

# OFFICIAL FEEDBACK FORM

<b>DIALOGUE TITLE</b>	Cooking demonstration, one of Positive Deviance Hearth Project activities that helps the community to combat the malnutrition.
<b>DIALOGUE DATE</b>	Friday, 28 February 2025 10:00 GMT +02:00
<b>CONVENED BY</b>	DIOCESE CATHOLIC OF BYUMBA/CARITAS BYUMBA/WVR Event announced on behalf of the Convenor by: CARITAS DIOCESE OF BYUMBA. IMPLEMENTING PARTNER OF WVR Feedback published on behalf of Convenor by: DIOCESE CATHOLIC OF BYUMBA/CARITAS BYUMBA. IMPLEMENTING PARTNER OF WVR
<b>EVENT LANGUAGE</b>	KINYARWANDA
<b>HOST LOCATION</b>	Kinihira, Rwanda
<b>GEOGRAPHIC SCOPE</b>	RULINDO DISTRICT
<b>AFFILIATIONS</b>	WVR
<b>DIALOGUE EVENT PAGE</b>	<a href="https://nutritiondialogues.org/dialogue/59185/">https://nutritiondialogues.org/dialogue/59185/</a>



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.

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# SECTION ONE: PARTICIPATION

TOTAL NUMBER OF PARTICIPANTS	40
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## PARTICIPATION BY AGE RANGE

2	0-11	32	12-18	6	19-29
0	30-49	0	50-74	0	75+

## PARTICIPATION BY GENDER

34	Female	6	Male	0	Other/Prefer not to say
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## NUMBER OF PARTICIPANTS FROM EACH STAKEHOLDER GROUP

0	Children, Youth Groups and Students	1	Civil Society Organisations (including consumer groups and environmental organisations)
0	Educators and Teachers	0	Faith Leaders/Faith Communities
0	Financial Institutions and Technical Partners	0	Food Producers (including farmers)
10	Healthcare Professionals	30	Indigenous Peoples
0	Information and Technology Providers	0	Large Business and Food Retailers
0	Marketing and Advertising Experts	0	National/Federal Government Officials and Representatives
0	News and Media (e.g. Journalists)	0	Parents and Caregivers
0	Science and Academia	0	Small/Medium Enterprises
0	Sub-National/Local Government Officials and Representatives	0	United Nations
0	Women's Groups	0	Other (please state)

## OTHER STAKEHOLDER GROUPS

Other stakeholder groups included local caregivers of malnourished children, Home-Based ECD facilitators, and community health volunteers who support nutrition education and food preparation practices in their neighborhoods.

## ADDITIONAL DETAIL ON PARTICIPANT DIVERSITY

The cooking demonstration brought together caregivers from different socio-economic backgrounds, mainly rural families with limited income. It included mothers, some from villages and others near the center. Participants reflected diverse household compositions, including single-parent homes. Though primarily from one ethnic group, diversity came through varied levels of education and access to food.

# SECTION TWO: FRAMING AND DISCUSSION

## FRAMING

During the introduction of the cooking demonstration, facilitators highlighted the local nutrition context, noting that malnutrition remains a major concern in Kinihira Sector, where many families live in poverty and rely on small-scale farming. Seasonal food shortages and poor dietary practices contribute significantly to undernutrition, especially among children under five. Community members also raised concerns about the limited variety of available food, lack of knowledge on how to prepare balanced meals, and hygiene challenges, which increase the risk of disease and poor nutrient absorption. Facilitators emphasized that although many families grow food, they often lack awareness on combining available ingredients to meet children's nutritional needs. They discussed how climate variability, like irregular rainfall, affects crop production and worsens food insecurity. Additionally, low income levels limit access to animal products, fruits, and vegetables. The introduction aimed to show that malnutrition is not only a result of food unavailability but also of poor feeding habits, lack of nutrition knowledge, and inadequate hygiene. Caregivers were encouraged to see themselves as key actors in improving their children's health by learning new preparation techniques and sharing this knowledge within their communities. The event created a safe and inclusive environment where local experiences and challenges could be shared openly, encouraging collaboration toward solutions grounded in the community's reality.

## NUTRITION SITUATION PRESENTATION

<https://nutritiondialogues.org/wp-content/uploads/2025/08/COOKING-DEMO.pdf>

## DISCUSSION

The main discussion topic was how to prepare a balanced diet using locally available food. Open-ended questions included: What types of food do you grow or access in your area? How do you usually prepare meals for your children? What challenges do you face in feeding your children nutritious meals? What foods do you think are important for a child's growth? These questions helped caregivers reflect on their current practices and learn from each other.

# SECTION THREE: DIALOGUE OUTCOMES

## CHALLENGES

Participants faced several nutrition-related challenges, including:

- Limited knowledge on how to prepare a balanced diet using available local foods.
- Poverty, which reduces the ability to afford diverse and nutritious foods.
- Seasonal food scarcity, making it hard to maintain consistent nutrition.
- Cultural beliefs and feeding habits that sometimes exclude nutritious foods from children's meals.
- Poor hygiene practices during meal preparation, increasing the risk of disease.
- Lack of awareness on the importance of feeding children under five regularly with balanced meals.

These challenges affect child growth and increase malnutrition risks in vulnerable families.

## URGENT ACTIONS

Participants identified several urgent actions to fight malnutrition:

- Strengthen nutrition education:** Caregivers requested continued training on preparing balanced meals using locally available food. They proposed regular community-based sessions like cooking demonstrations.
- Promote home gardening:** Participants suggested every family should grow vegetables and fruits to improve diet diversity. Local leaders and community health workers were tasked to follow up.
- Improve hygiene practices:** Emphasis was placed on educating families about handwashing and clean food preparation. They proposed using community gatherings and CHWs to spread messages.
- Community support:** They encouraged mutual help among families, especially in food sharing and supporting vulnerable households.

These actions aim to improve knowledge, practices, and food access to reduce child malnutrition.

## AREAS OF DIVERGENCE

During the dialogue, participants largely agreed on the causes of malnutrition and the proposed solutions. However, some divergence appeared in views related to:

**Food availability:** While some caregivers believed local foods are sufficient for a balanced diet, others felt they lacked the variety needed, especially protein sources.

**Responsibility:** A few participants thought it was mainly the government's role to address malnutrition, while others emphasized community and parental responsibility.

**Beliefs and practices:** Traditional beliefs about certain foods being inappropriate for children caused differences in opinion during discussions.

Despite these differences, the dialogue remained respectful and collaborative, with all participants committed to improving child nutrition.

## OVERALL SUMMARY

The cooking demonstration held on February 28, 2025, in Kinihira sector, Butunzi cell, was a vital event in the ongoing fight against child malnutrition in the area. Organized by Caritas Byumba, the activity brought together caregivers of malnourished children under five years old for an interactive learning experience focused on preparing balanced diets using locally available foods.

The event was framed within a challenging local context where malnutrition remains a pressing issue despite the area's agricultural productivity. Caregivers face poverty, limited food diversity, seasonal shortages, and gaps in nutrition knowledge. Many lack access to animal-source foods and fruits, which are essential for child growth and development.

The cooking demonstration combined practical sessions with nutrition education. Caregivers brought food items they typically use, while Caritas staff provided additional materials and guided participants through the preparation of nutrient-rich meals. After cooking, children were fed balanced meals, creating an immediate and tangible impact.

Discussions during the session were rich and engaging, focusing on common nutrition challenges such as poverty, cultural food taboos, and hygiene practices. Participants openly shared their experiences, challenges, and aspirations, making the event feel inclusive and community-centered. The caregivers expressed appreciation for the knowledge gained and recognized their crucial role in improving their children's health.

Despite some differing opinions on food availability and responsibility for nutrition, the overall atmosphere was collaborative and hopeful. The event not only educated but empowered participants, fostering a sense of ownership over child nutrition.

From a broader perspective, the event illustrated how combining education with practical demonstrations can effectively bridge knowledge gaps and motivate behavior change. The presence of caregivers actively participating, asking questions, and implementing new techniques was encouraging.

The cooking demonstration also highlighted the importance of community involvement and local resources in nutrition interventions. By using locally available foods and emphasizing hygiene, the event reinforced sustainable and culturally appropriate approaches.

Overall, the Dialogue was inspiring and impactful, strengthening community capacity and commitment to reducing malnutrition. It demonstrated that change begins with informed and motivated caregivers who can make a difference within their households and communities.

Looking ahead, this event sets a model for scaling similar activities across the region, ensuring that nutrition education is accessible, practical, and grounded in local realities. The combination of learning, doing, and immediate feeding of children provided a holistic approach that is likely to produce positive and lasting outcomes.



# SECTION FOUR: PRINCIPLES OF ENGAGEMENT & METHOD

## PRINCIPLES OF ENGAGEMENT

The Dialogue respected key Principles of Engagement, especially inclusivity, transparency, and shared purpose. Caregivers from various socio-economic backgrounds were involved, ensuring that all voices—especially those most affected by malnutrition—were heard and valued. The session fostered respect and openness, allowing participants to freely express concerns and share local food practices without judgment. Before the event, facilitators were briefed on expected participant diversity and possible challenges, including low literacy levels and differing food beliefs. This helped them guide discussions respectfully and with cultural sensitivity. No significant competing interests were present, but the team remained attentive to potential conflicts, especially between traditional practices and recommended nutrition advice.

## METHOD AND SETTING

The Dialogue was convened using a participatory and practical approach. It took place in an informal, outdoor setting at a Home-Based ECD center in Kinihira sector. The methodology included two key components: a nutrition education session and a cooking demonstration. Caregivers were actively involved by bringing locally available foods, while Caritas staff provided guidance and materials to prepare a balanced diet.

## ADVICE FOR OTHER CONVENORS

Yes. Focus on community participation and use practical demonstrations like cooking sessions to engage participants actively. Choose a familiar and accessible setting to make participants feel comfortable. Ensure that the content is tailored to local food availability and culture. Encourage open discussions, listen to community experiences, and use facilitators who speak the local language. Lastly, collaborate with local leaders and health professionals to build trust and support for change

# FEEDBACK FORM: ADDITIONAL INFORMATION

## ACKNOWLEDGEMENTS

We sincerely thank Caritas Byumba, community health workers, local leaders, and caregivers for their active participation and support. Special appreciation goes to the funders and partners who made the cooking demonstration possible through their generous contributions. Your commitment to improving child nutrition is deeply valued. We also acknowledge the service providers who offered materials and technical support. Together, collaboration played a vital role in making this dialogue impactful

## ATTACHMENTS

- **PICTURE**  
<https://nutritiondialogues.org/wp-content/uploads/2025/08/WhatsApp-Image-2025-03-28-at-12.25.07-PM-1-1.jpeg>
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