

MOODY'S

ABOUT MOODY'S ANALYTICS

"Moody Analytics provides financial intelligence and analytical tools to help business leaders make better, faster decisions. Our deep risk expertise, expansive information resources, and innovative application of technology help our clients confidently navigate an evolving marketplace. We are known for our industry-leading and award-winning solutions, made up of research, data, software, and professional services, assembled to deliver a seamless customer experience. We create confidence in thousands of organizations worldwide, with our commitment to excellence, open mindset approach, and focus on meeting customer needs.

FOCUS AREA

Maternal health and Child care (for e.g. Maternal and child micro-nutrient/ dietary supplementation/ Food fortification for children, women and general population/ Iron Folic Acid supplementation/ Vitamin A supplementation).

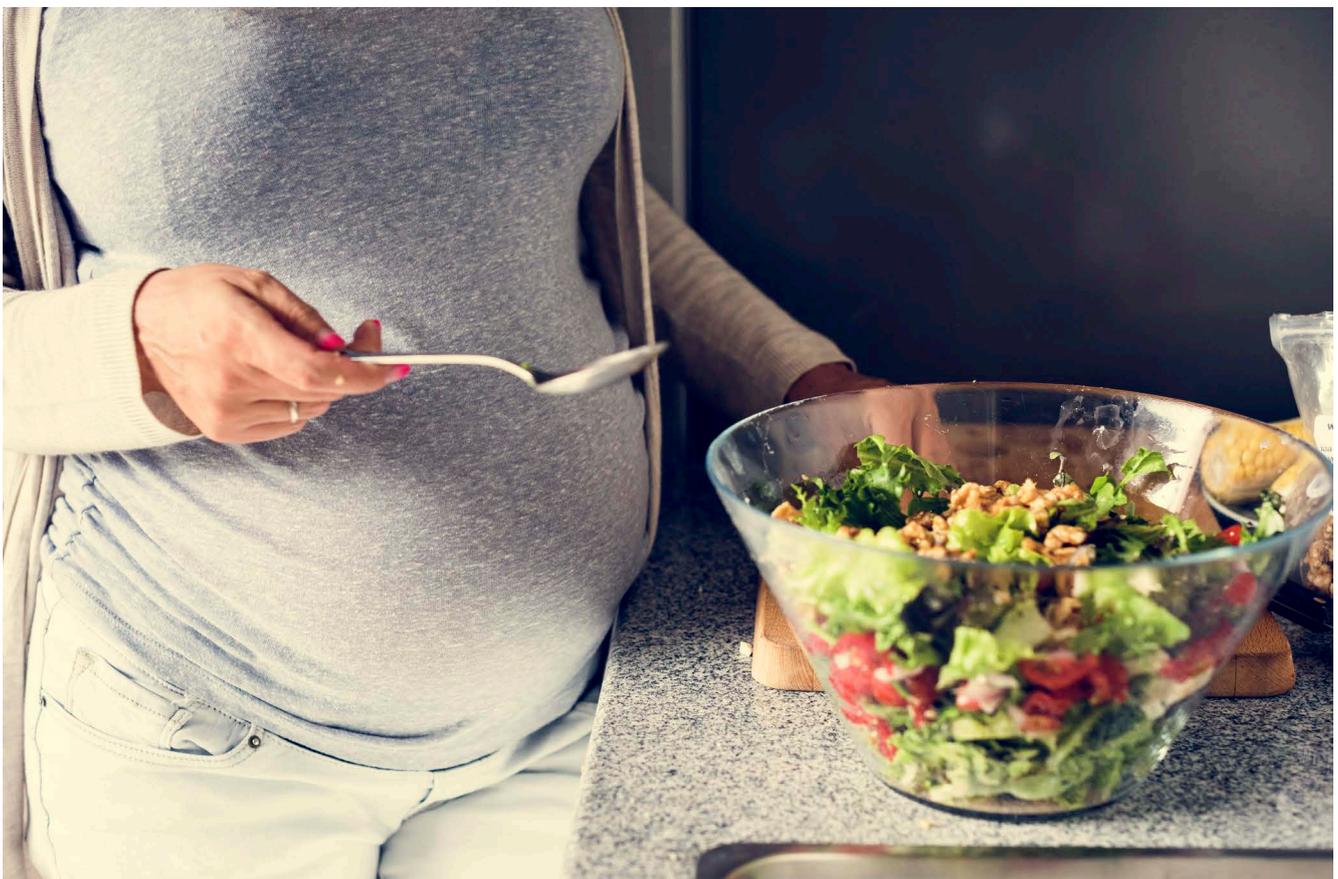


TARGET STATE

United States

OBJECTIVES

Improved health and nutritional status of pregnant and lactating women in 33 villages in Jhabua. Improved health and nutritional status of targeted children below five years in 33 villages in Jhabua



The background of the entire page is a vibrant blue color with a pattern of wavy, vertical lines that create a sense of depth and movement, resembling a tunnel or a series of curved paths.

MOODY'S

COMPANY BRIEF

COMPANY HEADQUARTER

United States

GEOGRAPHICAL AREA(S) WHERE THE INITIATIVE IS OPERATIONAL

Madhya Pradesh

MENTION THE NAMES OF THE SPECIFIC DISTRICTS/ VILLAGES/ AREAS IN THE CHOSEN STATE

Jhabua district

THE INITIATIVE TAKEN BELONGS TO WHICH OF THE FOLLOWING CATEGORIES?

CSR

SPECIFY THE TARGET GROUP OF THE INITIATIVE.

children, pregnant and lactating women

WERE THERE ANY PARTNERS IN THE INITIATIVE?

Yes

IF YES, WHO WERE THE IMPLEMENTATION PARTNERS IN THE INITIATIVE?

NGO/Development organisations

SPECIFY THE NAME OF THE PARTNERS INVOLVED IN THE INITIATIVE.

Child Fund India (CFI)

WAS THERE ANY BASELINE STUDY?

No

IF THERE WAS A BASELINE STUDY, WHAT WERE THE FINDINGS OF THE STUDY?

NA

NOTE FROM THE CEO/MD/ PROGRAM IN-CHARGE:

Awaited

IMPLEMENTATION

Ground-level workers conducted household visits in each of these villages to identify SAM, MAM and pregnant and lactating women who were later also verified with anganwadi worker (AWW) and auxiliary nurse midwife (ANM) records. They were provided with a locally available nutritious food known as Nutri Plus powder. The volunteers (field workers) also visited each household in a village, identifying children under five and conducting screening for malnourished children using mid-upper arm circumference (MUAC) tape. The identified children were verified by AWWs before being referred to the Nutritional Rehabilitation Centre for rehabilitation.

The adult male members (husbands, fathers-in-law) were made aware of the importance of both maternal and child care and are engaged in various activities to promote care during critical phases, for better child health and developmental outcomes. Behavior change communication such as Inculcating good practices such as colostrum feeding, forming mothers committees and encouraging mothers to participate in village health and nutrition day sessions. Efforts to create links between malnourished children and the government, the Nutritional Rehabilitation Centre (NRC) for treating infection and nutrition management. The project has developed a tool that enables migrant beneficiaries to get the required support from primary health centres (PHCs), community health centres (CHCs), auxiliary nurse midwives (ANMs) and anganwadi workers (AWWs) at their destination.

ACHIEVEMENTS

Awaited

DO YOU HAVE ANY PLANS TO SCALE UP THE CURRENT INITIATIVE? IF YES, PLEASE MENTION DETAILS OF WHERE, WHEN AND HOW.

No

ARE YOU LOOKING FORWARD TO PARTNERSHIPS OR COLLABORATION IN FUTURE?

No

IF YES, WHAT TYPES OF COLLABORATIONS ARE BEING THOUGHT OF?

NA

CHALLENGES

Due to a high migration rate in Jhabua (52%), a large number of children could not be screened. Since ChildFund India has a long-term presence in the district and is also implementing livelihood interventions to promote food security to combat poverty and curb outward migration, the project was also able to leverage its ongoing livelihood interventions supporting 120 families for poultry farming.

Traditional family practices were a major roadblock, especially the practice of discarding the colostrum. However, intensive family counselling resulted in a decrease in these traditional practices.

The NRC was temporarily closed for four months in 2016. Intensive advocacy efforts helped to reopen it. awaitedchildren,Âs physical and cognitive development. Children attending these sessions often come from some of the most disadvantaged communities, where meeting basic food requirements is a daily struggle. They are vulnerable to malnutrition and its numerous consequences. In such an environment, it becomes critical to educate children on the importance of health and nutrition. "

WHAT WERE THE FINDINGS OF THE END-LINE STUDY?

Around 61% Mothers receive a minimum of 3 ANC check-ups. 74% Mothers receive a minimum of 3 PNC check-ups. 60% Mothers gain 6-9kgs in weight during pregnancy. 85% Increase in institutional deliveries. 68% Babies born with normal birth weight. 68% Babies born with normal birth weight. 87% Mothers initiate breastfeeding within 1 hour of giving birth. 73% Mothers practice exclusive breastfeeding for the first 6 months. 59% Mothers introduce semi-solid foods at appropriate time. 25% Children suffering from common childhood illnesses. 86% Children receive timely medical attention from qualified doctors

MENTION ABOUT THE SUCCESSFUL CASE STORIES THAT HAVE EMERGED FROM THE IMPLEMENTATION.

Awaited

MAJOR FINDINGS/ FINAL ANALYSIS

Awaited