OFFICIAL FEEDBACK FORM

DIALOGUE TITLE	Nutrition Dialogue with stakeholders of Jayaprithvi Municipality
DIALOGUE DATE	Monday, 29 June 2026 10:00 GMT +05:45
CONVENED BY	Anjil Chalaune Event announced on behalf of the Convenor by: Rita Lama. Facilitator Feedback published on behalf of Convenor by: Rita Lama. World Vision Intl Nepal, Campaign Coordinator
EVENT LANGUAGE	Nepali
HOST LOCATION	Jayaprithvi, Nepal
GEOGRAPHIC SCOPE	Jayaprithvi Municipality , Skmkhet
DIALOGUE EVENT PAGE	https://nutritiondialogues.org/dialogue/60631/

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

54

PARTICIPATION BY AGE RANGE

0	0-11	0	12-18	0	19-29
1	30-49	0	50-74	0	75+

PARTICIPATION BY GENDER

12	Female	42	Male	0	Other/Prefer not to say

NUMBER OF PARTICIPANTS FROM EACH STAKEHOLDER GROUP

6	Children, Youth Groups and Students	1	Civil Society Organisations (including consumer groups and environmental organisations)
3	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	34	National/Federal Government Officials and Representatives
4	News and Media (e.g. Journalists)	7	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

ADDITIONAL DETAIL ON PARTICIPANT DIVERSITY

SECTION TWO: FRAMING AND DISCUSSION

FRAMING

The stakeholder were introduced with the 3 types of malnutrition in Nepal and the major reason, datas children face serious nutrition problems. Malnutrition is the biggest issue. One main reason is poor transportation, which makes it hard to bring in different types of food. Local foods are often sold for income instead of being eaten at home. Families are also turning more toward junk food, while children's health is neglected because parents are busy working.

NUTRITION SITUATION PRESENTATION

https://nutritiondialogues.org/wp-content/uploads/2026/07/Presentation.pdf

DISCUSSION

Nutrition challenges identified Actions urgently needed and how they should be taken forward

SECTION THREE: DIALOGUE OUTCOMES

CHALLENGES

Food security issues limit access to nutritious food.

Lack of nutrition knowledge reduces healthy practices.

Preference for junk food harms child health.

Excessive fertilizer use contaminates food.

Unhealthy lifestyles weaken overall well-being.

Decline in local crops reduces food diversity.

Poor breastfeeding practices affect child nutrition.

Pesticide use makes food unsafe.

Unsafe water and sanitation increase health risks.

Lack of health services delays nutrition care.

Cultural practices hinder modern nutrition.

Low policy priority weakens program impact.

Heavy workload for women limits childcare.

No breastfeeding facilities discourage proper feeding.

Poverty and food insecurity restrict access to healthy diets.

Unbalanced diets lead to deficiencies.

Geographical barriers limit services.

Infections and diseases weaken immunity.

Unhealthy eating habits disrupt feeding schedules.

Low education reduces nutrition awareness.

Poor sanitation harms child health.

Weak nutrition programs limit progress.

Polluted environment worsens health.

Traditional beliefs block modern practices.

Anemia and deficiencies are rising.

Irregular food schedules harm children.

Processed food use is increasing.

Tobacco and alcohol damage health.

No health check-ups delay detection.

Lifestyle changes reduce well-being.

URGENT ACTIONS

Restrict junk food to protect child health.

Promote breastfeeding and timely complementary feeding.

Eliminate harmful beliefs about nutrition.

Implement nutrition plans across sectors.

Increase child nutrition allowance for better support.

Improve school meals with local foods.

Start awareness programs in communities and schools.

Distribute micronutrients when necessary.

Promote local crops and traditional foods.

Share nutrition knowledge within communities.

Encourage green vegetables and nutritious foods.

Use local food items more effectively.

Maintain hygiene for better health.

Promote safe food consumption.

Ensure community participation in nutrition programs.

Conduct regular check-ups for children.

Run food security campaigns to raise awareness.

Promote Four-Star Food for balanced meals.

Encourage organic farming for safe food.

Establish kitchen gardens in every household.

Conserve traditional crops for sustainability.

Set up fair-price shops for affordable food.

Improve feeding practices for infants.

Monitor markets to ensure food quality.

Organize nutrition camps for awareness and services.

Collect nutrition data to guide planning.

Promote sanitation in homes and schools.

Focus on livestock for food security.

Coordinate sectors for effective action.

Strengthen school meals using local produce.

AREAS OF DIVERGENCE

When talking about how to improve child nutrition in Nepal, people had different views. Everyone agreed that malnutrition is a serious problem, but opinions varied on what should be done first and how.

Some wanted a complete ban on junk food, while others thought this was too strict and suggested better rules or awareness instead. The promotion of breastfeeding was widely supported, but there were disagreements about when and how to start complementary feeding, especially because of traditional beliefs.

On nutrition plans, some believed the government should lead, while others felt local communities should take charge. There were also different opinions on whether to increase the nutrition allowance or improve school meal programs first.

The use of local crops and green vegetables was another point of debate. Some said traditional foods are best, while others argued that imported or fortified foods are needed for variety.

Community awareness programs were seen as important, but people disagreed on who should run them—government, NGOs, or local leaders. The distribution of micronutrients was accepted, but some thought it should only be a short-term fix.

Finally, there were differences about the role of families. Some stressed community participation, while others pointed out that parents are often too busy earning, so schools and institutions need to step in more.

In short, the main differences were about restriction versus regulation, traditional versus modern practices, and government-led versus community-driven approaches.

OVERALL SUMMARY

Our dialogue focused on the nutrition challenges in Nepal, especially among children. We highlighted that malnutrition is a major issue caused by poverty, food insecurity, geographical barriers, and limited access to diverse foods. Families often sell local produce for income instead of consuming it, while reliance on junk and processed foods is increasing.

We identified several problems: lack of nutrition knowledge, poor breastfeeding practices, unsafe water and sanitation, infections, unhealthy eating habits, excessive use of fertilizers and pesticides, cultural misconceptions, weak nutrition programs, and lifestyle changes such as sedentary habits and substance use. These factors contribute to deficiencies like anemia and vitamin shortages.

We also discussed solutions: restricting junk food, promoting breastfeeding, eliminating harmful beliefs, implementing multi-sectoral nutrition plans, increasing child nutrition allowances, improving school meal programs, distributing micronutrients, and encouraging the use of local crops and green vegetables. Other strategies included promoting organic farming, establishing kitchen gardens, running awareness campaigns, organizing nutrition camps, monitoring markets, and ensuring community participation.

Finally, we noted areas of divergence in opinions—such as whether to ban junk food completely or regulate it, whether traditional foods alone are sufficient or fortified imports are needed, and whether government-led or community-driven approaches are more effective.

In summary, the dialogue emphasized that child nutrition in Nepal is shaped by economic, social, and cultural challenges, and requires coordinated action across families, communities, and government to bring sustainable improvement.

SECTION FOUR: PRINCIPLES OF ENGAGEMENT & METHOD

PRINCIPLES OF ENGAGEMENT

Our dialogue followed the Principles of Engagement by ensuring inclusivity, transparency, and respect for diverse perspectives. In the briefing before the event, facilitators were advised to include a wide range of stakeholders—community members, government officials, teachers, mothers' groups, farmers' groups, and community health groups. This diversity ensured that nutrition challenges were discussed from multiple angles, including cultural, social, and economic contexts. Competing interests were managed by openly acknowledging differences—for example, whether to completely ban junk food or regulate it, and whether traditional foods alone are sufficient compared to fortified imports. Facilitators anticipated these divergences and encouraged respectful dialogue, allowing all voices to be heard. Transparency was maintained by clarifying positions and encouraging disclosure of organizational or financial interests where relevant.

METHOD AND SETTING

The dialogue was organized in a formal setting at the municipality hall. The event began with a formal introduction, chaired by the mayor and the administration head, which established the official tone and importance of the workshop. To ensure inclusivity, facilitators followed the recommended methodology by bringing together diverse stakeholders. Participants included government officials, bureaucrats, community members, teachers, mothers' groups, farmers' groups, community health representat

ADVICE FOR OTHER CONVENORS

Having the ward mayor and the head of administration chair the workshop is a very effective strategy. Their formal role at the start sets the tone, but more importantly, it ensures they remain present until the end of the session. This makes them liable to listen, respond, and engage with the issues raised by participants.

FEEDBACK FORM: ADDITIONAL INFORMATION

ACKNOWLEDGEMENTS