

OFFICIAL FEEDBACK FORM

DIALOGUE TITLE	Different Unites meet at Burera, Against Malnutrition: The PD/Hearth Approach at Work
DIALOGUE DATE	Tuesday, 8 July 2025 09:00 GMT +02:00
CONVENED BY	Diocese Catholic of Byumba/Caritas Byumba/World Vision Rwanda Event announced on behalf of the Convenor by: DIOCESE CATHOLIC OF BYUMBA/CARITAS BYUMBA. WVR Implementing partner Feedback published on behalf of Convenor by: DIOCESE CATHOLIC OF BYUMBA/CARITAS BYUMBA. IMPLEMENTING PARTNER OF WVR
EVENT LANGUAGE	ENGLISH AND KINYARWANDA
HOST LOCATION	Cyanika, Rwanda
GEOGRAPHIC SCOPE	BURERA DISTRICT
AFFILIATIONS	WVR
DIALOGUE EVENT PAGE	https://nutritiondialogues.org/dialogue/59325/



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	128
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PARTICIPATION BY AGE RANGE

23	0-11	37	12-18	47	19-29
21	30-49	0	50-74	0	75+

PARTICIPATION BY GENDER

78	Female	50	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)
43	Educators and Teachers	0	Faith Leaders/Faith Communities
0	Financial Institutions and Technical Partners	0	Food Producers (including farmers)
56	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)	28	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 health workers, community leaders, parents, and caregivers. These participants actively contributed to the dialogue by supporting the implementation of the PD/Hearth model within their communities.

ADDITIONAL DETAIL ON PARTICIPANT DIVERSITY

The Dialogue event brought together participants from diverse backgrounds, including different wealth levels, ethnic groups, and both rural and semi-urban areas within Burera District. This diversity enriched discussions by reflecting varied experiences and challenges related to child nutrition. Participants included poor families practicing successful nutrition behaviors, health workers from various communities, and local leaders, ensuring multiple perspectives were heard.

SECTION TWO: FRAMING AND DISCUSSION

FRAMING

The Stakeholder Dialogue was framed by highlighting the critical local context of Burera District, where poverty and limited access to diverse foods increase the risk of child malnutrition. The introduction emphasized how seasonal variations affect food availability, with lean seasons leading to higher cases of undernutrition among children under five. Climate-related challenges such as unpredictable rainfall patterns were also noted to impact crop yields and household food security. Participants were made aware of the ongoing nutrition deficiencies prevalent in the community, including stunting, wasting, and micronutrient gaps. The dialogue acknowledged local concerns about poor hygiene and sanitation, which exacerbate malnutrition through increased infections and illness.

NUTRITION SITUATION PRESENTATION

<https://nutritiondialogues.org/wp-content/uploads/2025/08/BURERA-MEETING.pdf>

DISCUSSION

The discussion focused on how the Positive Deviance/Hearth (PD/Hearth) model can be effectively applied to reduce child malnutrition in Burera District. Open-ended questions included: How can families identify and adopt positive feeding and hygiene practices already working within the community? What are the main challenges faced in implementing PD/Hearth sessions at the household level? How can local leaders and health workers support and sustain the PD/Hearth approach? In what ways can caregivers be empowered to improve child nutrition using locally available resources? These questions encouraged participants to share experiences, barriers, and ideas to strengthen community-led nutrition solutions.

SECTION THREE: DIALOGUE OUTCOMES

CHALLENGES

Participants identified several nutrition challenges affecting their community:

Limited awareness and knowledge: Many caregivers lack full understanding of proper child feeding practices and the importance of hygiene in preventing malnutrition.

Food insecurity: Poor households often face shortages of diverse and nutritious foods, limiting children's access to balanced diets.

Seasonal food shortages: Periods of drought or poor harvests reduce food availability and quality, worsening malnutrition risks.

Cultural practices: Certain traditional beliefs and feeding habits can negatively impact child nutrition.

Sanitation issues: Poor hygiene and sanitation contribute to repeated infections, which exacerbate malnutrition.

Alcohol abuse

Overall, these challenges create a cycle that hinders proper child growth and health, emphasizing the need for community-based solutions and education.

URGENT ACTIONS

Participants identified several urgent actions to address malnutrition:

Strengthening Nutrition Education: They emphasized the need for ongoing community awareness campaigns to improve knowledge on balanced diets, hygiene, and responsive feeding practices. Using local leaders and health workers to spread key messages was proposed.

Supporting Food Security: Participants suggested promoting kitchen gardens and small livestock to increase access to diverse and nutritious foods at household level. They also called for support in providing nutritious food supplements, especially for vulnerable families.

Enhancing Early Detection and Treatment: Regular growth monitoring through community health workers and timely referral of malnourished children to health centers were prioritized. Training CHWs on PD/Hearth approaches was recommended for better follow-up.

Improving Sanitation and Hygiene: Participants proposed increasing community efforts to promote latrine use, safe water access, and hygiene practices to reduce infections that worsen malnutrition.

Community Involvement: They stressed engaging caregivers and local leaders in nutrition programs to ensure ownership and sustainability.

To take these actions forward, participants recommended collaboration between local authorities, health facilities, NGOs, and community members. Regular monitoring, supportive supervision, and resource mobilization were seen as key to sustaining progress. The PD/Hearth model was highlighted as an effective, community-driven approach that should be expanded and supported.

AREAS OF DIVERGENCE

During the dialogue, views and opinions were largely aligned, reflecting a shared commitment to tackling child malnutrition in the community. Participants unanimously recognized malnutrition as a critical issue and supported the use of the Positive Deviance Hearth (PD/Hearth) model as a practical, community-based solution.

However, some minor differences emerged regarding the pace and scale of implementation. A few participants expressed concerns about the availability of resources—such as nutritious food and materials for cooking demonstrations—and questioned how these could be sustainably supplied. Others felt that while the model was effective, more emphasis should be placed on broader socioeconomic factors like poverty reduction and improving agricultural productivity.

Differences also arose around community engagement strategies. Some participants preferred direct involvement of local leaders in all stages of implementation to ensure ownership, while others suggested focusing more on training caregivers and health workers as the primary agents of change.

OVERALL SUMMARY

The dialogue event in Burera District, organized by Caritas Byumba in partnership with World Vision Rwanda, was a powerful and inspiring platform that brought together diverse community members including parents, health workers, local leaders, and caregivers. The focus was on the Positive Deviance Hearth (PD/Hearth) model, a community-based approach that encourages families to identify and adopt successful nutrition and hygiene practices already present within their own environment.

From the outset, the atmosphere was one of shared purpose and openness. Participants expressed a strong commitment to improving child nutrition, highlighting both the challenges and successes in their communities. The event was framed within the local context of poverty, seasonal food shortages, and the prevalence of malnutrition, which added urgency to the discussions. Participants appreciated that the PD/Hearth model does not rely on external solutions but builds on the community's existing strengths.

The dialogue featured storytelling and cooking demonstrations, which made the learning interactive and practical. Caregivers gained confidence in preparing nutritious meals with locally available foods and understood the importance of hygiene and responsive feeding. The session also emphasized the critical role of community volunteers in sustaining these efforts.

One of the most impactful aspects of the dialogue was the collective realization that change is possible through simple, positive behaviors. Participants left motivated and empowered to apply the lessons learned in their homes and to spread awareness in their neighborhoods. The supportive environment fostered mutual respect and collaboration, making the event feel inclusive and energizing.

While there was broad consensus on the value of the PD/Hearth approach, some concerns were raised regarding resource availability and long-term sustainability. Participants discussed the need for continued support to ensure access to nutritious foods and training materials. There were also reflections on how to engage local leaders more deeply to strengthen community ownership and address wider socioeconomic factors that influence nutrition.

Overall, the dialogue felt like a step forward in uniting the community around a shared goal. It reinforced the idea that nutrition improvement is not only a health issue but a community effort requiring cooperation, education, and practical action. The event successfully blended knowledge sharing with motivation, leaving participants hopeful and determined to contribute to healthier futures for their children.

In summary, the dialogue was more than just a meeting—it was a community-driven movement towards sustainable nutrition improvement, highlighting the power of local solutions and collective commitment. The event underscored the importance of ongoing support, capacity building, and inclusive engagement to achieve lasting impact on child malnutrition in Burera and beyond.

SECTION FOUR: PRINCIPLES OF ENGAGEMENT & METHOD

PRINCIPLES OF ENGAGEMENT

The Dialogue adhered closely to the Principles of Engagement by fostering inclusivity, transparency, and respect among all participants. Before the event, facilitators were thoroughly briefed on the participant list to identify potential competing interests or sensitive issues that could arise. This allowed for proactive management of discussions to maintain a collaborative and open atmosphere. Efforts were made to ensure balanced participation, giving voice to caregivers, health workers, and local leaders equally, thereby avoiding dominance by any single group. The Dialogue promoted transparency by encouraging participants to share their perspectives honestly while respecting differing opinions.

METHOD AND SETTING

The Dialogue was convened using a participatory methodology combining presentations, storytelling, and practical demonstrations. Facilitators introduced the Positive Deviance Hearth (PDH) model through an interactive session that encouraged open discussion among participants. Small group activities allowed caregivers and health workers to share experiences and best practices.

ADVICE FOR OTHER CONVENORS

For successful Nutrition Dialogue events, prioritize creating a welcoming and inclusive environment where all participants feel valued. Use interactive methods like storytelling and practical demonstrations to engage attendees actively. Prepare facilitators well, ensuring they understand participants' backgrounds and potential differing views. Encourage open dialogue to surface diverse perspectives, and manage time efficiently to cover key topics without rushing.

FEEDBACK FORM: ADDITIONAL INFORMATION

ACKNOWLEDGEMENTS

We sincerely thank all participants, including community health workers, parents, and local leaders, for their active engagement and valuable contributions. Special appreciation goes to Caritas Byumba and World Vision Rwanda for their continuous support and partnership in implementing the PDH project.

ATTACHMENTS

- <https://nutritiondialogues.org/wp-content/uploads/2025/08/WhatsApp-Image-2025-07-09-at-7.59.59-AM.jpeg>
- <https://nutritiondialogues.org/wp-content/uploads/2025/08/WhatsApp-Image-2025-07-09-at-8.00.00-AM-1.jpeg>