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Short Communication

Introducing Concept of Thematic Village Health and Nutrition Day in Gujarat State- An Experience towards a Step Forward

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Abstract

Village Health and Nutrition Day (VHND) is one of the key strategies for promotion of reproductive & child health. Because of comprehensive package of health and nutrition services, it is very challenging to convey all messages to the beneficiaries on the same time. It makes more sense to give extra emphasis on relevant key messages based on one chosen theme during VHNDs.

To introduce the concept of thematic VHND, diarrhoea prevention and management was chosen as a theme. The convergent action plan and detailed guideline for implementation was developed and the implementation of the same was concurrently monitored.

Thematic VHND was observed in 69% of the monitored sessions, in varying degrees, across the state. Based on the experience, it is feasible to conduct such sessions during VHNDs taking relevant themes and can be considered as an effective strategy for delivering health messages at mass level. Communication gap at various levels was the main reason for non celebration of thematic VHND and owning the programme by district managers was the most important reason behind the success of the initiative.

Key-words: Village Health and Nutrition day (VHND), Mamata Divas/ Mamata Abhiyan, Thematic, Gujarat

Background

Village Health & Nutrition Day (VHND)¹ is one of the strategies for promotion of reproductive & child health in India and is the key component of *Mamta Abhiyan*² in state of Gujarat,

commonly known as *Mamta Diwas*, conducted mainly as outreach activity. Based on the Valsad district pilot experience supported by UNICEF, Government of Gujarat scaled up *Mamta Abhiyan* in the state³ and average 33000 VHND sessions are held every month across the state³ at Anganwadi centre or Sub centre in a village usually on Wednesday¹ as per micro plan prepared for this purpose. Health & ICDS functionaries provide health and nutrition services to all children under five years of age, antenatal & post natal mothers and adolescent girls³.

It provides good opportunity for reaching unreached and for social inclusion. It is also a good platform for health education and behavior change communication. Comprehensive package of health and nutrition services, makes it challenging to convey all messages to the beneficiaries on the same time. It makes more sense to give extra emphasis on one key message per month during VHND. This led to conceptualization of celebrating Thematic VHNDs choosing relevant theme appropriate for the month based on the health problem, prevalent during that period like diarrhoea during monsoon, pneumonia during winter etc.

Selection of theme: The thematic VHND was conceptualized in the month of May 2012 and diarrheal episodes are known to reach the peak during months of June- July in India. Moreover, diarrhoea is a major public health problem accounting for 13% of the under five deaths⁴ and more than 80% of these deaths are preventable with available interventions⁵. The major challenges for control of diarrhoea are low

ORS & zinc use rate⁶, poor feeding practices⁷, poor availability/use of safe drinking water and sanitation facility⁶ and lack of awareness & poor practice of hygiene i.e. hand washing at critical times⁷.

Considering all these facts, the concept of the thematic VHND was introduced taking theme of Diarrhoea Prevention & Management to spread awareness on the issue and to suggest & recommend implementation of the concept based on the findings.

Methods

Following Process was followed for Introducing Concept of Thematic VHND (Figure 1).

1. Conceptualization

In coordination with concerned sections of UNICEF state office, concept note for conducting Thematic VHND on Diarrhoea Prevention & Management was prepared by health section. It outlined the roles and responsibilities of each department involved, activities to be carried out with timeline and execution of the same, which was shared with the concerned departments of Government for their feedback and agreement.

2. Getting Consensus & Planning

Convergent action plan was developed in close coordination with all the concerned departments to reduce diarrhoea risk among under five children through Thematic VHND strategy. The detailed guideline was prepared outlining the activities to be carried out for observing thematic VHND in addition to regular VHND activities at the session site, materials required for the same, when to do these additional activities during the session, who will be the beneficiaries and who will be the service providers.

3. Communication

3A. Communication from line departments to District & Block level officers

The official letter for the celebration of thematic VHND on Diarrhoea Prevention & Management was issued from the state health department to

the districts mentioning the concept and the selected theme along with the detailed guideline.

3B. Satcom

Using Satcom (satellite communication) facility available in the state of Gujarat, the message of Thematic VHND was communicated up to all frontline functionaries of health and ICDS in all districts. The key objectives were dissemination of the message of celebrating thematic VHND on diarrhoea prevention & management with the rationale behind and providing the service providers with the guidelines for thematic VHND celebration including activities to be carried out, logistics required and work distribution of all the functionaries.

Officials from Government departments and UNICEF participated in the panel discussion. To effectively pass the messages, power point presentation and video clip developed by UNICEF in local language was used. It provided opportunity for the interactive session as the questions were invited from the field by displaying toll free number and all the queries were addressed by the experts in the panel.

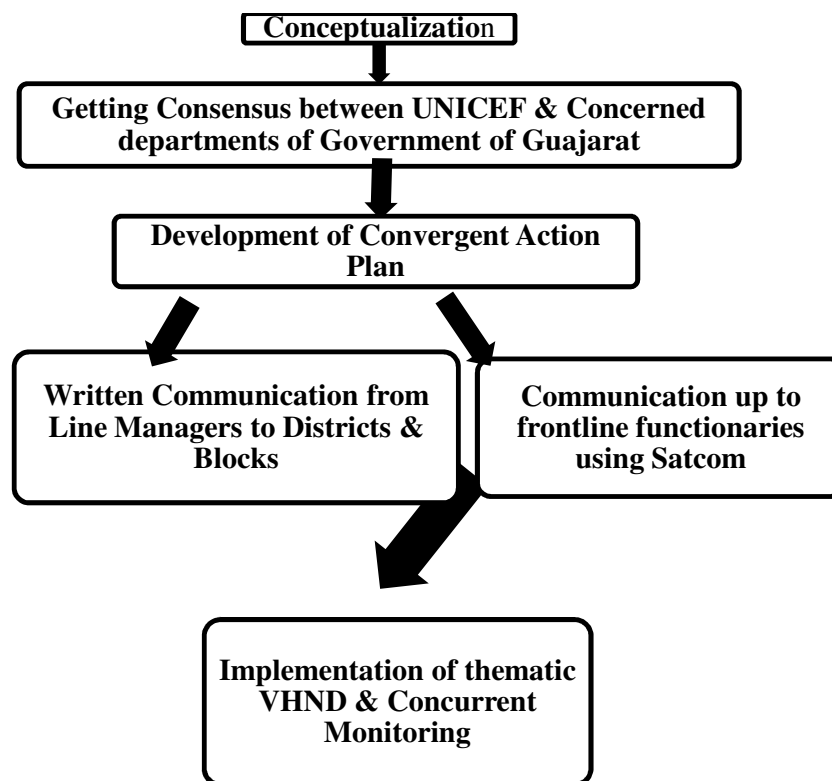
4. Concurrent Monitoring

Concurrent monitoring of thematic VHND was carried out by Government officers (RCSOs- Regional Child Survival Officers) & UNICEF consultants from concerned departments using pre designed structured tool. Total 51 sessions were monitored across 16 districts out of total 26 districts of the state. Data analysis was done using Microsoft Excel.

Results

Thematic VHND was observed in varying degrees across the state from hundred percent celebrations in district to partial to nil celebration in others. Thematic VHND was observed in 68.6% [95% CI 0.55 -0.80] (35/51) of monitored sessions. Of which, in 37.1% (13/35) of

Figure 1: Process of Introducing Concept of Thematic VHND



sessions, it was celebrated and made possible only because of special efforts of the monitors. (Figure 2)

Reasons for non celebration of Thematic VHND (n=29)

The most common reason found was non awareness about the same in more than two third of cases (67.7%) indicating communication gap. Other reasons were non availability of required logistics (12.9%), front line workers busy in other activities of VHND (12.9%) and presence of only few beneficiaries at the session (6.5%).

Details of the thematic VHND sessions held (n = 35)

Logistics Availability at the sessions:

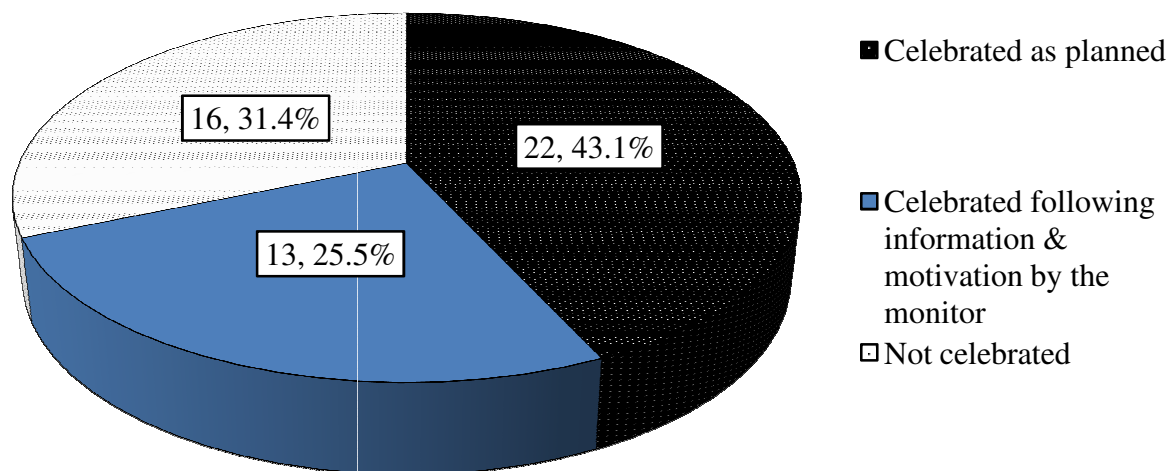
Most of the logistics required for celebration of thematic VHND were available at most of the session sites i.e. ORS sachets in 100%, spoon and glass in

91.4%, soap, drinkable water & one liter water jug in 88.6%. The least available logistic was zinc tablet/syrup only in 28.6% sessions because of no state supply except in four districts where Diarrhoea Alleviation through Zinc & ORS Therapy (DAZT) project was being implemented. The other concerns were non availability of chlorine tablet (65.7%) & ladle (57.1%) in more than half of the session sites.

Activities observed during the Thematic VHND sessions:

Out of pre decided key activities for thematic sessions, correct method of hand washing was demonstrated in 97.1% of sessions followed by demonstration of ORS preparation and use in about 82.9% of sessions. However, few sessions did demonstration of use of chlorine tablet (45.7%) and zinc tablet (40.0%) owing to lesser availability of both the things.

Figure 2: Celebration of Thematic VHND in the monitored sessions



Counseling topics covered during the Thematic VHND Sessions:

In about 57% Thematic sessions, various counselling topics on diarrhoea were covered. Most common topic which was covered was hygiene and safety in 60% followed by feeding during diarrhea (57.1%), use of safe drinking water (54.3%), danger signs of diarrhoea (48.6%) and referral during severe diarrhoea (40.0%). Very few (about 3%) covered home based care in diarrhoea, causation and consequences of diarrhoea.

IEC material displayed at the sessions:

65.7% of the thematic sessions displayed various diarrhoea related IEC materials i.e. banner, posters, pamphlets, exhibition panel, flip charts, flash cards.

Human interest stories from one of the Thematic Sessions:

The beneficiaries were found happy following the talk of ANM on diarrhoea prevention & management. They expressed their feeling saying “it is good for Children and if such talks are arranged further, they will be happy to participate”.

Discussion

Thematic VHND provide Good opportunity (1) for inter- sectoral convergence to work for diarrhoea control, (2) to make community aware and to sensitize health care personnel about an important but forgotten killer of childhood i.e. diarrhea, (3) to promote use of ORS and Zinc for childhood diarrhea management and (4) to promote other health behaviors i.e. breast feeding, hand washing at critical times, using safe drinking water

The sessions where thematic VHND was not celebrated, the reason at most places being non awareness about the same amongst medical officers of PHC and frontline functionaries. When they were made aware, they showed enthusiasm to celebrate. Communication at each level is of prime importance as communication gap at various levels was the main reason for non awareness about the thematic VHND at the field level which limited large scale implementation of this initiative.

Ownership by the district health managers played important role for the success of this initiative and made big difference. Initiatives taken by the districts

for successful implementation in the field like organizing meetings at district/block levels to orient staff for thematic VHND, issuing letter to all PHC MOs to ensure availability of all logistics required for celebrating thematic VHND and developing separate formats for reporting of the activities of thematic VHND sessions.

Based on the experience, of celebrating Thematic VHND on Diarrhoea Prevention & Management; it is feasible to conduct such sessions during the VHNDs and it can be considered as an effective strategy for delivering health messages at mass level using the available resources. Similar Thematic sessions can be thought of for other health problems like ARI/Pneumonia control during winter months, Malaria during rainy season and also for healthy behaviors like breast feeding/complementary feeding during August-September, newborn care during another month.

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