Annual Progress Report 2013-14

Diarrhoea Management Program Supported by Clinton Health Access Initiative

(Public Sector)



Summited by: Shashwat Sahbhagi Sansthan (SSS)

Project Progress during the YEAR 2013-14

1. Introduction

ORS and Zinc based therapy has great potential to execute diarrheal diseases, There are several benefits of ORS and Zinc, Public sector is trying to reduce diarrheal diseases in our country, and Uttar Pradesh has highest mortality rate of children, in among which diarrheal cases account for 15% in below five years children.

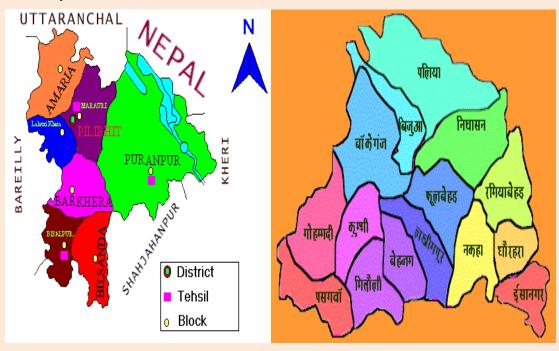
ORS and Zinc are essential medicines for diarrheal case, but the Doctors are using antibiotics due to lack of knowledge and not promoting the use of ORS and Zinc.

Objective

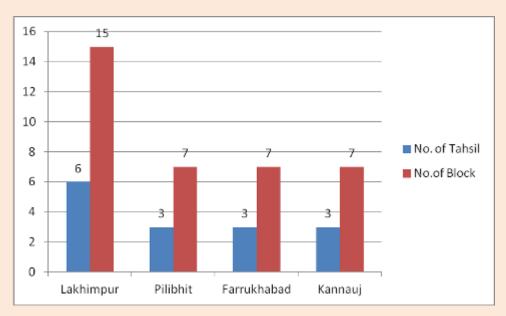
- o To strengthen Existing health and nutrition system of government through advocacy and positive interface
- o To sensitize ASHAs of Uttar Pradesh to use ORS and Zinc Therapy for the treatment of childhood Diarrhoea through capacity building and interpersonal communication.
- o To enhance the usage of ORS and Zinc in Diarrheal cases through ASHAs and village level ICDS AWW workers.

Project Area-

 Diarrhea project running 36 blocks of district Kheri, Pilibhit, Farrukhabad and Kannauj of Uttar Pradesh.

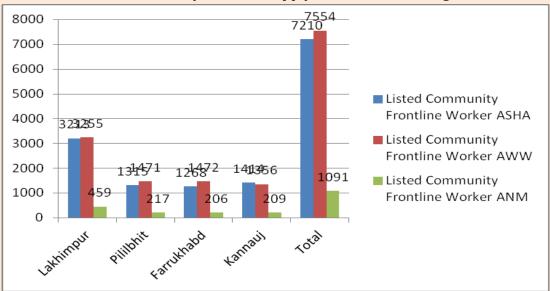






2. Progress Overview -Shashwt Sahbhagi Sansthan is facilitating direct implementation in 4 district of UP namely Lakhimpur ,Pililbhit, Farrukhabad & Kannauj. During the quarter one to one interaction was made which AWWs/ASHAs/ANMs, to enhance their knowledge and communication skill on diarrhoea management. BCs participated in block level Sector meeting, ASHA meeting and used this platform to understand FLWs for effective use of ORS and Zinc, and reporting of diarrheal cases in their HMIS/reports. Messages were reinforced during the meetings and MS/MOICs/ HEOs were sensitized for same.

SSS team have participated in VHNDs/VHNSCs, and made positive Environment to reduce diarrheal cases by effective supply of ORS zinc at village level.



SPC and DC regularly made field visits and motivated staff to do good work, and ongoing capacity building done. Shashwat Sahbhagi Sansthan team also planned some extracurricular activities like open meeting at village and disseminates program issues. Monthly review and planning meeting has been organized at project office, in which planning and performance review done along with reporting and capacity building. Covering District Lakhimpur Pilibhit, Farrukhabad and Kannauj in which total 7210 ASHA, 7554 AWW and 1091 ANM listed through mapping and listing.

Listed Community Frontline Worker			
District	ASHA	AWW	ANM
Lakhimpur	3213	3255	459
Pililbhit	1315	1471	217
Farrukhabd	1268	1472	206
Kannauj	1414	1356	209
Total	7210	7554	1091

SSS completed a year of project in the month of March 2014, this year was quite impressive in context of success and dissemination of activities, government department supported us in our tasks.

3. Advocacy & liaison with State/District/block level official: one to one basis contact have been made to State/District/block level officials to seek support in program and meeting were organized on regular basis to aware them about program progress and positive support.

SPC have advocated with state and district level officials did aware official s about program objective and area of expertise, District coordinator, and Block coordinators visited their blocks and made interaction to ICDS DPO, CDPO, CMO, and MOICs. Interaction was focused on to controlling diarrheal diseases by

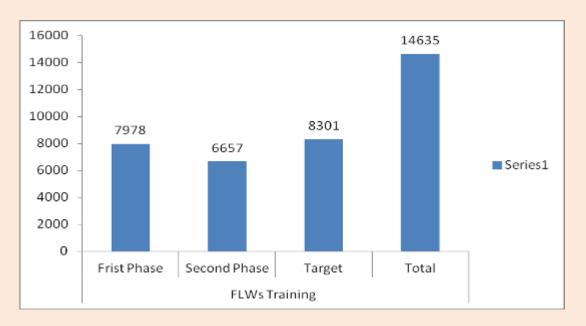
enhancing use of ORS and ZINC through their existing system i.e. ASHA/ANM/AWW, effective supply management, distribution from government to community.



Results: Health Officials get aware about program and supported in activities, ORS and ZINC supply increased to community, ASHA's got ORS and ZINC give to the community. Diarrheal cases reporting have been initiated by government and we have enforced to accurate reporting, status of referral and deaths should be monitored on regular basis.

4. Training for FLWs (ASHA /ANMs) - In this year two round of training have been successfully completed and we have made enabled FLWS, to identify, treatment and precaution of Diarrheal diseases.

Training and capacity building sessions have been organized by Block coordinator in supervisions of DC/SPC, MOIC and CDPOs have helped in these activities.





Results & Achievement: 7978 FLWS have been trained in first phase, 6657 FLWs trained in second phase; target was for the year 8301.

ASHA, ANM and AWW get aware about diarrheal decease and committed to demolish this by enhancing knowledge of community, promotion for first day use of ORS and Zinc.

5. Field visits of block coordinators to FLWs.(@ 5 FLW's every day for 20 Working days):

Block Coordinators have continuously visited to FLWS to make them enable a strong action taken against diarrheal decease. During interaction BCs communicated on identifying and reporting of Diarrheal cases to government and demand and supply of ORS and Zinc, after trainings cross checking of their knowledge and skills done by them.

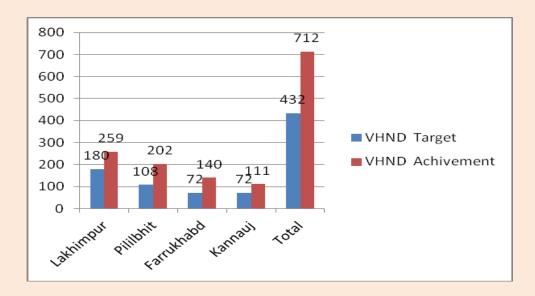


During this year target was **14400** interactions to be made in which **12997** one to one contacts made including several visits to FLWS, and Supply, demand balanced through these activities.



Results: ASHA, ANM and AWW got support at community level and their knowledge capabilities and capacity have increased day by day to fight against diarrheal disease.

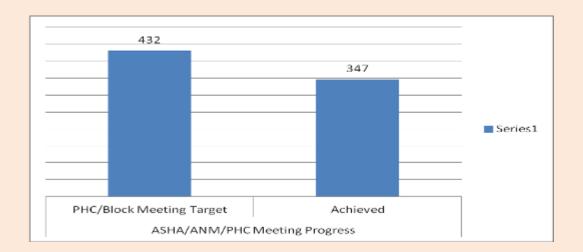
6. Participation of block coordinators in sector/PHC level/VHNSC/VHND meetings of FLWs for message reinforcement, logging issues related to supply chain and sharing of success stories / good practices of diarrhoea management to motivate the PHC team:



A. VHND Meetings: Block coordinators participated in VHND meetings and aware community members, frontline workers about diarrheal management and control, forum widely used for spreading awareness in context of ORS and Zinc Strategy.



B. ASHA/ANM Meeting at PHC: Our team made efforts to streighthening the existing government field force against diarrheoa management, in these meeting focused issues have been discussed with the objective to seek support in promotion of ORS and Zinc based remady in community people, ASHA/ANM have participated enthusiatically, PHC team supported us thorough advocacy efforts made by our team members. Trough the activities we have done capacity building of ASHA/ANM on the project issues and assured distribution of ORS and Zinc at community level.



C. <u>AWW Meetings at Sector Level</u>: AWW Meetings were organized at sector level and Block level, emphasis was clear to enlist support key worker of community in our program, it was quite helpful in our day to days, activity ICDS department have given their regular support in context of program and invited our team to address AWWs on the issue and encouraged to save thousands of lives from diarrhoea.





Results: Block coordinators have participated in 712 VHND against the target of 432 VHND, besides these activities BCs have made extra efforts to advocate on the issue 374 ANM/ASHA, and 203 AWW meetings. PHC/ICDS department got technical support from us, thus results in field to create report/support in context supply, execution of Diarrheal cases including MIS entries at their level. Knowledge and capacity increased through the activities.

7. DC supervisory District visit including Field Visits in BCs blocks and district meetings- District Coordinator have made visit to intervention sites on regular basis to identify issues related with program, including on-field support and feed- back provided to Block coordinators, supported at Block/Village level activities.

Results: BCs got boosting support and encouragement on regular basis.

8. SPC supervisory District visit including Field Visits in BCs blocks and district meetings- SPC carried visit to state officials, District officials and CHC/PHC to aware them about program and seek support in the activities, Besides this SPC also visited intervention sites and supportive supervision done by him, on field capacity building and feed-back provided to BCs, encouraged them to do good/fruitful work.

Results: BCs got boosting support and encouragement on regular basis.

- **9. Monthly District level meetings for each District Team by their respective DCs: District level** meetings have been organized at last day of every month, in which program planning, review, capacity building activities has been carried by project team, and positive Sharing and learning gives a way to tackle the problems.
- **10. Quarterly Learning Review meeting**: Quarterly Review and Learning Meeting was organized by CHAI team, in which individual performance reviewed and learning's shares with the partner NGOs, Agenda based focused session showed our gaps and strengthens regarding program management.

Need based extra Activities done by DCs and BCs- DCs and BC Participation and support to NRHM in Sixth Module Trainings

- 1. Participation in ASHA Sammelan
- 2. Planning for distribution of ORS to ICDS Workers in Kannauj district
- 3. Participation in Induction Training of other partner
- 4. All BCs collecting Monthly District/Block level stock status of Zinc-ORS since
- 5. Participated in Hand washing day.
- ORS and Zinc even having the stock of diarrheal products. Many time government official denied to provide the documents related diarrheal cases. After many follow up in CHC/PHC level but proper report are not being mentioned in HMIS. Low literacy levels of ASHA Workers are also one of the barriers.