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: 08 February 2025 Received: 29 November 2024 Published

Revised: 22 December 2024 : https://doi.org/10.59733/medalion.v6i1.167 DOI Accepted: 10 January 2025 Publish Link: https://medalionjournal.com/index.php/go

#### **Abstract**

Malnutrition remains a critical public health challenge in India, particularly among children under six years of age, pregnant women, and lactating mothers. To combat this issue, the Government of India launched Poshan Abhiyan, a comprehensive nutrition program aimed at eradicating malnutrition through multi-sectoral interventions, behavioral change communication, and improved service delivery. This study evaluates the implementation, challenges, and effectiveness of Poshan Abhiyan in Housing Colony Ompora, Budgam, Jammu & Kashmir, with a special focus on community participation and interdepartmental coordination. A mixed-method approach was used, incorporating primary data from surveys, interviews, and focus group discussions with Anganwadi worker, local beneficiaries, and health officials, alongside secondary data from official reports and government records. The findings indicate that while 62% of respondents were aware of Poshan Abhiyan, only 15% regularly accessed Anganwadi services, highlighting gaps in engagement. Additionally, 5% of children exhibited some degree of malnutrition, emphasizing the need for improved nutritional interventions and monitoring. The study also identifies challenges such as limited community awareness, inadequate interdepartmental coordination, and logistical issues in nutritional supplement distribution. To enhance program effectiveness, recommendations include strengthening awareness campaigns, fostering local participation, ensuring timely service delivery, and improving digital monitoring tools. This research underscores the importance of a collaborative approach involving local communities, government departments, and health workers to ensure the successful implementation of Poshan Abhiyan. Strengthening these efforts will play a pivotal role in achieving the long-term goal of a malnutrition-free India.

Keywords: Poshan Abhiyan, Malnutrition, Community Participation, Anganwadi Services, Nutritional Interventions, Public Health Policy

## Introduction

Malnutrition and undernutrition continue to pose significant public health challenges in India, especially among children, pregnant women, and lactating mothers. In response to these pressing issues, the Government of India launched the Poshan Abhiyan (National Nutrition Mission) in 2018, a flagship program aimed at improving nutritional outcomes through a multi-sectoral approach. The initiative focuses on leveraging technology, strengthening community engagement, and ensuring coordinated efforts among different stakeholders to achieve a malnutrition-free India. Despite significant progress, there remains a crucial need for greater local participation and collective efforts by officials and the community to ensure the program's success.

In Budgam district of Jammu and Kashmir, particularly in Housing Colony Ompora, the implementation of Poshan Abhiyan has been commendable, yet challenges persist in achieving optimal outcomes. The government and concerned departments are actively working on various interventions, including providing nutritional supplements, conducting awareness programs, and enhancing maternal and child healthcare services. However, despite these measures, gaps remain in public awareness, accessibility, and active community participation. The effectiveness of the Poshan Abhiyan in this region, as in other parts of the country, largely depends on how well local communities engage with the program and how efficiently government officials work together to address the persisting challenges.

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## The Significance of Local Participation in Poshan Abhiyan

Local participation is crucial in ensuring the success of any government initiative, especially one that deals with social welfare and nutrition. The involvement of the local population in Poshan Abhiyan can bring multiple benefits, including better identification of malnourished children, improved distribution of nutritional resources, and greater awareness about maternal and child health. When the local community actively engages, it fosters a sense of ownership and responsibility, making the initiative more sustainable in the long run. One of the key issues observed in Housing Colony Ompora and other similar areas is the limited awareness among families regarding nutritional practices, balanced diets, and proper infant and maternal care. Many families still rely on traditional food habits that may lack essential nutrients, leading to deficiencies in children and mothers.

The role of Anganwadi workers, community health workers, and local leaders becomes vital in spreading awareness and educating people about the importance of proper nutrition. Furthermore, local participation can ensure efficient monitoring and evaluation of government schemes. Residents can provide valuable feedback regarding the availability and quality of nutritional supplements, the effectiveness of awareness programs, and any issues related to implementation. With active participation from self-help groups, Panchayati Raj Institutions (PRIs), local NGOs, and women's groups, Poshan Abhiyan can be more effectively implemented at the grassroots level.

## The Collective Efforts of Officials and the Need for Improvement

While the government has been working at the highest level to implement Poshan Abhiyan, there is still room for improvement, particularly in terms of coordination among different departments and strengthening the efficiency of service delivery. The Department of Women and Child Development (WCD), Health Department, Rural Development Department, and local administration all play critical roles in ensuring that the mission's objectives are met. However, there are instances where a lack of proper coordination between these agencies hampers the smooth implementation of the scheme.

A more integrated approach among officials and field workers can enhance the program's effectiveness. For example, health officials should collaborate more closely with Aanganwadi workers to ensure regular growth monitoring, immunization drives, and maternal health checkups. Similarly, local government bodies should work on creating better infrastructure for Anganwadi centers, ensuring they have adequate facilities such as clean drinking water, sanitation, cooking provisions to prepare nutritious meals and also easy to reach for the whole community.

Additionally, there is a need for better data management and tracking mechanisms to assess the real-time impact of the scheme. Digital platforms introduced under Poshan Abhiyan, such as ICDS-CAS (Integrated Child Development Services - Common Application Software), have been helpful in tracking the nutritional status of children and pregnant women. However, many frontline workers face challenges in using digital tools effectively due to inadequate training and technical support. Addressing such issues by providing capacity-building programs and digital literacy training to field workers can significantly improve the program's overall implementation.

### Study Area

The study area for this research is Housing Colony Ompora, located in Budgam district, Jammu & Kashmir, India. Budgam district, situated in the Kashmir Valley, is known for its diverse population and varied socio-economic conditions. Housing Colony Ompora, a developing urban locality, comprises a mix of residential settlements, industrial estates, schools, and fashion colleges. The area has single Anganwadi center that play a crucial role in implementing Poshan Abhiyan by providing nutritional support to children, pregnant women, and lactating mothers.

### Geographical and Demographic Overview

- Location: Housing Colony Ompora is located near Budgam town, approximately 10 km southwest of Srinagar, the summer capital of Jammu & Kashmir.
- Topography: The area lies in the central Kashmir Valley, characterized by moderate slopes and fertile land.
- Climate: It experiences a temperate climate with cold winters, moderate summers, and average annual rainfall ranging between 800-1200 mm.
- Population: The region has a mix of urban and semi-urban populations, with a significant proportion of middle-class families, government employees, and daily wage workers.

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• Health & Nutrition Facilities: The area has Anganwadi center, and nearby primary healthcare center (PHCs) Ompora, which play a crucial role in delivering maternal and child health services under Poshan Abhiyan.

Housing Colony Ompora is a residential area located in the Budgam district of Jammu and Kashmir, India. It is situated approximately 8.3 kilometers from Srinagar city and is near the Kashmir International Airport, making it accessible to the broader region. The colony was developed on land that was originally an almond orchard, and it now comprises around 1,300 plots of varying sizes. The geographical coordinates of Housing Colony Ompora are approximately 34°1'18" North latitude and 74°44'18" East longitude. The colony is also home to the Jammia Masjid, a significant mosque located within the residential area.

## Methodology

This study follows a qualitative and quantitative approach to assess the implementation of Poshan Abhiyan in Housing Colony Ompora, Budgam, with a focus on local participation and the collective efforts of officials. The methodology consists of the following key steps:

## 1. Data Collection

- Primary Data:
  - o Surveys & Interviews: Structured questionnaires and face-to-face interviews with local residents, health officials, and government representatives.
  - o Focus Group Discussions (FGDs): Sessions with mothers, pregnant women, and lactating mothers to understand their awareness, challenges, and participation in Poshan Abhiyan.
  - Field Observations: Direct analysis of Anganwadi centre working to assess nutritional services, infrastructure, and implementation challenges.
- Secondary Data:
  - o Official reports from ICDS (Integrated Child Development Services), Health Department, and Women & Child Development Department.
  - o Government publications, policy documents, and research articles related to Poshan Abhiyan.

#### 2. Data Analysis

- Qualitative Analysis:
  - Thematic analysis of interviews and FGDs to identify key challenges and perceptions.
  - Assessment of community participation levels in nutrition programs.
- Quantitative Analysis:
  - Statistical evaluation of growth monitoring records, nutritional status reports, and beneficiary participation rates.
  - o Identification of gaps in service delivery and nutritional outcomes.

## 3. Evaluation & Recommendations

- Comparative analysis of government efforts vs. actual implementation at the local level.
- Identification of policy gaps and areas for improvement.
- Suggestions for enhancing local engagement and interdepartmental coordination for better implementation of Poshan Abhiyan.

## **Outcomes and observations**

The data collected for this study provides insights into the implementation, challenges, and effectiveness of Poshan Abhiyan in Housing Colony Ompora, Budgam. Both primary and secondary data sources were used to analyze the level of community participation, nutritional awareness, and government interventions in the region.

## 1. Community Awareness and Participation

One of the critical factors determining the success of Poshan Abhiyan is the level of awareness and active participation of local residents. The survey conducted among pregnant women, lactating mothers, and caregivers of children less than six years of age revealed the following findings:

Category	Percentage of Respondents (%)
Aware of Poshan Abhiyan	62%
Regularly Attend Anganwadi	15%
Received Nutritional Support	35%
Participate in Nutrition Programs	39%

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Believe More Awareness is Needed	85%

## **Interpretation:**

- While 62% of respondents were aware of Poshan Abhiyan, only 15% regularly visited Anganwadi centers, indicating a gap in active participation.
- A high percentage (85%) of respondents believed that more awareness programs were necessary to improve participation.
- Only 39% of beneficiaries actively participated in nutrition-related activities, showing that further engagement efforts are required.

## 2. Nutritional Status of Beneficiaries

Growth monitoring data collected from Anganwadi centers provided insights into the nutritional status of children (0-6 years old) in the study area.

Nutritional Category	Percentage of Children (%)
Normal Weight	85%
Mild Malnutrition	15%
Moderate Malnutrition	0%
Severe Malnutrition	0%

#### **Interpretation:**

- 85% of children had normal weight, indicating that many are receiving adequate nutrition.
- However, 15% of children showed signs of mild malnutrition, requiring dietary improvements and regular monitoring.

## 3. Government Interventions and Service Delivery

Feedback from Anganwadi worker and health officials collected to assess the efficiency of service delivery under Poshan Abhiyan.

Service Provided	Satisfaction Level (%)
Distribution of Supplementary Nutrition	78%
Growth Monitoring & Health Check-ups	64%
Awareness Programs on Nutrition	52%
Interdepartmental Coordination	45%

#### Interpretation:

- 78% of respondents were satisfied with the distribution of supplementary nutrition, suggesting that food supply mechanisms are functioning relatively well.
- However, only 52% of respondents found awareness programs effective, indicating a need for better communication strategies.
- Interdepartmental coordination received the lowest satisfaction rating (45%), showing that improvements are needed in collaboration among health, ICDS, and WCD departments.

## **Overall Findings and Implications**

- The awareness and participation levels of beneficiaries in Poshan Abhiyan need significant improvement.
- While nutritional support services are reaching many children, malnutrition rates indicate the need for enhanced monitoring and personalized interventions.
- Interdepartmental coordination remains a challenge, affecting the smooth implementation of health and nutrition programs.
- More community-driven initiatives, such as mother support groups and school-based nutrition awareness, could improve local engagement.

By addressing these gaps and enhancing collaboration among government officials, Anganwadi workers, and local residents, the effectiveness of Poshan Abhiyan in Housing Colony Ompora, Budgam can be significantly improved.

#### **Discussion**

The findings from this study highlight both the progress and challenges in the implementation of Poshan Abhiyan in Housing Colony Ompora, Budgam. While government initiatives have made significant strides in improving nutritional awareness and providing essential supplements, gaps remain in community participation, service delivery, and interdepartmental coordination. Addressing these issues is crucial to ensuring the long-term success of the program.

## 1. Community Awareness and Participation

The study revealed that while a majority of respondents (62%) were aware of Poshan Abhiyan, only 15% regularly attended Anganwadi centers, indicating a lack of engagement. Many families still rely on traditional food habits, some of which may not meet the necessary nutritional requirements for children and mothers. This highlights the need for intensive awareness campaigns that focus on educating families about balanced diets, proper infant feeding practices, and maternal nutrition.

Further, only 39% of beneficiaries actively participated in nutrition-related activities, suggesting that more efforts are required to make these programs interactive, culturally relevant, and community-driven. Encouraging local women's self-help groups, Panchayati Raj Institutions (PRIs), and religious leaders to spread awareness can significantly enhance participation.

#### 2. Nutritional Status and Health Outcomes

The study's growth monitoring data indicated that 15% of children were either mildly malnourished. While this percentage is concerning, it also presents an opportunity to strengthen intervention strategies. The presence of malnutrition cases necessitates targeted interventions such as:

- Specialized meal plans for at-risk children.
- Regular follow-ups and health check-ups to track improvement.

Additionally, ensuring that pregnant and lactating mothers receive adequate nutrition is essential to preventing low birth weight and early childhood malnutrition. This can be achieved through better collaboration between health workers, Anganwadi center, and local healthcare facilities.

#### 3. Effectiveness of Government Interventions

The study found that 78% of respondents were satisfied with the distribution of supplementary nutrition, which indicates that the food supply chain is functioning effectively. However, only 52% of respondents found awareness programs to be impactful, and 45% believed interdepartmental coordination was inadequate. These findings suggest that:

- Health and ICDS departments should work more closely to ensure that children and mothers receive timely vaccinations, nutritional supplements, and medical check-ups.
- The use of technology, such as ICDS-CAS (Common Application Software), should be improved to track beneficiaries' health records more efficiently.

Additionally, Anganwadi worker should receive periodic training to improve their digital literacy and community engagement skills, which would enhance the overall implementation of the program.

### 4. Addressing Implementation Gaps

Despite Poshan Abhiyan being implemented at a high priority level, gaps in awareness, participation, and service delivery indicate that additional efforts are required. Some key areas for improvement include:

- Strengthening Behavioral Change Communication (BCC): Many families do not fully understand the importance of nutrition, making it crucial to develop locally tailored messages that are easy to comprehend and adopt.
- Encouraging Male Participation: Nutrition and childcare responsibilities are often viewed as women's
  responsibilities, but engaging fathers and male family members in awareness programs can lead to better
  outcomes.
- Improving Last-Mile Delivery: Ensuring that nutritional supplements, iron-folic acid tablets, and fortified foods reach all beneficiaries on time is essential for success.

#### **Recommendations and Wav Forward**

Based on the findings of this study, several key recommendations can be proposed to enhance the effectiveness of Poshan Abhiyan in Housing Colony Ompora, Budgam.

## 1. Strengthening Awareness Campaigns

 Conduct regular community awareness drives through folk media, local influencers, and religious/community leaders to improve participation.

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- Use social media, radio, and television to spread information about nutritional needs, infant feeding practices, and maternal health.
- Organize nutrition fairs (Poshan Melas) at the community level to encourage local participation.

## 2. Improving Community Engagement and Participation

- Form Mother Support Groups at the Anganwadi center level to encourage peer learning and active participation in nutritional programs.
- Engage Self-Help Groups (SHGs) and Panchayati Raj Institutions (PRIs) to spread awareness and monitor the effectiveness of Poshan Abhiyan.
- Encourage fathers and male family members to participate in awareness programs, as their involvement can enhance household-level nutrition practices.

#### 3. Enhancing Service Delivery and Monitoring

- Ensure timely and uninterrupted supply of Take-Home Rations (THR) and Mid-Day Meals (MDM) for pregnant women, lactating mothers, and children.
- Strengthen growth monitoring programs by conducting monthly health check-ups and ensuring real-time tracking of beneficiaries.
- Provide training to Anganwadi workers on digital data collection tools such as ICDS-CAS to enhance real-time tracking and reporting.

## 4. Addressing Interdepartmental Coordination Gaps

- Strengthen coordination between ICDS, Health Department, and Rural Development Departments for holistic service delivery.
- Implement joint monitoring visits by health officials and ICDS supervisors to ensure proper functioning of nutrition programs.
- Improve infrastructure at Anganwadi centers, including clean drinking water, sanitation, and cooking facilities, to enhance service delivery.

## **Challenges in Implementation**

Despite the well-structured policies of Poshan Abhiyan, certain challenges hinder its full-scale implementation at the grassroots level.

## 1. Lack of Awareness and Cultural Barriers

- Many families do not prioritize nutrition due to traditional food habits and a lack of knowledge about balanced diets.
- Some mothers discontinue breastfeeding early due to misconceptions and social influences, leading to poor infant nutrition.

## 2. Shortage of Skilled Personnel and Resources

- Anganwadi workers often have excessive workloads, reducing their efficiency in conducting awareness sessions and monitoring programs.
- Many Anganwadi centers lack adequate infrastructure, such as storage for nutritional supplements, proper seating, and clean cooking spaces.

## 3. Delays in Nutritional Supplement Distribution

- Sometimes, delays in the supply of Take-Home Rations (THR) and iron-folic acid tablets hinder the effectiveness of the scheme.
- There is a need for better supply chain management to ensure timely distribution of nutrition kits.

## 4. Resistance to Digital Monitoring Tools

- While ICDS-CAS and other digital platforms have been introduced, many field workers lack technical training, leading to inefficient data entry and monitoring.
- There is a need for regular workshops to train Anganwadi workers on using mobile applications and digital records effectively.

## Conclusion

The success of Poshan Abhiyan in Housing Colony Ompora, Budgam, and other regions of India hinges on the collaborative efforts of government officials and active participation from the local community. While the government is making commendable strides in addressing malnutrition, a stronger push is required to enhance awareness, encourage local engagement, and improve service delivery. The combined efforts of Anganwadi workers, health professionals, community leaders, and the general public can drive significant progress in

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eradicating malnutrition and ensuring a healthier future for children and mothers. By fostering greater cooperation and addressing existing gaps, Poshan Abhiyan can achieve its ambitious goal of a well-nourished and healthier India.

## Acknowledgements

I would like to express my heartfelt gratitude to all the individuals and organizations who supported me throughout the course of this research. First and foremost, I would like to thank the Department of Women and Child Development for their guidance and encouragement. I am deeply grateful to the the local residents of Housing Colony Ompora for their cooperation and active participation in this study. Their insights and valuable contributions have made this research possible. A special thank you to the officials from the Health Department and ICDS (Integrated Child Development Services) for their continuous support. Their assistance in facilitating field visits and providing relevant resources was instrumental in the success of this study. I would also like to thank my colleagues and mentors for their advice and support during the research process. Their constructive feedback and suggestions were invaluable.

#### **Conflict of Interest Statement**

The author declares that there is no conflict of interest related to this research. All the findings and opinions expressed in this paper are the author's own and are based on the data collected from the study area.

#### **Funding Statement**

This research was conducted without any external financial support or funding. All expenses related to the study were self-funded.

### **Ethical Statement**

This study adhered to the ethical guidelines set by the institutional ethics committee. Informed consent was obtained from all participants, and their privacy and confidentiality were respected throughout the research process. The study was designed to ensure minimal disruption to participants' daily lives while collecting data. All efforts were made to ensure that no harm or distress was caused during the research.

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