

## Who's the Real Bahubali?



In the long shadow cast by the pandemic, communication was geared towards the mitigation of COVID-19. There is, however, a risk of core messaging on nutrition getting sidelined in mainstream media channels. RajPusht engaged with Kaboom Social Ventures Pvt Limited to create an innovative digital media campaign targeted to Banswara, Baran, Dungarpur, Pratapgarh and Udaipur. Insights from these districts informed us about the varied nature of smartphone usage in our target areas. We saw that mostly men owned smartphones and were avid consumers of short video content. The preferred applications were Facebook, WhatsApp, and YouTube. Among regional apps, preference was for MX TakaTak and Moj.

Incredibly, Bahubali, a Telugu movie dubbed in Hindi and aired during matinee hours on movie channels, emerged as a major hook for men between 18-44. While the movie Bahubali is a man with a six-pack, scattering his enemies with the power of his fist, we reimagined him as someone who is not a very "manly" man. Our Bahubali is a simple guy who loves and respects his fiery wife and takes good care of his family's nutritional needs.

In March, we began with a test campaign, followed by a COVID-19 and nutrition awareness campaign in July. The campaign's finale is a four-part web series, airing on Facebook, YouTube, MX TakaTak and Moj. The web series explores the theme of shared responsibility in households.

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|---|---|----------|---------|------------|-----------|-------|
| 19 SEPT 2021 KAUN HAI ASLI BAHUBALI? (WHO'S THE REAL BAHUBALI?) |   |          |         |            |           |       |
| 25 SEPT 2021  | DASTAVEZ KA KHEL (THE GAME OF FORMS)                                  |          |         |            |           |       |
| 03 OCT 2021   | BAHUBALI KE SANG KHAZAANE KI KHOJ (FINDING TREASURE<br>WITH BAHUBALI) |          |         |            |           |       |
| 10 OCT 2021   | BAHU  | BALI HAI | NA! (WO | RRY NOT, E | AHUBALI'S | HERE) |

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# What do people think of Bahubali?



"A muscular man is a real Bahubali"



"He who's stylish is a real Bahubali"





RajPusht is a project commissioned by the Children's Investment Fund Foundation to reduce instances of low birth weight and wasting. Read more about us here.

## What is the AMMA Programme?

Dr Priscilla Blesson, Nutrition Communication Specialist



Screening of children suffering from severe acute malnutrition (SAM) and moderate acute malnutrition (MAM) is among the four themes of POSHAN Maah 2021. AMMA (Acute Malnutrition Management & Action) is a Government of Rajasthan programme that works on curative and preventive measures to manage malnutrition at the community level. It promotes timely and early identification and treatment of SAM. AMMA was adopted as an innovative programme under the National Nutrition Mission in 2020-2021.

Malnutrition often starts right from conception. Complications caused by it can be avoided if a pregnant woman receives proper nutrition during gestation, breastfeeds her baby within an hour of birth, exclusively breastfeeds for the first six months, and then graduates to ageappropriate complementary feeding.

But for many children, lack of adequate nutrition during the first 1,000 days can be a missed opportunity that causes irreversible harm to their physical and mental development. This vicious cycle of malnutrition eventually leads to cognitive loss and growth faltering.



An ASHA taking the Mid-upper Arm Circumference (MUAC) reading of a child

Given the intersectional challenges posed by malnutrition and the pandemic, AMMA focuses on timely screening, early identification and home-based treatment of MAM and SAM children.

Under the programme, SAM children (-3 Standard Deviation or MUAC less than 11.5 cm) with complications or failing appetite tests are referred to Malnutrition Treatment Centres (MTC). Parents of MAM or SAM children without complications are counselled to feed them homemade, highenergy food. When a SAM child with complications returns home from the MTC, the family is advised to keep feeding the child high-energy food.

AMMA thus works with the community to manage acute malnutrition and reinforces that homemade food is the best medicine to treat and prevent malnutrition.



RajPusht 100 Reels



BPM Shelendra facilitating a session on IGMPY & PMMVY during a sector meeting at PHC Jasela, Dungarpur









PC Ashish Ametha monitors the weight of a child at Devpura Banjara Anganwadi Centre, Baran



PMMVY Week inaugural activity conducted by LS Rekha Devda, Ghasa Sector, Mavli Block, Udaipur

### **Raising a Troop against Malnutrition**

To ensure community mobilisation and bolster people's participation, every year, September is celebrated as Rashtriya Poshan Maah across the country.

This year again, Project RajPusht joined hands with the movement and organised the training of Anganwadi Workers (AWW) under Indira Gandhi Matritva Poshan Yojana (IGMPY) on maternal and child nutrition in Banswara, Baran, Dungarpur, Pratapgarh and Udaipur. It was a two-day training on an array of topics such as:

- Importance of the first 1,000 days of life
- Care of pregnant women and lactating mothers
- Immunisation
- Counselling skills
- Hygiene and sanitation
- Information on PMMVY and IGMPY
- Family planning
- Early childhood education
- Importance of Poshan Vatikas

The training was delivered using a custom Anganwadi Workers' "Margdarshika" on Maternal and Child Nutrition developed by RajPusht. The Anganwadi Workers were oriented on various job-aids like posters (on collective responsibility, 5 important messages for pregnant women, nutrition, PMMVY, IGMPY, leaflets (colostrum feeding, exclusive breastfeeding, Poshan Vatikas), а welcome letter from the Chief Minister, and the pregnancy weight tracker.

This training is an endeavour to strengthen community care systems. 8,849 Anganwadi Workers across 5 tribal districts of Rajasthan are now trained on group counselling at MCHN days and encouraging women to utilise maternity benefit schemes for better nutrition.



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### **Baran Shows the Way**

In July, Baran stood first in the Transformation of Aspirational District Programme's overall delta rankings and health & nutrition. The rankings measure the incremental progress made by the 112 Aspirational Districts selected by NITI Aayog. Here are some measures the district administration has taken in the field of health and nutrition to improve government services and infrastructure:

#### **Early Registration of Pregnancy**

The Health Department analyses records of registration of pregnancy and four Ante-natal Check-ups down to the sub-centre level. A list of the sub-centres where registration of pregnancies or uptake of ANCs are low is collated. The challenges and barriers at the sub-centres with poorer performance are identified in consultation with their respective personnel, and solutions are developed. Wherever required, department personnel liaise with the community for early registration of pregnancy and uptake of ANCs.

Similar sub-centre-level analyses are being done to increase uptake of immunisation and reduce the incidence of anaemia.

#### **Initiatives to Reduce Low Birth Weight**

The proportion of low-birth-weight babies in the district hovers around 15%. The administration seeks to reduce this to 7-10% through the following steps:

- Provide nutrition-dense ragi laddoos to pregnant women to ensure proper weight gain during pregnancy and thus, reduce the chance of low birth weight - plan currently in the pipeline
- Promote seasonal, locally available foods and nutrigardens to ensure the nutrition security of pregnant women. These include crops such as soybean, which are locally produced but not widely eaten in the region.

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#### **Digitisation of Delivery Records**

The Prasav Watch application digitises all the details of a maternity ward patient—from admission to discharge. By doing away with the need for data entry in multiple registers, it increases the efficiency of labour room staff and improves data accuracy and consistency. It also enables real-time monitoring: in case of any risks, such as high blood pressure, it alerts the healthcare provider, who can accordingly manage the condition. 121 healthcare personnel in the district have been trained to operate the application.

#### Convergence

The District Convergence Committee constituted under POSHAN Abhiyaan has held multiple meetings in the district to increase coordination between different departments. Convergence between ASHAs, Anganwadi Workers and ANMs is promoted through the AAA platform, thereby enabling them to co-create a village map for better tracking of beneficiaries, correctly record data and learn from each other.

#### **Partnerships with Diverse Organisations**

The district administration is working with development partners, such as Project RajPusht, Action Against Hunger, Piramal Foundation, etc., and tapping into CSR funds to better implement initiatives and build frontline workers' capacity. CSR tie-ups not only help the Health Department repair sub-centres but also staff them. A waiting hall is being constructed for the maternity and child health ward of the Baran District Hospital through a CSR partnership with MMTC Limited.

#### **Ensuring Maternal Cash Transfers**

As of 23 August 2021, Baran ranked fourth among the districts of Rajasthan in beneficiary coverage under Pradhan Mantri Matru Vandana Yojana, Government of India's cash-transfer scheme for first-time mothers. The district is also one of the five in Rajasthan where Indira Gandhi Matritva Poshan Yojana (IGMPY), the State's cashtransfer scheme for second-time mothers, is operational.