



SWABHIMAAN | 2016-21

Multi-sector integrated programme to improve adolescent and women's nutrition

Impact Evualtion Results | Bihar, Chhattisgarh and Odisha

Overview

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SWABHIMAAN Bihar, Chhattisgarh and Odisha

- ➤ A package of community-led interventions that taps DAY-NRLM's platforms to improve the nutritional status of adolescent girls, pregnant women and mothers of children under age two years.
- > Nutrition-sensitive and nutrition-specific interventions delivered through a combination of system and community actions.

SWABHIMAAN | Programme

Intervention -22 9 **Control** \vdash seline(2014-202 **Intensive Systems Systems** line strengthening strengthening End ര \Box Cluster-wise Jeevika nd 6 \Box ത 2018-Village Organizations Preparatory led interventions Midline For adolescents For women For **farmer** clubs

Four years intervention period

Impact Hypothesis:

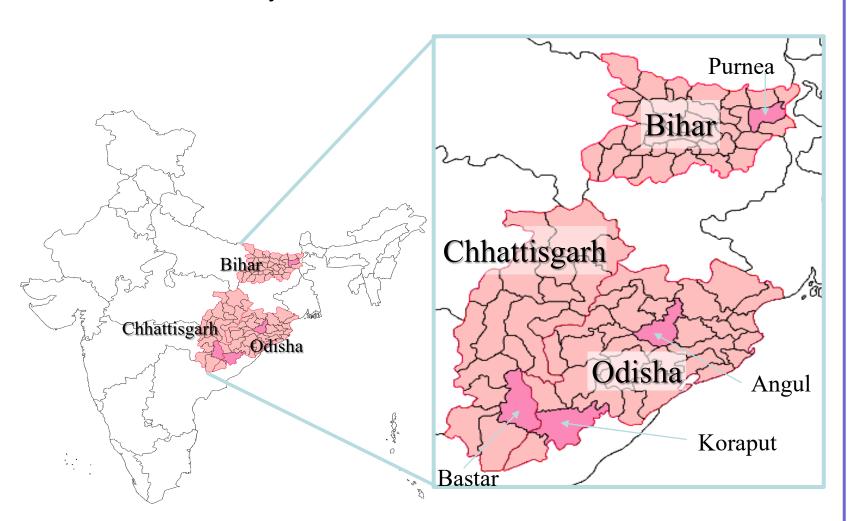
- 1. 15% reduction in the proportion of adolescent girls with a BMI<18.5
- 2. 15% reduction in the proportion of mothers of children under two with a BMI<18.5
- 3. 0.4 cm improvement in mean MUAC among pregnant women, over the intervention period of three years.
- 4. Improvements of between 5% and 20% in the coverage of 18 interventions over three years.

Interventions Thematic areas

- Coverage of 18 interventions, clustered around five thematic areas.
 - 1. Improving food and nutrition intake
 - 2. Prevent micronutrient deficiencies and anemia
 - 3. Increase access to prenatal and postnatal health services
 - 4. Increase access to education and WASH commodities/services
 - 5. Prevent early, poorly spaced and repeated pregnancies.
- Participation in SHG and decision making

COVERAGE AREA AND TARGET GROUP

- 4 Districts: Purnea, Bastar, Koraput, Angul
- Five Poorest Aajeevika Resource Blocks

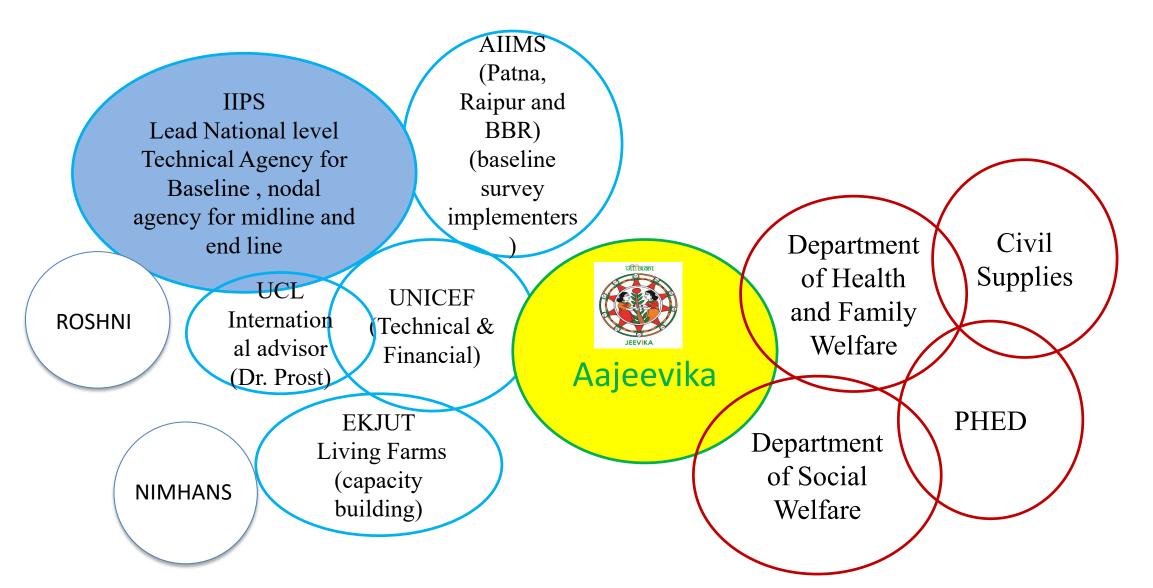


Target Groups Adolescent girls (10-19 years) **Mothers of Pregnant** children women under 2 (15-49 years) (15-49 years)

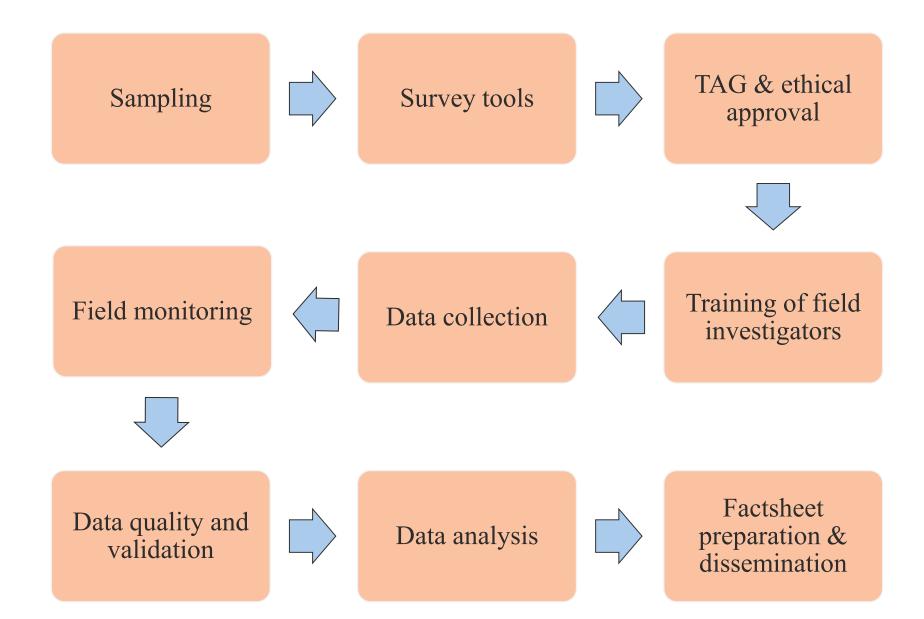
Overview of Intervention and Control Areas in Three States

STATE	INTERVENTION	CONTROL
BIHAR	42 villages in Kasba and Jalalgarh Blocks, Purnia District	31 villages in Kasba and Jalalgarh Blocks, Purnia District
CHHATTISGARH	110 villages in Bastar Block	114 villages in Bakawand Block
ODISHA	88 villages in Koraput and Palahara Blocks	88 villages in Koraput and Palahara Blocks

COLLABORATORS



ACTIVITIES OF IIPS FOR SWABHIMAAN



SWABHIMAAN: SAMPLE SIZE

Sample size for Swabhimaan baseline (2016) and endline (2022) surveys								
	Adolesc	Adolescent girls		Pregnant women		Mother of children under 2yrs		
	Baseline	Endline	Baseline	Endline	Baseline	Endline	Total	
Bihar	1704	1119	936	443	2612	1162	7976	
Chhattisgarh	2921	2078	823	715	2539	2082	11158	
Odisha	1727	1111	814	540	3604	1522	9318	
Total	al 10660		42	71	135	521	28452	

SURVEY TOOLS AND INSTRUMENTS

Household

• HH members, HH characteristics, banking & HH assets, utilization of PDS, agriculture & farming activities, nutrition garden, WASH, SHG finance & loans and, COVID-19 knowledge & practices

Adolescent girls

• Background, education, diet, access to health & ICDS services, nutritional assessment, KAP, WASH, Jeevika programme, vocational training & work, decision-making, gender and mental health (only in Chhattisgarh endline survey) and anthropometric measurements

Pregnant women

Mothers of children under age 2

• Background, education, diet, food security & coping mechanism, ANC, natal and PNC, access to VHSND, utilization of ICDS, family planning, WASH, Jeevika programme, work and empowerment, husband's background, gender and mental health (only in Chhattisgarh endline survey) and anthropometric measurements

Children under age 2 years

• Background, birth care, feeding practices, food intake practices, utilization of ICDS, child morbidity and feeding practices during illness, immunization, personal hygiene and weight-growth measurements.

Preparatory Work for Data collection

Identification of target groups

- Listing of three target groups by complete house listing of selected villages.
- Selected required number of each target group from the list.

Recruitment of investigators/ Tools

- Candidates who were at least graduated from the same district
- Preference was given to those with some basic knowledge of using computer/laptop and survey experience
- Bilingual questionnaires
- Weighing machine
- Stadiometer
- Measurement Tape
- Calibration

Training of investigators

- 10-12 days training programme and reorientation.
- Training and practice session on anthropometric measurements.
- Field practice of administering all questionnaires using CAPI.
- At the end of training, test was conducted. All those who qualified were continued for the data collection.

Data Monitoring and Quality Components

Key features	Process	Components	IIPS
Handholding	Spot-checks tables –	Spot-Checks and	Coordinator and
	Initial stage of survey	reorientation	Project Officers
Validation	Back-checks tables –	Matching with soft	Project Officer
	Daily	data and filled	back-checks
		questionnaire	Matching by IIPS
Validity and	Field-checks tables-	Household, and	Data Analyst cum
consistency	teams	target groups	programmes, Co-PI
	Weekly	response and	
		measurement	
Validation and	Data consistency	Higher level analysis	Data Analyst cum
consistency	intervention and	of age and	programmer and
	control villages	anthropometric	PI/CO-PIs
	Bi-weekly		

Monitoring data quality through field check tables

- Field-check tables are one way of monitoring data quality when the field work is still in progress.
- Field-check tables on important aspects of data quality are produced regularly using STATA.
- Use of the field-check tables is crucial especially during early stages of fieldwork when the option to retraining or modifying procedures are still feasible.
- These Field check tables are run by the JPMs every week starting after entering the first batch of PSU data.
- As fieldwork progresses and becomes more settled and routine, the checks become biweekly.

Table 1 Field-check: household response rates										
Team	Results of household interview									
	Completed	НН	НН	Postponed	Refused	d Dwelling	Other	Total	Number	Household
		present,	absent			vacant				response
		no resp.								rate (%)
Team 1										
Team 2										
All teams										
Table 2: 1	Field-checl	k: Target	group c	overage ra	te and r	esponse ra	te			
				Result	s of inter	view of Ta	rget Group	OS		
Team	Comp	Completed Not at home		me Postp	oned	Refused	Partial	Other Total		Number
							interview			
Team 1										
Team 2										
All teams										

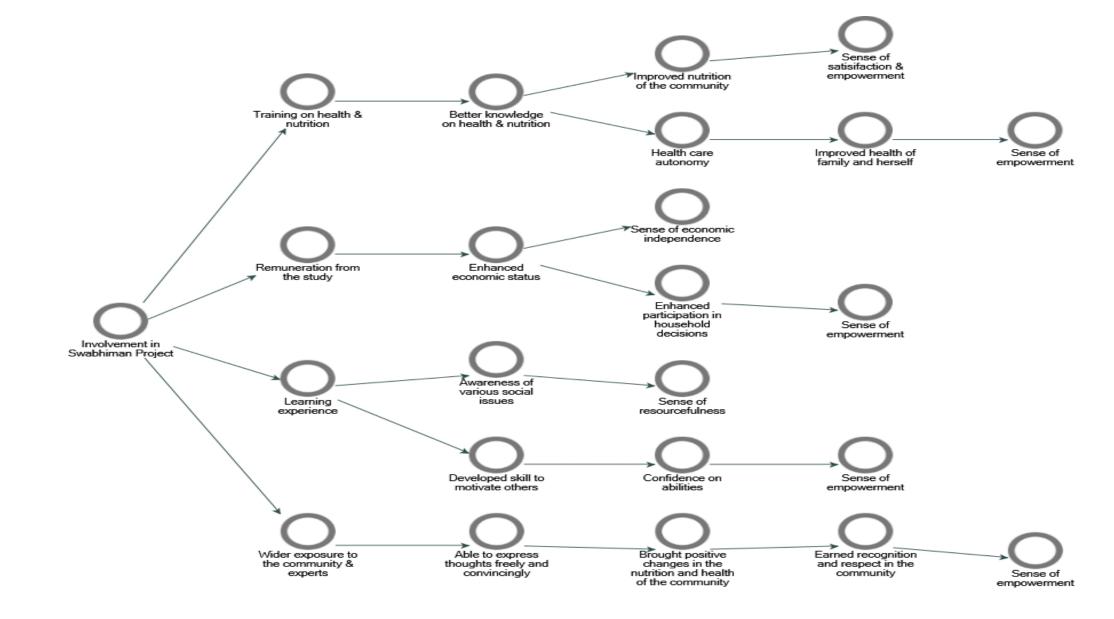
Table 3:	Table 3: Response rate of Height/Weight/MUAC measurement (In numbers): Target Groups											
District			Dand	ina 1	Dondi	n			Pair	ed 7	Γ-test	
		Dofi Micc	Reading 1		Reading 2		Percentage of girls in which	C4J			95% C.	
		ire sed ng	Mean	SD	Mean	SD	difference between two readings of height have a gap beyond the acceptable value	Mean	Std. Err. Mean	p	Lower Limit	Uppe r Limit
Team 1												
Team 2												
Team 3												

List	List of spot-check tables- investigator wise							
Sr	Check	Assessment	Action taken on	Remark				
no			the spot					
1	How investigator describing the purpose of							
	survey? (language and mannerism)							
2	Age probing by investigators							
3	Diet diversity							
4	Decision making questions (scale)							
5	Services accessed in AHD/kishori divas							
6	ANC history							
7	Delivery and postnatal care							
8	Role of Jeevika							
9	Anthropometric measurements							

List of	List of back-check tables- investigator wise/team with comparison of questionnaires or soft data								
(Week	(Weekly)								
Sr No.		Back check	Filled	match					
			questionnaire						
1	Age of target group individuals								
2	Religion or caste/tribe								
3	Education status								
4	Source of water								
5	Type of toilet								
6	Type of ration card								
6	Salt tested and result								
7	Calcium tablets								
8	Place of delivery								
9	Timing of first ANC								
10	Food security								
11	Height								

Direct and indirect gains through Swabhimaan project

- Community Development (Will be discussed in the following presentations)
- Knowledge transferred to community
- Employment generation(300 investigators, Programmers, Data Anayalyst, Technical Writers)
- Empowerment of Poshan Sakhi
- Capacity building of investigators and research staff
- Workshops at IIPS for staff and research scholars
 - Sampling
 - CSPro
 - GIS
 - Qualitative techniques and tools, analysis by NVivo
- Research Publications



PUBLICATIONS

S.N	Authors	Title	Journal, Year;Vol(Is):Pa ge
1	Onori F, Dhillon P, Dinachandra K, Jaleel A, Saraswat A, RS Reshmi, Unisa Sayeed , Sethi V	An adaptation of the Food Insecurity Experience Scale (FIES) for measuring food insecurity among women in socially-backward communities	Asian Journal of Agriculture and Development, 2021;18(1):66-82
2	Saraswat A, Unisa S, Reshmi RS, Dwivedi LK, Pedgaonkar S, Sethi V	Assessment of nutritional status of pregnant women based on mid-upper arm circumference (MUAC) and associated factors in poverty pockets of eastern India	Journal of Family Welfare, 2021;64:134-145
3	Unisa S, Saraswat A, Bhanot A, Jaleel A, Parhi RN, Bhattacharjee S, Purty A, Rath S, Mohapatra B, Lumba A, Sinha S, Nita Kejrewal N, Agrawal N, Bhatia V, Ruikar M	Predictors of the diets consumed by adolescent girls, pregnant women and mothers with children under age two years in rural eastern India	Journal of Biosocial Science, 2021;53(5):663- 82.
4	Sethi V, Gupta N, Pedgaonkar S, Saraswat A, Singh KD, Rahman HU, De Wagt A, Unisa S	Mid-upper arm circumference cut-offs for screening thinness and severe thinness in Indian adolescent girls aged 10–19 years in field settings	Public Health Nutrition, 2019;22(12):218 9-99

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S · N	Authors	Title	Journal, Year;Vol(Is):P age
5	Chattopadhyay A, Sethi V, Nagargoje VP, Saraswat A, Surani N, Agarwal A, Bhatia V, Ruikar M, Bhattacharjee S, Parhi RN, Dar S, Daniel A, Sachdev HPS, Singh CM, Gope RK, Nath V, Sareen N, De Wagt A, Unisa S	WASH practices and its association with nutritional status of adolescent girls in poverty pockets of eastern India	BMC Women's Health, 2019;19(1):89
6	Fulpagare PH, Saraswat A, Konsam D, Surani N, Parhi RN, Bhattacharjee S, Somya S, Purty A, Mohapatra B, Kejrewal N, Agrawal N, Bhatia V, Ruikar M, Gope RK, Murira Z, De Wagt A, Sethi V	Antenatal care service utilization among adolescent pregnant women-evidence from Swabhimaan Programme in India	Frontiers in Public Health, 2019;7:369.
7	Sethi V, Bhanot A, Bhattacharjee S, Gope RK, Sarangi D, Nath V, Nair N, Singh U, Daniel A, Parhi RN, Sinha, S Loomba A, Somya S, Purty A, Ali N, Mohapatra B, Agrawal N, Bhatia V, Ruikar M, Sahu B, Reshmi RS, Pedgaonkar S, Dwivedi LK , Saiyed F, Prajapati M, Mishra P, Prost A, Kejrewal N, De Wagt A, Sachdev HPS, Unisa S	Integrated multisectoral strategy to improve girls' and women's nutrition before conception, during pregnancy and after birth in India (Swabhimaan): protocol for a prospective, non-randomised controlled evaluation	BMJ Open, 2019;9:e031632
8	Reshmi RS, Dinachandra K, Bhanot A, Unisa S, Menon GT, Agrawal N, Bhatia V, Ruikar M, Daniel A, Bhattacharjee S, Parhi RN, Sachdev HPS, Gope RK, De Wagt A, Sethi V	Context for layering women's nutrition interventions on a large scale poverty alleviation program: Evidence from three eastern Indian states	PloS One, 2019;14(1):e02 10836

THANKS FOR YOUR ATTENTION!!!

COVERAGE OF INDICATORS

Improve food and nutrient intake	Adolescent girls	Pregnant women	Mothers
Access to generalised household ration through Public Distribution System (PDS), a food subsidy scheme	*	*	*
Balanced energy protein supplementation through access to supplementary rations	*	*	*
Access to knowledge and choices about how to increase maternal dietary diversity	*	*	*
Access to knowledge and support for nutrition-sensitive agriculture at home (kitchen garden) and community-based food insecurity coping strategies.	*	*	*
Prevent micronutrient deficiencies and anemia			
Iron and folic acid (IFA) supplementation	*	*	*
Universal use of iodised salt	*	*	*
Calcium supplementation and deworming	X	*	*
Access to information and commodities like insecticide treated bed-nets for malaria prevention	*	*	*
Access to information on preventing tobacco and alcohol use in pregnancy	X	*	*
Increase access to health services and special care to nutritionally "at risk" women			
Early registration in outreach services	*	*	X

COVERAGE OF INDICATORS

	Adolescent girls	Pregnant	Mothers
Describes and according to a first of the selection of a selection of the	giris	women	
Recording and monitoring of nutritional status and special community-based at-nutritional	X	*	×
risk package			
Quality reproductive health, antenatal and postnatal care	*	*	*
Access to knowledge and entitlements for promotion of institutional deliveries and		*	*
maternity benefits	X	*	*
Increase access to education and commodities for water, sanitation and hygiene (WASH)			
Sanitation and hygiene (including menstrual hygiene) education	*	*	*
Access to safe drinking water and sanitation commodities	*	*	*
Prevent early, poorly spaced or unwanted pregnancies			
Promotion of secondary education and education for delaying the age at marriage to legal	*		V
age	^	X	X
Access to information and family planning commodities for delaying age at first pregnancy	*	*	*
and prevention of repeated pregnancies	^	^	^
Women's collective voice and empowerment for decision-making to prevent child	*	*	*
marriage, violence against women, child spacing and other gender-related issues	^	^	^
* = relevant target group; x = non-relevant target group			

TIMELINE

