

# NUTRITION CAMP

(Process Document)



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For a world without hunger



**VAAGDHARA**

***15 days nutrition camp is a process by which we can create a path towards restoration of health for malnourished children.***

**Background:** According to the India State Hunger Index (2008), Rajasthan is on 7th Position among 17 states, has severe level of hunger, which is reflected in high levels of undernourishment and Banswara is a part of tribal junction of southern Rajasthan where problem of malnutrition is poorer in comparison to other districts of Rajasthan. The causes of hunger are manifold: High vulnerability due to climatic changes and geographical conditions, migration from farming towards labor, low wages/income, and poor delivery system of social security schemes, lack of accessibility to government services like AWC, PHC, PDS and knowledge deficit, particularly in tribal and Bhil communities. Malnutrition in Anandpuri block of Banswara district is a serious problem, according to surveys prevalence of severe malnutrition and moderate malnutrition is 13.5% and 22.8% respectively.

**Aim:** To contribute to improved health condition of malnourished children.

**Objectives:**

1. To know the actual health condition of a child
2. To identify the possibility of cure of a malnourished child with any other disease symptoms
3. To start up positive change in malnourished child
4. To change the behavioral and food practices in mothers for their children

**Target beneficiaries:**

**Direct beneficiaries:** children of 0-6 year age group

**Indirect beneficiaries:** Mothers of malnourished children and village community.

**Other stakeholders:** ICDS department- by regular involvement of Anganwadi worker in camps, horticulture department- timely involvement in convergence schemes for families of malnourished children.

**Major activities during nutrition camp:**

- Anthropometric measurement of children – 3 time
- Cooking food for malnourished children and recipe demonstration for mothers
- Snake ladder game with mothers

- Circle game with picture cards
- Story telling with picture cards
- Regular hand washing by mothers before cooking and feeding their children.
- Make available vegetable seed kit and discussion on how to grow nutrition garden and importance of that.
- Discussion on breast feeding, supplementary feeding.

***Before starting nutrition camp the first step was screening of SAM and MAM children. Door to door Screening has done in whole village 2 days prior to nutrition camp. All critical SAM children were referred to malnutrition treatment center and borderline SAM and MAM children listed for nutrition camp.***

**ANTHROPOMETRIC MEASUREMENT OF CHILDREN– (3TIME IN 15 DAYS)** – On first day of nutrition camp registration and anthropometric measurement of previously identified SAM and MAM has done and the measurement data has been shared with mothers. To identify any disease sign in child physical checkup **PILCCOD** - pallor, icterus, lymphadenopathy, clubbing, cyanosis, fever cough, oedema, dehydration also done with history of fever and tuberculosis. This activity has been repeated three times during 15 days nutrition camp. (1<sup>st</sup>, 7<sup>th</sup> and 14<sup>th</sup> day)

During the camp facilitator provided peanuts with jhaggery and at the end of camp locally available fruit given to children. Mothers understood that they can give this type of food apart from 2-3 times cooked food to contribute nutrition in diet of a child.

**COOKING FOOD FOR MALNOURISHED CHILDREN AND RECIPE DEMONSTRATION FOR MOTHERS:** one essential component of nutrition camp was cooking nutritious food for children and recipe demonstration to mothers. Some low cost recipes which are rich in nutrition and mothers can prepare them easily demonstrated i.e. sattu, poriadage, raab, ragi sweets etc. food cooked for children according to decided menu for every day.

**SNAKE LADDER GAME WITH MOTHERS:** For knowledge enhancement of mother's four types of snake ladder game were played with mothers. This game is totally a mind changing game that shows positive and negative aspects of knowledge, awareness including accessibility,

accessibility and utilization of Anganwadi services, household care of pregnant, lactating lady, supplementary feeding care of infant and young child.

1. **Services at Anganwadi center and mother and child health** – through this game mothers learnt that if they will use Anganwadi services the health status of a child and pregnant or lactating mother will go up like climbing on a ladder and if will ignore benefits of these services the health status can come down.
2. **Care of pregnant lady and safe delivery** - Mothers understood good results of care during pregnancy and institutional delivery. And also the poor results if they are ignoring health of a pregnant lady and institution delivery.
3. **Supplementary feeding and care of young children:** Game explained that exclusive breast feeding and supplementary feeding makes child healthy and disease free and long time breast feeding and lack of sufficient quantity and quality in supplementary feeding can make child malnourished.
4. **Care of infant, supplementary feeding:** Care of infant and good food is only practice by which a infant grows appropriately. And if mother ignore the care of child in early age it can result in severe malnutrition.

**CIRCLE GAME WITH PICTURE CARDS:** This was the game of role play, for all characters there were many picture cards.

The facilitator made two circles. First for people who adopt healthy practices like organic farming system, kitchen garden, good diet during pregnancy, exclusive breast feeding etc and second circle for people who followed practices which results in malnutrition i.e. use of chemical pesticides in farming, unhygienic condition near house, over use of forest etc.

The aim of this game was to understand that how we can enter in circle of health by adoption healthy practices.

**STORY TELLING WITH PICTURE CARDS:** these stories were from nearby communities. With the help of picture cards facilitators told stories of a girl who become malnourished because she got married in early age and due to that she entered in malnutrition cycle. The character of

another story was a poor farmer who adopts organic farming system and now he is a resource rich farmer and motivating other farmers to adopt integrated farming system.

**HAND WASHING BY MOTHERS BEFORE COOKING FOOD AND FEED CHILDREN:** Mothers of nutrition camp were following all six steps of hand washing before cooking food for malnourished children. And learnt that hand washing is must before cooking, during feeding and after defecation.

**MAKE AVAILABLE VEGETABLE SEED KIT:** Vegetable seed kit provided to mothers of malnourished children because the families have poor resources and cannot purchase vegetables for consumption and seeds for growing nutrition garden. It was very good initiative to cure malnutrition among children. During the camp mothers sow the seeds. Vegetable seed kit contained seeds of lady finger, tomato, spinach, brinjal, bottle gourd, onion, ridge gourd.

#### **DISCUSSION SESSIONS:**

#### **FOOD DIVERSITY AND NUTRITION:**

The food has diversity score 4-5 per day that children eat in 15 days nutrition camps.

Food item	Diversity score	Content	Rich source of
Fruit (seasonal )	1		Vitamins and minerals
Peanuts/ roasted gram with jaggery	2	Peanuts, gram, jaggery	Protein and sugar
Porridge/ khichdi salty with green vegetable	3	Rice , green gram, green vegetables and spices	Carbohydrate, protein, vitamins, iron and minerals
Porridge/ khichdi sweet	2	Wheat, rice and sugar	Carbohydrate and sugar
Sattu	3	Roasted Wheat, gram with jaggery	Carbohydrate, protein and sugar

**Awareness and knowledge enhancement:** knowledge and awareness on different topics with the help of games, posters, chart papers.

- ANC-PNC checkups, care of a pregnant lady
- Institutional delivery
- Breast feeding
- Food for lactating mother
- Supplementary feeding
- Cooking practices
- Prevention from diarrhea
- Personal hygiene and sanitation
- Food diversity (tiranga bhojan)

#### **ROLES AND RESPONSIBILITIES:**

**Health service provider(AWW)** at village level has responsibility to contact with families of previously identified malnourished children, ensure their participation in 15 days nutrition camp, make arrangements at AWC , help in all activities during nutrition camp and regularize 3-6 year children at AWC after completion of nutrition camp and follow up young children.

**Mothers of malnourished children** has responsibility to attend the camp with their children, decide a common time for camp and contribute some food material or vegetables if they are growing at home and help in cooking food for children.

**TIME DURATION:** 2.5 to 3 hours for 15 days

#### **MEASURES OF OUTCOME OF NUTRITION CAMP:**

- Findings of three time anthropometric measurement: significant improvement in weight of a malnourished is strong indication that child is able to come out from malnourished category-

Category	Wt increased/day	Possibilities
Good	>10gm	Child can come out from malnutrition by intake good quality and quantity food

<b>Average</b>	5-10gm	Child need some special care (food, medicines and hygienic conditions)
<b>Poor</b>	<5gm	Child is Vulnerable to become severe malnourished and has some frequent illness. Need medical support and care

- General observation: physical signs of improvement in a malnourished children improved skin texture, reduction in edema and sunken of eyes, happy face, reduced pallor, cleanliness.
- Position in growth chart: improvement in 0-3 year children is measured by calculates his/her position in growth chart.
- Change in food habits of child
- Behavioral changes in mothers
- Improvement in ICDS services

On the basis of these measurements we do assess the outcomes of nutrition camps

**PROCESS/ ACTIVITIES:** continuous process of 15 days with malnourished children, mother and health service provider (AWW) to bring changes in health of children, behavioral change in mothers and improvement in delivery of ICDS services with direct involvement of AWW.

#### **Common actions for every day:**

- Preparation of nutritious food for children as per 15 days chart
- Offer fruits, peanuts and jaggery to children
- Discussion on different topics
- Any game with mothers

#### **Day One:**

- Anthropometric measurement of children with the help of MUAC tape, Height meter and digital weighing machine has done. Weight of children shared with



mothers. Then physical checkups of all children accomplished for identification of any disease signs through (PILCCOD).

- Moderately acute malnourished and severely acute malnourished children without any dangerous sign registered in nutrition camp. AWW referred SAM children with dangerous sign to Malnutrition center.
- Facilitator offered fruits, peanuts and jaggery to children and told mothers about nutritious value of these food items.
- At the end of first day AWW and facilitator requested to mothers for regular participation in camp with children for 15 days.

#### **Day two:**

- On second day of camp facilitator and AWW welcomed to mother and after that started discussion about Anganwadi services. He told about six ICDS services and importance of these services for a child. Meanwhile facilitator provided fruits, peanuts and jaggery to children.
- Information about family regarding agriculture, livelihood, animal husbandry and nutrition garden collected and on that basis families who needs vegetable seed kit for their own consumption identified. Almost all mothers were interested in growing vegetables at their home to add vegetables in food. Some of them ask for more seeds so they could be able to sell vegetables by growing in much quantity and it will helpful for income generation also.
- Mothers cooked wheat and green gram porridge for children under instructions of facilitator; he teach that by adding some spinach, tomato and bottle gourd in porridge we can make it more nutritious. In semi solid form after adding Ghee AWW served porridge to children. Mothers of young children and all children washed their hands before eating. After that facilitator told a story of a malnourished child with the help of picture cards that how he recovered from malnutrition.
- At the end of second day mothers was curious to know about possibilities of improvement in child.

#### **Day three:**



- On third day mothers were more excited because they knew that every mother will get vegetable seeds, some of them told that they prepare their land to grow vegetables last evening and today they will sow the seeds.
- Facilitator distributed pea nuts, jaggery and banana to children and started a game with mothers named snake ladder game. It was related to AWC services, their benefits and result of ignorance of these services. 2-3 mothers started cooking sweet porridge for children.
- The game was quite interesting, eight mothers were sitting around a big flex, and others were watching them. On that flex there were 100 colorful squares. Two types of pictures ladder and snake were drawn there and at the top and bottom of snake and ladder something was written. One mother throw the dice, the number was four. She shifted her game piece to number four at the bottom of a ladder. Her piece climbs up to 32 because there were written on point 4 that she brought her child to AWC for immunization so she climbs on condition written on 32 that his child is disease free. Mothers played this game up to 45 minutes with much interest, meanwhile porridge were ready for children so mothers feed their children. Seeds distributed to mothers and they went home with lots of learning's.



#### Day fourth:

- On fourth day when mothers came up to camp some of them stated cooking porridge after giving fruits to children and others asked to play again last day's snake ladder game. Facilitator told a new knowledge building game for that day. It was the circle game. Facilitator made two circles and at the centers of one circle he wrote malnutrition and in other he wrote good nutrition, then he distributed one picture card to every mother. These cards were showing some practices like use of pesticides in agriculture, growing nutrition garden, linkage with ICDS services, food



diversity, restrictions on food intake during pregnancy. Delay in supplementary feeding, lack of forest uncultivated food, anemia. Some cards were indicating its positive effects and another were showing harmful effects. Mothers placed according to their cards and then facilitator teaches them that by adopting organic farming, nutrition garden, and regeneration of forests and utilization of Anganwadi services they can enter in circle of good nutrition.

- Anganwadi worker served porridge to children and facilitator discussed about- how to grow nutrition garden. The items we want to grow should be a combination of different types of vegetables i.e. green leafy, green fruity, bulbs and tubers.

#### Day fifth:

- On this day mothers played Snake ladder game on different topic – care of pregnant lady and safe delivery. The game was similar as played previously but the content and learning was different. The mothers learnt good effects of care of a pregnant lady on her and child also.
- Discussion were held on **Tiranga Bhojan**, in that facilitator listed out different food items and then divided in three groups according to their color. Food items of all groups cereals, pulses, vegetables, fruits, milk and milk products, animal protein, spices, sugar, oil and fats divided in three color group i.e. orange/yellow, white and green. All three colors are essential in daily diet to fulfill requirement of macro and micro nutrients in their food.



#### Day six:

- Mothers played Snake ladder game on Supplementary feeding. In this game they learnt that after six month of exclusive breast feeding child requires other nutritious food items for proper growth. After six month age child needs constructive and protective



food at small interval. They listed out some semisolid and easily digestible food items.

- Mothers done a brainstorming exercise that what should be given to a child during diarrhea.

#### Day seven:

- On seventh day facilitator and AWW took weight of all children and wrote in next column of first day's weight for comparison. They told increased weight in seven days. Every regular child gained 200 gm to 400 gm weight. Mothers of few children who were not coming regularly not found weight gain more than 100 gm. By this exercise mothers understood the importance of nutrition camp and supplementary feeding.
- On this day children ate sattv (prepared by wheat, gram, barley flour and jaggery) and banana.

#### Day eight:

- On eight day participants were more in number than other days. Because now every mother was wishing much improvement in her child's weight. AWW teach mothers of 6month to 3 year age children to see the current health status of her child in growth chart. By learning this mothers can monitor the health status of child up to 3 year age.
- Facilitator demonstrated a recipe of roasted gram, roasted peanuts and jaggery. He roasted gram and pea nuts and then grinds coarsely. He prepared jaggery syrup on stove and mix the content well and in semi solid stage he prepared balls of material with applying ghee on surface. Mothers liked this sweet very much as they can prepare it once in eight days and give to children between meals.



#### Day nine:

- Like second day on ninth day facilitator and AWW started discussion about Anganwadi services. He told



about six ICDS services and importance of these services for a child. Meanwhile facilitator provided fruits, peanuts and jaggery to children.

- Mothers learnt techniques of growth monitoring on growth chart. Facilitator describe that how mothers can monitor growth of their child.

#### Day ten:

- Snake ladder game – care of pregnant lady and safe delivery – this game is related to knowledge about care of a pregnant women and institutional delivery. if a pregnant woman gets good antenatal care and food in sufficient quality and quantity, her child will also grow in her womb and if pregnant woman will not get sufficient care and food, she will give birth to a low weight baby and she will become weak.
- Discussion were held on ***Tiranga Bhojan***, in that facilitator listed out different food items and then divided in three groups according to their color. Food items of all groups cereals, pulses, vegetables, fruits, milk and milk products, animal protein, spices, sugar, oil and fats divided in three color group i.e. orange/yellow, white and green. All three colors are essential in daily diet to fulfill requirement of macro and micro nutrients in their food.



#### Day eleven:

- Facilitator discussed about uncultivated and local fruits which are easily available and accessible to community. Uncultivated food items have much nutrition and develop immunity in body to fight from diseases. All mothers discussed and remind uncultivated food items in their area and listed them. Than facilitator explained the importance and requirement of that food for body. These items are rich source of micro nutrients.

#### Day twelve:

- Like day six mothers played Snake ladder game on infant care and supplementary feeding. They revised this game that after six month of exclusive breast feeding child requires other nutritious

food items for proper growth. After six month age child needs constructive and protective food at small interval.

- Facilitator demonstrated a recipe of roasted peanuts, ragi and jaggery. He roasts peanuts, Ragi and then grinds coarsely. He prepared jaggery syrup on stove and mix the content well and in semi solid stage he prepared balls of material with applying ghee on surface.

#### **Day thirteen:**

- Facilitator discussed about three types of food – energy, constructive and protective food and requirement of these types of food according to age. He told that food items rich in carbohydrates e.g. wheat, maize, rice are proficient energy source. Food items contains protein e.g. pulses and beans are known as constructive food and food items e.g. fruits, vegetables we know as protective food. At the different ages of life cycle we need all types of food but in different ratio. As during childhood we need much constructive and protective food because body requires elements which form bones, muscles and tissues and food which can protect body from environmental diseases. Like this elderly people need much energy food to fulfill their energy requirement per day.

#### **Day fourteen:**

- Anthropometric measurement and physical examination (PILCCOD) of all children has been done to know the progress in children health status.

#### **Day fifteen:**

- After anthropometric measurement on 14<sup>th</sup> day facilitator shared improvement (weight and other signs) of children with mothers. Mothers made some plans for further improvement and few mothers which were irregular during camp decided to attend next camp and meanwhile they will get benefit of Anganwadi services.

**Result of camps till 30<sup>th</sup> JULY, 2016:**



<b>Total villages</b>	<b>45</b>	
<b>Camps organized</b>	<b>24</b>	
<b>Children participate</b>	<b>400</b>	
<b>Children in good category</b>	<b>261</b>	<b>65.25%</b>
<b>Average category</b>	<b>59</b>	<b>14.75%</b>
<b>Poor category</b>	<b>80</b>	<b>20%</b>

400 children with their mothers benefited during nutrition camps. Among them at the ends of camps 65% children came up in good category so these children has high probability to restore their health. 15% children were in average category. Most of them were irregular during 15 days camp and in case of these children need is to enhance efforts towards mothers and sensitize to make regularize them for camp and ICDS services. 20% children came in poor category. Some of them were absent most of the time and others have some other illness i.e. frequent diarrhea, fever, cough etc. They need medical support with quality food.

#### IEC used during nutrition camps:







