TACKLING MALNUTRITION THROUGH INNOVATIVE WAYS.
EVERY DAY.

FOUNDATION FOR
MOTHER & CHILD HEALTH
INDIA
OUR EXPANDING REACH

- **Office/Training Center**
- **Centers**
  - Mahalaxmi
  - Kurla West
  - Powai
  - Bhiwandi
Words from the CEO
Year in Numbers
First 1000 Days Program
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Thank You

MALNUTRITION DESTROYS THE MOST HUMAN POTENTIAL ON THE PLANET

Bill Gates
Co-Chairman of the Bill & Melinda Gates Foundation
WORD FROM THE CEO

The year 2016-17 has been one of steady growth and learning for Foundation for Mother and Child Health. For the organization, the primary objective for this year was to establish a program implementation model that would be sustainable, replicable and most importantly, achieve clear outcomes. Through the past year the team worked diligently reviewing our existing models, protocols, program outcomes and challenges, and finally built the partnership model which took the shape of Project Poshan. As I write this, I am proud to share that Project Poshan has been launched and we strive to deliver the promised outcomes in the next three years.

During the year, the team continued interventions in the Dhobi Ghat and Powai areas under the umbrella of the First 1000 Days, as well as, in Bhiwandi (Thane District) through the Urban Nutrition Initiative. Through these programs we worked directly with over 1,400 mothers and their children. Through our large-scale events in the communities we work in, we were able to promote good health, hygiene and balance nutrition with over 150,000 people.

This year also brought global recognition to FMCH for the work it has been doing in the realm of First 1000 Days. In December 2016, I had the opportunity to present the results of our work in breastfeeding at the 2nd World Breastfeeding Conference in Johannesburg, South Africa. Through this paper we were able to demonstrate that babies who came into the FMCH program with moderate or severe acute malnutrition were able to improve their nutritional status 84% of the time through exclusive breastfeeding.

The entire FMCH team, including the program and program support functions were the primary contributors to the success of this year. I am particularly proud of Sonal Pawar, the Field Coordinator at Dhobi Ghat who won the Rising Star 2016 Award organized by Barclays and WeAreTheCity. She won this award based on her work on First 1000 Days with the women and children in the Dhobi Ghat area.
I would like to take a moment to thank the partner organizations who we worked with through the year including CORP, Sneha, Adarsh Foundation, Gunvant J Kapoor Foundation, YMCA Mumbai, United Way of Mumbai and the Brihanmumbai Municipal Corporation S Ward team.

The achievements we have reached in this year could not have been a reality without our donors who continue to support FMCH. We are grateful for your trust in our abilities to deliver the outcomes we set out to achieve.

And finally, a big thank you to the Board of Trustees at FMCH. Thank you for your time, your vision and your wisdom. Together we strive for excellence in every action and promise to continue tackling malnutrition in innovative ways every day.
OUR ACHIEVEMENTS 2016-2017

THE YEAR IN NUMBERS

Program Outputs:
Direct Reach (First 1000 Days) : 1,400 women and children
Extended Reach : 1,50,000 people
Total number of participants trained (Training Centre) : 487
Extended Reach through Training Centre : 2,65,000
ICDS Centers covered under UNI Program : 140
Population coverage under UNI Program : 1,40,000
Direct Reach under UNI Program : 4,217 women and children

THE FIRST 1000 DAYS PROGRAM

Improved ante-natal care and infant and young child feeding practices during the period from conception till the child turns two years of age is the key area of intervention for the First 1000 Days program. For the FMCH team, the focus for 2016-17 was to improve community participation and bridging the gaps between various agencies to focus on sustainable strategies.

Outputs:
- First 1000 Days Clinics run through the year : 418
- Clinic visits recorded for mothers & children : 3,387
- Home visits for follow-up work done through the year : 3,053
- Nutrition Supplements dispensed (nutri-bars/vitamins) : 7,298
Outcomes:

- 87% of mothers with new-born children received breastfeeding assessment and counselling support within the first 60 days of child-birth. This is crucial for new mothers who often struggle with breastfeeding in the absence of both information and emotional support.

- 81% of children who graduated the FMCH First 1000 Days Program between 2016-17 were all categorised under ‘well child’ for their wasting status. This means these children have a healthy weight for their height.

- For Acute Malnutrition reduction and Severe Acute Malnutrition was recorded at 50% whereas that of Moderate Acute Malnutrition was recorded at 25%.

- WHO defines Wasting or Acute malnutrition as low weight for height/length. This condition is associated with increased morbidity and mortality in children thus making it a serious concern of malnutrition in children.

![Baseline Wasting Status](image1)

![Wasting Status](image2)

**Figure 1** shows the wasting status of children when they were first registered at FMCH and **Figure 2** presents their last measured status. The graph very clearly shows the decrease in the number of children suffering from severe and moderate acute malnutrition and increasing the children in the 'Well Child' or healthy category. Regular growth monitoring, appropriate nutrition counselling and support is crucial in promoting behavior change and thus improving the nutritional status of children.
One of FMCH team members identified Sheetal Pande during a field visit in Dhobi Ghat. She was three months into her pregnancy. Sheetal had suffered a miscarriage in her first pregnancy, which made her apprehensive when she got pregnant again. She was looking forward to all the knowledge and support that she got from FMCH, something she did not have during her first.

Under FMCH’s First 1000 Days program, she received one-on-one health and nutrition counselling, nutritional supplements and close monitoring of her progress. FMCH team not only built a good relationship with Sheetal, but also with her mother-in-law during the home visits. Her mother-in-law was able to understand the importance of the services provided by FMCH, accompanied Sheetal during her clinic visits. She also attended the pregnancy club sessions and very quickly became comfortable sharing her worries with the other pregnant women.

Sheetal delivered her son through a C-section and faced a lot of difficulty with breastfeeding her newborn. This caused a drop in the child’s weight making him susceptible to malnutrition. Raising this as a cause of concern, the FMCH team regularly followed-up with the family during home visits, and convinced the family to bring the baby to the centre for a thorough examination. When Sheetal’s mother-in-law brought the baby to the centre, he was identified to be under the category of severe acute malnutrition as per WHO growth standards.

Sheetal had also been losing confidence as a new mother and thought that she did not have sufficient breastmilk to feed her baby. FMCH spent the next few weeks providing breastfeeding counselling and support to ensure improvement in both mother and child. The nutritionist also counselled on the importance of ensuring good nutritional intake for recovering and improving the mother’s health.

Unfortunately Sheetal had to be admitted in the hospital due to an infection that caused further deterioration in her and her child’s health. FMCH continued to provide support to her and her family during this period. FMCH taught her how to express breastmilk to continue feeding her baby. Through regular monitoring and follow-ups, the child’s health started improving. Today at the age of 9 months the child weighs 9.47kgs and 73cms by length, both above 50th percentile.
Reena, lived with her husband in a rented place in Phule Nagar with an income of less than Rs. 5000. Reena was pregnant after four years of marriage. With no family close by, she depended on support from her neighbours and FMCH.

Reena started receiving services through the FMCH First 1,000 Days intervention program. However, she had to move back to her village for four months where she was able to receive antenatal care from a village hospital as per the recommendations and counselling by FMCH.

Once she returned, she came back to the FMCH centre and started attending the clinics and pregnancy club sessions regularly. She was also provided counselling during home visits by the team.

She gave birth to a healthy girl, weighing 2.70kg in the government maternity home but recovery after child birth was extremely difficult for her. With her husband away at work, she often only ate when a meal was provided by the neighbours. This was affecting the health of both the mother and the baby. After a month, the child had lost 400gms instead of gaining weight. The mother also complained of the child crying a lot making it even more challenging for the mother. Within a month, Reena brought the baby to an FMCH clinic where a breastfeeding feeding assessment showed it to be ineffective. By now, the mother had become extremely weak and had difficulty taking care of the child. The child was identified to be severely underweight and wasted as per the WHO standards.

Reena was asked to visit the FMCH clinic on a weekly basis to closely monitor the status of the mother and child where she received counselling on nutrition during lactation, breastfeeding and new-born care. FMCH continued to follow-up through home visits and also encouraged her neighbours to continue the support they provided Reena.

Sadly Reena was diagnosed with Dengue when the baby was just 3 months old. The child required to stop breastfeeding and only use formula. After recovering from the illness and with the support of FMCH, Reena was able to stop formula and continue with exclusive breastfeeding. To increase her nutritional intake, she started receiving a double ration of the nutri-bars. The baby gradually showed improvement in her weight and height and, at the age of 7 months, she weighs a healthy 6.98kg and 66cm in length. She is ‘Healthy’ as per all the three WHO parameters.

Today, Reena regularly attends the nutrition course sessions and has also started complementary feeding as per FMCH’s recommendations. She continues to be associated with FMCH.
OUR ACHIEVEMENTS 2016-2017

THE URBAN NUTRITION INITIATIVE

The FMCH team has been engaged in the Urban Nutrition Initiative along with seven other non-profits across Maharashtra. This initiative was launched by the Rajmata Jijau Nutrition Mission of Maharashtra in order to address the growing incidence of both chronic and acute malnutrition in the urban pockets of the state. The strategy adopted was that of prevention specifically through implementation of 10 Essential Nutrition Actions (ENA) during the First 1000 Days of a child’s life. Since sustainability was the primary concern for this idea, from the very beginning this program was linked to the ICDS system (Integrated Child Development Scheme).

Program Outputs:

- Completed household screening: 27,701
- Direct reach for the program: 4,217 women and children
- Home visits conducted for follow-up work: 25,000
- Growth monitoring of children under age two (monthly average): 722
- Maternal health support groups: 64
- Reach through education sessions on pregnancy and nutrition: 5,120
- Technical training for ICDS team: 140 aanganwadi workers, total 48 hours of trainings

Program Outcomes:

- 100% women were registered for medical support during their pregnancy with local healthcare providers
- 100% women received their requisite number of ante-natal check-ups during their pregnancy as compared to 39.4% at the beginning of the program
- 91% children started on complementary foods after completing six months of age as compared to 39.2% at the beginning of the program
- 77% children received breastfeeding within the first hour of birth as compared to 65% at the beginning of the program
- 52% children who were diagnosed with Severe Acute Malnutrition and 59% children who were diagnosed with Moderate Acute Malnutrition became healthy and maintained the status for at least six months
Vrinda moved to Mumbai with her husband from Hyderabad after her marriage. She has no formal education and is dependent on her husband. The couple’s monthly income varies since Vrinda’s husband does not have permanent employment. Since Vrinda does not speak the local language she finds it difficult to access the existing healthcare services and is unable to explain her needs. When the FMCH team first met Vrinda, she was in her fifth month of pregnancy. During this very first interaction (which was eased by the fact that the FMCH team member spoke the same language as Vrinda) it came to light that she still has not registered herself at any healthcare facility. Neither has she had any ante-natal check-ups (ANC). Vrinda also shared that she was worried about going to the hospital as she feels it will force her to have a c-section delivery. She had already had a c-section for her first child which she felt was unnecessary. Keeping her concerns in mind, the FMCH team continued to counsel her, register with the healthcare facility and get the ANC she needed. Unfortunately, owing to a technical glitch at the healthcare facility Vrinda never received the Mother & Child Tracking number (MTS) which is needed for any treatment during pregnancy at the Government hospital. During the 8th month of her pregnancy, Vrinda experienced discomfort and had to visit the local hospital. However, without the MTS number the hospital was unable to help her. Vrinda informed the FMCH team about the situation. The team immediately visited the local health center to resolve the issue. After three days, with repeated follow-ups and visits to various offices, FMCH was able to obtain the MTS number. The very next afternoon Vrinda delivered a healthy baby girl weighing 3 kilograms, which is a very healthy weight given the child was born premature. Today, both Vrinda and her daughter are doing well.

When the FMCH team found Shiraj at a community in Bhiwandi, he barely weighed 7 kgs at 18 months. Shiraj was diagnosed to be a SAM child (Severe Acute Malnutrition) and had to be referred to the Nutrition Rehabilitation Center (NRC) in Mumbai at Sion hospital. It took several visits to Shiraj’s home and extensive counselling of his family for the FMCH team before Shiraj finally reached the NRC. However, he did not stay there long, since his mother found it very difficult to manage staying at the center with him. And within a few days, Shiraj was back home without completing his treatment.

When the FMCH team found out that Shiraj was back home, they arranged to meet the family. They again met the father and had several conversations with him, providing him information about the severity and danger of Shiraj’s condition, his susceptibility to catch infections and the need for treatment. However, the team also had to be cognizant of the fact that the NRC is over 50 kms away from Shiraj’s house and it was very difficult for his family to continue treatment. However, Shiraj’s father was very concerned of his son’s well-being and he ensured that Shiraj was re-admitted to the NRC.

The FMCH team continued following up with the family, keeping apprised of Shiraj’s progress and sometimes explaining instructions from the hospital staff. Eventually Shiraj completed his treatment at the NRC. The FMCH team continued visiting Shiraj and reinforcing information with regards to balanced nutrition and hygiene with the family. Today, a regular attendee of the monthly growth monitoring at the ICDS center, Shiraj continues to maintain his ‘Well-Child’ status (weight for height).
2016-17 marks the second year of work for the FMCH Training Center. During this year, the Training Center team focused on strengthening core competency and strategy. The learnings from the very first year clearly demonstrated the need for strong partnerships which provide the opportunity of capturing real impact through data. Accordingly, the team focused on building partnerships where the intervention is implemented with care and becomes a major focus for the organization. For example, one of the non-profits who had earlier done a basic training came back with specific requirements that would enable them to implement a nutrition sensitive intervention with the children they work with. And they are determined to demonstrate changes, if any in the children’s nutrition and health status through this intervention by periodically collecting accurate data and reporting the same. Such a partnership creates scope for true impact assessment for the training center.

The second area of focus for this year was development of training modules that are addressing issues at a larger context. The team is currently in the process of developing a training module on nutrition for tuberculosis, which has the potential of reaching and impacting a much larger number of people in need of such an intervention. Such modules also build the foundation for the next year for the Training Center.

**Program Outputs:**

- Training sessions: 28
- Partners engaged through the year: 9
- Total training hours: 108.5
- Total reach through trainings: 265,000
- Internal Training Sessions: 6
Rani is a 22-year-old pregnant woman living in remote area of Virar village in Palghar district of Maharashtra. She had migrated from Chhattisgarh to Virar along with her husband and a two-year-old daughter. Rani was not aware of the health facilities available in her area and had no support or guidance from anyone during her first pregnancy. She had not registered herself in the hospital neither was she taking any medical supplements. She was unaware about the care to be taken during pregnancy. As a result, she faced a lot of difficulty during her pregnancy and delivered a low birth weight child weighing just 2 kg.

One day, CORP’s health worker visited Rani during her regular home visits and assessed Rani’s condition. Rani was pregnant with her second child, but was scared to keep this pregnancy because of the complications she faced in her previous pregnancy. Rani was counselled by CORP’s health workers that were trained by FMCH and was advised that if she takes care during pregnancy she will be able to deliver a healthy child. Rani was counselled to register in the CORP’s programme, attend pregnancy club and avail of other services offered.

With repetitive counselling and help of health workers, Rani started attending pregnancy club. She was now applying the knowledge she received during these sessions. Unlike her previous pregnancy, this time she registered in the hospital, started taking regular iron and calcium supplements and having healthy meals. During home visits, it was observed that she followed the recommendations given. Her husband also supported her choice of healthy behavior.

With the support that Rani received from CORP, she was able to give birth to healthy child weighing 3.8 kg. Rani received breastfeeding counselling and support after delivery. The child is now 5 months old, she is exclusively breastfed and up to date with her vaccinations. Rani and her husband are very happy with their child’s health and the knowledge they received through the pregnancy club. Rani is now empowered and she wants other women also to get the same support and guidance. She is recommending CORP’s pregnancy club to other women in the community.

Partner: CORP

TRAINING SESSIONS FOR FMCH TEAM

As part of the ongoing staff development objective, the Training Center organized several internal sessions, both on-site and off-site for all or some staff members this year. Those included:

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<tr>
<th>Session Name</th>
<th>Facilitator/Organizer</th>
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<tr>
<td>Happiness &amp; Fulfillment</td>
<td>Ms. Jaya Nuty</td>
</tr>
<tr>
<td>Time Management</td>
<td>Mr. Amit Murugkar</td>
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<tr>
<td>Understanding Hepatitis</td>
<td>United way of Mumbai</td>
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<tr>
<td>BISSNIP Training</td>
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<td>Understanding Domestic Violence</td>
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<td>Human Rights in Childbirth Conference</td>
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WHAT HAPPENS NEXT?

FROM FIRST 1000 DAYS TO PROJECT POSHAN

FMCH will be officially launching Project Poshan in a new intervention location in the year 2017-18. The location has already been identified based on both primary (baseline survey) and secondary (data from ICDS department) data sources. This model was designed based on FMCH’s success and learnings from the First 1000 Days program as well the Urban Nutrition Initiative.

For the existing implementation sites, the First 1000 Days program model shall also be modified and extended in the form of Project Poshan.

FMCH will also be exiting from Dhobi Ghat by the end of 2017. The exit process was initiated in 2016-17 itself, which included a household survey of the population that continued to stay on post relocation owing to the large scale real-estate development project that emerged during this year.

In 2017-18 the FMCH team plans to conduct a mid-line survey at the Powai site in order to review progress post two years of work. Based on the findings of this review the team will modify strategies (if-needed) to achieve the program goals.

URBAN NUTRITION INITIATIVE:

The year 2017-18 will be the last year of intervention through the UNI program. The team has completed the baseline survey of all 140 ICDS centre sites and intervention continues in full-swing. The FMCH team is organising a refresher training for all 140 aanganwadi teachers towards the end of 2017.

TRAINING CENTRE:

To provide quality support services to our partners and other stakeholders, the Training Centre will be focusing on following strategies in 2017-18:

1. Offering innovations and sustainability through activities
2. Managing the internal knowledge pool
3. Develop as a 'Learning Hub' which offers opportunity of learning from diverse sources
4. Reaching out to a larger audience through new partnerships
FINANCIAL INFORMATION

Human Resources \(\text{₹} \, 85,69,525\)

Critical Care and Community Intervention \(\text{₹} \, 7,84,015\)

Office/Site Rents/Maintenance/Utilities \(\text{₹} \, 6,46,652\)

Stationary/Printing/Office Expenses \(\text{₹} \, 1,08,843\)

Intersite Travel \(\text{₹} \, 3,06,929\)

Community Engagement \(\text{₹} \, 1,25,282\)

Outreach Travel/Training/Materials \(\text{₹} \, 1,28,498\)

Total Expenditure 2016-2017 \(\text{₹} \, 1,06,74,997\)

THANK YOU

Foundation for Mother and Child Health India would like to thank the following donors for their continued support during 2016-17:

- BG Exploration Production India Pvt. Ltd.
- BG India Energy Solutions Pvt. Ltd.
- UPS Jetair Express Pvt. Ltd.
- United Arab Shipping Company
- Wipro Cares
- GiveIndia
- Baxter International Foundation
- Indospace Development Pvt. Ltd.
- Direct Aid Program of the Australian Consulate
- Baraka Community
- American Womens’ Club

We would like to extend special thank you to all those individual donors who have supported us through various forums. FMCH has been on a path of growth and excellence only because of your continuous encouragement and support.