



Nutrition Dialogues: Global Synthesis Summary

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The initiating partners recognise the work of all Nutrition Dialogue convenors in organising dialogues, as well as those who supported them, often in challenging and resource-limited contexts.

To ensure the safe and ethical participation of children, parents, caregivers, and other adults when sharing their experiences and perceptions, all workshops and dialogues were conducted in line with the Nutrition Dialogues Child Safeguarding Framework, Principles of Engagement, and safeguarding protocols. Informed consent was received for all photos in this report.

For further information about this publication, please contact: info@nutritiondialogues.org

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1. INTRODUCTION

The World Vision International and 4SD Foundation 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, participants have opportunities to explore challenges faced by people who experience food insecurity and are at risk of malnutrition. Anyone can organise a dialogue. There are two formats they can use - Children's Workshops (for children and young people aged 12 to 18) and Stakeholder Dialogues (for adults). Dialogues have taken place at local, national, and regional levels.



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 summarises 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 presents 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 prioritise 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 instructions for the use of a standardised form where Convenors provide the feedback gathered from the dialogues they organise. 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](#) and upload completed feedback forms soon after the dialogue has taken place. The completed feedback forms are publicly available on the portal.

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 organisations, 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 disabilities (even if they are not normally included in such processes). Stakeholder Dialogues 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 formats are designed for those who take part to explore local nutrition challenges and identify practical, context-specific actions.



Each **Children's Workshop** is intended for children and young people aged 12 to 18. 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.

2.2 DATA ANALYSIS METHOD

Convenors received guidance on how to provide feedback from their dialogues through completing and submitting feedback forms on the Nutrition Dialogues portal. All feedback forms that were uploaded to the portal by 31 December 2024 were translated into English. Quantitative information on participants' demographics was extracted and then compiled. Qualitative information was coded and entered into a structured extractor 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 from the feedback forms were clustered around each theme; together they help to establish the narratives for this synthesis.

The framework of analysis that was used in preparing this synthesis is adapted from the UNICEF Conceptual Framework on Maternal and Child Nutrition,¹ which includes a focus on the following key elements:

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

¹UNICEF (2021). *UNICEF Conceptual Framework on Maternal and Child Nutrition*.
<https://www.unicef.org/documents/conceptual-framework-nutrition>



3. GLOBAL SYNTHESIS

3.1 PARTICIPANTS IN NUTRITION DIALOGUES

This synthesis is based on analysis of feedback from 346 Nutrition Dialogues (197 [57%] were Stakeholder Dialogues and 149 [43%] were Children's Workshops) that took place in 54 countries within 2024. The dialogues were conducted at different levels, with 80% taking place locally - 59% within communities and 21% at the district level. Nine per cent took place at the provincial level, while 8% were at the national level. Three per cent of the dialogues involved people from more than one country.

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



Geographic focus

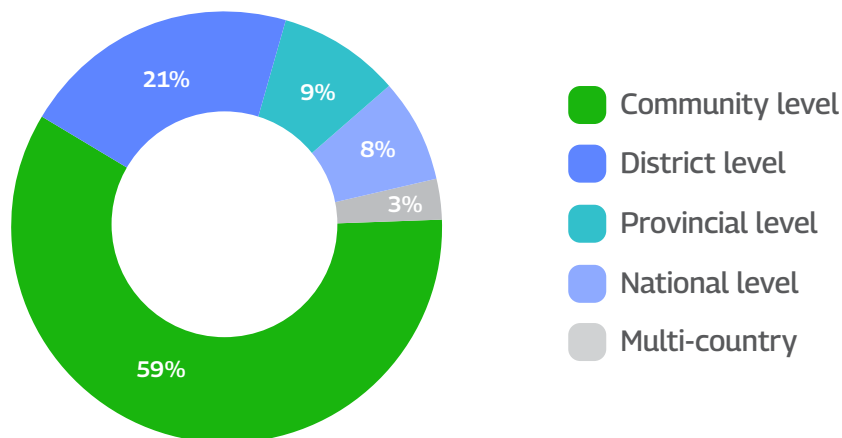


Figure 1. Geographic focus of the Nutrition Dialogues

Stakeholder participation

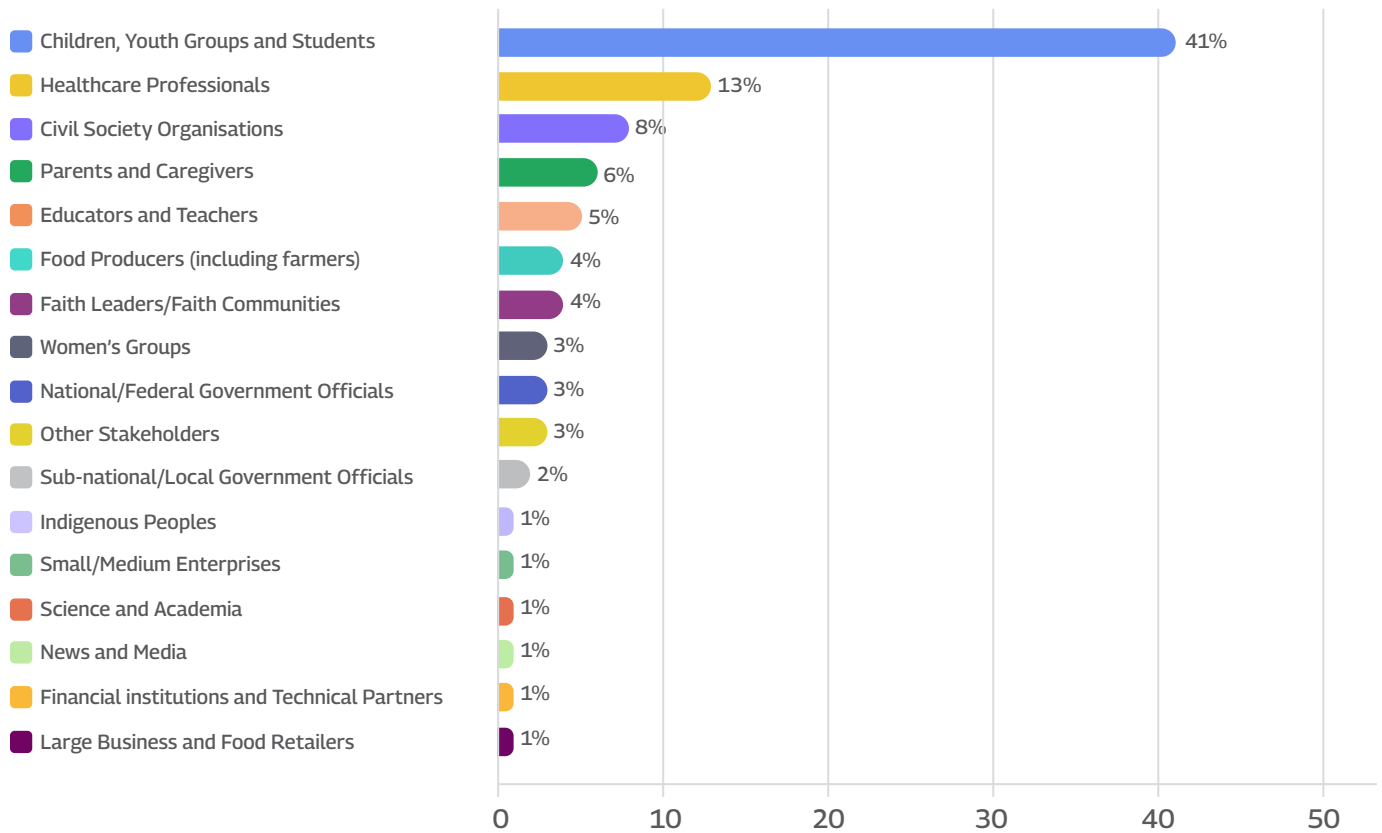


Figure 2. Stakeholder distribution (only values over 1% included)

MORE CONTRIBUTIONS TO AMPLIFY VOICES OF WOMEN AND CHILDREN ON NUTRITION

Dialogue feedback included findings from large consultations and sensitisation events that have followed different methods to assemble and analyse the perspectives of those who participated. The feedback from these consultations has not been included in this global synthesis of Nutrition Dialogues. They include 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. This survey highlights that migrant and Afro-descendant children are the most vulnerable to food insecurity in the region. Its conclusions are included in World Vision's ***Voices of Children*** report. In addition, two very large Nutrition Dialogues took place in Rwanda in December 2024 as part of a family day of celebration and community sensitisation on nutrition and infant feeding practices.

Furthermore, feedback was received from 16 Nutrition Dialogues (held in Colombia, Dominican Republic, Kenya, India, Lesotho, Malawi, Mozambique, and Zimbabwe) after the cut-off date for preparation of this global synthesis. Unfortunately, it has not been possible to include them in this global synthesis.

3.2 RISK FACTORS AND TRIGGERS FOR MALNUTRITION

The framework used to synthesise dialogue feedback includes a focus on underlying factors that put children at risk of food and nutrition insecurity, more immediate factors that trigger hunger and malnutrition, and actions that are urgently needed to reduce these risks.

1. Comparing feedback from Children's Workshops and Stakeholder Dialogues

To what extent do the underlying factors and precipitating triggers for nutritional insecurity, hunger, and malnutrition vary between Children's Workshops and Stakeholder Dialogues? Children and young people express similar concerns to adults, highlighting the economic struggles of their households, unemployment in their communities, and challenges that farmers face with maintaining agricultural production. They also recognise the influence of cultural norms on nutrition, such as gender and age disparities in food distribution within their households and the pressures that force children out of school – whether due to child marriage or child labour – to support their families. Children are quick to emphasise what they feel as a result, expressing both discomfort and frustration. Sometimes they ask why their parents decide to economise by feeding them cheaper and less nourishing food when they know that this might have an impact on their longer-term development and well-being.

2. Comparing feedback from national- and community-level dialogues

Feedback from dialogues held at the national and community level includes similar underlying risk factors for food and nutrition insecurity and triggers for malnutrition. However, the emphasis differs. At the community level, the focus of feedback is on the need to increase and improve resilience of agriculture production, to fill gaps in nutritional knowledge, and to minimise the impact of cultural influences on people's access to food. Feedback from national-level dialogues reflects these factors, but the focus is more on programme implications, emphasising cross-sector policies, multisectoral action, and stakeholder coordination.

3.2.1 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 mentioned that economic factors are barriers to good nutrition. Many dialogue participants are able to identify which foods are nutritious but indicated that they are often not able to afford them. This cash shortage may be a result of a household having limited opportunities to have adequate and stable incomes. Children described how inadequate access to sufficient, healthy food impacts their ability to learn and this may affect their ability to stay in school.

They acknowledged that stopping their education would hinder their chances to earn a stable income in the future.

'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, FF 55194²

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

Fifty-nine per cent of the dialogue feedback describes how limited access to drinking water, sanitation, and health services impacts the food security and nutrition of households.

Limited access to water combined with inadequate sanitation make it particularly difficult to maintain hygiene within households, increasing the risk of diseases that can lead to poor nutrition. Challenges with accessing water are exacerbated when water sources are unprotected, sometimes being shared with animals, or are located far from the household. Household members, usually women and children, must travel long distances – sometimes a return journey of more than an hour – to fetch the water they need for drinking, hygiene, cooking, and cleaning.

Parents and caregivers want to be able to access healthcare services that offer effective treatment in case of illness, especially among children. They would like to be able to know when their children are at risk of malnutrition and what actions they need to take. Healthcare workers indicated that their workloads are heavy, and this limits their ability to offer the care that children need.

Feedback from several dialogues indicated that children from households where an adult is mentally ill are more likely to be hungry and experience malnutrition.

'For us water is vital. Now when we go into drought, there is a shortage of water, there is no drinking water for our children.' Colombia, SD, FF 55932 (translated from Spanish)

'The distance to the main health centre 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

²Each feedback form has a unique identifier, with the name of country, CW or SD for Children's Workshop or Stakeholder Dialogue, and the number of the feedback form (FF). All quotes are extracted from feedback forms.

3. Farming households face particular challenges

Fifty-three per cent of dialogue feedback referred to factors that relate to agriculture and food systems. Dialogue feedback indicated that, in farming households, the risk of hunger and malnutrition increases when food production is reduced. Participants identified specific challenges that increase the nutrition-related risks faced by farmers, including shortage of suitable land for farming; difficulties with accessing seeds, fertiliser, and other inputs; and lack of equipment, tools, and adequate facilities for storing produce. In remote areas farmers face difficulties with accessing markets, travelling long distances to reach them. The appropriation of water and arable land for mining and commercialised farming have made it particularly difficult for smallholder farmers to increase their access to arable land and water for irrigation.

'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

'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

4. Some risky child feeding practices reflect cultural norms

Fifty-two per cent of dialogue feedback describes practices which increase people's risk of food insecurity and malnutrition that reflect cultural norms.

In some households, women and girls face challenges with ensuring their good nutrition because of widespread culturally determined practices. This was reported from dialogues in rural and urban settings. Dialogue feedback described how a person's gender can determine the food they are offered, with women more likely to give up some of their share of household food so that other members, mainly the men and boys, can receive more.

Dialogue feedback indicated that if girls marry young and become pregnant when teenagers, their children are more likely to be hungry and become malnourished. Young mothers describe how being stigmatised increases their vulnerability. They also described difficulties with accessing essential services.

Infants and young children are particularly vulnerable in households where income is tight. In the dialogue feedback, some children described how they feel neglected and abandoned when they do not receive enough nutritious food. Some children described having to drop out of school to contribute to the household income.

Some mothers indicated that they would like to know more about how best to feed their infants, especially when they cannot afford to buy the nutritious foods that are recommended. Others described the challenges they face when they are unable to breastfeed due to poor health or time constraints.

People with disabilities describe how they are subject to discrimination in their communities, which makes them particularly vulnerable. Indigenous people described challenges with accessing both traditional foods and effective healthcare.

'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

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

5. Insufficient awareness about nutrition and reliance on processed foods

Feedback from nearly half of the dialogues (49%) indicated that participants are aware – to some extent – about the nutritional value of different foods. They acknowledged that awareness was not good enough. Some parents and caregivers indicated not knowing which foods to use at different times of year to ensure a balanced diet for their children. Those who did have access to fresh foods stated that they are not able to prepare and cook more nutritious meals with what is available to them. They described how processed foods are increasingly popular: They are cheaper than fresh alternatives and require limited preparation, while being readily available even in remote locations. They noted how the strategies used to market processed foods, including promotion on social media, contributes to their increased consumption.

'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, FF 55068

6. Importance of policy consistency and institutional capacity

In 36% of dialogue feedback, participants reinforced the need to ensure that national-level intentions and policies reflect the realities faced by people living in their communities. They perceive that the policies that aim to reduce hunger and risks of malnutrition, and the programmes derived from them, do not always address people's actual needs, which are described as much broader.

Participants would like constant attention to collaboration across the full range of government sectors, between national and sub-national levels, and among different stakeholders including non-state actors. They note that implementation of cross-sectoral policy is hindered by inconsistent legislation and incompatible guidance within different sectors. Some suggested that communities should take more responsibility for their nutrition rather than relying on services offered by local authorities and national governments.

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

3.2.2 Triggers that increase risk of malnutrition

During the dialogues, participants were encouraged to identify factors that suddenly trigger food and nutrition insecurity and may lead to malnutrition. The following 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

Thirty-eight per cent of dialogue feedback describes how unpredictable and/or adverse weather patterns are on the rise 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 they face. Dialogue participants describe how weather events lead to losses of crops and animals, as well as damage to farmland and to roads. All of this results in food being less available, which means that consumers pay higher food prices. 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.

'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

2. Exposure to criminality, violent conflict, and war

Fifteen per cent of dialogue feedback refers to issues linked to violence – war, conflict, and criminality – as triggers for food insecurity and malnutrition. The increased likelihood of violence within communities increases the difficulties faced by households in 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. Their livelihoods often depend on their receiving support from non-governmental organisations (NGOs), local authorities, and central government. 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 displaced 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 prices of essentials invariably rise and become harder to access, triggering a higher incidence 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.' Colombia, SD, FF 55920 (translated from Spanish)



3. Rising prices of staple foods and agricultural inputs

Rising prices of essential foods and decreased purchasing power of household incomes was identified as a trigger for malnutrition in 6% of dialogue feedback. Participants report that food price inflation can trigger people to eat unhealthy diets with low nutritional content. At the same time, inflation is reported in 6% of the dialogue feedback as a trigger for malnutrition. Higher prices for agricultural inputs, such as seeds and fertiliser, mean that farmers purchase fewer inputs. This quickly triggers lower yields 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

'Inadequate supply of subsidy farm inputs such as fertiliser. This also results into low yields because these farm inputs are so expensive such that the community members cannot afford to buy.'
Malawi, SD, FF 56169

3.3 URGENT ACTIONS IDENTIFIED

Feedback from dialogues captured 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 household income and purchasing power

The action that most participants believe is needed urgently is an increase in the opportunities for households to earn incomes and receive fair wages for their work – helping them achieve financial stability and have sufficient resources to cope with increasing food prices. Increased access to vocational training in agriculture, craft-making, and commerce would be valued. Women indicated that they need focused opportunities for income generation and help with becoming financially literate. They would benefit from having access to community savings and credit initiatives. Both parents and children emphasised that, in the long run, the core requirement is for all children to achieve their full earning potential by being well-nourished when attending school and to be enabled to complete their education.

'Develop youth 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, FF 55811

2. Increase coverage and quality of school meals

School meals are recognised by children, young people, and adults as a vital action that contributes to children attending school regularly and completing their education. Adequate funding for school meal programmes is seen as extremely important. If resources are available, school feeding should be expanded to include children who are younger (under 5 years of age) and older (high school students) in addition to those normally eligible. Children and young people suggest that less healthy, processed foods should not be available for purchase on school grounds. They also were enthusiastic about participating in school gardening programmes and learning the skills needed to produce fresh ingredients for the meals that are served in their schools.

'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

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

3. Expand conversations about nutrition everywhere

There is a need for a continuous effort to raise people's awareness about the important elements of nutrition. Children and young people view themselves as advocates for better nutrition within their communities and among their peers. Efforts to increase nutrition awareness are more likely to succeed when they are led by communities, specific to the local context, involving a range of local actors, and presented in local languages. Ideally it should focus on local food, be culturally sensitive, and be adapted to the needs of those on low incomes.

'Youth leadership was emphasised as crucial. Empowering young people to organise 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

4. Expand coverage of social protection

Actions that protect people at risk of hunger and poverty include identifying those most at risk and enabling them to have access to food-for-work, cash transfers, and nutritional assistance as needed. Special attention should be given to women and children, especially if they experience criminality, violence, and/or adverse weather events.

Care is needed to ensure that all people in need are able to access social protection, tailoring what is offered to the realities of people's lives in the local context, and co-designing interventions together with those who are expected to benefit.

In settings where people have moved to escape from violence, food assistance may be urgently required – but it should be fortified with nutrients. It should also be accompanied by a transfer of cash so that families can make the food choices that suit them. The use of locally sourced produce as part of food assistance enables communities that host displaced people to earn more income.

'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 programme related to nutritional literacy and nutritious food assistance to the civil society organisation.' Indonesia, CW, FF 56230

5. Expand access to water and sanitation services

Access to adequate amounts of water that is safe for drinking, washing, and preparing food is crucial for reducing exposure to waterborne disease. The proximity of water sources to homes, schools, and community centres is particularly important. If they are close, the volume of water used for hygiene and cleaning increases and more time is freed up for childcare. If women or children have to travel shorter distances to get water, they are less vulnerable to being attacked.

'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

6. Improve access to comprehensive primary healthcare

Accessible, comprehensive primary healthcare that meets the needs of all people, including those living in hard-to-reach areas, is essential for overcoming the diseases that can trigger poor nutrition and provoke long-term illness. Increases in the coverage, accessibility, and quality of primary healthcare, particularly for women and especially in rural areas, will lead to better nutrition. There should be a focus on actions that respond to the health and nutrition needs of mothers and children. This calls for personnel to be guided in the monitoring of women's and children's nutrition, identifying those who need careful attention, and enabling them to receive prompt and effective treatment. Households need access to family planning services and guidance on which complementary foods to offer their children. Those in need of healthcare may need help paying for treatment. Primary healthcare centres may need rehabilitation, connecting to water and electricity supplies, and better infrastructure to enable year-round access. Children emphasised the importance of their households having regular access to health professionals, as they are concerned that parents are not the best able to decide which medications are best for their children.

'Focus community health practitioners' training on community nutrition, equipping them with the skills to address nutrition challenges holistically rather than solely through clinical approaches.'

Kenya, SD, FF 55611

7. Ensure food systems respond to people's needs

There is a need to increase the amount of nutritious food that is grown locally, which will decrease the need for imports and reduce costs. There is also a need to ensure that those who earn their livelihoods through farming have a decent income that is stable over time. The food system actions mentioned in dialogue feedback include training in agriculture that is adapted to changing weather (especially drought), opportunities to apply up-to-date techniques for food processing and preservation, options for increasing farmers' access to agricultural inputs, better connection of farm production to markets, better year-round access to water, and better intersectoral connections to overcome economic barriers to better nutrition.

'People don't understand what a balanced diet means or what crops they should grow to ensure food security at home. The lead farmers prioritise 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

8. Ensure functioning infrastructure

Well-functioning infrastructure is essential if households and communities are to ensure that they can be food and nutrition secure and withstand the triggers that provoke malnutrition. Schools and healthcare centres must function as well as intended, and households must be able to access reliable electricity as well as ample supplies of clean water and sanitation facilities close to their home, school, and clinic. Farmers would benefit from mechanised irrigation schemes, facilities for storing food, and well-maintained roads and market structures.

'Construct roads to facilitate smooth transportation of goods and services, which would stabilise the prices of various products (both agricultural and manufactured). Build markets in our communities to ensure food availability and accessibility.'
Democratic Republic of the Congo, CW, FF 56506 (translated from French)

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

Stakeholders and sectors need to be able to collaborate effectively if efforts to improve 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. When such processes are structured, inclusive, and participatory, they encourage the building of relationships, sharing of information, and emergence of trust among stakeholders. This contributes to the implementation of better aligned and more impactful action.

Feedback from national-level dialogues shows the importance of policymaking for nutrition that is based on scientific evidence and not on ideologies. Implementation of policy should be made possible through partnerships between the public and private sectors, with fair and enforced regulations on the marketing and safety of food products. Monitoring processes should enable accountability to the people being served, as well as to service providers and/or funders.

'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, FF 58177 (translated from French)

AREAS OF DIVERGENCE EXPRESSED WITHIN NUTRITION DIALOGUES

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 well-being 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 only the mother's duty to ensure that each child is well fed and nourished. Some emphasised 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**
- **households with low incomes that have little resilience** in the face of adverse weather, conflict, an outbreak of disease, or failing markets
- **people displaced** by extreme weather, violence, and other disasters
- **places where risk factors combine**, leading to people facing greatly increased threats.

The synthesis suggests that everyone should be enabled to contribute to improving nutrition in their own communities, so it is important to:

- **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 costs 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 clean 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 by adhering to the following principles:

- **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, supporting their participation when decisions are made about policy and implementation that affects them.



Initiating partners:



Mobilising partners:



Funding partners:

