

## **A Field Worker's Diary - Part 18**

As a part of the Andhra Pradesh Rural Poverty Reduction Programme (APRPRP), I spent some time working on a Health and Nutrition pilot programme as a coordinator in Guntur district. The pilot programme aimed to improve the nutritional status among pregnant and lactating women and bring down the mother and infant mortality rates in 2 mandals of the district.

Even before we took up the pilot programme, Anganwadis were already providing nutrition and supplements to pregnant and lactating women. However, the government had identified some key shortcomings in it. So, it decided to give the responsibility of the pilot programme to APRPRP as we were involved with implementing schemes through women Self Help Groups (SHGs).

An important aspect of this pilot programme was the creation of nutrition centres in selected villages and provision of a complete, nutritious lunch every day to pregnant and lactating women.

We had to accomplish many challenging tasks during the pilot, including setting up nutrition centres, identifying volunteers and providing training to them. But the most gruelling test of them all proved to be changing people's misconceptions about the quality of food being provided by the government and convincing pregnant and lactating women to come to the centre everyday to have their lunches. To facilitate this, we used to go around the women's houses and speak to their husbands and in-laws to make them agree to send them to the centres. Even after many appeals, some households remained adamant on not sending their woman-folk to the centres to eat. During these kinds of instances, we used to go to those houses just before lunchtime and bring the beneficiaries and their mother-in-laws to the centres and explained how the centres were being run and what sort of meals were being served - eggs, seasonal fruits, and leafy vegetable curries and other nutritious food; all served hot to maintain quality. The centres and the quality of food were regularly monitored by the women members of Mandal Samakhya (MS-the Block level federation of SHG).

As all the pregnant and lactating women were already coming to the centres everyday, we decided to do their health checkup once a month in the centres itself. Not just that, we also provided them training on various aspects, including nutrition, child care, family planning, importance of breastfeeding etc. Right from the time a woman became

pregnant, till 6 months after delivery, any woman could avail the services of the centres. We also used to take special care of anemic women.

Generally, it is customary for pregnant women to go to their maternal homes for delivery. But we requested the pregnant women under the centres to have their delivery in the same village. Or, at least to stay in the village as long as possible so that they can continue to receive the nutritious food and other services. Whenever we received news about a delivery in the village, we immediately rushed in to check how the mother and the baby were doing. I must say, it was truly satisfying and heartening to see a healthy, cherubic baby - our fruits of labour.

After running the project successfully for some time with the grant given by the project, we started focusing on how to run it sustainably in the future as the grant would be available only upto a certain time. So, we brainstormed with the MS and SHG members on the way forward. It was at this time that some members came up with the idea of starting a collective business by utilising some amount of the project's grant. Women in one of the centres started sewing together empty urea bags to make big mats and begin renting them out to farmers to dry chillies. We also started our kitchen garden at the centres and began growing leafy and other vegetables.

At that time, numerous Buddhist monks had come to Amaravathi to participate in a Kala Chakra program - the women from the centres made and rented out mats and carpets for them to sit. These women leaders, who were mostly illiterate, had shown how women could organise programmes in a planned manner if they were only given authority, resources and a little support.

I always wonder why this pilot programme, which had brought in so many positive outcomes in the selected villages, was never implemented as a full-fledged government scheme.

Superficially, we might proclaim ourselves as a country which gives the utmost respect to women, but deep down we know what sort of importance is given to women, their nutrition and their health on a household level in our country.

Anaemia, malnutrition are prevalent among millions of pregnant women in India, where every year over 7 lakh children die before they turn 5 due to malnutrition. In such a scenario, isn't this the sort of programme that should have been scaled up and implemented all across India?

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