

# Anemia Muk Bharat Program- an Intensified Effort to Tackle Anemia

Practice Insight



## Introduction

The National Health Policy of India (2017) recognizes adverse effects of anemia on the population and national productivity. Maternal health, child health and adolescent health are some of the key areas where the impact has been most severe. NFHS-4 showed a high burden of anemia in the country with a prevalence of 53.4% among children under five years of age and 49.7% prevalence among women of reproductive age. The first phase of NFHS-5 shows increased prevalence of anemia among women and children in 16 out of 17 states covered in the survey.

The Government of India (GoI) has been tackling anemia through Iron and Folic Acid (IFA) supplementation for various sensitive age groups through programs such as National Iron Plus Initiative (NIPI). In order to intensify the efforts, the GoI launched the Anemia Muk Bharat (AMB) Program in 2018 as a part of the POSHAN Abhiyaan with an ambitious target to reduce anemia by 3 percent per annum. AMB program adopts a 6\*6\*6 strategy comprising six beneficiaries, six interventions and six institutional mechanisms. The program aims to provide a multi-pronged approach to tackle anemia and a clear road map through structured operational guidelines for focused quality interventions. This compendium was designed to capture learnings and innovations from various states on AMB implementation.



Children 6-59  
Months



Children 5-9  
Years



Pregnant Women



Adolescent Girls and  
Boys (15-19) yrs



Women of  
Reproductive Age



Lactating Women



## Beneficiaries

# Anemia Mukt Bharat

6X6X6 Strategy

## 6

## Interventions



Prophylactic Iron  
and Folic Acid  
Implemenion



Deworming



Intensified year-round  
Behaviour Change  
Campaign



Testing of anemia using  
digital methods at the  
point of care treatment



Mandatory provision of IFA  
fortified foods in govern-  
ment-funded health programmes



Addressing non-  
nutritional causes of  
anemia in endemic  
pockets



National Anemia  
Mukt Bharat Unit



Intra-Ministerial  
Coordination



Strengthening Supply  
Chain & Logistics



Convergence with  
other Ministries



National Centre of  
Excellence and Advanced  
Research for Anemia  
Control



Anemia Mukt  
Bharat Dashboard  
& Digital Portal



## Institutional Mechanisms

## Purpose & Scope of the Compendium

<b>What the compendium contains?</b>	The learning compendium comprises five Practice Insights capturing learnings on the components of governance, supply chain strengthening, nutrition financing, Management Information System (MIS & Reporting) and demand generation contextualised to Anemia Mukd Bharat (AMB) program.
<b>Where the learnings have been captured from?</b>	The learnings have been captured from Chhattisgarh, Uttar Pradesh, Madhya Pradesh and Jharkhand.
<b>What is the intended use of the compendium?</b>	The crystallised learnings on various components of AMB program may be used by the other states for cross learning and strengthening systems and structures to improve implementation through various interventions and innovations.
<b>Who should use the compendium?</b>	The compendium's usage is intended for but not limited to policy makers, public health officials, program teams and development partners supporting the implementation of AMB program as well as academic institutions and research bodies.

## Policies and Key Initiatives at the National Level

The policies and emergent initiatives at the national level were contoured to support strategy, financing and strengthening of structures for effective AMB program delivery at the sub-national level. Some of the defining features of the program are:

### Institutionalising Structure for Convergence

AMB program leverages the convergence model of POSHAN Abhiyaan. The policies guiding its implementation clearly focus on coordination and cooperation at the ministerial and administrative level. While the Ministry of Health & Family Welfare (MoHFW) is the nodal department with an executive committee and a national unit established for its implementation, intra-ministerial convergence with the line ministries is key for optimal service delivery. These are:



State nodal officer for AMB is appointed for overseeing the activities of the program. They are also responsible for conducting convergence cum review meeting and sensitization meetings of state-level committee with participation from line departments.

## Inclusion of Non-Nutritional Causes of Anemia

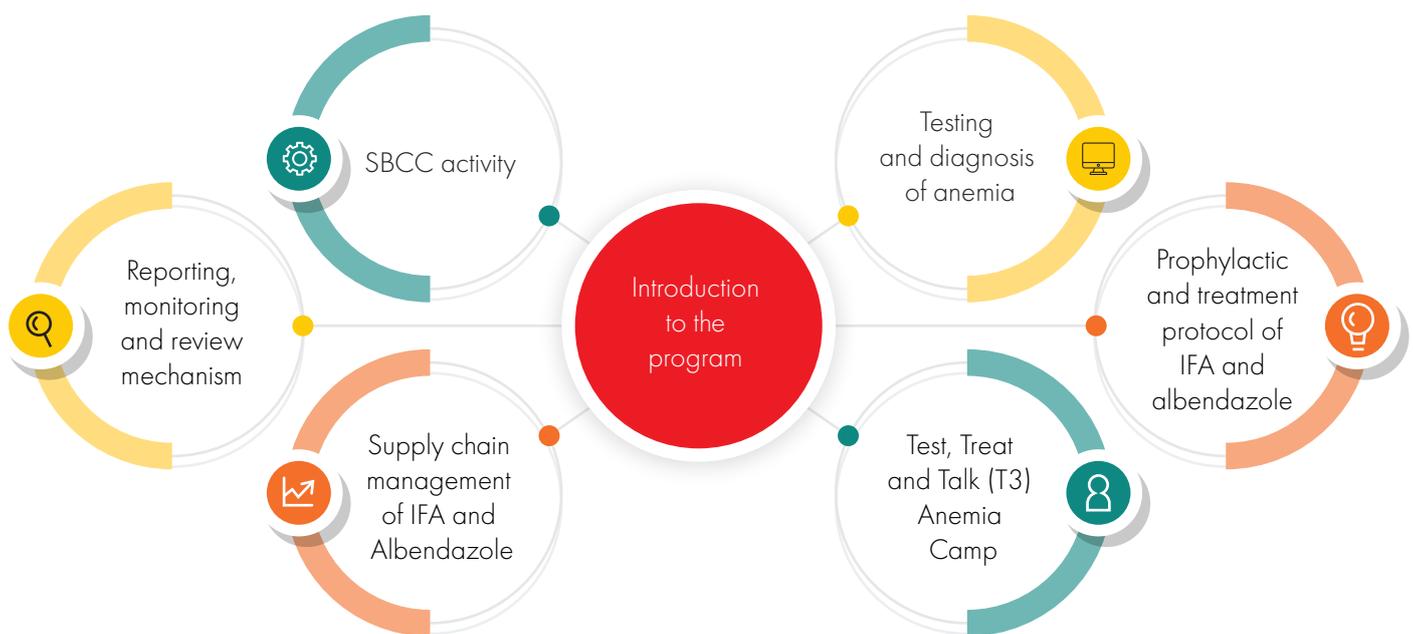
While NIPI targeted iron deficiency anemia specifically, AMB program brings causes of non-iron deficiency or non-nutritional causes of anemia under its purview. Scope of the program includes addressing anemia due to infections (malaria), haemoglobinopathies and fluorosis in endemic regions of the country.

## Dedicated Technical Support Unit & Research Led Approach

AMB program is anchored in strengthening supply chain, demand generation and strong monitoring.<sup>1</sup> All these system pillars require research and technical inputs. As a part of the program, National Center for Excellence for Advanced Research in Anemia (NCEAR-A) has been established to conduct cutting edge implementation and operational research. Housed at AIIMS New Delhi. NCEAR-A is also the apex reference lab for screening and diagnosis of anemia.<sup>2</sup> Aside from this, the national technical support unit for AMB for MoHFW at Institute of Economic Growth (IEG) has been established to play a pivotal role in monitoring the program implementation by conducting gap analysis, progress evaluation and developing the targeted solutions. National Centre of Excellence and Advanced Research on Diets (NCEARD) was also involved in strengthening the maternal nutrition services at antenatal care and prepared a Visiting Dieticians' Model for Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA). Another AMB partner, Tarang Hub has developed AMB communication package and is working at national and state level for use and implementation of AMB's IEC activities and materials.

## Support to States for Capacity Building

Extensive capacity building is a part of AMB program design. The training plan covers:



Health Department, Women & Child Development and Education department, are the three major ones targeted for capacity building, in addition to other line departments involved in AMB implementation.

NCEAR-A and IEG are mandated with supporting the states with institutional capacity building as well as training of the personnel. Training plan follows a classic cascade mode. Under national level training of master trainers, NCEAR-A along with other partners of AMB has trained state level officers and program managers of AMB, capacitating a pool of trainers. These trainers conduct district level training. The district officials in turn train the block level officials, who cascade the training to ANMs, AWWs, ASHAs and school nodal teachers.

<sup>1</sup> Ministry of Health & Family Welfare, Press Release. Retrieved from <https://pib.gov.in/PressReleasePage.aspx?PRID=1596308>

<sup>2</sup> National Health Mission & MoHFW. Operational guidelines on Anemia Mukh Bharat

## Institutionalising Structure for Convergence

As a part of the Test, Treat and Talk (T3) strategy<sup>3</sup>, the program introduces use of advanced technologies such as digital haemoglobinometers for estimation of haemoglobin over traditional methods. The latter has a high sensitivity and specificity as well as better diagnostic accuracy. In primary health-care conditions, Digital Hemoglobinometer can significantly reduce misdiagnosis of anemia compared with clinical assessment alone.<sup>4</sup>

## Institutionalising Review and Monitoring

The program has specified six Key Performance Indicators (KPIs) and 31 process indicators to evaluate the progress of implementation. Indicators in Health Management Information System (HMIS) pertinent to anemia for each beneficiary group is assessed on a monthly and quarterly basis. The quarterly data is used to develop AMB report cards, to be used by the states to take corrective measures. The guidelines issued directs all the states to include the KPIs in their existing review platforms and establish additional review mechanisms to ensure improved quality of data. Aside from this, the technical support units have been entrusted with rapid annual assessments of the program to identify gaps and monitor progress on a periodic basis.

## Call for Zero Stock-Out of IFA supplements

In order to strengthen the supply, AMB program has incorporated a zero-stock out policy for IFA supplements. The states are required to recalibrate their supply chain management to ensure application of scientific methods of forecasting and timely procurement to ensure adequate availability of IFA tablets for all beneficiary groups. Many states are in the process of procurement and distribution of IFA as per the revised specification of 60mg elemental iron. Support is being provided to the states in terms of training and capacity building of personnel and systems for strengthening the supply chain management. A nationwide gap analysis of supply chain has also been conducted to identify gaps.

## Intensive Demand Generation

Augmenting the demand for services provided is one of the core components of the program. To address issues of demand the program has embraced an intensified year-round behaviour change communication strategy with various components. Under the provisions, strategies such as Test, Treat and Talk (T3) camps and SMART Body Smart Mind campaign have been devised for social mobilization and demand generation.

## Cross-Sharing of Knowledge

AMB program has instituted knowledge sharing platforms in the form of AMB Dashboard and a series of webinars for promoting cross-sharing of experiences from states on program implementation. So far, six such national-level webinars<sup>5</sup> have been conducted. The AMB dashboard is a one-stop destination for:

Information on the AMB program (program design, implementation strategy, intended beneficiaries, ministries and government departments involved in implementation)

Monthly and quarterly reports on the performance of the nutrition relevant indicators

Progress reports on process indicators

Ranking of states based on AMB Program Implementation Index

Gap assessment studies on supply chain, budgetary allocations and other determinants of the program

Operational guidelines, IEC materials and job aids for program implementation

<sup>3</sup> MoHFW.2019. Test Treat and Talk Anemia Camps. Retrieved from <https://anemiamukt Bharat.info/wp-content/uploads/2019/09/T3-Guideline.pdf>

<sup>4</sup> Manju Toppo et al. Comparison of Performance of Digital Hemoglobinometer over Automated Hematology Analyzer for Hemoglobin Estimation and Its user-friendliness among the Pregnant Women in Selected District Hospitals of Madhya Pradesh. Indian Journal of Community Medicine. 2019. Retrieved from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6437795/>

<sup>5</sup> Discussions and presentations made during the webinar can be accessed at <https://anemiamukt Bharat.info/resources/>

# Summary of Insights from Implementation in States

Learnings based on System Pillars

## Governance

In Madhya Pradesh, developing a clear policy adoption framework at all levels- state, districts and blocks paved the road for effective implementation. The AMB program requires convergence among nodal and other line departments. The experience in MP shows that, joint directives issued by Health, Education and other line departments such as Water and Sanitation, Tribal Welfare and Women and Child development, coupled with review meetings at state level involving senior officials became the cornerstone in development of the policy adoption framework as well as its execution till the block level.

## Nutrition Financing

Adopting a research informed approach as the foundation for improving budgetary allocations helped Jharkhand with efficient budgeting for the AMB program. The analysis conducted by AMB technical support unit housed at IEG, Delhi helped in identifying challenges. A deep dive into Program Implementation Plans and their approval process by the National Program Coordination Committee (NPCC) as well as record of proceedings helped the NHM in leveraging these procedures and identifying line items that could be used to allocate funds for activities under the program.

## MIS & Reporting

Availability of good quality data depends on reporting and management of information systems. Learnings from Chhattisgarh show that data management plans have to be an integral part of the program implementation since the initial stages. Also, various touchpoints for reporting of coverage and distribution have been leveraged to ensure data collection. For instance, in order to improve reporting on the WIFS component of the AMB program, NHM Chhattisgarh has tapped into the Sankul samanvayaks and Block Education Officers to gather data on the distribution and coverage of IFA supplements.

## Demand Generation

A state level orientation and extensive communication campaign, helped in generating awareness and developing ownership for the program in Uttar Pradesh. IEC campaign before program roll-out and timely availability of IEC materials proved useful during the first phase of the communication campaign. Another key learning from the campaign was involvement of community leaders, school nodal teachers and community members at the grassroots to strengthen demand for the program.

## Supply Chain Strengthening

The experience in Jharkhand shows that inclusion of IFA supplements in DVDMS/e-Aushadhi (online portal) under the essential drug list coupled with other interventions helped in increasing efficiencies and decreasing the lead time for procurement. Uptake of the portal was supported by capacity building of personnel at all levels and customizing the portal as per programmatic requirements based on the feedback by the nodal officers of the Health Department.

## Pressure Points

Based on the components of the AMB program within the scope of the compendium, some common challenges were identified across the states.

## Knowledge & Awareness

Despite efforts, challenges still exist at various levels in the form of knowledge gap and awareness on anemia. The knowledge of iron deficiency anemia, its causes and severity of impact on productivity is seemingly low amongst the population in general. The second level of knowledge and awareness generation on anemia needs to be done for the community health workers and medical professionals to improve service delivery to beneficiaries at the point of care.

## Intensified Communication Campaign

The prophylactic Iron and Folic Acid (IFA) supplementation is a long-term intervention requiring beneficiaries to consume IFA supplements through various life stages of childhood, adolescence, women in reproductive age, pregnancy and lactation. Often the target beneficiaries fail to grasp the significance of such a long-term prophylactic measure to control anemia. Thus, the program needs execution of an intensified demand generation campaign with a 360 degree approach to build self-efficacy and confidence among the community for consuming the supplements as prescribed.

## Convergence

AMB program calls for convergence of various departments to deliver effective outcomes. While progress has been made in terms of inter-ministerial and inter-departmental co-operation and collaboration, achieving convergence till the last mile, still remains a pressure point.

## About the Document

*Anemia is a grave cause of concern and a public health challenge of colossal proportions for the country despite concerted efforts being made by all the stakeholders involved.*

*The Anemia Mukht Bharat (AMB) program intensified and added to the interventions and endeavours being made under the National Iron Plus Initiative, Weekly Iron Folic Acid Supplementation and other iron supplementation programs. The AMB Compendium of Learnings is anchored in the lessons learnt from efforts made to strengthen the various system pillars for implementation of AMB program in Chhattisgarh, Jharkhand, Madhya Pradesh and Uttar Pradesh. In addition, the compendium also consists of an intervention on Anemia Control implemented in Odisha, that showed promising results. The package consists of a total of seven documents- an introductory synthesis document and six practice insights.*

## Author: We Collaborate for Nutrition (WeCan)

WeCan (We Collaborate for Nutrition) is a national level platform to foster cross-learning within the nutrition community, to collaborate and to leverage each other's experiences. WeCan facilitates scaling up of proven interventions for optimal utilization of resources and time to improve nutrition outcomes in India. Our goal is aligned with the overarching mandate of POSHAN Abhiyaan, a multisectoral nutrition flagship program of the Government of India. We work with a special focus on Maternal, Infant and Young Child Nutrition (MIYCN) and its key thematic areas.

## Contributors

This document is a collaborative effort. It has been developed with inputs from National Center for Excellence for Advanced Research in Anemia (NCEAR-A), National Health Mission (NHM), Chhattisgarh, NHM-Jharkhand, NHM-Madhya Pradesh and contributions and inputs from the following development partners:

### National Center for Excellence for Advanced Research in Anemia (NCEAR-A)

NCEAR-A is partner institute of the AMB program. To enable accelerated anemia control in India, under the aegis of Anemia Mukht Bharat – National Health Mission, National Centre of Excellence and Advanced Research in Anemia Control (NCEAR-A) has been established at Centre for Community Medicine, All India Institute of Medical Sciences (AIIMS), New Delhi.

### UNICEF

UNICEF is the global leader promoting and protecting children's rights in 190 countries, including India.

### Nutrition International

Nutrition International works to improve the health and nutrition of women, children and adolescent girls through key nutrition interventions.

### Evidence Action

Evidence Action scales evidence-based and cost-effective programs to reduce the burden of poverty for hundreds of millions of people.



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