



COMMUNITY NUTRITION PROGRAMMES

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Nutritional Problem:

- Nutrition affects growth & development of a person.
- In 1990-92, 24% of population was under nourished which reduced to 22% in 2004-06- marginal fall over decade.
- Overall proportion of under nutrition in under 5 was 59.6% in 1988 & still it is 43.5%.
- Indian underweight children are contributing 42% of the world underweight children.

COMMUNITY NUTRITION PROGRAMMES

The GOI has initiated several supplementary feeding programmes

- **Under Ministry of Health & Family Welfare**

1. Vitamin A prophylaxis programme
2. Prophylaxis against Nutritional Anaemia
3. Iodine deficiency disorder control programme

- **Under Ministry of Social Welfare**

1. Special nutrition programme
2. Balwadi nutrition programme
3. ICDS programme

- **Under Ministry of Education**

1. Midday meal programme

COMMUNITY NUTRITION PROGRAMMES

VITAMIN A PROPHYLAXIS PROGRAMME-

- Launched in the year 1970 on the basis of technology developed by the National Institute of Nutrition Hyderabad.
- It consist of given a dose of an oily preparation of vitamin A (Retinol palmitate) , 1 lakh IU to children at 9 months of age along with measles vaccine and then give 2 lakh IU of vitamin A to children every 6 months orally to all preschool children through peripheral health workers.
- In this way the child would be immunized against xerophthalmia

COMMUNITY NUTRITION PROGRAMMES

PROPHYLAXIS AGAINST NUTRITIONAL ANAEMIA-

- launched by GOI in the fourth Five YEAR Plan in 1970.
- The programme consist of distribution of iron and folic acid tablets **to pregnant women, lactating women and young children till 12 years of age.**
- The eligibility is determined by the Hb level. If the Hb level is between 10-12 then tablets are given ,if it is less than 10 then the patient is referred to a health center.
- Women are given tablets containing 100 mg of elemental iron & 0.5 mg of folic acid for a period of not less than 100 days.
- Ideally the supplementation should be continued for 2-3 months after the Hb returns to normal so as to replenish the iron stores.
- Children are given tablets containing 20 mg of elemental iron and 0.1 mg of folic acid daily.
- The MCH centers, PHC centers and the ICDS projects implement the program.
- The National Institute of Nutrition suggest fortification of salt with **ferric ortho-phosphate** consumed over a period **of 12-18 months.**

PROPHYLAXIS AGAINST NUTRITIONAL ANAEMIA- GOI 2007 RECOMMENDATION

- Infant between 6-12 months should be included in this programme .
- 6 months-60months child should be given 20mg elemental iron & 100 µg folic acid.
- Under IMNCI above guidelines should include.
- For children 6-60months ferrous sulphate & folic acid should be provided in liquid formulation.
- 6yrs-10yrs, dose is 30mg elemental iron + 250 µg folic acid & in 11-19 yrs adolescents dose is of adult dose & included in National Nutrition Anaemia Prophylaxis Programme.

National Iron plus Initiative

Following age groups are included

- **6-60 months:** biweekly through out the period 6-60months & de-worming after 12 months &above. (1ml IFA)
- **5-10yrs:** weekly through out the period 5-10yrs of age & bi annual de-worming . (45 mg elemental iron + 400 µg folic acid)
- **10-19 yrs:** weekly through out the period 10-19yrs of age & bi annual de-worming . (100 mg elemental iron + 500 µg folic acid)
- **Pregnant & lactating mother:** 1 tab X 100days after 1st trimester & 100 days in post partum period
- **Women in reproductive age group:** wkly through out reproductive period.
- Drugs are given by ASHA, ANM & in schools by teachers.

COMMUNITY NUTRITION PROGRAMMES

CONTROL OF IODINE DEFICIENCY DISORDER-

- The NIDD control programme was **launched in 1986** with the objective to replace the entire edible salt by iodized salt in a phased manner by 1992.
 - There are 4 components of the programme, they are iodized salt or oil, monitoring & surveillance, manpower training and mass communication.
1. **Iodization of salt-** In India the level of iodization is fixed by the PFA Act to at least 30 ppm at production point and 15 ppm at consumer point.
 2. **Iodization of oil** – Intramuscular injection of iodized oil 1mg every 4 years. The method is more expensive and less practical
 3. **Iodized oil, oral-** Oral administration of iodine as iodized oil or sodium iodate tablets. They are effective but costly

COMMUNITY NUTRITION PROGRAMMES

- **CONTROL OF IODINE DEFICIENCY DISORDER-**
 1. **Iodine monitoring** – Net work of laboratories essential for iodine excretion determination, determination of iodine in water, soil and food as part of epidemiological studies, determination of iodine in salt for quality control
 2. **Manpower training-** Health workers should be fully trained in all aspects of goiter control including legal enforcement and public education
 3. **Mass communication-** for creating public awareness for the success of the programme.

COMMUNITY NUTRITION PROGRAMMES

SPECIAL NUTRITIONAL PROGRAMME:

- The programme was started In 1970 for **pregnant and nursing mothers and children below 6 years of age.**
- The supplementary food supplies about **300 kcals and 10-12 grams proteins** per child per day.
- The mothers receive **500 kcals and 25 grams of proteins per day.**
- The supplement is provided to them for **300 days** in a year.
- This programme is now gradually merged into the ICDS programme

COMMUNITY NUTRITION PROGRAMMES

BALWADI NUTRITION PROGRAMME –

- This programme was started in 1970 for the benefit of children in the **age group 3-6 years** in **rural** areas.
- The programme is implemented through balwadis which also provide pre-primary education to these children.
- The food supplement provides **300 kcals and 10 grams proteins per child per day**.
- Balwadis are now phased out due to universalization of ICDS

COMMUNITY NUTRITION PROGRAMMES

MID-DAY MEAL PROGRAMME-

- is also known as the School Lunch Programme.
- It is operational since 1961 through out the country.

The objectives are

1. To increase school admissions
2. To increase school attendance
3. To improve literacy rate
4. To improve the nutritional status of school children
5. Reorient eating habits
6. Introduction of nutritional education
7. Encouraging use of local commodities

COMMUNITY NUTRITION PROGRAMMES

MID-DAY MEAL PROGRAMME-

- In formulating the meal following principles should be followed
 1. The meal should **be a supplement and not a substitute**
 2. The meal should supply **at-least one-third of the total energy** requirement and **half of the protein** requirement
 3. **The cost should low**
 4. The meals should be **simple** to prepare
 5. **Locally available food stuff** should be used
 6. The menu should be **changed frequently** to avoid monotony
- **The National Institute of Hyderabad** has made model recipes for North & South Indians. It suggest that the minimum number of feeding days should be 250.

COMMUNITY NUTRITION PROGRAMMES

MID-DAY MEAL PROGRAMME-

- A model menu is as follows.
- The mid-day meal programme became a part of minimum need programme in the Fifth Five Year Plan.

foodstuff	g/day/child
Cereals	75
Pulses	30
Oils /Fats	8
Leafy veg	30
Other veg	30

COMMUNITY NUTRITION PROGRAMMES

- **MID-DAY MEAL SCHEME-**
- Mid-day meal schemes also known as National Programme of Nutritional Support to Primary Education,
- it is a **centrally sponsored** scheme launched on 15th August 1995 & revised in 2004,
- its objectives are Universalization of primary education by increasing enrolment, retention & attendance & impact on nutrition, it covered the whole country by 1997.

MID-DAY MEAL SCHEME-

- originally std I- V students in government , local body & government aided schools were covered.
- the scheme was extended to cover children studying in Education Guarantee schemes,& Alternative and Innovative Education Centers also.
- The centre gives assistance in form of food grain from Food Corporation of India Godowns at rate of 100g. Per student per day & subsidy on transport.
- A cooked mid-day meal with minimum 300 kcals & 8 to 12 grms protein will be provided to all children in class I to V.

INTEGRATED CHILD DEVELOPMENT SERVICES (ICDS)



INTEGRATED CHILD DEVELOPMENT SERVICES (ICDS)

- Initiated by the GOI from 2nd October 1975.
- The ICDS provides an **integrated package of** early childhood services. These consist of
 1. Supplementary nutrition
 2. Immunization
 3. Health check-up
 4. Medical referral services
 5. Nutrition & health education for women
 6. Non-formal education of children up to 6 years, pregnant & nursing mothers in rural, urban & tribal areas

INTEGRATED CHILD DEVELOPMENT SERVICES (ICDS)

- **The objectives:**

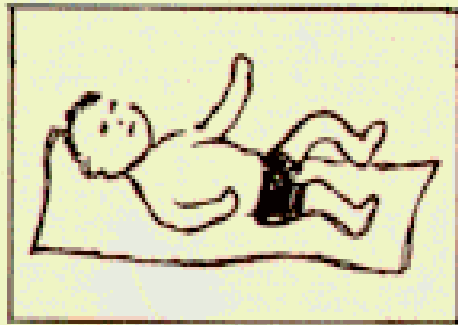
1. Improve the nutritional & health status of children in 0-6 years age group
2. To lay foundation of the proper psychological, physical & social development of the child
3. To reduce mortality, morbidity, malnutrition & school drop outs.
4. To achieve coordination of policy & implementation among various departments working for child development
5. To enhance the capability of the mother & nutritional needs of the child through proper nutrition & health education

INTEGRATED CHILD DEVELOPMENT SERVICES

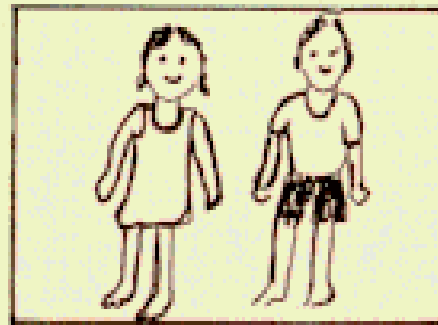
BENEFICIARIES	SERVICES
PREGNANT WOMEN	HEALTH CHECKUP IMMUNIZATION WITH TT SUPPLEMENTARY NUTRITION NUTRITION & HEALTH EDUCATION
NURSING MOTHERS	HEALTH CHECKUP SUPPLEMENTARY NUTRITION HEALTH & NUTRITION EDUCATION
WOMEN 15-45 YRS	NUTRITION & HEALTH EDUCATION
CHILDREN<3YRS	SUPPLEMENTARY NUTRITION, REFERRAL IMMUNIZATION ,HEALTH CHECKUP
CHILDREN 3-6 YRS	SUPPLEMENTARY NUTRITION, REFERRAL IMMUNIZATION ,HEALTH CHECKUP, NONFORMAL EDUCATION SUPPLEMENTARY NUTRITION
ADOLESCENT GIRLS	NUTRITION & HEALTH EDUCATION, Awareness generation on women and children rights

*AWW assists ANM in identifying the target group.

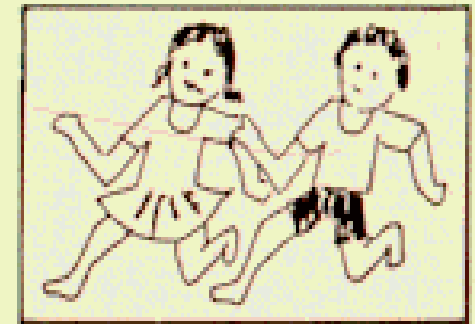
Services	Target Group	Service Provided by
Supplementary Nutrition	Children below 6 years: Pregnant & Lactating Mother (P&LM)	Anganwadi Worker and Anganwadi Helper
Immunization*	Children below 6 years: Pregnant & Lactating Mother (P&LM)	ANM/MO
Health Check-up*	Children below 6 years: Pregnant & Lactating Mother (P&LM)	ANM/MO/AWW
Referral Services	Children below 6 years: Pregnant & Lactating Mother (P&LM)	AWW/ANM/MO
Pre-School Education	Children 3-6 years	AWW
Nutrition & Health Education	Women (15-45 years)	AWW/ANM/MO



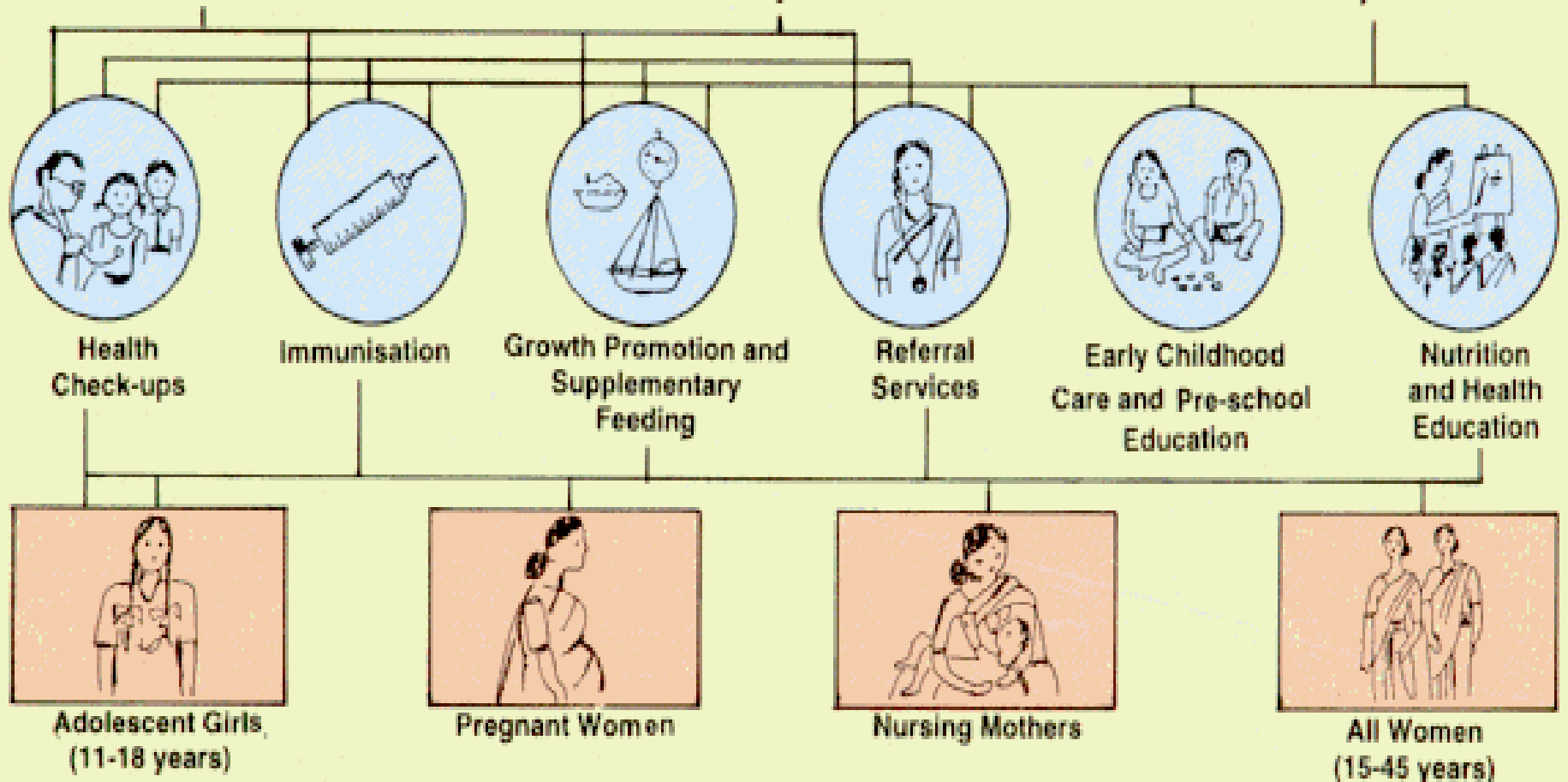
Children under 1 year



1-3 years



3-6 years



INTEGRATED CHILD DEVELOPMENT SERVICES (ICDS)

Supplementary nutrition –

- given to children below 6 years , pregnant & lactating mothers from low income group.
- 1. Each child up to 6 yrs gets 300 calories & 8-10 grms of proteins
- 2. Each adolescent girl gets 500 calories & 20-25 grms of proteins
- 3. Each pregnant & lactating mother gets 500 calories & 20-25 grms of proteins
- 4. Each malnourished child gets 600 calories & 16-20 grms of proteins
- Nutrition is **given for 300 days** in a year & is funded by **Minimum Needs Programme.**
- Children are weighed every month. Nutrition & health education is given to mothers of children suffering from 1st degree malnutrition , **supplementary nutrition to those suffering from 2nd & 3rd degree** malnutrition and those with 4th degree malnutrition are advised hospitalization

Supplementary nutrition



Sl.No.	Category	Pre-revised rates	Revised rates (per beneficiary per day)
1.	Children (6-72 months)	Rs.2.00	Rs.4.00
2.	Severely malnourished children (6-72 months)	Rs.2.70	Rs.6.00
3.	Pregnant women and Nursing mothers	Rs.2.30	Rs.5.00

Revised Nutrition norms:

No.	Category	[Pr-revised]		[Revised] (per beneficiary per day)	
		Calories (K Cal)	Protein (g)	Calories (K Cal)	Protein (g)
1.	Children (6-72 months)	300	8-10	500	12-15
2.	Severely malnourished children (6-72 months)	600	20	800	20-25
3.	Pregnant women and Nursing mothers	500	15-20	600	18-20

INTEGRATED CHILD DEVELOPMENT SERVICES (ICDS)

- **Nutrition and health education** –
is given to all women in the age group 15-45 years, priority is given to pregnant & nursing mothers
- **Immunization** – of children against the 6 VPDs and TT given to all pregnant women
- **Non-formal education-**
 - to develop desirable attitudes, values & behavior patterns among children.
 - Locally produced inexpensive toys and material are used

INTEGRATED CHILD DEVELOPMENT SERVICES (ICDS)



- **Health check ups-**
- ANC care for pregnant women, PNC care for nursing mother and care of newborn infant, care of children under 6 years of age
- **Pregnant women** given immunization, iron & folic acid tablets and proteins supplements. High risk mothers are referred to appropriate institutions
- **Children under 6 years-** Record of weight & height at periodic intervals, milestones, Immunization, health checkup every 3-6 months, treatment of diseases, deworming, prophylaxis against vit A, referrals for serious cases
- **Health records** of the children , ANC, PNC cards are maintained. Growth chart of the child given to the mother

Organization of ICDS

- Each Anganwadi covers approximately 1000 population
- For urban & Rural projects:
400-800- 1AWC, 800-1600-2AWCs, 1600-2400-3AWCs
- For mini AWC:
150-400- 1 mini AWC,
- For Tribal/Hilly & difficult areas:
300-800- 1AWC, 150-300 -1 Mini AWC



INTEGRATED CHILD DEVELOPMENT SERVICES (ICDS)

The administration of ICDS

- Community Development Block (Rural)
- Tribal Development Block (Tribal)
- Slums (Urban)
- Community Development Block (CDPO) population 80,000-1,20,000
 - ↓
 - Mukhya sevikas
 - ↓
 - 25/17/20 AWW
- Each AWW works in a anganwadi or balwadi in the village and caters to a population of 1000



Anganwadi worker-



is a **part time trained voluntary worker** and receives an honorarium of Rs. 1500 per month.

- She is assisted by a helper who is paid Rs 700 per month.
- She **maintains growth chart** of the child till 3 yrs of age.
- After 3 years children are assessed with help of Shakir's tape or mid arm circumference. If the child falls in danger zone then the child is weighted every month.

Anganwadi worker-



- She organizes **non-formal education** for 3-6 age grp children, teaches mothers on health & nutrition
- **Coordinates with PHC** for health checkups, immunization & referrals, she provides treatment for minor ailments.
- **maintains records**, submits reports every month to MS. Organizes supplementary nutrition feeding for children, expectant & lactating mothers.
- **Carries out survey of area to** find out number of beneficiaries, liaises with block administrator, local schools, health staff and community and works for other community based activities

INTEGRATED CHILD DEVELOPMENT SERVICES

Mukhya sevika (MS) –

- is a full time worker who supervises the work of the anganwadi worker.
- She visits the anganwadi once a month, liaise with lady health visitor in nutritional and health activities, assist in record keeping, visits of health personnel and community visits and provide on job training to AWWs

Child Development Project Officer (CDPO) –

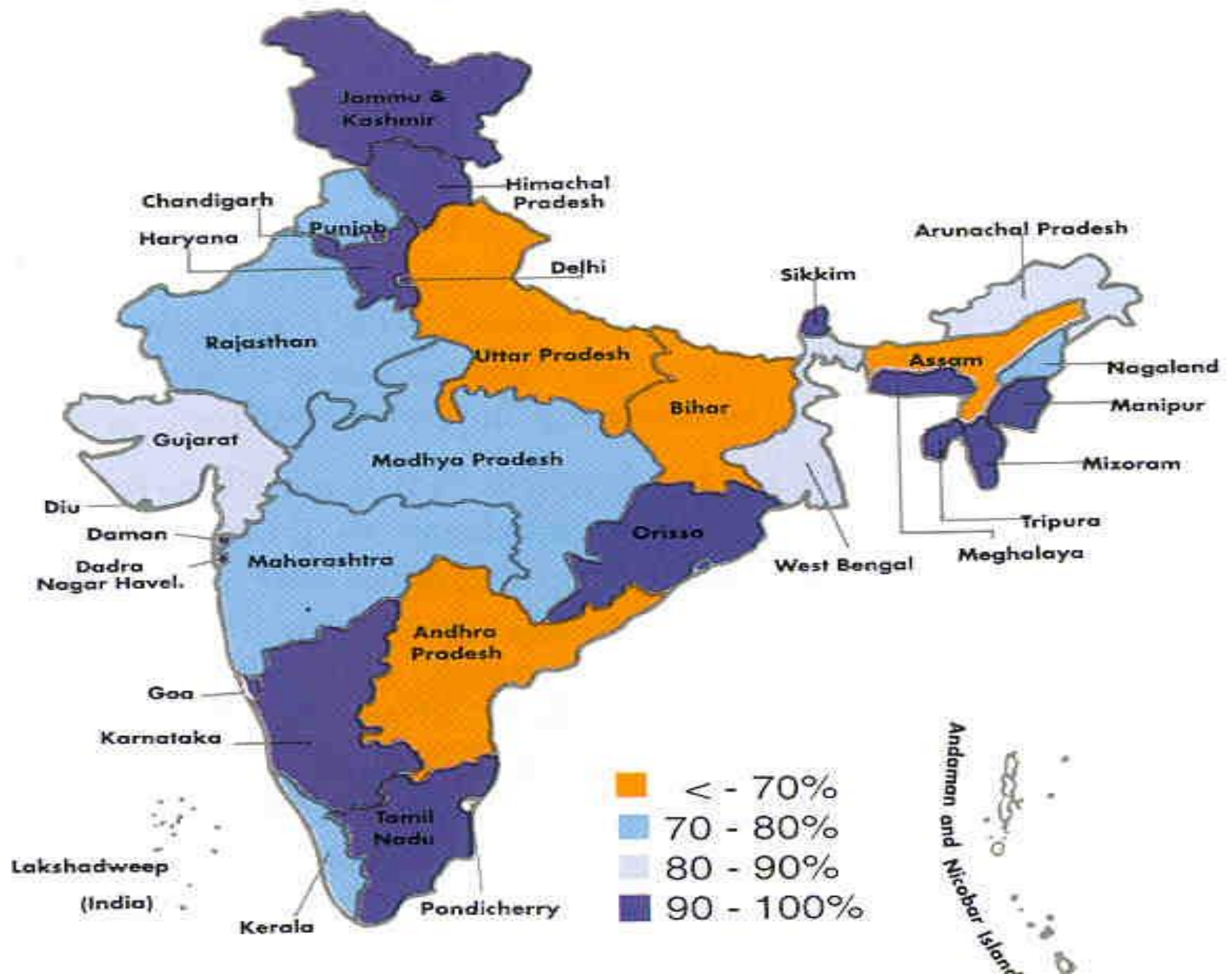
- supervises, coordinates and guides the work of the entire ICDS project.
- Provides supervision to the Mukhya Sevikas. He is assisted by one assistant CDPO
- **Role of health department** – It provides health checkups. Handles referrals, immunization, health & nutrition education, continuing education of the health staff and monitoring of the health components of ICDS.

INTEGRATED CHILD DEVELOPMENT SERVICES

KISHORI SHAKTI YOJNA-

- A scheme for adolescent girls in ICDS was launched in 1991. All adolescent girls in the age group 11-18 years receive the following common services
 1. Watch over menarche
 2. Immunization
 3. Health checkup every 6 months
 4. Training for minor ailments
 5. De-worming
 6. Prophylactic measures against anemia, goiter, vitamin deficiency etc
 7. Referral in case of need
- The impact of the program is evident by indicators like : increased birth weight, decreased malnutrition, increased immunization coverage, reduced child mortality & morbidity rates in areas covered by ICDS

Coverage of ICDS scheme



Services extended to ANM& her Helper:

- Honorarium
- Leave : paid absence of 135 days of maternity leave.
- Insurance cover: Anganwadi Karyakartri Bima Yojana' 280 Rs as annual permium.
- The Award comprises Rs.25,000/- cash and a Citation at Central level and Rs.5000/- cash and a Citation at State level.
- **Uniform:**(saree/suit @ Rs. 200/- per saree per annum)

Monitoring system under ICDS scheme

- **(i) Supplementary Nutrition** : No. of Beneficiaries (Children 6 months to 6 years and pregnant & lactating mothers) for supplementary nutrition;
- **(ii) Pre-School Education** : No. of Beneficiaries (Children 3-6 years) attending pre-school education;
- **(iii) Immunization, Health Check-up and Referral services** : Ministry of Health and Family Welfare is responsible for monitoring on health indicators relating to immunization, health check-up and referrals services under the Scheme.
- **(iv) Nutrition and Health Education:**
- **(v) No. of ICDS Projects and Anganwadi Centres (AWCs)**



Thank you