TRY
an endeavour to bring smile

ANNUAL REPORT

2023 - 2024

TRY

www.tryindia.in

Overview of "TRY" Organization.

Mr. Utpal Dutt established An Organization Name "TRY" 20 years ago and today is carrying out developmental work in many states of the country. He started his journey with a hopeful belief. Change is the only path to development. Keep trying to take forward the thinking of people of every section of the society about how to achieve overall development of those who are lagging behind economically and socially.

TRY is well known to address Health, education and socio economics issues and problems with potential measure and efforts to resolve under the guidance and support of Government and active involvement of local stakeholder.

- **HIV/AIDS: TRY is working as a Project Management Unit (PMU) at the state level in Jharkhand for HIV/AIDS. They likely oversee and coordinate various initiatives and programs related to HIV/AIDS prevention, treatment, and support. (2020)**

- **TI Project: TRY is implementing a TI (Targeted Intervention) project in two districts of Jharkhand. TI projects focus on providing specific interventions and services to key populations who are at high risk of HIV infection, such as sex workers, injecting drug users, and men who have sex with men.**

- **Hospitals under Tribal Welfare: TRY is running two hospitals under the Tribal Welfare department of the Jharkhand government. These hospitals likely cater to the healthcare needs of tribal communities, providing medical services and specialized care.**

- **TB Intervention: TRY is involved in TB (Tuberculosis) intervention programs in 17 districts of Jharkhand as well as in Bihar of 7 District. These programs likely include activities related to TB awareness, screening, and diagnosis, treatment, and support services.**

- **YOGA project under Ayush: TRY is working on a YOGA project under Ayush. Ayush is a flagship healthcare scheme in India and the YOGA project may involve promoting and providing yoga-based interventions for health and well-being.**

- **Panchayati Raj project in Godda district: In recent years, TRY has extended its work to Godda district, focusing on a project related to Panchayati Raj. Panchayati Raj refers to the decentralized system of local self-government in rural areas and TRY may be involved in initiatives aimed at strengthening governance and community development in the Godda District.**

- **Mega Skill under DDU-GKY: in the Palojori block of Deogarh district and in Ranchi, TRY is engaged in a Mega Skill project under the Deen Dayal Upadhyaya Grameen Kaushal Yojana (DDU-GKY). This initiative aims to provide skill development training and employment opportunities to rural youth.**

- **Community Management of Acute Malnutrition (CMAM) was implemented at Pakur District, Jharkhand for management of wasting for infants and children (0-59 months of age). This approach empowers families to treat wasting at home, with the majority of children receiving care in their community, with weekly visits to AWC.**

PROJECT UNDER PANCHAYTI RAJ

As an empanelled agency entrusted with the responsibility of providing training to the newly elected ward members of Godda district, we have made significant progress in fulfilling our mandate. Under the guidance and support of the Panchayat Raj Department of Jharkhand, we successfully conducted training programs in various blocks, namely Meherma, Thakurgangti, Boarijor, and Mahagama, Basant rai, Pathaergama, Sundar Pahari.

Training Initiatives:
Our organization's primary focus during the year was to equip the newly elected ward members with the necessary skills and knowledge to effectively carry out their roles and responsibilities in local governance. Through comprehensive training sessions, we aimed to enhance their understanding of governance principles, community engagement, and development planning.

Achievements:
We are proud to report that our training initiatives yielded positive outcomes and made a tangible impact on the ward members and the communities they serve. Some key achievements include:

1. Successful Completion of Training Programs: We successfully completed training programs in Meherma, Thakurgangti, Boarijor, and Mahagama blocks of Godda district. These programs were conducted in collaboration with the Panchayat Raj Department of Jharkhand, ensuring adherence to established guidelines and best practices.
2. Skill Enhancement: Our training sessions focused on building the capacity of ward members in various areas, including governance, leadership, decision-making, and community development. The participants gained valuable skills and knowledge to effectively address the needs and concerns of their respective wards.
3. Empowered Ward Members: Through our training, ward members were empowered to actively engage with their constituents, understand local issues, and contribute to the overall development of their wards. They developed a deeper understanding of the Panchayati Raj system and their roles within it.

The training provided in following Block of Godda.

	Block Name	No of Participants (Ward Members)
1	Meherma	288
2	Thakurgangti	200
3	Basant Rai	186
4	Mahagama	336
5	Pathaergama	231
6	Sundar Pahari	131
7	Boarijor	274
	TOTAL	**1646 (Received Training)**

Collaboration and Partnerships:

We would like to express our gratitude to the Panchayat Raj Department of Jharkhand for their invaluable support and collaboration throughout the training programs. Their guidance and expertise ensured the smooth implementation of the initiatives and enhanced their effectiveness.

Future Outlook:

Looking ahead, we remain committed to continuing our efforts in capacity building and training for elected ward members. We aim to expand our reach to more blocks within Godda district and explore opportunities to collaborate with other stakeholders. By doing so, we strive to contribute to the development and empowerment of local governance structures, ultimately benefiting the communities we serve.

Acknowledgments:

We extend our sincere appreciation to all the ward members, trainers, and staff members who actively participated in and contributed to the success of the training programs. Their dedication and enthusiasm have been instrumental in achieving our objectives. We would also like to thank our supporters, donors, and well-wishers who have continued to believe in our vision and supported our endeavours.

we are proud of the accomplishments we have achieved in 2023-2024. Our training programs have effectively empowered ward members in Godda district, equipping them with the necessary skills and knowledge to serve their communities better. We remain steadfast in our commitment to fostering good governance and sustainable development at the grassroots level.

Implementation of Targeted Intervention Project in Hazaribagh District

Introduction:

This annual report provides an overview of the implementation of the Targeted Intervention Project in Hazaribagh District from 2023 to 2024. The project focuses on providing essential services to the target groups, including female sex workers (FSWs), men having sex with men (MSM), and transgender individuals (TG). The primary services offered include clinic services, HIV testing, syphilis testing, referral to Integrated Counselling and Testing Centre (ICTC) for confirmatory testing, and antiretroviral therapy (ART) services for people living with HIV (PLHIV).

TRY is implementing HIV Prevention intervention in two district 1- Hazaribagh, 2- Bokaro. In Hazaribagh having a core composite group working among the FSW, MSM &TG. In Bokaro having a Bridge Population (Working among the Migrants Population).

AANUAL DATA (HAZARIBHAG)		
***Active Population ***	FSW	735
	MSM	123
	TG	60
CLINIC	FSW	2643
	MSM	366
	TG	207
RMC Visit	FSW	2643
	MSM	366
	TG	207
(PT)/ID US Treated	FSW	20
	MSM	2
	TG	2
SYPHILIS Screening	FSW	1224
	MSM	216
	TG	111
Condom Distribution	FSW	189167
	MSM	24764
	TG	10277

Individual Counselled of (HRG)	FSW	1608
	MSM	307
	TG	128
HIV Testing ART Refer	FSW	1158
	MSM	208
	TG	108
HIV Through Community Based	FSW	837
	MSM	197
	TG	97
TB at TI level	FSW	2591
	MSM	377
	TG	211

Referral and ART Services:

As part of the project, individuals who tested positive for HIV were referred to the ICTC for confirmatory testing. Subsequently, those diagnosed with HIV were provided with access to antiretroviral therapy (ART) services. The number of individuals receiving ART services through this project is not specified in the provided data, but it is essential to ensure that PLHIV receive proper treatment and care to manage their condition effectively.

Awareness and Prevention Efforts:

In addition to the core services, the project has actively focused on raising awareness and conducting regular meetings. These initiatives aimed to educate the target groups and the wider community about HIV/AIDS prevention, safe sexual practices, and the importance of regular testing. By promoting awareness and prevention, the project has played a vital role in reducing the risk of HIV transmission and improving the overall health outcomes of the target population.

Conclusion:

The Targeted Intervention Project in Hazaribagh District has made significant progress in providing essential services to female sex workers, men having sex with men, and transgender individuals. The project's efforts in HIV testing, syphilis testing, clinic services, referral to ICTC, and ART services have contributed to the overall well-being of the target groups. Furthermore, the awareness and prevention initiatives have helped in reducing the risk of fatal diseases like HIV/AIDS.

Implementation of Targeted Intervention Project in Bokaro District

Introduction:

Try organization, in collaboration with the Jharkhand AIDS Control Society, has been actively involved in implementing a targeted intervention project in Bokaro district working among 10000 Migrants population aimed at addressing the unique healthcare needs of the migrant population. The project focuses on HIV/AIDS prevention, testing, treatment, and awareness among migrants in Jharkhand. This annual report highlights the major achievements of Try organization during the period from FY 2023 to 2024.

Activities: -

Clinic Services and HIV Testing:

During the reporting period, TRY organization provided clinic services to the Migrants. These services encompassed various aspects of healthcare, including HIV testing. which is a crucial step in early detection and management of HIV.

Health Camps:

Try organization organized health camps that successfully covered a population of 10000 individuals from the migrant community. These health camps served as a platform to provide comprehensive healthcare services, including HIV/AIDS prevention, testing, and general healthcare check-ups.

Access to ART Services:

People living with HIV (PLHIV) were given access to antiretroviral therapy (ART) services by Try organization. The organization ensured that PLHIV received the necessary medications and support to manage their condition effectively. ART services play a crucial role in improving the quality of life and reducing the transmission of HIV.

Congregation Events

To raise awareness about HIV/AIDS among the migrant population, TRY organization organized congregation events. These events served as an effective means to disseminate information, educate the community, and promote preventive practices. The congregation events facilitated meaningful interactions and discussions on HIV/AIDS-related topics.

Networking with Stakeholders:

Try organization actively engaged with stakeholders involved in HIV/AIDS prevention and control. By collaborating with other organizations, government agencies, and community leaders, TRY organization aimed to enhance population coverage and strengthen efforts in preventing HIV/AIDS. These partnerships enabled the organization to leverage resources, expertise, and collective efforts for a more comprehensive approach.

IPC Sessions:

Information, Education, and Communication (IPC) sessions were conducted at various migrant sites. The primary objective of these sessions was to identify migrants in need of awareness regarding HIV/AIDS and tuberculosis (TB). Through these sessions, TRY organization provided knowledge, dispelled myths, and promoted healthy behaviours among the migrant population.

ANNUAL DATA (BOKARO) Migrant.	
New HRG Contacted through IPC and M.D Media	43166
*Re-active HRG from (Drop out) *	10215
No of HRG Clinical service	5359
Visited RMC only	5359
Condom distribution through outlet	1792
Condom distribution through social media	1789
No of individual Counselled during the month	4032
*HIV Screening/total HIV testing	4034
HIV Through Community Based Screening	4000
Alive HRG Currently Registered at ART Centre	16
TB test at TI level	10215

Conclusion:

The efforts of Try organization in implementing the targeted intervention project under the Jharkhand AIDS Control Society have yielded significant achievements. The organization successfully provided clinic services and conducted HIV testing for a considerable number of migrants. Health camps and ART services were instrumental in ensuring comprehensive healthcare coverage. The congregation events, networking with stakeholders, and IPC sessions further contributed to raising awareness, engaging the community, and preventing the spread of HIV/AIDS. TRY organization remains committed to its mission of improving the health and well-being of the migrant population in Jharkhand. The organization will continue to work towards strengthening its interventions, expanding outreach, and collaborating with stakeholders to achieve sustainable and impactful outcomes in the fight against HIV/AIDS.

Welfare Hospitals

OPERATION MAINTENANCE AND MANAGEMENT OF TRIBAL WELFARE RURAL HOSPITALS IN JHARKHAND.

Introduction

The project is for provision of free of cost quality healthcare to tribal population through a fully equipped 50 bedded first referral Unit with 24X7 emergency services. Key feature of the welfare hospital.

- Mobilization through Health Camp.
- Preference of Local Doctors and paramedical Staff.
- Awareness through various health programs.

Two Hospital being operated by TRY which is situated at Tigra, Ranchi and Gando, Dumka.

TRIBAL WELFARE HOSPITAL TIGRA, RANCHI

TRIBAL WELFARE HOSPITAL GANDO, DUMKA

Project Objectives.

- The objective of the Project is to provide free of cost quality health care to the Underprivileged, especially tribal population.
- The Project aims at developing Tribal Welfare Rural Hospitals as First Referral Unit (FRU) in the state.
- We will target at bringing in private sector efficiency for operation and management facilities.
- Ensure availability and access of permanent 24-hour service (including safe and secure protection from the elements, access to water, sanitation and allied facilities, security, safety and allied services.

Our Plan

- Standard infrastructure as per Indian Public Health Standards.
- Certification of Health Centers from National/International organizations
- Mobile Medical Units- outreach, services at doorsteps
- Management of non-communicable disease
- Maximum utilization of public health facilities.
- Use of digital technology for better management & service.

Areas of focus

Health

- Developing strategy to provide health services to the under-privilege people.
- Establishment of Mobile clinic for remotely situated community.
- Qualitative services to be ensured among underprivilege people.

Intervention

- Community Based approaches to eliminate TB and HIV infection Through Counselling/testing/referral.
- Special care and treatment for PLHIV/TB Affected etc.

Health on Wheels: Mobile Care for needy.

Over the past three years, the Mobile Health Unit (MHU) services in Ranchi and Dumka have significantly impacted local communities. In Ranchi, 36,440 individuals have received health services through general health camps, while in Dumka, the number is even higher at 42,109.

Effectiveness of the MHUs in enhancing healthcare access, addressing prevalent health issues, and improving overall community health. The outreach has fostered greater awareness and engagement, contributing to better health-seeking behaviour among residents.

OUTCOME OF MHU

- Access to Healthcare
- Remote Areas: Many communities in Bihar are located in remote areas with limited access to healthcare facilities. MHUs can reach these populations effectively.
- Transportation Barriers: Poor road infrastructure can hinder access to hospitals. MHUs can bridge this gap by bringing services directly to communities.
- Preventive Care
- Health Screenings: Regular health check-ups and screenings can identify health issues early, reducing the burden on hospitals.
- Vaccination Drives: MHUs can facilitate immunization programs, ensuring that children and vulnerable populations receive necessary vaccinations.
- Health Education and Awareness
- Community Engagement: MHUs can conduct health education sessions, raising awareness about hygiene, family planning, and disease prevention.
- Culturally Relevant Information: Providing information that is culturally appropriate can enhance the effectiveness of health interventions.
- Emergency Response
- Crisis Situations: In emergencies, such as natural disasters or disease outbreaks, MHUs can provide immediate medical assistance and resources.
- Rapid Deployment: Their mobile nature allows for quick deployment in response to health crises.

Photographs

PPSA-Patient provider Support Agency-TB

Brief Overview of the Tuberculosis (TB)

- Tuberculosis (TB) is an infectious disease caused by the bacterium Mycobacterium tuberculosis (MTB). which generally affects the lungs, but can also affect other parts of the body. There is No age bar for the bacteria to infect. It can infect any of the organs except, Hairs and nails.

Symptoms of Tuberculosis (TB):-

- Cough for more than 2 weeks
- Weight Loss
- Evening rising fever
- Blood in Sputum
- Chest Pain

About project

PPSA is a model under NTEP unit to engage private-sector doctors treating patients of TB and provide end-to-end services, such as diagnosis, notification, patient adherence and support, and treatment linkages. Project is implementing since 05th June 2023 in 17 Dist. of Jharkhand and 7 District of Bihar from 1st February 2024.

Key elements of the PPSA Project

- Mapping private-sector providers (formal and informal), laboratories, and chemists.
- Increasing engagement of private-sector providers through in-clinic visits and continuing medical education (CME).
- Linking NTEP- Provided diagnostic services (Sputum microscopy, X-ray, CB-NAAT, Sputum collection and transport) and fixed drug combinations (FDCs).
- Facilitating and updating TB notification and other relevant information in Nikshay Sarthi.
- Facilitating incentives given by NTEP to the Private-sector doctors and patients.
- Counseling the patients to ensure treatment adherence.
- Facilitating linkages for DR-TB treatment and HIV services, as required.

PPSA GOAL

All TB patients in the community to have access to early, good quality diagnosis, treatment and adherence support services in a manner that is affordable and acceptable to the patient in time, place and person.

Concept of “Nikshay Sarthi”: (“Nikshay” – Elimination of TB & “Sarthi” – Friend ; “Friend to help in elimination of TB”)
A nodal person identified and assigned by the Private Health Care Facility for a set of TB related activities and are incentivized for his/her activities. Role of Nikshay Sarthi written as follow;

- Coordinates with PPSA, Private Health Facilities & Public Health
- TB Case Notification – Nikshay & Notification register
- Provide health education and counselling
- Bank account details collection
- Collection of specimen for DST
- HIV and Diabetes testing and/or referral
- FDC offer to patient & ensures treatment adherence
- Tracking adherence, Refill Management
- Record Treatment outcome at the end
- All Nikshay Entries

Field staff of PPSA Project (Jharkhand):- • District Co-Ordinator - 2 • Field officers - 18 • Specimen & FDC Transporter – 12	Field staff of PPSA Project (Bihar):- • District Co-Ordinator – 7 • Cluster Head - 2 • Field officers - 29 • Specimen & FDC Transporter – 21 • Lab Technician - 4

These field staff’s co-ordinate with the Nikshay Sarthi and carry out the activity of Private TB Notification and its components.

JHARKHAND PPSA – ANNUAL DATA 2023-24

CLUSTER	DISTRICTS	ANNUAL TARGET	TARGET (JUN'23 TO MAR'24)	NOTIFY	ACHIEVE %
CLUSTER 2	BOKARO	2150	1792	1139	64%
	CHATRA	200	167	93	56%
	GARHWA	650	542	521	96%
	GIRIDIH	1150	958	968	101%
	HAZARIBAGH	950	792	562	71%
	KODARMA	300	250	417	167%
	LATHEHAR	50	42	42	101%

	PALAMU	1550	1292	1086	84%
	RAMGARH	400	333	355	107%
CLUSTER 3	GUMLA	250	208	151	72%
	KHUNTI	50	42	67	161%
	LOHARDAGA	150	125	80	64%
	PASHCHIMI SINGHBHUM	550	458	333	73%
	PURBI SINGHBHUM	1600	1333	917	69%
	RANCHI	5800	4833	2453	51%
	SARAIKELA-KHARSAWAN	550	458	232	51%
	SIMDEGA	100	83	54	65%
TOTAL		16450	13708	9470	69%

BIHAR PPSA – ANNUAL DATA

CLUSTER	**DISTRICT**	**ANNUAL TARGET**	**TARGET (FEB'24 AND MAR'24)**	**NOTIFY**	**ACHEIVE %**
CLUSTER 4	GOPALGANJ	4300	717	735	103%
	PASCHIM CHAMPARAN	5200	867	849	98%
	SARAN	4000	667	381	57%
	SIWAN	4300	717	564	79%
CLUSTER 8	ARWAL	500	83	53	64%
	NALANDA	3300	550	423	77%
	PATNA	26000	4333	2634	61%
TOTAL		47600	7933	5639	71%

Success story of TB Patient

टीबी से डरने की नहीं बल्कि लड़ने की जरूरत है। सामुदायिक भागीदारी से ही 2025 तक भारत को टीबी मुक्त बनाने का सपना साकार होगा। इसमें हर व्यक्ति को सहयोगी बनना होगा। कुछ ऐसा ही संदेश दे रहे हैं **झारखण्ड** प्रदेश, **राँची** के टीबी चैंपियन मुकेश दास कभी ये खुद टीबी से ग्रसित थे और जिंदगी से निराश हो चुके थे, लेकिन नियमित दवाओं का सेवन कर खुद को टीबी मुक्त कर लिया। वे चाहते हैं कि टीबी की गिरफ्त में आए दूसरे लोग भी इससे निजात पाएं। इसी उद्देश्य के साथ वे समाज में जागरूकता फैला रहे हैं। प्रदेश के

Since he was suffering from severe extra pulmonary TB, it took him around 8 months to recover completely. During the course of his treatment, he got immense love and support from his family and friends which also helped him to quit alcohol. Now, **Santosh Kumar** is completely cured from TB.

Field activity photographs

SAMPLE COLLECTION

Mega Skill under Mukhyamantri Sarthi Yojna DDUKK

The major skill development programme of the Jharkhand government implemented by JSDMS, was announced in a Gazette Notification 1198 dated November 14, 2022. The program's main objective is to provide skill development training in NSQF-aligned job roles that are relevant to the industry. The programme is conducted in accordance with the Common Cost Norms notification issued by the Ministry of Skill Development and Entrepreneurship, Government of India. The scheme's primary goal is to provide youth with work opportunities and prepare them for prospects for self-employment.

Special features under this scheme (Rozgar Protsahan Bhatta)

An allowance of Rs.1000/- per month to boys and Rs.1500/- per month to girls/disabled/transgender, for a maximum of one year, through Direct Benefit Transfer (DBT) will be provided in case the students do not get employment within three months.

An amount of Rs. 1000/- monthly as a transportation allowance will be provided to the non-residential trainees through Direct Benefit Transfer (DBT) for commuting from their house to the training centers.

- The scheme aims at setting up of large-scale Mega Centers for a longer duration of quality training to provide On Job Training (OJT).
- It aims at providing training to 60,000 youth for the year 2023-2024.
- The training is completely residential.
- Operational Since OCT 20017
- The Centre has an infrastructure capacity (training centre & hostel area) of 25,000 square feet.
- The training under this scheme is minimum 576 hours in which 160 hours is dedicated for IT and Soft Skills

TRY Mega Skill Center Rise in the skill industry on 11th Oct 2023. The first batch is launched on 04/12/2023. TRY Mega Skill Centre is located in khaga village of palojori block in Deoghar District of Jharkhand. Total Campus area of the centre is more than 130680 sq. ft and hostel and training area is more than 30000 sq. ft. total 480 number of candidates stay and get training in one time. Well trained & experienced trainer trained the trainees for their bright future.

Facility In TRY Mega Skill Center

- Well Maintained Class Room.
- Full Pack of Sapreet Lab (Related Job Role) For Trainees.
- Free Wi-fi Internet Facility.
- Complementary IT Class.
- 24 Hours Electricity & Water Supply (RO).
- Healthy food facility.
- 24 hours doctor facility .
- High Security.

- Abundance of Sports Facility Such as Carrum, Ludo, Cricket, Badminton, Volleyball etc.
- Friendly Environment for Trainees.
- TV, Music System, Computers etc. are available for internment.

Courses (Trade) offer for Student/Candidate in TRY Mega Skill centre

Main Courses

1. Assistant Electrician
2. General duty Assistant
3. Dresser Medical
4. Solar Panel Installation technician

Complimentary Courses

1. Soft Skill
2. IT (Basics Of computer)

Combo Courses

1. Assistant Electrician + Solar Panel Installation technician
2. General duty Assistant +Dresser Medical

Benefits of the courses

- After training we provide job opportunity in reputed company.
- Job offered in all over India candidate can select their preferable Area.
- After the training candidate can develop own business.
- During the training Period, candidate develop their Personality.

Total Target vs Achievement (2023 – 2024)

Trade	Total Target	Total Achievement
SPIT	120	120
GDA	120	120
DM	120	120
AE	120	120

Ayush Yoga Project

Yoga is a holistic practice that originated in ancient India and has evolved over thousands of years. It encompasses a wide range of physical, mental, and spiritual practices aimed at promoting overall well-being and harmony. The word "yoga" itself means union, referring to the union of mind, body, and spirit.

Ayush Yoga Project is implementing by TRY in 3 districts of Jharkhand namely Ranchi, Dumka and Saraikela under the Ministry of Ayush Govt. of India. Objective of the project is to facilitate Yoga Sessions at AYUSH Health and Wellness Centres as well as in School & Community. Male Yoga Instructors conduct 32 yoga sessions and female Yoga Instructors conduct 20 yoga sessions for female group at AHWC, School and community level each month as per session scheduled.

Component of AYUSH-YOGA Project

- Facilitation of Yoga sessions for any participants free of cost.
- Capacity building of ASHAs and ANM/ MPW or any other Volunteer in the aspect of Yoga.
- Help CHO, ANM and ASHAs for conducting awareness campaigns.

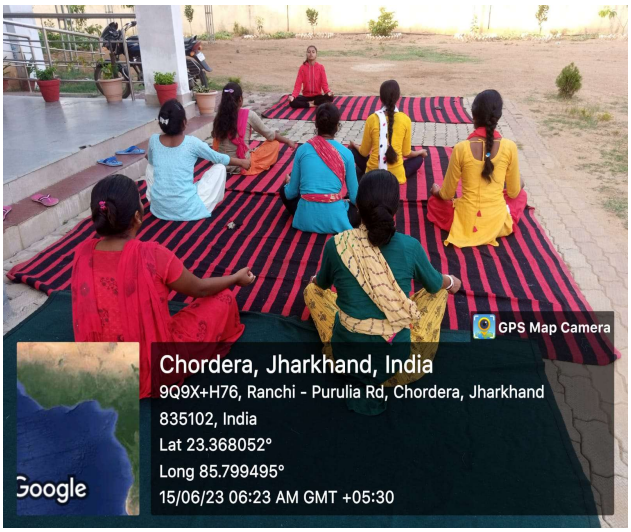
Allocation of manpower in 3 District of Jharkhand

District	Number of AHWCs	Number of Yoga Instructor (Working)
Ranchi	**15**	**28**
Dumka	**12**	**19**
Saraikela	**25**	**45**
Total	**52**	**92**

Yoga Session facilitated by Yoga Instructor at Community Level as well as Institutional level (May 2023 to March 2024)

District	Number of Session facilitated
Ranchi	**5291**
Dumka	**2361**
Saraikela	**7841**
Total Session	**15493**

Photographs (Dist. - Ranchi)



Photographs (Dist. - Dumka)

Photographs (Dist. - Saraikela)

CMAM Program-Pakur Jharkhand

About Malnutrition

Acute Malnutrition, also referred to as wasting, is a life-threatening condition, increasing the risk of death and serious illness. Children with severe forms are nearly 12 times more likely to die than well-nourished children. Most of the world's wasted children live in Asia. Wasting occurs as a result of recent rapid weight loss or a failure to gain weight, most often caused by insufficient food intake and/or disease.

Although there is an effective management for wasting, access to such services remains inadequate. Globally, only 1 in 3 severely wasted children receiving treatment. More effort is needed to scale-up wasting treatment to reach all children who require care.

CMAM program Implementation

Community Management of Acute Malnutrition (CMAM) was implemented at Pakur District, Jharkhand for management of wasting for infants and children (0-59 months of age). This approach empowered families to treat wasting at home, with the majority of children receiving care in their community, with weekly visits to AWC.

The CMAM approach was based on four principles:

1. **Maximizing access to treatment and coverage of treatment services.** Through CMAM, treatment for wasting is available within or nearby to the communities where wasted children live.
2. **Timeliness.** This principle refers to identifying cases of wasting early, before it becomes severe and before complications arise. By doing so, most children with wasting can be treated at home.
3. **Appropriate care.** Using CMAM, the medical and nutrition care is matched to the needs to the child, meaning that most children can receive treatment while at home, and only the most severe and complicated cases will require in-patient care at the hospital. In the past, all cases of severe wasting received inpatient care
4. **Care for as long as needed.** By building local capacity and integrating CMAM services within the health system the aim is to ensure that treatment services are routinely available for as long as wasting is a problem within the population.

Program Objective:

- To improve the nutritional status of children through Community-based Management of Acute Malnutrition (CMAM).
- To establish a multi-strategic intervention in nurturing malnourished children.
- Sharply scale up evidence-based cost-effective interventions to prevent and treat malnourished children.
- To develop sustainable institutional mechanism and training ecosystem for frontline workers.

- To develop continuum of care mechanism in existing system.
- To develop multispectral platform (Health department, ICDS, JEEVIKA,
- To demonstrate and promote linkage between Household, community

Outcome Fulfilled:

- Improved nutritional status of children below 0-6 years of age in Pakur district.
- Improved food and nutrition security at the household level.
- Improved the capacity of all ICDS (Anganwadi) workers of the Pakur District.
- Developed and maintained Nutritional MIS platform to monitor the screening and growth of the malnourished children.

Accomplished Major Activities undertaken under the program

Sl No.	Activities	Remarks
1	Program Launch	CMAM Program was launch on 25/07/2023 at Dist. office Pakur under the presence of DC, DDC, DSWO, CDPO, JSLPS, NGO Representative
2	Training of Staff	Topic covered - Program objective, Goal, Malnutrition and CMAM, Activities planning
3	Baseline Survey	Baseline Survey was conducted in July 2023 total 498 Household covered under 6 Block (intervention area) of Pakur Dist.
4	IEC material & Wall Writing for mass Awareness	About Initiation of Breastfeeding, Exclusive Breastfeeding, Complimentary Feeding, Water Sanitation & Hygiene, Improved Feeding Practices etc
5	Learning Management System (LMS)	Learning Management System (LMS) and MIS are created to serves as a platform to administer, manage, deliver educational courses and learning Materials along with activities tracking and reporting

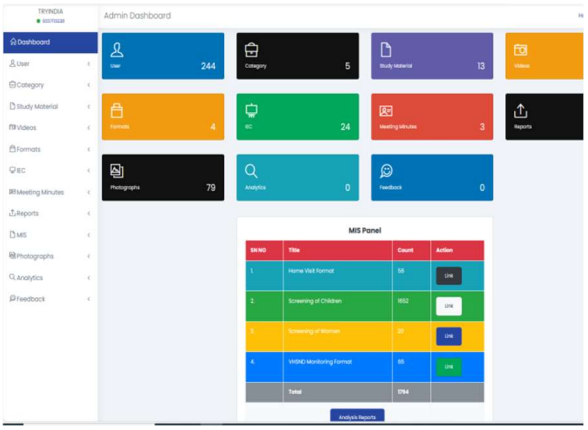
Field Activities undertaken

Objective	Sl No.	Activities
Identification of SAM/ MAM	1	Anthropometric test (Screening up to 5 years of Children)
	2	MTC Referral of SAM cases (Preferred Medical Complication)
	3	Follow up of identified SAM and MAM Cases (3 Cycle or up to cured) at the Community level

Improved feeding practices of SAM/MAM/ Anemic women, WASH, BCC	4	Home visit and counselling to Targeted beneficiaries
	5	Meeting of Mother Groups/community meeting
Improved Quality in VHSND Services	6	Observation of VHSND sessions
Ensuring Nutrition Security	7	Promotion of Nutrition Garden at AWC and Community level

Activity Photographs


GPS Map Cam
बिलासपुर, झारखंड, भारत
नाम-रहित सड़क, बिलासपुर, झारखंड 816107, भारत
Lat 24.487542°
Long 87.773662°
30/12/23 09:36 AM GMT +05:30
Google


Admin Dashboard
Dashboard
User
Category
Study Material
Videos
Formats
IEC
Meeting Minutes
Reports
MIS
Photographs
Analytics
Feedback
244
5
13
4
24
3
79
0
0
MIS Panel
SN NO
Title
Count
Action
Home Visit Format
Screening of Children
VHSND Monitoring Format
Total
Analysis Reports