OFFICIAL FEEDBACK FORM



DIALOGUE TITLE	Caritas Byumba and WVR-Akagera cluster in a nutrition partner evaluation within 6 months implementation activities period.		
DIALOGUE DATE	Thursday, 1 May 2025 10:30 GMT +02:00		
CONVENED BY	Diocese Catholic of Byumba/Caritas Byumba 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/Carita Byumba. Implementing partner of WVR		
EVENT LANGUAGE	ENGLISH		
HOST LOCATION	Muhazi, Rwanda		
GEOGRAPHIC SCOPE	Gatsibo District		
AFFILIATIONS	WVR		
DIALOGUE EVENT PAGE	https://nutritiondialogues.org/dialogue/59237/		





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

10

PARTICIPATION BY AGE RANGE

0	0-11	4	12-18
0	30-49	0	50-74

6	19-29
0	75+

PARTICIPATION BY GENDER

5	Female	5	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
2	Financial Institutions and Technical Partners	0	Food Producers (including farmers)
7	Healthcare Professionals	0	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
1	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 CARITAS BYUMBA staff AND WVR Akagera cluster staffs. These participants played key roles in implementing and supporting PDH activities at the community level.

ADDITIONAL DETAIL ON PARTICIPANT DIVERSITY

The Dialogue brought together participants from both rural and peri-urban areas of Akagera cluster. It included stakeholders of different economic backgrounds reflecting a range of social and professional diversity. Participants also represented various local communities, allowing inclusive discussion on nutrition challenges and interventions.

SECTION TWO: FRAMING AND DISCUSSION

FRAMING

During the introduction, the Stakeholder Dialogue was framed within the local context of poverty and malnutrition affecting children under five in the Akagera cluster. The session acknowledged that families in rural communities face multiple challenges, including food insecurity due to climate variability, seasonal food shortages, and limited knowledge on proper infant and young child feeding practices. The Sponsorship and Partnership Coordinator of WVR-Akagera welcomed participants by highlighting the purpose of the evaluation—to assess the progress and effectiveness of the Positive Deviance Hearth (PDH) model activities implemented by Caritas Byumba. The Director of Caritas Byumba also expressed gratitude for the strong partnership that has enabled improved nutrition outcomes in the region. It was noted that undernutrition remains a concern, especially in vulnerable households with children under 5 years. Stakeholders discussed how the PDH model, through cooking demonstrations, caregiver education, and growth monitoring, has helped shift behaviors and improve child nutrition. However, concerns remain about sustainability, local ownership, and adapting interventions to seasonal challenges and changing food availability. The framing emphasized the need to work together to close nutrition gaps and ensure families are empowered with both knowledge and access to diverse, local foods. There was also a call for strengthening home-based ECD centers, supporting CHWs, and continuing community sensitization to reduce malnutrition in a lasting way.

NUTRITION SITUATION PRESENTATION

https://nutritiondialogues.org/wp-content/uploads/2025/08/AKAGERA-EVALUATION.pdf

DISCUSSION

The discussion focused on evaluating the implementation of the Positive Deviance Hearth (PDH) model over the past six months. Open-ended questions included: What has worked well in PDH activities so far? What challenges have been faced during implementation? How effective have community sensitization and caregiver training been in reducing malnutrition? What improvements can be made for better impact? How can we ensure sustainability and ownership by local stakeholder? Reflecting on Financial situations especially about spending on activities done

SECTION THREE: DIALOGUE OUTCOMES

CHALLENGES

Participants identified several key nutrition challenges during the dialogue:

High rates of malnutrition in children under five, especially in remote and poor households, due to limited knowledge of balanced diets and child feeding practices.

Limited access to diverse and nutritious foods at the household level, especially during dry seasons or periods of food scarcity.

Poor hygiene and health practices contributing to repeated infections and poor nutrient absorption in children.

Inadequate resources for some ECD centers to consistently implement proper hygiene and nutrition practices.

Delayed seeking of health services due to ignorance or financial constraints, worsening children's nutrition status.

Despite these challenges, participants recognized that PDH activities have increased awareness and improved practices but called for strengthened follow-up and support at household and community levels.

URGENT ACTIONS

Participants identified several urgent actions to improve child nutrition and proposed practical ways to implement them:

Strengthen community sensitization on balanced diets and hygiene practices using local examples. They proposed increasing regular community meetings, radio programs, and door-to-door education led by CHWs and volunteers.

Increase male involvement in nutrition and caregiving. Participants recommended organizing couple-based trainings and engaging local leaders to advocate for shared parenting responsibilities.

Provide regular refresher trainings to CHWs, ECD caregivers, and local leaders on nutrition, growth monitoring, and early intervention.

Ensure consistent supply of basic materials (cooking tools, hygiene kits, posters) to support ECD centers and hearth sites. They proposed collaboration with local government and NGOs to mobilize these resources.

Strengthen home follow-up visits to encourage continued positive practices beyond hearth sessions. They suggested developing a joint follow-up plan between Caritas Byumba, WVR, and CHWs.

Improve food accessibility by promoting small-scale kitchen gardens and livestock rearing, with practical training and seed support for vulnerable households.

Enhance coordination among stakeholders through quarterly review meetings to monitor progress and share lessons learned.

These actions were agreed to be integrated into future planning sessions by Caritas Byumba and WVR, with clear roles for community leaders, CHWs, and caregivers to ensure sustainability.

AREAS OF DIVERGENCE

During the dialogue, most participants shared a common understanding of the importance of addressing child malnutrition and supported the Positive Deviance Hearth (PDH) approach. There was broad agreement on the successes achieved, especially in community sensitization, caregiver training, and growth monitoring. However, some differences in opinion and emphasis emerged regarding the challenges and solutions.

Overall, despite these differences, all participants remained respectful and committed to working together. Divergences were seen as constructive, helping to refine strategies and ensure that diverse community needs were considered in future planning. The dialogue fostered a spirit of collaboration and mutual understanding, reinforcing the shared goal of reducing child malnutrition.

OVERALL SUMMARY

The Stakeholder Dialogue held on 1/5/2025 at the Akagera cluster headquarters in Kiramuruzi was a significant milestone in evaluating the implementation of the Positive Deviance Hearth (PDH) model project, jointly led by World Vision Rwanda (WVR)-AKAGERA CLUSTER and Caritas Byumba. The event brought together a diverse group of participants including Caritas staff, WVR team members.

The dialogue began with warm introductions and expressions of gratitude that set a positive tone of partnership and shared responsibility. The Director of Caritas Byumba acknowledged the strength of collaboration with WVR, which has been instrumental in reaching over 23,000 people through various nutrition-related activities over the past six months. These activities ranged from cooking demonstrations and growth monitoring to training caregivers and health workers on infant feeding and hygiene practices.

Throughout the session, participants engaged actively, sharing insights on the successes and challenges faced during implementation. There was a strong sense of commitment to the cause of reducing malnutrition among children under five, with many highlighting how the PDH approach has transformed community awareness and behaviors around nutrition. Caregivers reported observable improvements in child health, attributing positive changes to the knowledge and skills gained through hearth sessions.

Despite these achievements, the dialogue did not shy away from addressing persistent challenges. Participants discussed issues such as limited resource availability, seasonal food insecurity, and cultural barriers to male involvement in caregiving. These candid discussions were essential in identifying gaps and areas requiring urgent attention, such as the need for stronger home follow-up, improved coordination among stakeholders, and continuous capacity building for community health workers and volunteers.

What stood out was the respectful and collaborative atmosphere, where diverse perspectives were welcomed and constructive debates took place. Divergent opinions, especially regarding resource allocation and cultural practices, enriched the dialogue and helped shape more nuanced, community-sensitive strategies. This openness fostered trust and reinforced a collective commitment to sustainable nutrition improvements.

From a personal perspective, the event was inspiring. It highlighted the power of partnership and community engagement in tackling complex health challenges. The presence of local leaders alongside grassroots caregivers underscored the shared ownership of nutrition outcomes. The combination of data-driven evaluation and heartfelt testimonies created a balanced narrative of progress and ongoing work.

The dialogue concluded with a clear call to action, urging all stakeholders to build on existing successes by enhancing male involvement, securing material support for vulnerable families, and strengthening coordination mechanisms. Participants agreed on the importance of maintaining momentum and regularly reviewing progress through similar forums.

Overall, this Stakeholder Dialogue was more than an evaluation—it was a celebration of collective effort, learning, and hope. It reinforced the belief that with sustained collaboration, culturally sensitive approaches, and community empowerment, malnutrition in the Akagera cluster can be significantly reduced. The event's outcomes will inform future strategies and contribute to national efforts aimed at improving child nutrition and health in Rwanda.

This experience has left a lasting impression, demonstrating that meaningful change is possible when communities, partners, and leaders unite with a shared vision for healthier futures.

SECTION FOUR: PRINCIPLES OF ENGAGEMENT & METHOD

PRINCIPLES OF ENGAGEMENT

The Dialogue strongly reflected the Principles of Engagement by fostering inclusivity, transparency, and mutual respect among all participants. To manage any conflicting interests, ground rules were established at the start, emphasizing respectful dialogue and open communication.

METHOD AND SETTING

The dialogue was convened using a structured, participatory methodology that encouraged open discussion and stakeholder engagement. The event began with introductions and setting ground rules to ensure respectful and inclusive dialogue.

ADVICE FOR OTHER CONVENORS

For successful Nutrition Dialogue events, convenors should prioritize inclusive participation by inviting diverse stakeholders, including community members, health workers, and local leaders. Preparing clear objectives and open-ended questions encourages meaningful discussions. Establishing ground rules at the start helps maintain respect and focus.

FEEDBACK FORM: ADDITIONAL INFORMATION

ACKNOWLEDGEMENTS

We deeply thank Caritas BYUMBA and WVR-Akagera cluster for this commitment in helping the community to fight against malnutrition among children. this will make the meaningful sustainable development of tomorrow's Rwandans.

ATTACHMENTS

photo
 https://nutritiondialogues.org/wp-content/uploads/2025/08/IMG 5459-300x200-2.jpg