



DISSEMINATION WORKSHOP ON POSHAN BARAN PROJECT IN RAJASTHAN

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JAIPUR, RAJASTHAN**



INTRODUCTION

In India as per the National Family Health Survey (NFHS-IV), 2015-2016 states that 21% of children under five in India are wasted and data shows that disturbing trend on malnutrition in India. Over a ten year period since 2005-06, the proportion of under-five children suffering from Severely Acute Malnutrition (SAM) has increased from 6.4 % to 7.5% (NFHS-4) and SAM is recognized as public health concern. However, number of programmes has been implemented by central, state and NGOs for malnutrition but still the situation is alarming due to lack of structure for multi-sectoral coordination and convergence approach, which is essential to address the multifaceted nature of malnutrition. Therefore, National Nutrition Mission (NNM) as an apex body launched on 8th March 2018 not only to address under five children but also for PLWs (Pregnant & Lactating Women's). Implementation strategy would be based on intense monitoring and Convergence Action Plan right up to the grass root level. The major targets of the NNM is to reduce stunting, under-nutrition, anemia among young children, women and adolescent girls, and reduce low birth weight by 2%, 2%, 3% and 2% per annum respectively.

POSHAN (Positive and Optimum care of children through a Social and Household Approach for Nutrition) at Rajasthan is one such unique and innovative approach to community-based management of acute malnutrition or CMAM. Under this approach, children in the age group of 06 to 59 months can be treated at their respective homes and family settings where the children are most comfortable. As an advantage of this, POSHAN (CMAM) is able to reach to more children than the traditional facility-based care approach.

POSHAN Phase-I (pilot phase - the programme was piloted in 13 priority districts (10 High Priority Districts (HPDs) and 3 Tribal Districts) was led by NHM, Govt. of Rajasthan with support from development agencies ACF/ AAH, GAIN and UNICEF.

This was one of the unique interventions implemented by Rajasthan Government based on available global guidelines. The POSHAN phase I gave a model of integrating CMAM into health system but there were still few components that needed more insight before scaling it across the state. Therefore, a small project was initiated in two high burdened blocks of Baran district i.e. Kishanganj and Shahabad to generate both technical and operational evidence to guide the scale-up of POSHAN programme. To implement this project on the ground, Action Against Hunger-India/Fight Hunger Foundation supported by providing technical, financial and workforce support.

Thus, a dissemination workshop was organized by AAH/FHF in collaboration with the National Health Mission and ICDS with the objective to share the approaches, strategies followed in implementation, learnings, successes, and challenges that will give insight and direction to plan for upcoming POSHAN-II programme. A total 63 numbers of participants participated including higher and mid-level officials from NHM, ICDS (WCD), Tribal department etc. from state and national level development organizations, CSRs, media groups and CBOs.

PROCEEDINGS

Welcome Address

Dr. Wasundhara Joshi, Director of Fight Hunger Foundation welcomed all the participants and speakers of the workshop. She initiated with sharing the objectives of the workshop and a brief introduction to AAH/FHF work for the fight against malnutrition in India and other countries. She thanked all the participants for attending the workshop and wished that this platform will serve as a basis to arrive at a consensus on policy reforms related to managing malnutrition in the country.

Session-I

Key Note Speaker: Shri Naveen Jain, Secretary, Ministry of Health and Family Welfare and Mission Director, National Health Mission, Govt. of Rajasthan

Mr. Jain started with the experience sharing of POSHAN phase I pilot programme. The POSHAN-I programme was started in December 2015 and it concluded in June 2016 with recovery rate was 88%. A total 2,34,404 children aged between 6 months and 59 months were screened in 41 blocks in 1,574 villages and 9,640 SAM children were identified and enrolled out of which 9,117 children recovered from SAM between 8 and 12 weeks of sustained intervention. 606 children with medical complications were referred to MTC for treatment. He mentioned that theory proved that MUAC is the very good instrument for measuring malnutrition. He appreciated the Poshan Baran programme implemented in vulnerable areas was a fantastic achievement with active involvement of AAH/FHF and their dedicated team. He spoke about the successful intervention within the POSHAN programme and described the strategies that led to a phase-II of the programme. He told it is not necessary that malnutrition has to be treated through drug, doctor and dispensary but it can be treated through AAA including ASHAs, AWWs and ANMs.

Session-II

Ms. Meeta Mathur, HoD- Nutrition and Health, Action Against Hunger/ Fight Hunger Foundation

Ms. Mathur, Nutrition Expert with Action Against Hunger-India/Fight Hunger Foundation shared that the success of the POSHAN Baran Programme can be attributed to the dedicated & collaborative hard work of the functionaries (ASHAs /Poshan Praheri's and AWWs) of the National Health Mission (NHM) and the Integrated Child Development Services (ICDS). The strategically planned and carried out convergent approach on community mobilization prior to the launch of the programme with the government stakeholders, the communities and the traditional healers at the villages played an integral role in the process.

She said the POSHAN Baran project; Rajasthan addressed CMAM in 63 villages of two blocks of Baran – Kishanganj and Shahabad between July 2017 to March 2018, covering 6,304 children. While screening 6,304 children, aged between 6 months to 59 months, 341 children were identified as SAM (Severely Acute Malnutrition) who were treated through the CMAM in which the children were given free POSHAN Amrit i.e., a micronutrient enriched, energy dense nutrition supplement as a take-home ration she said. Apart from this, 402 other children were identified as MAM (Moderately Acute Malnutrition) and were referred to Aanganwadi centers for their treatment. In addition, she mentioned 163 SAM children, 58.42% were cured, while two died, 40 were defaulter, 44 did not recover and five slipped back to SAM. The regular home visits were utilized to regularly monitor the child's health and counsel caregivers regarding hygiene practices, aspects of managing & treating malnutrition. This helped to ensure compliance with the treatment and provide support to caregivers eventually building their capacities in childcare to follow to achieve optimum care of children. The children discharged from the programme were followed for 4 months to ensure they do not fall back to the same state of malnutrition.

She further said that the defaulter children were due to festivals such as teej, raksha bandhan, during monsoon, roads in villages get cut off, mothers going to her maternal house, while children who did not recover, were referred to malnutrition treatment centers.

Session-III

Smt. Roli Singh, Principal Secretary, Women and Child Development, Govt. of Rajasthan

In her address, she mentioned that POSHAN Baran is an excellent example in both the context of preventive and curative approach to tackle malnutrition. She appreciated the efforts of NHM & AAH/FHF for the improvement of MTC in Baran. The study in Kishanganj and Shahabad blocks in Baran will help in the NNM, she told. She said that the POSHAN Baran programme can be used as an example of block or district level convergence action plan when implementing the NNM in the state. She expressed treating malnutrition should not be a government programme, but people's programme. She shared that Panchayati Raj Institutions (PRIs) can play an important role to strengthen the functioning of existing health & nutrition platforms like MCHN and Village Health Sanitation and Nutrition Day.

Session-IV - Development Partners

Ms. Minakshi Singh, Nutrition Specialist, UNICEF, Rajasthan

She shared that out of 17 sustainable development goals, 12 are based on nutrition indicators. Therefore, it is essential to focus reduction of stunting, anemia, low birth weight of children. For successfully achieving the goal of NNM, a convergence action plan is essential. She accentuated the need to have stakeholder and message alignment and all the stakeholder need to work in a unified way to fight malnutrition.

Mr. Tarun Vij, Country Director, GAIN, India

Mr. Vij focused that out of 10 global diseases, six are based on diet quality. Malnutrition is exiting mainly due to lack of micro-nutrient deficiency in the global context. He also mentioned that India suffered double burden of obesity and under nutrition. In India food fortification started in October 2016 and 10 national level consultations were organized. He shared that GAIN will soon implement food fortification in a larger scale including Rajasthan with the inclusion of edible oil and salt in mid- day meal programme and AWC.

Session-IV - Representatives and Government officials from Baran

Dr. Sampat Nagar, RCHO from Baran shared his experiences regarding Poshan- Baran programme. The programme was successfully implemented under the guidance and direction of MD, NHM, Rajasthan. He explained few challenges they have faced. These are strengthening of MIS system, enhance the convergence with ICDS, enhanced mobility support to ensure timely supply of EDNS and need to strengthen the monitoring during follow up phase. He also requested to enhance the treatment period from 8 weeks to 12 weeks for better outcome during Poshan-II.

Vote of Thanks

At the end of the session, Mr. Arish Syed, Executive Director, Action Against Hunger- India/Fight Hunger Foundation thanked all the dignitaries and other participants for their supportive involvement and participation and at the same time mentioned his expectation to work in a common platform for POSHAN-II programme with contributing efforts for combating malnutrition for a KUPOSHAN MUKT Rajasthan

Conclusion

POSHAN Baran was a successful programme and an effective way to treat malnourished children at community level due to fully involvement of team and administrative mechanism, development of guidelines. Definitely it will give a landmark for Poshan-II programme in Rajasthan. The dissemination of POSHAN Baran workshop has successfully done with the participation of various govt. departments and development partners and it has created collaborative approach of core departments working for nutrition. To achieve the goal of NNM, everybody should focus on convergent action plan in district and block level with the support of district and block level administration for tackling malnutrition.

IMAGES OF THE DAY



Shri Naveen Jain (IAS)



Smt. Roli Singh (IAS)



Dr. Wasundhara Joshi



Ms. Meeta Mathur



Ms. Minakshi Singh



Mr. Tarun Vij



Dr. Sampat Nagar



Mr. Arish Syed



Smt. Roli Singh (IAS)





Hindustan Times - Jaipur. 12th April 2018

Times of India - Jaipur. 12th April 2018

Acute malnutrition: 58% children cured under govt project

HT Correspondent
by HT Staff

JAIPUR: Twenty-nine-month-old Sonam, a resident of Kishanganj village in Baran's Shahabad, was identified with severe acute malnutrition (SAM) during screening of children.

Her mid-upper arm circumference (MUAC) measured 90mm and she weighs 4.81kg. She was treated for four months under the community-based management of acute malnutrition (CMAM) following which her condition improved with her MUAC increasing to 129mm and weight went up to 7.95kg, revealed a dissemination workshop on Positive and Optimum care of Children through a Social Household Approach for Nutrition (POSHAN) Baran CMAM project organised by National Health Mission (NHM) and Integrated Child Development Services (ICDS) on Wednesday.

The project was led by the NHM, ICDS, Rajasthan and Action Against Hunger-India.

Action Against Hunger-India head of nutrition Meeta Mathur said the POSHAN Baran project, Rajasthan addressed CMAM in 63 villages of two blocks of Baran-Kishanganj and Shahabad—between July 2017 to March 2018, covering 6,304 children.

While screening 6,304 children, aged between 6 months and 59 months, 341 children were identified as SAM who were treated through the CMAM in which the children were given free nutrition supplement "PoshanAmrit", she said.

Apart from 341 SAM, 402 other children were identified as Moderate Acute Malnutrition and were referred to anganwari centres, Mathur said, adding that 168 SAM children or 58.42% were cured, while two died, 40 were defaulter, 74 did not recover and five slipped back to SAM.

She further said that the defaulter children were due to festivals such as teoj, raksha bandhan, during monsoon, roads in villages get cut off, mothers going to her maternal house among other, while children who did not recover, were referred to malnutrition treatment centres.

A DETAILED STUDY

- As per the National Family Health Survey-4 (2015-16) in Rajasthan, children under 5 years who are stunted is 39.7%, who are wasted is 23%, who are severely wasted is 8.6% and who are underweight is 35.7%.
- The state health department will soon launch an Integrated Management of Acute Malnutrition (IMAM) which will focus on all reasons that result in malnutrition.

NHM mission director Navin Jain said it is not necessary that malnutrition has to be treated through drug, doctor and dispensary but can be treated through A.A.A., the frontline workers, including accredited social health activists (ASHAs), anganwari workers (AWW) and auxiliary nurse midwives (ANMs).

Rajasthan was the first state in India to organise CMAM in 41 blocks of 13 districts, including 10 high priority districts—Banswara, Dungarpur, Jaisalmer, Karauli, Rajasamand, Dholpur, Udaipur, Barmer, Bandi and Jalore—and three tribal-dominated districts, including Pratapgarh, Sirohi and Baran.

A total 2,34,404 children aged between 6 months and 59 months were screened in 41 blocks in 1,574 villages and 9,640 SAM children were identified and enrolled out of which 9,117 children recovered from SAM between 8 and 12 weeks of sustained intervention, Jain said.

The programme was started in December 2015 and it concluded in June 2016. The recovery rate of POSHAN first phase was 88%.

State woman and child development department principal secretary Koli Singh said treating malnutrition should not be a government programme, but peoples' programme.

The study in Kishanganj and Shahabad blocks in Baran, will help in the National Nutrition Mission, she said.

341 malnourished children treated in Baran district

TIMES NEWS NETWORK

Jaipur: Community-based Management of Acute Malnutrition (CMAM) launched in Baran for combating malnutrition has brought fruitful results.

National Health Mission, Integrated Child Development Services (ICDS), and development partners organized a dissemination workshop on the POSHAN Baran CMAM project, Rajasthan on Wednesday.

Out of 6,304 children (6-59 months) screened during POSHAN-BARAN, the officials found that there were 341 children with severely acute malnutrition (SAM). The officials of government departments and development partners enrolled these children for their treatment. Now, they claimed that they treated these children comprising 52% boys and 48% girls.

The POSHAN Baran project, Rajasthan, addressed CMAM in two blocks of Baran, Kishanganj and Shahabad during July 2017– March 2018 covering 6,304 children.



BIG INITIATIVE

Health department officials said that since the vulnerable status of Sahariya community and malnutrition of children, this district comes under high priority and it had been chosen for the 'POSHAN' programme by the state government.

Officials said that as per the Census 2011, Baran district (total population of 12.23 lakh) has 23% of tribal population, with a very high proportion of Sahariya tribe in Shahabad and Kishanganj blocks of the district.

They said that the National Family Health Survey-IV (2015-16) revealed that in Baran district, stunting and underweight rate among children is 40.2% and 41.1% respectively. The major concerns on wasting and severely wasting rates are 28.5% and 10.6% which are higher than the state data (23.0% and 8.6% respectively).

The project was led by the NHM, ICDS, Rajasthan and Action Against Hunger-India with the support of UNICEF, GAIN and TATA Trusts. During the workshop, the officials who took up the project shared the outcomes, experiences and learning of the project for improved consequences in Integrated Management of Acute Malnutrition (IMAM).

The workshop was attended by a number of government officials from the Department of Health and Family Welfare, Women and Child Development, Tribal Affairs, and local Administration from Baran, along with development agencies and CSRs working in Rajasthan.

समाचार जगत

पोषण प्रथम के अनुभव कुपोषण निवारण में व्यापक गाइडलाइन बनाने में महत्वपूर्ण

जयपुर (कास)। प्रदेश के बारां जिले में सफल संचालित हुए समुदाय आधारित कुपोषण प्रबंधन कार्यक्रम (पोषण) के अनुभवों को साझा करने के उद्देश्य से बुधवार को डवलपमेंट पार्टनर एक्शन ऑगेंस्ट हंगर-इंडिया फाईट हंगर फाउंडेशन के सहयोग से स्थानीय होटल में कार्यशाला का आयोजन किया गया।

महिला बाल विकास की प्रमुख शासन सचिव रेली सिंह ने कुपोषण दूर करने के लिए राष्ट्रीय पोषण मिशन में राजस्थान की रणनीति विषय पर प्रकाश डाला। उन्होंने बताया कि पोषण प्रथम के अनुभव कुपोषण निवारण में व्यापक गाइडलाइन बनाने में महत्वपूर्ण साबित हो रहे हैं। स्वास्थ्य सचिव एवं मिशन निदेशक एनएचएम नवीन जैन ने बताया कि वर्ष 2015-16 में बारां जिले सहित सी-मेम पोषण कार्यक्रम में चयनित 13 जिलों में संचालित कर अतिकुपोषित 9 हजार 117 बच्चों को कुपोषण मुक्त किया गया। राजस्थान में डवलपमेंट पार्टनर्स के सहयोग से हुए इस नवाचार को अन्य राज्यों ने भी राजस्थान का माडल अपनाया है। उन्होंने बताया कि इस चरण में चयनित इन जिलों में 2 लाख 34 हजार बच्चों की



कुपोषण की स्क्रीनिंग की गयी। इस कार्यक्रम में प्रत्येक स्तर पर सचन मानिट्रिंग की गयी थी। पद्मश्री डॉ. एम.के. भान ने भी राजस्थान में हुए इस नवाचार को गोल्ड मेडल की संज्ञा दी थी। इन कार्यक्रम में हुए सकारात्मक प्रयासों एवं श्रेष्ठ अनुभवों को सभी के साथ साझा किया। मिशन निदेशक ने बताया कि पोषण प्रथम के सफल क्रियान्वित के बाद वर्ष 2017-18 में इसी तरह पर बारां जिले के किशंगनज एवं शाहबाद

ब्लाक के चयनित 63 गांवों में पोषण बारां कार्यक्रम संचालित कर 341 अतिकुपोषित बच्चों को कुपोषण मुक्त किया गया। उन्होंने सी-मेम पोषण के दूसरे चरण में और भी प्रभावी कार्ययोजना बनाते हुए, बेहतर समन्वय के साथ कार्य करने की आवश्यकता प्रतिपादित की। उन्होंने कहा कि चयनित 20 जिलों में पोषण कार्यक्रम के द्वितीय चरण में पुराने श्रेष्ठ अनुभवों को शामिल किया जाएगा।

Nutrition mission brings positive results in Baran

Amit Bhatt @bhattamit

Jaipur: A nutrition program successfully implemented recently in Baran district has proved that the synchronization between different government departments is an effective key to treat malnourished children at community level. The program outcome has come at the time when the union government has launched National Nutrition Mission (NNM), a convergence based nutrition program recently and state health department also, after successful completion of community-based management of acute malnutrition (CMAM) in Rajasthan, going to launch its second phase as

IMAM soon. The program POSHAN-BARAN was implemented during July 2017 to March 2018 covering 63 villages of Shahabad and Kishanganj blocks in Baran, district. Out of 6304 children (6-59 months) screened during the program, 341 Severely Acute Malnutrition (SAM) children were enrolled for treatment. The program was implemented by Fight Hunger Foundation (FHH) with the partnership of the National Health Mission and Integrated Children Development Services.

"Out of those, 162 children or 58% of total children found with SAM were recovered after completion of the program," Dr Meeta Mathur,



Principal secretary of the women & child development department Roli Singh and Mission director for NHM Naveen Jain during a workshop.

Head, Nutrition & Health at FHH said. "74 children who did not improve, were referred to MTCs and 44 children could not continue the program for various reasons," she added. As per the National Family Health Survey-4 (2015-16), in Baran district

stunting and underweight rate among children is 40.2% and 41.1% respectively. The major concerns on wasting and severely wasting rates are 28.5% and 10.6% which are higher than the state data which is 23.0% and 8.6% respectively.

SETTING AN EXAMPLE

Principal secretary for women and child development department Roli Singh said that the POSHAN-BARAN program can be used as an example of block or district level convergence action plan when implementing the NNM in the state.

"This program broke the perception that the malnutrition can be treated by only drugs, and dispensaries. It has proved that combination of 'three A' including Asha, Anganwadi and ANM is the key to treat malnutrition," Naveen Jain, Mission Director, NHM said.

बच्चों में कुपोषण दूर करने को अब 20 जिलों में चलेगा अभियान

2015-16 में 13 जिलों में 9117 बच्चों को कुपोषण से दिलाया था छुटकारा

ब्यूरो/नवज्योति, जयपुर

प्रदेश में आगामी दिनों में बच्चों में कुपोषण दूर करने के लिए बीस जिलों में अभियान चलाया जाएगा। पुराने अभियानों के अनुभवों के आधार पर बेहतर रणनीति के तहत अधिक से अधिक बच्चों को कुपोषण से छुटकारा दिलाने की कार्य योजना है। बुधवार को डवलपमेंट पार्टनर एक्शन अगेंस्ट हंगर- इंडिया फाइट हंगर फाउंडेशन के सहयोग से एक निजी होटल में समुदाय आधारित कुपोषण प्रबंधन कार्यक्रम पर कार्यशाला का आयोजन हुआ। इसमें एनएचएम के मिशन निदेशक नवीन जैन ने बताया कि वर्ष 2015-16 में बारां सहित प्रदेश के 13 जिलों में अभियान

चलाकर अतिकुपोषित 9117 बच्चों को कुपोषण से मुक्त कराया था। तब 234000 बच्चों की स्क्रीनिंग की गई थी। इसी तर्ज पर बारां के आदिवासी क्षेत्र किशनगंज व शाहबाद ब्लॉक के चयनित 63 गांवों में पोषण बारां कार्यक्रम वर्ष 2017-18 में किया गया। इसमें 341 अतिकुपोषित बच्चों को कुपोषण मुक्त किया था। बीस जिलों में प्रस्तावित कार्यक्रम में जल्द ही कुपोषित बच्चों की स्क्रीनिंग शुरू की जाएगी। महिला बाल विकास की प्रमुख शासन सचिव रोली सिंह ने कार्यशाला में पोषण प्रथम के अनुभव कुपोषण निवारण में व्यापक गाइड लाइन बनाने में महत्वपूर्ण साबित हो रहे हैं।

Dainik Navjyoti 12th April 2018



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