, such as gas. Unseen or imperceptible factors like chemical additives or pesticide contamination also influenced the participants’ opinions about bad food.

Most common among these purchases were foods that tasted good but were not good for health, such as fried foods, foods cooked in too much oil (e.g., sweetmeats and potato fry), biscuits, and cigarettes. Also common were foods of inferior quality due to defect or deformity, unhygienic preparation (including chemical additives), or spoilage. Another type of bad food was food that had ill effects on the body, such as inducing dehydration or introducing worms and other sickness. For example, “We eat potato fry because we work under the sun. We need to eat watery items to avoid koshaa” (a disease that happens from the sun and dehydration).

Among those participants who favored a balanced diet including both ASF and vegetables, moderation (rather than diverse nutrient sources) was the primary justification: “There are some rules to having food. For example, if we eat 1 kilogram of meat at a time, definitely we will have digestion problems. So moderation is good for health.” Some participants tried to have meat and animal products daily, but “we don’t eat [ASF] every day because we are poor.” Others disagreed with this practice, stating that “meat and fish are not equally good for having every day.” Participants agreed, however, that vegetables were important every day.

Beef was identified by some participants as a bad food. Participants in one FGD spoke in depth about why beef was a bad food, with the common responses being that it caused allergies and skin diseases. In one FGD, many participants believed vegetables to have more “power” than meat and eggs. When asked to compare a diet of only vegetables with one of only meat, eggs, and fish, some felt that a balance of both is best, but others felt that a vegetarian diet was the better option for nutrition.

One participant had strong feelings about pesticides: “All items are now poisonous because all food items are produced and processed with chemical pesticides, even fish, beef, and poultry are reared with the feed mixed with chemicals.”

FOODS FOR CHILDREN
GOOD FOODS FOR CHILDREN
The participants reported that they bought specific foods for children, such as milk, eggs, fruit, fish, rice, potato, and banana. Khechurii, a mixture of pulses and rice, usually with vegetables added, was considered a nearly ideal food for children: “We give khechurii, as it is nutritious.” In addition to khechurii being considered an appropriate food for children, the participants noted that doctors and health workers recommend feeding it. The participants knew that vitamins are good for children, although they referred to vitamins as a generic item with little specific knowledge of individual vitamins or the fruits and vegetables that contain them. As mentioned above, however, the participants’ misconceptions about vitamins were common, such as the belief
that the price of a food item directly related to its nutritional value: “There is not much extra money to buy vitamin items like expensive vegetables.”

The participants gave children nutritious foods to improve strength, energy, and intelligence. The nutritious foods most commonly described were vegetables, fruit, and fish. Some specific examples of participant statements include these:

- “By eating fish, children are getting the benefits of vitamins and iron they expect. Fruits improve energy and give plenty of vitamins.”

- “Fruits develop the body and intelligence.”

- “Drinking milk keeps the body healthy, improves energy, and is appetizing.”

- Nutritious foods “increase protection power against diseases so children do not fall ill.”

**GOOD FOODS FOR SICK CHILDREN**

Participants reported that they would feed a sick child what they considered to be nutritious foods like pineapple and tomato juice. The participants said that, generally, a family will give an ill child more liquids with normal foods. Most participants agreed that sick children do not like to eat and frequently lose their appetite, so they try feeding different items. The foods that men provided in order to coax a sick child into eating included cake, biscuits, buns, bananas, and snack foods like cheera (flattened dry rice mixed with molasses and sugar). “My kid doesn’t want to have rice. I am forced to buy biscuits. I have to keep my kid alive.”

The participants in all four groups showed a clear consensus that when a child refuses to eat, sweets are offered. “When a child shows reluctance to eat nutritious foods we try to persuade them to eat.” “If they refuse they are provided with cake, pitha, or biscuits.” “If they refuse to eat, after a while try to feed them whatever they like.” According to the participants, getting a child to eat anything was more important than getting them to eat nutritious foods. For many participants, their understanding of feeding for sick children focused on providing favorite foods and liquids, without consideration of nutritional content.

It should be noted that some of the participants offered a surprising alternative to sweets as a way to stimulate a sick child’s appetite: bitter or sour foods. These were believed to restore taste to allow the child to eat: “A child with fever will drink lemon juice.”

**WHAT DO CHILDREN WANT?**

Participants reported that they tried to save money at the market to budget for things they said children love to eat, such as cake, pitha, and biscuits. Some mentioned feeding their children special foods like chocolate, biscuits, chips, and ice cream. Many mentioned Horlicks\(^1\) as something children love and that “increases the size of a child’s brain,” although they also noted that households rarely purchased it due to the high cost.

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\(^1\) A hot malted-milk drink powder that is fortified with vitamins and minerals.
The participants mentioned other foods that children “like just as much as sweets” such as: fruit (juice, grapes, orange, tomato, mango, apple, banana, and pomegranate); vegetables (olives, pickles, carrot, and pumpkin) and ASF (milk and eggs). As has been mentioned, most of the participants agreed that “there is nothing better than fruits.” However, the participants perceived that sweets cost much less than fruit, and so they bought sweets instead: “Sweets are available and at a cheap price.” “Nutritious food or fruits are costly but cakes are cheap so I buy them.” “I did not have enough money so I bought cake.” In actuality, some fruits (e.g., banana) cost roughly the same as sweets, especially if purchased in bulk. For example, one banana costs around Taka (Tk) 4, and sweets such as biscuits (Tk 12 per packet), cakes, and buns (both Tk 6) are roughly comparable in price.

BAD FOODS FOR CHILDREN

Ironically, considering the common practice of giving sweets to children, nearly all participants agreed that sweets were bad foods for children to eat. The participants knew that sweets were not the best foods nutritionally, but happiness was prioritized over nutrition. This motivation seemed to outweigh the negative aspects of giving sweets. The participants reported many ill effects of giving children sweets, including worms, diarrhea, upset stomach, dental cavities, and spoiling children’s appetites for nutritious foods. Some examples of participants’ opinions included these:

• “It is possible that the child may become happy, but may then fall sick after eating sweet foods.”

• “Generally children like sweet foods very much. They are happy to get them. That’s why we should take care of the health issues after keeping them happy.”

• “When children cry, we provide cake, pitha, or biscuits. At the time, we do think about whether these foods will improve or deteriorate the children’s health.”

Participants stated they would never give yogurt to their children under the age of two, nor would they feed them spicy or hot-temperature foods. One group noted they would not give children under the age of two peanuts, because they are too hard and hamper digestion (although, conversely, another group felt that peanuts were highly nutritious and good for children). Some issues related to cold-temperature foods were discussed. One participant noted, “We don’t buy ice cream for children because they can get a cold and cough if they eat ice cream in the winter.” Another participant mentioned, “Children can become sick if they have ice cream.” Despite these feelings, the participants might give in to children’s pleading for ice cream and other similar foods even if it was considered a food that should never be given to a young child: “Sometimes we are forced to buy ice cream because the child demands it.” Chanaachur (a wheat-based, salty and sometimes spicy, crunchy snack mix) is another food children demand yet was considered bad for children because it causes gas, diarrhea, and stomach pain.

There was a strong distinction between “outside” foods and foods prepared in the home. The participants described outside foods as packaged and imported foods. Outside foods could be either processed or fresh. The participants felt that children develop less interest in eating rice and vegetables if they fill up on outside foods like chips and biscuits. Generally, the participants felt that buying biscuits, cake, and other
outside foods for their children was wrong, but most said they did it anyway. Some participants mentioned dirty and unsafe conditions were prominent where these foods were created and packaged, and that this was an important reason that children should not consume them. Some participants believed these foods could cause diarrhea, damage to teeth, and loss of appetite. The participants strongly distrusted industrially produced or processed foods, preferring instead foods grown and produced in the community.

AFFORDABILITY AND SWEETS FOR CHILDREN

The participants included sweets as a “must buy” at the market. Some participants stated that they did not need to make sacrifices to purchase sweets: “children want to eat sweet foods,” “money is not a problem for this matter,” and “these are easily available and can keep them happy.” However, most noted that at times they must forgo other purchases—even food purchases—in order to buy sweets. Some illustrative responses demonstrating this were these:

- “We buy sweet foods since the children become happy to get them, but sometimes we think about money. We have to maintain our family considering the income side. We also have to keep the child happy.”
- “Sometimes I buy cakes by buying a smaller quantity of rice. Because when the child cries we need to give him something.”

Other participants acknowledged that in order to purchase sweets, they bought less of the staple foods, fruits, and vegetables. Some mentioned sacrificing their own betel leaf and cigarettes. The nutritional consequences for children of sacrificing some foods to purchase others is unknown since sufficient nutritious food might be available for children even if the household purchases less of other foods for adults. The primary nutritional problem would arise when husbands purchase fewer nutritious foods for children in order to purchase sweets, as was voiced by one participant, who claimed that “at times, buying fruits for children is forgone in favor of cakes.”

A small subset of the participants did prioritize buying fruits and vegetables over sweets. For example, “I do not give up other foods for buying cake, pitha, or biscuits. Instead, I buy grapes, sweet fruit papaya, and oranges.” “We can buy grapes, apples, and oranges instead of cake, pitha, or biscuits. Children become happy to get fruits.”

PURCHASE MOTIVATIONS: PROMOTING HAPPINESS, AVOIDING CONFLICT

The participants reported many goals and motivations for giving foods to children, ranging from giving sweets for the emotional rewards for the parent and the child to giving nutritious foods to nourish growth and development.

HAPPY CHILDREN

Giving children cake, biscuits, and other sugary foods, collectively referred to here as sweets, was very common, even though the participants seemed to know they were not nutritious foods good for children. The most important motivations for giving children sweets were emotional triggers: sweets made the child and the father happy. The findings indicate that the participants prioritized familial well-being and happiness above other things, even over health considerations.
According to the participants, one strong motivator for giving sweets to children was making them happy, especially when a child was being difficult: “Everyone in the family desires that a child always remains jolly,” and “Every parent wants to make their children happy.” Related to this is the participants’ use of sweets for pacifying an upset child:

- "Sweet foods are more important than nutritious foods because we have to give sweet foods when the baby cries or makes demands for something."
- “We don’t want the baby to cry, it is uncomfortable.”
- “To stop the baby from crying, the cake, biscuit, pitha should be kept handy.”

A recurrent theme related to pacifying children was about the timing of giving sweets. Several participants mentioned that sweets are handy for pacifying a child who is bothering their mother while she cooks. This was an especially important concern in the morning, when children awaken hungry but must wait for their mother to prepare the first meal. The convenience of sweets, easy to fetch from a nearby tea stall, made them ideal for this purpose. “Sweets are also easy to get if children cry or demands something.” Of course, this raised the concern that a pacifying sweet might displace normal food consumption, and more than one respondent mentioned that “if given in excess, [sweets] can spoil the appetite of taking normal food.”

The participants appreciated that sweets were convenient and accessible. “At times when there is no other food and children are crying, then I buy cake, pitha, and biscuits for them, but sparingly.” “It is better to fill the stomach with cake, biscuit, pitha rather than not having any food.” “We would buy sweets to fulfill their hunger.” “If there is no more food in the home, give sweet foods to make the children happy.” Participants frequently mentioned that feeding sweets to children before food was prepared was a common practice, especially first thing in the morning.

**HAPPY FATHERS**

Additionally, the participants discussed giving sweets to children to satisfy their own happiness. One participant felt his child loved him more and he was happy his child was well behaved: “I buy sweets because the children become happy, come to me, get in my lap and smile,” and, “Yes my child becomes happy to eat sweets. I of course feel better because my child gives a smile, eats it [the sweet] and comes closer.”

A few minority opinions did exist on this subject, however. Some participants frowned on the practice of giving sweets to children because it provided a short-term rather than a lasting benefit, as summed up in one man’s statement: “Generally children are happy having sweet foods temporarily. Every family should keep aware of long-lasting good health and avoid temporary happiness.” Nonetheless, the opinion was nearly universal that if children complained enough for sweets, men would always give in to them: “No, I do not give sweets, but when my child becomes insistent, then I am forced to give them.”

**HAPPINESS AND CONFLICT AVOIDANCE**

The participants highly valued being good husbands to their wives in order to keep the family happy and avoid conflict. According to the participants, a good husband
responds to his wife’s wants and wishes, especially with regard to purchasing the food items she requests. The primary motivation identified for current market purchases was happiness and avoiding conflict in the household. The participants overwhelmingly mentioned that they wanted to be happy as a father and feel loved by their children. A healthy child was important, but secondary to a happy child.

The participants felt like they had little control over what a child wants, and would provide food even if doing so was contrary to what they thought was appropriate. “Men decide what to give children, but sometimes they cry for food. Children see other children eating sweets and they want it too. There is nothing a man can do.” The participants were sensitive to their children’s hunger or desire for food, and sought to satisfy or pacify them with food. They gave children food to ease crying, even if the child was not hungry.

**WIVES’ INFLUENCE**

The participants valued joint decision-making to keep the family happy and at peace. There appeared to be a high degree of discussion between husbands and wives about market purchases. The participants saw women as knowledgeable about household food matters, especially because they know what and how to cook for the family. They respected their opinions and acknowledged their wives’ input, although the study did not track whether or not men actually bought what women requested. The participants believed that making decisions together was a key element for a happy and peaceful home.

All of the participants reported making decisions about what items to purchase at the market with their wives. Illustrative statements include: “If she asks me to bring something, I do, especially vegetables, eggs, and milk,” and “I do not know whether it is healthy, but I buy what she wants to eat.” Responding to what women want was apparently a factor in determining if a man was a good husband. Foods that participants mentioned “good husbands” bring to their wives included fish, fruit, sweets, vegetables, eggs, milk, meat, curd, and fried foods. Interestingly, the participants described different foods depending on if their wife was pregnant or not. The foods participants mentioned they brought to their pregnant wives were fruit, fish, eggs, milk, vegetables, Horlicks, and sweets.

This is not to say that the participants consulted women on all purchases. On the contrary, they reported buying many daily necessities without any input from their wives. These items included “regular family needs, like rice, dal, oil, and onion,” “new things from the market, like vegetables and fish,” and sweets.
The participants seemed to be highly motivated to foster a happy, peaceful, and harmonious household environment, and cited this as the primary reason why decisions were made jointly:

- “We discuss to keep peace and harmony in the family. If I would buy something but my wife did not like it, it will create a problem. It is wise to discuss.”
- “If we make decisions jointly, peace remains in the family. We sit to decide together before going to the market what to buy or which one will be good to bring home. This keeps the family in peace.”
- “If I buy something from the market without deciding together, it may cause problems. At times she suffers silently. If we decide jointly then there will be no anger.”
- “This family belongs to both of us and we should accept the bad and good of our family. That is why we make decisions jointly for future happiness.”

According to the participants, although the male head of the household is the final authority on food and non-food items bought at the market, and when they are bought, women seem to have a say in what is purchased. Men appreciate a woman’s selection of foods that go together for preparation and taste. Efforts to promote more nutritious foods among women may thus influence the foods that men purchase:

- “I listen to what my wife says. I also have my say. Then the decision made becomes good.”
- “At first we make a list of shopping items, and then check how much money there is. Sometimes my wife tells me to buy this or that. Later I decide according to the price and amount of money I have.”
- “She tells me what to buy. I try to buy all the things if money permits.”
- “If we decide together then everything is good. Men cannot always understand what is good or what is bad.”
- “My wife advises me regarding my baby’s food.”

The participants reported that women value the size and value of food. For instance, “My wife becomes very happy when I bring home big fish.” “If I buy big fish then my wife loves me more.” Interestingly, all of the participants specifically mentioned fish as big. The participants felt women value expensive foods traditionally associated with people with higher socioeconomic status, for example “costly ice cream” and pilau (rice). “Pilau is rich men’s food. It tastes good and is also good for health.” The participants also felt women want variety: “If I buy the same thing again she is angry.” “If I bring the same vegetables or fish then she opposes.” Some women also value nutrition: “Once I bought an unknown type of biscuit, then she said that rather it would have been good if you had bought grapes with this money.”

**BEING A “GOOD HUSBAND”**

According to participants, a good husband must ensure that the family has enough food. Purchasing foods at the market is a responsibility men take seriously because they feel obligated to provide for the family and make sure no one goes hungry.
Men’s marketing choices reflect, positively or negatively, on their image in the community. Good husbands “manage food for the family” and must “properly manage food for the children.” Additionally, buying fresh vegetables that are clean, shaped right, and without infection was a sign of a clever buyer and a good husband.

The participants did not report spending money to purchase items known to be bad for health, like tobacco or betel leaf. “We try to avoid betel leaf. We eat betel leaf only at festivals.” “Gul [tobacco] is bad which we want to stop having [sic].” These were not considered useful purchases and were seen as excessive, although the participants might not have been completely truthful in the interviews concerning these types of purchases, and may have told interviewers what they thought they wanted to hear. According to the World Health Organization (2011), tobacco smoking is common in Bangladesh: 46 percent of males over the age of 15 use tobacco and 28 percent smoke cigarettes. As one participant noted: “The majority [of] men have cigarettes.”

Nonetheless, participants felt that good husbands “do not spend money on bad activities”: “If I buy biscuits, betel leaves, cigarettes, my wife does not like it.” “She becomes angry if I buy intoxicating types of things.”
CONCLUSIONS AND RECOMMENDATIONS

Based on the findings summarized above, five recommendations are proposed for promoting the purchase of nutritious foods by men, specifically for pregnant and lactating women and children under two years. One of the recommendations is for social change, and four are for behavior change communications. The social change recommendation addresses an issue that underlies all of the behaviors to be promoted, and a successful campaign to promote this social change would be expected to also substantially improve behavior change. All of the proposed recommendations for social and behavior change will need to evoke men’s primary motivation: that men ideally strive to achieve happiness in their home and avoid conflict.

SOCIAL CHANGE RECOMMENDATION

Currently, men’s perceptions of “nutrition” are based on many misunderstandings and misconceptions about what foods are nutritious, what makes a food nutritious, and the cost of purchasing a nutritious diet for children under two years of age and girls/women of reproductive age. For example, men are not aware that nutritious food includes not only vegetables but also ASF. These misconceptions limit the potential of behavior change communications to promote nutritious diets, since men are unaware of the necessary elements for creating a nutritious diet. Creating an environment that promotes pro-nutrition market purchases will require change on the social level by redefining the social norm of what nutrition is.

Achieving a major change in the perception of what “nutrition” means is indeed ambitious, but the widespread belief that vegetables are highly nutritious—presumably the result of previous campaigns promoting vegetable consumption—suggests that similar success may be possible for promoting new concepts of what nutrition is and how it can be obtained.

Five themes that emerged from this study underscore some key areas where social change can support the promotion of food purchase and child feeding practices that are associated with better nutritional outcomes for women and children: (1) men believe that less expensive foods are less nutritious; (2) men believe that nutritious foods are expensive and thus are not a “good buy” given restricted resources; (3) men believe that only wealthy families can afford nutritious foods, and they would not purchase “poor man’s food”; (4) while aware of the nutritional value of vegetables, men do not consider ASF as an important source of “nutrition”; and (5) men believe that they must give sweets to children because this is the only effective way to pacify them and keep them happy. By promoting the following five themes as alternatives, a positive social environment can be created to support the adoption of new marketing and child feeding practices:

1. Foods that are less expensive are not necessarily less nutritious.
2. Nutritious foods can be inexpensive and a “good buy.”
3. Wealthy families purchase highly nutritious inexpensive foods such as small fish and eggs.
4. There are many ways to meet nutritional demands of children under the age of two.
5. Children need not only vegetables but also ASF for better nutrition.

SUGGESTIONS FOR PROMOTION OF THEMES

- Recommendations, in communications campaigns, from doctors (the most trusted source of information) concerning the high nutritional value of inexpensive yet nutrient-dense foods.

- Drama (in the community or through mass media) in which a clever husband, who always provides well for his family and uses money wisely, shows a friend how he chooses low-cost but nutrient-dense foods within his limited budget.

- Drama (in the community or through mass media) in which a poor man observes (to his surprise) a wealthy man buying low-cost “poor man’s food” and asks him why he would do so.

- Drama (in the community or through mass media) in which the male head of a happy family manages to pacify a cranky child with nutritious snacks (e.g., fruit, egg, or specially-made nutritious snack), earning him the affection of the child and the admiration of his wife.

- Reinforcement of themes promoted in drama and mass communication with interpersonal communication approaches and print materials.

OPPORTUNITIES FOR SPRING

SPRING could work closely within existing groups such as the National Nutrition Working Group, the Scaling Up Nutrition (SUN) civil society group, the Revitalization of Community Health Clinics in Bangladesh (RCHCIB) NGO Coordination Meeting, and at other national meetings to develop and promote a new philosophy with all national nutrition stakeholders. For example, this new philosophy must shift attitudes and behaviors away from the current view of nutrition being limited to vitamins and vegetables and to include ASF. Methods include:

- Promote a new perception of nutrition at upazila and union advocacy events by mainstreaming nutrition into health and agriculture.

- Conduct courtyard sessions with men and influential family members about nutritious food items to showcase communications materials and dramas developed.

- Hold community group meetings that include a local doctor (who has a great influence on the community) to discuss best practices.

- Use the Agriculture Information System (AIS) to send nutrition-related short message service (SMS) messages (per the recommendations above) to subscribers (male and female farmers).

- Leverage opportunities with partners such as the SHIKHA and Sisimpur projects to showcase the above-noted messages in both national and local mass media campaigns.
BEHAVIOR CHANGE RECOMMENDATIONS

1) **Behavior: Fathers Purchase a Wider Variety of Foods**

The current practice of purchasing the same selection of foods, and the belief that nutritious foods are expensive, both limit dietary diversity. Even when men have extra money, they purchase more of the same foods rather than foods with a higher nutritional value. With extra money, men should be encouraged to purchase more small fish, local fruit, and eggs in addition to normal market purchases to feed a wider variety of foods to pregnant and lactating women and children under the age of two.

**Next Steps**

- Develop promotional messages appropriate for SMS, short slots for television, radio, and/or print.
- Promote behavior through available media channels including SMS messaging, published newsletters, community radio programming, an agriculture extension television program on a national television station, and at their agriculture information and community center as part of the AIS.
- Work with SHIKHA, WorldFish, and other partners to streamline communication on eggs and small fish for consumption by pregnant and lactating women and children under the age of two.

**Opportunities for SPRING**

- Incorporate nutrition into AIS and Ministry of Health and Family Welfare (MOHFW) programs through available media channels.
- Increase coordination among nutrition programs at the upazila and district level.
- Promote purchasing a wider variety of foods through FNS sessions.

2) **Behavior: Tea Stall Owners and Distributors Offer Nutritious Snacks for Children that Fathers Can Purchase**

Currently, men buy sweets for their children at the local tea stall. Buying sweets is convenient and quick and provides an opportunity for men to visit a popular social outlet. If equally inexpensive and convenient, but more nutritious, snacks were available at the tea stall—snacks that would pacify children—men likely would purchase them because they know that sweets are not the best option for children’s nutrition. Instead of purchasing sweets, men could buy local fruit or other nutritious snacks for children.

Engage tea stall owners and food distributors to ensure a communal understanding of what a nutritious snack is and why it is important for children. Tea stall owners must stock (or continue to stock) the identified nutritious snack. It is important to ensure limited disruption to the current practices of men and ensure tea stalls do not lose business.

**Next Steps**

- Men, tea stall owners, and/or distributors identify alternative foods that are convenient, inexpensive, and pacify children to serve as nutritious snacks. The snack food
will need to meet tea stall owners’ and distributors’ needs for storage, transport, and profitability. It will need to meet the fathers’ needs for convenience, cost, and child-pacification efficacy.

- Test alternative snacks such as khechurii and fruits.
- Develop a business model and enlist partners for the introduction of the product.
- Communicate with husbands/wives about sweets that cause loss of appetite, and, due to unhygienic preparation, create dehydration, diarrhea, and other illnesses. Promote an alternative that is shown to be acceptable.

Opportunities for SPRING
- Promote identified alternative nutritious snack food options through the AIS system’s media channels.
- Consider offering to promote the product among project participants as an incentive to attract participants.

Behavior: Make Homemade Nutritious Snacks for Children
Currently men buy and give sweets to children because they are easy, accessible, and cheap foods that children love. Instead of purchasing sweets for children, men can purchase ingredients for women so every week they can make a homemade nutritious snack food. One option could be “improved” pitha. Pitha is a widely popular food in Bangladesh made of various combinations of flour, molasses, and other ingredients. Recipes vary considerably, but existing recipes can be modified (or recipes that are more nutritious can be promoted) to create a more nutritious alternative to the nutritionally inadequate snacks men currently provide. Ideally, this alternative pitha would need to keep well so that women could prepare it infrequently (i.e., once each week), to ensure that preparing the snack would not excessively burden women as well as to help meet the requirement that the snack is conveniently available when a child needs pacifying.

Next Steps
- Identify an alternative nutritious snack and test its acceptability with children, mothers, and fathers. Preferably they identify a recipe that is already in use that can be modified to be more nutritious to limit any additional work for women.
- Develop communications promoting husband/wife dialogue so that fathers purchase the ingredients needed to make the snack.
- Develop communications promoting the snack as a nutritious contribution to a happy family.

Opportunities for SPRING
- Introduce and promote the homemade snack through peer-to-peer nutrition-related community activities with SPRING households and health, aquaculture, and horticulture partners.
• Potentially engage Sisimpur to include older children in the process of making nutritious pitha.

• Potentially organize snack preparation as an income-generating activity for rural women.

• Conduct recipe demonstrations at community health fairs and other events.

• Create videos on preparation of healthful snacks through use of Digital Green technology.

• Promote the identified nutritious snack foods through FNS sessions.

3) **Behavior: Not to Fill Up Children on Sugary Snacks**

Participants reported feeding their children first thing in the morning before food is prepared (before meals) to distract children who disrupt the mother’s cooking, and to pacify an impatient child who is hungry for breakfast. Men reach for sweets as a snack food because they are easy, accessible, and affordable.

**Next Steps**

• Work with families to identify alternatives for pre-meal snacks such as a game, a spoonful of rice, or the “nutritious alternative” snack described above.

• Develop promotional communication around snack timing and delaying pre-meal snacks, and emphasize the motivation of happy families (and the happiness of a well-fed child).

• Encourage play and promote other ways of making children happy before meals that do not provide extra work for families.

**Opportunities for SPRING**

• Introduce a communications approach through peer-to-peer nutrition-related community activities to SPRING households, and to health, aquaculture, and horticulture partners.

• Promote alternatives at FNS sessions.


