

RETURN FORM OFFICIAL

DIALOGUE TITLE	LET'S LISTEN TO THE PERCEPTION OF MALNUTRITION AMONG ADULTS IN THE NEIGHBORHOOD FIFTIETH ANNIVERSARY OF THE GEMENA OUTSKIRTS
DATE OF DIALOGUE	Friday, November 29, 2024 10:00 GMT +01:00
SUMMONED BY	Sylvain KAYUMBA/Jonas KINZOMBA Event announced on behalf of the organizer by: {advertiser_name}. {explanation} Feedback published on behalf of the organizer by: SYLVAIN KAYUMBA. Principal Facilitator
LANGUAGE OF THE EVENT	French and Lingala
HOST PLACE	Gemena, Democratic Republic of the Congo
GEOGRAPHIC SCOPE	community level
AFFILIATIONS	world vision
EVENT PAGE OF DIALOGUE	https://nutritiondialogues.org/fr/dialogue/56133/



SECTION ONE: PARTICIPATION

TOTAL NUMBER OF PARTICIPANTS

23

PARTICIPATION BY AGE GROUP

0 0-11

0 12-18

12 19-29

8 30-49

3 50-74

0 75+

PARTICIPATION BY GENDER

12 Female

11 Male

0 Other/Prefer not to say

NUMBER OF PARTICIPANTS FROM EACH STAKEHOLDER GROUP

0 Children, youth groups and students

5 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)

3 Religious leaders/Religious communities

15 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

0 Other (please specify)

OTHER STAKEHOLDER GROUPS

Teachers, deacons and church leaders, parents and farmers.

ADDITIONAL DETAILS ON PARTICIPANT DIVERSITY

This dialogue is organized with the Adults at Quartier Cinquantenaire in the KANGAYANI Health Area divided into GBAKATA Health Area, who gave their perception on malnutrition including 12 women and 11 men in total 23 participants. Among the participants there were teachers, deacons and guides of the Church, parents and farmers.

SECTION TWO: FRAMEWORK AND DISCUSSION

MANAGEMENT

This dialogue is organized with the Adults in the Cinquanteaire District in the KANGAYANI Health Area dismembered from the GBAKATA Health Area, 12 Women and 11 Men in total 19 people, also gave their perception of malnutrition, Among the participants there were the Teachers, the deacons of and guide of the Church, the parents and farmers, gathered in the MEJEC Church, there was a great mourning of a Director of the Primary School died in this village; as it was an appointment prepared by the president of the health development committee (CODESA) three days before; this is how we were able to maintain the session, the Co-facilitator led the dialogue with the adults in this Church and the Main Facilitator spoke with the Children under the tree next to the MEJEC Church. In his introductory remarks, the facilitator said that WV would like to join your voice to those of other Adults for the noble cause (advocacy on hunger and malnutrition through the campaign "Enough". In view of the statistics we indicated to the participants that the hour is serious in the world, in the country and in the province/Gemena; we explained the planned material from which the participants expressed themselves to make comments on such a situation in their community;

DISCUSSION

At the end of our powerpoint presentation through our computer on the situation of hunger and malnutrition, the participants gave their answers according to the 3 reflection questions asked: their perceptions, the challenges and the solutions envisaged in their communities; the participants listed the factors triggering malnutrition and hunger in their environment: Poverty maintains malnutrition very well; Children eat only once a day, hence daily nutritional needs are not covered; No employment for parents and young people with a low level of income for households; Ignorance of malnutrition by some people; The majority of men do not work; Malnutrition is due to low agricultural production; Low payment of employees by the government; Low income of families to help them work the fields; Malnutrition is due to large families, i.e. very large household sizes; Malnutrition is due to late payment of daily workers (domestic workers); Low sales/flow of small businesses; Malnutrition is due to excessive school and health costs; Malnutrition is due to low household income; Malnutrition is due to the poor training of community members on the contents of malnutrition, fortunately this dialogue has just opened our eyes to that; Weak support from community members; Malnutrition is due to the negligence of parents who abandon their children for a long period; the sale of agricultural products no longer brings in much income; poor road conditions to evacuate them to the large consumption center; Weak commitment of parents in the health monitoring of children; Irresponsibility and laziness of some parents; The negligence of women.

SECTION THREE: RESULTS OF THE DIALOGUE

CHALLENGES

At the end of our powerpoint presentation through our computer on the situation of hunger and malnutrition, the participants gave their answers according to the 3 reflection questions asked: their perceptions, the challenges and the solutions envisaged in their communities; the participants listed the factors triggering malnutrition and hunger in their environment: 1 Poor water quality which leads to diseases and malnutrition; 2 Insufficient quality health care; 3 No gainful employment; 4 Influence peddling during recruitment/job opportunities; 5; Weak support from agricultural households; 6 The theft of poultry and livestock in the community, further unbalances us; 7 Diseases/epidemics of livestock & poultry; 8 Limited number of households supported by international NGOs (sponsored children of World Vision).

URGENT ACTIONS

The urgent actions to be undertaken are as follows: Partners to support communities with AGR to fight against malnutrition; Strengthen agricultural activities; Initiate household support projects, especially women in income-generating activities; the construction and equipment of the Health Center according to standards and which is close to us to have quality care; the construction of the BRIDGE at Comigiem to connect us to the Salongo 2 District, this facilitates the movement of goods and money; the improvement and regularization of workers' salaries; Development of roads to allow the smooth movement of goods and services; Support for households with agricultural kits to do agriculture;

AREAS OF DIVERGENCE

The participants asked that WV build the market for them and develop the road that serves agricultural products and the others say that it is the responsibility of the Congolese state to do all that and WV must simply plead for us.

GENERAL SUMMARY

It is still in the logic of the "Enough" campaign that this dialogue session on nutrition is organized with the Adults in the Cinquantenaire District in the KANGAYANI Health Area dismembered from the GBAKATA Health Area, in the AP Ledia of the Gemena cluster and which is part of the perspective of reaching all sections of the population in all the opportunities that will arise (WV activities or Partners) to organize this; this is why the main facilitator obtained the agreement of one of the presidents of the Health Development Committee (CODESA) on the basis of a timetable established by the Coordination Office of the Association "RECO DEBOUT" and which was able to mobilize and raise awareness on one side of the Adults and on the other side of the children on November 29; where we managed to persuade 23 participating Adults including 12 women and 11 men. This dialogue took place within the MEJEC Church; The facilitator made it clear to the participants that WV and he were also affected by the nutritional and hunger situation in a very critical national, international and local context, and that we would like to join them to collect their points of view for a broad advocacy at all levels in order to obtain solutions to the problems of hunger and malnutrition that affect several households in their community. The participants are listened to to know their perceptions or the triggers of malnutrition, the actions to be taken and the nutritional challenges, thus creating a space for debates and exchanges, given the context of the mourning of a deceased director and to be buried that day in this same village, we did not constitute the discussion groups to save time, touched by the statistics given for malnutrition the participants expressed themselves freely and openly. After the facilitator explained some subjects: the definition of key concepts (hunger, malnutrition, food insecurity), the different types of malnutrition (acute malnutrition, chronic malnutrition, overweight, underweight, and also explained obesity and micronutrient deficiencies) but also we made the participants understand the triggers of malnutrition, the number, the categories of people most affected by this malnutrition. And that 3 major questions were proposed to them to debate: these are in particular Their perceptions / opinions and considerations on the causes, linked to malnutrition; The challenges encountered; The solutions / actions / commitment to nutrition; the facilitators captured all that are as points of divergence emerged during the discussions as a whole; all this with the aim of improving the nutritional conditions of children in their communities. At the end, the concluding words were addressed to the participants and the President of CODESA who facilitated this meeting to thank them warmly. The result of the discussion allowed the participants to list the causes of malnutrition as follows: Poverty maintains malnutrition very well; Children eat only once a day, hence daily nutritional needs are not covered; No employment for parents and young people with a low level of income for households; Ignorance of malnutrition by some people; The majority of men do not work; Malnutrition is due to low agricultural production; Low payment of employees by the government; Low income of families to help them work the fields; Malnutrition is due to large families, i.e. very large household sizes; Malnutrition is due to late payment of daily workers (domestic workers); Low sales/flow of small businesses; Malnutrition is due to excessive school and health costs; Malnutrition is due to low household income; Malnutrition is due to the poor training of community members on the contents of malnutrition, fortunately this dialogue has just opened our eyes to that; Weak support from community members; Malnutrition is due to the negligence of parents who abandon their children for a long period; the sale of agricultural products no longer brings in much income; poor road conditions to evacuate them to the large consumption center; Weak commitment of parents in the health monitoring of children; Irresponsibility and laziness of some parents in health monitoring

SECTION FOUR: PRINCIPLES OF ENGAGEMENT AND METHOD

PRINCIPLES OF COMMITMENT

The principles of engagement were observed and noted throughout this dialogue, including: 1. Participants resolved to work together to combat malnutrition, now knowing that the situation is serious through this dialogue; 2. Encourage and strengthen awareness so that each household has a plot of land in their community.

METHOD AND FRAMEWORK

The methodology used was andragogical and participatory and that the principles are those linked to their interest and real need for their community in light of the shocking, touching statistics at the global, national and provincial/health zone level that were presented to them in record time (less time with a precise/concise message, and key

TIPS FOR OTHER CONVENERS

Adapted the dialogue according to the context such as the coincidence with happy or unhappy events that may arise in the locality where the nutrition dialogue session is held;

RETURN FORM: INFORMATION ADDITIONAL

THANKS

We would like to warmly thank the President of CODESA for his involvement and mobilization of participants in his respective health area, for holding this dialogue on nutrition, but also thank the cluster manager for his encouragement and support, in a difficult context for our Gemena office.

RELEVANT LINKS

- <https://nutritiondialogues.org/fr/portail/edit-dialogue/>

ATTACHMENTS

- photo 1
<https://nutritiondialogues.org/wp-content/uploads/2024/12/PHOTO-DN-ADULTE-KANGAYANI-2-scaled.jpg>
- attendance list <https://nutritiondialogues.org/wp-content/uploads/2024/12/Liste-de-Presence-Adulte-DN-Q50NAIRE-Gna.pdf>
- CF 1
<https://nutritiondialogues.org/wp-content/uploads/2024/12/Consent-form-Adulte-DN-Q50NAIRE-Gna-1-3.pdf>
- CF2
<https://nutritiondialogues.org/wp-content/uploads/2024/12/Consent-form-Adulte-DN-Q50NAIRE-Gna-7-10.pdf>
- CF3
<https://nutritiondialogues.org/wp-content/uploads/2024/12/Consent-form-Adulte-DN-Q50NAIRE-Gna-11-14.pdf>
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<https://nutritiondialogues.org/wp-content/uploads/2024/12/Consent-form-Adulte-DN-Q50NAIRE-Gna-15-17.pdf>
- CF5
<https://nutritiondialogues.org/wp-content/uploads/2024/12/Consent-form-Adulte-DN-Q50NAIRE-Gna-18-20.pdf>