

CG/2020/Nutrition/94

03 April 2020

Mr. Siddhartha Komal Pardeshi
Secretary,
Department of Women and Child Development
Naya Raipur

Sub: Suggestions on initiating key nutrition interventions by ICDS during and after 'lockdown'

Dear Siddhartha,

Every emergency affects children and women the worst. Globally, it is found that the nutritional status of children (in terms of wasting) and women (including anemia) dips after disasters, especially in poor and vulnerable households. The nutritional status of women and children in the state might have been affected by COVID-19, the 'lockdown' and disruption of nutrition services of anganwadi centers.

We suggest the following 9 measures to address the nutritional services of children and women during and after the lockdown period.

- **Orient families on nutrition and prevention of COVID-19:** During the lockdown period till 14 April, anganwadi workers will visit families to deliver take home ration (for pregnant women, lactating mothers and children of 7 months-3 years) and ready-to-eat food (for children of 3-6 years). Anganwadi workers could educate mothers on: a) how to prevent COVID-19; b) washing hands with soap frequently; c) breastfeeding children with hygiene; and d) giving semi solid food to children after 6 months.
- **Orient anganwadi workers on COVID-19 prevention:** All anganwadi workers, supervisors, CDPOs and DPOs should be oriented on prevention of COVID-19 and promotion of the practice of handwashing with soap by children. UNICEF could develop module and orient the state-level master trainers. On-line orientation could also be explored.
- **Hold state-wide "Wajan Tohar"/growth monitoring:** It is important to conduct growth monitoring of all children below 6 years in the state, to assess their nutritional status. A mass screening drive, 'Wajan Tyohar', could be initiated from 4 to 15 May 2020, where all children are weighed and height measured. This will help the department to address the issue of wasting (malnutrition) among children.
- **Conduct SAM screening and management:** Emergencies lead to severe acute malnutrition (SAM) among children. Wajan Tyohar, will identify children with SAM and SAM children with medical complications could be referred to NRCs. Other SAM children without any medical complication, could be provided double ration (Ready-to-eat THR) and mothers could be counselled with the help of ILA Take away.
- **Initiate Vitamin A supplementation (VAS) in May/June:** Department could request NHM and Nutrition International to initiate the VAS round for children of 6-59 months in May-June (instead of scheduled round in July). Vitamin-A builds the immunity of children against diseases and it is a global practice adopted after a disaster.

- **Introduce hot-cooked meal for children of 7 months- 3 years:** Department could provide hot-cooked meal for children 7 months- 3 years from May, to improve the nutritional status of children.
- **Strengthen maternal nutrition and VHSND:** As nutritional status of pregnant women, lactating mothers and adolescent girls are likely to be adversely affected by lockdown, anganwadi workers should coordinate with ANM and Mitani to strengthen VHSND and to ensure gestational weight gain and micronutrient supplementation, along with provision of hot-cooked meal.
- **Establish handwashing facility in all anganwadi centers:** Chhattisgarh could set an example by establishing hand washing facility with soap and water, in all anganwadi centers in the state.
- **IYCF and emergency:** All ICDS field functionaries should be trained on nutrition in emergency and on IYCF practices during emergencies. UNICEF could support in creating pool of resource persons which in turn can coordinate with districts for training of AWWs and supervisors.

UNICEF is prepared to provide technical support to the Department in all the areas mentioned above.

Regards



Job Zachariah,
Chief of Field Office