

OFFICIAL FEEDBACK FORM

DIALOGUE TITLE	Traditional and Faith Leaders roles in improving Nutrition in Nyimba District.
DIALOGUE DATE	Tuesday, 17 December 2024 14:00 GMT +02:00
CONVENED BY	James Zimba, World Vision Zambia, National Campaign Coordinator
EVENT LANGUAGE	English
HOST LOCATION	Nyimba, Zambia
GEOGRAPHIC SCOPE	Nyimba District
AFFILIATIONS	There are no affiliations.
DIALOGUE EVENT PAGE	https://nutritiondialogues.org/dialogue/56633/



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

30

PARTICIPATION BY AGE RANGE

0 0-11

0 12-18

0 19-29

17 30-49

13 50-74

0 75+

PARTICIPATION BY GENDER

18 Female

12 Male

0 Other/Prefer not to say

NUMBER OF PARTICIPANTS FROM EACH STAKEHOLDER GROUP

0 Children, Youth Groups and Students

0 Educators and Teachers

0 Financial Institutions and Technical Partners

02 Healthcare Professionals

0 Information and Technology Providers

0 Marketing and Advertising Experts

0 News and Media (e.g. Journalists)

0 Science and Academia

0 Sub-National/Local Government Officials and Representatives

0 Women's Groups

0 Civil Society Organisations (including consumer groups and environmental organisations)

0 Faith Leaders/Faith Communities

0 Food Producers (including farmers)

28 Indigenous Peoples

0 Large Business and Food Retailers

0 National/Federal Government Officials and Representatives

0 Parents and Caregivers

0 Small/Medium Enterprises

0 United Nations

1 Other (please state)

OTHER STAKEHOLDER GROUPS

ADDITIONAL DETAIL ON PARTICIPANT DIVERSITY

The dialogue meeting's composition was not very diverse. Members of the NHCs and SMAGs come from the same community and operate in the same zones. However, a slight difference was noted regarding wealth and vulnerability to hunger and malnutrition. Many SMAGs also belong to the savings groups and run small businesses. They looked well-nourished despite living in rural areas.

SECTION TWO: FRAMING AND DISCUSSION

FRAMING

With experience gathered conducting these meetings, the introduction was routine. Each member introduced themselves, the zone where they come from and serve, and their role in the community. Regarding the nutritional situation, participants confirmed the presence of malnutrition in households in the community. They also confirmed the deaths of children as a result of malnutrition. Participants also indicated that hunger and malnutrition are more prevalent during the rainy season as most households run out of food by that time. Parents are also busy with cultivation, and caring for children is not a priority. Traditionally, the area experiences mango season at the beginning of the rainy season, which relieves children as they can consume mangos for breakfast and lunch. At the same time, have one meal at supper time. The district does receive adequate rainfall each year, but it is also vulnerable to drought due to its proximity to the Luangwa Valley. Participants also submitted that hunger and malnutrition became severe in most homes during drought, such as the 2023 to 2024 season when the Elnino affected southern Africa.

DISCUSSION

SMAGs and NHCs Working Together to End Malnutrition in Nyimba District of Eastern Province of Zambia.

SECTION THREE: DIALOGUE OUTCOMES

CHALLENGES

1. Due to poverty, most households lack food, which has led to families having one meal per day.
2. There is a lack of knowledge about nutrition and what foods to eat to keep children healthy. Even SMAGs and NHCs lack nutrition knowledge.
3. Some parents do not take their responsibilities seriously when caring for children at home. As a result, children endure long hours of hunger even when food is available at home. This is mainly attributed to a lack of basic education and food preparation skills.
4. Lazy parents are increasingly feeding their children packaged food such as buffs and Giggies, which have no nutritional value.
5. There are also strong traditional practices when sharing food at home. Mothers give the most nutritious food to their husbands and not children. They have been trained to care for husbands more than children.
6. Participants also confirmed a lack of male participation in the fight against malnutrition at home and in the community. Men, in most cases, spend their money on alcohol rather than providing food for their children. This happens mainly after the sale of farm produce. Resources are poorly accounted for.
7. The existence of large families due to poor child spacing and family planning is also a significant cause of malnutrition, as food is not enough to feed everyone, especially children.

URGENT ACTIONS

1. There is an urgent need for nutrition education, starting with NHCs and SMAGs, so that they can replicate similar training and cooking demonstrations to the mothers and fathers in the community.
2. They want more male participation in the fight against malnutrition at household and community levels. This will reduce poor resource use and food selling at home.
3. Health staff must intensify community education in collaboration with NHCs and SMAGs. The presence of Health staff will show its importance because some communities find it very difficult to accept such programs when the information comes from ordinary community members.
4. Traditional and faith leaders must be involved urgently. The idea is to work with influential people to send the message to all and show the seriousness of the matter.
5. Information education and communication materials are needed to disseminate information.
6. Community-level nutrition groups need to be formed, and these groups should be charged with conducting cooking demonstrations at various forums.
7. The participants also affirmed their commitment to reporting malnutrition cases to the health facility when identified in the community.

AREAS OF DIVERGENCE

The views did not diverge much. However, women strongly recommended that men change their behavior so they can take more responsibility for caring for their own children.

OVERALL SUMMARY

1. Due to poverty, most households lack food, which has led to families having one meal per day. There are a combination of factors that lead to this situation, ranging from capacity to afford the needed food to crops grown for food security at home. Households in rural areas have been compelled to focus on growing maize by the Ministry of Agriculture because the crop is supported through inputs and has a ready market after harvest. Others crops that may help with food security are usually ignored leading to high levels of vulnerabilities
2. There is a lack of knowledge about nutrition and what foods to eat to keep children healthy. Even SMAGs and NHCs lack knowledge about nutrition. Training NHCs and SMAGs on nutrition is the answer to this lack of knowledge. Another group to be considered here are the Community Health Workers.
3. Some parents do not take their responsibilities seriously when caring for children at home. As a result, children endure long hours of hunger even when food is available at home. This is mainly attributed to a lack of basic education and food preparation skills. Emphasis here must be placed on NHCs, SMAGs and CHWs to educate parents on parental care and responsibilities.
4. Lazy parents are increasingly feeding their children packaged food such as buffs and Giggies, which have no nutritional value. Education and information dissemination should include the effects of consuming packaged foods. This will allow parents to understand the value of locally produced and prepared food for children.
5. There are also strong traditional practices when sharing food at home. Mothers give the most nutritious food to their husbands and not children. They have been trained to care for husbands more than children. Information is need to help parents understand the importance of providing nutritious food to their children more than husbands
6. Participants also confirmed a lack of male participation in the fight against malnutrition at home and in the community. Men, in most cases, spend their money on alcohol rather than providing food for their children. This happens mainly after the sale of farm produce. Resources are poorly accounted for. Here the atmosphere was tense, as men argued in the opposite direction. they accused women of not caring for children, being lazy to cook, and selling food to pay for secret friends.
7. The existence of large families due to poor child spacing and family planning is also a significant cause of malnutrition, as food is not enough to feed everyone, especially children. more education on family planning is required.

SECTION FOUR: PRINCIPLES OF ENGAGEMENT & METHOD

PRINCIPLES OF ENGAGEMENT

The CSO-SUN Principles of engagement were well followed. All participants were provided with an opportunity to share their views. As a convener, I always stepped in to restore order whenever the discussion led off-course.

METHOD AND SETTING

The activity was conducted in the community at the health post. It was held outside under the mango trees to ensure a free atmosphere where everyone could participate equally. The methodology is an open discussion. Participants with opinions and views or contributions were given time to express themselves. Open-ended questions were used as guided in the manual on nutrition dialogues.

ADVICE FOR OTHER CONVENORS

Understand the audience and prepare your session adequately.

FEEDBACK FORM: ADDITIONAL INFORMATION

ACKNOWLEDGEMENTS

Mr. Tembo, Environmental Health Technician at the local health center for organizing the audience; Mr. Mutunda, DF Nyimba AP; Priscilla Kamanga, CDW for Nyimba, and the Manager for Nyimba AP, Faustina Samboko

ATTACHMENTS

- **NHCs and SMAGs**
<https://nutritiondialogues.org/wp-content/uploads/2024/12/NHCs-4-scaled.jpg>
- **NHCs and SMAGs**
<https://nutritiondialogues.org/wp-content/uploads/2024/12/NHCs-3-scaled.jpg>
- **NHCs and SMAGs**
<https://nutritiondialogues.org/wp-content/uploads/2024/12/NHCs-2-scaled.jpg>
- **NHCs and SMAGS**
<https://nutritiondialogues.org/wp-content/uploads/2024/12/NHCs-1-scaled.jpg>
- **NHCs and SMAGs**
<https://nutritiondialogues.org/wp-content/uploads/2024/12/NHCs-8-scaled.jpg>
- **NHCs and SMAGs**
<https://nutritiondialogues.org/wp-content/uploads/2024/12/NHCs-7-scaled.jpg>