



# Project POSHAN

# MONTHLY REPORT

## **FEBRUARY 2025**

Project period: January 2024 to March 2025





# **POSHAN: MALNUTRITION FREE VILLAGES**

United Way Mumbai's Project Poshan aims to make villages and communities malnutrition free. The interventions are envisioned with a geographic focus, i.e. a village, and for a period of minimum three years. The project has three key strategies:



**Helping undernourished children fight malnutrition** by providing medical care and nutrition support to undernourished children through home based interventions



Preventing further incidences of undernutrition in the village. We will do this by focusing on the first 1000 days of a child's life and improving the health of mothers and women in childbearing age.



Creating an enabling environment for children to grow. We will do this by building capacities of local stakeholders such as Anganwadi workers and encouraging community ownership.

#### **PROJECT OUTREACH**



5 Villages in Karjat



500 Total children



25 Malnourished children



# **POSHAN: KEY NUMBERS AT GLANCE**

Total number of children

500

Total number of Severely malnourished children

21

Total number of malnourished children receiving nutrition supplements

25

Total number of pregnant women

31

Total number of lactating mothers

38





# **Objective 1: Helping undernourished children fight malnutrition** by providing medical care and nutrition support to undernourished children through home based interventions.

#### Monthly anthropometry of children

The team conducted monthly anthropometric measurements of 404 children in all the villages. Monthly anthropometry is done to monitor and assess the growth and nutritional status of children. Regular assessment helps track growth trends and allows for timely interventions in case of deviations.





Monthly anthropometry of children

#### Home visit to malnourished children

The team conducted 3 home visits to SAM children and 12 home visits to SUW children accompanied by AWW. The team counsels the parents of malnourished children to visit the nearest Poshan center/ NRC for screening and medical treatment.

# Mobilization of malnourished children to Poshan Center/ NRC

2 children visited the Poshan Center this month. The children are referred here to address and improve their nutritional status. The team will continue the follow-up and counselling of the family members of these children. The team is building rapport with the community and focusing more on counselling the parents to visit the Poshan Center.



Home visit to malnourished child



Screening of malnourished children at Poshan centre



#### **Nutrition supplements distribution**

- •Supplementary nutritious foods are being distributed (post parental consent) to all identified malnourished children aged 1 to 5 years.
- •Savoury bajra and jowar mix (selected after careful sensory evaluation and local relevance) are given.
- •All foods provided are in compliance with food safety guidelines issued by relevant government authorities.
- •Impact monitoring will be ensured via the assessment of the simplified daily monitoring formats to be filled by the parents and regular anthropometric measurements of the children.



Nutrition supplements distribution to children in Anganwadi center



**Objective 2: Preventing further incidences of undernutrition in the village.** We will do this by focusing on the first 1000 days of a child's life and improving the health of mothers and women in child bearing age.

#### Home visit to pregnant women

The team conducted 24 home visits to pregnant women. They counselled them nutrition, birth preparedness, orientation about health cards, danger sians. exclusive breastfeeding, Government schemes. and referral services. The Poshan Karyakartas are also accompanied by ASHA workers on their visit.



The team conducted 32 home visits to lactating mothers accompanied by AWWs and conducted needs-based counseling about newborn care, exclusive breastfeeding, complementary feeding, danger signs in neonates, family planning, and malnutrition

#### **Community meeting**

The team conducted 2 education and awareness sessions across Anganwadi centers with 19 community members attending the meetings. These sessions discuss the importance of the first 1000 days of a child, healthy eating habits, malnutrition and it's types, the importance of breastfeeding and techniques.



Home visit to pregnant women



Home visit to lactating mothers



Community meeting conducted by Poshan Karyakarta



**Objective 3: Creating an enabling environment for children to grow**. We will do this by building capacities of local stakeholders such as Anganwadi workers and encouraging community ownership.

#### Adolescent peer group session

The team conducted 2 adolescent peer group sessions for 13 adolescent girls. These groups are educated about menstrual health and hygiene, anemia, the disadvantages of early marriage, substance abuse, mental health, nutrition, etc. through regular sessions.



Peer group session with adolescent girls

#### Mata samiti meeting

The team has conducted 3 Mata Samiti meetings with 24 members attending the meetings. The focus is to encourage the samiti members to refer SAM, SUW and high risk mothers to healthcare facilities and identify problems related to malnutrition in the community.



Mata samiti meeting





#### **Case story**

Village Name: Pali

Date of Birth: 05/22/2005

High risk ANC case

Age: 20 years

During a routine visit to Pali on 1st October 2024, our Poshan Karyakarta conducted a child's weight and height measurements while vaccinations were being administered. During this time, a young pregnant woman was identified, appearing younger than her age. Upon further inquiry, it was discovered that she had recently gotten married. A home visit was conducted along with the Anganwadi worker to gather additional information, revealing that she did not have an MCP card. The ASHA worker was immediately informed, and arrangements were made for her medical check-up the following day, which revealed low hemoglobin levels.

On 17th January 2024, a follow-up visit was conducted to provide guidance on self-care, nutrition, hygiene, and regular check-ups. Her mother-in-law was present and agreed to support her throughout the pregnancy. Regular monitoring visits continued to ensure proper care and well-being.



Home visit to the mother

By 21st February 2025, the woman was in her ninth month of pregnancy. A medical check-up indicated that her hemoglobin was 9.6 gm/dL, and an umbilical cord complication was noted, suggesting the possibility of a cesarean delivery.

On 23rd February 2025, she went into labor early in the morning and was taken to Kadav Government Hospital. However, due to the early hours, she did not receive immediate medical attention. After waiting for two hours, she was transferred to Karjat Government Hospital, where she faced similar delays. Eventually, she was taken to Matoshri Hospital in Karjat, where the attending doctor recommended a cesarean delivery. Upon receiving a call from the mother, the Poshan Karyakarta arrived at the hospital and discussed the case with the doctor, advocating for a normal delivery if possible.

On 25th February 2025, after two days of medical supervision, she successfully gave birth to a healthy baby boy weighing 3 kg. Both mother and child are in good health.



Visit to the mother in the hospital by our Poshan Karyakarta



# **Budget Utilization: as of January 2025**

Sr No	Particular	Total budget	Total expenses	Balance
1	RUTF (24Rs per unit)	70000	70000	0
2	Nutrition supplementation (No. of children x 20 days per month x 4 months x INR 15)	30,000	30,000	0
3	Poshan Karyakarta (outreach worker) 1 ORW per 5 villages (INR 20000 x 5 months x No. of outreach workers)	80,000	38,720	41280
4	IEC material (INR 5000 x No. of villages)	50,000	0	50000
5	Transport of supplements (INR 3000 x No. of villages)	17,500	17,500	0
6	Weighing machine, heightometer, measuring tape, medical equipments, etc (INR 1500 x no. of villages)	25,000	0	25000
7	Nutritionist (Partial cost)	30,000	20000	10000
8	Education activities and community gatherings	75,000	75000	0
9	Project executive (partial salary)	120,000	80000	40000
10	Travel and communication allowance (INR 2500 x No. of personnel x 5 months)	16,000	4470	11530
11	Miscellaneous (@1%)	41,591	5710	35,881
12	UWM admin	55,509	37006	18503
	Total	610600	446909	163691



#### **Way Forward**

- Mata Melava for PNC mothers to create awareness on breastfeeding, complementary feeding, and immunization Health & HB check-up camps for Adolescent girls.
- Adolescent peer educators educating other adolescents on key health-related issues Encouraging VHSNC and Mata Samiti groups to get involved in solving malnutrition-related problems.
- Establishing clubs for mothers where we conduct a pre-post-test to access their knowledge and Hb levels. The club will help them to obtain knowledge in a modular aspect in 1000 days.
- Scaling up the involvement of ASHA and AWW in home visits to malnourished children, and pregnant and lactating mothers. Training them to improve the counseling and encouraging them to accompany the mothers for institutional deliveries.
- Encouraging mothers to initiate breastfeeding within one hour and exclusive breast feeding for six months.



Screening of malnourished children at Poshan centre



### Thank you for supporting Project Poshan



# **SOCIAL IMPACT. DONE RIGHT.**