# OFFICIAL FEEDBACK FORM



DIALOGUE TITLE	Ensuring good nutrition in our community
DIALOGUE DATE	Friday, 20 September 2024 09:00 GMT +05:45
CONVENED BY	Shyam Adhikari Event announced on behalf of the Convenor by: Priscilla Dhakal Facilitator Feedback published on behalf of Convenor by: Priscilla Dhakal Facilitator
EVENT LANGUAGE	Nepali
HOST LOCATION	Dhangadi, Nepal
GEOGRAPHIC SCOPE	Provincial
DIALOGUE EVENT PAGE	https://nutritiondialogues.org/dialogue/54347/



The outcomes from Nutrition Dialogues will contribute to developing and identifying the most urgent and powerful ways to improve nutrition for all, with a focus on women and children and young people. Each Dialogue contributes in four distinct ways:

- Published as publicly available PDFs on the Nutrition Dialogues Portal Available as public data on the Nutrition Dialogues Portal "Explore Feedback" page Available publicly within a .xls file alongside all Feedback Form data for advanced analysis Synthesised into reports that cover which nutrition challenges are faced, what actions are urgently needed and how should these be taken forward particular, in advance of the Nutrition for Growth Summit in Paris, March 2025.

## **SECTION ONE: PARTICIPATION**

## TOTAL NUMBER OF PARTICIPANTS

40

#### **PARTICIPATION BY AGE RANGE**

0-11 12-18 30-49 50-74

0 75+

19-29

4

Other (please state)

## **PARTICIPATION BY GENDER**

Female Male Other/Prefer not to say

### NUMBER OF PARTICIPANTS FROM EACH STAKEHOLDER GROUP

Civil Society Organisations (including consumer 3 Children, Youth Groups and Students groups and environmental organisations)

**Educators and Teachers** 2 Faith Leaders/Faith Communities 1

Financial Institutions and Technical Partners 0 Food Producers (including farmers)

Healthcare Professionals 0 **Indigenous Peoples** 

Information and Technology Providers 0 Large Business and Food Retailers

National/Federal Government Officials and Marketing and Advertising Experts 0 Representatives

News and Media (e.g. Journalists) 0 **Parents and Caregivers** 

Science and Academia Small/Medium Enterprises 0 0

Sub-National/Local Government Officials and **United Nations** 0

Representatives

## OTHER STAKEHOLDER GROUPS

Women's Groups

NA

0

4

0

0

9

4

0

## **ADDITIONAL DETAIL ON PARTICIPANT DIVERSITY**

We had a mix of representatives from various institutions from both rural and urban areas. The participants belonged to different age groups, varying from children to senior citizens. They belonged to different ethnic groups. We had representatives from hilly and plain areas. The group of participants consisted of government officials involved in policymaking and FCHVs who work at ground level on the frontlines. There were faith leaders and also CSO representatives and a number of media people.

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## SECTION TWO: FRAMING AND DISCUSSION

### **FRAMING**

We began with a brief orientation to the participants on the purpose of conducting the nutrition dialogue. Context setting was done through a brief sharing on the nutrition status of the country and the province and the objectives of the gathering, as we had a wide range of individuals who belonged to different institutions, such as media, ministers, policymakers, CSO representatives, faith leaders, health workers representing different geographic locations, and people from varied age groups. A space was created for discussion and interaction. The dialogue was started with a reflection session on various photos related to nutrition where the participants were asked to share their perspective on the picture and how they could relate it to their community. This helped them internalize the issue. A detailed presentation was made on the status of nutrition and various initiatives taken so far by the Public Health Inspector of Health Directorate of Rajpur, Doti. He shared the national and provincial figures, which portrayed that Sudurpaschim province is still struggling with malnutrition. He highlighted a district named Bajura, which is at high risk and has the number of stunted, wasted, and underweight children higher than the national average. Further, he elaborated on the challenges the province is facing along with some malpractices and problems prevalent in the society contributing to malnutrition among children. He also shared the special initiatives being carried out by national and local governments to improve nutrition, such as micronutrient supplementation for children, iron folic acid distribution to adolescent girls in schools, and the establishment of nutrition rehabilitation centers for children with severe acute malnutrition. Meanwhile, the notetaker was simultaneously taking notes of all the discussions happening.

### **NUTRITION SITUATION PRESENTATION**

https://nutritiondialogues.org/wp-content/uploads/2024/09/Nutrition-Status Nutrition-Dialogue-Presentation Dhangadi.pdf

### **DISCUSSION**

The discussion began with a sharing from government representatives, mostly actions and initiatives, by the minister of social development. The open ended questions that followed were: 1. With reference to the photo you have, what is the reality of nutrition in your community? 2. Share your envisioning of a nutritious community. 3. What are the concerns and challenges with nutrition in your community? 4. What actions are required to ensure good nutrition for all in your community? 5. Who can be the key stakeholders to enable us to achieve good nutrition for all in our community and what will be their role?

## SECTION THREE: DIALOGUE OUTCOMES

## **CHALLENGES**

- Poverty. There isn't enough food to have two proper meals, which overshadows the concerns for nutrition.
- 2. Indigenous and local crops are at risk of extinction as there is increasing dependency on imported food.
- 3. Agriculture is not being viewed as a viable profession.
- 4. Excessive consumption of packaged food.
- 5. Lack of an organized market for local indigenous crops and produces.
- 6. Increase in dependent population due to increasing rate of outside country migration among youths.
- 7. Lack of policies that are farmer friendly.
- 8. Lack of agriculture equipment and machinery.
- 9. Lack of positive guardianship and awareness.
- 10. Strong prevalence of social taboos and malpractices.
- 11. Strong influence of marketing of packaged food among children.
- 12. Unwillingness of people to change their food habits
- 13. Low availability of readily available nutritious food options.
- 14. Lack of modern farming mechanisms. 15. Increasing nuclear family structure makes it difficult for working parents to pay attention to the nutritious food of their children.
- 16. Consumption of high-calorie food post pregnancy.
- 17. Strong faith in traditional healing practices
- 18. Mixed feeding for new borns. Even reputed hospitals and health facilities sell breastmilk alternatives. 19. High dependency on rice and ignorance of crop diversity.

One of the participants shared, "Parents and caretakers these days are so busy that they choose packaged and readily available food for their children rather than making nutritious home-cooked food."

## **URGENT ACTIONS**

The need for taking a multi-sectoral approach was identified as one of the major actions to be taken in order to improve the status of nutrition. All the stakeholders, whether it be children, parents or caregivers, health institutions, producers and farmers, private companies, government, or faith leaders, agreed to have a role to play in taking actions to combat hunger and malnutrition. Some of the other urgent actions suggested during group discussion are recorded here below:

1. Encourage agriculture as a profession and increase agriculture production.

- 2. Provision for farming of local crops through availability of local seeds and an organized market for their sales.
- 3. Create awareness about nutrition in the community.
- 4. Prohibit packaged food sales and consumption.
- 5. Market inspection and monitoring are to be conducted to eliminate consumption of expired and low-quality food.
- 6. Create awareness about personal hygiene.
- 7. Conduct programs for the distribution of vitamin A and albendazole medicine.
- 8. Encourage animal husbandry.
- 9. Encourage usage of locally made baby food. 10. Encourage regular health checkups.
- 11. Encourage kitchen gardening.
- 12. Prohibit sales of high sodium and sugar containing packaged food around the school area.
- 13. Include nutrition as a subject in the local curriculum for children.
- 14. Promote school nutrition.
- 15. Encourage serving local food at conferences, seminars, and events.

## **AREAS OF DIVERGENCE**

We have been promoting the concept of 'Harek baar, khana chaar' (in Nepali), which translates to the idea of incorporating 4 types of food in every meal. According to the concept, we encourage everyone to include either crops or root vegetables, lentils or beans, fruits or vegetables and meat or dairy in every meal. The government also has initiatives to distribute chicken and eggs to pregnant women in some palikas in the country, considering their nutrition requirements. However, we had a faith leader as one of the stakeholders who was against consumption of animal meat and products. He stressed the benefits of following a vegetarian diet and the religious teachings that have instructed the same.

## **OVERALL SUMMARY**

The dialogue in general remained productive as the stakeholders from diverse group, geography and organizations come together and have intense discussion with the focused conversations on the subject. Given that its implementation has not been as consistent as anticipated, school meals were one of the areas that attracted attention. Although the federal government has made provisions for government schools to serve school meals, principle representatives from the Ministry of Social Development, Human Rights Commission, teachers, students, and caregivers discussed the availability, consistency, and nutritional value of the meal as well as the difficulties schools and authorities face due to a lack of funding and resources. Highlighting the importance of monitoring of accessibility and quality food, the representative from National Human Rights Commission (NHRC) has highlighted the role of monitoring.

The group also talked about and recognized that fighting malnutrition requires a multifaceted strategy. We arrived to comprehend the important role that religious leaders may play in combating malpractices and harmful traditions in our communities. In a similar vein, the media has a significant role in society, and the group insisted on using this influence to create awareness in the community. Additionally, they possess the ability to hold the government responsible for its budget and policies which was suggested to be used.
From the discussions, it was also inferred that the issues with water availability in hilly regions pose a challenge with

WASH and personal hygiene, which promotes malnutrition. This geographical challenge also affects the ability of schools to serve hygienic food, maintain clean washing areas for students and clean facilities to cook.

One of the participants shared, "In our society, couples are unaware of the importance of thoughtfully maintaining the gap during childbirth. A narrower age gap among children puts more financial strain on families, which is another factor that leads to malnutrition. It becomes challenging for mothers with children of the same age to care for themselves and meet their children's nutritional demands as the mothers themselves take time to recover and restore their strength after giving birth."

We also had a sharing session from the Minister of Social Development, where he mentioned that the government of Sudurpaschim province is willing to focus on nutrition and has already separated grants of three hundred million Nepalese rupees for three municipalities. They are also exploring the possibility of establishing a central kitchen for ensuring nutritious food for school day meals with development organizations.

## SECTION FOUR: PRINCIPLES OF ENGAGEMENT & METHOD

### **PRINCIPLES OF ENGAGEMENT**

During the event, we limited the usage of plastic by using reusable glass bottles instead of packaged plastic water bottles. The food that was served was also local delicacies cooked using locally available crops and vegetables, which was intentionally done to promote local food. We also took a personal commitment of the participants to not consume ultraprocessed packaged food and encouraged them to follow personal hygiene habits.

### **METHOD AND SETTING**

The dialogue began in a formal setting. We began with a few open-ended question-answer sessions. We then did a reality vs. expectation check where participants connected the reality of their communities with reference to the photos given to them. Then a group discussion was held in the world café model where we set up spaces and named them under famous local cafes of the city. 3 groups of 8–10 were formed and each café discussed the questions provided. A sharing on nutrition status was also made

### **ADVICE FOR OTHER CONVENORS**

During group discussion, it is important that we see that one person does not lead the whole conversation. Facilitators should create a space for everybody to express their opinions and views. For an in-depth discussion, conveners need to allocate sufficient time.

## FEEDBACK FORM: ADDITIONAL INFORMATION

### **ACKNOWLEDGEMENTS**

Appreciation for the government of Sudurpaschim Province, especially the Minister of Social Development, for showing interest in joining the movement to build a nutritious community. Additionally, he stated conclusively that he will follow through on the dialogue's recommendations.

## **RELEVANT LINKS**

**Encouragements to join Nutrition Dialogue** https://wvi365.sharepoint.com/sites/WVINepalComms/ layouts/15/stream.aspx?id=%2Fsites%2FWVINepalComms%2FShared%20Documents%2FVideos%2FFY%2024%2FShyam%20Adhikari%5FWVI%20Nepal%5FNutrition%20Dialogue%2EMP4&ga=1&referrer=StreamWebApp%2EWeb&referrerScenario=AddressBarCopied%2Eview%2Ebc7f9324%2D2dc 3%2D44a1%2D82ba%2D6ec727dce8b0

## **ATTACHMENTS**

**Presentation for Group Discussion** https://nutritiondialogues.org/wp-content/uploads/2024/09/Presentation-for-Group-Discussion.pdf