ACKNOWLEDGMENTS

WE THANK ALL OUR FUNDING PARTNERS, STATE GOVERNMENT, SUPPORTING AGENCIES, FIELD WORKERS, E-VOLUNTEERS AND EVERY PERSON ASSOCIATED WITH US FOR COOPERATING AND HELPING US IN ACHIEVING THE INTENDED OUTPUTS
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ABBREVIATIONS

AAA-ASHA, ANGANWADI WORKER AND ANM
ANM-AUXILLARY NURSE MIDWIFE
ASHA-ACCREDITED SOCIAL HEALTH ACTIVIST
AWW-ANGANWADI WORKER
BEE-BLOCK EDUCATOR
ICDS-INTEGRATED CHILD DEVELOPMENT SCHEME
NRC-NUTRITION REHABILITATION CENTRE
MIS-MANAGEMENT INFORMATION SYSTEM
IYCF-INFANT YOUNG CHILD FEEDING
VHNSC-VILLAGE, HEALTH AND NUTRITION SOCIETIES
MPLSSM-MADHYA PRADESH LOK SANGHARSH SAJHA MANCH
MGNREGA-MAHATMA GANDHI NATIONAL RURAL EMPLOYMENT ACT
CDPO-CHILD DEVELOPMENT PROJECT OFFICER
VHND-VILLAGE HEALTH AND NUTRITION DAYS
DGRO-DISTRICT GRIEVANCE REDRESSAL OFFICER
MDM-MID DAY MEAL
SAM-SEVERE ACUTE MALNUTRITION
MAM-MODERATE ACUTE MALNUTRITION
NFSA-NATIONAL FOOD SECURITY ACT
TB-TUBERCULOSIS
CHC-COMMUNITY HEALTH CENTER
FRA-FOREST RIGHTS ACT
CRY-CHILD RIGHTS AND YOU
WHA-WORLD HEALTH ALLIANCE
ECCD-EARLY CHILDHOOD CARE AND DEVELOPMENT
ANC-ANTENATAL CARE
TT-TETANUS TOXOID
TOT-TRAINING OF TRAINEE
NHM-NATIONAL HEALTH MISSION
RTE-RIGHT TO EDUCATION
Hb-HAEMOGLOBIN
W AND CD-WOMEN AND CHILD DEVELOPMENT
THR-TAKE HOME RATION
FS AND CW-FOOD SUPPLIES AND CONSUMER WELFARE
NITI-NATIONAL INSTITUTE FOR TRANSFORMING INDIA
SCPCR-STATE COMMISSION FOR PROTECTION OF CHILD RIGHTS
SHG’S-SELF HELP GROUPS
VSS-VIKAS SAMVAD SAMITI
Tdhh-TERRE DES HOMMES
DSAL-DIGITAL SOCIAL ACTION LAB
Introduction

Like in the preceding years, Vikas Samvad’s Annual Report for year 2018-19 rests on its key thematic premises. These are as follows:

Theme I: Digital Democracy

Theme II: Health, Nutrition and Food Security

Theme III: Community-based Management of Malnutrition

The Report informs on projects and research studies undertaken during the reporting year across each of these themes.
1. Model of Community-based E-Dastak Kendra under Digital Democracy Project

Project Objectives

The project intervention on Digital Democracy addresses the following objectives:

1. Ensuring equal access to digital technology and its allied tools for the community, particularly for the marginalized communities; across both the rural and urban areas.
2. Develop community's technical know-how and skills so that not only it can use it as per its needs but also it can participate in the development of plans for better, transparent, and accountable governance in an informed manner.
3. Bring about inclusive digital literacy across all significant stakeholders, using differentiated and yet intensive promotion and encouragement.

Impact of Digital Democracy Initiative

The Digital Democracy Project was implemented in two parts – Intensive and Extensive areas. Accordingly, the Intensive Areas had concentrated initiatives whilst the Extensive Areas went through the ripple effect from the adjoining intensive areas. The objective of implementing this strategy was to be able to evaluate the impact of activities undertaken with the community in a fact-based and comparable manner. In practical terms, identical activities were undertaken in the Intensive and Extensive Areas, but the main difference was in the regularity and follow-ups of the same. Further, the range of activities and the concomitant processes drew upon hands-on support from the project's field teams as well.

Coverage

Under the intensive areas – one Gram Panchayat in rural areas and one part of an urban settlement in the urban areas were taken up, while under the Extensive Areas, two Gram Panchayats in the rural areas and another locality in the same urban settlement were taken up.

In all, 6025 families were involved in the digital democracy project, of which 2612 (43.4%) were in Intensive Areas and 3413 (56.6%) were in Extensive Areas.

In the entire project area, of the 6025 families, 2906 (48.23%) were of Scheduled Tribe (ST) category, while 636 (10.6%) were of Scheduled Caste (SC) category.

Within the Intensive Areas, of the 2612 families, 1192 (45.6%) were of the ST category while 508 (19.5%) were of the SC category.

Within the Extensive Areas, of the 3413 families, 2714 (79.4%) were of the ST category, while 128 (3.75%) were of the SC category.
Strategic Activities

In the Intensive Areas, Street Corner Plays were organized regularly to publicize the information on the project and to resolve queries and address inquisitiveness of the people. During this activity, discussions were held with people and that pamphlets and publicity materials were distributed amongst them. On the other hand, in the Extensive Areas, the publicity through the distribution of materials was not carried out. In the Intensive Areas, 14 street corner plays were staged while in the Extensive Areas; only one street play was staged.

Vikas Samvad Samiti developed a learning material kit for skill development of the community in digital technique. Based on this material, 106 training sessions were organized in the Intensive Areas, while 22 such sessions were held in the Extensive Areas.

Similarly, an initiative was taken to meet the families and hold discussions with them to connect them with the project and to give them information in a clear manner and if they had any queries, the same could be resolved. For this, 2212 families were visited in the intensive areas, while in the Extensive areas, 1923 families were visited. As for the number of intensity of the visits, it is to be mentioned that visits were paid to the families in Intensive Areas averaged 4.7 times, while in the Extensive Areas, visits were paid to families averaging at 1.1 times.

To train the community, especially women and youth in digital technology and system, Participatory Learning and Action (PLA) technique was used. This was used only in the Intensive Areas (24 sessions).

Along with this, community meetings were an important aspect of this project. In the intensive areas, 120 community meetings were organized, while in the Extensive areas, a total of 44 meetings were held. During these meetings, the main aim was to know and understand the problems of the community and also to identify as to which of their problems or issues could be taken up on digital platforms. Through these meetings, it was also regularly followed up to see whether the community uses digital technique and that is it getting proper information and support.

<table>
<thead>
<tr>
<th>Intensive Area</th>
<th>Extensive Area</th>
<th>Total</th>
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<tbody>
<tr>
<td>Number</td>
<td>Percentage</td>
<td>Number</td>
</tr>
<tr>
<td>Total Number of Families</td>
<td>2612</td>
<td>43.4</td>
</tr>
<tr>
<td>Scheduled Caste Families</td>
<td>508</td>
<td>79.9</td>
</tr>
<tr>
<td>Scheduled Tribe Families</td>
<td>1192</td>
<td>30.5</td>
</tr>
</tbody>
</table>

Strategic Activities for Awareness/Outreach

<table>
<thead>
<tr>
<th>Activity</th>
<th>Intensive Area</th>
<th>Extensive Area</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number</td>
<td>Percentage</td>
<td>Number</td>
<td>Percentage</td>
</tr>
<tr>
<td>Activity – 1 Plays, Pamphlet distribution, Poster, and Stalls in the weekly market</td>
<td>8</td>
<td>66.7</td>
<td>4</td>
</tr>
<tr>
<td>Activity – 2 Wall Writing</td>
<td>1</td>
<td>100.0</td>
<td>0</td>
</tr>
<tr>
<td>Activity - 3 FGDs</td>
<td>16</td>
<td>66.7</td>
<td>8</td>
</tr>
<tr>
<td>Activity</td>
<td>Intensive Area</td>
<td>Extensive Area</td>
<td>Total</td>
</tr>
<tr>
<td>----------</td>
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<td>----------------</td>
<td>-------</td>
</tr>
<tr>
<td>4. Information dissemination/Discussions with Sarpanch/Panchayat Secretary</td>
<td>6</td>
<td>42.9</td>
<td>8</td>
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<tr>
<td>5. Regular Community Meetings</td>
<td>45</td>
<td>67.2</td>
<td>22</td>
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<tr>
<td><strong>Strategic Activities for Capacity Building</strong></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>1. Community Meetings</td>
<td>35</td>
<td>32</td>
<td>24</td>
</tr>
<tr>
<td>2. PLA Meetings and Sessions</td>
<td>24</td>
<td>0</td>
<td>24</td>
</tr>
<tr>
<td>3. Home visits by Community Mobilizer and E-Volunteers</td>
<td>2212</td>
<td>53.5</td>
<td>1923</td>
</tr>
<tr>
<td>3.1 Frequency of Home visits</td>
<td>4.7 Times</td>
<td>1.1 Times</td>
<td></td>
</tr>
<tr>
<td>4. Curriculum-based Structured Pieces of training and Sessions</td>
<td>106</td>
<td>82.8</td>
<td>22</td>
</tr>
<tr>
<td>5. Nukkad Natak</td>
<td>14</td>
<td>93.3</td>
<td>1</td>
</tr>
</tbody>
</table>

**Result-oriented Strategies**

The message of the project was to convey that the use of technology could be a key and potential step in increasing participation in systemic processes of the state's governance.

In all, under the Digital Democracy program, 5759 persons in the intensive project areas were given information and knowledge on the use of digital technology to get more information on public welfare schemes using various for a of communication. In the Extensive areas, 3113 persons were provided with such information.

The effort under the project was to ensure that the process did not remain limited to the spread of information, but that the residents in the project areas get trained in practical and basic aspects to improve their skills. Therefore, training was held until the level of village/urban settlement. To conduct this process, community mobilizers and e-volunteers were also trained. Under the initiative, 1625 persons in the intensive area and 722 persons in the Extensive areas were given training in one or another aspect of digital skills training. The activity was more pronounced in the intensive project areas.

**E-volunteers**

To make an in-depth reach in the community under the Digital Democracy program, one of the most important channels of communication was the group of e-volunteers. In all, 107 e-volunteers were
selected for the project and trained. Of these, 64 e-volunteers were from intensive project areas while the other 43 were from Extensive areas.

<table>
<thead>
<tr>
<th>No. of people given information about digital technology and its applications.</th>
<th>Intensive Area</th>
<th>Extensive Area</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number</td>
<td>Percentage</td>
<td>Number</td>
<td>Percentage</td>
</tr>
<tr>
<td>5759</td>
<td>64.9</td>
<td>3113</td>
<td>35.1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>No. of persons trained about digital technology and its applications.</th>
<th>Intensive Area</th>
<th>Extensive Area</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number</td>
<td>Percentage</td>
<td>Number</td>
<td>Percentage</td>
</tr>
<tr>
<td>1625</td>
<td>69.2</td>
<td>722</td>
<td>30.8</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>No. of E-Volunteers</th>
<th>Intensive Area</th>
<th>Extensive Area</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number</td>
<td>Percentage</td>
<td>Number</td>
<td>Percentage</td>
</tr>
<tr>
<td>64</td>
<td>59.8</td>
<td>43</td>
<td>40.2</td>
</tr>
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</table>

The result of awareness, training, and intervention of e-volunteers was that in the intensive project areas, 2246 applications for the demand of various welfare schemes and services were generated and registered from the community, while in the Extensive areas, 753 such applications/cases were registered.

Of the 2246 applications generated in the intensive areas, 1757, that is 78% were resolved, while in the Extensive areas, of the 753, only 237 – that is 31% cases were resolved. Due to the strategic interventions in the intensive areas and constant follow up, the resolution rate of applications was significantly higher in the intensive areas.

To resolve the complaints received as part of the project (regarding water, electricity, roads, sanitation, not getting the benefit of schemes, etc.), in 676 cases digital technology (mainly 181 complaint helpline and CM helpline) was used. Of these 345 complaints got resolved.

In the intensive areas, 439 complaints were registered; all these 439 cases were followed up and of them, 215 got resolved. While in the Extensive areas, 237 complaints were registered and all 237 were followed up, of which 130 were resolved. This shows that with the constant drill, a supply of information and training, the community got ready to use digital technology and due to constant follow up, the complaint resolving rate was comparatively higher.
Intensive Area | Extensive Area | Total
---|---|---
No. of grievances related applications followed up. | 439 | 64.9 | 237 | 35.1 | 676
No. of grievances applications resolved | 215 | 62.3 | 130 | 37.7 | 345

Digital Social Action Lab (e-Dastak Centre)

The E-Dastak Centres were essentially run for this very purpose. The persons coming to these centers were provided with three services – (a) allowing use of available digital platforms and system to get benefits of schemes and services (b) to connect the community to proper platform with proper preparation for those services and benefits that could not be provided at the centers and (c) constant training and encouragement of community members and e-volunteers from within the community itself.

In all, 2333 community members visited the centers under the digital democracy program of whom 1850 (79.3%) were in the intensive project areas while 483 (20.7%) were in the Extensive areas. Of these 2333 visitors, 1369 made applications for various schemes and services and of these 1264 applications were resolved.

Of the 1369 applications generated, 958 (70%) came from intensive project areas, while 411 (30%) came from the Extensive areas. Of the resolved 1264 applications, 884 were from intensive areas, while 380 were from the Extensive ones.
2. A Community-based Research-oriented Intervention for Universal Access to Digital Technology

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Objective</th>
<th>Activities Undertaken</th>
<th>Outcomes/Achievements</th>
</tr>
</thead>
</table>
| 1      | To develop a community-based research-oriented intervention for universal access to digital technology | Keeping because of the better implementation of the project, the state-level Planning Meeting was organized for the project associates during the year. This meeting was held from August 22nd to 24th 2018 at Bhopal, in which 28 associates participated. The main topics of the workshop were discussed are as follows –  
- Introduction to the issue and goals – revisiting;  
- Designing strategy for community-based intervention for bridging digital divide and capacity building on decentralized planning.  
- Making strategy to promote community intervention to inspire e-mobilizers, e-volunteers for best efforts in enriching community website.  
- Understanding Action research and its tools for process documentation and content development for a community website.  
- Sharing of experiences, program-related needs, and field-level challenges by partner organizations for developing capacity building program design module and training material.  
- Developing a common understanding of measurable indicators.  
**Outputs** - Capacity building on technological aspects of | ☑ A model for facilitating Digitalisation at the Community level has been developed. The model moves the community closer to the e-governance the architecture of the state government. This model made us learn that if we set up two levels of institutions – E-Volunteers and DSAL, then the community will be in a position to utilize the digitalization of services and it will also improve its direct participation in governance.  
☑ This project has provided immense support in creating a conceptual and operational framework for the Digital Democracy initiative.  
☑ This year, 107 e-volunteers were selected through a community-based process and that they have been actively engaging with the community. Their profiles speak volumes in securing the community’s preparedness to seek digital services and |
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<th>S. No.</th>
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<th>Activities Undertaken</th>
<th>Outcomes/Achievements</th>
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<td></td>
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<td>intervention for community empowerment as per the needs of each district were developed keeping common objectives for all districts.</td>
<td>make use of digital means for their own needs as well as those for the community.</td>
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<td></td>
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<td>State-level Training of block coordinators and community e-mobilizers on tools and techniques of action-based intervention using digital tools.</td>
<td>✔ 107 e-volunteers have learned the Digital Technology and are using it to help and support the community.</td>
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<td></td>
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<td>Content development for the website.</td>
<td>✔ Till last year only people of the core panchayat would know about e-Dastak Centre. However, this year people in 10 additional panchayats in each of the 3 rural districts have become acquainted with the functionality of the E-Dastak Kendras.</td>
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<td>A state-level training for the project associates –block coordinators and community mobilizers – was held in Bhopal from February 12th to 14th 2019. In all 28 associates participated in the training. The training was focused on the following functional competencies:</td>
<td>✔ Last year, very few community members approached the E-Dastak Centre, but this year as many as 2756 persons from the community reached the E-Dastak Centre to learn about the digital techniques and/or seek digital solutions of their service needs about public utility and the related problems.</td>
</tr>
</tbody>
</table>
|        |           | ➢ Smart Phone Photography  
➢ Smartphone Videography  
➢ Smartphone Video Editing  
➢ Gmail  
➢ Google drive  
➢ Google map  
➢ Twitter  
➢ WhatsApp  
➢ Facebook  
➢ Fake news  
➢ Cybercrime and Safe Internet Refresher course and collective review. (For District, Block coordinator, community e-mobilizers) (1 meeting: for 2 days). | ✔ Till last year, community members had to repeatedly go to the panchayat or block offices to get benefits from government schemes. However, this year as many as 2756 community members |
|        |           | Review meeting organized to measure the level of learning of individuals and district teams, sharing of experiences, ideas, identifying gaps and for corrective |  |


measures for better implementations of the project.

This year 2 review meetings were organized.
I. First was held on 22rd August 2018 at Bhopal, in which 28 associates participated (including the Vikas Samvad Team).
II. Second State level review meeting was held on 16th February 2019 at Bhopal, in which 28 people participated including Vikas Samvad Team.

Training of Project Team, Mobilisers, and Selected Community Leaders on Photo, Video documentation and Website Updation for the First year.
Only in 1st Year Review meeting with consultant organization at the district level March 2019. A total of 54 members were present in both meetings.

- In Panna two review meetings-cum-input sessions were organized on 31st July – 2nd August 2018 and 3rd January-5th January 2019. Total of 59 members was present in both meetings
- In Jhabua two review meetings-cum-input sessions were organized on 23rd -25th October 2018 and 5th -6th January 2019. A total of 62 members were present in both meetings.

During the review meetings-cum-input sessions, records of DSALs visitors’ data, E-Literacy classes and session and E-Volunteers progress, the status of complaints on various community issues were checked

Availed benefits of the schemes by making online applications through the E-Dastak Centers.

- Till last year, separate groups of community members were constituted only in the core panchayats, but this year, such groups were constituted in two neighbouring panchayats as well in each of the three rural districts.
- Compared to the last year, 34 more news items were published by the print communication regarding the work related to the project.

Outcomes in numbers:

Total No. of Persons engaged through community meetings and outreach activities: 8896 (4040 males and 4856 females).

Total No. of Persons given inputs in digital tools: 8872.

Total No. of Persons trained on digital tools: 2347.

Total no. of persons started using photography tool: 217.

Total no. of persons started using videography tool: 183.

Total no. of persons started using Social communication
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<th>S. No.</th>
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<th>Activities Undertaken</th>
<th>Outcomes/Achievements</th>
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|        |           | and studied, Challenges of community E-Mobilizers were identified, and inputs were provided to overcome present challenges-barriers. With the concern of smooth functioning of the project discussion these topics were included in the review meetings are as follow –  
☐ To bring clarity on the project objectives and Revisiting Project Objectives  
☐ Documentation process and required improvements  
☐ Planning for conducting activities based on project strategies.  
Inputs on the safe use of the internet.  
☐ Practice of videography and photography for video documentation of E Volunteer profiles, case studies and community issues.  
☐ Better and responsible use of digital platforms  
☐ Roles and responsibilities of E-Volunteers  
Outcomes of these review meetings-cum-input sessions are as follows  
1. Capacity building of other district teams as well as other staff members of the consultant organizations.  
2. Understanding on roles and responsibilities of E-Volunteers developed.  
3. Promotion of the use of digital platforms by the youths at the community level.  
channels (Twitter, Facebook, etc): 2268.  
Total no. of cases/issues resolved through DSAL: 1369.  
Total no. of e-volunteers developed and trained: 107.  
Total no. of persons started using Digital grievances redressal platform (CM Helpline/181): 676.  
Total no. of Videos produced: 64.  
Total no. of tweets for community cause 14281  
The most important learning from this intervention is that community members are eager to learn about Digital Technology and Tools for getting the correct information, to access basic services and entitlements, but there is a lack of institutional set up for bridging the gap in skills and capacities to use digital platforms. There is a setup of MP Online and Public Service Centres which is functioning well under its objectives. However, it is not contributing to building capacities and confidence amongst the marginalized sections for using Digital Technology.  
The functioning of the Digital Social Action Lab (E-Dastak Kendra)  
☐ DSALs have been set up |
<table>
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<th>S. No.</th>
<th>Objective</th>
<th>Activities Undertaken</th>
<th>Outcomes/Achievements</th>
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<tr>
<td></td>
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<td>DSAL also provided training for the safe and responsible use of the Internet to 108 persons.</td>
<td>in all 4 projects.</td>
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<td></td>
<td>DSALs have been visited by 2001 persons, of which 726 (36%) were Women.</td>
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<td>DSALs received 3935 support requests/application and all were processed; of which 2658 were resolved.</td>
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</table>

Digital Social Action Lab is an innovative concept developed under this project for bridging the gap between efforts of digitalization of governance systems and capacities/skills of communities for utilization of these efforts. These centers were not only engaging in dialogue with the community, but also guiding them about the process and procedures for accessing services and entitlements, the most important component of DSAL has also been to build capacities of community members on digital tools, so that they could become self-sufficient and their dependence on external institutions/individuals goes down. Under the Digital Democracy Project, Digital Social Action Labs (e-Dastak centers) are being run in the four project districts. The centers function every
<table>
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<th>Outcomes/Achievements</th>
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<td>weekday (Sunday closed) between 10.00 am and 6.00 pm. In this duration, some or another associate of the project is present at the centre and listen to the problems of anyone who approaches the centre. Due to the availability of the Dastak Centre services, the rural community is saving time as well as money. Thus, the E-Dastak centre has now been established as an assistance centre for the backward, deprived section</td>
</tr>
</tbody>
</table>


### 3. Community-based Management of Malnutrition

**KEY RESULT AREA 1 (KRA 1): 100% access to free, quality primary health care in 15 intervention areas as per the latest govt. policy during the ongoing year 2019**

<table>
<thead>
<tr>
<th>TARGETS</th>
<th>ACTIVITIES</th>
<th>ACHIEVEMENTS</th>
</tr>
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<tbody>
<tr>
<td>ASHAs are capacitated on medicine handling and BP/HB testing and administration of Arogya Kendras</td>
<td>Training of ASHA workers on medicine handling and basic tests like BP/HB etc.</td>
<td>Capacity building of Stakeholders such as ASHA Workers (Training of ASHA workers on medicine handling and basic tests like BP/HB etc.) Activity done on 8/7/2019. BEE Amir and Sanjay from the community health center were the resource person for the same.</td>
</tr>
<tr>
<td>ASHAs are regularly coming to the Arogya Kendras</td>
<td>Monthly meetings by project staff with ASHAs on administering Arogya Kendras</td>
<td>One orientation has been done with frontline worker's health officials/panchayat, ensure that ASHAs are regularly coming to Arogya Kendras. Making Core Groups accountable to monitor the same</td>
</tr>
<tr>
<td>Follow up capacity building session for Machakhurd, Gwalipura, and Madhopura VHSNCs to make them understand about their roles and responsibilities and utilization untied funds</td>
<td>One orientation session has been done on capacity building for Machakhurd, Gwalipura and Madhopura VHSNCs to make them understand their roles and responsibilities and utilization untied funds apart from this all Villages have also been covered to follow up of VHSNC activities. Second orientation session has been done on 23/5/2019 at Pohri Block Shivpuri VNSNC members were oriented on What are the roles and responsibilities of VHSNC members and how to utilize untied fund. some members took the resolution to</td>
<td>Knowledge and Capacity building sessions organized for Machakhurd, Gwalipura, and Madhopura</td>
</tr>
<tr>
<td>Conduct of 1000 days study (from fetal stage to completion of age of two years; in contextual 1000 (conception to 2 years of age) days study</td>
<td>1000 (conception to 2 years of age) days study</td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td></td>
</tr>
<tr>
<td>Constitution of VHSNCs in all 10 new villages and orient them on their roles and responsibilities</td>
<td>VHSNCs constituted in all new 10 villages</td>
<td></td>
</tr>
<tr>
<td>Strengthening of Core groups at Machakhurd, Jakhnod, Gwalipura, Madhopura and Sonipura to monitor AWCs, Arogya Kendras, VHNDs, Kitchen garden, and Goonj supported activities through regular meetings and preparing them for raising the existing issues in Gramsabha</td>
<td>Core groups at Machakhurd, Jakhnod, Gwalipura, Madhopura, and Sonipura are capacitated to take actions on health and nutrition-related services in the community with minimal support</td>
<td></td>
</tr>
</tbody>
</table>
| Capacity building of core groups from 10 new villages on different health and nutrition services through monthly meetings | In this quarter discussion were held on 2 major issues as below:
1. Health of children: Focused on the aspects of out-migration of families and visible morbidity.
In this quarter, core groups were mobilized to create Seed Banks in their respective village information is placed at Annexure I. |
| 1 meeting at each village was held to capacitated core group members on MDM, PDS, PMMVY.so that their knowledge can increase thereafter they will be able to take actions on health and nutrition-related services in the community with minimal support. Goonj Supported activities have been at TAPARPURA, MADKHEDA, MEHRA village those are Deepening of a pond, maintenance of road and soak pit. | 4 VHSNC has been formed Training has also been done on 23.06.2019. |
reference to the space of ongoing public health and nutrition interventions of the State Government) to understand the traditional practices being done in these 1000 days, importance of 1000 days, limitations on the existing schemes/practices and to further give recommendations to govt on the same.

| Quarterly training of ASHA, AWW, ANM and Core group Leaders on ANC, PNC, High-risk pregnancies, and malnutrition. | Study report prepared |
| Organizing Poshan Samvad sessions with frontline workers –ASHA, AWW, ANM | Report prepared |
| Conducting regular home visits to identify pregnant, lactating women, adolescent girls, and children in villages and high-risk pregnancies and counsel them on various services available, care and proper diet, Menstrual Hygiene Management, ANC, PNC, IYCF practices, etc. | - 102 women were covered under home visits and 17 women have been taken to CHC for a check-up. |
| Keep regular contacts with ASHAS/AWWs/ANMs for supporting them on the tracking of new cases/taking actions/ANCs/Immunization etc. | - Capacity Building of ASHA, AWW, ANM and core group leaders on ANC, PNC, High-risk pregnancies, and malnutrition was done on 24.06.2019. |
| Through core group, motivate AWWs/ASHAs to conduct regular surveys and registering new pregnancy cases in the first trimester itself. Ensure VHND is happening each month at every AWCs. | - A Poshan Samvad was done on 16.06.2019 at the Pohri office. |
| Handling of high-risk cases by CMC worker (after identification by community mobilizers). Provide immediate care and counseling and link them to proper health facilities/ANMs and do regular follow up with them every month. | - A total of 6 women came to take counseling on ANC at the CMC center. |
| Helping/motivating ANMs for conducting PNCs/ANCs/Immunization on time. | |
actions in the gaps of services

the first quarter.

- Counseling on nutritional diet and health checkups was done of 20 lactating and 11 pregnant women and 8 anemic adolescent girls.

Hemoglobin testing was done of Pregnant lactating and adolescent girls in the third quarter. The information is placed at Annexure III.

Latest Quarter –

The sharing meeting was done on the 10th of December.

Bimonthly meeting on Menstrual Hygiene Management with adolescent girls and women and ensure that they are getting iron tablets through AWCs

Adolescent girls are being informed on a nutritional diet, Rubella Vaccine, and iron tablets at all 15 Villages.

Anaemia testing of all adolescent girls was done during 1000 Days Studies at All Villages approximately 500 Girls were covered in

Women and adolescent girls are trained on proper Menstrual Hygiene Management

Special attention and counseling to be given to high-risk anemic cases (under 8 mg HB) and refer them to CMC/CHC
Now identified anemic girls who are having less than 8 HB are being followed up at all villages. The follow up includes counseling on Menstrual Cycle and Hygiene Management are at Sonipur, Gwalipura, Machakhurd, Jakob & Madhopura villages. The list is placed at Annexure IV.

| Training of AAAs and mothers on nutritional anemia among children during VHNDs in each village | Orientation on nutritional anemia and anemia testing of adolescent girls, pregnant women and lactating mothers are being done with Mothers and AAAs. | AAA and mothers trained on nutritional anemia among children |
Annexure I
Discussions with Core Group Members on Setting Up Seed Banks

<table>
<thead>
<tr>
<th>Date</th>
<th>Name of the Village</th>
<th>Participation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Females</td>
</tr>
<tr>
<td>9-11-2019</td>
<td>Aamai</td>
<td>2</td>
</tr>
<tr>
<td>11-11-2019</td>
<td>Jatwara</td>
<td>0</td>
</tr>
<tr>
<td>13-11-2019</td>
<td>Gwalipura, Madhopura.</td>
<td>9</td>
</tr>
<tr>
<td>14-11-2019</td>
<td>Jakhnaud</td>
<td>3</td>
</tr>
<tr>
<td>15-11-2019</td>
<td>Machakhurd</td>
<td>4</td>
</tr>
<tr>
<td>21-11-2019</td>
<td>Sonipura</td>
<td>3</td>
</tr>
<tr>
<td>9-11-2019</td>
<td>Dangvarve</td>
<td>4</td>
</tr>
<tr>
<td>12-11-2019</td>
<td>Mehra</td>
<td>3</td>
</tr>
<tr>
<td>14-11-2019</td>
<td>Taparpura, MadkhedasMk</td>
<td>7</td>
</tr>
<tr>
<td>15-11-2019</td>
<td>Rampura</td>
<td>3</td>
</tr>
<tr>
<td>19-11-2019</td>
<td>Nonheta Khurd</td>
<td>4</td>
</tr>
<tr>
<td>20-11-2019</td>
<td>Patpari</td>
<td>3</td>
</tr>
<tr>
<td>21-11-2019</td>
<td>Batkakhedi</td>
<td>3</td>
</tr>
</tbody>
</table>

Annexure II
(Hb Testing Done in Quarter I)

<table>
<thead>
<tr>
<th>Village</th>
<th>Pregnant Women</th>
<th>Lactating Mothers</th>
<th>Adolescent Girls</th>
</tr>
</thead>
<tbody>
<tr>
<td>Batkakhedi</td>
<td>1</td>
<td>1</td>
<td>16</td>
</tr>
<tr>
<td>Jatwara</td>
<td>7</td>
<td>5</td>
<td>20</td>
</tr>
<tr>
<td>Aamai</td>
<td>4</td>
<td>2</td>
<td>13</td>
</tr>
<tr>
<td>Machakhurd</td>
<td>5</td>
<td>8</td>
<td>28</td>
</tr>
<tr>
<td>Sonipura</td>
<td>10</td>
<td>1</td>
<td>13</td>
</tr>
<tr>
<td>Village</td>
<td>Pregnant Women</td>
<td>Lactating Mothers</td>
<td>Adolescent Girls</td>
</tr>
<tr>
<td>--------------</td>
<td>----------------</td>
<td>-------------------</td>
<td>------------------</td>
</tr>
<tr>
<td>Madhopura</td>
<td>9</td>
<td>3</td>
<td>13</td>
</tr>
<tr>
<td>Jakhnod</td>
<td>7</td>
<td>1</td>
<td>35</td>
</tr>
<tr>
<td>Gwalipura</td>
<td>3</td>
<td>0</td>
<td>25</td>
</tr>
<tr>
<td>Patpari</td>
<td>2</td>
<td>4</td>
<td>11</td>
</tr>
<tr>
<td>Taparpura</td>
<td>1</td>
<td>3</td>
<td>19</td>
</tr>
<tr>
<td>Madkheda</td>
<td>1</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Nonheta</td>
<td>2</td>
<td>1</td>
<td>15</td>
</tr>
<tr>
<td>Mehra</td>
<td>7</td>
<td>3</td>
<td>13</td>
</tr>
<tr>
<td>Rampura</td>
<td>2</td>
<td>5</td>
<td>17</td>
</tr>
<tr>
<td>Dangvarve</td>
<td>3</td>
<td>5</td>
<td>23</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>64</strong></td>
<td><strong>45</strong></td>
<td><strong>264</strong></td>
</tr>
</tbody>
</table>

**Annexure III**

**Hb Testing in the Second Quarter**

<table>
<thead>
<tr>
<th>Village</th>
<th>Pregnant Women</th>
<th>Lactating Mothers</th>
<th>Adolescent Girls</th>
</tr>
</thead>
<tbody>
<tr>
<td>Machakhurd</td>
<td>7</td>
<td>4</td>
<td>25</td>
</tr>
<tr>
<td>Sonipura</td>
<td>7</td>
<td>7</td>
<td>33</td>
</tr>
<tr>
<td>Madhopura</td>
<td>3</td>
<td>7</td>
<td>12</td>
</tr>
<tr>
<td>Jakhnod</td>
<td>3</td>
<td>8</td>
<td>23</td>
</tr>
<tr>
<td>Gwalipura</td>
<td>5</td>
<td>5</td>
<td>46</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>25</strong></td>
<td><strong>31</strong></td>
<td><strong>140</strong></td>
</tr>
</tbody>
</table>
Annexure III
Hb Testing in the Third Quarter

<table>
<thead>
<tr>
<th>Village</th>
<th>Pregnant Women</th>
<th>Lactating Mothers</th>
<th>Adolescent Girls</th>
</tr>
</thead>
<tbody>
<tr>
<td>Machakhurd</td>
<td>7</td>
<td>4</td>
<td>25</td>
</tr>
<tr>
<td>Sonipura</td>
<td>7</td>
<td>7</td>
<td>33</td>
</tr>
<tr>
<td>Madhopura</td>
<td>3</td>
<td>7</td>
<td>12</td>
</tr>
<tr>
<td>Jakhnod</td>
<td>3</td>
<td>8</td>
<td>23</td>
</tr>
<tr>
<td>Gwalipura</td>
<td>5</td>
<td>5</td>
<td>46</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>25</strong></td>
<td><strong>31</strong></td>
<td><strong>140</strong></td>
</tr>
</tbody>
</table>

Annexure IV
Follow Up and Counselling of Anaemic Adolescent Girls

<table>
<thead>
<tr>
<th>Dates</th>
<th>Village</th>
<th>Counselling of Low Hb Girls</th>
</tr>
</thead>
<tbody>
<tr>
<td>8th and 9th Nov. 2019</td>
<td>Aamai</td>
<td>13</td>
</tr>
<tr>
<td>13th and 26th Nov. 2019</td>
<td>Jakhnaud</td>
<td>22</td>
</tr>
<tr>
<td>11th Nov. 2019</td>
<td>Sonipura</td>
<td>12</td>
</tr>
<tr>
<td>26th Nov. 2019</td>
<td>Jatwara</td>
<td>9</td>
</tr>
<tr>
<td>21st Nov. 2019</td>
<td>Gwalipura</td>
<td>18</td>
</tr>
<tr>
<td>14th Nov. 2019</td>
<td>Machakhurd</td>
<td>18</td>
</tr>
<tr>
<td>15th Nov. 2019</td>
<td>Madhopura</td>
<td>7</td>
</tr>
<tr>
<td>19th Nov. 2019</td>
<td>Nonhetakhurd</td>
<td>10</td>
</tr>
<tr>
<td>12th Nov. 2019</td>
<td>Batkakhedi</td>
<td>9</td>
</tr>
<tr>
<td>8th Nov. 2019</td>
<td>Rampura</td>
<td>10</td>
</tr>
<tr>
<td>20th Nov. 2019</td>
<td>Patpari</td>
<td>5</td>
</tr>
<tr>
<td>27th Nov. 2019</td>
<td>Dangvarve</td>
<td>13</td>
</tr>
<tr>
<td>29th Nov. 2019</td>
<td>Mehra, Taparpura</td>
<td>17</td>
</tr>
</tbody>
</table>

KRA 2— Reduction in no. of SAM children to zero in 15 operational areas during the ongoing year 2019

<table>
<thead>
<tr>
<th>OBJECTIVE</th>
<th>ACTIVITIES</th>
<th>ACHIEVEMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>All 15 AWCs are opening and closing on time</td>
<td>Through local authority level promotional activities, ensure that the 15 AWCs are opening/closing on time and the AWWs are regular at AWCs,</td>
<td>During field visits, the gap was identified related to MDM at Batkakhedi Village and addressed to concerning officials Karan batao notice was issued to the teacher by</td>
</tr>
<tr>
<td>Description</td>
<td>Details</td>
<td>BRC</td>
</tr>
<tr>
<td>-----------------------------------------------------------------------------</td>
<td>--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------</td>
</tr>
<tr>
<td>AWWs are regular at AWCs</td>
<td>Nutritional diet is given to all beneficiaries in the area, weight monitoring is happening in every month</td>
<td>There was no breakfast available at Anganwadi of Machchurud tribal settlement because the distance from this settlement to Anganwadi center is very much, so children could not reach to take breakfast than first of all a meeting was held with the community to understand their issues and clarify doubts after that this issue was raised in Poshan Samvad meeting and It was decided that Anganwadi worker and helper will go there and provide breakfast and lunch to these children.</td>
</tr>
<tr>
<td>Nutritional diet is given to all beneficiaries in the area, weight monitoring is happening in every month</td>
<td>Strengthening Core Groups to monitor the functioning of AWCs</td>
<td>Application for adult and baby weighing machines has been given to the supervisors through the Anganwadi workers where such machines are not functional or not available.</td>
</tr>
<tr>
<td>All AWCs have functional weighing machines and AWWs started doing regular weight monitoring of children</td>
<td>Ensuring that all 15 AWCs have functional weighing machines. If not available, provision to be made through untied funds of VHSNCs</td>
<td></td>
</tr>
<tr>
<td>Monthly weight monitoring of all children under 5 years and referring severe cases to NRCs by Anganwadi workers</td>
<td>Ensuring Monthly weight monitoring sessions at all 15 AWCs and identify malnourished children</td>
<td>Quarter 2</td>
</tr>
<tr>
<td>% of reduction in malnutrition</td>
<td>Counseling of mothers with malnourished children regularly</td>
<td>Total no of 0-5 Year Children-799</td>
</tr>
<tr>
<td></td>
<td>Referring Severely undernourished cases to NRCs. AWWs/families to be supported to do it by project staff.</td>
<td>Total no of Weighted children -523.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Total MAM-119</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Total SAM-15</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Normal -389</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Total No of Children who could not be weighted -276.</td>
</tr>
</tbody>
</table>
All malnourished children showing improvement in their grade

Regular follow-ups after discharge

Establishment of Nutri Corners at all 15 Anganwadis. I.e., food items such as gram, murmur (stuffed rice), jaggery and dry food items to be stored in a container at Anganwadi centers. One container will be kept in Anganwadi for the community, in which the community can provide food items to the corner. Children will be able to get food whenever required.

Nutri Corner have been started at 15 Villages and

Nutri Mela was held on 1/6/2019 at Dangvarve, and Madkheda Village.

Quarter 3

Total no of 0-5 Year Children - 821

Total no of Weighted children - 658

Total MAM - 219

Total SAM - 36

Normal - 403

Total No of Children who could not be weighed - 163

Increased monitoring mechanisms by ICDS officials

Meeting with ICDS supervisors/CDPOs to ensure regular monitoring of AWCs

Meeting with ICDS staff was done, front line worker's work is being recognized and now they are also enthusiastic to work innovatively.

AWWs are operating the AWCs as per norms

Monitoring of AWCs by project personnel every month

Organizing Mahamash Oil Therapy in winters by the project team in support of ICDS workers

- Monitoring of AWCs by project personnel is being done and Nutri corners were started at 15 Villages.

Locally available ancient techniques like Mahamash oil therapy is practiced and is well accepted and

Motivating ICDS department to integrate Mahamash Oil Therapy in Snehashivirs and monitor it

- Monitoring of AWCs by project personnel is being done and Nutri corners were started at 15 Villages.

21 days camp on Mahamash Oil Therapy is going on in 4 AWCs. From 10/12/2019 111 children are being covered in this activity.
<table>
<thead>
<tr>
<th>Introducing kitchen garden concept in all villages</th>
<th>Food Demo Sessions were conducted at Madkheda and Dangvarve Village on 1/6/2019. 18/11/2019 at Machakhurd Village. 40 community members and AWW participated in this activity. The report is attached.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introducing Kitchen garden at each household level especially at household with malnourished children with the help of core group members</td>
<td>Concept of Poshan Vatika was clarified to the community at 5 project villages and also got developed at Gwalipura, Machakhurd, Jakhnod Sonipura, and Madhopura Village</td>
</tr>
<tr>
<td>Training on sustainable site-appropriate Agriculture for selected core group members</td>
<td>It was done on 22/06/2019. 45 cultivators participated in 15 villages. Trainer Ravi Sharma from the Agriculture department was the resource person. He informed all participants about soil testing. Soil testing can be done by combining mud from all four sides of land 250 grams from each side and it can be sent to the lab of the agricultural dept. Soil testing is get done to find out termite, Fertilizing power of land which crop can be grown in the field.</td>
</tr>
</tbody>
</table>
### Increased availability of water resources in the area through working with Goonj/Panchayat

All malfunctioned Hand pumps/tube wells are repaired

- Coordination with Goonj/MNNREGA/Panchayat/Pradhan Mantri Awaas Yojana program will be done for need-based infrastructural improvement and water sources creation/renovation
- Training of youth group to identify malfunctioned Hand pumps/tube wells and repair it on time with the support of officials

### Coordination with Goonj/MNNREGA/Panchayat/Pradhan Mantri Awaas Yojana program

Work for water resources has been done in a total of 14 Villages with the support of Goonj.

**Dangvarve** –
- Cleaning of well and hand pump
- Construct Soakage Pit
- The surfacing of land around water sources

**Nonheta Khurd** -
- Construct Soakage Pit
- Hand Pump and Surfacing of land

**Patpari** –
- Construct Soakage Pit
- Rampura - Cleaning and deepening of well

**Batkakhedi** -
- Mooring of well
- Construct Soakage Pit

**Aamai** –
- Construct Soakage Pit
- Cleaning of Pond

**Gwalipura** –
- Construct Soakage Pit

**Sonipura** –
- Construct Soakage Pit
- Cleaning of Well

**Jakhnod** -
- Deepening of pond
- Machakhurd - Construct Soakage Pit
- deepening of well

### A large level of awareness generation activities conducted through plays/Nukkad Natak

Nukkad Natak on issues related to addiction – 5 clusters

The large level of awareness generated through plays/Nukkad Natak etc. in July last week and August first week. Total of 731 persons in which 364 female and 361 male got benefited through this play.
### Natak etc.

Meetings with authorities on the status and to introduce de-addiction programs

Organizing regular meetings with the health department on topics related to deaddiction and to update the status in the community

One orientation program is done on 9/3/2019.

#### Project staff/AAAs/Core Group Members trained on addiction and deaddiction methods

Half-yearly training of AAAs, Core Group members on awareness generation on deaddiction

Poshan Samvad was conducted at 7 Village of Pohri sector in which 9 Anganwadi workers participated in it, all the AWW were informed on Documentation and record keeping. The concept of Poshan Vatika was also clarified and also got developed at Gwalipura, Machakhurd, Jakhnod Sonipur, and Madhopura Village.

The orientation of project staff on addiction, TB and de-addiction practices in February

Project staff/AAAs/Core Group Members trained on de-addiction methods on 3/09/2019 at Pohri office BEE Amir Khan from health dept was a resource person

### Core group led a campaign on health and nutrition

One campaign at block level to spread awareness among the mass and authorities on the intensity of addiction cases in the villages and the need to take appropriate actions by the authority

Designing and printing of leaflets (500 copies) on topics related to addiction and mitigation methods

Wall painting at CHC on addiction

- The situation analysis was done at Machakhurd village.
- A concept note prepared and
- Survey format prepared and
- Survey is done
- Data entry is done
- Tabulation is done
- The report is under process
- Wall painting at CHC on addiction and at all 15 villages done.
- The sharing meeting is scheduled on 30 th December.
- Visit of the De-addiction center at District Hospital was done.

### KRA: 500 no. of children from the operational area acquired life skills and exercise their agency towards the fulfillment of their rights during the ongoing year 2019

<table>
<thead>
<tr>
<th>OBJECTIVE</th>
<th>ACTIVITIES</th>
<th>OUTCOMES</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| Proper constitution of children’s/adolescents’/youth groups in the villages | Formation of children’s group in project villages involving equal participation from both boys and girls (It would be a mixed group) | 15 youth groups  
15 Children’s Groups  
15 Adolescents’ groups have been formed in our field area. |
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Capacity building of groups on various issues concerned</td>
<td>Training of youth groups on alcoholism, TB, gender, health, nutrition, child rights, maternal health, and gender issues, etc. through quarterly meetings.</td>
<td>Sports activities were being done at Jakhnod, Machakhurd, Jatwara, and Nonheta Khurd villages, Kho-Kho, Kabaddi, Sikka Pakad game were played to the total no of children participated respectively at Jakhnod 20, Machakhurd 20, Jatwara 20, Nonheta Khurd 12, handwashing practices were also discussed with them.</td>
</tr>
<tr>
<td>Children sensitized on gender issues</td>
<td>Establishing Village resource centers in 2 villages (Gwalipura and Jakhnod). These to be managed by youth groups.</td>
<td>The resource center has been developed at Gwalipura and Jakhnod village.</td>
</tr>
<tr>
<td>Identification of possible sports activities in the community</td>
<td></td>
<td>Health nutrition and anemia issue were discussed with these adolescent girls.</td>
</tr>
<tr>
<td>Poshan Samvad with AWWs and ASHA</td>
<td>Poshan Samvad - Nutrition Dialogue - is a method for establishing an ongoing discussion amongst the field functionaries of the departments of Women &amp; Child Development and Public Health &amp; Family Welfare. By engaging the front line workers such as – Anganwadi Workers, Accredited Social Health Activists (ASHAs) and the Auxiliary Nurse Midwives (ANMs) - from both the key departments are encouraged</td>
<td>Poshan Samvad was conducted for 7 Village of Pohri sector in which 9 Anganwadi workers participated in it. all the AWW were informed on Documentation and record keeping. The concept of Poshan Vatika was also clarified and also got developed at Gwalipura, Machakhurd, Jakhnod Sonipura, and Madhopura Village.</td>
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</tbody>
</table>
to freely express themselves, without any hesitation, about their perceptions, thoughts, and experiences on problems, existing processes, and changes required in institutional mechanisms.

Pulse Polio campaign: -

We also supported the Pulse Polio campaign running by the Government of India- so that most of the children could get benefited we also informed the people in advance about this campaign.

Details of benefited children during this campaign is are provided in the table below: -

<table>
<thead>
<tr>
<th>S.N.</th>
<th>Name of the Village</th>
<th>No. of Children Administered with Polio Drops</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Sonipura</td>
<td>110</td>
</tr>
<tr>
<td>2</td>
<td>Madhopura</td>
<td>90</td>
</tr>
<tr>
<td>3</td>
<td>Gwalipura</td>
<td>80</td>
</tr>
<tr>
<td>4</td>
<td>Machakhurd</td>
<td>156</td>
</tr>
<tr>
<td>5</td>
<td>Jatwara</td>
<td>40</td>
</tr>
<tr>
<td>6</td>
<td>Jakhnaud</td>
<td>180</td>
</tr>
<tr>
<td>7</td>
<td>Aamai</td>
<td>20</td>
</tr>
<tr>
<td>8</td>
<td>Batkakhedi</td>
<td>35</td>
</tr>
<tr>
<td>9</td>
<td>Patpari</td>
<td>56</td>
</tr>
<tr>
<td>10</td>
<td>Taparpura</td>
<td>45</td>
</tr>
<tr>
<td>11</td>
<td>Nonhetakhurd</td>
<td>42</td>
</tr>
<tr>
<td>12</td>
<td>Mehra</td>
<td>86</td>
</tr>
<tr>
<td>13</td>
<td>Rampura</td>
<td>63</td>
</tr>
<tr>
<td>14</td>
<td>Dangvarve</td>
<td>82</td>
</tr>
<tr>
<td>S.N.</td>
<td>Name of the Village</td>
<td>No. of Children Administered with Polio Drops</td>
</tr>
<tr>
<td>------</td>
<td>---------------------</td>
<td>-----------------------------------------------</td>
</tr>
<tr>
<td>15</td>
<td>Madkheda</td>
<td>15</td>
</tr>
<tr>
<td></td>
<td><strong>Total</strong></td>
<td>1100</td>
</tr>
</tbody>
</table>

**Major Outcomes**

**Activity - Poultry**

A total of 3000 beneficiaries applied for poultry and Rs.1200 were deposited, in their account by animal husbandry department, out of which contribution of Rs.505 from 186 beneficiaries has been deposited by our support and 70 beneficiaries were benefited till now. 25 chicken have been distributed to each of them.

**Achievements of II Quarter: -**

- There was not any hand pump in Madhopura Village for which the Application was submitted in the meeting of the Gram Sabha in the month of January, boring for hand pump has been dug up this month but still, the hand pump is not installed. A complaint has been filed for hand pump on 24.5.2019 on the CM Help Line and its complaint number is 8396317.
- 13500 chicken and 360000 Rs. were dispensed to 300 families of our field area it seems that this will improve or ensure the livelihood and nutritional status of our field area up to some extent.
- **Poshan Samvad:** On the day of vaccination, only pregnant women were called for the TT vaccines only and Anti natal checkups were not administered, after delivery PNC check-ups also were not administered so it was decided in the meetings after the discussion that all the pregnant, lactating and adolescent girl will also be called for checkup and counseling.
- There was no breakfast given at Anganwadi of Machchurud tribal settlement because the distance from this settlement to Anganwadi center is very much, so children could not reach to take breakfast than first of all a meeting was held with the community to understand their issues and clarify doubts after that this issue was raised in Poshan Samvad meeting and it was decided that Anganwadi worker and helper will go there and provide breakfast and lunch to these children.
- **Udhyaniki Vibhag 2000 seeds procured**
- Rubella was administered to a total of 960 beneficiaries.
- Health camp many ppl benefited 4 TB cases identified a total of 100 cases benefited. pediatrician, gynecologist medications from the health dept.
- **Food Mela Jakhnaud:**
- A health camp was held for Nonhetakhurd, Patwai, Dangvarve, Mehra, Taparpura, Batkakhedi, Rampura Village. A total of 100 People got benefited 4 are expected TB Positive, in which one is the child.
- **SMC meetings are started every month at Gwalipura, Machakhurd, Jakhnaud and Sonipura village after SMC training.**
Infrastructural work done at 7 Villages detail is as below:

- Madkheda Pond Deepening
- Taparpura Pond Deepening
- Mehra Well and Pond Deepening
- Machakhurd Pond Deepening
- Jakhnaud (Pond Deepening and road maintenance of Primary school so that children can go to school)
- Sonipura Pond Deepening
- Madhopura Pond Deepening

Toilets were made in Rampura, Mehra and Jakhnaud Village. The boundary wall was constructed with the support of the secretary of respective villages at Rampura, Mehra and Jakhnaud Village by 20 People they worked for 1 month, No of days 600 and financial support @ 200 Rs per person which would cost 120000 Rs. 15000 Insecticide-treated bed nets distributed at all 15 Villages.

Achievements of III Quarter:

- Construction of Boundary wall at Village Jatwara, Rampura, (Macha Taparpura talab)
- Kitchen garden initiated in a total of 429 Families.
- Hand pump repair at Rampura Village
- In this quarter total, 9 children were sent to NRC
- Poultry Farming started at a total of 900 families
- Construction of SHC completed at Dangvarve, the application was given to panchayat in 2018.


Achievements of IV Quarter:

- Construction of Boundary wall at Village Jatwara, Rampura, (Macha Taparpura talab)
- Kitchen garden initiated in a total of 429 Families.
- Hand pump repair at Rampura Village
- In this quarter total, 9 children were sent to NRC
- Poultry Farming started at a total of 900 families
- Construction of SHC completed at Dangvarve, the application was given to panchayat in 2018.
- The distribution of the meal has been started according to the menu at AWC.
- List to claim Maternal entitlements, Matru Vandana was given to DGRO.

- Evidence-based collective actions on concerns raised from partner areas on the issues of Education, Health, ICDS, NFSA, and Nutrition for improving governance mechanisms, bringing transparency and accountability.

- Capacity Building of members and other like-minded networks and organizations Child centric issues.

- Networking with organizations and collectives working on similar Child Rights issues along with relevant Government departments and other statutory bodies.

Activities & Outcomes

Studies & Promotion

- **Study on Status of NFSA** - A survey was conducted in 2017 on Status of National Food Security Act 2013. The report was prepared. After this prepared memorandums and it was shared with the concerned departments and commissions at the state and district levels' promotion and encouragement. Action has been taken by Government on memorandums.

- **Study on Availability and Sources of Water and impact on children in 8 Districts in MP** - A survey was conducted in March-April 2018 on Availability and Sources of water and its impact on children. This report was shared with the concerned departments and commissions at the state and district level promotion. Action has been taken by Government on memorandums.

- **Study Report on Seasonal disease Surveillance in 10 District of MP** - A survey was conducted in September 2017 on Seasonal disease Surveillance and prepared a report. Report with memorandums was shared with the concerned departments and commissions. Action has been taken by Government on memorandums.

- **Study on Health Services in 9 District of MP** - A survey was conducted in May 18-July 18 on Health Services in 9 District of MP and the report was prepared.

Training/Workshop/Seminar/Consultation

- **Seminar on 8 Year Implementation of RTE**
  MPLSSM and Vikas Samvad Samiti Jointly organized a one-day seminar on 8 Years of Implementation of RTE on 5 April 2018. About 30 people/representatives of organizations working on education participated in the seminar.

- **Workshop on Neonatal and Maternal Health**
  A one-day workshop was organized on Neonatal and Maternal Health on 16 April 2018 by MPLSSM. Dr. Shalini (NHM), Dr. Sheela Bhamhthal (pediatrician) and Mr. Guru Sharan Sachdev (Health Expert) were resource persons for the workshop.
• **Workshop on Writing, Case Study, Documentation**
  A three-day workshop was organized by MPLSSM with the collaboration of Vikas Samvad Samiti on Writing, Case Study, Documentation and collective action strategies from 7 to 9 May 2018. Mr. Aman Namra & Ms. Sravani Sarkar were the main resource persons for the workshop.

• **TOT on Early Childhood Care and Education**
  A four-day TOT was organized by MPLSSM with the collaboration of Vikas Samvad Samiti on ECCD from 6 to 9 July 2018 in Bhopal. Ms. Radha & Ms. Kamla (Mobile Crèches, Delhi) were the resource persons for the workshop.

• **State-level consultation on NFSA**
  One day State level consultation was organized by MPLSSM on 18 September 2018 in Bhopal on the Implementation of the National Food Security Act in Madhya Pradesh. A total of 83 people from different districts of Madhya Pradesh participated in the consultation and shared ground-level experiences of NFSA. In the consultation, State Food Commission Chairperson Ram Kishor Swai, Member Secretary Prajapati and Deputy Director food department Ms. Sukriti Singh had joined. Findings of the MPLSSM NFSA study report and cases from distinct were presented in the consultation.

• **Workshop on Theatre in Education**
  Vikas Samvad Samiti and MPLSSM organized a 4-day workshop on 18 to 21 February 2019 in Bhopal. Mr. Walter Peter was the resource person in this workshop.

• **Workshop on Using Digital Platforms**
  MPLSSM and Vikas Samvad Samiti organized a 3-day workshop on using Digital platforms for sharing and raising critical issues in the larger social and policy space from 6 to March 2019 in Bhopal. Expert Mr. Sachin Shrivastava was the resource person of this workshop.

**Publication**

• **Special issue of Sanjhi Baat on NFSA**
  Published 30 pages special issue of Sanjhi Baat on implementation of the National Food Security Act in Madhya Pradesh. Articles, analysis, case studies and positives stories from the field are incorporated in this issue.

• **Sanjhi Baat on Neonatal**
  16 pages Sanjhi Baat published. It was focused on Issues related to Neonatal.

• **Special Issue of Sanjhi Baat on Children in Democracy**
  Published 30 pages special issue of Sanjhi Baat on Children in Democracy.

• **Special Issue of Sanjhi Baat on Relevance and Importance of Government School**
  A 54 Page special issue of Sanjhi Baat was published. It is the 25th edition of Sanjhi Baat which is focused on relevance and importance of Government School.
• **Special Issue of Sanjhi Baat on Health Issue**

A 42 Page special issue of Sanjhi Baat was published. This is focused on Health Issues and dedicated to the late Dr. Ajay Khare.

**Networking**

• **NFSA Policy Analysis**

The right to food campaign is preparing a National Report on the Implementation of NFSA. We are supporting MP for this report. Collected secondary information including circulars, Orders, etc. (from 2014 to present) on implementation of ICDS, MDM, PDS, Maternal Benefit and Redressal mechanism under NFSA.

• **Participation in the process of Social Audit of NFSA**

MPLSSM actively participated in the process of NFSA Social Audit in Dabhoura (Rewa) initiated by Vikas Samvad Samiti. I also visited Dabhoura and participated in Vishesh Gram Sabha of Social Audit of NFSA at Ghumar Panchayat and Prepared Process document on this Gram Sabha.

• **Child Right Violation in Election**

MPLSSM along with other rights-based organizations submitted a memorandum to the state chief electoral officer urging him to ensure that children were kept away from political activities during the state assembly election with the reference of instruction issued by the election commission of India on 21 February 2017 in that regard. After that process MP state election commission issued direction to all district collectors & district election officers to ensure child rights violation to be scrutinized during the election.

• **Children Manifesto to political parties**

Election Manifesto made by the children was given to the political parties candidates by the MPLSSM partners in their districts. The manifesto was given to 38 Vidhan Sabha Candidates of 7 districts.

• **Constitution in cinema (We the People Campaign)**

Mission 70 is a campaign - to mark the 70th anniversary of the Indian Constitution. It is a national campaign, starting from 26th Jan 2019 and will run throughout the year till 26th Jan 2020. In this regard, they have a different session for discussion throughout the year. First Session is based on Constitution in Cinema. In this session, some films and a module have been prepared for discussion around it. MPLSSM secretariat was requested to coordinate with Manch Partners to join in the campaign. A total of 7 Members of the manch have agreed to be part of this campaign.

• **Meeting with Chief Minister**

A delegation of social and cultural organizations of Madhya Pradesh met with Chief Minister on 27 February 2019. In this delegation, MPLSSM members were also included. During the meeting, MPLSSM
partners shared Special Issue of Sanjhi Baat on Government Schools and Charter of Demand on School Education with Chief Minister.

- **Information on Early Initiation of Breastfeeding**

  Vikas Samvad Samiti needed some information on early initiation of breastfeeding (within 1 hour of birth). We translated information format in Hindi and send to MPLSSM partners. Partners send us information that was shared with Vikas Samvad and CRY.

- **JSA State Laval Consultation on Health Issue in Madhya Pradesh**

  A 2-day State level Consultation was organized by Jan Swasthya Abhiyan from 30 to 31 August 2018 in Bhopal. All MPLSSM of partners participated in this Consultation.

- **Participation in National Health Assembly**

  2 days National health Assembly was organized by Jan Swasthya Abhiyan from 22 to 23 August 2018 in Raipur. All MPLSSM partners participated in this Assembly.
5. Building Ownership and Momentum for Effective Implementation of SDG-2, Target 2.2 and WHA Nutrition Targets

Project Objective:

a. Develop an operational social audit and community monitoring framework by facilitating a process of community leadership.

b. Sensitization of stakeholders responsible for proper implementation of the National Food Security Act to eliminate malnutrition.

c. Sensitization and Orientation of persons in the field of mass communication and People's Representatives on SDG2 and WHA Nutrition Targets; specifically, on Stunting and Wasting and National Food Security Act so that they prioritize malnutrition as an issue.

Project District: Panna, Satna, Rewa, Umaria, Nivari.

Project Impact:

a. Collation, production, and use of knowledge products on nutritional status, implementation of NFSA entitlements, and the need for creches into accessible formats to engage the government, the channels of mass communication, and the community.
   - Baseline Survey has done. A summary report was ready, and the final report is completed till November.
   - 5 brochures have been developed on Adolescent girl's health, pregnancy, Introduction of the National Food Security Act, Breastfeeding and Nutrition Security of Children, Danger Signs for Children's Health (in Hindi).
   - A total of 5 meetings with PRI members have been held in all 5 project districts.

b. Increased engagement with related Govt. departments (W&CD, Health, RD, Tribal Welfare and FS & CW) and statutory bodies (NITI Aayog, Poshan Abhiyan, State Food Commission, SCPCR, And State Social Audit Society).
   - One training in Satna district has been conducted with Sarpanch, ASHA, Anganwadi Worker, Employment Assistant, SHG's member and School teacher related to the NFSA and on entitlements enshrined under the same.
   - Social Audit findings of all 5 districts have been shared with the Women & Child Development Department, Food & Civil Supplies Department following State's requirements.
   - 1 state-level consultation has been held regarding Social Audit processes under the aegis of the Department of Food & Civil Supplies and Consumer Protection.
   - A consultation was organized by the Department of Food, Civil Supplies and Consumer Affairs (Government of Madhya Pradesh), which had participation from ICDS, MDM, Health departments, State Food Commission and State Social Audit Society.

c. Enhanced coverage on nutrition and nutrition-related programs.
   - 1- Boot camp has been organized to sensitize the communicators on Madhya Pradesh Health and Nutrition Issue.
   - 18 stories and News are published in the newspaper through Vikas Samvad. These have pertained to Anganwadi & Health services, FRA, MGNREGA, Women and Child Health.
d. Increased capacities of community-based groups on community-based monitoring of nutrition programs under NFSA and other nutrition entitlements.
   - During Social Audit, community mobilization and awareness related to NFSA was done in a total of 5 Panchayats (one Panchayat in every district) of project districts.
   - In Panna District, Women Group members are monitoring the Mid-Day Meal quality, twice in a week. They have also made home visits to 13 families. Consequently, 8 children’s immunization has been ensured by them.
   - Project Staff participated in 5 pieces of training related to Organization Development, Theatre in Education, Use of Social channels of communication and Safe Internet, Social communication training on Child Marriage, Account and bookkeeping.

e. Increased awareness of optimal nutritional practices and entitlements under NFSA and the need for creches by community groups.
   - Community meetings: A total of 188 meetings have been done in 61 villages of 5 project districts.
   - Project planning and review meetings: 2 planning and review meetings done in Bhopal.
   - 2 planning and review meeting is done in Bhopal.
   - 8 Stories of change (SoC) on Maternity Benefit, the functionality of Anganwadi Centers and Ration Shop working.

Major Achievements:
- 100 percent of households were covered under Social Audit and no single household was left behind.
- State-level meeting with Director and Joint Director of Food & Civil Supplies and Consumer Protection was held about implementing the Social Audit process in all 5 projects Districts. The department appreciated the endeavor and officially advised the respective districts to align the VSS with the processes as are sought to be addressed by the State Government under the provisions of the NFSA 2013.
- At the District level, Social Audit findings have been shared with departments' concerned officials. They are seeking to ensure to take the arising action forward. In Rewa, Panna and Nivari districts, a few cases have been resolved by the department. Notably, many cases are pending because the Model Code of Conduct is in force in the wake of parliamentary elections.
- 18 stories and News were published in the newspaper through Vikas Samvad. These have pertained to Anganwadi & Health services, FRA, MGNREGA, Women and Child Health.

Navigational Resource Support to NFI for Building Ownership and Momentum for Effective Implementation of SDG 2: Targeting SDG 2.2 and WHA Nutrition Targets
Immediate Outcome 1: Policy Review on Management Across the States Vis-à-Vis the efficacy of implementation of NFSA and Programmatic Interventions based on Meta-Analysis.
  - State Specific checklist on NFSA has been developed and sent to all states (Madhya Pradesh, Jharkhand, Karnataka, Chhattisgarh and West Bengal).
Immediate Outcome 2: Supporting state teams to develop policy briefs, communication briefs and other promotional materials.
- Knowledge product and reference material on IYCF, Maternity Entitlement, NFSA, Danger Signs for children, Community Based Monitoring (CBM) tools and guidelines has been developed and translated.
- Excel based Management Information System (MIS) and its guideline has developed and sent to all state partners for preliminary testing. Once inputs were received, then it will finalize further.

**Immediate Outcome 3: Capacity building of state partners.**

- Training on Project Planning and Management of Information System (MIS) was held on February in Bhopal, wherein all State Partners including District coordinators took part in the training and shared their views and points in reference to MIS and shared project planning.

**Immediate Outcome 4: Review Meetings**

- 3 quarterly review meeting has conducted in respective states; One quarterly review meeting conducted during month of April in all states. One quarterly review meeting conducted in Bhopal during month of April, in this all state coordinators present.

**Immediate Outcome 5: Handholding and Mentoring visits to States and their Districts and Networking visits to Lateral Agencies across States.**

- One networking visit has done in the Right To Food Chhattisgarh State convention held on Raipur.
6. Right to Food: Health and Nutrition for Newborns and Infants from Marginalized Communities in Madhya Pradesh, India

Project Goal: Reduction of child mortality through the implementation of the Right to Food in vulnerable communities of Madhya Pradesh.

Project Objective: The supply with sufficient food and health services is sustainably ensured for 4674 children below 6 years and 3000 pregnant women and nursing mothers across 4200 Adivasi households through linking to and implementation of respective government support programs.

Project district: Satna, Panna, Rewa, Umaria

Project activities:

Status of Project Implementation:

- Across the 100 villages under the project, there were 5 statutory committees for each village and on an average 8 members participated in each meeting. These committees have been constituted under different Acts, including ‘The Panchayat Raj Avam Gram Swaraj Adhiniyam, 1993’, ‘The Scheduled Tribes and Other Traditional Forest Dwellers (Recognition of Forest Information) Act, 2006’, ‘Mahatma Gandhi National Rural Employment Guarantee Act-MGNREGA 2005’ and ‘Right of Children to Free and Compulsory Education Act, 2009’.
- 523 PLA training and meetings have been conducted in all 100 project villages.
- A total of 3824 children and community members have accessed the Village Information and Resource Centre books and materials related to various government schemes and facilities for aspects related to livelihood, women and child health and environment, etc.
- During the reporting period, a total of 1537 children, 1624 youths, 1222 women and adolescent girls are associated with interest groups.
- Monitoring Early Childhood Care and Development (ECCD): Under the ‘Dastak’ project, the Growth of 5008 children under the age of 5 years is being assiduously monitored. The Severely Acute Malnourished (SAM) children (identified in the growth monitoring) are being monitored every month for ensuring early recovery and survival.
- Community members from 100 project communities engage in the linking and improved implementation of government support programs in the area of health and nutrition.
  - The preparation of Village Development Plans is a continuous process. 75 Village Development Plans have been prepared with the sustained community engagement out of which 65 plans have been duly adopted by the Gram Sabha and that their implementation is in progress.
  - Access to government aid- and support instruments:-Total 5688 applications filed by the project team and volunteers from the community, 4956 applications (87%) have been resolved and the benefits are accruing to the needy applicants whilst 732 applications (13%) are being processed.
Social audit process (audit of schemes under national food security act 2013 by the community) done in all districts (one panchayat of each district) of the project area along with the approval from the Department of Food and Civil Supplies, Government of Madhya Pradesh. VSS is making promotional endeavours and is engaging with the Go MP for motivating them to develop a community-led process of Social Audit. After the constant dialogue, the State Government agreed to conduct a pilot project in a multi-nature (Tribal, Rural, Semi-Urban, etc.) location. For this pilot, Khandwa district was selected. A state-level core group for conducting this pilot was formed, along with the GIZ, VSS was also included in the State level core group. In this pilot, the Social Audit of NFSA was conducted in 5 Panchayats and One Urban Ward between 18th February to 6th March 2019. Since VSS had already conducted the Social Audits in the tdh-BMZ supported project areas and had gained substantial learnings, so on the request of the Department, it was decided that one member each from all the 4 districts teams of VSS-TDH-BMZ project will be placed in the pilot teams in Khandwa for guidance, monitoring, and support.

Model for the Quality Improvement of Participated in Community Development in the Area of Health and Nutrition

- In the Umaria district, 'Vegetable Seed Bank' has been initiated by 40 women from 20 villages. Children's groups are also associated with this initiative as they go around every home in the village and collect the seeds. So far, 100 families have been connected through this drive on seed bank. More than 10 varieties are available in the 'Vegetable Seed Bank'.
- In Rewa, available local food resources and their dishes were documented along with its nutritive value, traditional and cultural beliefs. A total of 14 recipes have documented.
- A total of 20 NADEP Compost Pits have been constructed in selected 5 villages of all 4-district villages of the project area. The community has used the manure from these compost pits in their farming.
- During the year 2017, 12622 kg Rabi crop seeds were provided to 151 farmers of 3 project districts (Panna: 2000 kg, Satna: 3500 kg and Rewa: 7122 kg). Three types of seeds, namely, Wheat, Gram, and Mustard. The endeavor has yielded a total production of 57213 kg.
- 2 villages, 17 families are involved in the process of developing the community kitchen garden in 1 Bigha (0.2529 ha or 2529.3 m²) of land in Kotagunjapur village and another village, Pati 12 families are participating in developing the community kitchen garden in a land of around 0.5 acres.
- ‘AYUSH’ prescribed treatment (use of traditional ‘Mahamash’ Oil Massage and ‘Suposhtik Churan Kheer’– a milk-based combination of herbs for underweight children is being adopted and continued in the project area.
- A total of 231 children are accessing the facilities in these 8 ECCD Centres. It is observed that 11 (4.7%) children are suffering from Severe Acute Malnutrition (SAM), 44 (19%) are inflicted with Moderate Acute Malnutrition (MAM) and that 176 (76%) children are free from malnutrition.

Babies and children are sufficiently nourished and get medical treatment and can develop physically and mentally according to their age.
Out of 4869 children, 4271 children's growth monitored in December month MIS. A total of 403 children have migrated with their parents and 195 children were not present in their homes.

Across 100 villages of the project area, every child (0-6 years) has been monitored according to weight-for-age, weight-for-height and MUAC its total.

The project area has 1416 total registered pregnant women and lactating women (719 pregnant women and 697 lactating mothers). Take-Home Ration (THR) and other facilities are being provided to 1416 pregnant and lactating women.

A total of 586 deliveries have taken place in the project area from January to June 2018 out of which 547 were institutional (93%) and 39 were the domicile ones. Even these 39 deliveries would have been the institutional ones if ambulance services were available.

Now all 1416 pregnant women and lactating mothers (719 pregnant women and 697 lactating mothers) have Mother and Child Protection (MCP) Cards with them and access the ANC, delivery, and Post Natal Care services through these cards.

Project Team's initiative: Sub Health Centres (SHCs) have been sanctioned in village Pathari and Amdi, district Umaria. A total of 12 health camp was organized in the project area.

AYUSH Treatment: the therapy which was administered to 313 children and 85.6% children registered a weight gain below 500 g; whilst 10.2% children showed an improvement from 500 to 1000 g and that 5.7% children showed weight gain over 1000 g.

Capacity building and Policy Awareness Intervention for the Welfare of Children and Network Activity Regarding Early Childhood Care and Development (ECCD)

- 2 consultations at the state level and 4 meeting cum consultation had conducted at district and block level with concern department and local administration regarding children Health & Nutrition.
- Under the project, VSS has taken initiative for developing community monitoring systems and social audit protocols for effective implementation of the National Food Security Act 2013 by organizing pilots of social audits in the project districts.
- National Communication Consultation was organized at Sewagram (Wardha) by Vikas Samvad on the theme of “Gandhi a Medium or Message” (Gandhi Ek Madhyam Ya Sandesh).
- VSS supported two research studies on NFSA status in Madhya Pradesh by the Center for Child and the Law and Centre for Equity Research.
- Vikas Samvad initiated the process called “Democracy for Children”, the main objective of this to address child issues because Largely, child issues are not included in the political parlance.
- 10 Info packs have been prepared by VSS in 2018 (based on Forest Rights Act, Diarrhoea Management, Sexual Exploitation of Boys, Primer on Growth Monitoring, M.P Budget analysis 2018-19, breastfeeding, Mother tongue of Madhya Pradesh, Child Protection in India, 21st Century Citizen and Crime against Children).

Coordination with other stakeholders

- Writing & Documentation Workshop on Mass Communication.
- Consultation Meeting on National Food Security Act, 2013.
- State Consultation on NFSA
- Civil society workshop on Monitoring Voluntary Guidelines on Right to Food
e. Jan Swasthya Abhiyaan (People Health Movement)
Capacity Building

a. Training Project Personnel – Health and Nutrition
   • Staff training on Organization development, team building, and child information
   • Staff issues was conducted in Baihar District for 4 days. The training was facilitated by Ms. Rita Bhatia (Consultant) and Mr. Chinmay Mishra, (Board member of Vikas Samvad Organization). A total of 24 staff participated including VSS staff.
   • 
   • Training on Result Based Management: A capacity-building 5-days workshop from 13th to 17th February 2018 was organized for the project teams. It was based on team strengthening, capacity building and better coordination in the context of Log Frame Analysis of the project. A total of 39 team members participated in this training including those from 2 network organizations.
   • Youth Development Workshop: The focus of the workshop was to train the youth related to the Constitution and rights. A total of 38 youths participated in this workshop both from the project field team as well as other network organizations.

b. Training Project Personnel – Kindergarten Teacher
   • Training of ECCD staff: The ECCD staff have been trained by the experts from Mobile Créches, Delhi at Rewa over a period of 4 days. It was found to be extremely helpful in understanding the nuances of early childcare practices and developing an understanding of mandatory protocols for running ECCD centers and development activity for different age group children. A total of 36 project team members including 16 childcare workers took part in the training.

Project Impact:

- Overall, a 53% reduction in malnutrition as compared to the first MIS (over the last 2 years) has been realized (down from 55% to 26%). On the other hand, as compared to the baseline status (51%), a reduction of 47.1% has been achieved.
- Out of 5688 application, 4956 applications (87%) have been resolved and the benefits are accruing to the needy applicants whilst 732 applications (13%) are being processed.
- 65 village development plans have been duly adopted by the Gram Sabha.
- 112 water structures were revived in 53 villages across 4 districts whereas 36 compost pits in 28 villages in 4 districts were also constructed which is used by 109 families to develop manure. Nearly 5205 families across 4 districts were involved in kitchen gardens.
- Around 225 farmers in Umaria, Rewa, and Satna have started producing 6 types of traditional crops like Ragi, Kodo, Kutki, Bajra which were not grown by farmers in the last few decades. Through the project initiatives, these unutilized food crops are re-introduced, and farmers are now growing these crops and also consuming it.
- The use of the local unutilized food resources has been promoted in the villages through the Nutrition Day activity which happened at ECCD centers every quarter as well as through meetings with women, children, and youth. The recipes presented on Nutrition Day were made by unutilized food resources that are easily available in and around their villages and are high in nutrition. Also, a different variety of fruits and vegetables were used in the ECCD centers.
• The rise in the number of institutional deliveries from 78% to 95% proves the awareness level in the community.

• As a result of constant follow-ups with the government officials, many issues related to MGNREGA wage payment in Umaria and Panna, health camp for mine workers in Panna, proper functioning of NRC and Anganwadis in all four districts, repairing of hand pumps and water testing in Rewa and Satna, were resolved. In Satna, after informed consultations with BMO and District Health officials, the Beds capacity of Majhgawan NRC got increased by 10 new beds.

• Umaria, the meeting was done with the Divisional Commissioner and the District Collector, which resulted in the opening of new works under MGNREGA were 1823 families got work for approx. 80 days in various projects. In Panna, Public hearing was organized by the government in which issues related to silicosis, malnutrition, and MGNREGA were raised by the community. After the Public Hearing, 15 laborers got their job card and 65 laborers got pending wages under MGNREGA.

• After continuous and huge follow up of VSS, the state Social Audit Committee became functional. Social audit process (audit of schemes under national food security act 2013 by the community) held in all districts (one Panchayat of each district) of the project area along with the approval from the Department of Food & Civil Supplies and Consumer Protection, Women & Child Development Department, Government of Madhya Pradesh. And VSS shared the experience of Social Audit in the Social Audit Committee and the said committee asked VSS to support the pilot of Social Audit in Khandwa. As the next step, this process will be applied in other areas of Madhya Pradesh by Social Audit Committee.

• 4383 members of the 300 Interest Groups have acquired leadership skills and have gained insight into and a better understanding of India's Constitution across the dimensions of rights, development, environment protection, gender disparity and issues about village development and monitoring of government programs and schemes, etc.