



RGMVP

Working for Poverty Reduction and
Women's Empowerment



Together for Nutrition 2014

Working Across Sectors to Improve Nutrition in India

Community based nutrition programme

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Outline

- Background and overview
- Project objectives
- Interventions
- Approaches and methods for collaboration/**Research Methods**
- Key findings/**Results**
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- Acknowledgements

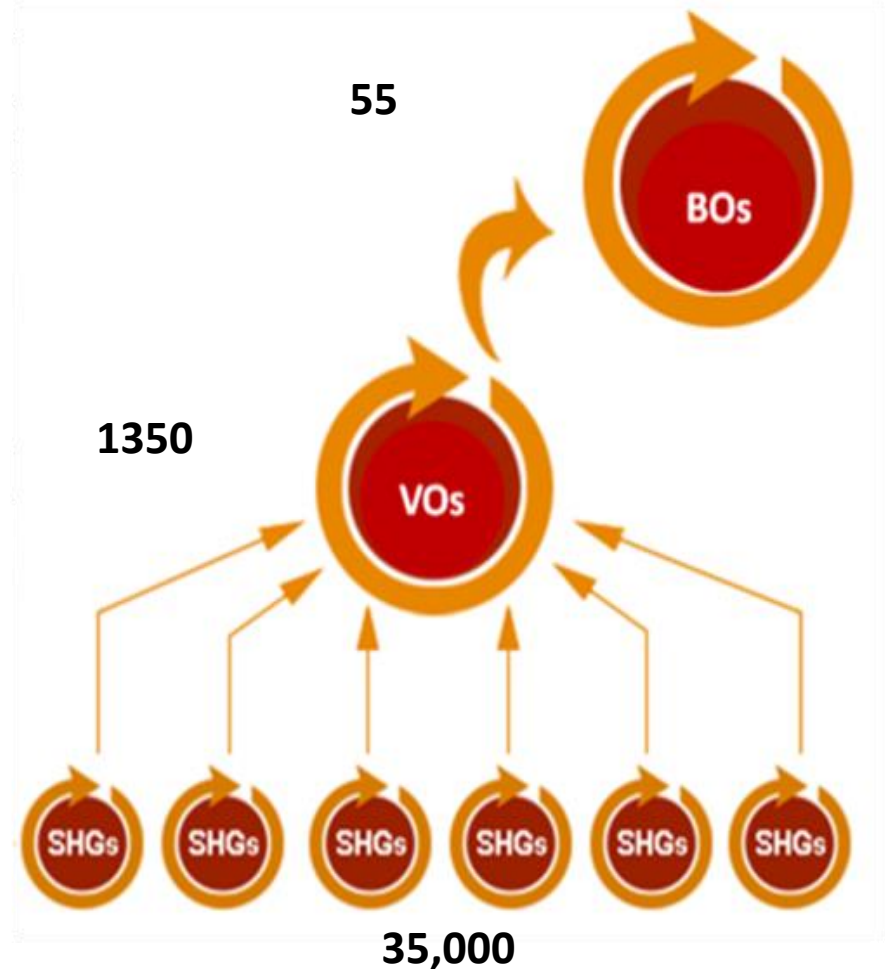
Background and overview

- RGMVP works beyond conventional interventions to break deep rooted barriers that surround the poor
- Promotes social inclusion through women as central change agents
- Has expanded the scope of the SHG model to a social empowerment platform
- Enhances skills and capacity of communities to make decisions and take action to improve their immediate and social environment.
- Encourages adoption of positive behaviours, by changing social and cultural norms.



Background and Overview

- The UP Community Based Nutrition Program was initiated by RGMVP in September 2013 in collaboration with Global Alliance for Improved Nutrition
- The project operations and strategies are in response to the low nutrition parameters and aim at reducing nutritional deficiencies among the most disadvantaged groups within the community which include pregnant women, newborns, new mothers, children (0-6 years) and adolescent girls
- The project is in operational in 55 development blocks spread across 18 districts in Uttar Pradesh. Nutrition layering was introduced on existing federated platforms. An integrated intervention was introduced in 5 blocks



Project objectives

- **Demand Side:** Improve nutrition outcomes with regards to mothers, children, and adolescent girls through awareness generation and behaviour change management interventions.
- **Supply Side:** To enhance the quality and effectiveness of the Government's program delivery (ICDS), both by working through the community to create demand for better nutrition and health services as well as engaging with the government

Creating leadership

The SHGs are structured to systematically disseminate and diffuse information to impact the entire community. The pipeline is not only contributing towards changing behaviours and improving the absorption capacity of the community but also in creating leadership among rural women to address issues around health and nutrition.



Interventions

Demand Side Interventions	Supply Side Interventions
<ul style="list-style-type: none">• Creating and Nurturing SHGs• Expanding through Purva (hamlet) strategy and Diffusion Approach• Building social assets for accelerated outcomes (ISCs, Samooh Sakhis and Swasthya Sakhis)	<ul style="list-style-type: none">• Multilevel engagements with community leaders, volunteers, SHG members• Creating accountability of Front Line Workers by conducting joint home visits• Bridging supply and demand gaps by organizing and facilitating community events for awareness diffusion

Interventions



Approaches and Methods for Collaboration

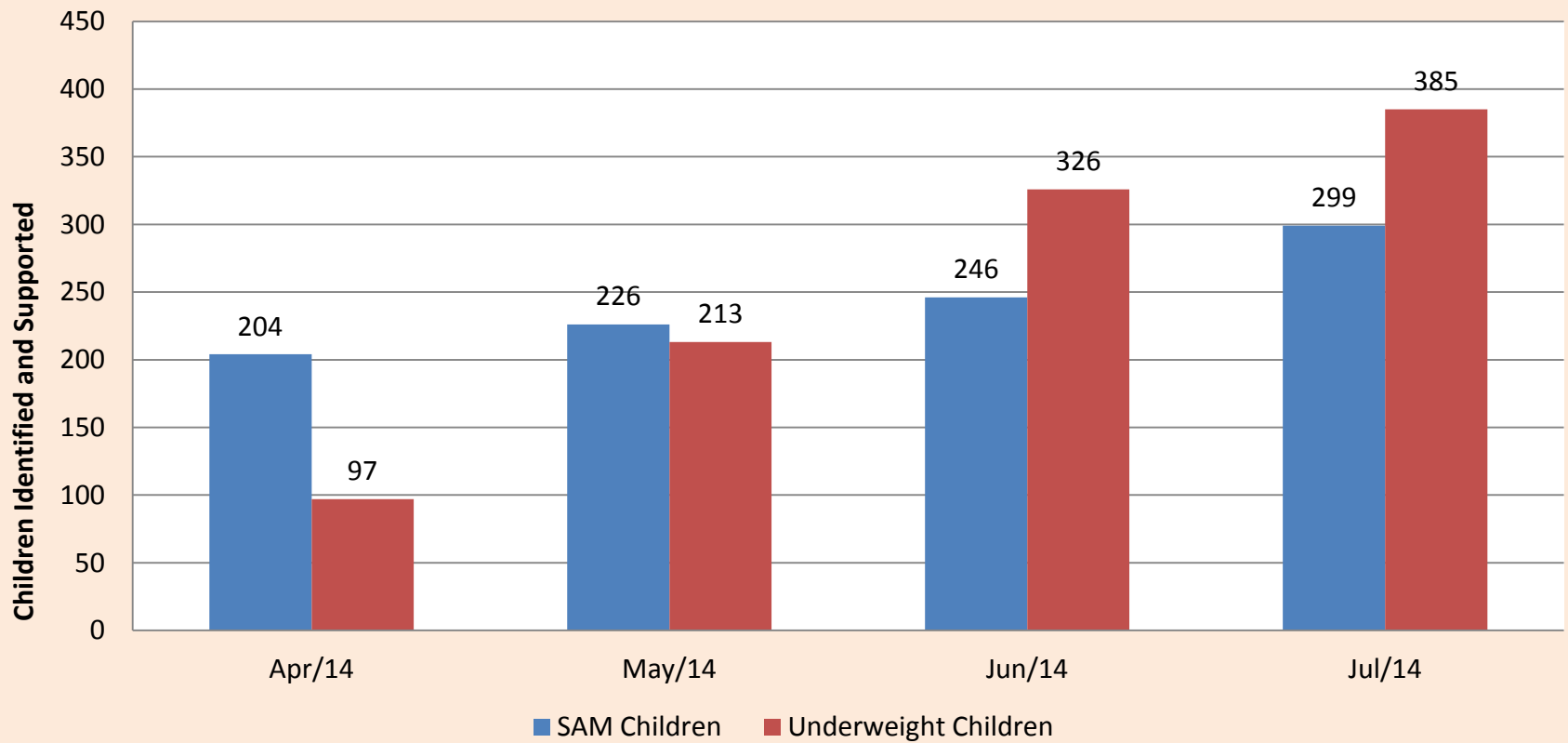
- The partnership is primarily between Rajiv Gandhi Mahila Vikas Pariyojana and the Global Alliance for Improved Nutrition.
- CEDPA (The Center for Development and Population Activities) is currently undertaking a process evaluation and documentation of the 'good practices' within the programme area.
- The programme objectives also include collaborating with various stakeholders namely the Ministry of Health and Family Welfare, Panchayati Raj Institutions, the ICDS system and individuals who are experts in the field of nutrition.

Key Achievements

- Reached out to 350000 women and their households
- Introduced good practices at the community level to activate VHNSC and VHND
- Operationalized the ICDS system in many programme areas as a part of the supply side intervention
- Increased institutional delivery especially among the SHG households
- Improved knowledge, attitude and practices among the community
- Enhanced community interaction with the government systems for improved accountability and delivery mechanisms

Key Achievements

**Underweight and SAM Children
Identified and Supported**



Conclusions and Implications

- In spite of constraints, the community has been able to understand and subsequently adopt practices to improve nutrition intake. This has been possible because of the involvement of the three-tier women's institutions in the conceptualisation and implementation of the project.
- Challenges around sustainability continue to exist if health and nutrition are understood in isolation. Therefore, we hope that the empowerment perspective enables communities to continue their efforts to combat these problems.

Acknowledgements

- Global Alliance for improved Nutrition
- Members of the Community Based Nutrition Programme, RGMVP
- RGCT