

# RETURN FORM OFFICIAL

DIALOGUE TITLE	Dialogue with the children of Tshinaweji: expressing the reality of hunger and malnutrition
DATE OF DIALOGUE	Wednesday, December 4, 2024 11:00 GMT +02:00
SUMMONED BY	Adam Mwepu
LANGUAGE OF THE EVENT	Swahili
HOST PLACE	Kolwezi, Democratic Republic of Congo
GEOGRAPHICAL SCOPE	Tshinaweji Village
AFFILIATIONS	World Vision
EVENT PAGE OF DIALOGUE	<a href="https://nutritiondialogues.org/fr/dialogue/55983/">https://nutritiondialogues.org/fr/dialogue/55983/</a>



# SECTION ONE: PARTICIPATION

## TOTAL NUMBER OF PARTICIPANTS

1

## PARTICIPATION BY AGE GROUP

0 0-11

0 12-18

7 19-29

12 30-49

8 50-74

0 75+

## PARTICIPATION BY GENDER

14 Female

13 Male

0 Other/Prefer not to say

## NUMBER OF PARTICIPANTS FROM EACH STAKEHOLDER GROUP

0 Children, youth groups and students

0 Educators and Teachers

0 Financial institutions and technical partners

0 Health professionals

0 Information and Technology Providers

0 Marketing and Advertising Experts

0 News and Media (e.g. journalists)

0 Science and Universities

0 Government officials and representatives  
local/sous-national

0 Women's Groups

0 Civil society organizations (including  
consumer groups and organizations  
environmental)

0 Religious Leaders/Religious Communities

27 Food producers (including farmers)

0 Indigenous peoples

0 Large food companies and retailers

0 Government officials and representatives  
national/federal

0 Parents and Caregivers

0 Small/Medium Enterprises

0 United Nations

1 Other (please specify)

## OTHER STAKEHOLDER GROUPS

Apart from the farmers' group, there was participation from other groups such as teacher supervisors and health professionals

## ADDITIONAL DETAILS ON PARTICIPANT DIVERSITY

This dialogue was attended by 27 people including 14 women, all from the same community, rural environment who live below the poverty line, mostly farmers, of different ethnicities but sharing the same culture

# SECTION TWO: FRAMEWORK AND DISCUSSION

## MANAGEMENT

Duranduring this dialogue with adults, the workshop on the problem of food insecurity, hunger and malnutrition in the context of Tshinaweji was at the center of analysis in different discussion groups. Upon arrival, participants were welcomed and seated in the room. The session began with prayer followed by the presentation of the participants in turn. The agenda of the session explained in the introduction giving an overview of the goal or objectives as well as the results of this dialogue. Then the context of hunger and malnutrition in the world, followed by the distribution into discussion groups are points briefly presented. Facilitators and secretaries of each group were designated and a reminder of their role of each given. After time was given to each group to begin discussions by contextualizing the problem to finally identify the challenges, the actions to be taken at different levels, the points of convergence and divergence during the discussions in plenary as well as other important comments. At the end, the moderator summarized the content of the dialogue and gave the closing words of thanks. The session ended with the closing prayer and taking a family photo.

## PRESENTATION OF THE NUTRITIONAL SITUATION

<https://nutritiondialogues.org/wp-content/uploads/2024/12/FR-Introduction-to-Nutrition-Slideset-Synthese-Dr-Philippe-1.pptx>

## DISCUSSION

The topic of discussion was food insecurity in the community of Tshinaweji and 3 open questions were asked: 1. What are the causes of food insecurity in the community? 2. What are the avenues and solutions to resolve the problem of food insecurity? 3. What are the assets and opportunities available to the community?

# SECTION THREE: RESULTS OF THE DIALOGUE

## CHALLENGES

• Insufficient basic foods in the community due to low agricultural production and monoculture of cassava which rots following the epidemic locally called Tshindjondjo as a repercussion of food insecurity, hunger and malnutrition in the community • Lack of access to water services, hygiene and improved sanitation causes of waterborne diseases such as verminosis, malaria and acute respiratory infections maintaining poor nutrition • Limited access and use of quality health services for the community, consequence of inadequate management of certain pathologies leading to poor nutritional status • Low household income, the majority of the population in the community of Tshinaweji lives below the poverty line, a major determinant of the nutritional status of a family that does not know how to diversify the menu because of poverty observed as a vicious circle. • Lack of support from the administrative authority in the development of agricultural projects, diversification of crops (food and market gardening) and varieties of cereals and legumes with high nutritional value.

## URGENT ACTIONS

1. Support from the Lufupa sector, the Mutshatsha territory and the government with different varieties of seeds and chemical fertilizers and technical support to ensure the health safety of agricultural products. This promotion of agricultural production will be accompanied by nutritional education to improve household knowledge and practices with a view to better diversification of the diet.
2. That the administrative authority, technical and financial partners in the sector can support the community to drill new wells and develop old existing water sources, thus allowing access to improved water and sanitation services and reducing water-borne diseases. 3. The rehabilitation and equipment of the health center, strengthening the capacities of health personnel, thus facilitating access to quality services and care for adequate management of diseases that cause poor nutritional status among the population of Tshinaweji.
4. That the territorial authority supports the community in the agricultural sector by promoting investments targeting women, in particular through the strengthening of their capacities with a view to their empowerment and the increase in income from agriculture for producers.

## AREAS OF DIVERGENCE

The laziness of some members of the community was a point of divergence during the plenary discussions, for others if laziness is one of the causes of the insufficiency of basic foods, we would speak of the total absence of food in the community

## GENERAL SUMMARY

This adult dialogue was attended by 27 people including 14 women, all from the same community (rural environment), living below the poverty line, mostly farmers, different ethnicities but sharing the same culture.

Discussions during the workshop focused on food insecurity, hunger and malnutrition in the context of Tshinaweji. Upon arrival, participants were welcomed and seated in the room. The session began with prayer followed by the introduction of the participants in turn. The agenda of the session explained in the introduction giving an overview of the goal or objectives as well as the results of this dialogue.

Nutritional challenges identified in the community. • Insufficient

basic foods in the community due to low agricultural production and monoculture of cassava which rots following the epidemic locally called Tshindjondjo as a repercussion of food insecurity, hunger and malnutrition in the community • Lack of access to water services, hygiene and improved sanitation causes of waterborne diseases such as

worms, malaria and acute respiratory infections maintaining poor nutrition • Limited access and use of quality health services for the community, consequence of inadequate management of certain pathologies leading to poor nutritional status • Low household

income, the majority of the population in the community of Tshinaweji lives below the poverty line, a major determinant of the nutritional status of a family that does not know how to diversify the menu because of poverty observed as a

vicious circle. • Lack of support from the administrative authority in the development of agricultural projects, diversification of crops (food and market gardening) and varieties of cereals and legumes with high nutritional value.

Emergency actions: •

Support from the Lufupa sector, the Mutshatsha territory and the government with different varieties of seeds and chemical fertilizers and technical support to ensure the health safety of agricultural products.

This promotion of agricultural production will be accompanied by nutritional education to improve household knowledge and practices with a view to better diversification of the diet. • That the administrative authority, technical and financial partners in the sector

can support the community to drill new wells and develop old existing water sources, thus enabling access to improved water and sanitation services and reducing water-borne diseases • The rehabilitation and equipment of the health center, capacity building of health personnel, thus

facilitating access to quality services and care for adequate management of diseases that

cause poor nutritional status among the population of Tshinaweji. • That the territorial authority supports the community in the agricultural sector by promoting investments targeting women, in particular through capacity building with a view to their empowerment and increasing income from agriculture for producers.

Points of divergence: • The

laziness of some members of the community was a point of divergence during the plenary discussions, for the others if laziness is one of the causes of the insufficiency of basic foods, we would speak of the total absence of food in the community

# SECTION FOUR: PRINCIPLES OF ENGAGEMENT AND METHOD

## PRINCIPLES OF COMMITMENT

After announcing the topic of the dialogue and the agenda of the session to the participants, it was a question of recalling the selection criteria for participation in the dialogue according to social class, ethnicity and group of actors, gender and a request for authorization to consent to the disclosure of their social class and images during the reporting and unanimously all the participants agreed and this was recorded by the different facilitators chosen in the discussion groups.

## METHOD AND FRAMEWORK

During this dialogue, the collaborative method was used, teamwork and open discussion of all participants, respecting the points of convergence and divergence, gender and social inclusion and tolerance. Clear explanations on the theme in French and Swahili for those who did not understand French for a good understanding. Some discussion groups reported in Swahili that the facilitator should translate into French and harmonize.

## TIPS FOR OTHER CONVENERS

Advice to other organizers: • Please respect gender and social inclusion in the selection of participants • Clearly explain the topic of the dialogue and the expected results at the end of the discussions while remaining in the local context • Ask open questions and involve everyone

# RETURN FORM: INFORMATION ADDITIONAL

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## THANKS

Our thanks go to all the participants, despite the rural concerns, they made their time available to actively participate in this nutritional dialogue. To the local authorities and religious leaders of Tshinaweji for making the Garenganze church available which hosted the workshop. To the World Vision staff for the support and guidance for the success of the activity and the reporting.

## ATTACHMENTS

- List of participants  
<https://nutritiondialogues.org/wp-content/uploads/2024/12/TSHINAWEJI-04-DEC-1.pdf>