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Prof. M.S. Swaminathan

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- Mr. CSN Murthy
- Ms. Manali Jain Khurana
- Mr. Nar Bahadur Thapa

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**Representatives in the Governing Board from:**
Ministry of Women and Child Development, Govt. of India
Ministry of Consumer Affairs (Department of Food and Public Distribution) Govt. of India
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FOREWORD

The Coalition for Food and Nutrition Security has completed a decade as a platform for members to collaborate and achieve the common vision of sustainable food and nutrition security for all. In recognition of the urgency of ensuring the opportunity for every child and citizen to have a healthy and productive life, a Coalition for Sustainable Nutrition Security in India was formed in 2007. It is encouraging to see that The Coalition after entering its second decade has undergone an organizational transformation, knitting strong bonds, weaving new partnerships, impacting beneficiaries and driving policy advocacy with a renewed enthusiasm.

The Coalition has entered into yet another partnership with UNICEF which is a great opportunity to drive stronger advocacy around eradicating all forms of malnutrition, especially prevention of severe acute malnutrition (SAM). Partnerships are absolutely important to bring like-minded people together and collate nutritional understanding to bring a common understanding to the field level. The government efforts are quite successful in tackling chronic hunger, however protein and hidden hunger (micronutrient deficiencies) remains a major problem in both rural and urban population. I hardly need to stress that the task can be accomplished only through the power of partnership.

There has been a paradigm shift in the idea of Malnutrition from moving to Nutrition Security from food security but more focused attention is definitely required. Also, a life-cycle approach targeting the first 1000 days in a child’s life is very important. Although this age-group was neglected, some focus has been shifted to the first 1000 days and complementary feeding through POSHAN Abhiyaan and the momentum here needs to continue.

The Coalition through its endeavors has delivered on multi-sectoral approach on eradicating malnutrition through a multi-sectoral district nutrition plan and bring multi-sectoral players in the same arena. Certainly, CFNS will play an imperative role in strengthening a strong platform for partners to collaborate towards achieving food & nutrition security for all. I would like to express my sincere appreciation to all the members, partners and the Coalition Secretariat for their invaluable contribution.

M S Swaminathan
Patron and Emeritus Chair,
The Coalition for Food and Nutrition Security
Message from A.R. Nanda  
Board Chair (Till June 2019)

Dear Members,

The Coalition for Food and Nutrition Security has come a long way since its inception and it’s heartening to see your continued dedication and support to the Coalition. As you know, the Coalition, a group of program and policy leaders and experts working in the field of food and nutrition security was established as a society in the year 2007 under the leadership of Shri M.S. Swaminathan, and has completed a decade as a platform for members to collaborate and achieve the common vision of sustainable food and nutrition security for all. The Coalition offers the leadership on evidence-based policy and advocacy, membership engagement, technical assistance and knowledge management. The Coalition today has 120 paid members spanning over 13 states and union territories of the country, which includes 47 institutional members and 73 individual members.

CFNS has 8 working groups to work on specific themes. A working group was constituted to provide sectoral and knowledge support to the leaders in the Policy Committee / institutions through CSDGs, conceptualize and promote Essential Nutrition in Assam, develop state specific evidence-based knowledge management products, models, discussion briefs for policies and to generate a public discourse on key themes and functions. The Essential Nutrition Interventions Group has reassessed the Action Agenda on Nutrition following which a strategy document on Suposhan Bharat was prepared. The Working Group on Food Security is engaged in analyzing policy gaps. The reputed organization Nutrition International (NI) has been supporting the accountability and governance working group.

CFNS has collaborated with different development partners, academia and government bodies that include World Bank, UNICEF, TINI (The India Nutrition Initiative), State Social Welfare Department and National Health Mission (NHM), Centre for Sustainable Development Goals (CSDGs), Govt of Assam, Govt of Rajasthan, IIT Guwahati, IIT Bombay, PFI (Population Foundation of India), and Ministry of Women and Child Development (WCD). In 2018-19, the Coalition had an active presence in the food and nutrition security scenario of Assam. As part of technical assistance to Government of Assam, CFNS worked closely with the World Bank and the Government of Assam, in particular the Center for SDGs to provide the necessary technical support for efforts aimed at improving the nutrition, health and development of children in early life, particularly the most vulnerable. The Coalition has entered into yet another partnership with UNICEF which is making inroads into eradicating malnutrition, especially prevention of severe acute malnutrition (SAM).

The Coalition continues to grow with the contributions of national and state governments, the Coalition members, well-wishers and donors and we hope to receive continued participation towards our noble vision and mission.
Message from Prof. Chandrakant S. Pandav  
Acting Board Chair (Since July 2019)

Dear Members,

We are proud to be the largest Coalitions working on food and nutrition security with diverse representation through its 120 members, including 73 individual and 47 institutional members and more than 200 knowledge leaders. The Coalition was formed in 2007 and institutionalized as a Society in 2014. Many Civil Society Organizations, academic institutions, donors and research institutions are associated with The Coalition today.

The Coalition for Food and Nutrition Security very much appreciates the generous support of our members and program partners. In 2018, it served as a research and advocacy partner to The India Nutrition Initiative (TINI) and as advisory and technical partner to World Bank, UNICEF, Department of Women and Child Development (WCD), Government of India, New Delhi and Population Foundation of India (PFI) through collaborative projects. The Coalition has worked closely with Centre for Sustainable Development Goals (CSDGs) and in collaboration with Government of Assam to accelerate SDGs in Assam. CFNS is venturing in community-based management of malnutrition as advocacy and technical partner with UNICEF in four states: Madhya Pradesh, Assam, Jharkhand and Odisha.

Sustainable and strong partnerships remain the key to attainment of a common goal. The key activities in 2018-19 are aligned with the organizational missions to raise awareness, foster collaboration and advocate for improved programmes to achieve a common vision. The CFNS has continued to develop strategies for itself and shown resilience and sheer determination to grow. I am confident that the Coalition will play a stronger role in transforming the food and nutrition landscape in the country and continue to be a strong aggregator of knowledge.

I would like to express my sincere appreciation to the management team of the secretariat of CFNS, our esteemed members, our former leadership and our partners including national and state governments, donors, supporters who have a strong faith in the Coalition. I thank all of them for their support, without whom we would not have been able to achieve all that we have.
Respected Members,

We are pleased to inform you that the Coalition has ended yet another successful year with satisfactory accomplishments. Despite challenging environment, we continue to grow with our powerful vision. This would not have been possible without the support of all of you and our secretariat team members. At CFNS, our members are passionate about making a measurable impact in everything we do. It is the power of our partners, well-wishers, our unique culture and innovative approach, which helps us deliver enduring results.

The Coalition has already initiated definitive steps to meet the aspirations of our members by partnering with national & state governments, civil society organisations to accelerate SDGs, SAM management, research on many food, nutrition sensitive & specific issues, awareness on Eat Right etc. Towards the goal, the Coalition will continue to step up efforts to become future ready in all the areas of transformations.

In the last financial year, the Coalition entered into viable partnerships with World Bank, UNICEF, Ministry of Women and Child Development, The India Nutrition Initiative (TINI)-Tata Trust and Population Foundation of India. Our efforts have been concentrated towards new partnerships, and exploring possibilities within the existing partnerships. Besides, we are also looking forward in providing capacity building to various civil society organisations for enhancing their skills in digital collection of field data, large data analysis and its interpretation with the support of CTARA, IIT Bombay.

We plan to conduct regular consultations for the discussion on findings from new research studies, national databases and not just be a strong accumulator of knowledge but also a strategic think tank around present affairs in the domain of food and nutrition with the help of each one of you I extend my deep gratitude to all the valuable members, well-wishers and secretariat colleagues of the Coalition for making this a successful year and hope to receive sustained support in the forthcoming years.

Dr. Sujeet Ranjan
Timelines.....

Coalition formed
- Aug, 2007

Coalition started working independently
- 2015

Dissemination of KAP studies in Rajasthan (TINI)
- 2018

Multisectoral result based nutrition plan to accelerate SDGs in Barpeta, Assam (UNICEF, Govt. of Assam)
- Aug, 2019

Policy Seminar on first 1000 days, Complementary feeding (World Bank, CSDGs)

Organisational Transformation
- Entered 2nd Decade
- Consultation on linkages between family planning and nutrition (PFI)

Partnerships/Stakeholders:
- World Bank
- UNICEF
- PFI (Population Foundation of India)
- TINI (The India Nutrition Initiative)
- Social Welfare Department and National Health Mission (NHM)
- Centre for Sustainable Development Goals (CSDGs)
- Govt. of Assam, IIT Guwahati, Govt. of Rajasthan
- Ministry of Women and Child Development (Ministry of WCD)
Year at a Glance....

**Nov 2018**
1. **Towards Suposhan:** Realising India’s full human potential
   (Position paper on Essential Nutrition Interventions)

**Dec 2018**
1. 1st Nutrition working group meeting in Assam

**Jan 2019**
1. Planning workshop for multisectoral district nutrition plan (Project with UNICEF and Govt of Assam)
2. Initiation of dietary diversity study in Assam (Project with Ministry of Women and Child Development)

**Mar 2019**
1. Policy seminar on complementary feeding (World Bank, CSDGs)
2. Meeting on WASH-Nutrition Integration (Developed position paper)
3. Nutrition working group meetings

**Feb 2019**
1. State inception workshop on multisectoral district nutrition plan
2. Dissemination of KAP studies with District Collector, Tonk, Rajasthan
3. Nutrition working group meetings
April 2019
1. Stakeholder consultation on linkages between family planning and nutrition with support from PFI
2. Nutrition working group meeting

May 2019
1. Stakeholder consultation on scaling up rice fortification through Public Distribution System (PDS) in Assam in collaboration with World Bank and PATH
2. Nutrition working group meeting
3. Capacity building of district Centre for Sustainable Development Goals (CSDGs) officials on Maternal, Adolescents and Child Nutrition
4. Learning visit of CSDGs officials to Tamil Nadu

June 2019
1. Policy Seminar on 1st 1000 days (World Bank, CSDGs)
2. Position Paper-First 1000 days (World Bank, CSDGs)
3. Eat Right Mela (World Bank, CSDGs)
4. Improving Maternal and Infant Young Child Nutrition (MIYCN) in Assam- A Position Paper (Project with Ministry of Women and Child Development)
5. Completion of Dietary diversity study in Assam (Project with Ministry of Women and Child Development)
6. Nutrition working group meeting

July 2019
1. District consultation workshop on multisectoral district nutrition plan
2. Joint training of AAAs

August 2019
1. Dissemination/final report on World Bank supported Assam project 2018-19

Stakeholder consultation on linkages between family planning and nutrition with support from PFI

Nutrition working group meeting

1. Stakeholder consultation on scaling up rice fortification through Public Distribution System (PDS) in Assam in collaboration with World Bank and PATH
2. Nutrition working group meeting
3. Capacity building of district Centre for Sustainable Development Goals (CSDGs) officials on Maternal, Adolescents and Child Nutrition
4. Learning visit of CSDGs officials to Tamil Nadu
CFNS has presence in almost all states through its members. In 2018, it has facilitated and supported networks, group of NGOs etc. as a research and advocacy partner to TINI, advisory and technical partner to World Bank, UNICEF, Ministry of Women and Child Development and PFI.

CFNS in partnership with TINI (The India Nutrition Initiative) finalized and executed a KAP (Knowledge, Attitude and Practices) study in five districts (Alwar, Dausa, Dhaulpur, Karauli and Tonk) of Rajasthan.

District Sensitisation workshop was held to accelerate SDGs in Barpeta and Udalguri Districts, Assam; Stakeholder consultation was held in Goalpara and Darrang Districts of Assam. State inception workshop was held to accelerate SDGs in Guwahati, Assam.

CFNS has ventured into community-based management of acute malnutrition in Madhya Pradesh, Jharkhand, Assam and Odisha in 2019-2020.
The Coalition has worked closely with Centre for Sustainable Development Goals (CSDGs) and in collaboration with Government of Assam to accelerate SDGs in Assam. To accelerate progress on SDGs, a meeting with the advisor of Centre for SDGs, Govt. of Assam was conducted to implement World Bank’s supported technical assistance to improve health, nutrition and early childhood development in the state. Multisectoral result based nutrition plan was prepared for Barpeta, Assam, state inception workshop was conducted on improved nutrition, health and early childhood outcomes in Assam.

A Stakeholders’ consultation was carried out in CSDGs, Assam focused on multisectoral approach to cover the entire lifecycle of women and children catering to SDGs 2 and 3. Many activities were carried out as part of World Bank supported project in Assam addressing SDG 3, like policy seminar on complementary feeding in Guwahati, Assam; policy seminar on 1st 1000 days in Assam, Eat Right Mela organized in Barpeta, Assam to name a few. The Coalition has had influential presence in the state of Assam throughout the year. Also, a national consultation on linkages between family planning and nutrition was quite a success in disseminating key messages. This was an important step in understanding the direct and indirect pathways through which family planning affects nutrition and vice versa.

Sustainable and strong partnerships remain the key to attainment of a common goal. National consultation for convergence and partnerships was organized on “Én-route to a Kuposhan Mukt Bharat” at IIC, New Delhi.

The activities for the year 2018-19 are in line with global targets, 2025 towards reduction of stunting, wasting, anaemia and improved breastfeeding.
Taking the Key Initiatives of 2017 forward.....

Engagement with Govt. of Rajasthan for Nutrition Landscape Transformation- Secondary data analysis and Knowledge, Attitude and Practices (KAP) study was carried out in 5 high burden districts of Rajasthan and the same was disseminated during the consultation with all line departments under the chairmanship of Deputy Commissioner with the technical support from CFNS.

The first draft of an implementable district action plan to tackle malnutrition was developed as a result of planning workshop conducted by the Coalition with the support of UNICEF Assam in Darrang district- Based on the series of consultation at state and district level, the multisectoral plan was prepared for three aspirational districts- Barpeta, Udalguri and Goalpara and shared at the state level.

Sensitization workshop on multi sectoral result-based district planning in Barpeta district, Assam- Government of Assam took the lead in preparing the result-based district multi sectoral plan with the technical support from the Coalition in close coordination with all the departments.

Coalition and its partners felt the need to develop the “Wash and Nutrition Strategy” during a core group meeting of WASH Working Group on Nov 13, 2017- The position paper was developed as an output of WASH nutrition consultation describing its significance in the context of SDGs and World Health Assembly (WHA) targets, how WASH can be integrated into nutrition programs and the importance of hygiene behaviours in promoting nutrition outcomes.

Women nutrition strategy: Undertake strategic and focused advocacy efforts with Food Security and Essential Nutrition Interventions (ENIs) working group members to establish nutrition mission in near future- In September 2018, the report prepared by Council for Social Development (CSD) with support from Nutrition International (NI) and CARE India on “Strategy for enhancing Women’s Nutritional Status via Programmatic Interventions” was shared and the consultation was organized at IIC, New Delhi that involved working group members/team members from CARE, NI, CFNS (as advocacy partner), CSD and other Civil Society Organizations (CSOs). Based on the consultation, CSD incorporated the feedbacks and submitted the revised report. National level consultation will be held soon.
**Women Nutrition Strategy.....**

This was an attempt to understand women's health status, nutrition policy, legislation and nutrition programmes to suggest possible ways to bridge the gaps and improve women's wellbeing. An understanding of why undernutrition among women continues to persist despite over three decades of programmatic interventions and the identification of some key points of intervention are critical for filling this gap. The report prepared as part of Women nutrition strategy covers the following components:

1. Women's nutrition status data analysis over time using different available sources, shift in nutrition policy and legislation for food security and its limitations in providing relief to people;
2. Examination of present legal and constitutional provisions and nutritional policies over time;
3. Review of some key programmes that support women's nutrition directly and indirectly;
4. Review of central budgets for these key programmes for time trends and a method developed for alternative investment plans which might be necessary, if corrective steps are to be initiated for bringing the programmes back on track.

**Where are we now?**

The Coalition today has 120 society members spanning over 15 states and union territories of the country. In total it has 47 institutional members and 73 individual members. The Coalition has a 12-member governing board and more than 200 knowledge leaders, experts, academicians who are associated with Coalitions eight working groups. **The Coalition has completed a decade as a platform for members to collaborate and achieve the common vision of sustainable food and nutrition security for all.**
The Coalition initiated the following key activities in 2018-19 in line with the organization’s goals and commitments. These are also aligned with the organizational missions to raise awareness, foster collaboration and advocate for improved programmes to achieve a common vision.

<table>
<thead>
<tr>
<th>Goals</th>
<th>Key Activities</th>
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<tbody>
<tr>
<td><strong>Goal 1: Political Commitment for propoor policy and improved governance to end all forms of malnutrition</strong></td>
<td>Policy seminar on engagement of self-help groups for improving feeding practices among young children, Policy seminar on complementary feeding, Stakeholder consultation on scaling up rice fortification through Public Distribution System (PDS)</td>
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<tr>
<td><strong>Goal 2: Prioritize actions in first 1000 days of life</strong></td>
<td>Policy Seminar on 1st 1000 days, Nutrition working group position papers on Essential Nutrition Interventions, First 1000 days, WASH &amp; nutrition</td>
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<tr>
<td><strong>Goal 3: Empower women and girls to realize their potential to improve access to safe and nutritious food</strong></td>
<td>Consultation on linkages between family planning and nutrition, System strengthening for improved nutrition outcomes, Eat right Mela, Series of consultations with women at district, block and community level</td>
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<td><strong>Goal 4: Climate-smart &amp; nutrition sensitive agriculture</strong></td>
<td>Dietary diversity study in Darrang district of Assam</td>
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<td><strong>Goal 5: Prioritize malnutrition hotspots</strong></td>
<td>Multi-sectoral result based nutrition plan to accelerate SDGs</td>
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<tr>
<td><strong>Goal 6: Regional leadership in amplifying in southern voice and increasing accountability on SDGs and WHA targets.</strong></td>
<td>State inception workshop on improved health and nutrition outcomes to accelerate SDGs, Formation of district SDGs cells and capacity building of Centre for Sustainable Development Goals (CSDGs) officials</td>
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Partnership with World Bank (Non-Lending Technical Assistance-NLTA)
The Government of Assam had requested the World Bank to provide Technical Assistance (TA) executed by the Bank to Assam in accelerating progress towards SDGs 2 and 3. As a part of this Technical Assistance, the World Bank appointed the Coalition to work closely with the Centre for SDGs. The TA focuses in particular, on supporting the State’s Department of Transformation and Development (T&D) and building the capacity of CSDGs in the state and in selected districts of Barpeta, Goalpara and Udalguri to work across departments for improved policies, institutions and programs to improve nutrition, health and early childhood development outcomes in the state, and to promote inter-sectoral convergence and coherence to improve quality and coverage of service delivery.

The State level inception workshop sought to orient stakeholders on the World Bank NLTA (Non-Lending Technical Assistance). The workshop had more than 50 participants from government departments, district social welfare officers and joint directors of health from few districts, Tata Trust, Piramal Foundation, UNICEF and UNDP.
An introduction to World Bank NLTA was followed by four technical sessions

- Food security and nutrition scenario
- Challenges in implementation of ongoing programs in Assam
- Effort towards developing M&E: System for SDGs tracking
- Discussion on Eat Right India Movement

**Highlights:** The key stakeholders were oriented on the focused agenda of the Assam Government towards improved health and nutrition, the challenges of the various Govt. line departments like Health and Family Welfare and Social Welfare came to be known, the inputs contributed to the shaping of the district multi-sectoral nutrition plan

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### 2. Formation of district SDGs cells in Assam and their capacity building

Formation of district SDGs cells was to accelerate the efforts of Government to achieve SDGs. Terms of Reference for setting up and strengthening of district SDGs cell clearly stating the objective and role of district SDGs cells was drafted by the Center for SDGs with support from CFNS. The Assam Civil Service, Transformation and Development department after approving the terms of reference nominated one person each from Barpeta and Udalguri districts to be the head of district SDGs cells. In order to strengthen the newly setup district SDGs cells in two districts, two capacity building activities for newly deputed officials of SDGs cells were planned in consultation with Transformation and Development Department and Social Welfare Department. The first capacity building activity was a 5 days training of members of district SDGs cells on “Adolescents, Maternal and Child Nutrition” organized at the National Institute of Public Cooperation and Child Development (NIPCCD). Secondly, on the request of Government of Assam, a learning visit to Tamil Nadu of district SDGs cell members was planned in close coordination with Social Welfare Department, Tamil Nadu.

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Capacity building of district SDGs officials in the state of Assam in partnership with National Institute of Public Cooperation and Child Development (NIPCCD) on “Maternal, Adolescents and Child Nutrition”, May 2019 | Photo: CFNS
A 5 days capacity building training of the district SDGs officials on "Adolescent, Maternal and Child Nutrition" was organized at NIPCCD, Guwahati. The aim of the training was to strengthen the district SDGs cell in three aspirational districts of Assam. The training was attended by 14 participants who are members of district SDGs cells in their respective districts. The first three days of the trainings were classroom sessions on various topics related to child and mother nutrition followed by practical sessions on growth monitoring and demonstration of low cost and locally available nutritious recipes. On fourth day, participants were taken to AWCs and households of pregnant and lactating mothers to understand the field level scenario and dietary patterns based on 24-hour dietary recall. On the last day participants were given overview of Poshan Abhiyaan, its components and district specific targets to be met by 2022.

### 3. Learning trip of officials from Government of Assam to Tamil Nadu for first 1000 days and multisector engagement

As part of strengthening the district SDGs cell a learning visit to Tamil Nadu was organized in May 2019. A team of 11 officials from the Transformation and Development Department, Social Welfare Department, Centre for Sustainable Development Goals and CFNS visited Tamil Nadu to study the best practices of ICDS being followed in the state. Tamil Nadu has been successful in implementing strategies to improve nutritional status of young children. There are many innovative initiatives
As part of World Bank's TA, a two days comprehensive joint training of AAAs (AWW, ASHA and ANM) on “First 1000 days and leadership development” was conducted in two aspirational districts – Barpeta and Udalguri in July, 2019 to sensitize and build capacity of frontline workers in nutrition. The objectives of the training were twofold, firstly to prioritize the focus on the first 1000 days of nutrition among frontline workers and secondly to build their capacities for home visits. As part of AAAs job description each one of them conducted home visits and counselled mothers and other family members on health, nutrition and infants and young child feeding practices. Since most of the time they visit the same households, it is important to have message alignment from all three so that same messages can be communicated to mothers and other family members in effective manner. Keeping this background in mind a joint capacity building training of health and social welfare department was organized. 62 participants from 20 health/ICDS sectors participated in the training. The training was conducted by state and district level resource person from Social Welfare,
Health department and Food and Nutrition Board. Training materials that were utilized were nutrition counselling tool kit in Assamese, MCP card in Assamese, growth chart for boys and girls, session specific relevant materials. Throughout the training participants were engaged through various tools like short audio-visual tutorial, role play, quizzes, practical sessions on growth monitoring and nutritious recipe demonstration. All the critical topics ranging from ANC registration and visits, IFS consumption, institutional deliveries, essential new born care, immunization, adequate complementary feeding were covered in detail. The training also provided a platform for frontline workers to reflect upon their joint responsibility of improving health and nutritional scenario of community and strengthening community-based activities. One of the key decisions made was to develop monthly joint action plan by AAAs.
The state of Assam has at present more than 3 lakh SHGs spread over 33 districts. SHGs serve as an important platform where women are empowered through information sharing about public programs. These forums have huge potential for mobilizing women and empowering them to work towards better nutrition and health outcomes for their children and families. In some states, SHG members also play an active role in monitoring and improving government programs, including the midday meal school feeding program and the Integrated Child Development Services scheme (ICDS). The objective of the seminar was to deliberate upon the following points for improving feeding practices among young children in the state of Assam: Role of SHGs/Women’s collectives/ Federations/Clubs in improving maternal and child nutrition, existing barriers in achieving systematic engagement of SHGs/Women’s collectives/ federations/clubs in improving feeding practices among young children, pathways for integrating SHGs and panchayat members with anganwadi workers and ASHAs to improve the delivery of nutrition services. The policy seminar was attended by state and district officials from various state departments including Assam State Rural Livelihood Mission (ASRLM), Panchayat and Rural Development, Health, T&D, and Social Welfare Departments, representatives from Assam State Commission for Women, Women federations, subject experts, representatives from civil society organizations and NGOs, and development partners (UNICEF). Dr J.B. Ekka, IAS, Principal Secretary, Transformation & Development Department was the guest of honour at the event. He acknowledged the recent emphasis given by the state government in engaging women SHGs for nutritional improvements and recommended cross-learnings from other states’ experiences from which Assam could develop its own model of involving SHGs in the nutrition sector. The discussion was shaped by the current status of SHG involvement and the challenges by Social Welfare Department and Assam State Rural Livelihood Mission (ASRLM). Best practices of engagement of SHGs for improving IYCF in different parts of the country were made by Mr. Vijay Singh, Consultant, World Bank, Mr SB Saha, Project Director, Child in Need Institute (CINI) and Ms Sonali Patnaik, Board Member, CFNS.
The key recommendations that emerged from the discussion:

- Need for convergence between Social Welfare Department, Panchayat and State Livelihood Mission for SHG platforms to promote nutrition
- Best practices could be contextualized for Assam and piloted in a district.
- Need for orientation of line departments on SHGs’ involvement in nutrition.

6. Policy seminar on complementary feeding in Guwahati: A policy seminar on strengthening complementary feeding in Assam organized by CFNS in collaboration with the CSDGs at the Assam Administrative Staff College in March 2019.

Mother’s milk can meet the nutritional and growth requirement of a child till 6 months after which it is necessary to start complementary feeding. In Assam complementary feeding was initiated only in 50% of children at 6 months. Percentage of children in the age group 6-23 months receiving adequate diet was only 9% in the state, for some of the districts like Darrang, Cachar and Nalbari, it was as low as 1 and 2%. The seminar was important to deliberate on the effective implementation of the government’s initiatives/projects pertaining to promotion of adequate complementary feeding of young children (6 to 24 months), integration of activities of frontline workers of health, Integrated Child Development Services (ICDS) and other inline departments for effective implementation of complementary feeding programs, social behaviour change communication strategy, area specific implementation, effectiveness and timely fund flows and exploring the role of Community Based Organizations (CBOs) including under Assam State Rural Livelihood Mission (ASRLM) and civil society organizations to improve the status of complementary feeding of young children in the
state. The seminar held detailed discussion on the status of complimentary feeding practices in Assam. 5 technical sessions took place on:

I) **Introduction to Home Based care of Young Child (HBYC)** and need for convergence with ICDS and other departments  
II) **Practices on adequate feeding in Assam** (Desired feeding practices, existing feeding practices, NIPCCID role in promoting feeding practices)  
III) **Social Behaviour Change Communication Strategy** – funds flow  
IV) **Supervision and monitoring of convergent efforts**: Tracking, home visits, supportive supervision, joint reviews and joint field visits, documentation of best practices, reward and recognition  
V) **Potential of Self-Help Groups (SHGs) under the National Rural Livelihood Mission (NRLM)** to empower/ mobilize mothers/caregivers and communities to improve child feeding.

Communication materials for policy seminar on strengthening complementary feeding in Assam
The key recommendations that emerged from the discussion were:

- **Monitoring of complementary feeding practices at household level by AWWs and ASHAs:** Currently the Monthly Progress Report (MPR) submitted to anganwadi supervisor by Anganwadi Worker (AWW) do not have provision for capturing any information related to complementary feeding practices.

- **Integration of Self-Help Groups under Rural Livelihood Mission with ICDS and Panchayati Raj Institution** for effective delivery of Nutrition Services at AWCs and household level.

- **Capacity building** of AWWs, ASHAs and SHGs using incremental learning modules of Poshan Abhiyaan in local languages.

- **Need for uniformity in the social behaviour change messages communicated to the communities:** Different messages from different players for the same topic tends to confuse the people.

7. Stakeholder consultation on scaling up rice fortification through Public Distribution System (PDS) in Assam in collaboration with World Bank and PATH, May 2019

The high prevalence of anaemia necessitates the need of fortification in Assam. Since rice is the staple diet of the Assamese people, fortified rice should be given priority. The scientific evidences in Karnataka and Gujarat have yielded positive results in terms of better cognitive scores among children after the consumption of fortified rice. Fortification process of rice would not take additional time and is cost effective. Fortification is a welcome step and it will cure the malaise of malnutrition and micronutrient deficiency.

The stakeholder consultation was attended by around 30 participants from the Food and Civil Supplies Department, Food Corporation of India, Department of Social Welfare and representatives of rice millers associations. The secretary of Food and Civil Supplies Department, Mr Alak Kumar Saharia, IAS chaired the consultation. The secretary in his concluding remarks highlighted the need of field study to assess the feasibility of fortification of rice in Bongaigaon in Assam, procurement of land and all other requirements while he would take up the matter with Chief Secretary, Food &Civil Supplies Department and Minister of Food and Civil Supplies for their advice.
8. Policy Seminar on first 1000 days in Assam to support Poshan Abhiyaan and accelerate SDGs: A policy seminar on first 1000 days was organized by CFNS in collaboration with Centre for SDGs in June 2019 at Assam Administrative Staff College Khanapara, Guwahati, Assam

The first 1000 days of life, being the window of opportunity is crucial for overall development of the child. Maximum stunting, wasting and underweight occurs from birth till 2 years of age – the period of growth faltering and plateaus thereafter. It is imperative to understand what are the problems and how multi-sectoral convergence between the departments is necessary to avert the problems.

**Mother’s care parameters (Assam):**
- Antenatal Care (ANC) visits during pregnancy - only 18% of pregnant women undergo full ANC
- Consumption of adequate amount of iron folic acid tablets during pregnancy is very low (32%) among pregnant mothers

**Child care parameters (Assam):**
- Children aged 6-23 months consuming adequate diet is very poor - only 8.7% of children consuming adequate diet
- Less than 50% of children fully immunized
- Only 50% of children receiving Vitamin A dose

The policy seminar was conducted to suggest policy reforms for Assam for improvement in state’s performance on first 1000 days, to disseminate the learnings of Tamil Nadu visit by district officials to understand the best practices of first 1000 days, to discuss on the applicability of learnings from the best practices of Tamil Nadu in the context of Assam and to present on the nutrition working group report findings on stunting reduction. The policy seminar included presentations from resource persons which was then followed by open discussion. The seminar was attended by officials from various state government departments including Health, T&D, Social Welfare, Food & Civil Supplies, nutrition working group members, representatives from civil society organizations, NGOs. Dr J.B. Ekka, IAS Principal Secretary, Transformation and Development Department, Shri Hemen Das, ACS, Secretary, Poshan Abhiyaan, Dr Debajit Khanikar, ACS, Joint Secretary, Social Welfare were also present and gave their valuable insights. Mr J.C. Phukan, Consultant, Centre for SDGs presented on the best practices of ICDS program of Tamil Nadu from the exposure visit.
He elucidated the reasons for the good performance of ICDS in Tamil Nadu. Ms Rashmi Mohanty, Nutrition Expert, CFNS spoke about the possibility of application of Tamil Nadu best practices in Assam by distinguishing doable actions into immediate, short term and long-term actions. This was followed by an overview of the nutrition working group report presented by Ms Rashmi Mohanty and thereafter a discussion where key recommendations emerged.

Some key recommendations that emerged from the policy seminar are: Incentivization of Anganwadi Workers (AWWs) through rewards like time scale payments, promotion for their better performance, work out the possibility of supply chain for THR based on the Tamil Nadu cooperatives model, community mobilization for resources through strong Social Behavior Change Communication strategy (SBCC) and information, education and communication to create Jan Andolan for nutrition, regular follow up of Pradhan Mantri Matru Vandana Yojana (PMVY)-a conditional cash transfer for tracking ANC registration, institutional delivery and first ANC check-up, focused attention for weekly iron folic acid supplementation to out of school children besides government and private schools, regular growth monitoring and strong focus on Infant Young Child Feeding Practices (IYCF) during community events like annaprasana organized at the anganwadi centre, focus on educating beneficiaries to create demand for availing all the health and nutrition fa-

Policy seminar on “First 1000 days- the critical window of opportunity” | Photo: CFNS

The right nutrition and care during the first 1000 days window influences not only whether the child will survive, but also promote optimum brain and cognitive development

Some key recommendations that emerged from the policy seminar are: Incentivization of Anganwadi Workers (AWWs) through rewards like time scale payments, promotion for their better performance, work out the possibility of supply chain for THR based on the Tamil Nadu cooperatives model, community mobilization for resources through strong Social Behavior Change Communication strategy (SBCC) and information, education and communication to create Jan Andolan for nutrition, regular follow up of Pradhan Mantri Matru Vandana Yojana (PMVY)-a conditional cash transfer for tracking ANC registration, institutional delivery and first ANC check-up, focused attention for weekly iron folic acid supplementation to out of school children besides government and private schools, regular growth monitoring and strong focus on Infant Young Child Feeding Practices (IYCF) during community events like annaprasana organized at the anganwadi centre, focus on educating beneficiaries to create demand for availing all the health and nutrition fa-
Eat Right Mela is an innovative concept to engage and educate consumers through various activities like talks, panel discussions, workshops, performances, shows and film screenings. On the lines of the National Mela, district-level Eat Right Mela was organized for Barpeta District on 14th June 2019 to nudge citizens to choose healthy and safe food. The Eat Right India Movement, led by the Food Safety and Standards Authority of India (FSSAI) under the Ministry of Health and Family Welfare (MoHFW) was launched on 16th October 2018 on World Food Day as an effort to address triple burden of malnutrition (undernutrition, micronutrient deficiencies and overnutrition) in India. It centers around three key themes: Eat safe, eat healthy and eat fortified foods. The movement targets both the demand and supply side that is citizens and food businesses.

**Activities**

- Food Stalls
- Street Plays
- Infotainment- Band Performance
- Balanced Diet Demonstration
- Indigenous item demonstration by SHGs
- Cycle Rally & Yoga Session
- Signature Campaign
- Quiz & Poster Competition
- Health Camps & Counselling sessions
- Audio Video Educational Session
The Eat Right Mela at Barpeta consisted of a plethora of activities that followed edutainment and infotainment model. There were stalls by health department for health check-ups, SHG groups and other organizations like Piramal Foundation and Netprofan for nutrition counselling. The activities also included prabhat yoga in the morning, cyclothon, quiz competitions, street play, signature campaign, audio visuals on health and nutrition, cooking demos by professionals/ethnic food demo competition, food safety demo, street vendors’ stalls and cultural programs. A street vendor training on food safety was conducted by Mr Sankha Subhra Kundu, FSSAI on the previous day.

Few glimpses of press conference, food safety training and street plays, health camps, food and nutrition counselling stalls at Eat Right Mela, Barpeta, Assam, June 2019 | Photo: CFNS
Barpeta became the first district in India where EAT Right Mela was held at the district level. The Eat Right Mela can be replicated in other districts for awareness on health and nutrition among its citizens. The SoP is being prepared by CFNS for future action.

**Highlights:**

- Massive outreach on key messages to eat healthy and safe
- Huge participation of students and youth
- Training on food safety to street vendors
- Attended by 20 people from print and electronic media
- 70 street food vendors trained on food safety and hygiene by FSSAI

Eat Right Mela, media coverage, Assam Tribune, 13th June 2019
CFNS in collaboration with Centre for SDGs prepared multisectoral result based nutrition plan for three aspirational districts of Assam. The plan provides a framework for the district administration to work on nutrition and health indicators of the district. This is intended to help the aspirational districts to improve their health and nutrition status. It also describes the lifecycle approach to address child and maternal malnutrition prevalent in the district. The interventions mentioned are of three types - nutrition specific intervention, nutrition sensitive and cross cutting strategies with an objective to support state in achieving the targets of Poshan Abhiyaan by 2022, improve nutrition focus in other sectoral programmes, accelerate the progress of SDGs 2 & 3 in the district and achieve vision of state enunciated in Assam vision 2030 with respect to health & nutrition indicators.

Activities

The multisectoral result based district nutrition plan was based on desk research and analysis during which strategic plans and similar planning documents were reviewed, field visits were conducted by CFNS Team to Barpeta, Udalguri and Goalpara districts to understand the status of various services linked to nutrition like health, water and sanitation, education and to gain insights into the socio-cultural practices and beliefs of people. The team conducted Focused Group Discussions (FGDs) with the mother's group (pregnant and lactating), adolescent girls and frontline workers of ICDS and health sectors and visited various Anganwadi Centres (AWCs) and creches particularly in the char area, tea garden areas of the district to understand the functioning and state of various services.
District consultation workshops were held in Barpeta, Udalguri and Goalpara on 20th July, 25th July and 1st August respectively where the multi sectoral nutrition plan was shared. The final set of comments by the stakeholders were vital for final refinement of the plan. The plans provide clear cut strategies for the district to achieve the Poshan Abhiyaan targets by 2022. The delineation of interventions mentioned in the plan by target groups and departments will ease planning and implementation of programs for improvement of nutrition and health scenario of the district. The plans were disseminated in the state consultation workshop and shared with the state government officials for further action.
Early marriage, early childbearing, and lack of family planning leads to a shorter time between marriage and a first birth, which results in poor nutritional outcomes. The healthiest times for a pregnancy are between the ages of 18 and 34 and at least 24 months after a birth (which ensures about 3 years between births), while avoiding more than 4 births. Too many children (more than 3) born to a mother has bearing on mother’s and child’s nutritional status. As the birth order increases, the risk of child being undernourished (stunted and underweight) also increases. Spacing pregnancies at least 24 months apart (the equivalent of 3 years between births) is linked to reduction of a key measure of malnutrition—stunting—among children under 5. An in-depth study concerning the current status of family planning in India was important to draw linkages on its impact on maternal and child nutrition, to understand direct and indirect pathways through which family planning affects nutrition and to study programs that have integrated family planning and nutrition, experiences and success stories thereof and plausible strategies to bring them on a common platform. The stakeholder consultation on linkages between family planning and nutrition took place in April, 2019 at IIC, New Delhi. The event saw the presence of distinguished speakers from different development organizations, academia and ministry. The Coalition led the event with support from PFI and delivered a key presentation by Ms. Ayushi Jain, PhD Research Scholar, IIT Bombay. The event was successful in dissipating key messages. This was an important step in understanding the direct and indirect pathways through which family planning affects nutrition.
Integrating family planning in nutrition programs can help fulfill objectives specified under United Nations Sustainable Development Goals (UN SDGs) 2 and 3 that promote Zero Hunger and Good Health and Well-being of all individuals.

**“End Hunger, Achieve Food Security and Improved Nutrition, and Promote Sustainable Agriculture”**

- Family planning helps women time and space their pregnancies to ensure healthy nutritional outcomes.
- Spacing pregnancies at least 24 months apart (the equivalent of 3 years between births) is linked to reduction of stunting among children under 5 years.
- Spacing also helps women in replenishing essential nutrients and gives mothers more time, energy and resources to breastfeed their infants.

**“Ensure Healthy Lives and Promote Well-Being at All Ages”**

Family planning improves the health of women and children by reducing the proportion of pregnancies that are considered to be high risk.

- Family planning helps women bear children at the healthiest times of their lives, and thus most likely to survive, stay healthy, and have healthy children.
- The healthiest time for a pregnancy are between the ages of 18 and 34 and at least 24 months after a birth while avoiding more than 4 births.

Possible impacts of Family Planning on Maternal and Child Nutritional Outcome

Use of Contraception

Helps to regulate planning of birth in terms of:

- **a)** Timing - Mother's age at the time of pregnancy
- **b)** Spacing - Interval between subsequent births
- **c)** Frequency - Total number of children born in a family

Maternal and Child Nutritional Outcome

Reduces the risk of:

- Intra Uterine Growth Restriction (IUGR)
- Low Birth Weight Deliveries
- Premature Birth
- Infant Mortality

Decline in:

- Stunting
- Underweight
- Child Anaemia
- Under 5 Mortality

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Important Indicators linking Family Planning and Nutrition: evidence from India

**a)** Mothers’ age during pregnancy:

Early marriage, early childbearing, and lack of family planning lead to a shorter time between marriage and a first birth, which results in poor nutritional outcomes. The healthiest times for a pregnancy are between the age of 18 and 34 and at least 24 months after a birth (which ensures about 3 years between births), while avoiding more than 4 births.

Legend

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Communication materials/brochures for the workshop
Deliberations by (I) Dr Sila Deb, Deputy Commissioner, MoHFW, GoI, (II) Ms. Poonam Mutterja, Executive Director, PFI during stakeholder consultation on linkages between family planning and nutrition, April 2019 at IIC, New Delhi | Photo: CFNS

Way Forward

### Pre-Pregnancy

Short key messages on:
- Planning of birth after 18 years of age: spacing between births;
- Types of contraceptive available and access points, adolescent nutrition

### Pregnancy

Counselling on:
- Return to fertility after a birth based on BF status
- Timing of initiation of FP during the post-partum period based on BF status, particularly LAM and ensuring consent for long acting or permanent methods as appropriate

### Delivery/Discharge

Counselling on:
- FP methods including LAM, postpartum IUCD and postpartum tubal ligation

### Postpartum/Postnatal Visits

Reinforce previous counselling to ensure that essential MIYCN and FP actions are taken in a timely manner

Entry points for integrating family planning with nutrition programmes
Barpeta an aspirational district, with 1.7 million population has a huge rural urban divide with 91.3% residing in rural areas (Census 2011). Barpeta is a high burden district in malnutrition with ranking 368 among 599 districts in India. CFNS worked in partnership with UNICEF Assam and Government of Assam to deliver a multi-sectoral plan for Barpeta district as per the convergence action plan template under Poshan Abhiyaan.

The activities involved establishment of nutrition working groups: Two working groups – on Essential Nutrition Interventions and on Food Security representing both government and non-government stakeholders, developing framework for the State Nutrition Resource Centre in SDGs cell in Assam, facilitating multi-sectoral engagement through one-day planning workshop organized in Barpeta on 9th January 2019 attended by the Deputy Commissioner, Deputy Development Commissioner, Additional Deputy Commissioner (ADC) of all the line departments - Social Welfare, Health, Agriculture, Public Health Engineering Department (PHED), Education, Livelihood mission, Public Works Development (PWD), Civil Society Organizations where-in the CFNS assam project team presented the multi sectoral plan of the district to the Deputy Commissioner and ADC and documentation of district SBCC (Social, behavioural change communication) initiatives in Barpeta. CFNS Assam state team carried out this activity with support from the Delhi office by mapping four government departments namely Health, Social Welfare, Education and Public Health Engineering. Apart from the government departments, non-governmental organizations (NGOs) working in Barpeta district were also mapped and interviewed to document their nutrition initiatives and the social behavioural change communication activities.
Planning better

**Data driven plans:** The district level research and program data can be analysed more systematically to prioritize themes to formulate the SBCC strategy more effectively.

**Complementary plans:** Different players can possibly divide up key themes based on their competitive edge and geographical presence (in case of non-government players).

**Targeted plans:** The riverine belts and the char areas have high burden of malnutrition and need special attention and goals may be better achieved at the state level as the Char area cuts across various districts. Material especially designed and produced in Bangla can go a long way in moving towards the nutrition goals of the state.

Executing better

**Periodic Training and capacity building** of the frontline workers so that the SBCC activities can be carried out in a more meaningful way.

**Local leadership:** Involve the local elected representatives, religious leaders, school teachers, students and youth organizations in planning and executing so that the spirit of Jan Andolan can be realized.

A central repository of all materials, plans and achievements against plan will help the Poshan Abhiyaan District Convergence Committee to take stock of progress and plan course correction. Best practices and successful case studies should be documented and shared with other districts and state level stakeholders.

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**Methodology framework for SBCC documentation**
Partnership with Ministry of Women and Child Development, Govt. of India
Nutrition is the base of human development. It is one of the principle progress indicator of the Sustainable Development Goals (SDGs). The challenges during complementary feeding are characterized by poor feeding practices and poor dietary quality of homemade complementary foods. The goal was to measure dietary diversity in Darrang, aspirational district of Assam in order to strengthen the district level multi-sectoral nutritional planning under the Poshan Abhiyaan. The dietary diversity study was undertaken to understand the food consumption and dietary diversity among children, pregnant women and lactating mothers in Darrang district of Assam, strengthen government interventions in improving availability, affordability and accessibility of the vulnerable section (women and children) to a diverse diet and initiate the dialogue based on evidences through research on dietary diversification among the policy makers and implementers.

Activities

A cross-sectional quantitative survey was used to explore the food consumption and diet diversity of children (0-59 months), pregnant women and lactating mothers. The questionnaires were prepared after rounds of discussion with Mother and Child Health Cell (MCH) of Assam Medical College and Hospital (AMCH) team followed by translation to Assamese language. Introductory one-day workshop for the survey team was conducted by CFNS in Dibrugarh.

Children surveyed in Darrang district of Assam
The survey was digital and conducted in KoBo Tool Box by each member of the survey team on their mobiles. Data from 24 hours dietary recall was used to construct an individual Diet Diversity Score (DDS) as an indicator of the nutritional quality of the individual’s diet. Minimum acceptable diet was calculated from minimum meal frequency and minimum dietary diversity.

**Key Highlights**

- Difference of intake in female and male children consuming 4+ foods groups with female children consuming less as compared to male counterparts
- Consumption of vitamin A rich foods and fruits food group in children lowest followed by eggs and flesh foods among all other food groups
- The consumption of vegetables and fruits in pregnant women and lactating mothers were low with high percentage of them consuming biscuits

The research support in conducting dietary diversity study was provided by Mr Utpal Chetia, IIT Bombay.

Recommendations for sketching the future path for the districts to improve its nutritional status suggested-

1. A food consumption data base of each aspirational district to be prepared as its availability in the public domain will be crucial for several intervention agencies
2. Need for integrating agriculture and its market to the nutritional needs of the district for addressing the nutrition affordability
3. The behaviour related to a healthy and diverse diet also needs to be cultivated in the district given most of the children consume junk foods like biscuits and chips
4. The social behaviour change communication activities should innovate to increase the acceptability of the healthy and diverse foods among the district population
5. The traditional food system in the district also needs to be studied along with the transition to modern foods in the district
6. The intervention should start with enhancing the diet diversity knowledge along with demystifying beliefs related to it.
Partnership with TINI (The India Nutrition Initiative)-TATA TRUSTS
The very idea of transformation of Kuposhan (in districts) to Suposhan in itself is very ambitious and therefore requires concentrated efforts from various ends. The stakeholder consultation was held in Alwar in August 2018 at Collectorate office, Alwar, Rajasthan on key issues identified in connection with nutrition and discuss best possible solutions. The prime focus of the discussion centred around the coordination between departments and the importance of data collection, maintenance and retrieval. The first step in this mission as agreed was generation of demand and strengthening of community. Tata Trusts is envisaging this dream in five districts wherein the role of the Zila Parishad is of prime importance. Star Foundation spoke about the role of their foundation in conducting the KAP (Knowledge, Attitude and Practices) study in Alwar.

Secondary analysis, stakeholder consultation in five districts, KAP study, training and need assessment, capacity building
To understand and unfold the barriers and limitations in improving the nutritional status and behaviour change, need for a KAP survey among community and service providers was also felt by CFNS. The study was carried out in five districts of Rajasthan viz., Alwar, Dausa, Dhaulpur, Karauli and Tonk. The study had both quantitative and qualitative components. The quantitative study included survey of pregnant women, husbands of the pregnant women, lactating mothers, husbands of the lactating women, mothers-in-law and adolescent girls while the qualitative study included survey of AWWs, ASHAs, ANMs, Lady Supervisor, Child Development Project Officer (CDPO), School Principal/teachers, member of village, health and sanitation committee and panchayat member. The survey tools were provided by the CFNS team and the same were modified by STAR Foundation team. The tools were pre tested. The tools were translated to Hindi for use in the field.

**Key Findings**

**There is little understanding on woman’s weight increase during pregnancy among pregnant mothers.**

One of the mothers said in Dausa: “I think a woman should gain 15 kg weight in entire pregnancy but it also depends upon health of mother”

One ASHA from Dausa district reported that women do not come for registration. “We have to go to their home and make them understand. They do not want to get their vaccination done.”

Another ASHA from Dausa reported that “Some women do not register themselves instead go to the traditional healers and they don’t even take iron and calcium tablet”

“We are receiving very less supply of IFA tablets for more than one month” reported by teacher of Tonk district
With regard to anaemia and nutrition the knowledge levels of the pregnant women are low and requires concerted efforts to enhance knowledge and practice. Consumption of IFA tablets are much less than the reported receipt of the same. Focused IEC activities are to be implemented to reverse this situation. Child immunisation needs attention as it is low, but the health functionaries seem to not be thinking this as a challenge. Number of visits made by the pregnant women during the pregnancy also needs attention as only 15 percent of the pregnant women visited the healthcare centre more than 5 times. Printed materials are provided, but due to lack of awareness, such things somehow fall short.

It is important to counsel the people that health and nutrition are interrelated. Whenever the government/hospitals introduce new programs or schemes, training should be provided immediately for smooth functioning of AWW, ASHA and ANM.

Sharing of KAP study findings with District Collector, Tonk, Rajasthan

Tonk District has comparatively lower rates of stunting (32%) in children under 5 with respect to state and national average while wasting (15.8%) and underweight (37.3 %) in children under 5 is higher with respect to state and national average. Severe wasting is found to be within 5% in children under the age of 5. NFHS-4 Data reflects higher incidences of acute undernutrition and lower incidences of chronic undernutrition in children under age of 5. Total no. of AWC in Tonk is 1472; which gives us a figure of around 3 children (under the age of 3) who are severely wasted in each anganwadi centre which by all means is a number that can be taken care of on a priority basis.

District Map, Tonk

Presentation to District Collector, Tonk, | Photo: CFNS
The team of Coalition had a meeting with district collector of Tonk, Shri Ram Chandra Dhenwal. The discussion also had people from Health, ICDS, and other relevant departments. The meeting was a fruitful one. The first presentation was given by Mr. Sunil Swami on multi sectoral integrated nutrition program ‘MAKING IT HAPPEN’ in Rajasthan and its role in developing model AWCs in Tonk. The second presentation was from CFNS on “Strengthening Systems for Demand Generation and Service Delivery for Improved Nutrition Outcomes in Five Districts of Rajasthan” especially focused on secondary findings for Tonk district and immediate measures to strengthen nutrition delivery. Dr. Sujeet Ranjan, ED, CFNS asserted inadequate awareness as a main hindrance to nutrition delivery which was positively taken up by the district collector who then asked to set up the banners and printouts which would reinforce the awareness regarding nutrition.

The presentation by Coalition was an eye-opener as many departments and the district collector were acquainted with the areas that needs to be worked upon.

Given timely attention and action, Tonk can reduce maternal and child malnutrition to a great extent. Special programmes to improve complementary feeding should be detailed out. Anaemia is major challenge in Rajasthan and Tonk is no exception.
CFNS in collaboration with CSDGs formed a nutrition working group on “Essential Nutrition Intervention” in Assam. The working group was constituted to provide sectorial and knowledge support to the leaders in the Policy Committee / Institutions through CSDGs, conceptualize and promote Essential Nutrition in Assam, develop state specific evidence-based knowledge management products, models, discussion briefs for policies and to generate a public discourse on key themes and functions. CFNS has conducted regular nutrition working group meetings from December 2018 to June 2019. The meetings centered around finalization of ToR and discussion around developing policy recommendations and research-based advocacy. The result of this meeting was the working group report, a document of policy recommendations centered around 1000 days, submitted to Assam Government.

**Strategic Think Tank**

The Nutrition Working group acts as a think tank for the state on various issues related to Essential Nutrition Actions. The inputs from the meetings helped in the formulation of district multi sectoral nutrition plan. The CFNS supported a research study conducted by Humanities & Social Science Department, IIT Guwahati under the supervision of nutrition working group member, Dr Rajshree Bedamatta, Associate Professor, IIT Guwahati on complementary feeding practices in Udalguri district.
1. **Towards Suposhan: Realizing India’s Full Human Potential: Multi-sectoral action agenda to achieve sustainable nutrition security in India**

This *Action Agenda for Nutrition Security in India*, an evidence-based and peer reviewed document updates and builds upon the action agenda for improving nutrition outlined by CFNS in the document titled “Sustainable Nutrition Security in India: A leadership Agenda for Action” and builds on it to:

- Incorporate the new available evidence
- Expand the scope to make it more holistic to include actions to address not only undernutrition, but also obesity, overweight and other diet and lifestyle related chronic non-communicable diseases
- Action points for appropriate treatment and management of severe wasting in children
- Multi-sectoral recommendations and framework of interventions. The document provides in detail the essential action agenda for direct nutrition interventions for both undernutrition and obesity.

2. **Improving Maternal Infant Young Child Nutrition (MIYCN) in Assam: A Position Paper**

This position paper was developed as an output of the nutrition working group meeting by Dr. Sheila Vir and the CFNS team. In summary, poor maternal, infant, young child nutrition has serious implications on health, education, productivity and economy of family, community and country. Our efforts for the reduction in absolute poverty and consistent economic growth therefore need to be actively supported and translated in ensuring improved health and nutrition situations of the marginalized populations.

The value of addressing undernutrition is evident from the recent assessment that for every dollar invested in scaling up nutrition actions, $16 are realized in return. It is important to recognize that investing in nutrition means to accelerate economic growth rather than viewing nutrition improvement merely as an outcome of economic growth. In fact, improving maternal, infant and young child nutrition scenario in the state is central to our efforts in achieving the Sustainable Development Goals (SDGs) by 2030.
3. WASH and Nutrition Consultation in Assam, March 2019: Wash and Nutrition Position Paper

The interconnected issues of water, sanitation and hygiene (WASH) affect health, wellbeing, education and even livelihoods. The absence of adequate and safe WASH services and related behaviours (e.g., handwashing) can compound poor health. Certain groups like young children, pregnant women and lactating mothers, adolescent girls, are particularly vulnerable. The Sustainable Development Goals (SDGs) represent a global call to end poverty through action on 17 goals. Several SDGs are interconnected, impacting each other in proximal and peripheral ways. SDG 6 emphasizes “availability and sustainable management of water and sanitation for all”, and is intimately linked with SDGs related to health, nutrition and education.

The position paper developed as an output of WASH nutrition consultation describes why WASH is important in the context of the global goal to end hunger, and the World Health Assembly Resolution for maternal, infant and young child nutrition, how WASH can be integrated into nutrition programs, and the importance of hygiene behaviours in promoting nutrition outcomes.
Other events in the year 2018-19

National Roundtable - Food and Nutrition for Nation’s Growth, Voluntary Health Association of India, New Delhi

Meeting with Dr Hemalatha, Director and the team of scientists, National Institute of Nutrition (NIN), Hyderabad

The International Coach Federation Foundation offered transformational partnerships with CFNS to bring the power of coaching

Poshan Abhiyaan Session in 46th Annual National Conference of Indian Association of Preventive and Social Medicine, Indira Gandhi Medical College, Shimla

21st Governing board meeting of the Coalition for Food and Nutrition Security

4th Annual General Meeting (AGM) of the Coalition for Food and Nutrition Security
The Coalition for Food and Nutrition Security recognizes and highly appreciates the contribution of interns from IIT Bombay (Ms. Ayushi Jain, Mr. Utpal Chetia, Mr. Madhusudan Singh Tomar) under the active guidance of one of our board members, Prof. Satish Agnihotri during the last financial year at a very crucial phase of transformation in Coalition. The contribution from the above mentioned IIT interns were very significant in providing the hand holding support in strategic partnership, membership engagement and preparation of proposals.

The Coalition is also very grateful to its valuable board members who during this crucial hour took a lead role in the management of the Coalition.

**Interns at CFNS**

Interns from IIT Bombay: Ms. Ayushi Jain, Mr. Utpal Chetia, Mr. Madhusudan Singh Tomar, Ms. Anchal Purbey, Mr. Mithilesh Shah, Ms. Priyanka Gogoi, Ms. Lahari Yaddanapudi, Ms. Puja Roy, Ms. Sakshi Pandey

Intern from Indian Institute of Public Health Gandhinagar (IIPHG): Dr. Tripti Kumar

Interns from Indian Institute of Public Health, Delhi: Dr. Radhika Raj Pandita, Dr. Shuchita Sharma

Interns from Delhi School of Management (DTU): Ms. Shweta Karna, Ms. Arushi Kaul

Intern from Amity University (Noida): Ms. Akanksha Anahita

Intern from Hansraj College, University of Delhi: Mr. Hari Krishnan P

**Photo Gallery**

I) Brainstorming session with different stakeholders policy seminar 2019,

II) Deliberations by Dr Sujeet Ranjan, Executive Director, CFNS, during the consultation on linkages between family planning and nutrition | Photo: CFNS.
I) Program team in Assam World Bank project, II) Dietary diversity research meeting in Tezpur Medical College, Dibrugarh, Assam, III) Meeting with Mr. Sudhir Prasad, IAS (Retd.), Chairman, State Food Commission, Jharkhand | Photo: CFNS
Financial and Operational Highlights

Financial Summary
Grants, Membership Fee/Donations and Management Fee-FY 2016-2017 to 2018-2019

Expenses in the FY 2018-19
Brief Profile of Board Members

Prof. M.S. Swaminathan, Patron and Emeritus Chair: He is the founder and chairman of the MS Swaminathan Research Foundation. He is known as the "Father of Indian Green Revolution" for his leadership in successfully introducing and developing the high-yielding varieties of wheat in India. He is the founder and patron of CFNS.

Mr A R Nanda (Board Chair till June 2019): He is former secretary, Ministry of Health and Family Welfare & Registrar General and Census Commissioner, Govt. of India.

Prof. Chandrakant S. Pandav, Acting Board Chair (July 2019 Onwards): Dr Pandav is former Professor & Head of the Department – Centre for Community Medicine at the All India Institute of Medical Sciences (AIIMS), New Delhi, India. He is the founder member and regional co-ordinator for South Asia of International Council for Control of Iodine Deficiency Disorders (ICCDD) since 1985.

Ms. Sonali Patnaik, Secretary: She is Director, Arupa Mission Research Foundation. She has been working in the Third Sector for 20 years now and is certified in Social Impact Assessments, Gender Budgeting & implementing NFHS.

Mr. Bhaskar Barua: Mr. Barua is a former Secretary, Ministry of Agriculture, Govt. of India. He is a member (Non-Official)-Assam State Disaster Management Authority, Government of Assam.

Mr. Nilamadhab Prusty: Mr. Prusty is the Honorary President of Humanitarian AID International and Honorary Director, Centre for Development & Disaster Management Support Services. He has worked with NDDB, Technology Mission, Care India, Sphere, etc.

Ms. Harshita Pandey: Ms. Harshita Pandey was the Chairperson, State Women Commission, Chhattisgarh.

Mr. Nilamadhab Prusty: Mr. Prusty is the Honorary President of Humanitarian AID International and Honorary Director, Centre for Development & Disaster Management Support Services. He has worked with NDDB, Technology Mission, Care India, Sphere, etc.

Dr Ramesh Chandra Panda: Dr R. C. Panda is the Former Secretary to the Government of India and Member, Central Administrative Tribunal.

Dr Satish B. Agnihotri: Dr Satish Agnihotri is Professor & Head, CTARA, IIT Bombay. Dr. Agnihotri is Former Secretary Coordination, Cabinet Secretariat, Govt. of India.

Dr Meenakshi Jain (Treasurer CFNS till December 2018): She was former treasurer of CFNS. Dr. Meenakshi Jain was Intra Health's country representative in India. She is a health and development specialist with more than 15 years of experience in program design, management, and monitoring and evaluation.

Prof. K. Srinath Reddy (Board Member till May 2018): Prof. Reddy is President, Public Health Foundation of India (PHFI) and Former Head, Department of Cardiology at AIIMS. He was also appointed as Advisor on Health to the Government of Odisha in 2017.
Leadership and Team

Dr Sujeet Ranjan (Executive Director): He has been associated with public health sector for more than two decades. Prior to The Coalition, he was associated with CARE India as Director (Programme Implementation), Magic Bus India Foundation, Piramal Swasthya Management & Research Institute as Chief Operating Officer/Senior Vice President.

C S N Murthy: Manager-Finance, Administration and Resource Mobilization

Manali Jain Khurana: Assistant Manager- Finance, Administration and Resource Mobilization

Nar Bahadur Thapa: Support Staff

Program Team and Consultants

Our Vision
To achieve sustainable food and nutrition security for all.

Our Mission
The Coalition aims to raise awareness, foster collaboration and advocate for improved programmes to achieve sustainable food and nutrition security in India.

Our Core Values
- Conviction and Courage: Critically engaging with public policy and taking political positions on issues of public interest concerning health and nutrition.
- Evidence-based Agenda: Committed to setting an agenda based on rational findings, such as backing of scientific evidence and has the potential of being scaled up across cultural contexts.
- Equity and Diversity: Building an inclusive Coalition across India and giving equal space to each member regardless of size, capacity, or position.
- Democratic Discourse: Engaging with multiple stakeholders from the government, civil society, and private sector transparently and collaboratively, giving all voices a space for the greater good.
- Result Driven: Demonstrate results at scale, backed by quality and excellence.
State level consultation on “Community based assessment of supplementary nutrition service under ICDS in Aspirational districts of Assam Goalpara and Udalguri”

Nutrition Partner’s meet in Ranchi, Jharkhand, 25th September and Community meeting with AWW in the State of Jharkhand

CFNS during the nutrition partner’s meet in Jharkhand under the banner of WeCan facilitated on identifying high priority nutrition areas in the state. 17 partners came together and committed to focus and deliver on 3 priority areas: I) The first 1000 days II) Severe acute malnutrition and III) Data management.

Guidance seeking discussion with Prof. M.S. Swaminathan

Awareness generation on key essential nutrition messages through print and electronic media

Article penned by the Executive Director, CFNS on “Essential Interventions for reducing malnutrition” published in Sunday Pioneer, September 21 and “Engaging stakeholders to fight malnutrition” published in Hindustan Times, September 23. The Coalition also prepared a film on complementary feeding practices in tea garden areas of Assam and another on dietary diversity in Darrang district, Assam.

CFNS facilitated the community meetings in Goalpara and Udalguri districts, Assam followed by Poshan Rally

Glimpse of engagements of CFNS in Poshan Maah 2019