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Floating market in Vietnam.
 Photo: Bioersity International\F. de la Cruz.

Using vignettes to explore gender dimensions of HOUSEHOLD FOOD SECURITY AND NUTRITION

Introduction

Eliminating malnutrition is one of the greatest challenges of our time. Poor quality diet is a principal cause of malnutrition and a top risk factor of morbidity and mortality globally (Wang et al., 2017). Nutrition programs and projects abound typically target children, mothers, and other women of childbearing age, who are particularly vulnerable to nutrient deficiencies and often discriminated against when it comes to intra-household decisions shaping access to and allocation of nutritious foods. The close association between women, particularly young and middle-aged, and food processing and preparation has further encouraged

nutrition-sensitive initiatives to target this demographic group (Alderman, 2017; FAO, 2017). Yet, the influence of other family members – especially fathers, grandmothers (mother-in-law), and other extended family relations in the household – over maternal and child health and nutrition is increasingly being acknowledged (Satzinger et al., 2009; FAO, 2017). Assuming that young and middle-aged women alone are responsible for this domain of activity thus under-recognizes the ways different household members and local social norms associated with household roles and relations shape dietary decisions among family members.

Social norms comprise the everyday behaviors and interactions that are deemed to be typical and appropriate in a context. These decisions affect food production, budgets and consumption. For example, despite women's central roles in food provisioning and preparation, dietary decisions are not made individually but rather are shaped by numerous factors. Wider social norms and men's and women's expectations shape the resources allocated to household food budgets, dietary and cooking preferences, and how meals are shared. Social norms and other contextual influences contribute to variance on the ground in women's and men's control of assets for food production and purchases as well as their market access. While some decisions and activities are made or carried out jointly by the primary adult man and woman in a household, others involve greater gender specialization. A better understanding of the norms shaping household roles and relations at different moments of the nutrition pathway can enhance nutrition-related research and interventions,

including by identifying important roles played by "non-traditional" actors such as husbands and mothers-in-law.

In what follows, we outline a data collection method for mapping the engagement of household members along the nutrition pathway, beginning at the post-harvest or food purchase stage. This starting point along the pathway owes to the fact that the tool was applied within the larger GENNOVATE study, which also explicitly focused on production decisions in various other parts of the methodology.¹ Yet, the tool can be expanded to analyze decisions and roles related to food production for household use and markets, including livestock raising and related products. As done within the GENNOVATE study, it can be combined with other methods or integrated in a larger data collection effort to understand the factors and processes shaping household production, exchange, and consumption.

¹ GENNOVATE is a global comparative study that focuses on the relationship between gender norms, agency, and agricultural and environmental innovation (see <https://gender.cgiar.org/themes/gennovate/>).



Selling and purchasing maize at the market in Northwest Vietnam. Photo: Institute for Social Development Studies/Van Anh Nguyen.

Mapping gendered activities and decision-making along the nutrition pathway using vignettes

Vignettes are fictional scenarios presented to participants during data collection or “short stories about hypothetical characters in specified circumstances, to whose situation the interviewee is invited to respond” (Finch, 1987: 105). Some of the most effective vignettes can be very general and allow study participants to fill in their own details. The use of short stories about third parties offers a less personal, and thus less threatening, way to elicit perceptions on sensitive topics (Hill, 1997). Vignettes are typically used to explore the reasons and contexts which participants believe influence specific actions, and to understand how participants respond to particular behaviors, situations, and structures, particularly when these may pose moral dilemmas (Barter & Renold, 1999). They may be used to explore perceptions of situations wherein fictional characters carry out “typical” activities, or wherein they break or challenge local norms.

Sampling decisions are key dimensions of all field research. In GENNOVATE’s qualitative methodology, vignettes are applied in relatively homogeneous focus groups of the same gender, age-group, and socioeconomic background, composed of eight to twelve members, at least six of whom are involved in agriculture and natural resource management. Yet, the tool can also be applied in individual interviews and even in quantitative research. Speaking separately with women and men is advisable in many contexts where women may not freely express their opinions in the presence of men. In some circumstances, a daughter-in-law may also find it challenging to speak freely in the presence of a sister- or mother-in-law. In the GENNOVATE study, we were mindful not to have more than one representative from a household in a given focus group. The selection of participants based



Mother with child preparing fresh green beans harvested from her homegarden for dinner.
Photo: Bioversity International/Jessica Raneri.

on other characteristics will depend on the purposes of the specific study and/or initiative.

To make the vignette more engaging, a visual of a table (see below) drawn on a flipchart can be used during the exercise.² The facilitator can add “Xs” in the columns of the table that refers to the person/people who carry out a

given activity/decision. Depending on the degree of detail required, facilitators can prompt more or less deeply as to why certain decision-making or activity patterns emerge, and whether participants believe those to be desirable or optimal. The notetaker, who works as a pair with the facilitator, should take detailed notes of the focus group members’ explanations.

² For contexts where literacy may be limited, figures depicting different household members can be used to head the columns.

Key themes and possible adaptations

Key themes of interest in this activity are the division of labor around food production (not described here for the reasons explained above), purchase, processing, preparation, and child feeding; decision-making at each of these stages; intra-household allocations of food; and reasons underlying these processes. Although the sample vignette below focuses on a typical day, it is possible to adapt it to address different types of situations. For example, it can be adapted to:

- examine situations of food abundance or scarcity;
- understand under what circumstances it is appropriate for gender roles to shift within the household. For example, a woman may only go to market to purchase groceries when her husband is away for a certain period of time, or it may be acceptable for a husband to do "women's work" without social repercussion when his wife is sick;
- explore how gender roles in food preparation have changed over time – e.g. compared to how food was prepared 10 years ago or by the previous generation;
- probe for information on decision-making about, or access to, specific animal-sourced foods and other micronutrient-rich products that are more difficult to acquire (e.g., vegetables), but are nutritionally important;
- the sample vignette provided is general, and researchers are strongly encouraged to adapt the tool to make it more relevant for the cultural contexts where the data is being collected.

Sample vignette and questions

[Read:] I would like to ask you about how dietary decisions are usually made in your community, focusing on food preparation and eating habits. I would also like to ask you about who is generally responsible for certain food-related tasks. To do this, let's take the example of a typical couple that is busy with agricultural activities in this village. Let's call them Ana and Adam.³ Ana and Adam live with Adam's parents and their children, who include a nine-year-old girl and an eleven year old boy⁴. In this table, I've listed all of the household members who could be involved in food-related activities or decisions.

Who does what?/Who decides what?	Ana	Adam	Daughter	Son	Adam's mother	Adam's father

(Please add the row headings step-by-step after asking the relevant questions below.)

³ The names should be adapted based on the local context.

⁴ The daughter is deliberately made to be younger than the son to see whether gender trumps age in explaining children's involvement in food preparation.

Q1 Imagine that it's time to prepare a meal for the family. Who decides what ingredients to prepare? *(Pause for response. Place an "X" in the table cell that refers to those involved)*

Q2 And who decides how to prepare them?

Q3 What do you think is running through [their/his/her] mind when they decide what to prepare and how?

(Pause for response. A rich discussion should be conducted of the factors the group deems to be important. With a literate group, a flipchart may be used to capture key points).

- a. Which three factors are most important for choosing what to prepare and why?
(The top three factors can be identified on the flipchart and numbers can be added next to them to identify their rank.)
- b. Does/how does this change depending on the time of year or season?

The factors below can be posted on a separate flipchart. At the end of the discussion, the facilitator enquires specifically about any points listed and not yet mentioned by the focus group, and the individual FGD members are asked to select the factors they believe most affect their own decisions about what kind of food is prepared on a typical evening in their own home.

- i) *the time it takes to prepare the food;*
- ii) *how difficult (physically demanding) it is to prepare the food;*
- iii) *the quantity of food available at the homestead;*
- iv) *the amount of money available for purchasing foods;*
- v) *the diversity of foods available for use (either produced or through purchase);*
- vi) *the availability of cooking fuel (which one?);*
- vii) *the availability of water or other inputs (which?) for food processing;*
- viii) *the number of people available for preparing the meal;*
- ix) *personal taste preferences;*
- x) *taste preference of another member of the household (specify who);*
- xi) *the cost of different foods;*
- xii) *perceived healthiness of the ingredients (consider following up with a question about what participants consider "healthy" and why);*
- xiii) *health restrictions or requirements (of themselves or another member of the household).*

Q4 Coming back to those who decide what to prepare: Would the same person(s) be the one(s) to decide on the quantity of food to prepare, or would anyone else be involved?

Q5 Still thinking of our typical family, who is involved in actually preparing the meal?

Q6 Who would make decisions on the budget for food? *(Facilitator may probe about how this is done, if necessary: How would Ana and Adam discuss the food budget? What would their conversation be like? Does this budget vary? How and why?)*

Q7 Still thinking of our typical family: Who within the household decides who has to contribute money for food expenses? *(Pause for response)* And whose responsibility would it generally be to provide money for food-related expenses? *(Pause for response)* Would that depend on the type of food expense (e.g. buying grain vs meat)?

Q8 Who would go to the market to buy the food: Ana or Adam or another household member? Why?

Q9 Do Ana and Adam produce any of their own food from crops or animals? What do they produce?

Q9a How are decisions made about which and how much of this production is consumed or sold for cash? Does Ana decide? Adam? Do they decide jointly or with other household members?

Q10 Now imagine that it is mealtime and a meal has been prepared. Who from this typical family would decide how to distribute food among household members?

Q11 Thinking again about this typical family, how would the meals usually be prepared on the table/floor? Does everyone in the family eat from the same plates or are different plates prepared for different family members? Can you describe who would be usually eating from the same plate?

Q11a Would certain family members or others sharing the meal be prioritized with foods considered particularly nutritious or tasty? If so, for what reasons are they prioritized?

Q12 Still in this typical agricultural household, would some foods typically be preserved (dried, pickled, salted or fermented)? If so, who would decide which and how much to preserve? And what factors would influence their decision?

Q13 Whose responsibility would it be to preserve foods?

Q14 Finally, if Ana, Adam, or another household member found out about a new food or practice related to healthy eating, whose decision would it be to try eating new foods in the household?

Type of information generated

Below is an example of the type of data generated using the tool, based on findings that come from focus groups with poor and middle-income women and men conducted in two villages in Son La province, Vietnam, as part of the GENNOVATE study. Table 1 shows the data by focus group, but the rest of the data presented are consolidated across focus groups to provide an idea of the range of responses provided. The table is used as a visual during the activity to keep participants engaged, but detailed

notes are needed to capture the richness of the information provided, which will form the basis of the analysis. Much of the interest is in understanding why certain practices take place for identifying entry points to enhance nutrition and gender equality. For instance, when more than one person is involved in providing money for the household diet, as shown in Table 1, detailed notes or transcripts should shed light on who has more or less input in those decisions and under which conditions.

Table 1: Fictional household members' activities and roles in making decisions related to food purchase, preparation, and consumption according to two women's and two men's focus groups from two villages in Son La, Vietnam

Who does what?/ Who decides what?	Ms Anh	Mr. Ban	9-year-old daughter	11-year-old son	Ban's mother	Ban's father
Deciding what to prepare	XX	X			X	
Deciding how to cook/process	XX	XX				
Deciding quantity	X	X				
Cooking	XXXX	X	XX		X	
Deciding on budget	XX	XX				
Providing money	X	XXXX				
Going to market	XXX	XXX				
Harvesting from household reserves	XX	XXXX				
Deciding how to distribute food	XXXX	X			X	X
Prioritized with healthy or tasty food			XX	XX	XXX	XXX
Deciding what to preserve	XXXX	XXX				
Preserving	XXXX	XXX				
Trying new foods or practices	X	XXX				

X=Poor women, village 1
 X = Poor men, village 1
 X=Poor women, village 2
 X=Poor men, village 2

Selected narrative responses to Q1-Q14

Q1: Imagine that it's time to prepare a meal for the family. Who decides what to cook? (Pause for response. Place an "X" in the table cell that refers to those involved.)

- We ask one another which foods to have. I prepare the meal, e.g., I ask my mother in law what she likes to have and I decide what I like. If she wants meat, I'll cook meat, if I like vegetables, I'll add vegetables as well.
- Men decide for meaty meals, and women for veggie-meals.

Q3: What do you think is running through [their/his/her] mind when they decide what to prepare and how?

- A little meat, a little vegetable, chili as well;
 - The availability of vegetables, chicken, duck, fish in the house;
 - Availability of spices (fish sauce, salt, monosodium glutamate...) at home;
 - Processing methods;
 - The time it takes to cook: complicated dishes take more time; when busy, foods will be boiled instead;
 - Cooking time;
 - Number of people/quantity of food needed;
 - Available money for food at home;
 - Adding liquor if guests come.
- a. Top three factors influencing choice of what to prepare (named by 4/4 groups):**
- Availability of food (rice), cooking fuel (firewood), water.
- b. Does it depend on the time of year?**
- Labor constraints during cropping seasons;
 - Fuel constraints during rainy season, when firewood is not available;
 - Food budget constraints in March and April, when we cannot go to work for pay.

Q6: And who would make decisions on the budget for food?

- Men earn money and give it to women; men decide the budget and women only keep money for their husbands;
- Women can decide how much to spend on food.

Q8: Who would go to the market to buy the food?

- The market is far away, ~2-3 km away so men would go as they can ride motorbike. We don't go to the market everyday; we raise chicken and grow vegetables for our own consumption;

- Mostly men, women rarely go to the market.

Q11a: Would certain family members be prioritized with foods considered particularly nutritious or tasty?

- Women, unless they are ill, must not eat the good parts;
- Good food should be distributed for grandparents first, especially the parts they prefer (drumstick, chicken heart...); grandparents and kids are prioritized, then comes the husband and wife. "My husband gives me what I like.";
- Son and daughter are treated equally;
- Children and the elderly are prioritized for good food, softer foods. We may cook separately for them. They are given more to eat;
- For example: meat, people choose for the elders only good food, good portions of meat, and the way they cook it is a little different too, maybe they cook it until it is softer or mince it finely and cook. We give the chicken thighs to the two children, we give our parents the good meaty part;
- Milk is not popular here. Being able to drink milk depends on the [socioeconomic] situation of each household;
- Elders, children, sick people, pregnant women are prioritized with good food, meat, fruit, vegetables... based on the nutrition instructions provided by the healthcare department (Women's Union Commune – Muong Chanh);
- Children get more food than the parents and grandparents. If there is good food, son and daughter-in-law will give it to the parents;
- Babies drink milk, eat rice porridge, sometimes we cook porridge with chicken and vegetables like pumpkin or chayote;
- Teachers remind parents to diversify food for their children.

Q12: Would some foods typically be preserved (dried, pickled, salted, or fermented)? If so, who would decide which and how much to preserve? And what factors would influence their decision?

Typical foods preserved:

- Fish is dried to make fish sauce;
- Fish is salted;
- Meat (pork or buffalos or beef) is smoked over stove;
- Bamboo shoots are dried;

- Meat is dried and salted: pork, chicken, beef, buffalo (Thao people called this nhua da);
- Mushrooms are dried;
- Women or men will decide whether to preserve food. "When we have abundant meat, I'll tell my husband to put above stove for saving. He expects to make the decision, but if I disagree, he would listen to me. I process foods more than him."

Q13: Whose responsibility would it be to preserve foods?

If it's a small quantity, the wife alone will preserve, otherwise, husband and wife will preserve food together.

Q14: Finally, whose decision would it be to try eating new foods in the household?

- Anyone in the household can decide. If the husband knows about new foods, he can decide, if the wife knows, she will decide;
- Men will decide use of new food that is nutritious and healthy;
- For example, if men see people selling wild boar, they can buy it for their family, they buy when they like. Women often want to save money so they may not want to buy;
- The husband can taste good dishes outside of the home and ask his wife if she can make it;
- If the husband hears something new, he will discuss with his wife and he will make the decision;
- We have not had anything new for a long time.



Young women practicing improved gardening techniques.
Photo: Bioversity International/Jessica Raneri.

Informing AR4D with analysis from vignette data



Focus group with Thai men in Northwest Vietnam.
Photo: Institute for Social Development Studies/Van Anh Nguyen.

The vignette data obtained in the above example informed the design of a gender-sensitive nutrition intervention in Northwest Vietnam. Analyses focused on comparing data across focus groups (within and across villages) to identify similarities, differences, and the reasons behind these, as well as going "deep" into the reasons and processes explained by each focus group. The data showed the involvement of many household members in food-related decisions and practices, and suggested the importance of engaging these different members in nutrition-related programs and interventions. For example, men were involved in preserving foods and were sometimes the ones exposed to new foods and influencing their preparation at home. Men's involvement was noted for some areas of food preparation. When special guests were invited to the house, the male head of household often took it upon himself to prepare the meal, including selecting which foods to cook and ways to prepare and present them, so as to honor his guests. Women often made decisions about what to grow in home gardens – the main source of vegetables for many households – in light of the taste preferences of the men and elders in the household.⁵ Both women and men expressed wanting to be involved in activities related to improving the health and nutrition of their families.

As such, farmer-to-farmer village community groups targeting and engaging both women and men were formed to improve nutritional knowledge in the communities and both women's and men's capacities to take decisions informed by that knowledge. Interventions were designed to

⁵ See also <https://gender.cgiar.org/enablinggenderequality/> for more information on decision-making among the Thai in Northwest Vietnam based on these case studies.

reflect the areas in which women and men respectively participate in food preparation and decisions. For instance, men were encouraged to apply parts of their experience preparing food for guests in everyday practice. Men and women's joint engagement in nutrition interventions was promoted based on the finding that they discuss important nutrition-related issues together. Although men were repeatedly said to be the "pillar of the family" and main decision makers, women considered that their opinion could influence their husband's decisions. The vignette data thus allowed interventions to be tailored to the social context.

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