

Najini Sheikh | Community Member

"Hi, I am Najini Nasir Sheikh. I have benefited greatly from the various activities that FMCH organizes. The field officers work effortlessly to support every member in the Community. What I personally like about the organisation is that they educate everyone in my family, including me. Because of this, we are able to take care of our children as well as of our own health better.

"During the lockdown also they provided us support through online mediums like whatsapp and telephonic calls. Their support during this difficult time made us feel very comfortable. They should continue their work in the future."

PHOTO TAKEN BEFORE THE PANDEMIC





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Cover illustration inspired by a Jamini Roy artwork

Theme for this annual report: R E S I L I E N C E

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CEO'S MESSAGE

In 2020, we impacted over 15,000 families, became a team of 65, were supported by over 10 long term-donors – all with one mission...

Dear Supporter,

We will all remember the last year as a trying period. We experienced loss, grief and helplessness personally and systemically. Health – mental and physical, our interactions with the world, everything "status quo" changed. What stays with me, amidst all this loss, is how communities came together. While everything else broke down, crowd-sourcing and resource sharing brought relief. And that is the start to rebuilding and reimagining a new future. A better, brighter one. At FMCH, this is the hope we carry as we reflect on 2020 – the year that tested our resilience.



In 2020, we impacted more than 15000 families, became a team of 65, were supported by over 10 long term donors – all with one mission, to bridge access and awareness gaps in maternal health



and nutrition services. One of the pieces we reflected most on in 2020 is not just what we do, but how we do it. As we put together a "Bold Vision" to scale, we asked ourselves: How might we reach a million (or more) families by 2025? About 90L children get added to the undernourished category each year – how can we act urgently, sustainably, systemically, at lowest cost? And how can we do so with kindness, purpose and more healing?

Three aspects of our work that make me believe that we can do this: the frontline workers (or Field Officers), our use of technology and data, and the team itself.

Our frontline workers have been most resilient in 2020. Identified from the areas that we aim to impact, our Field Officers have sometimes been through our programme before joining us full time as staff. They have a deep understanding of the community.

Over time as they engage with us, not only do they build nutritional knowledge and counselling skills, they also become leaders in their own way. This was demonstrated while distributing ration amidst the lockdown, adopting technology to ensure we continue our work, liaising with government officers to make the work systemic – and so on. The empowerment and energy of our Field Officers gives me the hope that each day we are getting closer to malnutrition free communities, sustainably.

The second piece of our work – the use of technology and

data has been highlight the of 2020. The NuTree App has become a catalyst in hands the of the Field Officer. This simple, powerful tool is being used counsel to and mothers to send reference

materials via WhatsApp and videos. The net effect of these low cost, and presumably small, thoughtful practices have been tremendous. The families we work with reported a 7-

percentage point drop in underweight pregnant women. Diet diversity of children increased by 20 percentage points! These behaviour change practices have led to a reduction of SAM and MAM by 23% and 44% respectively. All this in a pandemic year! An internal study showed us that children in our program have a 70% lesser chance of being malnourished compared to the Control Group. The use of technology and data have made our programmes more impact driven and scale-ready.

None of this would have been possible but for the team that shows up each day. Behind each of the 2D image on Zoom, there has been immense growth, hard work, dealing with uncertainty, trust and hope. And those who believed in us – the donors, our mentors, our supporters, our friends and family – each of who show up in their own way. We are so grateful to each

> of you. FMCH is built on this support and work!

We are far from done with the "build" phase. 2021 - 23 is an accelerated build phase where for us we will define. build and test our scale models. Growth and change is always filled with

adrenaline – and that's the energy we enter the next phase with. We are excited and anxious about this. As Margaret Mead said – Never doubt that a small group of thoughtful committed citizens can change the world: indeed, it's the only thing that ever has.

Thank you for being a part of our small group that wishes to change the world. We hope you continue to be with us as we build more equitable communities. One where maternal health and malnutrition are non-issues.

– SHRUTHI IYER





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Healthy mothers and thriving children for a world full of unlimited possibilies

₹.

Encouraging preventive health, balanced nutrition and child developmental practices in underprivileged communities by adopting the holisitic approach of embracing, educating and empowering mothers and children in their social environment.





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PHOTO TAKEN BEFORE THE PANDEMIC

Rukkaiya Sayyad AWW Teacher

"FMCH helps our Anganwadi work smoothly. They provide information about baby food, nutrition, timelines, costeffectiveness, etc. They also help with child growth monitoring which helps our Anganwadi children grow healthy with the right height and weight." ₹.

2020-21: the year that was

We may not be born with resilience, but it is built over time as the experiences we have, interact with our unique, individual genetic makeup. That's why we all respond differently to stress and adversity, like the COVID-19 pandemic.

At FMCH, during the pandemic, we leveraged the spirit of teamwork to grow with resilience. Initially, working virtually, our team and beneficiaries faced problems such as connectivity issues, lack of access to smartphones and difficulty in using video calling applications. But we continued staying in touch with mothers regularly.

We also did a needs assessment with the mothers, where data about their mental and physical health was obtained by conducting telephonic interviews. We hosted fundraisers and distributed ration and hygiene kits among our community members.

Our staff continued to educate mothers through phone calls. We

formed several W h a t s A p p groups for p r e g n a n t and lactating m o t h e r s and mothers of children between the aged 7-24 months. If they had any questions, the information was provided in the group. These groups were a complete success, with information reaching people through videos and IEC materials as well.

Our team and field officers missed meeting in person, but we understood how grim and uncertain the situation was. We allowed ourselves to slow down and develop a greater sense of empathy or ourselves and others. Social connectedness ensured that none of our team and community members were alone in spirit. As the cases started going down, we resumed operations with full precautions and safety protocols.

Our field officers were instrumental in making the mothers feel at home through it all. At the same time, our NuTree App, launched in June 2020, added a layer of support for the field worker.

As the world continues to venture into uncharted waters, at FMCH, we have learnt the importance of collective

resilience which has helped us come out stronger in trying times in the last one year. And we will keep fighting the good fight.

MALNUTRITION AND THE COVID-19 PANDEMIC



The COVID-19 pandemic has proven to be not only a health crisis, but also a livelihood crisis – quickly turning into a hunger and malnutrition catastrophe. It has exacerbated existing inequalities, pushing millions of people into vicious cycles of economic stagnation, loss of livelihood and worsening food insecurity.

To add to that, the disruption of programmes like the Integrated Child Development Scheme (ICDS) and the mid-day meal has made things only worse. **The First Phase of the National Family Health Survey (2019-2020) has revealed alarming findings, with as many as 16 states showing an increase in underweight and severely wasted children under the 5.**

On the one hand, while the crisis highlights the importance of the existing welfare schemes like Mahatma Gandhi Employment Guarantee Scheme (MGNREGS), Public Distribution System (PDS) and Pradhan Mantri Garib Kalyan Yojana (PMGKY), etc, it also makes it imperative for civil society organisations to continue supporting communities in need provide and humanitarian relief.

An important aspect of relief work is that vulnerable families should receive support and guidance around affordable nutrition so that they are encouraged to make informed choices whenever possible. The need for action is emphasized more than ever before. And the time is now! हे बाल विका

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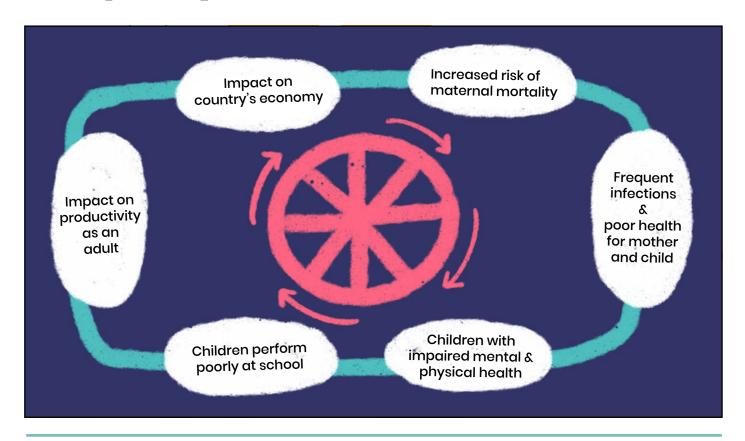
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Dr Praful Chaudhari | Medical Officer

"FMCH has started interventions in maternity homes through educative health talks since January 2021. The field officers are doing an excellent job: they have good counselling skills and expertise in nutrition.

"They are articulate and use simple language to explain points. One suggestion is that the field officers can also talk about the importance of family planning as it is very helpful for mothers."

The cycle of poverty and frequent occurence of malnutrition in women and children pose a serious threat to the quality of their lives.



Malnutrition, a threat since Independence, is standing in the way of India encashing its demographic dividend. Even today, **one third of the world's stunted children**, **and largest number of wasted children live in India. 50% of children under 5 and 50% of all expecting mothers are anemic due to poor nutrition.***

In the bigger scheme of things, **we lose over \$45 Billion of our GDP to malnutrition each year.** Our mission at FMCH is to change this. We believe that poor nutrition should no longer be a barrier for individuals to reach their full potential.

We invest in innovative, nutrition-specific interventions in vulnerable urban

communities and work directly with expecting and new mothers. Moreover, in order to bring about a sustained behaviour change, we work with various stakeholders in the ecosystem as part of our activities.

We also believe in leveraging the power of technology, which helps us retain accountability and drive decisions.

*Pre-pandemic figures

THE URBAN CONTEXT

Frequent migration means we get to work with families from diverse cultures and geographies. So while the context changes for each family, our vision and mission remain the same. Here are some major challenges faced by urban poor communities in India that lead to subpar nutrition consumption.



COVID has made an existing system worse. While the **urban poor** have shown great resilience, there are some underlying issues that continue to hamper their ability to get access to nutrition.



Apart from **migration-related challenges** such as no access to an Anganwadi system and not being able to avail its benefits, the urban poor face multiple issues. Lack of a trustworthy person who can guide and support them through the first 1000 days is a very glaring lacuna in the system.



Multiple sources of information such as TV ads, radio, media, heresay from the community and the health system - some of them often contracting the other leaves the families very confused about the food choices to make.

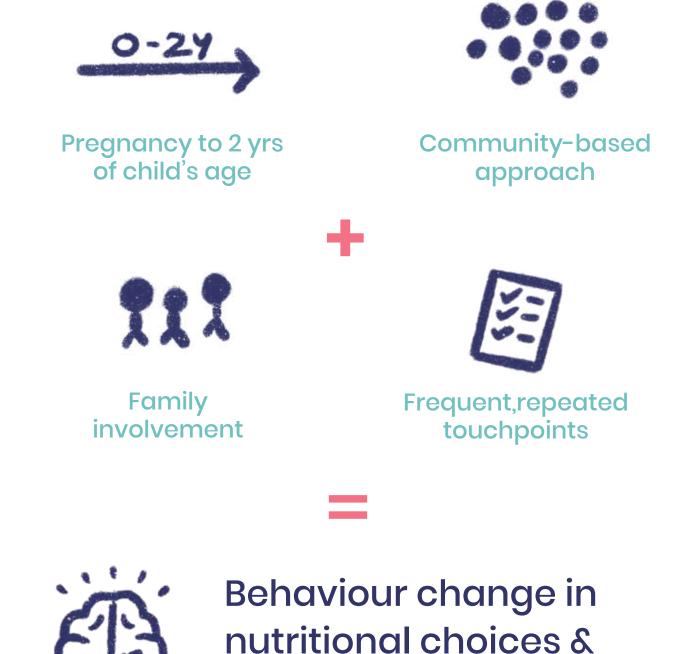


Adding to this, due to both parents working, meals are replaced with **packaged food** which are more often devoid of any nutrients and merely fill the stomach – causing "hidden hunger" and often leading to lifestyle diseases.

OUR THEORY OF CHANGE

If communities and families are enabled with contextual, timely, actionable information, they will make the right nutritional choices for healthy mothers and healthy children, enabling the cycle of poverty to break.

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decrease in malnutrition

Sharda Shinde Anganwadi Teacher

"FMCH has been working with our Subhash Nagar Anganwadi since four years now. Due to their valuable support, we were able to deliver various nutrition programmes successfully at the community level. They've helped us in educating the community about the importance of good nutrition during pregnancy and early childhood. As a result of this, we've been able to see a reduction in the number of SAM and MAM babies.

"One of the things I like most about their intervention is providing information through activities such as role plays, games, rallies, etc. It is very effective. I am very thankful for their support and hope that they continue to offer their valuable support to us in the future."

PHOTO TAKEN BEFORE THE PANDEMIC

OUR JOURNEY

2006-07 Organisation formally registered

- Engagement of external support for organizational growth
- Consolidation of intervention
 model
- Continued Intervention

2010-11

- Expansion of program intervention
 - Engagement of first CEO
 - Launch of FMCH Training Center, Urban Nutrition Initiative

 Rajmata Jijau Nutrition Mission introduces 'First 1000 Days Program' into urban Maharashtra

2014-15

Impacted 5,000 mothers directly

• 35+ partners, 4+ recognized by p

2017-20

- NuTree App launched
- Partnerships & Training vertical launched
- Launch of a journal for field officers

2015-17

- 35+ partners, 4+ corporate donors, recognized by partners like United Way, Dasra, Guide Star, CSRBox, etc
- Reached 15,000+ families
- Leadership Transition
- Foray into school nutrition programmes

2020*

OUR INTERVENTIONS

All of our programs consist of interventions that are conducted on a regular basis to support families and mothers around all aspects of pregnancy and well-being for both the child and mother.



Contradiction of an

ft/kg/cm

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with the NuTree App

Systems Support

through Anganwadi trainings and anthropometry

Education Sessions

such as nutrition courses, pregnancy clubs and community events



Nutrition Course

 Practical and education sessions to orient communities for age-appropriate complementary feeding, introduce concept of healthy cost-effective food



Pregnancy Club

 A platform for educating mothers about care pre- and post-pregnancy and a comfortable space for them to share personal experiences and concerns



Community Events

 Comprise health talks and special events such as
 World Breastfeeding week, National
 Nutrition month,
 Fathers day, Mothers day among others

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Malati Gupta | Community Member

"My residential area, Rafik Nagar, falls under Anganwadi # 125 which I visit regularly to measure my child's weight. For the past five months, FMCH's field officers have been counselling me about good quality nutrition and the importance of breastfeeding. My family eats only vegetarian meals, so she provided us with lots of handy information about vegetarian food. Even when I was away visiting my home town, the field officer called me twice to check up on me and answered all my queries."

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About this app

Business

No reviews yet

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Ratings and reviews

App is a digital platform for ground

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NuTree App

The FMCH NuTree App, released in June 2020, acts as a support system for the frontline worker, in person or remotely. Based on each family history, it generates a schedule of visits for the first 1000 days of the child. Each visit has contextual counselling points along with relevant IEC material.

Decision tree app that navigates through all the counselling points based on the answers (subjective and objective) given by the mother.

The counselling points are on the fingertips of the Field Officer who can ensure all the points are covered

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	Yes			
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	126/80			
٠	Hemoglobin (Hb))		
	12.1			
•	Weight 81			
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	pregnancies etc Proceed	counsel the m	other	
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The knowledge part of the counselling is handled by the app, while the FO can focus on providing care and building a relationship with the mother - the app will support her to do the rest.

> There are videos/pictures attached that can be sent to the mother on her phone for viewing later

The counselling points and the decision tree has been created with FMCH experience and expertise and continues to evolve as we meet newer situations (including COVID).

OUR PROJECTS in MUMBAI

53% newborns are breastfed within an hour of birth

children receive adequate complementary diet

mothers receive ANC check-ups

43%

ABOVE NUMBERS ARE FOR ALL OF MUMBAI

In Mumbai, only 53% of newborns are breastfed within one hour of birth, displaying a serious lack of early initiation of breastfeeding. On the other hand, the percentage of breastfed children aged 6-23 months receiving an adequate diet is as low as 6.4% in the city.

It is a well-established fact that poor nutrition during the First 1000 Days of a child's life (day one of pregnancy till their 2nd birthday) can cause irreversible damage with life-long consequences. On the other hand, only 43% mothers in Mumbai have had full Ante Natal Care (ANC) check-ups. Anaemia is also highly prevalent (50.4%) among women in the reproductive age group.

These statistics reiterate the need for us to think beyond treating and curing malnutrition, and look at things from the lens of prevention. To this end, the main aim of all four of our projects is to prevent chronic malnutrition among children in the First 1000 Days in a community setting through nutrition-specific interventions.

Read about our four active projects and response to the pandemic ahead.



PROJECT POSHAN

The goal of Project Poshan is early detection and tackling of malnutrition in the urban slum population in Kurla, an eastern Mumbai suburb. The project is fully aligned with the child development protocols of the Integrated Child Development Schemes (ICDS), a flagship program of the Women and Child Department, Government of India. The project is currently run in 42 Anganwadi areas within Kurla.







Shubhangi Bhoite Project Manager I have been working on this project since the last one year. This year, many new methods were used in the program such as reaching the beneficiaries using technology developed by FMCH along with experts in the form of the Nutree app. We also adopted new strategies such as the use of platforms like Zoom, Google Meet, Social Media, Whats App, etc, for our interventions. And the biggest innovation has been the video made on First 1000 Days.

However, in the last one year, along with substantial learning, there were also many challenges faced while running the program.

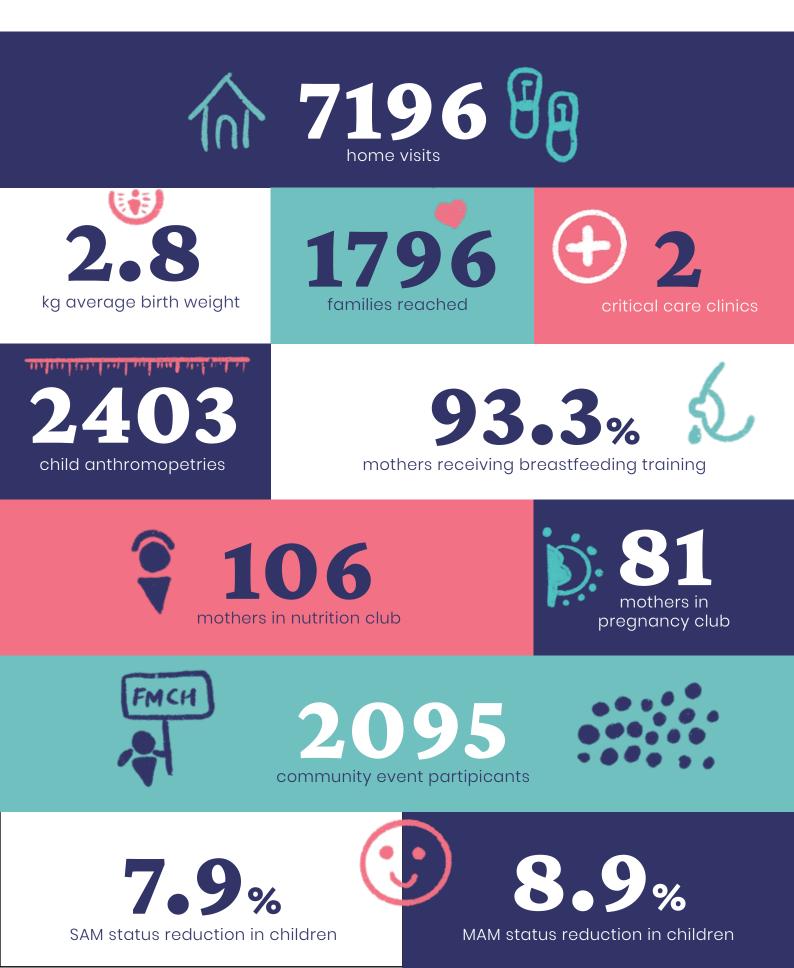
We were able to connect with more families due to the inclusion of new Anganwadis and maternity homes in the program. We conduct several events in collaboration with the Aanganwadi workers including dental camps, anaemia screening, nutrition month, breastfeeding week etc.

During the multiple lockdowns that have happened in 2020-21, it was observed that migrant families were struggling the most to make ends meet due to absence of daily wage earning opportunities. To support these families, we distributed ration items like dal, chawal, oil, spices, etc. We also received support from Anganwadi teachers to reach such families.

The last one year saw a 7 per cent reduction in malnutrition due to our work. Acitivities that supported this reduction in malnutrition were staying connected with families via calls and guiding and counselling them from time to time with appropriate information according to their needs.



THE YEAR IN NUMBERS



Stories from the field A TRANSFORMED LIFE

Twenty-two year old Anjali Riyaz (name changed) was in her first trimester when we first met her. Our field officer noticed that the mother-to-be looked unhappy. Post multiple conversations Anjali revealed that her husband was abusive and alcoholic. Since the couple lived alone, Anjali had no one to turn to for comfort. With our field officer's support, the field officer also counselled her on breastfeeding techniques and shared videos with Anjali.

The day she went into labor, Anjali was alone at home and called us for support. The field officer immediately called a support group member, who rushed to Anjali's house and took her to the hospital



The day she went into labor, Anjali was alone at home and called us for support. The field officer immediately called a support group member, who rushed to Anjali's house and took her to the hospital...

Anjali mustered up the confidence to talk about this to some close family members who took it up with her husband. Anjali's husband gradually understood the impact of his choices and a marked change was seen in his behaviour.

In the following months, both Anjali and her husband were counselled on the importance of registering for antenatal care and regular check-ups at a health facility. During her last trimester, where she gave birth to a healthy baby girl weighing 3 kgs.

Post the delivery, Anjali and her husband reached out to us and expressed how grateful they were for the support and counselling they had received.



Wipro Cares Donor

"The Journey of Wipro Cares with FMCH began in 2016 through the First 1000 Days Nutrition Program to address malnutrition among the marginalized communities in Kurla. FMCH has been instrumental in creating a considerable impact in the life of every mother, by inspiring and supporting them from the early stage of conception until the child turns two, which is the most crucial period of a child's development.

"We appreciate their approach when it comes to the delivery of services through innovative models. They are also very proactive in supporting our other partner organizations when it comes to effective program implementation. We hope to continue the partnership exploring wider horizons of opportunities with FMCH."

Reshma Kazi | Field Officer

122.00

"I have worked with FMCH in Jari Mari, Kurla for four years now. At the beginning, we saw that there was pervasive illiteracy in the community around nutrition. We found it difficult to connect with people. However, over the years, consistent home visits, counselling and follow-ups have helped us form a strong connect in the community. This has made it very easy for us to implement our prgrams effectively.

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"Last year, due to the Covid-19 pandemic, the nature of our field job suddenly transformed into an online job. At first we found it difficult to cope but thanks to the entire team's support, we were able to implement interventions online.

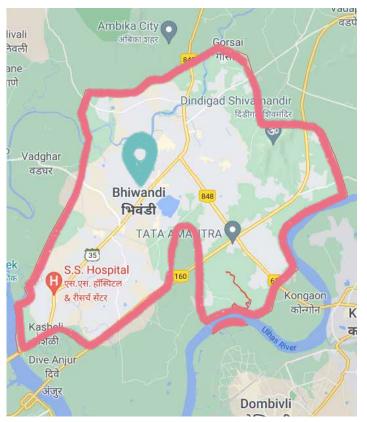
"This helped us reach our beneficiaries easily and we received positive feedback from them. One of them told me that FMCH was a very strong support system for her in such difficult times.

"Now people have started approaching us on their own. This is a great achievement for me personally, and also for the organization. I really like it here and I want to continue serving people through this organisation."

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COMMUNITY NUTRITION INITIATIVE 1+2

Started in 2015, Community Nutrition Initiative (CNI), in partnership with the ICDS, aims to reach areas of Bhiwandi district where the burden of malnutrition is high. This is done by sharing our knowledge and approach with existing systems, which will ensure that the government adopts best practices in the communities here for long-term change. In the next three years, we want to increase our reach by directly working with 10,000 families here.





THE YEAR IN NUMBERS









Preethi Mutta Project Manager



I have been working with FMCH for the last four months. It is good to see the changes in the community around making right decisions about maternal and child healthcare, nutrition and complementary feeding.

As part of the CNI project, we want to:

 Ensure good birth outcomes for all engaged mothers in the form of birth weight – targeting a minimum of 2.8 kgs for every newborn.

2. Reduce acute malnutrition among identified and engaged children (0-2 years) by at least 10%

3. Increase the rate of infant and young child feeding practices by more than 50% (compared to baseline findings).

The pandemic and lockdowns affected our work in a big way, but, we managed to provide support and reach out to our beneficiaries through phone counselling and follow-ups. Now that our field staff are vaccinated, we are focusing more on field work again along with community mobilisation and home visits.

Regular growth monitoring of children under two years and pregnant mothers have also resumed. This has enabled us to identify high-risk malnutrition in mothers and children and to provide proper guidance and care to support them.

I believe that everyone can get the right nutrition by including locally available food in their daily diet and focusing on diet frequency and diversity. We at FMCH are trying to improve the nutrition and health status of mothers and children by educating them and addressing myths and misconceptions prevalent in the community. When we met Pooja (name changed) during the lockdown last year, she was living with her mother-in-law, husband and 5-year-old son, and was carrying her second child. She did most of the house hold work and ate her meals only after everyone else in the family had finished eating. All this led to her feeling exhausted all the time.

When we visited Pooja's home to measure her weight, we understood the situation and advised her to attend FMCH's pregnancy club sessions. After attending a few sessions, Pooja began acting on the information shared in the sessions. This, coupled with regular home visits and counselling for the family, gave Pooja the much needed mental support, and allowed her to open up about her situation at home.

Pooja was also unsure of her place of delivery. Her family, including her husband were not very keen on institutional delivery. However, she understood the risks of home delivery, and along with the FMCH field officer, continued to educate the family of the same. Pooja was unsure of her place of delivery. Her family, including her husband, was not at all keen on institutional delivery. However, she understood the risks of home delivery, and along with the FMCH field officer, continued to educate the family on the same.

When it was time, Pooja independently got admitted to a private hospital and delivered a healthy baby boy weighing 3.5 kgs. She called the field officer from the hospital and said, "Madam, I did my delivery at the hospital as you had said. Both me and my son are fine and it was your support that made it possible".



There was real



PHOTO TAKEN BEFORE THE PANDEMIC

"I have been working with FMCH as a field officer for the last six months. At first, I was attending sessions conducted by FMCH in anganwadis as a beneficiary. After attending several sessions, I realised that I had learned so much and I could also do something for the community. It was then that I decided to join the FMCH team.

"I am fortunate that I got this opportunity to spread awareness about nutrition, growth monitoring and the first 1000 days of a child in the community. Seeing changes in the community makes me truly happy." Mantasha (name changed), a lactating mother, stays with six family members in Bhiwandi.One of our field officers (FLW) met her during one of her regular Anganwadi visits to conduct anthropometry. The FLW next met Mantasha during a home visit where the latter revealed that she hadn't been taking supplementary medicines post-delivery as she felt nauseous post taking the meds.

The FLW then went on to explain to her the importance of iron and folic acid (supplementary medicines) during and after pregnancy. She also explained the ill effects of low haemoglobin due to blood loss during labor. After providing several

> and the importance of iron in the body, Mantasha started taking the tablets.

facts on anemia

However, during the FLW's next home visit, Mantasha informed her that the supplements were not available and she was not able to take them. On the same day, there was an immunization camp being held at the Anganwadi, where the FLW requested the nurse for tablets for Mantasha and gave them to her.

During the third home visit, the FLW was ecstatic as Mantasha had started taking the tablets regularly. She expressed that she felt healthy and her body felt strong after taking the supplements.

The FLW was happy and asked her to continue the iron supplements until her child was six months

old. Over the next few followups, Mantasha c o n t i n u e d being in good health.

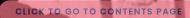


PHOTO TAKEN BEFORE THE PANDEMIC



Waterloo Foundation Donor

"We at the Waterloo Foundation are delighted to have been supporting the Foundation for Mother and Child Health for the past four years. We first supported the First 1000 Days Programme and Urban Nutrition Initiative in India as a low-cost and effective approach to targeting malnutrition in mothers and young children. Since then, we have seen FMCH's programmes go from strength to strength, the number of partnerships grow, and the everincreasing reach and impact of your work.

"The FMCH team have been skilful in adapting their programmes to the conditions brought about by the COVID-19 pandemic, and are well-placed to continue developing strategies to provide support where it is most needed. We are grateful to FMCH not just for your excellent results, but also for your helpfulness and positivity in all aspects of your work." WADIA PROJECT

Designed for early identification of malnutrition among children visiting the OPD at the Bai Jerbai Wadia Hospital, this project provides appropriate interventions for them. The initiative also incorporates an education component for pregnant women and lactating mothers who visit the Hospital. Nutrition counselling OPD was started at Wadia Children's hospital in 2014, and in 2018 onwards we started offering a health screening program for children here.





Nanda Gaonkar | Field Officer

"I have worked with FMCH for almost nine years now. Currently, I am working on the Wadia project, where we mainly focus on malnourished children up to five years of age and refer them to the Nutritional Rehabilitation Centre (NRC) at Wadia Hospital.

"When a child comes to us, we screen them first by checking their height and weight and comparing it with their age. This project is a joint intervention between UNICEF, Wadia Hospital and FMCH.

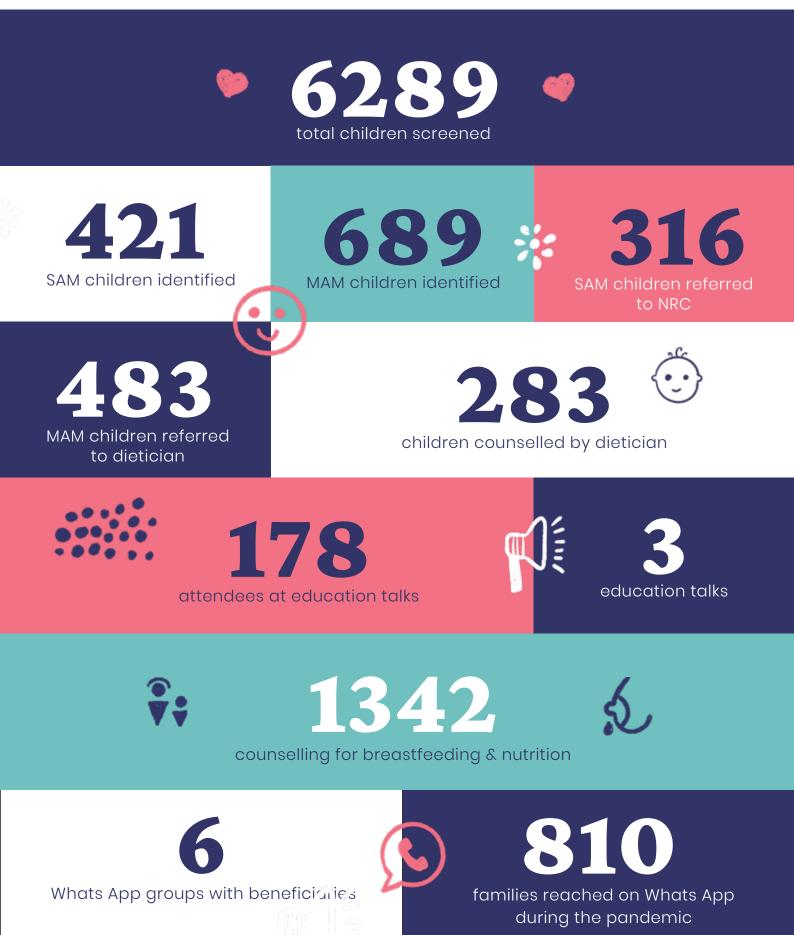
"At the Hospital, we usually counsel mothers on best breastfeeding techniques and complementary feeding. We also conduct health talks in the OPD four times a month. Apart from these activities, we conduct awareness sessions on nutrition for pregnant mothers.

"This year, due to Covid-19 restrictions we faced many challenges in providing our services to mothers and children. However, now we are back to work and want to help an even larger number of children and mothers to eradicate malnourishment from the its root."



THE YEAR IN NUMBERS

₹.



Stories from the field BONDED BY NUTRITION



We met Vyam, mother of a 4-month-old, and counselled her on breastfeeding and complementary feeding. In one of these calls, Vyam told us that she was a doctor herself. Astounded, our staff asked her why had she asked for counselling...

Born with a cleft-lip, Pragati (name changed) was recommended top-feed for her daughter two months after birth. Pragati had no prior knowledge of complementary feeding for such a young child.

Our Wadia team explained to her in detail the types of food to give along with texture, amount, frequency of feeding and foods to avoid. Pragati followed these tips and we continued to follow-up with her.

When Pragati visited us eight months later, her daughter was a healthy 11-month-old at 72 cm height, weighing 8 kgs. Pragati was glad to have been counselled at the right time by a trained FMCH staff. In another case, we met Vyam (name changed) mother of a 4 months old. Over the next few months, we counselled Vyam on breastfeeding and complementary feeding. In one of these calls, Vyam told us that she was a doctor herself. Astounded, our staff asked her why had she asked for counselling, to which the mother replied that she wasn't a nutrition specialist and that we knew better about it. They both laughed.

Zoom to the present, Vyom' son is a healthy 19-month-old at 76.5 cm weighing 10.2 kgs and she continues to be in contact with us to get her dose of reliable child nutrition information!

PHOTO TAKEN BEFORE THE PANDEMIC

Feedback from Wadia OPD Doctors

"We are very positive about the intervention at Wadia. The IEC materials are very good. They are simple and easily understood by all.

"Many patients have also been coming to the FMCH Wadia staff for breastfeeding and complementary feeding nutrition counselling after being referred by the OPD doctors. The FMCH intervention at Wadia is even more crucial now as the children who visit the hospital already have compromised immunities and are usually on medication."







Shubhangi Bhoite Project Manager

We have been working in Wadia Hospital for the last 5 years. Apart from doing regular Anthropometry for all the children who come to the OPD, we also conduct events during Breastfeeding Week and Nutrition Month.

The last year was quite challenging with hospitals being shut. However, we used technology to stay in touch with families. We formed WhatsApp groups of families who looked to us for support and guidance. We conducted training on MUAC (measurement of upper arm circumference) to enable knowing the health status of the child and did phone counselling visits using our NuTree App.

This has had its own learning - from managing WhatsApp groups to knowing the time that we can call parents and building trust online - each one these The last year was quite challenging with hospitals being shut. We used technology to stay in touch with families. We formed WhatsApp groups of families who looked to us for support and guidance.

have been met head on by our team members Continued interaction with the families enabled us to provide the right and appropriate information to mothers based on need, context and timeliness. Mothers in turn called us when they had questions about the health of the child.

More than 15,000 children were screened at Wadia and all those who were diagnosed as SAM were referred to the NRC.

We are grateful that we were able to continue to work with the Wadia Team even during the pandemic. We have seen that our Wadia team is always ready to innovate in the workplace, especially for the visiting families. They are adaptable and have accepted new changes in terms of culture and working style almost instantly, and think about project functions remotely now.

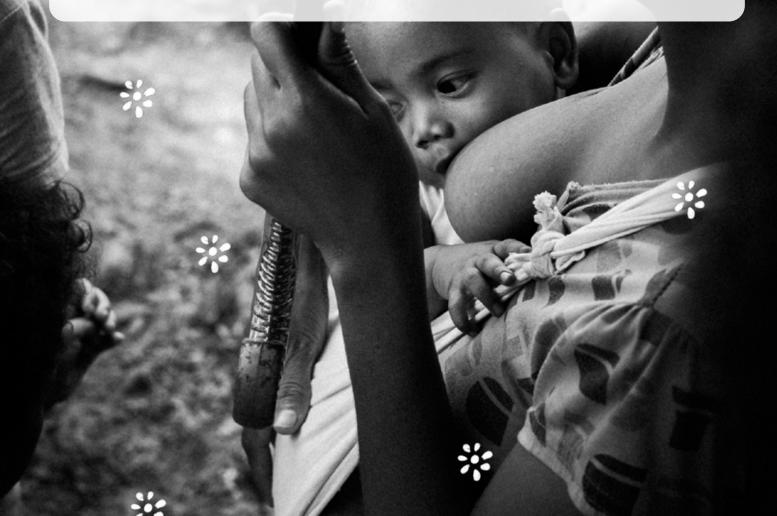
Sochai Partner

"It has been eight months since SOCHAI has been working together with FMCH. SOCHAI primarily works around the issue of Maternal Child Health and Nutrition (MCHN). Our current partnership involves capacity building training for SOCHAI's youth volunteers, and the use of Nutree app to mobilize trained youth in providing telecounseling to mothers.

"The best thing about FMCH is the extensive knowledge and resources they have on MNCH. We appreciate their willingness to understand ground-level challenges prior to designing content and the flexibility to adapt/customize based on our needs. It has been wonderful to collaborate with another NGO led by women beyond Nepal.

"Due to COVID, we had to halt all our field programs. As we had subscribed to the Nutree app of FMCH, by using the app we slowly initiated telecounseling services targeting golden 1000 days for mothers in three districts of Nepal. For providing this service we mobilized our youth volunteers who has received intensive training on MCHN through the trainers of FMCH.

"Through this partnership, we hope to reach to the most vulnerable and marginalized mothers and help reach their full potential."



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PARTNERSHIPS & TRAININGS

In order to achieve our vision of a malnutrition-free India, we realise the importance of scaling our work and reach across geographies sustainably and contextually. This is possible only when we work hand-in-hand with existing intelligence and expertise in this field of work. Which is why 2020-21 saw us launch and set up this brand new vertical as one of the key pillars of our work.

PARTNERSHIP OFFERINGS

- Needs assessment and contextualization of curriculum
- Training And Capacity Building
- Ongoing Implementation Support
- Quality Assurance
- Monitoring Dashboard
- NuTree App

PARTNERSHIP OBJECTIVES

- Collaborate with various stakeholders for long-term engagement
- Scaling up tried and tested modules such as Nu Tree app, nutrition course, pregnancy club, etc among others
- Strengthening modules by improving methodologies & delivery mechanisms of all of our nutrition-specific and nutritionsensitive programmes, resulting in behaviour change so that the communities are encouraged to make better food choices
- New innovations

Swasthi | Partner Organization

"We were looking for organisations with expertise in nutrition and those who could help us build the capacities of our frontline health. FMCH understood our highly specific requirements and developed a rich training programme for our field teams.

"The training was delivered virtually yet was highly engaging and interactive.. Other than knowledge, the participants also gained skills around disseminating information effectively in the community.

"We've decided to move forward with our partnership with FMCH to organise refresher trainings for our team members in the coming year. We look forward to a more meaningful and strong partnership with FMCH in times to come!"

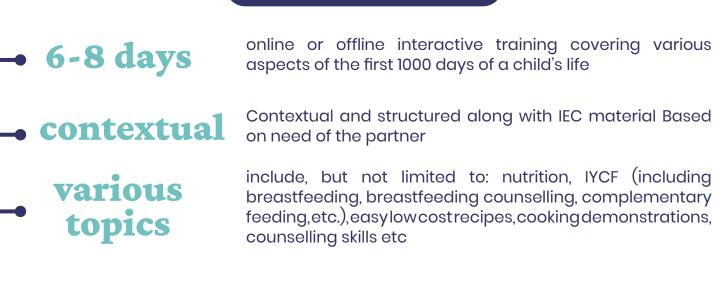
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THE TRAINING MODULE

The objective of our training module is multifold. It aims at capacity building of the frontline workers so that they can communicate and counsel effectively in the community. It arms them with the basics of nutrition, First 1000 Days, and IYCF practices. The participants also learn how to engage with the target groups in the community using the NuTree App.

Training Format



41

2020-21 REACH

41 field workers trained

32. total training days



ROAD AHEAD 2021-22

SUPPORT

Provide support to exisiting partner organization for implementation

STRENGTHEN

Further strengthen FMCH as an innovative, productive and sustainable organization



Identify and work with 20 partner organizations

1000 families per partner organization

T I I I I 💙



- Strengthen online and offline trainings
- Develop Health and Nutrition related videos
- Develop Monitoring Tool for Field assessment
- Developing Behaviour change and Communications module
- School Nutrition Program module



Bhagyada Jamsandekar Manager

The year 2020-21 has been a very eventful year with many achievements and we have made progress on several fronts. FMCH has engaged with many partners in the development sector (NGOs, hospitals, government agencies) with emerging strategies to reach more families and tackle malnutrition across the country.

There have been many highlights during this year:

- Innovation in technology: we developed decision tree a app (NuTree App) that the helps frontline workers to provide need based counselling to families from pregnancy till the child is 2 years of age
- families Reaching more through partnerships: this year partnered with three we Foundation, organizations SNEH SOCHAI, Swasthi Health catalyst

Along with our stakeholders, we co-create a sustainable & achievable implementation module in different geographies. Our target is to reach out to 20 partners in 2021 - 22 and reach 1,000 families per partner organization.

- FMCH collaborated with its first international partner in Nepal
- We were able to conduct online trainings with partner organizations and provide them support for the implementation

We also look at improving delivery mechanisms and methodologies for various nutrition-specific and nutrition sensitive programmes resulting in changes in behaviour of communities to make better food choices. Along with our stakeholders, we co-create a sustainable and achievable implementation module in different Geographies.

Our target is to reach out to 20 partners in 2021 - 22 and reach 1,000 families per partner organization. For organization strengthening we will further develop innovative, productive and sustainable modules to reach different stakeholders.

KEY EVENTS & MENTIONS



GoodSight Magazine

Our work was featured in the GoodSight magazine, a platform that showcases development initiatives from different geographies in India and abroad. *Click on the image to read the feature.*

Women's Day Workshop

FMCHandPrathamEducationFoundationcollaborated to organize a financial literacy workshop to guide community members in setting up home businesses. The workshop served as a crash course and offered tips, tricks and community support on the topic.





Sahayog Melava

As part of our system engagement objective, we organised a Sahayog Melava in 2020 to engage our communities, Anganwadi workers, government officials and NGO partners to discuss and share our visions for reducing malnutrition in Bhiwandi.

#DaanUtsav 2020

We participated in #DaanUtsav, India's festival of giving, for the first time by setting up a virtual stall at the Seva Mela where we had people across the country and abroad visiting our stall. The best part was when members of the families we work with visited our stall and shared their experiences with us.





EdelGive Fn x Tech4Good

FMCH was selected for this special series along with 49 other women's rights organizations. The platform supported us in leveraging technology and furthering our capacity building efforts and operational efficiency.

Breastfeeding Week

Due to the pandemic, we celebrated Breastfeeding Week virtually from August 1 to 7 by building awareness around the importance of breastfeeding and around the support mothers could receive from caregivers in their families since we were not able to go into the field. We were ecstatic to see many fathers participating in the event. *Click on the image to see the entire campaign.*





Nutrition Month

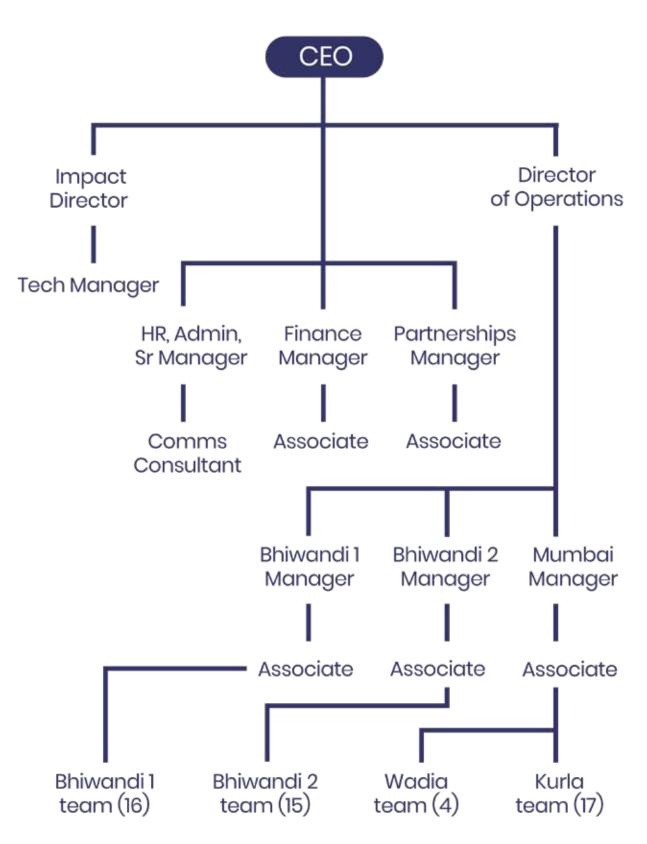
We celebrated nutrition month in September 2020 through a virtual campaign called #AtoZofNutrition. As part of this, we took one letter of the alphabet each day and explained a relevant nutrition-related topic to create awareness and educate people to adopt healthy habits. *Click on the image to see the entire campaign*.

IFPRI Conference

We participated in the *The International Food Policy Research Institute (IFPRI) conference on Child Growth and Development* in the poster presentation competition. In collaboration with Citara at IIT Bombay, we were able to show our results in a data driven manner. Apart from reversing stunting, we achieved a 70% drop in severe underweight and severe wasting in the last few years. *Click on the image to read the full paper.*



ORGANIZATION STRUCTURE



EXECUTIVE BOARD

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The Bombay I	Public Trusts Act, 1950 FOUNDA		VIII [Vide rule OTHER AND (e 17(1)] C HILD HEALTH				
<u>Registration no. F - 31760(Mumbai)</u> BALANCE SHEET AS AT 31ST MARCH 2021								
As at 31/03/2020	FUNDS AND LIABILITIES	As at 31/03/2021	As at 31/03/2020	PROPERTY AND ASSETS	As at 31/03/2021			
239,500	Trust Funds or CorpusAs per last year239,500		-	Immovable properties-	-			
220 500	Add: During the year	220 500	1,625,487	Fixed Assets	1,723,631			
239,500	239,500	239,500		(As per Annexure D)				
	Other Earmarked Funds:		-	<u>Investments</u>	-			
	(Created under the provisions of trust deed)							
-	Depreciation Fund	-		<u>Loans</u>				
-	Sinking Fund	-	-	Loans Scholarship	-			
-	Reserve Fund	-	-	Other Loans	-			
5,834,158	Any other Fund (Annexure A)	14,964,761		<u>Advances</u>				
	Loans (Secured or Unsecured)							
	(Annexure B)		-	To Trustees	-			
-	From Trustee	200,000	-	To employees	-			
1,490,000	From Others	1,490,000	-	To contractors	-			
			-	To lawyers	-			
2 457 (00	<u>Liabilities and Provisions</u> For Expenses (Annexure C)	1 724 129	45,856	To Others (Annexure E)	107,758			
3,437,609	For Advances	1,734,138	270,000	Deposits (Annexure F)	155,000			
-	For Rent and other Deposits	-	270,000	Deposits (Annexure 1)	155,000			
				Cash and Bank Balances				
				(Annexure G)				
	Income And Expenditure Account		38,180	(in name of the trust) Cash in hand	3,094			
(4 802 079)	Balance as per last year (303,670)		341,533	Fixed Deposit	363,652			
(1,002,079)	Add: Excess of income/(expenditure)		8,596,541	Cash with Banks	22,281,973			
4,498,409	during the year 6,310,384		-,,					
(303,670)		6,006,714						
10,917,597	TOTAL RS	24,635,113	10,917,597	TOTAL RS	24,635,113			

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The above Balance Sheet to the best of our belief contains a true account of the Funds and Liabilities and of the property and Assets of the Trust.

AS PER OUR REPORT OF EVEN DATE FOR S. P. GUPTA & ASSOCIATES CHARTERED ACCOUNTANTS Firm Reg no 103445W

, ה, צ G Chartered (Shashikant Gupta) Q Accountants Partner တ် Membership No 031899 1BAI Mumbai

Date: 05/09/21



Trustee

FOR FOUNDATION FOR MOTHER AND CHILD HEALTH

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Trustee

The Bombay F		CHEDULE IX [
				CHILD HEALTH	
		Registration no			
	INCOME AND EXPENDIT	URE ACCOUN	IT FOR THE Y	EAR ENDED 31ST MARCH 2021	
2019-2020	EXPENDITURE	2020-21	2019-2020	INCOME	2020-21
	To Expenditure in respect of properties		-	By Rent	-
-	Rates , Taxes , Cesses	-		By Interest (accrued & realised)	
-	Repairs and Maintenance	-	-	On Securities	-
-	Salaries	-	-	On Loans	-
-	Insurance	-	106,520	On Bank account	468,41
-	Depreciation	-	-	By Dividend	-
2,285,935	To Establishment Expenses	1,114,629	21,702,161	1 -	25,611,09
-	To Legal Expenses	-	-	By Grant	-
	To Audit Fees	70,800	2,140	By Income from other source	123,77
-	To Contribution and Fees	-	-	By Transfer from Reserve	-
	To Amounts Writeen off				
-	(a) Bad Debts	-			
-	(b) Loans Scholarships	-			
-	(c) Irrevocable Rents	-			
-	(d) Other items	-			
-	To Miscellaneous expenses	-			
477,251	To Depreciation	640,564			
	To Expenditure on objects of the trust:-				
-	(a) Religious -				
-	(b) Educational -				
14,549,226	© Medical relief 18,066,899				
	(d) Other Charitable Objects				
14,549,226	18,066,899	18,066,899			
4,498,409	Excess of Income Over Expenditure	6,310,384	6,381,432		
_, ,	Carried to Balance Sheet	-,,	-,,		
17,312,412		26,203,276	28,192,253		26,203,22

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AS PER OUR REPORT OF EVEN DATE FOR S. P. GUPTA & ASSOCIATES CHARTERED ACCOUNTANTS Firm Reg no 103445W

S.A.M C Chartered (Shashikant Gupta) a, Accountants Partner ഗ Membership No 031899 BAL.5

Mumbai Date: 05/09/21 FOR FOUNDATION FOR MOTHER AND CHILD HEALTH

Trustee

Trustee Trustee

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CHAIRPERSON'S MESSAGE

The hardships overcome & lessons learned over the last year and a half have put us in an even better position to realize our goal of a million families by 2025

This has been another year of disruption and uncertainty, another year requiring innovative ways to reach and help as many families as possible and another year of digging deep to find the strength to keep fighting for a safer and healthier world for our beneficiaries.

Yet despite all the obstacles, the FMCH team was successful in developing innovative ways to connect and they dug deep to find their inner strength providing support and resources to thousands of families. They were resilient in their determination to make a difference, a resilience that isn't a single skill but a variety of skills and coping mechanisms that were developed though working together, teaching each other and listening to their beneficiaries when facing the ever-changing challenges the pandemic has created.

However, this year was so much more than surviving, FMCH has grown. With the strength of our app and support of our donors, we have been able to add partners, increase the number of anganwadi workers trained, added many more



frontline workers, provided significant support to families that were forced to migrate back their villages and partnered with NGOs, Government and Corporations to understand problems and innovate solutions with regard to Covid in the underprivileged communities hardest hit by the pandemic and lockdowns.

As we look forward, we know there isn't a clear path as uncertainty and disruption are still with us. Our work is more important now than ever as the pandemic and lockdowns have brought a steep rise in malnutrition, anemia and high-risk pregnancies and at the same time reduced available resources, food and jobs. But our team is up to the task as they see roadblocks as building blocks to success! The hardships overcome and lessons learned over the last year and a half has put us in an even better position to realize our goal of one million families by 2025. We celebrate our team of amazing people and the progress they make... everyday!

- DOROTHY WAGLE

OUR SUPPORTERS













Support our work: scan the QR code or click it

PHOTO TAKEN BEFORE THE PANDEMIC



Safed Pool, Tanaji Nagar, Sai Krupa Rahiwasi Society, Jarimari, Kurla West, Mumbai 400 072

Phone: (+91)9101069135 Email: <u>contact@fmch-india.org</u>

Get social with us

Facebook | @FMCHIndia Instagram | @indiafmch LinkedIn | FMCHIndia Twitter | @FMCHIndia Website | www.fmch-india.org

I million healthy families by 2025!

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FOUNDATION FOR MOTHER & CHILD HEALTH INDIA