



Government of India
Ministry of Minority Affairs

Health & Hygiene



National Institute of Public Cooperation
and Child Development

This booklet contains information on the following topics

- Health and Nutrition – An Overview
- Balanced Diet
- Physical Activity
- Importance of Nutrition During Various Stages of Life Cycle
- Nutritional Requirements Throughout the Life Cycle
- Infant and Young Child Feeding
- Childhood Illnesses
- Immunization
- First AID
- Menstruation and Menstrual Hygiene
- Adolescent Sexual and Reproductive Health
- Family Planning
- Government Initiatives for the Development and Care of Children and Women
- Safe Drinking Water and Food Adulteration



Health and Nutrition – An Overview

- **Health** is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.
- Health is multidimensional, continuous interaction among the various dimensions such as physical, mental, social, spiritual, emotional, vocational and political is important for ensuring good health.
- **Nutrition** is the intake of food, considered in relation to the body's dietary needs.
- Good nutrition is one with an adequate, well balanced diet combined with regular physical activity and is a cornerstone of good health.
- Health and nutritional status of a population is a crucial indicator of the progress of a nation.
- National level data on health and nutrition indicators provide clear evidence of the poor state of health and nutrition in India.



Balanced Diet

- Balanced Diet is one in which all the nutrients are present in the right amount as required by the body.



Calorie Composition of a Balanced Diet

Carbohydrates: Approx. 50-60% (preferably from complex carbohydrates like whole grains, bajra, dalia, wheat etc.)

Proteins: Approx. 10-15%

Fats: Approx. 20-30% (both visible and invisible fat)

Food Pyramid

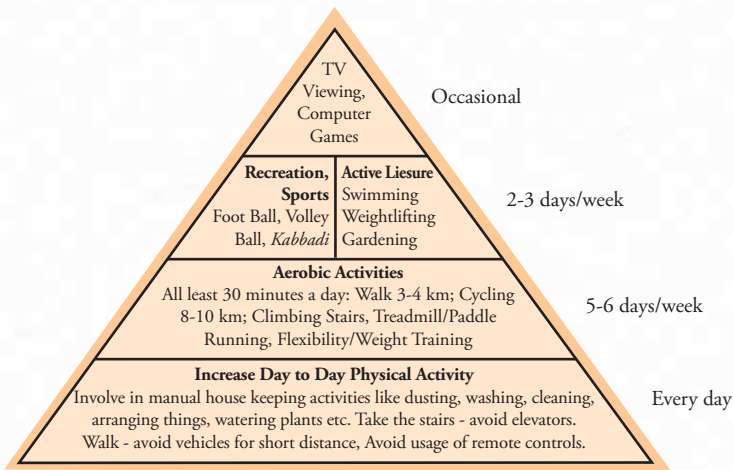
Benefits of Balanced Diet

Consumption of balanced diet is essential for sustaining good health as it:

- Reduces the risk of nutritional deficiency.
- Protects against certain non-communicable diseases such as obesity, diabetes, cardiovascular diseases, some types of cancer and skeletal conditions.
- Provides essential vitamins and minerals that boost immunity.
- Helps maintaining healthy weight.

Physical Activity

- Physical activity is any bodily movement produced by skeletal muscles that requires energy expenditure.
- Regular physical activity such as walking, cycling, dancing has significant benefits for health. For example, it can reduce the risk of overweight, obesity, cardiovascular diseases, diabetes, and osteoporosis and also promote psychological wellbeing.



Physical Activity Pyramid

Health Benefits of Physical Activity

- Controls body weight and composition.
- Reduces risk of chronic diseases, such as type 2 diabetes, high blood pressure, heart disease, osteoporosis, arthritis and some cancers.

- Increases the level of good cholesterol High Density Lipoprotein (HDL).
- Builds strong muscles, bones and joints.
- Improves flexibility.
- Wards off depression.
- Improves mood, sense of well-being and self-esteem.

Importance of Nutrition During Various Stages of Life Cycle

- Food is essential for normal physiological functions.
- As an individual passes from one stage of the lifecycle to another, the requirement for nutrients changes in order to meet the growing needs of the body.

Importance of Nutrition During Various Life Stages

Nutrient dense low fat foods for being physically active and healthy.



Nutritionally adequate diet with extra food to support pregnancy and lactation.



Body building and protective foods for adolescent growth spurt, maturation and bone development.



Energy rich, body building and protective foods (milk, vegetables and fruits) for ensuring growth and development and building immunity.



Breastmilk, energy rich foods (fats, sugar) to achieve optimal growth and milestones.



Nutrition Requirements for Adult Women

- Appropriate nutrition during adulthood is essential for maintaining both physical and mental health.
- Proper nutrition ensures good health until old age.

Nutrition During Pregnancy and Lactation

- Nutrition is of great importance for women due to their special nutritional needs associated with physiological changes in pregnancy and lactation.

A Pregnant Woman Should:

- Eat balanced diet and variety of foods, so that all nutritional needs are fulfilled.
- Eat four to five times a day.
- Increase intake of cereals, pulses, milk and milk products, fresh fruits and green leafy vegetables.
- Consume meat, fish and egg, if culturally accepted and affordable.
- Include oil or ghee in the diet as these are rich source of energy.
- Consume iodised salt.
- Drink plenty of water.
- Eat small amounts of food at short intervals if suffering from nausea and vomiting but should not stop eating.
- No food should be avoided during pregnancy but intake of tobacco and alcohol should be prohibited.
- Consume supplementary food provided at AWC daily.
- Avoid food fads and disbeliefs regarding food intake.
- Get immunized and take adequate rest.

● A pregnant mother should register herself at the Anganwadi Centre (AWC)/Sub-centre.

- She would be provided with services available at the AWC such as antenatal check up, supplementary nutrition and referral services.

A nursing mother needs one additional good quality meal every day to take care of the needs of the child and therefore should:

- Have more of whole grain cereals, pulses/dals, milk, curd, green leafy vegetables and fruits.
- Use only iodised salt.
- Take plenty of fluids.
- Avoid spicy food, high calorie foods such as ghee, nuts, etc. in excessive amount so as to avoid undesirable gain in weight.
- Consume the supplementary food provided at the Anganwadi Centre for six months after delivery to meet the increased nutritional requirements of breastfeeding.
- Breastfeed in a relaxed state for appropriate milk secretion.
- Take Iron Folic Acid (IFA) tablets for first six months of lactation and adequate rest.



Infant and Young Child Feeding

Infant and Young Child Feeding is a set of well known and common recommendations for appropriate feeding of new born and children.

The optimal IYCF practices include the following:

Exclusive Breastfeeding (0-6 Months)

- Initiation of breastfeeding as early as possible preferably within about an hour of birth.
- Establish good breastfeeding skills (proper positioning, attachment and effective feeding).
- Breastfeed exclusively for about first six months.
- Practice frequent, on demand breastfeeding, including night feeds.



Advantages of Breastfeeding

For Baby

- Easy to digest
- Contains nutrients which protect the child from infections
- Suckling helps in the development of jaws and teeth
- Early skin to skin contact with the mother gives warmth to the child
- Safe & readily available at room temperature
- Hygienic, tailor made, immunity enhancing for the baby

For Mother

- Reduces risk of excessive bleeding after delivery
- Makes mother feel emotionally satisfied and enhance her self-image
- Protects from breast and ovarian cancers
- Enhances emotional bond between them
- Free of cost

Complementary Feeding (6-24 Months)

After 6 months, breast milk alone cannot suffice the nutritional needs of the infant, hence age appropriate and adequate complementary food should be provided.

Characteristics of Good Complementary Food

- Should be rich in energy and adequate in good quality proteins, vitamins and minerals.
- Should have soft consistency, low dietary fibre which enables a child to swallow properly.
- Should be easy to cook and locally available.

Tips for Making Complementary Food Energy and Nutrient Rich!

- Enriching food by adding fats and oils.
- Addition of pulses and seasonal fruits and vegetables especially dark green leafy and red and yellow coloured.
- Addition of sugar and jaggery.
- Addition of locally available millets like ragi, bajra.
- Adoption of techniques like sprouting and fermentation, enrichment.
- Inclusion of animal food in the diet (if the family is non vegetarian).

Do's and Don'ts for Feeding Children

<i>Do's</i>	<i>Don'ts</i>
<ul style="list-style-type: none">✓ Introduce only one new food item at a time.✓ Offer small amounts of new food to increase acceptance starting with 2-3 small spoonful twice a day.✓ Offer new food along with one the infant already likes.✓ Offer new foods at the beginning of a meal as the infant is usually hungry and accepts new food better in comparison to when the stomach is already full.✓ Follow a dietary progression beginning from very soft, mashed foods to foods with some lumps that needs chewing and ultimately to family foods.	<ul style="list-style-type: none">✗ Don't provide quick substitutes (foods liked by infant, breast milk, bottle milk), this hampers the acceptance.✗ Don't bribe or reward with treats or sweets.✗ Don't force an infant to eat or punish for not eating.✗ Don't interpret first refusal of new food as not liking.✗ Foods providing empty calories like sweets, candies, etc. should be given in limited quantity.



Nutrition for the Elderly Women




- Adequate and well balanced diet is important.
- A diet rich in micronutrients, containing adequate amount of liquids should be provided. Intake of processed foods should be avoided.
- Easily chewable and digestible foods to be provided.


Common Childhood Illnesses

- An illness is any condition that impairs the normal functioning of the body and may result in death if not treated timely.
- Inability of parents to recognise early warning signs and delay in seeking medical help are two reasons that cost young babies their lives.
- Most common type of illnesses seen in children includes fever, diarrhoea, acute respiratory infection, jaundice, protein energy malnutrition and anaemia.

Signs, Symptoms and Treatment of Common Childhood Diseases

Disease	Signs and Symptoms	Treatment
Diarrhoea 	<ul style="list-style-type: none"> • Loose or watery stools (≥ 3 stools/day) leading to dehydration • Restlessness, Irritability • Loss of appetite • Dark coloured urine • Sunken eyes • Skin when pinched goes back very slowly • Not able to drink • Lethargic or unconscious in severe dehydration 	<ul style="list-style-type: none"> • Maintain good personal food and environmental hygiene • Breastfeed child during diarrhoea • Give the child Oral Rehydration Solution (ORS) enriched with Zinc which is easily available at the local health centre and at chemist shop, in emergency it can be prepared at home • Give the child plenty of water, soup, weak tea, coconut water, dal and rice water at regular intervals • Give the child semi-solid foods like <i>dalia</i>, <i>khichdi</i>, <i>sattu</i> to recover from the disease. • Ensure that child eats extra food after diarrhoea is managed. One can add butter to <i>khichdi</i>.
Hepatitis/ Jaundice 	<ul style="list-style-type: none"> • Yellow colour urine and excessive sweating • Eyes and skin look yellow • Loss of appetite • Vomiting • Headache and weakness • Fever 	<ul style="list-style-type: none"> • Children to be immunized (Hepatitis vaccine has been introduced in the normal immunization schedule) • Maintain personal hygiene and sanitation • Proper disposal of faeces • Safe drinking water • Isolation of the patient

<p>Acute Respiratory infections</p> 	<ul style="list-style-type: none"> • Difficulty in breathing • Chest pain • Chest indrawing • Productive cough • Wheezing/whistling • Rapid breathing • Loss of appetite • Drowsiness • Difficulty to keep awake • Runny nose 	<ul style="list-style-type: none"> • Children to be immunized against measles, whooping cough, <i>Haemophilus Influenzae</i> Type B (HIB) • Maintain personal hygiene and sanitation • Cover mouth and nose while coughing/sneezing • Consult a doctor and give prescribed antibiotic therapy • Include plenty of vitamins and minerals in child's diet, such as Vitamin C, Zinc which helps boost the immune system
<p>Protein Energy Malnutrition</p> 	<ul style="list-style-type: none"> • Loss of appetite • Severe wasting (marasmus) • Loss of sub cutaneous fat (marasmus) • Oedema (kwashiorkor) • Dry and scaly skin • Sparse and thin hair • Loss of weight • No increment in height 	<ul style="list-style-type: none"> • Exclusive breastfeeding for six months and thereafter initiate complementary feeding • Maintain good personal and environmental hygiene • Improve the energy density of the meal using oil, sugar, cream etc. • Give a variety of foods • Immediately consult a doctor, in case of infection and get it treated
<p>Anaemia</p> 	<ul style="list-style-type: none"> • Pale skin • Lethargic and irritated • Poor appetite • Shortness of breath • Weakness 	<ul style="list-style-type: none"> • Give diet rich in iron by including dark green leafy vegetables, animal protein, whole grains • Continue to breastfeed if child is on breast milk • Ensure that child has been given deworming therapy • Include vitamin C rich foods like guava, orange, lemon juice in diet • If prescribed, give iron supplements • Do not drink milk or milk product, tea, coffee with iron rich foods

<p>Fever</p> 	<ul style="list-style-type: none"> • A child with fever may have malaria, measles or another severe disease or it may be due to simple cough or cold or other viral infection • Body temperature 37.5 °C or above • Loss of appetite 	<ul style="list-style-type: none"> • Give adequate diet to maintain nutritional status • Maintain personal hygiene and sanitation • Continue breastfeeding • Consult a doctor and give prescribed medicines
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Immunization

- Immunization is the process whereby a person is made immune or resistant to an infectious disease, usually by the administration of a vaccine.
- Immunization offers protection to children against life-threatening infections such as Tuberculosis, Pertussis (whooping cough), Measles, Diphtheria, Poliomyelitis Tetanus, Hepatitis B, Japanese Encephalitis.

Remember!

- Children should be immunized even if they have a mild sickness such as fever, cold, cough or diarrhoea.
- Pulse polio doses may be given on pulse polio days in addition to the regular immunization.

Why get immunized?

- It reduces mortality among children.
- It builds immunity and offers protection against infections.
- It helps save money that would otherwise be spent on health care needs of a sick child.



First Aid

- First aid is defined as initial care for an illness or injury.
- It generally consists of a series of simple and in some cases, potentially life saving techniques that an individual can be trained to perform with minimal equipment.
- It can be performed by any person to a sick or injured person in emergency until definitive medical treatment can be accessed.



- The most common injuries are falls, burns, drowning and road accidents.
- In case of medical emergency/accidents, immediate action should be taken, call ambulance at 102.

Menstruation and Menstrual Hygiene

Menstruation is:

- An indication that a girl is approaching maturity.
- The shedding of tissue and blood from the lining of the womb through a woman's vagina.
- Also called 'menses', 'menstrual period', 'monthly bleeding' and 'period', menstruation is a normal and natural part of biological maturity.

Menstruation is not:

Sickness	Illness
Disease	Infection
Harmful	Dirty
Shameful	Unclean

Pre-Menstrual Syndrome (PMS)

- Pre-Menstrual Syndrome is a group of symptoms linked to the menstrual cycle. PMS symptoms occur 1 to 2 weeks before the period (menstruation or monthly bleeding) starts. The symptoms usually go away after bleeding starts.
- PMS can affect menstruating women of any age and the effect is different for each woman.

- Acne
- Swollen or tender breasts
- Feeling tired
- Trouble sleeping
- Upset stomach, bloating, constipation or diarrhoea
- Headache or backache
- Appetite changes or food cravings
- Joint or muscle pain
- Trouble with concentration or memory
- Tension, irritability, mood swings or crying spells
- Anxiety or depression

Menstrual Hygiene

Hygiene related practices of women and adolescent girls during menstruation are of considerable importance, as it may increase

vulnerability to Reproductive Tract Infections and other risks. Menstrual Hygiene is important because it:

- Prevents infection.
- Prevents body odour.
- Enables women to remain healthy.
- Enables women to feel comfortable, confident and stay fresh all day.

Symptoms of Pre-Menstrual Syndrome

Safe v/s Poor Practices During Menstruation

Safe Menstrual Practices

Change sanitary material at least three times a day or when soaked.

Change underwear/panty daily.

Wash hands before and after changing sanitary pad/cloth.

Use hot water and salt to wash sanitary cloth and dry them under sun.

Use sanitary pad or clean cotton materials/cloth that have been preserved specifically for menstruation every month.

Poor Menstrual Practices

Use of dirty cloth

Drying sanitary cloth inside dark corners of the house.

Washing of used sanitary cloth in streams or rivers.

Use of dirty/unclean underwear/panty.

Adolescent Sexual and Reproductive Health (ARSH)

Sexual Health

- The term sexual health is used to describe the absence of illness and injury associated with sexual behaviour and a sense of sexual wellbeing.
- Sexuality influences thoughts, feelings, interactions and actions among individuals and motivates people to find love, contact, warmth and intimacy.

Reproductive Health

- Reproductive health addresses the reproductive processes, functions and systems at all stages of life.
- Reproductive health implies that people are able to have a satisfying and safe sex life and that they have the capability to reproduce and the freedom to decide when and how often to do so.

Characteristics of Sexually Healthy Adolescents

- Appreciate and take care of their bodies
- Negotiate sexual limits
- Accept refusal for sex
- Take responsibility for one's actions
- Take care of their reproductive health through check-ups
- Seek information, resources and services about sexuality
- Communicate effectively with family and friends
- If indulge in sexual intercourse, protect themselves against unwanted pregnancies and sexually transmitted diseases including HIV

Reproductive Tract Infections (RTIs)

- Reproductive Tract Infections or infections of the genital tract are those which can have far reaching effects on reproductive health.
- It also affects unmarried girls due to unhygienic practices.
- Infection is also transmitted through sexual intercourse with infected person which results in genital ulcer.

Sexually Transmitted Infections (STIs)

- Sexually Transmitted Infections are those which are transmitted through the sexual route.
- STIs including HIV are common among young people aged 15-24 and more so in young women of that age group.

RTI & STI Risk Factors

Factors that increase the risk of RTIs

Poor general health

Poor genital hygiene

Poor menstrual hygiene

Unhygienic practices by service providers during delivery, abortion, Intra Uterine Contraceptive Device (IUCD) insertion.

Factors that increase the risk of STIs

Unprotected sex

Multiple sexual partners

Sex with partner having sore on the genital region, urethral discharge or infected vaginal discharge.

HIV/AIDS

- HIV stands for Human Immunodeficiency Virus, this virus causes AIDS.
- HIV breaks down the body's defence against infection and disease by weakening immune system.
- When the immune system becomes weak, it is unable to fight against illness and a person develops life-threatening diseases.
- AIDS refers to Acquired Immuno Deficiency Syndrome and refers to the most advanced stage of HIV infection.
- AIDS can take more than 8-10 years to develop after infection with HIV. HIV infected people can live symptom-free for years.



HIV is Transmitted Through

- Unprotected sexual contact with people of same sex or opposite sex (anal, vaginal or oral sex) when one of them is infected.
- Transfusion of infected/unsafe blood.
- From an infected mother to child – during pregnancy, delivery or breastfeeding.
- Sharing of infected syringes and needles and skin-piercing instruments.



HIV is not Transmitted Through

- Shaking hands with an HIV-infected person.
- Touching objects in phone booths or public transport.
- Shared use of towels, linen, crockery, utensils and clothes.
- Use of common toilets, bathing in a pond/lake/canal or river.
- Eating and drinking from the same plate or cup.
- Donating blood with new/sterile needles.
- Mosquito bites.
- Caring for and touching a person infected with HIV.

- Hugging and kissing.
- Playing or travelling with an HIV-infected person.



Prevention of AIDS

- Safe sex practices.
- No sharing of syringes and needles.
- Minimising HIV exposure during medical procedures.



Voluntary Counselling and Testing Centres (VCTC)

- VCT is an essential component providing a link between prevention and care.
- VCT is the process by which an individual undergoes confidential HIV counselling to explore his/her risk of HIV infection and exercises an informed choice regarding HIV testing.
- Counselling in VCTC consists of Pre-Test, Post-Test and Follow Up Counselling.
- VCTCs are available at all the government health centres.

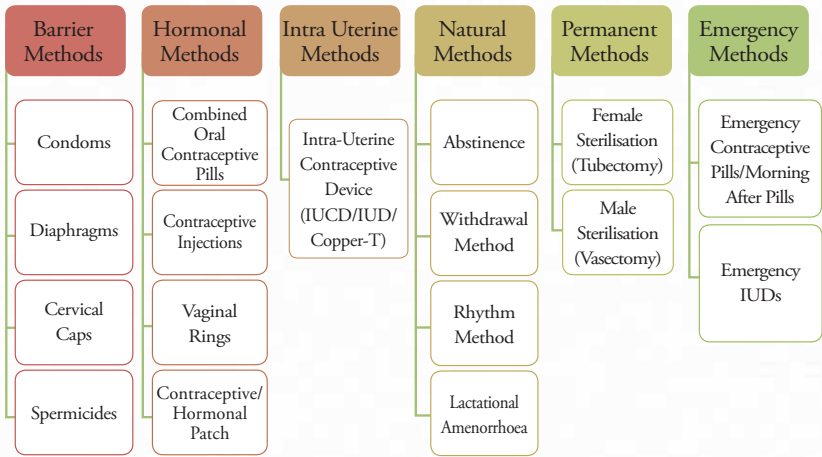


Family Planning

- Family planning means working out a plan with your partner, on how you want to deal with your sexual life.
- This covers when to plan a baby, conceive, number of children that a couple wants, how to deal with fertility issues, how to avoid pregnancy, whether to consider an abortion if an unwanted pregnancy occurs or adoption if there is no option.
- Family planning is an important area of concern as it contributes to the health of mothers and children by reducing maternal and infant mortality.



Types of Contraceptive Measures



Male Condom

- Prevents pregnancy by preventing semen from entering into the vagina.
- Prevents not only pregnancy but also protects sexual partners from STIs/HIV.



Advantages

- Effective and easy to use.
- Readily available and inexpensive.
- No side effects.
- Male partner gets an opportunity to share responsibilities in safe sex and family planning.

Diaphragm

- It is a cervical barrier type of birth control.
- It covers the cervix and physically prevents sperm from entering the uterus.

Advantages

- Does not interfere with a woman's natural cycle.
- Less expensive.

Cervical Caps

- Like diaphragm, it fits over the cervix and blocks sperm from entering the uterus.
- They can be divided into two types: cavity rim caps, and other caps. Cavity rim caps adhere to the cervix, while other caps adhere to the vaginal walls around the cervix.



Advantages

- Safe and cost effective.
- Reusable and last for 1-2 years.

Spermicide

- It contains the chemical that destroys sperms thus preventing their entry in the uterus.
- It is often used in combination with contraceptive barrier methods such as diaphragms, condoms, cervical caps, and sponges.

Combined Oral Contraceptive Pills

- Prevents ovulation.

Advantages

- Highly effective when taken daily.
- Convenient and easy to use.
- Can be discontinued when desired.
- Easily reversible when stopped.
- Protects against cancers of the ovary and uterus.
- Prevents excessive loss of blood during menstruation.
- Regularizes the menstrual cycle.



Contraceptive Injections

- The injection contains progestogen.
- The injections works by thickening the mucus in the cervix, stopping sperm reaching an egg, thins the womb lining and in some, prevents the release of an egg.

Advantages

- Each injection lasts for either 8, 12 or 13 weeks.
- No need to remember to take a pill every day.
- Safe and may reduce heavy, painful periods and help with premenstrual symptoms.

Vaginal Rings

- It is a small, flexible ring a woman inserts into her vagina once a month to prevent pregnancy.
- The ring continually releases oestrogen and progesterone which reduces ovulation (the release of an egg), thickens vaginal mucus, which makes it more difficult for sperm to get through and thins the lining of the womb so that an egg is less likely to implant there.

Advantages

- Easy to use.
- May reduce the risk of cancer of the ovary, uterus and colon.
- May help with premenstrual symptoms.

Hormonal Patch

- Delivers hormones into your body through the skin.
- Contains the same hormones as the combined pill and works in the same way.

Advantages

- Convenient and easy to use.
- No need to remember to take a pill every day.
- Can be discontinued when desired.
- Protects against cancers of the ovary and uterus.
- Prevents excessive loss of blood during menstruation.
- Regularises the menstrual cycle.

Intra-Uterine Contraceptive Device (IUCD/IUD/Copper-T)

- IUD is small flexible object (made of plastic and copper) inserted into the woman's uterus by a doctor.
- Prevents pregnancy by preventing implantation of fertilized ovum.

Advantages

- Can prevent pregnancy for 3 years (or more depending on the type of IUD being used).
- No need to rely on memory as in case of oral pills.
- Provides long-term protection.
- Can be removed at any time by trained service provider.
- Immediate return to fertility upon removal.
- Does not affect breastfeeding.

Natural Family Planning Methods

Abstinence

An easy method of contraception for both men and women is to avoid having sex.

Withdrawal Method

- Involves the withdrawal just before ejaculation.
- This prevents the semen from entering into the vagina.
- This method may fail if withdrawal is delayed.

Rhythm Method

- Intercourse is avoided during the fertile days (unsafe period).
- The safe and unsafe period is calculated by recording the menstrual pattern.

Lactational Amenorrhea Method (LAM)

- Provides natural protection against pregnancy for up to 6 months after birth.
- Encourages the timely introduction of complementary family planning methods during continued breastfeeding.

Advantages

- Can be started immediately after delivery.
- Requires no prescription.
- Carries no side effects or precautions.
- Economical.

- Very convenient.
- Requires no chemical substances or mechanical devices.
- Helps protect infant from diarrhoea and other infectious diseases.

Permanent Family Planning Methods

Female Sterilisation (Tubectomy)

- The fallopian tubes are cut and the ends are tied or the tubes are blocked with the help of rings (Laparoscopic Sterilisation).
- This prevents the sperms from meeting the egg.

Male Sterilisation (Vasectomy)

The Vas Deferens is cut and tied or blocked so that sperms cannot be released into the semen.

Emergency Contraception

- In case of unprotected sex, emergency contraceptives can prevent pregnancy.
- Emergency Contraceptive Pills (ECPs) are to be taken within 72 hours of unprotected sex. However ECPs should not be used on a regular basis.
- Some of the ECPs available are I-pill, unwanted-72.
- Emergency IUDs - Copper-T can also be used as an emergency contraceptive if implanted within 5 days of sexual intercourse. It is a much more efficient emergency birth control mechanism when compared to morning pills.

Initiatives by Ministry of Women and Child Development for the Development and Care of Children and Women

Integrated Child Development Services

The ICDS Scheme was launched in 1975 to:

- Improve the nutritional and health status of children in the age-group 0-6 years.
- Lay the foundation for development of the child.
- Reduce incidence of mortality, morbidity, malnutrition and school dropout rate.
- Enhance the capability of mothers to look after the health and nutritional needs of child through nutrition and health education.

Provisions under ICDS

S. No.	Components	Services	Target Group	Service provider
1.	Early Childhood Care Education and Development (ECCED)	Early Childhood Care and Education (ECCE)/ Pre-school Non-formal Education	0-6 years Parents/Caregivers	AWW/Second AWW cum Child Care & Nutrition Counsellor
		Supplementary Nutrition	6 m —6 years, P&L mothers	AWW/Second AWW/AWH/SHGs/Other
2.	Care & Nutrition Counselling	Infant & Young Child Feeding (IYCF) Promotion & Counselling	P&L mothers, mothers of children under 3 years	AWW/Second AWW cum Nutrition Counsellor/ Supervisors/ ASHA/ ANM
		Maternal Care and Counselling	P&L women	ASHA/ANM/MO/Second AWW Nutrition Counsellor
		Care, Nutrition, Health & Hygiene Education	P&L mother and other caregivers, community and families	AWW/Second AWW cum Nutrition Counsellor/ Supervisors
		Community based care and Management of underweight children	Moderately and Severely under-weight children & their mothers/caregiver	AWWs/AWH/Supervisors/ Mother's group/ PRIs/SHGs /MO ASHA & ANM as facilitator
3.	Health services	Immunization and micronutrient supplementation	0-6 years, P&L mothers	ANM /MO/ASHA/AWWs as facilitator
		Health Check Up	0-6 years, P&L mothers	ANM /MO/ASHA/AWWs as facilitator
		Referral Services	0-6 years, P&L mothers	ANM /MO/ASHA/AWWs
4.	Community Mobilization, Awareness,	IEC, Campaigns and Drives etc.	Families & Community	AWW/Second AWW/Supervisors/FNB/Dist. & Block Resource Centres/ ICDS Management Advocacy & IEC

Sneha Shivar

- *Sneha Shivar* is a community based programme for accelerated reduction in moderate and severe under nutrition in children.
- *Sneha Shivar* is adapted from the globally acknowledged Positive Deviance Approach for reduction of moderate and severe undernutrition.

Beti Bachao Beti Padhao (BBBP)

To ensure survival, protection and empowerment of girl child, government has announced BBBP initiative. This initiative is being implemented through a national campaign and focus on multi sector action in 100 selected districts low in CSR. BBBP is a joint initiative of MWCD, MoHFW and MHRD and it aims at:

- Prevention of gender biased sex selective elimination.
- Ensuring survival and protection of the girl child.

- Ensuring education and participation of the girl child.

Kishori Shakti Yojana (KSY)

Kishori Shakti Yojana seeks to empower adolescent girls (11-18 years), so as to enable them to take charge of their lives.

The objectives of KSY:

- Improve the nutritional, health and development status of adolescent girls.
- Promote awareness of health, hygiene, nutrition and family care.
- Link them to opportunities for learning life skills, going back to school.
- Help them gain a better understanding of their social environment.
- Take initiatives to become productive members.

SABLA – A Scheme for Adolescent Girls

- *SABLA* was launched in selected 200 districts with an aim to enable the adolescent girls for self-development and empowerment.
- The scheme covers adolescent girls in the age group of 11-18 years.
- An integrated package of services provided to adolescent girls under the scheme includes:
 - Nutrition
 - IFA Supplementation
 - Health Check-up and Referral Services
 - Nutrition and Health Education (NHE)
 - Guidance on Family Welfare, ARSH, Child Care
 - Life Skills Education and Accessing Public Services.

Indira Gandhi Matritva Sahyog Yojana (IGMSY)

- IGMSY is a Conditional Maternity Benefit (CMB) scheme which provides cash directly to women during pregnancy and lactation in response to individual fulfilling specific conditions. The scheme attempts to partly compensate for wage loss to pregnant & lactating women both prior to and after delivery of the child.
- The scheme covers pregnant women of 19 years and above for first two live births.
- The financial assistance worth ` 6,000/- is provided under IGMSY.

Support to Training and Employment Programme (STEP)

- STEP aims to support women's work by providing training for skill

up-gradation, marketing and credit linkages to ensure sustainable employment.

- It is implemented through Public Sector Organizations, District Rural Development Agencies (DRDAs), Federations, Co-operatives and Non-Governmental Organisations.

Services Provided

- Up-gradation of skills through training.
- Better and sustainable employment opportunities.
- Backward and forward linkages.
- Facilitation of organisation of women.
- Support services.

Initiative of Ministry of Health and Family Welfare for the Development and Care of Children and Women

Janani Shishu Suraksha Karyakaram (JSSK)

The scheme invokes a new approach to health care, placing utmost importance emphasis on entitlements and elimination of out-of-pocket expenses for both pregnant women and sick neonates.

Entitlements under JSSK

Free Entitlements for Pregnant Women	Free Entitlements for Sick New-Borns Till 30 days After Birth
☼ Free delivery	☼ Free treatment
☼ Free C-Section	☼ Free drugs and consumables
☼ Free drugs and consumables	☼ Free diagnostics
☼ Free diagnostics	☼ Free provision of blood
☼ Free diet during stay in the health institutions	☼ Exemption from user charges
☼ Free provision of blood	☼ Free transport from home to health institutions
☼ Exemption from user charges	☼ Free transport between facilities in case of referral
☼ Free transport from home to health institutions	☼ Free drop back from institutions to home
☼ Free transport between facilities in case of referral	
☼ Free drop back from institutions to home after 48 hours stay	

Janani Suraksha Yojana (JSY)

- *Janani Suraksha Yojana (JSY)* is a safe motherhood intervention under the National Health Mission. It is being implemented with the objective of reducing maternal and neonatal mortality by promoting institutional delivery among poor pregnant women.
- JSY is a 100 % centrally sponsored scheme and it integrates cash assistance for with delivery and post-delivery care.

Facility Based New-Born and Child Care

To address the issues of higher neonatal and early neonatal mortality, facility based newborn care services at health facilities have been emphasised. It includes setting up of following:

- Special Newborn Care Units (SNCU)
- New-Born Stabilization Units (NBSUs)
- New-Born Care Corners (NBCCs)

Home Based New-Born Care (HBNC)

- Home Based Newborn Care Scheme was launched in 2011 to decrease neonatal mortality and morbidity.
- The major objectives of the scheme are:
 - To provide essential newborn care to all newborns.
 - To provide special care of preterm and low-birth-weight newborns.
 - Facilitate early detection of illness followed by referral.
 - To provide support to family for adoption of healthy practices and build confidence and skills of the mother to safeguard her health and that of newborn.



Integrated Management of Neonatal and Childhood Illnesses

- The integrated approach ensures that all relevant needs of the child are looked at and attended to during the contact of the child with the health workers.
- The scheme includes Pre-Service and In-Service training of health service providers (medical officers and grassroot workers), improving health systems (e.g. facility up-gradation, availability of logistics, referral systems) and community and family level care.

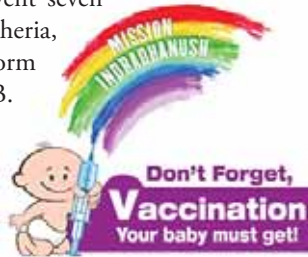
Facility based Integrated Management of Neonatal and Childhood Illnesses (F-IMNCI)

- F-IMNCI is the integration of the facility based care package with the IMNCI package.
- It aims to empower the health personnel with the skills to manage newborn and childhood illness at the community level as well as at the facility.

Routine Immunization Programme

- Under the Universal Immunization Programme, Government of India is providing vaccination to prevent seven vaccine preventable diseases i.e. Diphtheria, Pertussis, Tetanus, Polio, Measles, severe form of Childhood Tuberculosis and Hepatitis B.

- Further, to expand full immunization coverage from existing 65% to 90% by 2020, Ministry of Health and Family Welfare has launched “*Mission Indradhanush*” in 2014.



Navjaat Shishu Suraksha Karyakram (NSSK)

- NSSK is a basic new-born care and resuscitation training programme.
- It has been launched to address care for birth issues i.e. prevention of hypothermia, prevention of infection, early initiation of breast feeding and basic newborn resuscitation.

Rashtriya Bal Swasthya Karyakram (RBSK)

- *Rashtriya Bal Swasthya Karyakram* (RBSK) is an initiative aiming at early identification and early intervention for children from birth to 18 years to cover 4 ‘D’s viz. Defects at birth, Deficiencies, Diseases, Development delays including disability.
- The programme targets children of 0-6 years of age in rural areas and urban slums in addition to children enrolled in classes 1st to 12th in government and government aided schools.

Nutrition Rehabilitation Centres (NRC) for Treatment of Severely Acute Malnourished Children

- Nutrition Rehabilitation Centre is a unit in a health facility where children with Severe Acute Malnutrition (SAM) are admitted and managed with

the intention to improve the quality of care being provided to these children and to reduce child mortality.

- SAM is defined by a very low weight for height (below $-3z$ scores of the median WHO growth standards), by visible severe wasting or by the presence of nutritional oedema.
- Screening of SAM children in age group 6-60 months is done using specified criteria at health facilities and at community level.

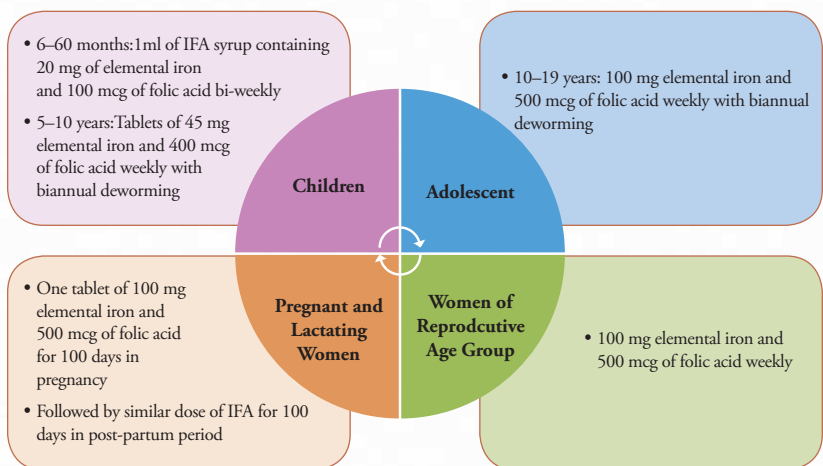


Vitamin A Supplementation Programme

Under this programme, children of age 6 month to 59 month are administered doses of Vitamin A. 1st dose (1 lakh International Units (IU) of Vitamin A) is given to the child at the time of immunization at 9 months of age and thereafter, the child has to be administered dose of Vitamin A (2 lakh International Units of Vitamin A) at 6 monthly interval, so that a child receives 9 doses of Vitamin A till the age of 59 months.

National Iron Plus Initiative for Control of Iron Deficiency Anaemia Across Life Stages (IFA and Deworming)

National Iron Plus Initiative has integrated supervised administration of Iron Folic Acid (IFA) syrup in under five children, IFA supplementation for pregnant and lactating women, women of reproductive age group and adolescents with biannual deworming.



Adolescent Reproductive & Sexual Health Programme (ARSH)

- The National Adolescent Reproductive and Sexual Health strategy provides a framework for a range of sexual and reproductive health services to be provided to the adolescents.
- The strategy incorporates a core package of services including preventive, promotive, curative and counselling services for adolescents, married and unmarried girls and boys.
- Under this programme counselling services, routine check-ups at primary, secondary and tertiary levels of care are provided on fixed days and fixed time.

Scheme for the Promotion of Menstrual Hygiene

- The scheme aims at promoting better health and hygiene among adolescent girls (aged 10 to 19 years) in rural areas by ensuring that they have adequate knowledge and information about the use of sanitary napkins.
- The sanitary napkin packs (containing 6 pieces each) is branded as 'Freedays' and are being sold to adolescents girls at the rate of ₹ 6 per pack by ASHAs.

Weekly Iron Folic Acid Supplementation (WIFS)

- The main objective of WIFS programme is to reduce the prevalence and severity of nutritional anaemia in adolescent population (10-19 years).
- It is implemented to the following two target groups in both rural and urban areas:
 - a. Adolescent girls and boys enrolled in government/government aided/municipal schools from 6th-12th classes.
 - b. Adolescent girls who are not in school.



The WIFS programme also covers married, pregnant and lactating adolescent girls.

Components of WIFS programme

- Administration of weekly iron and folic acid supplementation.
- Screening and referral.
- Biannual deworming.
- Information and counselling.

Rashtriya Kishore Swasthya Karyakram (RKSK)

- The programme is based on the principles of participation, rights, inclusion, gender equity and strategic partnerships.
- RKSK envisions that all adolescents in India are able to realise their full potential by making informed and responsible decisions relating to their health and well-being.
- The programme envisages strengthening of the health system for effective communication, capacity building and monitoring and evaluation.

Other Initiatives

Nutrition Resource Platform

The Nutrition Resource Platform (NRP) is an initiative of the Ministry of Women and Child Development developed with an aim to collect, collate and make available resources and materials on nutrition and child development to diverse stakeholders.



Nutrition Helpline

The Ministry of Women and Child Development has planned to initiate a vigorous awareness campaign on “Nutrition for Better Health” by conceiving a Toll-Free Nutrition Helpline as an innovative intervention for improving the awareness on nutrition.

Toll Free number: 1800-11-16-06
Operating Hours 9:30 am to 5:30 pm
Monday through Friday

*The Helpline will be piloted in Delhi and NCR region and later will be extended to pan India.

One Stop Centre

One stop centre is the most recent initiative of Ministry of Women and Child Development. These centres are intended to support women affected by violence. Aggrieved women facing any kind of violence due to attempted sexual harassment, sexual assault, domestic violence, trafficking, honour related crimes, acid attacks or witch-hunting who have reached out or been referred to the OSC will be provided with specialised services.

Mother and Child Tracking System

- MCTS is a name based pregnant mother and child tracking system.
- It aims to provide information of different health services especially ANC and immunization received at the individual level, by monitoring all the encounters that a woman and a child undergo in their health program.

National Teeka Express

- It is an initiative of Ministry of Health and Family Welfare under the Routine Immunization programme to fill the gaps in the implementation of Alternate Vaccine Delivery.
- As a part of this initiative, designated vehicles under the brand name of 'National Teeka Express' help in maintaining cold chain throughout the vaccine delivery process which includes:



- Distribution of the vaccines to the immunization session sites.
- Bringing back the open and un-used vaccines to storage sites for use in subsequent sessions.

Safe Drinking Water and Food Adulteration

Food and Water Contamination

Presence of any unwanted material in food and water which degrades the quality is referred to as contamination.

The nature of contaminant could be:

- **Physical:** dust, hair, marbles, metal piece
- **Chemical:** lead, arsenic, mercury, disinfectants or other toxic substances
- **Biological:** disease causing microorganisms- bacteria, parasites, virus

Infections and its Transmission

- The invasion and multiplication of microorganisms such as bacteria, viruses and parasites that are not normally present within the body.
- Consumption of contaminated food and/or water is one of the causes of infections resulting in clinically evident illnesses.
- Infectious diseases are highly contagious and may spread from person to person or environmental vector.
- A rapid outbreak of infectious disease affecting a substantial number of people in a country is referred to as epidemic.



Contaminated water can cause a number of water borne infections and diseases. These are mainly caused by faecal-oral route. Common diseases caused by water contamination are:

- Cholera
- Diarrhoea
- Hepatitis
- Typhoid

Safe Drinking Water: Need and Importance

- Safe water is free from disease causing organisms and does not contain harmful chemicals.
- Clean drinking water is a basic human need for healthy living.
- Clean and safe drinking water can prevent many illnesses such as diarrhoea, jaundice etc.
- Safe Water is needed for:
 - Washing fruits and vegetables
 - Drinking
 - Cooking
 - Cleaning utensils
 - Bathing and keeping yourself clean



Purification of Water

- Boiling
- Use of Chlorine
- Water filters and electric purifiers
- Using clean muslin cloth

Practices for Water Safety

- Water used for washing raw food and utensils should be such that it does not contaminate the food products.
- Water storage tanks/buckets should be cleaned periodically.
- Safe drinking water should be available and kept covered in containers.
- Hands should not be dipped while taking out water from containers.
- Containers with taps may be used or use utensils with long handles.
- If water filters/ purifiers are used, prescribed instructions for cleaning need to be adhered.

Food Adulteration

- Food is the basic necessity of life.

- Food becomes adulterated when the quality of food offered for sale is degraded either by the admixture or substitution of inferior substances or by removal of some valuable ingredient.
- An “adulterant” is any material which is or could be employed for making the food unsafe or sub-standard or misbranded or containing extraneous matter.

Types of Adulterants

- Adulteration in food can be done intentionally or it can happen accidentally.
- Irrespective of the nature of adulterant, adulterated food is hazardous.
- Adulteration may make food toxic which may have harmful effect on the body and/ or may deprive nutrients essential for proper growth and development.

- Sand, marble chips, stones, mud, other filth, talc, chalk powder, water, mineral oil, harmful colour

Intentional Adulterants

- Pesticide residues, droppings of rodents, larvae in foods and micro organisms

Accidental Adulterants

- Arsenic from pesticides, lead from water, effluent from chemical industries, tin from cans.

Metallic Contaminants



Tips to Safeguard against Food Adulteration

- Always buy branded and well labelled products.
- Buy processed food products with FSSAI mark and packaged water with BIS mark.
- Prefer quality over cost. Don't buy cheap substitutes.
- Read food labels carefully.
- File a complaint, if the product purchased is not of quality it claims.

Common Adulterants and its Health Effects

Adulterant	Food	Health Effects
<i>Kesari Dal</i>	<i>Arhar dall/ Chana dal</i>	Leads to Lathyrism which results in paralysis of the lower limbs
Argemone Oil	Coconut oil, ground nut oil, mustard oil	It is poisonous and leads to dropsy
Petroleum Products	Fats and oils	Results in gastro intestinal disturbances
Artificial Colours	Processed and fresh foods	Various health hazards and behavioural problems among children
Microbial Contamination		
<i>Staphylococcus Aureus</i>	Cooked food (from hands of food handlers)	Gastroenteritis
<i>Salmonella Enteritidis</i>	Eggs	Salmonellosis
<i>Clostridium Botulinum</i>	Canned foods	Botulism
<i>Bacillus Cereus</i>	Cereals	Diarrhoea
<i>Salmonella Typhi</i>	Contaminates food and water	Enteric fever typhoid, food borne salmonellosis
<i>Aflatoxin</i>	Maize, Paddy/Rice, Jowar, Ground nut, Wheat, Barley, Soybean and their products	Vomiting, abdominal pain, pulmonary oedema, convulsions, coma and death
Metal and Chemical Contaminants		
Arsenic	Fruit sprayed with lead arsenate, drinking water	Dizziness, chills, cramps, paralysis leading to death
Lead	Processed foods	Paralysis and brain damage
Tin	Canned foods	Vomiting, abdominal pain
Nitrates and Nitrites	Drinking water, spinach and meat products	Cancer and tumors in liver, kidney and lungs
Antibodies	Meat from animal fed antibiotics	Drug resistance, hardening of arteries and heart disease
Pesticides	All types of foods	Acute and chronic poisoning causing damage to liver, kidney, brain and nerves leading to death

Legislative Provisions against Food Adulteration

- Provisions for preventing food adulteration and protecting consumers against fraud and deception have been laid in **Prevention of Food Adulteration Act (PFA), 1954**.
- The act was enacted to ensure pure and wholesome food to the consumers and thereby good health.
- However, in 2006, PFA was merged in to Food Safety and Standards Act (FSSA).
- Under FSSA, the laws relating to food were consolidated into single umbrella and Food Safety and Standards Authority of India (FSSAI) was established.

Punishments and Compensations under FSSA, 2006

Punishments

Under FSSA, any person who whether by himself or by any other person on his behalf, manufactures for sale or stores or sells or distributes or imports any article of food which is unsafe for human consumption is liable for punishment.

Punishments for Unsafe Food

If consumption results in death:

- Imprisonment for 7 years, extensible to life time and
- Fine of not less than ` 10,00,000

If consumption results in grievous injury:

- Imprisonment for a term which may extend to six years
- Fine which may extend to ` 5,00,000

If consumption results in non-grievous injury:

- Imprisonment for a term which may extend to one year
- Fine which may extend to ` 3,00,000

If consumption results in no injury:

- Imprisonment for a term which may extend to six months
- Fine which may extend to ` 1,00,000

Compensation in case injury or death of consumer

Any consumer who gets injured or dies due to consumption of adulterated food is entitled to receive compensation by the force of court. A sum of:

- Not less than five lakh rupees in case of death.
- Not exceeding three lakh rupees in case of grievous injury.
- Not exceeding one lakh rupees, in all other cases of injury.

- The compensation shall be paid at the earliest and in no case later than six months from the date of occurrence of the incident.
- In case of death, an interim relief shall be paid to the next of the kin within thirty days of the incident.

The trainer may refer to DAY 2: SESSION 2, 3, 4 & 5 for details of the topics covered, related activities and annexures in the training module.

Notes



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