



Learning from the Community



Community members in Banswara we talked to for our qualitative study

“He only eats tanatan (a packaged snack) and biscuits,” says Lali Bai*, a young mother in Digodpaar, Baran District. Her 7-month old son refuses to have home-cooked food. But he is not the only one. Many parents initiate complementary feeding of infants with junk foods. Cheap, convenient and easily available, they are the go-to for some mothers if their child does not take to homemade foods after six months of exclusive breastfeeding.

This is a finding from RajPusht's qualitative study of Infant & Young Child Feeding (IYCF) practices in five project districts—Baran, Banswara, Dungarpur, Pratapgarh and Udaipur. Our conversations with 206 respondents—mothers, fathers, grandmothers and frontline workers—helped us learn about the prevalent notions, practices and challenges.

Patriarchal expectations remain rife. While most people gave lip service to the fact that girls and boys are equal, their expressions suggested otherwise.

A mother of two daughters teared up after a perfunctory answer to a question about gender equality and following a heavy silence, said that her mother-in-law didn't want another girl. Such is the desire for a boy among families that according to Rama, a staff nurse in one of the districts, many mothers refuse to breastfeed their second or third daughter.

Most mothers are compelled to return to household chores or paid work immediately after delivery. Entire families migrate for work. Often, they are too fatigued to even breastfeed. Yet, they try their best to feed their child, frequently taking them along to their worksite.

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In the news



Article on local foods of Rajasthan published in Rajasthan Patrika. RajPusht promotes local, seasonal foods to ensure dietary diversity and food security

विश्व जनसंख्या दिवस पर वैबनार का आयोजन

भिलवाड़ा। विश्व जनसंख्या दिवस के उपलक्ष्य में आयोजित हो रहे पखवाड़े के तहत बुधवार को परिवार नियोजन के स्थाई एवं अस्थायी साधनों के उपयोग व छोटा परिवार सुख का आधार परिवार नियोजन के तहत आज जिले के चिकित्सा अधिकारी एवं स्वास्थ्य कर्मियों की जूम वीसी के माध्यम से कार्यक्रम की समीक्षा की गई। यह जानकारी अतिरिक्त मुख्य चिकित्सा एवं स्वास्थ्य अधिकारी डॉ. सीपी गोस्वामी द्वारा दी गई। कार्यक्रम में वर्तमान में जिले में संचालित हो रहे गहन दस्त नियंत्रण पखवाड़े के तहत जन्म से 5 साल के बच्चों को वितरित किए जा रहे हो ओ आर एस पैकेट एवं पोषण अभियान की समीक्षा भी की गई। कार्यक्रम में डॉ. सी. सी. शर्मा, डी.एम.डी. शामिल थे।

Sunil Kumar, Deputy Team Leader, RajPusht, shared insights on childhood diarrhoea management and Poshan Abhiyaan with the Health Department, Bhilwara District, in a webinar on July 14. Several newspapers published reports about this event

'पोषण चैम्पियन' के लिए दो दिवसीय आवासीय प्रशिक्षण शुरू

पत्रिका न्यूज नेटवर्क patrika.com
बारन, इन्दिरा गांधी मातृत्व पोषण योजना के अन्तर्गत आईपीई ग्लोबल के तत्वावधान में संस्कार पोषण का दो दिवसीय आवासीय प्रशिक्षण एक निजी होटल में सोमवार को प्रारम्भ हुआ। संस्था सचिव लट्टर लाल पोषा ने बताया कि जिले में महिला एवं बाल विकास विभाग के माध्यम से 1 अप्रैल 2021 से संचालित इन्दिरा गांधी मातृत्व पोषण योजना में कार्य कर रहे ब्लॉक प्रोग्राम मैनेजर एवं पोषण चैम्पियन के चयन प्रक्रिया का दो दिवसीय प्रशिक्षण दिया जा रहा है। स्टेट रिसोर्स पर्सन विवेक शर्मा, निकिता दोनो ने धात्री माताओं व गर्भवती महिला के पोषण पर विस्तार से जानकारी दी। प्रशिक्षित पोषण चैम्पियन अपने सेक्टर में योजना के चिन्हित लाभार्थियों का सर्वे कर उनको योजना में मिलने वाले लाभ की जानकारी व पूरक आहार लेने के तरीके बताएंगी। प्रशिक्षण कार्यक्रम में आईपीई ग्लोबल के जिला कार्यक्रम प्रबंधक नरेन्द्र जागिड़, जिला सूचना एवं डाटा मैनेजर रूपम भारती सहित जिले के चयनित ब्लॉक प्रोग्राम मैनेजर एवं पोषण चैम्पियन के चयन प्रक्रिया का दो दिवसीय प्रशिक्षण दिया जा रहा है।

Training of RajPusht's Poshan Champions in Baran featured in Rajasthan Patrika

Those who live in nuclear families have to manage everything on their own. The 9-month-old son of Ramrati*, another young mother from Digodpaar, subsists mostly on breast milk. She believes that she can feed cereals and fruits to the child only once he has teeth. Her husband is out for work during the day and there are no in-laws to guide her.

Like Ramrati, many others live in a knowledge vacuum. Manju Bai*, a grandmother in Bhabhuka village, Baran District said during our interaction that it was the first time anybody was talking to her family about nutrition and childcare.

In this vacuum, there were bright spots too. Kaushalya Prajapat* and Sunita Meghwal* of Baran District were unable to go to the Anganwadi Centre and receive nutrition counselling as

they had gone to their maternal homes during their pregnancy, a common practice in the region. Yet, they knew all about the recommended IYCF practices. Kaushalya said, “Most people in my maternal village say that you should feed a newborn water, but I had received phone calls and messages from a doctor who told me to feed only mother’s milk for the first six months.” Her face lit up as she recalled the doctor’s advice. Similarly, Sunita learnt about exclusive breastfeeding from a TV ad.

Lesson from such discussions inform the behaviour change strategy pursued by RajPusht. We hope to fill the information vacuum and reach mothers through a mix of innovative and traditional approaches.

**All names have been changed to protect the respondents' privacy*

Breaking the Cycle of Undernutrition



(Representative Photo) Postnatal care is important as many teenage mothers face problems in breastfeeding

During a visit to observe an MCHN Day, I saw a mother who had come with her malnourished infant for routine immunisation. On discussing with the ASHA and ANM, I realised that the baby had low birth weight and his mother was not even 16 years old. She did not receive any government maternity cash transfers as her family did not want to disclose her age.

According to NFHS-4, 40% of the women aged 20-24 years in Udaipur get married before the legal minimum age of 18. Early marriage usually translates into early motherhood,

Krishna Singh Gohil, District Program Manager, Udaipur, Rajasthan



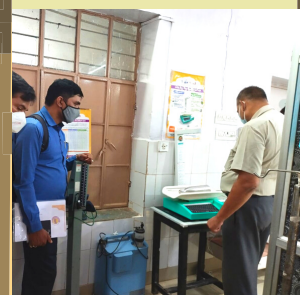
Quarterly Review of PMMVY and IGMPY in Dungarpur by the District Collector, 26 July



Training of Poshan Champions in Banswara on interpersonal counselling, 28 July



Virtual orientation and review of IGMPY by Dungarpur Chief Medical & Health Officer, 10 July



Dharyawad BCMO Dr S.K. Jain inspecting a Digital Weighing Machine with Pratapgarh DPM Gyanendra Vishwakarma, 13 July

which poses an increased risk of infant mortality and low birth weight.

Children's Investment Fund Foundation-funded projects, UDAAN and MANZIL, are working to prevent child marriages by helping girls continue their education and learn in-demand skills. RajPusht aims to reduce instances of low birth weight and provides technical assistance to the Department of Women & Child Development in implementing two cash transfer schemes (PMMVY & IGMPY) and the Department of Medical, Health & Family Welfare in strengthening ante-natal care services.

A National Commission for Protection of Child Rights (NCPCR) report in 2008 found that poorer households marry off girls early. Teenage mothers face a financial crunch and are highly dependent on services offered by the government. However, the risk of excluding such beneficiaries remains high as their documents are often incomplete or their families want to avoid the government's oversight. They largely access ante-natal care at the Anganwadi Centre on MCHN days.

An expecting teenager is at an increased risk of high blood pressure, anaemia, premature birth and delivering low birth weight babies. Dr Aditi Mourya, a gynaecologist at Government Maharana Bhupal Hospital, Udaipur, deals with these cases regularly. She suggests that ANMs should pay more attention to

pregnant teenage girls and encourage them to:

- **Seek antenatal care:** Monthly antenatal visits can help assess risk factors and improve health. The care provider should monitor foetal growth and suggest appropriate action.
- **Get tested for sexually transmitted infections (STIs):** Pregnant teens are at a heightened risk of STIs and should be tested and treated accordingly.
- **Get adequate supplements:** During pregnancy, a teenage girl requires more folic acid, calcium, iron, and other nutrients. ANMs should provide supplements in sufficient quantities.
- **Eat well and gain weight:** Diverse foods from five or more food groups and meals at regular intervals can help the mother gain the right amount of weight during pregnancy.
- **Choose wisely:** They should avoid alcohol, tobacco and pan masala, and deliver at a medical facility.

“Post-natal care,” emphasises Dr Aditi, “is equally important as teenage mothers faces issues in breastfeeding. They don’t know the techniques and their body is often not ready. Hormonal changes and social pressures make them vulnerable to mental illnesses such as depression, anxiety, and eating disorders.”



BPM Divakar Jharbade counselling pregnant women on PMSMA Day at PHC Seriya, Salumber, Udaipur



PC Hariom Bairwa monitoring a child's weight during a home visit in Kishanganj Block, Baran



Poshan Champion Yugal Panchal counselling a pregnant woman in, Talwara, Banswara



Anganwadi Worker Rameshwari of Ward No. 14, Salumber, Udaipur, celebrating Pregnancy Counselling Day



Know Your Nutrition

We are delighted with readers' responses to the nutrition quiz in RajPushtika's June edition. Of the numerous entries, four got all the answers right! These were sent in by **Poshan Champions Mr Lalit Meghwal** of Pratapgarh; **Mr Narayan Lal Meghwal** and **Ms Sapana Jain** of Udaipur; and Banswara's **Mr Prakash Katara**. We extend the heartiest congratulations to these nutrition warriors!

Here are the answers to the quiz questions:

1. If the haemoglobin of a pregnant women is 10 g/dl, how many iron tablets should she eat?

A3. Daily 2 tablets: *Pregnant women with haemoglobin below 11g/dl should eat two iron-folic acid tablets (100 mg elemental iron and 500 mcg folic acid) daily for six months. This can help them beat anaemia.*

Q2. If the MUAC reading of a child is 12.8cm, what is her nutritional status?

A1. Normal: *A MUAC reading above 12.5 cm, that is, in the green range, is normal. In children of ages 6-59 months, a reading below 11.5 cm indicates severe acute malnutrition and readings between 11.5-12.5 cm indicate moderate acute malnutrition.*

Q3. If a child has diarrhoea, for many days should he have zinc tablets?

A3.14 Days: *A child suffering from diarrhoea should have zinc tablets for 14 days. Zinc treatment can considerably reduce the duration and severity of diarrhoeal episodes, decrease stool output, and lessen the need for hospitalisation. It may also prevent diarrhoea for up to three months.*

Q4. Tea prevents absorption of which mineral in our body?

A1.Iron: *Tea has tannins, which inhibit the absorption of iron in the human body. So, we should avoid tea two hours before and after meals.*

Bonus Question for RajPusht Poshan Champions:

What does the pink star icon in the Poshan Champion app indicate?

A2.PCTS ID not entered: *The pink star in the Poshan Champion app indicates that the PCTS ID has not been entered.*

Winners!



**Mr Lalit Meghwal,
Pratapgarh**



**Mr Prakash Katara,
Banswara**



**Mr Narayan Lal
Meghwal, Udaipur**



**Ms Sapna Jain,
Udaipur**