

Intersectoral Convergence for Improving Access to Nutrition and Health Entitlements of Women and Children, Gujarat

Banaskantha district, Gujarat is one among the backward districts in terms of its performance on health and nutrition indicators and vital rates. Malnutrition level is high; about 70 per cent of young children below six years of age, particularly girls are undernourished. The community health workers cannot reach the community residing in the interior and on the farms is not receiving the health facilities. CHETNA undertook an action-research project to improve access to nutrition and health services through community awareness and prevent malnutrition among pregnant women, nursing mothers and children (0-3 years) through a partnership between Government, Non-Government Organisations. Interventions included:

- **Community awareness:** To strengthen the ICDS and health service delivery, linkages were facilitated with the Dairy Cooperatives to encourage to donate milk for children. Matru mandals (MM) (mothers' group) and Sakhi Mandals (SM) (women friends' group) were enabled to provide support in organising awareness activities at the Anganwadi, during Mamta Divas (Window approach for dissemination of nutrition and health services for Pregnant and Nursing mothers and children below 6 years). CDPOs, Supervisors were trained and mentored to provide support in joint planning and organising activities as well as monitoring.
- Linkages at the district, block and village level: To forge linkages among ICDS and Health and to generate evidence for the corrective measure, MIS and formats/charts were developed jointly by ICDS, Health and CHETNA. Further, a list of undernourished children, non-enrolled children/pregnant women at AWC's, challenges and observation of the area were shared with CDPOs, Supervisors, BHO and MO functionaries. Joint training, planning and review of activities were also facilitated. Quarterly meetings and interaction with District collector and District Development Officer were useful in organising joint activities.

Results

- Enrolment of Children and pregnant women: Through village visits, 85 children and nine pregnant women were identified who were not enrolled in any Anganwadi centre. It was observed that eligible children and pregnant and nursing women were deprived of the ICDS services because there is not enough AWCs to cater to the entire population.
- Undernourished children: 132 undernourished children of Grade 3 and Grade 4 from 42 villages were identified, and the intervention led to improvements in the current situation of these 132 children.
- Coordination: ICDS and Health coordination meetings are now regularly organised

Learnings

- There is a need to form linkages with community-based organizations-VHSNC, MM, SM for effective monitoring of the Anganwadi services.
- There is a need for convergence between ICDS and Health Departments for effective coordination of activities at the village level
- Case studies of undernourished children and good practices, field visit reports, challenges and learning's should be regularly developed and disseminated.

Source: Shukla M, Capoor I, Intersectoral Convergence for Improving Access to Nutrition and Health Entitlements of Women and Children -CHETNA's Experience