



# FIGHT CORONA PROJECT – DISTRIBUTION OF RAW RATION IN VILLAGES OF SHAHAPUR

## EXECUTIVE SUMMARY

The pandemic is a humanitarian crisis which brought many negatives upon us, but its adverse impact was observed most among the marginalized and vulnerable population living in rural and tribal areas. Survival was the aim for all and with no means of livelihood, it became difficult for them to sustain themselves with the nationwide lockdown getting extended. There were so many who lost hope and returned back to their villages with no certainty of the future.

The nutritionally vulnerable groups that is children and women have been the worst and silent sufferers of the pandemic. As the earning member of the family was left with no livelihood, the problem of malnutrition only worsened in the country. According to a recent UNICEF report, India is likely to witness an increase in malnutrition by at least 10%, which means more than half a million children are likely to be suffering from malnutrition and its consequences. The pandemic has disrupted optimal care for children especially those dependent on government resources. There is an urgent need to address the nutrition needs of vulnerable children to ensure their health is not compromised by the pandemic and its fallout.

High rates of malnutrition are observed among children and women in rural and tribal areas. Thus, it is important to maximize maternal and child nutrition actions, strengthen and support food security, manage cases of acute malnutrition and accelerate micronutrient supplementation.

To mitigate the impact of the crises on the families in rural and tribal areas and to protect the nutrition needs of the children in particular, Population First with the support of Tech Mahindra Foundation provided raw ration to **201 children and their family members across 56 villages** in the predominantly tribal areas of **Dolkhamb and Takipathar in Shahapur**. While nutrition through Targeted Public Distribution System and Anganwadi centers was continued by the government which mostly took care of the macronutrients, it was essential to also provide some dietary diversity with micro-nutrients to the children and women so that their health status could be improved. This was done in convergence with the government and village level stakeholders in the month of November.

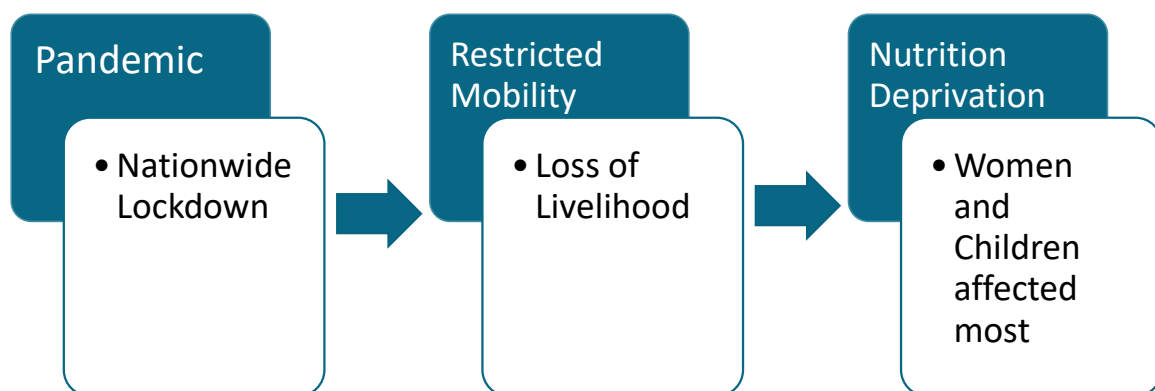
Although there are robust and effective schemes and programmes in place to address food insecurity and malnutrition, there needs to be a concerted and holistic approach to address the pressing problem of malnutrition. The rural and tribal families should be provided with livelihood alternatives to ensure sustained nutritional and economic security, as well as management of acute malnutrition should be a key priority to ensure the gains in reducing malnutrition are sustained.

## Background

Rural and tribal communities have been the worst hit in India due to the pandemic. They were at a heightened risk of being adversely affected, due to limited awareness regarding the disease, reverse migration, compromised nutrition levels and inadequate public health infrastructure. Loss of livelihood due to restricted mobility and lockdown has been one of the major socio-economic implications affecting them. The existing vulnerabilities in terms of economic and nutritional deprivation were exacerbated for them during the nationwide lockdown.

Access to essential nutrition was impacted for the marginalized population in the villages, particularly for women and children. As per the NFHS- 4 report, among tribal population, 27% children under five years are wasted (low weight for height), 45% are underweight (low weight for age) and 60% women in the age group of 15 – 49 years are anemic.

Although Maharashtra is one of the most developed states in India, it is home to some of the tribes with the least impressive development indices as compared to other populations. They have extremely low levels of literacy and depend on subsistence economy. Shahapur block in Thane district comprises 35% tribal population where 60% population are Thakurs, 35% are Katkari and 5% are Warli communities.



Population First (PF) has been working on addressing social development issues through community mobilization for more than a decade in Shahapur. The focus has been on maternal and child health, addressing malnutrition, adolescent reproductive and sexual health, hygiene and sanitation practices and livelihood initiatives.

Considering the increasing vulnerability of some of the marginalized groups particularly women and children with limited alternatives to access essential nutrition, it became critical to plan initiatives that would help provide nutrition to them with the support of stakeholders at the village and block level. While the government is trying its best to fulfill the nutritional requirements through Public Distribution System (PDS) and Anganwadi centers by providing ration to the registered beneficiaries, some additional efforts were required to ensure all the essential macro and micro-nutrients are accessible to the nutritionally vulnerable groups.

We are aware that COVID – 19 has overwhelmed the health and food systems and it underscores the need to support the government and provide help in every way possible to ensure the overall health and well-being of the vulnerable communities. The threat of food security for the most marginalized populations primarily women and children will negatively impact all the work done during these past years to improve the health of women and children.



Thus, looking at the larger picture, Population First with the support of Tech Mahindra Foundation provided raw ration to **200 acutely malnourished children registered with Anganwadis** and their families across 56 villages of Shahapur in the month of November 2020. Population First was provided with a grant of Rs 5 lakhs to implement the project.

## Purpose of the Project

Population First through the Fight Corona project intended to provide *supplementary nutrition to 200 acutely malnourished children registered under the Integrated Child Development Services from 52 villages Dolkhamb and Takipathar areas in Shahapur as per the proposal submitted to TMF*. The villages under these PHC's are predominantly tribal with limited livelihood alternatives and a high incidence of malnutrition.

It also aims *to provide nutritional diversity in addition to the existing ration provided through government schemes to vulnerable groups such as children and their family members*.

## Outreach

There were 201 acutely malnourished children registered under the ICDS scheme and their family members across 56 villages of Dolkhamb and Takipathar areas of Shahapur who were provided with raw ration. A total of 1042 beneficiaries were reached out to through the project.

## Activity Report

Population First with the help of ICDS and other village level stakeholders distributed raw ration to 201 acutely malnourished children across 56 villages of Dolkhamb and Takipathar areas of Shahapur in November 2020. The details of the activities that led to the successful implementation of the project are as follows;

### 1. Identification of beneficiaries for distribution



*Image 1: Distribution of raw ration in one of the villages in Dolkhamb*

With the help of data from village Anganwadis and based on the discussion with Child Development Project Officer from ICDS, the list of villages with most vulnerable population were identified and the line-list of severe acute and moderate acute malnourished children was prepared. The Anganwadi workers and village level stakeholders were informed of the purpose of the project

and their support was sought to streamline the distribution since there were several villages that needed to be covered. A proper distribution plan was developed with their help and with PF staff's inputs to ensure seamless distribution of ration.

## 2. Choosing & Purchase of the ingredients



*Image 2: Packets of raw ration transported for distribution*

It was identified that food provided by the government through PDS majorly addressed the macronutrient requirements of the beneficiary. Similarly, while the government schemes –Take Home Ration and Amrut Aahar Yojana are providing raw rations for the malnourished children, pregnant and lactating women at home due to the pandemic lockdown, these are being utilized by everyone in the family. Thus, eventually impacting the nutrition status of the targeted beneficiaries.

It is also imperative to understand that the pandemic has also largely impacted the food security of the entire family as a unit, especially of malnourished children. Compromised food security in the family will also in the long run negatively impact the food and nutrition security of the malnourished children. Therefore, the items and quantities chosen were to satisfy the nutritional requirements of the malnourished children, family members and supplement it the existing major nutrients essential in the daily diet.

As a result, a total of 10 food items were selected for distribution and the list of items that were distributed and their quantities are as follows;

Sr No	Name of the food item/Ingredient	Quantity per family
1	Ragi/Naachni	10kgs
2	Jaggery/Gul	2 kgs
3	Coconut	2kgs
4	Peanuts	2kgs
5	Desi Chana/Kala Chana	2kgs
6	Matki/Moth Beans	2kgs
7	Tur Dal	2kgs
8	Potatoes	10 kgs
9	Rajgira Chikki	2 packets
10	Dates	Half Kg

The above food items were chosen keeping in mind the cultural context and the food habits of the beneficiaries. It was necessary to include items with more proteins, vitamins and other micronutrients like iron and calcium which is absolutely essential to combat malnutrition.

A proper vendor selection process was adopted to select the vendor by Population First and separate packets for each family was prepared by the finalized vendor.



*Image 3: Raw Ration packets being managed for delivery*



### 3. Distribution of Raw Ration



*Image 4: Distribution of raw ration in a village in Takipathar*

With meticulous planning with the government (ICDS Functionaries) and village level stakeholders, it was possible to arrange for distribution of raw ration among 201 acute malnourished children and their family members across 56 villages of Dolkhamb and Takipathar areas.

The distribution took place in two phases. The aim of distributing it twice was to ensure judicious use of the ration and monitoring the consumption by the nutritionally vulnerable groups in the family while distributing ration in the second phase. In Phase 1, half of the ration was distributed in the second week of November while the other half was distributed in the first week of December.

While distributing, the beneficiary details were recorded and their signatures were taken once they were provided with the ration. Also, our staff took out some time to counsel them on the importance of dietary diversity, its importance for child health and well-being and offered some tips on recipes that can be prepared with the items provided.

*"This is the first time that raw ration distribution other than that by government is being done in our village and that too for children. It was a much-needed step and I am sure this ration will help the children of the village."*

- Karuna Ramchandra Chaudhari, Parent in Village Gunde

## Future Course of Action

PF has implemented the project with the support of government and village level stakeholders. Although the aim was to fulfil the nutritional requirements on a temporary basis as acute malnourished children are more at risk of infection due to compromised immunity, it was also to ensure the entire family could sustain themselves during these testing times.

As PF has worked in more than 90% of the villages through past projects and interactions and understands the complexities and the vulnerabilities in these villages, it was easier to ensure smooth implementation of the project. Although it won't be possible for PF to monitor the outcomes of the project through personal visits post the second phase of distribution, PF would be in constant touch remotely with the government authorities as well as the beneficiaries to understand and get feedback on the project.

Nutritional and economic security can be sustained if the villagers are provided with livelihood alternatives which are agriculture or forest based such as poultry farming that are low cost and feasible to implement and maintain. It would also be of paramount importance to ensure continuation of nutrition and health services for women and children who are directly impacted by the pandemic which would help the community overall to manage the impact of the crisis today as well as in the future.

*“In the wadis of Nadgaon and Dongriwadi, the pandemic has really affected children’s weight as there are no other means of nutrition other than that provided by the government. As the ration is being provided just before the auspicious occasion of Diwali, I am sure it will be of help for the child as well as for the family.”*

- Ms Raut, ICDS Supervisor







\*\*\*END\*\*\*