

An overview of field sites

Action Research &
Training for Health
(ARTH),
Udaipur

ARTH's field visit sites

1. RCH centres Kadiya and Kuncholi: skilled care through nurse midwives
2. Postpartum home visits
3. Home based newborn care
4. Verbal autopsy of maternal deaths
5. Gaon pas (*gpas*): Village pregnancy advisory services

ARTH's Programme Area

- 49 villages, pop: 55,928
- 49% marginalized population (SC+ST)



ARTH's RCH centres

- Two centrally-located, road-linked health centres that remain open round the clock
- 24* 7 services maternal –neonatal services by nurse midwives
- Bi-weekly women's health services by gynecologist
- Weekly child health services

ARTH's RCH centres: Services provided

- Maternal-neonatal care: ANC, 24 hour delivery + emergency care + active referral for complications + 2 PNC home visits
- Reversible contraception (Copper-T, OCPs, condoms, DMPA, EC)
- Pregnancy confirmation (clinical & urine test) & counseling
- Immunization; acute child care using IMCI approach
- Safe abortion services in first trimester using MVA and medical abortion
- Other RCH and general health services

Nirantar:

Post-natal care through nurse midwives

Integrated approach to maternal – neonatal and child health care through a continuum of care from pregnancy through skilled attendance at childbirth with skilled PNC care for mothers and newborns

Continuum of care model: Key activities

1. Registration of all pregnancies
2. Antenatal care for all women
3. Reporting of all deliveries within 3 days of birth
4. Postnatal visits by trained nurse-midwives, twice in the first week for maternal & neonatal care

Continuum of care model: Key activities

5. Subsequent visits by trained village based workers (VHWs or ASHAs) in the first month
6. Integrated maternal and infant care by doctors and nurse-midwives through the first year:
 - Addressing maternal morbidity among mothers of infants coming for immunization or illness
 - Providing routine neonatal and infant care when mothers attend for their own health needs
7. Recording outcomes one year after delivery

Home Based Management of Young Infants (HBMVI)

- Multicentric study
- Rajsamand District in Rajasthan
- To study the effectiveness of a package of home-based interventions in reducing mortality of neonates in rural areas

2 kinds of interventions

- Based on village based neonatal care worker (Shishu rakshaks)
- Based on Anganwadi workers
- Control arm

Key Activities

- Training village health workers (Shishu Rakshaks and AWWs) and orientation of key health practitioners
- Baseline neonatal mortality study conducted
- Village workers deliver the services with support from ARTH:
- Regular visits in pregnancy, delivery, and first month after delivery
- Outcomes and impact analysis

Gaon Pas: Village Pregnancy Advisory Services (*gpas*)

**A village-based intervention to help
women manage their fertility**

Strategy

Enhance information, counseling and access at village level, to:

- Regular contraception
- Emergency contraception
- Urine pregnancy testing
- Referral for safe abortion services

gpas: Key Activities

1. Communication:

- Video shows
- Interpersonal sessions
- IEC materials to increase awareness of *gpas* services.

2. Training of ASHAs and VHVs to deliver pregnancy tests, contraception, EC and counsel women on fertility choices and safe abortion.

3. Village based services by ASHA or VHW:

- Information and counseling
- Condoms and oral pills
- Emergency contraception
- Urine pregnancy testing
- Referral for safe abortion

Verbal Autopsy of Maternal Deaths

- 4 blocks of Udaipur District
- Strengthening the capacity of the district health system to carry out verbal autopsy of maternal death

Two intervention arms

- ARTH intervention area (2 blocks) – enumeration by key informants, VA by research staff
- Govt intervention area: Enumeration by civil registration system, VA by PHC medical officers

Verbal Autopsy: key activities

- Identifying cases of maternal deaths
- Conducting the verbal autopsies using a pre-tested questionnaire
- Analysis of data to determine the cause of deaths, care seeking patterns
- Sharing data with district administration and health department