

भन्छिन् आमा

समयमै स्वस्थ शुरुवात

Bhanchhin Aama Radio Program DESIGN DOCUMENT Phase-II (39 Episodes)



FY 2014-2015

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The contents do not necessarily reflect the views of USAID or the United States Government.

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ACKNOWLEDGEMENT

I would like to acknowledge all the agencies and individuals who contributed considerable time and effort to the development of the "**Bhanchhin Aama Radio Design Document - Phase-II**".

In January 2014, a Design Team of 51 representatives including National Health Education, Information and Communication Center, Child Health Division, Family Health Division, Department of Livestock Services, Department of Environmental Sanitation and Disaster Management Section/Department of Water Supply & Sewerage; Suaahara Program Managers, SBCC team, GESI Specialist, Social Mobilization and Communication Officers, LINGO Field Supervisors; Audience Representatives - Social Mobilizers, 1000 days Mothers, pregnant mothers, Mother-in-law representatives from Syangja, Taplejung, Mustang, Darchula, Nawalparasi, Rupandehi, Solukhumbu, Lamjung, Baglung, Script Writers, Production House and External Development Partners came together during a 4-days long workshop to create design documents for the "**Bhanchhin Aama**" radio program.

The primary objective of the workshop was to outline in detail the purpose, objectives, content and sequence of 39-episode of the "**Bhanchhin Aama radio magazine serial Phase-II**". The amount of work completed during that week was extraordinary and all those who participated are congratulated on their achievements. I would like to extend my sincere thanks to the Design Team members for their contribution in creating the design document.

My appreciation goes to those who provided valuable comments during the draft revision process especially the Reproductive Health & Child Health IEC/BCC Technical Committee meetings held twice on 17 January, 2014 and 7 February, 2014. My appreciation also goes to the design document review team members from Suaahara who enthusiastically reviewed design document and provided valuable comments. I also would like to appreciate Bindu Pokharel Gautam, GESI Specialist, Suaahara for technically reviewing this document through GESI lens as well.

Finally, I would like to thank Hari Sharan Karki, Chief, Reproductive and Child Health Communication Section of this Center for his important role in the development of this Design Document. Similarly, special recognition is extended to the outstanding contribution of Dharma Raj Bajracharya, Bhanchhin Aama Radio Program Focal Person and SBCC Program Officer, Shreejana K.C., SBCC Capacity Building Specialist, Pranab Rajbhandari, SBCC Manager and Caroline Jacoby, Senior Program Officer, JHU-CCP Baltimore for their facilitation of the Design Document Workshop, Design Document Review meeting and development of this design document and dedicated support and expertise.

Sunil Raj Sharma
Director

National Health Education, Information and
Communication Center



BhanchhinAama Radio Program Design Document - Phase-II 2014-2015



SIGNATORIES

This "Bhanchhin Aama Radio Program Design Document - Phase-II" is developed in accordance with ministerial policies including the Multi-Sectoral Nutritional Plan (MSNP), National Nutrition Strategies, National Communication Strategy for Maternal, Newborn and Child Health 2012-16 of the National Health Education, Information and Communication Center (NHEICC), Ministry of Health and Population, National Hygiene and Sanitation Master Plan 2068 B.S. and Agriculture Development Strategy 2012/13. The Design Document was reviewed and finalized by distinguished panel of content specialists from government (NHEICC, Child Health Division, Family Health Division, Agriculture, Livestock, ESDMS/DWSS) and Suaahara team. Based on this Design Document Phase-II, scripts will be developed and radio program will be produced.

We are endorsing this Design Document for implementation by signing below. We would like to thank all involved for their valuable time and overall support in producing this design document.



Sunil Raj Sharma
Director

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and Communication Center



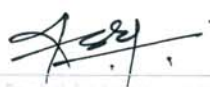
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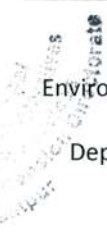
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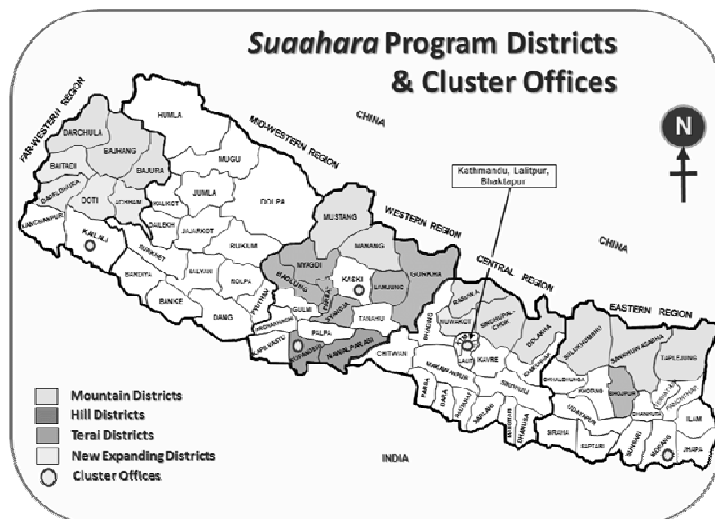
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Suaahara



Save the Children
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Rationale for Suaahara Magazine Radio Program (Introduction)

Suaahara is a five year project aimed to improve the nutritional status of women and children in 20 districts of Nepal (expanding to 5 more districts - Nuwakot, Achham, Doti, Baitadi and Dadeldhura in the coming year). The project focuses on improving health and nutrition behaviors at the household level through promotion of Essential Nutrition and Hygiene Actions (EN/HA), particularly Maternal, Infant and Young Child Nutrition (MIYCN), and addressing other determinants of under-nutrition, such as availability of and access to food, hygiene, quality of health care, child spacing and socio-cultural factors including gender and marginalization.



Suaahara partners include Save the Children (prime), Helen Keller International, Jhpiego, Johns Hopkins Bloomberg School of Public Health Center for Communication Programs (JHUCCP), Nepali Technical Assistance Group (NTAG), Nutrition Promotion and Consultancy Service (NPCS) and Nepal Water for Health (NEWAH). The program works closely with Government of Nepal, Department of Health Services, Child Health Division (CHD) and National Health Education, Information and Communication Center (NHEICC).

Launched in November 30, 2013, *Bhanchhin Aama* is an integrated campaign that seeks to engage communities and families through entertainment education radio programs, radio discussion groups, home visits, cooking and feeding demonstrations, key day celebrations, homestead food production, and through activities in schools and child clubs. The *Bhanchhin Aama* campaign utilizes ideal mother-in-law characters as spokespeople to motivate mothers and mothers-in-law in different parts of Nepal to take action during the 1,000-golden-days of a woman's pregnancy till her child's second birthday to improve nutrition, hygiene and health practices. They use their rich life experience and knowledge to promote healthy integrated nutrition behaviors to help bring about social behavior change to be able to fulfill aspirations and to improve the lives of Golden 1000 day mothers, children and ultimately their families.

Localized entertainment education radio programs are an integral part of the *Suaahara Bhanchhin Aama* approach because they can influence the overall enabling environment for change as well as support community level Nutrition, Agriculture and Sanitation activities. Localized means the programs are broadcasted in the local language and are based on the local level cultural realities and solutions. Entertainment education (EE) programs catch and hold the audience's attention while subtly and naturally weaving in the health messages. Characters model key positive behaviors and achieve their goals. The programs also focus on strengthening self-efficacy—the belief that one has the ability to exert personal control over outcomes.

The planned radio programs and support materials and activities will contribute to the overall goals of the National Maternal Newborn Child Health Communication Strategy 2011-2016, developed under the leadership of the National Health Education Information and Communication Center (NHEICC). The programs will be research- and theory- based and developed using a participatory, interactive approach. A central focus will be to strengthen self-efficacy to make positive nutrition, agriculture and hygiene choices. *Bhanchhin Aama's* weekly 30-minute radio drama and magazine prerecorded programs with companion Hello *Bhanchhin Aama* Phone-in' 30-minute live feedback programs will air for 39 episodes. The feedback

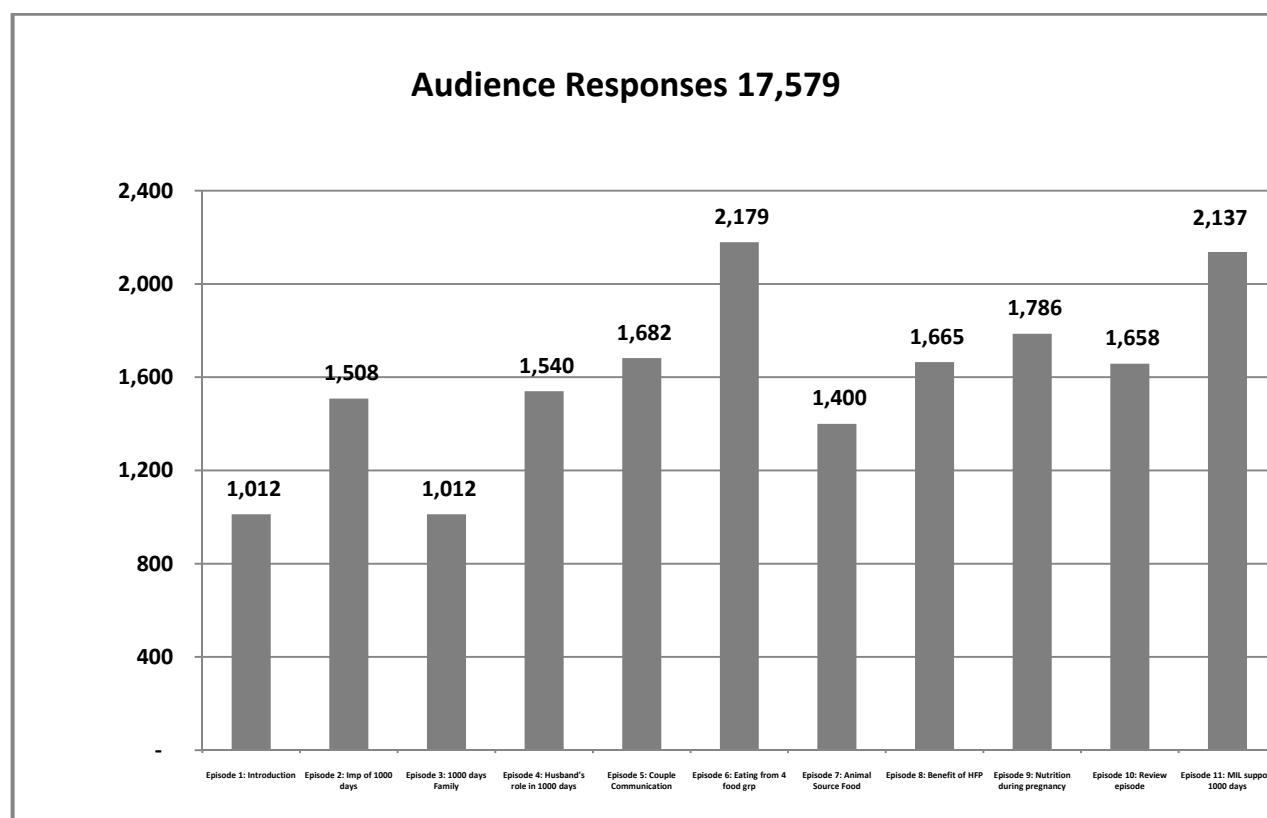
show would help engage the audience in a two way dialogue about the integrated nutrition issues. Nepal has a saturated media environment and we must 'stand out' through innovation.

Three separate programs will be developed to ensure that the programs are tailored to the different needs of the regions in terms of language, culture, local issues. The Suaahara team will also develop localized spots that promote radio listenership. Finally, the SBCC team will continue and expand community-level radio discussion groups among marginalized populations that will help prompt reflection, discussion and action on the key messages.

Through characters who will be realistic to audiences, the programs will reinforce familiar and introduce new behaviors and messages. The characters which will represent the suaahara integrated nutrition program will be introduced as a familiar *aama* and they will demonstrate about the risks of malnutrition, capacity of the individuals themselves to influence, gender values and capacity of interpersonal communication.

Audience Interaction:

Along with the radio drama '*Bhanchhin Aama*', a mid-week radio program called '*Hello Bhanchhin Aama Phone-in*' is also aired. After listening to '*Bhanchhin Aama*' people get to call in and send SMS to answer the quiz question and to ask questions about nutrition, hygiene and health practices during the 1000-golden-day period. Their questions are answered by a mother in law character answered through '*Hello Bhanchhin Aama Phone-in*' as a feedback program. Both the radio programs are aired in three languages – Nepali, Awadhi and Doteli through 45 local FM stations in 20 districts of Nepal where Suaahara works and also through the national radio across Nepal. The popularity of '*Bhanchhin Aama*' is considerable and this can be easily seen in the massive responses it has received since its launch on November 30, 2013. It has only aired 11 episodes so far and has received considerable queries through 17,579 calls and messages. Audience responses can be seen in the chart below.



Phased Key Practices Approach:

To achieve key practices and the overall project goals, Suaahara utilizes an integrated message approach with phases of key messages for intense action. Key practices (or behaviors) are selected based on the potential public health impact, need, effectiveness and feasibility. Suaahara will help mothers, fathers, mothers-in-law and other family members practice **priority behaviors that improve nutritional status**. Health care providers and others will support families as they practice these behaviors:

1. Give an extra meal to pregnant women and two extra meals to those who are breastfeed each day.
2. After six months along with breastfeeding and milk based foods add animal source food such as eggs, fish and meat, orange-fleshed fruits and greens to baby's food.
3. Wash hands with soap and water before feeding the baby.
4. When baby is sick, continue to breastfeed and give extra nutritious food. After baby is better, give an extra meal each day for 2 weeks.
5. Create physical barriers between children and floor, particularly separate from animals (including chickens), dirt and all feces.
6. After a baby is born a couple will use an appropriate family planning method within 45 days.
7. If your child has diarrhea, give the child ORS with Zinc tablet.

Development Process:

In order to develop the entertaining program that has consistent and correct messages, Suaahara follows the 'radio design document' approach. This design document serves as a 'roadmap' for writers and producers who will develop the drama, magazine elements and live feedback programs. The design document serves as a reference check for radio scripts review, provide content for support materials and clarify monitoring and evaluation objectives. The document will be translated into Nepali.

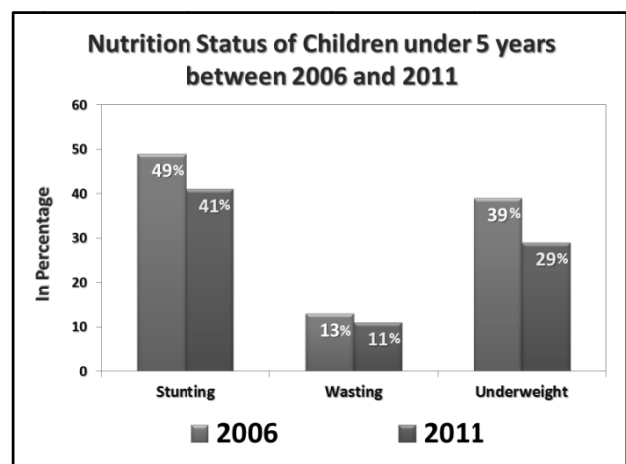
In this approach, we hold a participatory workshop with content experts, audience members and creative persons to clarify the audiences, rationale, objectives, purpose, format and messages of the *overall program* and then the topics, objectives, specific health knowledge, and the attitudes and behaviors to influence audiences in *each episode*. Though most of the content will be the same across the regions, the design process will include specific regional or district details where needed. The design document will be translated into Nepali.

I. Research

The radio program design is research-based.

Summary of Quantitative and Qualitative Findings:

The 2011 Nepal Demographic and Health Survey (NDHS) reported that while there have been improvements in child and maternal health as well as nutrition status/indicators, the existing status remains alarming. *Suaahara's* investment is to improve the figures surrounding the 41% of children under five years of age that are stunted, the 11% that are wasted, and the 29% that are underweight.



In addition to the NDHS findings and LQAS, Suaahara formative research results provided insight into the knowledge, attitudes, and behaviors of the intended audiences across five distinct regions of the county.

The summary of these nutritional-related findings can be found below and a more detailed formative research report is also available

Key Findings and Recommendations relevant to Radio Program Development:

Major findings revealed a pervasive openness to change and a positive outlook on the future. People generally welcome new information and changes that they see as beneficial for mothers and children and many respondents described changed beliefs and practices related to maternal and child health that they contrasted with those of the past. Parents repeatedly described aspirations to give their children a brighter future by investing in them, particularly in their education. Interest in learning and admiration for those perceived as educated emerged consistently throughout the findings.

Even with these positive attitudes, many families discussed barriers to practicing nutrition-related behaviors. A few examples are as follows:

- Even though mothers want to breastfeed exclusively for 6 months, many perceived that they don't have enough breast milk.
- A mother's workload, often exacerbated by the absence of fathers, is a significant barrier to adopting nutrition-related practices such as consuming healthy diets and washing hands.
- There are many misconceptions related to complementary feeding. Mothers perceive food with a thin consistency as easier to digest.
- Perceptions of foods as "hot" or "cold" strongly influence whether they are suitable for mothers or babies, rather than whether they are nutritious.
- Generally, respondents placed greater emphasis on quantity of food rather than quality or variety, describing "filling the belly" as the first priority.
- There is a growing attraction toward market items (though not vegetables) compared to foods produced locally. Parents and grandmothers often described a desire to feed babies store-bought items like biscuits and instant noodles as a way to express love for their children.
- Many parents do not feed their children animal source foods such as meat because of a fear that they can't chew and swallow and could choke on it. Parents don't know how to prepare the food. Working together with the local poultry groups the misconception about the children unable to digest meat should be removed.
- There is no negative affiliation with being short (or stunted).
- Pregnancy and childbirth are seen as a regular occurrence and not necessarily needing special nutrition for the mother or baby.
- Mothers from Terai give their children water assuming that the baby is thirsty due to the hot weather.

Recommendations from the research:

- Reach out to husbands and mothers-in-law, not just mothers.
- Taste is important and messages advocating change must frame foods in terms of not only their nutritional content but also in terms of their ease of preparation and good taste.
- Mothers are very busy and they often are unaware of ways to prepare tasty food from locally available foods.
- Help mothers and caretakers prepare tasty foods and enhance ease of feeding their children.
- Use the existing *vitamin = nutrition* concept to promote diverse, nutritious, locally available food.

- Highlight the uniqueness and specialty of mother's milk; emphasize that colostrum milk is enough to stimulate babies for further breastfeeding; discourage feeding of alcohol and honey to the baby; clarify the importance of exclusive breastfeeding for a full six months after delivery; demonstrate proper breastfeeding methods and techniques.
- Promote diversity in food selection and preparation techniques. Encourage homestead gardens to increase access to diverse local foods.
- Share that feeding chickens and eggs to children is a healthy practice, and reinforce this message through traditional healers, religious leaders and FCHVs.
 - Address key barriers, including the notion that children will choke on or not be able to digest meat and/or eggs; provide chickens in areas where people lack access; work closely with local livestock groups to overcome social barriers.
- Demonstrate health providers practicing friendly counseling. This is very important.
- Promote 'washing hands with soap and water' as a preventive measure for child nutritional health.
- Emphasize household environmental cleanliness to prevent infections and promote a stronger immune response and better development of the baby; encourage families to create barriers between the baby and the floor.
- In messages disseminated to the community, link the health and nutrition of the child (and parental aspirations) with sound sanitation practices.
- Address shyness of women to discuss family planning methods with their husbands.
- Encourage family members (mother-in-law, sister-in-law and husband) to reduce the mother's workload so that she has more time for her baby and the baby's care.
- Emphasize the image of the progressive man as the one who helps his wife and takes better care of his baby from the initiation of the first golden 1000 days, even when working abroad.
- Build self-efficacy of the mother and caretakers. Highlight that learning how to better take care of the baby to ensure its proper mental and physical development is part of education.

Education is seen as the driving engine behind prosperity and the ticket to a better life. Education, however, is perceived to be expensive. Hence, information urging people to act should be framed in terms of how the proposed actions will lead to prosperous children in the long term – perhaps by framing the discussion in terms of an “investment in your child” so that the child can become healthy and then become educated. For example, intervention materials could mention that 80% of the brain development occurs within the first 1,000 days.

Making connections between the behaviors being promoted, on the one hand, with the necessity of being healthy in order to achieve prosperity, on the other, will likely comprise a winning strategy.

Messages should also acknowledge that staying healthy is challenging for many people because of shortages of certain types of food, expenses involved in providing adequate nutritious food for one's family and the inaccessibility of certain services. Hence, providing credible role models and depicting the behaviors of others who despite similar life situations have managed to overcome their barriers will likely resonate with the audience.

Lot Quality Assurance Sampling (LQAS) Findings

In late 2013, Suaahara conducted a quantitative survey using Lot Quality Assurance Sampling methodology in 20 Suaahara districts. Main purpose of the survey was to generate data on outcome level indicators to annually monitor these indicators throughout the project period. The results of the survey were critical in redefining the strategies and interventions for the third year of Suaahara. Below is the summary of key findings:

- 68 per cent (little more than one third) of children below the age of six months were exclusively breastfed. But when analyzed by single month age group, it was found that only 37 per cent of them were exclusively breastfed by the time they completed five months.
- About 80 per cent of children between the age of 6 - 23 months were fed minimum number of times. However, only 55 per cent of them met the requirements of proper dietary diversity (foods from more than 4 food groups).
- Around one fourth of children between the age of 6-23 months were given meat and eggs the previous day.
- Thirty-one per cent of children with diarrhea were given ORS, while only 11 per cent of them received ORS and Zinc. One fourth of them received more fluids than usual while only 15 per cent received more food than usual.
- While 79 per cent of the households had toilets, only 46 per cent of them disposed young child's feces safely.
- Majority of women (90 %) washed their hands after defecation, while only 55 per cent of them did so before feeding the children.
- Around two-thirds of the mothers protected babies from dirt. This included the use of mat, cushion, bed and cradles etc.

II. Overall Radio Program Objectives

After listening to the radio program the audiences will:

- Have correct information that relates to these key behaviors:
 - Give an extra meal to pregnant women and two extra meals to those who are breast feed each day.
 - At six months along with breastfeeding and milk based foods add animal source food such as eggs, fish and meat, orange-fleshed fruits and greens to baby's food.
 - Wash hands with soap and water before feeding the baby.
 - When baby is sick, continue to breastfeed and give extra food. After baby is better, give an extra meal each day for 2 weeks.
 - Create physical barriers between children and floor, particularly separate from animals (including chickens), dirt and all feces.
 - After a baby is born a couple will use an appropriate family planning method within 45 days.
 - If your child has diarrhea, give the child ORS with Zinc tablet.
- Have an attitude that the golden 1000 days is a special time for intervention in order to have strong and smart children.
- Know where and how to access nutrition, hygiene/sanitation and homestead food production services.
- Talk positively and freely about these key behaviors at the household and community levels.

- Husbands and mothers-in-law will support golden 1000 days women to practice these key behaviors by sharing workload, information, encouragement, providing diverse foods, ensuring access to health care.
- All community members, including FCHV, family members, neighbors, traditional healers, siblings will support families to practice key behaviors during the golden 1000 days.
- All family members, especially the mothers will have the self-efficacy (confidence, knowledge, skills etc.) to practice key behaviors during golden 1000 days.

III. Overall Purpose

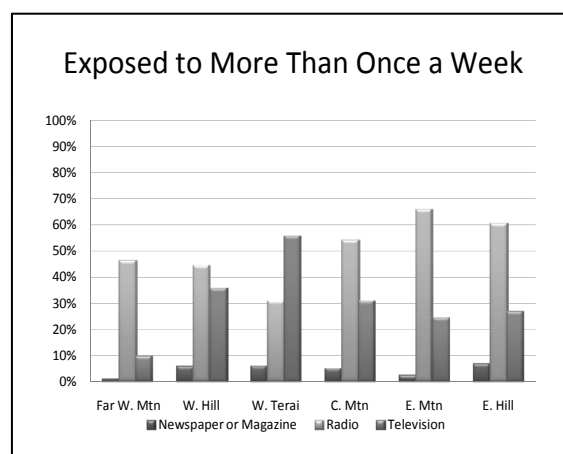
The overall purposes of the *Suaahara* radio program are:

- To reinforce the audience member's knowledge on nutrition, sanitation and homestead food production, with a focus on the key behaviors mentioned above.
- To motivate all family members to have an attitude that the golden 1000 days is a special time that has a direct influence on the future intelligence and strength of children as they grow up.
- To motivate all family members to apply their knowledge on nutrition, sanitation and homestead food production (HFP), family planning for improved care and practices during the golden 1000 days (from pregnancy to 2 years).
- To inform as well as update audience knowledge on where to go for support in issues related to nutrition, sanitation and homestead food production.
- To demonstrate and encourage family support of golden 1000 days mother and baby through emotional support, helping with workload, providing nutritious food and helping to take care of the child.
- To encourage audience members to practice the key behaviors that improves the lives of golden 1000 days mother and baby.

IV. Justification of the chosen medium

Radio has been chosen as the medium through which the messages outlined in this document will be delivered to the intended audience because:

- Radio is a cost-effective way to reach a great many people with the same messages.
- Radio is the 'medium of the imagination' that allows listeners to imagine the characters and setting and action in a way that is relevant to their own way of life and their own feelings.
- Radio is a trusted source of information. Radio/FM was the desired medium of receiving health and nutrition information among mothers, grandmothers and FCHVs in the 2013 Suaahara Baseline Survey Report (draft).
- Radio is the predominant mass media that people listen to in the 20 *Suaahara* districts overall, as per NDHS 2011 data, right.



- Radio has proven to be a successful media for influencing the knowledge, attitudes and practices of Nepal is in previous programs.¹
- Radio programs can inspire discussion that leads to change, even among people who have not watched or heard the EE program directly but discussed the program with family, friends or neighbors who were exposed.²

V. Intended Audience

Primary Audiences

- Golden 1000 days mother age 18-30, rural, married
- Caretakers of a child - anyone who is taking care of an under 2 child

Secondary Audiences

- Husbands
- Mothers-in-law
- FCHV/Social Mobilizers
- Neighbors (friends)
- Other family members
- Traditional Healers

Tertiary Audiences

- Mother's group members, Citizen Awareness Center, etc.

VI. Main Emotional Focus of the Magazine with Drama Serial

The main emotional focus of the radio program is love for children and hopes for their future. The program will also seek to touch on the responsibility of the whole family towards children who will be educated and have good futures.

VII. Number of Episodes in the Serial, Languages, FM Stations

The length of the two separate 39-episodes, 30-minute radio programs for each of the three languages/contexts- one is the *Bhanchhin Aama* Radio Magazine (15 min. drama and 15 min. interaction) program and the other is the *Hello Bhanchhin Aama* live call-in recorded feedback programs.

The magazine program will include a Drama covering important messages on nutrition, sanitation and homestead food production and care of sick children including ORS with zinc use for diarrhea. Birth spacing will also be mentioned. Radio programs will be developed in three languages for three different contexts.

¹ Storey, D., Karki Y., Heckert, K., Karmacharya, D.M., & Boulay, M. (1999). Impact of the integrated Radio Communication Project in Nepal, 1994-1997. *Journal of Health Communication*, 4, 271-294.

² Boulay, M., Storey, J.D., Sood, S. (2002) Indirect exposure to a family planning mass media campaign in Nepal. *Journal of Health Communication*, 7, 379-399.

- 1) **Nepali language**– for national context – *Suaahara's* 25 districts– This will be broadcast as widely as possible through FM and other stations which will be decided based on *Suaahara's* audience's listening habits.
- 2) **Awadhi language** – A separate program will be developed in Awadhi language for broadcast in Rupandehi and Nawalparasi.
- 3) **Doteli language** – A separate program will be developed in Doteli language for Darchula, Bajhang and Bajura districts.

VIII. Program Format

Each week there would be 1) Bhanchhin Aamaa 30 minute program Magazine-format with serial drama and then a few days later 2) Hello Bhanchhin Aama a 30-minute live recorded feedback show. These are described, below.

Magazine format – Bhanchhin Aama

Bhanchhin Aama is a 'variety show' format with different elements such as host, drama, music, interview, etc. that introduce and reinforce the messages for that week as outlined in the design document. Following are some format ideas. Note that the group would need to select a few among the following ideas.

- **Signature Tune** -
- **Hosts**– We would have interesting, dynamic hosts – 1 male, 1 female who introduce each of the magazine segments and reinforce key messages.
- **Serial Drama** –Serial drama is a story that continues over the whole of phase II. The serial drama's ongoing story allows the audience to become intimately and emotionally engaged in the lives of the characters and what happens to them. This can help the audience reflect on their own lives and make changes in their own lives.
- **Music**
- **Vox Pop**
- **My story** - Testimonials from people (be sure to include DAG) who have overcome issues related to self-efficacy linked to nutrition, sanitation, agriculture, etc.
- **Quiz**– Host reads quiz and people write or text in their answers. Winners announced during weekly feedback program.

Hello Bhanchhin Aama! Live call-in Feedback Programs

Each week, a few days after the 30-minute magazine program, Suaahara will manage another 30-minute live recorded feedback programs. The program, hosted by trusted and trained radio announcers paired with a Suaahara specialist, would announce quiz winners, answer SMS questions, comments or stories sent in. There may be 'celebrity' question and answer, there may be community-based competitions in which listeners send stories to the radio stations about changes they see happening in their villages, novel ideas for cooking, agriculture, etc. There may be audience music playing sent by audiences or direct song recorded through community FM reports. These 'live' events could also share stories about community activities and links to key life events.

IX. Overarching themes

Note to Writers and Producers

- *Demonstrating a woman in the program who is able to increase her self-efficacy both by how she thinks of and takes care of herself – but also through how others treat her. We need to show her getting stronger ‘power’ inside but also demonstrate to the other family members the benefit (to them) of supporting her and having mothers with more self-efficacy.*
- *Role model positive provider interactions. This will mean health providers or FCHV s providing appropriate and friendly support in the drama and/or as a part of magazine elements.*
- *In the character profiles of at least one of the stories, main characters should have and use a latrine. Rather than promoting it as a ‘new’ thing we would like to demonstrate latrines and latrine appropriate use as a cultural norm.*

TOPICS AND SEQUENCE OF INDIVIDUAL PROGRAMS

Episode #s	Topics	Pages
Episode #: 1	No message – story only	14
Episode #: 2	Importance of the Golden 1000 days	15
Episode #: 3	Building up self confidence in a woman	16
Episode #: 4	Couple communication	17
Episode #: 5	Importance of extra meals for pregnant women	19
Episode #: 6	Exclusive breastfeeding – dealing with ‘not enough milk’	21
Episode #: 7	Care to given to a child when it is suffering from diarrhea	23
Episode #: 8	Why should the child be given zinc and ORS during diarrhea?	24
Episode #: 9	Amount of complementary food for the children according to their age	25
Episode #: 10	REVIEW EPISODE	26
Episode #: 11	The innovative husband’s role within Golden 1000 days	27
Episode #: 12	Importance of eating from the four food groups	28
Episode #: 13	How to manage vegetables year round	29
Episode #: 14	Role of FIL (grandfather) on special care of mother and child	30
Episode #: 15	How can family support on building confidence of DIL	31
Episode #: 16	Importance of animal source foods	32
Episode #: 17	How Mothers-in-Law (MIL) can support the Golden 1000 days pregnant DIL	33
Episode #: 18	Nutritious food for breastfeeding mother	35
Episode #: 19	How a husband can support wife and child to access postnatal care	36
Episode #: 20	REVIEW EPISODE	37
Episode #: 21	Birth Spacing	38
Episode #: 22	Importance of family planning when husband is out (abroad)	39
Episode #: 23	Ways to keep children away from dirt	40
Episode #: 24	Safe Disposal of Child’s Feces	42
Episode #: 25	Breastfeeding – dealing with ‘not having enough milk’ REPEAT	43
Episode #: 26	Timely introduction to complementary feeding when the child completes six months of age	45
Episode #: 27	Complementary Food: Importance of Diversity	46
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SPECIFIC PROGRAM CONTENTS

Episode #: 1

Topic: **Story only - no message**

MEASURABLE OBJECTIVES: After listening to this episode, the intended audience will:

- KNOW:**
- The time and station for listening to the radio program.
 - The names of the characters in the program.
- FEEL:**
- Interested and excited to listen to the radio program.
- DO:**
- Tell family and friends to listen to the program including the time and station.

PURPOSE: The purpose of this episode is:

- To motivate audiences to listen to the program regularly.
-

CONTENT/MESSAGES:

- Story – listeners will be introduced to the main characters and the story.
- Include the days, time and listening station of the program.
- If there is any quiz or other interactive activity, explain to the audience how it will work.

SMALL DOABLE ACTION: (The tiny first step)

- Tell family and friends about the radio program.
- In addition to questions and responses make a call in to Bhanchhin Aama radio program.

BROADCAST SCHEDULE:

Bhanchhin Aama Radio Magazine Program

Broadcast Day: **Saturday**

Broadcast time/Stations: **9:20-9:50 AM through Radio Nepal and
Between 5:00 to 7:00 PM through 45 Local FM Stations**

Hello Bhanchhin Aama Phone-in Program

Broadcast Day: **Wednesday**

Broadcast time/Stations: **6:10 - 6:40 PM through Radio Nepal**

Broadcast Day: **Thursday**

Broadcast time/Stations: **Between 5:00 to 7:00 PM through 45 local FM Stations**

WHY THIS IS AN ISSUE:

- People now have heard what the Golden 1000 days means. Many still consider pregnancy and childbirth as something that is normal and natural, not something special to pay more attention to and with no need for any special efforts.
-

MEASURABLE OBJECTIVES: After listening to this episode, the intended audience will:

- KNOW:**
- The importance of taking special care of women and children during the Golden 1000 days.
- FEEL:**
- Proud that our children have bright future because we have taken care of our pregnant and breastfeeding women properly in their Golden 1000 days period.
 - Responsible for making special effort to help women and children during Golden 1000 days.
- DO:**
- Family members and community people will consider the Golden 1000 days a time for special action and support of women and children.
 - Community will start talking about the importance of Golden 1000 days among each other.

PURPOSE: The purpose of this episode is:

- To motivate the audience to consider the Golden 1000 days a special time for a family to take care of a mother and baby that directly impacts the future intelligence of the child.
-

CONTENT/MESSAGES:

- Every family wants their children to grow to be smart and strong – and live a better life.
- As we all now know, the 1,000 days means the time period from conception (or start of pregnancy) to 2 years of child age which requires attention and special efforts on the part of all the family.
 - The Golden 1000 days is important because much of the track of a child's growth and development is set during the Golden 1000 days. 80% (or almost all) of brain development of young children occurs within these Golden 1000 days of their life. Better health and nutrition related care and feeding practices during this time can impact the child's later productivity, ability to work and learn. With a strong start, mothers and children will be ill less, be smarter and of stronger body.
 - Golden 1000 days Mother and baby need extra nutritious food, sanitary environment, and active involvement in the child's rearing and caring, support and care from all for the bright future of children.
 - The Golden 1000 days family is one that takes special care of the mother and baby during that time because they know that this is the time that matters for the future mental and physical development of the pregnant woman, child and for better health of the mother.

SMALL DOABLE ACTION:

- Tell family members having 1000 days' pregnant women, mothers and children what the Golden 1000 days means.

WHY THIS IS AN ISSUE:

- Women hesitate to come forward in the society because they think that others will talk ill about them if they do so.
 - Family and society puts them in lower priority.
 - Women lack awareness and education.
 - Prevalence of the mentality that women are/should be shy.
-

MEASURABLE OBJECTIVES: After listening to this episode, the intended audience will:

KNOW: • Women are the ones who can in hesitantly put forward their problems in the family and make contributions to the family she belongs to.

- A family and society will change their attitudes towards women.

FEEL: • Encouraged that sharing her observations and opinions with her family.

DO: • Express her observations and feelings with their families.

PURPOSE: The purposes of this episode are:

- To build self-confidence of women.
 - To demonstrate examples of a woman expressing herself and having positive consequences.
-

CONTENT/MESSAGES:

- Even a single individual woman's voice is important.
- A young mother knows the most about what is going on with her pregnancy or with the baby because she is often the one doing or delegating the feeding, changing, and sleeping. She knows first if a child is happy or sick.
- If a woman feels uncomfortable to share her opinions with others, she should at least not hesitate to share them with her husband and other family members to whom she can rely on. She can also share them with her Mother-in-law or Sister-in-law. In the absence of her husband she expresses her feelings with the family members she feels comfortable.
- You also can do a lot of things, you have a lot of skills, you are also a important member of the family and everybody thinks of your well-being.
- Try to establish a close relationship with your family members and share with them what you feel like openly.
- When you are free, interact with others in your community. Don't isolate yourself.

SMALL DOABLE ACTION:

- Express about the things that you like to do with your husband or someone in the family that you feel comfortable.

WHY THIS IS AN ISSUE:

- Especially young couples don't discuss issues with each other. People have an attitude that couples should not have communication. There was perceived that discussion between couple is not good. They hesitate to share their feelings with each other. Their relationship is limited to formality. This is because they don't know that life becomes happy if they talk to each other about their life. Many couples don't discuss issues with each other perhaps because they are worried about the other person's potential negative reaction. Sometimes they simply don't know how to start the conversation.
-

MEASURABLE OBJECTIVES: After listening to this episode, the intended audience will:

- KNOW:**
- How improved communication between couples can strengthen a relationship by increasing the love and trust.
 - That if a couple communicates among each other about the matters of their lives; their life becomes happy and continuously improving
- FEEL:**
- ***Confident*** that speaking more openly and often with your partner can improve a relationship.
 - That it is a matter of pride to have conversation with your spouse. This gives continuity to the relationship and even strengthens it.
- DO:**
- Frequent conversation of couple.
 - Feel easy to talk and share any problems etc between husband and wife.

PURPOSE: The purposes of this episode are:

- **To educate** that mutual conversation will help in making a sound family life.
 - **To inspire** couples to talk to each other in any condition.
 - **To demonstrate** a husband and wife talking to each other about issues and having benefit
-

CONTENT/MESSAGES:

- Open communication means talking honestly and freely about everything having to do with a couple, what you've been doing, where you will go, what you'll eat, your ambitions for yourself or your children, decisions about money, food etc. A couple who makes decisions together will have a stronger relationship. Also, a couple that can laugh and relax together will be more able to overcome life's challenges.

How open communication between partners improves your relationship:

- Helps to understand what the other person is thinking or their desires – and when these are better understood there will be increased love and trust. When there is trust and love, the wife will build attachment with her husband's home.
- Two can do more than one. If a couple is united in their ambitions for their family and children, they can achieve more.
- Avoids misunderstandings.

Tips on how to talk to your partner:

- Practice what you will say.
- Build-up suitable atmosphere to talk to your partner.
- Find the right time to talk in a relaxed atmosphere when you are together alone.
- Start with non-controversial issues and after trust and openness is established, and then tackle the more challenging issues.
- Ask questions and invite the other person to share how they feel. Listen carefully to answers.
- Appreciate the other person for discussing, listening, sharing opinions.

SMALL DOABLE ACTION:

- Think of one thing you'd really like to know from your partner and be ready to talk about this.

WHY THIS IS AN ISSUE:

- Pregnant woman and family member are not aware about importance of nutrition during pregnancy; they don't take additional nutritious food.
- Many consider pregnancy and childbirth as something that is normal and natural, not something special.
- They feel shy and could not put their desire openly what they like to eat due to lack of favourable environment to share about this openly.

MEASURABLE OBJECTIVES: After listening to this episode, the intended audience will:

- KNOW:**
- The importance of taking an extra nutritious meal each day during pregnancy
 - What kinds of nutritious foods she should eat regularly.
 - The importance of talking about food needs with family members.
- FEEL:**
- Confident that by taking an extra nutritious meal she is making herself strong and that it will help with the development of the child.
 - Inspired to talk to her family about arranging for an extra (besides regular frequency) meal during pregnancy.
- DO:**
- Pregnant women will consider it important to eat an extra nutritious meal during pregnancy from when she finds out she's pregnant.
 - Pregnant women will make arrangements with family to take an extra nutritious meal.

PURPOSE: The purposes of this episode are:

- To educate mothers about the importance of an extra nutritious meal during pregnancy every day.
- To motivate 1000 days' women to talk to her family about her needs for an extra nutritious meal every day.
- To demonstrate the example of a pregnant woman taking an extra nutritious meal

CONTENT/MESSAGES:

While many more women are going for ANC these days and getting the benefits of the vitamins given and other medicines – Iron, deworming medicine, it is also important for her to take care with what she eats as she is eating for herself and the baby. She is eating for two.

Pregnancy is a special time for taking extra care of the pregnant woman's nutrition needs.

- During pregnancy eat one extra meal every day in addition to the regular frequency of meal for your baby's proper mental and physical development. This will also make you stronger and more ready for delivery resulting in comfortable pregnancy and delivery.
- Start eating an extra nutritious meal from when you find out that you are pregnant.
- Eat locally available nutritious food from at least the four food groups, which are 1) animal source foods (milk, eggs and fish/meat when possible), 2) beans (lentils, chickpeas and white beans), 3) grains and 4) fruits and vegetables (leafy dark green and orange).
- If eating only two types of food (usually rice and daal), two other types of food should be added to their meals.
- In order to have an extra meal, Family members can cook a bit extra at one meal and put some aside for the pregnant woman to provide her later on.

SMALL DOABLE ACTION:

- When going for work, take a bit of food in her pocket (roasted soybeans, maize, peas etc.).

WHY IS THIS AN ISSUE?

- A lot of women stop or lessen breastfeeding early and start complementary feeding before six months. There are many reasons – but one main reason is that some women think that their breast milk is not sufficient for child. She often doesn't have the information on the strategies to overcome the concern over the lack of breast milk.
-

MEASURABLE OBJECTIVES: After listening to this episode, the intended audience will:

- KNOW:**
- The benefits of breastfeeding exclusively for 6 whole months
 - What to do if she feels her milk is not enough.
- FEEL:**
- Proud that she is feeding her baby the best food that gives the child the best start for a smart and strong future.
 - Empowered that she knows what to do if she feels like she is having trouble with milk production.
- DO:**
- Practicing exclusive breastfeeding up to six whole months.

PURPOSE: The purposes of this episode are:

- To motivate women to breastfeed exclusively for 6 months.
 - To education women about strategies they can use if they are concerned that they don't have enough milk for their child.
 - To demonstrate a woman who overcomes concern about not having enough milk
-

CONTENT/MESSAGES:

- Child should be exclusively breastfeed until it completes 6 months.
- Even though we know this, breastfeeding exclusively can still be challenging and needs the support of the whole family.
- The benefits of exclusive breastfeeding are:
 - Mother's breast milk is a complete food that has all the requirements for the baby and is more delicious and nutritious for the baby than any other kind of milk from an animal or a store.
 - By breastfeeding for 6 whole months, the better the child will develop and grow both mentally and physically on time.
- Almost all mothers have enough milk to breastfeed for six months exclusively
- Strategies if you think your milk is not enough are:
 - Breastfeed more frequently. The more frequently she breastfeeds the more milk she will produce.
 - For effective breastfeeding, let the child finish with one breast before going to the other.
 - If she continues to have problems seek advice from an FCHV/Social mobilizer or health service provider.
- Family members can support mothers to breastfeed frequently by managing her regular work for her and allowing her to stay near home.

- If you have any questions, consult your nearest health services or FCHV.

SMALL DOABLE ACTION:

- Identify someone in your village who breastfed exclusively for a whole 6 months and talk to them about their experience.
- Family of the mother practicing exclusive breastfeeding for the 6 months and herself will discuss about this matter with FCHV and be confident on the sufficiency of breast milk to the child upto 6 months.

WHY THIS IS AN ISSUE ?

- People do not take it seriously even if a child defecates for more than four times a day. They believe that it is normal for a child to defecate more than usual while the child is teething. Many people still do not know that diarrhea is also one of the main causes of malnutrition; they also do not know that if diarrhea gets worse, and the child may also die.
-

MEASURABLE OBJECTIVES: After listening to this episode, the targeted audience will be able to

- KNOW:**
- What do you mean by diarrhea?
 - What should you do when your child is suffering from diarrhea?
 - What are the effects of diarrhea?
- FEEL:**
- Diarrhea is something serious and so special care has to be taken.
 - Proud being able to make the child healthy again by giving proper care and treatment when it was suffering from diarrhea.
- DO:**
- Take diarrhea as a serious issue.
 - Give ORS and zinc tablets to the child who is suffering from diarrhea as per the need.

PURPOSE:

- To make people understand that having watery stool is not a normal health condition.
 - To inspire people to take action - give ORS and zinc tablets - to the child who is suffering from diarrhea.
 - To inspire people to feed the child with extra nutritious meals and mother's milk when it is suffering from diarrhea.
 - To demonstrate someone feeding a child extra when their sick.
-

CONTENT/MESSAGES:

- Diarrhea is a state when a child has a watery stool more than four times a day.
- When a child is suffering from diarrhea, the level of water in its body reduces. It becomes weak, starts losing immunity power and can get every more sick and even die.
- Everyone in the family should take diarrhea seriously and take the following actions
 - If a child starts having diarrhea it has to be immediately given ORS and zinc tablets along with other nutritious foods.
 - The child who is suffering from diarrhea should frequently be fed with its mother's milk.
 - You should make sure that you have fed the sick child with frequent extra meals added to the usual.
 - Wrong conception about the child's inability to digest food during sickness should be removed.
- During the time that the child is teething (teeth are growing in) they are also crawling and putting like their hands or other objects in their mouths. If their hands or objects are dirty, that is what makes children sick. Having teeth come in doesn't cause diarrhea.

SMALL DOABLE ACTION:

- Find out where you can get ORS and Zinc.

WHY THIS IS AN ISSUE:

- Although the people are aware about providing ORS when the child is suffering from diarrhea they do not know about providing zinc tablet. They do not know about the benefits of providing zinc tablet during diarrhea. They also do not know about how to prepare and feed zinc.
-

MEASURABLE OBJECTIVES: After listening to this episode, the intended audience will:

- KNOW:**
- The benefits of ORS and zinc tablets.
 - The method of preparing and feeding ORS and zinc tablets.
- FEEL:**
- Proud to prepare ORS with zinc and provide to the child.
 - Satisfied for being able to keep the child safe from risks associated with diarrhea by providing ORS and zinc tablets.
- DO:**
- As soon as the child suffers from diarrhea mother or the care taker consults FCHV and provides ORS and zinc tablets to the child.
 - Well management of feces of the child suffering from diarrhea will be initiated.

PURPOSE:

- To motivate for providing ORS and zinc when the child suffers from diarrhea.
 - To encourage the people to consult FCHV and take suggestions from her and take the child to the health facility when child suffers from diarrhea.
 - To demonstrate someone using zinc and ORS.
-

CONTENT/MESSAGES:

Everyone knows about the importance of ORS and Zinc. Zinc is a new tablet that must be given with ORS.

- Zinc helps to develop the immunity to fight against the germs of diarrhea and to cure it sooner. It also helps prevent diarrhea keeping the child healthy and strong for long period.
- If the child is not given ORS and zinc tablet on time it might lead to severe dehydration, even causing to death of the child.
- For children who are between 2 months and 6 months – give a half tablet of zinc along with ORS per day for 10 days.
- For children who are over 6 months, give one tablet of zinc along with ORS per day for 10 days.
- To prepare the zinc, place the zinc tablet on a spoon with few drops of clean water, ORS or breast milk for few moments (around 45 seconds) before feeding to the child.
- Child should be given ORS more number of times more it has loose stool.
- Providing zinc tablets with regular ORS during diarrhea will save child from deteriorating, and unnecessary expenses that might be incurred by buying medicines. It can also save your child from untimely death.
- Zinc tablet is available in all health facilities and with most FCHVs for free.
- If a child continues to be sick or if you have any questions, go to a health facility.

SMALL DOABLE ACTION:

- Ask local FCHV if she has zinc tablet available.
-

WHY THIS IS AN ISSUE:

- There is confusion about how much and what to feed children at different ages. This is the most common question to the Hello Bhanchhin Aama radio program.
-

MEASURABLE OBJECTIVES: After listening to this episode, the intended audience will:

- KNOW:** • People will know and understand about the exact amount of food needed to be fed the children as per age and increasing it gradually
- FEEL:** • Mothers and family members will develop confidence on the way of feeding the children the right amount of food depending on the age of the child.
- DO:** • Discussing in the family about increasing the amount of complementary food according to their age.

PURPOSE:

- To educate on the exact amount of food needed to feed a child according to age.
 - To motivate for increasing the amount of food according to their age.
 - To demonstrate a mother feeding the child the right amount.
-

CONTENT/MESSAGES:

In addition to breast milk, tasty and nutritious complementary food for babies over 6 months should include **the 4 food groups are: cereals, beans, greens and orange fruits and vegetables, and animal source food (milk products, meat, fish or eggs).**

- Mothers will be willing to increase the amount with the age of their children and feed accordingly. This will help in their physical growth and development as per their age
- In the beginning, in addition to continued breastfeeding, start to feed the child with bigger spoon (2 to 3 spoons). Repeat this process 3 times a day
- Increase the amount of food day by day and feed around one tea-glass amount at one time. Feed three times a day. Continue this for up to 9 months. The food should be thick, so it sticks to the spoon.
- For child that is 9-12 months continue to feed three times a day of thick food about one tea glass each time. Also, feed him/her some snacks in-between at least once. Foods available at the household like banana or eggs can be fed.
- After the child reaches 12 month, increase the frequency of providing snacks to two and each time he/she should be fed the amount equivalent to two tea glass three times a day of thick food.
- Use a separate bowl for feeding the child so that it will be easy to know how much the child is eating and compare the difference each time he/she is fed
- If fed in this way child becomes happy and healthy and mother as well as family need not worry much about the child
- While feeding the child try to play, talk and focus on the child sitting face to face with the child.
- Only feed children with water that has been boiled.
- If the child eats all the food offered, then offer more. If the child doesn't want more, then don't force.

SMALL DOABLE ACTION:

- Families will discuss about feeding the child right amount of food considering child's age.

MEASURABLE OBJECTIVES: After listening to this episode, the intended audience will be able to know:

- The main objective of the Review episode is to go over the content of the recent set of episodes and to get audience feedback.
- Producers may be creative in doing this episode. Some formats that can be used are:
 - Interviews
 - Vox pop
 - Songs
 - Panel discussion
 - News briefs, etc.

WHY THIS IS AN ISSUE:

- Many husbands/males perceive that pregnancy, giving birth, taking of child, feeding and maintaining cleanliness is the responsibility of mothers not fathers. In single family, husbands go out to work so they feel that the household task is women's responsibility. Husbands feel awkward and ashamed to do domestic work in the joint family. Husbands have the fear of being called *joitingrey* (*husband dominated by his wife*) in the neighborhood if they do household work.
-

MEASURABLE OBJECTIVES: *After listening to this episode, the intended audience will:*

- KNOW:**
- Husbands who help their Golden 1000 days wives are ideal husbands.
 - Father has equal role and responsibility to play like a mother does in making the children grow up into all-rounders.
- FEEL:**
- Husbands supporting wife and children at home will always feel of being a respected person.
- DO:**
- Husbands will give priority to Golden 1000 days wives and support them in any condition.

PURPOSE: The purpose of this episode is:

- To inform what husband can do to help his Golden 1000 days wife.
 - To motivate a husband to help his Golden 1000 days wife.
 - To demonstrate a supportive husband.
-

CONTENT/MESSAGES:

- Nowadays, husbands have started taking their pregnant wives to hospitals or health-posts for their routine check-ups and for delivery. So, this is how husbands can play important roles in maintaining good health of their wives and children.
- A husband can talk to his wife about how he can help in household works. He can help her in such works in which she needs his help. The couple can divide the household works among themselves. A husband can spend his free time looking after the children; he can help his wife in the fields and gardens. He can also make sure there is soap, nutritious food like fish, eggs, fruits and vegetables at home.
- A man is said to be wise and innovative if he helps his wife and children.
- A supportive husband values both boy and girl children equally.
- There is equal role of both father and mother in making a child healthy and smart.
- Somebody who wants to change for the betterment of his family and also helps his family is also helped by his friends and society. He is respected by the family and his children will become healthy, intelligence and attractive.
- He will be seen as a respected and loving father who is close to his wife and children who follow him around and think he is cool, always ask about him and rush up to him when he comes home 'baba baba'. Makes him feel great.

SMALL DOABLE ACTION:

- Husbands will discuss with their families about what help they can do to their wives and support accordingly.

WHY THIS IS AN ISSUE:

- Tradition of eating same kind of food every day. Some places only rice and vegetable, some places only *dhindo* and some place only potato eating habits.
 - Lack of knowledge on eating variety of foods.
-

MEASURABLE OBJECTIVES: After listening to this episode, the intended audience will:

- KNOW:**
- What the four food groups are.
 - The importance of eating food from four food groups.
- FEEL:**
- Feel confident that if they feed diverse foods then it will benefit the family, especially children.
- DO:**
- Identify the diverse foods available locally as well as home prepared traditional food.
 - Practice eating of foods from four groups.

PURPOSE: The purposes of this episode are:

- To educate about the importance of eating a diverse diet and what it means.
 - To motivate families to seek to eat a diverse diet.
-

CONTENT/MESSAGES:

- Diverse foods mean eating from at least the four food groups. They are 1) milk based and animal source foods (meat, milk, eggs), 2) beans (lentils, chickpeas and white beans), 3) grains and 4) fruits and vegetables (leafy dark green and orange/yellow, cultivated mushroom).
- Eating diverse foods makes your food tastier and helps everyone in the family be healthier, smarter and stronger.
- Eating from four food groups is especially important for Golden 1000 days mother and child. Food from the four food groups will increase the body's access to vitamins and immune power and will make the child grow smarter and stronger.
- We can find diverse foods in local areas. Vegetables, fruits including varieties of crops can be grown in the kitchen garden and empty spaces of surroundings of local houses.
- Families who cook only two types of food (usually rice and daal) should add another two types to their meals.
- Babies from six months and older can digest food from 4 different groups but it needs to be prepared correctly and start with small amounts.

SMALL DOABLE ACTION:

- See if you have foods from the four food groups available in your house and use them.

WHY THIS IS AN ISSUE:

- People don't know how to have vegetables in all seasons.
 - Having nutritious vegetables all year is not a priority.
-

MEASURABLE OBJECTIVES: After listening to this episode, the intended audience will:

- KNOW:**
- The importance of having vegetables year round.
 - Strategies for having year round vegetables.
- FEEL:**
- Feel proud of being able to make nutritious vegetables available round the year.
- DO:**
- Make a plan for year round vegetable production or access.

PURPOSE: The purposes of this episode are:

- To educate about the importance of year round vegetable production
 - To motivate families to have year round vegetable production
-

CONTENT/MESSAGES:

- We know that diversity of food is important for the health and well being of Golden 1000 days women and children. Vegetables are one of the important food groups. We can think and plan ahead how to ensure to have vegetables year round.
- The benefits of year round vegetable production are : easily available, nutritious food for family, fresh, save money, garden looks good to neighbors.
- Strategies:
 - 1) It is possible to grow vegetables year round. Many areas have local vegetables. Check with your local agriculture service center.
 - 2) Families can prepare food for long term storage. In the main season, grow extra food and then dry and store it for the other seasons. Some examples are *gundruk*, *musaura*, *dry gaba*, *methiko sag*. Check with your local Agriculture Officer.
 - 3) If you can't grow the vegetables, then make arrangements with neighbors or purchase from the local shops.

SMALL DOABLE ACTION:

- See what vegetables your neighbours are growing that you don't already grow and try to learn from them.
- Discuss with the family about using the available land for vegetable production so as to make nutritious vegetables available round the year.

WHY THIS IS AN ISSUE:

- It is taken as a female's role to take care of children.
- They think that women and children do not need special care – it is normal and they will grow naturally.
- It is not expected for the Father-in-law (FIL) to be involved. Father-in-law doesn't think that it is his concern of who is doing what – according to him it is the female's job.

MEASURABLE OBJECTIVES: After listening to this episode, the intended audience will:

- KNOW:**
- Golden 1000 days' period is the special time for both mother and child so special care is needed during this period.
 - FIL will realize that it is his responsibility to take care of mother and child during this period.
- FEEL:**
- FIL will develop a feeling of being a rational and supportive person by providing special care to the Golden 1000 days mother and child.
- DO:**
- FIL will be ready for providing care to mother and child at all times.
 - He will take care of the child when mother is busy with other works.
 - FILs will support when DILs have workload.

PURPOSE: The purposes of this episode are:

- To educate family members on about special care to needed by Golden 1000 days women and children.
- To motivate fathers in law to practice support of daughter-in-law.
- To demonstrate a supportive Father-in-Law.

CONTENT/MESSAGES:

- Golden 1000 days' time is special for the whole family, including the father in law to take special care of the woman and child.
- Father in law is a decision-maker within the house so he can have a great role in helping them grow. He wants his grandchildren to be smart and healthy. He will be happy that community will recognize grandchildren with his name like 'ramkonati/natini' as being the smart and healthy ones.
- Fathers in law can help the Golden 1000 days women by
 - Showing his concern about what and how mother and child are being fed.
 - He can play with the baby, ensuring a safe and clean environment.
 - He can tell other family members to do the Daughter-in-law's work for her so that she can take care of the baby.
 - Advocate for ensuring green, leafy vegetables in the garden year round and access to animal source foods every day.

SMALL DOABLE ACTION:

- Play with grandchild in a safe and clean environment.

WHY THIS IS AN ISSUE:

- DIL is recognized as a person who is obedient, not interfering in senior members' matters.
 - People like to see DIL being down to earth who respects other people
-

MEASURABLE OBJECTIVES: After listening to this episode, the intended audience will:

- KNOW:**
- Benefits to family members to listen to DILs and including them in decision making.
 - How a family can encourage a DIL's confidence.
- FEEL:**
- MIL and FIL will feel confident and proud about having a DIL who is capable of expressing her views.
- DO:**
- Family members encouraging DILs for expressing their views and participating in the discussions.

PURPOSE: The purposes of this episode are:

- To educate family members on the benefits of supporting the daughter in law.
 - To demonstrate family member motivating DIL to expressing her views.
-

CONTENT/MESSAGES:

A good DIL is that who can clearly put forward her views in the family. It is important to create a favorable environment to ease DIL in encouraging her to put her views. Family members should speak and deal with her in good manner.

- Husband and family members should encourage wife and DIL to express her views.
- DIL should be appreciated when she shares her feelings and encouraged to do so more.
- DIL should be involved in decision making process of the family regardless of the type of the decisions (no matter even if it's a small decision).
- Send DIL to participate in empowering group such as women's groups, income generation, social groups. For this, family members need to support DIL in her household works.

The benefits of being encouraging with the DIL are

- DIL knows best what is going on with the grandchild – during pregnancy or after the baby is born. By supporting DIL/MIL are helping their own family and grandchild.
- They can give useful suggestions. So they need to be given the opportunity to share.
- Such things will increase the mutual understanding among the family members and trust on each other.
- This will work for raising social prestige in the community.

SMALL DOABLE ACTION:

- Plan to involve DIL in the immediate decision making process of the family like what to cook in the morning (which vegetable), what to purchase in the market, what to grow in the in kitchen garden, receiving health services etc.

WHY THIS IS AN ISSUE:

- Pregnant and breastfeeding women and children 6 months to 2 years are not fed with animal source foods (milk based food items, meat, fish, egg) as required.
 - Lack of information about need of feeding animal source foods (milk based food items, meat, fish, egg) to the pregnant, breastfeeding and children 6 months to 2 years.
 - Families often give a child milk or ghee but don't make securing meat, fish or egg a priority.
-

MEASURABLE OBJECTIVES: After listening to this episode, the intended audience will:

- KNOW:** • The importance about feeding Golden 1000 days mothers with animal source food items on regular basis.
- FEEL:** • Motivated to include such food items in the meals of mother and child 6 months to 2 years sufficiently on regular basis.
- DO:** • Starting to feed Golden 1000 days' mothers and children with animal source food items (milk based food items, meat, fish, egg) regularly.

PURPOSE: The purposes of this episode are:

- To educate families about the importance of providing Golden 1000 days mothers and children with animal source food items (milk based food items, meat, fish, egg).
 - To motivate families to use/increase the use of animal source food items (milk based food items, meat, fish, egg) in the meals of Golden 1000 days mothers and children beginning at 6 months.
 - To motivate families to procure sufficient animal source food items (milk based food items, meat, fish, egg).
-

CONTENT/MESSAGES:

- Providing animal source food items (milk based food items, meat, fish, egg) to the Golden 1000 days mothers and children will help increase their consumption resulting in their physical growth and being health. Also, it prevents from anemia.
- Many families give milk or ghee – but a child needs to also have other animal source foods as well – meat, fish or egg.
- Nutrition can be obtained even from small amount of animal source food items every day.
- It is necessary to identify how animal source food items (milk based food items, meat, fish, egg) can be obtained regularly at the household if there are Golden 1000 days mothers and children in the family.
- Children above 6 months can be fed with certain amount of milk and milk based products, boiled egg, well cooked and boneless meat and minced meat items.
- Discussing with the families about obtaining animal source food items (milk based food items, meat, fish, egg) for Golden 1000 days mother and children in the families.

SMALL DOABLE ACTION:

- Making plans on obtaining animal source food items (milk based food items, meat, fish, egg) regularly at the household.

WHY THIS IS AN ISSUE:

- Many consider pregnancy and childbirth as something that is normal and natural, not something special and extra food or health check-ups are not seen as important because they didn't get extra food or extra support during their own pregnancies.

MEASURABLE OBJECTIVES: After listening to this episode, the intended audience will:

- KNOW:**
 - Golden 1000 days' period is a special time for mother and child and how a Mother-in-Law (MIL) can support her pregnant Daughter-in-Law (DIL).
 - Benefits of MIL supporting pregnant DIL.
- FEEL:**
 - Proud to support her pregnant DIL.
 - Confident that she is a forward thinking wise mother in law who gives correct guidance and support to family members.
- DO:**
 - Support her pregnant DIL.

PURPOSE: The purposes of this episode are:

- To motivate MIL to feel that they have an important role in making decisions that can help their pregnant DIL have strong and smart grandchildren.
- To demonstrate the benefits to a mother in law of supporting her daughter-in-law.

CONTENTS/MESSAGES:

- MIL is an important decision maker in the house on issues related to food, workload, access to services and many other things. MIL has a great deal of experience and they know that is important to specially take care of Golden 1000 days mother and child using the latest correct information.
- Because MIL are often the one that DILs go to for help, it is important that a MIL knows the most recent information about special care for the Golden 1000 days mother and child to have prosperous family and smart and strong children.
- Some ways that MILs can be supportive of her pregnant DIL that will directly impact the grandchildren are:
 - Ensuring that DIL gets an extra nutritious meal during pregnancy that includes all four food groups like (1) animal source food – meat, fish, milk, egg; (2) beans – pulses, peas; (3) grains and (4) green vegetables, orange fleshed fruits.
 - Ensure that DIL goes for ANC at least four times and that she regularly takes iron tablets starting from four months of her pregnancy until 45 days after delivery.
 - She can prepare money, transport and ensure that DIL will deliver in a facility.
 - She will value a granddaughter and grandson equally.

- MIL can make sure DIL gets govt. support during her pregnancy that she is supposed to receive:
 - The government of Nepal provides Rs.400 to each mother who goes for her regular ANC checkup for four times during pregnancy (4th month, 6th month, 8th month and 9th month).
 - She will also be given other facilities like transportation cost and a warm bag through *Aama Surakshya* Program from the health facilities.
- The benefits to a MIL will be that she will be helping ensure strong and smart grandchildren; she will be seen as a knowledgeable and wise woman who provides the best possible direction to her family. She will be respected in the community even more.
- Whatever difficulties MIL faced during her time should not be for her pregnant daughter-in-law.

SMALL DOABLE ACTION:

- Mother-in-Law will prepare a tasty and nutritious meal and provides one extra meal to the 1000 days' DIL.
- Along with taking care of her grand children MIL will take care of her DIL's health as well.

WHY IS THIS AN ISSUE?

- To change the thinking of social norm "child is already born everything is done". After delivery all of the attention is for the child not the mother.
 - There are no clear messages on how much of what a breastfeeding mother should eat.
 - There is some concept of special food for a little while, but not for her entire time of breastfeeding.
-

MEASURABLE OBJECTIVES: After listening to this episode, the intended audience will:

- KNOW:**
- The importance of giving breastfeeding mothers two extra meals a day for two years.
 - Best food for a breastfeeding woman.
- FEEL:**
- Feels understandable mother-in-Law in taking care of post partum daughter-in-law. Now a grandchild also grows with drinking of enough mothers' milk.
- DO:**
- Starts giving more food and frequently remind to eat to the post partum daughter-in-law.

PURPOSE: The purposes of this episode are:

- To educate on the importance of giving breastfeeding mothers two extra meals a day in addition to the regular number of meals.
 - To motivate family members to support getting two extra meals in addition to the regular number of meals to the breastfeeding mothers.
 - To motivate breastfeeding daughter-in-law to eat additional nutritious food in addition to the regular number of meals.
 - To demonstrate a family getting extra meals to a breastfeeding in addition to the regular number of meals.
-

CONTENT/MESSAGES:

- In many parts of the country we give celebrate a new birth and give extra food to a mother for a time, but often that time is not long enough to support the vitamins that a mother and baby need for growth.
- Breastfeeding mothers need two extra meals a day in addition to the regular number of meals.. This is because she is feeding an extra person and needs the vitamins that in turn are passed to the baby through breast milk. Mothers need this extra food the whole time she breastfeeds (till 2 years).
- Food made at home (locally) from the four food groups: (1) animal source food, (2) beans, (3) grains and (4) green vegetables and orange fleshed fruits can be tastier and more nutritious if different things are cooked on different days so that it's not the same food every day.
- In order to give a breastfeeding mother two extra meals, she will need family support to make the additional tasty and nutritious food available at the right times.
- Breastfeeding mothers know to go to a health provider for child immunization, post natal care and also to get vitamin A and iron pills that she will take – and these vitamins are passed to the child through breast milk.

SMALL DOABLE ACTION:

- Families providing breastfeeding mother extra means in addition to the regular number of meals that she is having.

WHY THIS IS AN ISSUE:

- Many people, including husband are unaware about what kind of care is necessary after delivery.
 - Many people do not know how to take care of a newborn baby.
 - There is a belief that a mother will know what a child will need and this is not the concern of male members or husbands and also special care is not necessary during this period.
 - PNC visits are not a priority.
-

MEASURABLE OBJECTIVES: After listening to this episode, the intended audience will:

- KNOW:**
- The importance of Postnatal Care.
 - When and where they can go for the health services.
 - How a husband can help during PNC time.
- FEEL:**
- Proud that he is ensuring critical service access for his wife and baby.
 - Confident that he is contributing to the family's health and future.
- DO:**
- Ensure that his wife accesses postnatal services.

PURPOSE: The purposes of this episode are:

- To educate husbands about what health services and care are necessary after delivery and where to go for such health services.
 - To inspire golden Golden 1000 days husbands to support PNC access by their wives.
-

CONTENT/MESSAGES:

- Postnatal care is important because it is a chance for a trained person to check on the health and wellbeing of the mother and child. Both mother and child will receive important vitamin A and Iron and immunizations. And parents can ask any questions you may have and receive medicine if needed.
- A husband can accompany his wife and child to the PNC clinics or ensure that she has someone to go with her.
- Go for PNC checkups for three times right after delivery (after 24 hours, 3 days and 7 days) PNC clinics are held at health institutions? (SHP, HP, hospitals?)
- The husband will know that his wife and baby are fine/progressing well. He will be seen as a responsible/good husband/father.
- Couples can get information during PNC on how to delay their next child for at least two years, if they want another one.

SMALL DOABLE ACTION:

- Talk to husbands and Mother-in-Laws about what care and health facilities they need.

MEASURABLE OBJECTIVES: After listening to this episode, the intended audience will be able to know:

- The main objective of the Review episode is to go over the content of the recent set of episodes and to get audience feedback.
- Producers may be creative in doing this episode. Some formats that can be used are:
 - Interviews
 - Vox pop
 - Songs
 - Panel discussion
 - News briefs, etc.

WHY THIS IS AN ISSUE:

- Many couples don't talk about size of family because they are busy with other things and it can be awkward to start the conversation as such matters are considered to be an issue of shame. Many women wait some time to discuss FP with their husbands and get pregnant unintentionally because they don't realize when they can get pregnant while breastfeeding or if there is no menstruation.

MEASURABLE OBJECTIVES: After listening to this episode, the intended audience will:

- KNOW:**
- The benefit of discussing with partners if and when you want to have a next child.
 - Importance of using a FP method within 45 days of baby delivery.
- FEEL:**
- Empowered to discuss with your partner if and when you want to have the next child.
- DO:**
- Discuss if or when they want to have the next baby.
 - Use convenient spacing methods.
 - Visit health facility together for birth spacing counseling.

PURPOSE: The purposes of this episode are:

- To educate families on the benefits of discussing family planning with partner.
- To educate about the benefits of using family planning within 45 days.
- To inspire spouses to discuss when and if they want another child and to go for counseling.
- To demonstrate a couple discussing FP.

CONTENT/MESSAGES:

- Many couples don't know when a woman can get pregnant again after having a child – they think they're 'safe' from unintended pregnancy if they are breastfeeding or menstruation hasn't returned, but they are not.
- A couple is protected from pregnancy if three things are in order 1) baby is under six months, 2) no menstruation AND only breast milk has been given, not even water. If even 1 of these is not followed strictly, then she can become pregnant.
- The Golden 1000 days family Husband and wife should talk to each other soon after the birth of a child to decide jointly when and if they will have another child. A couple should wait for at least two years before having the next child.
- The benefits of family planning are the health of the mother and the baby will be able to get better care, breastfeeding and attention for better growth and development. The benefit for the mother is that she will get more rest.
- Certain family planning methods are safe for breastfeeding women and do not affect breast milk. They are depo, Copper T (IUD) and condoms.
- When going for immunization or Post-natal care within 45 days, ask the provider about family planning or inquire with your local FCHV.

SMALL DOABLE ACTION:

- Couples together go the health service center to get counseling on family planning methods appropriate for breastfeeding women.

WHY THIS IS AN ISSUE ?

- People have the concept that why is FP needed when husband is abroad or migrating for work.
- None of the partners adopt any FP methods when husband comes back home.
- Using the FP method when husband is abroad, there is a fear in her character among family members.
- Even for women who don't want another child, there isn't a FP method they can use that will be effective quickly enough.
- People think that FP methods work immediately after they are started, but they don't.

MEASURABLE OBJECTIVES: After listening to this episode, the intended audience will:

- KNOW:** • The importance of being prepared well among both the partners in advance if migrant husband is coming home.
- FEEL:** • Proud to be safe from unintended pregnancy.
- DO:** • Couples will consult the health worker before husband travels out and they plan accordingly.
- They will keep appropriate FP methods at home and use whenever necessary.

PURPOSE: The purposes of this episode are:

- To motivate the couples for consulting on the use of FP methods before the husband goes out.
- To encourage the DILs to visit health facility for consultation as necessary regarding family planning with their MILs and other members of the family even if husband is out.
- To demonstrate a couple discussing FP and making a plan.

CONTENT/MESSAGES:

Couple plans ahead for the benefit of the family. While her husband is away she takes care of everything and hopes for his safe return.

Most of the FP methods show effect only after certain duration of use. In other words, most of the devices don't work right after the use (if used today will not show effect today itself). Therefore, it is necessary to continue its use even the partners are not together

- If the husband or wife is going abroad or for seasonal work for a longer period, they need to visit health facility for counseling and start using right method of FP.
- Just single sexual contact might be enough for the wife to get pregnant which could happen when husband returns home in between.
- If the husband is coming back and wife is using a long-term FP device she should continue to use this as per her willingness. If she is not doing so, she must visit HF and start using some suitable FP method.
- If necessary information is taken from the health facility and suitable method is used it will help to avoid unwanted pregnancy, unnecessary tensions and will help to provide good care of mother and child.
- When unwanted pregnancy doesn't occur this will let the mother to give enough time for child and when child grows well the family will be considered an exemplary one.
- For more information, go for health services or ask an FCHV.

SMALL DOABLE ACTION:

- Husband and wife will discuss about FP among themselves and visit health facility before going out.

WHY THIS IS AN ISSUE ?

- Due to lack of knowledge on the ways of creating barrier and the things that can be one from their level children under 2 have been in higher level of risks of various infections.
 - People not giving priority on creating the barriers to keep the children away from dirt and they consider that mother to be responsible of taking care of the children.
 - People do not have knowledge that dirt/chicken feces at the households can make a baby sick.
 - Children playing in the dirt are considered normal.
-

MEASURABLE OBJECTIVES: After listening to this episode, the intended audience will:

- KNOW:**
- The benefits of keeping babies separate from dirt or chicken feces.
 - About the possible ways of creating barriers.
- FEEL:**
- **Self-confidence:** family members will be confident about creating barriers for keeping their children safe and away from dirt.
 - **Safety:** family members will feel safe as those barriers will help keep their children smart and healthy.
- DO:**
- Discussing about locally available materials that could be used in creating barriers to keep children away from dirt.
 - Proper use of barriers and give continuity.
 - Bring necessary changes and continue to use the created barriers.
 - Identifying and assigning a caretaker to take care of children and continue to do so.
-

PURPOSE: The purposes of this episode are:

- **Making them aware on** how such barriers can be effective for keeping children safe from possible infections, healthy and smart
 - **Informing** the people about what are the barriers and how can they be created
 - **Demonstrate** a family taking hygiene actions to protect the child from dirt.
-

CONTENT/MESSAGES:

- Our children are often sick and we face a diarrhea problem frequently. One reason is because our children play near dirt or chicken feces that could contain germs that make them sick.
- We should love our children and use proper barriers to keep them safe. We need to keep our children on floor when we are busy with our works. We want to keep them at such place where they are safe and feel happy. Also, by keeping at such place they will be safe from being injured, moving anywhere they like and putting in their mouth whatever they find. This will avoid them from being in contact with germs which can make them sick.
- When we are with our children we forget our sorrows and feel happy and relaxed. It is important for the family members to care about what their children is doing during different times.
- It is important to create space for the children to play according to their age. Locally available materials like *gundri, sukul, chatta* etc can be used in their playing space.

- For e.g., keeping *gundri* (mat) on the floor for children and covering it with a soft cloth so that it will be easy to wash it. To avoid children from moving out of the mat some kind of planks could be used as a fence. The area should always be kept clean.
- Keeping chicken in the semi-closed coop and children away from domestic animal like dog, chicken, cats, cows, goats etc. Any chicken wastes, animal dung and human feces should be thrown in toilets or pits.
- Watching children is everyone in the family's responsibility, not only the mother's.
- A clean baby is a nice looking baby that people want to love and hold.

SMALL DOABLE ACTION:

- See what people in the community are doing to keep their baby clean and laying something available at home on the floor where child plays.

WHY THIS IS AN ISSUE:

- People take child's feces to be like common garbage. People dispose it together with other household wastes.
- People do not know that diseases like diarrhea, dysentery, cholera, jaundice and worming are caused through houseflies, poultry, pets like dogs etcetera because of unsafe disposal of child's feces.

MEASURABLE OBJECTIVES: After listening to this episode, the intended audience will:

- KNOW:**
- Child's feces is not like common wastes, but the cause of illness. It is like adult feces.
 - The different diseases that are caused due to unsafe disposal of child's feces are.
 - Where and how to dispose child's faces.
- FEEL:**
- Safe from the diseases that are likely to be caused by unsafe disposal of child's feces after disposing it safely.
- DO:**
- Dispose of baby feces in a latrine

PURPOSE: The purposes of this episode are:

- To inform that child's feces is as harmful as adult's defecation.
- To inspire Golden 1000 days mothers and their family members to dispose the feces of a child in a safe place.
- To demonstrate proper feces disposal.

CONTENT/MESSAGES:

- Child feces is no different than that of adults. If a child feces is not disposed safely, there are more chances of getting infected by various diseases, the nutrition that is consumed by the child is wasted and malnutrition takes place.
- Bacteria gets into the intestines of the child weakening the process of digestion due to which a child cannot absorb any energy from the food it consumes. If the bacteria keep remaining in the child's intestines, it causes loss of appetite and has adverse effects on the growth of a child.
 - After a child defecates, immediately dispose the feces safely in the latrine.
 - Wash hands thoroughly with soap and water after cleaning child's feces.
- Benefits of child feces disposal are:
 - Area will be clean, you can step anywhere
 - Not smelly
 - Children can play anywhere
 - Neighbors will appreciate that your area looks good and neat.

SMALL DOABLE ACTION:

- Clean the baby's napkins in the proper place with soap and water and dry them out in the sun.

WHY IS THIS AN ISSUE?

- A lot of women stop or reduce the frequency of breastfeeding early and start complementary feeding before six months. There are many reasons – but one main reason is that some women think that their breast milk is not sufficient for child. She often doesn't have the knowledge about strategies to overcome the concern over the lack of breast milk.
-

MEASURABLE OBJECTIVES: After listening to this episode, the intended audience will:

- KNOW:**
- The benefits of breastfeeding exclusively for 6 whole months
 - What to do if she feels her milk is not enough.
- FEEL:**
- Proud that she is feeding her baby the best food that gives the child the best start for a smart and strong future.
 - Empowered that she knows what to do if she feels like she is having trouble with milk production.
- DO:**
- Practicing exclusive breastfeeding up to six whole months.

PURPOSE: The purposes of this episode are:

- To motivate women to breastfeed exclusively for 6 months.
 - To education women about strategies they can use if they are concerned that they don't have enough milk for their child.
 - To demonstrate a woman who overcomes concern about not having enough milk
-

CONTENT/MESSAGES:

- Child should be exclusively breastfed until s/he completes 6 months of age.
- Exclusive breastfeeding means feeding only breast milk and nothing else to the child, not even water up to completion of 6 months.
- Even though we know this, breastfeeding exclusively can still be challenging and needs the support of the whole family.
- The benefits of exclusive breastfeeding are:
 - Mother's breast milk is a complete food that has all the requirements for the baby and is more delicious and nutritious for the baby than any other kind of milk from an animal or a store.
 - By breastfeeding for 6 whole months, the better the child will develop and grow both physically and mentally on time.
- Almost all mothers have enough milk to breastfeed for six months exclusively
- Strategies if you think your milk is not enough are:
 - Breastfeed more frequently. The more frequently she breastfeeds the more milk she will produce.
 - For effective breastfeeding, let the child finish with one breast before going to the other.
 - If she continues to have problems seek advice from an FCHV/Social mobilizer or health service provider.

- Family members can support mothers to breastfeed frequently by managing her regular work for her and allowing her to stay near home.
- If you have any questions, consult your nearest health services or FCHV.

SMALL DOABLE ACTION:

- Identify someone in your village who breastfed exclusively for a whole 6 months and talk to them about their experience.
- Mothers and members of the family practicing exclusive breastfeeding should discuss with the FCHV regarding this and be confident that the breast milk is enough to the child.

WHY IS THIS AN ISSUE?

- Generally, complementary feeding is not introduced at the right time it's either much earlier or later than the right time.

MEASURABLE OBJECTIVES: After listening to this episode, the intended audience will:

- KNOW:**
- When to introduce the child with complementary feeding.
 - The importance of complementary feeding when the child completes six months of age.
- FEEL:**
- That it isn't good for the health of the child to feed complementary food before the right time.
 - That there will be proper development of brain if the child is timely introduced to complementary food.
 - Inspired to talk to the family members about feeding complementary food to the child when the child completes the age of six months.
- DO:**
- Talk with the family members about introducing the child to complementary food when it will complete six months of age.

PURPOSE: The purposes of this episode are:

- Informing the mothers about the importance of feeding complementary food when a child completes the age of six months and inspire them to talk about it in the family.
-

CONTENT/MESSAGES:

- When a child completes six months of age, only mother's milk is not sufficient for its proper growth because the movements increase, it plays and moves more and that is why it needs more energy. The children who are provided with complementary food along with mother's milk get sufficient elements for the development of body and mind. Such children also tend to be sharp in studies. Finally, it has a very good impact even in the adulthood. Timely introduction to complementary food makes the child healthy and strong; they are less likely to get easily infected.

Why is it important to feed the baby with complementary food at the right time?

- If a child is introduced to complementary food too early, then it cannot digest it, it can be the victim of diarrhea, colic and other weaknesses.
- If a child is fed with complementary food at the right time, it helps in the development of its body and mind, and the child becomes active, healthy and happy.

SMALL DOABLE ACTION:

- Start talking about feeding nutritious food to the child in the family, keeping in mind when the child is going to complete six months of age.

WHY THIS IS AN ISSUE:

- It is not felt convenient in the families to feed diverse foods to the child under 2 years. So, they are fed with the normal food that is prepared in the family for all other members. The foods are like rice, pulses, same type of vegetables. Often children are not feed Animal source foods or vegetables.
- People have no knowledge about the need of diverse foods to the child after 6 months
- People think that children can not digest certain food groups – animal source foods and vegetables (depending on the cultural group)

MEASURABLE OBJECTIVES: After listening to this episode, the intended audience will:

- KNOW:**
- Why a variety of foods are required for a child to become healthy and intelligent.
 - Starting at 6 months children can digest all four food groups if it is prepared properly.

- FEEL:**
- Inspired to feed children from 4 groups every day.

- DO:**
- Start preparing food from 4 food groups every day for her child after 6 months.

PURPOSE: The purposes of this episode are:

- To educate mothers/caretakers of the importance of feeding children from 4 food groups after 6 months.
- To motivate mothers/caretakers to feed her child food from 4 food groups every day after 6 months.

CONTENT/MESSAGES:

- Tasty and nutritious complementary foods for babies over 6 months should include the 4 food groups are: **cereals, beans, greens and orange fruits and vegetables, and animal source food (milk products, meat, fish or eggs).**
- After six months only breastfeeding will not be enough for the child so he/she should be fed the foods from the 4 different food groups as variety of them will provide variety of benefits like some help them become strong, some develop their body, some prevent from diseases etc. The amount and consistency is based on age.
- Even a small amount of diverse foods can give important vitamins.
- Food made from home can be tasty and is nutritious for children then items purchased at the bazaar.
- A child who receives food from all 4 groups is active, cheerful and beautiful, does well in school.
- When children are fed the foods from 4 different food groups they will be healthy which helps mother and other members to be happy and tension-free.
- Children older than 6 months can digest vegetables and eggs/meat/fish. However we need to ensure that they are in small pieces, minced and well cooked.

SMALL DOABLE ACTION:

- If the family is feeding only litto or jaulo the items from 4 food groups can also be included like eggs, vegetables' pieces etc.

WHY THIS IS AN ISSUE:

- Mother-in-law is very influential when there is a baby in the house. However the issue is that she sometimes has 'out of date' ideas of what should be done.
-

MEASURABLE OBJECTIVES: After listening to this episode, the intended audience will:

KNOW: • Key things that a mother in law can do after their grandchild is born.

FEEL: • MILs will feel being a rational person by providing and convincing others to provide special care to the Golden 1000 days mother and child.

DO: • MIL will be ready for providing care to mother and child at all times.
• She will take care of the child when mother is busy with other works.
• MILs will support when DILs have workload.

PURPOSE: The purposes of this episode are:

- To inspire family members to feel responsible for extra support to Golden 1000 days mother and child.
 - To inform MILs how she can be helpful to her DIL.
 - To demonstrate an MIL supporting or convincing others to support a DIL.
-

CONTENT/MESSAGES:

- Mothers in law are the ones that DILs will go to when they have questions or problems. MILS also love their grandchildren and want to hold them and do their best for them.
- MILs can find out the latest information about the Golden 1000 days so that they are giving the right guidance to their family members. She can ask her local FCHV.
- All the members of the family have crucial role in making the child healthy, smart and sharp minded and not only the mother is responsible for it. The mother-in-law can ensure that:
 - DIL gets 3 extra meals every day that contain four food groups.
 - Ensure DIL goes to the health facility for PNC.
 - Support the DIL to breastfeed exclusively for six months.
 - Support in feeding complementary food from 4 food groups after the child reaches six months of age.
 - Provides support in taking care during child sickness and immunizing.
 - Keep the child on mats and take care of him/her.
 - Support her son and DIL to use a family planning method for birth spacing.

SMALL DOABLE ACTION:

- Discussing and identifying with DIL about how and on what things can mother and child be supported.

WHY THIS IS AN ISSUE:

- People have the confusion about the amount of food and the method of feeding at the start when child reaches 6 months of age
-

MEASURABLE OBJECTIVES: After listening to this episode, the intended audience will:

- KNOW:**
- How much the child should be fed at the start when it completes 6 months?
 - How to feed the child at the beginning which will ease the feeding process when it completes 6 months.
- FEEL:**
- By knowing about the amount and process of feeding the child mothers feel relaxed.
 - They feel motivated to feed the child.
- DO:**
- Make plan for preparing and feeding the child for the first time after he/she reaches 6 months (how to and how much).

PURPOSE: The purposes of this episode are:

- To educate about how and how much to feed the child after it completes 6 months.
 - To demonstrate a caregiver initiating feeding of a 6 month old child.
-

CONTENT/MESSAGES:

- In the beginning, in addition to continued breastfeeding, start to feed the child with bigger spoon (2 to 3 spoons). Repeat this process up to 3 times a day.
- Increase the amount of food day by day and feed around one tea-glass amount at one time. Feed three times a day.
- Any kind of foods can be fed but only after softened or minced. While feeding, be careful of the thickness of the foods like if the food is a *khichadi* prepared with the mixture of green vegetables they shouldn't be so watery that it doesn't even stick on the spoon. This is because thick foods help to give more strength to the child than watery foods.
- The child might not like to eat at the very first time but continue trying on feeding and provide enough time to feed. While feeding a child interact, talk, play with him or her as far as possible.
- Even if mothers have enough milk, we need to add food after six months completion to the baby's diet because mother's milk is not enough for the baby's growth.
- Even if baby doesn't seem interested in other food on their own, it is important to introduce food on time at six months for baby's timely growth.

SMALL DOABLE ACTION:

- Discussing and planning among the family members on what and how much to feed the child after it completes 6 months.

MEASURABLE OBJECTIVES: After listening to this episode, the intended audience will be able to know:

- The main objective of the Review episode is to go over the content of the recent set of episodes and to get audience feedback.
- Producers may be creative in doing this episode. Some formats that can be used are:
 - Interviews
 - Vox pop
 - Songs
 - Panel discussion
 - News briefs, etc.

WHY THIS IS AN ISSUE:

- Prevalence of the practice of feeding children as per the demand they make not exactly the amount required according to their age

MEASURABLE OBJECTIVES: After listening to this episode, the intended audience will:

- KNOW:** • People will know and understand about the exact amount of food needed to be fed the children as per age and increasing it gradually.
- FEEL:** • Mothers and family members will develop confidence on the right way of feeding the children the right amount of food depending on the age of the child.
- DO:** • Discussing in the family about increasing the amount of complementary food according to their age.

PURPOSE: The purposes of this episode are:

- To educate on how much to feed children as per age.
- To motivate for increasing the amount of food according to their age.
- To demonstrate someone feeding their child to the right amounts.

CONTENT/MESSAGES:

In addition to breastfeeding, tasty and nutritious complementary food for babies over 6 months should include additional tasty, fresh, nutritious and soft foods from **the 4 food groups are: cereals, beans, greens and orange fruits and vegetables, and animal source food (milk products, meat, fish or eggs).**

- Mothers will be willing to increase the amount with the age of their children and feed accordingly. This will help in their physical growth and development as per their age.
- In the beginning, in addition to continued breastfeeding, start to feed the child with bigger spoon (2 to 3 spoons). Repeat this process 3 times a day.
- Increase the amount of food day by day and feed around one tea-glass amount at one time. Feed three times a day. Continue this for up to 9 months. The food should be thick, so it sticks to the spoon.
- For child that is 9--12 months continue to feed three times a day of thick food about one tea glass each time. Also, feed him/her some snacks in-between at least once. Foods available at the household like banana or eggs can be fed.
- After the child reaches 12 month, increase the frequency of providing snacks to two and each time he/she should be fed the amount equivalent to two tea glass three times a day of thick food.
- Use a separate bowl for feeding the child so that it will be easy to know how much the child is eating and compare the difference each time he/she is fed.
- If fed in this way child becomes happy and healthy and mother as well as family need not worry much about the child.
- While feeding the child try to play, talk and focus on the child sitting face to face with the child.
- Only feed children with water that has been boiled and cooled.
- If the child eats all the food offered, then offer more. If the child doesn't want more, then don't force.

SMALL DOABLE ACTION:

- Families will discuss about feeding the child right amount of food considering child's age.

WHY THIS IS AN ISSUE:

- Mothers and family members do not want to spend too long feeding their child because they have a lot of work to do.
 - Actually, feeding a child is a challenging task; a child has to be comforted and entertained while feeding. Otherwise, it does not eat properly. Many people do not understand the importance of comforting and entertaining a child while feeding.
 - People don't play now, they simply stuff the food in the baby's mouth to get it done as quickly as possible.
-

MEASURABLE OBJECTIVES: After listening to this episode, the intended audience will:

KNOW: • How to feed a child actively.

FEEL: • Inspired to spend adequate time with the baby while feeding.
• Assured that active feeding is a good method.

DO: • Take time while feeding the child, comfort, entertain and play with it.

PURPOSE: The purpose of this episode is:

- To encourage mothers and other members of the family to talk and play with the child and give adequate time while feeding the child.
 - To demonstrate active feeding.
-

CONTENT/MESSAGES:

It can be fun to feed and interact with children. If a child is fed actively, it learns to talk, develops interest in eating and timely growth takes place. You should talk, interact, tell stories and play with the child while feeding. Make meal time fun for your child and for you. Make the time so no need to rush.

- Sit in front of the child, face to face while feeding. This will help the child to feel noticed.
- It is important to change the types of food provided to a child otherwise the same food will be boring and there will be no change in the taste of food given.
- So while feeding your child, ask him/her if wants more food. If he/she signals for more, provide more. If he/she signals that he/she is full, stop feeding.
- Children may reject food the first time it is introduced, but continue to try. Getting a child to accept new food may take several attempts.
- A child eats enough if it is fed this way, gets a lot of energy and thus becomes active. A mother/caretaker gets satisfaction if her child eats properly. Other people also appreciate the child and the mother feels proud.

SMALL DOABLE ACTION:

- Think of a family story to tell the child.
- Think about how to make home-made toys for the child.

WHY THIS IS AN ISSUE:

- Prevalence of practices of feeding same types of food everyday. Due to this children lose their appetite.
 - Children are fed with the common foods that are prepared for other members of the family. They are given those items that are easy to prepare and easily available.
-

MEASURABLE OBJECTIVES: After listening to this episode, the intended audience will:

KNOW: • Why and how to make the food prepared for children tasty.

FEEL: • Feel proud to feed the food items from the group of 4 types that is liked by the child.
• Excited to feed not only the food but tasty food that the child liked to eat.
• Mothers feel relieved and happy to see the child eating completely.

DO: • Trying preparing other food items from the group of 4 that are liked by the child.

PURPOSE: The purposes of this episode are:

- To make the mothers informed about the importance of foods that are liked by children and making them excited to continue do so.
 - Demonstrate a cooking show.
-

CONTENT/MESSAGES:

- Feed variety of foods like *khichadi*, *litto* etc everyday. Sometimes add little amount to ghee in the food and feed the child and sometimes well cooked beans. Also, bring variety in the vegetables (spinach, carrot, *chamsur*, *palungo*) and minced fruits (banana, papaya). Also, feed milk based products. Feed egg, minced meat.
- Prepare variety of food from same item and feed the child. For e.g., from carrot, pudding, curry etc can be prepared. Prepare the food using salt and sugar alternatively.
- If the child is fed in this manner it will help to increase his/her appetite. Child will have the willingness to have new food items. Continue to feed in this way so that there won't be any problem in introducing new item in the future.
- When the child eats full-stomach mothers feel happy and will not be tensed.
- Benefit is that the child will like the food and eat more and have more energy for play.

SMALL DOABLE ACTION:

- Prepare variety of items using available foods in the household.

WHY IS THIS AN ISSUE?

- People have the habit of washing hands with water only and rubbing their hands against the clothes they are wearing.
 - Unless they see dirt with their bare eyes, they think that their hands are clean.
 - They are unaware about the bad effects and the diseases that are likely to be caused if you don't wash your hands with soap and water before feeding a child.
-

MEASURABLE OBJECTIVES: After listening to this episode, the targeted audience will be able to:

- KNOW:**
- That though we may not see with our bare eyes, there might be disease germs in our hands which may cause illness.
 - That diarrhea can be prevented if hand washing is done thoroughly with soap and water before feeding.
- FEEL:**
- Proud to have done something good for the sake of the child's health by washing hands thoroughly with soap and water before feeding.
- DO:**
- Wash hands properly with soap and water before feeding a child.
 - Talk in the family about the importance of hand washing thoroughly with soap and water before feeding.

PURPOSE: The purposes of this episode are:

- To aware mothers or other care takers about hand washing thoroughly with soap and water before feeding.
 - To inform people that there might be disease germs in our hands which may cause illness though we do not see them with our bare eyes.
 - To inspire mothers and other care takers to wash hands thoroughly with soap and water before feeding.
 - To demonstrate a caretaker washing hands before feeding the child
-

CONTENT/ MESSAGES:

- We should wash our hands with soap before feeding a child.
- A small child can get sick and weak more easily than an adult because their body is very delicate and they have less immunity. So, we must take extra care to feed the child with clean hands. Our hands are only clean (from bacteria) if we have wash them with soap and water. Water alone or rubbing hands against clothes is not enough.
- If we feed children after washing our hands with soap and water they will be sick less often and more able to play and grow.
 - Any kind of soap can be used in washing hands like: detergent soap, bathing soap etcetera.
 - There might be disease germs in our hands though we do not see them which cause illness in children.

SMALL DOABLE ACTIONS:

- Make sure that there is soap and water in the hand washing place.

WHY THIS IS AN ISSUE:

- Toilets that are already there are not healthy, hygienic, well-managed and usable.
 - Lack of knowledge about the need and importance of toilets by the whole family.
-

MEASURABLE OBJECTIVES: After listening to this episode, the intended audience will:

- KNOW:**
- Benefits of Latrine use
- FEEL:**
- Proud of having a sanitary latrine and that the whole family uses.
 - Happy to have a toilet that ensures privacy and safety.
- DO:**
- Ensure that the whole family uses the latrines and washes hands with soap

PURPOSE: The purposes of this episode are:

- To remind people of the benefits of latrine use
 - To demonstrate improved social standing by having the whole family be toilet users
-

CONTENT/MESSAGES:

- People who use sanitary latrines are modern, clean, healthy, knowledgeable, have increased social prestige.
- The benefits of toilet use are:
 - Convenience (near, available, can use at any time) and comfort
 - increase of social prestige
 - elderly and children, pregnant woman of family being facilitated after constructing toilet
 - Safer when having to go to the bathroom at night
 - Can dispose of child's feces safely in a toilet
 - Household environment will be better with no bad smelling around
 - Pride in being modern family with a clean toilet
- Proper management includes like bucket, soap, water, slippers etc.
- If you have any questions go to your nearest FCHV.

SMALL DOABLE ACTION:

- Ensure that your latrine has soap and water.

WHY THIS IS AN ISSUE:

- Sick children often lose their appetites and are difficult to feed.
 - People have the concept that the child cannot digest food during sickness
 - People don't know about the need of extra food and care during sickness
-

MEASURABLE OBJECTIVES: After listening to this episode, the intended audience will:

- KNOW:**
- Importance of feeding a sick child.
 - How to feed a sick child.
- FEEL:**
- Proud for being able to feed well, take good care of child and help them recover from sickness as quickly as possible.
- DO:**
- Continue to feed enough food and breast milk.
 - Continue to provide extra meal in addition the breastfeeding upto 2 weeks after child becomes well.
 - Take well care of the child with patience and family also supports in this regard.

PURPOSE: The purposes of this episode are:

- To educate mothers/caregivers on the importance of providing small amount of food and breast feed frequently when her child is sick.
 - To educate mothers/caregivers on the importance of providing an extra meal up to 2 weeks after her child has recovered.
 - To motivate mothers/caregivers that extra food is best for the sick child.
-

CONTENT/MESSAGES:

- Caring for a sick child is challenging but a child feels safest with his/ her mother when sick. For this reason it is important for a mother to spend as much time as possible with her sick child.
- The mother should continue to be patient with her child and breastfeed and offer small amounts of food frequently. A sick child can digest food, though often in these smaller amounts at a time. Family members should also help her spend more time with her child by doing her chores for her.
- As the child loses appetite during sickness he/she should be fed in a playful manner to motivate for eating. It needs to be breastfed more number of times than normal for breastfeeding children. If a child is above six months then the breastfeeding should continue and they should be given one extra meal each day of their favorite foods.
- For a sick child to recover they need more energy (food).
- Everyone in the family is tensed when a child is sick. But the child feels safe with mother during such times. Hence, favourable environment has to be created for the child to spend enough time with mother.
- After her child has recovered a mother/caregiver should give the child an extra meal a day for 2 weeks after recovery so that the child may regain the energy and strength as they were before they got sick.
- If there are any questions or concerns, go to a health facility or ask an FCHV.

SMALL DOABLE ACTION:

- Discuss how chores would be shared if the child was sick and the mother/caretaker needed the extra time.

WHY THIS IS AN ISSUE:

- Because FCHVs/Social mobilizers are the key persons working directly with women in the rural areas.
 - FCHVs/Social mobilizers are the trusted people and are considered the supporting agents in the community. Golden 1000 days' mother feels easy to share her problems with FCHVs/Social mobilizers.
 - FCHVs/Social mobilizers can provide support when the pregnant woman and breastfeeding mother encounters any problems.
-

MEASURABLE OBJECTIVES: After listening to this episode, the intended audience will:

- KNOW:** • That they can get information from FCHVs/Social mobilizers that will be friendly, correct and helpful.
- FEEL:** • That FCHVs/Social Mobilizers are friendly and helpful.
- DO:** • Seek advice or services from FCHVs/Mobilizers.

PURPOSE: The purpose of this episode is:

- To remind mothers that FCHVs and Social mobilizers are friendly and can help them with any issues or questions during the Golden 1000 days.
-

CONTENT/MESSAGES:

- FCHVs and Social mobilizers are friendly trained persons who can help you and your family to take care of mothers and babies in the Golden 1000 days.
- Golden 1000 days mothers and their families have respect on FCHVs more than the way they provide services in the community with seriousness and sincerity.
FCHVs will get opportunities to be involved in decision making processes in the community as a responsible and an important member of the society who serve the people being fully responsible.

NOTE TO THE WRITER: *In this episode, the writer should demonstrate an FCHV/Social Mobilizer practicing GALIDRAA with a client. GALIDRAA is a counseling process.*

- Greet
- Ask
- Listen
- Identify difficulties
- Discuss
- Recommend
- Agree
- Appointment

Notefor this episode for the magazine – *need to demonstrate an FCHV who is counseling and supporting a woman from a marginalized group using the GALIDRAA process.*

May FCHV/Social Mobilizers are holding discussion groups that are beneficial to community members. We should ensure that our DILS are a part of those groups.

NOTE FOR PRODUCER OF MAGAZINE – Please be sure to include discussion of an FCHV providing counseling to a marginalized woman using GALIDRAA.

SMALL DOABLE ACTION:

- Find out if your local FCHV or social mobilizers are holding any meetings for Golden 1000 days mothers and participate in it.
- Consulting FCHV or SM in hesitantly regarding any problems encountered.

WHY THIS IS AN ISSUE:

- Communities do not take the issues of pregnancy, child birth, postpartum care and child rising seriously. They take it as a matter of sole concern of a family.
-

MEASURABLE OBJECTIVES: After listening to this episode, the intended audience will:

- KNOW:**
- How and when to help a mother and child in the period of golden Golden 1000 days.
- FEEL:**
- Proud to have made contributions in developing a healthy society by playing a remarkable role regarding the issues of golden 1000 days mother and children.
 - Proud to have a created a healthy society.
- DO:**
- To find out what role to play in all types of community structures in order to prioritize the issues of golden 1000 days.

PURPOSE: The purpose of this episode is:

- To motivate the community and its people to feel inspired to support golden 1000 days and mother and family.
-

CONTENT/MESSAGES:

- A society can monitor if Golden 1000 days mothers and children are being given special care, health treatments, necessary nutrition and additional food and if found that this is not happening then can be worked on making favorable environment. It can also give advices if such mothers and children are deprived. In some cases, a society can also fulfill such deprivations.
 - Neighbors can be supportive of families practicing the nutrition and hygiene information promoted in this radio program.
 - Neighbors can talk to the husband and mother in law in a positive way about the way the family is supporting the Golden 1000 days woman and child.
- The subject matter of golden 1000 days mother and baby should be prioritized in all the activities that take place in the community and also in all the community organizations and various activities need to organize in the community level for the promotion of nutrition of children.
- If a community is a good place to be and supportive of Golden 1000 days mothers, then people will stay and raise their children. The community will be raising their own doctors, engineers and teachers.

SMALL DOABLE ACTION :

- Make the issue of golden 1000 days a subject matter of discussion in meetings that take place in the community.

MEASURABLE OBJECTIVES: After listening to this episode, the intended audience will be able to know:

- The main objective of the Review episode is to go over the content of the recent set of episodes and to get audience feedback.
- Producers may be creative in doing this episode. Some formats that can be used are:
 - Interviews
 - Vox pop
 - Songs
 - Panel discussion
 - News briefs, etc.

GLOSSARY:

Golden 1000 days:	The 1,000 days from conception (or start of pregnancy) to 2 years after birth.
Anemia:	Anemia is any one of the disorders in which the blood has fewer than normal number of red blood cells, or (iron) the red blood is deficient in hemoglobin-carrying capacity.
Ante-Natal care:	The health care and education provided to women during pregnancy and before delivery.
Aspiration:	Hopes
Bacteria:	Micro-organisms which can cause disease if pathogenic.
Colostrum:	The first thick yellow milk (<i>Bigautidudh</i>) secreted from mother's breast right after delivery.
Complementary Feeding:	The additional feeding of infants that should start after completion of 6 months from birth. The child receives both breast milk or a breast milk substitute and solid (semi-solid or soft) foods. The process starts at completion of six months when breast milk alone is no longer sufficient to meet the nutritional requirements of infants, and therefore other foods and liquids are needed, along with breast milk. The target age range for complementary feeding is generally taken to be completion of 6 months to 24 months of age. It is not recommended to provide any complementary foods to children who have not completed six months from birth.
Complementary Food:	Any food, whether manufactured or locally prepared, used as a complement to breast milk or to a breast milk substitute.
Conception:	The meeting of a male sperm with a female egg during intercourse which can result in pregnancy.
Contraception:	The means by which pregnancy can be prevented. The practice of contraception has always existed but in the past it has not always been reliable or safe. Today we have many new, modern methods from which we can choose according to need. The new, modern methods are effective and safe.
Diverse foods:	Diverse food means eating from at least the four food groups. They are 1) animal source foods (milk, eggs – meat/fish), 2) beans (lentils, chickpeas and white beans), 3) grains and 4) fruits (orange/yellow) and vegetables (leafy dark green).
GALIDRAA:	GALIDRAA is a counseling process. (Greet, Ask, Listen, Identify difficulties, Discuss, Recommend, Agree, set next Appointment).
Immunization:	Immunizations are shots or drops that help a body resist diseases.
Postnatal Care:	The health care and education provided to mothers after delivery.
Active feeding:	Feeding infants directly and assisting older children when they feed themselves, being sensitive to their hunger and following cues of when they are done eating.
SarbottamPitho:	Nutritious supplementary food prepared by grains and legumes.

Stunting:

Stunting, or chronic under nutrition, is a form of under nutrition. It is defined by a height-for-age (HAZ) z-score below two SDs of the median WHO standards. Stunting is a result of prolonged or repeated episodes of under nutrition starting before birth. This type of under nutrition is best addressed through preventive maternal health and nutrition programmes aimed at pregnant women, and improved infant and young child feeding of children under age 2, especially complementary feeding.

Healthy Timing and Spacing of Pregnancy: Healthy Timing and Spacing of Pregnancy (HTSP) is an intervention to help women and families make an informed decision about the delay of first pregnancy and the spacing or limiting of subsequent pregnancies to achieve the healthiest outcomes for women, newborns, infants, and children, within the context of free and informed contraceptive choice taking into account fertility intentions and desired family size, as well as the social and cultural contexts (ESDHTSP Reference Guide).

ACRONYMS:

ANC	Ant-Natal Care
BCC	Behavior Change Communications
CHD	Child Health Division
DIL	Daughter-in-Law
DOA	Department of Agriculture
DLS	Department of Livestock Services
DPHO	District Public Health Office
EHA	Essential Hygiene Actions
ENA	Essential Nutrition Actions
FCHV	Female Community Health Volunteers
FP	Family Planning
GESI	Gender Equality and Social Inclusion
GON	Government of Nepal
HFP	Homestead Food Production
HKI	Helen Keller International
HTSP	Healthy Timing and Spacing of Pregnancy
IMCI	Integrated Management of Childhood Illnesses
IPC	Interpersonal communication
M&E	Monitoring and Evaluation
MCHW	Maternal and Child Health Worker
MIL	Mother-in-Law
MNCH	Maternal and Newborn and Child Health
MoHP	Ministry of Health and Population
NDHS	National Demographic and Health Survey
NEWAH	Nepal Water for Health
NHEICC	National Health Education Information and Communication Center
NHSP	Nepal Health Sector Program
NTAG	Nepali Technical Assistance Group
ODF	Open Defecation Free
ORS	Oral Rehydration Solution
PNC	Postnatal Care
SBCC	Social Behavior Change Communications
USAID	United States Agency for International Development
VDC	Village Development Committee
WASH	Water, Sanitation and Hygiene

Bhanchhin Aama Radio Design Document Workshop - Phase II

Design Team Members

7-10 January, 2014, Venue: Hotel Himalayan Horizon, Dhulikhel

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11.	Saraswati Shrestha	EHA National Coordinator	Suaahara (need base)
12.	Rosie Suwal/ Ram Kumar Neupane	Agriculture & Food Security Manager/ HFP Coordinator	Suaahara (need base)
13.	Dr. Sameena Rajbhandari	Health Services Promotion Manager	Suaahara
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