



ABOUT PATH

"PATH is a global organization that works to accelerate health equity by bringing together public institutions, businesses, social enterprises, and investors to solve the world's most pressing health challenges. With expertise in science, health, economics, technology, advocacy, and dozens of other specialties, PATH develops and scales solutionsâ€"including vaccines, drugs, devices, diagnostics, and innovative approaches to strengthening health systems worldwide. PATH has been working in India since the late 1990sâ€"bringing governments, communities, private-sector companies, and experienced public health practitioners together to address some of the country's most crucial health problems. Today, PATH's projects in India focus on Tuberculosis, HIV, Neglected Tropical Diseases, Vaccines, and Maternal, New born Child health and Nutrition. PATH provides technical support to the central government and multiple state governments on various health and nutrition issues. We also engage at the district level through our local partners. We are recognised as a key agency with

trict level through our local partners. We are recognised as a key agency with vast technical expertise in health technology, health systems, and nutrition in India.

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 Seattle, USA

OBJECTIVES

the objectives include, Feeding of fortified rice (Iron, folic acid, Vitamin B12, Thiamin, Niacin, Viatmin b6 and Vitamin A), under MDM and ICDS schemes to address/ prevent micronutrient malnutrition/ Anemia amongst school going children and beneficiaries reached through these schemes. And piloting batch blending operations at warehouse / centralized kitchen level for rice fortification scale up.

DATH DATH COMPANY BRIEF

COMPANY HEADQAURTER

Seattle, USA

GEOGRAPHICAL AREA(S) WHERE THE INITIATIVE IS OPERATIONAL

Gujarat, Karnataka, Punjab, Uttar Pradesh

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

CHOSEN STATE

Chandigarh â€" Chandigarh Karnatakaâ€"Bangalore, Mysore, Mangalore, Dharwad and Bellary, Chamrajnagar, Kolar, Belgaum and Koppal, Chamrajnagar, Kolar, Belgaum and Koppal Gujarat â€" Ahmedabad and Gandhinagar Uttar Pradesh â€" Lucknow

THE INITIATIVE TAKEN BELONGS TO WHICH OF THE FOLLOWING CATEGORIES? Other

SPECIFY THE TARGET GROUP OF THE INITIATIVE.

school going children.

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.

Chandigarh Administration & PATH, Government of Karnataka, The Akshaya Patra Foundation, Karuna Trust, Government of Gujarat, Government of Uttar Pradesh

ARE YOU LOOKING FORWARD TO PARTNER-SHIPS OR COLLABORATION IN FUTURE?

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

Yet to share

IMPLEMENTATION

PATH in India is working with Akshaya Patra, a not-for-profit organization implementing the Mid-Day Meal Scheme in the government schools and government-aided schools, in Karnataka, Gujarat and Uttar Pradesh currently to improve the nutrition and health status and benefitting around 650,000 children every day by integrating fortified rice into the local school feeding program. PATH helped in building infrastructure for rice fortification in Akshaya Patra's centralized kitchens in Karnataka, Gujarat and Uttar Pradesh. PATH also provided technical support in establishing a robust quality control and quality assurance system at these centralized kitchens. Trainings were arranged for the staff for ensuring smooth operations. In terms of the reach of safety net programs, this is the largest rice fortification initiative to date. The effort is coupled with other complementary activities, such as imparting nutrition and hygiene education among students to encourage healthy behaviors.

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

Yet to share.

MAJOR FINDINGS/ FINAL ANALYSIS

In Karnataka it was observed that providing fortified rice has a positive impact on nutritional status, attendance rate and cognitive abilities of children. It also helps in reducing morbidity rates. In Gujarat, consuming fortified rice for 8 months lead to significant increase in haemoglobin and a decrease in prevalence of mild and moderate anaemia compared to control district. The study also indicated a positive trend to reducing underweight and stunting and a positive impact on cognitive function and school absenteeism.

CHALLENGES

Yet to share

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

Yet to share

WAS THERE ANY BASELINE STUDY? No

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

WHAT WERE THE FINDINGS OF THE END-LINE STUDY?

In Karnataka, a total of 450,000 children were fed fortified rice through the school meal program from 2,500 schools across 5 districts (Mysore, Mangalore, Bangalore, Bellary and Hubli). Standardized school meals with fortified rice were supplied. Along with nutritional intervention, the project emphasized on comprehensive education of children with regards to nutrition, hygiene and sanitation at the schools. Selected students were followedâ€"up for two years. Quantitative data pertaining to nutritional status, morbidity, absenteeism and cognitive performance was collected from the enrolled children by using standard tools. The findings concluded that providing fortified rice as part of a comprehensive program through the mid-day meal has a positive impact on nutritional status, attendance rate and cognitive abilities of children. Further, rice fortification also has the potential of reducing morbidity rates. Similarly, prevalence of stunting and wasting also reduced. Absenteeism rate has decreased significantly by 2% as compared to the baseline figure of 12%. For cognitive ability, it was observed that nearly half (42.8%) of students showed improvements in both Mathematics and English scores from baseline to end line.

In Gujarat, to assess the effect that eight months of regular fortified rice consumption would have on child† ™s health. Data was collected from 484 and 489 children from program and control districts respectively, indicating that there was a significant increase in haemoglobin in the program district and a decrease in prevalence of mild and moderate anaemia compared to control district. The study also indicates a positive trend to reducing underweight and stunting and a positive impact of rice fortification on cognitive function and school absentee-ism.

ACHIEVEMENTS

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