NOVEMBER 2021 | ISSUE 9



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Unstoppable Spirits: ASHA Diaries

The COVID-19 pandemic has caused millions of deaths across the world. It is one of the most horrific events this generation has witnessed. The horrendous noises of shuttling ambulances, overpacked hospitals, battles to get hospital beds and oxygen cylinders haunt us from the past. While this apocalyptic madness and helplessness continued in Indian cities and metropolises, the National Health Mission, through its frontline workers, expanded COVID-19 vigilance to rural India. At the forefront were ASHAs, charged with COVID-19 surveillance, case monitoring and vaccine advocacy at the village level.

We met Poshan Champion Ms Amba Dodiyar, working in Salakdi village of Chikhali block in Dungarpur, Rajasthan. It is a beautiful landscape comprising four islands in the watershed of Mahi River. Located near Kadana Dam, it demarcates the Rajasthan-Gujarat border. The village is home to the Bhil community. Ms Dodiyar took us to meet Anganwadi Worker Ms Kamala Tabiyar and ASHA Ms Kamala Roat of Salakadi Heraphala Anganwadi Centre.

Says Ms Roat, "There are no roads as the area is divided by water and one part of the village is covered in a dense forest. At times, it gets quite scary to pass through the jungle, so I go with my husband. Also, it gets difficult to take the boat when it's windy or rainy. So, we have to drop our work plans on a bad weather day." Boat rowing is a necessary survival skill in this Rajasthani village.

"People were not ready to come for the vaccination drive and made various excuses to skip it. So, I had to go and repeatedly counsel them to get vaccinated," she adds. Her consistent efforts to convince people about the merits of vaccination and conduct COVID-19 surveys often faced immense resistance from the community: "They would say, 'Don't even dare come near us or enlist us.' They were scared of vaccination."

For ensuring vaccinations despite the daunting circumstances, she was felicitated by the District Collector, Dungarpur, in August 2021. She humbly received our congratulatory remarks, saying, "There is nothing extraordinary about it; it is our daily work and duty, which we are doing and will continue to do. I like my work a lot as it helps me stay more connected to the people and my community."













RajPusht is a project commissioned by the Children's Investment Fund Foundation to reduce instances of low birth weight and wasting. Read more about us here.

When Digital Carries Weight



Mr Brij Bihari Sharma Block Programme Manager -Simalwara Dungarpur

Simalwara Community Health Centre (CHC) is an impressive 100-bed facility that opened in July 2021. Walking down its spotless corridors, we reached the labour room where more than 170 births happen each month. A Digital Weighing Machine (DWM) that utilises the Internet of Things occupies a place of honour here. Every child born at the Simalwara CHC is weighed accurately to the third decimal. A photo, weight measurement and basic ID details are relayed to a server after each live birth. The analogue infant weighing scale has not been used at all since the CHC shifted to its swanky new premises.

Says Ms Kamla Pargi, labour room in-charge, "Till we shifted to these new premises, most of the deliveries had to be diverted to nearby primary health centres. Now we are functioning at full capacity. The DWM has been extremely useful for us to track birth weight. It is easier to weigh the child accurately as in the digital weighing scale; we don't have to scrutinise the measurement as closely as the older scale." The labour room register bears witness to DWM usage, with records matching between the two.



Labour room incharge Ms. Kamla Pargi with the DWM Machine at CHC Simalwara labour room

"The machine has helped us identify borderline low birth weight cases on time. We can adequately counsel families regarding recommended care practices or refer children to Special Newborn Care Units, thanks to this feature. It has made our work easier," she adds with a smile.

RajPusht has installed more than 150 of these innovative machines in Banswara, Dungarpur, Pratapgarh and Udaipur.



CHC Simalwara







Nutrition Counselling by PC Megha Pandey, Arnod, Pratapgarh



IGMPY Document Verification and Counsellig at 'Prashasan Gaon ke Sangh', Gram Panchayat Tilora, Dungarpur



PC Magan Nanoma doing Home Visit & Counselling, Ratdiya, Dungarpur



Child MUAC measurement by PC Vishal Meena, Anta Block, Baran

A Mother's India



Dr K.L. Palat, Reproductive & Child Health Officer, Dungarpur



The physical and mental wellbeing of every person is crucial for them to lead a meaningful life. Every one of us—engineers, doctors, scientists, labourers and farmers— comprise human capital, which nurtures a nation into a superpower. For this dream to materialise, each citizen must get a chance for optimum socio-motor and cognitive growth so that they can live up to their potential.

A child born to a healthy, happy mother will be strong, more resistant to childhood maladies and an asset to the country's future. A mother's health, thus, attains paramount importance. Various programs by the government and development-sector institutions are currently underway to respond to maternal and child health challenges. These seek to both prevent and cure undernutrition and common health problems. The success of these programmes depend as much on beneficiaries and their enthusiastic participation as effective programme design and implementation.

There are three simple actions that a mother must perform to benefit from Government outreach for improved health. These are:

- Register pregnancy early (in the first trimester) and avail at least four ante-natal check-ups
- Monitor weight gain; check haemoglobin count, and monitor blood pressure, urine, blood sugar and thyroid levels; and avail the package of services offered at the monthly Maternal & Child Health and Nutrition Days organized at Anganwadi Centres
- Ensure that they daily consume from various food groups such as cereals, pulses, green leafy vegetables, milk & its products, and locally available, seasonal fruits.

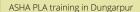














ASHA PLA training at CHC Anandpuri, Banswara



ASHA PLA Training at Mohammad Phalasiya PHC by trainer Pushkar Pandya, Nitin Verma and Piyush Garg in Block Jadhol, Udaipur



PC Yatendra Chaudhary counselling a pregnant women about maternal weight gain with the help of PC App screens, Sector Relavan, Kishanganj, Baran

The Tobacco Threat

When we asked Ramrati Sahariya whether she chewed tobacco, the 25-year-old mother of two from Kishanganj Block, Baran, smiled and looked away. She then confessed that she had gutka throughout her pregnancy and even while breastfeeding her 5-month old infant. Her mother-in-law took frequent breaks during our conversation to smoke beedis and her sister-in-law too chewed tobacco despite being in her early teens.

Ramrati and her family are not anomalies. The National Family Health Survey-5 reports that about 6.9% of women above the age of 15 have tobacco in Rajasthan. The figure is as high as 19.3% in Baran. Anecdotal evidence from RajPusht's Block Programme Managers and POSHAN Champions suggests that many women continue to smoke or chew tobacco during pregnancy and while breastfeeding.

This harms not only mothers, but also children. Harmful substances from cigarettes are passed onto the foetus through the bloodstream and to infants through the mother's milk. According to the World Health Organization, maternal smoking during pregnancy is linked to a doubling of the risk of sudden infant death and birth defects. Exposure to second-hand smoke during pregnancy is linked to a 23% increased risk of stillbirth and 13% increased risk of congenital malformation. Nicotine, the addictive substance in tobacco, also suppresses one's appetite. This is dangerous for pregnant women and new mothers, as they need extra calories to support their growing child.

Divakar Jharbade, Block Programme Manager, Salumber, Udaipur District, says, "There are several reasons women take up tobacco. One woman I talked to said she had picked up the habit from her friends. Another said that she had heard that tobacco is good for digestion. She had started when she was suffering from stomach ailments, but then could not give up the habit. But for many women, tobacco helps them deal with stress or kill their hunger when they have to work for long."

RajPusht's Social & Behaviour Communication strategies seek to promote positive behaviours, such as abstaining from tobacco. The first stumbling block is the lack of knowledge regarding the harm tobacco does to mothers and children. Our POSHAN Champions counsel the mother and her family so that they are aware of its dangers. They also motivate the family members to give up tobacco as one is more likely to have it if others around one are having it too and to support the mother by letting her take breaks and naps and making sure she has frequent meals.

Tobacco is an addictive substance, so it's hard to let go of the habit. But with constant counselling and motivation, we hope to see a shift in behaviours.



Developed by RajPusht this poster will be displayed by NHM at PMSMA sites in 33 districts of Rajasthan