

**IDA Assisted
ICDS System Strengthening and Nutrition Improvement Project (ISSNIP)**

'ICDS System Strengthening and Nutrition Improvement Project' (ISSNIP) is being implemented in 10 districts of Andhra Pradesh State with the support from International Development Agency (World Bank) for a period of 7 years.

ICDS Systems Strengthening and Nutrition Improvement Project (ISSNIP) is a two-phased, seven year project with the overarching goal of supporting the Government of India's efforts to improve nutritional outcomes of children in India. It promotes 'learning-by-doing' across the two phases. During the first phase of three years, a number of systems in ICDS will be strengthened and new approaches/pilots will be tested at different scales in the selected areas. Phase II, to commence on the successful achievement of pre-defined triggers, will be implemented over a four year period. This phase will support scale-up of successful pilots and application of lessons learnt during Phase I to achieve nutrition improvements.

Total IDA Financing	Rs. 24236.89 Lakhs
Project Implementation Period	3 Years (Phase - I) 4 Years (Phase - II)
Bank Approved	September 6. 2012
Administrative Approval by Govt of Andhra Pradesh	G.O.Rt No - 229 dt. 12-07-2013 Dept for Women Children Disabled & Senior Citizens
Project Effectiveness	November 26. 2012
Project Closing date (Phase - 1)	December 31. 2015

PROJECT DEVELOPMENT OBJECTIVES (PDOs)

To support the Government of India and participating States to (I) strengthen the ICDS policy framework, systems and capacities, and facilitate community engagement, to ensure greater focus on children below three years of age; and (ii) strengthen convergent actions for improved nutrition outcomes.

SALIENT FEATURES

- ✓ Supports Government of India's National Nutrition Response;
- ✓ Two phased approach where graduation to second phase triggered on meeting pre-determined results;
- ✓ Technical Assistance to Central and State Project Management Units in implementation;
- ✓ Supports innovations, pilots and operations research;
- ✓ Convergent, multi-sectoral approach to nutrition (pilot);
- ✓ Strong focus on community engagement for implementation and accountability;

- ✓ **Emphasis on behavior change communication;**
- ✓ **Rigorous Monitoring and Evaluation to support evidence—based decision making; and**
- ✓ **Evidence building, knowledge creation, sharing and exchange.**

PROJECT COMPONENTS

Component 1: ICDS Institutional and Systems Strengthening:

- **Review and refinement / development of guidelines, standards, protocols and procedures in ICDS**
- **Strengthen and expand the ICDS monitoring and evaluation system, management and supervision, pilot community monitoring including social audits**
- **Strengthen program stewardship, innovations in capacity building, training reform—thematic modules/contents, piloting incremental learning etc.**
- **Strengthening convergence with NRHM — designing/implementation of models of convergence, joint trainings, engagement of PRIs in strengthening convergence, etc.**
- **Innovations and pilots — untied funds to districts for testing flexible models in ICDS, urban/sub—urban pilots in NCR Delhi and project States etc.**
- **Implementation support at district and block levels**

Component 2: Community Mobilization & Behavior Change Communication (BCC):

- **Strengthen the supply and demand side interface, including promoting mutual accountability; focus on excluded and marginalized groups**
- **Test pilots of promising approaches for community engagement, including partnerships with self-help groups, social partnership agreements, public-private partnerships**
- **Strengthen BCC, including developing and implementing community-driven and evidence-based BCC strategies, media initiatives and community mobilization facilitated by CBOs and NGOs**

Component 3: Piloting Convergent Nutrition Actions:

- **Develop frameworks and tools for convergent actions of various sectors; strengthen structures at various levels for planning, coordination and monitoring nutrition actions across multiple sectors**
- **District level action plans, testing pilots and models for multi-sectoral nutrition actions; and operations research**

Component 4: Project Management, Technical Support, Monitoring and Evaluation:

- **Specialists to support project management at Central and State level**
- **Technical Assistance Agency to support Central and State teams**
- **Monitoring and evaluation, impact evaluations rapid assessments, social assessments and evaluation of all pilots**

EXPECTED RESULTS (Phase I)

- a. 80% of project blocks reporting information using the revised ICDS management information system;**
- b. 70% of project districts have implemented the "incremental capacity building" system;**
- c. Six project States have implemented and evaluated at least one community engagement pilot;**
- d. 70% of Anganwadi Centres implementing the Inter-Personal Communication (IPC) activities focused on Infant and Young Child Feeding (IYCF) practices, as defined in the State BCC Action Plans; and**
- e. Six project States have piloted and implemented "convergent nutrition action" in at least one district.**

The project is being implemented in 10 districts i.e., Srikakulam, Vizianagaram, Visakhapatnam, East Godavari, West Godavari, Prakasam, Chittoor, Ananthapuramu, Kadapa and Kurnool. The ISSNIP activities are being implemented in all ICDS projects and 43,616 AWCs in 10 districts.

Projects Covered Under IDA - Assisted ISSNIP in Andhra Pradesh

District	Type of Project		AWCs		
			Main	Mini	Total
ANATHAPUR					
	Rural	16	4164	840	5004
	Urban	1	122	0	122
	Total	17	4286	840	5126
CHITTOOR	Rural	20	3525	1122	4647
	Urban	1	115	6	121
	Total	21	3640	1128	4768
EAST GODAVARI	Rural	16	3920	144	4064
	Tribal	9	802	114	916
	Urban	4	524	12	536
	Total	29	5246	270	5516
KADAPA	Rural	13	2886	350	3236
	Urban	2	382	3	385
	Total	15	3268	353	3621
KURNOOL	Rural	13	3117	60	3177
	Urban	3	369	3	372
	Total	16	3486	63	3549
PRAKASAM	Rural	17	3649	231	3880
	Urban	4	360	4	364
	Total	21	4009	235	4244
SRIKAKULAM	Rural	15	3035	680	3715
	Tribal	1	122	109	231
	Urban	2	246	0	246
	Total	18	3403	789	4192
VISAKHAPATNAM	Rural	10	1954	192	2146
	Tribal	11	1122	1146	2268
	Urban	4	511	27	538
	Total	25	3587	1365	4952
VIZIANAGARAM	Rural	12	2398	573	2971
	Tribal	2	253	168	421
	Urban	3	336	1	337
	Total	17	2987	742	3729
WEST GODAVARI	Rural	14	2959	204	3163
	Tribal	4	453	69	522
	Urban	2	234	0	234
	Total	20	3646	273	3919
	Grand Total	199	37558	6058	43616
Total	RURAL	146	31607	4396	36003
	URBAN	26	3199	56	3255
	TRIBAL	27	2752	1606	4358
	Total	199	37558	6058	43616

Budget under ISSNIP

Project Components	Phase-1				Phase-2*
	Year-1	Year-2	Year-3	Total	
I. Institutional and Systems Strengthening	414.27	1401.64	1550.01	3365.92	10322.32
II. Community Mobilization and BCC	10.75	812.42	914.99	1738.16	6112.88
III. Piloting Convergent Nutrition Action	3.85	21.90	27.40	53.15	251.99
IV. Project Management, M & E	136.69	203.11	166.86	506.66	1285.95
Construction of Model AWCs					599.97
Sub - Totals	565.56	2439.07	2659.26	5663.89	18573.00
Grand Total	Rs. 24236.89 or 242.37 Crore				

The following activities will be taken up during 2014-15 from November 2014 to March 2015.

1. Incremental learning -ongoing capacity building of ICDS functionaries (AWWs, Supervisors and CDPOs).
2. Organizing Community based events at AWCs every month (Sreemanthalu and Annaprasana etc).
3. Training/Orientation on MIS for CDPOs and Supervisors for effective monitoring of ICDS service delivery.
4. Orientation to VHSNCs, VOs & SHGs on ICDS services.
5. Orientation to PRIs -Sarpanchas on ICDS services for strengthening Convergence.
6. Convergence meetings with Health & Line departments for effective service delivery of services.
7. Wall paintings in Gram Panchayaths & AWCs on ICDS services.
8. Kalajathas under BCC activities
9. Pilot on Convergent Nutrition Action
10. Developing software on 'Name based tracking of pregnant women, Lactating Mothers, children below one year and malnourished children below 5 years'