D4N 2025

Community Led Nutrition Monitoring in Meghalaya:
A scalable model for locally rooted gender responsive systems

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Background

- Meghalaya's context is shaped by tribal populations, dispersed settlements and challenging terrain.

- Nutrition data has not been fully aligned across sources

- Policy decisions constrained by data gaps

- Meghalaya's unique equity focused human centred governance approach

Approach

| State level community-led nutrition survey (Through the Meghalaya ECD Mission) | → | Across 7 tribal districts of Meghalaya |

| State Level Support provided in different capacities | → | - Meghalaya State Rural Livelihoods Society
- Meghalaya Legislative Research Fellowship
- Meghalaya Society for Social Audit and Transparency
- Social Welfare Department |

| Technical Advisory Group | → | - IIPS (Sampling design)
- IIPH (Training of Trainers) |

| Survey led by SHG network | → | Timeline: **May 2023-Oct 2024** |

Approach to Data Collection and Quality

Questionnaire

- Household profile
- Maternal care, Child feeding, ICDS access and Child nutrition

3-day structured training for SHG women on:

- Ethical data collection
- CAPI tool (offline-capable)
- Anthropometric standardization
- Field testing

Ongoing support during data collection through

- Refresher sessions
- Field mentoring
- WhatsApp group

Field Implementation Process

6335 households across 336 clusters
- 41% of children < 2 years
- 55% aged 2-5 years

Community Sensitization before data collection

Data Quality ensured through Field Supervision, Spot checks and Real time mentoring

Summary of Findings

Dietary diversity remains low, especially among younger children

Socioeconomic and educational difference strongly influence feeding practices

Large district variations in child diets and feeding behaviors

Household cooking continues to depend largely on wood

ICDS services were widely accessed

Limited piped water access, but most households had toilets

Challenges in Engaging SHG cadres

- Initial doubts about SHG capability

- Digital literacy gaps → hands on mentoring

- Difficult terrain and network issues → offline tools

- Anthropometry accuracy concerns → ENA standardization

- Strengthened system capacity through trained staff, robust tools and community acceptance

Use of Data for Local Decision - Making

- Communities viewed findings as **"their data"** which strengthened ownership and accountability
- Increased village interest in child feeding and growth
- SHG women became **local nutrition monitors** and **advocates**
- Data informed local action (referrals, discussions)
- Strong foundation for district level planning

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Implications for Scaling

Infrastructure	Quality	Use

Infrastructure

- Builds on existing SHG/NRLM networks ⟶ low cost, wide reach

- Offline-ready digital tools

- Converging departments as backbone

Quality

- Standardized training and ENA quality testing

- Supervision and mentoring

- Trusted local enumerators

Use

- Village and district data-use forums to turn data into action

- Community ownership ⟶ accountability

- Supports localized nutrition planning

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My participation was made possible through the generous support of the

Delivering for Nutrition 2025 Conference funders

This work was funded by the
Meghalaya Early Childhood Development Mission