# OFFICIAL FEEDBACK FORM



DIALOGUE TITLE	Pregnant and Lactating rural women share their thoughts about nutrition.			
DIALOGUE DATE	Tuesday, 22 October 2024 15:31 GMT +02:00			
CONVENED BY	Mandy Brenda Ruka Advocacy and Safeguading Coordinator Event announced on behalf of the Convenor by: Mandy Brenda Ruka. Advocacy and Safeguarding Coordinator			
EVENT LANGUAGE	shona			
HOST LOCATION	Harare, Zimbabwe			
GEOGRAPHIC SCOPE	community level			
AFFILIATIONS	World Vision			
DIALOGUE EVENT PAGE	https://nutritiondialogues.org/dialogue/54937/			



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

1

#### PARTICIPATION BY AGE RANGE

0-11

12-18

19-29 21

30-49

50-74

75+

#### **PARTICIPATION BY GENDER**

Female

Male

Other/Prefer not to say

#### NUMBER OF PARTICIPANTS FROM EACH STAKEHOLDER GROUP

Children, Youth Groups and Students

0 **Educators and Teachers** 

0 Financial Institutions and Technical Partners

0 Healthcare Professionals

0 Information and Technology Providers

Marketing and Advertising Experts 0

News and Media (e.g. Journalists) 0

Science and Academia 0

Sub-National/Local Government Officials and 0 Representatives

Women's Groups

- Civil Society Organisations (including consumer groups and environmental organisations)
- 0 Faith Leaders/Faith Communities
- 0 Food Producers (including farmers)
- 0 **Indigenous Peoples**
- 0 Large Business and Food Retailers
- National/Federal Government Officials and 0 Representatives
- 32 **Parents and Caregivers**
- 0 Small/Medium Enterprises
- **United Nations** 0
- Other (please state) 0

#### OTHER STAKEHOLDER GROUPS

#### **ADDITIONAL DETAIL ON PARTICIPANT DIVERSITY**

2 Pregnant and 30 Lactating mothers. The participants represented a diverse range of age groups, from teenage mothers to older mothers. They hailed from various villages and belonged to different religious denominations, including the Apostolic churches. This diversity brought a rich tapestry of perspectives and experiences to the group, fostering a unique and inclusive environment for sharing and learning.

## SECTION TWO: FRAMING AND DISCUSSION

#### **FRAMING**

The meeting started with an introductory session, outlining the purpose of the nutrition dialogue and the project's goals. The participants were briefed on the prevailing malnutrition issues in the district and how the project aimed to address them. This was followed by an interactive discussion, where Pregnant and Lactating Women shared their personal experiences and feedback on the project activities, highlighting the positive impact on their lives.

#### **DISCUSSION**

The dialogue was structured around three main questions: 1. What did you find most beneficial or helpful in the PRONE Protection and Nutrition Emergency Response project activities? 2. How can we build on the strengths and improve the nutrition activities to better serve your needs? 3. What nutrition-related challenges and concerns are you facing in your community, and how can we work together to address them? These questions facilitated a rich and productive discussion, yielding valuable feedback and insights for future programming and support Positive outcomes and impacts from the PRONE nutrition project. Community Engagement and Support 1. Male counterparts supported household chores, child care, and provided ingredients for the 4-star porridge. 2. Caregivers came together to feed their children, overcoming food insecurity caused by the El Niño-induced drought. Inclusion and Participation 3. Disability inclusion improved participation in nutrition activities for caregivers and children with disabilities. 4. Supplemental nutrition assistance encouraged mothers/caregivers to participate in hearth sessions, as they had ingredients to contribute. Nutrition and Health Impacts 5. Children's nutritional status improved, and malnutrition was prevented through the adoption of the 4-star porridge. 6. Picky eaters/poor feeding habits improved their intake at hearth sessions, motivated by seeing others eat. 7. Active screening empowered caregivers to take charge of their children's health. Social and Emotional Support 8. Hearth sessions provided a safe space for caregivers to meet, discuss issues, and support one another. 9. Community Health Workers offered essential services like growth monitoring, Vitamin A supplementation, and Malaria testing, making life easier for caregivers.

## SECTION THREE: DIALOGUE OUTCOMES

### **CHALLENGES**

Women involved in the discussions expressed the need for support in various areas, particularly highlighting economic challenges that hinder effective nutrition interventions within their community. They emphasized the importance of implementing income-generating projects for women, such as poultry farming, to enhance household income and food security. Additionally, they advocated for the drilling of boreholes and the establishment of nutrition gardens, along with the provision of seeds, to ensure a consistent supply of diverse foods at the household level. Continuous awareness campaigns on nutrition and child care were deemed essential to ensure inclusivity. Furthermore, rehabilitating boreholes was suggested to minimize the time women spend searching for water, thereby reducing the risk of gender-based violence. The need for refresher training for health facility staff on patient management was also highlighted to improve care for mothers and caregivers. Lastly, providing food assistance during PD Hearth sessions was recommended to support mothers and caregivers facing challenges in accessing commodities due to the El Niño-induced drought. These interventions aim to tackle the intertwined issues of economic empowerment, food security, nutrition, water and sanitation, health, and social protection, ultimately enhancing the well-being of women, caregivers, and their children in the community.

URGENT ACTIONS	

### **AREAS OF DIVERGENCE**

While health promotion efforts have encouraged pregnant women to register at health facilities and immunize their children, some Apostolic church members continue to decline these services. Instead, they opt for religiously aligned practices, such as using religious birth attendants, over facility-based deliveries. This underscores the need for culturally sensitive approaches to healthcare that respect diverse beliefs and values

OVERALL SUMMARY	

# **SECTION FOUR: PRINCIPLES OF ENGAGEMENT & METHOD**

PRINCIPLES OF ENGAGEMENT		
METHOD AND SETTING		
ADVICE FOR OTHER CONVENORS		

# **FEEDBACK FORM: ADDITIONAL INFORMATION**

ACKNOWLEDGEMENTS		

### **ATTACHMENTS**

• https://nutritiondialogues.org/wp-content/uploads/2024/11/PRONE-PLW-Nutrition-Dialogue-4.docx