SNEH (Sustainable Nutrition Education and Health) Project

Over 50% of the deaths among children under the age of 5 are attributed to under-nutrition. Evidence suggests that the most critical period for nutrition and stimulation interventions is the first few years of life. More than 80% of physical and mental growth occurs during this period. If children do not get the right nutrients during this period, the damage is often irreversible.

Southwest Madhya Pradesh has been among the worst affected. While the state malnutrition average is 60%, the Global Hunger Index describes malnutrition among children under the age of 5 as “alarming”. Cut off from mainstream facilities, tribal populations of the state are even worse affected, especially the districts of Jhabua, Dhar and Alirajpur.

Aim

The project aims to eliminate under-nutrition among young children, and pregnant and lactating women utilizing locally available, affordable solutions and by linking them to government health services for timely health check-ups and safe deliveries.

Vision and Approach

The project envisions to improve the health and nutritional status of all the children and lactating mother and pregnant women in the project area. The Sustainable Nutrition Education and Health (SNEH) project attempts to improve nutrition in children by focusing on the first 1000 days of their life while supporting them till they are 5 years old. Maternal health & nutrition is addressed during pregnancy through increased use of locally available nutritious food, promoting good practices like adequate rest, wage compensation for undernourished mothers, and accessing government health services for health check-ups, vaccination, and management of common childhood illnesses.
Target area:
Tribal population from 33 villages in Jhabua district of Madhya Pradesh

Beneficiaries:
- Children from 0 to 5 years of age, who are suffering from severely and moderately acute malnourishment
- Pregnant women and lactating mothers, a majority of whom are anemic

Project Period: 3 years

Highlights
- Ensuring that pregnant and lactating mothers and their young children get the necessary micro-nutrients and link them with government health services to ensure safe delivery and for getting complete ante and postnatal health check-ups.
- Promoting good infant & young child nutritional practices, including early initiation of breastfeeding, exclusive breast-feeding for first 6 months, timely and appropriate introduction of complementary feeding with continued breast-feeding.
- Children with severe and moderately acute malnutrition are treated through therapeutic intervention.
Other components:

- **Nutrition gardens** – Communities have been taught to cultivate seasonal low cost nutritious vegetables in their backyard nutrition gardens, irrigated mainly through harvested rain water.

- **Positive Deviance plus** – This is a community-based integrated approach wherein mothers and care givers are educated to discard harmful traditional practices, cook nutritious food using local resources, and practice positive parenting.

- **Mothers’ committees** – Groups of mothers are empowered to act as catalysts and pressure groups for strengthening delivery of health and nutrition services at Anganwadi centers and advocate for positive mother and childcare practices.

Impact

**Improved health**

Since the project was initiated in 2015, in association with Moody’s Analytics Knowledge Services, it has improved the health of more than 2000 malnourished children and nearly 1000 pregnant and lactating women in 33 villages. Some positive practices noticed were:

- 90% of women registered with the local government facility within 12 weeks of pregnancy.
- 70% of women had at least 3 check-ups. And 97% of women utilized government facilities for post natal care.
- Over 80% consumed nutritional supplements, of which they were previously not aware.
- 66% respondents reported extending breast feeding by 3 to 4 months.
Leverage and scalability

Linkages have been established with two key departments -- Health and Family Welfare and Women and Child Development, which have provisions for health and nutrition services for vulnerable communities in rural areas.

- Process documentation will be used for program scale-up.
- ChildFund India continues to work in the area for a longer period; the results will be followed up and linked to life stage 2 (6-14 years) program interventions.

Recognition

- Won best CSR Project Award in Healthcare category at 4th India CSR Impact Award 2017, for its community based models for improving children's lives through health interventions.
- Project photo was displayed at the CSR photo exhibition titled 'U.S. Companies Partnering in India's Inclusive Growth' held at the American Center in New Delhi in April 2018. This initiative was organized by AMCHAM in partnership with the U.S. Embassy.