

OFFICIAL FEEDBACK FORM

DIALOGUE TITLE	Nutritional Dialogue Phase 2- Stakeholder dialogue-Wattala-Sri Lanka
DIALOGUE DATE	Tuesday, 12 May 2026 10:00 GMT +05:30
CONVENED BY	Dinushi Tennekoon (MEAL coordinator),Jennifer Fernando (Policy advocacy Specialist)
EVENT LANGUAGE	Sinhala
HOST LOCATION	Wattala, Sri Lanka
GEOGRAPHIC SCOPE	Community level
AFFILIATIONS	World Vision Lanka
DIALOGUE EVENT PAGE	https://nutritiondialogues.org/dialogue/60275/



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	18
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PARTICIPATION BY AGE RANGE

0	0-11	0	12-18	0	19-29
13	30-49	5	50-74	0	75+

PARTICIPATION BY GENDER

17	Female	1	Male	0	Other/Prefer not to say
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NUMBER OF PARTICIPANTS FROM EACH STAKEHOLDER GROUP

0	Children, Youth Groups and Students	0	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)
0	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
0	News and Media (e.g. Journalists)	0	Parents and Caregivers
0	Science and Academia	0	Small/Medium Enterprises
1	Sub-National/Local Government Officials and Representatives	0	United Nations
17	Women's Groups	1	Other (please state)

OTHER STAKEHOLDER GROUPS

NA

ADDITIONAL DETAIL ON PARTICIPANT DIVERSITY

All participants represented urban communities, with most households relying on daily wage labor as their primary source of livelihood.

SECTION TWO: FRAMING AND DISCUSSION

FRAMING

The Development Facilitator initiated the session by introducing the staff and outlining the structure of the programme, emphasizing that the session would serve as a community dialogue. The Area Programme Manager followed with an overview of the nutrition interventions carried out within the area programme, including when and why these programmes were implemented based on emerging needs. The nutrition dialogue was introduced using available health-related data to guide the discussion and its relevance to the ENOUGH Campaign.

DISCUSSION

Participants highlighted that many community members are engaged in daily wage labour and fishing. In many households, both parents are working, either in formal employment or small-scale entrepreneurship, while some work within the home. Facilitator pointed out that while national-level data reflects certain realities, it does not always accurately represent the situation at the grassroots level. During the discussion, participants were also asked about their understanding of nutrition and responded accordingly.

SECTION THREE: DIALOGUE OUTCOMES

CHALLENGES

Limited awareness and knowledge of nutrition among parents, particularly mothers.
Inconsistent access to nutritious foods such as fish, meat, eggs, and other essential food items.
Unequal distribution of food within households due to economic hardship and social challenges.
Children living with grandparents, as a result of parental migration, imprisonment, or other family-related issues, often receive inadequate nutritional care.
Increased consumption of instant, processed, and convenience foods among children and families.
Household income is sometimes diverted to alcohol consumption rather than meeting children's nutritional needs.
Family-related issues, including alcoholism, separation, and caregiving challenges, negatively affect child nutrition.
Large family sizes make it difficult for some households to provide adequate and balanced nutrition equally to all children.
Working mothers, especially those employed far from home, have limited time for childcare and meal preparation.
Although government nutrition and health services are available, community participation in these services is low.
Lack of awareness limits the effective use of services provided by Public Health Midwives (PHMs).
Negative experiences with service providers discourage attendance at child growth monitoring sessions.
Community leaders have observed visible signs of undernutrition among children in the area.
Labor migration has a negative impact on childcare and household nutrition practices.
Nutritional attention often decreases for second and third children compared to firstborn children.
Exclusive breastfeeding practices are frequently discontinued before the recommended six months due to employment commitments.
Limited access to facilities such as refrigerators affects the ability of mothers to follow Ministry of Health breastfeeding recommendations.

URGENT ACTIONS

1. Ensure school canteens provide only nutritious food options.
2. Strengthen the role of PHMs and ensure enforcement of relevant policies.
3. Improve nutrition education and awareness during pregnancy.
4. Restart and strengthen the Pidihath programme to improve child nutrition.
5. Move beyond routine home visits every three months and adopt more effective engagement methods.
6. Introduce greater diversity in school meal programmes.
7. Strengthen nutrition education within schools.
8. Promote family-level awareness and accountability, with stronger government follow-up mechanisms.
9. Engage religious and community leaders in influencing school environments and behaviours.
10. Strengthen the presence and accessibility of MOH services at village level.
11. Address frequent transfers of government officers to ensure continuity of services.
12. Improve awareness and monitoring of food waste and food practices.

AREAS OF DIVERGENCE

There were mothers who were actively engaged in World Vision nutrition programmes, while others had limited exposure or familiarity with these initiatives. Mothers who were involved in these programmes demonstrated a more holistic understanding of nutrition and were better able to reflect on the nutritional situation of the wider community. In contrast, those with less engagement lacked a broader perspective and had a more limited understanding of community-level nutrition issues.

OVERALL SUMMARY

The discussion highlighted that child nutrition is influenced by a complex combination of socio-economic, behavioral, and family-related factors. Participants identified low nutrition awareness among parents, limited access to nutritious foods, increasing reliance on processed and instant foods, and unequal food distribution within households as major challenges. Family issues such as alcoholism, migration for work, inadequate childcare, and low involvement of fathers were also seen as significant contributors to poor nutrition outcomes. Participants further noted a growing double burden of malnutrition, with undernutrition among younger children and unhealthy weight gain among older children due to poor dietary habits.

School and community environments were also identified as important factors affecting children's nutrition and well-being. Concerns were raised about the limited variety of school meals, the widespread availability of unhealthy foods in school canteens, and the influence of peer pressure on children's food choices. In addition, insufficient parental engagement with existing health and nutrition services, limited follow-up after nutrition interventions, and inadequate awareness of recommended infant and young child feeding practices continue to hinder efforts to improve nutrition outcomes. The impact of the Ditwah cyclone further worsened food security by reducing the availability of fruits and vegetables and causing agricultural and livestock losses.

To address these challenges, participants recommended strengthening nutrition education and awareness programmes for parents, schools, and communities, while improving the quality and diversity of school meals and canteen food. They also emphasized the need to strengthen the role of Public Health Midwives and other government services, enhance follow-up and accountability mechanisms, restart and strengthen the Nutrition programme, and engage community and religious leaders in promoting positive nutrition behaviours. Overall, participants emphasized that improving child nutrition requires coordinated action from families, schools, communities, and government institutions, supported by stronger awareness, service delivery, and community engagement.

SECTION FOUR: PRINCIPLES OF ENGAGEMENT & METHOD

PRINCIPLES OF ENGAGEMENT

All participants were given equal opportunities to share their perspectives on the challenges, concerns, and potential solutions related to the discussion topic within an open, inclusive, and participatory environment. The session encouraged active engagement from all participants, ensuring that diverse viewpoints, experiences, and recommendations were heard and respected.

METHOD AND SETTING

Seating was arranged in an indoor venue to promote interaction and active participation among attendees. The facilitator facilitated the discussion, guiding participants through a series of questions focused on identifying key challenges, exploring underlying issues, and generating practical recommendations and solutions. The session was conducted in a semi-informal and participatory manner, creating a comfortable environment for open dialogue. Participants represented diverse

ADVICE FOR OTHER CONVENORS

NA

FEEDBACK FORM: ADDITIONAL INFORMATION

ACKNOWLEDGEMENTS

We would like to express our sincere gratitude to the World Vision Lanka Area Development Programme, its staff members, and community volunteers for successfully organizing this workshop. We also extend our appreciation to Technical Advisor – Integrated Nutrition and Technical Specialist – Disaster Risk Reduction for their valuable support and guidance.