



Sai Samporna

A SMART Study on Nutritional Food, Health and Hygiene

A Project as a Course requirement for Sri Sathya Sai National
Leadership Programme for Self-Transformation

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SSSNLPST-2020-F003, SSSNLPST-2020-F060, SSSNLPST-2020-F063



Sri Sathya Sai Seva Organisations, India

In association

with Sri Sathya Sai Institute of Higher Learning

(Deemed to be University)

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SRI SATHYA SAI
NATIONAL LEADERSHIP PROGRAM FOR SELF TRANSFORMATION
SRI SATHYA SAI SEVA ORGANISATIONS, INDIA
BUILDING LEADERS FOR NATION THROUGH INDIVIDUAL CHARACTER

DEDICATED AT THY LOTUS FEET



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SRI SATHYA SAI NATIONAL LEADERSHIP PROGRAMME FOR SELF TRANSFORMATION

CERTIFICATE

This is to certify that this Project titled “**Sai Sampurna: A SMART Study on Nutritional Food, Health and Hygiene**” completed by the participants for the Sri Sathya Sai National Leadership Program for Self-Transformation batch 2020 from the STATE Odisha, is a bonafide record of the original work done under the supervision of the undersigned as a Course requirement for the completion of the National Leadership Program.

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Place: Odisha

Date: 19th November 2020



DECLARATION

The Project titled “Sai Sampurna: A SMART Study on Nutritional Food, Health and Hygiene” was carried out by the team under the supervision of the State President, the National Team Member, State Youth Coordinator for the certificate programme as a part of the Course requirement for Completion and has not formed the basis for the award of any degree, diploma or any other such title by this or any other University.

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CHAPTER 1 - PROJECT SUMMARY

“As is the food, so is the thought. As is the feeling, so is the experience.”

– Bhagawan Sri Sathya Sai Baba, November 21, 1995.

While Bhagawan himself was a frugal eater, when it came to serving food to others, His attention to details and personal care were exemplary. We have often seen mothers complaining their children not eating homemade food. Also, due to lack of apt resources, mothers fail to feed their children sufficiently nourished food. Also, we hear that there is a sense of inferiority with the choice of food with respect to children living in rural area and that of urban. According to reports of UNICEF, planning and investing in ending malnutrition is one of the most cost-effective steps nutrition programs can take: every \$1 invested in proven nutrition programs offers benefits worth \$16. Odisha, being a constant disaster-stricken state, use of climatic science on available crops based on geographical location of the area, thereby creating a database for the working team to spread awareness on nutritious food would prove essential to the beneficiaries.

“The elementary rules of personal cleanliness are neglected in the name of novelty and neo spiritualism. Bath is given a go by. Oral hygiene is not cared for. Damaging habits are cultivated and tolerated. Unkempt, disheveled, dirty heads and bodies denote unkempt, disheveled intellects and minds.” – Bhagawan Baba – October 16, 1974, P.N

Swami often refers to our body as temple. The count of people who are actually aware of how to treat our body as temple is very low, especially in the rural areas. They get away with the idea of cleanliness, by calling it being raw and self-immuned due to pure environment in rural areas. But in the current scenario, the prevalence of COVID19 has set up an alarm to do away with the current thought process on cleanliness. Making Water, Sanitation, and Hygiene (WASH) nutrition sensitive does not require a paradigm shift. Rather, it requires adherence to WASH behavioural objectives and align programs with the multiple pathways of face-oral transmission relevant to the target population.

Another dimension to this thought is menstrual hygiene Management. Statistics speak that 31.27% of urban girls and 71.42% of rural girls reused pads during menstruation period. We, ladies in cities, are somewhat aware of sanitary napkins and its usage. But in rural areas, even talking about menstrual issues is still a taboo, let alone using sanitary napkins. .



Facilitating SMART (Specific, Measurable, Attainable, Realistic, Timely) methods on Focus Group Discussions (FCD) & Ice Breakers with the adolescent girls to the Working Team would turn out fruitful in investigating their range of experiences.

With Swami's divine blessings and omnipresent supervision, the SSSSO, Odisha has already undertaken the projects like Sarve Santu Niramaya, Sai Premadhaara etc. which addresses woman and child health care & hygiene as a matter of utmost importance. The working team involved with the captioned projects has left no stones unturned in its adept implementation. Project Sai Sampurna will catalyze and support essential planning and design, to smartly channelize available resources for health issues in women and children.

CHAPTER 2 – OBJECTIVES

1. To study various ongoing State projects and provide the working team, a designed and improved set of guidelines for creating health awareness and dietary counselling.
2. To monitor vulnerable groups to ensure successful implementation of social protection mechanisms.
3. Identifying new, less expensive ways to use existing data and to collect new data where needed, thereby ensuring maximum coverage in the era of Sustainable Development Goals (SDG).
4. In the spirit of the SDGs, tracking and reporting the spending and impact on all forms of malnutrition, including stunting, anaemia, and Non-Communicable Diseases (NCDs).
5. Providing framework to the State and District working team in catalyzing implementation of techniques of women empowerment through nutritional sensitization.



CHAPTER 3 – SCOPE

3.1 Within Scope

3.1.1 Study sites and respondents, qualitative and quantitative surveys

To find out the local crop available and endemic diseases in the particular district based on the geographical location of Odisha. The surveys included two sets of investigation through collection of bulk information using Google forms and telephonic conversations with respective grass root level Sai Sevaks, District Youth Coordinators and Samiti Youth Coordinators.

3.1.2 Study of existing documentation to understand the current state, gaps and challenges of ongoing projects

Few rounds of down line discussions with Sai Gram-Sevaks, state health workers were carried out over telephone and meetings through Video Conferencing. The surveys helped us to quantify or identify troubleshoots, and assisted in strategise and formulate improvements.

3.1.3 An exploratory study on problem identification among women, girls & children and solution designing

It included discussions with Government Institutions like department of Agriculture, Forest, Medicine and independent bodies like nutritionists, public health officers, doctors and researchers over telephone/webinar to assist us in finding the shortcomings to overcome.

3.1.4 Elucidating the linkages between women's empowerment in agriculture, food and nutrition index

Investigated knowledge and perceptions of women empowerment from the perspective of mother & child and elucidated linkages between women's empowerment and household nutrition in relation to agriculture, horticulture and livestock.



3.2 Out of Scope

3.2.1 Field visits to SSSVIP Villages and One to One conversation with beneficiaries and local people

Due to travel restrictions under COVID guidelines, our team could not personally travel to any of the villages. Had there not been such an immobile situation, we could have easily planned out physical conversation with beneficiaries in selected model SSSVIP Villages to have a better understanding of the ground reality and implementation of SSSSO Programmes.

3.2.2 Micro plan preparation and implementation of Primary Research in a small population

Having the suggested guidelines and recommendations prepared under requisite timelines under Project Sai Sampurna, we, with a little more coordination and commitment from our team members, could have easily implemented the same for test phase in any of the Model SSSVIP Village with due permission of the State Authorities.

3.2.3 Virtual Public Display(VPD) / Demonstration of recommended guidelines of Sai Sampurna at selected Model villages

On successful implementation of the Micro plan preparation and implementation of Primary Research, VPD or demonstration of recommendations could have been done through flash mobile vehicles in these villages or circulation of test videos through selected caretakers or social media.

CHAPTER 4 – ROLES & RESPONSIBILITIES

In order to achieve the objectives enlisted above, we zeroed on breakdown of work structure into three major sub divisions/ stage which were mutually inclusive in nature. The time coverage is from 1st September, 2020 to 12th October, 2020. They were:

Table 1: Breakdown of work structure into three major sub divisions/ stages

Sl. No	Stages involved	Responsibility to be taken by
1.	Admin, Data Arrangement & Compilation, Data Resources	Sister Surekha Parhi and Sushree Das (SSSNLPST-2020-F060 and SYC-Ladies, SSSSO,Odisha)
2.	Data Analysis & Interpretation, Audio Visual Communication	Sister Swati Pattnaik (SSSNLPST-2020-F063)
3.	Literature Study, Report Writing & Presentation	Sister Anita Vidyulata Kottapalli (SSSNLPST-2020-F003)

CHAPTER 5 – PROJECT FLOW

5.1 Phase 1: Conception & Initiation

Malnutrition: an invisible emergency

Good nutrition is the bedrock of child survival, health and development. Well-nourished children are better able to grow and learn, to participate in and contribute to their communities, and to be resilient in the face of disease, disasters, and other global crises.

Malnutrition has a million faces:

- A child who never reaches full height due to poverty, poor sanitation, lack of breastfeeding and limited access to nutritious foods
- A young woman who becomes anaemic during her pregnancy and gives birth to an underweight baby who later faces developmental delays
- A child rendered blind by vitamin A deficiency



- A child who becomes obese through overconsumption of low quality food
- A desperately thin and wasted child, at imminent risk of death

Vulnerability!

Vulnerability is the degree to which a population, individual or organization is unable to anticipate, cope with, resist and recover from the impacts of disasters. Environmental health in emergencies and disasters: a practical guide. (WHO, 2002).

Who are vulnerable?

Children, pregnant women, elderly people, malnourished people, and people who are ill or immune-compromised, are particularly vulnerable when a disaster strikes, and take a relatively high share of the disease burden associated with emergencies. Poverty – and its common consequences such as malnutrition, homelessness, poor housing and destitution – is a major contributor to vulnerability.

Child marriage and women’s reproductive health management also influence child mortality patterns. While child marriage rates are decreasing, each year about 15 million girls are married before the age of 18.46, these girls represent a highly vulnerable group: They are denied their childhood, face limited opportunities for education and often begin childbearing too early. Girls in the poorest 20 %of the population, as well as those living in rural areas, face the greatest risks. So in every 20 minutes a mother dying due to pregnancy or childbirth related cause. All women need access to antenatal care in pregnancy, skilled care during childbirth, and care and support in the weeks after childbirth.

Menstruation: Still a taboo?

- 71% adolescent girls in India remain unaware of menstruation till menarche.
- In India adolescents and young people aged 10-19 years, account for nearly one quarter of the total population. They deserve much needed attention as they hold the key to breaking entrenched cycles of poverty, inequity and deprivation.
- Adolescence provides an opportunity to correct nutritional deficiencies that may have occurred in early life and to catch-up on growth, and to establish good dietary behaviours.

5.2 Phase 2: Definition & Planning

Poor nutrition is more common among rural areas and large families with uneducated or unskilled parents from lower-income households. With changing diets and physical activity levels, overweight and obesity are also emerging problems, particularly among urban



residents and wealthier households. The consumption of processed foods high in fat and sugar is rising, and adolescents and adults are becoming increasingly sedentary. Overweight and obesity in adolescent girls is associated with obesity in adult women, which increases the risk of diabetes, hypertension and infant overweight and obesity.

Nutrition for sustainable development

Good nutrition lays the foundation for healthy, thriving and productive communities and nations. Well-nourished children are healthier, more resistant to disease and crises, and perform better in school. As they grow, they are better able to participate in and contribute to their communities. The benefits of good nutrition thus carry across generations and act as the “glue” binding together and supporting various facets of a nation’s development.

Now more than ever, there is global recognition that good nutrition is the key to sustainable development. Specifically, Goal 2 of the 2015 Sustainable Development Goals (SDGs) aims to “end hunger, achieve food security and improved nutrition, and promote sustainable agriculture”.

But good nutrition is more than just ending hunger: it is also vital to achieving many SDG targets, including ending poverty, achieving gender equality, ensuring healthy lives, promoting lifelong learning, improving economic growth, building inclusive societies, and ensuring sustainable consumption.

To give just one example: breastfeeding prevents death, childhood illness and non-communicable diseases, while supporting brain development and protecting maternal health. It is also environmentally sustainable and reduces inequalities by reaching even those with limited access to health services.

5.3 Phase 3 & Phase 4: Launch/Execution & Performance/Control

To dispel darkness, a ray of light is enough. SSSO, Odisha is maintaining 9 permanent health seva Centers in state providing health seva at primary level to nearly 1,12,000 persons per annum, health seva to nearly 1,35,000 persons in health camps per annum and secondary and tertiary health seva through backup service of specialty hospitals and Sri Sathya Sai Telemedicine center Bhubaneswar . It has been providing mother and child care in 389 SSVIP villages of state through project Sai Premdhara which has been blessed by Swami. There are approximately 32 Sai districts at Odisha. We, for Project Sai



Sampoorna, identified 10 districts as our survey sites for research (Appendix 3, Figure 1; Table 2).

Table 2: Activities undertaken by SSSSO-Odisha

Sl. No	Name of the District	No. of SSSVIP Villages	Name of Model Villages	Existing Ingredients structure of Sai Protein for 5 packets	Activities Undertaken/ Issues faced
1	Bhadrak	43	Binayakpur Kashipur Sadeipada Sadeipur	ଚାଉଳ (Rice)- ୧କିଲୋ (1kg) ନାଲିଆବୁଟ (Bengal Gram Whole)- ୧କିଲୋ (1kg) ମାଣ୍ଡିଆ (Finger Millet)- ୧କିଲୋ (1kg) ଚିକ୍ନାବାଦାମ (Peanuts)- ୧କିଲୋ (1kg) ଗହମ (Wheat grain)- ୧କିଲୋ (1kg) ମୁଗ (Moong)- ୨୫୦ଗ୍ରାମ (250gm)	<ul style="list-style-type: none"> • Distribution of AmrutKalash. • Distribution of Sai Protein. • Cyclone Relief Centre has been converted into Tailoring Training Centre. • Construction of Public Bathrooms for Women in every SSSVIP village. • Donation of Cows to promote self-empowerment by way of selling dairy products. • Digital Connectivity to promote digital reach to beneficiaries.
2.	Mayurbhanj				<ul style="list-style-type: none"> • Excellent initiative of kitchen/ NutriGarden successfully implemented. • Distribution of AmrutKalash. • Establishment of Tailoring Centre • Identified pregnant women under Sai Premadhara, ensured communication through phone. • Distribution of Sai Protein to pregnant woman. • Promoted Self help groups for making ropes etc. • Unavailability of past records on the Seva activities.
3.	Kalahandi	4	Goudsaragigud i		<ul style="list-style-type: none"> • Identified 4 pregnant women under Sai Premadhara, ensured every month visit. • Distribution of AmrutKalash. • Distribution of Sai Protein to pregnant woman. • Successful initiative for AADHAR Card formalities of 32 women & children. • Aided tailor training for women. • Connectivity of roads enabling smooth travel to nearby hospital for delivery/ regular check-up. • Unavailability of past records on the Seva activities.



4.	Bargarh			<ul style="list-style-type: none"> Identified 7 beneficiaries under Self Help Groups. Adopted a child in SSSVIP Village for supported the nutritional needs of the child. Lack of awareness of ingredients of Sai Protein, hence not being distributed. However, volunteer for the same has been identified.
5.	Nuapada			<ul style="list-style-type: none"> Distribution of Sai Protein. Distribution of AmrutKalash. Promotion of Self-Help Groups for preparation of Turmeric, organic plates, and eataries etc.
6.	Bhubaneswar	2	Bhagabatipur	<ul style="list-style-type: none"> Online SarveSantuNiramaya webinars. Distribution of AmrutKalash. Successful programme conducted under RashtriyaBalSwasthyaKaryakram in association with the Government.
7.	Nabarangpur		Bangapalli	<ul style="list-style-type: none"> Distribution of Sai Protein. Online SarveSantuNiramaya webinar- beneficiary based. Distribution of AmrutKalash.
8.	Jajpur			<ul style="list-style-type: none"> Difficulty in reaching the non-reachable areas.
9.	Balasore	2	Baghmara Jagai	<ul style="list-style-type: none"> Distribution of Sai Protein. Distribution of AmrutKalash. Difficulty in convincing beneficiaries for Sai protein intake.
10.	Cuttack	1	Bidyapur	<ul style="list-style-type: none"> Online SarveSantuNiramaya webinars. Distribution of Sai Protein. Distribution of AmrutKalash. Promotion of Self-Help Groups for preparation of Incense Sticks, Phenyl etc.

Where we stand together?

India experiences a malnutrition burden among its under-five population. As of 2015, the national prevalence of under-five overweight is 2.4%, which has increased slightly from 1.9% in 2006. The national prevalence of under-five stunting is 37.9%, which is greater than the developing country average of 25%. India's under-five wasting prevalence of 20.8% is also greater than the developing country average of 8.9%.



In India, 54.9% of infants under 6 months are exclusively breastfed. There is insufficient data on low birth weight. India's adult population also face a malnutrition burden. 51.4% of women of reproductive age have anaemia, and 9.1% of adult men have diabetes, compared to 8.3% of women. Meanwhile, 5.1% of women and 2.7% of men have obesity.

According to reports, Odisha has made reasonable strides in improving maternal and child health and nutrition over the last decade, between 2005-06 and 2015-16 (IIPS, 2008; IIPS&ICF, 2017), as reflected by the three anthropometric indicators of child malnourishment, namely, stunting (too short for their age), wasting (too thin for their height), underweight (thin for their age) as also anaemia. Similarly, malnourishment among women in reproductive age group (15-49 yrs), measured using the Body Mass Index (BMI) and prevalence of anaemia shows progress over the last decade (Figure 5, 6, 7, 8).

Access to Water and Sanitation in Rural Odisha Access to safe drinking water, clean and hygienic environment have a positive influence on nutrition status. Considering the importance of non-food factors such as safe drinking water, sanitation and hygienic environment in the absorption of food in human system and therefore in the nutrition status, it is necessary that attention is paid to improve the access of these crucial household amenities in rural Odisha. To sum up, despite improvements in nutritional status over the last decade, the extent of malnutrition among children and women continue to remain huge in rural Odisha; the average consumption of calorie, protein and number of micro nutrients are below the recommended daily allowance; and the consumption of pulses by an average adult is just one fourth of the recommended dietary intake. It is in this context, the promotion of Farming System for Nutrition approach becomes important as a method of enhancing household production of a diversified basket of nutritious food leading to diversified diet of farm families. The observed spatial pattern in nutritional problems can help in prioritising interventions aimed at addressing the problem of malnutrition.

5.4 Phase 5: Project Closure & Evaluation

To sum up, an analysis of the nutritional and agricultural profile of Odisha indicates that even while food grains dominate the cropping scenario, there has been a decline in production of small millets, ragi as also pulses. As paddy occupies nearly half the gross cropped area, promoting pulses and vegetables in paddy bunds and fallows (without altering



the basic cropping pattern), could be an important way to increase pulse and vegetable production while also diversify crop production.

Farming System for Nutrition (FSN) comprises combination measures including advanced crop production practices, biofortification, promotion of kitchen gardens of fruits and vegetables, livestock and poultry development, and setting up of small-scale fisheries, combined with nutrition, health and hygiene awareness. The approach calls for the promotion of location-specific farming systems that integrate arable farming, horticulture, backyard farming and animal farming to sustainably improve household availability of nutritious food while also mitigating risk and conserving natural resources.

On the outset, the major aspect of evaluation of this project is our own self transformation. Each member of the team has undergone some transformation within themselves which have been compiled together and offered at the lotus feet of beloved Bhagwan in this project

CHAPTER 6– RESOURCES AND TOOLS USED

The COVID-19 pandemic has changed education, meetings and communication forever. Due to COVID19 pandemic, virtual and digital resources have been used for completion of the project. Those are like

- i)** Use of MS Teams, Google Meet, Goto meeting
- ii)** Use of To do lists, Time tracer, MS office, Google form, Google Drive
- iii)** Use of Canva, Filmora, YouTube, Instagram, Facebook

Finance: No finance has been included for the study.

Manpower: Project team members, NLP participants

State office bearers; SSSSO, Odisha, District and Samithi office bearers; SSSSO Odisha, Convenors; SSSSO, Odisha, Doctors, Nutritionist, Veterinarian, Horticulturalist, Odisha IT Team.



CHAPTER 7 – PROJECT RECOMMENDATIONS

7.1 Recommendations implemented in the current project

7.1.1 Sai Protein

Swami by His immense benevolence has showered on us this wonderful divine recipe. Due to lack of availability of raw materials and costly affairs, it's difficult to maintain the standardise protocol for each district of Odisha.

What we suggest:

This recipe makes about 9Kg of powder.

Serving size: 3 teaspoons (45gms) per cup

Table 3: Standard ingredients of Sai Protein- Team Sai Sampurna recommendation

Sr. No	Ingredients	Quantity
1.	Flattened Rice/Wheat/ Rye/ Barley	3.5 Kg
2.	Green Grams/ Ragi (Millet)	2 Kg
3.	Sugar/ Jaggery	2 Kg
4.	Bengal Grams/Ground Nuts/ Soyabeen/Til	1.3 Kg
5.	Cardamom/ Flax Seed/ Ginger / Coconut Powder	100 Gm
6.	Vibhuti	100 Gm

Children and adults can have this mix with milk and start their day. This powder mix can be made and stored for about 2 months. *Swami says that 2 teaspoons of this with one glass of warm milk, in the morning and evening is very good for growing children.* All parents should take this excellent beverage themselves and give it to their children too.

Health benefits:

- The combination of cereals and pulses ensures the body gets the right protein profile.
- This health mix powder is a source of protein, dietary fibre, iron and B Vitamins.



- 100% natural, this mix is made with whole grains, thus retaining all the goodness of nature's bounty.

The dietary fibre keeps the digestive system happy, and the iron from the natural sources is good for the blood, brain, muscles and immune system.

7.1.2 G2G talk- a social media platform where women can share their problems with women socio-medical expert

What we understood is, in the era of digitisation, access to social media has reached its peak. However, there are still a lot of villages in interiors of Odisha where digital connectivity is still an unknown variant.

What we suggest:

1. We have examples of model village like Binayakpada in Bhadrak where the organisation made sure about digital connectivity. Where such seva is not possible, Sai Volunteers should make sure that the digital information reaches the beneficiary through a video/ message.
2. Women & Girls, often find it difficult to talk about a lot of problems, even the basic ones, openly to doctors. They shy away speaking even to female doctors' face to face.

G2G talk shall provide for being an ice breaker for taboo topics as well as basic women centric issues. The State shall identify doctors/ socio medical expert to be a part of the social media platform by name G2G talk in weekly intervals and address the issues maintaining the privacy and anonymity of the seeker. The G2G talk is suggested to be a vital part of Mahila Wing in the main website of the State.

7.1.3 The Farming System for Nutrition approach can be seen as encompassing 8 distinct domains. At its core, the approach calls for improving agricultural production diversity by incorporating an integrated farming system involving crops, livestock and aquaculture in the field or in the homestead. Other core domains that can directly improve the local availability of deficient nutrients include agricultural production, biofortification and agricultural value chains. Indirect or non-core domains that supplement the food related processes, include nutrition-education and women's empowerment, sanitation, hygiene and safe drinking water and natural resource management. **Biofortification** is the process by which the nutritional quality of food crops is improved through agronomic practices, conventional plant breeding,



or modern biotechnology. Biofortification differs from conventional fortification in that biofortification aims to increase nutrient levels in crops during plant growth rather than through manual means during processing of the crops.

What we suggest:

1. Encouraging women at SSSVIP Villages for NutriGarden and farming activities such as

Table 4 List of business arenas though farming- Perspective towards Women Empowerment

Ways to be Atmanirvalshil	
Apiculture	https://drive.google.com/file/d/10ohaKcXsrAvfAk3i7_UfEvf6eOsPRvwK/view?usp=sharing
Bee keeping	https://drive.google.com/file/d/10-1Nk24ZN1rn2InzKgwvMHYwOYLKTSmW/view?usp=sharing
Mushroom cultivation	https://drive.google.com/file/d/1v7WJjnHN3q0cZrqCJhQSLNBAM3d2Uj8m/view?usp=sharing
Discussion with a mushroom farmer	https://drive.google.com/file/d/1xOqp7QbHlcs8mIh20U6QvdzjNYjGx5u7/view?usp=sharing
Mushroom farming in details	https://drive.google.com/file/d/1I-0ATRYuJzcPGuVxsZsS2GSFPBJsyleF/view?usp=sharing
Nutrigarden	https://drive.google.com/file/d/1KFuHv7Rg76-wIVmCskq_2ucKmhZpznI/view?usp=sharing
How to prepare homemade cocopeat	https://drive.google.com/file/d/1i0T1fwZJP8EYUL9KkqozQaZDP4fYf2JX/view?usp=sharing
Kitchen garden	https://drive.google.com/file/d/1Au7N5JWEHF1NTPCBaa5kJoknm1sw7SA/view?usp=sharing
How to make compost from kitchen waste	https://drive.google.com/file/d/1fDYL7fTlepWPQrF2rh7G-9f7cBWnUqgs/view?usp=sharing
Soil preparation	https://drive.google.com/file/d/1aQqM_zRu0QHS11lq7RaB8M994-gUYdx6/view?usp=sharing
Odisha farmer's tryst with organic farming #successfulstories	https://drive.google.com/file/d/1Au0pY3yEu3Ba6AXwcMu6Pc4CNimGJa2y/view?usp=sharing

2. Supporting them in set up of small Tiffin stalls at their premises, the recipes including nutritional content (See Table 8, 9)

7.1.3.1 An organic solution- Nutri-Garden at backyard and school premises, community level health awareness

NutriGarden:-The main purpose of a nutri garden is to provide the family with fresh vegetables rich in nutrients and energy on a daily basis. A well laid out Nutri-Garden helps to meet the entire requirements of fruits and vegetables for a family for the entire year. It is a low cost sustainable approach for reducing malnutrition, increasing awareness of vegetable production, increasing working hours and achieving food, nutrition and economic security. Based on the demand specific training for NutriGarden shall be promoted in school, Balvikash and adopted villages.



Guidelines to be followed

https://www.mhrd.gov.in/sites/upload_files/mhrd/files/SNG_Guidelines_0.pdf

What Can We Do?

Supply of green leafy vegetables and perennials: Nutrient dense plants, comprising of minimum one tree (perennial) and three green leafy vegetable (GLV) will be supplied to the households in adopted villages.

Method – 1:

Supply of one (1) perennial fruit tree and three (3) leafy vegetables for each household in the village.

If enough land is available with the households, there would be supply of more than three varieties of other vegetables seeds and perennial fruit tree plants. In this case: More than 5 to 6 varieties of perennial fruit trees/plants will be available in a village.

One variety of perennial fruit plant will be supplied to each of 15% to 20% of HHs in the village, accordingly, all the perennial fruits are accessible to the villagers throughout the year.

They have choice to share their fruits to other households in the village or they can sell the produces to other households at the same village point. Beneficiaries having land more than Half Acre along with sufficient water facility, who are willing to raise the Homestead Garden/Kitchen Garden/Vegetable Garden for selling the growing vegetables at the village point will be selected.

Method – 2: Half acre Model



Figure 1 Crop calendar for nutrition garden

Main aim of the project:

To promote dietary diversification and create women empowerment in adopted villages and by improving the supply chain of vegetables to cities.

Expected outcome:

- Develop a habit among the family members of SHG women to consume vegetables and promoting dietary diversification among the rural community.
- Regularly four to five species of vegetables to be made available at village point throughout the year.
- Enterprise Development by Milk sale, bee-farming, mushroom farming.

7.2 Recommendations parked for future implementation/scale-up

7.2.1 Identifying ex-alumna of SSSIHL and associating them with organizational activities

Many a times, we come across a sad fact that there is lack of youth or sevadal who would carry on the Sai Seva activities, be at ground level or while initiating ideas or while decision making.

Also, during our research we came across a lot of Ex- Students from Parthi, who were Odisha’s stars but were never acknowledged by the Organisation, at local level neither at



State or they themselves were not a part of the Organisation on voluntary basis. The kind of services and discipline, their vision would bring while putting Parthi's experience to their local Seva activities is worth taking an extra effort to bring about an attitude change in regional Sai Youth.

What we suggest:

1. Maintaining a yearly database of students from Odisha in Digital Archives and keeping a track of their exit from School/ University.
2. Keeping in touch with their parents in the meantime.
3. Arrange for Sai Ted Talks with Ex Alumna as speakers on periodic basis where they share their experiences.
4. Involvement of Ex- Alumna in Organisational Activities as Youth Icons and Sai leaders.

7.2.2 Targeting group 3 & pre-sevadal students from root level in shaping them into efficient Sai system.

Often a time, in the organisation focus is on sessions on self-development, spiritual transformation and development skills in playing a pivotal role in bringing about a change in the society in and around. Most of such sessions are focussed on youth and sevadal members.

What we suggest:

1. Transformation need not require any specific age. If minds are rightly shaped from adolescence, the approach towards thinking, distinguishing power is shaped accordingly.
2. The target group, for any transformational activities, be it spiritual or Seva or educational stir, rather than youth, should be shifted to Group-3 Balvikas students and Pre-Sevadal.
3. Suggestions from young minds are mostly overlooked, thereby creating a gap between decision making and its implementation. Also, it creates a thought of being unheard. Opinions, even from the youngest should be welcomed for better understanding of problems and igniting a ray of hope in minds that under Swami's reign, no one goes unheard.



7.2.3 Introduction of NutriGarden as mandated by Government in all schools at Odisha

The instincts in children are unlearned motives. The children manifest in themselves what they see, listen, perceive. Most of the time they spend is at school. So, that is why imparting right education is emphasised as much as education at home.

Education need not be limited to academics but also about lifestyle impact, which in turn would help them nurture the same to their youngsters and also their parents at home.

What we suggest:

1. We have a number of Sri Sathya Sai VidyaJyoti Schools in Odisha in different parts of Odisha. Introduction of the NutriGarden concept at every such school, emphasising on farming at a small level and also pressing importance on nutritional food would encourage fall of increasing malnourishment cases, at least within our geographical reach.
2. Such stories can be a source of inspiration to other parallel schools thereby addressing a socio medical issue would be a lot easier because we are working on the solution, however small, rather than limiting our expectations from the Government Authorities only.
3. Also, gardening improves the all sorts of senses, enhancing cognitive abilities and social skills, even the motor skills.

7.2.4 Digital counseling and smart way of conveying key information through videos, flash videos, vehicle advertisement

Statistics speak that about 90% of the total information transmitted to the brain is visual. Many of times we have found that reading an entire article and all of a sudden realizing that we do not remember anything written in it? We then have to waste time going back to re-read what we've already read before.

Researches show that viewers retain 95% of a video's message compared to 10% when reading the text.

Also, we cannot invite everyone to the speeches on Sai Literature, and other key information with respect to health, nutrition, seva, brainstorming sessions etc, so we can take our Swami's message to them via videos. It builds identity and is great to retain impression.



What we suggest:

1. Display of videos related to food, health (*See: Table 5, 6 & 7*) and hygiene (*See: Table 3*) at health camps
2. Sharing of small good food videos with rural women via WhatsApp through caretakers of the beneficiaries (*See: Table 8 & 9*)
3. Vehicle movement in villages with display pics and video players (*See: Figure 9*)
4. Promotion of e-Vehicle for selling vegetables in nearby market/villages
5. Training and capacity building of farmers for better pre and post-harvest practices for ensuring supply round the year

7.2.5 Bi-monthly home visit with nutritional recipes at the selected AmrutKalash recipient's residence and others

We are one big family, Sai family. And a family that eats together stays together. Our duty doesn't end just by handing over the AmrutKalash hamper to the beneficiaries for their essential needs. They are family too.

What we suggest:

1. Pick one family each of Sai AmrutKalash beneficiary in and around your district for a bimonthly visit. Make them feel own.
2. Pick one ingredient each of Sai Protein and make a unique recipe of its own, and counsel the importance of its consumption, thereby enhancing the reach of Sai Protein.

7.2.6 Identification of local leaders, local youth, local college students to work for development/ talk about taboo topics and encourage amongst villagers to talk about their issues and guiding them to apply scientific advances

No work can be effectively done without the help of the local villagers'/ authorities' involvement. Also, there is a sentiment attached where the villagers' see their local people involved, they have more faith and don't shy away coming forth and speaking out and in turn getting involved in developmental activities.

We have come across many lifetime instances, where Sai Messengers may not reach, but Sai Message reaches.



What we suggest:

1. Every Village, every area has one such person who is the apple of the village's eye, the local hero. Identify such person and his/her group.
2. Take their opinion into consideration keeping Sai values into prime importance and chalk out a plan accordingly.
3. The volunteers will supply vegetable seeds which are selected by community, and also the project will supply the other necessary equipments to raise the Garden.
4. Involve them in all activities in the village by encouraging them as an activity for their own village, and how we are just supporting them.

7.2.7 Self-sufficiency is the key

Mother & Child Health Care is one of the most burning topics in the medicinal society and also our organisation is working towards it by way of its project, Sai Premadhara. What about the roots? The journey from a girl to woman to a mother is way too difficult than it actually appears.

What most of our activities and approach fail to consider is whether the basics are being taken care or not or whether hygiene is being maintained or not. By hygiene, here we mean overall hygiene and menstrual hygiene too.

What we suggest:

1. Under the Project head Sai Swabalambi, the Mahila wing should promote manufacture of low-cost sanitary pads by women at home.
2. This shall encourage use of pads ensuring sufficient menstrual hygiene and also, in turn selling would earn them profit.
3. Such centres could be a place of vocational training centre and also where Mahila wing may promote various other ideas with regards to MHM.



|| Few things to be taken care ||

1. **Most** of our female coordinators, during our research we found, are clueless about the Organisational activities. Inclusion of young, energetic, educated Mahilas in the posts would bring about a revolution both at grassroots level and management level in the Organisation.
2. The posts should not be namesake. SSSSO is more about love and devotion towards Swami.
3. There should be balance between centralisation and decentralisation of authorities with respect to data handling and decision making. SSSSO believes in transparency, so should every team at grass root level.
4. **Mahila Wing** in SSSSO is an embodiment of Women empowerment in itself. The leadership aspect, however, at ground level seemed to be of no existence. What we suggest is every District Mahila Wing should have an independent low scale Mahila project of its own.
5. **Sai Digital Connectivity** is the major highlight of all. Due to the pandemic, most of the programs and sessions are conducted online through certain apps and technologies. What we wanted to understand is when a family is struggling for basic essentials and is dependent on AmrutKalash hampers from the Organisation, it is impossible for them to afford a Smart phone to get benefitted from the online sessions being conducted.
6. Set up of towers or may be giving them a smart phone, each could be a costly affair, however, not impossible. In the meantime, what we suggest is, for every 10 of such families, one Sai youth should be assigned. By assignment we mean, transmission of information through videos and audios to the ultimate beneficiaries.
7. Seva activities at villages could be effort taking and also involves many other issues related to travel, a proper set up for camping etc. Also, with all the love for Swami, when the Seva team arrives at the camp, we have seen that the villagers are at back foot and mostly dependent on Sai volunteers to conduct the Seva activities.
8. **What** we must encourage is, involving them more and training them both by concept and technique. The idea of seva should be ignition of self-sufficiency in them, be it in livelihood or development, and assign a small Sai Volunteer team and move on to next village or next assignment in the same village.



CHAPTER 8 – LESSONS LEARNT

8.1 Collective learning (Project)

Following is an exhaustive list of collective learning of our team:

1. Conceptualize, manage and execute a project of this stature within strict stipulated period of time.
2. Techniques to communicate with different sects of people within and outside the organization to gather information and analyse our findings in due course of our project.
3. Effective and optimum utilization of different project management techniques, like planning our resources, assessment of responsibilities, survey and analysis etc.
4. A clear picture and analysis of our growth as individuals and self-transformation and keeping a track of it.
5. The most important of all was learning how to work in such a diverse team, as all the team members are from different career genres. Also, how to cope up with personal shortcomings and accommodate other team members thought processes for project implementation was a big learning.

8.2 Individual learning (Self Transformation)

Name	Self-Transformation (Learning/Experiences during the Project Lifecycle)
<i>Anita Vidyulata Kottapalli</i>	SSSNLP4ST has been a beautiful journey within. I have been an impulsive and way too straight forward person throughout. I still continue to be the same, but with a difference of being thoughtful before I speak. Also, my attitude towards work has tremendously changed. Also working with the team associated with SSSSO, my general behaviour with co-workers in a team has mellowed down.
<i>Surekha Parhi</i>	For the NLP sessions, I have started JyotiDhyana which helps me to start the day with a positive affirmation. Tried to understand and overcome the conflicts. I learnt to accept all the complex situations and learnt the lessons from it. This led a positive impact on my quality to be a sincere personality. I also willing to transform – to make a choice , to watch what it shows because of it , to choose and rechoose , and , to be responsible for my own choices until I am closer to the right place , the core of being who I am.
<i>Swati Pattnaik</i>	<ul style="list-style-type: none"> • Learned the importance & use of Project Management Tools and SMART Goals for smooth running of project • Use of Mind Mapping Software to manage work stress • Expanded my stress management toolkit by mastering four strategies for coping with stress: avoid, alter, accept and adapt. • Gained knowledge by enquiry more, learning, and studies • Got to know the importance of Interpersonal Communications



CHAPTER 9 – REFERENCES

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- https://www.researchgate.net/profile/Anjali_Dash/publication/332291691_Relates_on_Tribal_Education_and_Health_Evidence_from_Rural_Odisha_India/links/5cac6d264585158cc21a2ce5/Relates-on-Tribal-Education-and-Health-Evidence-from-Rural-Odisha-India.pdf
- <http://59.160.153.188/library/sites/default/files/Farming%20System%20for%20Nutrition%20-%20Report%20Odisha%20July%202018.pdf>
- <https://www.thebetterindia.com/228068/kerala-free-online-farming-classes-whatsapp-teacher-kochi-lockdown-student-gardening-ser106/>
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- <https://www.thebetterindia.com/124608/engineer-self-sustaining-village/>
- <https://www.thebetterindia.com/121139/organic-mushrooms-farming-cheap/>
- <https://www.thebetterindia.com/116014/sangeeta-deol-bee-keeping-mushroom-cultivation-farmer-jalandhar-punjab/>
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- <https://sdrc.co.in/what-percentage-of-women-in-odisha-is-anaemic/>
- <https://www.hindawi.com/journals/ijpr/2015/531485/>
- https://www.teriin.org/projects/nutrition-security/files/Report_IOCL-PHASE-I.pdf
- <https://en.gaonconnection.com/nutri-gardens-improving-dietary-diversity-and-nutritional-status-of-rural-women-in-odisha/>
- <https://www.digitalgreen.org/blogs/combating-malnutrition-through-videos-on-agri-nutrition-gardens/>

CHAPTER 10 – ANNEXURE

10.1 Detailed Project plan

Planning is the most critical step and which is needed to identify desired goals, reduce risks, avoid missed deadlines, and ultimately deliver the result. So we have designed our project as follows

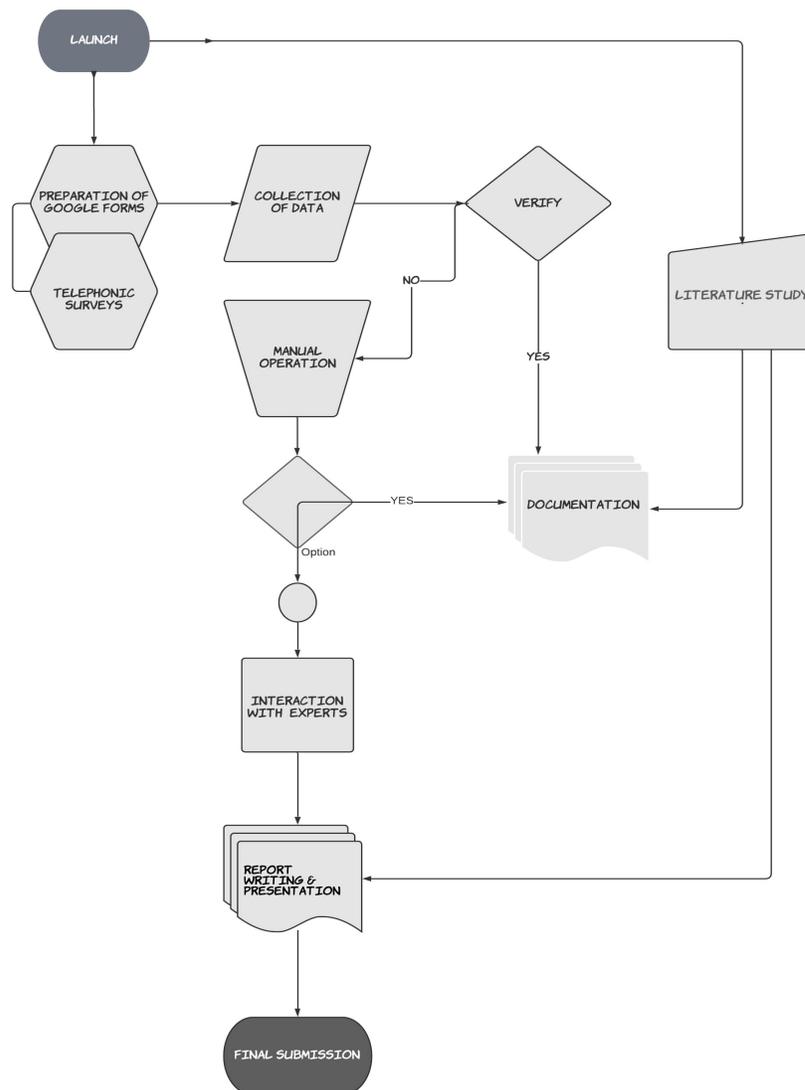


Figure 2 Flowchart of detailed project plan

10.2 Project Tracking Formats Used

Project Tracking Formats ensure a project's progress is tracked and reported properly. To assess project effects and having quick record, we have used Gantt charts, Time trackers and Virtual meetings platforms as mentioned earlier.

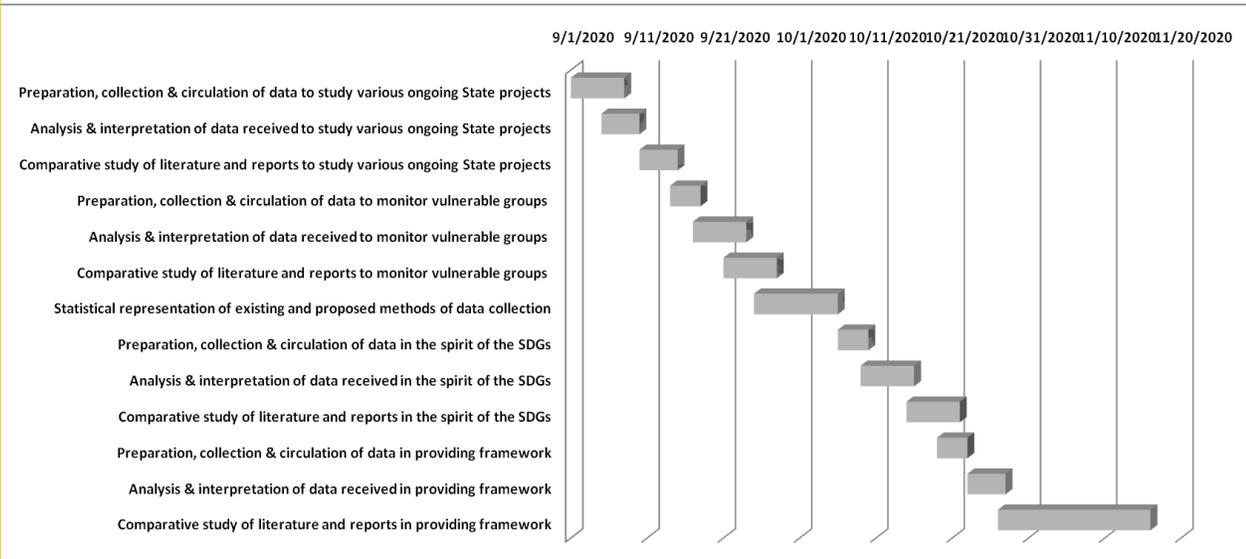


Figure 3 Gantt chart designed during the studies

10.3 Others



Figure 4 SSSSO activities under Sai Premdhara and Sarve Santu Niramaya

Table 5: List of Experts video consultations/ suggestions under project Sai Sampoorna

Highlighted topics	What experts say?
What we are doing in Nabrangpur?	https://drive.google.com/file/d/1YGASpatw7gO4NTeb236IFTuXFKS2rhIN/view?usp=sharing
Implementation and Findings of Sai Sampoorna	https://drive.google.com/file/d/14A9EfWzLVRJjUlaL3Fru7pYYE0S_kZXj/view?usp=sharing
What are the changes we need?	https://drive.google.com/file/d/12qTIVCzIhJlqSQjfdGE9PAMIEIJo7PQ/view?usp=sharing
Lifestyle disorders in urban areas	https://drive.google.com/file/d/10IKSdw4eitYqlj0_-ts39ZdDMiuljRW6/view?usp=sharing
Mother and Child, pregnancy care in rural Odisha and slums	https://drive.google.com/file/d/1d0DKc8QqOMDHss7xhKYbOEISLmt2FpH0/view?usp=sharing
Importance of Menstrual Hygiene	https://drive.google.com/file/d/14iqNdWfyUKVXYqvD8Eo47lu-UHS3UB2n/view?usp=sharing

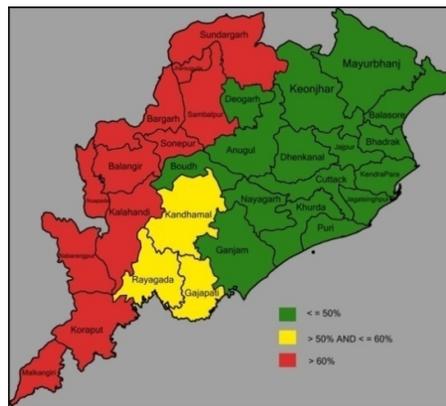


Figure 5 Percentage of women in anaemia

Very Low Jagatsinghapur, Cuttack, Nayagarh, Kendujhar, Dhenkanal, Balasore, Mayurbhanj, Debagarh, Kendrapara, Ganjam, Jajpur
Low Bhadrak, Angul, Puri, Khordha, Boudh
Moderate Kandhamal, Rayagada, Gajapati
High Bolandir, Nuapada, Koraput
Very High Bargarh, Subarnapur, Kalahandi, Jharsuguda, Malkangiri, Nabarangpur, Sundergarh, Sambalpur

Note: Percentage of women with anaemia in different categories is in the range of: 36 - 44% in very low level of insecurity; 45-52% in low; 53-60% in moderate; 61-68% in high and 69-76% in very high.

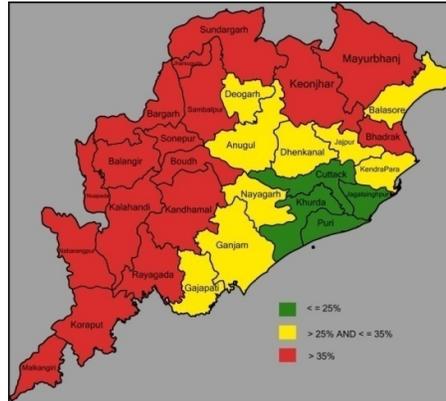


Figure 6 Percentage of Children Stunted

Very Low Cuttack, Puri

Low Jagatsinghapur, Khordha

Moderate Kendrapara, Nayagarh, Dhenkanal, Jajpur, Ganjam, Balasore, Debagarh

High Angul, Gajapati, Nuapada, Bhadrak, Kalahandi, Sundergarh, Kandhamal, Bargarh

Very High Jharsuguda, Boudh, Koraput, Kendujhar, Sambalpur, Bolangir, Mayurbhanj, Rayagada, Nabarangpur, Subarnapur, Malkangiri

Note: Percentage of children stunted in different categories are in the range of: 12-19% in very low level insecurity; 20-26% in low; 27-33% in moderate; 34-40% in high and 41-47% in very high.

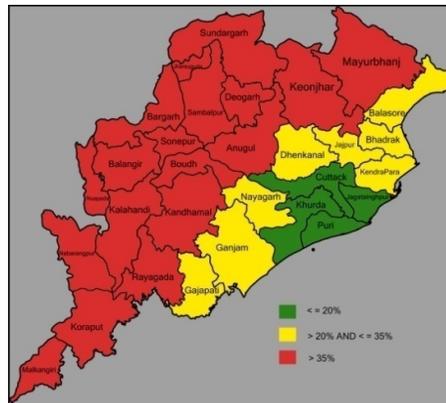


Figure 7 Percentage of Children Underweight

Very Low Cuttack, Jagatsinghapur, Puri, Khordha

Low Ganjam, Kendrapara, Nayagarh, Jajpur

Moderate Bhadrak, Dhenkanal, Gajapati, Balasore, Angul

High Debagarh, Bargarh, Nuapada, Jharsuguda, Kalahandi, Kendujhar, Subarnapur, Kandhamal, Boudh, Rayagada, Mayurbhanj

Very High Sundergarh, Koraput, Bolangir, Sambalpur, Nabarangpur, Malkangiri

Note: Percentage of children underweight in different categories are in the range of: 16 - 23% in very low level of insecurity; 24 -30% in low; 31-38% in moderate; 39-45% in high and 46-53% in very high.

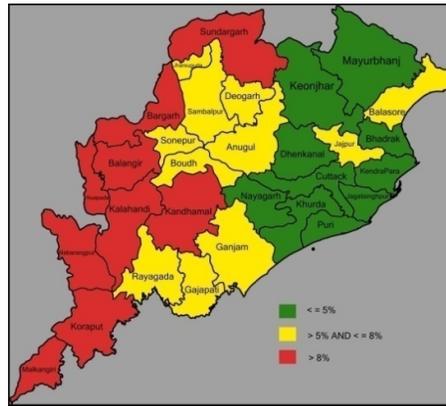


Figure 8 Percentage of Children Wasted

Very Low Cuttack, Puri, Kendrapara, Jagatsinghapur, Khordha
Low Bhadrak, Jajpur, Ganjam, Mayurbhanj, Nayagarh, Balasore, Dhenkanal, Kendujhar, Gajapati
Moderate Debagarh, Angul, Subarnapur, Boudh, Rayagada, Kandhamal, Jharsuguda
High Kalahandi, Nuapada, Bolangir, Koraput, Bargarh
Very High Sambalpur, Malkangiri, Sundergarh, Nabarangpur

Note: Percentage of children wasted in different categories are in the range of: 8-14% in very low level of insecurity; 15-19% in low; 20-25% in moderate; 26-30% in high and 31-36% in very high.

Table 6: Water Soluble Vitamins

People need to consume water-soluble vitamins regularly because the body removes them more quickly, and it cannot store them easily.

Vitamin	Effect of too little	Effect of too much	Sources
B-1 (thiamin)	Beriberi Wernicke-Korsakoff syndrome	Unclear, as the body excretes it in the urine.	Fortified cereals and rice, black beans
B-2 (riboflavin)	Hormonal problems, skin disorders, swelling in the mouth and throat	Unclear, as the body excretes it in the urine.	Breakfast cereal, oats, yogurt, mushrooms, almonds
B-3 (niacin)	Pellagra, including skin changes, red tongue, digestive and neurological symptoms	Facial flushing, burning, itching, headaches, rashes, and dizziness	Brown rice, fortified cereals, peanuts.
B-5 (pantothenic acid)	Numbness and burning in hands and feet, fatigue, stomach pain	Digestive problems at high doses.	Breakfast cereal, mushroom, sunflower seeds
B-6 (pyridoxamine,	Anemia, itchy rash, skin changes, swollen tongue	Nerve damage, loss of muscle control	Chickpeas, fortified cereals,



pyridoxal)			potatoes
B-7 (biotin)	Hair loss, rashes around the eyes and other body openings, conjunctivitis	Unclear	Egg, sunflower seeds, sweet potato
B-9 (folic acid, folate)	Weakness, fatigue, difficulty focusing, heart palpitations, shortness of breath	May increase cancer risk	Spinach, black-eyed peas, fortified cereal, asparagus
B-12 (cobalamins)	Anemia, fatigue, constipation, weight loss, neurological changes	No adverse effects reported	Plant milks, and breakfast cereals, some oily fish.
Vitamin C (ascorbic acid)	Scurvy, including fatigue, skin rash, gum inflammation, poor wound healing	Nausea, diarrhea, stomach cramps	Citrus fruits, berries, red and green peppers, kiwi fruit, broccoli, baked potatoes, fortified juices.

Table 7: Fat-Soluble Vitamins

The body absorbs fat-soluble vitamins through the intestines with the help of fats (lipids). The body can store them and does not remove them quickly. People who follow a low-fat diet may not be able to absorb enough of these vitamins. If too many build up, problems can arise.

Vitamin	Effect of too little	Effect of too much	Sources
Vitamin A (retinoids)	Night blindness	Pressure on the brain, nausea, dizziness, skin irritation, joint and bone pain, orange pigmented skin color	Sweet potato, spinach, and other dark leafy greens, carrots, winter squash
Vitamin D	Poor bone formation and weak bones	Anorexia, weight loss, changes in heart rhythm, damage to cardiovascular system and kidneys	Sunlight exposure plus dietary sources: cod liver oil, oily fish, dairy products, fortified juices
Vitamin E	Peripheral neuropathy, retinopathy, reduced immune response	May reduce the ability of blood to clot	Wheatgerm, nuts, seeds, sunflower and sunflower oil, spinach
Vitamin K	Bleeding and haemorrhaging in severe cases	No adverse effects but it may interact with blood thinners and other drugs	Leafy, green vegetables, soybeans, okra

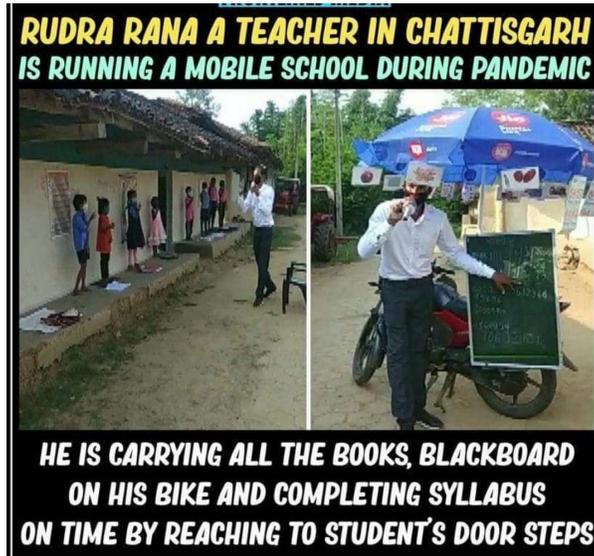


Figure 9 SMART approaches to reach non-reachable area

Table 8: Home-grown vegetables for nutritional recipes

To grow	Tips to grow	Food to make	Videos for reference
Palak	Spinach is sown throughout the year. For winter season, best time for sowing is from September to October. For spring season complete sowing from Mid-February to April. Use row to row spacing of 25-30 cm and plant to plant spacing of 5-10 cm.	Chutney	https://drive.google.com/file/d/1V845YiL0oI3ZasK9WC2BIAhBAO32hqby/view?usp=sharing
		Palak Panner	https://drive.google.com/file/d/1B4weJlYQ6xzY-4IS8TbdCyy6PoR_c4fL/view?usp=sharing
		Palak Paratha	https://drive.google.com/file/d/1lhS6CoJKaXqZH3HVrs9eUVF-j497kWU1/view?usp=sharing
		Palak Pulao	https://drive.google.com/file/d/1O9teHFQ7wEgTGBBln1OGJZe_5bx_oDmi/view?usp=sharing
		AlooPalak	https://drive.google.com/file/d/1_mNRfcAwD5_SmK-ws-OHV1WPMTGDskuJ/view?usp=sharing
Papaya	Papaya is planted during spring (February-March), monsoon (June-July) and autumn (October-November). A spacing of 1.8 x 1.8 m. is normally followed. However higher density cultivation with spacing of 1.5 x 1.5 m./ha enhances the returns to the farmer and is recommended.	Pani Santula	https://drive.google.com/file/d/1dSI1JN-LLucHxgUdBRqWOSIX0LQ2vZRG/view?usp=sharing
		Papaya Curry	https://drive.google.com/file/d/1hRtiDxfJyTljoQwrVy_kXUoIN4JrtwPL/view?usp=sharing
		Dalma	https://drive.google.com/file/d/1_AmO7ICEgUOc--5mSnjwQExhUeQmSRlx/view?usp=sharing
Pumpkin	Pumpkin can be grown during time period of January to March & September to December. Sowing can also be started after the first few showers during May to June for the rain fed crop.	Pumpkin Chutney	https://drive.google.com/file/d/1Jd9eKrfRY0QlBkC5wODL5XsMY2fxBkk9/view?usp=sharing
		Pumpkin Seed Snacks	https://drive.google.com/file/d/1FEZTQqs2BERcd3VKa6QqFKUzb9EVAIfU/view?usp=sharing
		Pumpkin Fry	https://drive.google.com/file/d/1Ke7q_I5TqJjQ14wgIuZEnS_1cPbIBedu/view?usp=sharing
		Pumpkin Cutlet	https://drive.google.com/file/d/1xx1f5Wma-SAUFHHcavzLyL1CbYcJugJy/view?usp=sharing
		Pumpkin Halwa	https://drive.google.com/file/d/1qAp6qXU0vffyeL1kQa9QTJOuVaUqtNjt/view?usp=sharing
		Pumpkin Rai	https://drive.google.com/file/d/1V3rQ5xvmM0hzNMNLQ9nYgFnSZAm6of5c/view?usp=sharing
		Pumpkin Kheer	https://drive.google.com/file/d/1gdes9av2KOIFbEy2vQXxKLuFWs7xTRWv/view?usp=sharing
		Pumpkin	https://drive.google.com/file/d/1mShQ5C9m-

		Chatpata	ZlahOxgC_7SvZdaRGvIKt9W/view?usp=sharing
Ladies Finger	<p>Lady Finger requires long warm growing season during its growing period. It gives good yield in warm humid condition. It grows best within a temperature range of 22-35°C. It can be successfully grown in rainy season even in heavy rainfall area. Flowering begins from 35 to 40 days after sowing. The crop is harvested in 55 to 65 days after planting when pods are 2 to 3 inches long. At this stage, the pods are still tender.</p>	Bhendi Khata	https://drive.google.com/file/d/1Vef8zEAtWb0cY8qZo1bAj6WGRFEiMEJ9/view?usp=sharing
		Bhendi Mashala	https://drive.google.com/file/d/1tS54Z-2bsFtXgeREcOUr2XIHtaRKTt_R/view?usp=sharing
Carrot	<p>In India, carrots are best grown in the winter season, and seeds should be sown from October-November; they can also be grown during monsoon.</p>	Gajar Halwa	https://drive.google.com/file/d/1W4UeHOLtdohPjs570RfRfu_UqzuADCuD/view?usp=sharing
		Carrot Beans Portiyal	https://drive.google.com/file/d/13hGYI8yhniNNhxWFzmQYwV0RyjbU9x-/view?usp=sharing
Ridge Gourd	<p>Ridge gourd is cultivated both as summer and rainy season crop. Summer crop: January to April. Rainy season crop: June to July In hills of Meghalaya the seeds are sown in April.</p>	Janhi Besara	https://drive.google.com/file/d/1m4Pw_XYIJQh1mqRwOQrD1E08aAprWaTP/view?usp=sharing
		Janhi Gota bhaja	https://drive.google.com/file/d/1OsOruhZ51g6F95AkLJjzMz7Di90G6RwS/view?usp=sharing
		Janhi aloo Posta	https://drive.google.com/file/d/1aNnjXb4dwA3mOyxuFs2mmUSdBC8RKGzI/view?usp=sharing
		Janhi Bhaja	https://drive.google.com/file/d/1qtYwd_ZwSsAsUHSIkT5X5PQyEXdI6r4F/view?usp=sharing
		Smoked Janhi	https://drive.google.com/file/d/1eqSIA1r2Ss6iwUC0c59JecKqUDqRNEkx/view?usp=sharing
Brinjal	<p>Time from planting to harvest is 100 to 150 days from seed, 70 to 85 days from transplants. Harvest eggplant young before the flesh becomes pithy. Eggplants are ready for harvest when the fruit is glossy, firm, and full-colored. Best season to plant in India June – November</p>	Achari Brinjal	https://drive.google.com/file/d/18L80SaBn0ahyd4QzG03hULCmbVSzqWu8/view?usp=sharing
		Baigan ki Aloo	https://drive.google.com/file/d/1XM5Zb4alhNNI0gdJZ4D-AmgoaDbuJZwj/view?usp=sharing
		Baigan ka Sambar	https://drive.google.com/file/d/1xBb2XXY30-jpLij_LaEAVzd8cBRVZI9f/view?usp=sharing
		Baigan Bharta	https://drive.google.com/file/d/1IDTXxTpwEXBga-yfuz5TZOEDDTREIaG1/view?usp=sharing

French Beans	French bean can be sown twice a year, in January-February and July-September in the plains and March to June in the hills. Dwarf or bush types are sown with the spacing of row-to-row 40-50 cm and plant-to-plant spacing of 10 cm while pole type, at 60-65 cm x 10-12 cm. The seed should be sown at 2- 3 cm depth in soil.	Beans Curry	https://drive.google.com/file/d/13H4l4riH6tTH_Z2Hsd1a4TCZ0rwNYS-M/view?usp=sharing
		Beans Carrot fry	https://drive.google.com/file/d/1SSluyBLOwmUthxb1No5K4wSTNP3JRbMc/view?usp=sharing
Bitter Groud	The seed is sown from January to March for summer season crop, June-July for rainy season crop in the plains and March to June in the hills.	Kalara Bharta	https://drive.google.com/file/d/18NaKpCrf-jU_OvAwWaoRCBhdDi_LnVfN/view?usp=sharing
		Kalara Chatpata	https://drive.google.com/file/d/1ScKRwP2Fy1F0ej7F196L1S64K_pWhHsc/view?usp=sharing
		Kalara Bara	https://drive.google.com/file/d/18NaKpCrf-jU_OvAwWaoRCBhdDi_LnVfN/view?usp=sharing
		Kalara Tomato Bharta	https://drive.google.com/file/d/1R7bofSYP4No_KLGB2cRV0Ym46Eeqz5/view?usp=sharing
		Gota Kalara Bhaja	https://drive.google.com/file/d/1f7QWMyAX7GTjje3zNyCUBEY0TNwUCmd/view?usp=sharing
Drumstick	As it is a warm season plant, the drumstick tree is usually planted after the end of the cool season. Sowing Method: The seeds should be planted in an area with light, dry soil, and placed in holes dug 30cm (1ft) deep and 30cm wide.	Leaves Curry	https://drive.google.com/file/d/1_56p3XRSOMJqCQ2v21FleOwptg3ubXba/view?usp=sharing
		leaves stir fry	https://drive.google.com/file/d/1xV3c5LV-hboTbAaeQxdgUTmEBYkUy7dY/view?usp=sharing
		Drumstick leaves fry	https://drive.google.com/file/d/11c6eYg0eZFi3u0GKlqKC3Dm842CLwgvn/view?usp=sharing
		Saga and Dal Fry	https://drive.google.com/file/d/1YMxiQCRLhRghDct2P-ncIANDUdziIJ5h/view?usp=sharing
Mushrrom	https://drive.google.com/file/d/1I-0ATRYuJzcPGuVxsZsS2GSFPBJsyleF/view?usp=sharing	Chatu Besara	https://drive.google.com/file/d/1B3_6hPIQ0BuBys9BAzTc8W1emoGLbDs8/view?usp=sharing
		Mushroom Biryani	https://drive.google.com/file/d/18jgpRG-3JIWpZaxNCBiT7qZUARTjBwWK/view?usp=sharing
		Chatu Bhaja	https://drive.google.com/file/d/15wdkk8Qn1xR182_HKk5hyh9J4aal9000/view?usp=sharing

Table 9: Proteinrich Easy to Cook Food

Main Ingredients	Why?	Recipes to cook	Videos for reference
Rice Based	Whole-grain rice varieties contain the bran and germ, providing more of specific nutrients like fiber, protein, antioxidants, and certain vitamins and minerals. Choosing whole-grain over white rice can benefit health in many ways and may even reduce your risk of type 2 diabetes, obesity, and heart disease.	Chitau Pitha	https://drive.google.com/file/d/10PVkEtaN4SFUESuMK03Qx4ZbfmFoY8j7/view?usp=sharing
		Soyabean Fried Rice	https://drive.google.com/file/d/1jqaLwGIG4InvC7M3UgbjmFTB_IRcW80/view?usp=sharing
Moong dal Based	Lowers cholesterol levels and reduces the risk of heart disease. It is a healthy protein for diabetes that helps in regulating blood sugar levels and good for all weight watchers. And Loaded with B vitamins, controls PMS symptoms. You can also eat moong dal at night, as it is easily digestible.	Moong Dal Khichdi	https://drive.google.com/file/d/1PlhxMKXUSI7thDiQCJNY6Z7a_fx6cIGF/view?usp=sharing
		Moong Dal kheer	https://drive.google.com/file/d/13YZPxUtlTGaF6jeC6t1GM2X9a8DYctvu/view?usp=sharing
		Sprouts	https://drive.google.com/file/d/1OGDVTdSrzyjF2MQtjj1gq6h4XqtFCRb3/view?usp=sharing
		Sprouts Salad	https://drive.google.com/file/d/1hFqBeNNhLDFKLZi00C-rTyCu0iPdc-IV/view?usp=sharing
Egg Based	Eggs are a very good source of inexpensive, high-quality protein. More than half the protein of an egg is found in the egg white, which also includes vitamin B2 and lower amounts of fat than the yolk. Eggs are rich sources of selenium, vitamin D, B6, B12 and minerals such as zinc, iron and copper.	Egg Bhurji	https://drive.google.com/file/d/1PYj6hKzB3siD7cQfquy1dG9dHHn8rOV/view?usp=sharing
		EGG Roll	https://drive.google.com/file/d/1cmISK4e5Nm0WQLzDvinLHr6bYjWNf6NQ/view?usp=sharing
		Mustard Egg Curry	https://drive.google.com/file/d/1eXWPghsNl-MkewQkxq_c3q6BFZOr2N8K/view?usp=sharing
		Sajana Saga Omelette	https://drive.google.com/file/d/1HBCKYd-An87VmYGMdRgFP0V5UFuXC2zd/view?usp=sharing
		SPinach Omelette	https://drive.google.com/file/d/1jUqd872AyANwxst--wSGRwnMbCVFYvuG/view?usp=sharing
Other Vegetables		Allo Matar	https://drive.google.com/file/d/1rOLRLG30T9nD5P4co8jsXXY4ehaF1ECL/view?usp=sharing
		Tomato Sambar	https://drive.google.com/file/d/1YC7t6-84zLqz33WVUSqk2qSAOuVIQQIu/view?usp=sharing
Milk Based		Dahi	https://drive.google.com/file/d/1MFf19c-yj4Pz72RXg6w7vkduSKtCvyzZ/view?usp=sharing
Beshan Based		Beshan Chilla	https://drive.google.com/file/d/1K4CRUCFfpe0b8_B9H7CZql7wlaxzrT71/view?usp=sharing

