Nutrition and Education Project for the Critical Age Group 0-5 years Project Leaders: Dr. Ron Fernandes (IDS Board member) & Uma Muppadi (IDS Vice President)

In Partnership with Watershed Organisation Trust, Inc. (WOTR)

According to the United Nations Childrens' Fund (UNICEF):

- child malnutrition is more common in India than in Sub-Saharan Africa. *One in every three* malnourished children in the world live in India.
- The prevalence of malnutrition varies across states, with Madhya Pradesh recording the highest rate (55%) and Kerala among the lowest (27%).
- Malnutrition in children is not affected by food intake alone; it is also influenced by access to health services, quality of care for the child and pregnant mother as well as good hygiene practices. Girls are more at risk of malnutrition than boys because of their lower social status.

Source: http://www.unicef.org/india/children 2356.htm

1. Locality and Target Population.

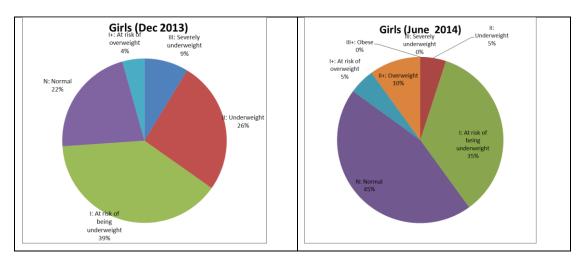
Five Tribal villages of Banar, Barbati, Gadadevari, Khinha and Mukhas-Kalan in Narayanganj block of Mandla district in Madhya Pradesh. Many of these children are severely malnourished.

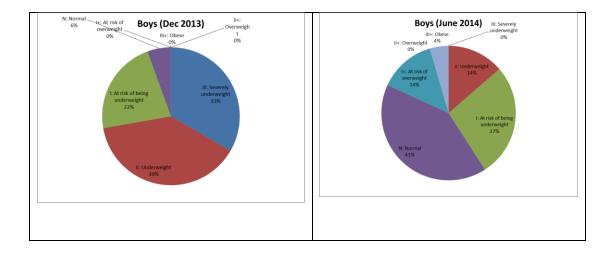
S.No	Village	Growth Monitoring Results as of June 2014
1	Banar	77 children whose growth is being monitored
		3 are severely malnourished
		11 are underweight
		More than 50% at the risk of being underweight
2	Barbati	54 children whose growth is being monitored
		6 are severely malnourished,
		27 are under weight
		15 at the risk of being underweight
3	Gadadevri	42 children whose growth is being monitored
		4 are under weight
4	Khinha	29 children whose growth is being monitored
		1 is severely malnourished
		1 is underweight
5	Mukhas	51 children whose growth is being monitored
	Kalan	5 are severely malnourished,
		14 are under weight
		23 at the risk of being underweight

- 2. Methods.
 - The IDS Nutrition and Education project implemented by WOTR aims to create awareness regarding the importance of balanced diet and essential nutrition required for healthy children living with their parents in a village located on a watershed.
 - It trains mothers with children in the age group of 0-5 years to assess the growth of their children and to provide them with training on the food, health and nutritional needs of their children.
 - It also aims to leverage the resources of Anganwadis (courtyard shelters) initiated by the Government of India in 1975. Anganwadis are funded through the Integrated Child Development Services (ICDS) program to address child hunger and malnutrition. Unfortunately, as with many government schemes in India, the Anganwadi system is underfunded and poorly managed. WOTR organizes and trains the poor, especially women, to effectively utilize Anganwadi resources to ensure their children's health by providing training and guidance to the mothers and the Anganwadi workers and by building local institutions.
 - All of these villages depend on rainfall for irrigating their crops. WOTR adopts a holistic approach by also intervening in the village ecosystems (watersheds) by building *rainwater harvesting systems* to enhance the livelihoods and to provide sustainable incomes to the villages. This in turn, enables them to provide more nutritious foods and better healthcare for their children.
- 3. Impact.

Comparative Analysis of Growth Monitoring Results

The graphs below shows the change in weight outcomes for boys and girls whose growth is being monitored in village Gadadevari from December 2013 through June 2014:





VILLAGE CHILDREN AT ANGAWADI



GROWTH MONITORING CHART DEMONSTRATION



