

**COVERAGE, CONTINUITY,
INTENSITY & QUALITY
(C²IQ)**

Strengthening the delivery of food and nutrition benefits & services in the context of COVID-19 outbreak in Odisha

**JOINT RECOMMENDATIONS FROM STATE
DEVELOPMENT PARTNERS**



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WOSCA

INTRODUCTION

CONTEXT

The COVID 19 pandemic is the biggest global challenge at present. To mitigate its effects, the entire country went through different phases of lock-down since last week of March 2020, in order to contain the spread of the virus and to enhance medical preparedness for dealing with the increasing number of cases. As the lockdown is being lifted in a phased manner, it is essential to balance addressing the spread of the virus and the tough economic, health and nutrition challenges faced by the population through ensuring continuity in delivery of essential services to the masses.

Based on the field level experiences and different reports published recently, it is evident that the lockdown has heavily impacted food availability and accessibility, especially for the most vulnerable i.e., migrant workers, pregnant women, children, and elderly. Central as well as State Governments have come up with a number of measures to improve access to food including direct cash transfers through existing government schemes; additional grain allotment to registered beneficiaries; advance pension payments to the elderly, widows and disabled people.

The Ministry of Health and Family Welfare has identified maternal and childcare services as essential services, and several key community-based nutrition services continued to the extent possible, during the lockdown. The Supreme Court notified states to continue delivery of supplementary nutrition programs including Take Home Rations and Hot Cooked Meals under ICDS and Mid-Day Meals for Anganwadi and school children even while schools and Anganwadi Centers remained shut. Governments both at center and state level have issued guidelines and orders frequently based on new assessments of the situation.

Odisha has been facing its own set of challenges in context to COVID 19 and nutrition. While the state has been extremely proactive in ensuring timely communications for safeguarding continued health and nutrition service delivery, the incoming migrants, nearly one fourth of the population being tribal and difficult geographic terrains do pose many challenges.

COVID 19 and Nutrition: Risks for Odisha

Nutrition Status

- ▶ Malnourished children and women may be at a higher risk of getting infections
- ▶ As per CNNS 2016-18 data, 29% of children in Odisha are stunted
- ▶ 37.5% of under-five children are anemic in Odisha as per CNNS 2016-18 data
- ▶ As per NFHS-4 data more than 1 out of 4 women in Odisha has a BMI below normal
- ▶ Every second women of reproductive age is anemic in Odisha as per NFHS-4 data

Possible Effects of Lockdown

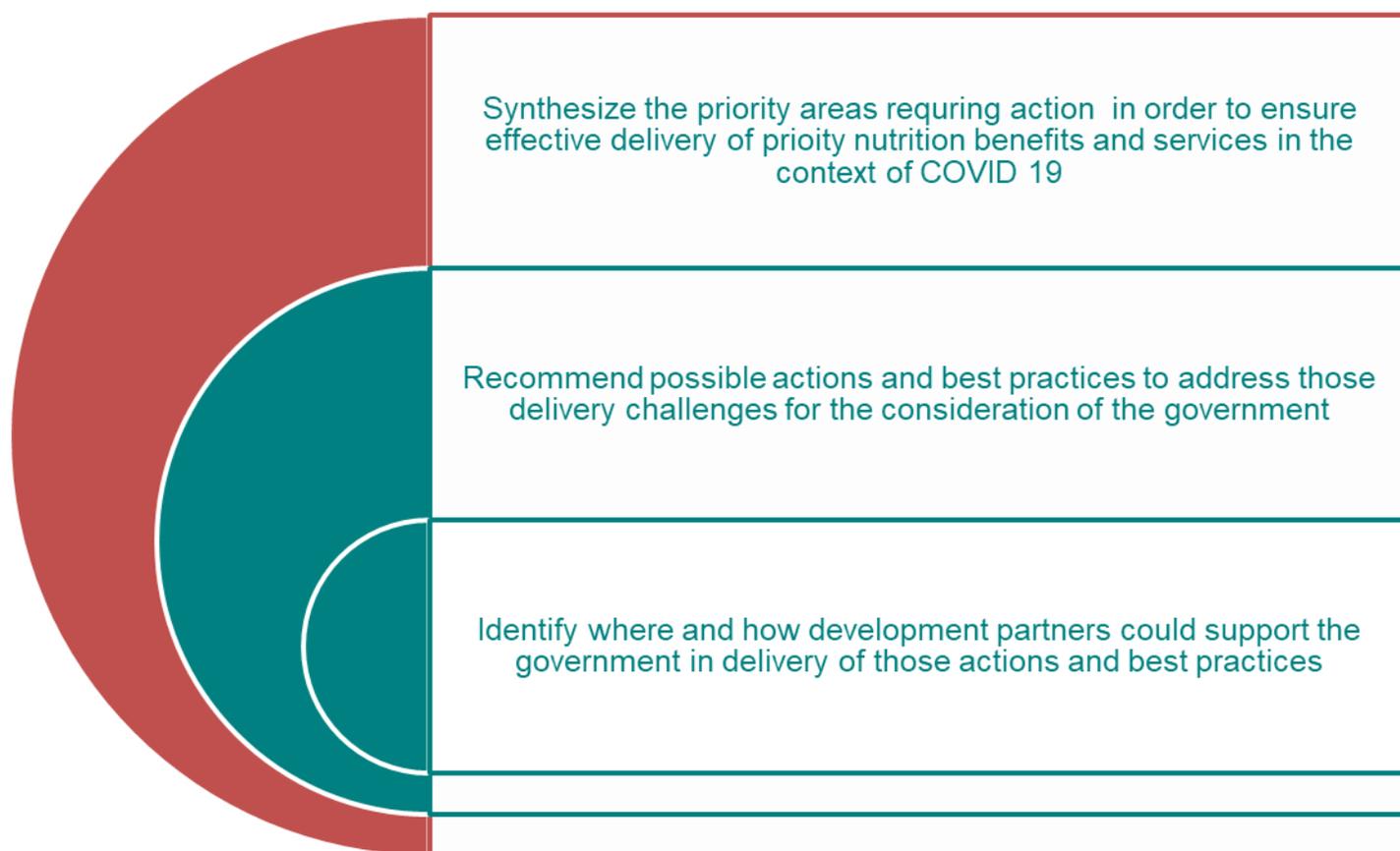
- ▶ Loss of livelihood
- ▶ Lack of food availability affecting diet diversity especially for children and women
- ▶ School children engaged as child laborer/ agricultural laborer
- ▶ Reverse migration and poverty (especially in tribal areas)
- ▶ Hampered access to correct information about correct practices and entitlements

Hampered Nutrition Services

- ▶ AWC and schools are closed therefore hot cooked meals and mid-day meal is affected- but dry rations are being provided/ partly incorrect
- ▶ VHSND, community-based events and growth promotion and monitoring are hampered in community considering safety challenges
- ▶ Probability of increase of SAM children in the community without proper screening and management at the community level

The current priority for Odisha is effective implementation of various guidelines for continued service delivery to the last mile. Development partners (26) in Odisha came together for a Coverage, Continuity, Intensity and Quality (C²IQ) on July 3rd, 2020 to take a stock of the situation and discuss about challenges in the service delivery with an intention to support and strengthen the same at field level. The meeting was also graced by Dr. Akhila Bihari Ota, IAS, Director, SCSTRTI who gave detailed account of challenges in delivering services in hard to reach tribal areas of Odisha during COVID 19. This document outlines the identified key priorities and joint recommendations from the development partners involved in nutrition in Odisha to strengthen the delivery of nutrition benefits and services. Its development was facilitated by WeCan, Alive & Thrive, CFNS, and UNICEF with support from state and national partners under the C2IQ platforms.

OBJECTIVES OF THIS DOCUMENT



PROCESS TAKEN TO DEVELOP THIS DOCUMENT

	<p>Situation Analysis</p>	<p>A basic survey form was developed and shared with 26 partners. The survey aimed at gathering information on:</p> <ul style="list-style-type: none"> ▶ Nutrition services currently being delivered on the ground ▶ Key challenges facing the delivery of each of the nutrition services on ground ▶ Identification of perceived priority services for the government to consolidate/improve during the COVID 19 outbreak
	<p>Web C²IQ* meeting with state level partners</p> <p>*. Coverage, Continuity, Intensity and Quality</p>	<p>A web meeting was conducted with 26 state-level partners on July 03, 2020 with the following objectives:</p> <ul style="list-style-type: none"> ▶ To have a common understanding among state partners about nutrition issues and guidelines during the COVID 19 outbreak ▶ To identify priority nutrition intervention during COVID 19 outbreak in the state ▶ To develop a common understanding on possible actions by partners and scope for collaboration
	<p>Development of key recommendations</p>	<ul style="list-style-type: none"> ▶ Based on the survey findings and deliberations during the C2IQ meeting, a recommendation report was drafted by WeCan and A&T team which was revised by UNICEF. ▶ The revised recommendation document was shared with all participating partners for their feedback and inputs. ▶ Feedbacks were incorporated ad final report shared with government counterpart.

IDENTIFIED KEY PRIORITY ACTION AREAS

Based on the findings of the survey done for doing landscape analysis of nutrition services in Odisha and deliberations during the Odisha online C2IQ meeting, partners identified following areas of action for the state.

Suggested Actions

DEPARTMENT OF WOMEN AND CHILD DEVELOPMENT

Issues	Thematic Area	Actions for consideration by government	Proposed partner support
MIYCN in the context of COVID	Counselling	<ul style="list-style-type: none"> ▶ Joint training on MIYCN in the context of COVID 19 including Micronutrients (MN), breastfeeding (BF), complementary feeding (CF), diet diversity, safe cooking indoors, safe food handling and gender issues for ASHA and AWW using digital platforms for counselling during home visits Developing and providing digital job aids to FLW for providing gender sensitive messages 	<ul style="list-style-type: none"> ▶ Development and delivery of training modules ▶ Development of digital job aids
Use of mobile technology for nutrition outreach	Counselling	<ul style="list-style-type: none"> ▶ Use of mobile technology for nutrition outreach, especially in red districts, i.e., development of guidance, monitoring approach, training 	<ul style="list-style-type: none"> ▶ Developing and supporting implementation of use of mobile technology for outreach
Monitoring of service delivery	THR, MIYCN, MN supplementation	<ul style="list-style-type: none"> ▶ Monitoring awareness and distribution of benefits and services at the beneficiary level about their entitlements 	<ul style="list-style-type: none"> ▶ Regular survey at the beneficiary level using standard checklists
Knowledge of FLW across Red, and Green zones	Counselling, SAM, ANC, VHSND	<ul style="list-style-type: none"> ▶ Clarity of role by providing simple digital job aids for FLW ▶ Supplemental training on nutrition in the context of COVID 19 	<ul style="list-style-type: none"> ▶ Development and imparting training on COVID 19, using digital delivery method where warranted
Implementation of CMAM in the context of COVID-19	Strengthening screening of SAM children and counselling for managing SAM without complication at community level	<ul style="list-style-type: none"> ▶ SoP for screening and assessment of medical complication of SAM children at the community ▶ Provision of Augmented THR, as per the approval of Dept. ▶ Guideline in treating at the community 	<ul style="list-style-type: none"> ▶ Development of Guideline and SoP ▶ Support in monitoring at the community level

DEPARTMENT OF HEALTH AND FAMILY WELFARE

Issues	Thematic Area	Actions for consideration by government	Proposed partner support
Eligibility or access to entitlements by key vulnerable	Micronutrient supplementation	<ul style="list-style-type: none"> ▶ SBCC and IEC <ul style="list-style-type: none"> ○ Ensuring effective communication of all these guidelines in simplified manner to concerned 	<ul style="list-style-type: none"> ▶ IFA and Calcium <ul style="list-style-type: none"> ○ Support in developing guidelines ○ Estimating additional IFA and Calcium requirement

populations (e.g. migrants, slums, and tribal population)		<ul style="list-style-type: none"> ○ <i>Frontline Workers (FLWs)</i> <ul style="list-style-type: none"> ○ <i>Provisioning of IFA and calcium for these vulnerable population</i> 	<ul style="list-style-type: none"> ○ <i>for targeted beneficiaries</i> <ul style="list-style-type: none"> ○ <i>Developing supply chain SoP for supply chain of IFA and Calcium to the unaccounted beneficiaries</i> ▶ <i>Developing and rolling out SBCC strategy</i> ▶ <i>Development and proper dissemination of effective IEC materials for FLW like ready reckoners</i>
Beneficiaries not aware of current entitlements	MN supplementation, MIYCN	<ul style="list-style-type: none"> ▶ <i>Having posters on sub centres and AWC about current entitlements</i> ▶ <i>Awareness campaign on current entitlements using mass media and social media</i> ▶ <i>IFA: Designing posters, awareness generation content and material for mass media and social media (for pre-school and school age)</i> 	<ul style="list-style-type: none"> ▶ <i>Designing poster content</i> ▶ <i>Printing posters and developing a distribution plan</i> ▶ <i>Monitoring the impact of awareness campaign using standard checklist</i>
Demand generation for benefits by FLW	MN supplementation, MIYCN	<ul style="list-style-type: none"> ▶ <i>Awareness campaigns for educating beneficiaries about the importance of MN</i> <i>Developing simple digital job aids material for FLW with key messages on importance of maternal supplementation during COVID 19</i> 	<ul style="list-style-type: none"> ▶ <i>Developing demand generation strategy and monitoring effectiveness</i> ▶ <i>Developing job aid on maternal supplementation during COVID 19</i>
Demand generation for immunization, ANC, delivery at facilities	Counselling, SAM, ANC, VHSND	<ul style="list-style-type: none"> ▶ <i>Awareness campaign about importance of availing VHSND and growth monitoring services on a regular basis in the green and orange zones</i> ▶ <i>Awareness campaigns for use of in-facility essential RMNCH services in red zones</i> 	<ul style="list-style-type: none"> ▶ <i>Development of campaigns</i> <ul style="list-style-type: none"> ○ <i>Developing demand generation strategy</i> ○ <i>Strategy development for capacitating local volunteers for demand generation</i>

DEPARTMENT OF PANCHAYATI RAJ AND DRINKING WATER

Issues	Thematic Area	Actions for consideration by government	Proposed partner support
Unequal PRI involvement in oversight of benefit delivery	Social Accountability	<ul style="list-style-type: none"> ▶ <i>Orientation for empowering of PRI members/SHG office bearers at CLF level on the current services and entitlements and their role is resolving issues in last mile delivery</i> ▶ <i>Issuing clear guidelines from government empowering PRI formally so that they can</i> 	<ul style="list-style-type: none"> ▶ <i>Finalizing PRI module and digitalizing it</i> ▶ <i>Delivery of sensitization sessions</i>

		<p><i>monitor PDS, THR, MDM and nutrition-specific service delivery, provide support and actionable suggestions</i></p> <ul style="list-style-type: none"> ▶ <i>Providing clear directions from Panchayati Raj & Drinking Water Department, so that the PRI administrative committees on post can work without any hostility or opposition from Panchayat Secretary/others and their recommendations hold formal value</i> 	
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ST & SC DEVELOPMENT, MINORITIES & BACKWARD CLASSES WELFARE DEPARTMENT

Issues	Thematic Area	Actions for consideration by government	Proposed partner support
<p>Difficult geographical terrain in tribal areas makes service delivery a challenge</p>	<p>Nutrition for tribal population</p>	<ul style="list-style-type: none"> ▶ <i>Tribal youth needs to be encouraged to engage as volunteers and improve service delivery to these areas.</i> ▶ <i>SHGs need to be involved more and given more responsibilities to lead service delivery.</i> ▶ <i>Along with the Department of Agriculture & Famers' Empowerment, promotion of locally grown vegetables to ensure food and nutrition security.</i> 	<ul style="list-style-type: none"> ▶ <i>Supporting the government in developing modules and campaigns to increase awareness and help in implementing suggested action points.</i>

NEXT STEPS

- ▶ *Based on the recommendations, government counterparts may identify the priority areas of work they want to take up and the kind of support they will need from nutrition partners.*
- ▶ *Arranging next C2IQ meeting to discuss the key priority areas identified by government and working on their details. Partners can work out how they can support the government based on their capacities and expertise and set responsibilities for each of the contributing partners.*