KEY FINDINGS

- WFP country office conducted an another round of MDD-W assessment in its all six operational regions in Afghanistan remotely through mVAM.
- In the surveyed provinces, the ratio of PLWs achieving MDD-W was very low with only 20 percent.
- 92 percent of the respondents (women) reported improvement in their health and well-being by consuming super cereals.
- Majority of the respondents reported daily-labour wage and farming as their main income sources while a limited number of respondents reported that they mainly rely on remittances, gifts and assistance.
- The level of illiteracy is indicated high for both men and women by the respondents. Also, more than half of PLWs get their information on Health and Nutrition from nearby clinics.

ASSESSMENT BACKGROUND AND METHODOLOGY

In October 2019, World Food Programme (WFP) conducted a minimum dietary diversity for Women (MDD-W) assessment in 22 provinces of Afghanistan. The aim of the survey was to check the MDD-W and to evaluate the impact of the WFP provided ration- a super cereal in supplementary feeding programmes for malnourished-pregnant-and-lactating women (PLW).

WFP adopted both quantitative and qualitative approaches towards the MDDW survey. All interviews were conducted with women through the help of a questionnaire which contained 17 questions. The interviews were conducted remotely through a phone-based format. A total number of 222 pregnant and lactating women were interviewed in the survey by bilingual operators.

Household composition

The phone-call interviews showed six as the average (median) family size in the targeted areas and stated that on average one male and female up to the age of 18 is living in their household. Also, survey indicated that the average age of women respondents was 25 years.

Additionally, the survey presented that the respondents were on average 18 years old while getting married and have given birth to three living children.

Highlight in Green are the assessed provinces
Minimum Dietary Diversity – Women

MDD-W is a dichotomous indicator of whether or not women 15–49 years of age have consumed at least five out of ten defined food groups the previous day or night. The proportion of women 15–49 years of age who reach this minimum in a population can be used as a proxy indicator for higher micronutrient adequacy, one important dimension of diet quality.

(www.fao.org/3/a-i5486e.pdf)

In the 22 surveyed provinces of Afghanistan, the ratio of the women achieving MDD-W was very low as the assessment indicated about 20 percent of the PLW achieved MDD-W while the remaining 80 percent did not. Taking CSB as a separate food group in the analysis resulted in 23 percent MDD-W which is slightly higher than the previous figure.

Figure 1 depicts the situation of the women who had consumed 5 food groups or more in the last 24 hours (MDD-W Yes) and the women who had consumed less than 5 food group in the last 24 hours (MDD-W No). Women, who met MDD-W criteria, had consumed mostly cereals, dairy, meat, vegetables, pulses and fruits. However, the women who did not meet the MDD-W criteria had consumed less of eggs, pulses, dairy, nuts and etc. The reason for their high cereals intake is bread which is very common and widely used in Afghanistan.

Super Cereal In-Take

The survey revealed that most of the women are receiving information on super cereal benefits and preparation from midwives at nearby clinics. A high number of respondents mentioned they prepare porridge, cookies and bread from Super-Cereal as instructed in the clinics. Further, 64% of women indicated that they are the sole consumers of the super cereals while 36 percent stated that their family members including children and adults also consumes super cereals with them. Moreover, according to 92% of the respondents, the super cereals was beneficial as they noticed significant improvement in their health and wellbeing while the rest of the 8 percent did not notice any improvement in their health.

Figure 2. Health improvement noticed by PLWs as a result of super cereal in-take
Additionally, the survey also gives a snapshot of the PLWs knowledge on the tea in take during or after the meals, **as when the tea is consumed during the meal with iron rich foods the absorption of iron is decreased which as a result causes Anemia (blood deficiency) While taking tea between the meals decreases the impact.** As per the response of the women on tea intake is indicated below;

**Tea Intake with Meals**

13 percent of the women responded they always drink tea with their meals, 26 percent drinks it sometimes, 25 percent rarely drinks tea, 36 percent mentioned they never take tea with their meals.

**Tea Intake After the Meals**

Regarding taking tea after the meals (within two hours), 21 percent of the female respondents stated they always drink tea after their meals, 54 percent drinks it sometimes, 21 percent rarely drink tea while 5 percent females never drink tea after their meals.

**Women literacy level**

The survey asked women about the literacy level. The data suggests that the majority of the women stated “no” to reading and writing with 78 percent, 9 percent said yes but with difficulty and the remaining 13 percent mentioned that they are educated.

Furthermore, the respondents provided information related to their husband’s reading and writing knowledge, based on their response the figures of literate men were 17 percent, which is 4 percent higher than women literacy percentage. While 71 percent men were indicated as illiterates which is comparatively lower than illiterate women and 12 percent men were specified with having difficulty while reading and writing.

**Source of information on Health and Nutrition**

In addition, the women were also asked about how do they get most of their information on Health and Nutrition (multiple choice question); on which approximately 84 percent of the PLW responded on going to any nearby clinic, 31 percent responded on asking midwives on any health concerns, 9 percent mentioned they ask their husbands and 8 percent responded on asking other women in the village who works as a community health workers (see figure 3).

![Figure 3. Source of getting health and nutrition related information](image-url)

PLW cited how immediate should they put a new born to breast after birth, on which their response was moderately positive; about 81 percent indicated that the infant should be put to breast instantly, 16 percent mentioned ‘after few hours’ and the remaining 3 percent replied with ‘after a day’. 94 percent of the women further stated that they fed the first milk (first yellow/orange and thick milk) to their new born babies while only 6 percent of women did not feed the first milk to their infants.
**Minimum Dietary Diversity — Women**

**Household Income Source**

The assessment studied the sources from which the targeted WFP beneficiaries’ households earn their income. The data cited that daily labour wage remains the largest source of livelihood for surveyed population in 22 provinces of Afghanistan with 45 percent.

Farming such as crops and livestock, stand as the second main source of livelihood for households with 23 percent and salaried jobs are reported in third category by beneficiaries, 13 percent in term of percentage. 10 percent respondents reported that their household rely on skilled labours. In addition, petty trade, small shops and selling on roadside in assessed areas are reported 7 percent by women. The residual two percent indicated remittances, gifts and aids as their core source of income.

**Challenges faced by Surveyed Beneficiaries**

Majority of respondents (67 percent) stated they did not face any challenge during receiving super cereal, while minority of interviewees said the distribution site is far from their location and they walk for more than one hour to get assistance. As well they stated super cereal was not in stock and they returned home without getting super cereal, long queues in health clinic caused them to wait for hours in order to get aids and safety issue was another point mentioned by respondents which caused them to get the assistance with difficulty.

The above minor mentioned challenges did restrict the access of some women to the supply of super cereal for a short period of time. However, in general they did receive the super cereal in time.

**Survey Challenges**

During the MDD-W assessment there were several challenges faced by the mvAM team.

- The first and foremost challenge during the survey was the limited access to mobile phones by women in the rural locations, therefore the mvAM team would get the contact details of each Clinic midwives and doctors to use their phones for interviewing the women.

- Another main challenge which would extend the survey duration was contacting women mostly in the rural areas due to cultural limitations. However the operators would ask the midwives in the clinic to interview the females (who were not comfortable on being interviewed on a phone) on their behalf and therefore would tend to complete the interviews.

- Lack of women referrals to the assigned clinics was another challenge that would extend the survey duration and also would affect the targeted sample.

Despite all the challenges, the survey was successfully completed by getting information from 222 women in 22 provinces across the country.

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