



Training Module on Food, Nutrition, Health & WASH



NRLM Resource Cell

National Institute of Rural Development & Panchayati Raj

(Ministry of Rural Development, Govt. of India)

Rajendranagar, Hyderabad – 500 030



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सचिव, भारत सरकार
पंचायती राज मंत्रालय एवं
महानिदेशक

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Foreword

National Rural Livelihoods Mission (NRLM) is a unique attempt to empower the poor, building their capacities and augment their capitals - **SOCIAL, HUMAN, FINANCIAL, PHYSICAL, ENVIRONMENTAL, POLITICAL and CIVIC**. It is probably the only scheme where the people for whom the scheme is meant are in the central place and they decide their priorities. Of course, support is provided from outside but only in tune with people's priorities and needs.

This approach to development provides opportunities to leverage the strengths of the community through a process of demand creation to access the benefits of critical human development initiatives of the Government. Experience from the SHG movement across India shows that with adequate sensitization and motivation, the women's groups can play important roles for ensuring food and nutrition security and enhancing health outcomes. Particularly relevant is the capacity to bring about behaviour change so critical for accepting sanitation which is more acquisition of a habit than an asset. With proper training, the SHG network can be the engine for achieving sustainable progress in sanitation.

Thus, the training module of Food, Nutrition, Health and WASH has huge potential for actual, visible and verifiable results. Its real benefit, of course would depend on its contextualization and sensitive use to improve knowledge, augment skills and more importantly transform attitudes.

(S. M. Vijayanand)



K. P. Rao
Director, NRLM (RC)

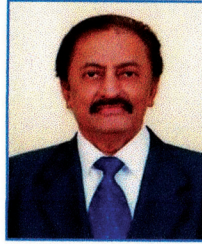
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Acknowledgements

NRLM Resource Cell at NIRD&PR, Hyderabad has its mandate to train and develop a few thousands of rural development professionals across the country on various thematic areas viz., IB CB, SHG, VO, cluster, Block and District Federation Concepts, Financial Literacy and Inclusion, Bank linkage, Livelihoods, PIP process, Book keeping Gender, Food Nutrition Health and WASH, Elderly, PVTGs, Disability, and Convergence.

To improve the skills, Knowledge and attitude of the RD functionaries for better implementation of NRLM objectives and to enhance managerial capacities. NRLM (RC), Hyderabad developed training Manual on Health, Nutrition and WASH which ensures a great help to all the SRLMs, ToTs for conducting training programs on Food Nutrition Health and WASH at various levels.

I am very much thankful to Respected Shri S. M. Vijayanand, IAS, Secretary Ministry of Panchayati Raj, GoI and Director General, NIRD&PR and Shri. Atal Dulloo, IAS, Joint Secretary & Mission Director, Ministry of Rural Development, GoI; Shri. Dr. Isha Prasad Bhagat LEAD, Health & Nutrition, NRLM, MoRD, Ms. Poonam Kumari, PE, NMMU, NRLM for their support and advice from time-to-time in preparation of the training manual.

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I appreciate the excellent work done by all NRLM (RC) team members of NIRD&PR viz., Smt. K. Surekha, Ms. Dibya Prasad Singh, Mission Managers, Ms. A. Suneetha, Mission Executive and Ms. N. Pallavi, Project Assistant for their hard work, sincere efforts made for developing this Training Manual on Food Nutrition Health and WASH.


(K. P. Rao)

Utility Note

Introduction:

The Government of India (GoI) established the National Rural Livelihoods Mission (NRLM) in June 2010 to implement the new strategy of poverty alleviation woven around community based institutions, which is renamed as “Aajeevika”. The programme was formally launched on 3rd June, 2011 at Banswada, Rajasthan and is being implemented in a mission mode across the country.

Core belief:

The core belief of National Rural Livelihoods Mission (NRLM) is that the poor have **innate capabilities and a strong desire to come out of poverty**. The challenge is to unleash their capabilities to generate meaningful livelihoods and enable them to come out of poverty. NRLM focuses on universal inclusion of the poor, prioritizing the poorest of the poor, identified through participatory processes and converted into institutions of the poor that are supported to leverage formal credit and access services and benefits meant for the poor, as well as develop innovative community led interventions leading to sustainable livelihoods and improved quality of life.

Mission:

The mission of NRLM is “to reduce poverty by enabling the poor households to access gainful self-employment and skilled wage employment opportunities, resulting in appreciable increase in their incomes, on a sustainable basis through building strong grassroots institutions of the poor. These institutions enable and empower the poor households to build-up their human, social, financial and other resources, solidarity, voice and bargaining power. They, in turn, enable them to access their rights, entitlements and opportunities.”

NRLM Values:

The following core values shall guide all the activities under NRLM:

- strong belief in the capacities and skills of the poor;
- providing a meaningful role for the poor in all project processes – planning, implementation and monitoring;
- promotion of transparency and accountability in CBOs; and
- Reducing their dependence on external support agencies.

Guiding Principles:

The following principles inform all the activities of the Mission:

- poor have a strong desire to come out of poverty, and have innate capabilities to realize the same;
- social mobilization and building strong institutions of the poor are critical for unleashing the innate capabilities of the poor; and
- A dedicated and sensitive support mechanism is required to induce the social mobilization, institution building and the empowerment process and facilitating knowledge dissemination, skill building, access to credit, access to marketing and access to other livelihoods services would facilitate the upward mobility of the poor.

About the Hand book on Food, Nutrition, Health and WASH Module outlines:

The hand book on Food, Nutrition, Health and WASH module outlines are prepared with the objective to create awareness about Nutrition, Health and Sanitation (FNHS) related issues, vulnerability of women & children. These out lines are prepared to provide training to Trainers (TOTs), Staff of SRLMs, Community Cadre, SHG Leaders, VO EC Members, Health Activist, SHG members, Youth & Men, other than SRLM staff, Adolescent girls and Social Action Committee (SAC). It basically aims at providing session plans along with the resource material for the same in order to help the trainers who will impart trainings to different other trainees. Besides, it aims at developing the comprehensive understanding among the trainers. It is to be noted that these are suggested module outlines which intends to help the trainers across the SRLMs.

Let us first focus on what needs to be done prior to imparting training to Staff. Firstly, it is expected that SRLMs should identify and create a pool of trainers at the state level who will undergo training on these different thematic and they will be called as Trainers of Trainers (ToTs). Secondly, SRLMs need to identify and build a cadre of trainers at district and block level. Thirdly, the trainers at SRLM will impart training to the identified district level trainers who will eventually become the part of trainer's fraternity and this process needs to be followed on a regular basis in order to meet the demand of Community Cadres and members of the Community institutions.

The training methodology in the programme shall be essentially participatory and interactive, combining various methods like – Interactive Lecture Method (ILM), Small, Focused and Large group discussions, brainstorming, experience sharing, group work, role

plays, flip charts, exercises, case studies, training films and most importantly field immersion to understand the various aspects of Gender followed by action plans.

Some Do's and Don'ts for Trainers:

The trainer team is expected to use this hand book as a ready reference base. The trainer team is expected to prepare their own power point presentations, flipcharts or collect other audio-visual support aids based on the content in each topic. Typically, at least one-third of the time should be devoted to question and answer and experience sharing sessions and this could be towards the end of a session. By and large, the trainer team is free to adopt any other methodology which he finds more suitable. The content delineated in each session, although, minor changes/innovations can be made, as per local needs/time-spills. The trainer team is expected to ensure gender-friendly behavior, seating arrangement and proactive encouragement to mainstream participation of the staff. Also, the trainer team is expected to exercise tactful handling of dominators - not allowing them to monopolize discussions and drawing in the shy and inhibited to participate with more ease and confidence.

Before every session, the trainer team is expected to keep all handouts to be distributed ready, along with all training media and material required for effective conduct of the session. During the session, the trainer team is expected to demonstrate good inter-team communication skills, by way of working in smooth coordination i.e. if one member is the key facilitator for a session, then other team members are facilitating the discussion and recording of emerging views. At no stage, they are to engage in conflict or contradictions of each other's views. After every session, the trainer/trainer team is expected to review the effectiveness of the session through quick on the spot feedback of the participants, both verbal and non-verbal, elicit views of the trainer team members on what worked well, what could be improved and what went wrong, which requires rectification in future.

The “mantra” for trainers for effective training is to know and prepare well for the subject/training to be delivered, facilitate learning through interactive processes, build confidence of participants through effective inter-personal communication and analyze the strengths and weaknesses of every session/training conducted for continuous striving for excellence.

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12 ways to stay Happy & Healthy



Banana
boosts serotonin



Spend time
in nature



Leafy Greens
boost Energy



Walnuts - Omega 3
brain nutrients



Smiling releases
happy hormones



Epsom Salt
Calming



Oats
Eases Depression



Cayenne Peppers
Relieves Depression



Water Hydration
More Energy less stress



Green Smoothie
Energy boost, zap!



Almonds
Brain Food-Magnesium



Walking- clears mind
boosts serotonin

VIA BAJIROO.COM

An apple
a day
=
no doctor



1 Lemon
a day
=
no fat



3ltrs of
water
per day
=
no diseases



Tulsi Leaf
a day
=
no cancer



1 cup milk
a day
=
no bone
problem



Training Module on Food, Nutrition, Health & WASH

Objectives of the Training:

1. To create awareness about Nutrition, Health and Sanitation (FNHS) related issues, vulnerability of women and children.
2. To sensitize the stake holders on Nutrition, Health and Sanitation (FNHS) issues
3. To create awareness on government service, facilities and schemes related to women and child health.
4. To help in facilitation of Health Action through Social Action/Health action Committees to address the Nutrition, Health and Sanitation (FNHS) issues.

Capacity Building (CB) Modules on Food, Nutrition, Health and Sanitation (FNHS) Interventions are needed for:

- A. ToT for Trainers.
- B. Staff of State Rural Livelihood Mission (SRLM),
- C. Members of the Social Action Committees / Health Sub Committees
- D. Health Activist / ASHA worker
- E. SHG Leaders & Members
- F. Adolescent girls
- G. Youth & Men

These are indicative modules. The State / Trainers may customize according to the need and local situation.

A. (i) Training Module on FNH & WASH Sensitization for Trainers (TOTs)

S No	Topic	Content	Duration
PHASE I for 5 Days			
	Introduction	<ul style="list-style-type: none"> • Introduction • Objectives of the training 	30 mins
1	Generic orientation on Participatory Training Methodologies	<ul style="list-style-type: none"> • Adult Learning Principals • Communication skills • Facilitation skills • Training methods 	1 day (6 hrs)
2	FNHS – NRLM perspective	<ul style="list-style-type: none"> • About NRLM • Importance of FNHS aspect in NRLM • FNHS – Poverty – Vulnerability 	2 hrs
3	Current scenario of Human Development	<ul style="list-style-type: none"> • About Human Development • Indicators of Human Development • Current scenario based on HD indicators & Millennium Development Goals (MDGs) 	1 hr
4	Understanding on the importance of FNHS Interventions	<ul style="list-style-type: none"> • Vicious Cycle of Poverty • FNHS Interventions and Poverty Reduction • Implementing the interventions 	2 hrs
5	Maternal and Child Health - 1000 days Window of Opportunity	<ul style="list-style-type: none"> • Ante Natal Care (ANC): <ul style="list-style-type: none"> – Last Menstrual Period (LMP) – Expected Delivery Date (EDD) – Early Registration – Identification of High Risk Pregnancy – Birth Planning & Safe delivery • Post Natal Care (PNC): <ul style="list-style-type: none"> – Home visits – Personal Hygiene – Balanced Diet – Spacing – Need & Methods • Infant & Young Child Feeding Practices (IYCF): <ul style="list-style-type: none"> – Importance of Cholestrum feeding – Exclusive Breast Feeding – Supplementary Feeding – Mile Stones 	1 day (7 hrs)
6	Basic Development Milestones	<ul style="list-style-type: none"> • Observation on basic development milestones & Growth Monitoring Parameters 	1 hr
7	Immunisation	<ul style="list-style-type: none"> • Need and importance of Immunization • Immunization schedule • Mission Indradhanush 	2 hrs
8	Maternal and Child Nutrition	<ul style="list-style-type: none"> • About Nutritious food • Preventing nutritional deficiencies • Effects of malnutrition 	4 hrs

S No	Topic	Content	Duration
		<ul style="list-style-type: none"> • ICMR standards of Dietary Indicators • Food Entitlements: <ul style="list-style-type: none"> – PDS – Anthyodaya – Mid Day Meal – Anganwadi Centres • Role of VO's in monitoring 	
9	Anaemia	<ul style="list-style-type: none"> • About Anaemia • Symptoms & Consequences of Anaemia • Status of Anaemia cases in the country • Preventive Interventions: <ul style="list-style-type: none"> – Dietary intake – De-worming – IFA supplementary – Promoting backyard & community kitchen garden. 	3 hrs
10	Common Illnesses in Women and Children	<ul style="list-style-type: none"> • Diarrhea • Acute Respiratory Infections • Tuberculosis • Malaria • Pelvic Inflammatory Diseases • Gastro Entireties, Skin ailments 	2 hrs
11	Sanitation	<ul style="list-style-type: none"> • About Total sanitation • Swacch Bharath • Linkage between Sanitation, Nutrition & Health • Hazardous practice of Open Defecation • Diarrhea & Oral Rehydration Syrup • Personal Hygiene – Hand wash • Safe drinking water 	4 hrs
12	Menstrual Hygiene Management	<ul style="list-style-type: none"> • Gender Vs Sex • Physical differences between male & female • About Menstruation • Local practices of using sanitary napkins • Preparation and use of Sanitary napkins • Safe disposal of sanitary napkins – Do's & Dont's 	2 hrs
13	Health Insurance and the Health Risk Fund	<ul style="list-style-type: none"> • Need for Health Insurance • Health savings • Use of Health Risk Fund (HRF) / Vulnerability Reduction Fund (VRF) • Health, Life and Accident Insurance 	2 hrs
14	FNHS Implementation Strategy	<ul style="list-style-type: none"> • Through Health committee • Health activist • Social Action Committees / Health Committees 	2 hrs

S No	Topic	Content	Duration
		<ul style="list-style-type: none"> • Convergence • Monitoring by VO's using community monitoring tool 	
15	Behavioral Change Communication (BCC)	<ul style="list-style-type: none"> • Brining behavioral change among school children, mothers, adolescent girls and boys on <ul style="list-style-type: none"> - Maternal and Child Health and Nutrition - Food Security; Sanitation, Common Illnesses - Financing Medical Care 	4 hrs
16	Action Plan before Phase 2 training	<ul style="list-style-type: none"> • Discussion on training modules of – SRLM Staff, members of SAC / HSC, Health Activist / ASHA worker, SHG leaders & members, Youth & Men and Adolescent Girls. • Identification & formation of Health Sub committees & health personnel in the field. • Preparation of action plan by the trainees on Trainings to be conducted by them. 	6 hrs (1 day)

A. (ii) Training Module on FNH & WASH based Social Action for Trainers (TOTs)

S No	Topic	Content	Duration
PHASE II for 2 Days 6 months later to Phase 1 training			
1	Experience sharing from previous phase	<ul style="list-style-type: none"> Recall of earlier training and follow up on experience & action plan 	4 hrs
2	Committees & Health personnel	<ul style="list-style-type: none"> Need for Committees & Health personnel Roles & Responsibilities Field level implementation Support & monitoring 	3 hrs
3	Village Health & Nutrition Day (VHND)	<ul style="list-style-type: none"> Importance of VHN Day Mobilizing Women for the VHND Services offered by a VHND Health and Nutrition Entitlements Health Education & its importance 	3 hrs
4	Anaemia	<ul style="list-style-type: none"> Conducting screening camps De-worming & Iron supplementation Promoting backyard & community kitchen garden 	2 hrs
5	Hygiene and Sanitation	<ul style="list-style-type: none"> Personal Hygiene; hand wash Construction and Use of Toilets Safe drinking water 	4 hrs
6	Growth monitoring	<ul style="list-style-type: none"> Monthly growth monitoring of children Identification of malnourished children Providing double rationing Follow ups. 	2 hrs
7	Nutri products, Hygiene products, Hygiene services	<ul style="list-style-type: none"> Linking livelihoods with health and sanitation 	1 hr
8	Convergence	<ul style="list-style-type: none"> Line Departments <ul style="list-style-type: none"> Health Department Women & Child Department Civil Supplies Department Rural Water & Sanitation Department Anganwadi & ASHA Worker Primary Health Centre Panchayati Raj Institutions Schools Agriculture and Horticulture departments Other NGOs 	2 hrs
9	Action Plan	<ul style="list-style-type: none"> Preparation of action plan by the trainees on Trainings to be conducted by them. 	2 hrs

B. Training Module on FNH & WASH Sensitization and Social Action for Staff of SRLMs

S No	Topic	Content	Duration
PHASE I for 5 Days			
	Introduction	<ul style="list-style-type: none"> • Introduction • Objectives of the training 	30 mins
1	FNHS – NRLM perspective	<ul style="list-style-type: none"> • About NRLM • Importance of FNHS aspect in NRLM • FNHS – Poverty – Vulnerability 	2 hrs
2	Current scenario of Human Development	<ul style="list-style-type: none"> • About Human Development • Indicators of Human Development • Current scenario based on HD indicators & Millennium Development Goals (MDGs) 	1 hr
3	Understanding on the importance of FNHS Interventions	<ul style="list-style-type: none"> • Vicious Cycle of Poverty • FNHS Interventions and Poverty Reduction • Implementing the interventions 	2 hrs
4	Maternal and Child Health - 1000 days Window of Opportunity	<ul style="list-style-type: none"> • Ante Natal Care (ANC): <ul style="list-style-type: none"> – Last Menstrual Period (LMP) – Expected Delivery Date (EDD) – Early Registration – Identification of High Risk Pregnancy – Birth Planning & Safe delivery • Post Natal Care (PNC): <ul style="list-style-type: none"> – Home visits – Personal Hygiene – Balanced Diet – Spacing – Need & Methods • Infant & Young Child Feeding Practices (IYCF): <ul style="list-style-type: none"> – Importance of Cholestrum feeding – Exclusive Breast Feeding – Supplementary Feeding – Mile Stones & Growth Monitoring Parameters 	1 day (6 hrs)
5	Basic Development Milestones	<ul style="list-style-type: none"> • Observation of basic development milestones 	1 hr
6	Immunisation	<ul style="list-style-type: none"> • Need and importance of Immunisation • Immunisation schedule • Mission Indradhanush 	2 hrs
7	Maternal and Child Nutrition	<ul style="list-style-type: none"> • About Nutritious food • Preventing nutritional deficiencies • Effects of malnutrition • ICMR standards of Dietary Indicators • Food Entitlements: 	4 hrs

S No	Topic	Content	Duration
		<ul style="list-style-type: none"> – PDS – Anthyodaya – Mid Day Meal – Anganwadi Centres • Role of VO's in monitoring 	
8	Anaemia	<ul style="list-style-type: none"> • About Anaemia • Symptoms & Consequences of Anaemia • Status of Anaemia cases in the country • Preventive Interventions: <ul style="list-style-type: none"> – Dietary intake – De-worming – IFA supplementary – Promoting backyard & community kitchen garden. 	3 hrs
9	Common Illnesses of Women and Children	<ul style="list-style-type: none"> • Diarrhea • Acute Respiratory Infections • Tuberculosis • Malaria • Pelvic Inflammatory Diseases • Gastro Entireties, Skin ailments 	2 hrs
10	Sanitation	<ul style="list-style-type: none"> • About Total sanitation • Linkage between Sanitation, Nutrition & Health • Hazardous practice of Open Defecation • Diarrhea & ORS • Personal Hygiene – Hand wash • Safe drinking water • Sanitizing water bodies 	4 hrs
11	Menstrual Hygiene Management	<ul style="list-style-type: none"> • Gender Vs Sex • Physical differences between male & female • About Menstruation • Local practices of using sanitary napkins • Preparation and use of Sanitary napkins • Safe disposal of sanitary napkins – Do's & Dont's 	2 hrs
12	Health Insurance and the Health Risk Fund	<ul style="list-style-type: none"> • Need for Health Insurance • Health savings • Use of Health Risk Fund (HRF) / Vulnerability Reduction Fund (VRF) • Health, Life and Accident Insurance 	2 hrs
13	FNHS Implementation Strategy	<ul style="list-style-type: none"> • Through Health committee • Health activist • Social Action Committees / Health Committees • Convergence 	2 hrs

S No	Topic	Content	Duration
		<ul style="list-style-type: none"> Monitoring by VO's using community monitoring tool 	
14	Behavioral Change Communication (BCC)	<ul style="list-style-type: none"> Brining behavioral change among school children, mothers, adolescent girls and boys on <ul style="list-style-type: none"> Maternal and Child Health and Nutrition Food Security; Sanitation, Common Illnesses Financing Medical Care 	4 hrs
15	Support to the CBOs and Staff	<ul style="list-style-type: none"> Hand Holding Support for VO's / SAC Members, Administrative issues 	4 hrs
16	Action Plan	<ul style="list-style-type: none"> Preparation of action plan by the trainees on Trainings to be conducted by them. 	2 hrs

C. Training Module on FNH & WASH Sensitization for Members of Social Action Committee / Health Sub Committee

S No	Topic	Content	Duration
PHASE 1 for 4 Days			
1	The Importance of Health and Nutrition	<ul style="list-style-type: none"> • Linkages with Poverty • Good health increases productivity and reduces medical expenditure 	1 hr
2	The 1000 Day Window of Opportunity	<ul style="list-style-type: none"> • Generating awareness of the 1000 Day Window of Opportunity • Registration of pregnant women and ante natal care • Birth planning and neonatal care • Post Natal Care • Exclusive Breast Feeding • Supplementary Feeding • Immunization 	4 hrs
3	Village Health and Nutrition Day (VHND)	<ul style="list-style-type: none"> • Services offered during a VHND • Mobilizing Women for the VHND • Health and Nutrition Entitlements 	3 hrs
4	Health Sub Committee / Social Action Committee	<ul style="list-style-type: none"> • How to use BCC Materials • Communication Techniques • Role of SAC / HSC • Working with VO and SHGs • Filling up the MIS • Reporting the work done 	4 hrs
PHASE 2 for 3 Days, 3 months later to Phase 1 training			
5	Sharing of experiences	<ul style="list-style-type: none"> • Experience of 3 months' work in the field 	1 hr
6	Personal Hygiene and Sanitation	<ul style="list-style-type: none"> • Importance of personal hygiene and sanitation • Construction of toilets • Composting • Menstrual hygiene 	3 hrs
7	Visit to a Rural Sanitary Mart	<ul style="list-style-type: none"> • Exposure to sanitation and hygiene practices • Services offered by a Sanitary Mart • Sanitation entitlements 	6 hrs
PHASE 3 for 2 Days, 3 months later to Phase 2 training			
8	Recap of previous training	<ul style="list-style-type: none"> • Sharing of experiences of work done on Phase I & II trainings 	2 hrs
9	Working on Food and Nutrition	<ul style="list-style-type: none"> • Food and Nutrition Entitlements • Preventing nutritional deficiencies • Effects of malnutrition • Services of Anganwadi center 	4 hrs

S No	Topic	Content	Duration
10	Field Visit to Demonstration Sites	<ul style="list-style-type: none"> Generating awareness on Nutrition Kitchen Gardens 	6 hrs
PHASE 4 for 2 Days, 3 months later to Phase 3 training			
11	Sharing of experience	<ul style="list-style-type: none"> Sharing of experience of work in the field 	2 hrs
12	Financing Medical Care	<ul style="list-style-type: none"> Health Insurance Schemes Use of Health Risk Fund 	2 hrs
13	Other common diseases	<ul style="list-style-type: none"> Prevention and management of TB, Malaria, ARI, Diarrhea, Anemia etc 	3 hrs
14	PHC & Herbal Medicines for common diseases	<ul style="list-style-type: none"> Services offered by ANM & PHC <ul style="list-style-type: none"> - Training of traditional birth attendant - Training to women on primary health care - Diarrhea management, First Aid to Insect and snake bite - Management of common ailments at house hold level - Promoting savings for health - Identification of local practices, herbal remedies, promotion of community herbal garden 	6 hrs
15	Action Plan	<ul style="list-style-type: none"> Preparation of action plan by the trainees 	3 hrs

D. Training Module on FNH & WASH Sensitization for Health Activist / ASHA Workers

S No	Topic	Content	Duration
1	Importance of Health and Nutrition	<ul style="list-style-type: none"> • Linkages with Poverty • Poverty – Causes & Effects • Poverty – Health, Nutrition deficits • Vicious cycle of poverty • Intergenerational reproduction of morbidity • About good health • Physical and mental fitness, • enthusiasm and productivity leading to well being 	6 hrs
2	The 1000 Day Window of Opportunity	<ul style="list-style-type: none"> • Generating awareness of the 1000 Day Window of Opportunity • Age at marriage • Diagnosis of pregnancy and high risk cases • Ante natal care • Preparing for delivery and safe delivery mechanism • Neonatal care • Post Natal Care • Exclusive Breast Feeding • Supplementary Feeding • Immunization • Growth monitoring 	5 hrs
3	Village Health and Nutrition Day (VHND)	<ul style="list-style-type: none"> • Mobilizing Women for the VHND • Services offered by a VHND • Health and Nutrition Entitlements • Roles and responsibilities of health activist • Services of 108/104 	2 hrs
4	Water, Hygiene & Sanitation	<ul style="list-style-type: none"> • Availability of potable water and water for daily use • Water Contamination, Fluorine, Salinity, Sewage and other infrastructural issues • Open Defecation, Public Toilets, Individual Sanitary Lavatories (ISLs) • Composting • Personal and Environmental hygiene • Menstrual hygiene 	5 hrs
5	Common Ailments	<ul style="list-style-type: none"> • Ailments of Women, Children, Elderly • Causes 	2 hrs
6	Communication & Facilitation Skills	<ul style="list-style-type: none"> • Communication & Facilitation Skills – Practice 	1 Day
Field visit to understand existing health, nutrition, water & sanitation situations from the field.			
7	Presentation and Discussions		1 day

S No	Topic	Content	Duration
8	Working on food and Nutrition	<ul style="list-style-type: none"> • Food and Nutrition Entitlements • Preventing nutrient deficiencies • Reviving Traditional Crops, Millets & Herbal Plants • Nutritional & Medicinal Values 	1 day
9	Field Visit to Demonstration Sites		1 Day
10	Sharing Experiences and Discussions	<ul style="list-style-type: none"> • Sharing the experiences • Factors affecting the productivity <ul style="list-style-type: none"> – Nature of the soil – Soil fertility – Ground water – Climate – Production practices – Seed & Other technology – NPM • Kitchen gardens – Models, types, economies • bottlenecks, Constraints and Gaps 	1 Day
11	Improving Health Care System	<ul style="list-style-type: none"> • Prevention & management of TB, Malaria, Pelvic Inflammatory diseases etc, • ANMs, PHC, Area Hospitals • Insurance Schemes & Health Risk Funds • Alternative Medicines & Herbal Solutions 	1 day
12	Field Work - Attachment with Health Sub Committees (Water, sanitation, Hygiene + Factors affecting productivity, Traditional Crops & Millets)		
13	Discussion & Sharing of experiences from Field		1 day
14	Action Plan and relooking at roles and responsibilities of health activist		1 day

E. Training Module on FNH & WASH Sensitization for SHG Leaders & Members

S No	Topic	Content	Duration
PHASE 1 for 3 Days			
1	Understanding on Health and Nutrition	<ul style="list-style-type: none"> Importance of good health Health and Nutrition – related to poverty & vulnerability of women, children and old age Nutrition and its importance Balance diet – Diversification of food basket Malnutrition and positive deviation Diet during pregnancy – 1000 days window of opportunity 	3 hrs
2	Infant and Young Child Feeding practices (IYCF)	<ul style="list-style-type: none"> Cholostrum Feeding Importance of exclusive Breastfeeding for 6 months and feeding hygiene Supplementary food – preparation & hygiene 	2 hrs
3	Growth Monitoring	<ul style="list-style-type: none"> How to monitor growth – Growth Chart How to detect growth problems Most common diseases in children Diarrhea management Neighborhood health providers 	3 hrs
4	Role of SHG & members	<ul style="list-style-type: none"> Self assessment of FNHSW Discussing openly in SHG meeting Availing services 	2 hrs
PHASE 2 for 4 Days			
5	Health issues of adolescent girls	<ul style="list-style-type: none"> Physiological changes with Puberty Puberty, Menstrual & Sexual Hygiene Preparation of Sanitary napkins at home Reproductive Health-Right to Sexuality Sexually transmitted Diseases & Prevention 	2 hrs
6	Anaemia	<ul style="list-style-type: none"> About Anaemia Symptoms & Consequences of Anaemia Status of Anaemia cases in the country Preventive Interventions: <ul style="list-style-type: none"> Dietary intake De-worming IFA supplementary Promoting backyard & 	2 hrs

S No	Topic		Content	Duration
			community kitchen garden.	
7	Safe Pregnancy		<ul style="list-style-type: none"> • Female feticide - legal implications • Healthy pregnancy – Intake of Iron & Folic Acid & Zinc supplements • Importance of Immunization • Risk factors & Preventive measures 	2 hrs
8	Safe Delivery		<ul style="list-style-type: none"> • Birth Plan: Safe Delivery- Facility based /Home Delivery • Things to be kept ready for home delivery • Risk factors & Preventive measures • Family planning 	2 hrs
9	Vaccination/Immunization		<ul style="list-style-type: none"> • Vaccines to be given immediately after birth: Pentavac, Polio, Vit A, Hepatitis etc • Immunization Schedule • Vaccine preventable diseases 	2 hrs
10	Food Security & Nutrition – Initiatives		<ul style="list-style-type: none"> • Food supplements through AWC/ NDCC • Mid-day meal in schools Food security through PDS/Grain Banks and • Kitchen garden 	2 hrs
PHASE 3 for 3 Days				
11	Sanitation		<ul style="list-style-type: none"> • Total Sanitation Campaign (TSC) • Cleaning up drainages • Personal Hygiene – Hand wash, Cooking, Health • Open defecation and problems • Reason for non usage of toilets • School level toilets 	4 hrs
12	Strategies		<ul style="list-style-type: none"> • Implementation plan • Rules and regulations in implementation, • Institutional support, • Role of PRIs, • Role of NGOs 	3 hrs
13	Liquid and Solid waste management		<ul style="list-style-type: none"> • Domestic and commercial wastage • Current scenario of liquid and solid waste management • Bio degradable and non degradable waste disposal 	2 hrs
14	Good practices		<ul style="list-style-type: none"> • Say no to plastic • Reduce Re use Recycle 	1 hr

F. Training Module on FNH & WASH Sensitization for Adolescent Girls

S No	Topic	Content	Duration
PHASE 1 for 3 Days			
1	Understanding on Health and Nutrition	<ul style="list-style-type: none"> • Importance of good health • Health and Nutrition – related to poverty & vulnerability of women, children and old age • Nutrition and its importance • Balance diet – Diversification of food basket • Malnutrition and positive deviation • Diet during pregnancy – 1000 days window of opportunity 	3 hrs
2	Role of Adolescent groups	<ul style="list-style-type: none"> • Self assessment of FNHSW • Discussing openly in group meeting • Availing services 	2 hrs
3	Health issues of adolescent girls	<ul style="list-style-type: none"> • Physiological changes with Puberty • Puberty, Menstrual & Sexual Hygiene • Preparation of Sanitary napkins at home • Reproductive Health-Right to Sexuality • Sexually transmitted Diseases & Prevention 	2 hrs
4	Anaemia	<ul style="list-style-type: none"> • About Anaemia • Symptoms & Consequences of Anaemia • Status of Anaemia cases in the country • Preventive Interventions: <ul style="list-style-type: none"> – Dietary intake – De-worming – IFA supplementary – Promoting backyard & community kitchen garden. 	2 hrs
5	Food Security & Nutrition – Initiatives	<ul style="list-style-type: none"> • Mid-day meal in schools • Food security through PDS/Grain Banks • Promoting backyard Kitchen garden 	2 hrs
6	Sanitation	<ul style="list-style-type: none"> • Total Sanitation Campaign (TSC) • Cleaning up drainages • Personal Hygiene – Hand wash, Cooking, Health • Open defecation and problems • Reason for non usage of toilets • School level toilets 	4 hrs

G. Training Module on FNH & WASH Sensitization for Youth & Men

S No	Topic	Content	Duration
PHASE 1 for 3 Days			
1	Understanding on Health and Nutrition	<ul style="list-style-type: none"> Importance of good health Health and Nutrition – related to poverty & vulnerability of women, children and old age Nutrition and its importance Balance diet – Diversification of food basket Malnutrition and positive deviation 	3 hrs
2	Infant and Young Child Feeding practices (IYCF)	<ul style="list-style-type: none"> Colostrum Feeding Importance of exclusive Breastfeeding for 6 months and feeding hygiene Supplementary food – preparation & hygiene 	2 hrs
3	Growth Monitoring	<ul style="list-style-type: none"> How to monitor growth – Growth Chart How to detect growth problems Most common diseases in children Diarrhea management Neighborhood health providers 	3 hrs
4	Health issues during adolescent age	<ul style="list-style-type: none"> Gender Vs Sex Physical differences between male & female Physiological changes with Puberty Puberty, Menstrual & Sexual Hygiene Reproductive Health-Right to Sexuality Sexually transmitted Diseases & Prevention 	2 hrs
5	Anaemia	<ul style="list-style-type: none"> About Anaemia Symptoms & Consequences of Anaemia Status of Anaemia cases in the country Preventive Interventions: <ul style="list-style-type: none"> Dietary intake De-worming IFA supplementary Promoting backyard & community kitchen garden. 	2 hrs
6	Safe Pregnancy	<ul style="list-style-type: none"> Female foeticide - legal implications Healthy pregnancy – Intake of Iron & Folic Acid & Zinc supplements Importance of Immunization 	2 hrs

S No	Topic	Content	Duration
		<ul style="list-style-type: none"> • Risk factors & Preventive measures 	
7	Safe Delivery	<ul style="list-style-type: none"> • Birth Plan: Safe Delivery- Facility based /Home Delivery • Things to be kept ready for home delivery • Risk factors & Preventive measures • Family planning 	2 hrs
8	Vaccination/Immunization	<ul style="list-style-type: none"> • Vaccines to be given immediately after birth: Pentavac, Polio, Vit A, Hepatitis etc., • Immunization Schedule • Vaccine preventable diseases 	2 hrs
9	Food Security & Nutrition – Initiatives	<ul style="list-style-type: none"> • Food supplements through AWC/ NDCC • Mid-day meal in schools Food security through PDS/Grain Banks and • Kitchen garden 	2 hrs
10	Sanitation	<ul style="list-style-type: none"> • Total Sanitation Campaign (TSC) • Cleaning up drainages • Personal Hygiene – Hand wash, Cooking, Health • Open defecation and problems • Reason for non usage of toilets • School level toilets 	4 hrs
11	Strategies	<ul style="list-style-type: none"> • Implementation plan • Rules and regulations in implementation, • Institutional support, • Role of PRIs, • Role of NGOs 	3 hrs
12	Liquid and Solid waste management	<ul style="list-style-type: none"> • Domestic and commercial wastage • Current scenario of liquid and solid waste management • Bio degradable and non degradable waste disposal 	2 hrs
13	Best practices	<ul style="list-style-type: none"> • Say no to plastic • Reduce Re use Recycle 	1 hr



Suggested Reference Material

Health Films by Digital Green

- 1) Balanced Diet
- 2) Birth preparedness
- 3) Birth preparedness path
- 4) Complementary feeding for 6 – 12 months child
- 5) Family planning
- 6) How to prepare a balanced diet?
- 7) How to prevent diarrhea?
- 8) Immediate and exclusive breast feeding.
- 9) Importance of breast feeding
- 10) IAP Health phone nutrition education programme
- 11) Importance of immunization and mother - child protection
- 12) Kitchen garden
- 13) Malnutrition & Gender equality in India
- 14) Maternal danger signs
- 15) Nutritious food during pregnancy
- 16) Post natal care

Books:

- 1) UNICEF Infant and Young Child Feeding - Counseling cards for community workers
- 2) UNICEF facilitator guide – The Community, Infant & Young Child Feeding counseling package
- 3) Training of Trainers module – Women's Nutrition throughout the life cycle and in the context of HIV/AIDS.
- 4) Innovations in Development – Community run centers improve nutrition for women and children - The World Bank & SERP

MATERNAL AND CHILD CARE

11th Five Year plan aimed at reducing the Infant Mortality Rate (IMR) by 50% but could only achieve 25% reduction. Maternal and Perinatal conditions contribute to 14% of the total death cases. This infographic will throw light on why and how the 12th Five Year Plan proposes to improve healthcare conditions (preventive and curative) especially relating to maternal and child care.



HEALTH
SECTOR

1,207,840 deaths

9,00,769 deaths

6,75,576 deaths

3,25,554 still births

5,30,338 abortions

12th Five Year Plan Proposal

Janani Suraksha Yojna

Immunisation

Breast Feeding

Skilled Labour

Drugs and Health Insurance

Pre Term Birth Strategy

Oral Rehydration

Sex Ratio

ANTE-NATAL

The regular medical and nursing care recommended for women during pregnancy.

28.3 million
ANTE NATAL CHECKUPS
(ANC) REGISTERED

Haemoglobin < 11

20.8%

ANC checkups

70.7%

TT Booster

82%



1 out of 3 women register but don't get ANC checkup*

56.1%
pregnant women find ANC
checkup unnecessary

BIRTH

22.4%
Unreported
Live Births



77.6%
Reported
Live Births

Babies not breast fed
within 1 hour



Not weighed



Newborns visited



NEO-NATAL

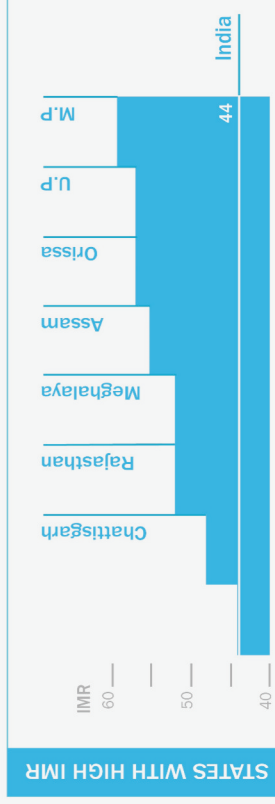
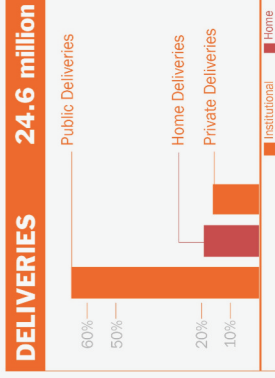
INFANT

CHILD

5 YEARS

1 YEAR

28 DAYS





ENSURE
ENVIRONMENTAL
SUSTAINABILITY

MILLENNIUM DEVELOPMENT GOALS

