

**Nutrition Dialogues**  
**Global Synthesis**  
**Full version**

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# 1 Introduction

The World Vision International (WVI), and 4SD Foundation (4SD) Nutrition Dialogues initiative was established in 2024. It sought to bring the perspectives and experiences of people who are most at risk of being malnourished to the forefront both in global nutrition discussions and at local and national decision-making tables. Through taking part in dialogue events they have opportunities to explore challenges faced by people who experience food insecurity and are at risk of malnutrition. Anyone who wants to can organize a dialogue: those keen to do so are asked to announce that they will convene a dialogue event on the [Nutrition Dialogues](#) portal. There are two formats they can use for dialogue events - Children's Workshops (for children and young people aged 12 to 18) and Stakeholder Dialogues (for adults). In practice, dialogues have taken place at local, national and regional levels and methods have been adapted to what works best in the local context, including the use of local languages.

Feedback from 346 dialogue events that took place in 2024, involving more than 10,000 people in 54 countries, has been posted on the [Nutrition Dialogues](#) portal. This global synthesis report contains an analysis of this feedback and presents key messages as recommendations which will be made available to participants in the March 2025 Nutrition for Growth Summit in Paris.

This analysis of dialogue feedback summarizes views about the underlying factors that increase risks of malnutrition within households, and the specific events that can trigger the emergence of malnutrition in an individual. It also sets out views about the actions that can be taken to reduce the likelihood that malnutrition occurs, especially among women and children.

## 2 Methods

### 2.1 Methods for Nutrition Dialogues

The Nutrition Dialogues initiative is open to anyone who wishes to contribute by convening a facilitated dialogue. There are two different types of Nutrition Dialogues: Stakeholder Dialogues and Children's Workshops. The methods for each reflect the initiative's Principles of Engagement which prioritize inclusivity, respect for diverse perspectives, and systematic documentation of outcomes to inform actionable solutions. The methods proposed are designed to offer flexibility to those who convene them (the Convenors) so they can be adapted to local needs and contexts, while maintaining the core objective of fostering meaningful and inclusive exchange. Guidance is offered to Convenors, both in writing and through interactive webinars, to increase the degree of consistency across all dialogues. This includes instruction in the use of a standardized form that enables Convenors to feed-back on the dialogues they organize. The feedback form invites Convenors to reflect on the food and nutrition challenges faced by participants and their communities, to identify actions they believe should be taken to reduce risks associated with these challenges, and to note any significant divergence of views. Convenors announce dialogues on the Nutrition Dialogues portal (the website <https://nutritiondialogues.org/>) and upload completed feedback forms soon after the dialogue has taken place. The feedback forms are publicly available on the portal.

#### 2.1.1 Stakeholder Dialogues

Stakeholder Dialogues bring together diverse participants. There is emphasis on including women (including mothers and other caregivers of different ages), as well as fathers, farmers, healthcare professionals, teachers, members of civil society organizations, businesspeople, and government officials, among others. Convenors are encouraged to include indigenous communities, people from

diverse ethnicities and religious backgrounds, as well as those with special needs (even if they are not normally be included in such processes). Stakeholder Dialogues (SDs) can be conducted in two formats: those involving participants from a single stakeholder group (such as healthcare workers) and those with participants from several stakeholder groups. Both SD formats are designed for those who take part to explore local nutrition challenges and identify practical, context-specific actions. Each dialogue follows a structured three-phase format:

1. **Opening Session:** A Convenor introduces the dialogue by presenting local nutrition data and framing its purpose within the broader context of nutrition challenges.
2. **Discussion Groups:** Participants break into smaller, facilitated groups to ensure inclusive participation and encourage the exchange of ideas. Facilitators guide discussions using pre-defined topics and open-ended questions, while a Record Keeper documents key points of agreement and divergence.
3. **Consolidation Session:** All participants reconvene to summarize the outcomes of the discussion groups. The Convenor provides a synthesis of the discussions, linking them to broader goals.

### 2.1.2 Children's Workshop

The Children's Workshop method is designed for children and young people aged 12–18 years. It encourages them to participate actively in an age-appropriate conversation on their ideas and perspectives about why people become malnourished in their localities, and about what should be done to improve their situation. Convenors adhere to strict child protection standards to ensure a safe and supportive environment for all participants. These include consent processes and plans for risk management, creating a safe and engaging space to discuss nutrition issues and potential solutions to malnutrition. The workshops follow a suggested four-part structure:

1. **Opening Session:** Convenors use icebreaker activities to establish a welcoming and relaxed atmosphere, setting the stage for meaningful discussions.
2. **Exploration of Good Nourishment:** Participants explore key nutrition concepts through interactive activities, such as analyzing photographs or creating drawings that express their understanding of good nourishment.
3. **Development of Ideas and Solutions:** Children collaborate in groups to develop actionable ideas, creating visual collages to represent their proposed solutions, which they then present to the larger group.
4. **Closing Session:** Workshops conclude with a summary of discussions and acknowledgment of participants' contributions.

## 2.2 Data Analysis Method

Convenors received guidance in how to provide feedback from their dialogues by completing and submitting feedback forms through the Nutrition Dialogues portal. All Feedback forms uploaded to the portal by **31 December 2024** (see list in annex) were first translated into English and then analyzed.

The framework of analysis for this synthesis is adapted from the UNICEF Conceptual Framework on Maternal and Child Nutrition<sup>1</sup>. It included a focus on the following key elements:

1. **Factors** which place individuals at risk of food insecurity and malnutrition.

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<sup>1</sup> UNICEF Conceptual Framework on Maternal and Child Nutrition <https://www.unicef.org/documents/conceptual-framework-nutrition>

2. **Triggers** such as sudden influences or events leading to increases in hunger, food insecurity and a risk of malnutrition,
3. **Urgent Actions** that participants identified as critical for overcoming or preventing malnutrition.
4. **Implications** for the design and implementation of actions for nutrition.

Each Feedback Form was assigned a unique identifier (FF) to aid the linking of data across multiple dimensions, including dialogue type (Stakeholder Dialogue or Children’s Workshop), participant demographics (stakeholder group, age, and gender), dialogue location (the country and district), setting -when available (urban, peri-urban, rural, remote-rural) and administrative level (Community, District, Provincial, National and Multi-country level). Data from the FF were coded and entered into a structured spreadsheet and reviewed to identify recurring patterns and emerging themes. When there was uncertainty, contact was made with Convenors to clarify what was in the feedback form. Relevant quotes<sup>2</sup> from the feedback forms were clustered around each theme: together they help to establish the narratives for this synthesis.

The analysis included comparisons between recurrent themes from Children’s Workshops and Stakeholder Dialogues, and was designed to ensure that children’s voices were amplified. Themes were also explored at different administrative levels to better understand patterns, gaps and opportunities to inform actions and recommendations.

During the analysis, challenges were encountered, particularly regarding the inconsistent provision of participant data in the feedback forms. 40 % of the feedback that were analyzed came from three countries: Democratic Republic of the Congo (70 forms); Malawi (39 forms) and Mozambique (31 forms): most of the dialogues in these countries took place at community level.

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<sup>2</sup> Quotes contain either direct quotes from the participants in a dialogue or an excerpt from the summary of the dialogue as reported by the convenor.

### 3 Global Synthesis

#### 3.1 Participants in the Nutrition Dialogues

This synthesis is based on analysis of feedback from 346 Nutrition Dialogues that took place in 54 countries<sup>3</sup> within 2024. Of these, 57% (197) - were Stakeholder Dialogues and 43% (149) were Children’s Workshops). The dialogues were conducted in various administrative levels, with 80% taking place locally - 59% within communities and 21% at district level. 9% took place at provincial level, while 8% were at national level. 3% of the dialogues involved people from more than one country.

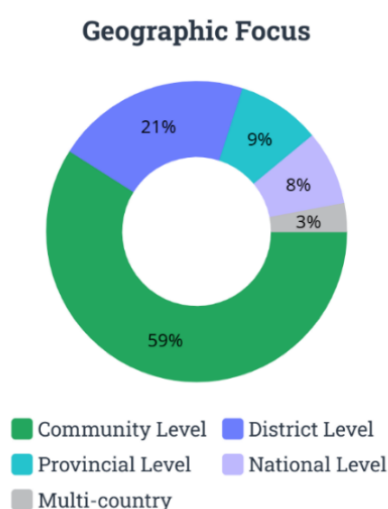


Figure 1 – Geographic Focus of the Nutrition Dialogues

There were more than 10,000 recorded participants in the Nutrition Dialogues - 57% were women and girls, 43% were men and boys. The participants represented a diverse range of stakeholder groups. 41% of the participants were children and young people (including students), followed by healthcare professionals (13%), personnel from civil society organizations (8%) and educators (5%), parents and caregivers (6%), food producers, including farmers (4%), faith leaders (4%), members of women’s organizations (3%) and other stakeholders (3%).

<sup>3</sup> Number of nutrition dialogues per country: Afghanistan (8); Angola (8) ; Bangladesh (4); Benin (1); Bosnia and Herzegovina (2); Brazil (2); Burkina Faso (2); Burundi (4); Central African Republic (1); Colombia (14); Democratic Republic of the Congo (70); Dominican Republic (4); Ecuador (4); Eswatini (8); Ethiopia (1); Ghana (8); Guatemala (1); Guinea (1); India (1); Indonesia (1); Ireland (1); Kenya (14); Lesotho (6); Liberia (1); Malawi (39); Mali (4); Mauretania (1); Mexico (1); Mongolia (1); Mozambique (31); Myanmar (6); Namibia (3); Nepal (7); Nigeria (12); Pakistan (2); Panama (2); Papua New Guinea (2); Peru (5); Philippines (4); Portugal (2); Rwanda (9); Somalia(4); South Sudan (1); Sri Lanka (11); Switzerland (2); The United Republic of Tanzania (3); Thailand (1); Uganda (1); United Kingdom (2); Venezuela (1); Viet Nam (1); Yemen (1); Zambia (13); Zimbabwe (5).

## Stakeholder Participation

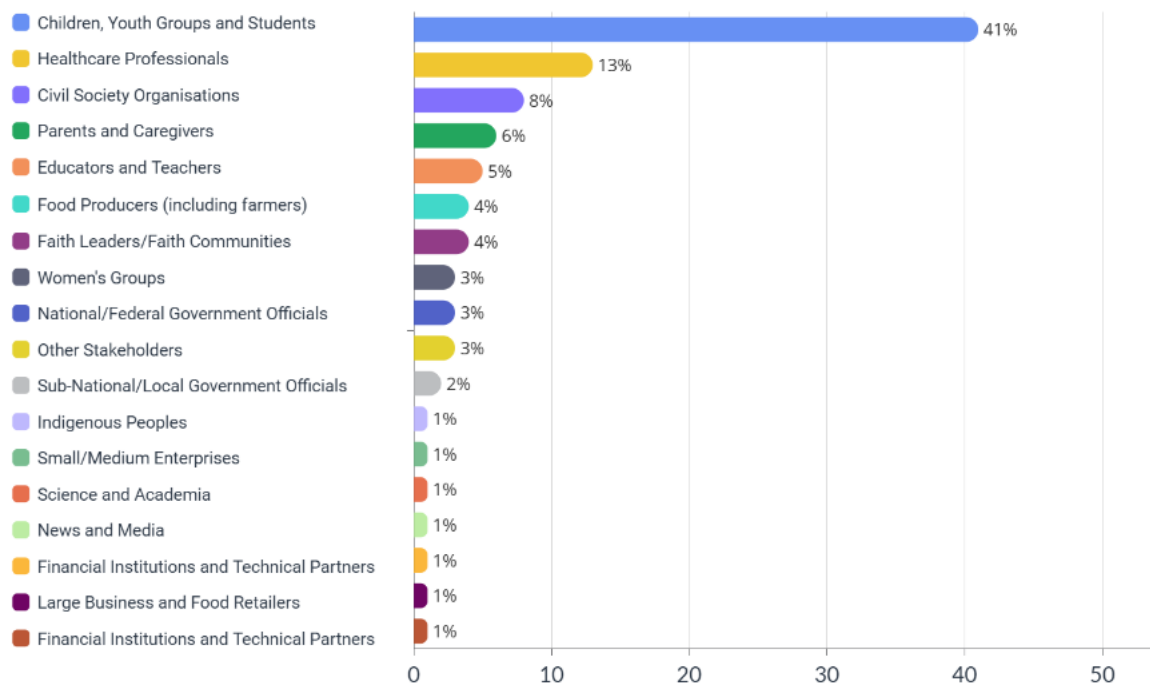


Figure 2 – Stakeholder distribution (only values over one percent included)

### Large events that amplify the voices of women and children:

Dialogue feedback included the findings from three large consultations and sensitization events which used different methods for assembling and reflecting the perspectives of those that participated. The feedback from these consultations has not been included in this global synthesis of Nutrition Dialogues. One is a regional survey in Latin America and the Caribbean that involved 11,740 children and young people under 18 years of age from 13 countries. Results indicate that migrant and afro-descendant children are the most vulnerable to food insecurity in the region. Conclusions are included in the World Vision report “Voices of Children” (<https://2623910.fs1.hubspotusercontent-na1.net/hubfs/2623910/voces-de-la-infancia.pdf>). The other two very large Nutrition Dialogues took place in Rwanda in December 2024 as part of a family day of celebration and community sensitization on nutrition and infant feeding practices.

### Dialogue feedback received after December 31<sup>st</sup> 2024

Feedback was received from 16 Nutrition Dialogues<sup>4</sup> after the cut-off date for preparation of this global synthesis. The dialogues took place in Colombia, Dominican Republic, Kenya, India, Lesotho, Malawi, Mozambique and Zimbabwe. Unfortunately, it has not been possible to include them in analyses prepared for this global synthesis.

<sup>4</sup> As of 30 January, 16 feedback forms have been submitted since the 31 December 2024 deadline from Colombia (2), Dominican Republic (3), Kenya (3), India (1), Lesotho (2), Malawi (1), Mozambique (2) and Zimbabwe (2).



## 3.2 Purpose and value of the Dialogues

The Nutrition Dialogues are designed to welcome diverse actors, particularly those directly affected by nutrition challenges, enabling them to speak out openly and be heard without prejudice, to share their experiences, and to collaborate on proposing priorities for action. The dialogues encourage collective thinking and working, and the emergence of propositions that are feasible, adapted to local realities and aligned with cultural contexts. Dialogue convenors document the discussions that take place in each dialogue methodically, prepare standardized feedback and upload it onto the portal. In many instances the feedback includes valuable insights to inform nutrition policies, programs and interventions at local, national, regional and global levels.

The dialogue events are designed as safe and inclusive spaces where all voices are heard, and divergent perspectives can emerge. The method encourages the inclusion and participation of groups often on the margins of decision-making processes, including children, young people and women; smallholder food producers, and small enterprises. They welcome all who care for infants, young children and others with needs. They seek to include a mix of indigenous, settled and displaced people (IDPs) as well as persons with disability.

*"The event was also an opportunity to share personal stories and experiences, which helped humanize the challenges and strengthen empathy among participants. The energy and enthusiasm were palpable, fostering an environment of mutual support and hope. In short, the event was not only informative but also inspiring, motivating everyone to take concrete steps to improve the nutrition and well-being of children in their communities" Dominican Republic, SD, FF 56393<sup>6</sup>*

*"Looking ahead, this dialogue will be crucial in informing strategies for the Nutrition for Growth summit in March 2025. The discussions and outcomes reflect the community's aspirations and serve as a valuable foundation for driving progress in nutrition and health at both the local and national levels." Kenya, SD, FF 55611*

Feedback from 346 dialogues was analyzed. The majority of participants in the dialogues were women and girls. Children and young people accounted for nearly 40% of the total. Many participants came from low-income, rural, and remote areas which tended to have limited access to basic services. In general, dialogue convenors sought to ensure that a broad range of interests was reflected among diverse participants, bringing together people reflecting different age ranges, societal groups, incomes and geographical areas.

*"Many participants questioned why the children's research seemed to contradict government reports. This is where the discussion becomes truly fascinating, as the children's perspective differs from the government's view of the problem. For the children, access to food is a daily struggle, while nutritious food is seen as a luxury that is difficult to obtain." Indonesia, SD, FF 54282*

*"I'm very happy today to know that my voice counts when it comes to children's issues, and I'm now committed to helping to raise parents' awareness of the importance of nutrition. We children are proud that our voices can be heard, and our participation is always needed" Mali, CW, FF 57131*

*"The nutrition dialogues have been an eye-opener [...] The children have raised so many issues that affect their education and lives." Malawi, SD, FF 55856*

Young people played a crucial role in convening dialogues. They took advantage of the opportunity to work for shared understanding and alignment – both at local and global levels, to step up, speak out, take action and be ready to lead. In Mozambique, 21 Children's Workshop and 10 Stakeholder Dialogues at community level were convened by Crianças e Jovens com Visão (Children and Youth with Vision), a youth-led platform that promotes the participation and voice of children and young people.

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<sup>6</sup> All quotes are followed by the name country, with an indication of whether they come from a Children's Workshop (CW) or Stakeholder Dialogue (SD), and the relevant Feedback number.

In Nigeria, the Youth Coordinator of the Scaling Up Nutrition, Civil Society Network convened 54 community level dialogues. He summarised key elements in 12 feedback forms and emphasised that youth participants value knowing that their voices matter.

The dialogues also helped local actors as they sought to connect with national initiatives. They provided opportunities for them to explore how local realities aligned with national policy objectives. In Ecuador, the nutrition dialogues were integrated into the country's national nutrition strategy, which helped ensure that their outcomes could be incorporated into national efforts. Similarly, in Kenya, the dialogues informed the Second Nutrition for Growth (N4G) Kenya Country Consultation Meeting, helping to shape national strategies and link local actions to national and global frameworks for both nutrition and health. In Peru, stakeholder dialogues took place at provincial level as part of a National Consultation (organized by the government and partners) designed to improve functioning of the National School Feeding programme .

### 3.3 Risk Factors and Triggers for malnutrition

The framework used to synthesize dialogue feedback starts from an analysis of participants' perceptions about the factors that increase risks of food and nutrition insecurity, and proceeds to examine the factors that can act rapidly to trigger malnutrition.

#### ***COMPARING FEEDBACK FROM CHILDREN'S WORKSHOPS AND STAKEHOLDER DIALOGUES***

The outcomes reported from both Children Workshop's and Stakeholder Dialogues indicate that perceptions of both the underlying factors and the immediate triggers are similar in each, particularly with regard to economic struggles, local-level unemployment, and instability of agricultural production.

The perceptions are expressed differently.

For example, when adults in Stakeholder Dialogues explain how a lack of resources and infrastructure for the storage of food forces them to sell fresh produce at times when market prices are low,, children (experiencing the consequences of these 'distress' sales firsthand) express their discomfort with this practice, at times questioning their parents' decision to sell early and link the decision to the risk that they are malnourished.

Children's concerns about nourishment are shared with those with whom they interact: at home, at school, and within their communities. They see how cultural norms and practices impact on what people eat.

They take note when their mums prioritize food for their fathers before serving them, they notice which of their friends come to school hungry, and they note when their friends drop out of school to help their parents earn money. Girl children see their friends get married and become hungry in their new households. Many children know the packaged foods they are given at home and at school are not good for them.

In Stakeholder Dialogues, participants emphasise the importance of coordination and governance in reducing risks of hunger and addressing malnutrition.

In the Children's Workshops, participants focus is more on their immediate - and tangible – needs, highlighting actions that are urgently needed. They tend to focus around what happens in the home or school, such as their access to healthy meals in school. They want to be part of improving the nutrition of all by sharing knowledge, increasing awareness, and growing fresh produce in their communities.

Young people want opportunities to learn skills that support the creation of employment and better agricultural production in their localities.

### **NATIONAL AND COMMUNITY LEVEL DIALOGUES**

Dialogues held at National and Community level report the same breadth of factors and triggers for malnutrition, but with a different emphasis. At the community level, there is a clear focus on decreased agricultural production, gaps of nutritional knowledge, and the impact of cultural influences on access to food. Dialogues at the national level acknowledged these factors but tended to focus on the lack of coordination among stakeholders, action across sectors, and the need for policies to evolve.

Urgent actions identified in the national level dialogues included high-level institutional support for nutrition initiatives, backed with budget allocations, and clear roles for key stakeholders including businesses and regulatory bodies. Recommendation from community -level dialogues identify the need to cover gaps in governance, policy and regulations. However, the priorities for urgent action focus on ensuring greater community-leadership, and the inclusive engagement of stakeholders in designing, implementing, and monitoring different local initiatives.

At the national level, 11% of the feedback from dialogues came from Children’s Workshops, whereas at the community level, nearly half (49%) of the dialogues were Children’s Workshops.

### **3.3.1 Factors placing people at risk of food insecurity and malnutrition**

During each dialogue event, participants were encouraged to reflect on the underlying factors that put them, their households, and their communities, at risk of food and nutrition insecurity. They were invited to consider circumstances under which the factors coincide. The factors are identified below starting with those mentioned most frequently.

#### **1. Households lack sufficient cash to ensure food security and nutrition**

- More than 80% of the feedback from dialogues mention economic factors as barriers to good nutrition. Households lack sufficient cash with which to purchase the food needed for children to be nourished: this is usually linked to household members having limited opportunities to have an adequate and stable income.
- Some participants indicate they are aware of the foods that are ‘good’ for them. However, they cannot always afford to purchase what they need. This limits the amounts of nutritious food that is consumed.
- Children describe how the lack of access to healthy and sufficient food impacts their ability to learn and to sustain their education. This hinders their opportunities to earn a stable income in the future.

*“Our friend dropped out of school due to hunger. Most of the food that is harvested in their household is sold at the market leaving the household with little food.” Malawi, CW, FF 55940*

*“Poor households have limited to no income to afford the needed nutritious foods. Households in rural areas only get an income after selling their produce, and it’s once per year as their farming is dependent on rainfed [agriculture].” Zambia, SD, 55194*

*“The children stated that eating the three main meals during the day depended on whether there was money in the household.” Venezuela, CW, FF 55956*

*“Sometimes our parents’ trade-off our education with piece work for food because of hunger and malnutrition.” Malawi, CW, FF 58593*

*“Socially, food insecurity has strained community relationships and forced families to make difficult decisions, such as withdrawing children from school or marrying off young daughters to ensure their survival. All participants reported that they are struggling with food insecurity. They are facing severe shortages of food and lack the money to buy and provide the basic necessities for their families. The participants emphasized the urgent need for comprehensive solutions to address these challenges and improve their overall well-being.”*  
Afghanistan, SD, FF 54811

*“Another critical point recognized by the participants is the extreme poverty experienced by most of the population, which prevents families from acquiring basic foods, highlighting a cycle of food deprivation and economic difficulties.”* Angola, SD, FF 56455

*“Poverty is forcing people to satisfy hunger rather than having a nutritious meal”* Nepal, CW, FF 56044

*“In urban areas income generating activities or jobs are essential because nutritious food, water, waste disposal, etc. is costly.”* Eswatini, SD, FF 55865

*“I think that knowing the nutrients in the food is important, but it is even more important to have the resources to buy the food. It is useless to have this information if we don't have the money to buy this kind of food”.*  
Colombia, SD, FF 58001

*“Children acknowledged that they lose concentration in class when they are hungry”* Ghana, CW, FF 57147

## **2. Households have limited access to water, sanitation and healthcare**

- Feedback from 59% of the dialogues indicates that people's limited access to drinking water, sanitation, and health services impact their nutrition status.
- A lack of water (especially in dry periods) and sanitation mean that personal hygiene is hard to maintain, food prepared at home is at risk of being contaminated, and there is an increased likelihood that household members become unwell with diarrhea and other illnesses.
- This is a particular challenge when water sources are unprotected, sometimes shared with animals, or when household members have to travel long distances to obtain drinking water.
- Lack of access to sanitation at school leads children to minimize their water consumption so they are less likely to need to pee.
- Accessible health care offering prompt and effective treatment is seen as important for enabling children who are ill to recover quickly and have an adequate nutrient intake.
- Mothers request help from health care providers with identifying children that are becoming undernourished and enabling them to benefit quickly from essential nutrition care. This is especially necessary if a child has recurring and/or long-term health challenges and is locked in a vicious cycle of ill health and poor nutrition.
- If a household member is mentally unwell this can adversely affect the nourishment of household members: for example, stress can be associated with either overconsumption or reduced intake.
- Health workers indicate that they are overstretched, facing increasingly heavy workloads which limit their ability to offer effective care to people in remote areas.

*“Children, especially girls, do not drink enough water due to poor toilet facilities and water connections at schools”* Sri Lanka, SD, FF 55082

*“Access to clean water is challenging in most villages, and humans share water sources with domestic animals. As a result, widespread diarrhea occurs, especially in the rainy season, which affects children's health.”* Zambia, SD, FF 55194

*“Youth emphasize that psychological stress and trauma, common among children in marginalized communities, often lead to emotional eating or appetite suppression, further complicating their nutritional well being” Bosnia and Herzegovina, CW, FF 56872*

*“The distance to the main health center is too long and costly and most parents don’t bring their children to clinics, especially parents living in the remote communities.” Papua New Guinea, SD, FF 54237*

*“One said, there’s no health care facility in her village so she had to come all the way to Lafja and the cost of transport is high and that makes her to miss some of her medical appointments” Nigeria, SD, FF 55301*

*“Communities lack access to [...] reliable healthcare services, particularly in rural areas” Pakistan, CW, FF 57033*

### **3. Farming households face particular challenges**

- 53% of dialogue feedback referred to factors that relate to agriculture and food systems.
- If food production in farming households reduces, the risk of undernutrition in household members increases.
- Farmers want to focus on better soil health and diversified production so they can increase the resilience of their households in the face of changing weather, pest infestations and other stresses. To this end they need land, inputs, tools, irrigation infrastructure and knowledge.
- In the face of uncertain rainfall they want to increase opportunities to irrigate their land and to make this possible they seek help with digging boreholes for wells.
- Farmers would value more opportunities for storing produce, keeping it fresh and fit for consumption.
- The lack of robust rural infrastructure is a challenge for farmers. Sometimes they have to travel long distances to purchase agricultural inputs or market their produce, with poor access roads that are often impassible during rainy seasons. Lack of infrastructure can also hinder the ability of people living in remote areas to access the food and water they need at home.
- Land used for construction, mining or commercialised farming is not available for smallholder farmers to rent or buy. These other uses of land may also limit water available for household use or for irrigation. Farmers may become dependent on income from labouring in these commercial operations and face hardship if the earning opportunities suddenly disappear.
- If farmers cannot access more land or the inputs they need, they have to cut back production or leave their homesteads. This increases poverty and further reduces the availability of food in markets.

*“Children are of the view that, most parents and caregivers are interested in using their arable lands for the cultivation of cash crops like cocoa and some used it for only Ginger. They wish that, those parents establish backyard gardens to produce vegetables that will meet their nutritional requirements.” Ghana, CW, FF 55207*

*“All the children agreed that the main cause of hunger in their village is that not enough parents engage in farming. [...] Cassava is grown as a monoculture” DRC, CW, FF 55980*

*“..., the lack of mixed farming practices in the region has reduced access to diverse food sources. Many participants noted that mono-cropping and a focus on cash crops have limited the availability of essential food items like fruits, vegetables, and protein sources” Kenya, SD, FF 55607*

*“Most farmers grow only one type of crop, maize, because the government supports it through the fertilizer support program.” Zambia, SD, FF 55194*

*“There are no markets built according to standards in the area. One has to travel 2 to 3 km to reach a small operational market very early in the morning; if you’re late, you miss out on food to feed the family.” DRC, CW, FF 56136 (translated from French)*

*"Arable land is being sold to foreigners, and they do not allow local people to exploit it [...] the state should impose limits on the amount of land allocated to foreigners, prioritizing its citizens as its primary responsibility."*  
DRC, SD, FF 55982 (translated from French)

*"My father was a farmer, but now we have no land. If we can farm again, we will be able to provide for ourselves."* Afghanistan, CW, FF 55062

*"Agriculture is not being viewed as a viable profession."* Nepal, SD, FF 54348

*"Many people fear or feel ashamed of engaging in agriculture and livestock farming, which could provide them with nutritious food at a low cost."* Mozambique, CW, FF 54693 (translated from Portuguese)

*"The reality is that Mutoshi is a mining area where much more attention is focused on mining activities. Unfortunately, this results in large tracts of land being exploited by mining companies, leaving insufficient space for cultivation. This should be a government priority to make land available for the population to cultivate."*  
DRC, CW, FF 57494 (translated from French)

*"The suspension of activities at Boss Mining, which provided jobs to the population, suddenly left a large portion of the population unemployed. [...] The majority of children attributed the cause of malnutrition to the collapse in activities of the mining company Boss Mining, which provided jobs to the population and supported the community socially (such as providing agricultural inputs to associations)."* DRC, CW, FF 58371 (translated from French)

*Participants discussed a series of challenges, but the key ones included the worry about the effects that the local co mining industry pollutes air and land and may have diverse effects on food production and well as challenges that climate change will bring to food production and consumption.* Bosnia and Herzegovina, CW, FF 56866

*"Illegal mining termed "galamsey" [...] has resulted in the pollution of water bodies and the destruction of farmlands. [...] The destruction of farmlands has resulted in food shortages and hiking food prices"* Ghana, CW, FF 55563

#### **4. Some risky child feeding practices reflect cultural norms**

- Over half of the dialogue feedback (52%) indicated that there had been discussions about how cultural and behavioural factors are placing people at risk of food insecurity and malnutrition. They refer to ways in which some cultural norms increase the challenge of ensuring that women and girls, infants and young children, and people with disabilities are well-nourished.
- Regarding **women and girls**, dialogue feedback indicated that a person's sex may influence the food they are offered. In both urban and rural contexts, restrictions on what women may eat hinder their ability to stay well-nourished.
- Women and girls are expected to give some of their share of the household's food to feed other family members, particularly men and boys. In some contexts, men do not contribute to the feeding or care of their children.

Child marriage and teen pregnancies are common, they are both a result and factor of hunger and malnutrition. **Young mothers** are thought to be at higher risk of being malnourished themselves. They are often seen as being less able to care for their children properly. This stigmatisation of a young mother contributes to her increased vulnerability and her not accessing services.

- More generally, cultural norms and family pressures may influence the ability of women and girls to stay healthy by leading them to restrict their intake and to bear children quickly.

*"Many women feel that sacrificing their own meals is part of their duty when caring for their families. When there are young children in the house, women's nutrition often becomes the lowest priority, especially when managing tight family budgets. Most women reported that they prepare meals based on their husbands' or children's preferences, rather than their own."* Sri Lanka, SD, FF 55082

*"There is a high number of fathers not supporting the pregnant mothers, thus leaving the mothers to fend for themselves" Eswatini, SD, FF 55199*

*"The children, adolescents and young people expressed that one of the problems are the social stereotypes of beauty, many of them suffer from bullying or compare their bodies with models or lifestyles, they subject their bodies to strict diets, causing nutritional problems" Colombia, CW, FF57172*

*"As the dowry system is prevalent in our society, the parents save the money for their girl child's marriage from the moment she is born and neglect her other nutritional and educational needs. This makes the girl weak in her mental and physical abilities." Nepal, SD, FF 55789*

*"I know a friend who got married at a young age to escape hunger, only to find more hunger in that marriage. Eventually, she returned to live with her parents." Malawi, CW, FF 55077*

*"Youth share how [food insecurity] is particularly challenging for girls, such as in Bangladesh, where food scarcity exacerbates the toll of menstruation on their bodies" UK, Multi-country dialogue, CW, FF 54820*

*"Adolescent girls who are usually impregnated by their boyfriends and abandoned with all maternal responsibilities and become themselves malnourished due to limited access to nutritious food, impacting feeding practices such as Exclusive Breastfeeding" Nigeria, SD, FF 55811*

*"[There is a] Lack of youth friendly centres to address knowledge gap and poor feeding practices among pregnant teens" Kenya, SD, FF 55541*

*"Another divergent area was expressions from women leaders for inadequate access to health and nutrition services and lack of policy on compulsory care for adolescent girls who are usually impregnated by their boyfriends and abandoned with all maternal responsibilities left on the young mother who herself is malnourished due to limited access to nutritious food that will enhance infant feeding practices such as (Exclusive Breastfeeding).The traditional leaders shifted blames on the very women who are being victimized and stigmatized due these circumstances, instead of the perpetrators" Liberia, SD, FF55811*

*"Adolescent girls also face unique challenges, including harmful dietary behaviors influenced by societal pressures to maintain certain body images, leaving them vulnerable to iron deficiency, particularly during menstruation" Kenya, SD, FF 55580*

- Dialogue feedback indicated that if the household income is very tight and parents are busy trying to earn vitally needed cash, **infants and young children** are seen to be vulnerable because there is little nutritious food in the home and parents and caregivers have limited time available for childcare.
- Dialogue feedback also suggested that the good nutrition of an infant is dependent on household members knowing about optimal feeding practices and the mother being able to breastfeed. When mothers are unable to breastfeed, due to health or time constraints, infants may not be sufficiently fed or may be subjected to mixed feeding. Dialogue feedback indicated that mothers who are unable to breastfeed wish to access commercially produced breast milk substitutes but cannot afford them.
- Children may feel neglected, abandoned, and inadequately fed if their parents lack time and resources to care for them properly. This is especially the case when one household member is incapacitated or absent due to search of work, divorce, or death, or if there is alcohol or substance abuse.

*"Teenagers generally do not want to breastfeed because they want to maintain their figures and have a perception that breastfeeding opposes that idea, including sagging breasts. The use of formula milk is expensive and unsustainable, thus leading the formula to be made too weak" Eswatini, SD, FF 56643*

*"[There is a] low practice of exclusive breastfeeding because lactating mothers need to have jobs to be able to afford household costs. The mother may produce insufficient breastmilk and relatives like grandparents, insist that the mother starts on complementary feeding sooner." Eswatini, SD, FF 55865*



*"Limited enforcement of the maternity leave which is only limited to 3 months that is perceived inadequate for lactating to nurse their babies for fear of losing their jobs due to the prolonged leave." Uganda, SD, FF 54973*

*"Child labor is also a big problem because some children are withdrawn from school by their parents to help with income-generation activities at home, such as piecework. For those that live with their grandmothers, they are the breadwinners at home. They engage in piecework to fend for themselves and their old grandparents." Zambia, CW, FF 55421*

*"Participants also pointed to [...] child- labour as factors that amplify the issue of undernourishment." Pakistan, CW, FF 57033*

*"Parents and caretakers these days are so busy that they choose packaged and readily available food for their children rather than making nutritious home-cooked food." Nepal, SD, FF 54348*

*"Children stated clearly that there are food insecurities at their homes, especially for those who came from single parents and child-headed homes. According to the children, the causes of malnutrition in their families include parental negligence, as some parents have divorced and refused to support their children." Zambia, CW, FF 55421*

*"One girl-child narrated that when her parents died, she and her siblings were not accepted by the relatives of both their parents. She has since taken up the responsibility of fending for her two siblings. The social welfare department has since identified her, and she is being helped with \$20 after two months to cover for herself and the two siblings. According to her, this is not enough, and as a child-headed family, they have resorted to selling mangoes and mushrooms during the rainy season to survive. " Zambia, CW, FF 55421*

*"When a mother is stressed or suffers from depression, her ability to care for her children properly diminishes, leading to neglect of nutrition." Afghanistan, SD, FF 55056*

- **People living with disabilities** are particularly vulnerable: they may face discrimination and struggle to provide for their families.

*"I have a disabled daughter who needs more attention than we can provide. I have to work outside the home every day, and when I take her to the doctor, he says that for her to recover quickly, she needs proper care and nutritious food. However, we don't even have basic food at home." Afghanistan, SD, FF 54327*

*"Another challenge is the marginalization of boys and people with disabilities in nutrition and health programs. While much attention has been given to maternal health and adolescent girls, boys and families with disabled members often lack targeted support and resources, limiting their access to proper nutrition." Kenya, SD, FF 55580*

*"My husband is disabled and unable to work, so I work outside the home. However, my daily earnings are insufficient to cover our household expenses, leaving my children without enough food." Afghanistan, SD, FF 54327*

- **Indigenous people** face difficulties with accessing traditional foods, maintaining adequate diets and accessing quality healthcare.

*"High percentage of single mothers, which limits families' economic access and makes it difficult to provide adequate food sustenance, increasing malnutrition rates, both for women and children". (Dialogue titled Indigenous Women Perspectives - Ngäbe-Buglé) Panama, SD, FF55151(translated from Spanish,*

*"Urbanization and globalization disrupt traditional food systems, eroding indigenous knowledge and practices." Namibia, SD, FF 56588*

## **5. Insufficient awareness about nutrition and reliance on processed foods**



- Feedback from nearly half of the dialogues (49%) indicated that participants have some awareness about the nutritional value of different foods.
- Dialogue participants describe challenges in the selection of foods, especially when trying to ensure that young children receive a balanced diet. In some cases, participants are not aware of different food groups.
- People who can access fresh foods may not know how to use them to prepare and cook nutritious meals, especially when living in rural areas.
- In practice, choices are influenced by taste and texture, time taken to prepare, and ease of preparation.
- Processed foods that can be prepared rapidly or immediately consumed are increasingly available, even in remote communities. Feedback from several dialogues indicated that processed foods ('fast foods') are often less costly to buy than fresh foods and require much less preparation time.
- Processed foods are becoming the food of choice in households from within all income groups, especially the household income is too low to purchase fresh foods and the time available is insufficient for their preparation and cooking. In other households, processed foods are chosen due to the unavailability or inaccessibility of other healthier options such as fresh produce.
- Participants indicated that the ways in which processed foods are marketed, including through social media, encourage their increased consumption. Some (including children) question whether processed foods can have negative effects on their health.

*"The majority of children interviewed do not understand the concept of eating meals (they are unfamiliar with terms such as breakfast, lunch, and dinner)" DCR, CW, FF 56240*

*"One key issue is poor meal choices, particularly among caregivers and young mothers, who often rely on low-nutrition diets such as meals providing only empty calories. Practices like overfeeding infants to make them appear "healthy" were identified as harmful misconceptions." Kenya, SD, 55580*

*"Lack of education and awareness about nutrition, particularly in remote areas, emerged as a key issue. Some children expressed confusion about nutrition, often equating large quantities of food with sufficient nutrition, without understanding the importance of balanced, nutrient-rich diets." Philippines, CW, FF 58433*

*"Many mothers do not feed colostrum to newborns or practice exclusive breastfeeding. Awareness of healthy daily food habits is minimal." Bangladesh, SD, FF 55093*

*"This highlights a big challenge in the community: while there is knowledge about healthy eating, it's hard to practice due to a lack of locally grown food and other difficulties." Papua New Guinea, CW, FF 54267*

*"Children themselves recognize that those children living in rural areas are the most vulnerable and need more support regarding nutrition knowledge" Angola, CW, FF 56802*

*"Participants shared that there is a lack of knowledge about nutritious food and its preparation within the community. The easy availability of packaged food poses another challenge." Nepal, SD, FF 55793*

*"In our village, we have a lot of vegetables, but many families prefer unhealthy snacks because they don't know how to cook the vegetables properly," Afghanistan CW, FF55068*

*"Children eat unhealthy junk food at schools and unhygienic food from street vendors that can make them sick, unhealthy and malnutrition. Those food are less expensive and easy to access." Myanmar, CW, FF 55546*

*"Social media often contributes to misinformation about healthy eating, causing confusion among participants." Colombia, SD, 57798 (translated from Spanish)*

*"While food may be available, it is often inadequate in terms of nutritional quality. Poverty worsens this issue by limiting families' ability to afford balanced meals, pushing them to rely on low-cost, nutrient-poor options." Philippines, CW, FF 58433*

## 6. Importance of policy consistency and institutional capacities

- More than a third of the dialogue feedback (36%) addressed the inconsistencies between national-level policies and the realities faced by households in their localities.
- Policies and programmes to reduce risks of hunger and malnutrition do not adequately address people's needs.
- Collaboration between sectors (at both national and sub-national levels) and interaction among different stakeholders, is seen to be insufficient.
- Implementation of policies is hampered by inconsistencies in legislation and lack of clear guidelines.
- The view in some settings is that communities should take more responsibility for their nutrition and rely less on action by government or other authorities.

*“Rigidity in budget management, excessive red tape and lack of decentralization limit the efficiency. In addition, there is still a disconnect between the central and municipal levels ... Invisibility of Cultural and Local Factors in policy making: Policies do not sufficiently consider the cultural practices, beliefs and cosmovision of communities, which limits their acceptance and impact” Guatemala, National Level, SD, FF 56464 (translated from Spanish)*

*“Outdated regulatory frameworks, overlapping laws, and inadequate documentation systems as significant barriers to compliance”. Pakistan, National Level, SD, FF 57071*

*“Conflicting legislation impair the implementation of existing dietary guidelines (Mediterranean Diet-based in Portugal). Mounting reliable knowledge has been produced but it is not reflected in food policies”. Portugal, National level, SD, FF 56511*

*“Poor coordination and alignment of state actors’ priorities and lack of synergy among relevant sectors’ initiatives and programs, lead to duplication of interventions and contradicting approaches, thus resulting in ineffectiveness of interventions which continue to produce low impact on the root causes of hunger and malnutrition.” Liberia, SD, FF 55811*

*“The absence of effective integration between the government, civil society, the private sector, and communities hinders the implementation of programs. There is limited interinstitutional communication and a fragmented approach to resource allocation.” Guatemala, SD, FF 56464 (translated from Spanish)*

### 3.3.2 Triggers and trends leading to increased risks of malnutrition

During the dialogues, participants were encouraged to identify factors that suddenly trigger food and nutrition insecurity and may lead to malnutrition. In the following section there are analyses of trends in different trigger factors, which may well combine with each other in specific households.

#### 1. Unpredicted and/or adverse weather events

38% of dialogue feedback describes how unpredictable and/or adverse weather patterns are on the increase and trigger decreases in production and loss of income, reducing households' access to nutritious food. This is especially the case in farming communities where droughts, floods, and landslides, add to the challenges people face. Dialogue participants describe how these developments lead to losses of crops and animals, as well as damage to farmland and to roads. Rising sea levels and

salination of land are growing threats in coastal and riverine areas. These changing weather patterns undermine the resilience of smallholder farmer livelihoods and discourage younger generations from farming as a primary occupation. They also lead to less food being available, which means that consumers pay higher food prices.

*“Climate change is making traditional farming methods in mountainous areas less viable. Extreme weather events such as floods, droughts, and heatwaves have disrupted crop production, leading to food shortages and further exacerbating malnutrition.” Thailand, CW, FF 55271*

*“The rise in saline water levels impacts agricultural production negatively for citizens. Climate change. Food shortages due to flooding and the encroachment of agricultural land by seawater.” Guinea, SD, FF 55373*

*“This part of the country is prone to drought and famines which kills many livestock and destroys farms”  
Somalia, CW, FF 58363*

*“My parents have struggled to provide food for our family. Due to the effects of climate change they only managed to have 2 bags which could take us only 2 months to finish while in the past, we could harvest more than 10 bags and we were food secure” Malawi, CW, FF 56694*

*“When the water is gone and the crops fail, we have no food at home” Afghanistan, CW, FF 55068*

## **2. Exposure to criminality, violent conflict and war**

15% of dialogue feedback refers to violence – due to war, conflict and/or criminal behaviour - as a trigger for food insecurity and malnutrition. If there is violence within a community households may face increased difficulty with ensuring that members are adequately nourished. The risk of being kidnapped, injured, maimed or killed as a result of violence leads to farming households abandoning their homesteads and fields: this triggers a fall in household income and may lead to less nutritious food being accessed.

Migrants and internally displaced people have challenges with finding opportunities to earn a decent regular income: they and their families struggle to maintain food and nutrition security, and to navigate the risks of hunger and malnutrition. In practice they face higher risks of malnutrition compared with others. Their livelihoods often depend on their receiving support from NGOs, local authorities and central government: in practice this dependence may undermine their ability to sustain themselves and their families over time.

Displaced people living in camps are seriously concerned about their physical safety: this is particularly the case for women who are threatened with violence when they seek food, water and sanitation. Communities that host disabled people describe how sometimes they become overcrowded: though they do their best to support those in need who arrive in their communities, the reality is that prices of essentials invariably rise, and they are harder to access, triggering increased risks of hunger and malnutrition.

*Participants expressed the deep interconnection between territorial security and food security. For many of them, forced displacement meant not only the loss of land and housing, but also the dispossession of their traditional farming practices and access to the natural resources essential to their livelihoods ... “The feeling of displacement is different and because you only eat once and a little bit and less. It is not the same. This gives us feelings of sadness, nostalgia, we want to go back to our community”. Colombia, SD, FF 55920 (translated from Spanish)*

*“Entrepreneurs have to pay 'Vacunas' (fines from criminal organisations in the area in order to allow them to unload and sell food) on several occasions, so when it finally reaches the market the price is much higher”  
Colombia, CW, FF 55920 (translated from Spanish)*

*“One of the things that worries me the most is not having a stable job to provide for all my children's needs, I am Venezuelan, and I have to pay rent, groceries, utilities and fares. I want to give my children good nutrition*

*but sometimes I can't buy good grains, fruits and meat. I don't have a Permit for Temporary Protection (PPT) which makes it more difficult for me to get a job". Colombia, SD, FF 58001 (translated from Spanish)*

*"Dependence on relief items makes most of our parents lazy", narrated on girl aged 17 who said "usually there is no enough food at our home because my grandparents are used to receiving relief items, so when they relief items are finished, we mostly sleep without eating" Malawi, CW, FF 56330*

### **3. Rising prices of staple foods and agricultural inputs**

Rising prices of essential foods, and decreased purchasing power of household incomes, are seen as triggers for malnutrition in 6% of dialogue feedback. Participants report that food price inflation can trigger people to eat unhealthy diets with low nutritional content. Higher prices for agricultural inputs, such as seeds and fertilizer, mean that farmers purchase fewer inputs: this leads to lower yields of agricultural produce which can reduce availability of nutritious foods in the community and result in household members being less well nourished.

*"The children highlighted that parents or guardians have been constantly complaining about food prices and have noticed that the amount of food available at home has decreased" Angola, CW, FF 56720*

*"Economic factors, including inflation and widespread economic crises, were also seen as major contributors to food insecurity. These issues lead to higher food prices, making nutritious food inaccessible to large segments of the population." Pakistan, CW, FF 57033*

## **3.4 Actions that are urgently needed**

Feedback from dialogues showed the actions that participants believe are urgently needed to improve food security and nutrition and reduce risks of hunger and malnutrition - especially among women and children. The following section shows the wide range of actions that were identified.

### **1. Raise the income and purchasing power of households**

- The primary need is for household members to have more income earning opportunities, financial stability and autonomy to be able to cope with higher and volatile market prices for nutritious foods. These could be provided through local schemes to generate employment including public works (to improve roads and irrigation) – implemented through the private as well as public sectors. Both children and adults identified the need for fair and reliable remuneration given that prices are increasing. Adults who are employed report that their wages are low and often paid late: this makes it hard to meet basic needs and ensure good nutrition.
- Both adults and young people request vocational training in agriculture, commerce, and traditional crafts such as tailoring, especially in rural areas. The training should focus on modern farming techniques, use of machinery, production of both organic and chemical fertilizers, as well as application, and financial literacy. The training should be accompanied by community saving and credit initiatives. Capacity building for small businesses can also help create opportunities for employment and higher incomes.
- Young people seek help to become successful entrepreneurs through using digital technology. They also suggest that personnel in small and medium enterprises need help to develop their businesses – for example, to improve safety and quality of locally-processed food, and to increase market awareness. Financial support mechanisms for start-up businesses would also contribute to local economic development and employment opportunities.

- Women request dedicated savings groups, skill development for income-generating activities, and support with career development.
- Displaced people need to be able to access job markets in their host communities. This would help reduce dependency on food distribution which can be especially unreliable for people living with disability. In some settings access to employment depends not only on applicants having the necessary training and experience: they may also need to obtain legal permits.
- Both parents and children are keen that children stay in school for long enough to have the skills they need to secure decent work and be able to provide for the future household needs of their own households. Education structures need to meet safety standards and be good enough for schools to be places where children are able to learn.

*“The creation of decent and secure jobs with fair wages for parents to increase household income, especially for essential expenses.” DRC, CW, FF 56136 (translated from French)*

*“Development of local projects generating job opportunities, the community is willing to work in any occupation allowing them to guarantee their livelihood” Mozambique, SD, FF 54440 (translated from Portuguese)*

*“Create job opportunities for youth and women within the village to reduce migration” Sri Lanka, SD, FF 55089*

*“Authorities should consider job creating infrastructure projects, such as repairing of roads or water supply initiatives in the agricultural sector.” Afghanistan, SD, FF 54811*

*“Develop youths empowerment community-based initiatives in both technical and practical skills in food production and agricultural value chain that will create employment opportunities for rural youths and reduce urban migration”. Liberia, SD, FF55811*

*Strengthen the leadership structure of the county council for inclusive representation of civil society with popular and technical knowledge to elevate nutrition priorities at scale; Sensitize local communities to create awareness about the various roles of state actors (Legislators, county administrators), civil society and other interest groups in the formulation of county budgeting process. Liberia, SD, FF55811*

*“At present, most international donors only permit ‘humanitarian’ assistance in Afghanistan, which limits what can be done to build longer-term resilience and economic security. However, participants were clear that there is a need to provide extensive support to at-risk communities through long-term development programmes, including vocational courses and job creation initiatives. Traditional skilled crafts such as tailoring and weaving carpets are a major part of the province’s economic identity.” Afghanistan, SD, FF 54327*

*“Training in small businesses such as tailoring, grocery shops, tea stalls, and handicraft production can also improve livelihoods.” Bangladesh, SD, FF 54273*

*“There is a need for incentives, such as tax reductions and funding for startups, to drive investments nutritious food products and workplace initiatives”. India, National level, SD, FF57824*

*“Need for the government to realign its policies to create opportunities for young people to test and implement innovative technologies in food systems production and to foster homegrown technological advancements.” +*

*“Identify and connect young people working in agri-food systems with relevant government ministries to facilitate better access to data and resources.” Malawi, SD, FF 53729*

*“[Since 2021] many women have lost jobs. Projects targeting women can uplift their spirits and contribute to the economy.” This recognition emphasises the multifaceted impact of job security on family nutrition” Afghanistan, CW, FF 55065*

## **2. Increase the coverage and quality of school meals**

- School meals are considered a key intervention for ensuring that children attend school, are well nourished and learn successfully.
- Dialogue feedback suggests that access to school meals improves children’s nutrition and wellbeing. There was focus on the quality of meals at school: many children describe meals that are irregular, made up mainly of processed foods and lack diversity.
- Children request that meals should be available in schools in both rural and urban areas, accessible to all whatever the household income, and that there is consistency in the frequency and quality of school meals especially within the same district.
- There should be specific attention to areas with high levels of food insecurity.
- The ages of children that benefit from school meals could be adjusted - so they support the nourishment of children under five in daycare and reach students in high schools.
- There was also a proposal for university students to have better access to healthy and affordable foods.
- Requests are made for the local procurement of food for school meals to increase nutritional value, and for adequate funding of school meal programmes with the timely payment of those who provide the meals.
- School authorities should work with school meal providers to ensure that meals are of adequate nutritional quality, diversity and regularity. If suppliers are changed (eg to improve quality), the regularity of school meals should be maintained.
- Children request that they can access sufficient food per meal, and the correct number of meals per day, and that their breaks at school are long enough for them to eat their meals between classes.
- They stress that they prefer to eat meals that are tasty.
- Many suggested that only foods that are considered healthy should be available on school grounds: they should not be able to buy less healthy processed foods.
- Children would like to participate in school gardens, to learn agricultural skills and to be able to produce fresh foods for their school meals programmes.
- Improvements could be implemented through the engagement of communities, local stakeholders, non-governmental organizations and governments.

*“A lot of children are coming from households where there is no food, thereby going to school on an empty stomach. In schools where there is no school feeding program, it means children stay at school without food.”  
Malawi, CW, FF 56353*

*“Remove Mini-Markets from Schools: the removal of mini-markets selling unhealthy snacks and expired food from school areas was suggested to prevent children from accessing poor-quality food.” Mongolia, CW, FF 57729*

*“When they express their dissatisfaction with expired products, too much sugar or food where there is inadequate management of the cold chain, schools change supplier, which means that for a period of time they do not have access to this snack or lunch, and for many children it is the only food they eat during the day”.  
Colombia CW, FF 58638 (translated from Spanish)*

*“Schools should provide healthier food options, including fruits like bananas or apples, as part of their school menus to promote better nutrition” Mongolia, CW, FF 27729*

*“Children [...] recommended implementing and intensifying school feeding programs to ensure that all children, including day scholars and boarders, receive balanced and nutritious meals. They recommended mobilizing resources from communities, local stakeholders, non-governmental organizations and government support to sustain these programs” Zimbabwe, CW, FF 55872*

*“The government should include Junior High Schools in the school feeding program” Ghana, CW, FF 55563*

*"We urge parents and stakeholders to take responsibility for improving and promoting school feeding programmes. Ensuring that all children have access to balanced and healthy meals at school is an integral to fighting malnutrition." CAR, CW, FF 54930 (translated from French)*

*"Create or improve university cafeterias to offer healthy, diverse, and affordable meals. Implement subsidies or reduced prices for students in precarious situations." Benin, SD, FF 57419*

*"The government should establish school feeding programs in areas affected by hunger. This initiative would encourage consistent school attendance as learners are assured of receiving meals, thereby supporting both education and nutrition. Schools should be encouraged to set up school gardens to grow fruits and vegetables. The produce can be consumed by learners or sold to generate funds for purchasing additional food items. This approach promotes sustainability and practical learning on agriculture and nutrition." Malawi, CW, FF55895*

### **3. Ensure conversations and dialogue about nutrition everywhere**

- Nutrition knowledge and awareness can be increased in communities if there is ongoing dialogue about nutrition, supplemented by campaigns to increase public awareness: this encourages local initiatives.
- Nutrition is everyone's business: community health promoters, health service providers, youth leaders, organizers of children's forums, schoolteachers, motherhood action groups, community representatives and faith leaders all have roles to play a role.

#### **What is needed?**

- Massive public information campaigns about nutrition are needed: the information should reach all households through social media, radio, and television. Public information should address cultural beliefs that prohibit certain nutritious foods and increase risks of malnutrition. Nutrition awareness should be included in workforce policies.
- Opportunities to discuss nutrition, through regular information sharing and dialogues, are also requested so that participants can learn better nutritional practices (including appropriate mealtimes, food combinations, balanced diets, age-appropriate foods and dietary diversity).
- There should be opportunities for mothers to know more about maternal and infant nutrition, the significance of the first 1000 days from pregnancy to age 2 and the importance of breastfeeding.
- Nutrition education will lead to changed behavior if devised with and organized by the local community, presented in local languages, and grounded in local realities (this would mean focusing on local foods, and adapting education to needs of those on low incomes).

#### **Peer-to-peer and child-led education**

- Children see themselves as good advocates for better nutrition and diets within their communities and households: they request the necessary knowledge and information to do this.
- Children would like nutrition campaigns to be led by other children, hosted within school facilities, and be accessible to all in their communities. Peer-to-peer campaigns are also recommended for mothers: they should be implemented in ways that encourage trust, support, and learning.

#### **Nutrition education in schools**

- Nutrition education should be included in curricula for school children of all ages with the objective of ensuring that they understand the importance of healthy eating, the significance of different food groups, and the dietary choices that are best for them.

## Practical Education

- There are requests for practical education on how to identify nutritious foods, understand food nutrition labels, and prepare healthy balanced meals with what is available. Advice on safe food preparation and cooking, through demonstrations and classes, is particularly requested by and for mothers. Children also recommend the promotion of cooking and meal planning as a family activity, to encourage the engagement of all family members in the issue of nutrition. The integration of indigenous practices in food selection and preparation was also encouraged.
- There is a need for increased awareness in communities at risk of malnutrition about the harmful consequences of malnutrition in children, and families, and the need to monitor children's health. Parents and caregivers request specific support in the identification of malnourished children and help with how to respond.
- Regular nutrition consultations and assessments are suggested through screenings for children under five years, community-level monitoring and – in some dialogues - regular growth monitoring for all children (not just those under five). This will ensure better collection of nutrition data to support evidence-based decision making.
- A focus on people's basic nutritional needs should be part of all crisis response programmes (including humanitarian assistance).

*"The children also highlighted the importance of increasing awareness about balanced diets and the impact of malnutrition. They wished-for more peer-led campaigns, utilizing school educational facilities and community events to educate people." Zimbabwe, CW, FF 55872*

*"The participants expressed the need to actively involve children and young people in promoting good nutritional practices. They suggested creating nutrition clubs within schools, organizing fun and educational activities focused on nutrition, and encouraging awareness initiatives led by young people within their communities." CAR, CW, FF 54930 (translated from French)*

*"Children believe education on good nutrition to their caregivers will give them information to feed them well. Nutrition education on the nutritional requirements for growth of children needs to be intensified to ensure parents turn away from cultural and religious practices and beliefs that prevent children from taking in the required nutrients they need to grow" Ghana, CW, FF 55207*

*"Grassroots Community Awareness Campaigns: Peer-to-peer learning can be an effective strategy, as mothers often trust the experiences of other mothers. Organizing community workshops and discussion groups can foster an environment of support and education, allowing families to exchange tips and recipes centered on nutrition." Afghanistan, CW, FF 55068*

*"Participants emphasized the need for tailored interventions that address the unique challenges faced by vulnerable populations, including women, children, and marginalized communities. This will require context-specific solutions that respect local cultures and food systems, while also ensuring universal access to affordable, nutritious food." Kenya, SD, FF 55543*

*"Develop and enforce right WFN policies, systems and programs that respond to public service rules and labour laws. Develop WFN programmes implementation templates with options for formal, informal, public, private, urban, and rural contexts, with a minimum non negotiable standard. Create awareness on the significance of good nutrition in the workplace." Nigeria, SD, FF 55969*

*"Churches and other civil society organizations need to help with knowledge dissemination and conduct practical cooking lessons, especially for pregnant and lactating mothers. This will help reduce ignorance regarding the consumption of nutrient-dense foods." Zambia, SD, FF 54950*

*"Training parents on nutrition to address food production, food preparation and choices on food at household level. In general, the participants felt there is need to intensify training of households on food production,*



*preparation and choices. Lessons from indigenous practices were proposed to be adapted for all age groups.”  
Eswatini, SD, FF 55170*

*“Mothers require adequate knowledge of what to eat and how to prepare food for their under-five children. [...] Mothers require cooking demonstrations to learn food preparation skills.” Zambia, SD, FF 54740*

*“[Children] emphasized the need for educational initiatives that teach meal planning, reading nutrition labels, and understanding the food pyramid.” Philippines, CW, FF 55287*

*“Monitor growth: Regularly measure children's height and weight to track their physical health, not just for those under five.” Sri Lanka, CW, FF55467*

*“Regions & Councils to conduct routine assessment of nutrition status rather than depending on 4 year gaps surveys. Enhanced routine monitoring will ensure tackling Malnutrition instantly and hence ensure better results with surveys. It also helps us with evidence based decision making instantly and ending Malnutrition early.” Tanzania, SD, FF 56079*

*“Training caregivers, other faith leaders, and parents using celebrating families' models in nutrition and how to prepare nutritious foods. They will foster strong linkages between households and health facilities to build capacity in skills, including malnutrition identification and treatment using a home-based care system.”  
Zambia, SD, FF 55424*

*“Youth Leadership was emphasized as crucial. Empowering young people to organize workshops and community activities would reach vulnerable populations, particularly mothers and children in rural areas. Collaboration with schools and local institutions could foster peer-to-peer advocacy and hands-on learning.”  
Pakistan, CW, FF 57033*

*“Children can be a powerful tool in advocacy for behavioural change and improved child wellbeing. Regular nutrition dialogues should be conducted and replicated to other rural communities. [...]. It was clear from the dialogues that investing much in these children can also be a great platform to serve the community from these issues of food insecurity, poor feeding practices as well as malnutrition as a whole.” Malawi, CW, FF 55077*

#### **4. Ensure adequate coverage of effective social protection**

- Social protection interventions (including urgent delivery of food assistance, cash transfers, and social safety nets) contribute to the alleviation of malnutrition, but need to be broadened, diversified, and localized.

##### **Improving Effectiveness**

- Social protection should be adapted to the local context (accounting for geographical and cultural variations) and adequately monitored. Digital mapping can help ensure that interventions reach those most in need by helping to identify groups and areas with high nutritional needs (including where access to nutritious food is hampered by infrastructure damage resulting from natural disasters or conflict).

##### **Protecting the systems that enable people's nutrition**

- Protection should be focused on ensuring that vulnerable people receive effective support in a timely manner: this means paying attention to the resilience of the supply chains, infrastructure and logistics on which they depend.
- Protection works best when responding to the combinations of local need and making use of community-driven initiatives (kitchens and food donations) to bring benefits to those with greatest needs. Distribution of locally sourced foods leads to more earning opportunities and better livelihoods.
- Protection initiatives should avoid discrimination in the identification of beneficiaries and be monitored to ensure that beneficiaries are fairly selected and served, reducing their need to pay for what should be available without charge

### Targeted support for women and children

- Women and girls from vulnerable households require targeted support to improve their economic status and integrate community decision-making processes.

### Food banks

- In middle-income countries, food distributors are encouraged to donate products close to their expiration date to food banks. These initiatives support underprivileged families to access food while preventing food waste.

### Special attention

- Groups of **households experiencing criminality, violence, war, and extreme weather events, need special attention:**
  - Community groups living in fragile contexts due to war and displacement request immediate food aid, including fortified foods to meet children's nutritional needs. They also seek income support through targeted cash transfers so they can make food choices adapted to their specific needs and preferences, and access diverse nutritional options.
  - In remote and disaster-prone areas, emergency response mechanisms need to be broadened so they include nutritious foods and cash. Localized contingency plans should be developed to ensure the swift and timely delivery of warnings and resources during emergencies
  - If essential food items are subsidized this can enable low-income households to access and afford nutritious diets.
  - Adults and children request dedicated support in order to reduce levels of criminality, and report it when it happens, accompanied by high-level action to promote peace.

*"The children proposed the need for children to know about nutrition so that they are aware of what they consume and the impact on their growth and development. The children also proposed that the village government help procure nutrition, and also government social assistance, so that there is money to buy nutritious food. The children hope that there will be a program related to nutritional literacy and nutritious food assistance to the CSO." Indonesia, CW, FF 56230*

*"Participants' focus on facilitating market linkages for local food production was rather salutary, as food assistance provided by the UN and INGOs is in large part sourced from outside of Afghanistan. It is a missed opportunity to create positive development impacts through emergency lifesaving assistance." Afghanistan, SD, FF 54327*

*"Avoid discrimination during beneficiary identification" DRC, CW, FF 56070 (translated from French)*

*"For vulnerable groups, the government only experiments. An example is the elderly, who face long lines; the assistance itself is good, but the problem is the delivery." Colombia, SD, FF 55920 (translated from Spanish)*

*"Help During Disasters: Provide healthy emergency food and medical help to families affected by floods, storms, or droughts". Thailand, CW, FF 55271*

*"Raise awareness and sensitize communities on disaster risks and how to mitigate; pass information in time." South Sudan, SD, FF 55583*

*"Social Safety Nets: Expand and strengthen social safety net programs to provide financial assistance to vulnerable populations. Consider innovative and efficient approaches, like a Universal Basic Income [...] which was already piloted very successfully in one part of Namibia but so far not yet implemented at national level. [...] Implement targeted food subsidies for low- income households." Namibia, SD, FF 56588*

*"Actively work toward the establishment of lasting peace. Everyone agrees that if peace is restored in their place of origin, they will regain access to their fields, and malnutrition will automatically be reduced." DRC, SD, FF 55916 (translated from French)*

*"Addressing the root causes of poverty and inequality is critical for creating a more equitable and sustainable society. This involves implementing targeted poverty reduction programs, creating job opportunities, promoting*

*social safety nets, and empowering women and girls to participate fully in community life and decision making.”*  
Indonesia, SD, FF 54282.

## 5. Expand access to water, sanitation and hygiene services

- Access to sufficient safe water enables household members to reduce their exposure to waterborne diseases, to maintain personal hygiene and to wash and prepare produce in a sanitary manner.
- The **proximity of water sources to homes** is emphasized, as it reduces women’s exposure to gender-based violence in insecure areas.
- **Access to safe drinking water** can be improved through the construction, rehabilitation, and maintenance of boreholes, construction of wells, and installation of piped systems.
- **Access to water sources for agriculture and livestock** supports food security and reduces community dependence on external food sources. In areas experiencing a single rainy season or reduced rainfall due to climate change, year-round access to water can ensure multiple harvests. However, the need to ensure that water for agriculture does not endanger the availability of drinking water for people is emphasized.
- The installation of **improved sanitation systems** in schools, daycares, and community centers can support hygiene awareness and disease prevention.
- Suggestions are made to further train teachers and daycare operations to **promote good hygiene practices and apply regulations** maintaining appropriate hygiene and sanitation standards.
- **Refugee camps and informal settlements** have been identified as priority areas for the installation of potable water systems and improved sanitation infrastructure.

*“Make school authorities accountable for having proper sanitation ensured for school meal preparation and serving through the child club’s advocacy.”* Nepal, CW, FF 55791

*“Rehabilitating boreholes was suggested to minimize the time women spend searching for water, thereby reducing the risk of gender-based violence”* Zimbabwe, SD, FF 54938

*“Our school gives school meals to children studying up to grade 5. We have seen those children don’t wash the plates properly, but the school authority does not rewash them and serve food on the same plate the next day.”*  
Nepal, CW, FF55791.

*“The children also emphasized the importance of access to potable water, especially for handwashing as an essential part of good nutrition, and stressed the importance of keeping the body hydrated to ensure the proper distribution of nutrients in the body.”* Angola, CW, FF56802

## 6. Improve access to comprehensive primary health care

- Accessible primary health care that meets the needs of people, including those living in hard-to-reach areas, are essential to ensure the good nutrition and health of communities.
- Across all countries there was a call for **improved access to comprehensive and quality health services**.
- Existing health centres should be rehabilitated and provided with the **necessary equipment** to provide **quality care**.
- For people living in remote, rural areas, **mobile clinics or medical brigades** were recommended.
- Children emphasize that regular access to health professionals could prevent parents from self-medicating their children, which can lead to severe consequences.

- When health workers participated in dialogues, they emphasised the need for developing the capacity of the system to respond to children’s needs with quality patient management and nutrition-specific care. This includes a focus on coverage and accessibility of services especially in rural areas, filling gaps in staff deployment and upgrading of personnel skills.

*“The idea of establishing mobile clinics [...] would bring healthcare professionals directly to villages, providing essential services and education. [...] “Having healthcare professionals come to our villages would change lives,” said a male council head.” Afghanistan, SD, FF 55056*

*“[There is a need for the] recruitment of staff to cover the territory and ensure timely reach out to the population.” Ecuador, CW, FF 55179 (translated from Spanish)*

*“The rehabilitation and equipping of the health center, along with the capacity-building of healthcare staff, will facilitate access to quality services and care, ensuring the proper management of diseases that contribute to poor nutritional status among the population of Tshiyanda.” DRC, SD, FF 55975 (translated from French)*

*“Bring sick children to health centers for proper treatment. In this environment, many parents practice self-medication or use plants to treat their children, often due to a lack of money. They request health workers to conduct awareness sessions to encourage the population to change this harmful behavior, which sometimes leads to the death of children. Additionally, they advocate for the implementation or expansion of health centers that offer affordable medications, making it easier for everyone to receive treatment.” DRC CW, FF 56910 (translated from French)*

- Dialogue participants identify the services expected from health services and providers. These include:
  - Immunization of children, and advocacy to change the resistance of parents towards vaccination;
  - Improved identification and treatment of malnutrition in children, pregnant women and breastfeeding mothers, including the deworming of children;
  - Supplementary food provision for pregnant women, and the provision of food supplements for children, menstruating adolescent girls, and pregnant women, including zinc, iron, folic acid and vitamin A;
  - Distribution of medicine to cure disease;
  - Holistic care focusing on disease and malnutrition prevention;
  - Increased links with communities, for health clinics to serve as a source of knowledge on nutrition, maternal health, and disease prevention;
  - Low cost medical care where hospital fees are high;
  - Family planning services to help families space out and reduce the number of births;
  - Rehabilitation centers and programmes to help children and young people recover from severe acute malnutrition and hunger.

*“Focus Community Health Partitioners’ training on community nutrition, equipping them with the skills to address nutrition challenges holistically rather than solely through clinical approaches.” Kenya, SD, FF 55611*

*“Creating mental health programme for children and young people who have suffered from hunger. [...] The children and young people who are suffering from hunger, should receive special support on mental health, since the consequences they can experience in the future can affect their growth, self-esteem, capacity to learn, concentrate, mood, illnesses, etc.” Brazil, SD, FF 54630*

*“The decisions made includes the starting the Screening of Children under 5years in order to make sure that no malnutrition in children and acquiring rehabilitation where needed (to malnourished children).” Rwanda, SD, FF 56338*

## 7. Ensure food systems that respond to people's needs

- Feedback from dialogues highlight urgent actions related to food systems. Dialogue participants are eager to see an increase in the production and affordability of locally grown food. Farming communities wish to earn sufficient income through agriculture. Children suggest creating school and home gardening initiatives to increase the availability of fresh produce.
- Farming communities request support through the provision of **extension services** including tools, organic and chemical fertilizers, and training in agricultural production.
- **Access to appropriate seeds** is helpful to ensure diversified, nutritious diets and soil fertility.
- Training in **food preservation methods** and the increase in regulations and monitoring for **food safety** can help ensure year-round access to healthy produce.
- Certain communities request financial and legal support to **access land**.
- Consumers, including schoolchildren, request government intervention in the **restriction or prohibition of processed and unhealthy foods**.
- Some dialogues also call for **increased partnerships** between sectors to address economic barriers to nutrition access, some suggesting regulatory mechanisms to stabilize food prices.

*“They [farmers] need access to resources such as small loans to invest in their yields and diversify crop production. The extra resources will also enable farmers to expand their farms and run them as businesses. This will increase income generation, allowing them to afford nutritious foods.” Zambia, SD, FF 55194*

*“This highlights a big challenge in the community: while there is knowledge about healthy eating, it’s hard to practice due to a lack of locally grown food and other difficulties. Families need more support to grow a variety of crops and understand how important it is for their health.” Papua New Guinea, CW, FF 54267*

*“Farmers need to learn food preservation methods. This will allow them to store food for a longer time than usual. Currently, most farmers complain of losing their harvest due to chemicals used to treat their produce” Zambia, SD, FF 56929*

*“People don't understand what a balanced diet means or what crops they should grow to ensure food security at home. The lead farmers prioritize only crops that have market value. Improving literacy in rural communities is necessary if the fight against malnutrition is to be won.” Zambia, SD, FF 56929*

*“There is a need for crop diversification beyond the traditional crops known and grown every season.” Zambia, SD, FF 55424*

*“Encouraging small-scale, sustainable agricultural practices and supporting local food systems can increase food availability and reduce dependency on imports.” Bangladesh, CW, FF 55096*

*“I want the government through the Ministry of health to strongly regulate the consumption of junk food by giving penalties to those that fail to follow regulations on food fortification and poor information of the contents.” Zambia, CW, FF 54839*

*“The government should intervene to prohibit the premature sale of farm products and ensure households retain food stocks after harvest.” DRC, SD, FF 56019 (translated from French)*

*“Avail improved seeds and chemical fertilizers on time: this should be done by the State. Soil erosion control by drawing contour lines, fighting bush fires and planting anti-erosion hedges: by the State and community members.” Burundi, SD, FF 56926*

## 8. Ensure functioning infrastructure

- Dialogue participants mention the need for **quality infrastructure** to house schools and health clinics. The provision of quality education infrastructure that meets safety standards is necessary if students are to have the right conditions for learning.
- Mechanized **irrigation systems** and secure **food storage facilities** can ensure food production and availability year-round.
- Access to **electricity** enables digital literacy and the use of digital tools can increase the reach of nutritional education, access to weather data for agriculture and the development of entrepreneurial projects.
- Water and sanitation services must be provided closer to homes to ensure their safe access.
- Good quality and well-maintained **roads** and **market** structures facilitate the smooth transportation of goods and services. This can lead to stabilized availability and affordability of food.
- The need for infrastructure is particularly salient in **refugee camps and informal settlements**.

*“Construct roads to facilitate smooth transportation of goods and services, which would stabilize the prices of various products (both agricultural and manufactured). Build markets in our communities to ensure food availability and accessibility.” DRC, CW, FF 56506 (translated from French)*

*“... Integrating digital technology into education curricula is critical to ensuring that young people begin learning about and adopting these tools at an early age [...] Expanding internet infrastructure to rural areas will also play a significant role in ensuring equitable access for all.” Malawi, SD, FF53729*

*“Participants flagged that school feeding programmes could help ensure parents do not prevent their children from attending school. At present, there is reluctance from donors to invest in the education infrastructure around primary education, but warm facilities linked to the provision of school meals – and perhaps also kitchen gardening by schools – could be a catalyst of positive change.” Afghanistan, SD, FF 54327*

## 9. Enhance people-centred governance, policy and accountability

- **Stakeholders and sectors need to be able to collaborate effectively** if efforts to encourage people’s food security and nutrition are to succeed. This calls for a **whole-of-government approach** to food systems and nutrition with strong connections between local authorities and national government. Given the variety of perspectives held by different stakeholders, dialogue-based processes can be especially helpful in creating the conditions for collaborative working.
- At sub-national level, dialogue participants call for **closer collaboration** among stakeholders to address malnutrition across sectors and administrative levels:
  - Communities express a desire for greater consultation including community leaders, local authorities, health professionals, youth, farmers, and other community members in designing and implementing nutrition initiatives.
  - Strengthening stakeholder capacity at local level in financial management can support their engagement in initiatives.
  - Young people ask to be involved in programme monitoring to influence policy and programme changes.
- At the national level, participants stress the need to:
  - Improve inter-institutional coordination and synergize government programs implementation.
  - Decentralize resources and incorporate results-based monitoring with standardized indicators.
  - Ensure nutrition policymaking is based on scientific evidence, and it is designed to avoid the politicization of social programmes.

- Establish or use existing multisectoral platforms to integrate efforts across government, civil society, and the private sector.
- Dialogue feedback at all levels emphasizes the urgent need to increase budget allocations to nutrition programs. Public-private partnerships can leverage private sector resources to complement government efforts.
- Policies should be simplified, localized, and disseminated in local languages to improve accessibility and implementation. Training for local implementers is seen as critical to ensuring effective policy application.
- Enforcing regulations, particularly in local food production, is vital for ensuring food safety and quality.
- Systems are needed to track nutrition expenditures at the local government level to ensure effective resource use. Multisectoral nutrition information systems are recommended to enhance data coordination and decision-making.

*"The group highlighted that food security is a multidimensional challenge that requires the collaboration of various actors. Education, economic support and cultural adaptation are key pieces to overcome current barriers and ensure adequate nutrition for all families" Colombia, SD, D320, FF 57798*

*Importance of local administration: "especially in facilitating coordination between sectors during implementation at both the governorate and directorate levels" "Strengthened capabilities of local and national actors and systems to coordinate, manage resources, implement, monitor, evaluate and capture learning." Yemen, SD, FF55706*

*Poor Dissemination of Policies. Simplify and localize policies: Translate complex policies into user-friendly materials in local languages for broader understanding. Strengthen communication channels: Use mass media, social media, and community outreach to share policies widely. Train implementers: Build the capacity of county and sub-county staff to understand and apply policies effectively. Kenya, SD, FF56955*

*"Regions & Councils to conduct routine assessment of nutrition status rather than depending on 4 year gaps surveys. Enhanced routine monitoring will ensure tackling Malnutrition instantly and hence ensure better results with surveys. It also helps us with evidence-based decision making instantly and ending Malnutrition early. All stakeholders including WV should assist with availability of equipment and technical support in their catchment areas." Tanzania, SD, D84, FF 56079*

*"This dialogue highlights the importance of a multisectoral approach to improving children's nutrition in this challenging context. Interventions that combine humanitarian aid, nutrition awareness, access to quality food, and improvements in basic infrastructure (water and sanitation) are essential to address immediate needs and build a more resilient future for affected communities." Burkina Faso, CW, 58177*

*"On one hand, some children proposed short-term solutions, such as providing immediate access to healthy food for disadvantaged families, emphasizing the urgency of addressing basic food needs. On the other hand, several participants favored long-term approaches, including supporting local farmers by improving access to water and providing modern tools, believing this would help increase food production in the community." Mauritania, CW, 57796*

*"Establish partnerships with schools, NGOs, and local authorities to create integrated programs addressing nutrition, health, and well-being. Engage local governments for system changes" Bosnia and Herzegovina, CW, FF56872*

*"Promote solidarity among the population (children with access to food should support malnourished children, families with food resources should assist the poorest, along with support from organizations like World Vision)" Burkina Faso, CW, FF58181*

*"Many businesses view nutrition initiatives as optional or limited to specific programs like child health, requiring a shift in perception to consider nutrition as a strategic investment rather than social initiative... One way to integrate is through Environmental Social, and Governance (ESG) Implementation: this is not happening "due to unclear reporting guidelines and the need for sector-specific standard". India, SD, FF 57824*

*“Invest in grassroots innovation and research, tailoring technology to each community’s context. Ensure access to affordable data and digital literacy programmes for rural and urban populations to empower communities in finding their own solutions.” UK, CW, FF54820*

*“Strengthen the leadership structure of the county council for inclusive representation of civil society with popular and technical knowledge to elevate nutrition priorities at scale; Sensitize local communities to create awareness about the various roles of state actors (Legislators, county administrators), civil society and other interest groups in the formulation of county budgeting process” Liberia, SD, FF55811*

*“A framework for principled private sector engagement should emphasize a corporate responsibility that aligns with public-interest goals. The finance sector should be better engaged in explorations of how investors can better engage too.” Switzerland, SD, FF 55472*

### **AREAS OF DIVERGENCE EXPRESSED WITHIN DIALOGUE DISCUSSIONS**

#### **Divergence around factors and triggers for malnutrition and hunger:**

- Divergent views on the need for better access to family planning: Some see large families as a burden leading to economic and food insecurity, while others argue that more children increase both the wellbeing and productivity of a household.
- Divergent views on religious beliefs and cultural norms around what is eaten by women and children: Some participants noted that certain nutritious foods or medical interventions may be prohibited for religious and cultural reasons. Others condemned such restrictions when they increase risks of malnutrition.

#### **Divergence around the responsibility for action:**

- Divergent views on the roles of government authorities and NGOs: Some expect government and/or NGOs to enable people to access healthy and accessible food environments. Others see the community as responsible for enabling all to access what is needed and encourage households to work towards being self-reliant with regard to food security, and nutrition
- Divergent views on the responsibility of parents for their children’s nutrition: some take the view that both parents and other caregivers have major roles in contributing to the feeding and nutrition of children. Others see it as the mother’s duty to ensure that each child is well fed and nourished. Some emphasized that women should not engage in income generation activities. Not everyone agreed with this position.



## 4 Implications for the design and implementation of actions for nutrition

This section presents the implications of this synthesis for the design and implementation of initiatives that will enable improvements in people's nutrition. These implications are based on what is within the feedback forms and could usefully be taken into account in the design and implementation of policies and programmes for food security and nutrition, and for preventing malnutrition.

*The synthesis suggests that action to reduce people's nutritional insecurity and risk of malnutrition should focus on the groups with greatest risk, specifically:*

- **Women and children, everywhere, especially those from less-advantaged backgrounds.**
- **Households with low incomes that have little resilience in the face of** bad weather, conflict, an outbreak of disease, or failing markets.
- **People displaced** by bad weather, violence and disasters,
- **Places where risk factors** combine leading to people facing greatly increased threats.

*The synthesis suggests that everyone should be enabled to contribute, so:*

- **Encourage open and ongoing conversations** where people most at risk can connect with duty bearers, identify barriers, discuss and explore options, optimise their knowledge, and make a meaningful contribution.
- **Listen to Women, Children and Young People** who know what works best for them and their communities; invest generously in hearing their views and involve them in adapting actions to context.
- **Hear the perspectives of smallholder farmers and small and medium enterprises (formal and informal) who** are severely affected by climate change, violence and higher cost of living.
- **Take account of how people's realities limit the choices they can make:** low and irregular income, illnesses, time shortages, and cultural restrictions, as well as several contextual barriers, can limit an individual's ability to be well-nourished especially when times are difficult.
- **Remember that people want to access healthy food but cannot** because they lack both cash and time to obtain what they need: they are influenced by marketing, especially on social media, and often go for low-cost, accessible processed foods that can be prepared easily and cheaply.
- **Ensure everyone can access the essentials they need for life** including functioning water, sanitation, healthcare, education, and social protection services: encourage children to stay in school through enabling access to good-quality educational facilities and school meals that use locally sourced food.

*The synthesis encourages everyone to engage widely for comprehensive efforts with big impact:*

- **Always involve communities**, especially young people, in co-designing, implementing, monitoring and evaluating action for nutrition in ways that build local capacities and respond to people's specific needs.
- **Engage a wide range of stakeholders** in creating opportunities for all with an interest to engage in nutrition actions – including elected representatives and officials from local and national governments, farmers and businesses, educators, health workers, faith actors and representatives of civil society: ensure that women, young people, indigenous persons and disabled people are involved throughout.
- **Adopt a whole-of-government approach** by identifying and integrating nutrition priorities across multiple sectors rather than limiting actions in one sector alone: encourage prompt prevention and coordinated action that are adapted to local realities.
- **Establish inclusive governance and accountability** through enabling all stakeholders (especially women and young people) to be involved in monitoring progress and demonstrating outcomes: support their participation when decisions are made about policy and implementation.

## ANNEX – Feedback from Dialogues considered in the Synthesis

This annex lists 346 Feedback from the Nutrition Dialogues included in the synthesis by Feedback Number, Type of Dialogue, Country, and Title in its original language of publication.

FF: Refers to Feedback Form number.

Type of Dialogue: refers to Children’s Workshop (CW) or Stakeholder Dialogue (SD).

FF	Dialogue Type	Country	Title in the original language published
54327	SD	Afghanistan	<a href="#">A Nutrition Dialogue for Badghis</a>
54811	SD	Afghanistan	<a href="#">A Nutrition Dialogue for Faryab</a>
55059	CW	Afghanistan	<a href="#">A Children's Nutrition Dialogue for Badghis</a>
55062	CW	Afghanistan	<a href="#">A Children's Nutrition Dialogue for Faryab</a>
55053	SD	Afghanistan	<a href="#">A Nutrition Dialogue for Ghor</a>
55056	SD	Afghanistan	<a href="#">A Nutrition Dialogue for Herat</a>
55065	CW	Afghanistan	<a href="#">A Children's Nutrition Dialogue for Ghor</a>
55068	CW	Afghanistan	<a href="#">A Children's Nutrition Dialogue for Herat</a>
56455	SD	Angola	<a href="#">Learning &amp; Reflecting about Nutrition</a>
56815	CW	Angola	<a href="#">Learning &amp; Reflecting about Nutrition</a>
57301	SD	Angola	<a href="#">Learning &amp; Reflecting about Nutrition</a>
56802	CW	Angola	<a href="#">Learning &amp; Reflecting about Nutrition</a>
56718	CW	Angola	<a href="#">Learning &amp; Reflecting about Nutrition</a>
56720	SD	Angola	<a href="#">Learning &amp; Reflecting about Nutrition</a>
56722	SD	Angola	<a href="#">Learning &amp; Reflecting about Nutrition</a>
56650	SD	Angola	<a href="#">Learning &amp; Reflecting about Nutrition</a>
54270	CW	Bangladesh	<a href="#">Khulna/Barishal Children’s Workshop</a>
54273	SD	Bangladesh	<a href="#">Gaibanda /Rangpur Stakeholder Dialogues</a>
55096	CW	Bangladesh	<a href="#">Children's Workshop at Tongi, Dhaka Urban Context, Dhaka, Bangladesh</a>

55093	SD	Bangladesh	<a href="#">Stakeholders Dialogue Rowangchory, Bandarban Fragile context</a>
57419	SD	Benin	<a href="#">Etudiant et insécurité alimentaire: Quel impact sur leur quotidien?</a>
56872	CW	Bosnia and Herzegovina	<a href="#">Discussing nutrition with CAY from Kalesija community</a>
56866	CW	Bosnia and Herzegovina	<a href="#">Discussing nutrition with CAY from Banovici community</a>
55279	CW	Brazil	<a href="#">Brazilian perspectives on nutrition</a>
54630	SD	Brazil	<a href="#">Amplificando las voces de los niños y niñas digitalmente</a>
58177	CW	Burkina Faso	<a href="#">Burkina Faso: A Boromo, World Vision Consulte les enfants sur la nutrition</a>
58181	CW	Burkina Faso	<a href="#">World Vision au Burkina amplifie les voix des enfants à travers des dialogues sur la nutrition</a>
56926	SD	Burundi	<a href="#">Nutrition dialogue with children</a>
57026	SD	Burundi	<a href="#">A nutrition dialogue with stakeholders in Muramvya province, Burundi</a>
57053	SD	Burundi	<a href="#">Nutrition challenges amidst hope for improvement</a>
57101	SD	Burundi	<a href="#">Challenges facing the nutrition sector in Burundi</a>
54930	CW	Central African Republic	<a href="#">Forum sur la Nutrition : Écoutons la Voix des Enfants</a>
57275	SD	Colombia	<a href="#">Nutricion en Accion</a>
57172	CW	Colombia	<a href="#">Nutricion En Accion</a>
57511	CW	Colombia	<a href="#">NUTRICIÓN AL DÍA</a>
58001	SD	Colombia	<a href="#">Dialogos de nutrición en comunidad</a>
57999	CW	Colombia	<a href="#">Voces de la niñez sobre la nutrición</a>
57533	CW	Colombia	<a href="#">Diálogos de Nutrición taller con niños, niñas y adolescentes de Piedecuesta</a>
55920	SD	Colombia	<a href="#">Debates a la mesa</a>
55929	CW	Colombia	<a href="#">Nutri a la Acción</a>
55932	SD	Colombia	<a href="#">Saberes en Nutrición</a>
55527	CW	Colombia	<a href="#">Hablemos de nutrición con niñas y niños en el Barrio Las Flores</a>
57798	SD	Colombia	<a href="#">Nutrición Más Allá de las Fronteras</a>
55923	CW	Colombia	<a href="#">Nutrisonrisa</a>
56224	CW	Colombia	<a href="#">Hablemos de nutrición con niñas y niños en el barrio Villa Selene</a>
58638	CW	Colombia	<a href="#">Aprendiendo sobre alimentación saludable</a>
55712	SD	Democratic Republic of Congo (DRC)	<a href="#">Nutrition Dialogue for stakeholders in the Ngandu AP, Kinshasa Cluster</a>
55716	CW	Democratic Republic of Congo (DRC)	<a href="#">Nutrition Dialogue "Let's give space to our children to express their views"</a>

55897	SD	Democratic Republic of Congo (DRC)	<a href="#">Réflexion sur la problématique de la faim et de la malnutrition dans la communauté de Kintanu</a>
56240	CW	Democratic Republic of Congo (DRC)	<a href="#">Habitudes alimentaires dans la famille</a>
55984	SD	Democratic Republic of Congo (DRC)	<a href="#">Dialogue avec les enfants de Tshinaweji : exprimer la réalité de la Faim et de la malnutrition</a>
55977	CW	Democratic Republic of Congo (DRC)	<a href="#">Echo des enfants de l'AP Kisantu Sur la faim et la malnutrition</a>
55975	SD	Democratic Republic of Congo (DRC)	<a href="#">La pratique d'une monoculture contribue à la malnutrition à Tshiyanda</a>
55954	SD	Democratic Republic of Congo (DRC)	<a href="#">Dialogue sur la nutrition avec les membres de la communauté de Lualaba</a>
55980	CW	Democratic Republic of Congo (DRC)	<a href="#">Forum sur la nutrition : la voix des enfants</a>
56430	SD	Democratic Republic of Congo (DRC)	<a href="#">Comment répondre à la faim et la malnutrition à Kisunka/Likasi?</a>
56571	CW	Democratic Republic of Congo (DRC)	<a href="#">Comment les enfants détermine ce que c'est "Etre bien nourri"</a>
56580	SD	Democratic Republic of Congo (DRC)	<a href="#">Les maternités rapprochées sont aussi à la base de la malnutrition des enfants</a>
56124	SD	Democratic Republic of Congo (DRC)	<a href="#">Les Habitudes alimentaires dans la famille</a>
55908	SD	Democratic Republic of Congo (DRC)	<a href="#">Reflexion sur la problématique de la faim et la malnutrition dans la communauté de Kisantu</a>
56703	SD	Democratic Republic of Congo (DRC)	<a href="#">Dialogue avec les menages et autres couches de la communauté</a>
55988	SD	Democratic Republic of Congo (DRC)	<a href="#">point de vu de parents sur la nutrition a Kenge</a>
56090	CW	Democratic Republic of Congo (DRC)	<a href="#">PARLONS AVEC LES ENFANTS DU QUARTIER CINQUANTENAIRE LA PERIPHERIE DE GEMENA</a>
56539	CW	Democratic Republic of Congo (DRC)	<a href="#">Dialogue Nutritionnel, Les Enfants de l'Aire de santé FERME s'expriment sur la malnutrition et la faim</a>
56088	SD	Democratic Republic of Congo (DRC)	<a href="#">IE COMITE DU BIEN ETRE DES ENFANTS S'EXPRIME</a>
56710	CW	Democratic Republic of Congo (DRC)	<a href="#">LES ENFANTS DE PONT KWANGO S'EXPRIMENT LIBREMENT SUR LA MALNUTRITION ET LA FAIM</a>
56019	SD	Democratic Republic of Congo (DRC)	<a href="#">Echo de l'EQUIPE Centre Traitement Mpox</a>
56705	CW	Democratic Republic of Congo (DRC)	<a href="#">Le point de vue des enfants de kikula par rapport a la nutrition</a>
56838	CW	Democratic Republic of Congo (DRC)	<a href="#">La MALNUTRITION dans le contexte de MOKALI</a>
56910	CW	Democratic Republic of Congo (DRC)	<a href="#">Les enfants de MALUKU face a la MALNUTRITION</a>
56716	SD	Democratic Republic of Congo (DRC)	<a href="#">Comment réduire la malnutrition chez les femmes enceintes et allaitantes dans l'AP SIMBA</a>
56094	SD	Democratic Republic of Congo (DRC)	<a href="#">les membres du club de lecture se prononcent sur la situation de nutrition dialogue</a>

56813	SD	Democratic Republic of Congo (DRC)	<a href="#">L'impact de la faim dans le contexte de Mokali</a>
56092	SD	Democratic Republic of Congo (DRC)	<a href="#">LES REPRESENTANTS DES RELAIS COMMUNAUTAIRES DE &amp;&amp; AIRES DE SANTE DE LA ZONE DE SANTE DE GEMENA SONT AUSSI ECOUTES</a>
56136	CW	Democratic Republic of Congo (DRC)	<a href="#">Les Enfants de Libenge Moke s'expriment sur la malnutrition et la faim</a>
56888	SD	Democratic Republic of Congo (DRC)	<a href="#">FAIM dans la communaute de MALUKU</a>
56134	SD	Democratic Republic of Congo (DRC)	<a href="#">ECOUTONS LA PERCEPTION DE LA MALNUTRITION DES ADULTES DU QUARTIER CINQUANTENAIRE LA PERIPHERIE DE GEMENA</a>
56072	SD	Democratic Republic of Congo (DRC)	<a href="#">Dialogue Nutritionnel avec les membres de la communautés des déplacés de Lushagala extension Goma RDC</a>
56060	SD	Democratic Republic of Congo (DRC)	<a href="#">Dialogue Nutritionnel avec les responsables communautaires de Nyamukubi en territoire de Kalehe</a>
56159	SD	Democratic Republic of Congo (DRC)	<a href="#">Dialogue Nutritionnel avec les leaders religieux de la ville de Beni en RDC</a>
56426	SD	Democratic Republic of Congo (DRC)	<a href="#">Dialogue Nutritionnel avec quelques leaders communautaires de ILEBO au Kasai en RDC</a>
56890	SD	Democratic Republic of Congo (DRC)	<a href="#">La Malnutrition, une Réalité cruelle à Fungurume une entité pourtant riche en minerais</a>
56408	SD	Democratic Republic of Congo (DRC)	<a href="#">Dialogue nutritionnel avec quelques membres de la communauté du territoire de Mweka en RDC</a>
55982	SD	Democratic Republic of Congo (DRC)	<a href="#">Dialogue sur la nutrition leaders locaux de Mutoshi</a>
56506	CW	Democratic Republic of Congo (DRC)	<a href="#">Plus on écoute les enfants de l'Aire de Santé Notre Dame, plus on découvre la réalité sur la malnutrition</a>
56486	SD	Democratic Republic of Congo (DRC)	<a href="#">LES ENFANTS DE GEMENA 3 NE SONT PAS RESTES EN MARGE SUR LA PERCEPTION DE LA MALNUTRITION ET DE LA FAIM DANS LEUR COMMUNAUTE</a>
55916	SD	Democratic Republic of Congo (DRC)	<a href="#">Dialogue nutritionnel au centre de santé de Buhimba à Goma RDC</a>
55918	SD	Democratic Republic of Congo (DRC)	<a href="#">Dialogue nutritionnel au Centre de Santé de KANYARUCHINYA , territoire de Nyiragongo RDC</a>
56471	SD	Democratic Republic of Congo (DRC)	<a href="#">LES ADULTES DE GEMENA 3 NE SONT PAS RESTES EN MARGE POUR LE DIALOGUE SUR LA NUTRITION</a>
55925	SD	Democratic Republic of Congo (DRC)	<a href="#">Dialogue nutritionnel au site de déplacés de Munigi au Nord Kivu en RDC</a>
56068	CW	Democratic Republic of Congo (DRC)	<a href="#">Dialogue nutritionnel avec les enfants du Village BUSHUSHU en territoire de Kalehe</a>
57589	SD	Democratic Republic of Congo (DRC)	<a href="#">Les défis de la faim, la malnutrition et la sécurité alimentaire dans une zone de crise humanitaire</a>

57598	SD	Democratic Republic of Congo (DRC)	<a href="#">Les femmes s'expriment sur les problèmes de la faim, la malnutrition et la sécurité alimentaire dans une zone de crise humanitaire</a>
56070	CW	Democratic Republic of Congo (DRC)	<a href="#">Dialogue nutritionnel avec les enfants du Site des Déplacés de Lushagala extension Goma Nord Kivu</a>
55944	CW	Democratic Republic of Congo (DRC)	<a href="#">Dialogue nutritionnel avec les enfants de Bulengo en RDC</a>
57494	CW	Democratic Republic of Congo (DRC)	<a href="#">Malnutrition à Mutoshi: Les Enfants s'expriment</a>
56403	SD	Democratic Republic of Congo (DRC)	<a href="#">Dialogue Nutritionnel avec quelques leaders communautaires de la ville de Kananga en RDC</a>
56406	CW	Democratic Republic of Congo (DRC)	<a href="#">Dialogue nutritionnel avec quelques enfants du territoire de Mweka en RDC</a>
56424	CW	Democratic Republic of Congo (DRC)	<a href="#">Dialogue Nutritionnel avec les enfants de Ilebo Centre au Kasai en RDC</a>
55786	SD	Democratic Republic of Congo (DRC)	<a href="#">Dialogue nutritionnel avec les déplacés internes au camp de 8eme CEPAC Mugunga au Nord-Kivu</a>
55869	CW	Democratic Republic of Congo (DRC)	<a href="#">La Voix des enfants compte</a>
56537	CW	Democratic Republic of Congo (DRC)	<a href="#">LES ENFANTS DE NGBANDALA PARTICIPENT AU DIALOGUE NUTRITIONNEL</a>
57859	CW	Democratic Republic of Congo (DRC)	<a href="#">Que pensent les enfants de Fungurume en rapport avec la nutrition.</a>
56514	SD	Democratic Republic of Congo (DRC)	<a href="#">DIALOGUONS AVEC LES PARENTS A NGBANDALA SUR LA NUTRITION DES ENFANTS</a>
56533	SD	Democratic Republic of Congo (DRC)	<a href="#">LES MAMANS ET LES PAPAS DES QUARTIERS SUKIA ET NZAMBE NGOY SE PRONONCENT SUR LA MALNUTRITION &amp; LA FAIM DANS L'AS NOTRE DAME</a>
55942	SD	Democratic Republic of Congo (DRC)	<a href="#">Dialogue Nutritionnel avec la communauté de Bulengo / Goma en RDC</a>
56155	CW	Democratic Republic of Congo (DRC)	<a href="#">Dialogue Nutritionnel avec les enfants de la ville de Beni</a>
56401	CW	Democratic Republic of Congo (DRC)	<a href="#">Dialogue Nutritionnel avec les élèves de l'école primaire Nkombo de Kananga au Kasai Central en RDC</a>
58158	CW	Democratic Republic of Congo (DRC)	<a href="#">Dialogue sur la Nutrition avec les élèves du Collège Saint BERNARD de Kananga en RDC</a>
57915	SD	Democratic Republic of Congo (DRC)	<a href="#">Malnutrition: Les femmes de Malambwe s'expriment!</a>
58142	SD	Democratic Republic of Congo (DRC)	<a href="#">Dialogue sur la Nutrition avec les parents des élèves du Collège Saint Bernard de la zone de santé de Tshikaji dans la ville de Kananga en RDC</a>
57913	CW	Democratic Republic of Congo (DRC)	<a href="#">Malnutrition: Les jeunes de Malambwe s'expriment!</a>
57917	SD	Democratic Republic of Congo (DRC)	<a href="#">Malnutrition: La communauté de Luwovowshi s'exprime!</a>
57906	SD	Democratic Republic of Congo (DRC)	<a href="#">Malnutrition: Les leaders religieux de Malambwe s'expriment!</a>
58371	CW	Democratic Republic of Congo (DRC)	<a href="#">Dialogue Nutritionnel avec les enfants de KAKAND en RDC</a>
55910	CW	Democratic Republic of Congo (DRC)	<a href="#">Echo des enfants de Kintanu sur la malnutrition</a>

56138	SD	Dominican Republic	<a href="#">Visión de las organizaciones basadas en la fe y en la comunidad sobre temas de nutrición.</a>
56768	SD	Dominican Republic	<a href="#">Conversatorio sobre la nutrición</a>
56393	SD	Dominican Republic	<a href="#">Diálogos de nutrición campaña SUFICIENTE</a>
56189	SD	Dominican Republic	<a href="#">Revoluciona tu vida con pequeños cambios en tu plato</a>
55177	CW	Ecuador	<a href="#">Diálogos de nutrición "Prevenimos la Desnutrición Crónica Infantil junto a jóvenes"</a>
54626	SD	Ecuador	<a href="#">Dialogo de Nutrición para la Prevención de la Desnutrición Crónica Infantil</a>
55179	CW	Ecuador	<a href="#">Dialogos de nutrición</a>
55641	SD	Ecuador	<a href="#">Diálogo de nutrición "Prevenimos la Desnutrición Crónica Infantil junto a actores locales" -Portoviejo</a>
55170	SD	Eswatini	<a href="#">Dissecting Nutrition Issues for Children with Community Health workers</a>
55199	SD	Eswatini	<a href="#">Stakeholder Dialogue with Community Health Workers</a>
56028	SD	Eswatini	<a href="#">Stakeholder Dialogue with adolescents/children</a>
55865	SD	Eswatini	<a href="#">Unmasking the hidden contributors of malnutrition in the community</a>
56237	CW	Eswatini	<a href="#">Children consultation workshop on hunger and malnutrition in Maseyisini, Eswatini</a>
56643	SD	Eswatini	<a href="#">Nutrition conversations with mothers in the community</a>
56284	CW	Eswatini	<a href="#">Deliberation on hunger and malnutrition and its effects on children's and adolescents in Somntongo, Eswatini</a>
56313	CW	Eswatini	<a href="#">Adolescents' Indaba on hunger and malnutrition in the urban areas of Malkerns in Eswatini</a>
55295	CW	Ethiopia	<a href="#">School Feeding is an Important Contributor to Addressing Child Hunger and Malnutrition</a>
55317	CW	Ghana	<a href="#">ENOUGH Nutrition Dialogue with Children</a>
55207	CW	Ghana	<a href="#">A time with children</a>
55529	SD	Ghana	<a href="#">National Policy Dialogue on Hunger and Malnutrition</a>
55324	CW	Ghana	<a href="#">Children's Perspective on malnutrition</a>
55563	CW	Ghana	<a href="#">Nutrition engagement with children</a>
55880	CW	Ghana	<a href="#">Focused Group Dialogue with Children on Nutrition</a>
57147	CW	Ghana	<a href="#">Child-led nutrition dialogue</a>
57233	CW	Ghana	<a href="#">The Voices of Children on Nutrition</a>
56464	SD	Guatemala	<a href="#">Diálogos por la nutrición y la primera infancia</a>



55373	SD	Guinea	<a href="#">Campagne d'écoute sur la nutrition à Mèlégni, Sous- préfecture de Maferinyah, District de Kaback</a>
57824	SD	India	<a href="#">Roundtable Discussion on Nourishing Responsible Business Practices : Committed to healthier diets for all</a>
54282	SD	Indonesia	<a href="#">Adolescents situation regarding health, nutrition, stunting issues, and child marriage</a>
54952	SD	Indonesia	<a href="#">The Kingdom of God and Hunger: Realizing God's Vision of Justice and Social Compassion</a>
56230	CW	Indonesia	<a href="#">Obstacles and enablers to children's intake of nutritious foods</a>
54345	SD	Ireland	<a href="#">NOURISHING Communities: What are we missing?</a>
54664	SD	Kenya	<a href="#">Baringo and Elgeyo Marakwet Counties' Nutrition Situation Review Forum</a>
55543	SD	Kenya	<a href="#">Youth Leaders for Nutrition</a>
55580	SD	Kenya	<a href="#">The Nutrition Nexus: Connecting people, Ideas, and solutions</a>
55541	SD	Kenya	<a href="#">CVA on Nutrition Advocacy</a>
55622	SD	Kenya	<a href="#">The Nutrition Nexus: Connecting people, ideas, and solutions</a>
55607	SD	Kenya	<a href="#">The Nutrition Nexus: Connecting people, ideas, and solutions</a>
55611	SD	Kenya	<a href="#">The Nutrition Nexus: Connecting people, ideas, and solutions</a>
56367	SD	Kenya	<a href="#">Healthy Plates, Bright futures: The school feeding Revolution</a>
55469	SD	Kenya	<a href="#">Faith community Nutrition Dialogues</a>
54970	CW	Kenya	<a href="#">World Vision East Africa Region Children's Advisory Group meeting</a>
56953	SD	Kenya	<a href="#">Farmers' Input on Nutrition</a>
56955	SD	Kenya	<a href="#">Nutrition as conceived by Women Groups</a>
55113	SD	Kenya	<a href="#">National roundtable dialogue -- Towards Nutrition for Growth Summit 2025</a>
58116	SD	Kenya	<a href="#">Kenya Country Consultation Meeting - Towards Nutrition for Growth (N4G) Commitments</a>
56332	SD	Lesotho	<a href="#">Nutrition dialogues with Faith Leaders</a>
57340	SD	Lesotho	<a href="#">Village Health Workers</a>
58167	SD	Lesotho	<a href="#">Community and local government authorities</a>
58365	SD	Lesotho	<a href="#">Sunday school teachers and faith leaders in Mokotjomela AP, MPHAMO cluster</a>
58402	SD	Lesotho	<a href="#">Understanding Nutrition, Food insecurity and Malnutrition</a>
58436	SD	Lesotho	<a href="#">Crafts and agriculture producers</a>

55811	SD	Liberia	<a href="#">Dialogue on county budget financing for Liberian Nutrition Costed Plan</a>
53729	SD	Malawi	<a href="#">Youth Digital Pathways in Agri-Food Systems: Leveraging Technology for Agricultural and Nutritional Transformation in Malawi</a>
55077	CW	Malawi	<a href="#">Empowering Children's Voices in Nutrition; Building Healthier Communities</a>
55856	SD	Malawi	<a href="#">Empowering local communities: Effective actions to address child hunger and malnutrition</a>
55858	CW	Malawi	<a href="#">Empowering Children Voices in nutrition: Building Healthier communities</a>
55895	CW	Malawi	<a href="#">Children in Khukhi village speak out on the issues affecting their nutrition</a>
55900	SD	Malawi	<a href="#">The Role of Faith leaders in fighting child hunger and malnutrition</a>
55946	CW	Malawi	<a href="#">Contribution of School meals towards Nutrition and Academic Performance.</a>
56840	CW	Malawi	<a href="#">"Children in Mayani, Dedza voices out on how hunger is affecting them, calling for action from key players"</a>
56330	CW	Malawi	<a href="#">"How hunger affects learners' education"</a>
56833	CW	Malawi	<a href="#">Lipimbi Children's Parliament Nutrition Dialogue</a>
55115	SD	Malawi	<a href="#">ACCELERATING SUSTAINABLE AND INCLUSIVE FOOD SYSTEMS FOR ALL: A call for improved coordination and Collective Responsibility!</a>
56357	CW	Malawi	<a href="#">ü All children have a right to nutritious food and essential health care</a>
56167	CW	Malawi	<a href="#">Children's voices on having ENOUGH Food in Kasangadzi Area Program</a>
56490	CW	Malawi	<a href="#">Nourishing young minds: A conversation with Children with disabilities</a>
56509	SD	Malawi	<a href="#">A food secure household: A dialogue with caregivers of children with disabilities</a>
56353	CW	Malawi	<a href="#">What it means to the children in having ENOUGH nutritious food in Rusa Area Program, Mchinji</a>
56359	SD	Malawi	<a href="#">ü Who needs to be involved to ensure good nutrition for all in our community?</a>
55952	CW	Malawi	<a href="#">Ending Hunger Together - A collaborative effort towards ending malnutrition</a>
56694	CW	Malawi	<a href="#">Children voices on nutrition and child hunger in Nanda GVH</a>
56846	CW	Malawi	<a href="#">Empowering children to share their voices on nutrition and child hunger in Kapeta GVH</a>
56696	SD	Malawi	<a href="#">Voice of community stakeholders in child hunger and malnutrition</a>
56766	CW	Malawi	<a href="#">Children voices on hunger and malnutrition matters</a>
56146	CW	Malawi	<a href="#">Healthy Futures: Growing Strong with Nutrition and Care in Kasangadzi</a>
55940	CW	Malawi	<a href="#">Ending Hunger, Nourishing Futures</a>

56218	CW	Malawi	<a href="#">Every Child's Right to Enough and Nutritious Food in TA Chulu Area, Kasungu</a>
56150	CW	Malawi	<a href="#">Effects of hunger and malnutrition on education of children in Neno District</a>
56440	CW	Malawi	<a href="#">Having ENOUGH: What it means for us children to have Enough Nutritious Food at Chankhanga Pirmary School, TA Kapondo, Mchinji, Malawi</a>
58299	CW	Malawi	<a href="#">Ensuring a nutritious and healthier society in Sanga AP, Nkhatabay, Malawi</a>
58294	CW	Malawi	<a href="#">The voice of Children in having ENOUGH food in Njakwa, Mzimba, Malawi</a>
56165	CW	Malawi	<a href="#">Children's voice on nutrition and child hunger in the Kameme Area</a>
56648	CW	Malawi	<a href="#">Children's voices on Nutrition and Child hunger in the Lupembe Area, Karonga, Malawi</a>
58547	CW	Malawi	<a href="#">A call to action on nutrition in Kande Kachere, Nkhatabay Malawi</a>
58563	CW	Malawi	<a href="#">Sanga children gather to discuss issues regarding nutrition</a>
56363	CW	Malawi	<a href="#">Having ENOUGH: A step towards a nutritious generation in Kapeni, Ntcheu Malawi</a>
56677	CW	Malawi	<a href="#">Chisuwe Primary School Children's voices on nutrition in Kasungu, Malawi</a>
58593	CW	Malawi	<a href="#">ENOUGH Nutritious food in Mpandadzi, Mwanza, Malawi</a>
56034	SD	Malawi	<a href="#">Fueling Futures Together: A Stakeholder Dialogue on Nutrition and Well-being in Mchinji, Malawi</a>
56169	SD	Malawi	<a href="#">What it takes to have ENOUGH and nutritious food for every child at Chakhaza, Dowa</a>
56220	SD	Malawi	<a href="#">What it takes to have ENOUGH and nutritious food for every child</a>
57131	CW	Mali	<a href="#">Nutrition Dialogues Children's Workshops of World Vision Internationa Mali</a>
57126	SD	Mali	<a href="#">Dialogue on Nutrition with Mali's SUN CSOs</a>
57868	SD	Mali	<a href="#">Dialogue sur la Nutrition atelier avec les Association Feminine du Cluster de Diago</a>
57898	SD	Mali	<a href="#">Dialogue sur la Nutrition atelier avec les agents de la sante</a>
57796	CW	Mauritania	<a href="#">Les Voix Jeunes pour une Meilleure Alimentation</a>
57368	SD	Mexico	<a href="#">Voces de la Infancia: Explorando el derecho a la alimentación y los efectos del cambio climático desde la perspectiva de niñas, niños y adolescentes en América Latina y el Caribe</a>
57729	CW	Mongolia	<a href="#">"Nutrition" children workshop</a>
58106	CW	Mongolia	<a href="#">"Nutrition" Children workshop</a>
54364	CW	Mozambique	<a href="#">MOZAMBIQUE, Maputo Nutrition Session Takes Over!</a>
54381	SD	Mozambique	<a href="#">Mozambique , Province of Tete, Angónia DsitRICT, Nutrition Dialogues Take Over</a>
54410	CW	Mozambique	<a href="#">Mozambique, Escola Secundária Força do Povo , Nutrition Dialgues kick OFF!</a>

54417	CW	Mozambique	<a href="#">Mozambique, Nutrition dialogues begin in schools as a key to human development</a>
54371	CW	Mozambique	<a href="#">MOZAMBIQUE, Nampula Province, Memba District, Nutrition Dialogues takes Over</a>
54432	CW	Mozambique	<a href="#">Guija District, Gaza Province in Mozambique Assumes dialogues on nutrition as the key to development</a>
54395	CW	Mozambique	<a href="#">Nutrition Dialogues, District of Guijá takes place in Mozambique</a>
54440	SD	Mozambique	<a href="#">Men and women concerned about the nutritional status of children and young people in the Guijá district of Mozambique</a>
54434	CW	Mozambique	<a href="#">Angónia District, Nutrition Dialogues take Place at Tete Province</a>
54399	SD	Mozambique	<a href="#">Nutrition, a step towards human development in the district of Guijá in Gaza Province, in Mozambique</a>
54491	CW	Mozambique	<a href="#">Cazuzu, Murrupula, takes part in nutrition dialogues</a>
54487	CW	Mozambique	<a href="#">Nutrition dialogues take over Murrupula district in Nampula Province, in Mozambique</a>
54361	CW	Mozambique	<a href="#">MOZAMBIQUE, Tete Province, Nutrition session take Over</a>
54601	SD	Mozambique	<a href="#">Mozambique, Nampula Province, Memba District, Nutrition Dialogues</a>
54425	CW	Mozambique	<a href="#">MOZAMBIQUE, Mutarara District, TAKES OVER NUTRITION DIALOGUES</a>
54693	CW	Mozambique	<a href="#">Lyvinga School hosts nutrition dialogue, Mozambique</a>
54662	CW	Mozambique	<a href="#">Santa Isabel Workshop Kick Off!</a>
54642	CW	Mozambique	<a href="#">Nampula, Memba Workshop</a>
54646	CW	Mozambique	<a href="#">Mozambique, Monapo Child Workshop about Nutrition Dialogues</a>
54675	CW	Mozambique	<a href="#">Ndaula Take off with the Nutrition Dialogues at the north of Mozambique</a>
54862	CW	Mozambique	<a href="#">1st Session of Nutrition Dialogue in Mozambique</a>
54356	SD	Mozambique	<a href="#">Nutrition Dialogues Mozambique take over</a>
54672	SD	Mozambique	<a href="#">Tete Province , district of Angónia take off with the Nutrition Dialogues</a>
54660	CW	Mozambique	<a href="#">Início dos Diálogos sobre Nutrição de Maputo</a>
54656	SD	Mozambique	<a href="#">Nampula, Murrupula dsistrict, first Induction to Nutrition Dialogues. Mozambique!</a>
54608	SD	Mozambique	<a href="#">Monapo District takes over on Nutrition Dialogues, Mozambique!</a>
54650	SD	Mozambique	<a href="#">Mozambique, Memba workshop, nutrition dialogues take over</a>
54654	SD	Mozambique	<a href="#">Mozambique, Murrupula district nutrition session take over!</a>
54392	CW	Mozambique	<a href="#">Mozambique, Nampula -Monapo District, Nutrition Dialogue September takes Over!</a>
54670	CW	Mozambique	<a href="#">Santa Isabel Nutrition 2024 Take off!</a>

54678	CW	Mozambique	<a href="#">Mozambique take of with the Nutrition Dialogues Sessions</a>
54632	SD	Myanmar	<a href="#">Faith leaders' opinion on Myanmar nutrition status</a>
55181	SD	Myanmar	<a href="#">Better Nutrition for children</a>
56636	SD	Myanmar	<a href="#">Teachers' View on children's nutrition</a>
56641	SD	Myanmar	<a href="#">Better Nutrition, Better Future</a>
55184	SD	Myanmar	<a href="#">Working together towards better nutrition for Children</a>
55546	CW	Myanmar	<a href="#">Better nutrition, Better future.</a>
56588	SD	Namibia	<a href="#">Nutrition Challenges &amp; Solutions in Namibia's Rural South (Hoachanas)</a>
56607	SD	Namibia	<a href="#">Tackling Serious Malnutrition Challenges in Namibia's Omaheke Region</a>
55160	SD	Namibia	<a href="#">Comming Together for Better Nutrition in Central Namibia (Otjozondjupa Region)</a>
53890	CW	Nepal	<a href="#">Children Workshop on Nutrition - Tikapur Municipality, Sudurpaschim Province, Nepal</a>
54348	SD	Nepal	<a href="#">Ensuring good nutrition in our community</a>
56044	CW	Nepal	<a href="#">Children's Workshop on Nutrition</a>
55791	CW	Nepal	<a href="#">Children's Workshop to Strengthen Nutrition among Children</a>
55789	SD	Nepal	<a href="#">Ekdara Unites for Nutrition</a>
57029	SD	Nepal	<a href="#">Stakeholder's Dialogue on Nutrition</a>
55793	SD	Nepal	<a href="#">Provincial Nutrition and Food Security Steering Committee Meeting</a>
55204	SD	Nigeria	<a href="#">Malnutrition and young people: Our vulnerabilities and solutions</a>
55201	SD	Nigeria	<a href="#">Youth and Food Insecurity: How does it affect us?</a>
55241	SD	Nigeria	<a href="#">Voices of Tomorrow: Young people Solutions to Hunger and Malnutrition</a>
55243	SD	Nigeria	<a href="#">Addressing the Effects of Malnutrition on Pregnant Women and Newborns; solutions for a Healthier Future</a>
55245	SD	Nigeria	<a href="#">Tackling the adverse effects of malnutrition in the society</a>
55292	SD	Nigeria	<a href="#">Exclusive breastfeeding</a>
55301	SD	Nigeria	<a href="#">Important of Exclusive Breastfeeding to Health and wellness of Babies</a>
55446	SD	Nigeria	<a href="#">ACCELERATING ACTIONS FOR GOOD NUTRITION THROUGH THE REVIVAL OF FORGOTTEN FOODS</a>
55172	SD	Nigeria	<a href="#">Community led initiative to alleviate hunger among almajiri children</a>
55969	SD	Nigeria	<a href="#">Workforce Nutrition and Large-Scale Food Fortification: A Synergistic Approach to Combating Malnutrition in Nigeria</a>

55972	SD	Nigeria	<a href="#">Addressing Malnutrition among children</a>
58488	SD	Nigeria	<a href="#">Community Dialogue on Addressing Poverty and Malnutrition Among Adolescents in Sabon Layi, Yelwa Community, Bauchi State</a>
57033	CW	Pakistan	<a href="#">Little Leaders, Big Impact: Shaping the Future of Global Nutrition</a>
57071	SD	Pakistan	<a href="#">Partnering for Healthier Food Systems: SMEs and Punjab Food Regulator in Focus</a>
54945	SD	Panama	<a href="#">Perspectivas desde Agronegocios hacia la Nutrición</a>
55151	SD	Panama	<a href="#">Perspectivas de la Mujer Indígena Panameña - Ngäbe-Buglé</a>
54237	SD	Papua New Guinea	<a href="#">Middle Fly District-Western Province</a>
54267	CW	Papua New Guinea	<a href="#">Nutrition Club Children's workshop</a>
54989	SD	Peru	<a href="#">Diálogo y Consulta Nacional sobre Seguridad Alimentaria en las escuelas del Perú entre las organizaciones de niñas, niños y adolescentes y representantes del Programa Nacional de Alimentación Escolar Qali Warma</a>
55746	SD	Peru	<a href="#">Acciones de doble propósito para enfrentar la doble carga de malnutrición</a>
55753	SD	Peru	<a href="#">Presentación de Resultados de la Consulta de Seguridad Alimentaria en las Escuelas en Cusco</a>
55738	CW	Peru	<a href="#">Taller sobre Hábitos de Alimentación saludable con las niñas, niños y adolescentes con el Programa de Alimentación Escolar Qali Warma</a>
55763	CW	Peru	<a href="#">Taller con niñas, niños y adolescentes sobre propuestas para Mejorar la Seguridad Alimentaria en la Escuela</a>
55287	CW	Philippines	<a href="#">Youth-led Local Nutrition Dialogues “Makabatang Usapang Nutrisyon Para Sa Lahat: Sapat at Dapat!”</a>
55237	CW	Philippines	<a href="#">Children's Consultations on Child Hunger and Malnutrition - Luzon</a>
58433	CW	Philippines	<a href="#">Children's Consultations on Child Hunger and Malnutrition - Mindanao</a>
58468	CW	Philippines	<a href="#">Children's Consultations on Child Hunger and Malnutrition - Visayas</a>
56511	SD	Portugal	<a href="#">Food and Tourism Nexus, challenges and opportunities</a>
55511	SD	Rwanda	<a href="#">Partnership meeting between Caritas Byumba &amp; WVR Buranga Cluster on Nutrition interventions Fy25</a>
55509	SD	Rwanda	<a href="#">Caritas Byumba/WVR-Akagera cluster: In Quarterly meeting with Community Health Workers, they are more explained about assessing and planing households counselling in family's children aged 0-23 months in fighting against malnutrition.</a>

56338	SD	Rwanda	<a href="#">Quarterly meeting with Community Health Workers to assess and plan households counselling in family's children aged 0-23 months in Kiramuruzi Sector will contribute to fighting against malnutrition</a>
56413	SD	Rwanda	<a href="#">Community Health Workers of Katabagemu, Akagera cluster are now able to assess and plan households counselling in family's children aged 0-23 months in targeting fighting against malnutrition</a>
56421	SD	Rwanda	<a href="#">Matimba, WVR-AKAGERA cluster: Quarterly meeting with CHWs to assess and plan households counselling in family's children aged 0-23 months will surely contribute to fighting against malnutrition amongst children</a>
55601	SD	Rwanda	<a href="#">Buranga cluster, Buberuka AP: Community Health Workers quarterly meeting helped participants to know quality data in Growth monitoring, Community sensitization on PDH Menu and hygiene even about home visit in household of Children rehabilitated.</a>
55603	SD	Rwanda	<a href="#">"Lets fight against malnutrition to 0 malnutrition in our community". This was addressed in the community sensitization about infant feeding practices held at Matimba, WVR- AKagera cluster during the day of family day celebration.</a>
56017	SD	Rwanda	<a href="#">"Child protection and their nourishment in fighting against malnutrition should be essential in our every communities" this was reminded in community sensitization to family couples and participants in celebration of a family day at Bungwe Parish.</a>
56021	SD	Rwanda	<a href="#">The contribution of livestock/domestic animals in fighting against malnutrition.</a>
57259	SD	Somalia	<a href="#">Enhancing community Nutrition in Puntland State of Somalia</a>
57281	SD	Somalia	<a href="#">Empowering Community Nutrition with Faith Leaders and Female Farmers</a>
58394	CW	Somalia	<a href="#">VOICES OF THE FUTURE: CHILDREN'S IDEAS FOR BETTER NUTRITION IN SOMALIA</a>
58363	CW	Somalia	<a href="#">The Impact of Proper Nutrition on Health and Well-Being</a>
55583	SD	South Sudan	<a href="#">Role of the Church leaders and faith-Based organizations in ending child hunger and Malnutrition</a>
55504	CW	Sri Lanka	<a href="#">Nutrition Dialogue with Children in Watawala Area Programme, Sri Lanka</a>
55467	CW	Sri Lanka	<a href="#">Nutrition Dialogue with Children in Wattala, Sri Lanka</a>
55493	CW	Sri Lanka	<a href="#">Nutrition Dialogue with Children in Rideegama Area Programme, Sri Lanka</a>
55496	CW	Sri Lanka	<a href="#">Nutrition Dialogue with Children in Chavakacheri Area Programme, Sri Lanka</a>
55498	CW	Sri Lanka	<a href="#">Nutrition Dialogue with Children in Neluwa Area Programme, Sri Lanka</a>
54997	SD	Sri Lanka	<a href="#">Stakeholders Dialogue-Wattala Area Programme, Sri Lanka</a>

55079	SD	Sri Lanka	<a href="#">Stakeholder Dialogue-Bibile Area Programme, Sri Lanka</a>
55082	SD	Sri Lanka	<a href="#">Stakeholder Dialogue- Watawala Area Programme- Sri Lanka</a>
55085	SD	Sri Lanka	<a href="#">Stakeholder Dialogue- Chavakachcheri Area Programme, Sri Lanka</a>
55087	SD	Sri Lanka	<a href="#">Stakeholder Dialogue-Kalpitiya Area Programme- Sri Lanka</a>
55089	SD	Sri Lanka	<a href="#">Stakeholder Dialogue- Vakarai Area Programme- Sri Lanka</a>
54545	SD	Switzerland	<a href="#">Until all are fed, Faith community dialogue on hunger and nutrition in Geneva</a>
55472	SD	Switzerland	<a href="#">Nutrition Dialogue with International Geneva</a>
56096	CW	United Republic of Tanzania	<a href="#">Children's Voices on School Meal</a>
56079	SD	United Republic of Tanzania	<a href="#">Nutritional Dialogue on most urgent and powerful ways to improve nutrition for all and World Vision Tanzania Enough Campaign contribution</a>
57826	SD	United Republic of Tanzania	<a href="#">Technical dialogue for improvement in implementation of nutrition policy in Tanzania</a>
55271	CW	Thailand	<a href="#">Young Minds, Real Talk: Nutrition, Health, and What They Really Care About</a>
54973	SD	Uganda	<a href="#">Closing the Nutrition Gap in Uganda: Implementing Workforce Nutrition Programme</a>
54820	CW	United Kingdom of GB & NI	<a href="#">World Vision UK Youth Advocacy Network Workshop</a>
55867	SD	United Kingdom of GB & NI	<a href="#">Nutrition at the heart of international development</a>
55956	CW	Venezuela	<a href="#">Diálogo con niñas y niños sobre Nutrición</a>
54824	SD	Viet Nam	<a href="#">A joining plan to close the gap in nutrition between the mountainous and urban areas in Vietnam</a>
55706	SD	Yemen	<a href="#">Promoting MEAL Mechanisms in Yemen as a Protracted Crisis Setting</a>
54740	SD	Zambia	<a href="#">The Role of SMAGSs and Neighborhood Health Committees in promoting the consumption of locally produced nutrient dense foods.</a>
54839	CW	Zambia	<a href="#">Children's View of Nutrition in School, Day and Boarding</a>
54950	SD	Zambia	<a href="#">Impact-plus Youths Involvement in Nutrition at Community Level.</a>
55194	SD	Zambia	<a href="#">Lead Farmers View of Nutrition at Household and Community Levels.</a>
55330	SD	Zambia	<a href="#">Savings For Transformation Groups commitment to all children under five years of age having access to the nourishment they need</a>
55421	CW	Zambia	<a href="#">Children's Councils and Young Journalist Committed to Improve School Meals in the Next Three Years</a>
55424	SD	Zambia	<a href="#">Volunteers and Caregivers Want to Take Action to End Malnutrition for Children under Five Years in the next Three Years</a>



56052	SD	Zambia	<a href="#">Faith and Traditional Leaders Collaborate to End Malnutrition in Mungwi District of Northern Province in Zambia</a>
55887	SD	Zambia	<a href="#">Community Health Worker, Breastfeeding and Expecting Mothers collaborate to end malnutrition in the next three years</a>
56295	SD	Zambia	<a href="#">Marketeers and Small Enterprises Collaborate with Community to Improve Nutrition in Nyimba District of Eastern Province.</a>
56634	SD	Zambia	<a href="#">Traditional and Faith Leaders roles in improving Nutrition in Nyimba District.</a>
56830	SD	Zambia	<a href="#">Impact-plus Children, Traditional and Faith Leaders Discuss and put Together Strategies to Improve Nutrition in The Community in Nyimba District.</a>
56929	SD	Zambia	<a href="#">Citizen Voice and Action Group, Lead Farmers and Agriculture People's Implementation Unit Collaborate to Improve Nutrition in Nyimba District</a>
54408	CW	Zimbabwe	<a href="#">Children's Voices against Hunger and Malnutrition</a>
54938	SD	Zimbabwe	<a href="#">Pregnant and Lactating rural women share their thoughts about nutrition.</a>
55352	SD	Zimbabwe	<a href="#">Translating Nutrition for Growth Commitments in Action: An immediate call to Action in Zimbabwe.</a>
55861	CW	Zimbabwe	<a href="#">Rusambo Children Speaks on Hunger and Malnutrition.</a>
55872	CW	Zimbabwe	<a href="#">Child to Child Dialogues on Hunger and Malnutrition</a>