



FOODSHAALA
FOUNDATION

IMPACT REPORT

2020-2021



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ABOUT US

WHO WE ARE

Foodshaala Foundation is a Section 8 company working in the area of food, nutrition and health



VISION

We envision a world where every person is able to make healthy food a part of their daily life

MISSION

Our mission is to enable people to choose and access healthy food

GOALS

We aim to:

1. increase access to affordable healthy food inside and outside the household; and
2. empower people to make healthier food choices



THE PROBLEM

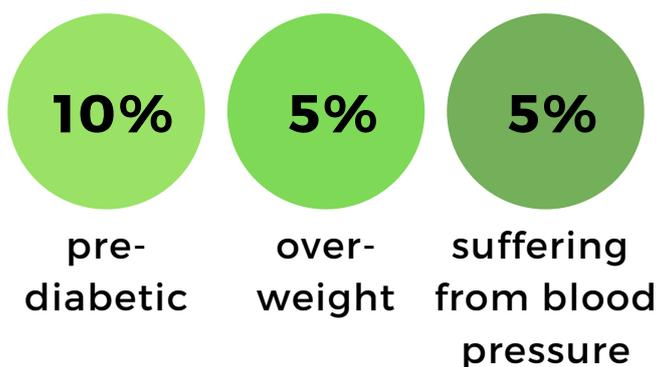
THE BIG PICTURE

Food and nutrition insecurity is one of the biggest problems India is facing

Malnutrition is one of the biggest problems in India. While malnutrition affects everyone, children are the worst affected as they miss out on right nutrition during their development age. In India, there is a prevalence of all three types of malnutrition:

undernutrition (lack of proper nutrition), **overnutrition** (overconsumption of certain nutrients) and **micronutrient deficiency** or **hidden hunger** (deficiency of one or more micronutrients).

The 2019 Comprehensive National Nutrition Survey (CNNS) revealed that chronic lifestyle diseases are now affecting even **schoolchildren and adolescents**, with:



Malnutrition is especially high among low-income communities, and further pushes people into poverty. Adults undernourished as children are estimated to **earn at least 20% less** than adults who were healthy (CNNS).

Poor diet is a leading cause of malnutrition.

There is often lack of both awareness on and access to healthy food among low-income communities. It is also perceived that nutritious food is costly and poor in taste, with lack of knowledge on affordable nutrition or tasty and healthy low-cost recipes. At the same time, unhealthy foods such as fast food and packed junk food are available at low prices, and widely consumed. People don't always realize the harmful effects of such food, especially on children.

There is a problem of both **access and awareness** around healthy eating.

SURVEY FINDINGS

Survey to understand the knowledge, behaviour, and attitude of children towards health food

We are working with children from urban slum areas, where we noticed both these aspects, namely, poor awareness and poor access. We conducted a survey of children (9-16 years) studying in affordable private schools in Nathupur village, Gurugram. A total of 83 children (45 girls and 38 boys) responded. A snapshot of the findings is below:

Knowledge

Children lacked basic knowledge of nutrition, and could not answer knowledge based questions correctly.

2/3rd of the children could not even correctly identify junk food from a list of healthy foods and junk foods.

Behaviour

Around half the children are not consuming balanced meals regularly, and are missing important food groups like pulses, fruits and vegetables.

21% of the children are not having vegetables at all or just having them 1-2 times in a week.

This lack of diet diversity is accompanied by a regular consumption of junk food.

67% of the children reported that they consumed junk food at least once a week.

Attitude

Children's overall response towards eating healthy is very encouraging.

93% children showed interest in changing their their eating habits.

Despite poor knowledge and behaviour towards healthy eating currently, children hold a great potential towards shifting to healthier diets.





**OUR
SOLUTION**

WHAT WE DO

Our activities are aligned with the mission of enabling people to **choose** and **access** healthy food

We address the problem by working on both pillars of **access** and **awareness**. Our work is guided by the following two **principles**:

Empowering the people

We strive to implement activities that lead to empowerment of people. Our aim is to enable people to meet their own needs over time, and reduce their dependence on external support.

Ensuring sustainability

We develop solutions that are sustainable, thus trying to address the root cause of the problem to bring about long-term sustainable change.

Accordingly, we are undertaking activities that involve awareness and behaviour change, in order to develop demand for healthy and nourishing food among low-income communities. At the same time, we are working towards building structures that enable the community to supply healthy food to meet this demand.



OUR WORK

Our primary activities include the following

- 01 Behaviour Change among Children**

We conduct programs for children to create nutrition awareness and induce behaviour change towards healthy eating.
- 02 Community Nutrition Awareness**

We conduct programs for parents and others in the community, to spread knowledge on food and nutrition.
- 03 Healthy Food through Community Kitchen**

We provide affordable healthy meals to children in affordable private schools. Meals are prepared in community kitchens where local women are employed and trained.
- 04 Food & Nutrition Advisory Work**

We work with the government and other organizations to provide advice on food and nutrition related matters.
- 05 Relief Initiatives**

We contributed in COVID relief drives to provide food, milk packets hygiene kits, and access to travel to 1000s of people across India.



PROGRAMS IN 2020-21

WHAT WE DID

Marked by COVID, 2020-21 was a year like no other and required a shift in our activities. A list of our major programs is below.



School Nutrition Awareness Program

An online program for children to improve their knowledge on nutrition and induce behaviour change towards healthy eating



COVID Relief Work

Various initiatives including providing milk and supplementary nutrition to children in Delhi, and facilitating food, travel and health kits for migrant workers pan-India



Research & Advisory Work

Research and advisory work to support improved interventions on food and nutrition by us, the government and other organizations



Online Activities for Nutrition Awareness

Various initiatives including writings, healthy recipes and cooking sessions



SCHOOL NUTRITION AWARENESS PROGRAM

PROGRAM OVERVIEW

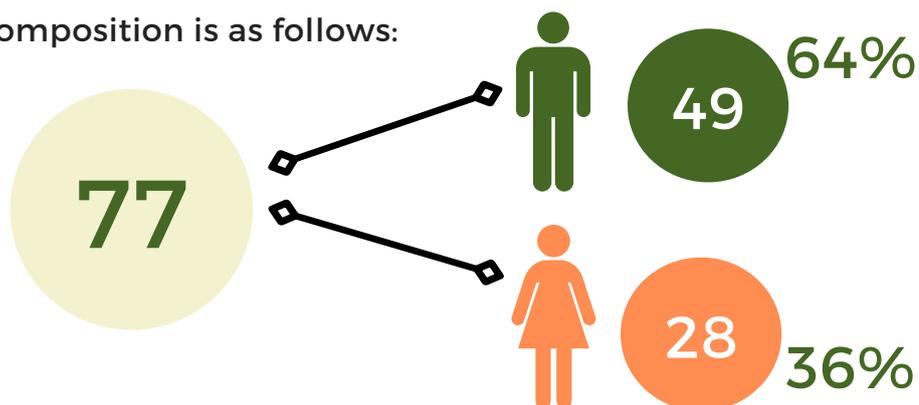
We conducted the School Nutrition Awareness Program during Jan - Mar 2021. Due to COVID restrictions, the program was conducted online. The program details are as follows:

Objectives

1. To improve knowledge about healthy food and eating habits among children
2. To induce behaviour change among children towards healthy eating habits
3. To enable children to prepare simple, healthy and tasty recipes
4. To empower children to take initiatives towards health and nutrition within their homes, schools and community ecosystems

Beneficiaries

The program beneficiaries included 77 Class 7 students from 12 to 14 years of age. The students are studying in VIDYA School, Nathupur village, Gurugram, Haryana, a non-profit organization to provide education to children from low-income families. The student composition is as follows:



PROGRAM STRUCTURE

The Program has two major components:
Workshops and 21-Day Challenge



Workshops

The program included 5 weekly Workshops of 1 hour each, delivered to the students online. The Workshops covered topics like macro and micro nutrients,

diet diversity, junk food, healthy recipes and cooking tips, and others. The Workshops included theoretical aspects, but included practical tips and exercises. Post-Workshops quiz allowed students to test their theoretical knowledge, and post-Workshop challenge allowed them to practically apply the learnings.

21-Day Tummy Tracker Challenge

The Workshops were followed by a 21-day Tummy Tracker Challenge, open to interested students. This involved

a self-exploratory and easy-to-follow challenge which allowed students to track their eating habits and incentivized them to adopt their healthier eating habits. The students recorded their weekly eating behaviour on given parameters in a given scoring format. The Tummy Tracker aimed to improve diet diversity and reduce consumption of junk food by the students.

A total of 17 students took the Tummy Tracker Challenge, out of which 41% were girls.

What is your favourite junk food?

Junk Food 1: Burger I consume it 1 times every week/month.

Junk Food 2: Chowmein I consume it 1 times every week/month.

Give yourself points in the table below (Yes = 1 point; No = 0 point)

Table A	Mon, Feb 15	Tue, Feb 16	Wed, Feb 17	Thu, Feb 18	Fri, Feb 19	Sat, Feb 20	Sun, Feb 21
1. Did you eat anything from the food group "Legumes, Pulses and Non-Veg" today? (e.g. daal, rajma, chhole, besan, soya, egg, chicken)	1	1	1	1	1	1	1
2. Did you eat any "Leafy Vegetables" today? (e.g. palak, methi, cabbage, dhaniya, pudina)	1	1	1	1	0	0	1
3. Did you eat any "Other Vegetables" today? (e.g. lady finger, brinjal, cauliflower, tinda, tori, louski/ghiya, matar, kaddu, cucumber, carrot)	1	1	1	1	1	0	1
4. Did you eat any "Fruit" today?	1	0	1	1	0	1	1
5. Did you have "Milk or Milk Products" today?							

PROCESS & ASSESSMENT

The program process included pre- and post-assessments as well as continuous assessment

**1**

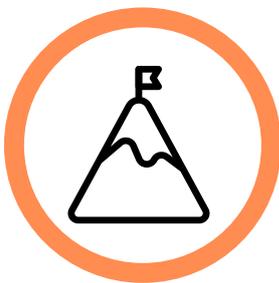
Pre-Test to assess Knowledge, Behaviour and Attitude levels

**2**

5 Workshops (weekly)

**3**

Post-Workshop Quiz

**4**

Weekly Challenge

**5**

Post-Test 1 to assess impact of Workshops

**6**

21-Day Tummy Tracker Challenge

**7**

Post-Test 2 to assess impact after 2 months

PROGRAM RESULTS

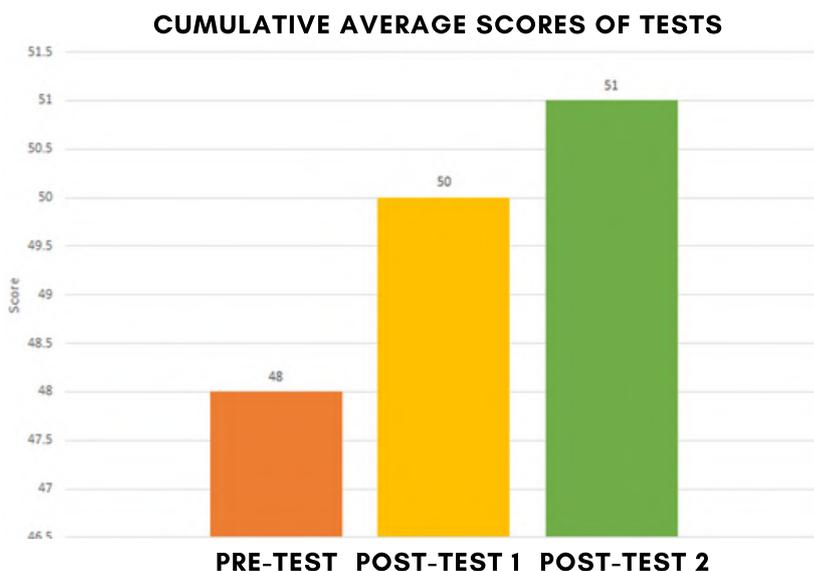
The program led to improvement in knowledge, attitude and behaviour towards healthy eating

Improvement in Knowledge, Attitude and Behaviour Scores

The program intended to improve knowledge, attitude and behaviour of children towards healthy food and healthy eating habits.

Impact Assessment Methodology: We conducted a Pre-Test before the start of the program, Post-Test 1 after the conclusion of the Workshops, and Post-Test 2 after 2 months from the program. The tests included multiple choice questions to assess the knowledge level of the children about food and nutrition, their current dietary habits, and their attitude towards adopting healthier habits. Each child's responses were converted into numerical scores.

Key Results: The average cumulative score for knowledge, attitude and behaviour improved from Pre-Test to Post-Test 1, and then further in Post-Test 2. The fact that the score was highest in Post-Test 2 shows sustained improvement. There was a 6% improvement from Pre-Test to Post-Test 2.



The cumulative scores for knowledge, attitude and behaviour show a sustained improvement from Pre-Test to Post-Test 1 to Post-Test 2, with an overall 6% improvement.

The break-up of this cumulative average score against knowledge, attitude and behaviour is below.



These results show that;

- Children's knowledge and attitude enhancement is highest in the period immediately after the completion of the Workshops.
- Behaviour change happens over a longer period of time. Greater improvement is seen 2 months after the program.

Children not only continued, but **improved**, their healthy eating behaviour even 2 months after the end of the program with an overall **12%** improvement in behaviour scores, showing the program was successful in leading towards sustained **behaviour change**.

Increased Diet Diversity

Increased diet diversity, i.e. consumption of foods from different food groups such as grains, fruits, vegetables, and others, is an important indicator of good nutrition. Eating food from different food groups enables the person to consume items rich in different nutrients, thus improving consumption of various macro and micro nutrients.

Impact Assessment Methodology: Under the 21-Day Tummy Tracker Challenge, children tracked consumption of different food groups on a daily basis for a three week period. The children got their weekly diet diversity score, and aimed to improve it in the next week. Through their Tummy Tracker Challenge Sheets, we got the number of days the child consumed any food items from the food group. We took the average number of days a food group was consumed across all children who completed the Challenge.

Key Results: A clear progress can be seen in the diet diversity score of children. This is across all major food categories.

CONSUMPTION OF FOOD GROUPS - AVERAGE NO. OF DAYS PER WEEK

	Pulses/ Non-veg	Leafy Vegetables	Other Vegetables	Fruits	Milk Products	Nuts/ Seeds
Week 1	6.3	4.8	5.3	5.5	5.6	5.4
Week 2	6.3	6.1	6.1	5.8	6.5	6.3
Week 3	6.8	6.4	6.7	6.3	6.4	6.5

This table shows that the consumption of all food groups increased week-on-week. For example, while children were consuming leafy vegetables (like spinach, coriander, fenugreek leaves, etc.) on an average 4.8 days per week in the first week of the Tummy Tracker Challenge, this increased to 6.4 days a week by the third week. Even consumption of food groups like pulses/non-veg, which were already consumed regularly, improved even further.

Diet diversity improved, with children consuming more food groups on a daily basis. The most dramatic improvement was in consumption of **leafy vegetables**, which increased by 33%. Even food groups with already high consumption, such as protein-rich pulses and non-vegetarian food, showed further improvement during the program. There was an **overall 19% improvement** in diet diversity.

Reduction in Consumption of Junk Food

Consumption of junk food is a major problem affecting nutrition status of children, including among low-income groups. This not only takes children away from nutritious food items, but also leads to consumption of unhealthy elements like excessive sugar, salt and refined flour, which can lead to various health problems.

Impact Assessment Methodology: Under the 21-Day Tummy Tracker Challenge, children tracked consumption of two of their favourite junk food items. Each child named two junk food items - Junk Food 1 and Junk Food 2 - that they consumed most often. Some common items included chips, chowmein, burger, pizza and samosa. Through the Tummy Tracker Challenge, they tracked the consumption of these two items per week, and strived to improve upon their weekly score. Through their Tummy Tracker Challenge Sheets, we got the number of days the child consumed their favourite junk food items. We took the average number of days junk food was consumed across all children who completed the Challenge.

Key Results: A significant decline can be seen in the reduction of consumption of junk food by children. This is for both of their favourite junk food items.

CONSUMPTION OF JUNK FOOD - AVERAGE NO. OF DAYS PER WEEK

	Junk Food 1	Junk Food 2
Baseline	1.9	1.6
Week 1	1.2	1
Week 2	1.1	0.8
Week 3	0.5	0.5

Before starting the Tummy Tracker Challenge, children reported that they consumed their most favourite junk food (Junk Food 1) on an average of 1.9 times a week, and their second most favourite junk food (Junk Food 2) on an average of 1.6 times a week. There was a continuous reduction in consumption of these junk food, with an average consumption of junk food 0.5 days a week.

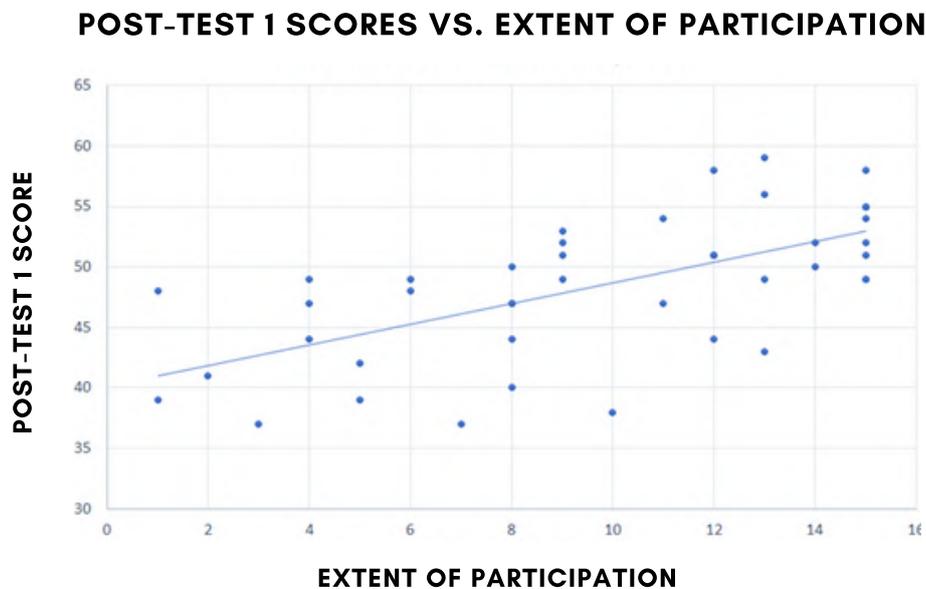
There was a significant **decline in consumption of junk food** by the children. Consumption of junk food reduced by 69-74% over a period of three weeks.

Correlation Between the Program and the Results

Data shows that the above impact, especially the improvement in knowledge, attitude and behaviour scores, is not just random, but is strongly correlated to the program.

We calculated children's participation score based on their participation in various aspects of the program, including attendance, quizzes, completion of weekly challenges, and completion of Tests.

The graph below shows the correlation between a child's extent of participation in the program and their Post-Test 1 scores.



There is a strong correlation between children's participation and Post-Test 1 scores. Children with higher participation levels had higher scores in Post-Test 1 and vice versa.

Further analysis of participation level showed that a minimum of 62% participation in the program (including all aspects) was required for the child to benefit from the program.

Children's Feedback on the Program ★★★★★

Through our Tests and Quizzes, we also asked the children about how useful and interesting they found the program. This served not only as feedback for us, but also gave an insight about the children's own perceptions about the impact and effectiveness of the program.

The children gave an average rating of **4.9** out of **5** on how useful they found the program. Their rating for how interesting they found the program was **4.8** out of **5**.

IMPACT STORIES

There was significant qualitative impact, with children sharing their stories of change

Apart from quantitative impact, qualitative impact in terms of stories of change shared by the children are equally important.

Impact Assessment Methodology: The program included a continuous engagement with the children. The children shared their stories with us as part of weekly challenges, open-ended questions in quizzes and Tests, and as a reflective exercise after the 21-Day Tummy Tracker Challenge.

Key Results: A number of children shared how the program impacted them and their diet and shared their Before/After stories. Some of the common changes that children observed as a result of the program are as follows.

Reduced consumption of junk food

Increased intake of healthy foods

Used to consume large amounts of sugar earlier

Never checked the ingredients of packaged food earlier

Drinking adequate amount of water now

The main motivation factor pointed by children is that they now understand the importance of food and nutrition, and want to be healthy.

SOME STORIES OF CHANGE



EARLIER, I USED TO DRINK ONLY TWO GLASSES OF MILK IN A WEEK. HOWEVER, AFTER THE COURSE, I HAVE STARTED DRINKING MILK EVERY DAY. I HAVE ALSO STARTED DRINKING 7-8 GLASSES OF WATER EVERY DAY

NITI, 14 years



Prachi, Class 7th
VIDYA School, Gurugram
BEFORE

I did not like vegetables or healthy food. I ate food like Kurkure, chocolates and samosa almost daily. I did not think about how these are made or about my health.

AFTER

Now I eat junk food only a few times in a week. Eating leafy vegetables, fruits and lots of water have become my habits now. I like to eat sprouts everyday.

WHY?

I want to be healthy and safe. I want to stay away from junk food because I understand how it is unhealthy for me. If I feel like eating oily food, I ask my mom to make it for me at home instead of buying from outside.

MY STORY OF CHANGE



"NOW I KNOW WHY DRINKING WATER IS IMPORTANT FOR US AND DRINK 2 LTS OF WATER EVERYDAY. I ALSO READ THE FOOD LABEL BEFORE EATING ANYTHING FROM OUTSIDE."

-Karan, Class 7th

STORY OF CHANGE

"After Foodshaala's course I avoid junk food and eat more green vegetables and homemade food. I also drink at least 2 ltrs water every day."

-Sunny (13 Years)



The program also had an **impact at the household level**. Children shared their learnings with their parents, asked them to change household practices, and even prepared healthy and tasty recipes for everyone at home.

Voices of Change

From Our Little Changemakers Choosing Healthier Eating Habits



after the classes, mom has tell us to eat sprouts, I eat daily with lots of vegetable, My brother and my family also eat with me.

Yes I have ~~changed~~ made some changes in my diet. In my house puri is cooked with refined oil but when I knew that refined is not good for us. So, after the session I told my mother to cook puri with Sarson oil.

I had said to my mother that we should cook in iron utensils then she said that, yes we should make in iron utensils we also use iron utensils only like tawa and karahi bit there are some aluminium utensils that we have to use but we will try to avoid it 😊

6:59 PM

FROM THE KITCHENS OF OUR YOUNG MASTERCHEFS



Spinach Salad



Chutney



Veggie Omelette



Fruit Vegetable Salad



Sprouts-Veggie Salad



Egg Veggie Roll



Veggie Omelette



Banana Milkshake

LESSONS LEARNT

The program had some key lessons for us, which we aim to implement in our future programs.

The program led to improvement in knowledge, attitude and behaviour of children towards healthy food. But there were also a number of challenges and lessons learnt along the way. The program was originally designed for offline mode of delivery, but was converted to an online mode due to the COVID pandemic. This posed some delivery challenges and also limited the reach to schools and children with access to internet and necessary devices.

These and other challenges also provided some lessons to improve the effectiveness of the program. Some of the key lessons learnt are listed below. We plan to implement these in the short and long term, as we develop and scale-up the program further.

1 Post-Program Engagement

To sustain impact for long-term, post-program activities can be executed. These include setting up Food Clubs in schools to undertake further learning activities.

Engaging with Parents 2

Parallel activities or engagement with parents, such as through video content, can maximize the impact even further.

3 Increasing Participation

Some creative measures can be used, especially suited to online education, to prevent children from missing sessions or to cover up if they could not connect.

Improving Assessments 4

Some incentives could be provided to ensure children complete all assessments (Tests) before/after the program that enable impact assessment.



**COVID RELIEF
WORK**

COVID RELIEF PROJECTS

We undertook two primary projects to provide relief to people during COVID: support to migrant workers and nutrition to children

The COVID-19 crisis caused multiple hardships to people across India. The first wave and the resulting lockdown took people by surprise. Many people were in need of food, medicines and money. There were lakhs of migrant workers who were looking for means of transportation to reach their homes. At the same time, natural calamities like cyclones and floods in some areas doubled the crisis, leaving people in urgent need for food, shelter and health supplies.

COVID also worsened the nutrition status of people. With limited money in hand, people reduced their expenditure on nutritious food items. Therefore, ensuring nutrition in food-related relief also became critical.

In order to address these problems, we undertook two main projects:



Delhi Against Malnutrition



Relief for Migrant Workers

DELHI AGAINST MALNUTRITION

A campaign to ensure every child stays nourished even during COVID

Our relief effort in Delhi was targeted primarily towards children. COVID-19 deprived children of basic nutritional foods like milk. We noted that other organizations could not deliver milk due to challenges in delivery. Further, many ration packets did not include nutritious items to adequately provide proteins and micronutrients. We therefore worked towards meeting the nutritional gaps for children. This project aimed to ensure that every child stays nourished, even in the remotest parts of Delhi.

We supported the **Delhi Commission for Protection of Child Rights (DCPCR)**, Government of Delhi to undertake this project.



Some of the activities under this project include;

Providing milk to children

More than **20,000** fresh **milk packets** were distributed to children in Delhi. Some of the areas covered include Kirari, Kondli, Vikaspuri and Bhati Mines.

Providing supplementary nutrition to children

More than **12,000** **nutrition kits** were distributed to children in Delhi. The kits included foods like besan (gram flour), peanuts, daliya and other nutritious items keeping in mind the nutrition requirements of children.

Coordinating distribution of ration kits

The government and many civil society organizations were involved in distribution of ration kits during the pandemic. We supported their efforts by helping to coordinate and monitor that ration reached the beneficiaries on time, it reached the right beneficiaries, and there was no duplication of efforts.

We supported distribution of

ration kits to around **50** families through this initiative.

Some of the areas covered included Sangam Vihar, Mori Gate, Old Mustafabad and Mahipalpur.



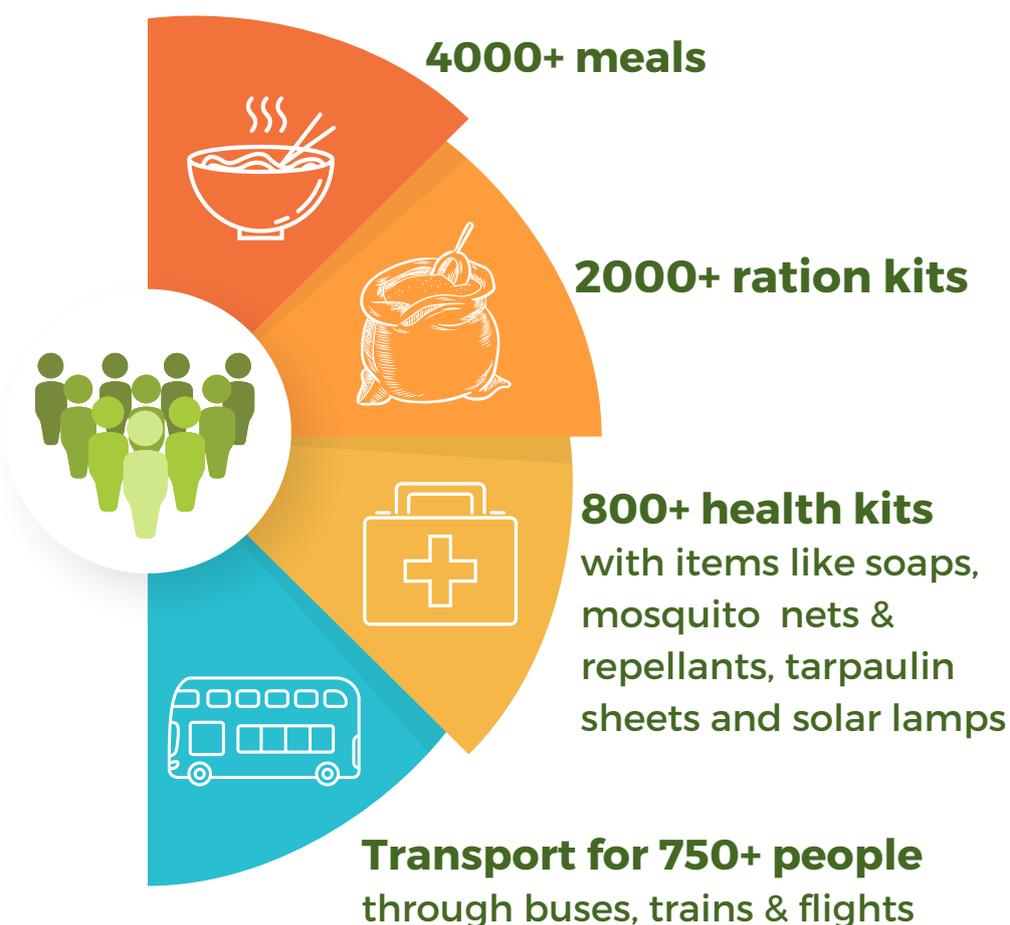
RELIEF FOR MIGRANT WORKERS

Supporting migrant workers with food, transport and health kits

During the pandemic, lakhs of migrant workers were stranded across the country, many without access to basic necessities. The onset of cyclones and floods in some parts of the country worsened the situation for many. This project aimed to ensure that workers are able to safely reach their homes, and can have access to food and medical supplies. The project also provided support to cyclone and flood affected people through food and health and sanitation kits.

We supported the **NALSAR for Migrant Workers** collective to undertake this project. In addition, this project was implemented in collaboration with the government, transport service providers, non-profit organizations and civil society.

A snapshot of the work done under this project is below.



States covered

Andhra Pradesh
 Assam
 Bihar
 Delhi
 Gujarat
 Haryana
 Jharkhand
 Karnataka
 Kerala
 Maharashtra
 Manipur
 Meghalaya
 Odisha
 Rajasthan
 Tamil Nadu
 Telangana
 Uttar Pradesh
 West Bengal

Some of the activities under this project include:

Providing Ration Kits

Ration kits were provided to families across India, including 400+ families in Telangana and Andhra Pradesh and 100+ families in Uttar Pradesh.

Supporting Meal Distribution

More than 3000 cooked meals were provided through community kitchen in Kolkata.



Providing Bus Transport

Around 300 workers were supported with travel by buses in various parts of India, including from Karimnagar (Telangana) to Balangir (Odisha), from Vadodara (Gujarat) to Faukhabad (Uttar Pradesh), Nagpur (Maharashtra) to Darbhanga (Bihar), Delhi to Muzaffarpur (Bihar), Tiruppur (Tamil Nadu) to Jharkhand, Shillong (Meghalaya) to Chandel (Manipur), and Bhilwara (Rajasthan) to Chitrakoot (Madhya Pradesh). Food and cash transfers were also provided to some of the travelers.



Supporting Train Travel

Workers were supported with travel by trains, including from Palakkad (Kerala) to Jamtara (Jharkhand). In addition, food assistance was provided to 80 train travelers from Bengaluru (Karnataka) to Nagpur (Maharashtra).

Supporting Air Travel

Air transport and food was provided to 174 workers traveling from Bengaluru (Karnataka) to Raipur (Chhattisgarh).





Providing Ration and Health Kits to Cyclone and Flood Affected Families

Ration kits and health kits were provided to 250 families affected by the Nisagra cyclone in Maharashtra. These kits included tarpaulin sheets to help set up temporary shelters and solar lamps for emergency lighting. Ration kits and health kits were also provided to more than 250 families in flood affected areas of Assam. Further, health kits were provided to 200 families affected by the Amphan cyclone in West Bengal.



IMPACT STORY



Meet Satish Patil

Volunteer and Beneficiary, Talwade village,
Raigad district, Maharashtra

"We never benefit from relief efforts due to our remote location; this is the first time we got such assistance."

"The Nisagra cyclone that hit us on 3 June 2020 caused a lot of damage. Many houses were completely destroyed - they just flew away like leaves! The cyclone worsened the economic hardship that we were already facing due to COVID-19.



Despite our challenges, we did not get any help from anyone even after a month. But as part of the Nalsar for Migrant Workers project, we received solar lamps, tarpaulin sheets and ration kits from Foodshaala Foundation and The Resilient Foundation. This support has been very critical in times of crisis. The problem of electricity is very common in our villages, so the solar lamps will be very useful even in future.

Because our villages are located in remote parts of the district, we never benefit from any relief work. This is the first time that we got such a huge assistance. I am grateful from the bottom of my heart on behalf of our 10 villages."



**RESEARCH &
ADVISORY WORK**

RESEARCH & ADVISORY WORK

Supporting government and other organizations
in nutrition-based interventions

Needs Assessment on Child Nutrition

To support the government in ensuring its food relief interventions are informed by nutritional requirements of the beneficiaries, we worked with the Delhi Commission for Protection of Child Rights (DCPCR), Government of India on needs assessment on child nutrition. We submitted a report on the nutritional requirements of children. The report explained a child's growth during the following phases of childhood: infant; pre-school child; school child; and adolescent. The report also covered the detailed dietary requirement of school children (7-12 years) and adolescents (13-18 years).

Accordingly, food recommendations were provided in the report for different food groups, along with recommendations on a well-balanced plate.

In the context of COVID, the report also had recommendations on what could be included in ration packets for different food groups. The report also included suggestions on feeding infants and pre-school children, and provided video links for various recipes.



Designing Nutritious Ration Kits

Based on our experience in COVID food relief work, we worked in an advisory capacity to support other organizations in providing ration kits that were more nutritious and included a variety of food groups. We submitted an advisory note to DCPCR, Government of Delhi on this. We also advised another non-profit organization in designing nutritious ration packets, while keeping in mind the people's taste and cultural preferences, and the donor's budget. We also wrote an article with guidelines on how to design ration packets, which could be used by any individual or organization. It was published in [Outlook Poshan](#).



**ONLINE ACTIVITIES
FOR NUTRITION
AWARENESS**

ONLINE ACTIVITIES FOR NUTRITION AWARENESS

Going virtual to spread awareness on food, nutrition and health

COVID made the world get virtual. We also joined in, and started with online activities to spread awareness on food, nutrition and health. Some of our activities include:



Writings

We published articles on food and nutrition, such as food safety and COVID, designing nutritious ration packets, and nutrition-based policy interventions. Our writings are available [here](#).



Healthy Recipes

We published a range of healthy and tasty [recipes](#) that people could easily make at home. These recipes turned out to be particularly useful during the COVID lockdown!



Cooking Session

We conducted a live Cooking Session for our partner Ginny's Planet, making a meal entirely from millets. The session included a drink [Bajre ki Raabdi](#), main course [Leftover Daal-Ragi Cheela](#) and dessert [Jowar Halwa](#).



**SUMMARY:
IMPACT IN
NUMBERS**

SUMMARY: IMPACT IN NUMBERS

Nutrition **awareness** program for **77** children from low-income families

Overall **6%** improvement in **Knowledge, Attitude and Behaviour** scores of children

Increase in **diet diversity** by **19%** in three weeks

Reduction in **junk food** consumption by **69-74%** in three weeks

Distribution of **20,000** **milk** packets to children in Delhi

Distribution of **12,000** **nutrition kits** to children in Delhi and **2000** **ration kits** pan-India to migrant workers

Provision of **4000** **meals** to migrant workers

Provision of **800** **health kits** to migrant workers and people affected by cyclones and floods

Transportation for **750** migrant workers through buses, trains and flights



AWARDS & ACHIEVEMENTS

AWARDS & ACHIEVEMENTS

Some other awards and recognition we got for our work



Nutrition Award 2021

Certificate of Recognition at the Nutrition Awards 2021 by Glenmark Foundation, World Food Programme and Idobro, for our work on food and nutrition security during COVID-19



Certification of Appreciation from Delhi Government
Awarded Certificate of Appreciation by the Delhi Commission for Protection of Child Rights (DCPCR) for contribution towards relief efforts to address child malnutrition during COVID-19



Best Business Plan Award

Award for submitting the best business plan by Shakti - The Empathy Project (STEP)



Best Healthy Recipe Award

Awarded 2nd prize in Healthy Recipe competition by Indian Institute of Public Health as part of the National Nutrition Month 2020

Transparent NGO Award

Awarded GuideStar India Transparency Key Award, joining India's largest pool of credible NGOs



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Thank you
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