



**DISTRIBUTION OF POSHAN KITS**

**& FREE HEALTH CHECK-UP & NUTRITIONAL CAMP**

in the Aspirastonal District of  
**Ramgarh**

**PROJECT COMPLETION REPORT**

**2024-25**



SCAN TO DONATE



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# Executive Summary:



The "Distribution of 2,400 Nutritional Poshan Baskets to 1,200 Households and Organizing Rural Health and Nutritional Camp" project in the aspirational district of Ramgarh, Jharkhand, aimed to combat malnutrition among pregnant and lactating women and children between 6-36 months in 135+ Villages spread across 10 Panchayat. Aligned with the Government of India's visionary scheme of Poshan Abhiyaan and the United Nations Sustainable Development Goals (SDGs), the initiative provided essential nutrition, raised awareness, and fostered long-term dietary improvements.

The Project aimed to distribute 2,400 Poshan Baskets to 1,200 households and conducted health and nutritional camp focusing on balanced diets, hygiene, maternal-child healthcare, and awareness and enrolments in the Government health schemes. By prioritizing women's health, the initiative addressed high anaemia rates (approximately 57% among pregnant women) and helped reduce maternal and infant mortality. Educational workshops empowered women to make informed dietary choices, ensuring sustained impact.

Key lessons included the effectiveness of combining nutrition support with awareness sessions, registering the beneficiaries into state and central Government's health related schemes and the importance of community involvement. To ensure sustainability, the Project provided Behaviour Change Communication (BCC) materials, promoted kitchen gardening, provided Kitchen Garden Seeds Kit, enrolled beneficiaries and their families in Ayushman Bharat Health Account (ABHA) and assisted in enrolling beneficiaries in government schemes for continued support.

The nutritional profile of the Poshan Kit was strategically curated to target common deficiencies and promote overall wellness. Protein intake saw a substantial increase of approximately 665 grams per individual, largely due to soya chunks, flax seeds, nutritious powder, and traditional grains like jowar and bajra. Iron consumption, crucial for anemia reduction, was elevated by over 300 milligrams per person, powered by moringa, dates, bajra, and pumpkin seeds. Similarly, calcium – essential for bone health – increased by over 14 grams, bolstered by ingredients such as moringa, chia, and flax seeds.

Notably, the intervention introduced over 100 grams of Omega-3 fatty acids per person, supporting heart and cognitive function, especially among vulnerable groups. Fiber intake reached nearly 400 grams per individual, positively impacting gut health, digestion, and metabolic balance. Moderate and natural sugar intake, approximately 240 grams per person, came through energy-dense foods like honey and dates, helping reduce reliance on processed snacks. The antioxidant load – primarily from moringa, triphala, and seeds – reached an impressive 181,500 ORAC units, offering long-term immune and cellular protection.



This initiative significantly contributed to Central Coalfields Limited Corporate Social Responsibility (CSR) goals under the Health & Nutrition thematic, particularly in public health, women's empowerment, and child welfare. It serves as a scalable model for impactful nutrition interventions, demonstrating how CSR funding can create lasting social change in vulnerable communities.

## Project Components:

- Nutrition Kit Distribution:** Provided nutritious food baskets twice to the same target households.
- Health and Nutrition Camps:** Delivered awareness sessions on diet, hygiene, and maternal-child healthcare.
- Behaviour Change and Awareness:** Conducted workshops on balanced diets, low-cost nutrition, and kitchen gardening.
- Government Scheme Integration:** Assisted beneficiaries in accessing healthcare and nutrition programs.
- Sustainability Measures:** Introduced kitchen gardening, BCC materials, and long-term community support networks.



# Background:

Ramgarh – an aspirational district, located in Jharkhand, India, faces significant challenges related to malnutrition, particularly among vulnerable populations such as pregnant and lactating women and children between 6–36 months and malnutrition children. Despite various interventions, the region continues to report high rates of undernutrition and anaemia.

Recent data from the National Family Health Survey (NFHS-5) indicates that in Jharkhand, 39.6% of children under five are stunted, 22.4% are wasted, and 39.4% are underweight. Additionally, 67.5% of children aged 6–59 months and 65.3% of women aged 15–49 years are anaemic. These figures highlight the persistent nutritional deficiencies affecting the region's populace.



Several factors contribute to this malnutrition crisis.

Limited access to healthcare facilities, inadequate infrastructure, and a shortage of medical supplies hinder effective healthcare delivery. Cultural practices, such as delayed initiation of breastfeeding—only 22% of children below three years are breastfed within the first hour of birth – further exacerbate the problem. Economic constraints and food insecurity also play a significant role, with many families unable to afford or access nutritious food.

In response to these challenges, the "**Distribution of 2,400 Nutritional Poshan Baskets to 1,200 Households and Organizing Rural Health and Nutritional Camp**" project was initiated. This initiative aims to provide essential nutritional support to pregnant and lactating women and malnourished children in Patratu block, Ramgarh. By distributing nutrient-rich food baskets, including Honey, Chia Seeds, Flax Seeds, Soya Chunks, Pumpkin Seeds, Triphala Ras, Amrit Nutritious Powder and more and conducting health and nutrition camp, the project seeks to address immediate nutritional needs and educate communities on sustainable health practices.

The target groups for this project include:

- Pregnant Women:** Ensuring they receive adequate nutrition to support fetal development and reduce pregnancy-related complications.
- Lactating Mothers:** Providing nutritional support to enhance the quality of breast milk and improve maternal health.
- Children Under Three:** Focusing on underweight and malnourished children to promote healthy growth and development.

By focusing on these groups, the Project aims to combat the intergenerational cycle of malnutrition and contribute to the overall well-being of the community. The selection of Ramgarh for this intervention is based on its alarming malnutrition statistics and the pressing need for targeted nutritional support. Implementing this project in Ramgarh is a critical step toward addressing the malnutrition crisis and fostering a healthier future for its residents.



# Challenges:

While the Project successfully reached its target beneficiaries, several challenges were encountered during implementation:

## 1. Logistical Barriers in Remote Areas

- Poor Infrastructure:** Many target villages in the Patratu block faced issues like damaged roads and unpaved paths, especially during monsoon season, which delayed transportation and kit distribution.
- Storage Limitations:** Temporary storage spaces were often unsuitable for perishable and semi-perishable items, increasing spoilage risk.

## 2. Community Engagement and Participation

- Low Initial Awareness:** Many beneficiaries were unaware of the importance of nutrition or sceptical about the kits and health camps.
- Cultural Resistance:** Traditional dietary preferences and misconceptions limited initial acceptance of new food items like flax seeds and Amrit powder.

## 3. Monitoring, Evaluation, and Data Collection

- Limited Digital Literacy:** Most field staff and beneficiaries lacked familiarity with digital tools, complicating real-time data tracking and feedback mechanisms.
- Inconsistent Documentation:** Manual data entry often led to challenges in attendance records, and kit distribution logs.

## 4. Ensuring Behaviour Change

- One-Time Interventions:** While awareness sessions were impactful, many participants needed repeat engagement to internalize long-term dietary and hygiene practices.

- Lack of Local Champions:** The absence of peer educators or trained community members made sustained knowledge transfer difficult.

## 5. Environmental and Biological Risks

- Contamination and Infestation:** In some locations, improper storage led to ant infestations in kits, affecting quality perception and trust in distribution.



## 6. Limited Access to Government Schemes

- 📌 **Documentation Challenges:** Many beneficiaries lacked proper identity or documents delaying the process.
- 📌 **Scheme Awareness Gap:** Despite outreach efforts, some beneficiaries remained unaware of entitlements under POSHAN Abhiyaan and related initiatives.

Despite these challenges, the Project successfully provided essential nutrition and awareness programs to the target communities, laying a strong foundation for future sustainable interventions.

# Successes and Best Practices:

Despite challenges, the Project is believed to successfully improve maternal and child nutrition in Ramgarh. Key achievements and best practices included:

## 1. Optimized Last-Mile Delivery

- 📌 **Community-Centric Distribution Model:** Engaged Sahiya Didis, Anganwadi workers, and local SHGs to navigate hard-to-reach areas. This localized partnership approach ensured that even remote hamlets received timely nutritional support.
- 📌 **Real-Time Coordination Mechanisms:** Established WhatsApp groups and direct helplines between suppliers, logistics teams, and field coordinators to pre-empt and resolve delivery bottlenecks.

## 2. Resilient Supply Chain and Vendor Management

- 📌 **Pre-Approved Buffer Stocking:** Maintained buffer kits to prevent disruption during supply shortages or weather-related delays.

## 3. Improved Monitoring and Impact Tracking

- 📌 **Enhanced Monitoring and Data Collection:** Volunteers conducted on-site surveys and feedback sessions, enabling better tracking of impact despite digital limitations.

## 4. Behavioural Change and Capacity Building

- 📌 **Integrated Kitchen Gardening:** By coupling nutrition kits with kitchen garden seed kits and in-person training, the project enabled households to adopt food sovereignty models and reduce dependence on external aid.



## 5. Health and Nutrition Camp Impact

- 📌 **Holistic Rural Health Interventions:** Organized camp that combined nutrition education, anaemia screening, BMI measurement, and counselling for maternal health – resulting in the registration of 360+ ABHA cards.
- 📌 **Gender-Sensitive Health Education:** Separate awareness sessions for adolescent girls and lactating mothers helped normalize conversations around reproductive nutrition and hygiene.
- 📌 **Structured Follow-Up Protocol:** A copy of each medical prescription was retained and shared with the attending health professionals. This enabled junior doctors to conduct timely follow-ups with all beneficiaries, ensuring that those requiring additional care were not overlooked – a key step toward continuity of care in rural settings.

## 6. Strong Multi-Stakeholder Synergy

- 📌 **Convergence with Government Programs:** Beneficiaries were linked with ABHA, ICDS, and POSHAN Abhiyaan through onsite enrolment support, expanding the reach of state and central health benefits.
- 📌 **CSR-Government-Civil Society Partnership Model:** The project exemplified how tri-sector collaboration can deliver high-impact results, aligning CSR goals with public health priorities.

## 7. Localized and Culturally Relevant Communication

- 📌 **Behaviour Change Communication (BCC):** Developed visually engaging, multilingual materials – including videos, leaflets, and posters – tailored to local dialects and literacy levels.
- 📌 **Community Media Use:** Leveraged WhatsApp groups for continuous reinforcement of health messages beyond in-person sessions.

## 8. Demonstrated Replicability and Scalability

- 📌 The model demonstrated cost-effectiveness, cultural adaptability, and alignment with national schemes – making it a replicable framework for tackling malnutrition in other aspirational districts and tribal belts.



## Lessons Learned:

The Project successfully addressed malnutrition in Ramgarh, but several areas for improvement emerged. Key lessons for future interventions include:

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**Early and Deep Community Engagement is Non-Negotiable:** Early-stage involvement of community influencers (e.g., Anganwadi workers, Sahiya Didis, SHGs) not only builds trust but significantly boosts participation and retention.
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**Enhancing Logistical Planning:** Future projects should incorporate better route mapping, advance procurement, and flexible distribution strategies to navigate remote and inaccessible areas more efficiently.
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**Improving Supply Chain Efficiency:** Establishing local partnerships with food suppliers and maintaining buffer stock can help prevent procurement and delivery delays.
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**Digital Data Collection and Monitoring:** Investing in simple mobile-based tracking tools and training field volunteers on digital data collection can improve real-time impact assessment.
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**Reinforcing Long-Term Behaviour Change:** Continuous engagement through follow-up workshops, peer-led nutrition programs, and local support groups can help sustain healthy dietary habits beyond the project timeline.
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**Expanding Healthcare Collaboration:** Strengthening partnerships with government health centres and NGOs can provide beneficiaries with long-term access to nutritional support, medical care, and social welfare programs.
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**Targeted Scheme Linkages Require On-Ground Navigation Support:** Many beneficiaries struggled to access government nutrition and health schemes despite eligibility due to lack of documentation or digital access.
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**Nutrition Must Be Framed Within the Household Economy:** Households were more receptive to nutrition interventions when they were aligned with livelihood support (e.g., seed kits, kitchen gardens) and potential cost savings.

By integrating these improvements, future interventions can increase efficiency, enhance impact, and ensure sustainability in addressing malnutrition and community health challenges.

## Needs Assessments:

Based on the secondary research of NITI Aayog, it was to identify target areas and ensure the intervention's effectiveness. The research aimed to evaluate nutritional deficiencies, healthcare accessibility, food security challenges, and community awareness levels regarding maternal and child nutrition - the district of Ramgarh was chosen strategically. Ramgarh is also recognized as an Aspirational District under NITI Aayog's Transformation of Aspirational Districts Programme. It consistently ranks low on health and nutrition indicators, with persistent malnutrition among women and children despite several national-level interventions.

According to the National Family Health Survey (NFHS-5, 2019-21), the state of Jharkhand reports alarming statistics: 39.6% of children under five are stunted, 22.4% are wasted, and 39.4% are underweight. Anaemia is widespread, affecting 67.5% of children aged 6-59 months and 65.3% of women in the 15-49 age group. Only 22% of children are breastfed within the first hour of birth, further compounding risks of infant morbidity. These figures reflect a significant public health crisis that disproportionately affects vulnerable populations, particularly tribal communities and women in rural areas.

Despite a decade of efforts, Jharkhand continues to struggle with malnutrition, reflected in persistently high infant and under-five mortality rates. According to The NITI Aayog, The state reported a decline in child wasting, yet remains one of the worst performers in India, with stunting only marginally improving. For instance, while child wasting has seen a slight decline from 32.3% to 29%, it still far exceeds the national average. A tragic case in 2017 highlighted this crisis when 52 infants died at Mahatma Gandhi Memorial Medical College in Jamshedpur due to malnutrition.

Further, a 2022 Nutrition Brief by UNICEF highlights Ramgarh among districts where acute malnutrition is prevalent and under-reported. The brief emphasized that Ramgarh suffers from high intergenerational malnutrition due to inadequate dietary diversity, weak primary healthcare linkages, and underutilization of ICDS and health schemes. It also noted that traditional food habits and low awareness have led to poor nutritional uptake among pregnant women and adolescent girls, leaving children at risk of low birth weight and stunting.

Current data reveals that approximately 42.9% of children are underweight, the highest rate in the country, and the prevalence of stunting has only marginally improved from 49.8% to 45.3% over ten years. This stagnation is concerning, especially given that the national average for stunting has decreased significantly during the same period.

Field visits and community-level surveys in Patratu block further validated these concerns. Several Panchayats within the block reported little or no regular access to primary health centers. Pregnant women often did not complete the mandated antenatal care (ANC) visits due to lack of transport, information gaps, or shortages of supplements like iron-folic acid tablets.



Local dietary assessments revealed poor intake of proteins and iron-rich foods, especially among lactating mothers and adolescent girls. High market prices and low availability of fortified foods in local haats made nutritious choices inaccessible for many.

Community consultations with Anganwadi workers, SHG leaders, and local health professionals revealed several systemic challenges. Many women lacked awareness of government health schemes like ABHA, POSHAN Abhiyaan, and ICDS Take Home Ration (THR) programs. Cultural taboos and misconceptions around nutrition, especially during pregnancy, persisted in several villages. Importantly, there was no existing mechanism to ensure post-camp follow-up or referral-based care for those identified with anaemia or severe underweight conditions.

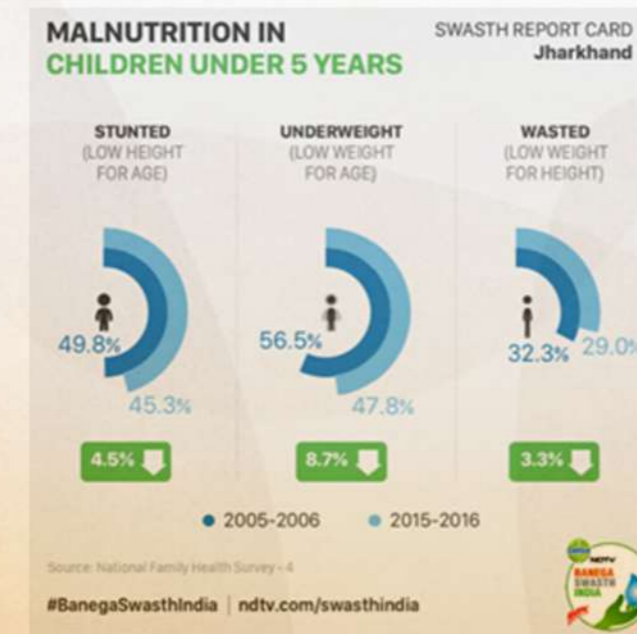
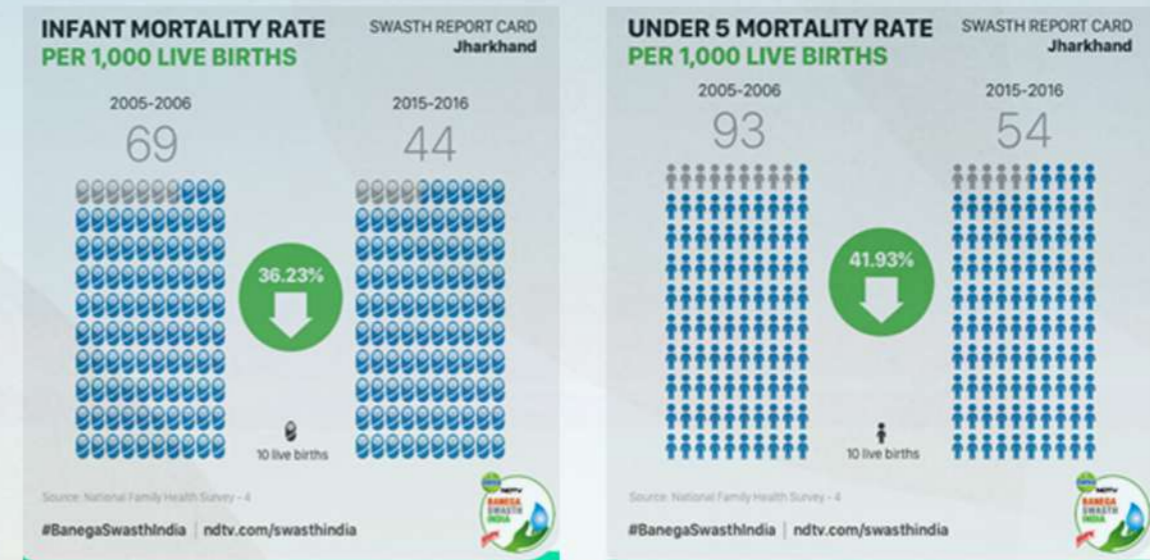
The project team identified two critical risk groups—pregnant women and lactating mothers, children aged 6 to 36 months - who required immediate nutritional and awareness-based intervention. Pregnant women, many of whom showed symptoms of moderate anaemia, were prioritized for iron-rich and protein-dense dietary supplementation. Underweight children were targeted through household-level support, educational sessions, and customized Poshan Baskets. Adolescent girls, often ignored in conventional nutrition schemes, were included in sessions on hygiene, menstrual health, and balanced diet.

The needs assessment also captured economic and environmental vulnerabilities. Erratic income from agriculture and daily wage work meant nutrition was often deprioritized in family budgets. Seasonal migration further interrupted access to healthcare and school-based mid-day meal schemes. The lack of kitchen gardens, seed availability, or agricultural extension support added to the household food insecurity.



Source: IFPRI estimates - Headcount = Prevalence x Eligible projected population for each district in 2019. Prevalence estimates: NFHS-4 (2015-16) and NFHS-5 (2019-20) state/district factsheets and report. Projected population for 2019 (children <5yrs and women 15-49yrs) was estimated using Census 2011. Data on number of pregnant women, live births, and institutional deliveries are from HMIS. NA: unavailable/improbable data

The "Distribution of 2,400 Nutritional Poshan Baskets to 1,200 Households & Organising Rural Health and Nutritional Intervention Camps" aims to provide crucial nutritional support to vulnerable groups, particularly pregnant and lactating women and children suffering from malnutrition.

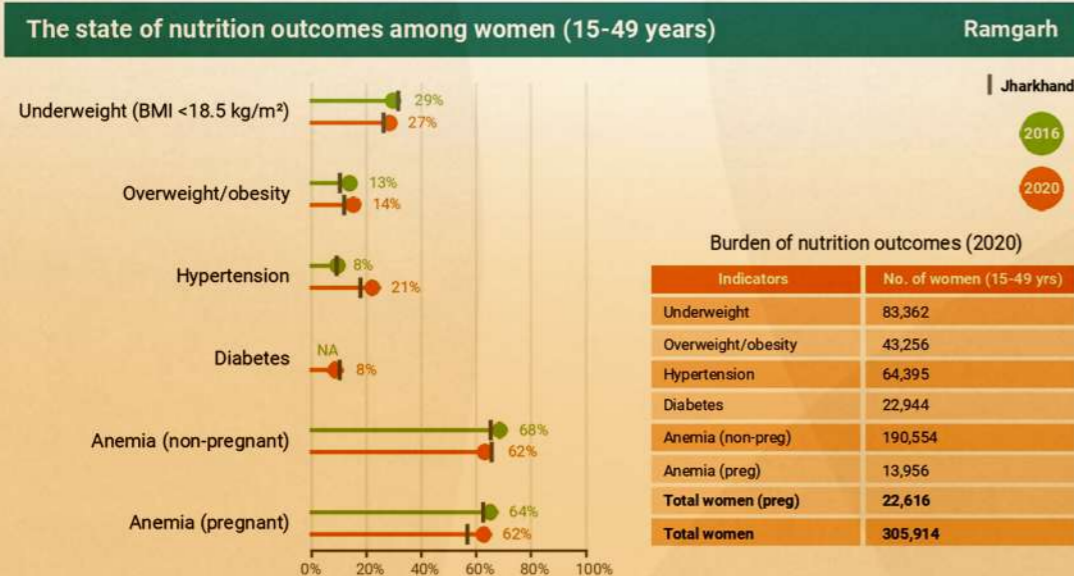
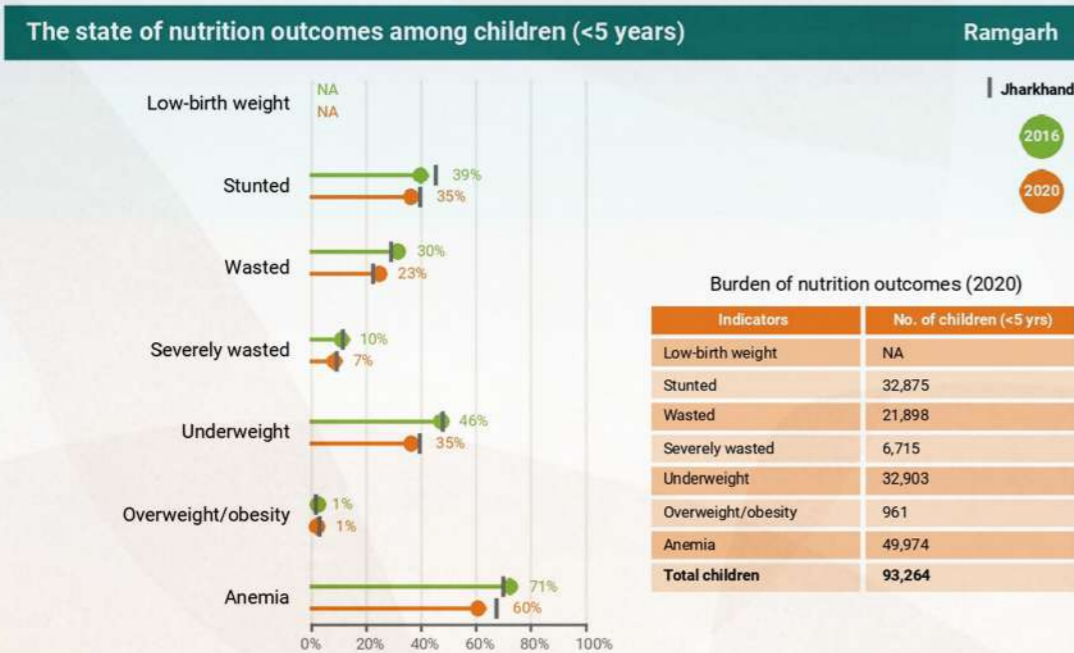


Malnutrition, still a battle in Jharkhand, but wasting rate saw a downward trend of 10.2%

Moreover, alarming statistics reveal that a significant portion of the population, including over 57% of pregnant women and 66% of women overall, suffer from anemia. The nutritional inadequacies faced by mothers directly impact their children's health, with many newborns being born with low birth weights due to inadequate maternal nutrition.

By addressing immediate nutritional needs and educating families about proper dietary practices, this initiative seeks to break the cycle of malnutrition and improve overall health outcomes in Jharkhand. The time for action is now, as the health and future of countless children depend on our ability to respond effectively to this ongoing crisis. These insights led to a multi-tiered intervention model. The project integrated nutritional aid through fortified baskets, education via BCC materials and live demos, and sustainability through the introduction of kitchen gardening kits. Additionally, a unique follow-up strategy was designed—copies of health camp prescriptions were retained and handed over to medical professionals so junior doctors could conduct follow-up checks with all beneficiaries requiring extended care.

Given these profound challenges, the **"Distribution of 2,400 Nutritional Poshan Baskets to 1,200 Households & Organising Rural Health and Nutritional Intervention Camps"** aims to provide critical nutritional support, education, and resources to break this cycle, ultimately enhancing health outcomes for mothers and children in Hazaribagh.



# Key Activities During Site Visits and Needs Assessments:

## 1. Identification of Target Communities and Beneficiaries

Site visits were conducted in Ramgarh's rural areas, particularly in Patratu.

Local healthcare professionals, Anganwadi centres, and Government reports were analysed to pinpoint villages to provide nutrition to the pregnant women, lactating mothers, and children (6-36 months old).

Sample Surveys and household visits were conducted to understand the dietary patterns, and nutritious food consumptions during and after the pregnancy.



## 2. Engagement with Local Stakeholders

Meetings were held with community leaders, healthcare professionals, Anganwadi workers, and Government officials to understand the challenges faced in combating malnutrition.

Focus group discussions with women's self-help groups (SHGs), Sahiya Didis, and provided insights into traditional food habits, and access to existing Government schemes, especially Ayushman Bharat.

## 3. Assessment of Healthcare and Food Accessibility

From the market studies to evaluate the availability and affordability of nutritious food, it was identified lack of fortified supplements and nutrition at an affordable price as key concerns.

## 4. Designing an Evidence-Based Intervention Strategy

The Project structured its approach to, deliver essential nutrition support, and provide educational interventions to ensure long-term impact.

Community recommendations led to integrating a kitchen gardening component with the Kitchen Garden Seeds Kit which was introduced to encourage self-sufficiency and sustainable food sources.

The need for behaviour change communication (BCC) materials was identified to enhance awareness on proper nutrition, hygiene, and maternal-child health practices.

## Outcomes of the Needs Assessment:


- Targeted intervention areas and beneficiaries were accurately identified to maximize impact.
- Local healthcare professionals and community stakeholders were engaged, ensuring collaborative execution of the initiative.
- The assessment validated the project's approach of nutritional kit distribution, health and nutritional awareness sessions, health check-up and nutritional camp, and kitchen gardening training, ensuring long-term sustainability.

These thorough needs assessment and site visit process ensured the project was well-informed, targeted, and capable of delivering measurable impact, setting a foundation for effective CSR interventions in Public health and Nutrition.

# United Nations SDGs Localised and Corporate Alignment:

The Project aligns with multiple United Nations Sustainable Development Goals (SDGs) beyond just the goals of **SDG 2 (Zero Hunger)** or **SDG 3 (Good Health and Well-being)**. The table below outlines the alignment of the project with various SDGs:

 2 ZERO HUNGER	Target and Description (as per UN Goals)	Project Alignment and Contribution
	<p><b>2.1:</b> End hunger and ensure access to safe, nutritious, and sufficient food for all, especially vulnerable populations.</p> <p><b>2.2:</b> End all forms of malnutrition, including addressing the nutritional needs of pregnant/lactating women and children.</p>	<ul style="list-style-type: none"> <li>Distributed 2,400 Nutritional Poshan Baskets to 1,200 households.</li> <li>Improved maternal and child nutrition in Jharkhand's high-malnutrition areas.</li> <li>Conducted awareness sessions on balanced diets and food security.</li> </ul>

 3 GOOD HEALTH AND WELL-BEING	Target and Description (as per UN Goals)	Project Alignment and Contribution
	<p><b>3.1:</b> Reduce maternal mortality.</p> <p><b>3.2:</b> End preventable deaths of newborns and children under five.</p> <p><b>3.4:</b> Reduce premature mortality from non-communicable diseases through prevention.</p>	<ul style="list-style-type: none"> <li>Focused on reducing anaemia and malnutrition among pregnant/lactating women.</li> <li>Ensured early nutritional intervention for infants and children under five.</li> <li>Promoted hygiene and preventive healthcare through health camps.</li> </ul>

 5 GENDER EQUALITY	Target and Description (as per UN Goals)	Project Alignment and Contribution
	<p><b>5.1:</b> End all forms of discrimination against women and girls.</p> <p><b>5.6:</b> Ensure universal access to reproductive health and rights.</p>	<ul style="list-style-type: none"> <li>Prioritized pregnant and lactating women, addressing gendered nutritional disparities.</li> <li>Empowered women through health education and kitchen gardening training.</li> <li>Encouraged women-led community initiatives in nutrition and food security.</li> </ul>

 6 CLEAN WATER AND SANITATION	Target and Description (as per UN Goals)	Project Alignment and Contribution
	<p><b>6.2:</b> Achieve access to adequate and equitable sanitation and hygiene for all, paying special attention to the needs of women and girls.</p>	<ul style="list-style-type: none"> <li>Integrated awareness sessions on hygiene, sanitation, and safe drinking water in rural health camps.</li> <li>Encouraged hygiene practices to prevent infections that contribute to malnutrition.</li> </ul>

 10 REDUCED INEQUALITIES	Target and Description (as per UN Goals)	Project Alignment and Contribution
	<p><b>10.2:</b> Empower and promote the social, economic, and political inclusion of all.</p>	<ul style="list-style-type: none"> <li>Targeted economically marginalized and rural communities with limited access to nutritious food and healthcare.</li> <li>Connected beneficiaries with Government nutritional support Programs (e.g., ABHA).</li> </ul>

 12 RESPONSIBLE CONSUMPTION AND PRODUCTION	Target and Description (as per UN Goals)	Project Alignment and Contribution
	<p><b>12.3:</b> Halve global food waste at production and consumer levels.</p>	<ul style="list-style-type: none"> <li>Promoted kitchen gardening and sustainable food consumption practices.</li> <li>Encouraged locally sourced nutrition solutions to reduce dependency on external food aid.</li> </ul>

 17 PARTNERSHIPS FOR THE GOALS	Target and Description (as per UN Goals)	Project Alignment and Contribution
	<p><b>17.17:</b> Encourage and promote effective public, public-private, and civil society partnerships.</p>	<ul style="list-style-type: none"> <li>Collaborated with Corporate CSR teams, Government bodies, and community organizations.</li> <li>Strengthened local healthcare and nutrition networks for sustainable impact.</li> </ul>

# Impact and Corporate Brand Value:



The Project generated significant social impact while reinforcing corporate brand value in multiple ways. The initiative not only focused on enhancing the nutritional value among the pregnant women and lactating mothers, public health but also positioned the Corporate Partner as a leader in sustainable, high-impact CSR.

# Key Impact Values:

## 1. Direct Improvement in Public Health and Nutrition

- **Reducing Malnutrition and Anaemia:** Beneficiaries, particularly pregnant women and lactating mothers and children (6-36 months), would experience improved nutrition levels, leading to better maternal and child health outcomes.
- **Increased Awareness:** Through health and nutrition camps, families gained knowledge on balanced diets, hygiene, and food security, ensuring sustained dietary improvements beyond the project.

## 2. Community Empowerment and Social Upliftment

- **Women-Centric Impact:** Prioritizing women and mothers helped break the cycle of malnutrition and food insecurity at the household level.
- **Skill Development and Self-Sufficiency:** Kitchen gardening training and seed kit distribution encouraged sustainable food production, reducing long-term dependency on external aid.

## 3. Alignment with Corporate Social Responsibility (CSR) Goals

- **Demonstrated Commitment to Health and Well-being (SDG 3 and SDG 2):** The Corporate partner's involvement in public health and nutrition enhanced its reputation as a socially responsible brand.
- **Strengthened Stakeholder Relations:** The initiative fostered collaborations with Government bodies and local communities, reinforcing long-term CSR impact.

## 4. Brand Recognition and Market Leadership in Sustainable Impact

- **Positive Brand Perception:** The Project showcased the Corporate's role in nation-building, elevating its public image as a catalyst for social good.

## 5. Long-Term Business and Social Impact Synergy

- **CSR Beyond Charity:** Instead of one-time aid, the project embedded sustainability elements, ensuring lasting improvements in food security and health.
- **Scalability and Replication Potential:** The success of this initiative provides a replicable model for expansion in other high-malnutrition regions, further solidifying corporate leadership in sustainable development.



# Timeline:

## Proposal & Planning

07 Oct 2024:	21 Oct 2024 – 19 Feb 2025	28 Oct – 20 Nov 2024	01-30 Nov 2024
Proposal submitted	Discussions and Clarifications on the Proposal	Beneficiary identification	Vendor Identification

## Approvals & Agreements

17 Feb 2025	24 Feb 2025	29 Feb 2025
Proposal Accepted	MOU Signed	Suppliers for Poshan Kits finalized

## Funding & Fieldwork

03 Mar 2025	04 – 27 Mar 2025	21 Mar 2025	29 Mar 2025	20 Apr 2025	25 Apr 2025
Requisition for the 1 <sup>st</sup> Instalment	Site visits and beneficiary verification	1 <sup>st</sup> Instalment released	Requisition for the 2 <sup>nd</sup> instalment	Logistics coordinated (transportation, packaging, storage)	2 <sup>nd</sup> instalment released

## Implementation Phase

02 May 2025	03 May 2025	10 May 2025	19 May 2025
<ul style="list-style-type: none"> <li>Phase 1 distribution of Poshan Kits.</li> <li>Health check-ups, nutritional camp.</li> <li>Training on kitchen gardening.</li> <li>Enrolment in the health related Government Schemes.</li> </ul>	Requisition for the 3 <sup>rd</sup> Instalment	Logistics Coordinated	1 <sup>st</sup> part of the 3 <sup>rd</sup> Instalment released

## Final Distribution & Documentation

20 – 24 May 2025
<ul style="list-style-type: none"> <li>Phase 2 distribution of Poshan Kits.</li> <li>Testimonials and success stories collected.</li> </ul>

## Project Closure

July 15, 2025
2 <sup>nd</sup> part of the 3 <sup>rd</sup> Instalment released, Final project report submission & 4 <sup>th</sup> instalment requisition

# Future Scalability:

The Project demonstrated a high-impact, replicable model that can be expanded and scaled across multiple geographies facing similar malnutrition challenges. The initiative combined immediate nutritional aid, Behavioural change strategies, and sustainable food security solutions, making it a scalable framework for future CSR and development interventions.

## 1. Geographic Expansion

Given the success of the intervention in Ramgarh, the project can be expanded to other high-burden malnutrition regions in India, particularly:

- Aspirational districts identified by NITI Aayog with high levels of child stunting, undernutrition, and anaemia among women.
- Tribal and marginalized rural communities where access to fortified food, health services, and nutritional awareness is minimal.
- Urban slums where malnutrition coexists with food insecurity and poor hygiene conditions.

## Scalability Strategy for New Locations:

- Conduct baseline nutritional assessments to identify priority regions.
- Partner with state Governments, NGOs, and Corporate CSR teams for multi-stakeholder implementation.
- Establish decentralized community-led distribution networks to ensure efficient logistics and cost-effectiveness.

## 2. Integration with Existing Government Programs

To ensure sustainability and cost-effectiveness, the project can be integrated into India's flagship nutrition and health programs, such as:

- POSHAN Abhiyaan (National Nutrition Mission):** Align interventions with government policies on maternal and child nutrition.
- Integrated Child Development Services (ICDS):** Collaborate with Anganwadi centres for wider beneficiary coverage.
- Mid-Day Meal and Public Distribution System (PDS) Reforms:** Enhance the quality and nutritional value of government-provided food.
- National Rural Health Mission (NRHM):** Link beneficiaries to ongoing maternal and child healthcare initiatives.



### Scalability Approach through Government Partnerships:

- Advocate for policy adoption of project best practices within national nutrition strategies.
- Leverage public-private partnerships (PPP) to expand impact through joint funding and execution models.
- Create a digitized beneficiary tracking system to link project data with government databases for long-term monitoring.

### 3. Corporate CSR Replication and Multi-Sector Partnerships

The Project aligns well with CSR mandates of multiple industries, including:

- FMCG and Food Companies:** Partnerships for nutritional fortification and meal kit distribution.
- Pharmaceutical and Healthcare Companies:** Supporting maternal and child health interventions.
- Agri-Tech and Sustainable Farming Organizations:** Scaling kitchen gardening and food security models.
- Tech and Data Analytics Firms:** Enhancing M&E frameworks with AI-driven nutrition tracking.

### Scalability via CSR and Multi-Sector Collaboration:

- Develop customized CSR programs where corporations fund region-specific interventions.
- Establish industry coalitions that co-invest in large-scale nutrition initiatives.
- Encourage employee volunteering and skill-based CSR for project execution, awareness-building, and monitoring.

### 4. Digital and Tech-Enabled Scale-Up

Future scalability can leverage technology to improve efficiency, impact measurement, and outreach. Tech-Driven Scalability Strategies:

- Mobile-Based Nutrition Monitoring:** Use AI-driven apps to track real-time improvements in child and maternal health.
- Blockchain for Supply Chain Transparency:** Digitize the Poshan Basket distribution process for efficient tracking and fraud prevention.
- E-Learning Modules and Digital Awareness Campaigns:** Provide low-cost nutrition and hygiene education via WhatsApp, IVR, and community radio.



- Smart Subsidy Integration with UPI and Aadhaar:** Enable direct benefit transfers (DBTs) to empower families to purchase nutritious food independently.

### 5. Self-Sustaining Community Ownership Models

To ensure long-term sustainability, the project can transition from aid-based interventions to self-reliant community-driven models.

#### Community-Led Scale-Up Models:

- Train local women's groups (Self-Help Groups - SHGs) to manage food distribution and awareness programs.
- Establish community-run kitchen gardens and seed banks to promote food self-sufficiency.
- Form local nutrition committees to monitor child growth, hygiene, and food consumption patterns.
- Develop micro-financing and livelihood linkages for beneficiaries to generate income through organic farming and local nutrition enterprises.

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- Develop micro-financing and livelihood linkages for beneficiaries to generate income through organic farming and local nutrition enterprises.

### 6. Financial Sustainability and Cost-Effective Replication

Scaling up requires a cost-effective financial model that reduces dependence on external funding over time.

#### Sustainable Funding Strategies:

- Blended Finance Approach:** Combine CSR funding, government grants, and impact investment to create scalable funding pools.
- Social Impact Bonds (SIBs):** Engage impact investors where returns are linked to project outcomes (e.g., improved child nutrition rates).
- Subscription-Based Nutrition Services:** Partner with corporates and local entrepreneurs to develop low-cost nutrition subscription boxes for rural communities.
- Incentive-Linked Government Funding:** Structure funding models where project expansion is linked to impact metrics (malnutrition reduction, health improvements).



# Sustainability and Exit Strategy:

The Project was designed not only to provide immediate nutritional relief but also to ensure long-term sustainability and self-reliance among the beneficiaries. The exit strategy was planned to ensure that after the completion of direct interventions, target communities continue benefiting from improved nutrition, health awareness, and food security solutions.

## 1. Community-Led Sustainability Approach

**Objective:** Empower local communities to sustain and expand the impact beyond the project timeline.

### Formation of Local Nutrition Committees (LNCs):

- Encouraged women-led groups (Self-Help Groups - SHGs) to oversee nutritional awareness and household dietary practices.
- Empowered Anganwadi workers and local health volunteers to continue providing basic nutritional education and support.

### Capacity Building of Caregivers and Community Leaders:

- Conducted training programs for mothers, caregivers, and village leaders on low-cost, locally available nutrition options.
- Ensured transfer of knowledge on food security, hygiene, and sustainable health practices.

### Kitchen Gardening as a Self-Sustaining Nutrition Model:

- Provided beneficiaries with vegetable seed kits and training on home gardening.
- Encouraged community-based farming initiatives to improve local food availability.

### Behaviour Change Communication (BCC) for Long-Term Impact:

- Distributed printed and digital materials (leaflets, posters, videos) on balanced diets, maternal health, and hygiene best practices.
- Used WhatsApp groups, and community meetings to reinforce key messages over time.



## 2. Integration with Government Programs and Policies

**Objective:** Link beneficiaries with ongoing government support to sustain improvements.

### Enrolled Beneficiaries in National Nutrition Schemes:

- Assisted families in registering for POSHAN Abhiyaan, ICDS, and PM Jan Arogya Yojana.
- Facilitated Aadhaar-based tracking for continued government assistance.

### Strengthened Healthcare Linkages:

- Ensured beneficiaries were connected to primary health centres (PHCs) and Anganwadi centres for continued nutrition and maternal-child healthcare services.
- Encouraged regular check-ups for pregnant women and children under five.

### Leveraged Mid-Day Meal and PDS for Long-Term Food Security:

- Worked with local schools and Anganwadi centres to improve dietary diversity in mid-day meal programs.

## 3. Financial Sustainability and Income-Generating Models

**Objective:** Transition from aid-based support to self-reliant economic models.

### Microfinance and Livelihood Linkages for Women:

- Connected women's groups to government microfinance programs to help them expand kitchen gardens into small agribusinesses.

### Village-Level Nutritious Food Production:

- Encouraged community-based food preservation (e.g., sun-dried vegetables, homemade protein powders) to increase local food availability.

### Encouraging Sustainable Farming Practices:

- Introduced low-cost composting, organic farming, and water conservation techniques.

## 4. Digital and Technological Sustainability:



**Objective:** Use digital tools to maintain engagement and monitor long-term progress.

### 1. Mobile-Based Nutrition Tracking and Support:

a. Integrated simple mobile applications (WhatsApp groups) to share nutrition tips, child growth monitoring alerts, and health reminders.

b. Trained local youth volunteers and health workers to use mobile data collection tools for post-project tracking.

### 2. Community Data Collection for Government Reports:

a. Worked with local health centres to maintain growth charts and anaemia tracking records for children and mothers.

b. Linked data with district health authorities to ensure continued policy-level support.

### 5. Exit Strategy for Corporate and NGO Partners

**Objective:** Transition responsibility from implementing partners to community ownership.

#### 1. Final Capacity Building and Knowledge Transfer Sessions:

a. Created a mentorship model, where trained community members guide new beneficiaries.

#### 2. Sustainability Reports and Impact Dashboards:

a. Provided corporate CSR teams and government agencies with detailed sustainability reports on impact and key learnings.

#### 3. Continued Partnership with Local Organizations:

a. Encouraged local NGOs to take ownership of the project's ongoing nutrition education programs.

b. Explored corporate CSR funding for scaling future interventions in new regions.

#### Key Takeaways for Future Sustainability

**1. Long-Term Community Empowerment:** Women-led kitchen garden trainings, and nutrition committees ensure continued food security.

**2. Government Program Integration:** Linking beneficiaries to the state and the national schemes maximizes impact beyond direct intervention.

**3. Financial Independence:** Microfinance, skill development, and local agribusiness models promote economic self-sufficiency.

**4. Digital Innovations:** Using mobile technology and real-time tracking maintains post-project



# Testimonials:



Beneficiary

Today at Patratu New Market, Nutrition Kits are being provided on behalf of Shri Manish Jaiswal, with the Youth of India Foundation. Everyone is being informed about the benefits of the kit and how to maintain good health and well-being. This camp has been organized for that purpose. There are many people here who have come, and everyone will benefit from it. Thank you.



Beneficiary

I had reached the event location and received everything there. I live in Jaynagar, and the distribution is happening right here at the Jaynagar Club. I have used the items before, and this is my second time receiving it, and they were really good. The quality was excellent, and everything was properly packed in the right quantity. Even the weight of the items was accurate. The children also used everything as well. I'm completely satisfied with what CCL and the Youth of India Foundation have provided. Thank you so much from my side.



Beneficiary

We have been invited here by our respected Member of Parliament, Shri Manish Jaiswal. Today, Nutrition Kits are being provided by CCL and the Youth of India Foundation for young children and pregnant women. We have come here to receive these nutrition kits, and I would like to sincerely thank them for this generous initiative. I am truly grateful to them.



Beneficiary

We have come here to receive the kits being distributed by Manish Ji, and the Youth of India Foundation. Along with that, free health check-ups are being provided, from gynaecologists to ayurveda doctors present. Blood Pressure, Diabetes, and Eye check-ups, among others, were present, and we were able to get medical treatment for the same.





**Beneficiary**

I have received this kit for the second time. When I used the items in the kit, I found everything to be very nutritious. It's especially good for pregnant women. It contains all the essential nutrients and is even helpful for those who suffer from problems like gas. Everything in the kit is healthy and beneficial.



**Beneficiary**

I have received this kit for the second time. The first time I received it, the items were of good quality—there were no issues like insects or spoilage. Everything was in good condition. I've been using the items at home, and they've been beneficial. My family is happy with it as well.



Youth of India Foundation, which has made everything ready for distribution. How did you feel? This feedback... Please, at first glance, would like to say that all the items that were sourced, the quality is visible in all the items. The kind of packaging and the branding done, especially the branding that we are seeing right now, it feels really good to see that a lot of thought has gone into it— the branding, whether it's for the village, or for Youth of India. And all the items have been so nicely sealed and packed into small packets and those packets are sealed with bottles and everything is sealed and so much detail has been added that just looking at it you can see the effort put in, and it brings a lot of happiness. Even in the seeds that will be distributed, the branding done on the seeds is also very pleasing to see. And the way the seed has been presented in the form of a capsule, it is a very innovative approach and very nice. Thank you.



**Smt. Pooja Prasad  
Manager, CSR, CCL**



**Shri Manish Jaiswal,  
Hon. Member  
of Parliament,  
Hazaribagh Loksabha**

Welcome to this important event dedicated to the health of expecting mothers. A heartfelt thank you to CCL for sponsoring this initiative and providing Nutrition Kits. These kits are a step toward ensuring that every child is born healthy and remains free from malnutrition. A baby's future health largely depends on the mother's nutrition during pregnancy. Eating well, staying healthy, and following good habits ensures the baby's well-being too.

Remember, you are no longer caring just for yourself – you're nurturing a life inside you. We encourage you to consult the nutritionists present here for guidance on what to eat and avoid during different stages of pregnancy. Today, we've identified around 1,200 women to receive these kits, and this program will continue so that more women benefit in the future. Let us work together to fight malnutrition, support healthy motherhood, and build a healthier next generation. Thank you to all the Youth of India Foundation, volunteers and organizers who made this event possible. Wishing all mothers a safe pregnancy and a healthy, happy child.



**Shri Ajay Kumar,  
HR, CCL**




I extend a warm welcome to our Honorable MP, MLA, the BJP state team, and the Youth of India Foundation, whose support has made today's event possible in partnership with CCL.

CCL has always worked for the welfare of people in its command areas, especially the underprivileged. Today's program is specially dedicated to pregnant and breastfeeding women from rural areas, focusing on their health and nutrition. We believe that a healthy mother gives birth to a healthy child, which is essential for a strong nation. Health checkups are being conducted here, along with the distribution of Nutrition Kits containing useful items – some traditional, often overlooked, but very beneficial. This initiative also aims to raise awareness about proper care during pregnancy. I sincerely thank the Youth of India Foundation and our MP Sir for their presence and valuable support in making this event a success.



# Annexure 1:

## Concerned District Authorities' NOC

**सिविल सर्जन का कार्यालय, रामगढ़**  
Phone/Fax : 06553-261572, Email : csramgarh@yahoo.co.in


पत्रांक: 205

प्रेषक : असैनिक शल्य चिकित्सक  
सह मुख्य चिकित्सा पदाधिकारी  
रामगढ़।

सेवा में,  
Sailesh Singhai  
Founder, Youth of India Foundation.  
1st Floor Hotel Lemon Tree, Sevoke Road Siliguri,  
West Bengal. 734008.

विषय : निगमित सामाजिक उत्तरदायित्व के अंतर्गत "स्वास्थ्य मेला सह पोषण कीट वितरण" कार्यक्रम में सहयोग एवं सहमति देने के संबंध में।

महाशय,  
उपर्युक्त विषय के संबंध में कहना है कि माननीय सांसद, हजारीबाग के पत्रांक 277 दिनांक 10.02.2025 द्वारा माननीय प्रधानमंत्री जी के प्रेरणा से निगमित सामाजिक उत्तरदायित्व के अंतर्गत "स्वास्थ्य मेला सह पोषण कीट वितरण" कार्यक्रम हेतु गर्भवती महिलाओं, बच्चों (06 माह से 36 माह तक) एवं कुपोषित बच्चों/बच्चियों को स्वास्थ्य लाभ एवं पोषण कीट प्रदान करने हेतु अनुमति की मांग की गई है।  
उक्त के आलोक में आपको निदेश दिया जाता है कि रामगढ़ जिलांतर्गत में स्वास्थ्य मेला सह पोषण कीट वितरण करने की अनुमति दी जाती है।

विश्वासभाजन  
  
असैनिक शल्य चिकित्सक  
सह मुख्य चिकित्सा पदाधिकारी  
रामगढ़।  
13/02/25

ज्ञापक .....  
प्रतिलिपि : श्री मनीष जायसवाल, माननीय सांसद, हजारीबाग लोकसभा, को सूचनार्थ सूचनार्थ समर्पित।

असैनिक शल्य चिकित्सक  
सह मुख्य चिकित्सा पदाधिकारी  
रामगढ़।

# Annexure 2:

## CCL's Inspection Consent

**सत्यापन पत्र**

Central Coalfields Limited की सीएसआर योजनांतर्गत वित्त प्रदत्त 2025 में Youth of India Foundation द्वारा दिनांक 2 मई 2025 को आयोजित निःशुल्क पोषण किट वितरण कार्यक्रम में प्रयोग में की जाने वाली पोषण सामग्रियों का भौतिक जाँच किया।

जाँच के दरम्यान प्रथम दृष्टया किट में प्रयोग की जाने वाली सामग्री गुणवत्तायुक्त स्थिति में पाया।

हस्ताक्षर: पूजा प्रसाद

पदाधिकारी का नाम: पूजा प्रसाद

संपर्क सूत्र: 8987789379

स्थान: राँची

दिनांक: 26.04.25

**सत्यापन पत्र**

Central Coalfields Limited की सीएसआर योजनांतर्गत वित्त प्रदत्त 2025 में Youth of India Foundation द्वारा दिनांक 2 मई 2025 को आयोजित निःशुल्क पोषण किट वितरण कार्यक्रम में प्रयोग में की जाने वाली पोषण सामग्रियों का भौतिक जाँच किया।

जाँच के दरम्यान प्रथम दृष्टया किट में प्रयोग की जाने वाली सामग्री गुणवत्तायुक्त स्थिति में पाया।

हस्ताक्षर: मनेज कुमार सहाय

पदाधिकारी का नाम: मनेज कुमार सहाय

संपर्क सूत्र: 8987789174

स्थान: राँची

दिनांक: 26/04/2025

# Annexure 3:

## Beneficiary Details

**कार्यालय, प्रमारी चिकित्सा पदाधिकारी सामुदायिक स्वास्थ्य केन्द्र पतरातू । (रामगढ़)**  
 Email ID: moicpatratat@yahoo.com

पत्रांक 122/1

प्रेषक: प्रमारी चिकित्सा पदाधिकारी सामुदायिक स्वास्थ्य केन्द्र पतरातू, रामगढ़।

सोमा में: माननीय श्री मनीष जायसवाल, संचालक लोका रोगा हजारीबाग, झारखण्ड।

दिनांक: पतरातू/दिनांक 29/4/25

विषय: निगमित सामाजिक उत्तरदायित्व के अन्तर्गत स्वास्थ्य मेला सह पोषण कीट वितरण कार्यक्रम के सम्बंध में।

महाराज, उपरोक्त विषयक आपके पत्रांक एमपी/एलएल/हजारीबाग/दिल्ली/2025/516 दिनांक 26.04.2025 के आलोक में आगामी 02 मई 2025 को माननीय प्रधानमंत्री जी के प्रेरणा से निगमित सामाजिक उत्तरदायित्व के अन्तर्गत वितरण कार्यक्रम हेतु नर्मदगी महिलाओं एवं स्तनपान करने वाली माँ, बच्चों (06 माह से 36 माह तक) को पोषण कीट प्रदान किया जाना के विषयकी सूची इस पत्र के साथ संलग्न कर भेजी जा रही है। अनु-कुल 42 (स्वास्थ्य) प्रतियों में।

विद्यमानमान  
 प्रमारी चिकित्सा पदाधिकारी  
 सामुदायिक स्वास्थ्य केन्द्र पतरातू,  
 (रामगढ़)  
 पतरातू/दिनांक 29/4/2025

आपका 122  
 प्रतिनिधि-सिद्धिचरण रामगढ़ को सुचारु प्रेषित।

प्रमारी चिकित्सा पदाधिकारी  
 सामुदायिक स्वास्थ्य केन्द्र पतरातू,  
 (रामगढ़)

Medical Officer Incharge  
 C.H.C. Patratu (Ramgarh)

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Medical Officer Incharge  
 C.H.C. Patratu (Ramgarh)

Sl. No.	Beneficiary Name	Age	Sex	Address	Signature
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On the initiative of Hazaribagh MP Manish Jaiswal, nutrition kits were given to 1200 women, a health fair cum free nutrition kit distribution camp was organized in Patratu

By - Pritu Kumar on May 02, 2025



We are very serious about the future being healthy and for this, there is a need to take good care of the food habits, lifestyle, discussions and care of every pregnant mother and lactating mother as well as children. For this, nutrition kits are being distributed among pregnant and lactating mothers. When our children are healthy, mothers are healthy, only then our nation will be healthy. The above was said by Hazaribagh Lok Sabha MP Manish Jaiswal, in his address at the Health Fair cum Free Nutrition Kit Distribution Campaign program organized by CCL in collaboration with Youth India Foundation at Patratu Labor Welfare Center. He further said that we all have to fight malnutrition together and drive it away. This is the responsibility of all of us and when the laughter of healthy children will resonate in the whole country, only then our entire nation will be strong. MP Manish Jaiswal said that inspired by the country's Prime Minister Narendra Modi, I took an initiative and the result of that is that CCL organized this camp under its CSR Fund. He also said that this is just a beginning and we are determined to organize such programs in various areas of our Lok Sabha constituency.

Barkagaon MLA Roshan Lal Choudhary said that it is the result of the initiative taken by Hazaribagh MP Manish Jaiswal that 1200 sisters of Barkagaon assembly constituency were able to get the nutrition kit. BJP State Vice President Rakesh Prasad said that pregnant and lactating mothers need a balanced nutrition, for which Hazaribagh MP Manish Jaiswal has taken a unique initiative, which cannot be praised enough. Before this, Dr. Nitish Kumar explained in detail the usefulness and consumption methods of all the ingredients available in the nutrition kit.

This program was organized by CCL in collaboration with Youth of India Foundation on the initiative of MP Manish Jaiswal. It was inaugurated by MP Manish Jaiswal and other guests by cutting the ribbon and watering the Tulsi plant and the distribution of nutritional kits among women was started symbolically by gifting them to a dozen women. The program was presided over by MP Mandal representative Rajaram Prajapati and conducted by Rajiv Kumar.

Before the free distribution of nutrition kits, the health checkup of pregnant women and post-delivery women was done by specialist doctors one by one. Through a power point presentation, all the 1200 selected beneficiary women were made aware of health by giving them information about various public welfare and health related schemes provided by the central government.

Mainly CCL PO Ajay Kumar, Lok Sabha MP representative Satyendra Narayan Singh, Ramgarh district MP representative Rajiv Jaiswal, BDO Vivek Kumar, P/UNIL MP representative Radheshyam Agarwal, CCL MP representative Ranjit Pandey, were present on the occasion.

Lok Sabha MP media representative Ranjan Chaudhary, Barkagaon Assembly MP representative Poonam Sahu, Barkagaon Assembly MP media representative Umesh Dangl, divisional representative cum Patratu BJP Mandal President Rajaram Prajapati, Bhurkunda BJP Mandal President Satish Mohan Mishra, Mandu Assembly Constituency's co-MP representative Purnushottam

सीसीएल द्वारा यूथ फाउंडेशन के सह स्वास्थ्य मेला सह पोषण किट वितरण मेला का किया गया आयोजन

सांसद मनीष जायसवाल के पहल पर 1200 महिलाओं को दी गई पोषण किट



मनीष कुमार,कल्याण खान

सीसीएल द्वारा यूथ फाउंडेशन के सह स्वास्थ्य मेला सह पोषण किट वितरण मेला का आयोजन किया गया। सांसद मनीष जायसवाल ने अपने संसदीय क्षेत्र में 1200 महिलाओं को पोषण किट वितरण मेला का आयोजन किया। यह कार्यक्रम सीसीएल के सह आयोजित था।

सांसद मनीष जायसवाल ने अपने संसदीय क्षेत्र में 1200 महिलाओं को पोषण किट वितरण मेला का आयोजन किया। यह कार्यक्रम सीसीएल के सह आयोजित था।

आयोजन का आयोजन मनीष जायसवाल ने अपने संसदीय क्षेत्र में 1200 महिलाओं को पोषण किट वितरण मेला का आयोजन किया। यह कार्यक्रम सीसीएल के सह आयोजित था।

मेला सह पोषण किट वितरण मेला का आयोजन किया गया। सांसद मनीष जायसवाल ने अपने संसदीय क्षेत्र में 1200 महिलाओं को पोषण किट वितरण मेला का आयोजन किया। यह कार्यक्रम सीसीएल के सह आयोजित था।

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हजारीबाग सांसद मनीष जायसवाल के पहल पर 1200 महिलाओं को दी गई पोषण किट



सांसद मनीष जायसवाल ने अपने संसदीय क्षेत्र में 1200 महिलाओं को पोषण किट वितरण मेला का आयोजन किया। यह कार्यक्रम सीसीएल के सह आयोजित था।

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सांसद की पहल पर पतरातु में 1200 महिलाओं को मिली पोषण किट



से फ्रीता काटकर और तुलसी पोथे में जल अर्पित कर की गई। इस अवसर पर बड़कागांव विधायक रोशन लाल चौधरी ने भी अपने विचार व्यक्त किए और इसे क्षेत्र की महिलाओं के

संवाददाता लोकसभा क्षेत्र के पतरातु स्थित श्रम कल्याण केंद्र में एक भव्य कार्यक्रम के दौरान आयोजित स्वास्थ्य मेला सह निःशुल्क पोषण किट वितरण शिविर में सांसद मनीष जायसवाल की पहल पर 1200 गर्भवती और धात्री महिलाओं को पोषण किट वितरित की गई। कार्यक्रम में विशेष रूप से उपस्थित होकर सांसद मनीष जायसवाल ने कहा कि उनका उद्देश्य है कि हजारीबाग लोकसभा क्षेत्र स्वस्थ बच्चों की किलकारी से गुंजे। उन्होंने कहा कि माताओं का स्वास्थ्य सशक्त राष्ट्र की नींव है और इसी सोच के साथ यह पहल की गई है। स्थानीय विधायक और अन्य अतिथियों द्वारा पारंपरिक ढंग

सांसद मनीष जायसवाल की पहल पर 1200 महिलाओं को दी गई पोषण किट



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हजारीबाग @आवाज

सांसद की पहल पर 1200 महिलाओं को मिला पोषण किट, पतरातु में स्वस्थ मेला सह निःशुल्क पोषण किट वितरण शिविर व आयोजित

स्वस्थ मां व बच्चों के लिए खान-पान, रहन-सहन, विचार-विमर्श व देखरेख बेहद जरूरी: मनीष

हजारीबाग : आने वाला भविष्य स्वस्थ हो, इसके लिए हम सभी की पहल पर 1200 महिलाओं को पोषण किट वितरण मेला का आयोजन किया गया। सांसद मनीष जायसवाल ने अपने संसदीय क्षेत्र में 1200 महिलाओं को पोषण किट वितरण मेला का आयोजन किया। यह कार्यक्रम सीसीएल के सह आयोजित था।

हजारीबाग

उत्कल मेला

हजारीबाग सांसद मनीष जायसवाल के पहल पर 1200 महिलाओं को दी गई पोषण किट



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हजारीबाग

स्वस्थ बच्चों की किलकारी से गुंजायमान हो हजारीबाग लोकसभा, यही है प्रयास हमारा : मनीष जायसवाल



हजारीबाग : आने वाला भविष्य स्वस्थ हो, इसके लिए हम सभी की पहल पर 1200 महिलाओं को पोषण किट वितरण मेला का आयोजन किया गया। सांसद मनीष जायसवाल ने अपने संसदीय क्षेत्र में 1200 महिलाओं को पोषण किट वितरण मेला का आयोजन किया। यह कार्यक्रम सीसीएल के सह आयोजित था।



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सांसद मनीष जायसवाल की पहल पर 1200 महिलाओं को दी गई पोषण किट

**हजारीबाग :** आने वाला भविष्य स्वस्थ हो, इसके लिए हम कार्पो गंभीर हैं और इसके लिए हर गर्भवती मां व धार्मि माता के साथ-साथ बच्चों के खानपान, रहन-सहन, विचार-विमर्श व अच्छे से उन्हें देख-रेख करने की जरूरत है। जिसको लेकर गर्भवती व धार्मि माता के बीच पोषण किट का वितरण किया जा रहा है। जब हमारे बच्चे स्वस्थ होंगे, मां स्वस्थ होगी, तभी हमारा राष्ट्र स्वस्थ होगा। उक्त बातें हजारीबाग लोकसभा क्षेत्र के सांसद मनीष जायसवाल ने अपने संबोधन में पतरातु ग्राम कल्याण केंद्र में आयोजित सीसीएल के द्वारा युव इंडिया फाउंडेशन के सहयोग से आयोजित स्वास्थ्य मेला सह निःशुल्क पोषण किट वितरण अभियान कार्यक्रम में कहा। आगे उन्होंने बताया कि हम सभी को मिलकर कुपोषण से लड़ना होगा और उसे दूर भगाना होगा। यह हम सब की जिम्मेवारी है और जब स्वस्थ बच्चों की किलकारी पूरे देश में गुंजेगी तभी हमारा संपूर्ण राष्ट्र मजबूत होगा। सांसद मनीष जायसवाल ने कहा कि देश के प्रधानमंत्री नरेंद्र मोदी से प्रेरित होकर मैंने एक पहल किया और उसी का नतीजा है कि सीसीएल ने अपने सीएसआर मद के तहत इस कैप का आयोजन किया। उन्होंने यह भी कहा कि यह तो महज एक शुरुआत है हम अपने लोकसभा क्षेत्र के विभिन्न क्षेत्रों में ऐसे कार्यक्रम का आयोजन कराने हेतु कृतसंकल्पित हैं। बड़कागांव विधानसभा क्षेत्र के लाल चौधरी ने कहा कि हजारीबाग सांसद मनीष जायसवाल के द्वारा किए गए पहल का परिणाम ही है कि बड़कागांव विधानसभा क्षेत्र की 1200 बहनों को पोषण किट का मिल पाया। भाजपा प्रदेश उपाध्यक्ष राकेश प्रसाद ने



कहा कि गर्भवती माता व धार्मि माता को एक संतुलित पोषण की आवश्यकता होती है जिसके लिए हजारीबाग सांसद मनीष जायसवाल ने अनेकों पहल की है, जिसकी जिवनी भी प्रशंसा की जाए वह कम है। इसके पूर्व डॉ नितीश कुमार द्वारा पोषण किट में उपलब्ध सभी सामग्री की उपयोगिता और सेवन के तरीके विस्तार से बताया गए। इस कार्यक्रम का आयोजन सांसद मनीष जायसवाल के पहल पर सीसीएल द्वारा युव ऑफ इंडिया फाउंडेशन के सहयोग से किया गया। जिसकी शुरुआत सांसद मनीष जायसवाल सहित अन्य अतिथियों द्वारा फीता काटकर एवं तुलसी पौधा में पानी देकर किया गया तथा महिलाओं के बीच पोषण किट वितरण की शुरुआत सांकेतिक रूप से एक दर्जन महिलाओं को भेंटकर किया गया। कार्यक्रम की अध्यक्षता सांसद मण्डल प्रतिनिधि राजाराम प्रजापति व संवर्धन राजीव कुमार द्वारा किया गया। निःशुल्क पोषण किट वितरण अभियान से पूर्व प्रेम्सेसी महिलाओं और डेलिवरी के बाद की महिलाओं का स्वास्थ्य जांच विशेषज्ञ चिकित्सकों द्वारा वारी-वारी से किया गया। पॉवर पॉइंट प्रेजेंटेशन के माध्यम से चर्चित सभी 1200 लाभार्थी महिलाओं को केंद्र सरकार द्वारा मिलने वाले



**Manish Jaiswal**  
24 07 '24  
"सही पोषण, टेरा रोशन" — स्वस्थ भारत के निर्माण की ओर एक और कदम। हमारे प्यारी प्रधनमंत्री माननीय श्री Narendra Modi जी के "पोषण अयाम" स्वस्थ जीवन धारण के संकल्प को साकार करने की दिशा में आज एक छोटा सा प्रयास सफल हुआ। श्रम कल्याण केंद्र, पतरातु सभागार में सीसीएल के सीएसआर के अंतर्गत युव इंडिया फाउंडेशन के सहयोग से "स्वास्थ्य मेला सह पोषण किट वितरण" कार्यक्रम का शुभ आरंभ किया गया। कार्यक्रम का विधिवत उद्घाटन मैंने बतौर मुख्य अतिथि, और विशिष्ट अतिथियों—बड़कागांव विधानसभा क्षेत्र के लाल चौधरी, भाजपा प्रदेश उपाध्यक्ष श्री राकेश प्रसाद, सीसीएल के वरिष्ठ अधिकारी श्री अजय कुमार तथा अन्य सम्मानित गणमान्यजनों के साथ टीप प्रवर्तन व तुलसी पौधारोपण के साथ किया। इस स्वास्थ्य मेले में 1200 घरानित ट्रीटियों की स्वास्थ्य जांच कराई गई और उन्हें विशेष पोषण किट भेंट की गई। कार्यक्रम का उद्देश्य है—गर्भवती महिलाओं, स्तनपान कराने वाली माताओं और 6 से 36 माह तक के बच्चों को कुपोषण से बचाना, ताकि स्वस्थ मां और स्वस्थ शिशु के हमारे संकल्प को बल मिल सके। यह तो केवल एक शुरुआत है। क्षेत्र में कार्यरत अन्य कंपनियों के सहयोग से हम आगे भी ऐसे जनकल्याणकारी कार्यों को निरंतर जारी रखेंगे।

# सांसद की पहल पर 1200 महिलाओं को दी गई पोषण किट

**समुद्र संवाददाता**  
हजारीबाग : आने वाला भविष्य स्वस्थ हो, इसके लिए हम कार्पो गंभीर हैं और इसके लिए हर गर्भवती मां व धार्मि माता के साथ-साथ बच्चों के खानपान, रहन-सहन, विचार-विमर्श व अच्छे से उन्हें देख-रेख करने की जरूरत है। जिसको लेकर गर्भवती व धार्मि माता के बीच पोषण किट का वितरण किया जा रहा है। जब हमारे बच्चे स्वस्थ होंगे, मां स्वस्थ होगी, तभी हमारा राष्ट्र स्वस्थ होगा। उक्त बातें हजारीबाग लोकसभा क्षेत्र के सांसद मनीष जायसवाल ने अपने संबोधन में पतरातु ग्राम कल्याण केंद्र में आयोजित सीसीएल के द्वारा युव इंडिया फाउंडेशन के सहयोग से आयोजित स्वास्थ्य मेला सह निःशुल्क पोषण किट वितरण अभियान कार्यक्रम में कहा। आगे उन्होंने बताया कि हम सभी को मिलकर कुपोषण से लड़ना होगा और उसे दूर भगाना होगा। यह हम सब की जिम्मेवारी है और जब स्वस्थ बच्चों की किलकारी पूरे देश में गुंजेगी तभी हमारा संपूर्ण राष्ट्र मजबूत होगा। सांसद मनीष जायसवाल ने कहा कि देश के प्रधानमंत्री नरेंद्र मोदी से प्रेरित होकर मैंने एक पहल किया और उसी का नतीजा है कि सीसीएल ने अपने सीएसआर मद के तहत इस कैप का आयोजन किया। उन्होंने यह भी कहा कि यह तो महज एक शुरुआत है हम अपने लोकसभा क्षेत्र के विभिन्न क्षेत्रों में ऐसे कार्यक्रम का आयोजन कराने हेतु कृतसंकल्पित हैं। बड़कागांव विधानसभा क्षेत्र के लाल चौधरी ने कहा कि हजारीबाग सांसद मनीष जायसवाल के द्वारा किए गए पहल का परिणाम ही है कि बड़कागांव विधानसभा क्षेत्र की 1200 बहनों को पोषण किट का मिल पाया। भाजपा प्रदेश उपाध्यक्ष राकेश प्रसाद ने

# सांसद के पहल पर 1200 महिलाओं को दी पोषण किट स्वस्थ बच्चों की किलकारी से गुंजायमान हो लोकसभा : मनीष जायसवाल

**पंच संवाददाता**  
हजारीबाग : आने वाला भविष्य स्वस्थ हो, इसके लिए हम कार्पो गंभीर हैं और इसके लिए हर गर्भवती मां व धार्मि माता के साथ-साथ बच्चों के खानपान, रहन-सहन, विचार-विमर्श व अच्छे से उन्हें देख-रेख करने की जरूरत है। जिसको लेकर गर्भवती व धार्मि माता के बीच पोषण किट का वितरण किया जा रहा है। जब हमारे बच्चे स्वस्थ होंगे, मां स्वस्थ होगी, तभी हमारा राष्ट्र स्वस्थ होगा। उक्त बातें हजारीबाग लोकसभा क्षेत्र के सांसद मनीष जायसवाल ने अपने संबोधन में पतरातु ग्राम कल्याण केंद्र में आयोजित सीसीएल के द्वारा युव इंडिया फाउंडेशन के सहयोग से आयोजित स्वास्थ्य मेला सह निःशुल्क पोषण किट वितरण अभियान कार्यक्रम में कहा। आगे उन्होंने बताया कि हम सभी को मिलकर कुपोषण से लड़ना होगा और उसे दूर भगाना होगा। यह हम सब की जिम्मेवारी है और जब स्वस्थ बच्चों की किलकारी पूरे देश में गुंजेगी तभी हमारा संपूर्ण राष्ट्र मजबूत होगा। सांसद मनीष जायसवाल ने कहा कि देश के प्रधानमंत्री नरेंद्र मोदी से प्रेरित होकर मैंने एक पहल किया और उसी का नतीजा है कि सीसीएल ने अपने सीएसआर मद के तहत इस कैप का आयोजन किया। उन्होंने यह भी कहा कि यह तो महज एक शुरुआत है हम



# Gallery:







