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Chrysalis Services
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Project

Swasthya and Mamta

Impact Assessment Report
FY 2023 – 2024

Implemented by

PADALA CHARITABLE TRUST
Encourage - Educate - Empower



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Setting the scene

About the Report

This impact assessment report, presented by Chrysalis Services, is an independent evaluation of the Corporate Social Responsibility (CSR) health initiatives Project Swasthya and Mamta implemented by Coromandel during the financial year 2023-24 in the nearby villages of Kakinada, Andhra Pradesh. The assessment uses a mixed-methods approach, combining quantitative data from structured surveys and qualitative insights from case studies and Focus Group Discussions (FGDs) with beneficiaries and other stakeholders, to provide a comprehensive understanding of the project's outcomes and their alignment with the intended outcomes.

The report aims to evaluate the project's efficiency and impact on the health and well-being of lactating mothers and adolescent girls. It specifically examines the contribution of interventions, the provision of free menstrual health kits to adolescent girls and iron supplements to lactating mothers, assessing how these efforts have enhanced awareness, health practices, and overall quality of life among the target population. This report also aims to evaluate the on-ground implementation and sustainability of the project carried out by the Coromandel CSR team.

About Coromandel International Limited and its CSR Interventions

Coromandel International Limited is one of India's leading agri-solutions providers and a part of the Murugappa Group, a well-established business group with a strong legacy of trust and performance. Headquartered in India, the company plays a critical role in supporting the agricultural sector through a wide range of products and services, including fertilisers, crop protection solutions, bio-products, and retail services for farmers. With a strong distribution network and farmer-centric approach, Coromandel is committed to enhancing farm productivity and rural prosperity.

Aligned with its core philosophy of sustainable growth and inclusive development, Coromandel International Limited actively undertakes Corporate Social Responsibility (CSR) initiatives that focus on improving the quality of life in rural and underserved communities. The company's CSR efforts primarily focus on key thematic areas, including health and nutrition, education, sustainable agriculture, water conservation, and community development. Through these initiatives, Coromandel aims to address critical grassroots challenges while contributing to long-term socio-economic development.

A significant aspect of the company's CSR approach is its emphasis on community participation and capacity building. By working closely with local stakeholders, frontline workers, and implementing partners, Coromandel ensures that its interventions are need-based, scalable, and sustainable. Its programs often integrate awareness generation, behaviour change communication, and access to essential services, thereby creating meaningful and measurable impact at the community level.



Executive Summary

Project Name

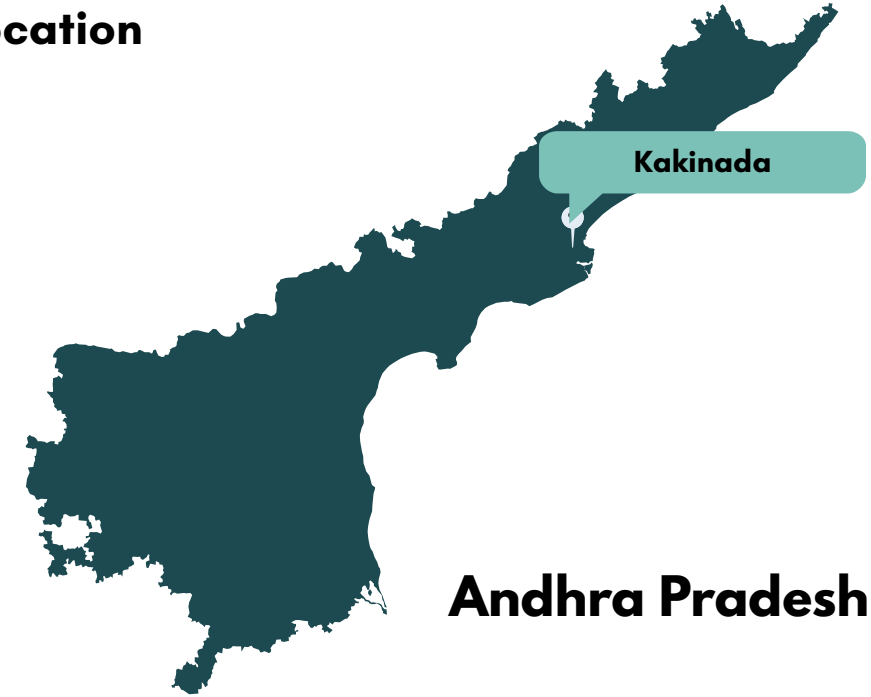
Project Swasthya and Mamta

Implementing Partner

Project Assessment Period

FY 2023-24

Project Location



Total Beneficiaries

Lactating women	163
Pregnant Women	194
Adolescent girls	570

Sample size

58	Lactating women surveys
40	Adolescent girls surveys
2	Focus group discussion
6	Key Informant Interview

Performance Snapshot:



84.48% of women reported significant improvement in health after receiving nutrition kits, indicating a strong impact on anaemia reduction.



96.49% participation in child wellbeing activities highlights strong community engagement and outreach.



70.69% experienced reduced fatigue and **68.97%** reported higher energy levels, reflecting improved physical well-being.



67.24% ensured regular immunization and **65.52%** improved child feeding practices, strengthening childcare outcomes.



79.31% adopted improved dietary practices, demonstrating effective translation of awareness into behaviour change.



67.5% of girls can now identify and reject menstrual myths, indicating reduced stigma and improved awareness.



75.86% of beneficiaries became confident in managing their health and nutrition independently.

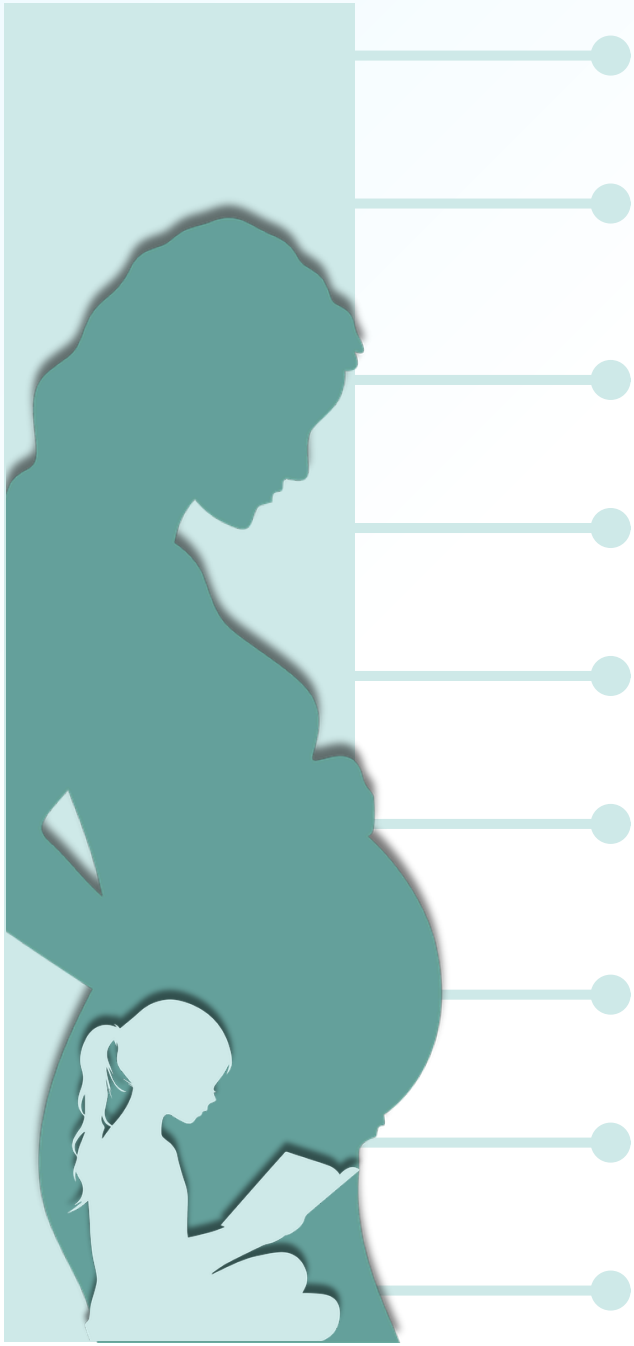


Upgraded Anganwadi infrastructure, kitchen gardens, and improved water and sanitation enhanced service delivery and community ownership and development of kitchen gardens.



Hygiene practices improved significantly, with **93.10%** maintaining cleanliness during cooking.

Project Activities



Conducted an orientation and awareness session for the Swasthya team on the Swechha program to align field-level implementation and objectives.

Mobilised 80 pregnant and lactating mothers (20 each) from Vakalapudi, Harbour Peta, Valasa Pakala, and Suryarao Peta for community awareness sessions on maternal health, nutrition, and hygiene.

Undertook field visits to Anganwadi centres to identify and document pregnant women and mothers suffering from anaemia for targeted intervention.

Distributed nutrition kits to 100 pregnant and lactating women to address anaemia and improve maternal health outcomes.

Selected and trained 100 students from two schools as Peer Educators to promote awareness on menstrual hygiene, reproductive health, nutrition, personal safety, and cyber safety among adolescents.

Formed and strengthened community-based structures such as Mother Groups and Peer Educator networks to ensure sustained behaviour change in health and hygiene practices.

Strengthened convergence with frontline health workers, including ASHAs, ANMs, and Anganwadi Workers, to improve access to healthcare services and increase service utilisation.

Conducted regular health check-ups, community health camps, and nutrition support activities for pregnant women, lactating mothers, and adolescents.

Organised awareness sessions on sustainable menstruation, promoting the use of reusable cloths and menstrual cups as safe, affordable, and environmentally friendly alternatives.

SDG Alignment



Alignment with National Programs/Coherence

- POSHAN Abhiyaan (PM's Overarching Scheme for Holistic Nourishment)
- Anemia Mukt Bharat (AMB)
- Menstrual Hygiene Scheme (MHS) under National Health Mission
- Rashtriya Kishor Swasthya Karyakram (RKSK)
- Pradhan Mantri Matru Vandana Yojana (PMMVY)
- Integrated Child Development Service (ICDS)

What Worked Well

Improved Anganwadi Infrastructure and Management
The reconstruction of Anganwadi centres led to better space utilisation and overall management. Centres became more functional, organised, and conducive to delivering services effectively. This also created a more welcoming environment for beneficiaries.

Kitchen Gardens Promoting Nutrition Awareness
The availability of additional space enabled the development of kitchen gardens in several centres. These gardens, supported by plants contributed by mothers, promoted awareness about locally grown food and encouraged community participation.

Effective Nutrition Support for Mothers
The distribution of nutrition kits to pregnant and lactating women addressed critical gaps, including anaemia and inadequate dietary intake. Combined with counselling, it helped beneficiaries adopt healthier eating habits and improve their overall health.

Regular Follow-ups and Continuous Monitoring
Consistent follow-ups by the field team and health workers ensured that beneficiaries adhered to nutrition and health advice. This also helped in early identification of high-risk cases and timely intervention, improving outcomes.

Strong Community Engagement and Trust Building
Continuous interaction with families helped build strong relationships and trust within the community. This made mobilisation easier and increased participation in health sessions and services.

Innovative Mobilisation and Access to Healthcare
The use of peer educators, mother groups, and community seminars creates sustainable awareness systems. One-to-one interactions with doctors further enhanced access to reliable health information and encouraged better health-seeking behaviour.

1.Project Dashboard



Objective

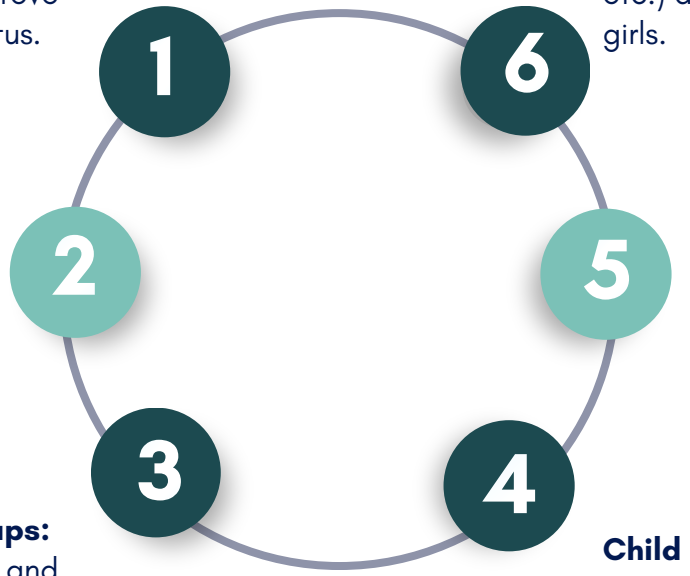
The program aims to improve the health and nutrition of women and adolescent girls in Valasapakala, Vakalapudi, Suryaraopeta, and Harbour villages (Kakinada Rural, Andhra Pradesh) through education, community mobilisation, and better access to health services. It promotes sustainable behaviour change by strengthening community-based groups such as Mother Groups and Peer Educators, and by enhancing linkages with frontline health workers (ASHAs, ANMs, and Anganwadi Workers). The program also supports regular health check-ups, camps, and nutrition interventions, and encourages informed choices for sustainable menstruation through safe, eco-friendly alternatives like reusable cloth pads and menstrual cups.

Key Interventions

Nutrition Kit Distribution:
Monthly provision of nutrition kits to pregnant and lactating women to address anaemia and improve overall nutritional status.

Health & Nutrition Awareness Sessions:
Regular sessions on maternal health, balanced diet, anaemia prevention, menstrual hygiene, and non-communicable diseases.

One-to-One Counselling and Follow-ups:
Personalized guidance by doctors and continuous monitoring through ASHA/ANM workers to reinforce behaviour change.



Menstrual Hygiene Management (MHM) Support:
Distribution of MHM kits (sanitary napkins, handwash, etc.) along with awareness sessions for adolescent girls.

Adolescent Health Education:
Sessions focused on puberty, menstrual health, nutrition, and breaking myths and stigma among adolescent girls.

Child Health and Care Awareness:
Promotion of immunization, improved feeding practices, hygiene, and early healthcare-seeking behaviour among caregivers.

Background and need of the program

Identified Need / Problem Area	Evidence from Internet / Secondary Data	Project Activity / Intervention Aligned
High prevalence of anemia among women and lactating mothers	The National Family Health Survey (NFHS-5) reports that 57% of women aged 15-49 in India are anaemic. Additionally, a Ministry of Health and Family Welfare update (2025) indicates that 59.1% of adolescent girls are anaemic, highlighting a persistent public health concern. 🔗 **NFHS** 🔗 **MoHFW**	Iron supplementation for lactating mothers; distribution of nutrition kits; nutrition counselling sessions; health screening camps.
Poor maternal nutrition affecting mothers and infants	The World Health Organisation identifies iron deficiency and inadequate dietary intake as major causes of maternal morbidity, low birth weight, and poor lactation outcomes. NFHS data further highlights maternal undernutrition as a continuing rural health issue in India. 🔗 **WHO Maternal Nutrition** 🔗 **NFHS Reports**	Distribution of nutrition kits; maternal counselling sessions; linkage with ANMs/ASHAs; maternal health camps.
Limited healthcare access and low utilization of frontline health services	Government health frameworks emphasise the role of frontline workers such as ASHAs, ANMs, and Anganwadi Workers in improving maternal and adolescent health outcomes. The National Health Mission highlights these cadres as essential for last-mile healthcare delivery. 🔗 **NHM**	Coordination with ASHAs, ANMs, and AWWs; referral support; community health outreach camps.
Low menstrual hygiene awareness among adolescent girls	A 2024 national analysis indicates that only 77% of young women use hygienic menstrual absorbents, with significantly lower usage in rural areas. Studies also show that 46.9% of girls had no knowledge of menstruation prior to menarche. 🔗 **NFHS-5 factsheet** 🔗 **Dasra Menstrual Health Report**	Menstrual hygiene education sessions; awareness workshops; adolescent reproductive health counselling.

Identified Need / Problem Area	Evidence from Internet / Secondary Data	Project Activity / Intervention Aligned
Menstrual stigma, myths, and misinformation remain widespread	UNICEF reports that menstrual stigma restricts girls' participation, mobility, and dignity, with menstruation still treated as taboo in many communities in India. 🔗 **UNICEF Menstrual Health**	Community awareness sessions; myth-busting discussions; peer educator-led awareness circles.
Limited access to menstrual hygiene products in vulnerable communities	UNICEF highlights that access to affordable menstrual products remains a major barrier, particularly in low-income and rural populations in India. 🔗 **UNICEF India**	Free distribution of menstrual hygiene kits to adolescent girls.
Need for sustainable, low-cost menstrual alternatives	Global health literature recognizes reusable cloth pads and menstrual cups as cost-effective and environmentally sustainable alternatives, particularly suitable for low-resource settings (WHO, UNICEF advocacy reports). 🔗 **WHO WASH & Health**	Awareness sessions on reusable cloth pads, menstrual cups, and eco-friendly menstrual practices.

2.Research Design

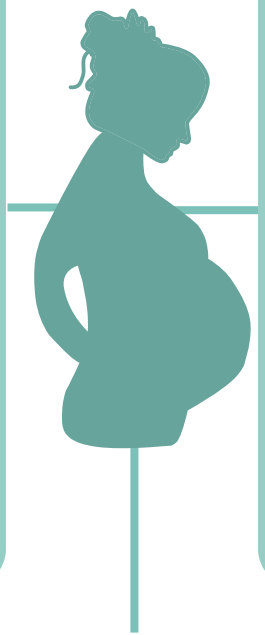


The study adopted a **mixed-method approach** to assess infrastructure interventions across schools and Primary Health Centres, aligned with the project's objectives of improving access, usability, and service delivery.

Both **primary and secondary data** were used to ensure triangulation. Primary data included surveys, interviews, focus group discussions, and observations, while secondary data comprised project documents and implementation records. The approach emphasised **multi-stakeholder perspectives**, covering students, community members, teachers, healthcare staff, and government representatives. Field visits enabled validation of infrastructure improvements and their usage.

RESEARCH

- Briefing meetings with Coromandel International Limited and Padala Charitable Trust to understand the project design, objectives, target beneficiaries (pregnant/lactating women and adolescent girls), and implementation strategy.
- Review of project documents, including beneficiary records, activity reports, training materials, and distribution records of nutrition and menstrual hygiene kits.
- Secondary research on maternal and adolescent health, anaemia prevalence, menstrual hygiene practices, and government schemes such as POSHAN Abhiyaan, Anaemia Mukt Bharat, and RKSK.
- Contextual understanding of the intervention areas (Valasapakala, Vakalapudi, Suryaraopeta, and Harbour villages) and the role of frontline health workers (ASHAs, ANMs, Anganwadi Workers).



DEVELOPMENT

- Development of structured quantitative questionnaires for pregnant and lactating women and adolescent girls.
- Design of qualitative tools, including Key Informant Interview (KII) guides for frontline workers (ASHAs, ANMs, AWWs) and implementing partner representatives.
- Preparation of Focus Group Discussion (FGD) guides for adolescent girls and mothers to capture behavioural changes, awareness levels, and social perceptions.

ACTION (DATA COLLECTION)

- Quantitative surveys were conducted with pregnant and lactating women and adolescent girls across selected project locations.
- Key Informant Interviews (KIIs) were conducted with ASHAs, ANMs, Anganwadi Workers, and representatives from Padala Charitable Trust.
- Focus Group Discussions (FGDs) were conducted with adolescent girls and mothers to assess awareness of nutrition, anaemia, and menstrual hygiene practices.
- Collection of qualitative testimonials highlighting changes in health awareness, nutrition practices, and menstrual hygiene behaviour.

DATA ANALYSIS

- Compilation, cleaning, and validation of quantitative survey data.
- Disaggregation of findings by beneficiary group (women and adolescent girls) and key indicators such as awareness, access to services, and behavioural change.
- Analysis of qualitative insights related to nutrition practices, anaemia awareness, menstrual hygiene, and community-level shifts.
- Triangulation of primary data with project records and secondary research findings.

DATA VISUALISATION & COMMUNICATION

- Preparation of charts, graphs, and comparative tables to present key findings across beneficiary groups.
- Development of case studies and beneficiary testimonials to illustrate impact at the individual and community level.



REPORTING

- Preparation of the draft Impact Assessment Report outlining methodology, findings, SDG alignment, and key insights.
- Incorporation of feedback from Coromandel International Limited.
- Finalisation of the report with recommendations, learnings, and sustainability pathways for future interventions.

Sampling Approach

The assessment employed purposive sampling for the door-to-door collection of quantitative data in the field, ensuring representation across different wards and population groups. This approach enabled systematic coverage of households within selected clusters to capture variations in service access, Childcare practices, and participation levels.

Simultaneously, qualitative data was collected using a range of tools developed for the study, including key informant discussions, Focus Group discussions and field observations. This allowed for a deeper understanding of stakeholder perspectives, implementation processes, and behavioural changes, complementing the quantitative findings and strengthening the overall assessment.

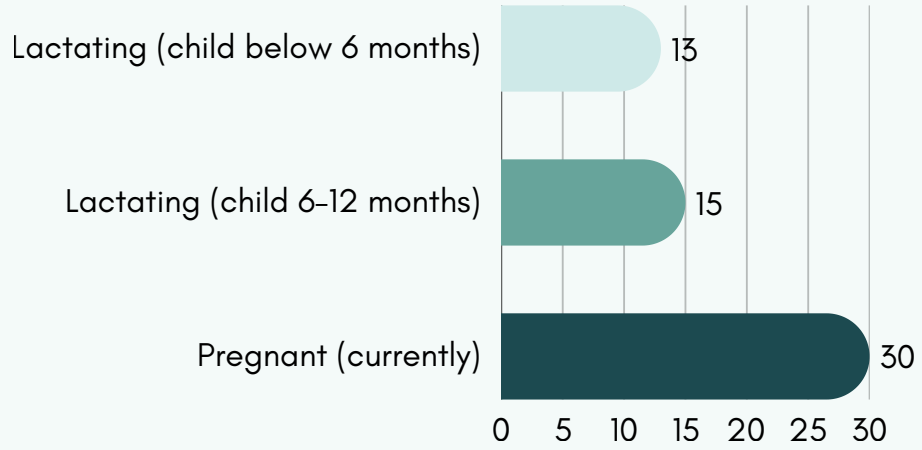
Stakeholders/Cohort	Data Collection Type	Tools of Study	Achieved sample Size
Pregnant & Lactating Women (Primary Beneficiaries)	Quantitative	Survey	58 surveys
Adolescent Girls	Quantitative	Survey	40 surveys
Family Members	Qualitative	Focus group discussions	2 FGD's (8-10 members)
Anganwadi Workers (AWWs) / Frontline Workers	Qualitative	Key Informant Interview	2 KII's
Anganwadi Centres and Kitchen Garden	Qualitative	Direct Observation	3
PRI Members & Village leaders	Qualitative	Key Informant Interviews	2 KIIs
Implementing Agency / NGO	Qualitative	Key Informant Interviews	1KII
Government Health & ICDS Department	Qualitative	Key Informant Interview	1KII

Respondents Profile

Age Group of Lactating Mothers

19	1
20	18
21	8
22	2
23	6
24	5
25	3
26	1
27	2
28	6
29	2
30	2
31	1
35	1

Current Status of Lactating Mothers

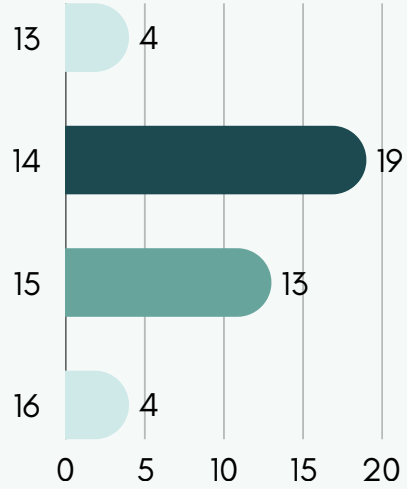


Education level Lactating Mothers

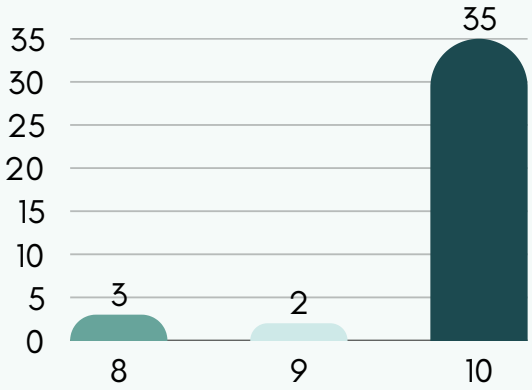


Adolescent girls

Age group



Class Studying in



Ethical Considerations

The study adhered to established ethical standards to ensure the dignity, safety, and rights of all participants, particularly pregnant and lactating women, adolescent girls, and other vulnerable community members



Informed Consent: Participants were briefed on the purpose and nature of the assessment before data collection. Consent was obtained from all respondents, and for adolescent girls, interactions were conducted in the presence of teachers or programme staff. Data collection aligned with the principles of the **Digital Personal Data Protection (DPDP) Act**, 2023, ensuring responsible and purpose-specific use of information.

Confidentiality & Privacy: All responses were anonymised and used only for assessment purposes. Any photographs or case narratives included in the report were documented with prior consent and used solely to illustrate infrastructure improvements and user experiences.

Voluntary Participation: Participation was entirely voluntary, and respondents were free to decline or withdraw at any stage without any consequence.

Respectful Engagement: Interactions were conducted respectfully and non-intrusively across community settings and Anganwadi centres, ensuring sensitivity to the health conditions of pregnant and lactating women while prioritising participants' comfort and well-being.

3. Findings

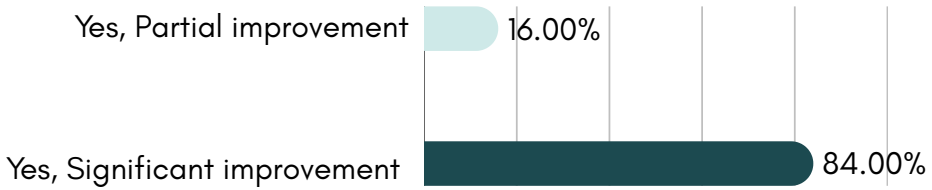


Lactating and pregnant women

1. Improvement in anemic health conditions with use of nutrition kits

As part of the Swasthya project, lactating and pregnant women were given a monthly nutrition kit to address anaemia. According to the surveys, 16% of mothers reported partial improvement, and 84% reported significant improvement compared with their previous conditions.

Did you notice any improvement after using the nutrition kit?



Graph 1: Indicates responses for improvements in health

During the survey, 71% reported reduced weakness and fatigue during daily activities, while 69% experienced increased energy levels throughout the day, reflecting enhanced overall well-being.

33% of respondents reported a reduction in dizziness or fainting episodes, suggesting improvements in conditions such as anaemia. Notably, none of the participants reported any improvement, underscoring the intervention's positive impact.

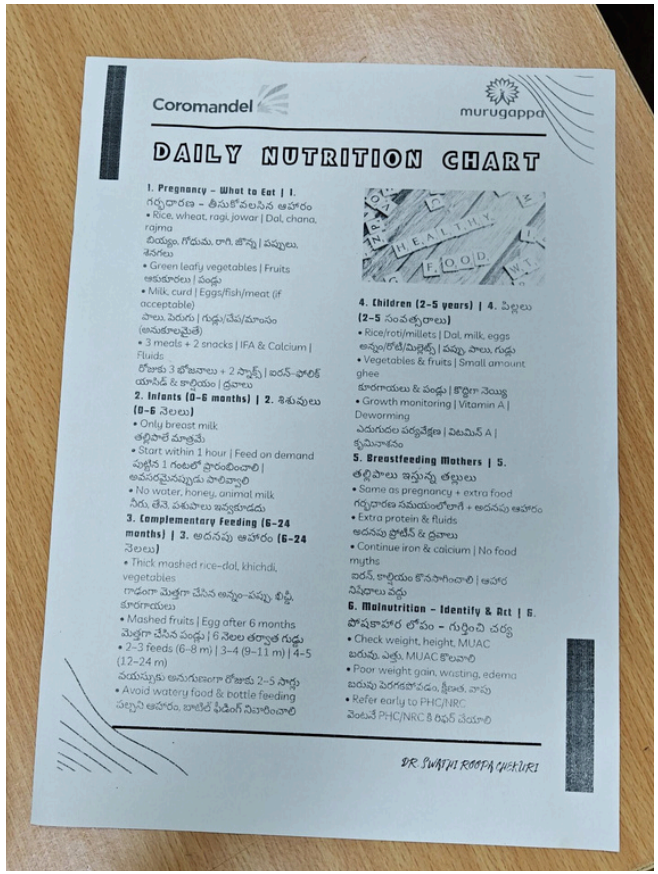
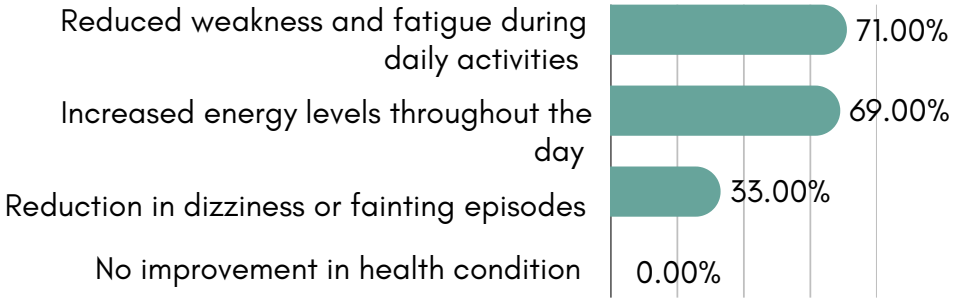


Image 1: A picture of Daily nutrition chart provided to the beneficiary mothers

After receiving nutrition support from the program, what improvement have you personally experienced in your health? (Multi Select)



Graph 2: Indicates specific improvements in health after using nutrition kit

Case Study

Successful Motherhood Journey of a Specially-Abled Woman, Chepala Nagamani

Chepala Nagamani,

29-year-old

A specially-abled woman from rural Kakinada district is around three and a half feet tall and lives with an intellectual disability, relying on her family for daily support. Despite multiple physical and social challenges, her journey into motherhood reflects resilience and the importance of timely healthcare.

Married in 2022, she conceived in 2023. After her first trimester, a TIFA scan (Targeted Imaging for Foetal Anomalies) revealed a severe congenital abnormality. Only bones had formed, with the skin and muscles improperly developed. On medical advice, the pregnancy was terminated in the sixth month, which was emotionally distressing for her and her family.

In 2023, she conceived again. During an awareness session, she was identified as a high-risk pregnancy case. A haemoglobin test showed severe anaemia (Hb 6 g/dL), along with weakness and fatigue, posing risks to both mother and child. The implementing partner provided a maternal health kit and counselling on antenatal care, nutrition, iron supplementation, and hygiene. Regular follow-ups with local health workers ensured monitoring, proper diet, and timely check-ups.





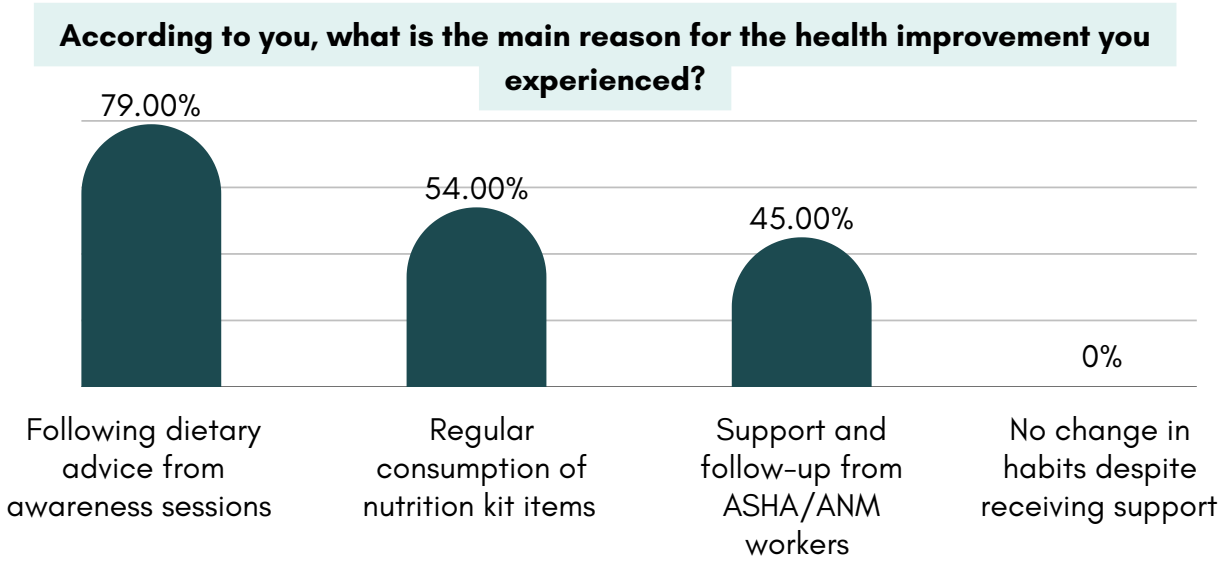
Image 2: A picture of Mrs. Chepala Nagamani, Kakinada

In 2024, during late pregnancy, she experienced premature rupture of membranes. The ANM and implementing partner responded quickly and ensured immediate hospital referral. With timely medical care, she safely delivered a baby girl without major complications. Both mother and child were closely monitored after delivery.

Today, her daughter is 2 years and 2 months old, and both are healthy. The family expressed relief and happiness as she overcame severe anaemia, pregnancy risks, and previous loss. This case highlights the importance of early identification of high-risk pregnancies, continuous follow-up, nutritional support, and timely referrals, especially for vulnerable and specially abled women. It shows how consistent care can ensure safe motherhood and healthy child outcomes.

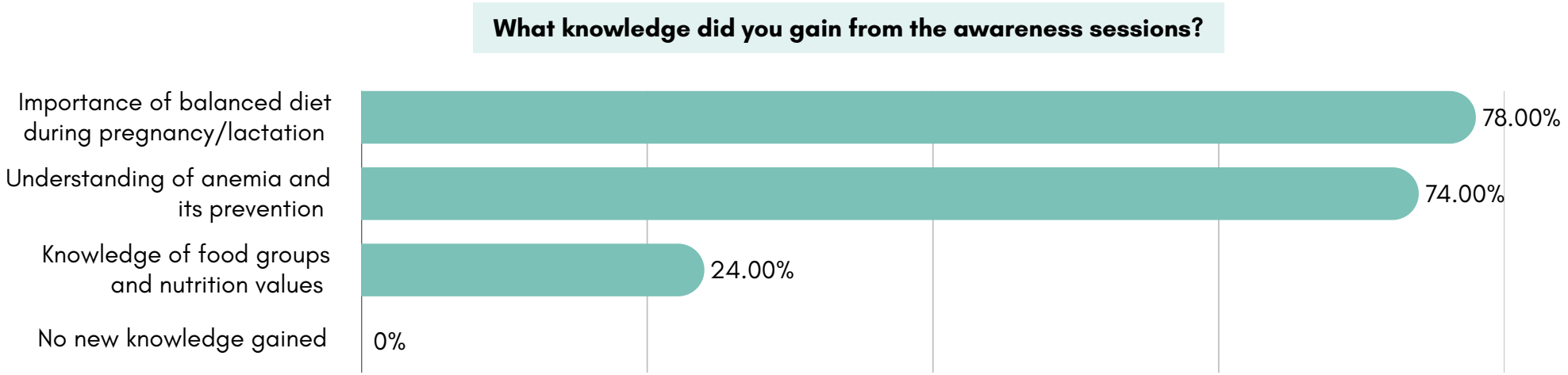
2. **Improvement in health due to Awareness and high knowledge retention**

According to the surveys there has been improvement in the health conditions of women through attending the awareness session and one to one interactions with the doctor after awareness sessions. Regular follow ups from the awareness workers have also been very helpful for the beneficiaries.



The survey shows high knowledge retention and practical application in daily life. The awareness program has helped the women to understand their health better and act upon it through changing their food habits and daily life habits.

Graph 3: Indicates reasons for improvement in health conditions of beneficiaries



Graph 4: Indicates specific knowledge gained from awareness sessions

Testimonial

Dr. Swathi Roopa

Dr Swathi Roopa, Medical Officer at Coromandel Hospital, highlighted the deep impact of the program's awareness sessions, emphasising how they translated into real-life learning and behaviour change among participants. She noted that, beyond delivering sessions on nutrition, maternal health, and non-communicable diseases such as diabetes and hypertension, the program ensured that participants retained and applied critical health knowledge.

One particularly powerful instance she shared involved a participant who, after attending a session, realised the importance of monitoring blood sugar levels before adjusting medication. The participant emotionally shared that due to a lack of awareness earlier, she had followed incorrect medical advice and increased her mother's diabetes medication without proper monitoring, which led to a hypoglycemic coma. She expressed that, had she known the importance of monitoring blood sugar levels over time, this situation could have been avoided. This reflects how the session created a lasting understanding of safe health practices and the risks of misinformation.



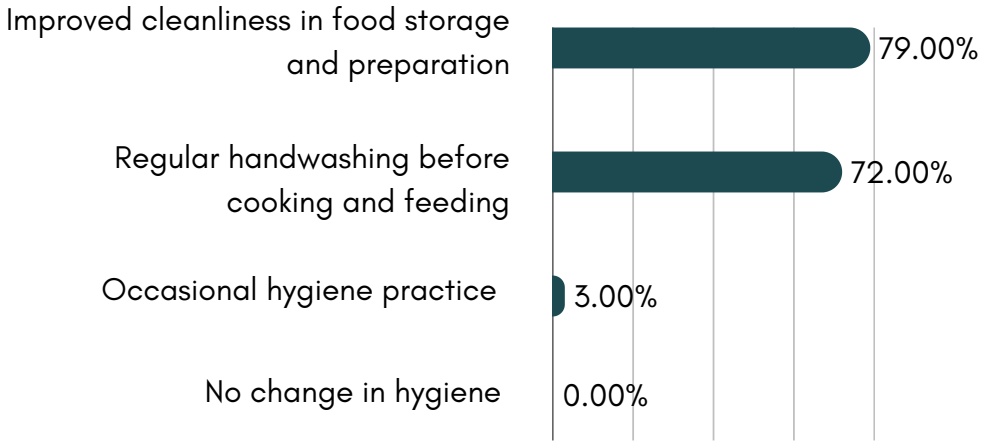
Image 3: Discussion with Dr. Swathi roopa, Kakinada

Dr Swathi also observed improved health-seeking behaviour among women. Many participants began undergoing regular check-ups, including Pap smear tests and antenatal scans, which they previously avoided due to a lack of awareness or financial constraints. The distribution of nutrition kits and counselling further reinforced their understanding of the importance of iron, folic acid, and balanced diets in preventing anaemia and supporting maternal and child health.

3. **Improved Hygiene Practices and Behaviour Adoption**

The survey shows a significant improvement in hygiene practices among participants following the program. A large majority (79%) reported improved cleanliness in food storage and preparation, suggesting increased awareness and adoption of safe food handling practices. Additionally, 72% of respondents reported regular handwashing before cooking and feeding, reflecting a strong uptake of essential hygiene behaviours that are critical for maternal and child health.

What hygiene practice did you adopt after the program?



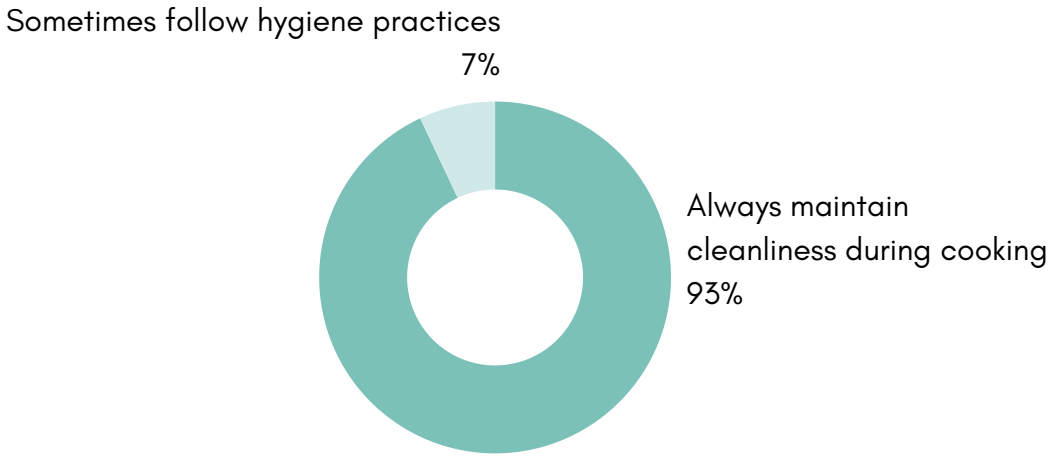
Graph 5: Indicates hygiene practices adopted by the respondents

An overwhelming 93% reported that they always maintain cleanliness during cooking, demonstrating a high level of behavioural change and internalisation of hygiene practices, and 7% reported that they sometimes follow hygiene practices, suggesting that hygiene awareness from the program has had a strong influence on participants' cooking practices



Image 4: A discussion with Lactating mothers at Anganwadi, Kakinada

Did hygiene awareness affected your cooking practices?



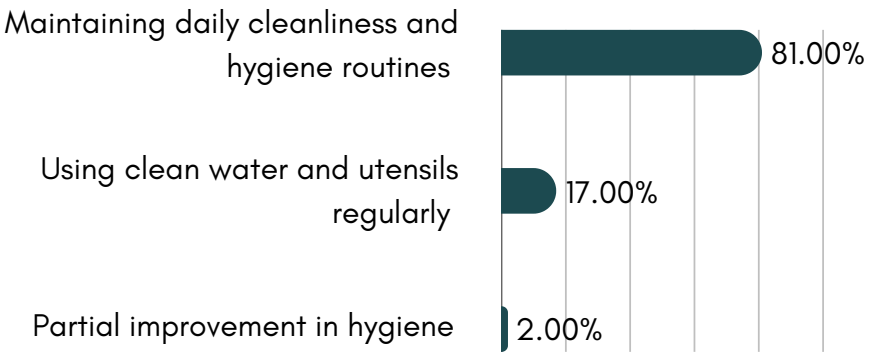
Graph 6: Indicates frequency of following hygiene practices by the respondents



Image 5: A picture during data collection at Harbourpeta, Kakinada

81% reported maintaining daily cleanliness and hygiene routines, indicating sustained adoption of healthy habits. 17% highlighted the regular use of clean water and utensils, which is a critical component of safe hygiene practices. 2% reported partial improvement, and no participants indicated a complete lack of change.

What change have you made in personal hygiene?



Graph 7: Indicates changes made by respondents after awareness

FGD in Surya Rao Peta, Kakinada



Image 6: Picture during Focus group discussion with family members of beneficiaries

Among mothers of pregnant and lactating women in communities reflects significant improvements in health awareness, practices, and outcomes. Mothers reported that family members are now more actively involved in supporting pregnant and lactating women by ensuring proper nutrition, rest, and regular health check-ups. Awareness during sessions and home visits helped families better understand maternal health needs.

FGD findings indicate a clear improvement in haemoglobin (Hb) levels and overall well-being of women after using the nutrition kits provided for anaemia. Mothers highlighted increased energy levels, reduced illness, and better strength. In one case, a mother who previously experienced frequent fainting later discovered she had high BP through program interventions and has since begun treatment. Many mothers also shared that after completing the provided kits, they continued purchasing similar nutritious items from the market to support their daughters during pregnancy and lactation, reflecting sustained behaviour change.

Importantly, the program has helped break traditional myths and improve care practices. Families became aware of the importance of providing adequate rest to pregnant and lactating women. They also overcame misconceptions related to food and fluid intake—earlier, it was believed that drinking excess water after delivery could cause a cold in the child, leading to restricted intake. However, after awareness sessions, families understood the importance of adequate hydration for both mother and child. Additionally, they learned that consuming items like sesame seeds in appropriate quantities can support calcium levels and overall health.

There have also been positive changes in dietary practices, hygiene, and sanitation. Families now follow better nutrition practices and maintain improved cleanliness at home. Lactating mothers demonstrated better breastfeeding and childcare practices. Overall, the program has led to improved health outcomes, increased awareness, and stronger family support systems. Respondents found nutrition kits, home visits, and awareness sessions highly useful and suggested increasing follow-ups and practical demonstrations to further strengthen the program's impact.

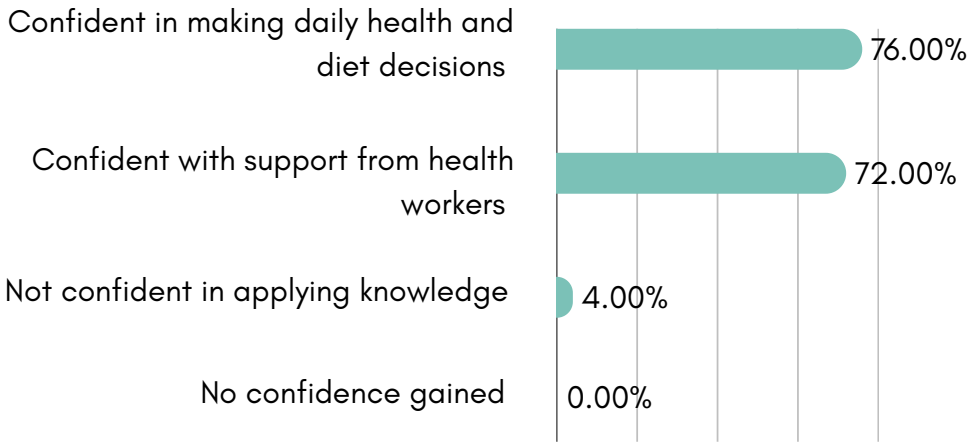
4. Strengthened Confidence in Personal Health Management

The project has helped beneficiaries confidently manage their own health during pregnancy. 76% reported being confident in making daily health and dietary decisions independently, suggesting that the session effectively enhanced practical knowledge and self-reliance. Similarly, 72% of participants expressed confidence when supported by health workers, highlighting the continued importance of frontline health functionaries such as ASHA and ANM workers in reinforcing health practices and providing guidance.

79% reported increased strength and reduced tiredness, indicating that the intervention effectively enhanced overall energy levels and reduced fatigue among pregnant and lactating women.

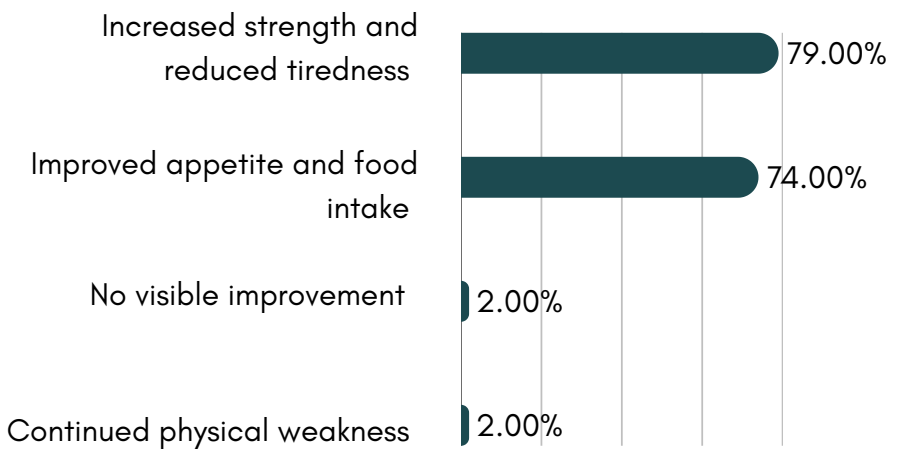
74% of respondents observed an improvement in appetite and food intake, reflecting positive changes in nutritional behaviour and possibly better awareness of dietary needs during this period.

Did you feel confident in managing your health during pregnancy/lactation after the awareness session? (Multi select)



Graph 8: Indicates confidence of mothers in managing health after session

Did you notice physical improvement after the program?(Multi select)



Graph 9: Indicates specific physiical improvement in health after program

Case Study | of Subhalaxmi (disabled pregnant woman)

Mrs. Subba Lakshmi

30-year-old

A woman from a rural village in Kakinada district is currently eight months pregnant. She belongs to a low-income family and has been facing multiple challenges due to her physical disability, which limits her mobility and makes it difficult for her to travel frequently to health centres. Because of her condition, she depends mostly on her family members for support in daily activities and healthcare visits.

During her pregnancy, Subba Lakshmi experienced severe weakness, dizziness, breathlessness, and continuous fatigue. She also complained of poor appetite and difficulty in performing routine household work. When she visited the local health centre for a regular antenatal check-up, the medical staff conducted a haemoglobin test. The results showed that her haemoglobin (Hb) level was critically low at 6 g/dL, indicating severe anaemia. The health workers explained that such a low Hb level could be dangerous for both the mother and the unborn baby, increasing the risk of complications such as preterm delivery, low birth weight, and excessive bleeding during childbirth.



Image 7: A picture of Mrs. Subhalaxmi

At this stage, the implementing partner identified Lakshmi as a high-risk beneficiary and provided her with a maternal health and nutrition support kit. The kit included essential items such as nutrition-based food support, hygiene-related materials, and awareness guidance on balanced diet practices. Along with the kit, she received counselling on the importance of consuming iron-rich foods such as green leafy vegetables, jaggery, dates, pulses, and eggs, and on avoiding tea or coffee immediately after meals, as they reduce iron absorption. She was also advised to take the supplements regularly and maintain adequate hydration.

Lakshmi followed the instructions carefully and started using the kit consistently. Her family members also supported her by ensuring she consumed nutritious meals and took the supplements on time. Regular follow-ups were conducted by the implementing partner and health workers to monitor her condition. Gradually, Lakshmi began to feel improvement in her energy levels. Her appetite improved, and she experienced reduced dizziness and weakness. She also became more confident about her pregnancy and, with her family's support, started attending antenatal check-ups more regularly.

After continued use of the kit and adherence to the nutrition guidance, Lakshmi's haemoglobin levels were retested during her eighth month of pregnancy. The results showed a significant improvement, with her Hb levels increasing from 6 g/dL to 11 g/dL. This remarkable improvement reduced her risk of pregnancy-related complications and ensured better health outcomes for both the mother and the baby.

Lakshmi expressed her happiness and gratitude towards the implementing partner for providing timely support. She stated that the kit and the guidance helped her regain strength and confidence during pregnancy. She also mentioned that earlier she was worried about her delivery due to her low Hb levels, but now she feels safer and more hopeful. This case highlights the importance of early identification of high-risk pregnant women, timely nutritional intervention, and continuous follow-up support in improving maternal health outcomes, especially for women with disabilities.

During a conversation with Subbalakshmi, she shared an inspiring message for people with and without disabilities. She strongly believed that no one should completely depend on others for their life decisions. According to her, with hard work, determination, and confidence, a person can achieve anything, even in the face of physical challenges. She emphasized that disability should never be treated as a limitation to living a meaningful and successful life.

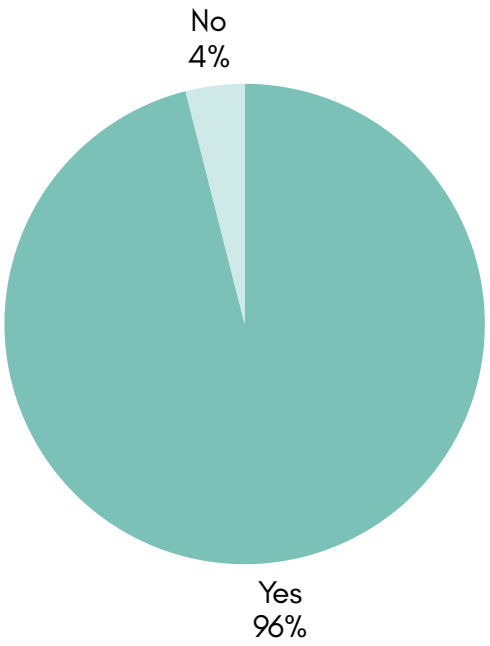
Subbalakshmi also shared that her journey was not easy. In the beginning, even her parents were not supportive of her decisions, especially when it came to marriage and her future life. She faced many emotional struggles because people around her often doubted her abilities. She mentioned that she was criticised and questioned repeatedly by society during her marriage. Many people asked her discouraging questions like, "Do you really want to get married?" "Why do you need marriage?" and "With your disability, what can you do in life?"

However, Subbalakshmi did not allow such negative words to break her confidence. She chose not to listen to the criticism and instead followed her heart. She made her own decision and married a person who also lives with a disability. She proudly shared that today, both of them are living happily, supporting each other, and proving that disabilities cannot stop someone from leading a successful and joyful life.
She further mentioned that this pregnancy is very special for her because it is her first child. She expressed great happiness and hope for her future. Subbalakshmi wanted to give a strong message to society that every person has the right to dream, to love, to marry, and to live independently, regardless of physical limitations.

5. **Improvement in childcare practices**

During the survey, 97% reported that they took part in these activities, demonstrating strong engagement and outreach of the program among the target population.

Did you take part in the Child wellbeing awareness activities?



Graph 10: Indicates participation in child wellbeing awareness

The survey indicates 67% reported adopting regular immunisation and health check-ups, reflecting increased awareness of preventive healthcare for children. Similarly, 66% of participants reported increased feeding frequency, suggesting a better understanding of infants' nutritional needs. Around 43% noted improvements in feeding practices, indicating positive changes in the quality and method of child feeding. Around 35% of respondents reported maintaining hygiene during childcare, highlighting an important shift towards safer caregiving practices, though this area shows relatively lower adoption compared to others and may benefit from further emphasis.



Image 8: A gathering for childcare session at Harbourpeta

Testimonial

Simhadri Surada

"My name is Simhadri Surada, and I am working as an ASHA worker in my village, Vakalapudi, in Kakinada. My role involves visiting households, identifying and supporting pregnant women, lactating mothers, and young children, and ensuring they receive essential services such as immunisation, growth monitoring, and nutrition support. I also counsel families on infant and young child care practices, hygiene, and timely healthcare-seeking.

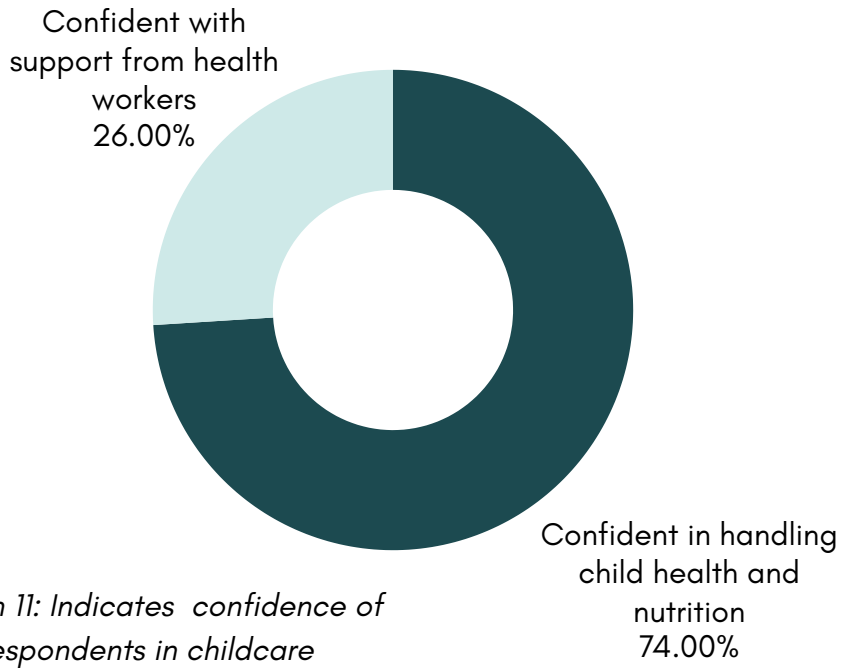
Through the Svasthya & Mamta program, with support from the implementing partner, I have mobilised more mothers and caregivers for child health awareness sessions and services. The availability of IEC materials and support in organising activities has strengthened my ability to reach families and promote better childcare practices.

I have observed significant improvements in child healthcare practices within the community. More families are ensuring regular immunisation, timely health check-ups, and improved feeding practices for children. There is increased awareness about child nutrition, hygiene during childcare, and the importance of early care-seeking when a child is unwell. Although some challenges, like traditional beliefs and irregular participation, still exist, continuous follow-up and engagement have helped build trust among families. Overall, this program has strengthened my work and contributed to improved childcare practices and better health outcomes for children in the community.



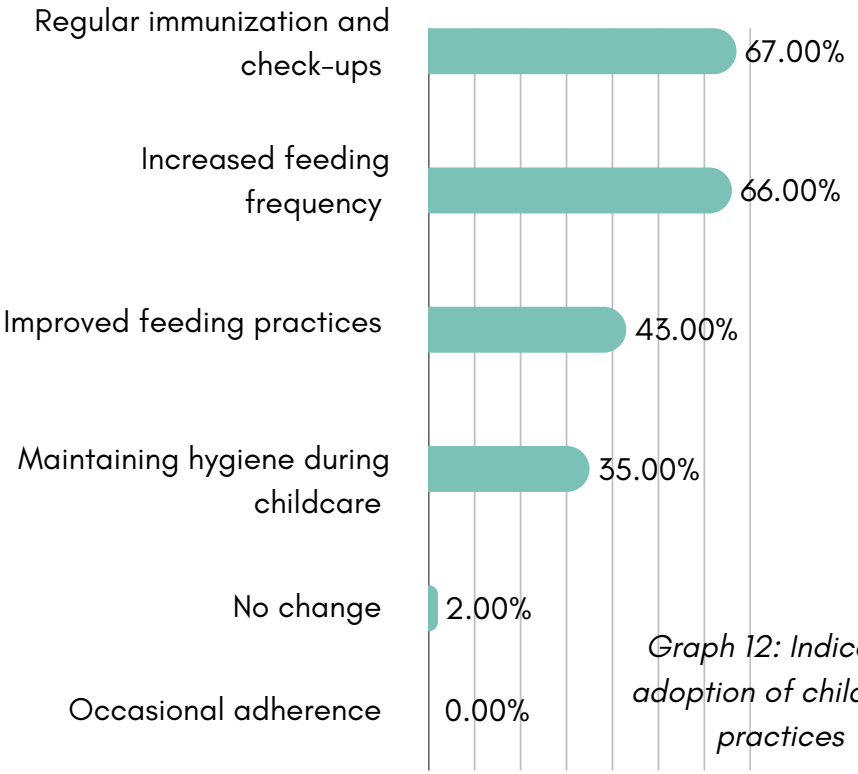
Image 9: A picture of one to one childcare tips session

How has your confidence in taking care of your child changed after the program?



Graph 11: Indicates confidence of respondents in childcare

What childcare practice have you adopted?



Graph 12: Indicates adoption of childcare practices



Image 10: Community discussion during field visit

Adolescent girls

1. Improved understanding of Menstruation as a process



Image 11: A picture during data collection of School students at Kakinada

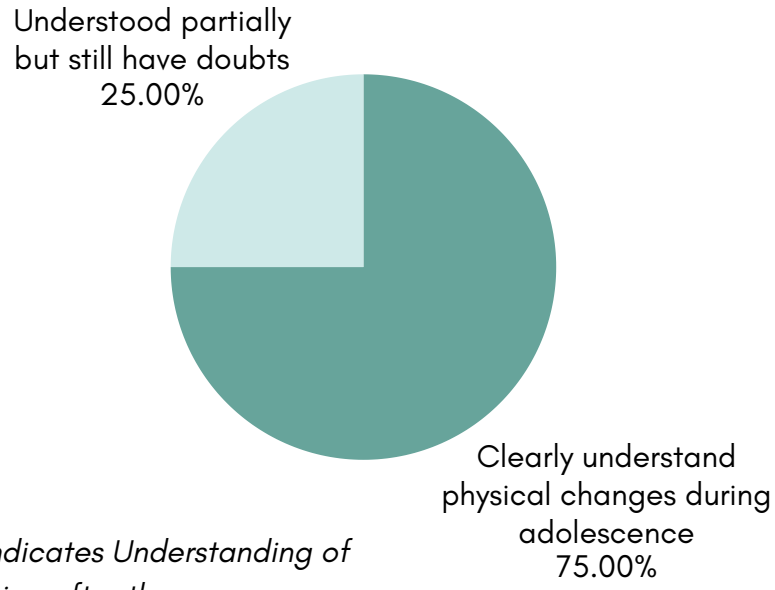
All participants (100%) reported that they attended the full session, indicating excellent coverage and engagement.

Did you attend the menstrual awareness session conducted under the program?

100%

Attended full session

How has your understanding of mestruation improved after attending the awareness session?



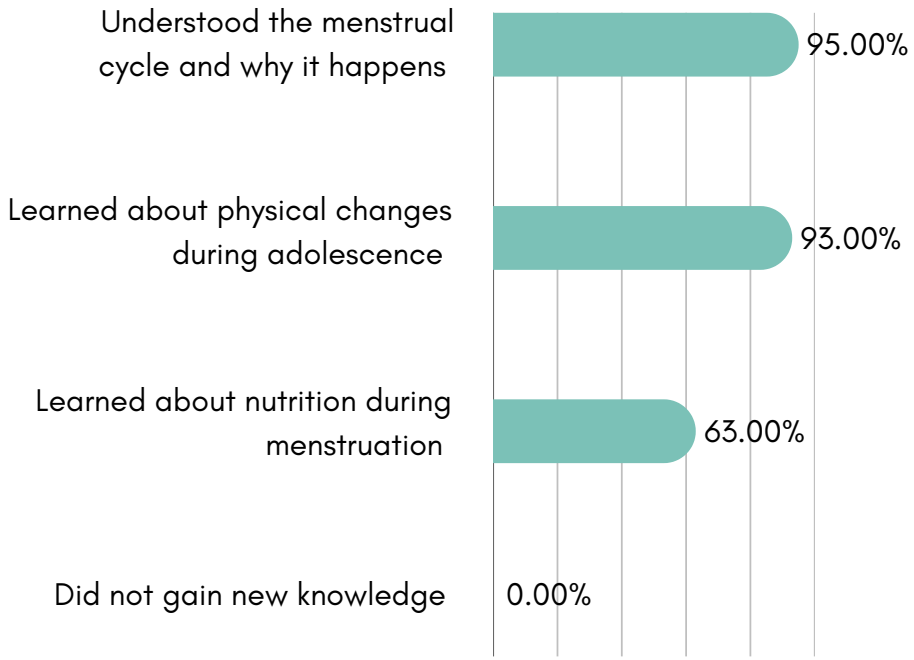
Graph 13: Indicates Understanding of menstruation after the awareness session



Image 12: A picture during focus group discussion with Beneficiary family members

95.00% understood the menstrual cycle, and 93% learnt physical changes during adolescence. Over half 63% learned about nutrition during menstruation. Notably, no participants reported a lack of new knowledge, indicating the session was highly effective.

- **(if yes) What new knowledge did you gain from the awareness session?**



Graph 14: Indicates new knowledge gained from menstrual awareness session



Image 13: Focus group discussion with school teachers

Focus Group Discussion (FGD) with Teachers – Vakalapudi High School

A Focus Group Discussion was conducted with teachers of Vakalapudi High School to understand their perspectives on the menstrual hygiene awareness sessions conducted under the program. Overall, teachers expressed that the sessions were highly useful and informative for adolescent girls, helping them understand menstruation as a normal biological process.

Teachers observed noticeable improvements in menstrual hygiene practices among students. They reported that girls began using sanitary pads correctly, maintaining better personal hygiene, and properly disposing of used pads. Improvements were also seen in the cleanliness and maintenance of school washrooms.

The discussion highlighted a positive shift in attitudes and confidence among students. Teachers noted a reduction in fear, shame, and hesitation related to menstruation, along with better clarity in addressing myths and misconceptions. Girls were found to be more open in discussing menstrual issues and more comfortable approaching female teachers for support.

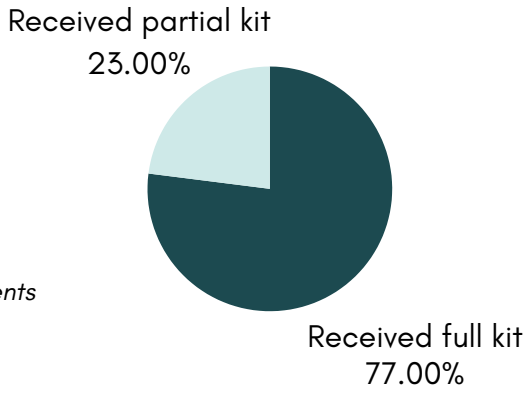
Teachers also reported improved school attendance and participation during menstrual days, with girls actively engaging in classroom activities. The nutrition component of the session was appreciated, as students became more aware of the importance of iron-rich foods, a proper diet, and hydration during menstruation. Additionally, students demonstrated better understanding of when to seek medical help for menstrual concerns.

Teachers strongly recommended that such awareness sessions be conducted regularly and introduced as early as the 7th standard. They emphasised the need to expand the program to other schools, particularly across the four mandals of Kakinada—Vakalapudi, Harbour Peta, Valasa Pakala, and Suryarao Peta, to ensure wider impact. They also suggested involving parents in future sessions to strengthen awareness and support at the household level.

2. Improved confidence in menstruation management practices

77% reported receiving the full kit, suggesting effective distribution and coverage of essential materials such as sanitary napkins and handwash.

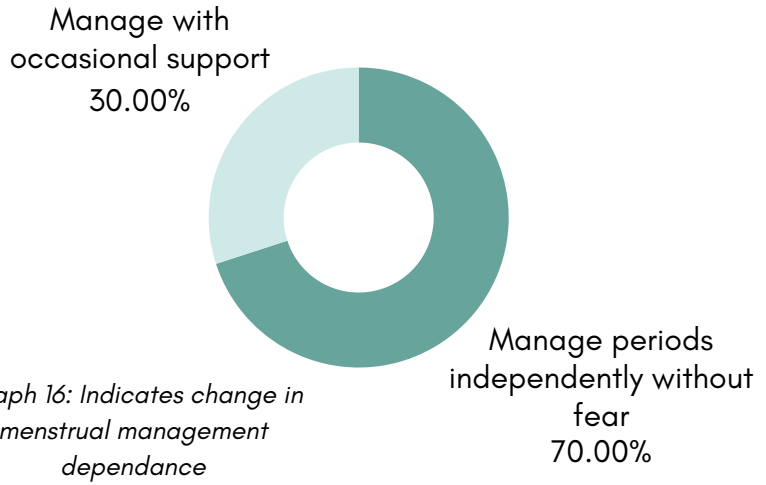
Did you receive the menstrual health managemet (MHM) Kits?



Graph 15: Indicates percentage of respondents recieving MHM kits

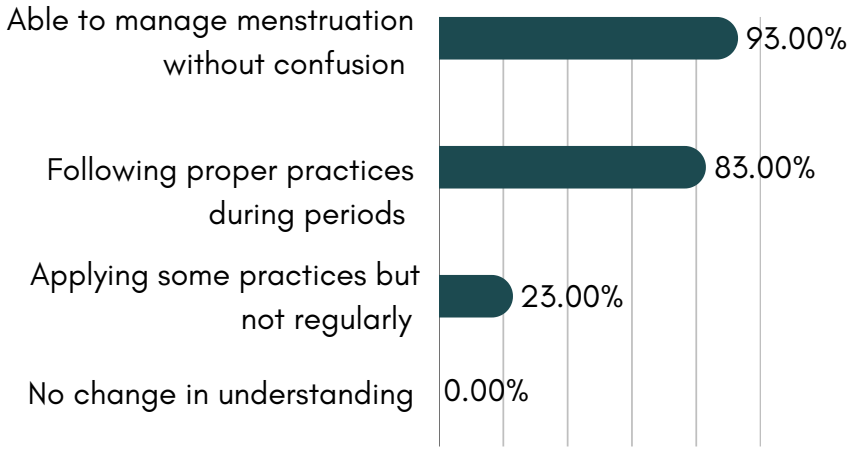
93% reported being able to manage menstruation without confusion, and 83% followed proper practices during periods. A smaller group 23% applied practices inconsistently, while none reported no change, highlighting effective behaviour change.

Have you experienced change in your dependance in managing menstruation?



Graph 16: Indicates change in menstrual management dependance

How did this project help you make changes in your menstruation management practices?

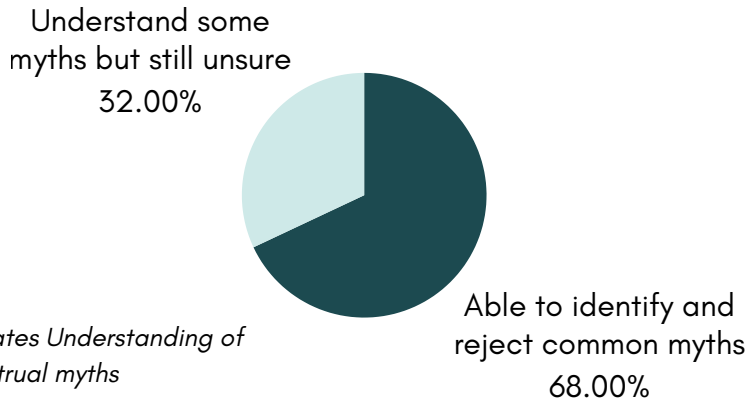


Graph 17: Indicates role of the project in helping the respondents to manage menstruation

3. Changes in clear understanding of menstrual myths

68% reported being able to identify and reject common myths, indicating effective awareness building. Meanwhile, 32% understood some myths but remained unsure, suggesting the need for continued reinforcement. Overall, the project contributed to improved critical understanding of menstrual misconceptions.

Has your understanding of menstrual myths changed after the project?

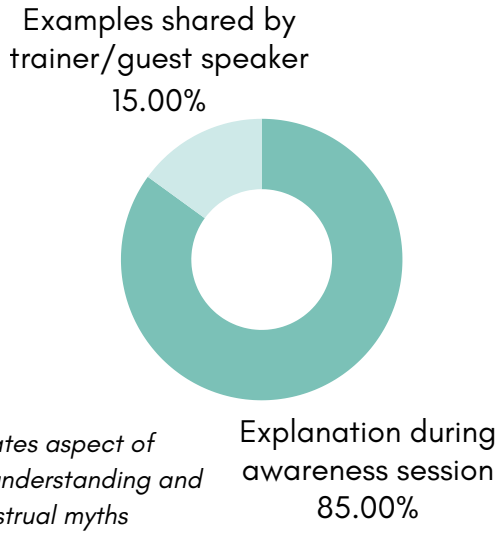


Graph 18: Indicates Understanding of menstrual myths

The awareness session played a key role in addressing menstrual myths. A large majority of participants (85.00%) reported that explanations during the session helped them understand and reject misconceptions.

15.00% credited examples shared by trainers or guest speakers. Overall, the results emphasise the effectiveness of structured sessions and interactive learning in improving understanding.

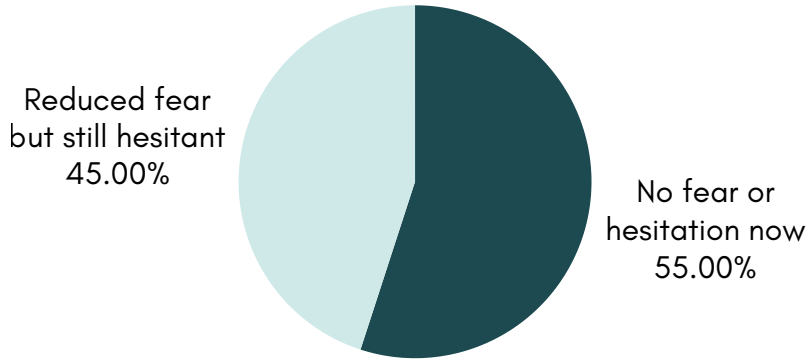
What helped you understand and reject menstrual myths?



Graph 19: Indicates aspect of program helped in understanding and rejecting menstrual myths

55% reported having no fear or hesitation, while 45% experienced reduced fear but still some hesitation, suggesting positive progress with scope for further confidence-building.

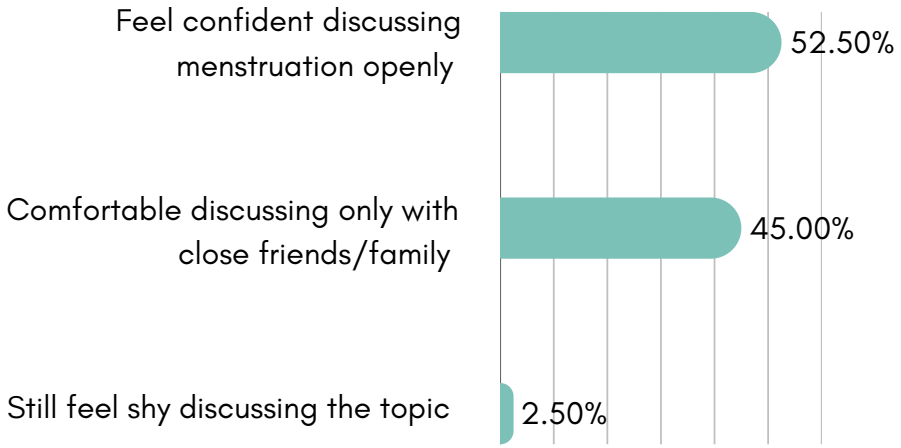
Has your fear/hesitation regarding menstruation changed?



Graph 20: Indicates fear/hesitation iregarding menstruation

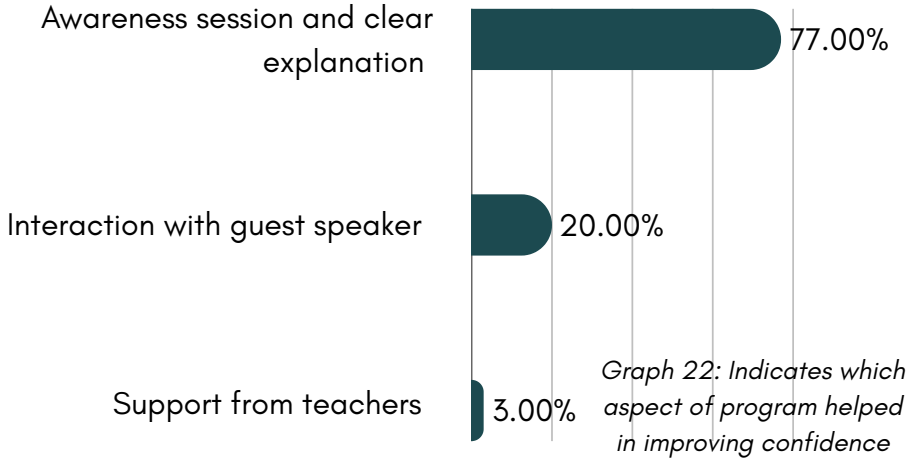
52.5% reported feeling confident discussing menstruation openly, while 45% were comfortable discussing it within close circles such as friends and family. Only a small proportion 2.5% still felt shy discussing the topic. This Indicates an improvement in confidence in discussing menstruation after the program.

Has your confidence in discussing menstruation changed after the program?



Graph 21: Indicates confidence of respondents in discussing menstruation

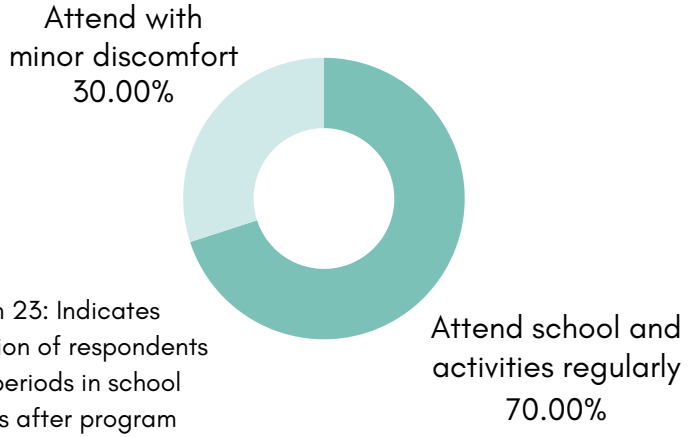
What helped improve your confidence the most?



Graph 22: Indicates which aspect of program helped in improving confidence

70.00% reported attending regularly, while 30.00% attended with minor discomfort. Overall, the results indicate a positive shift toward continued engagement during menstruation.

Has your participation in school/activities changed during periods after the program?



Graph 23: Indicates participation of respondents during periods in school activities after program



Image 14: A picture of Mrs. Priyanka

During a conversation with Mrs Priyanka, she shared, "Among adolescent girls, awareness about menstrual health and hygiene has improved significantly. More girls are using proper menstrual hygiene products and are more confident in discussing these topics.

There has also been a gradual reduction in stigma around menstruation. While some traditional beliefs still exist, openness has increased, and conversations are becoming more normal within families and the community.

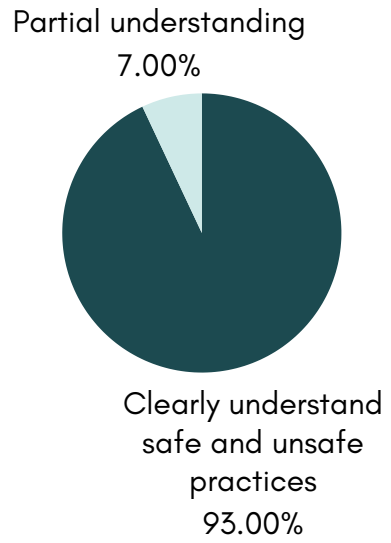
The community has actively participated in program activities, including awareness sessions and events. Attendance has improved over time as people started seeing the benefits."

As a community member, I have supported the program by encouraging participation, spreading awareness, and motivating families to attend sessions and utilise services. Other local leaders have also played a role in building trust and promoting these activities.

4. High Adaptation of menstrual hygiene practices

During the survey, 93% reported clearly understanding safe and unsafe practices, while 7% had only partial understanding. Overall, the results indicate strong effectiveness of the program in building awareness.

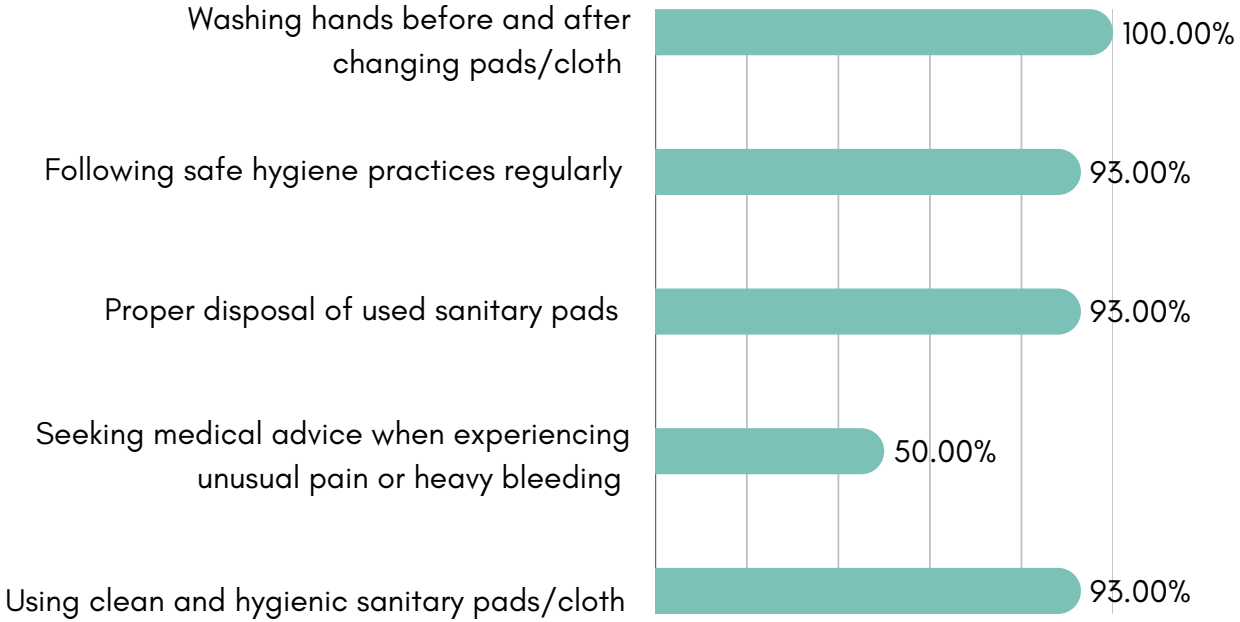
How has your understanding of safe menstrual practices changed after program?



Graph 24: Indicates change in understanding of menstrual practices after the program

100.00% reported washing hands before and after changing pads or cloth, reflecting excellent hygiene behavior. 93% also followed safe hygiene practices regularly and ensured proper disposal of used sanitary products.
50.00% reported seeking medical advice for unusual pain or heavy bleeding, indicating moderate awareness of when to access healthcare. 93% reported using clean and hygienic sanitary pads regularly.

What healthy practice have you adopted during menstruation?



Graph 25: Indicates adoption of healthy menstrual management practices during periods by respondents



Image 15: A picture of renovated Anganwadi

Project Mamta

Project Mamta is an initiative aimed at strengthening early childhood care infrastructure by reconstructing and upgrading Anganwadi Centres. The Coromandel team has successfully renovated 7 Anganwadis and constructed 2 new Anganwadis. Recognising the critical role Anganwadis play in delivering essential services such as nutrition, preschool education, and maternal and child health support, the project focuses on creating safe, functional, and child-friendly spaces for beneficiaries.

The project had two major focuses



Image 16: A new Anganwadi under construction





Image 17: Pictures of reconstructed Anganwadis

1. **Expansion of Space and Promotion of Kitchen Gardens**

Under Project Mamta, the expansion of Anganwadi infrastructure has been a key focus, with many centres being redesigned to include larger and more functional spaces. The increased accommodation area has improved the overall usability of the centres, allowing for better organization of activities such as preschool education, nutrition distribution, and health sessions without overcrowding.

An important outcome of this expanded space has been the introduction of kitchen gardens in several Anganwadi centres. With additional outdoor or adjoining land now available, centres have been able to cultivate small gardens to grow fresh vegetables and herbs. These kitchen gardens not only supplement the nutritional needs of children and mothers by providing fresh and locally grown produce but also serve as a practical learning space to promote awareness about nutrition and sustainable practices.



Image 18: Pictures of different plants donated by beneficiary mothers to the Anganwadi

Testimonial

Kanaka Mahalaxmi

Kanaka Mahalaxmi shared that the reconstruction of the Anganwadi center has brought meaningful improvements to the space and its use. With the expansion and better planning of the centre, they were able to utilize the available area to develop a small kitchen garden.

She highlighted that what makes this initiative special is the contribution from the community itself. Mother beneficiaries actively participated by donating plants for the garden, including brinjal, banana trees, mulberry, and avocado. This collective effort has created a sense of ownership and pride among the families.

According to her, the kitchen garden not only enhances the surroundings of the Anganwadi but also supports better nutrition awareness for children and mothers. It serves as a practical example of growing fresh and healthy food locally. She expressed that the improved infrastructure has enabled such activities, making the Anganwadi a more vibrant and resourceful space for the community.



Image 19: A picture of Kanaka Mahalaxmi

2. **Ensuring All-Day Water Supply and Improved Sanitation**

A key component of Project Mamta has been providing a reliable, all-day water supply across Anganwadi centres. Access to continuous, safe water has significantly improved the functionality of these centres, enabling the regular preparation of nutritious meals, maintaining hygiene, and supporting daily activities without disruption. It has also reduced the burden on workers who previously had to arrange water from external sources.

In addition, the project has emphasised the construction and maintenance of cleaner, functional toilets. Upgraded sanitation facilities have created a safer and more dignified environment for children, pregnant women, and lactating mothers. Regular cleaning practices and improved infrastructure have contributed to higher hygiene standards, helping reduce the risk of infections and promoting healthy habits among beneficiaries.



Image 20: A picture of school kitchen

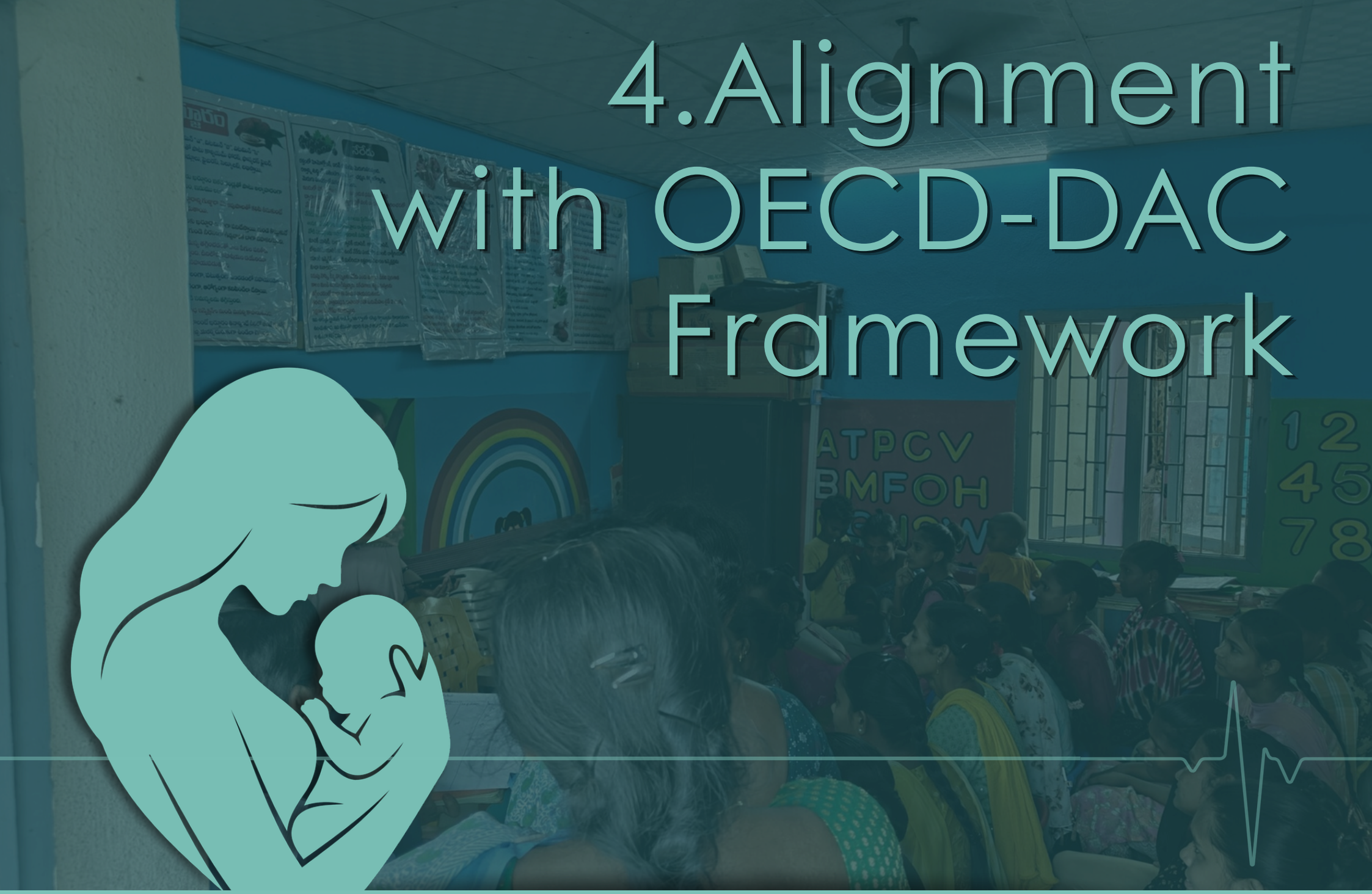


Image 21: A water tank near a newly constructed Anganwadi



Image 22: A picture of District people's council Highschool

4.Alignment with OECD-DAC Framework





Relevance

The project is highly relevant to the health and nutritional needs of adolescent girls and lactating mothers in the target villages of Kakinada, as it addresses critical issues such as menstrual hygiene awareness, anaemia, reproductive health education, and maternal nutrition. The interventions are tailored to local community needs identified through field-level assessments.



Coherence

The program is coherent with national health priorities and government schemes such as POSHAN Abhiyaan, Anaemia Mukt Bharat, RKSK, and Menstrual Hygiene Scheme. It complements existing public health systems by strengthening linkages with ASHAs, ANMs, and Anganwadi Workers, ensuring coordination rather than duplication of services.



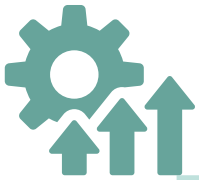
Effectiveness

The project demonstrates effectiveness through measurable outcomes, including increased awareness of menstrual hygiene, improved nutrition knowledge among women, enhanced confidence among adolescent girls, and better access to essential health resources, such as menstrual hygiene kits and iron supplements.



Efficiency

Resources have been utilised efficiently through targeted delivery mechanisms, including community health camps, structured awareness sessions, and direct distribution of kits to identified beneficiaries. The involvement of local frontline workers and community groups improves outreach while minimising operational inefficiencies.



Impact

The project has contributed positively to behavioural and health changes among beneficiaries, including improved menstrual hygiene practices, increased nutritional awareness, a reduction in stigma around menstruation, and strengthened maternal health support. These outcomes enhance both immediate well-being and long-term community health resilience.



Sustainability

Sustainability is strengthened through the creation of Mother Groups and Peer Educators, which promote continued community ownership and behaviour change beyond the project period. Capacity building among local health workers and awareness on reusable menstrual products further support the long-term continuation of the benefits.

Alignment with the Sustainable Development Goals

SDG	Relevant SDG Target(s)	Project Alignment / Contribution
	3.1 Reduce maternal mortality; 3.7 Universal access to reproductive healthcare; 3.8 Access to essential health services	The project improves maternal and adolescent health through iron supplementation for lactating mothers, menstrual health awareness sessions, reproductive health education, health camps, and regular health check-ups.
	5.6 Universal access to reproductive health and rights; 5.b Empower women through enabling knowledge and technology	By educating women and adolescent girls on menstrual hygiene, reproductive health, personal safety, and cyber safety, the project strengthens health agency, dignity, and informed decision-making among female beneficiaries.
	6.2 Access to adequate sanitation and hygiene, especially for women and girls	The menstrual hygiene component promotes safe sanitation practices, hygienic menstruation management, and awareness of proper menstrual product use.
	4.7 Ensure inclusive and equitable education and promote life skills for sustainable development.	Strengthened school-based health education, improved health literacy, increased confidence and awareness among adolescent girls, and creation of safer, more supportive learning environments.

Allignment with National Programs

National Programme / Scheme	Implementing Ministry / Agency	Project Alignment / Contribution
POSHAN Abhiyaan (National Nutrition Mission)	Ministry of Women and Child Development	The project supports the reduction of anaemia and malnutrition among lactating mothers and adolescent girls through iron supplementation, nutrition awareness, and health monitoring, directly contributing to improved maternal nutrition outcomes.
Anemia Mukt Bharat (AMB)	Ministry of Health and Family Welfare	By providing iron supplements to lactating mothers and promoting nutrition education among women and adolescent girls, the project contributes to reducing anaemia prevalence among vulnerable female populations.
Menstrual Hygiene Scheme (MHS)	National Health Mission (NHM)	The distribution of free menstrual hygiene kits and menstrual awareness sessions for adolescent girls aligns with the scheme's goal of improving menstrual hygiene practices in rural areas.
Rashtriya Kishor Swasthya Karyakram (RKSK)	Ministry of Health and Family Welfare	The adolescent health education component on menstrual hygiene, reproductive health, nutrition, personal safety, and cyber safety directly supports RKSK's adolescent health promotion objectives.
Pradhan Mantri Matru Vandana Yojana (PMMVY)	Ministry of Women and Child Development	The maternal health interventions complement PMMVY's focus on improving maternal care, safe motherhood, and health support for pregnant and lactating women.
Integrated Child Development Services (ICDS) / Saksham Anganwadi	Ministry of Women and Child Development	The project strengthens coordination with ASHAs, ANMs, and Anganwadi Workers, reinforcing grassroots maternal-child health and nutrition service delivery systems.

4.Recommendations





Expand reach to pregnant and lactating women

Increasing the program's coverage to include more pregnant and lactating women, especially those in remote or underserved areas, may further improve maternal and child health outcomes. Targeted identification of high-risk beneficiaries and ensuring their inclusion can help reduce gaps in service delivery and strengthen overall impact.

Including adolescent boys in awareness sessions

Conducting awareness sessions for adolescent boys may help create a more supportive and informed environment around adolescent health, hygiene, and gender-related issues. Their inclusion can help reduce stigma, encourage respectful attitudes, and promote shared responsibility within the community.

Increase frequency of awareness programs and sessions

Organising more frequent awareness sessions and follow-ups may help reinforce key messages and improve knowledge retention among beneficiaries. Regular engagement can support sustained behaviour change, address emerging gaps, and ensure continuous community participation.

5. Conclusion



What Changed

The project led to improved maternal and child health practices, greater uptake of nutrition, and increased awareness of hygiene and menstrual health. Strengthened Anganwadi infrastructure and community-based platforms enhanced service delivery and participation. There was also a visible shift in confidence, health-seeking behaviour, and engagement among women and adolescent girls.

Why It Matters

These changes are critical for reducing risks such as anaemia, poor maternal health, and unsafe hygiene practices. Improved awareness and behaviour directly contribute to better health outcomes for mothers, children, and adolescents. Strengthening community systems ensures that these benefits are sustained beyond the project period.

What Remains to Be Addressed

Some gaps persist in consistent participation, especially among certain groups, due to cultural beliefs and limited awareness. Continued focus may help reinforce behaviour change, improve access to comprehensive resources, and address misconceptions. Reaching the most vulnerable populations consistently remains a challenge.

Strategic Way Forward

Scaling up the program across more areas and strengthening convergence with health systems will enhance impact. Regular follow-ups, refresher awareness sessions, and deeper community engagement, including involvement of families, will be essential. Sustaining peer educator networks and mother groups can ensure long-term behaviour change and community ownership.

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