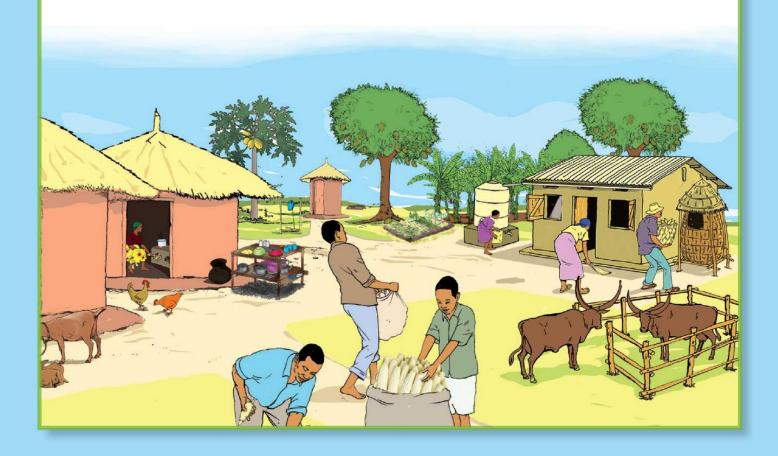


Community Mobilisation on Food and Nutrition Security

ORIENTATION OF COMMUNITY DEVELOPMENT OFFICERS

May 2016



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These training materials are made possible by the generous support of the American people through the support of the Office of Health, Infectious Diseases, and Nutrition, Bureau for Global Health, U.S. Agency for International Development (USAID), and USAID/Uganda, under terms of Cooperative Agreement No. AID-OAA-A-12-00005, through the Food and Nutrition Technical Assistance III Project (FANTA), managed by FHI 360.



Introduction

This orientation guide has been prepared to help teams conduct the 3-day orientation on integrating food and nutrition security in community mobilisation using *Community Mobilisation on Food and Nutrition Security: A Guide for Community Mobilisers* and the accompanying flip chart. Specifically, two categories of people will find this guide useful:

- The national orientation team that will orient District Community Development Officers, Municipal Community Development Officers, and staff of Feed the Future implementing partners
- The regional teams that will orient Sub-County Community Development Officers

This guide is divided into 11 sessions, including a post-test. Each technical and practical session has specific objectives, a session outline, binder content/handouts, materials needed, and steps the facilitator should follow to deliver the session. Accompanying this guide is a PowerPoint presentation, which the facilitator should use to deliver the technical content (the PowerPoint also can be downloaded from www.fantaproject.org). Many of the binder handouts are from *Community Mobilisation on Food and Nutrition Security: A Guide for Community Mobilisers*. They were included in this orientation guide so that they can be easily photocopied for participants.

The guide also includes an evaluation form in Annex II. At the end of each day, facilitators should ask participants to complete the form so their feedback can be used to help improve the course.

The orientation requires the following materials and equipment:

- Computer and projector
- Community Mobilisation on Food and Nutrition Security: A Guide for Community Mobilisers and accompanying flip chart
- Flip charts
- Markers
- Masking tape
- VIPP cards
- Sufficient copies of session handouts to distribute to participants as needed, particularly the pre- and post-tests
- Sufficient copies of Annex II: Evaluation Form for daily course evaluations

Session Contents

Session Number	Session Topic	Time (minutes)
Session 1	Orientation Introduction	70
Session 2	Introduction to the Community Mobilisation Package	60
Session 3	Planning Community Mobilisation for Improving Food and Nutrition Security	60
Session 4	The Roles Of Stakeholders in Community Mobilisation for Food and Nutrition Security	50
Session 5	Introduction to Community Dialogue, Food Security, and Food Insecurity	180
Session 6	Introduction to Good Nutrition and Malnutrition	90
Session 7	Community Dialogue on Food Security and Food Insecurity—Practice	275
Session 8	Community Dialogue on Good Nutrition and Malnutrition—Practice	215
Session 9	Conducting Home Visits and Making Referrals— Practice	160
Session 10	Post-Test	35
Session 11	Using the Orientation Guide for Community Development Officers (Only for Training of Trainers)	90
		1,285 minutes (approx. 21.5 hours)

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Session 1: Orientation Introduction

By the end of this session participants will have:

- Met one another
- Understood the objectives of the orientation
- Taken the pre-test

Session outline [70 minutes]	Binder contents	Materials needed
 Climate setting and introductions Objectives of the orientation Review of orientation agenda Welcome and/or opening remarks Orientation rules Pre-test 	Handout 1.1: Orientation Agenda Handout 1.2: Pre-Test/Post-Test	 Computer, projector, Annex I: Answer Key for Pre-Test/Post-Test Slips of paper (for participant identification numbers) Box/container for identification numbers

Step 1: Climate setting and introductions (5 minutes)

Show slides 2–3 to introduce the session and its objectives. Ask participants to introduce themselves by stating:

- Their names and titles
- The district they work for
- Their likes and dislikes
- One expectation from the orientation workshop

Step 2: Overview of orientation objectives (5 minutes)

- Show slide 4 and review the orientation's objectives with participants.
- To disseminate the content of the Community Mobilisation on Food and Nutrition Security: A Guide for Community Mobilisers (referred to as the guide or package)
- To enhance participants' knowledge about:
 - o Planning community mobilisation for improving food and nutrition security
 - o Key stakeholders involved in mobilisation for food and nutrition security and their roles
 - o Food security, food insecurity, good nutrition, and malnutrition
- To enhance participants' skills in conducting community dialogue meetings on food and nutrition security

- To enhance participants' knowledge of and skills in conducting home visits
- To enhance participants' skills/capacity to conduct orientation on the mobilisation guide in their respective districts

Step 3: Orientation agenda (5 minutes)

Refer participants to Handout 1.1 and review the orientation agenda by highlighting:

- Activities for each session
- Duration of each activity
- Facilitators responsible for each activity

Step 4: Welcome and opening remarks (5 minutes)

Ask the highest-ranking official from the Ministry of Gender, Labour and Social Development present give a brief welcome and opening remarks.

Step 5: Setting orientation rules (5 minutes)

Guide the participants to set rules for participating in the orientation. Write them on the flip chart and post them in the room. Participants should agree on:

- What is permissible (the Do's)
- What is not permissible (the Don'ts)

Step 6: Pre-test (45 minutes)

- Refer participants to Handout 1.2. Explain the purpose and structure of the pre-test.
- Give instructions for the pre-test (how to answer Parts A and B and the time allotted).
- For each participant, write a number on a small piece of paper. Put the numbers in a box or another container.
- Pass around the box (or container) of numbers and have each participant draw one and not let anyone see it. Explain that for confidentiality, the numbers will be used to identify the pre-tests. Ask participants to write their secret number on the top of the pre-test.
- Administer the pre-test for 40 minutes.
- Mark the pre-tests using the answer key in Annex I. Once this is done, post the marks with their corresponding participant numbers.

Orientation Agenda

	DAY 1	DAY 2	DAY 3
8:00	Registration		
8:20	Session 1. Orientation	Morning Review (see game	Morning Review (see game suggestions in Annex III)
8:30	Introduction Introductions	suggestions in Annex III)	Suggestions in Author in
9:00	Agenda Orientation Objectives Welcome and opening remarks Pre-test	Session 6. Introduction to Good Nutrition and Malnutrition	Session 8 continued: Final preparation for role plays on community dialogue on good nutrition and malnutrition
9:30	Session 2. Introduction to the Community Mobilisation Package		Session 8 continued: Presentation and discussions of role play on community dialogue on good nutrition and malnutrition
10:30	Tea Break	Tea Break	Tea Break
11:00	Game/Energizer	Session 7. Community Dialogue	Session 8 continued: Presentation
11:10	Session 3. Planning Community Mobilisation for Improving Food and Nutrition Security	on Food Security and Food Insecurity—Practice (preparation for role plays)	and discussions of role play on community dialogue on good nutrition and malnutrition
12:10	Session 4. The Roles of Stakeholders in Community Mobilisation for Improving Food and Nutrition Security		
12:40			Session 9. Conducting Home Visits
1:00	Lunch	Lunch	and Making Referrals—Practice
1:30			Lunch
2:00	Session 5. Introduction to Community Dialogue, Food Security, and Food Insecurity	Session 7 continued: Presentation of role plays on community dialogue on food security and food insecurity	Session 9 continued: Preparing and discussing role plays on conducting home visits and making referrals
4:00			Session 10. Post-Test
4:35		Session 8. Community Dialogue on Good Nutrition and Malnutrition—Practice (preparation for role plays)	Session 11. Using the Orientation Guide for Community Development Officers
5:00	Day 1 Evaluation	Day 2 Evaluation	
6:05			Day 3 Evaluation
6:10			Closing

Pre-Test/Post-Test

Part A: Mark each statement as true (T) or false (F).

	Statements	T/F
1	A community mobiliser is an individual who interacts with various groups of people to influence their knowledge, attitudes, and practices.	
2	Community mobilisers do not need to know the principles of community mobilisation for effectiveness.	
3	Planning for food and nutrition security can be done with an analysis of the situation.	
4	It is never helpful to identify and involve the right people to ease community mobilisation efforts.	
5	Community mobilisation for food and nutrition security necessarily results in an action plan that defines what should be done, by whom, and in what time frame.	
6	Schools have no role to play in promoting food and nutrition security.	
7	Parents and caregivers have an important role to play in promoting food and nutrition security.	
8	Community leaders have no role to play in promoting food and nutrition security.	
9	Parish Development Committees have an important role to play in promoting food and nutrition security.	
10	Civil society organizations have an important role to play in promoting food and nutrition security.	
11	Religious leaders have no role to play in promoting food and nutrition security.	
12	Cultural institutions have no role to play in promoting food and nutrition security.	
13	Herbalists cannot play any role in promoting food and nutrition security.	
14	Extension workers have an important role to play in promoting food and nutrition security.	
15	Food security means that a household has a lot of food at all times.	
16	Low agricultural productivity is not one of the key causes of food insecurity.	
17	Good nutrition means eating a variety of foods.	
18	Diseases, alcoholism, poor planning, and frequent pregnancies are causes of malnutrition.	
19	Malnutrition does not lead to either sickness or death.	
20	Home visits are a key component of community mobilisation.	
21	During home visits, you should not seek to be accompanied by a person from the community (gatekeeper).	
22	While on a home visit, you may come across malnourished children, but there is no way whatsoever to confirm that they are malnourished.	

1.2 continued

Part B: Provide short answers to the following:
1. List the four principles of community mobilisation.
2. List the stages you would go through to ensure that your community mobilisation activity results in a community action plan and indicators for success.
3. Write at least eight questions you would ask to analyse a community's food and nutrition security situation.
4. Write six indicators that would show that a community mobilisation activity addressing food and nutrition security has been a success.
5. List at least six stakeholders whose role, position, or office in the community would help mobilise the community to address food and nutrition security.

1.2 continued

6. For each stakeholder you identified above, write at least two roles they can play in mobilising for food and nutrition security.

Stakeholder	Roles
	1.
	2.
	1.
	2.
	1.
	2.
	1.
	2.
	1.
	2.
	1.
	2.
	1.
	2.
	1.
	2.

7. What is the rationale for community dialogue?	
8. What should be avoided during community dialogue?	

1.2 continued

9. List at least five causes of food insecurity in your district.		
10. Write at least five consequences of food insecurity in your district.		
11. List at least five consequences of child malnutrition in your district		
12. List three things you need to pay attention to in conducting a home visit.		
13. List four signs that would lead you to conclude that a child you meet during a home visit is malnourished and should be referred.		

Thank you for your participation.

Session 2: Introduction to the Community Mobilisation Package

By the end of this session, participants will be able to identify:

- Purpose of the community mobilisation package (guide and flip chart)
- Users of the package
- Key terms (community mobiliser, food and nutrition security)
- Principles of community mobilisation

Session outline [60 minutes]	Binder contents	Materials needed
 Purpose and users of the community mobilisation package Key terms: Community mobiliser Food and nutrition security Principles of community mobilisation 	Handout 2.1: Overview of the Community Mobilisation Package, Key Terms, and Principles	Computer, projector, flip chart, markers

Step 1: Session objectives (5 minutes)

• Show slides 5–6 to introduce the session and explain its objectives.

Step 2: Purpose and users of the mobilisation package (5 minutes)

- Present slide 7 and explain the purpose of the package.
- Present slide 8 and explain the users of the package.

Step 3: Key terms and principles (50 minutes)

- Show slide 9 and ask participants to brainstorm on the meaning of the terms community mobiliser and food and nutrition security. Record their responses on a flip chart.
- Present slides 10–11 with the definitions of the above terms.
- Show slide 12 and ask participants to brainstorm on the principles of community mobilisation. Record their responses.
- Show slides 13–14 and explain the principles of community mobilisation.
- Invite and answer any questions about the session.

Overview of the Community Mobilisation Package, Key Terms, and Principles

Success in improving food and nutrition security depends on effective community mobilisation. To integrate food and nutrition security into the work of community mobilisers, the Ministry of Gender, Labour and Social Development (MGLSD) recognizes that:

- Community mobilisers and resource persons should include food and nutrition security among the issues they cover during mobilisation.
- Community mobilisers and resource persons should help communities identify food and nutrition security issues as part of community planning.
- Home and village improvement campaigns should address issues of food and nutrition security.
- Community meetings should address food and nutrition security concerns.

To carry out these activities, community mobilisers need to have the appropriate knowledge, skills, and reference materials to do so. *Community Mobilisation on Food and Nutrition Security: A Guide for Community Mobilisers* is intended to provide community mobilisers with:

- 1. Guidance on how to plan community mobilisation activities to improve food and nutrition security
- 2. Descriptions of the various roles of different community members in improving food and nutrition security
- 3. Examples of practical discussions to have with community groups to explain food and nutrition security, its importance, and ways to improve it
- 4. Guidance on conducting home visits and making referrals for malnourished children

Using the information in the community mobilisation guide, mobilisers will be able to integrate food and nutrition security messages into their work. This will lead to communities that are in a better position to improve their food and nutrition security.

What Is a Community Mobiliser?

A community mobiliser is an individual or leader who interacts with various groups of people (such as households, schoolchildren, community groups, community-based organizations, and religious groups) to influence knowledge, attitudes, and practices.

Specific types of community mobilisers that the mobilisation guide is intended for include:

- Community development officers/workers
- Parish Development Committees
- Functional adult literacy instructors
- Group promoters

- Community-based facilitators
- Village health teams
- Any other influencer

Criteria for selecting a community mobiliser are included in Annex I of the mobilisation guide.

What Is Food and Nutrition Security?

Food and nutrition security refers to when households have enough quality food to eat year round in order to lead active and healthy lives. Issues surrounding food and nutrition security are discussed

2.1 continued

in more detail in the example discussions and mobiliser notes that are provided in Part 3 of the mobilisation guide.

Examples of community mobilisation activities to improve food and nutrition security:

- Workshops and training
- Home and village improvement campaigns
- Rarazas

- Community dialogue
- Functional adult literacy
- Formation and registration of communitybased organizations

Principles of Community Mobilisation

As a community mobiliser, you will need to be familiar with the basic principles of community mobilisation to be able to apply them when promoting food and nutrition security. The four basic principles are participation, accountability, good governance, and universal access to information. (See Annex II in the guide for practical tips on community mobilisation).

Participation

This principle requires that every member of a community gets the chance, directly or through representation, to participate in the design, implementation, and monitoring of community-level initiatives. When this happens, there is a higher likelihood that such initiatives accurately reflect the community's real needs and interests. Participation takes into consideration the different experiences, needs, and capabilities of various groups in a community—women and men, youth and the elderly, persons with disabilities and the able-bodied, and ethnic/religious/language minorities and majorities. With community mobilisation, participation is about meeting the interests of the whole community.

Accountability

Accountability is the process of sharing information about actions or intentions. Groups and individuals in relationships, such as in communities, are accountable to each other when they honour their commitment to communicate plans and are responsible for what they actually do. In the context of community mobilisation, community members are held accountable to each other. Individuals who are assigned certain roles in food and nutrition security initiatives are accountable to the entire community, which is counting on them to fulfil their responsibilities in everyone's best interest.

Good Governance

Governance in general relates to the process of decision-making and how decisions are implemented. Accountability is an essential characteristic of good governance where leaders are held accountable for the decisions made and applied. Governance is most beneficial when it is accountable, transparent, just, responsive, and participatory. Good governance is a goal of community mobilisation and helps ensure sustainability.

Access to Information by All Members of the Community

Community members should be able to access information on their food and nutrition rights and to advocate for themselves. In community mobilisation, every community member has the right to know the procedures, decision-making processes, and the specifics about community interventions, including efforts to improve food and nutrition security.

Session 3: Planning Community Mobilisation for Improving Food and Nutrition Security

By the end of this session, participants will be able to:

- Describe the phases involved in planning for community mobilisation for improving food and nutrition security
- Determine what and who are involved at each phase

Session outline [60 minutes]	Binder contents	Materials needed
 Five phases of the community mobilisation process 	Handout 3.1: Planning Community Mobilisation for Improving Food and Nutrition Security	 Computer, projector, flip charts, markers

Step 1: Session objectives (5 minutes)

• Show slides 15–16 to introduce the session and explain its objectives.

Step 2: Group work on planning for community mobilisation (25 minutes)

- Ask participants to form four groups. Ask each group to brainstorm on one of the following topics and then present their work to the plenary:
- Group 1: Key issues that should be included in planning community mobilisation for food and nutrition security, emphasizing problems that emerge from a food security and nutrition situation analysis
- Group 2: Categories of people that should be identified as gatekeepers and why
- Group 3: Key issues to be discussed with community gatekeepers or community leaders before a mobilisation activity and why each issue is important
- Group 4: Outcome of a mobilisation activity and monitoring and evaluation indicators

Step 3: Presentation on planning for community mobilisation (30 minutes)

- Show slides 17–25 and explain the purpose of planning, the five phases of community mobilisation, and highlights of each phase.
- Invite and answer any questions on this session.

Planning Community Mobilisation for Improving Food and Nutrition Security

When planning any community mobilisation activity, it is important to take steps to prepare for meaningful discussions with the community. This involves deciding:

- What to do
- How to do it
- When to do it
- Who is involved

Having a plan and the right people in place is critical for the success of a mobilisation effort. To develop a plan, it is helpful to think of the different phases that are involved in a community mobilisation activity as well as what is required in each phase. *Community Mobilisation on Food and Nutrition Security: A Guide for Community Mobilisers* suggests thinking of community mobilisation in five phases:

- Planning
- Community entry and awareness
- Community mobilisation
- Taking action together
- Participatory monitoring and evaluation

These phases are explained on the following pages, including questions to consider when planning for activities to improve food and nutrition security. A template for documenting your action plan appears in Handout 7.3 (and on page 14 of the mobilisation guide).

A. Planning

During the planning phase, a mobiliser would determine food and nutrition security issues that need to be addressed and what needs to be done to address them. There are a number of ways to identify issues, people to involve, activities, and measurements of success, which are described next.

Food and Nutrition Situation Analysis

In order to improve food and nutrition security in a community, there is a need to obtain basic information on the current food and nutrition security situation in a community. While the mobiliser may have knowledge on this topic, information may also be obtained from discussions with people knowledgeable and/or influential in the community, such as local leaders and informal groups. Such discussions should generate information to answer key food and nutrition security questions, such as:

- Do households consume a variety of different foods from crops and livestock throughout the year? If not, why?
- How many meals are consumed by most households each day?
- Do households have backyard gardens?
- Are households' crops drought-resistant?

3.1 continued

- Do women give their infants breast milk only (with no other food and water) for the first 6 months?
- Do households have access to clean, safe water?
- What are the sources of water used?
- Are household drying racks available for use?
- Are pit latrines available and used?
- Are rubbish pits available and used?
- Does the community have school gardens?
- What consequences have been observed, if any, from not having adequate quality food?
- What consequences have been observed, if any, from poor infant feeding practices?
- What consequences have been observed, if any, from poor water, sanitation, and hygiene practices?
- What types of people in the community are vulnerable to food insecurity and malnutrition?
 Why?
- Is there anything that has been done in the past or is currently being done to address food insecurity or malnutrition?
- What are some of the barriers that might slow progress towards addressing food and nutrition security issues?
- Who can help address such barriers and how?

Analysis of these issues will help you understand the problems of food insecurity, malnutrition, and their causes and consequences. This insight will help inform planning for what needs to be done.

Identifying and Involving the Right People

It is important to have a clear understanding of people who have power and influence in the community. These 'gatekeepers' are the people whom you will first share ideas with, and they can help encourage others to participate in community dialogue meetings and implement feasible actions. These gatekeepers include but are not limited to:

- Local political leaders
- Religious leaders
- Parish Development Committees
- Health care providers
- Extension workers
- Traditional herbalists
- Cultural leaders
- Teachers

Defining What Needs to Be Done and How

A community mobiliser should always have a clear idea of the mobilisation activities and strategies he or she will use. These activities should be discussed with influential people in the community for agreement. For example, the method used to assist a community to analyse the food and nutrition situation should be discussed and agreed upon.

Identify what you will need for the mobilisation activity to succeed. Mobilisation is about the community understanding and appreciating that there is a problem that needs to be addressed with their involvement. What will you need to ensure they understand? A picture of a malnourished child? A picture of a healthy child? A picture of a household showing a number of positive food and nutrition practices? This should be determined during the planning process.

Identify simple ways that will measure progress or success of mobilisation efforts. Community mobilisation should lead to actions that produce results. During the planning process, a mobiliser should have an idea of possible actions and results that can be measured over time. While community members will determine the actions to take, the mobiliser should guide them by considering possible actions, what the community is likely to do, and the possible results of their actions. This is informed by the situation analysis.

Community Entry and Awareness of Gatekeepers

The situation analysis helps identify individuals, groups, or organizations (the gatekeepers) that should be contacted for community mobilisation. Once these have been identified, the mobiliser should:

- Identify key food and nutrition security issues that are of interest to the community
- Discuss these issues with identified gatekeepers
- Agree on community groups (audiences) you would like to have participate in discussions on food and nutrition security
- Agree on who will invite them
- Agree on a date and venue and ensure communication is made accordingly
- Agree on approaches to be used in the discussions

C. Community Mobilisation

In this phase, the mobiliser uses the agreed-upon approach to engage the audience to discuss the manifestation, causes, and consequences of food insecurity and malnutrition. The outcome of the mobilisation activity should be a community action plan that:

- Identifies the problem
- Determines tasks to address the problem
- Assigns responsibility for respective tasks
- Sets a timeframe for each task
- Determines signs of success

It is important to note that:

- Each identified problem may have different tasks
- Tasks may address specific groups that are vulnerable to food and nutrition insecurity
- All tasks may not be performed at the same time and some may need to be prioritized
- Actions can be taken at the household, community, and local government levels

D. Taking Action Together (Implementation)

Once there is a community action plan for addressing food insecurity and malnutrition, respective actors assigned to specific tasks and guided by the agreed timeframes embark on real action. The

3.1 continued

template in Handout 7.3 (and page 14 of the mobilisation guide) is an example of one way to develop your action plan.

E. Participatory Monitoring and Evaluation

In practice, monitoring and evaluation overlaps with implementation. Monitoring is the act of observing the progress of food and nutrition actions against the action plan. It includes looking at how actions were carried out, whether they should have been carried out at all, and whether something different should have been done.

Some examples of ways to assess the success of a community mobilisation activity include:

- Number of trainings attended by community mobilisers
- Availability of action plans formulated and implemented by the community mobiliser
- Number of mobilisation meetings held
- Minutes of community meetings recorded and shared
- Frequency of field visits made
- Number of monitoring reports written and shared
- Number of households with gardens to increase food security
- Reduced cases of malnutrition
- Number of community-level groups established and addressing food and nutrition security issues
- Number of food and nutrition security information sessions conducted

Session 4: The Roles of Stakeholders in Community Mobilisation for Improving Food and Nutrition Security

By the end of this session, participants will be able to identify:

- Key people and/or groups that can help drive the food and nutrition security agenda at the community level
- The roles that these people or groups can play to help improve food and nutrition security

Session outline [50 minutes]

Stakeholders and their roles in community mobilisation

Binder contents

Handout 4.1: The Roles of Stakeholders in Community Mobilisation for Improving Food and Nutrition Security

Materials needed

 Computer, projector, flip chart, and flip chart from community mobilisation package

Step 1: Session objectives (5 minutes)

• Show slides 26–27 to introduce the session and explain its objectives.

Step 2: Brainstorm on stakeholders and their roles (20 minutes)

- Ask participants at each table to think of two stakeholders and the roles they can play in the promotion of food and nutrition security.
- Have one participant from each table share responses with the larger group; record the responses on a flip chart.

Step 3: Presentation on stakeholders and their roles (25 minutes)

- Explain the roles of different stakeholders using slides 28–40 and cards 1–10 in the mobilisation package flip chart.
- Ask each table to identify any other key role for a particular stakeholder that was not already mentioned.
- Ask participants if there are other stakeholders that could be included and what their roles are.

The Roles of Stakeholders in Community Mobilisation for Improving Food and Nutrition Security

There are many stakeholders involved in community mobilisation for food and nutrition security. These include political and technical leaders, as well as groups or people that are part of the community, work with the community, or provide services to the community. The key community groups include local religious groups and leaders (e.g., mothers' unions, lay leaders, catechists, and imams), community-based organizations, village health teams, networks of people living with HIV, village savings and loan associations, functional adult literacy groups, child protection committees, and any other community groups engaged in community-based work. The roles of these groups in efforts to improve food and nutrition security are described below and in the community mobilisation package flip chart.

Schools

- Hold classroom discussions on food and nutrition security
- Organize students to engage in food and nutrition security activities, such as school gardens and learning about healthy food choices, marketing, commerce, and income
- Organize farming demonstrations on improved farming techniques
- Engage role-model farmers and extension workers to exchange information with students
- Engage students in outreach activities such as performing cultural/theatrical activities on food and nutrition security
- Advise pupils/students to establish backyard and kitchen gardens

Parents/Caregivers

- Strive to grow or buy a sufficient quantity and variety of food for the household
- Follow guidance for feeding of infants and young children and ensure children and dependents are fed enough of various types of food
- Participate in community dialogue and mobilisation and support the community action plan
- Attend seminars, meetings, demonstrations, exhibitions, and trainings to gain knowledge, information, and skills pertaining to food and nutrition security
- Work closely with others to form parents associations on food and nutrition security
- Use family planning to have a manageable number of children
- Take children for healthy- and sick-child visits as needed to receive all immunizations, and participate in any community activities that promote child growth
- Encourage and practice use of clean and safe water, sanitation, and hygiene practices, including: handwashing with soap/ash before preparing food, eating/feeding, after using the toilet, or cleaning someone who has defecated; having, using, and maintaining a household latrine; and treating drinking water and storing it safely in a covered container

Community Leaders

- Encourage household heads and other members to engage in profitable farming that promotes food and nutrition security
- Identify model farmers to exchange information with other community members
- Mobilise households to build appropriate food storage facilities

- Identify households that are at risk of food and nutrition insecurity and sensitize them to get involved in good agricultural practices
- Link farmers to appropriate extension workers
- Mobilise schools to teach agriculture and re-introduce school gardening
- Provide information to couples on manageable family sizes
- Promote clean and safe water, sanitation, and hygiene practices at the community and household level
- Follow up on implementation of community food and nutrition security action plans
- Teach and practice agriculture through school gardening

Parish Development Committees

- Report on food and nutrition security issues to relevant authorities (e.g., in the case of natural disasters such as hailstorms, floods, and landslides) so that proper action can be taken
- Include food and nutrition security objectives and activities in development plans
- Mobilise community members to promote food and nutrition security in their homesteads
- Sensitize communities to adhere to local early warning signs regarding weather

Civil Society Organizations

- Disseminate relevant food and nutrition security knowledge and information
- Advocate for attitudes, beliefs, and practices that promote food and nutrition security
- Incorporate food and nutrition security issues into programs
- Connect with extension workers and community mobilisers
- Provide financial, technical, and other resources (such as seeds) to improve food and nutrition security
- Follow up with and support families at risk of malnutrition and food insecurity
- Advocate for increased resource allocation to food and nutrition security in local governments
- Monitor food and nutrition security interventions in communities and share reports with relevant stakeholders
- Advocate for integration of food and nutrition security in sector plans and budgets

Religious Leaders

- Integrate food and nutrition security messages into sermons
- Demonstrate appropriate food production techniques at church farms
- Demonstrate food and nutrition security messages at places of worship
- Encourage and/or influence affiliate organizations, such as mothers' unions, to introduce food and nutrition security messages into their activities
- Introduce food and nutrition security activities into health units under their control/leadership/ownership

- Integrate food and nutrition security messages into pastoral visits to families, households, and communities, for example, by asking questions related to food and nutrition security and providing information on the topic
- Encourage and/or influence affiliate schools to introduce food and nutrition security issues into teaching and practice

Cultural Institutions

- Mobilise subjects towards promotion of food and nutrition security
- De-campaign cultural values/practices/beliefs that compromise food and nutrition security of women and children
- Integrate food and nutrition security issues into institutions' plans
- Include food and nutrition security messages while interacting with subjects
- Link communities with food and nutrition security-related service providers, such as extension workers
- Organize agricultural and water, sanitation, and hygiene competitions
- Provide resources for food and nutrition security

Herbalists

- Attend meetings to learn basic knowledge and information on food and nutrition security
- Work hand in hand with relevant offices, such as Community Development, Health, and Agriculture, to seek information on food and nutrition security
- Refer children who may be malnourished to village health teams or health facilities
- Set up demonstration gardens and encourage clients to adopt modern farming practices for improved food and nutrition security
- Establish demonstration gardens for neglected indigenous nutritious crops and herbs
- Mobilise clients to promote messages on food and nutrition security
- Work to change negative cultural beliefs and practices
- Serve as role models for good health, nutrition, water, sanitation, and hygiene practices
- Link communities with service providers on food and nutrition security, such as extension workers

Extension Workers

Community Development Officers (Mobilisers)

- Lead community mobilisation efforts and community planning for food and nutrition security
- Coordinate and follow up on action plans
- T echnical backstopping during community planning sessions

Agriculture Extension Workers

- Identify model farmers who can grow demonstration plots
- Sensitize and educate households on modern farming methods to improve production, including organizing demonstrations and exhibitions
- Encourage and support households to adopt new crops and livestock varieties to improve food and nutrition security

4.1 continued

- Encourage farmers to have a mixture of enterprises for regular, periodic, and long-term income
- Provide information to farmers on causes and consequences of food and nutrition insecurity
- Provide information on climate change issues
- Sensitize communities on appropriate post-harvest management, household food processing, and food preparation

Health Extension Workers (Village Health Teams and Health Assistants)

- Provide community resource persons and other mobilisers with accurate health and nutrition information
- Integrate food and nutrition security issues into work plans, budgets, and reports
- Monitor food and nutrition security at the community level
- Refer malnourished individuals for appropriate care
- Conduct home visits to promote food and nutrition security
- Provide counselling services to families at risk of malnutrition and food insecurity
- Conduct follow-up visits to provide appropriate counselling on food and nutrition security
- Conduct community education sessions or other community health and nutrition interventions to promote food and nutrition security

Session 5: Introduction to Community Dialogue, Food Security, and Food Insecurity

By the end of this session, participants will be acquainted with:

- Community dialogue as the key community mobilisation approach
- Basic knowledge on food security and the causes and consequences of food insecurity

Session outline [180 minutes]

Definition of and rationale for community dialogue

- Do's and don'ts of community dialogue
- Dialogue spark
- Understanding of food security
- Understanding food insecurity

Binder contents

Handout 5.1: Engaging the Community to Discuss Food Security and Food Insecurity

Materials needed

 Computer, projector, flip chart from community mobilisation package, VIPP cards or flip charts, markers, masking tape

Step 1: Session objectives (5 minutes)

Show slides 41–42 to introduce the session and its objectives.

Step 2: Basics of community dialogue (30 minutes)

- Ask participants to brainstorm on the meaning of 'community dialogue'. Acknowledge their contributions and present slide 43, which shows the meaning used in the guide.
- Show slide 44. Explain that the guide focuses on community dialogue as the preferred approach to community mobilisation, and explain the rationale for community dialogue.
- Ask participants to brainstorm on what they think should be avoided or emphasized during community dialogue. Acknowledge their contributions and present the do's and don'ts of community dialogue on slide 45.
- Tell participants that there are useful tips on community mobilisation in Annex II of the guide.

Step 3: Dialogue spark (10 minutes)

Show slide 46 and explain what a dialogue spark is.

- Ask a participant to read the dialogue spark in Handout 5.1, and ask the participants to reflect on it in the context of food and nutrition security.
- Show card 10 of the package flip chart. Give participants a few moments to read the card.
 Explain that you will start a discussion by asking them questions and that they should respond as if they were community members.
- Begin a discussion by asking the questions in Handout 5.1. (The questions also appear on page 21 of the guide.)

Step 4: Understanding food security (10 minutes)

- Ask participants to brainstorm on the meaning of food security. Acknowledge their responses and present the definition on slide 47.
- Tip for participants: Mention to participants that through community dialogue, community
 members should be encouraged to come up with what they consider to be signs of
 household food security level in their community.

Step 5: Understanding food insecurity (125 minutes)

- Ask participants to form three groups. Have each group brainstorm and agree on one of the following topics and post their answers on a flip chart or VIPP cards for a gallery walk:
 - o Group 1: Definition/description of food insecurity and its signs at the household level
 - o Group 2: Causes of food insecurity
 - Group 3: Consequences of food insecurity
- Have the groups present their answers to the rest of the participants through a gallery walk.
- Show slides 48–50 on the definition, causes, and consequences of food insecurity.
- Invite and answer any questions about the session.

Engaging the Community to Discuss Food Security and Food Insecurity

Community development officers and workers use various approaches in community mobilisation. These can include workshops and training, home and village improvement campaigns, barazas, community dialogue, functional adult literacy, and formation and registration of community-based and nongovernment organizations. However, *Community Mobilisation on Food and Nutrition Security:* A Guide for Community Mobilisers focuses on community dialogue and home and village improvement.

Facilitating Community Dialogue on Improving Food and Nutrition Security

Community dialogue is an approach for community mobilisation and empowerment. It involves a continuous exchange of views and ideas among a given community about an issue or concern in order to build a common understanding to promote individual, family, and community action that improves or changes the situation. The process begins with an expression of concern about an issue or problem that affects the community, which encourages further dialogue and action until the situation changes to the satisfaction of the concerned community.

Rationale for Community Dialogue

- Achieve a common understanding of the problem and its extent
- Identify the roles of key stakeholders in addressing the problem
- Identify local resources (e.g., human, financial, and material) to address the problem
- Commit to feedback between the community and service provider
- Build public consensus and commitment necessary to generate action for better outcomes
- Stimulate action and tracking of progress for accountability
- Promote community ownership of the solution

Do's and Don'ts

- Avoid being a preacher and advisor—listen to what people have to say
- Create a culture wherein people freely express their ideas, fears, needs, and aspirations
- Do not impose your advice and solutions on people—seek to jointly develop a way forward

See Annex II in the mobilisation guide for additional tips on community mobilisation.

Getting Started: Using the Dialogue Spark

To get started, engage community members in a practical dialogue exercise as presented below. Ensure participation of women, men, youth, children, and leaders.

The Dialogue Spark: 'According to reports from agricultural extension workers and health workers reaching the sub-county, there are food shortages in a number of households. Some households have one meal a day. At the same time, some of the children look weak and short compared to children of more or less the same age in the neighbourhood.'

Use the following discussion guide and flip chart cards 10 and 11 to conduct a dialogue on the food we eat:

a. Looking at card 10, what practices do you see that promote food security?

5.1 continued

- b. What food do you mainly eat in your home?
- c. How is it acquired?
- d. Who in the household participates in producing this food?
- e. How much is produced?
- f. Does the food you produce take you to the next harvest?
- g. Do some families keep livestock? If so which animals? What are they used for?
- h. What is a balanced diet? (After participants respond, show card 11 to encourage discussion.)
- i. Do the foods you eat in your home form a balanced diet?
- j. If not, what are the likely consequences for children, women, and families?
- k. What can we do to produce and consume a balanced diet in our households?

Food Security and Food Insecurity

Having basic knowledge and understanding of food security and its implications will help communities and households take action to promote food security. This section helps you as a community mobiliser explain food security as well as food insecurity to community members.

Food Security at the Household Level

- Food security means that a household has enough quality food for the household to eat at all times. Households are food secure when they have year-round access to the amount and variety of safe foods their members need to eat to lead active and healthy lives.
- Food security can be achieved through a household's own production, buying food, exchanging non-food for food items, or any other means available and acceptable in the community.
- It helps if all or the majority of household members participate in activities that ensure enough food is available for the family, while still fulfilling important roles, such as attending school.

Causes of Food Insecurity

The following provides information that can be shared with the community during the discussions.

Low Agricultural Productivity

- Poor methods of farming
- Inefficient production technologies
- Low-quality planting and stocking materials
- Inadequate knowledge and information (includes reluctance to participate in training and lack of access to training)
- Sickness leading to loss of valuable labour
- Land degradation
- Low soil fertility and quality
- Poor post-harvest and storage practices and facilities
- For livestock: Disease, lack of access to vet services, theft/raiding

Climate/Weather/Environment

Drought, floods, and other natural disasters

Environmental degradation

Emphasis on Market-Oriented Production

- Selling most food produced in the market and income not invested in alternative food
- Cash crops grown at the expense of food crops and income not invested in food

Low Levels of Education/Literacy

- Limited information on farming
- Lack of confidence to seek relevant advice and support
- Low pace of adoption of efficient methods and technologies of production

Traditional Beliefs and Practices

- Cultural beliefs that food production is the domain of women (men are not expected to support their wives, even though the women may not be able to produce enough on their own)
- Restrictions on certain foods for children and women
- Cultures in which men eat first (if food is not adequate, this will negatively impact the rest
 of the household)
- In female-headed households, lower literacy among women, higher burden of work, and lower income
- Limited rights for widows, who may lose access to land
- Land ownership, control, and access mainly dominated by men

Land Shortage and/or Fragmentation

- Very little land available for food production
- Large families without matching resources coupled with lack of family planning
- Limited family investment in farming

Domestic Violence

- Physical and emotional trauma that affects women's ability to work, care for themselves, and care for others
- Depression, helplessness
- If spouses separate:
 - o Living costs become more expensive, making it harder to provide enough food
 - Home is left without a woman to provide food and care or without a man to provide for material needs

Poverty

- Not enough money to invest in farming
- Need to sell surplus harvest right away, when prices are lower
- Poor attitude by some members of the community towards work and farming
- Not enough money to buy food to make up for shortage in production

Death or Incapacity of Parents/Adults/Caregivers

Child-headed households are vulnerable

Rural-Urban Migration

Households are deprived of agricultural labour

Effects of Food Insecurity

The following provides information that can be shared with the community during the discussions.

- Food insecurity leads to malnutrition with a host of consequences (the consequences of malnutrition are in Handout 6.1 and on page 35 of the mobilisation guide)
- Domestic conflict/violence due to stress on the household
- Children may leave school to find work or income to buy food; their lack of education makes it hard to break the cycle of poverty, which may be passed on to the next generation
- Families may sell household assets to buy food, leaving them more vulnerable
- Some families may find it tempting to eat some or all of the seed if they don't have enough food, which reduces production in the coming season
- Environmental degradation as affected families encroach on wetlands and forests, which further complicates the food situation
- Family and communal conflicts over land that is viewed as public (kalandalanda)
- Family or community conflicts resulting from food insecure households stealing from food secure households
- Family members traveling out of the community to look for work
- Inability to work because individuals are malnourished

Session 6: Introduction to Good Nutrition and Malnutrition

By the end of this session, participants will be able to explain:

- Basic information on good nutrition and malnutrition
- Signs of good nutrition
- Causes and consequences of malnutrition

Materials needed Session outline [90 minutes] **Binder contents** Understanding good Handout 6.1: Good Nutrition Computer, projector, VIPP nutrition and Malnutrition cards, flip charts, markers, masking tape, flip chart Understanding Handout 6.2: Go, Glow, and from community malnutrition **Grow Foods for Good** mobilisation package Causes and consequences Nutrition of malnutrition Signs of malnutrition among children

Step 1: Session objectives (5 minutes)

• Show slides 51–52 and introduce the session and its objectives.

Step 2: Brainstorm on good nutrition and malnutrition (25 minutes)

- Divide participants into four groups to brainstorm on the questions below. Have the groups record their responses on VIPP cards and flip charts. Explain that they will share their responses with the other groups through a gallery walk and a brief presentation. (Groups can also draw pictures to use in their presentations.)
- Group 1: What is good nutrition? What are the signs of good nutrition? Which groups of people are most likely to be well nourished?
- Group 2: What is malnutrition? Which groups of people are most likely to suffer from malnutrition? What are the signs of malnutrition? What are signs of malnutrition specifically among children?
- Group 3: What are the characteristics of the households or people in the community that you would consider to be malnourished? What causes malnutrition?
- Group 4: What consequences of malnutrition do households and the community face?

Step 3: Gallery walk and group presentation (30 minutes)

Ask participants to quietly examine each group's work during the gallery walk and note
questions. Allow each group 5 minutes to present to other participants, and then facilitate
discussion among participants.

Step 4: Presentation on good nutrition and malnutrition (30 minutes)

- Present slide 53 and cards 11–12 on good nutrition, emphasizing the Go, Grow, and Glow foods
- Present slides 54–59 and card 13 on malnutrition, its signs, causes, and consequences.
- Invite and answer any questions on the session.

Good Nutrition and Malnutrition

Household Nutrition

Nutrition is important throughout the life cycle—pregnancy, infancy, childhood, adolescence, and adulthood. The following provides some basic information on nutrition that can be shared with the community during the discussions.

- Good nutrition means eating the right food, at the right time, in the right amounts (quality and quantity) to ensure a balanced diet. It should be prepared in a clean, safe way and stored safely.
- To ensure good nutrition for the household, there should be a balance between selling harvest and livestock for income and keeping enough for the household's dietary needs.
 Selling most of the harvest and livestock products and leaving little or nothing for the family exposes them to malnutrition, unless the family uses some of the money from the sale (or other sources) to buy alternative food.
- To ensure good nutrition, household members need to eat a variety of foods from both crop and animal sources on a regular basis. These may include: animal sources such as chicken, goat, beef, liver, eggs, milk, fish (including mukene and nkejje), edible insects, and edible rats; staple foods like millet bread, matooke, and sorghum; other starchy foods like potato, pumpkin, posho, cassava, and rice; beans and lentils; vegetables of various colours such as carrots, nakati, dodo, and pumpkin leaves; and fruits such as mango, pawpaw, avocado, sweet banana, guava, and pineapple. Some foods can be produced by the household while others can be accessed through the market or community social support systems.
- It is good for all members of the family to participate in activities that contribute towards good nutrition.
- For good nutrition, a household needs to eat a combination of crop- and animal-based foods whether produced or bought.
- It's important for infants 0–6 months of age to be fed breast milk because it contains what they need to grow and develop.
- From 6 months to 2 years of age, children should be given food in addition to breast milk.
 Gradually increase the amount and thickness of food and the number of meals a day as children get older:
 - o 6-8 months: 2 to 3 meals/day and 1 or 2 snacks if needed
 - o 9–11 months: 3 to 4 meals/day and 1 or 2 snacks if needed
 - o 1-2 years: 3 to 4 meals/day and 1 or 2 snacks if needed
- From 2 to 5 years of age, children should eat three meals and two snacks with increasing amounts as needed.
- Pregnant women and breastfeeding mothers need to eat at least an extra meal each day.
- Pregnant women should attend at least four antenatal clinic visits, take iron and folic acid supplements as prescribed, and deliver in a health facility.
- Pregnant women should be accompanied by their spouses to antenatal clinic visits.
- The sick may need to be fed more frequently per day from a variety of foods.

What Is Malnutrition?

Malnutrition is a condition that develops when the body does not get the right amount and kinds of food needed to stay healthy. Undernutrition is when a person doesn't get enough of the right kind of food, or his/her body cannot use the food eaten because of illness. Overnutrition is when a person gets too much. The focus of the mobilisation guide is on undernutrition, which can occur because of food insecurity. There are three categories of undernutrition:

- Acute malnutrition is when a person is very thin (also called wasting, or low weight-for-height)
 because he/she is not eating enough food or because of sickness. People with acute malnutrition
 may also have two swollen feet (called bilateral pitting oedema). Children with severe acute
 malnutrition are at high risk of death and need urgent medical care.
- Chronic malnutrition happens when a person has had long-term lack of food or repeated illness that has affected growth, so he/she is short for his/her age (called stunting). Stunting can begin in the womb, and children are at the highest risk of stunting from within the womb until they are 2 years of age. Once children have lost growth, it is hard to correct, especially after 2. It should then be prevented with a healthy diet and good medical care.
- Micronutrient deficiencies occur when people do not eat enough food with the right quantity and type of vitamins and minerals, or their bodies do not absorb the vitamins and minerals. This makes them more likely to get sick and may hurt children's growth and brain development. In Uganda, the focus is on getting more vitamin A, iron, and zinc. Eating many different foods like animal flesh (such as beef, goat, chicken, and liver), beans and nuts, red and orange fruits and vegetables, and iodized salt will help.

Causes of Malnutrition

Household Food Insecurity

Poor access to different foods, not enough variety of foods, and low agricultural production

Not Eating Enough Food or Different Kinds of Food

- Eating fewer times than needed
- Eating too many staples and not enough vegetables, fruits, and animal-source foods like eggs, meat, dairy, and fish

Poverty

- Not enough money to buy different types of food
- Not enough money to pay for health care
- Inadequate access to good land for farming
- Unable to afford planting and stocking materials

Inadequate Care for Mothers and Children

- High daily workload for women, resulting in not enough time for nutrition and health needs
- Limited knowledge on good nutrition and caring practices
- Having frequent pregnancies very close together

Poor Access to Health Care and a Healthy Environment

Poor sanitation and hygiene, increasing risk of illness

- Poor food handling practices, increasing risk of illness
- Poor access to health care and nutrition support services
- Not seeking health care when necessary

Illnesses (chronic and others)

- Poor appetite and not eating enough food when sick, even though the body needs more food to fight illness
- Unable to properly absorb/use the food eaten when sick
- Too weak to grow own food when sick
- Cost of managing illness, which reduces the amount of money that would have been used to produce food or buy it in the market

Traditional Beliefs and Practices

- Beliefs that deny women and children nutritious foods
- Lack of participation of men and boys in food production and caring for family members
- Women denied access to adequate land for production of nutritious foods
- Women being unable to seek medical help without permission of their spouse

Low Levels of Education

- May not take health care seriously or recognize when it is needed
- May lack knowledge about good food and nutrition
- May be reluctant to change opinions or practices
- May experience poverty and have lower income

Poor Water, Sanitation, and Hygiene Facilities, Practices, and Beliefs

- Unsafe practices that lead to diseases that interfere with appetite and make it hard for the body to absorb nutrients
- Time spent fetching clean, safe water if far away, which may reduce time available for providing good nutrition

Safe water, sanitation, and hygiene practices include:

- Drinking boiled or treated water, storing drinking water in a covered container with a narrow neck, and serving by pouring or with a clean ladle
- Using a latrine or burying faeces away from the house
- Washing hands with soap/ash under poured/flowing water at key times like before touching, preparing, or serving/feeding food; after using the toilet, cleaning up a baby or a person who has defecated; tending to a sick person; and handling animals
- Preparing food in clean areas, covering food to protect from pests, cooking food thoroughly, and keeping raw and cooked food separate
- Keeping livestock out of the house and sweeping compound

Consequences of Malnutrition

Use the information below to point out the consequences relevant to the community that may have been left out during discussions.

Sickness and Death

- Malnourished mothers are more likely to have low-birth-weight babies
- Such babies are more likely to be sickly and are more likely to die from illness than wellnourished babies and children
- Not having enough blood (anaemia), which is associated with malnutrition and affects many women and children, can lead to death
- Increased chances of loss of pregnancy (spontaneous abortion), premature births, and stillbirths
- Children who are malnourished are also more likely to get sick and more likely to die from sickness

Reduced Agricultural Productivity

- Malnourished people are weak and may not have as much energy to work in agriculture as well-nourished people
- Malnourished individuals get sick more often, and during time of their illness they may not be able to work
- Other household members will have less time to work as they spend time looking after the sick or dealing with death and its effects

Poverty

- Money that would have otherwise been invested is spent on managing malnutrition and associated illnesses
- Severe malnutrition itself is a disease which is expensive to manage/treat
- Households have less income because they have less time and energy to spend on farming
- Malnourished individuals are generally less productive

Poor Education Outcomes

- Malnourished children miss classes because they are weak and sick
- Malnourished children have trouble concentrating in class
- Malnourished children are more likely to repeat classes or drop out of school

Poor Mental and Intellectual Ability

 Malnutrition starting in the womb to 2 years of life (known as the first 1,000 days) leads to poor and irreversible mental and physical development of an individual

Go, Glow, and Grow Foods for Good Nutrition

Household members must eat a variety of foods from both crop and animal sources regularly. Some foods can be produced by the household while others can be accessed through the market or community social support systems. Good nutrition includes 'Go', 'Glow', and 'Grow' foods:

- Go foods (energy-giving foods) include millet bread, matooke, sorghum, potato, pumpkin, posho, cassava, rice, and animal-source foods such as goat, beef, chicken, edible rats, liver, milk, and eggs.
- **Glow foods** (protective foods) include green leafy vegetables (nakati, dodo, pumpkin leaves, malakwang), other vegetables (carrots, cucumber, eggplants, capsicum), and fruits (mango, pawpaw, avocado, sweet banana, guava, pineapple).
- **Grow foods** (body-building foods) include animal-source foods such as fish (including mukene and nkejje), goat, beef, chicken, edible rats, liver, milk, and eggs; plant-source foods such as beans and lentils, and edible insects (ensenene, white ants, termites).

Session 7: Community Dialogue on Food Security and Food Insecurity—Practice

By the end of the session, participants will have enhanced their skills on conducting community dialogue meetings on food security and food insecurity.

Session outline [275 minutes] **Binder contents** Materials needed Role plays on food security **Handout 7.1:** Understanding Pens, paper, flip charts, and food insecurity Food Security, Its Causes, and markers Consequences (also on page Plenary feedback on role 22 of the mobilisation guide) plays **Handout 7.2:** Understanding Food Insecurity, Its Causes, and Consequences (also on page 23 of the guide) **Handout 7.3** Action Planning Template (also on page 14 of the guide)

Step 1: Role plays on food security and food insecurity (155 minutes)

- Introduce the session and its objectives (listed above).
- Have participants form two groups.
- Distribute Handout 7.1 to Group 1 and Handouts 7.2 and 7.3 to Group 2. Explain that the
 groups will first practice a role play described on the handout and then present it to the
 plenary. The groups will choose who plays the roles; group members without a specific role
 will play the 'community audience'. Remind the groups that they can refer to the do's and
 don'ts on community dialogue in Handout 5.1 and the community dialogue tips in Annex II
 of the mobilisation guide.
- Have the groups practice their role plays.

Step 2: Plenary feedback on role plays (120 minutes)

- Have each group present its role play in plenary.
- Ask participants for constructive observations about the groups' performance and recommendations for improving how they engage communities in dialogue.

Understanding Food Security, Its Causes, and Consequences (Group 1)

Select four people for the role play. Have them read the scenario below and decide which roles to play. Three will play the roles given in the scenario, while the fourth will pretend to be a community mobiliser/facilitator who organizes the role play that the other three will perform.

A community mobiliser meets with a husband and wife during a home visit. The mobiliser wants to know what food the household produces, how much they harvest, and which household members help produce the food. The husband tells the mobiliser that he allocated a big part of their land to the wife to produce whatever food crops she wants. The wife says that she is able to mainly produce matooke, potatoes, beans, and groundnuts, which are enough for the household food needs throughout the year. (Note: Replace these with crops applicable in your area.) The children work with her during weekends and holidays. She says that the harvest is good. In addition to eating it at home, some food is sold for cash to pay for school fees and other necessities.

After the three people perform the role play, the person playing the community mobiliser/facilitator who organized the role play should ask the community audience these questions:

- a. What is this story about?
- b. What have you learnt/noticed in the story?
- c. What in the story shows that the household has enough food?
- d. How can household members, both men and women, support food production and/or help a household get food?

Understanding Food Insecurity, Its Causes, and Consequences (Group 2)

Select four people for the role play. Have them read the paragraph below and decide which roles to play. Three will play the roles given in the scenario, while the fourth will pretend to be a community mobiliser/facilitator who organizes the role play that the other three will perform. Note that this role play also involves making an action plan to address food insecurity; the plan can be written on a flip chart, using the planning template in Handout 7.3 (also on page 14 of the guide).

Before one of the community dialogue meetings starts, the community mobiliser has a discussion with a man and a woman who introduce themselves as husband and wife. After greeting each other, they tell him that on this particular day they have no lunch but are going to have supper later in the day. On seeking to understand why, the wife tells the mobiliser that even though they have more than 5 acres of land, only a small portion has been allocated for food production and she single-handedly produces bananas, potatoes, and beans. (Note: Replace these with crops applicable in your area.) Most of the harvest is sold by the husband. He spends the income from crop sales on some household necessities but also on beer and other non-essential items, and the household does not have enough food. The man confirms this and says it is the responsibility of the woman to provide food for the family. He further justifies allocation of a small portion for food production, reasoning that the rest of the land is meant for coffee to raise money for school fees. (Note: Replace coffee with a cash crop relevant to the area.) He also adds that he has the right to sell bananas to get money for beer.

After the three people perform the role play, the person playing the community mobiliser/facilitator who organized the role play should ask the audience these questions:

- a. What is this story about?
- b. What have you learnt/noticed in the story? Are there specific points in the story that show that the household does not have enough food?
- c. Do some households in the community have stories similar to this? If so, what are the causes?
 - d. What is the effect of leaving household food production to only women?
- e. Are there members of the household who are more likely to have less food than others? Why?
 - f. If the household does not produce and/or access enough food, what are the likely effects?
- g. How can household members, including men, support food production and/or access to food so that it is a shared responsibility?
- h. As a community, what actions can be undertaken to promote food security (refer to action plan)? (The person playing the community mobiliser/facilitator who organized the role play then should help the community make an action plan on a flip chart using the template in Handout 7.3.)

Action Planning Template

Identified problem	Agreed tasks	By whom or what agency	By when	Signs of success



Session 8: Community Dialogue on Good Nutrition and Malnutrition—Practice

By the end of the session, participants will have enhanced their skills to conduct community dialogue meetings on good nutrition and malnutrition.

Role plays on good nutrition and malnutrition Plenary feedback on the role plays Handout 8.1: Understanding Good Nutrition (also on page 28 in the mobilisation guide) Handout 8.2: Understanding Malnutrition (also on page 29 in the guide)

Step 1: Role plays on good nutrition and malnutrition (110 minutes)

- Introduce the session and its objectives (listed above).
- Have participants form two groups.
- Distribute **Handout 8.1** to Group 1 and **Handout 8.2** to Group 2. Explain that the groups will first practice a role play described on the handout and then present it to the plenary. The groups will choose who plays the roles; group members without a specific role will play the 'community audience'. Note that Group 2's role play will involve making an action plan based on the template in Handout 7.3. Remind participants that they can refer to the do's and don'ts on community dialogue in Handout 5.1 and the community dialogue tips in Annex II of the mobilisation guide.
- Have the groups practice the role plays.

Step 2: Plenary feedback on role plays (105 minutes)

 Have each group present its role play in plenary. Ask participants for constructive observations about the groups' performance and recommendations for improving how they facilitate community dialogue.

Understanding Good Nutrition (Group 1)

Select four people for the role play. Have them read the scenario below and decide which roles to play. Three will play the roles given in the scenario, while the fourth will pretend to be a community mobiliser/facilitator who organizes the role play that the other three will perform.

In one community, a community-based facilitator spoke with a man named Jaka and his wife Kago, who had participated in training sessions by the agriculture extension officer. Jaka said that they always produced enough food from crops such as bananas, maize, beans, pumpkins, soybeans, a variety of fruits, and milk from cows. (Note: Replace those with related enterprises common in your area.) Before the training, he was selling all the milk, but now he leaves some milk for the family to drink, especially the children. In addition, he used to buy a quarter kilo of beef each Saturday for himself, but now he buys two kilos so that all members of the family can eat it, and he discusses food purchases with his wife, who cooks all the meals. Meanwhile Kago says that since the training, she has supplemented their crops with green and orange/red vegetables around the house. As the cook of the house, she makes sure the family is able to eat bananas (note: replace with any other local staple), vegetable crops grown by the family, and food from animals like meat, fish, eggs, and milk, some of which they buy. She is also careful to wash her hands before preparing or eating any food and feeding her children, and she keeps raw meat away from cooked food. The family only drinks water that she pours from a clean, covered container that she treats with water quard. The man adds that since this enlightenment, he has noticed that the children have not been sick, are happier and active, and have improved in their academic performance.

After the three people perform the role play, the person playing the community mobiliser/facilitator who organized the role play should ask the audience these questions:

- a. What is this story about?
- b. What have you learnt/noticed in the story?
- c. What specific points in the story show that the household eats a number of different foods?
- d. Are there households in your community that eat a number of different foods?
- e. How do the household members look? Are there signs that they 'eat well'?
- f. Why do you think they find it possible to eat a number of different foods?
- g. Apart from food, what good practices is this household using?

Understanding Malnutrition (Group 2)

Select eight people for the role play. Have them read the paragraph below and decide which roles to play. Seven will play the roles given in the scenario (including the four children), while the fourth will pretend to be an agriculture extension officer who organizes the role play that the other seven will perform. Note that this role play also involves making an action plan to address malnutrition; the plan can be written on a flip chart, using the planning template in Handout 7.3 (also on page 14 of the guide).

Last week an agriculture extension officer visited Kampala village and went to the home of Kahonaho and his wife Kombe. Kahonaho's wife said that she is responsible for producing millet, simsim, and beans. (Note: Replace with crops of the same category applicable to your area.) There is not enough produced for the food needs of their family of six children and themselves and, as such, there is nothing to sell. This is made harder by the little land that the family possesses. The man said that he has nothing to do with growing crops and, as a group employee of the nearby secondary school, he earns money that he uses to go to the bar daily and buy a kilo of beef for the family once a week. In the middle of the conversation, four children who were playing around the compound, near where the neighbours' goats and chickens walk, came closer and asked for a drink of water. Kahonaho dipped a cup into an uncovered bin of water and gave it to the children to share. One of the children belongs to Kahonaho and his wife and the rest belong to his brothers. Upon asking about the ages of these children, the extension worker learnt that three of them, including Kahonaho's, are 4 years of age, the difference between them being a few weeks. But Kahonaho's child has curly sparse brown hair, looks weak and smaller than the rest, and falls sick often. The extension worker seeks to know what Kahonaho's family typically eats and is told the family eats one meal a day of mostly millet and beans, but they are in small quantity.

After the seven people perform the role play, the person playing the agriculture extension officer who organized the role play should ask the audience these questions:

- a. What is this story about?
- b. What have you learnt/noticed in the story?
- c. What foods are produced by the majority of households in this community?
- d. What specific points in the story show that the household eats only a few types of foods?
- e. Are there households in your community that are in such a situation?
- f. How do the members or some of the members look? Are there signs that they don't 'eat well'?
- g. In a household, are there members who are likely to eat less well than others?
- h. What causes some households to not 'eat well'?
- i. Apart from malnutrition, are there any signs of bad or risky practices in the household?
- j. What do you think are the consequences of 'bad eating'?
- k. At the household level, what can be done to address malnutrition?
- I. At the community level, what can be done to address malnutrition (refer to your action plan)? (The person playing the agricultural extension officer then should help the community make an action plan on a flip chart using the template in Handout 7.3.)

Session 9: Conducting Home Visits and Making Referrals—Practice

By the end of the session, participants will have enhanced their skills to:

- Prepare and conduct home visits
- Recognize cases of malnutrition
- Make referrals

Session outline [160 minutes]

Guidelines for home visits

Making referrals for

malnourished children

When to consider referral

Filling the referral form

Binder contents

Handout 9.1: Guidelines for Conducting Home Visits and Making Referrals for Malnourished Children

Handout 9.2: Community Referral Form for Use by the Community Mobiliser (also appears on page 38 in the guide)

Materials needed

Pens, paper, flip charts, markers

Step 1: Checklist and role plays on home visits and referral (80 minutes)

- Introduce the session and its objectives (listed above).
- Ask participants to form the same two groups from the previous session.
- Distribute Handouts 9.1 and 9.2 to the groups and ask participants to review them briefly.
- Explain that each group will develop a checklist on conducting a home visit and the characteristics of malnourished children who may require referral.
- Explain that each group also will create its own role play showing how to follow up a household in the community. Explain that the role plays should depict a household that participated in community dialogue meetings on food security and nutrition and that agreed to take simple actions to improve food security and nutrition. The role plays also should include filling out the referral form in Handout 9.2.
- Explain that the groups can use the guidelines in Handout 9.1; the earlier role plays; and the
 handouts on food security, food insecurity, good nutrition, and malnutrition to create their
 checklists and role plays.
- Ask the groups to develop the checklist and to create and practice the role play.

Step 2: Plenary feedback on role plays (80 minutes)

- Ask each group to present its role play in plenary.
- After each role play, ask participants for constructive observations about what was done
 well and what could be improved.

Guidelines for Conducting Home Visits and Making Referrals for Malnourished Children

Depending on the work of a community mobiliser, one may find it necessary to visit homes as part of their work. With respect to food and nutrition security, there are a number of key issues to consider when making home visits. The following may be useful and should be adapted to your specific work and purpose for conducting a home visit.

Guidelines for Home Visits

- Often, you should seek to be accompanied by another community gatekeeper or resource person or just a resident. This is usually very useful to help the mobiliser feel more comfortable in the home and the family to feel more comfortable interacting with the mobiliser.
- Announce your arrival. Following the local custom, exchange greetings and explain the
 purpose of your visit. For example, the visit could be a follow-up to a community
 mobilisation activity in which the household members participated.
- At an appropriate moment in the exchange, ask the hosts to share with you the household status with regard to food and nutrition security. If you have visited previously or if they have participated in a mobilisation activity, find out whether the actions that were agreed on have been implemented.
- Be sure to have enough discussion in order to raise key concerns, identify their causes, and agree to solutions. If it is a follow-up visit, the mobiliser should ensure that follow-up actions are discussed and a way forward agreed upon.
- You should make observations on a variety of issues, such as the environment and hygiene conditions. Praise what is going well and learn about challenges that are facing the family that are keeping them from achieving any agreed-upon actions. Consider the presence of handwashing stations and pit latrines/sanitation facilities and their use, what the family is eating and how often, the status of gardens, the status of food storage, and water containers. Discuss anything that could put the family at risk of food and nutrition insecurity and discuss options to improve their situation.
- When possible, you should agree on a date for a follow-up visit.

Making Referrals for Malnourished Children

In the course of your work, especially during home visits, you may come across children who appear severely malnourished and in need of specialized attention by trained health workers, or children who you think may have a nutritional problem. Such children should be referred to village health teams for further action, using a form similar to the one in Handout 9.2 (also on page 38 in the mobilisation guide) when possible. It should be noted that you can make a referral even if the form is not available. When possible, note the signs of malnutrition, details of the home, and report to any member of the village health team for follow-up.

When Should Referral Be Considered?

If a child has one or more of the following conditions, she/he should be referred to the village health team:

- Rigid, brittle nails
- Failing eyesight
- Change in colour of the skin, sometimes paleness, and many patches on arms and/or legs

- Dull hair lacking sheen, dry, and can be easily plucked
- Pale, dark red, or purple gums
- Sometimes flaked skin; sores on skin, lip, or tongue; and pale lips
- Loss of appetite or digestive disturbances
- Above-normal body temperature
- Shortness of breath while performing normal activity
- Easily irritable and depressed
- Weight loss, including appearing too thin
- Appears shorter than children of the same age
- Swollen feet, ankles, legs, arms, face, or whole body)
- Thin arms and legs, and bloated abdomen
- Diarrhoea or frequent watery stools

Community Referral Form for Use by the Community Mobiliser

Name of child:		Age:	Sex:
Name of mother:			
Name of father:			
Village:	Sub-county:		
District:			_
Referred to Village Health Team (indicate vil	lage):		
Reason for referral:			
Date of referral:			
Referred by:			
Signature of the Community Mobiliser:			



Section 10. Post-Test

By the end of the session, participants will have compared their level of knowledge and skills at the end of the orientation to what they had at the beginning.

Session outline [35 minutes]	Binder contents	Materials needed
 Purpose, structure, and instructions of the post-test 	Handout 1.2: Pre-Test/Post- Test	 Annex I: Answer Key for the Pre-Test/Post-Test
 Post-test 		

Step 1: Explain the purpose of the post-test. Note that the structure and instructions for the post-test are the same as for the pre-test, except that participants will have 30 minutes to complete the post-test.

Step 2: Administer the post-test for 30 minutes.

Step 3: Mark the post-tests using the answer key in Annex I. Post the marks for both the post-tests and the pre-tests with their corresponding participant numbers.



Session 11: Using the Orientation Guide for Community Development Officers (Only for Training of Trainers)

By the end of the session, participants will have become acquainted with the orientation guide and its use.

Session outline [90 minutes]	Binder contents	Materials needed
 Purpose of the orientation guide 	The orientation guide	 Computer and projector
 Sessions in the orientation guide 		

- **Step 1**: Introduce the session and its objective. Make sure each participant has a copy of the orientation guide.
- **Step 2:** Explain the purpose of the orientation guide (see the guide's introduction).
- **Step 3:** Review each session in the guide with the participants.
- **Step 3:** Respond to questions raised.

Annex I: Answer Key for the Pre-Test/Post-Test

Part A: Mark each statement as true (T) or false (F). [22 marks]

	Questions	T/F
1	A community mobiliser is an individual who interacts with various groups of people to influence their knowledge, attitudes, and practices.	Т
2	Community mobilisers do not need to know the principles of community mobilisation for effectiveness.	F
3	Planning for food and nutrition security can be done with an analysis of the situation.	Т
4	It is never helpful to identify and involve the right people to ease community mobilisation efforts.	F
5	Community mobilisation for food and nutrition security necessarily results in an action plan that defines what should be done, by whom, and in what time frame.	Т
6	Schools have no role to play in promoting food and nutrition security.	F
7	Parents and caregivers have an important role to play in promoting food and nutrition security.	Т
8	Community leaders have no role to play in promoting food and nutrition security.	F
9	Parish Development Committees have an important role to play in promoting food and nutrition security.	Т
10	Civil society organizations have an important role to play in promoting food and nutrition security.	Т
11	Religious leaders have no role to play in promoting food and nutrition security.	F
12	Cultural Institutions have no role to play in promoting food and nutrition security.	F
13	Herbalists cannot play any role in promoting food and nutrition security.	F
14	Extension workers have an important role to play in promoting food and nutrition security.	Т
15	Food security means that a household has a lot of food at all times.	F
16	Low agricultural productivity is not one of the key causes of food insecurity.	F
17	Good nutrition means eating a variety of food.	F
18	Diseases, alcoholism, poor planning, and frequent pregnancies are causes of malnutrition.	Т
19	Malnutrition does not lead to either sickness or death.	F
20	Home visits are a key component of community mobilisation.	Т
21	During home visits, you should not seek to be accompanied by a person from the community (gatekeeper).	F
22	While on a home visit, you may come across malnourished children, but there is no way whatsoever to confirm that they are malnourished.	F

Part B: Provide short answers to the following: (67 marks)

1. List the four principles of community mobilisation. (4 marks)

Guidance: These principles are highlighted on page 8 of the mobilisation guide.

2. List the stages you would go through to ensure that your community mobilisation activity results in a community action plan and indicators for success. (5 marks)

Guidance: The five stages are highlighted on pages 9–13 of the guide.

3. Write at least eight questions you would ask to analyse a community's food and nutrition security situation. (8 marks)

Guidance: Questions are on page 10 of the guide, but the list is not exhaustive. The facilitator is expected to use sound judgement and accept sensible, relevant questions from the participants.

4. Write six indicators that would show that a community mobilisation activity addressing food and nutrition security has been a success. (6 marks)

Guidance: Indicators are on page 13 under participatory monitoring and evaluation in the guide, but the list is not exhaustive. The facilitator is expected to use sound judgement and accept other relevant indicators from participants.

5. List at least six stakeholders whose role, position, or office in the community would help mobilise the community to address food and nutrition security. (6 marks)

Guidance: Stakeholders and their roles are given on pages 15–19 of the guide, but the lists for stakeholders and roles are not exhaustive. The facilitator is expected to use sound judgement and accept other relevant indicators from participants

6. For each stakeholder you identified above, write at least two roles they can play in mobilising for food and nutrition security. (12 marks)

Guidance: See guidance for question 5 above.

7. What is the rationale for community dialogue? (2 marks)

Guidance: The rationale is given on page 20 of the guide.

8. What should be avoided during community dialogue? (2 marks)

Guidance: The things to avoid are on page 21 of the guide.

9. List at least five causes of food insecurity in your district. (5 marks)

Guidance: The causes of food insecurity are on pages 25–26, but the list is not exhaustive. The facilitator is expected to use sound judgement and accept other sensible causes from participants.

10. Write at least five consequences of food insecurity in your district. (5 marks)

Guidance: The consequences of food insecurity are on page 27 but the list is not exhaustive. The facilitator is expected to use sound judgement and accept other sensible consequences from participants.

11. List at least five consequences of child malnutrition. (5 marks)

Guidance: The consequences of malnutrition are on page 35, but the list is not exhaustive. The facilitator is expected to use sound judgement and accept other sensible consequences from participants.

12. List three things you need to pay attention to in conducting a home visit. (3 marks)

Guidance: This is about a checklist for a home visits or the things you should be sure to observe/ask such as handwashing facilities, pit latrines, food gardens, food storage facilities, water containers, number of meals in a day

13. List four signs that would lead you to conclude that a child you meet during a home visit is malnourished and should be referred. (4 marks)

Guidance: The signs of malnutrition are on page 37 (under 'When should referral be considered?').

Annex II: Evaluation Form

Date: _____

Ple	ease circle your response to the follo	owing statements.	St	rongly				Strongly
1.	The content was simple and clear.		•	agree 1	2	3	4	disagre 6 5
2.	The topics were applicable to my j			1	2	3	4	5
3.	3. The program was well paced within the allotted time.			1	2	3	4	5
4.	4. The facilitators were good communicators.			1	2	3	4	5
5.	5. The content was presented in an organized manner.			1	2	3	4	5
6.	6. The facilitators were knowledgeable on the topics.				2	3	4	5
	I would be interested in attending vanced workshop on this same sub		ore	1	2	3	4	5
8.	Please rate the following:							
	a. Visualsb. Audibilityc. Meeting spaced. Handoutse. The day overall	Excellent \	/ery Good	Goo	d	Fair		Poor
9.	Which topics did you find mor	e relevant to your	work?					
10.	What did you most appreciate	e/enjoy/think was	best about	the co	urse?			
11.	Any suggestions for improvem	ent?						

Please return this form to the facilitators at the end of the day. Thank you!

Annex III: Morning Review and Session Energizer Suggestions

Fun, friendly, and participatory morning reviews will help ease participants into the day. Facilitators can use any approach they prefer, or they can ask a participant to suggest a game. Some possible ideas are below.

Ball Toss:

- Pass a ball to one participant randomly and ask what he/she learnt yesterday that will be useful in his/her work.
- Have the participant pass the ball to another participant, and continue the process until all participants have shared their impressions.

Game Show:

- Prepare (or ask participants to prepare) questions on key ideas from the day.
- Form teams and score points for every correct answer.

Talk Show:

Interview a panel of participants about what was covered the previous day.

The games also can be used as energizers at the start of sessions. Another option is to have the districts work together to perform or lead energizers. For example, one group of districts can be responsible for energizers for the morning sessions while another group can be assigned the afternoon sessions.





