



NUTRITION CAMP

COMMUNITY BASED
BEHAVIOUR CHANGE
INITIATIVES TO OVERCOME
MALNUTRITION

IMPRINT

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FOREWORD

The nutrition camp is based on the concept of 'Positive Deviance' – the 'Positive Deviance' concept is a tool to promote behaviour and social change to organize various 'Positive Deviance'-centred social change interventions around the world. 'Positive Deviance' Hearth interventions are community-based nutrition programmes for children who are at risk of protein energy malnutrition. This programme has been very useful with its localized relevance and cost effectiveness of rehabilitating malnourished children, especially in developing countries.

The process starts with village nutrition data assessment and specific villages with high prevalence of malnutrition are selected for village-level meetings to explore possibilities of Positive Deviance/ Hearth sessions. These meetings are organized with mothers of Identified children where the mothers with facilitator explore possibilities for a 'Positive Deviance' / Hearth session. The 'Positive Deviance' / Hearth session are a 15-days nutrition and counselling camp designed in a participatory learning mode.

After completion of the hearth session there is a follow up visit by facilitators to each household to observe how far the mothers are following the practices adopted at Positive Deviance Hearth Sessions.

The Nutrition Camp Manual serves as a standard Operating Procedures (SOP) for the community service providers like Anganwadi worker/ASHA worker (ICDS & H&FW) and community nutrition worker/volunteer. After explaining the core concept of 'Positive Deviance' that forms the basis of the nutrition camp, the manual approaches the instructions in two sections:

- a) Day wise description of activities for the 15-day camp with mothers of mild/moderately undernourished children. Each day one topic is chosen for discussion and learning which is a driving factor (causes) for undernutrition, followed by an activity related to it – like cooking, handwashing, etc.
- b) There are also some additional information for children who are severely undernourished and need to be treated at the rehabilitation centre in the health facility. Instructions to the facilitator for identification and referral is also included in the manual.
- c) Guidelines for counseling and monitoring behavior change of mother & growth of child has been included for standardization of the output.

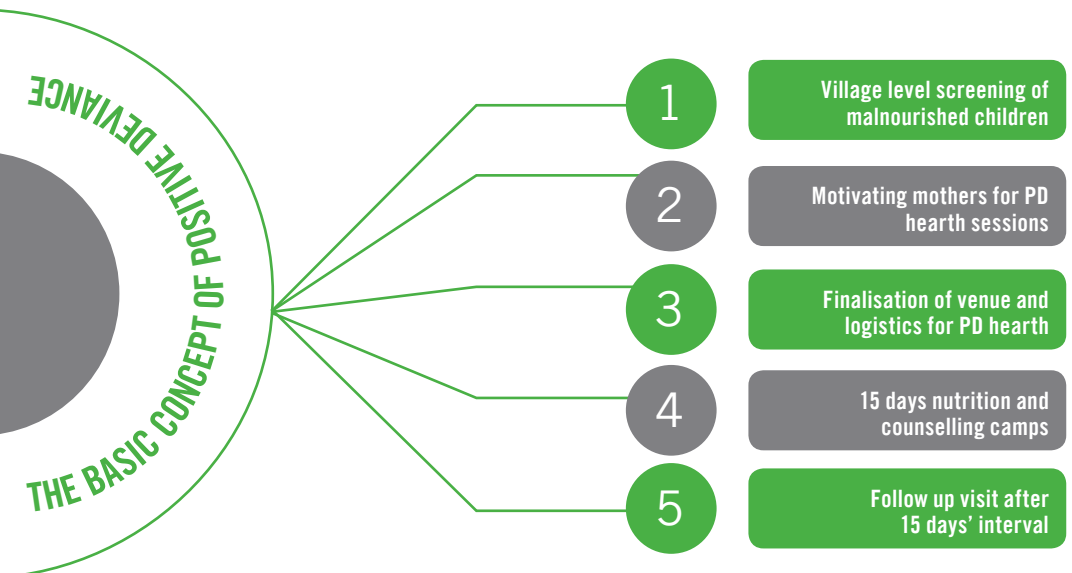
CONTEXT OF POSITIVE DEVIANCE HEARTH

The nutrition camp is based on the concept of 'Positive Deviance'. The term 'Positive Deviance' first appeared in nutrition research literature with the publication of a book entitled 'Positive Deviance in Nutrition' in 1990 by Marian Zeitlin, a professor of nutrition at Tufts University, USA, where she compiled a dozen surveys that documented the existence of 'Positive Deviant' children in poor communities who were better nourished than others. In this book, Zeitlin and her colleagues advocated for the use of this concept to address childhood malnutrition issues at the community level by identifying what was going right in the community in order to amplify it, as opposed to focusing on what was going wrong in the community and fixing it.

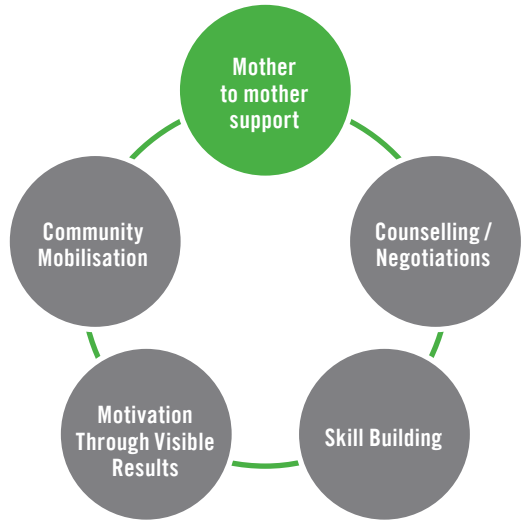
POSITIVE DEVIANCE HEARTH

- The nutrition camp is based on the Positive Deviance concept.
- A Positive Deviant child is a child (or children) in a poor community who is better nourished than others.
- The Positive Deviance approach encourages local communities to explore local solutions.
- Positive Deviance is a social and behaviour change approach.
- Evidence shows that a large number of SAM children without infection can be treated in their communities without being admitted to a health facility or therapeutic feeding centre.

The idea was experimented in the field in the early 1990's by Jerry Sternin, a visiting scholar at Tufts University, and his wife, Monique, who together operationalized



The 'Positive Deviance' approach encourages local communities to find out solutions.



the 'Positive Deviance' concept as a tool to promote behaviour and social change to organize various 'Positive Deviance'-centred social change interventions around the world. Sternins helped to institutionalize 'Positive Deviance' as a social change approach by demonstrating its successful application, first to childhood malnutrition, and then expanded its successful application to a variety of seemingly intractable problems in diverse sectors, such as public health, education, and child protection, among others.

The 'Positive Deviance' approach encourages local communities to find out solutions. 'Positive Deviance' Hearth interventions are community-based nutrition programmes for children who are at risk of protein energy malnutrition. This programme has been very useful with its localized relevance and cost effectiveness of rehabilitating malnourished children in developing countries like India. Evidences show that large number of Severe Acute Malnutrition (SAM) children can be

treated in their communities without being admitted to a health facility or therapeutic feeding centre.

The process starts with village nutrition data assessment and specific villages with high prevalence of malnutrition are selected for village-level meetings to explore possibilities of Positive Deviance/Hearth sessions. These meetings are organized with mothers of Identified children where the mothers with facilitator explore possibilities for a 'Positive Deviance' /Hearth session. Once consensus is arrived upon, the facilitating team with the local community mobilizes venue and other logistics required for the 'Positive Deviance'/Hearth session. The 'Positive Deviance'/Hearth session are a 15-days nutrition and counselling camp designed in a participatory learning mode. After completion of the hearth session there is a follow up visit by facilitators to each household to observe how far the mothers are following the practices adopted at Positive Deviance Hearth session.

NUTRITION CAMP ADAPTATION

OBJECTIVES

- To change care and Infant feeding practices of the family
- To build skills of mother/care givers towards better-child care practices
- To prevent future malnutrition in the community

ADVANTAGES

- Full community participation and peer learning of mothers
- Hands on skill development on cooking methods
- Convenient for mothers due to management in village
- Mascot for maintaining attendance motivated moth-

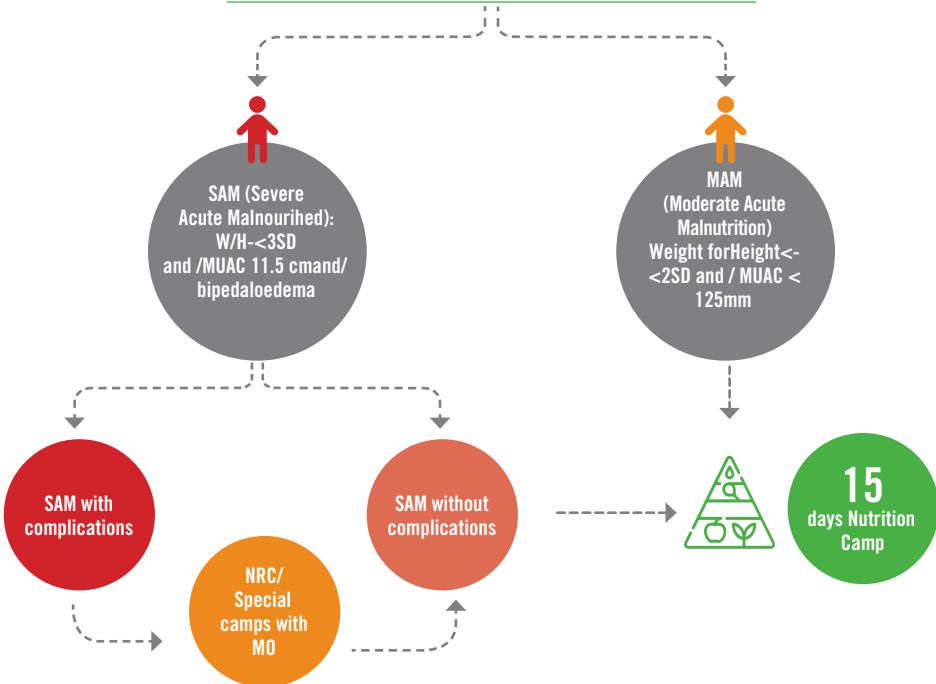
ers to attend camp every day for 15 days.

- Capacity building of community people in collaboration with ICDS & Department of Health & Family Welfare

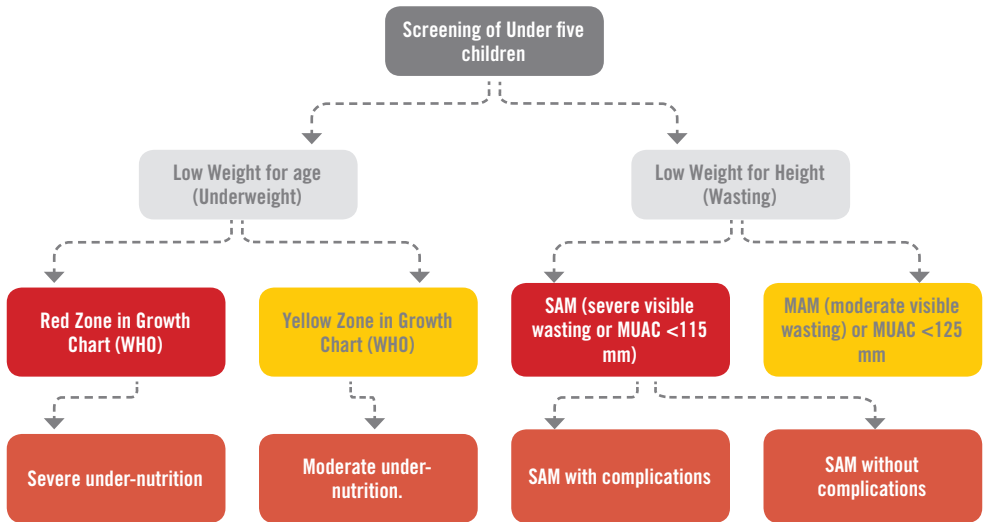
KEY TOPICS

- Use of locally available & uncultivated foods for preparation of weaningfood
- Address food fads & remove misconceptions
- Infant care, family spacing and hygiene practices
- Infant and young child feeding practices
- Prevention of communicable disease and worm infestation

IDENTIFICATION OF MALNOURISHED CHILDREN- SCREENING



WASTING UNDERWEIGHT CRITERIA FOR IDENTIFICATION OF MALNOURISHED CHILDREN



ACTIVITY BEFORE THE CAMP STARTS

- Prepare a list of all children in the village aged 6 months to 36 months
- Screen the children and record their growth (height and weight and other indicators of nourishment) in coordination with the health and nutrition workers.
- Informing mother and family about the nutritional status of the child
- Organize a community meeting to share the overall status of nutrition in the village and the objective of the Nutrition camp
- Planning for Nutrition camp- dates, venue, timings and community contributions for infant food recipe demonstrations.

MATERIAL AND DOCUMENTS

FOR THE CAMP

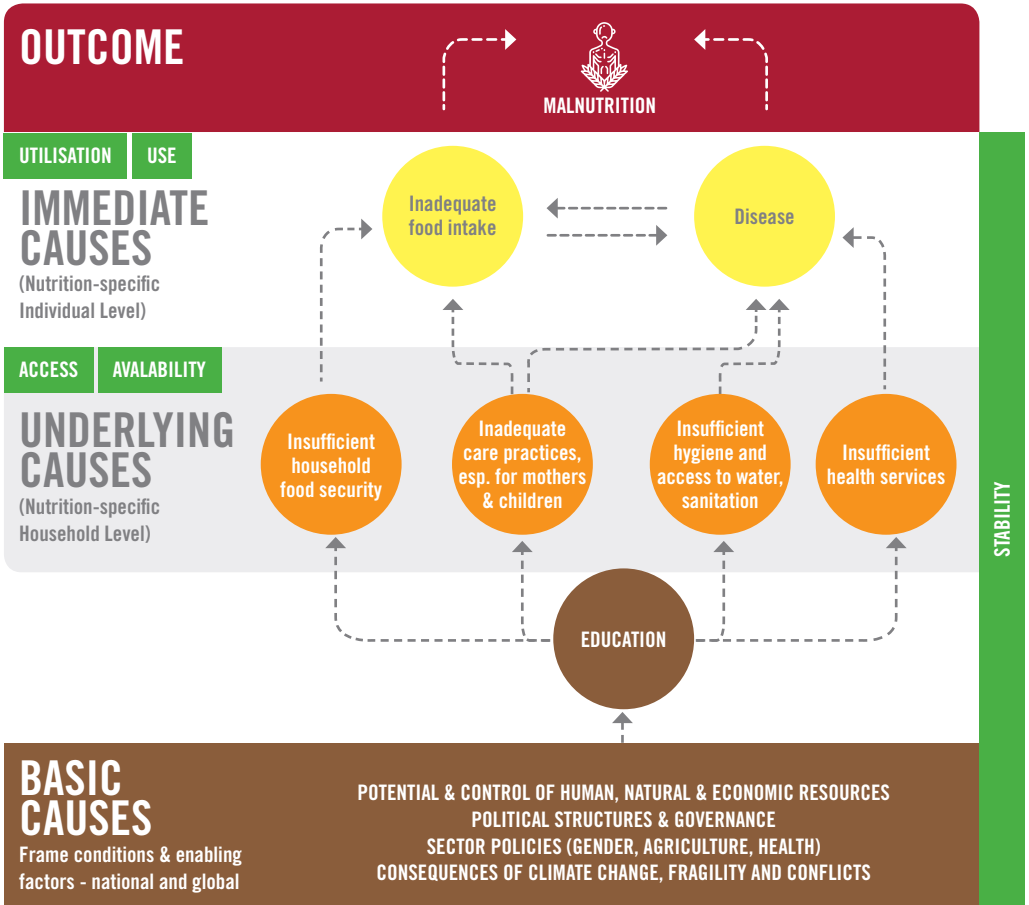
Create a package of the following materials & documents,

make sure it is there in the camp every day:

- Sample WHO growth charts for boys and girls – Blue and Pink
- Community growth chart
- Soap and arrangements for hand washing.
- Weighing machine with ‘Tare button’.
- Infantometer and Height board
- MUAC tape (if applicable).
- 110 cm Stick and a standard 5-10 kg weight for calibration.
- Sanitizer and cotton /tissue for disinfecting the instruments.
- Gloves & Mask for the enumerator/ measurement taker.
- Mother & Child health card (issued by local government health centre).
- All IEC used by the government for education on Mother & Child Health.
- Necessary registers, stationary for mascot and first aid box.

GENERAL DISCUSSION ABOUT SAM & MAM

CAUSAL MODEL OF MALNUTRITION

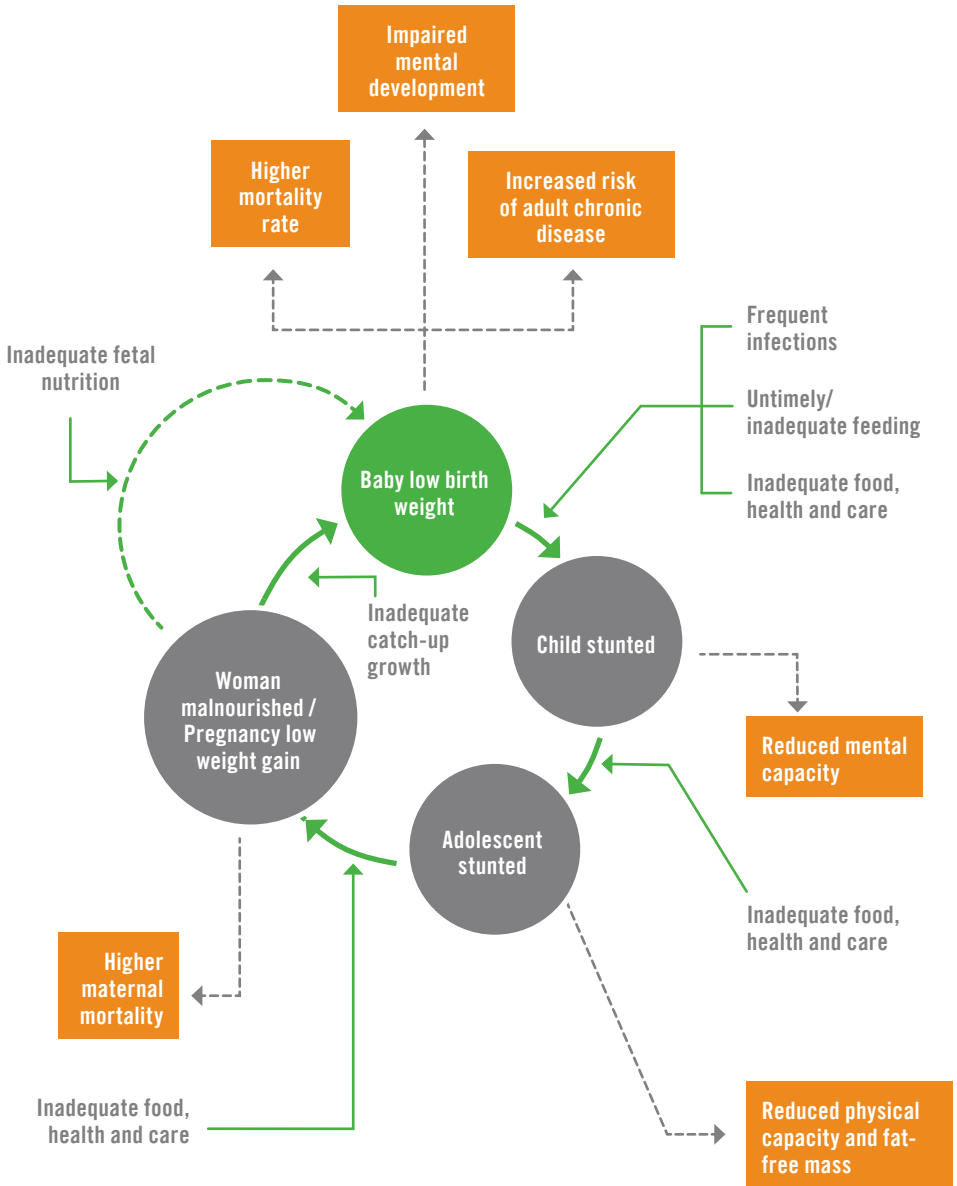


STEP 1

On the first day, mothers of the children (of the 6 to 36-month age-group) get registered in the stipulated AWC/village and assembled to discuss the following issues –

- Meaning of SAM and MAM children
- Criteria for being SAM or MAM children with the help of WHO Growth Chart
- Clinical signs and symptoms of SAM and MAM children
- Underlying factors that classify a child as a malnourished child

MALNUTRITION FRAMEWORK, UNICEF



- SAM children need to be referred to health center/NRC/MTC for therapeutic diets and treatment of infections.
- Extra allowance of supplementary food from ICDS for SAM MAM and severely under weight children.

STEP 2

Individual counselling based on Anthropometric measurements

- Registration of child
- Weight on day 1
- Start mascot

DAY

02

MONITORING MALNOURISHED CHILDREN AND TRACKING BEHAVIORAL PRACTICE OF MOTHERS

- A. Participatory monitoring tools have to be applied to identify behaviour and practices of the mother/care takers of SAM children
- B. Use of colour codes for ease of comprehension of the extent of

- knowledge and behavioral practices in respect of that indicators by the mother/care takers
- C. Contribute to creating awareness and empowering guardians



- 1 YES, PRACTICED REGULARLY
- 2 PRACTICED FREQUENTLY
- 3 NEVER PRACTICED
- 4 I DO NOT HAVE ANY IDEA ABOUT THIS



**Breakfast Menu: MILK
CHIDWA MIX (Rice flakes
with milk and banana)**

NUTRITIVE VALUE

Calories	: 288.5 Kcal
Protein	: 8.65 gm
Carbohydrate	: 51.7 gm
Calcium	: 253.5 micro-grams
Iron	: 5 micro-grams

Ingredients (per child):

- Chidwa : 1 medium bowl (25gm)
- Cow's milk : 1cup (200ml)
- Banana : 1 small (50gm)
- Sugar : 2 tbsp (10gm)

Recipe:

1. Boil the milk and then cool it.
2. Wash the rice flakes with water.
3. Add sugar and mashed banana to the rice-flakes and add to the milk and a semi solid weaning food would be prepared.

Preparation of Ready to use food at Home

NUTRITIVE VALUE PER 100 GM EDIBLE

PORTION

Calories	: 388.12 Kcal
Protein	: 15.83 gm
Carbohydrate	: 64.78 gm
Fat	: 7.35 gm
Calcium	: 302.51 mg
Iron	: 5.27 mg
Folic Acid	: 45 micrograms
Carotene	: 77.32 micrograms

100 gm or 5 tablespoon full of ready to use instant food mix nutri-mix may be given to children along with 20 grams of jaggery or sugar per day as afternoon food

Ingredients:

- Rice/Millet/wheat: 300gms
- Green gram/Lentils: 300 gms
- Groundnuts: 75 gms
- Sesame/Pumpkin Seeds: 75 gms

Preparation & storage:

- Roast all the ingredient, separately | Mix the roasted ingredients and grind it

thoroughly | Store in an air –tight container

- Best until 15 days from the date of preparation

Consumption:

Nutri-mix can be served with hot water or milk and jaggery as per taste

- Infants (6-12months) : 30gm/twice in a day
- Children (1-3years) : 60 gm/twice in a day
- Children (4-6years) : 100 gm/twice in a day

This can be also given to expecting women and nursing mothers

- Nursing mothers (0-6 month) : 200gm/twice in a day
- Nursing mothers (6-12 month) : 150gm/twice in a day
- Expecting/pregnant women : 100gm/once in a day

The camp facilitator should develop nutri-mix recipes as per local preferences of cereals, pulses and nut/oil seeds. The ingredients should be easily available, low cost and high shelf life.

Spot feeding will be initiated to ensure consumption of whole supplementary diet

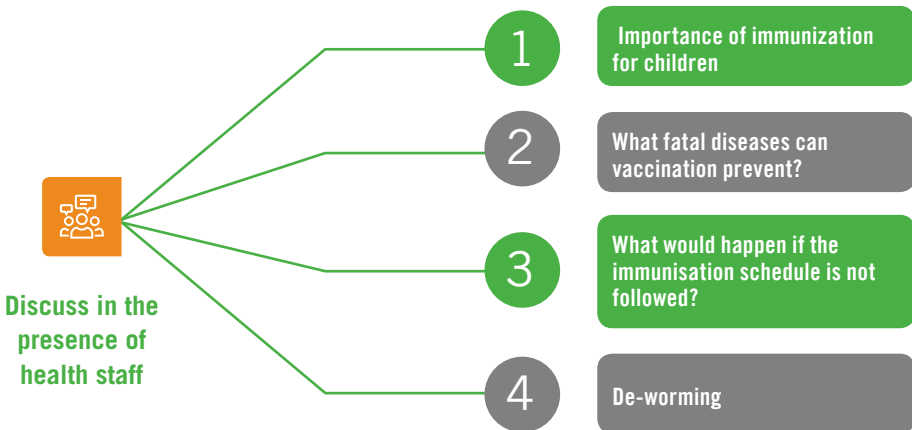
Mothers or caretakers of the children feed the baby carefully. They can thought about 'active feeding' using the toys in AWC to attract the child.

DAY

03

DISCUSSION ON IMMUNISATION SCHEDULE OF MOTHER AND CHILD TO PREVENT COMMUNICABLE DISEASES

Facilitator to keep the health card ready. This health card must be the card provided by the government and in the local language.



Motivation for community participation

External support is not always sufficient to address any problem. So, motivation of community for active participation for preparation of nutrient rich supplementary diet in at the camp is deemed to be essential for achieving the objectives of the child development programme.

Bearing this in mind, mothers, guardians and community, will be motivated under the proposed program to take some food ingredients voluntarily to the camp for enriching the recipe of the day which will help promote the growth of children.



**Breakfast Menu: EGG
PARATHA (Vegetable egg
pancake)**

NUTRITIVE VALUE

Calories	: 213 Kcal
Protein	: 9.55 gm
Carbohydrate	: 15.6 gm
Carotene	: 228.8 micro-grams

Ingredients (per child):

- Wheat flour : 1 cup (20gm)
- Egg : 1 (50gm)
- Onion, carrot and tomato : 10gm each
- Oil : 1 tbsp. (5ml)

Recipe:

- Refined flour and salt are mix well.

- Egg and water is poured in the flour and mixed well to make a soft dough.
- Onion and tomatoes are diced into small pieces and added to the mixture.
- Now heat the oil and spread it across the frying pan.
- Pour the mixture into the pan and fry like both sides.

DAY

04

INDIVIDUAL COUNSELLING SPECIAL NUTRITIONAL COUNSELLING USING IYCF CARDS



Feeding
sick baby
of more than
six month of
age

With the help of Infant and Young Child Feeding (IYCF) counselling cards it will be helpful for the mothers of children to understand the following topics:

- Process of breast-feeding
- Expression of breast milk and proper storage of milk for working mothers
- Exclusive breast feeding up to the age of six months
- Initiation of weaning food after 6 (Six) month
- Frequency, consistency and amount of weaning food given in addition to breast milk in respect to the age of the child



Breakfast Menu: SOOJI UPMA (Semolina with vegetables)

Ingredients (per child):

- Sooji (Semolina) : 1 cup (30 grams)
- Cowpea : 2 or 3 (5 grams)
- Tomato, potato and onion : 1 each (small, about 10gm each)
- Pumpkin /carrot : 1 piece (10 about grams each)
- Groundnut oil : 10 grams
- Oil : 1 tbsp (5ml)
- Water : 2 cups.

NUTRITIVE VALUE

Calories	: 213.7 Kcal
Protein	: 6.22 gm
Carbohydrate	: 27.3 gm
Carotene	: 225.6 micro-grams

Recipe:

- Sooji is roasted in an empty pan until its colour changes to light brown.
- Vegetables are diced into small pieces and cooked in little oil until they soften.
- Then the sooji and salt are added. This is cooked for 2-3 minutes with 2 cups of water until the mixture becomes thick and ready to be served.

DAY

05

DISCUSSION ON PERSONAL HEALTH & HYGIENE PRACTICES IN DAILY LIFE

Personal Health and hygiene practices will be discussed with the mothers of the children to motivate them to maintain proper behavioural practices. This is especially important because bio availability of nutrients is reduced due

to poor health and hygiene practice. Repeated infections like diarrhea, amebiasis , worms, etc. can adversely effect the body metabolism. These can, in turn, cause malnutrition.



Use safe water and ensure good compound hygiene


Discussion

1

Proper steps of hand washing

2

Home based sterilization and disinfection of drinking water

3

When is hand washing essential?

4

Maintenance of household cleanliness



**Breakfast Menu: MILK
PUFFED RICE MIX
(Puffed rice with milk
and banana)**

NUTRITIVE VALUE

Calories	: 283.2 Kcal
Protein	: 8.87 gm
Carbohydrate	: 50.83 gm
Calcium	: 254.2 mg
Iron	: 6.65 mg

Ingredients (per child):

- Puffed rice : 1 medium bowl (25gm)
- Cow's milk : 1cup(200ml)
- Banana : 1 small (50gm)
- Jaggery : 2 tbsp (10gm) optional, banana has enough sweetness.

Recipe:

- Milk is boiled and cooled.
- Then the puffed rice, jaggery and the mashed banana are added to the milk.
- This becomes semi solid weaning food.

DAY

06

DISCUSSION ON PRENATAL AND POSTNATAL NUTRITIONAL AND HEALTH CARE PRACTICES AMONG THE COMMUNITY



The mothers are divided into three mother groups to discuss three separate issues:

1

Group A:
What do mothers do and what do they eat during the prenatal period

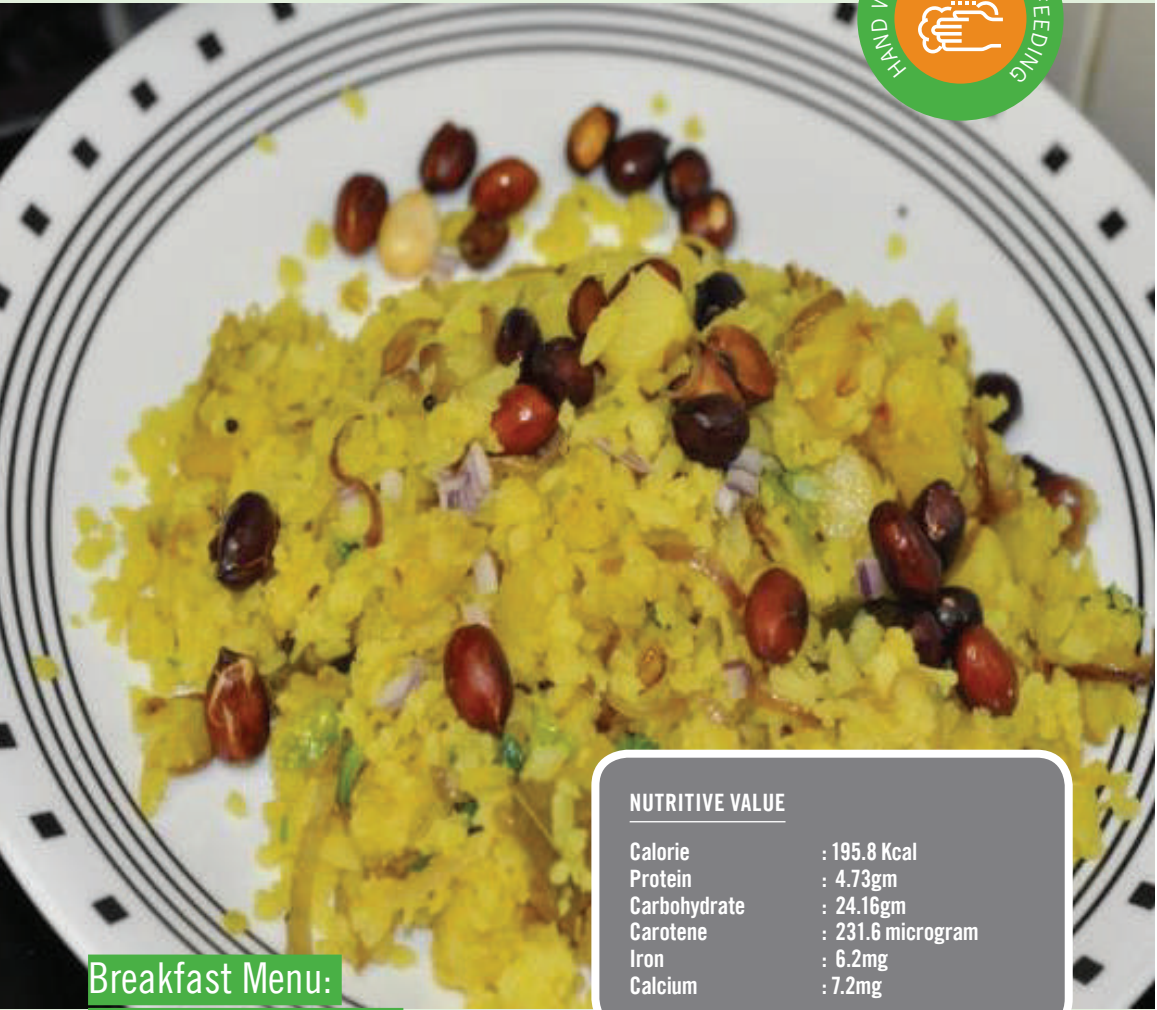
2

Group B:
What do mothers do and what do they eat during their postnatal period

3

Group C:
What are the government schemes available for pregnant women

- Mothers of children will be divided in three separate groups, with the mothers of severely under nourished children evenly dispersed through all the three groups.
- Mothers of each group will discuss among themselves on the specific topic and facilitator will document the findings.
- The facilitator will facilitate the group discussions with each group.



Breakfast Menu:

CHIRWA PULAV (Rice flakes with vegetables)

NUTRITIVE VALUE

Calorie	: 195.8 Kcal
Protein	: 4.73gm
Carbohydrate	: 24.16gm
Carotene	: 231.6 microgram
Iron	: 6.2mg
Calcium	: 7.2mg

Ingredients (per child):

- Chirwa (Rice flakes) : 1 cup
- Cowpea : 2 or 3
- Tomato, potato, onion : 1 each (small)
- Pumpkin /carrot : 1 piece (20 grams)
- Groundnut oil : 10 gm (two tea-poons)
- (Turmeric and salt to taste)

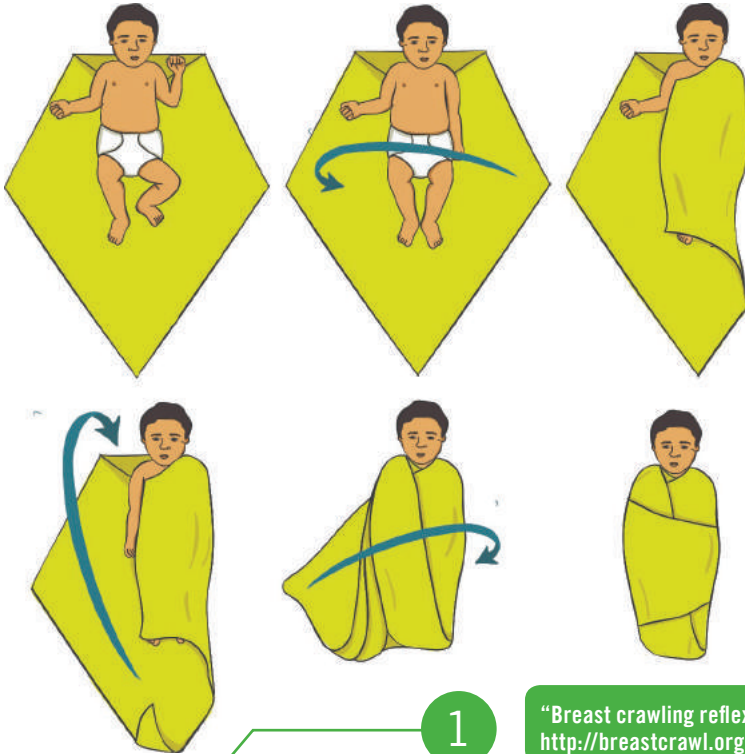
Recipe:

- Wash the chirwa/poha with water then spread in an empty pan for drying.
- Cut all vegetable into small pieces and fry with oil until they turn soft.
- Then pour the chirwa and turmeric and salt. Cook for 5 to 7 minutes with a small quantity of water.
- Serve when the mixture is tightened.

DAY

07

DEMONSTRATION OF NEW BORN CARE PRACTICES



Discussion

1

“Breast crawling reflex”-
<http://breastcrawl.org/>

2

Early initiation of breastmilk
(within 30 minutes of birth)

3

Demonstration of wrapping
of new born to prevent
hypothermia

4

Misconceptions regarding the
care of new-borns,
e.g. bathing, pre-lacteals,
umbilicus, etc.



**Breakfast Menu: MILK
BREAD MIX (Bread with
milk and banana)**

NUTRITIVE VALUE

Calorie	: 263.25 Kcal
Protein	: 8.95 gm
Carbohydrate	: 45.3 gm
Calcium	: 253.5 miligrams

Ingredients (per child):

- Bread toast : 2 slice (25 grams)
- Cow's milk : 1cup(200ml)
- Banana: 1 small (50grams)
- Sugar : 2 tablespoons (10grams) (optional)

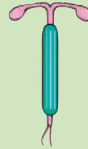
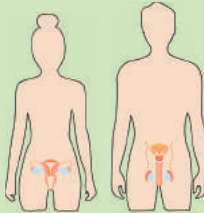
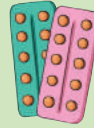
Recipe:

- Boil and then cool the milk.
- Add toasted bread, sugar and mashed banana to the milk to prepare and serve a semi solid weaning food.

DAY

08

FAMILY PLANNING METHODS



Family planning improves health and survival



Discussion With the presence of Health staffs

1

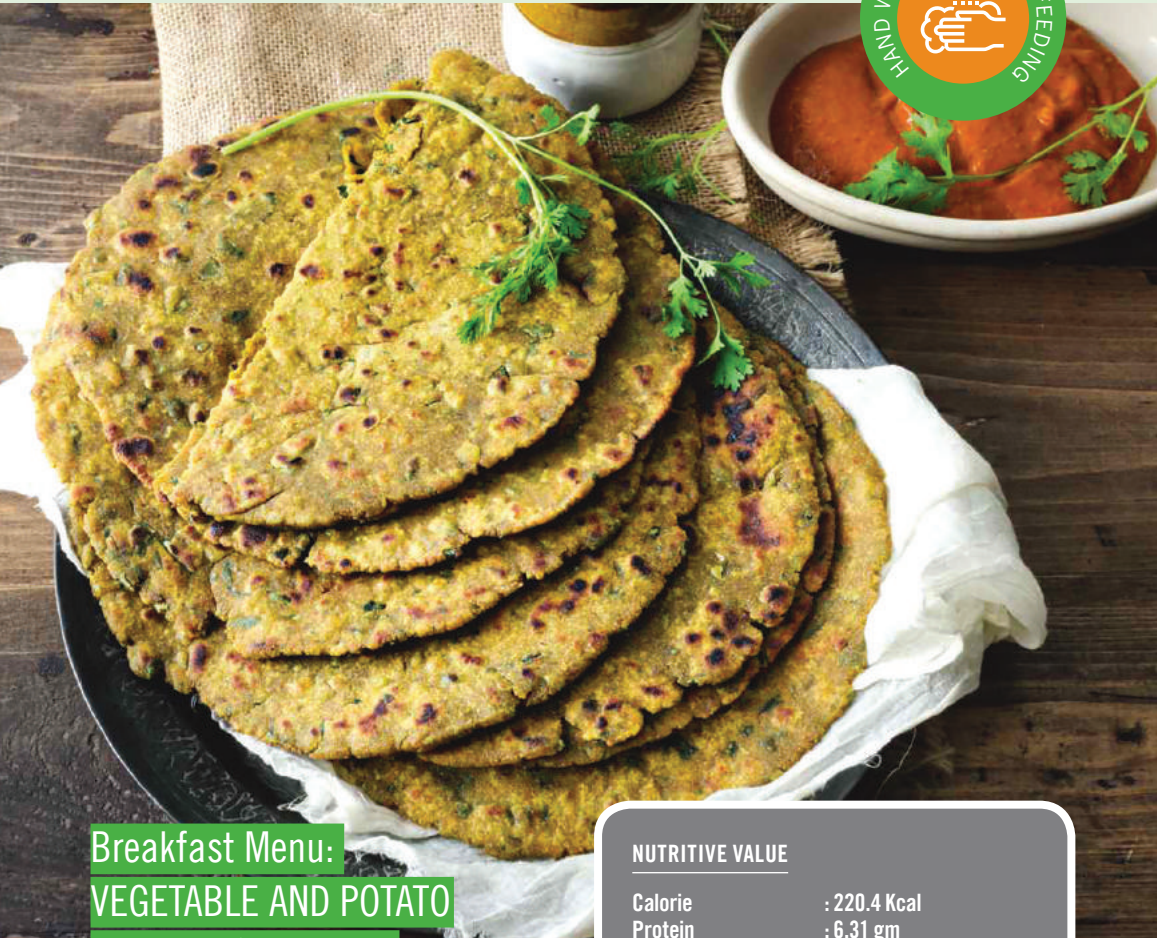
Importance of Birth spacing

2

Types of family planning measures

3

Government schemes and services for family planning



Breakfast Menu:
VEGETABLE AND POTATO
PARATHA (Vegetable
potato pancake)

NUTRITIVE VALUE

Calorie	: 220.4 Kcal
Protein	: 6.31 gm
Carbohydrate	: 33.16 gm
Calcium	: 156.6 mg
Iron	: 10mg
Carotene	: 1695 microgram

Ingredients (per child):

- Wheat flour : 1 cup
- Boiled potato, onion, carrot and tomato : 1 each
- Leafy vegetables (cauliflower leaves/ ipomea (sweet potato)/ moringa) : 25gm
- Oil : 1 tablespoon

Recipe:

- Mix well the flour and salt.
- Boil the vegetables and (together with the broth of the boiled vegetables) add to the flour. Knead this to make it a soft dough.
- Pour the oil on a frying pan and spread it all over the pan. Pour the mixture on the pan and fry like paratha both the side.

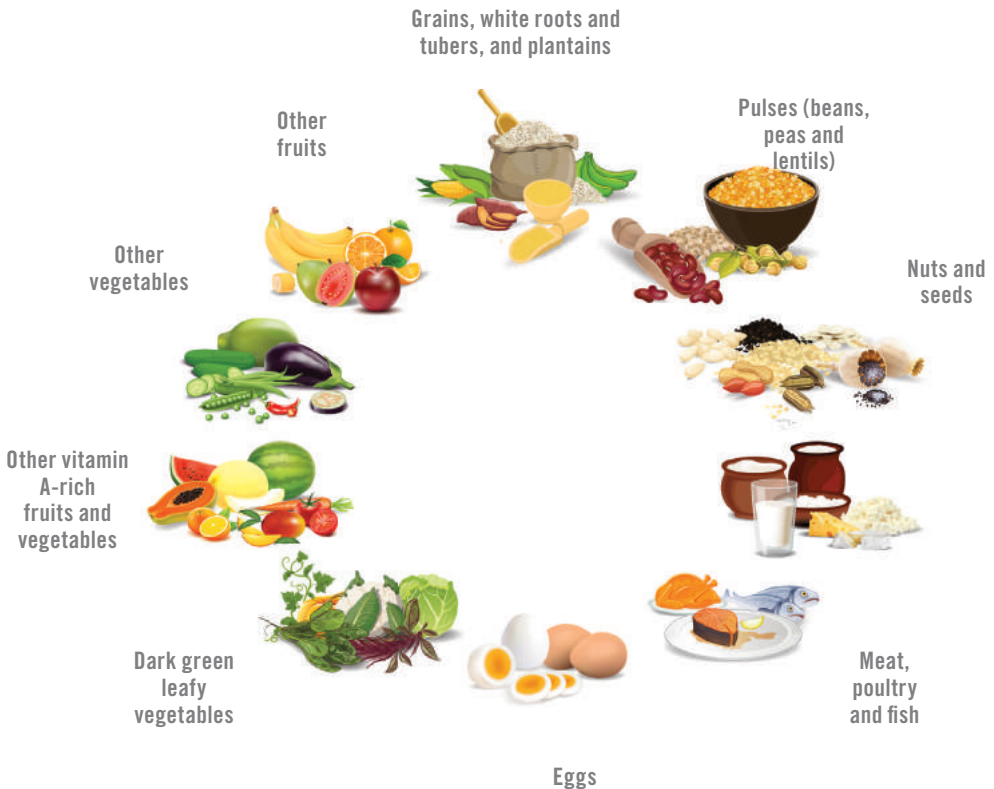
DAY

09

BALANCED DIET AND FOOD GROUP FOR FAMILY

The mothers of malnourished children are asked (on the previous day, Day 8) to fetch any locally available raw food items from their homes to the camp.

The Nutritionist will ask the mothers to put the food items collected on the floor/ mat and ask to arrange them according to the food group chart.



At least 5 out of 10 food groups have to be consumed every day

- Identification of locally available, low cost but not-so- familiar food through participatory methods and documentation.
- Modification of local recipes with locally available nutrient rich not-so-familiar foods.
- Nutritional benefits of not-so-familiar low-cost foods
- Prevention of nutrient loss during cooking



Breakfast Menu: LAUKI PAYASAM

Ingredients (per child):

- Lauki : 40 gm
- Cow's milk : 2 cups
- Sugar : 2 tablespoons

Recipe:

- Boil the milk.
- Cut the Lauki into small pieces and add

NUTRITIVE VALUE

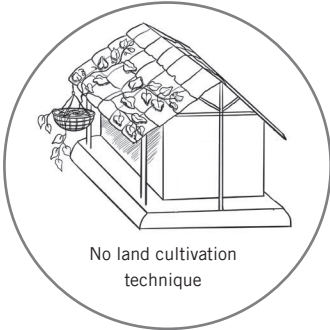
Calorie	: 302Kcal
Protein	: 12.8 gram
Carbohydrate	: 21.84 gram
Calcium	: 480mg

- these to the boiling milk.
- After a while, add sugar and stir mix into milk.
- Cook for 10- 15 minutes until the Lauki become soft and ready to serve.

DAY

10

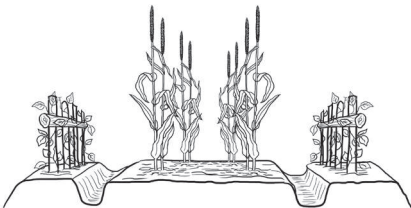
CONCEPT ON NUTRITION GARDEN



No land cultivation technique



Water conservation and bio fertilizer preparation



Cultivation bed preparation



Utilisation of Neem as insecticide



NUTRITIVE VALUE

Calorie	: 302Kcal
Protein	: 12.8 gram
Carbohydrate	: 21.84 gram
Calcium	: 480mg

**Breakfast Menu: EGG
PAN CAKE**

Ingredients (per child):

- Wheat flour : 50 grams
- Egg : 1
- Coriander leaves : 10 gm
- Oil : 2-3 drops
- Salt to taste

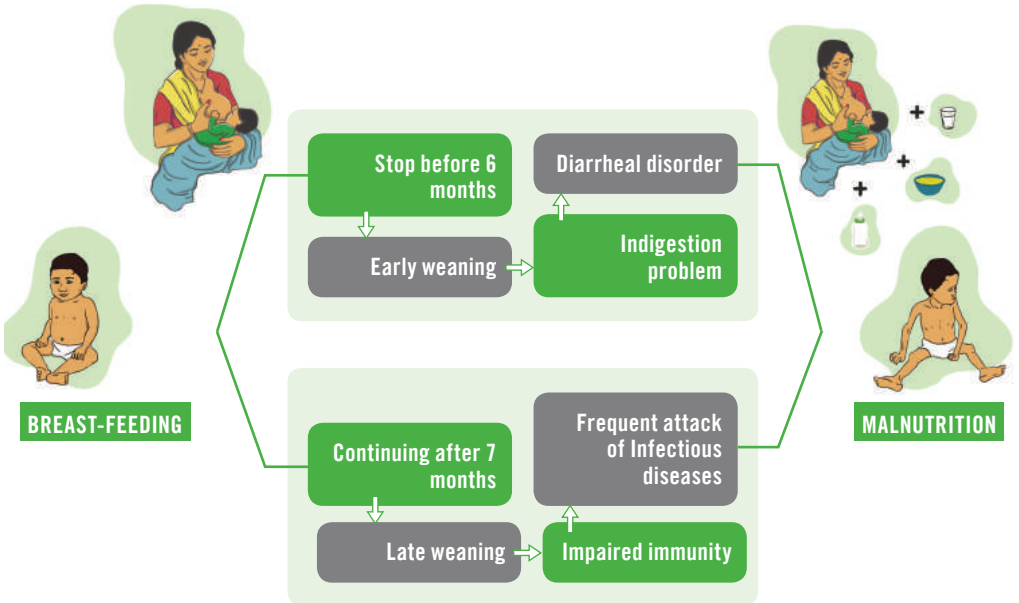
Recipe:

- Whip together the egg, wheat flour, salt and the chopped coriander.
- Put 2-3 drops of oil on a hot tawa and pour two table spoons of mixture and spread out into a small circular shape. When done, remove from pan. Repeat till all the whipped batter is used and serve with sweet chutni.

DAY

11

DISCUSSION ON EFFECTS OF EARLY WEANING AND LATE-WEANING



Early weaning and late weaning practices are two of the most important causes of malnutrition of children which ultimately enhance infant morbidity and mortality.

Early Weaning

The primary reasons for weaning babies earlier were wrong perception of insufficient of milk or refusal babies to suckle. Mothers start early weaning practice with traditional gruels; those less nutritious than breast milk. Subsequently the child may suffer from diarrhoea and

other infectious diseases. Ultimately the child develops under-nutrition.

Late Weaning

After the baby is 6 months old, breast milk is by itself no longer sufficient. The baby needs nutrients from added food as well as the breast milk to able to grow properly. But due to lack of awareness or scarcity of food or due to faulty practices, mothers continue breast feeding after 8-9 months which cause growth retardation as well as impaired immunity of the children.



Breakfast Menu:
RICE FLAKES WITH
CURD AND MANGO

NUTRITIVE VALUE

Calorie	: 147.8 Kcal
Protein	: 2.53 grams
Carbohydrate	: 27gram
Calcium	: 63.2 milligram
Carotene	: 822.9 microgram

Ingredients (per child):

- Rice flakes : 1 medium bowl (25gm)
- Curd : 2 tablespoon (10gm)
- Mango : Half (30gm)

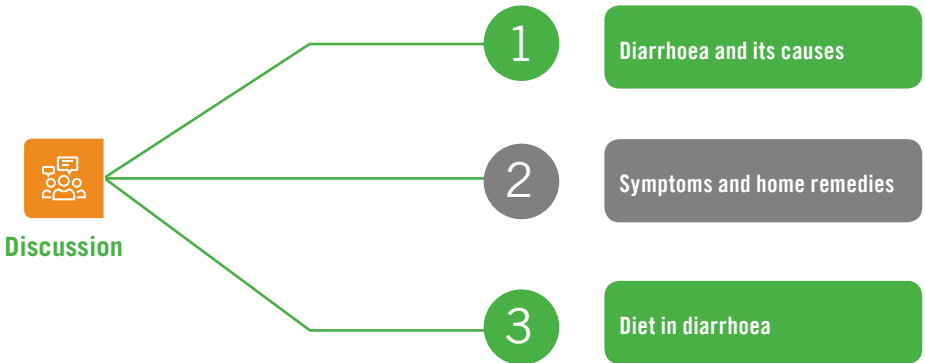
Recipe:

- Rice flakes, curd and mango are mixed well to prepare a semi solid weaning food.

DAY

12

HOME MADE AND COMMERCIAL ORS PREPARATION AND ITS NEED....



BREAST FEEDING IS CONTINUED WITH INCREASED FREQUENCY IF THE CHILD IS BREASTFED

Signs of Dehydration in Infants & Children

- Plays less than usual.
- Urinates less frequently (for infants, fewer than six wet diapers per day)
- Parched, dry mouth.

- Fewer tears when crying.
- Sunken soft spot of the head in an infant or toddler.

If diarrhoea continues, give ORS after each loose stool to replace fluid and salt losses:

For children less than 2 years, give approximately 50 ml after each loose stool

12TH DAY : SUPPLEMENTARY NUTRITION



NUTRITIVE VALUE	
Calorie	: 282Kcal
Protein	: 9.61grams
Carbohydrate	: 33.81 grams
Calcium	: 360mg
Iron	: 10 mg
Carotene	: 1890 microgram

Breakfast Menu:
GAJAR HALWA (Carrot with hot milk)

- Ingredients (per child):**
- Carrot : 1 medium (100 gm)
 - Cow's milk : 1½ cup (300ml)
 - Sugar : 2 tablespoon
 - Oil : 1tbsp

- Recipe:**
- Boil the milk and leave it to cool.
 - Finely grate the carrot and sauté for five minutes in a pan with very little oil.
 - Pour the milk on the carrot and cook for 8 to 10 minutes. Add sugar when the carrot is boiled and has absorbed all the milk and stir for 1 min for mixing.
 - Serve to the child.

DAY

13

TRACKING OF NUTRITIONAL STATUS OF MALNOURISHED CHILDREN



Children will be monitored and positive or negative changes have to be documented in the second phase of anthropometric measurement (Height, weight and MUAC).

13TH DAY : SUPPLEMENTARY NUTRITION



Breakfast Menu:
EGG TOAST

Ingredients (per child):

- Bread slice : 1(10gm)
- Egg : 1
- Onion and tomato : 20gm
- Oil : 1tsp

NUTRITIVE VALUE

Calorie	: 140 Kcal
Protein	: 7.13 gram
Calcium	: 360 mg
Iron	: 10 mg
Carotene	: 249.85 microgram

Recipe:

- Cut onion and tomato into small pieces and mix these with the raw egg batter and pour this over the sliced bread.
- Fry the bread soaked in the batter in a frying pan. Serve hot.

DAY

14

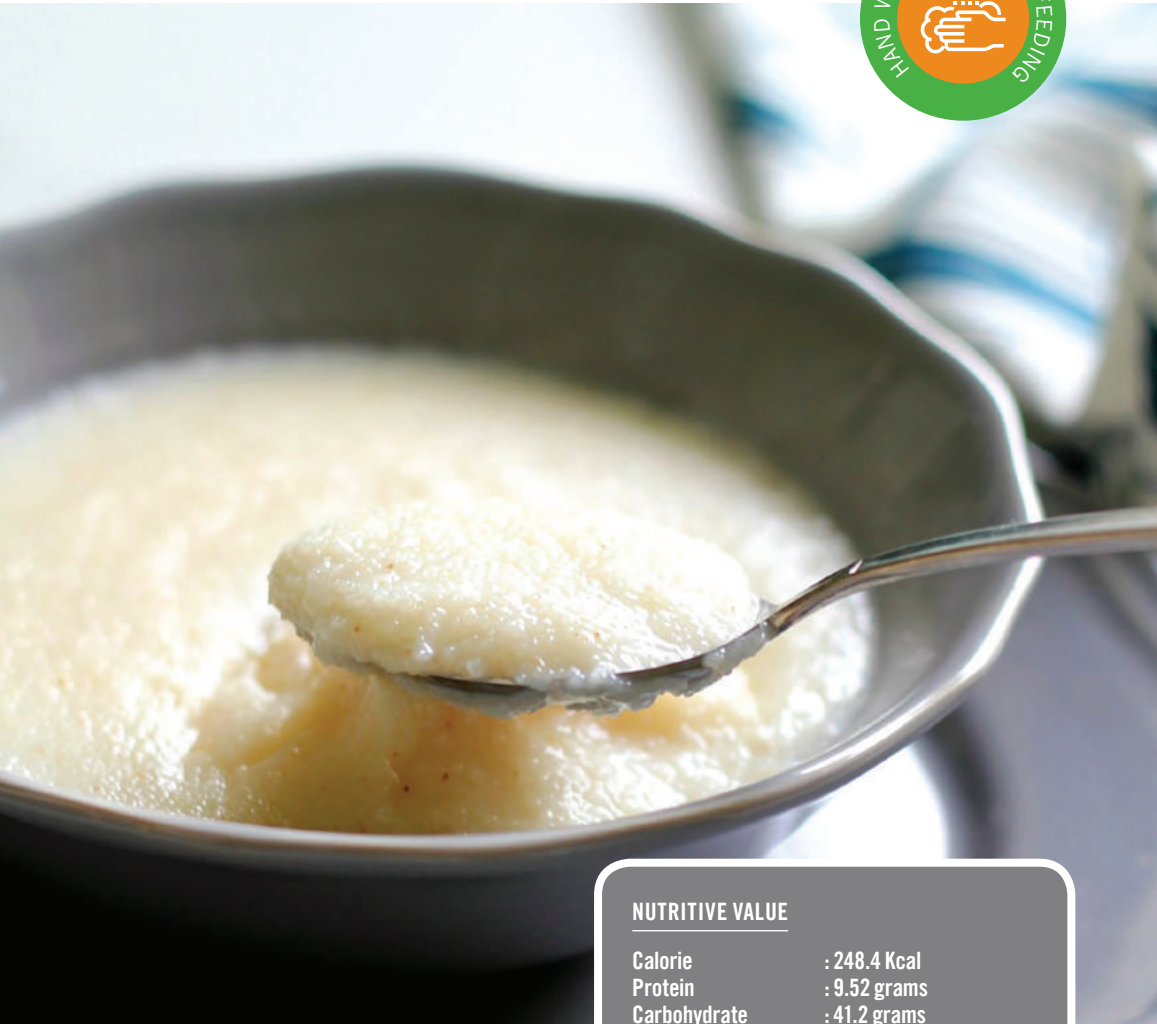
2ND ROUND OF BEHAVIOURAL PRACTICES REGARDING INFANT FEEDING AND CARE OF CHILDREN

- 1 YES, PRACTICED REGULARLY
- 2 PRACTICED FREQUENTLY
- 3 NEVER PRACTICED
- 4 I DO NOT HAVE ANY IDEA ABOUT THIS

Behavioural changes so far brought about in last 11 days programme will be monitored through Participatory Impact Assessment (PIA) and documented properly for addressing immediately.



13TH DAY : SUPPLEMENTARY NUTRITION



NUTRITIVE VALUE

Calorie	: 248.4 Kcal
Protein	: 9.52 grams
Carbohydrate	: 41.2 grams
Calcium	: 240mg

Breakfast Menu:
SEMOLINA PORRIDGE

Ingredients (per child):

- Semolina (Sooji): 1 medium bowl
- Cow's milk: 2 cups
- Sugar-2tbsp

Recipe:

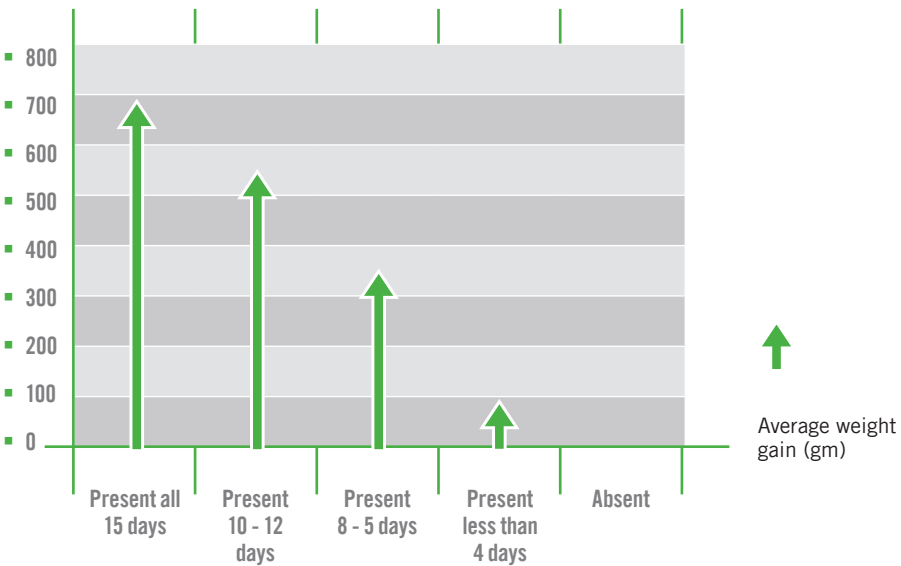
- Boil and then cool the milk.
- In another pan, fry the Sooji till its colour changes to brown.
- Poured the Sooji into the milk and cook for 5-6 minutes, add sugar and stirred till a semi-solid consistency is arrived at. Serve as a weaning food.

DAY

15

SHOWCASING CASE STUDIES

Average weight gain(gm) after Nutrition Camp



1

Positive factors related to the improvement of growth patterns of under - nourished children will be presented before the mothers for enrichment their knowledge, attitude and confidence.

2

Mothers of well nourished children/Positively deviant children will share their stories on infant care and feeding.

13TH DAY : SUPPLEMENTARY NUTRITION



NUTRITIVE VALUE

Calories	: 265.65 Kcal
Protein	: 9.88 gram
Carbohydrate	: 34.3 gram
Calcium	: 37.5 mg
Fat	: 14.8 grams
Carotene	: 54.1 microgram

Breakfast Menu:
SAGO KHICHDIH

Ingredients (per child):

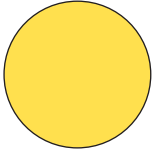


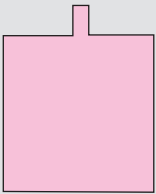






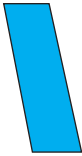
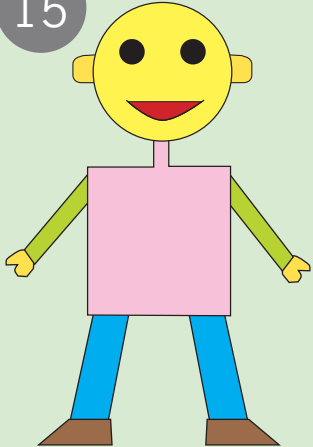



- Sago : 1 medium bowl
- Lentil and Bengal gram : 20 grams
- Cowpea : 2 to 3
- Tomato, potato, onion : 1 each (small)
- Pumpkin / carrot : 1 piece (20gm)
- Groundnut : 10 gram

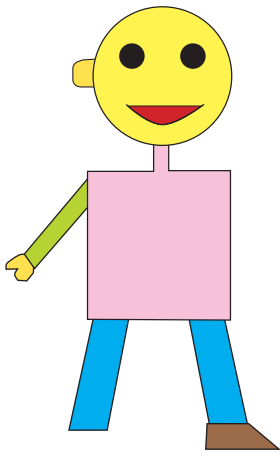
Recipe:

- Soak the Sago in water overnight.
- Cut vegetables into small pieces and sauté with the groundnut.
- Boil the vegetables, lentil and Bengal gram for five minutes and then add the sago.
- Cook further for 8-9 minutes to prepare the kichdi and serve hot.

MASCOT PREPARATION

■ A part of the body gets added daily, till finally, a full body takes shape by Day 15

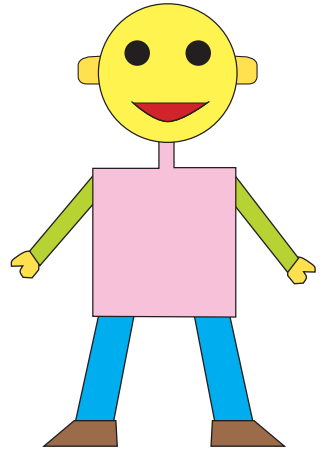
<p>DAY 1</p> 	<p>DAY 7</p> 	<p>DAY 12</p> 	
<p>DAY 2</p> 	<p>DAY 8</p> 	<p>DAY 13</p> 	
<p>DAY 3</p> 	<p>DAY 9</p> 	<p>DAY 14</p> 	
<p>DAY 4</p> 	<p>DAY 10</p> 	<p>DAY 15</p> 	
<p>DAY 5</p> 	<p>DAY 6</p> 		<p>DAY 11</p> 



Incomplete body shape as the mother was absent on the 4th, 8th & 12th day



Complete body shape as the mother is present all through the 15-day camp



Objectives

1

Mascot preparation is done for active participation of the mother

2

Different coloured body parts (paper cutting) of the baby are given to the mothers at the camps and mothers are asked to prepare a coloured body shape of her own child with a particular part in each day when she is present in the camp.

3

A mother will miss the chance to stick a particular part on the day when she is absent. That will mean that she cannot make a full picture of the body shape if she is absent for any day. This will strike in her mind and motivate her to come to attend the camp regularly.

EXPECTED OUTCOME OF THE 15-DAY CAMP

A satisfactory weight-gain after attending 15-day nutrition camps

- Average weight gain should be Greater than 500 gm
- Maximum weight gain should be 800-1000 gm
- Minimum weight gain should be Greater than 100 gm
- Improvement of Nutritional status may be severe malnutrition to moderate malnutrition or moderate malnutrition to normal

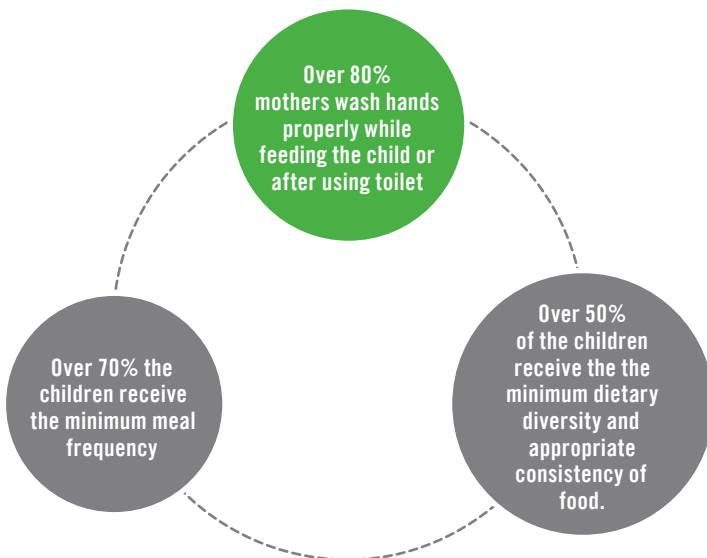
Greater than 60% of malnourished children under age 5 years should improve nutritional status

- Less than 30% malnourished children under age 5 years may remain in same
- Less than 10% malnourished children under age 5 years may deteriorate from the current nutritional status

Change in dietary diversity of the weaning food of the children

- Over 80% of malnourished children under age 5 years should achieve High DDS
- Over 15% of malnourished children under age 5 years may achieve medium DDS
- Under 5% of malnourished children under age 5 years may have Low DDS Dietary Diversity Score

IDEAL CHANGE IN BEHAVIOURAL PRACTICES OF THE MOTHERS OF CHILDREN



NUTRITION COUNSELLING CARD FOR MALNOURISHED CHILDREN



Name of the child:

Age:

Sex:

Father's name:

Name of the village:

AWC no:

Nutrition Status:

Weight(kg):

Height(cm):

MUAC(mm):

Health Status:

Diet diversity Score:

Frequency of meal per day:

Amount of food intake at a time: Half of small bowl/
Small bowl full/Half of big bowl/Full bowl(big)

Result of Appetite test:

Recommendation by Nutritionist:

Meal Frequency



1

2 or more times for breast-fed infants 6-8 months

2

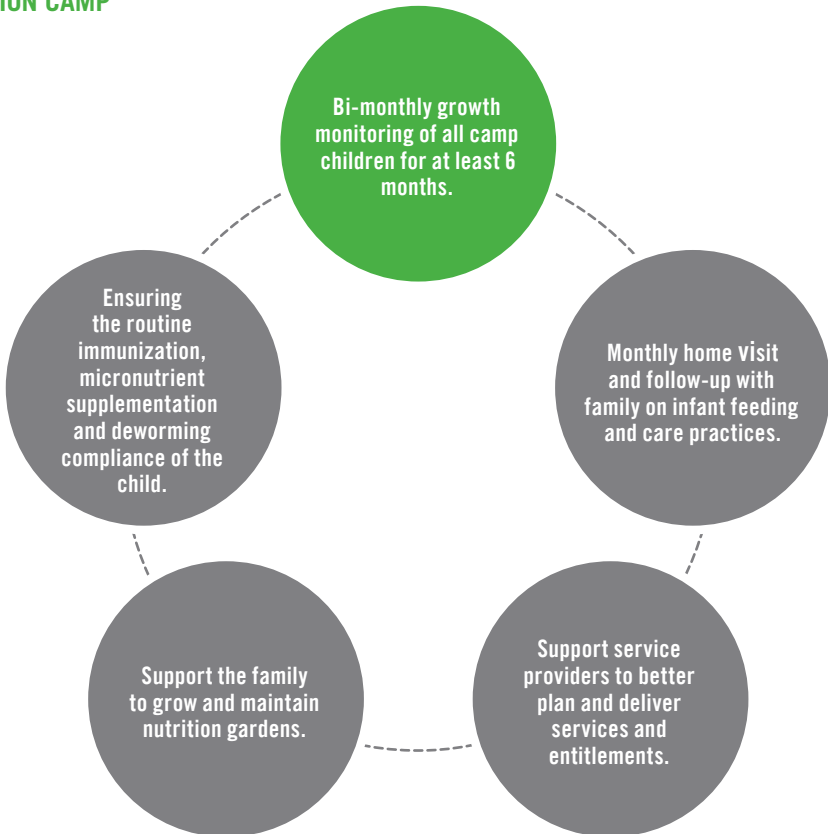
3 or more times for breast-fed children 9-23 months

3

4 or more times for non-breast-fed children 6-23 months

Breastfed children 6-23 months who received solid, semi-solid or soft foods the minimum number of times or more during the previous day

ACTIVITIES AFTER THE 15-DAY NUTRITION CAMP





02

This is manual
number 2 in
a series of 5
manuals



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