Safe Childhood Programme

Incremental Learning Modules for Panchayati Raj Institutions



Module 1 Maternal Health

Time: 2 hours



Introduction

This is first of the incremental learning modules series of Safe Childhood Programme. Maternal health, in other words, health of pregnant woman has been considered as an inseparable part of child's survival and health. The reason for the same is that life of an infant growing in mother's womb is dependent on mother's health. Facilitators should aim to facilitate this module with panchayat members at least 2-3 days prior to Village Health and Nutrition Day (VHND) so that they do not have difficulty in recalling key information shared by the facilitators.

Session Objectives

At the end of the session, participants will be able to know:

- Definition of maternal health and what roles they can play in ensuring it
- How mother's health is associated with child health and development
- What are their roles and responsibilities in ensuring health of mother and her unborn child
- How they can motivate and support village level functionaries (ANM, ASHA and AWW) in ensuring health of pregnant women in the village

Session Process

Step 1

Begin the session by welcoming all the participants and thank them for participating in it. Introduce yourself and ask them to introduce themselves. Start the session with a motivational song.

Step 2

Tell the participants that following are the important steps in order to ensure maternal health:

- Registration of pregnant women at the centre
- ⇒ Four antenatal check-ups (ANC) to be carried out
- Tetanus injections to be given



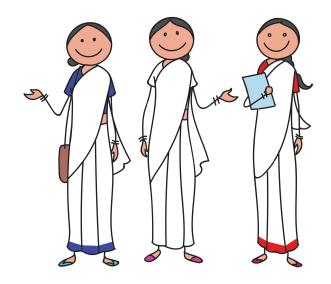
- ⇒ 100 IFA tablets to be taken by them
- Ensuring that they take nutritional food (also called tri coloured food)
- Contact health workers immediately in case of danger signs
- Preparation of institutional delivery which includes keeping numbers of ASHA, ANM and ambulance handy by the family members and pregnant women
- Keeping necessary materials such as clean cloth etc ready for delivery
- Seep in regular touch with ASHA and ANM as delivery time nears
- Reaching health centre in own vehicle/ambulance along with family members and ASHA
- Initiation of breast feeding of child within one hour of delivery

Tell the participants that above-mentioned steps must be ensured and followed for all pregnant women in the village

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Step 3

Share with participants that village level functionaries such as ASHA, AWW and ANM play an important role in ensuring health of pregnant women and their unborn children. ASHAs have the responsibility to constantly keep in touch with pregnant women, monitor their health, register them, give IFA tablets and motivate them to take it regularly, accompany them to the centre for delivery and support them. Whereas ANMs role is to carry out ANC, give them tetanus injections after their registration at VHND and provide them immediate support without wasting time in case of any difficulty or signs of danger by referring them to the health facility. The role of AWW is to provide nutritional diet and distribute of necessary medicines and help the ANM.



Tell the participants how panchayat members can contribute in supporting roles of village level functionaries and also assessing them. Panchayats should develop monitoring mechanism for ensuring rapport between the three village level functionaries and also ensuring quality of their work. They should also oversee that upkeep of anganwadi centre (AWC) is maintained and all the facilities are available.

Case Study

Kavita's story

When Kavita missed her period for the first time, her husband was very happy that Kavita will soon be a mother. When other women in the village got to know about it, they advised Kavita not to hide the information and instead should straightaway go and contact ASHA didi or ANM didi. The following day, Kavita went to visit ASHA and ANM didi who advised her for registration and ANC checkups.

When Kavita and her husband returned home, her in-laws were angry to know that they had gone to meet ASHA and ANM didi. They told her that they already knew that she was pregnant and they will themselves take care of her at home and the village midwife will carry out her delivery at home. Kavita and her husband were in dilemma. Then Kavita's husband consulted panchayat members for their advise. Panchayat members told him that whatever ASHA and ANM told them was correct. Any pregnant woman must undergo ANC check-ups. If ante-natal care has not been provided, life of pregnant woman or her unborn child can be in danger.

Village sarpanch advised Raju, "we are trying to make our panchayat child friendly under 'Safe Childhood Programme'. For this your contribution is important. Maternal health is an inseparable part of child health there fore ensuring health of pregnant women in the village is our responsibility. Your parents must understand that if during pregnancy, Kavita remains healthy, even her to be born child will be healthy. Therefore I have sent village ASHA to your house so that she can make your parents understand on how to take care of Kavita's health during pregnancy".

ASHA didi visited their house and explained to her in-laws, "you

should not be a hindrance in Kavita's ANC checkups. Every pregnant woman must undergo four ANC checkups. First check up immediately after registration of pregnancy, second between 14-26 weeks, third between 28-34 weeks and fourth checkup should be after 36 weeks in ninth month. These checkups also tell how is the health of the unborn child". She also told them pregnant woman must take 100 IFA tablets and get tetanus injections. Pregnant woman should also have complementary nutritional food distributed at the AWC. Kavita's in-laws became satisfied after

getting this information and this way Kavita could get her ANC done regularly.

In the meantime, panchayat members kept enquiring about Kavita's health from Raju from time to time. As the delivery date was coming closer, Raju started getting little worried. He met senior panchayat member Raj Kishore ji who lived in his neighbourhood and asked him what he should do in such a situation. Raj Kishore ji advised him that ANM and ASHA have information of tentative expected date of delivery. This date is also mentioned on the Mother-Child Protection Card. The family should save money for delivery, identify the hospital, continue to be in touch with ASHA and ANM and also arrange for the vehicle to take pregnant woman to the hospital.

Divide the participants into two groups after they finish reading or listening to the case study. Ask the first group to prepare a list on what all roles did panchayat members play according to the case study. Ask the other group to prepare the list on what other roles could have been played by panchayat members additionally. Once the lists are prepared, ask both the groups to present it to the larger group and carry out discussions.

Step 4

Points to be kept in mind by the participants (show these points on a chart paper as below:)

Panchayat members must be aware of following maternal health related schemes

Janani Suraksha Yojna	Matrutav Laabh Yojna	Matrutav Avkaash Yojna
Cash incentive is given to the woman after delivery under this scheme	Under this scheme, cash incentive is given to pregnant women from below poverty Line (BPL) family and above 19 years of age	Provision of 26 weeks of maternity leave for pregnant women under this scheme
Role of panchayat members	Role of panchayat members	Role of panchayat members
Making women aware of this scheme with support from ANM and helping women in receiving the cash benefit	Informing people about the scheme and helping eligible women in getting BPL cards	Identifying those pregnant women in the village who are working and helping them to get benefit of this scheme

- Panchayat members can play an important role in bringing down maternal mortality rate (MMR) and infant mortality rate (IMR) at the village level. They should ensure health of pregnant women and infants with support from ANM and ASHAs keeping this objective in mind.
- Panchayat members must pay attention to health of all pregnant women in the village, specially pregnant women with signs of danger.



- They should pay special attention to backward classes, dalit groups, minority communities, disabled, handicapped and HIV/AIDS affected groups in order to ensure maternal health maintenance.
- They should evaluate work of health functionaries periodically and guide them to ensure maternal and child health.
- Active participation of panchayat members is necessary during VHND so that they can evaluate situation of maternal and child health in the village and to know how many needy women and children are getting benefitted by it.

Ask the participants to carry out discussion on following points and ask them if they agree or disagree. Motivate them to add any left out points.

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Roles of village level functionaries in ensuring maternal health

Name of functionary	Main responsibilities
ASHA	 Registration of pregnant women and assist ANM in carrying out ante natal care
	 Helping pregnant women in preparation of delivery and accompanying her to the hospital during labour
	 Giving IFA tablets to pregnant women
	 Regularly observing pregnant women and neonates in the village and inform ANM in case of any difficulty
ANM	Registration of pregnant women
	 Carrying out ANC of pregnant women and administering them tetanus injections
	Referring pregnant women to hospital in case of any danger symptoms
	 Monitoring maternal and child health in the village and suitably update panchayat members about the same
AWW	 Distribute nutritional diet to pregnant women, infants and adolescents at the centre
	Give IFA tablets to pregnant women
	Support and assist ANM for registration, immunisation etc during VHND

Step 5

Monitoring mechanism and collection of data

Discuss with participants that initial figures related to maternal and child health are prepared at the village level only. This task is carried out by panchayat members in cooperation and assistance from ANM and AWW. For example, if any child is born, the detail is entered in respective registers of ANM, AWW and village panchayat. This way following figures pertaining to maternal and child health at the village level are collected. Write all these indicators on a chart paper and hang it on the wall.

- Number of children born and children who died between 1-5 year of years of age in the village. (birth rate and infant mortality rate)
- Number of pregnant women registered for ANC
- Number of women who underwent four ANCs
- Number of women who got tetanus injections
- Number of sets of 100 IFA tablets distributed
- Number of pregnant women, adolescent girls and infants getting nutritional diet at AWCs
- Number of still born children
- Number of women who died during labour
- Number of women who delivered at hospital or centre (institutional delivery)
- Number of malnourished children at birth
- Number of women and children from backward castes, minority communities, handicapped,
 HIV/AIDS affected who have above mentioned indicators

Monitoring by panchayat at the village level

Before VHND, village head/pradhan and other panchayat members will sit with ANM, ASHA and AWW and get information on number of pregnant women in the village, how many of them have been registered, how many are not coming for ANC check-ups, how many have not got tetanus injections, how many have not taken IFA tablets, how many pregnant women, adolescent girls and children are getting nutritional diet from the AWW and how many are not getting it. Thereafter, as an initiative of the village panchayat, influencing ladies and other village people, make home visits to make families of such women aware and ensure that such women avail facilities at VHND and get benefits of motherhood.

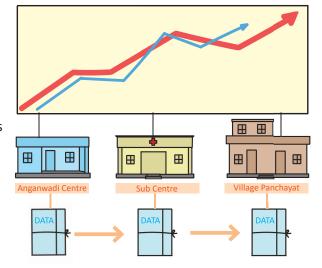
Ask the participants whether all indicators are correct. Facilitate a discussion on these and ask if they would like to add or remove any point

Thereafter, conclude the discussion as below:

All indicators mentioned above reflect maternal and child health therefore it is necessary to collect them and update registers correctly. As you are aware, figures collected at the village level reach the block, then district, state and finally the national level.

These figures provide monitoring mechanism for panchayats to keep a close watch on maternal and child health indicators of the village and help in making the panchayat child friendly.

Summarise the key learnings before ending the session



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