

On the Path to Nutrition

PARTICIPATORY TRAINING MODULE
FOR NUTRITION-ORIENTED
BEHAVIOUR CHANGE



**Nutrition and Diet Diversification for Women of Reproductive Age
and Children Under Two Years**

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The content presented here has been adapted from a comprehensive set of three participatory modules on nutrition education, developed and tested with community members as part of SENU's efforts for social behaviour change.

We appreciate the valuable contributions of the, implementing partners (Welthungerhilfe), and technical experts Bhavana Nagar, Nadine Bader and Neha Khara, who shaped the original content and brought it to life through field-level implementation.

We hope that this module continues to serve as a practical and impactful tool for field facilitators and community groups, contributing meaningfully to the goals of improved health, nutrition, and well-being across diverse contexts. The adaptation of this material underlines collaboration and knowledge sharing that is essential for scaling up successful community-based interventions.

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List of Abbreviations

ANM	Auxiliary Nurse Midwife
BMZ	German Federal Ministry for Economic Cooperation and Development
FSDD	Farm Sector Development Department
ICDS	Integrated Child Development Scheme
IFA	Iron and Folic Acid
IFRP	Internal Farmer Resource Person
LM	Lactating Mothers
MoA&FW	Ministry of Agriculture and Farmers' Welfare
MoRD	Ministry of Rural Development
MUAC	Mid-Upper Arm Circumference
NABARD	National Bank for Agriculture and Rural Development
NABCONS	NABARD Consultancy Services
N-PLA	Nutrition Participatory Learning and Action
PDS	Public Distribution System
PFA	Project Facilitating Agency
PW	Pregnant Women
SBC	Social and Behaviour Change
SENU	Securing Nutrition, Enhancing Resilience
SHG	Self-Help Group
SuATI	Support to Agroecological Transformation Processes in India
THR	Take Home Ration
TT	Tetanus Toxoid
VO	Village Organisation

About JIVA

JIVA is an innovative programme of the National Bank for Agriculture and Rural Development (NABARD) supported by Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) GmbH, under the Indo-German Development Cooperation Project *Support to Agroecological Transformation Processes in India* (SuATI). The SuATI project is implemented by GIZ together with the Ministry of Agriculture and Farmers' Welfare (MoA&FW), the Ministry of Rural Development (MoRD), and NABARD. The project is commissioned by the German Federal Ministry for Economic Cooperation and Development (BMZ) as part of the global BMZ Initiative "*Transformation of Agriculture and Food Systems*".

Initiated in 2023–24, JIVA fosters agroecological transformation by adding natural farming processes rooted with agroecology principles to the existing watershed and tribal development projects. Financial support from NABARD under the JIVA programme is provided to project implementing agencies to:



Diversify crop systems with extended crop cover for a longer period



Integrating livestock and trees



Rejuvenating biological processes



Promoting natural methods of pest and nutrient management



Efficient management of rainfall and soil moisture through farmer-to-farmer learning and exchange

JIVA facilitates circular economy through recycling of crop residues, minerals and moisture, etc. as also supports enterprises for input supply and output management. Currently, the JIVA programme is being implemented by 49 Project Implementing Agencies across 20 states of India covering five agroecological zones in vulnerable rainfed areas.

1. INTRODUCTION

The JIVA programme, implemented across 20 states in India, aims to promote agroecology and sustainable, climate-resilient livelihoods while improving the overall well-being of rural communities.

Through the collaborative efforts of the National Bank for Agriculture and Rural Development (NABARD), Project Facilitation Agencies (PFAs), and local institutions, the programme has contributed significantly to enhancing incomes, resource management, and community resilience. However, true development remains incomplete without addressing the critical issues of nutrition and health—especially for women and children.

2. NATURAL FARMING'S CONTRIBUTION TO THE OVERALL HEALTH OF THE COMMUNITY

Under the JIVA programme, natural farming is promoted as an environmentally sustainable practice and also as a vital contributor to improved community health and nutrition. This nutrition training module builds on that foundation by helping participants understand the strong interconnections between agricultural practices, food systems, and dietary outcomes.

Natural farming, grounded in principles of soil regeneration, biodiversity, and chemical-free cultivation, results in safer, more nutrient-dense food. By encouraging the cultivation and consumption of diverse, indigenous crops, such as millets, pulses, traditional vegetables, and fruits, natural farming supports dietary diversity and helps address widespread micronutrient deficiencies, especially among women and children.

This training aims to build awareness and capacity among farmers, particularly women and frontline workers, to understand how farm-level decisions directly impact food quality and household nutrition. The shift from input-intensive farming to natural farming contributes to the creation of resilient, community-based food systems that prioritise health and well-being. The training also emphasises the importance of nutrition gardens, use of traditional food practices, and promoting nutrition awareness within communities as part of a holistic approach to improving health outcomes.

In many JIVA project areas, malnutrition, particularly among women, adolescent girls, and young children, remains a pressing issue. One key factor is limited access to diverse and nutrient-rich foods due to monoculture cropping and growing market dependence. This has led to a decline in the consumption of traditional, nutrient-rich foods like millets, pulses, and leafy greens. Natural farming provides a practical solution to this challenge by encouraging the cultivation of a variety of seasonal, local crops without the use of harmful chemicals. This approach restores soil health and also ensures the availability of diverse, nutritious foods that are essential for combating malnutrition.

The training introduces the concept of nutrition-sensitive natural farming, which promotes food production systems aligned with the nutritional needs of communities. For instance, nutrition gardens based on natural inputs can provide regular access to iron-rich leafy greens, vitamin A-rich vegetables, and protein-rich pulses, directly addressing nutrient deficiencies. The revival of traditional food knowledge and local recipes further strengthens the cultural acceptance and sustainability of healthy diets. Participants are also guided in identifying and using locally available foods to enhance daily meals and improve overall energy and micronutrient intake. This integrated approach supports JIVA's vision of aligning agroecological practices with better nutrition and health outcomes. By the end of the training, participants will be equipped to advocate for and implement natural farming practices as a pathway to reduce malnutrition, protect ecological health, and build resilient, nutrition-secure communities.

3. INTRODUCTION TO THE MODULE

This nutrition training module is designed to support PFAs and community-level facilitators in deepening their understanding of nutrition and promoting nutrition-sensitive practices within ongoing JIVA interventions. The module aims to strengthen the capacity of field staff, farmer resource persons, Self-Help Groups'/ Village Organisations' (SHG/VO) leaders, and grassroots actors to communicate key nutrition messages effectively and engage communities in adopting improved dietary behaviours. The module focuses on enhancing awareness around good nutrition, dietary diversity, and essential practices for pregnant women (PW), lactating mothers (LM), and young children. It offers simple, participatory tools and methods that can be integrated into various community-based meetings, capacity-building sessions, and SHG activities facilitated under the JIVA programme.

Each session is grounded in principles of adult learning and social and behaviour change (SBC), encouraging participatory learning, reflection, and local adaptation. With this approach, facilitators can foster meaningful dialogue on nutrition, motivate families to adopt better nutrition habits, and contribute to holistic rural development.

We hope this module will serve as a practical resource to promote nutrition awareness and behaviour change, and support the wider objectives of the JIVA programme across participating states.

4. OBJECTIVE OF THE MODULE

The objectives of preparing this module are as follows:

- > To enhance the understanding of farmer resource persons and PFA team members associated with the JIVA project on nutrition and related topics.
- > To build confidence in using simple and accessible methods to help communities adopt nutrition behaviours.
- > To develop the capacity of PFAs, community workers and Self-Help Groups (SHGs) to work effectively on nutrition related issues.
- > To help develop nutrition-focused master trainers.
- > To encourage communities to adopt nutrition-related behaviours.

WHAT IS IN THE MODULE?



This module provides many simple and practical methods to communicate nutrition-related topics to the community in a participatory manner.



It includes those nutrition-related topics/behaviours that can be easily adopted by families and can help improve their nutritional status.



The module offers stories, songs, picture cards, and many tools and methods to help village-level workers (Community Resource Persons) engage in discussions about nutrition with the community, thereby supporting behaviour change.



This module is kept flexible—it can be used for conducting a one-day training or can be independently integrated with any other training session as needed.

A two-day agenda for the nutrition training is provided as **Annexure 1**

5. WHO IS THE MODULE FOR?

This module is designed primarily for PFAs, farmer resource persons, community-level facilitators, and SHG/VO leaders engaged in the JIVA programme across 20 states. However, it can also be effectively used by trainers, change agents, and development practitioners working on nutrition-sensitive interventions and social behaviour change in rural communities.

6. HOW TO USE THE MODULE?

This module is structured keeping in mind a two-day nutrition training. These sessions are meant to be used in trainings or for discussions in the community. The module can be used either in full or broken into smaller sessions. Each session can be included in a community meeting to discuss nutrition topics.

- > Community-level sessions should be conducted as per the details provided in the module.
- > The suggested methods can be used to conduct effective nutrition-based trainings and community-level discussions.
- > Details around organising sessions are extensively described in the module to help facilitators present the topics effectively.
- > The suggested activities in the module can be presented in sessions with local context in mind.
- > The module also helps make the process more participatory.

7. PARTICIPATORY APPROACH TO NUTRITION EDUCATION

Through the following participatory methods and mediums, discussions on nutrition topics can be conducted in villages:



8. PROCESS OF CONDUCTING SESSIONS OF NUTRITION TRAINING

DAY I OF THE NUTRITION TRAINING

SESSION 1



1 Hour

Welcome, Introduction, Pre-Test, Expectations from the Training and Objectives of the Training



OBJECTIVES OF THE SESSION

- i. Understanding the knowledge level of the participants.
- ii. Being on the same page on the objectives of the training.
- iii. Providing an introduction to the training schedule.
- iv. Making the training environment-friendly and comfortable.



Key topics for the session

- Introduction of participants and pre-test
- Participants' expectations from the training
- Introduction to training objectives and schedule
- Establishing rules and norms for effective conduct of sessions



Method of conducting the session

- Participatory exercises/games,
- Pre-Test
- Discussion and presentation of the objectives and schedule of the training



Materials required

- Charts
- Whiteboard markers
- Presentation slides

PROCESS OF CONDUCTING THE SESSION

Welcome all participants to the training. Inform them that in this training, we will all learn together and try to take these learnings forward and create a positive change. Tell the participants that it is important to know each other before proceeding further with the training. Keeping the number of participants in mind, they can be divided into groups of two or three for introductions.

"Let's introduce ourselves within our groups." Saying this the facilitator should write the following pointers for introduction on the board for the participants to introduce themselves in their respective groups.

Points for Introduction

- | | | |
|---------------|--------------|---|
| ✓ Name | ✓ Work Area | ✓ One thing about yourself that you like the most |
| ✓ Designation | ✓ Experience | |

NOTE FOR THE FACILITATOR

This session marks the beginning of the training. Since this is a participatory training, it is important that the participants feel at ease. This session, along with the introductions, helps in building rapport between the participants and the facilitator, and in creating a comfortable learning environment. Through introductions, everyone gets an opportunity to speak, and the facilitator gets an insight into the participants' knowledge level.

After the group introductions, each group member will introduce others in the group in front of everyone. Encourage all participants to speak on the last point mentioned earlier. Once introductions are complete, give the participants the pre-test form, provided as **Annexure 2** at the end of the module. The form contains 15 questions, and participants have to tick the option they think is correct. Inform them that the purpose of this exercise is to understand their current level of knowledge about the subject of the training, and it is not an evaluation in any way.

Based on the number of participants keep enough printed copies of the pre-test form ready. Refer to **Annexure 2** for the same.

Once all the participants have introduced themselves, encourage everyone with a round of applause. Now ask the participants what their expectations from the training are and write their responses on the board. After gathering everyone's expectations, explain the objectives of the training to them.

The training objectives can be shown to everyone through a chart or slide, or they can be written on the board. While explaining the objectives of the training, tell everyone that you hope the training objectives will meet their expectations.



OBJECTIVE OF THE TRAINING

The objectives of the training are as follows:

1. Understand Nutrition Participatory Learning and Action (N-PLA) approach and community mobilisation for achieving nutrition outcomes.
2. Understand nutrition behaviour to ensure well-nourished mother and children.
3. Understand nutrition concepts, need, myths as barriers.
4. Understand social and gender inequity and their impact on community nutrition.
5. Understanding actionable steps we can take.

Keep a chart prepared on the objectives of the training prior to the training

Now explain the training schedule to all the participants. If anyone has any suggestions regarding the schedule, listen to them and, if possible, incorporate them. After discussing the training objectives and schedule, request the participants to develop some norms and rules for the training which would enable the group to achieve the training objectives within the given time frame and create a conducive learning environment. Ask the participants what rules they would like to set for the training.

With mutual agreement of the participants and facilitator, the following rules can be established:

- > Everyone should be punctual.
- > Everyone's opinion may differ, respect diverse views.
- > Listen attentively to everyone.
- > Keep the training room and surroundings clean.
- > Raise your hand before speaking.
- > Keep mobile phones on silent mode.

Prepare and put up a chart on the rules for the training with the help of the participants

Write these rules on a chart and display them in the training room so they can be referred to when needed and participants can be reminded of them.

CONCLUDING THE SESSION

The facilitator should tell the participants that in the next session, the training will move toward subject-related topics, and it is expected that they remain open in sharing their thoughts, experiences, and questions so that everyone can build a clear understanding during the sessions.

SESSION 2**1 Hour****Nutrition Efforts and Impact in the Community****OBJECTIVES OF THE SESSION**

- i. To understand how the participants approach the community to ensure nutrition related behaviour change.
- ii. To Impact they are observing within the community regarding nutrition behaviour change.

**Key topics for the session**

- Understanding how participants initiate and facilitate discussions on nutrition to promote behaviour change at the community level.
- Exploring the changes observed in community practices and behaviours related to nutrition as a result of ongoing efforts.
- Identifying what is working, what is not, and the lessons learned from field experiences in promoting nutrition-sensitive behaviour.

**Method of conducting the session**

- 1-2-All game

**Materials required**

- Chart Paper
- Marker
- Board Clips
- Paper Tape

PROCESS OF CONDUCTING THE SESSION

To start the session, facilitator will say, “*In this session, we’ll reflect on how have you been engaging communities on nutrition, and the kind of changes you have started seeing. We will use a simple method called 1-2-All to help everyone share and learn from each other’s experiences.*”

Individual Reflection **3–5 minutes**

Ask each participant to think quietly and note down:

- > How have you been engaging with the community on nutrition issues?
- > What changes in nutrition-related behaviours have you observed?

Pair Sharing **5–10 minutes**

Participants pair up and share their reflections with one another, identifying common themes or contrasting experiences.

Group Sharing **30–45 minutes**

- > Pairs join with another pair (optional) or share back in the larger group.
- > A facilitator records key points on a chart under two headings:
 - Strategies/efforts taken
 - Observed impact/change in the community

Facilitator Summary and Discussion ⌚ 10–15 minutes

- > Summarise key strategies and outcomes shared.
- > Highlight good practices and innovative approaches.

Facilitator Closing Appreciation

“Thank you all for your active participation and heartfelt sharing today. It’s truly encouraging to see the sincere efforts each of you has made in promoting nutrition and supporting behaviour change at the community level. Your work is already making a difference, and your commitment is deeply appreciated.”

In the upcoming sessions, we will continue this journey together—exploring how we can more effectively integrate nutrition into our work, and support communities in adopting lasting, nutrition-seeking behaviours. Let us keep learning, reflecting, and strengthening our approach for even more meaningful change.



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SESSION 3**30 Minutes****Nutrition PLA Approach, its Content and Methods****OBJECTIVES OF THE SESSION**

- i. To create common understanding on N-PLA approach.
- ii. To understand the content and methods of N-PLA.

**Key topics for the session**

- Understanding the purpose, principles, and relevance of Nutrition Participatory Learning and Action (N-PLA) in promoting community-led nutrition behaviour change.
- Exploring the structure, flow, and facilitation techniques of N-PLA sessions, including key tools like seasonal food calendars, story-telling, dietary diversity charts, and nutrition mapping.
- Discussing how facilitators can effectively engage SHGs, VOs, and other groups to ensure inclusive and meaningful participation in N-PLA sessions.

**Method of conducting the session**

- Presentation
- Open discussion

**Materials required**

- PPT

PROCESS OF CONDUCTING THE SESSION

Facilitator explains that “*The session will help us understand what the Nutrition PLA approach is, why it matters, and how we can use it effectively with our communities.*” Share session objectives on the screen.

Presentation—What is N-PLA? ⌚ 10–15 minutes

- > Use PPT slides to explain:
 - Definition and purpose of N-PLA
 - How it fits within the broader JIVA framework
 - Why participatory approaches are critical for nutrition behaviour change
- > Ask participants:
 - “*Have you seen or facilitated similar approaches before?*”
 - “*What are some challenges in engaging communities on nutrition?*”

Presentation—Key Components and Content ⌚ 15–20 minutes

- > Slide content includes:
 - Core themes of N-PLA (e.g. dietary diversity, food groups, child and maternal nutrition)
 - Flow of sessions (introductory meeting, tool-based sessions, follow-ups)
 - Tools used: seasonal food calendar, nutrition ranking, food plate, storyboards, etc.

- > Pause for questions or quick reflections after each tool is introduced

Presentation—Methods and Facilitation Tips ⌚ 15–20 minutes

- > Slide content includes:
 - Participatory facilitation techniques (e.g., using visuals, storytelling, local examples)
 - Do's and Don'ts for engaging SHGs and community members
 - Role of dialogue, collective reflection, and action planning in each session
- > Encourage discussion:
 - “Which of these methods do you already use?”
 - “What could be useful in your context?”

Summary and Discussion ⌚ 10 minutes

- > Recap key messages from the session:
 - N-PLA is about enabling communities to reflect and act on their nutrition needs
 - Tools and methods must be adapted to local context and literacy levels
- > Invite 1–2 participants to share how they could apply this approach in their work.



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SESSION 4



1 Hour 30 Minutes

From Malnutrition to Nutrition



OBJECTIVES OF THE SESSION

- i. Identifying malnutrition.
- ii. Understanding the cycle of malnutrition and how to break it.
- iii. Understanding the causes of malnutrition, associated local practices, myths and beliefs and their impact.
- iv. Understanding the method(s) to assess the present/current status of maternal and child nutrition.



Key topics for the session

- Definition of malnutrition and types of malnutrition.
- Malnutrition cycle in the life cycle.
- The first 1,000 days of life and malnutrition.
- Causes of malnutrition and associated local myths, beliefs and practices.
- Local interventions to address intergenerational cycle of malnutrition.
- Current/present status of maternal and child nutrition.



Method of conducting the session

- Discussion through picture cards
- Mapping the daily diet of mother and children
- Problem picture cards
- Game



Materials required

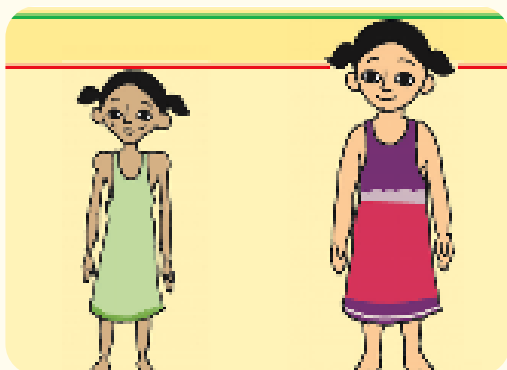
- Picture card of nutrition and malnutrition
- Problem picture card
- Chart papers
- Pen
- Register

At the beginning of the session, the facilitator should first explain the objective of the session to the participants. After explaining the objective, the facilitator should begin the discussion.

ACTIVITY 1

What is malnutrition?

- > Taking the discussion forward, the facilitator should ask participants as to what do they know about undernutrition/malnutrition? Encourage them to share their views, and if possible, write their responses on a board or chart.
- > After this, the facilitator should show participants a picture card of a malnourished and a well-nourished and healthy child, and ask them as to what do they observe in the image? With the help of the picture card, participants will also be able to understand the visible signs of malnutrition.



- **Characteristics of a healthy and well-nourished child:** Normal height and weight, good appetite, falls ill less often, plays and stays active, sleeps well, jovial, mixes and interacts with everyone.
- **Characteristics of a malnourished child:** Weak and thin body, sunken eyes, irritable, poor appetite, frequent illness, not leaving the mother.

- > After the reactions from the participants, the facilitator should discuss malnutrition in detail and explain to the participants that:

Malnutrition is a condition in which the body has either a deficiency or excess of essential nutrients, leading to physical and mental developmental issues.

- > Tell the participants that malnutrition is not a disease itself, but a malnourished child can easily become vulnerable to various diseases or infections, which become a risk to their life. While continuing this discussion, explain that if children's nutritional needs or food intake is not properly addressed, they may become malnourished. Additionally, unclean environments, infections, and contaminated water are also major causes of malnutrition in children. If malnutrition persists for a long time, it can negatively affect the overall development of a child's life.

ACTIVITY 2

Types of Malnutrition

The facilitator should tell all the participants that now we will understand the different types of malnutrition. In children, malnutrition is mainly categorised into the following three types:

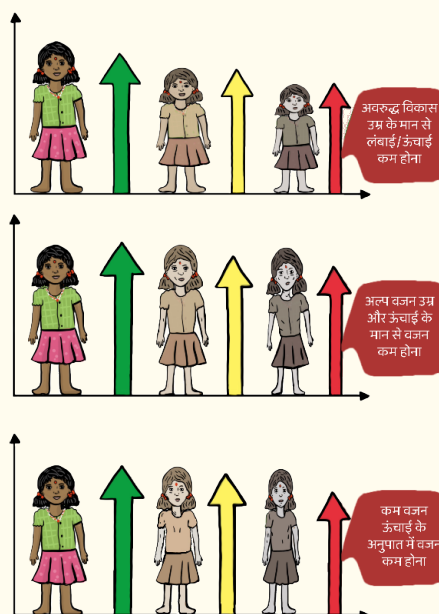


- **Underweight (Weight for Age):**

When a child's weight is less than the standard weight for their age. This is measured by comparing the child's weight to age-appropriate standards.

- **Wasting (Weight for Height):** When a child has low weight for their height (generally for children aged 6 to 59 months). This is assessed using the Mid-Upper Arm Circumference (MUAC) and by comparing weight to height standards.

- **Stunting (Height for Age):** When a child's height is less than the standard height for their age. This is measured by comparing the child's height with age-appropriate standards.



ACTIVITY 3

Malnutrition Cycle, Causes of Malnutrition and Breaking the Malnutrition Cycle

3.1 Discussion on the Intergenerational Cycle of Malnutrition Using Flashcards

After discussing malnutrition, the facilitator should use the printed poster to explain the intergenerational cycle of malnutrition and facilitate discussion using the following points:

- > While showing the flashcards, ask the participants, "What do you understand from this cycle?" After collecting responses, explain that if attention is not given, malnutrition continues as a cycle, passing from one generation to another, as shown in the poster.
- > If we observe from the childhood, a young girl who is already malnourished is more likely to be malnourished during her adolescence as well. A malnourished adolescent girl grows into a malnourished married woman. When such a woman becomes a mother, she herself is malnourished and is more



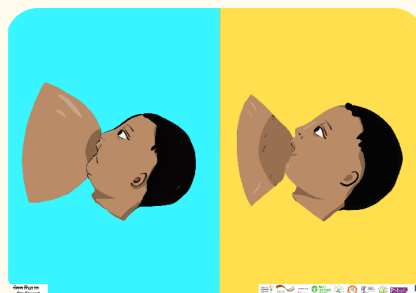
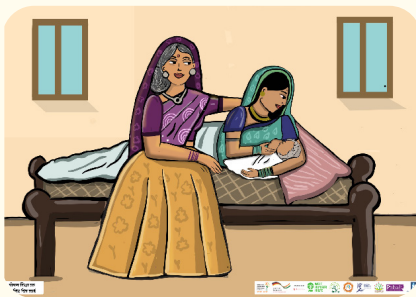
likely to give birth to a low-weight baby.

- > The first 1,000 days of life—from conception to the child's second birthday—are critical. If the child remains malnourished during this period, it impacts their overall development, learning capacity, productivity, potential for success, and long-term health. If the malnourished child is a girl, the cycle continues, passing from one generation to the next.

3.2 Causes of Malnutrition and Related Local Beliefs and Myths

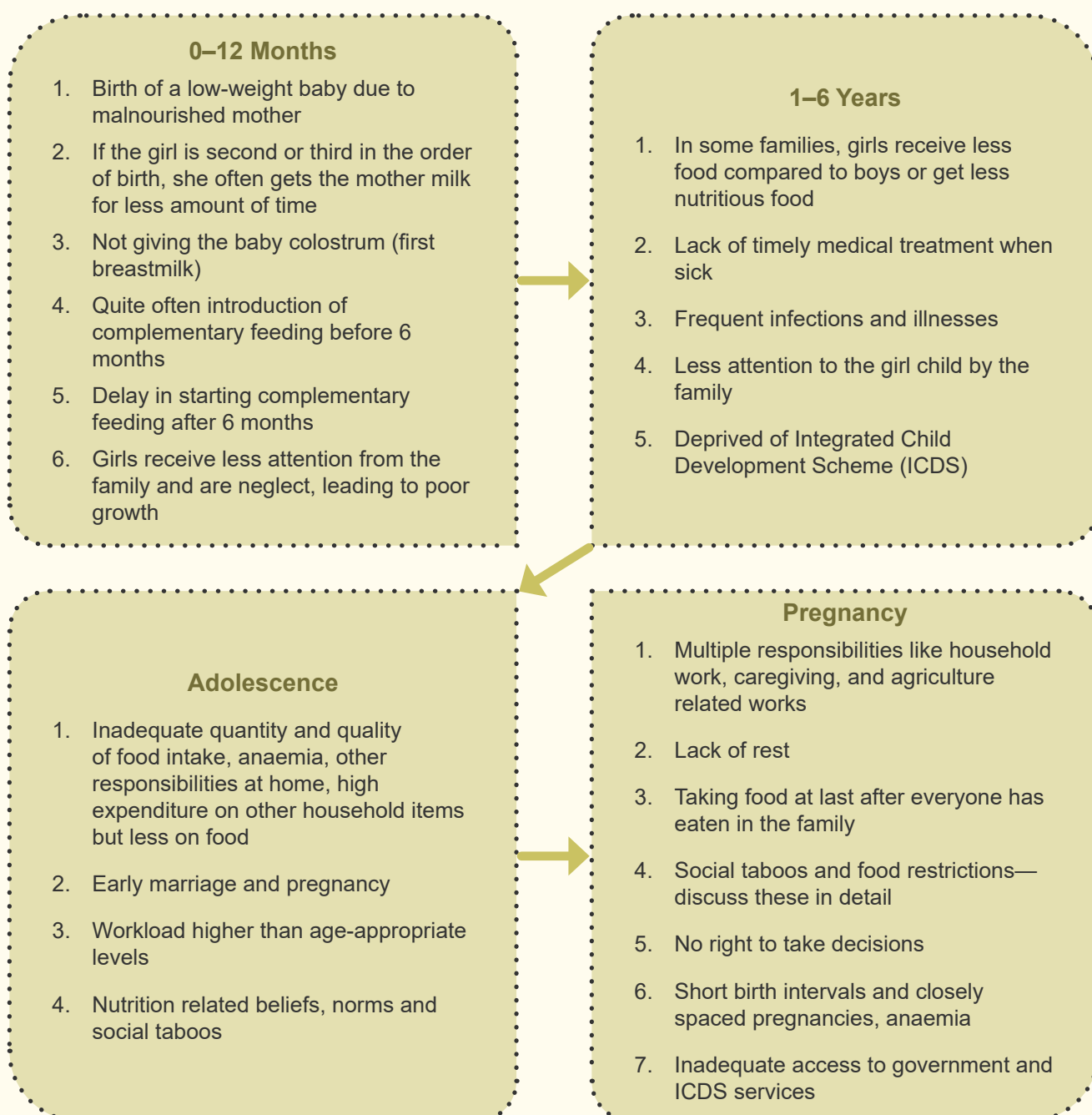
There are multiple reasons for malnutrition at every stage of life.

Tell the participants that together we will now explore and identify the causes of malnutrition. Now, provide the picture cards one-by-one to the participants to observe. The picture cards are provided as **Annexure 3**.



- > After all participants have seen the picture cards, place them on a mat and ask participants to come forward one by one and pick a card. Then facilitate a discussion based on the points that follow:
 - What do they see in this card?
 - What is this problem called in their local language?
 - How do you identify this issue/problem?
 - Has anyone in your village experienced or witnessed this problem or situation?
 - If this problem occurs, what actions do you take at the local level?
 - What are the local beliefs and myths associated with this issue/problem?
- > Encourage participants to respond to each image using the above guiding questions, so that a discussion can be conducted on all malnutrition-related problems and their causes using the picture cards.
- > The facilitator should take notes on the discussions related to each picture card for future use.
- > With each picture card, also discuss the associated local beliefs and myths.

Now, ask the participants to arrange the picture cards according to the life stages, and hold a discussion based on the following points.



3.3 How to Break the Malnutrition Cycle

The facilitator should first ask: “*Can we break the cycle of malnutrition? If yes, then how?*” Encourage participants to reflect and share their thoughts. Then explain the following points:

- > Equal care for both girls and boys—no discrimination in feeding or medical treatment.
- > Ensure girls complete their education and get married at the right age.
- > Adolescent girls should be assigned age-appropriate household responsibilities.
- > Equal distribution of responsibilities between boys and girls.
- > No discrimination on quantity and quality of food between boys and girls.
- > Resolution of incorrect norms and practices related to nutrition.
- > Equal distribution of household work between men and women.
- > Role of men in women and children’s nutrition in the household.
- > Focus on nutrition and ensure treatment for anaemia.
- > Inclusion of nutritious fortified food like iodised salt, fortified rice and ration from the Public Distribution System (PDS) shop and Anganwadi in the daily diet.
- > Attention to all aspects of care during pregnancy and postnatal periods.
- > Family planning—maintain two to three years spacing between two children and small families.

ACTIVITY 4

Current Status of Maternal and Child Nutrition

Ask participants to map what women in their community eat throughout the day. Similarly, ask them to map what children are fed during the day.

Tell the participants that when they do this activity in the community, they can take help from adolescent girls. Ask them to map the daily meal of women on one chart, and the daily meal of children aged 6 to 23 months on the other chart. The mapping should clearly indicate the types and quantities of food—like chapati, rice, khichdi and vegetables.

If needed, the facilitator may ask the women and write on a chart one side for the type and quantity of food eaten by women and the other for children, then facilitate a discussion. After the charting is done, the facilitator should ask everyone:

- > What did you understand from this chart?
- > Is this food sufficient for nutrition?
- > Can anything be improved in it?

After this discussion, explain to the participants that in upcoming sessions, we will further explore how all family members can collectively ensure pregnant women, breastfeeding mothers, and children aged 6 to 23 months receive nutritious and adequate food. If we want to break the cycle of malnutrition, we must pay attention to everyday food intake.

CONCLUDING THE SESSION

Wrap up the session by summarising the key learnings and addressing participants’ questions.

Also, inform them that in future sessions we will discuss various topics linked to the nutrition of adolescent girls, women, and children.



Nutrition for Pregnant and Lactating Women and Children up to Six Months of Age



OBJECTIVES OF THE SESSION

- i. To understand the nutritional practices of healthy women and children with normal weight.
- ii. To find and adopt simple ways for adopting behaviours and actions of well-nourished mothers and children.
- iii. To understand the role of the family in supporting a pregnant woman.



Key topics for the session

- Registration of the pregnancy on time.
- Conducting all the checkups during pregnancy on time and regular consumption of iron and folic acid tablets.
- Ensuring proper diet and nutrition of pregnant and lactating women.
- Including nutritious fortified foods like iodised salt, fortified rice, and ration obtained from Anganwadi in daily diet.
- Getting adequate rest along with daily work.
- Promoting institutional delivery.
- Feeding the baby colostrum (first thick-yellow milk).
- Exclusive breastfeeding for the first six months.
- Family support for the breastfeeding mother.



Method of conducting the session

- Story telling with picture cards
- Discussion on key messages related to breastfeeding



Materials required

- Story and related picture cards
- Pen
- Register

PROCESS OF CONDUCTING THE SESSION

The facilitator should begin the session by stating the objectives and telling participants,

“Assume you are a community member, and you are about to hear a story from a village level worker.” Then, begin narrating the story.

ACTIVITY 1

Nutrition Practices and Behaviours of Pregnant Women, Lactating Mothers, and Children under Six Months

The facilitator should ask all participants to listen carefully to the following story. Also mention that a few questions will be asked after the story. While narrating the story, the facilitator should also show the corresponding picture cards that accompany the story.

Story of Tara and Suraj

In Rajora village lived a girl named Tara.....

After completing her graduation, her parents got her married with everyone's consent to Suraj, a young man from the nearby village of Sitarapur. After marriage, Tara started helping Suraj in farming. Tara and Suraj are both progressive and aware individuals. There is a toilet at Suraj's home, which the whole family uses, and they are also mindful of cleanliness in and around the house.



Tara and Suraj live happily together with their family. One day, Tara visits the Anganwadi didi (worker) along with Suraj. The Anganwadi worker tells them about malnutrition and undernutrition, and asks Tara what she eats daily and in what quantity. The worker also tells them the importance of a nutritious diet. They feel happy gaining this awareness, realising the essential role that foods like green vegetables, fruits, sprouts, milk, and eggs play in keeping the body healthy.

Tara also learns that to overcome nutrient deficiencies, food should include fortified food items such as iodised salt, fortified rice, and items available from ration shop and Anganwadi. Tara tells the worker that she will return again with her mother-in-law. The Anganwadi worker motivates them to come together and asks them to spread the word to others in the village.

After coming back home, Tara and Suraj share everything with her mother-in-law, and all of them plan to grow a nutrition garden at home and start planting seasonal vegetables for their meals. They do just that. They also began using waste water from kitchen for this garden. This way they ensured that their meals included fresh vegetables, and they even began selling surplus vegetables in the market.

Sometime later, Tara shares a happy news at home that she is pregnant.....

The whole family got delighted. Her mother-in-law asks Tara and Suraj to revisit the Anganwadi worker. There, Tara shares the news of her pregnancy. The Anganwadi worker congratulates them and asks them to come again on the following Tuesday when Tara's pregnancy will be registered and she will undergo a health check-up. She will also receive a Mother and Child Protection Card.

The Anganwadi didi tells Suraj that now he will have to pay extra attention to Tara's diet and health. Her food intake will also need to increase.



Following the Anganwadi worker's guidance, they visited the Anganwadi Centre the following Tuesday, where Tara was registered, her health examined, and was issued a Mother and Child Protection Card.

The ANM (Auxiliary Nurse Midwife) administered Tara tetanus toxoid (TT) vaccination and gave iron and folic acid tablets and advised Suraj to provide her iron-rich food like green vegetables, sprouts, pulses, seasonal fruits, milk and milk products. The family began including all these in their meals along with fortified rice, oil, salt, and other nutritious items.

Tara and Suraj did exactly as guided.

Tara took care of all her checkups on time. In her second trimester, she got her second vaccination and additional iron tablets, which she took regularly. The whole family supported her diet and care. She increased her food intake and also took proper rest. Eventually, Tara gave birth to a healthy baby girl at the hospital. The family's happiness knew no bounds. They named the baby Khushi (happiness).

Tara fed Khushi her first breastmilk (colostrum) and continued breastfeeding. The family did not follow any food restrictions or taboos after Khushi's birth.

Tara had access to ample green vegetables, fruits, milk, supplements, and nutritious food. In order to ensure that Tara could breastfeed her child properly the whole family took responsibilities of different household chores.

Tara breastfed Khushi exclusively for six months. Even in the summer, she did not give her water or anything else. Khushi is now six months old, and the family is planning to organise her *Annaprashan* at the Anganwadi. The whole family is happy that now even Khushi will have a taste of home grown vegetables and fruits grown at the nutrition garden.

Now, Tara and Suraj are motivating other pregnant and lactating women in their village to adopt nutritious diets and develop nutrition gardens.

After narrating the story, the facilitator should ask the participants:

- > How did they like the story, and what did they find good about it?
- > Which practices did Tara adopt that made her healthy?
- > What practices did Tara and Suraj adopt to give birth to a healthy baby?
- > How did Suraj support Tara?
- > How did Tara's mother-in-law support her?
- > What are they doing for the development and growth of the child?
- > Can we also adopt these practices?

Make sure to discuss the myths and beliefs prevalent in the society regarding pregnancy and child birth

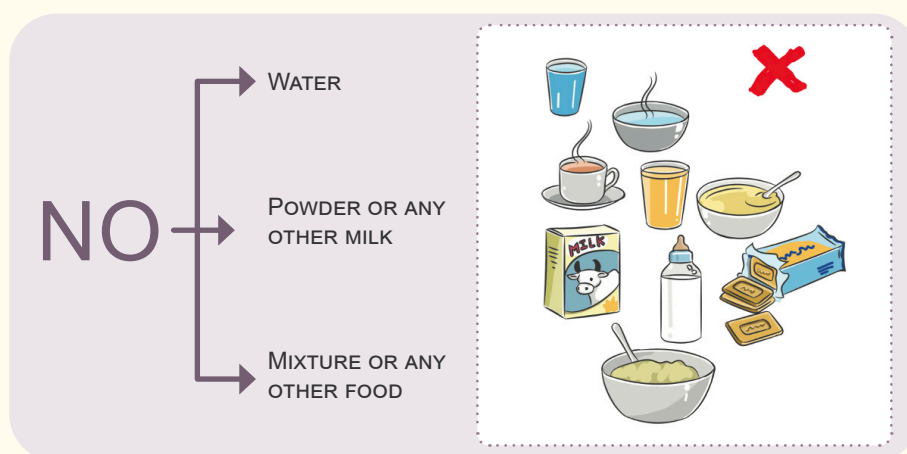
Now ask the participants to recall from the story and narrate the nutritional practices and behaviours for pregnant and lactating women. List these practices as narrated by the participants on the board and arrange them chronologically after discussing with the participants.

Now tell the participants in Tara and Suraj's story, we learned about nutrition during pregnancy and for lactating mothers, and also that a child should be exclusively breastfed for the first six months. Let's now move to the next activity, where we will learn some more important things related to exclusive breastfeeding for the first six months.

ACTIVITY 2

Meaning of Exclusive Breastfeeding for Six Months

The facilitator should tell everyone that they will now discuss the importance of exclusive breastfeeding for six months in detail. But before that, let's understand what exactly does exclusive breastfeeding mean?



No water at all. Breastmilk contains enough water. Even in extreme heat, breastmilk provides the necessary hydration for the baby. Breastmilk is made up of about 90% water. If the child appears thirsty, offering more breastmilk is sufficient and beneficial, as it is even cleaner than water used in our houses. Therefore, even during high temperatures, there is no need to give children water, honey, gripe water, or any other outside liquids.

No cow's milk or any other milk. Cow's milk or buffalo milk should not be given because the digestive system of a newborn is extremely sensitive and is not ready to digest anything other than breastmilk.

No semi-solid food or other foods. All essential nutrients needed for the growth and immunity of a newborn are naturally present in breastmilk. Giving any solid or semi-solid food can increase the risk of infection. The child doesn't need items like jaggery, butter, honey, etc.



For the first six months—no water, no semi-solid food, no external food—only and only exclusive breastfeeding. If the child has a health issue, necessary medication may be given with medical advice.

Show everyone the picture card and say, ***“Come, let's make a pledge that all children under six months in the village will be exclusively breastfed.”***

छः माह तक शिशु को पानी, शहद, घुदटी आदि कुछ न दें



This information should be clearly shared with everyone that at what frequency should a child be breastfed



The baby should be breastfed 10–12 times a day, or once every two to three hours. Even during illness, breastfeeding should continue because the baby's nutritional needs increase during illness.

Common myths and traditional beliefs that need clarification about exclusive breastfeeding for six months:

- > If the child is thirsty, they need water
- > In order for the child to develop a sweet voice, giving honey is necessary
- > If the mother is working outside, you need to give additional food to the child
- > Breastmilk alone is not enough to fill the child's stomach
- > Encourage a discussion around these beliefs to help participants adopt the practice of exclusive breastfeeding for six months.

ACTIVITY 3

Support from Husband and Mother-in-law

The facilitator should tell everyone that to ensure exclusive breastfeeding for six months, the support of family members, especially the husband and mother-in-law, is essential. Ask everyone that how can husbands and mothers-in-law provide support at home?

Encourage discussion and then collectively agree that in families with mothers of children under six months, how this critical support can be provided by the family members:

- > Household work will be equally shared among family members.
- > The breastfeeding mother will be given adequate time to feed the baby.
- > Special attention will be given to the mother's food and nutrition.
- > Availability of vegetables and fruits at home will be ensured through a nutrition garden.
- > A clean and safe space will be maintained at home for the mother and baby.
- > Husband and mother-in-law will regularly accompany the mother and child to the Anganwadi Centre.
- > A joyful and caring environment will be created at home for both the mother and the child.



A lactating mother nourishes the child along with her and therefore special attention to her diet is necessary.

Help her have two additional snacks in a day.

Also, inform the participants that after childbirth, there are two key nutrition-related milestones in a child's life, which we've discussed as follows:



First Milestone: Immediately after birth or within the first hour, the baby should be breastfed with the first milk (colostrum).

Second Milestone: The child should be given only breastmilk for the first six months.

CONCLUDING THE SESSION

Summarise the key learnings and respond to participants' questions to conclude the session.

Then share that in the next session, we will discuss the introduction of complementary feeding after six months and how to ensure proper nutrition during that stage.

SESSION 6**45 Minutes****Key Message for Community to Ensure Nutrition For Pregnant Women, Lactating Mothers and Infants****OBJECTIVE OF THE SESSION**

Develop a common understanding of the key messages to be conveyed to the community to promote the adoption of nutrition behaviours for pregnant women, lactating mothers, and infants.

**Key topics for the session**

- Key nutrition requirements for pregnant women, lactating mothers, and infants (0–6 months and 6–24 months).
- Timely antenatal care, adequate rest, and diversified diet for pregnant women.
- Exclusive breastfeeding for the first six months and continued breastfeeding with complementary feeding after six months.
- Age-appropriate, diverse, and hygienic complementary feeding practices.
- Simple, culturally appropriate behaviours that can be adopted at the household level.

**Method of conducting the session**

- Ranking
- Scoring exercise

**Materials required**

- Postcard size cards,
- Flashcards/chart papers with key messages
- Stones/seeds for scoring
- Markers
- Tape
- Flipchart

PROCESS OF CONDUCTING THE SESSION

Facilitator says: *“In this session we’ll work together to identify the most important messages we should communicate to pregnant women, lactating mothers, and caregivers of infants. We will also learn how to use a simple ranking method that helps the community reflect and prioritise actions.”*

Present the Nutrition Messages **5–10 minutes**

- > Prepare 8–10 flashcards or visuals with key messages with the help of participants, such as:
 - Eat at least three full meals and two snacks during pregnancy
 - Take iron and folic acid (IFA) tablets daily
 - Exclusive breastfeeding for six months
 - Start complementary feeding at six months
 - Feed infants 3–4 times a day with diverse foods
 - Maintain hygiene in food preparation
 - Ensure rest and reduced workload for pregnant women
- > Briefly explain each message to the group

Ranking and Scoring Activity 🕒 15 minutes

Step A: Small Group Work

- > Divide participants into 2–3 small groups.
- > Ask each group to discuss and rank the messages in order of importance or relevance for their community context.

Step B: Scoring with Seeds/Stones

- > Place the messages on the floor or a chart.
- > Give each group 10 stones or seeds.
- > Ask them to 'vote' by placing the stones on messages they feel are most critical (they can distribute the stones across messages as they choose).

Step C: Consolidation

- > Count and note the scores.
- > Identify top 3–5 messages based on the scoring.

Group Discussion and Reflection 🕒 15 minutes

- > Ask:
 - Why did you prioritise these messages?
 - Are there any messages that communities tend to ignore or misunderstand?
 - How can we present these messages in a way that is practical and culturally acceptable?
- > Summarise the agreed key messages and how facilitators can use this method with SHGs or community groups.

FACILITATOR TIPS

- ✓ Use pictures or local language cards for better understanding.
- ✓ Encourage participation from all group members.
- ✓ Reinforce that all messages are important, but ranking helps start conversations and focus on immediate priorities.
- ✓ Emphasise the importance of involving family members in these discussions at the community level.

SESSION 7



45 Minutes

Recapitulation of Key Takeaways



OBJECTIVE OF THE SESSION

To summarise the key learnings from the training day, reinforce important takeaways, and address any remaining questions to ensure clarity and effective application.



Key topics for the session

- Sharing participants' experiences in applying the training content in their fieldwork—what worked well, what challenges were faced, and what impact was observed.
- Consolidating the most important nutrition messages and facilitator responsibilities to ensure consistency and effectiveness in community sessions going forward.
- Revisiting the main concepts, tools, and practices covered during the training sessions—including N-PLA approach, nutrition messages, facilitation skills, and community engagement techniques.



Method of conducting the session

- Open discussion



Materials required

- Chart Paper
- Markers

PROCESS OF CONDUCTING THE SESSION

This session is to revisit and reflect on the key things we have learned over the course of our training. This will help reinforce your understanding and clarify anything before you apply it in the field.

Individual Reflection—“What I Remember Most” 10 minutes

- > Ask participants to think silently and write down 3–5 key takeaways from the training on sticky notes or in notebooks.
- > Prompt questions:
 - What did you find most useful?
 - What will you definitely use in the field?
 - Was there something that changed your perspective?

Group Sharing and Thematic Recap 20–25 minutes

- > Form 3–4 small groups. Ask each group to discuss their reflections and cluster similar points.
- > Each group presents their top three takeaways.
- > As a facilitator, organise their inputs under broad themes on a flipchart:
 - N-PLA approach and tools
 - Key nutrition messages (for PW, LM, infants)
 - Facilitation techniques and methods
 - Community engagement strategies

Wrap-up and Encouragement 10 minutes

- > Summarise the consolidated list of key takeaways.
- > Reaffirm participants' readiness and the importance of their role.
- > Appreciate their participation and commitment.

DAY II OF THE NUTRITION TRAINING

SESSION 8



30 Minutes

Welcome and Recap of Key Messages and Learnings from the Previous Day



OBJECTIVE OF THE SESSION

To welcome participants and review key messages and learnings from the previous day, reinforcing understanding and continuity for the training.



Key topics for the session

- Warmly welcome participants and create space for them to share reflections or thoughts from the previous day.
- Recap major concepts, tools, and discussions covered earlier to reinforce understanding and retention.
- Highlight how the previous day's topics link to upcoming sessions, ensuring continuity and a sense of progress in the training.



Method of conducting the session

- By the participants



Materials required

- Chart paper
- Markers

PROCESS OF CONDUCTING THE SESSION

- > Greet participants with enthusiasm and briefly outline the plan for the day.
- > Use a simple energiser (e.g. a movement-based or fun Q&A activity) to get everyone involved and refreshed.

Individual Reflection—“What I Remember” ⌚ 5–7 minutes

- > Ask each participant to quietly recall and note down 2–3 key messages or learnings from the previous day.
- > Prompt questions:
 - What stuck with you the most?
 - What new idea or tool do you want to try in the field?

Group Sharing—“*Pass the Message*” ⌚ 10–15 minutes

- > Form small groups (4–5 participants each).
- > Each person shares one key point, then passes it to the next.
- > Ask each group to prepare and present 3–4 main points on chart paper.

Facilitator Reinforcement ⌚ 10 minutes

- > After the group presentations, summarise the key takeaways.
- > Use visuals or flipcharts from the previous day to reinforce concepts and clarify any confusion.
- > Make brief links to the day’s upcoming sessions.





Nutrient-Rich Complementary Feeding for the Child After Completing Six Months of Age



OBJECTIVES OF THE SESSION

- i. Understanding the importance of timely introduction of complementary feeding for the proper growth and development of the child.
- ii. Ensuring adequate nutrition in the child's complementary feeding.
- iii. Learning essential behaviours related to complementary feeding.



Key topics for the session

- Need for initiating supplementary nutrition on time.
- Importance of organising the *Annaprashan* ceremony in the Anganwadi.
- Importance of regular feeding of fortified nutritious food to children.
- Quality, quantity and nutrition in the food for children in the age group of 6–24 months.
- Change in frequency and consistency of the food for children with age.
- Foods that support the growth of the body, provide energy, and increase disease resistance.
- Importance of nutritious meals even during sickness.
- Role of the family in improving the dietary practices for children.



Method of conducting the session

- Celebrating '*Annaprashan*' ceremony, discussion with posters, and demonstration of hygiene behaviours like hand washing



Materials required

- Bowl and spoon
- Materials for celebrating the ceremony such as:
 - food for complementary feeding of the child
 - supplementary food provided by the Anganwadi
 - half a fistful of wheat flour,
- Posters
- Pens
- Register

PROCESS OF CONDUCTING THE SESSION

Begin the session by having the facilitator explain the objectives to the participants. Once the objectives are clear, the facilitator begins the discussion.

ACTIVITY 1

Why Children Under Two Need More Nutrition

Tell the participants that now we will know why children under two years require more nutrition, for example:

1. **For Growth:** In the first two years, children's height and weight increase rapidly. This growth starts from the womb and continues until the child is about two years old. At this stage, length of bone increases, the body attains muscle and fat and the size of all internal organs increases and the body undergoes significant growth. Nearly 90% of brain development happens by age two years. For this physical and cognitive development, children need proteins, vitamins, minerals, and a lot of energy-rich foods.

- For Learning:** By age two, the brain's size of a child becomes close to that of an adult's. Children begin recognising, understanding, remembering, and learning quickly at this age. Similar to the development of the body, for brain development as well various nutrients are needed. Any deficiency during this time can delay learning.
- For Activity (Energy):** As children grow, their mobility increases every month. They start turning, crawling, standing and ultimately walking. Gradually, the child begins to mingle more with people, playing, grabbing, picking up, holding and letting go of things. Any lack of movement and activity at this stage leads to hampering of both development and learning. Children need a lot of energy for physical activity, which is provided by foods rich in carbohydrates and fats.
- For Immunity:** As children grow, in the first two years they become more prone to infections like diarrhoea, fever, cold, and cough. To fight off infections, they need proper and diverse nutrition. Poor nutrition can lead to longer illness, weight loss, or serious complications.

2 वर्ष की आयु के बाद, अल्पपोषण से संबंधित नुकसान काफी हद तक अपरिवर्तनीय हैं

Normal	Stunted
	
Typical brain cells Extensive branching	Impaired brain cells Limited branching Abnormal, shorter branches

2 वर्ष की आयु से पहले अल्पपोषण से प्रभावित बच्चे को जीवन भर परिणाम भुगतने पड़ सकते हैं।
⇒ पहले 1000 दिनों को संरक्षित करने की आवश्यकता है (गर्भाधान से 2 वर्ष की आयु तक)

- 5 साल से कम उम्र के बच्चों के लिए 35% बीमारी और 45% मृत्यु दर में योगदान करता है
- संज्ञानात्मक विकास में बदलाव - स्कूल में प्रदर्शन को कमजोर करना
- शारीरिक विकास को कमजोर करना
- उत्पादक क्षमता घटाना

"Stunted children today lead to stunted economies tomorrow"



Tell participants that the next activity will show how to promote good feeding practices for complementary food in the community. For this activity they will have to behave like community members.

ACTIVITY 2

Organising the Annaprashan Ceremony

The village level worker should organise this at the Anganwadi Centre in collaboration with the Anganwadi worker.

Washing Hands With Soap First—Handwashing Demonstration



SUMAN K गीत

स्वच्छ सुपोषित रहना बनके।
आओ सिखाएँ तुम्हें Suman K
बड़े काम की है यह बात।
सबसे पहले सीधा हाँथ।।
फिर उल्टे हाँथों को मलना।
हमें समझदारी से चलना।।
उसके बाद मलेंगे मुट्ठी।
करना बीमारी से कट्टी।।
दोनों हाँथ के मलो अँगूठा।
रहे कोई हिस्सा ना छूटा।।
फिर नाखून की करो घिसाई।
उसके बाद फिर मलो कलाई।।
हाँथ सुखाओ तितली बनके।
बोली कैसा लगा Suman K

- कृष्ण पाल सिंह सेंगर

Teach proper handwashing before feeding the baby. Clean hands are essential when giving any food or drink.

Tell the participants that we will first learn the correct way to wash hands with soap. When a child starts taking complementary food, it's very important to ensure cleanliness and hygiene along with nutrition. Come, let's demonstrate the correct method through a song.

- > The facilitator should tell all participants that during the community meeting, all family members of the children who are starting complementary feeding that day should be asked to wash their hands with soap.
- > The facilitator should emphasise that before touching food, before preparing food, before feeding children, and after using the toilet, it is very important to wash hands properly with soap.



So let us take a confident step towards the nutrition of our children and initiate complementary feeding at the correct time.

Organising the *Annaprashan* Ceremony

During the session, the *Annaprashan* ceremony will be conducted in a local, culturally appropriate way. The ceremony will begin with a welcome song or a traditional ritual.

- > The facilitator should begin by explaining about the *Annaprashan* ceremony and tell participants that today we are celebrating the initiation of complementary feeding through the *Annaprashan* Ceremony at the Anganwadi Centre.
- > Families whose children have completed six months will be invited to participate.
- > When family members come forward with their children, they should be encouraged to initiate feeding by giving the child whatever they have brought from home for the *Annaprashan* ceremony.
- > Men should be encouraged to feed the child in the ceremony and participate in the event more actively.
- > Special attention should be given to hygiene while feeding.
- > Everyone should come together to celebrate this moment as a community event.
- > Children older than six months who have not yet started complementary feeding should also be brought from their homes or invited via Anganwadi workers and fed during the event.



- > The facilitator should encourage all families to continue complementary feeding regularly, continue breastfeeding and maintain hygiene practices.



ACTIVITY 3

Proper Diet of Children

After celebrating the *Annaprashan* ceremony, the facilitator should hold a discussion with participants on how to ensure proper nutrition for children through appropriate feeding practices. Key discussion points are as follows:

- > The facilitator should continue the conversation by emphasising the importance of feeding practices for children. They should explain that six months is the ideal time to start complementary feeding, alongside continued breastfeeding where mothers introduce their children to additional food gradually.
- > Up to six months, only exclusive breastfeeding is recommended, but after six months, a mother's milk alone is not sufficient for the child's growth and development. Hence, complementary feeding must begin at this point. Along with the complementary feeding breastfeeding should continue till the age of two years for children.
- > The facilitator should show the supplementary Take Home Ration (THR) provided by the Anganwadi for children and explain that it is meant for children between six months and three years and it should be fed to them only.
- > The facilitator should then ask all the participants, "What should be included in complementary feeding after six months?"



Come, let us all agree that complementary feeding should begin for all children of six months in the village, and each child should have a smile on her face. This problem picture card will remind everyone of this message and will convey that let's change this situation together.

**प्रमुख
संदेश - मां, पिता और
दादी के लिए**

प्रोटीन युक्त स्थानीय स्तर पर उपलब्ध
और कम लागत वाले खाद्य पदार्थ जैसे दालें,
फलियां, सभी अनाज, मेवा, दूध या अण्डे
बच्चों को नियमित भोजन में दें। यह बच्चों
का विकास करने और उन्हें होशियार
बनाने में मदद करते हैं।

बाल सुलभ पूरक पोषण आहार

6 से 8 माह	 <small>माँ का दूध जारी रखें</small>	 <small>पकवान माँ का दूध जारी रखें</small>	
9 से 11 माह	 <small>माँ का दूध जारी रखें</small>	 <small>पकवान माँ का दूध जारी रखें</small>	
12 से 23 माह	 <small>माँ का दूध जारी रखें</small>	 <small>पकवान माँ का दूध जारी रखें</small>	

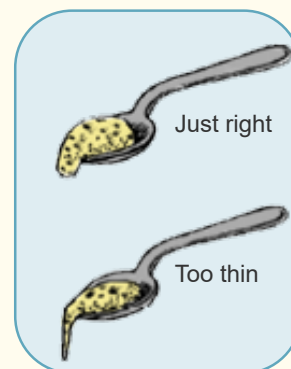
To enable a comprehensive discussion, encourage everyone to express their views, and ensure the conversation particularly focuses on local complementary foods. After the discussion, using the flipchart, explain different aspects of complementary feeding including the right time to start, the appropriate quantity, the consistency of food and diversity in complementary food.

Child Friendly Food and its Consistency

Along with the discussion, demonstrate the consistency of the food and explain that children should not be given food which are highly dense in consistency or are very low in density. To demonstrate this prepare three mixtures of wheat or gram flour in three different bowls. One bowl should have a highly dense mixture, the other one very low in density and the third one just appropriate in its consistency for children. You may call any participant now and ask her/him to fix the consistency in the other two bowls so that all the three bowls have food with consistency appropriate for feeding children. This will help everyone understand that what should be the consistency of the supplementary food to be given to children in the initial days.

Home-made food is best for children and let us pledge that we will feed our children home-made complementary food only. Using the picture that follows explain to the participants what should and what should not be fed to the children.

The facilitator should also explain to the participants that to ensure proper nutrition to the body nutritious fortified food like iodised salt, fortified rice and ration from PDS shop and Anganwadi should be included in the daily diet. Fortified food also helps protect the body from many diseases.



Tell the participants that in the previous sessions, we discussed about the two most important milestone of nutrition in a child's life. In this session, we will focus on understanding the third important milestone, which is:



Third Milestone: After completion of six months, starting complementary feeding and continuing breastfeeding for up to two years.

CONCLUDING THE SESSION

Reiterate the key learnings and address any questions participants may have. Conclude the session by informing participants that in the next session, we will have a more in-depth discussion on the topic of nutrition.

INFORMATIVE MATERIAL FOR THE FACILITATOR

Nutritious Diet for Children Between 6 to 8 Months Old

- > For six to eight month old children, we can give soft food like milk porridge, seasonal fruits, pulses, rice, and leafy vegetables.
- > Local foodgrains can be roasted, grinded, preserved as dry ration, and can be given to the child by mixing it with milk/water along with sugar or jaggery as needed.
- > We can feed the child a mixture of many items so that all their nutrition needs are met. For example, food like soft khichdi fed to children between ages six to eight months can be prepared from rice, pulses, different kinds of vegetables and little oil or ghee.
- > Vegetables like carrot, potato, peas and cauliflower can be boiled, mashed and given to the child.
- > Seasonal fruits can be mashed or their juice extracted and given to the child.
- > The white portions of well-boiled eggs can also be mashed and given to six to eight month old children.



Quantity and Frequency of Food

- At 6–8 months of age, a child typically starts with a few spoonful of food. Gradually, this increases to a bowlful and subsequently to 2–3 bowls throughout the day.
- At this stage, children are not able to eat large amounts in one go, so they should be fed small amounts 4–5 times a day.
- Along with this, continue breastfeeding regularly.

Important Things to Keep in Mind

- * A six to eight month old baby cannot chew properly, so it is important that:
- * While putting vegetables in the food while cooking, ensure that they are chopped fine so that they easily soften while cooking.
- * Feed the child freshly prepared food.
- * Ensure that the food being given to the child is properly cooked and mashed so that the child can easily swallow and digest it.
- * Remember that initially when children are given complementary food they spit it out. It is normal as they are not used to it but consistently feeding them results in them taking the food easily.
- * When the child is sick, they need more nutrition than usual. During illness, ensure that the child is breastfed and pay special attention to the child's food.
- * Feed the baby while talking, playing, and showing love so that they eat happily. Don't force feed them.
- * A baby's stomach is very small, so they cannot eat much in one go. That's why feed them repeatedly in short intervals.
- * Continue breastfeeding along with complementary food.
- * Do not feed the child immediately after breastfeeding because the stomach is already full at that time. The complementary food should be given after some gap.

Nutritious Diet for Children Between 9 to 11 Months Old

By this age, children begin learning to chew and swallow food properly. During this time, we can introduce new food types in addition to those already being given. These may include:

- > Sprouted moong and gram, soyabean, etc. can be grinded and given.
- > The pulp of fruits can be given.
- > If family members eat meat, fish, eggs, etc. these can also be given to the child. However, ensure that the meat is cooked properly and does not have bones. Start with a small quantity and slowly increase the amount.

- > After nine months, the yolk of boiled eggs can also be given.
- > To support the child's growing nutritional needs, include fortified foods such as iodised salt, fortified rice and flour and food items available through Anganwadi centres and PDS shops. Fortified foods help prevent common deficiencies and illnesses.



Quantity and Frequency of Food

- By 9 to 11 months, a baby's stomach grows slightly, and with increasing movement and development, their nutritional needs also rise.
- Therefore, both the quantity of food and the variety should be gradually increased. In addition to continued breastfeeding, 3 to 4 small bowls of food should be given throughout the day.
- Along with these, 1 to 2 times a day, an additional healthy snack or light meal prepared at home should also be given.

Important Things to Keep in Mind

- * Do not feed children packaged foods available in the market such as biscuits, chips, chocolates, soft drinks, sweets, cola drinks, or fruit juices.
- * Always feed children freshly prepared meals.
- * When a child is sick, their nutritional needs increase. During illness, continue breastfeeding and pay special attention to the child's diet.

Food to Be Given to Children Between 12–23 Months

Between 12–23 months, children begin to speak and walk. Their molar teeth also begin to appear, and they are generally able to eat almost all types of solid foods.

- > In addition to all the foods mentioned above, children can now be given nearly all foods eaten by adults in the household. However, care should be taken not to include spicy or overly oily items in their meals.
- > To support the child's growing nutritional needs, include fortified foods such as iodised salt, fortified rice and flour and food items available through Anganwadi centres and PDS shops. Fortified foods help prevent common deficiencies and illnesses.



Quantity and Frequency of Food

- From 12 to 23 months of age, a child can be fed four to five bowls of food throughout the day.
- During this time, continued breastfeeding is important; however, the frequency of breastfeeding can gradually be reduced.
- Along with regular meals, the child should also be given one to two healthy snacks or additional meals prepared at home between main meals.

Important Things to Keep in Mind

- * Encourage children to eat with their parents, but always serve them food in a separate clean bowl or plate, and motivate them to eat on their own.
- * Always give children freshly prepared food.
- * When a child is unwell, their body needs more nutrients. During illness, it is important to continue breastfeeding and pay extra attention to their food and feeding.

SESSION 10**1 Hour 30 Minutes****Nutritional Diversity, 10 Food Groups, and a Balanced Diet with Locally Available Foods****OBJECTIVES OF THE SESSION**

- i. Understand the role of different food items and nutrients in physical growth and better health.
- ii. Learn about the ten essential food groups.
- iii. Discuss how to prepare nutritious meals using locally available ingredients.
- iv. Build awareness around nutritional diversity available at the local level and balanced diet.

**Key topics for the session**

- The meaning of food and nutrition
- How the body uses nutrition
- Importance of the ten food groups
- 10 food groups and daily diet
- Categorisation of nutrients from local food items
- Meeting nutritional needs using local food items
- Balanced diet

**Method of conducting the session**

- Discussion with poster
- Nutrient categorisation game
- Balanced plate activity

**Materials required**

- Poster
- Chits of locally available food items in the village
- Plate
- Pens
- Register

PROCESS OF CONDUCTING THE SESSION

Begin the session by having the facilitator explain the objectives to the participants. Once the objectives are clear, the facilitator begins the discussion.

ACTIVITY 1**Fundamental Understanding of Nutrition**

Taking forward the session inform the participants that in this session we will talk about nutrition, how the body uses it, and how to meet nutritional needs through local foods.




Tell the participants that we all eat food so that our body keeps functioning and we remain healthy. To grow and develop, our body needs nutrients, which we get from the food we eat.

For proper growth and development, our body requires all kinds of nutrients which are derived from the food we eat. This means that if our food lacks any essential nutrient, we may face nutritional deficiencies. Therefore, it is important to know what and how much we should eat to ensure our body receives the right balance of nutrients.

Our daily meals should not just fill our stomach but should also be rich in the essential nutrients our body

needs. The food should support growth in height and weight, energy for activity, mental development, and protection from diseases.

Based on the functions that nutrients perform in our body, we can easily understand them through the following table:

Energy-yielding foods	Growth and tissue-building foods	Immune-protective foods
		

FOOD

NUTRIENT

Rice, wheat, potatoes, sugar, jaggery, sago, all types of foodgrains and millets, as well as oils and ghee.

These help the body gain energy and keep it feeling full.

They are called carbohydrates and fats.

Pulses, beans, peas, peanuts, all types of seeds, milk and milk-based products, gram, egg, meat and fish.

These help in the growth and development of our body and aid in the development of height/weight and muscles.

These are called proteins.

All green and leafy vegetables, papaya, tomatoes, drumstick, red and yellow coloured vegetables and fruits, seasonal fruits and vegetables, fruits, seeds, roots, etc. foraged from the forest, all kinds of seeds and small grains.

They enhance the body's immunity and protect it from diseases, helping to keep it healthy.

These are known as vitamins and minerals.

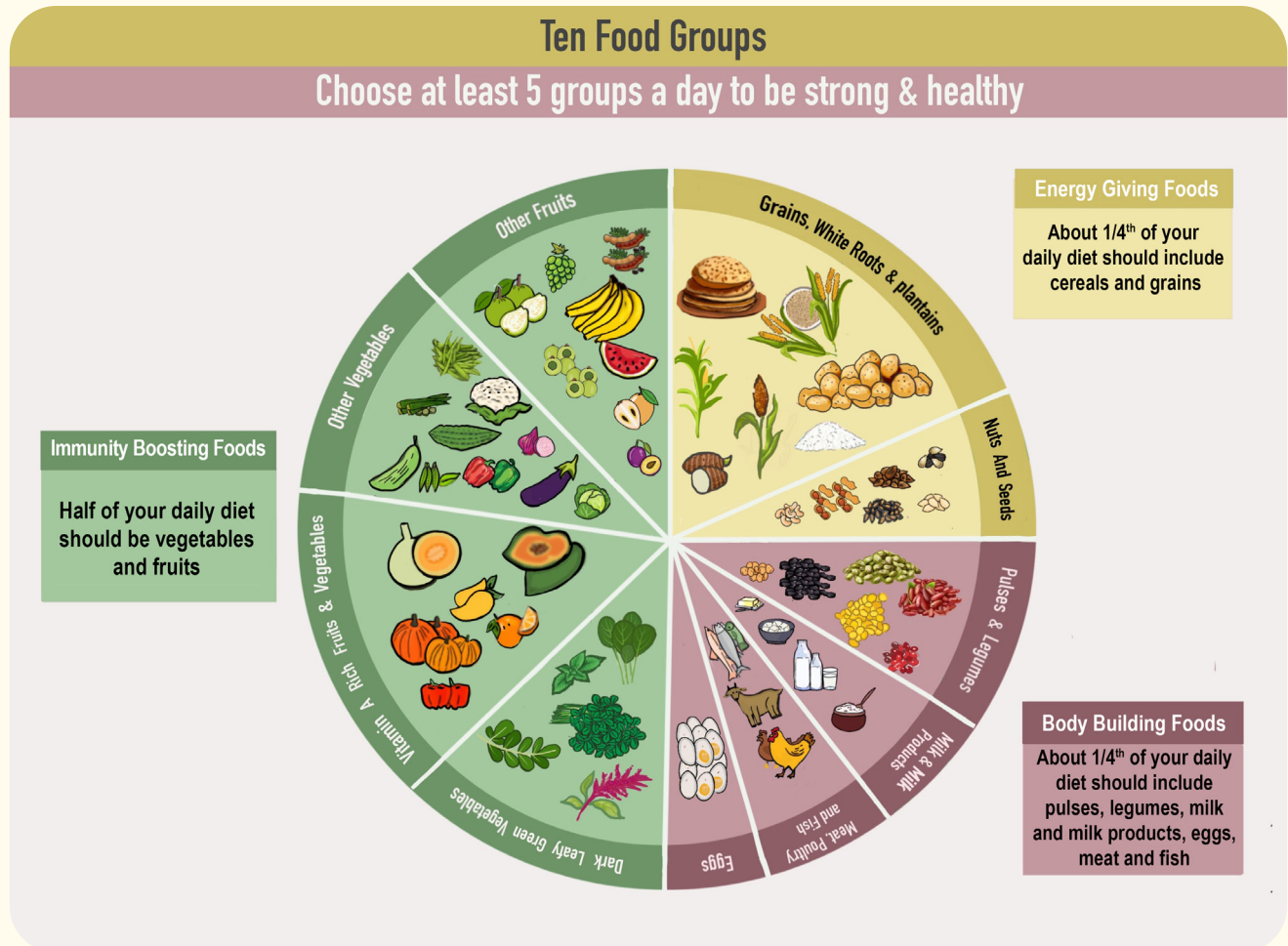
Based on the table above, our daily meals should include all three types of food groups to ensure that our body receives energy, grows and develops properly, and remains protected from diseases.

Facilitators should use the table to help participants summarise the key messages and clarify that each nutrient has a different function in our body. That's why a balanced and nutritious diet must include all three types of food groups mentioned above.

ACTIVITY 2

Introduction to 10 Food Groups

Now inform all participants that we will first discuss the 10 food groups, which are important to prepare and ensure nutritious and balanced diet for adolescent girls, pregnant women, lactating mothers, and children. These food groups are used daily to ensure nutrition. Using the 10 food groups poster, given in **Annexure 4**, explain to participants that:



- > All these food groups are essential to fulfil our body's nutritional needs.
- > Each food group should be discussed thoroughly, and local food items under each food group should be identified and incorporated in the discussion with the help of the participants.
- > A minimum of five food groups must be included daily in meals to meet nutritional requirements.
- > Do not eat the same type of food daily. Food items should be rotated—for example, using different types of vegetables, pulses, seasonal products and fruits.
- > On the poster, food groups are shown in three colours:
 - Yellow colour represents energy-giving foods,
 - Pink colour shows foods that help in growth and development,
 - Green colour shows disease-fighting and immunity-boosting foods.
- > A good plate should have one third from each of these three categories: energy-giving, growth-supporting, and immunity-building.

Ask the participants, “Can you include at least five food groups in your daily meals?”

ACTIVITY 3

Locally Available Food Items and their Nutritional Significance

Begin by asking participants to write down all the locally available, commonly consumed food items in their village on individual paper chits. In the village this activity can be done with actual food items as well. Then, explain to the participants that through this activity, we will classify these foods into different groups.

Classification of Locally Available Food Items

- > First, ask each participant to bring their chits and place them on the floor or on a mat.
- > Now, prompt a discussion by asking: “Why do we eat food?” Encourage everyone to share their responses. Listen carefully to their inputs.
- > Based on what they say, explain that we don’t eat just to fill our stomachs. Food gives us the essential nutrients that help our body and brain grow, function, and stay strong against diseases.
- > The facilitator then with the help of the following three food groups explains that apart from filling our stomach, following are the main reasons why we eat:
 - **To gain energy**—so we can move, work, and stay active.
 - **To grow and develop**—helps in the physical and mental development of the body.
 - **To protect ourselves from diseases**—protects us from illnesses and strengthens our immune system. This also includes the shine in our hair, eyes and skin.
- > Now, explain that we will group the food items on the floor into three different categories based on the role they play in the body.
- > The facilitator should mark three circles on the ground (or use three coloured mats or papers) to represent the three food groups.
- > Then, ask each participant to come forward and help place their chit in the correct group based on what they provide.
- > As they place them, ask them to say out loud what the item gives us and take agreement from other participants to place it correctly.
- > Through this activity, participants will realise that many kinds of nutritious food are available around them and that they can include a variety in their daily diet.
- > After all the items are grouped correctly, the facilitator should reinforce the message, “*To make food nutritious, we must ensure our meals include foods from all three food groups*”.



Encourage mothers, children, and all family members to include a variety of nutrients in their daily meals. Whatever is locally available and accessible should become a regular part of the family's diet.

Now show the group the image card of the issue and say:

“Now, in our homes, with roti, we will eat vegetables, pulses, fruits, nuts, leafy greens—everything!”

ACTIVITY 4

Preparing a Balanced Plate from Locally Available Food Materials

Begin by discussing the importance of balanced nutrition and say that when we eat food, our plate should contain a balanced combination of nutrients understanding which is very important. Explain that when we regularly include balanced quantity of all three food groups in our meals, we call it a balanced diet.

- > Now the facilitator should place a large empty plate (real or drawn) at the centre and initiate a discussion with participants saying that, *“Let us now fill this plate as a balanced plate—with the required quantity from each of the three food groups, so we can understand what a balanced diet looks like.”*
- > Emphasise that water, in appropriate quantities, is also part of a balanced diet.
- > Invite a few participants to come up and add food items (images, tokens, or real items) under the three groups; energy-giving foods, body-building foods, disease-fighting or protective foods.
- > If food items from all the three groups are included in appropriate quantities in the daily diet the cycle of malnutrition can be broken.
- > Discuss on the negative impacts of not including a balanced diet in one's daily food intake and reminding them about the malnutrition cycle say that lack of a balanced and proper diet results in furthering the malnutrition cycle which then becomes an inter-generational phenomena.
- > The facilitator should now encourage everyone to talk about how to include these foods in daily meals and remind them that though a balanced diet is required for everyone but in households having pregnant women, lactating mothers and children, it should necessarily be included in the daily food.
- > The facilitator should remind the participants that in order to ensure proper nutrition for the body, fortified foods such as iodised salt, fortified rice and flour and food items available through Anganwadi centres and PDS shops should be included in the diet. Fortified foods help prevent common deficiencies and illnesses.



CONCLUDING THE SESSION

The facilitator should conclude the session by saying, *“Let us all take a pledge today that we will eat healthy and home cooked food ourselves and also promote healthy food habits in our families—especially for our children.”*



Facilitation of the Key Content Related to Nutrition By the Participants—Preparation



OBJECTIVE OF THE SESSION

To enable participants to facilitate key nutrition-related content effectively and prepare themselves for active engagement.



Key topics for the session

- Deepening knowledge of essential nutrition content for pregnant women, lactating mothers, and young children.
- Exploring effective methods to communicate nutrition messages clearly and interactively with SHGs and community members.
- Practicing delivery, handling questions, and preparing mentally and practically for leading community sessions.



Method of conducting the session

- Preparation for the presentation



Materials required

- N-PLA compressed module

PROCESS OF CONDUCTING THE SESSION

In this session, each of you will prepare to lead a short mock session on nutrition content. This is a chance to build confidence and get ready for real-life facilitation with the community.

- > Briefly explain the importance of clear, confident, and participatory facilitation.
- > Assign topics and group formation
- > Divide participants into small groups or pairs.
 - Assign each group a key topic or tool (e.g. maternal diet, IFA, exclusive breastfeeding, complementary feeding, food diversity plate, 10 food groups, seasonal calendar).
 - Content review and clarification
 - Give each group time to review the materials and messages related to their assigned topic.
- > Encourage them to:
 - Identify 2–3 key messages
 - Think of simple, clear language to explain it
 - Consider a participatory method to engage the group (e.g. asking questions, using a chart or visual tool)
- > Facilitator support: Move around to answer questions, provide guidance, and ensure accuracy.
- > Planning for mock facilitation
 - Ask each group to outline how they will conduct a 5–7 minute mock session:

- Who will introduce the topic?
 - What participatory method will they use?
 - What materials do they need?
 - How will they involve the group?
- > Encourage them to do a quick internal practice or role-play among themselves.
 - > Wrap-Up and set expectations
 - Remind them:
 - The next session will be mock facilitation—everyone will get a chance to present.
 - This is for learning, not evaluation.
 - Give their best effort and support each other.
 - > End with motivation and appreciation for their preparation work.



SESSION 12



1 Hour 30 Minutes

Facilitation of the Key Content Related to Nutrition By the Participants—Presentations



OBJECTIVES OF THE SESSION

- i. To enable participants to facilitate key nutrition-related content effectively and prepare themselves for active engagement.
- ii. To give participants a platform to practice and demonstrate their facilitation skills on key nutrition topics, and receive constructive feedback to build confidence and effectiveness in field delivery.



Key topics for the session

- Deepening knowledge of essential nutrition content for pregnant women, lactating mothers, and young children.
- Exploring effective methods to communicate nutrition messages clearly and interactively with SHGs and community members.
- Practicing delivery, handling questions, and preparing mentally and practically for leading community sessions.



Method of conducting the session

- Presentation by the participants



Materials required

- Chart paper
- Marker
- Board clips
- Paper tape

PROCESS OF CONDUCTING THE SESSION

Introduction and instructions

> Facilitator says:

“This is your opportunity to demonstrate what you have learned and how you will engage the community on nutrition. Each of you will present a short session as if you’re facilitating in a village. Focus on participation, clarity of message, and your own confidence.”

> Briefly go over:

- Time limit: ⌚ 5–7 minutes per group
- What to include: greeting, context, key messages, participation method
- Feedback process: peer and facilitator observations

Mock Presentations by Participants ⌚ 60–70 minutes

- > Invite groups/individuals one by one to present their assigned nutrition topic.
- > Ask the remaining participants to act as SHG members/community group.

- > During each presentation, observe using a simple checklist:
 - Clarity of nutrition message
 - Use of participatory methods
 - Engagement with group
 - Confidence and flow
 - Accuracy of information

Feedback and Reflection 🕒 15–20 minutes

- > After each presentation:
 - Ask the group:
 - What did you like about the session?
 - What could be improved?
 - Provide constructive feedback as the facilitator—appreciate strengths, offer 1–2 suggestions.
- > Encourage peer appreciation and learning from each other's styles.

Summary and Motivation 🕒 10 minutes

- > Reflect on overall learning from the session:
 - Common strengths across the group
 - Areas to keep practicing
 - Key reminders before going to the field
- > Facilitator closes by saying:

"You all have shown great effort and ownership. With practice and community connection, your facilitation will make a real impact. Keep building on these skills!"

FACILITATOR TIPS

- ✓ Keep time strictly to ensure everyone gets a chance.
- ✓ Be supportive, especially with shy participants.
- ✓ Focus feedback on how to improve, not just what's missing.
- ✓ Reinforce the importance of respectful and empathetic communication in real sessions.



Feedback of the Training, Role of the Community Level Worker, Follow Up, Post-Test and Conclusion



OBJECTIVES OF THE SESSION

- i. Providing clarity on actions to be taken after the training.
- ii. Understanding the role of village-level workers in transforming nutrition-related behaviours.
- iii. Collecting feedback on the usefulness of the training.
- iv. Conduct a post-test after the training.



Key topics for the session

- Post training plan
- Understanding the role of village level workers
- Assessing the effectiveness of the training
- Measuring changes in participants' level of knowledge



Method of conducting the session

- Group work
- Post-Test
- Discussion
- Closing address



Materials required

- Chart
- Markers
- Post-Test formats

PROCESS OF CONDUCTING THE SESSION

Begin the session by having the facilitator explain the objectives to the participants. Once the objectives are clear, the facilitator should begin the discussion. Divide the participants into 3–4 small groups, making sure that each group does not have more than 6–7 members. Ask each group to discuss the following:

How will you take the issue of nutrition, participatory methods of engagements and key learnings from the training back to your community?

Guidelines for Group Work

- > Allocate 30 minutes for the group discussions.
- > Instruct each group to write down their key discussion points on a chart paper and select one member to present.
- > After one group presents, ask the other groups to share their thoughts, and so on. Encourage mutual feedback and link overlapping points together. If some points are left out, the facilitator can supplement. Display both charts in the training room.

Through the group discussions it will emerge as to how the participants plan to take nutrition practices to their communities and how they will contribute towards making their village a healthy and nourished village. Appreciate all the participants and extend best wishes for their efforts in promoting nutrition.

Now distribute the post-test forms to all participants and ask them to fill them out attentively. Inform them that

this is the same form they filled out at the beginning of the training. Once everyone has completed the form, ask the following question:

How did you find this training? What new things did you learn from it?

- > Encourage everyone to write their thoughts and learnings on a card.
- > Collect all the cards, read them aloud, and if anyone wishes to share their experience, encourage and appreciate them.
- > To collect feedback, you can also create a simple feedback format and provide it to the participants. Their feedback can then be compiled.
- > For compiling the participants' feedback, a compilation sheet is included as **Annexure 5** to this module.



At the end of the training thank all the participants for actively attending each day of the training.

Close the session with the hope that everyone will apply their learnings in their personal and professional lives.

ANNEXURE 1

NUTRITION TRAINING AGENDA

PROMOTING NUTRITION BEHAVIOURS FOR A HEALTHIER COMMUNITY UNDER THE PROJECT ‘Securing Nutrition, Enhancing Resilience (SENU)’					
Two-Day Training Agenda for JIVA stakeholders (PFA staff and Internal Farmer Resource Persons (IFRPs)) on Adopting the Nutrition PLA Module for Community Engagement					
Date:		Place:			
OBJECTIVES OF THE TRAINING: <ul style="list-style-type: none">> Understand Nutrition PLA approach and community mobilisation for achieving nutrition outcomes.> Understand nutrition behaviour to ensure well-nourished mother and children.> Understand nutrition concepts, need, myths as barriers.> Understand social and gender inequity and their impact on community nutrition.> Understanding actionable steps we can take.					
Session no.	Topic	Objectives of the session	Method	Time	Materials used
DAY I					
Session 1	Ice Breaking, Introduction, Pre-Test and Setting Norms for the Training	<ul style="list-style-type: none">• To familiarise the training objectives.• Conducting a pre-training assessment.• To create a learning environment and set the training norms.• To share the broad schedule for common consensus.	Game, pre-test and open discussion	9:30 am to 10:30 am	Pre-test questionnaire, training schedule, chart paper, marker
Session 2	Nutrition Efforts and Impact in the Community	<ul style="list-style-type: none">• To understand how the participants approach the community to ensure nutrition related behaviour change.• To understand the impact they are observing within the community regarding nutrition behaviour change	1-2-All game	10:30 am to 11:30 am	Chart paper, marker, board clips, paper tape
TEA BREAK — 15 minutes (11:30 am to 11:45 am)					
Session 3	Nutrition PLA Approach, its Content and Methods	<ul style="list-style-type: none">• To create common understanding on N-PLA approach.• To understand the content and methods of N-PLA.	Presentation and open discussion	11:45 am to 12:15 pm	PPT

Session no.	Topic	Objectives of the session	Method	Time	Materials used
Session 4	From Malnutrition to Nutrition	<ul style="list-style-type: none"> Identifying malnutrition. Understanding the cycle of malnutrition and ways to break it. Understanding the causes of malnutrition and the impact of local beliefs and traditions. Learning methods to assess the current status of maternal and child nutrition. 	Presentation, discussion using picture cards and group work	12:15 pm to 1:45 pm	PPT, chart paper, marker, N-PLA compressed module
LUNCH BREAK — 1 Hour (1:45 pm to 2:45 pm)					
Session 5	Nutrition for Pregnant Women, Lactating Mothers, and Infants up to Six Months	<ul style="list-style-type: none"> Understanding the nutritional behaviours of healthy mothers and infants. Identifying and adopting simple practices for ensuring the well-being and proper nutrition of mothers and children. Recognising the importance of family support for breastfeeding mothers. 	Story telling using picture cards	2:45 pm to 4:15 pm	Story, chart paper, marker, colour pencils, A-4 size papers, N-PLA compressed module
TEA BREAK — 15 minutes (4:15 pm to 4:30 pm)					
Session 6	Key Message for Community to Ensure Nutrition for PW, LM and Infants	<ul style="list-style-type: none"> Develop a common understanding of the key messages to be conveyed to the community to promote the adoption of nutrition behaviours for pregnant women, lactating mothers, and infants. 	Ranking and Scoring exercise	4:30 pm to 5:15 pm	Postcard size cards, flashcards/chart papers with key messages, stones/seeds for scoring, markers, tape, flipchart
Session 7	Recapitulation of Key Takeaways	<ul style="list-style-type: none"> To summarise the key learnings from the training day, reinforce important takeaways, and address any remaining questions to ensure clarity and effective application. 	Open discussion	5:15 pm to 6:00 pm	Chart paper and markers
DAY II					
Session 8	Welcome and Recap of Key Messages and Learnings from the Previous Day	<ul style="list-style-type: none"> To welcome participants and review key messages and learnings from the previous day, reinforcing understanding and continuity for the training 	By the participants	9:30 am to 10:00 am	Chart paper and markers

Session no.	Topic	Objectives of the session	Method	Time	Materials used
Session 9	Nutrient-Rich Complementary Feeding for the Child After Completing Six Months of Age	<ul style="list-style-type: none"> Understanding the importance of timely introduction of complementary feeding for the proper growth and development of the child. Ensuring adequate nutrition in the child's complementary feeding. Learning essential behaviours related to complementary feeding. 	Celebrating 'Annaprashan' ceremony, discussion with posters, and Demonstration of hygiene behaviours like hand washing	10:00 am to 11:30 am	Bowl and spoon, materials for celebrating the event such as food for the child's <i>Annaprashan</i> , posters, Anganwadi THR, half a handful of flour, N-PLA compressed module, pen, and register
TEA BREAK — 15 minutes (11:30 am to 11:45 am)					
Session 10	Nutritional Diversity, 10 Food Groups, and a Balanced Diet with Locally Available Foods.	<ul style="list-style-type: none"> Understanding different types of food and their contribution to body growth and better health. Learning about food groups. Building awareness of dietary diversity and balanced nutrition. Discussing locally available nutritious foods and preparing balanced meals using local ingredients. 	Discussion with posters, nutrition classification game, and balanced plate/diet activity	11:45 am to 1:15 pm	Posters, lists of locally available food items, plate, N-PLA compressed module, pen, and register
Session 11	Facilitation of the Key Content Related to Nutrition By the Participants—Preparation	<ul style="list-style-type: none"> To enable participants to facilitate key nutrition-related content effectively and prepare themselves for active engagement 	Preparation for the presentation	1:15 pm to 1:45 pm	N-PLA compressed module
LUNCH BREAK — 1 Hour (1:45 pm to 2:45 pm)					
Session 12	Facilitation of the Key Content Related to Nutrition By the Participants—Presentations	<ul style="list-style-type: none"> To enable participants to facilitate key nutrition-related content effectively and prepare themselves for active engagement 	Presentation by the participants	2:45 pm to 4:15 pm	Chart paper, marker, board clips, paper tape
TEA BREAK — 15 minutes (4:15 pm to 4:30 pm)					
Session 13	Training Feedback, Role of Community Level Workers, Follow-Up, Post-Test And Conclusion	<ul style="list-style-type: none"> Gaining clarity on the efforts to be made after the training. Understanding the role of community-level workers in nutrition-related behaviour change. Gathering feedback on the utilisation of the training. Conducting a post-training assessment. 	Group work, post-test and open discussion	4:30 pm to 5:30 pm	Post-test questionnaire, chart paper, marker, board clips, paper tape

ANNEXURE 2

PRE AND POST-ASSESSMENT FORM

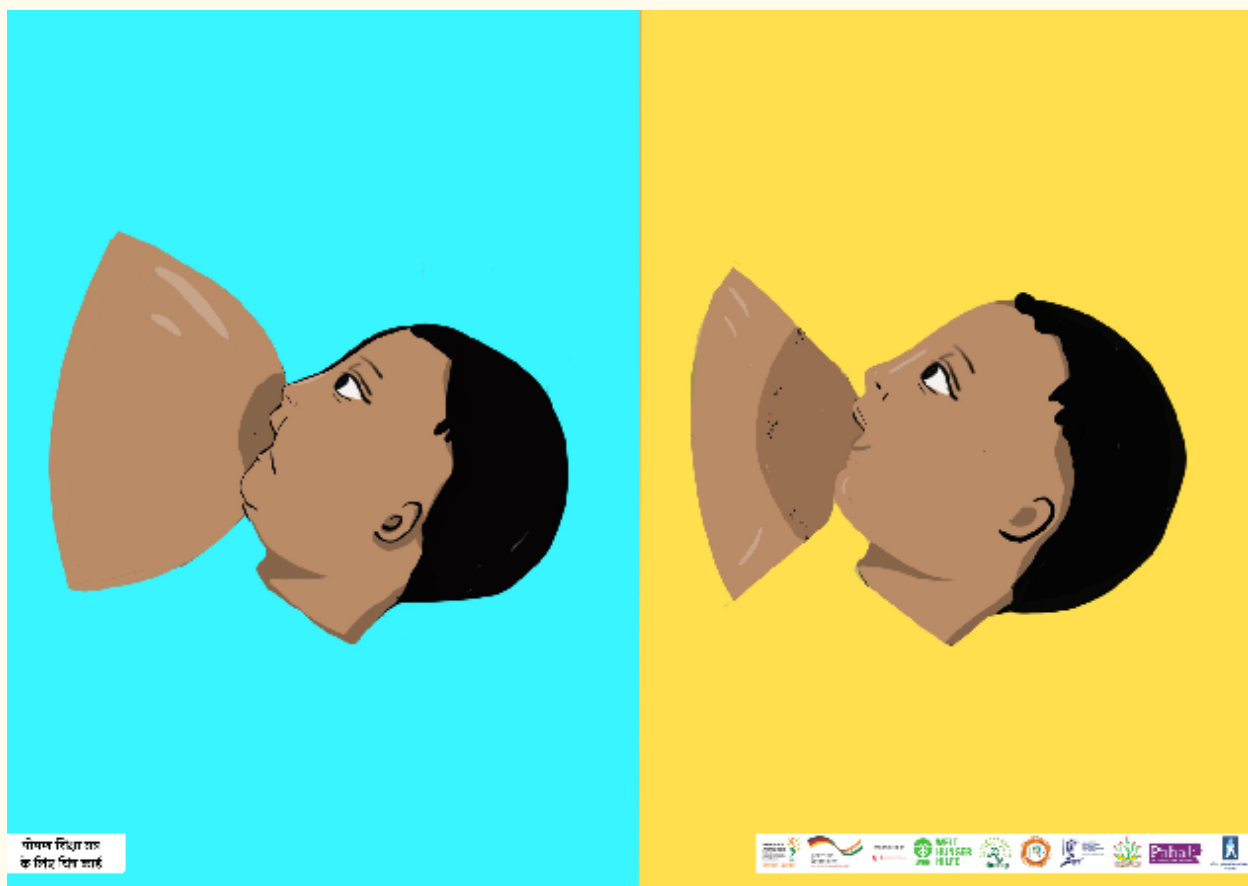
1. What is malnutrition?
 - ☐ A disease that affects children
 - ☐ A disease that affects women
 - ☐ A condition of insufficient nutrients in the body
 - ☐ A disease generally found among the poor
2. What is the reproductive age group for women?
 - ☐ 15–29 years
 - ☐ 15–39 years
 - ☐ 15–49 years
 - ☐ 15–59 years
3. Immediate causes of malnutrition include
 - ☐ Adolescents dropping out of school
 - ☐ Inadequate food intake
 - ☐ Poor hospital facilities
 - ☐ None of the above
4. Why should infants under six months be given only breastmilk?
 - ☐ All essential nutrients for the child are in breastmilk
 - ☐ Cow or buffalo milk is expensive
 - ☐ Cooking for very young infants is difficult
5. How many times should a 6-month-old be breastfed daily at minimum?
 - ☐ 6–8 times
 - ☐ 8–10 times
 - ☐ 10–12 times
 - ☐ Whenever the baby is hungry
6. Why is it important to start breastfeeding within one hour of birth?
 - ☐ The mother's first thick yellow milk (colostrum) contains antibodies to fight diseases
 - ☐ It helps the baby develop sucking ability
 - ☐ Both of the above
7. As per government guidelines, at what age should complementary feeding begin?
 - ☐ Upon completion of 5 months
 - ☐ Upon completion of 6 months
 - ☐ Upon completion of 7 months
 - ☐ Upon completion of 12 months
8. Up to what age should children continue to be breastfed along with complementary foods?
 - ☐ 6 months
 - ☐ 12 months
 - ☐ 18 months
 - ☐ 24 months
9. How much food should be given to children aged 6–8 months?
 - ☐ 2–3 times a day semi-solid food in a bowl along with breastfeeding
 - ☐ 3–4 times a day semi-solid food in a bowl along with breastfeeding
 - ☐ 4–5 times a day semi-solid food in a bowl along with breastfeeding
 - ☐ 24 months
10. Out of the 10 food groups, how many should be included in children's meals?
 - ☐ At least 4 food groups
 - ☐ At least 5 food groups
 - ☐ At least 3 food groups
 - ☐ At least 2 food groups
11. What should be the food quantity for women during pregnancy?
 - ☐ Same as before pregnancy
 - ☐ Less than before pregnancy
 - ☐ One additional energy-giving meal/snack daily
 - ☐ Double the amount of pre-pregnancy diet
12. What food security rights are given to pregnant women?
 - ☐ Subsidised grain through mid-day meals and public distribution system (ration shop)
 - ☐ THR and subsidised grain through public distribution system
 - ☐ THR and mid-day meals
 - ☐ All of the above
13. How many food groups should a woman of reproductive age include in her daily diet?
 - ☐ 5 out of 10 food groups
 - ☐ 6 out of 10 food groups
 - ☐ 4 out of 7 food groups
 - ☐ 8 out of 10 food groups
14. Why are grains/cereals important for us?
 - ☐ They protect us from illness
 - ☐ They provide energy
 - ☐ They help in our growth
15. What are the best sources of vitamins and minerals?
 - ☐ Grains
 - ☐ Fruits and vegetables
 - ☐ Rice and roti

PICTURE CARDS



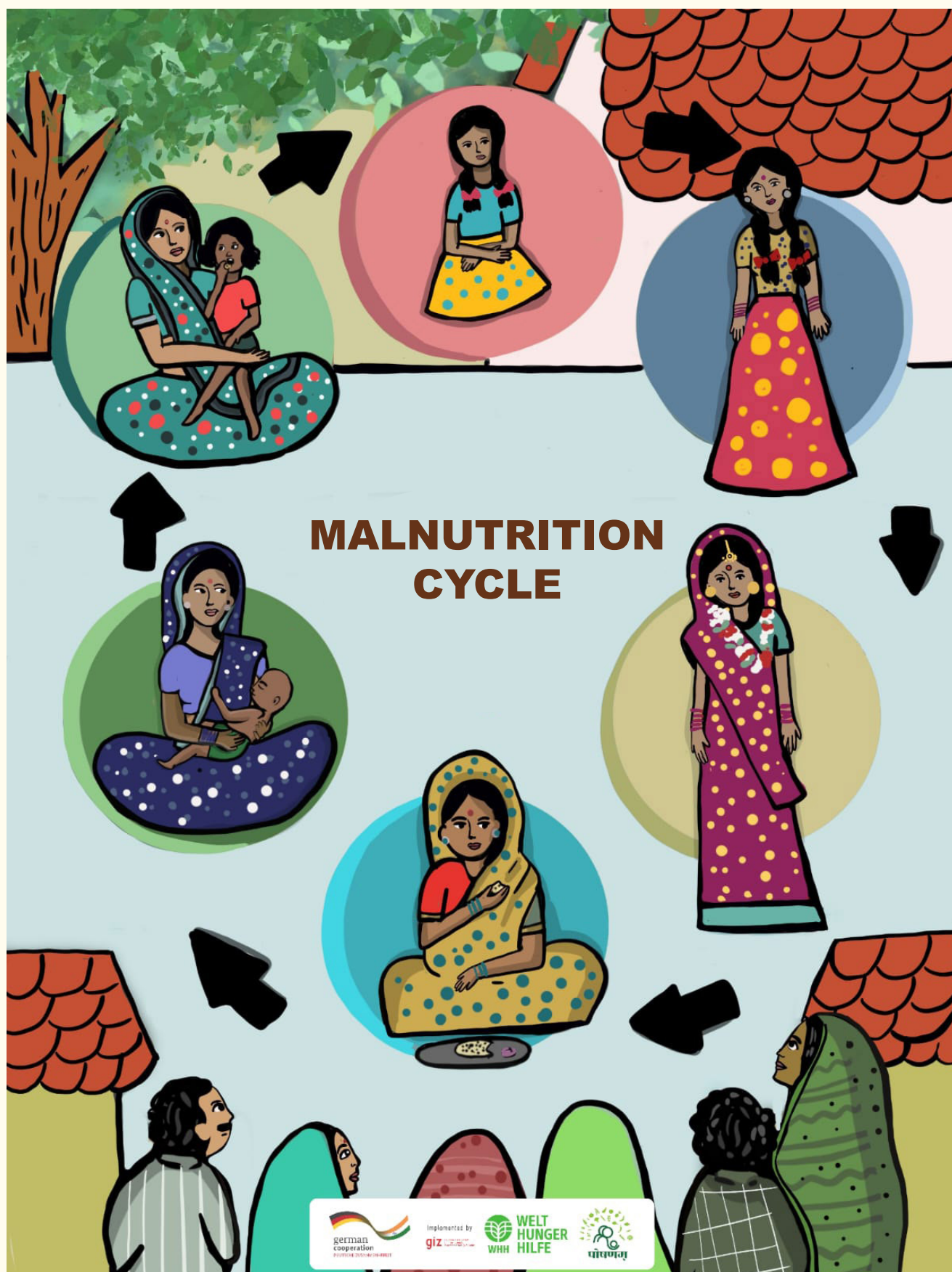






ANNEXURE 4

POSTERS



बाल सुलभ पूरक पोषण आहार

<p>6 से 8 माह</p>	 <p>माँ का दूध जारी रखें</p>		 <p>पकाकर मसलकर</p>	
<p>9 से 11 माह</p>	 <p>माँ का दूध जारी रखें</p>			
<p>12 से 23 माह</p>	 <p>माँ का दूध जारी रखें</p>			


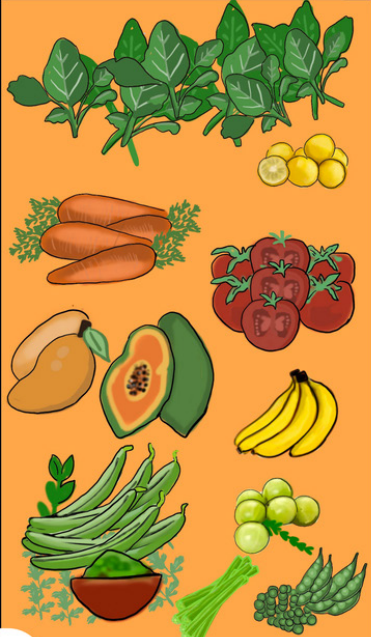
पोषण शिक्षा सत्र
के लिए बैनर



Implemented by
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भोजन और पोषण

शरीर को ऊर्जा देने वाले खाद्य पदार्थ	शरीर वृद्धि और विकास करने वाले खाद्य पदार्थ	शरीर को बिमारी से बचाने वाले खाद्य पदार्थ
		

पोषण शिक्षा सत्र
के लिए बैनर

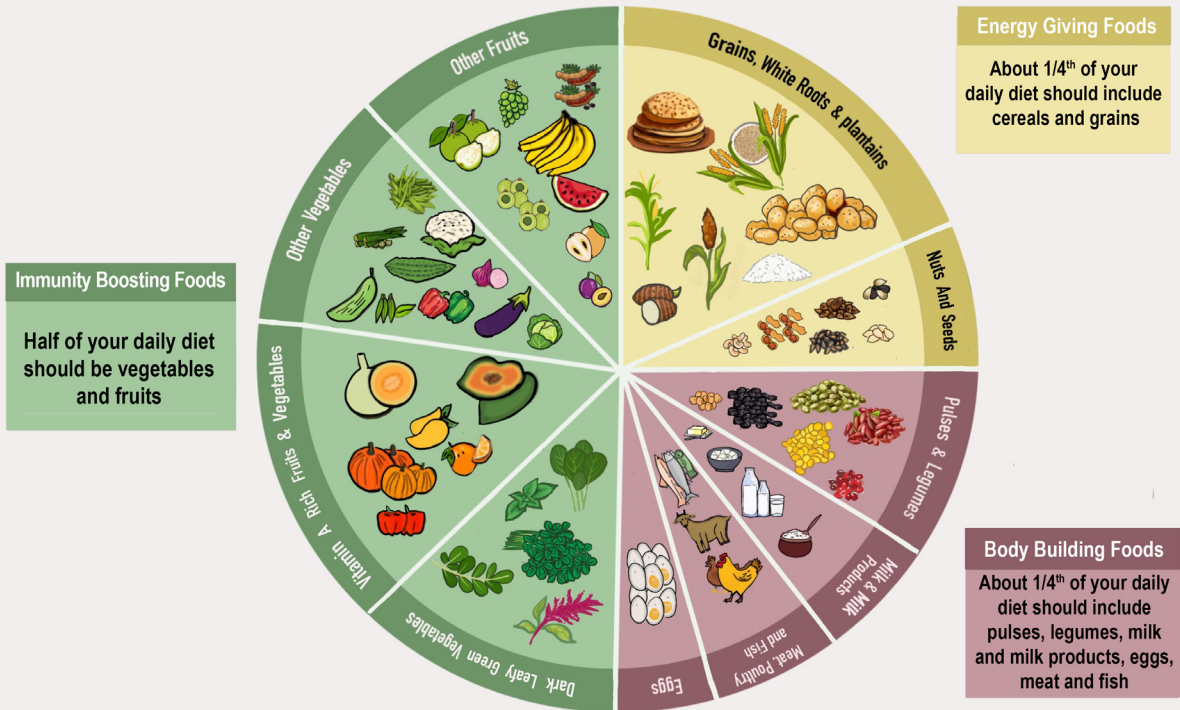


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Ten Food Groups

Choose at least 5 groups a day to be strong & healthy



ANNEXURE 5

TRAINING EVALUATION FORM

- > Please help us evaluate this training by providing your feedback through this questionnaire.
- > Mark your response in the box that best reflects your opinion on the points that follow:

Please write your views briefly on the following points:

- | | | | |
|---|---------------------------------|----------------------------|-------------------------------|
| 1. Training method and process | <input type="radio"/> Very Good | <input type="radio"/> Good | <input type="radio"/> Average |
| 2. Content of the training | <input type="radio"/> Very Good | <input type="radio"/> Good | <input type="radio"/> Average |
| 3. Participation in group work and practice games | <input type="radio"/> Very Good | <input type="radio"/> Good | <input type="radio"/> Average |
| 4. Training arrangements | <input type="radio"/> Very Good | <input type="radio"/> Good | <input type="radio"/> Average |

1. What did you like the most about the training?

2. What new thing did you learn in the training?

3. Any other suggestions you would like to share?



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