|  |
| --- |
| Purpose:   * Capture details of time allocation, financial outlays, and opportunity costs * Understand how activities and resource use have changed because of <Project Name> |

INSTRUCTIONS

This should be used as a guide for a group discussion for frontline workers directly supported by or associated with <Project Name> (e.g., field supervisors, community nutrition volunteers, village model farmers, healthcare workers, agriculture extension agents, FCHVs or other types of volunteers). Ideally, all participants in the focus group should be the same type of frontline worker. If different types of workers are present, note the types below. Directions are noted in the guide and should not be read out loud to the respondents. Please do your best to probe for detailed answers and accurate estimates, particularly of costs and time spent in activities related to <Project Name>.

|  |  |
| --- | --- |
| **Date of FGD** \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_ | **FGD Location:** |
| **District:** | |
| **Moderator:** | **Note-taker:** |
| **Start time:** | **Stop time:** |
| **Duration (in mins):** | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **ID** | **District (*or appropriate level name)*** | **Sub-level 2 *(name)*** | **CORE/CORE PLUS** | **Sex** | **Type of Participant** | **Participant Notes** |
| **1** |  |  |  |  |  |  |
| **2** |  |  |  |  |  |  |
| **3** |  |  |  |  |  |  |
| **4** |  |  |  |  |  |  |
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| **8** |  |  |  |  |  |  |
| **9** |  |  |  |  |  |  |
| **10** |  |  |  |  |  |  |

**Overall comments about the FGD:**

INTRODUCTION

**Direction: Introduce the note taker and colleagues who will be listening in on the focus group discussion.**

Today we will be asking about your experiences participating in or leading activities related to <Project Name>. We would like to know about how participating in <Project Name> has affected you and about how much time and resources you spend on activities related to <Project Name>. Try to recall accurately the amount of time and resources you spend attending these activities. There is no right answer to these questions, but it is important to us that you do not over or underestimate those amounts.

1. During a normal, non-holiday month, how many days do you work? How many hours per day do you work? What about during a quiet month, or a particularly busy month? **Direction: if it varies among participants, include a range.**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Quiet | Normal | Busy |
| Days/Month |  |  |  |
| Hours/Day |  |  |  |

1. On average, what proportion of your time working is spent on activities related to <Project Name>? If it varies over time and/or across participants, include a range. (e.g., 0%, 10-25%, 50%, 100%) **If 0% (participants do not work with <Project Name>), thank participant and end discussion.**

|  |  |  |
| --- | --- | --- |
|  | Average | Range |
| % |  |  |

1. What are your primary activities as part of the <Project Name> project?

1. Are these activities daily, weekly, monthly, yearly, or once-off? **Direction: Add Project-related activities as lines on “Economic Costs” spreadsheet under the appropriate frequency heading.**

|  |  |
| --- | --- |
| Frequency | Specific Activity |
| Daily |  |
| Weekly |  |
| Monthly |  |
| Yearly |  |
| Once-Off |  |

1. **Direction: Only for Community Nutrition Volunteers and Field Supervisors.** We would like to understand how you divide your time across your different <Project Name> activities. We have listed several <Project Name> activities on the next page. If we have missed any of your <Project Name> activities, we can add them as well.
   1. Probe for:
      1. Time spent working for project vs. other work
      2. Trainings (e.g., attending formal trainings of <Project Name> front-line workers)
      3. Household visits (e.g., BCC counselling, agriculture extension)
      4. Community member groups targeted to beneficiary, i.e. ‘Healthy Mother’s Group (includes planning, running, attending meetings)
      5. Community events (e.g., key life events, demonstration events)
      6. Village Model Farm
      7. <Project Name> planning (meetings, stakeholder meetings, assessments, situation analysis, program design)
      8. Other project activities not captured above

**Direction: average percentages across FGD participants**.

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | |  | **<Project Name> Activities** | | | | | | | |
| **Project** | **Non-Project** | Total | *Training* | *Household visits* | *Health Mother's Group* | *Community Events* | *Village Model Farm* | *Planning/Coordination* | *Other:* | *Other:* | Total |
|  |  | 100% |  |  |  |  |  |  |  |  | 100% |

1. **Direction: Only for Community Nutrition Volunteers and Field Supervisors.** On average, what proportion of your time spent on activities related to <Project Name> is spent on each of these thematic areas? **Direction: if it varies among participants, include a range.**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Nutrition | Agriculture | Health | WASH | GESI | Governance | Integrated | Other | Total |
| % |  |  |  |  |  |  |  |  | 100% |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Nutrition | Agriculture | Health | WASH | GESI | Governance | Integrated | Other | Total |
| % |  |  |  |  |  |  |  |  | 100% |

1. What materials, equipment or supplies do you receive from <Project Name>? (**Direction**: probe for each of these categories and list out all items, and ask how much the participant received and how frequently for each item and fill in the boxes below.)

|  |  |  |  |
| --- | --- | --- | --- |
| **ID** | **Item** | **Quantity** | **Frequency** |
|  |  |  |  |
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<PROJECT NAME> TRAININGS

**Direction**: complete section if respondents indicate that they attend <Project Name>-supported trainings.

1. During a normal, non-holiday month, approximately how many <Project Name> trainings do you attend, supervise, coordinate, or facilitate? How about quarterly or annually?
   1. Where are the trainings usually held? (e.g., <Project Name> office, rental hall, other location)
   2. How long do the trainings last on average? **Direction: Fill out time spent on appropriate line of “Economic Costs” spreadsheet.**
2. How do you travel to Project trainings? Mark all that apply.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Walking | Bicycle | Public Transport | Private Car | Private Motorbike | Other |
| Count participants |  |  |  |  |  |  |

1. How long does it take you to reach Project trainings? If it varies, include a range. (e.g., 0 minutes, 30-45 minutes, 10-12 hours)

|  |  |  |
| --- | --- | --- |
|  | Average | Range |
| Minutes/Hours |  |  |

1. Do you pay out of pocket to travel to Project trainings?

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| Count participants |  |  |

1. If you do pay, much do you pay to travel to Project trainings? If it varies, include a range. (e.g., 0 LCU, 50-100 LCU, 0-10000 LCU)

|  |  |  |
| --- | --- | --- |
|  | Average | Range |
| LCU |  |  |

1. What other resources do you use to travel for Project trainings (not covered by <Project Name>)?
   1. Probe for lodging in the community
   2. Probe for food/snacks for group
   3. Probe for childcare
   4. Probe for other expenses

HOUSEHOLD VISITS/EXTENSION

**Direction:** complete section if respondents indicate that they conduct or participate in <Project Name>-related household visits/extension work.

1. During a normal, non-holiday month, approximately how many times do you coordinate, supervise, or conduct household visits? How about quarterly?
   1. How long do the household visits last on average? **Direction: Fill out time spent on appropriate line of “Economic Costs” spreadsheet.**
2. How do you travel to household visit activities? Mark all that apply.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Walking | Bicycle | Public Transport | Private Car | Private Motorbike | Other |
| Count participants |  |  |  |  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Walking | Bicycle | Public Transport | Private Car | Private Motorbike | Other |
| Count participants |  |  |  |  |  |  |

1. How long does it take you to reach household visit activities? If it varies, include a range. (e.g., 0 minutes, 30-45 minutes, 10-12 hours)

|  |  |  |
| --- | --- | --- |
|  | Average | Range |
| Minutes/Hours |  |  |

1. Do you pay out of pocket to travel to household visit activities?

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| Tick/participant |  |  |

1. If you do pay, much do you pay to travel to household visit activities? If it varies, include a range. (e.g., 0 LCU, 50-100 LCU, 0-10000 LCU)

|  |  |  |
| --- | --- | --- |
|  | Average | Range |
| LCU\* (specify) |  |  |

\*LCU is local currency unit, i.e. rupees

1. What other resources do you use to travel for household visit activities (not covered by <Project Name>)?
   1. Probe for lodging in the community
   2. Probe for food/snacks for group
   3. Probe for childcare
   4. Probe for other expenses

HEALTH MOTHER’S GROUP

**Direction:** complete section if respondents indicate that they lead, facilitate, or attend Health Mother’s Groups.

1. When did the Health Mother’s Group first start in your community?
   1. Probe when the group started (month and year)
   2. Or probe to capture the number of years it has existed.
2. During a normal, non-holiday month, how many days per month does the group meet?
   1. Where are the meetings usually held?
   2. How long do the meetings last on average? **Direction: Fill out time spent on appropriate line of “Economic Costs” spreadsheet.**
   3. How many members regularly attend these meetings on average? **(Direction: ask for copy of HMG attendance record)**
   4. How long have the members here been participating in this group on average? How long has the longest-serving member been in the group? And the shortest-serving member?
3. How do you travel to your Health Mother’s Group meetings?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Walking | Bicycle | Public Transport | Private Car | Private Motorbike | Other |
| Count participants |  |  |  |  |  |  |

1. How long does it take you to reach these meetings? If it varies, include a range. (e.g., 0 minutes, 30-45 minutes, 10-12 hours)

|  |  |  |
| --- | --- | --- |
|  | Average (among participants) | Range (among participants) |
| Minutes/Hours |  |  |

1. Do you pay to travel to these meetings?

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| Tick/participant |  |  |

1. If you do pay, how much do you pay to travel to these meetings? If it varies, include a range. (e.g., 0 LCU, 50-100 LCU, 0-10000 LCU)

|  |  |  |
| --- | --- | --- |
|  | Average (among participants) | Range (among participants) |
| LCU\* |  |  |

\*LCU is local currency unit, i.e. rupees

1. What other resources do you use to attend Health Mother’s Group meetings?
   1. Probe for lodging in the community
   2. Probe for food/snacks for group
   3. Probe for childcare
   4. Probe for other expenses

COMMUNITY EVENTS: FOOD DEMONSTRATIONS AND OTHER COMMUNITY EVENTS

**Direction**: complete section if respondents indicate that they coordinate, supervise, or conduct <Project Name> Food demonstrations or other community events (*capture information for all project sponsored community events*).

1. During a normal, non-holiday month, approximately how many times do you coordinate, supervise, or conduct food demonstrations or other community events? How about quarterly?
   1. How long do the community events, food demonstrations, or other community events last on average? **Direction: Fill out time spent on appropriate line of “Economic Costs” spreadsheet.**
2. How do you travel to support food demonstrations or other community events? Mark all that apply.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Walking | Bicycle | Public Transport | Private Car | Private Motorbike | Other |
| Count participants |  |  |  |  |  |  |

1. How long does it take you to reach food demonstrations or other community events? If it varies, include a range. (e.g., 0 minutes, 30-45 minutes, 10-12 hours)

|  |  |  |
| --- | --- | --- |
|  | Average | Range |
| Minutes/Hours |  |  |

1. Do you pay out of pocket to travel to key life events, food demonstrations, or other community events?

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| Tick/participant |  |  |

1. If you do pay, much do you pay to travel to food demonstrations or other community events? If it varies, include a range. (e.g., 0 LCU, 50-100 LCU, 0-10000 LCU)

|  |  |  |
| --- | --- | --- |
|  | Average | Range |
| LCU\* |  |  |

\*LCU refers to local currency unit, i.e. rupees.

1. What other resources do you use to travel for food demonstrations or other community events (not covered by <Project Name>)?
   1. Probe for lodging in the community
   2. Probe for food/snacks for group
   3. Probe for childcare
   4. Probe for other expenses

EXAMPLE: VILLAGE MODEL FARMS

**Direction**: complete section if respondents indicate that they coordinate activities related to <Project Name> village model farms, or if they are village model farmers. ***NOTE: This is an illustration of an activity that is aimed to increase smallholder agriculture, livestock or aquaculture production. Replace this with your relevant and similar type of program activity.***

1. During a normal, non-holiday month, approximately how many times do you coordinate, supervise, or conduct activities related to <Project Name> village model farms? How about quarterly?
   1. How long do the activities related to <Project Name> village model farms last on average? **Direction: Fill out time spent on appropriate line of “Economic Costs” spreadsheet.**
2. How do you travel to activities related to <Project Name> village model farms? Mark all that apply.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Walking | Bicycle | Public Transport | Private Car | Private Motorbike | Other |
| Count participants |  |  |  |  |  |  |

1. How long does it take you to reach activities related to <Project Name> village model farms? If it varies, include a range. (e.g., 0 minutes, 30-45 minutes, 10-12 hours)

|  |  |  |
| --- | --- | --- |
|  | Average | Range |
| Minutes/Hours |  |  |

1. Do you pay out of pocket to travel to activities related to <Project Name> village model farms?

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| Tick/participant |  |  |

1. If you do pay, much do you pay to travel to activities related to <Project Name> village model farms? If it varies, include a range. (e.g., 0 LCU, 50-100 LCU, 0-10000 LCU)

|  |  |  |
| --- | --- | --- |
|  | Average | Range |
| LCU\* |  |  |

\*LCU refers to local currency unit, i.e. rupees.

1. What other resources do you use to travel for activities related to <Project Name> village model farms (not covered by <Project Name>)?
   1. Probe for lodging in the community
   2. Probe for food/snacks for group
   3. Probe for childcare
   4. Probe for other expenses
2. **Direction: these questions are for VMFs**. What materials, equipment or supplies (e.g. seeds and chicks) have you received to support the village model farm activity? (**Direction**: probe for each of these categories and list out all items, and ask how much the member received and how frequently for each item and fill in the boxes below.)

|  |  |  |  |
| --- | --- | --- | --- |
| **ID** | **Item** | **Quantity** | **Frequency** |
|  |  |  |  |
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1. **Direction: these question are for VMFs** only. How has your participation in these <Project Name> village model farm activities changed your day-to-day living?
   1. How has your participation changed the availability of food and other resources in your household?
   2. How has your participation changed the health of you and your family members?
   3. How has your participation changed your financial situation?
2. **Direction: these question are for VMFs** only. What new activities have you conducted with knowledge or resources that you have gained from participating in <Project Name> village model farm activities? **Direction: for each activity, probe**: What items did you purchase for this activity? Approximately how much money did you spend on this activity?

|  |  |  |  |
| --- | --- | --- | --- |
| **ID** | **Activities** | **Item(s) purchased** | **Expenditure (LCU)** |
|  |  |  |  |
|  |  |  |  |
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1. **Direction: these question are for VMFs**. I’d like to ask you about any surplus vegetables, animals, or other agricultural products that you have produced after consuming for yourself and your family, and if you sold any vegetables or other agricultural products to others or at the market.

Thinking about the last season of planting:

* Did you ever have any surplus vegetables or other agricultural products?
* Did you sell any of your surplus vegetables or other agricultural products to others or in the market place?
* If yes, what quantity of vegetables or other agricultural products did you sell?
* If yes, what income did you earn?
* Do you believe this additional income was because of your participation in a <Project Name> activity?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **ID** | **Product** | **Ever sold?** | **Quantity sold** | **Total income earned** | **Attributed to <Project>?** |
|  |  |  |  |  |  |
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<PROJECT NAME> PLANNING/COORDINATION

**Direction**: complete section if respondents indicate that they attend or manage <Project Name>-supported planning and coordination meetings at national, district, municipality, or ward level.

1. During a normal, non-holiday month, approximately how many <Project Name>-related meetings do you attend and/or coordinate? How about quarterly?
   1. Where are the meetings held? (e.g,. <Project Name> office, other location)
   2. How long do the meetings last on average?
   3. How long do you spend planning, coordinating, and/or attending these meetings on average? **Direction: Fill out time spent on appropriate line of “Economic Costs” spreadsheet.**
2. How do you travel to Project-related meetings? Mark all that apply.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Walking | Bicycle | Public Transport | Private Car | Private Motorbike | Other |
| Count participants |  |  |  |  |  |  |

1. How long does it take you to reach Project-related meetings? If it varies, include a range. (e.g., 30-45 minutes, 10-12 hours)

|  |  |  |
| --- | --- | --- |
|  | Average | Range |
| Minutes/Hours |  |  |

1. Do you pay out of pocket to travel to Project-related meetings?

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| Tick/participant |  |  |

1. If you do pay, much do you pay to travel to Project-related meetings? If it varies, include a range. (e.g., 0 LCU, 50-100 LCU, 0-10000 LCU)

|  |  |  |
| --- | --- | --- |
|  | Average | Range |
| LCU\* |  |  |

\*LCU refers to local currency unit, i.e. rupees.

1. What other resources do you use to plan, coordinate, and/or attend Project-related meetings (not covered by <Project Name>)?
   1. Probe for lodging in the community
   2. Probe for food/snacks for group
   3. Probe for childcare
   4. Probe for other expenses

OTHER OUT OF POCKET EXPENSES

**Direction:** this can be an open-ended discussion to solicit expenses not identified previously.

1. What are other out of pocket expenses do you have in order to participate in <Project Name> related activities? What other resources do you use?
2. **FOR VOLUNTEER FRONT-LINE WORKERS ONLY:** Do you miss out on other activities to participate in <Project Name>?
   1. Probe for employment
   2. Probe for agricultural production
   3. Probe for school

WRAP-UP

1. What else you would like to share with us?

**THANK YOU FOR TAKING TIME TO ANSWER THESE QUESTIONS!**