

"Mission Balam Sukham" - A holistic approach to address malnutrition in Gujarat, India



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INTRODUCTION

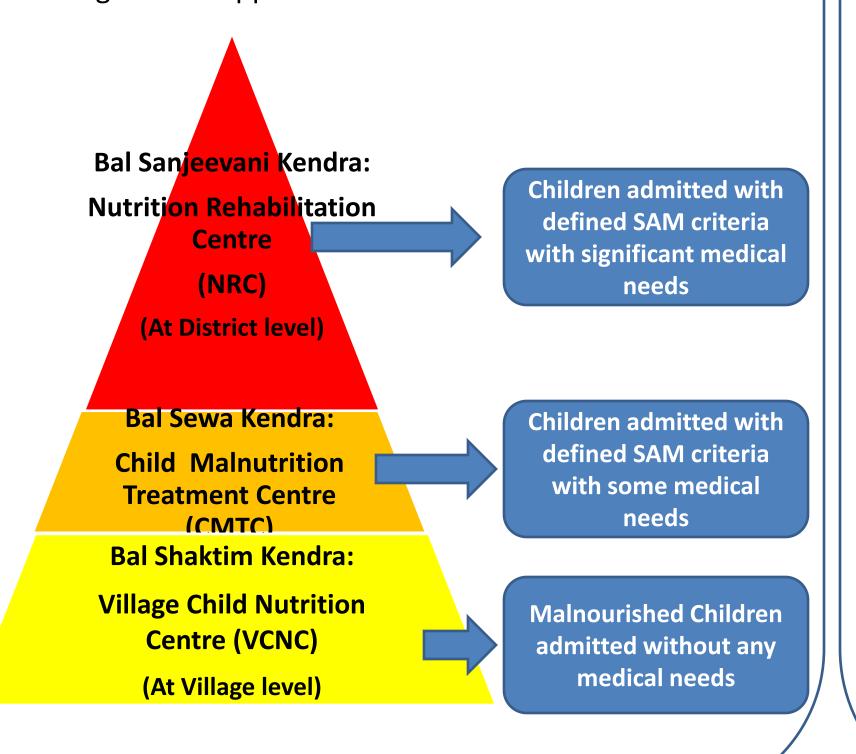
- "Mission Balam Sukham" was conceptualized to mitigate the problem of malnutrition through an integrated intersectoral holistic approach covering various interventions across various sectors and departments.
- It focuses on both preventive and curative aspects which will involve strengthening of ongoing nutrition and taking up new / innovative interventions considered necessary to reduce malnutrition.
- The strategy focuses on life cycle approach keeping in view various stages of desirable interventions namely adolescence, 9 month of pregnancy to first two years of age (1000 days) and for children up to 6 years.
- It provides an enabling mechanism to different key departments to converge together under one umbrella and undertake concerted efforts to address and improve the nutritional status of the targeted population in Gujarat.

PREVENTIVE MEASURES

- Improving Infant and Young Child Feeding Practices (IYCF) practices to reduce malnutrition.
- Focus on promotion of 10 proven interventions to reduce malnutrition.
- Strengthening Micronutrient Supplementation at Village Health and Nutrition Days (VHND)/ "Mamta Diwas ".
- Involvement of Community support networks like Gram Sanjeevani Samitees (VHSNCs), PRI, SHG, Sakhi Mandals
 Doodh Mandlies etc in the management of malnutrition programs.
- Strengthening Immunization , Referral and Promotion of hygienic practices.
- Accelerating Community Mobilization for strengthening comprehensive nutrition programs through extensive Behavior Change Communication (BCC).

CURATIVE MEASURES

• Integrated Management of malnourished children through 3- tier approach.



(1)Bal Shaktim Kendra (VCNC) at Anganwadi Centers at village level for malnourished children without medical needs.



"Counseling session of mothers in VCNC"

- All malnourished children (SAM, MAM, SUW & MUW)
 without any medical needs are enrolled in VCNC center for
 30 working days.
- They are provided 5 times supervised diet + 2 times home diets in addition to micronutrient supplementation and medicines.
- Performance based incentives to ASHA, AWW & AWH for management of VCNC session at AWC

(2) Bal Sewa Kendra (CMTC) at PHC/ CHC/ Sub District level for malnourished children needing some medical needs.



Malnourished children at "Bal Sewa Kendra"

- SAM child with some medical needs are admitted in CHC/ Sub District level hospital for 21 working days were they are provided 6-8 times supervised diet + micronutrient supplementation and medicines.
- The mothers of malnourished children are also provided wage loss compensation for the period they stay in the facility.
- 3) Bal Sanjeevani Kendra (NRC) at District Hospital/ Medical



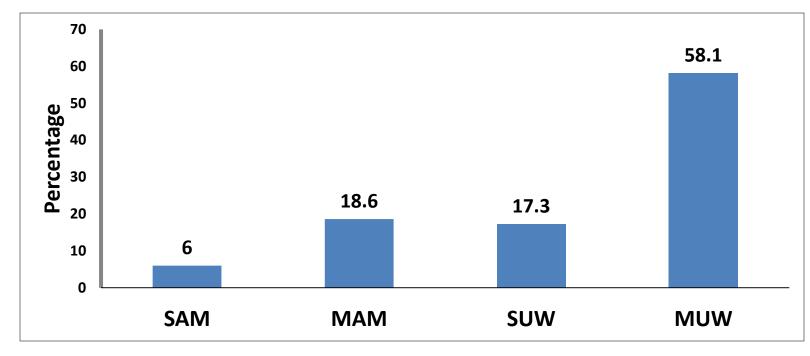
Malnourished children at "Bal Sanjeevani Kendra"

- SAM child with significant medical needs are admitted in District level hospital or Medical College for 21-25 working days were they are provided 6-8 times supervised diet + micronutrient supplementation and medicines.
- Provision of wage loss compensation for mothers of malnourished child at NRC.

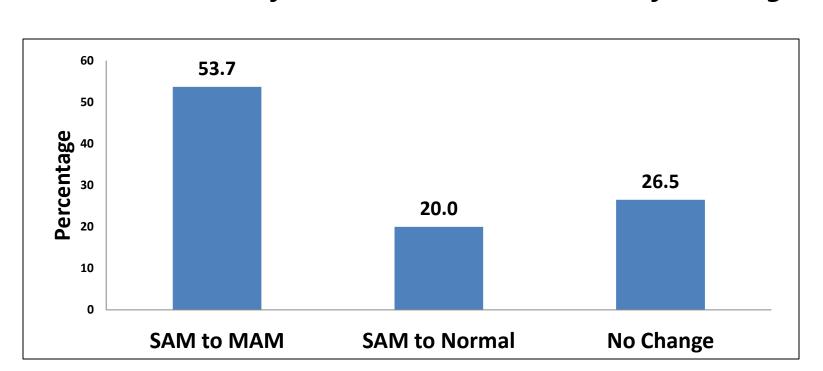
FINDINGS

- Findings of the "Bal Shaktim Kendra" (VCNC) validated improved trends of nutritional status in malnourished children of different categories.
- The data of 1868 VCNC centers was analyzed in 13 districts which has covered 41227 children, 20661 boys and 20566 girls.

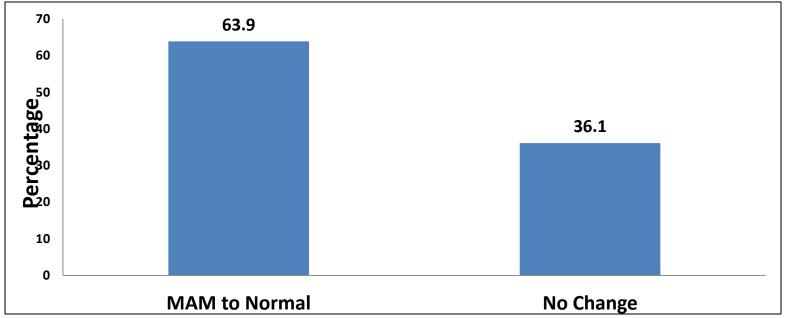
Nutritional Status of Children at the time of admission



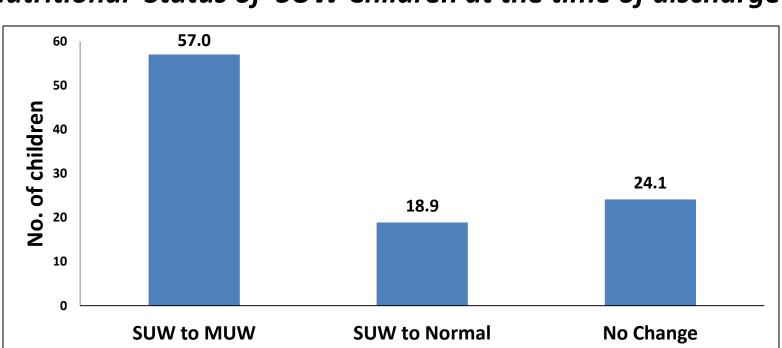
Nutritional Status of SAM Children at the time of discharge



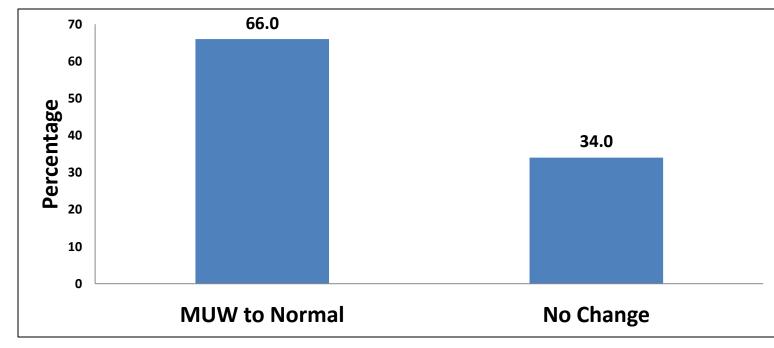
Nutritional Status of MAM Children at the time of discharge



Nutritional Status of SUW Children at the time of discharge



Nutritional Status of MUW Children at the time of discharge



CONCLUSIONS

- This interventions demonstrates that a comprehensive strategy to prevent children from being trapped in the vicious cycle of malnutrition and rehabilitate children suffering from severe forms of malnutrition is the proven strategy to tackle malnutrition in a holistic approach.
- Sustainability of intervention can be maximized with understanding and acceptance of malnutrition as a problem in community and its empowerment to find the solution within its own settings.
- Establishing continuum of care for management of malnourished children at community and facility level.