

pahal

QUARTERLY NEWSLETTER BY UP-TSU

A NOTE BY EXECUTIVE DIRECTOR

Dear Friends,

I present to you the tenth edition of 'PAHAL', showcasing the insights of UP-TSU's support to the GoUP to improve outcomes. As a preparation to COVID-19 pandemic, UP-TSU assisted GoUP in capacity to treat pediatric population.

This issue also delves about three short studies: understanding reasons for homebirth in Balrampur, to track GoUP's family planning program and understanding exposure to SARS-CoV-2 infection in Uttar Pradesh.

I hope this issue inspires and encourages all.

Sincerely,

(Dr. Vasanthakumar N.)
Executive Director



About UP-TSU

Uttar Pradesh Technical Support Unit (UP-TSU) was established in 2013 under a Memorandum of Cooperation signed between Government of Uttar Pradesh (GoUP) and Bill & Melinda Gates Foundation (BMGF) to strengthen the Reproductive, Maternal, Newborn, Child, and Adolescence health (RMNCH+A) and Nutrition. University of Manitoba's India-based partner, the India Health Action Trust (IHAT) is the lead implementing organization.

UP-TSU provides technical and managerial support to GoUP at various levels of the health system and that includes maternal, new born, child health, nutrition and family planning. UP-TSU also supports the GoUP at the state level in policy formulation, planning, budgeting, human resource management, monitoring, contracting, procurement, and logistics to improve healthcare throughout the state.

Your suggestions, innovative ideas and feedback are invaluable to the success of our program.

Write to us at iec.uptsu@ihat.in

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- Family Planning

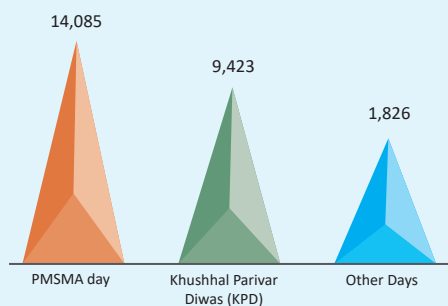
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- Facility Level Initiative
- Community Level Initiative
- Nutrition
- Monitoring & Evaluation
- IEC/BCC



Khushhaal Pariwar Diwas (KPD) inauguration by MO Farrukhabad at CHC Baraun

Average clients served* (Apr'21 & Jun'21)



*clients served includes Sterilization, IUCD, PPIUCD and Antara
Source : Program data

Feedback by counsellor on integrated counselling training



Kalpana Narwasiya
RMNCH+A counsellor,
CHC Mall

"The integrated counselling training given by NHM and UPTSU team was very fruitful for us. We were given beneficial training, not only on RMNCH+A component but also on Adolescent health and behaviour. The trainers helped us understand various aspects of adolescence and made us understand the ways in which we can create awareness about right contraception use among adolescents to avoid unwanted pregnancy in them. It was a new topic for us and we look forward to use this important information and techniques in the right direction."

Assured Service Delivery on Fixed days

Assurance of availability of quality family planning services on fixed days enable couples to adopt a method of their choice. Special days combined with provisioning of routine FP services complement each other in bolstering availability and an environment of assurance. A noticeable increase was observed in the number of clients served when special days like Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA) was combined with Antara Diwas and Khushhaal Pariwar Diwas (KPD) in April and in June. PMSMA is organised on 9th of every month and is aimed at bringing high risk pregnant women to facilities for antenatal care. The PMSMA day merged with Antara Diwas provided an opportunity to counsel women on contraceptives. Additionally, it also gave a chance to speak to accompanying women as potential FP clients and influencers. Khushhaal Pariwar Diwas (KPD) (organised on 21st of every month) which is focussed on mobilizing newly married couples, high parity women and HRP women for FP services, also aimed at creating an enabling environment to focus on contraceptive counselling and service provisioning to these priority groups. This also helped the FLWs to mobilize clients for FP services as assurance of availability was created by combining Antara Diwas with this day. Out of total family planning clients served in April and June, 50% clients were served during these fixed days.



Khushhaal Pariwar Diwas (KPD) inauguration by Zila Adhyaksh at Civil Hospital Lingiganj, Farrukhabad



Antara Diwas and PMSMA day, Basti



Antara Diwas at CHC Manikpur, Chitrakoot



Khushhaal Pariwar Diwas (KPD), Bulandshahar

Mentoring support to ANM/CHO/Staff Nurses/RMNCH+A & AFHC counsellors through Digital Means

The family planning counselling training of ANM/CHO/Staff nurse was completed in February 2021; total 2,172/2,250 participants were trained from all 75 districts. 12 batches of 2-days Integrated counselling training of RMNCH+A and AFHC counsellor was completed in March 2021 in which 528 (225 RMNCH+A and 303 AFHC) counsellors were trained. With the onset of pandemic, mobility was restricted and onsite in-person mentoring was not possible. To ensure continuity of capacity building efforts, UP-TSU family planning team has been sharing short e-learning videos/modules through WhatsApp groups. This allows participants to access the e-modules/videos at any time, which helps in effective counselling of clients. In this quarter, e-modules on overview of FP in UP, FP unmet need, menstrual cycle, FP methods, Antara Injectable and case studies on knowledge of menstrual cycle etc. was shared. The WhatsApp group also served as a platform for participants to ask questions related to family planning counselling.



Inauguration of the Skills Lab at SIHFW, Lucknow by Health Minister Shri Jai Pratap Singh



Health Minister Shri Jai Pratap Singh addressing the inaugural session at SIHFW, Lucknow

PEDIATRICIAN TRAINING AT SKILL LABS IN LUCKNOW AND GB NAGAR

Considering pediatric population's vulnerability to the 3rd wave of COVID-19, the Directorate of Medical & Health Services with the support of UP-TSU developed a technical resource package to train all service providers in pediatric population on OSCE (Objective Structured Clinical Examination) sheets as preparedness for COVID-19 management. The training was conducted at the newly established Skill Labs in Lucknow and Gautam Buddha Nagar which were inaugurated by Hon'ble Health Minister.

Total batches of trainings conducted

13
(8 batches at SIHFW, Lucknow and 5 batches at RMNCH Lab, Noida)

Total District-level master trainers trained

351
(2 ACMOs, 91 Pediatricians, 78 Medical Officers, 82 Nurse Mentors-UP-TSU and 98 Staff Nurses / Nurse Mentors-Govt.)

Hon'ble Health Minister, Shri Jai Pratap Singh, re-iterated the commitment of the government to protect each and every citizen from this pandemic. He appreciated the timely support of UP-TSU, led by Dr. N. Vasanth Kumar, in establishment of the Skills Labs at Lucknow and GB Nagar and expressed confidence that this training would be very helpful in managing the COVID-19 pandemic in UP.

WeCare UP-TSU for staffers

A WhatsApp group was launched on 20th April to reach out and provide help to the families/relatives and friends of more than 40 staff members during the COVID-19 time with the support of Executive Director (ED), UP-TSU. The group focused to provide medical help including prescriptions, treatment advise & counselling, and to arrange medicines, oxygen cylinders, concentrators, hospital beds, COVID-19 tests and reports. In a span of one month, 40 staff members' families have been benefitted through this WhatsApp group.

The state office also procured 2 oxygen concentrators of 5L capacity with nasal prongs to meet any emergency need for any staff member or their families. This initiative was widely appreciated by the teams who found help handy whenever needed and we were able to sail through the rough waters by coming together as an organization supporting each other.

Capacity Strengthening Program for CCM & IPP

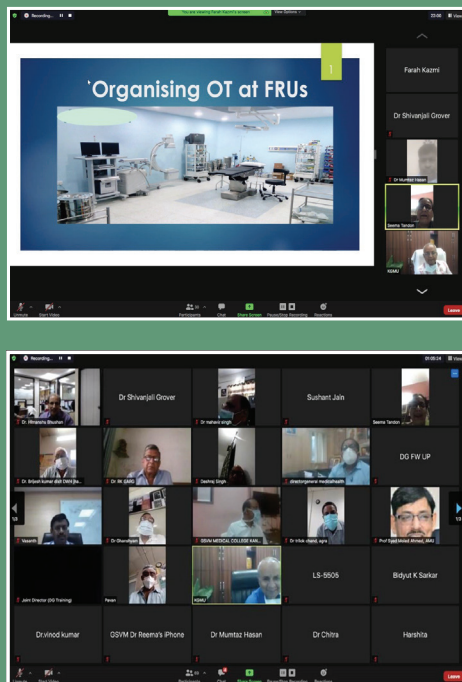
Suspecting the 3rd wave of COVID-19, TSU supported an online training via Zoom to update COVID and non-COVID government hospital staff and private hospitals on Clinical Case Management (CCM) and Infection Prevention Practices (IPP). The training was organised from 6th-9th April 2021 in 4 batches which was attended by a total of 373 participants from COVID hospitals, 570 participants from non COVID hospitals and > 500 private hospitals attended these trainings.

All sessions were inaugurated by DGMH Dr Negi and facilitated by the SSO and surveillance team along with UPTSU, Professors from the Dept. of Medicine KGMU and WHO.

1st State MDSR Committee Review

The 1st State Maternal Death Surveillance Review (MDSR) Committee review chaired by MD NHM was conducted via Zoom on 3rd April 2021 with JD MCH, GM MH, all District Nodal Officers and Maternal Health Consultants from the districts and DD FRU NM from UPTSU. This preceded by an online meeting of the Confidential Review Committee of the 8 medical colleges that gave the possible diagnosis and recommendations for the case studies sent to them. UPTSU supported the activity by helping the Director MCH select cases for the CR committee as well as preparing 3 case studies from the formats received from the districts for discussion during the State meeting. 3 maternal deaths, one each from facility, in-transit and at private hospitals were selected for the same. The key gaps and recommendations for each of the cases were discussed with the districts, issues in maternal death recording and reporting on HMIS/UPHMIS were also discussed by GM MH.





Operationalizing First Referral Units (FRUs)

To reduce maternal and neonatal deaths, GOI has revised the curriculum for Life Saving Anaesthesia Skills (LSAS) and Emergency Obstetric Care (EmOC) courses and upgraded the duration to 24 weeks for both. Prior to this in Uttar Pradesh, the 4 Medical Colleges were accredited for 18 weeks LSAS curriculum and 2 Medical Colleges were accredited for 16 weeks EmOC curriculum.

LSAS and EmOC are GOI recognized trainings for MBBS doctors to develop and enhance their skills and practices for managing maternal complications and Caesarean sections at FRUs. GOUP has accredited 6 more medical colleges for imparting CEmONC –LSAS training totalling 12 centres.

A TOT (training of trainers) for faculty members of medical colleges and accredited district hospitals was conducted led by NHSRC, GOI and KGMU- Prof Uma Singh, HOD, Department of Obstetrics & Gynae and Prof G.P Singh, HOD, Anaesthesia.

These trainings will ensure expansion in the pool of trained health professionals, bridging the gap of unavailability of Specialists to perform Caesarean section deliveries at FRU and operationalizing First Referral Units (FRUs) to manage all complications of pregnancy and new-born care.

Key Steps :

1. The MBBS doctors trained in CEmONC and LSAS are used for activation of FRUs in a systematic manner.
 - a. Pairing by doctors themselves, for nominations, with preference to doctors who apply in pairs.
 - b. Pre-selection of inactive FRUs for activation, by pairs themselves.
 - c. Transfer and posting of finalized doctors for training, before undertaking training.
 - d. Option of only maximum 3 month mentoring at DH instead of 6 months earlier, post completion of training.
2. Now in Uttar Pradesh the accredited Medical Colleges as centers for CEmONC and LSAS training are six each.

The list of LSAS accredited colleges is as follows :

	Medical Colleges	Designated DWH
LSAS	KGMU, Lucknow	VAB Hospital, Lucknow
	SNMC, Agra	DWH, Agra
	MLB MC, Jhansi	DWH, Jhansi
	LLRM MC, Meerut	DWH, Meerut
	G.S.V.M. Medical College, Kanpur	DWH, Kanpur
	JN MC (AMU), Aligarh	DWH, Aligarh

The list of EmoC accredited colleges is as follows:

	Medical Colleges	Designated DWH
CEmONC	KGMU, Lucknow	VAB Hospital, Lucknow
	JN MC (AMU), Aligarh	DWH, Aligarh
	S.N. Medical College, Agra	DWH, Agra
	LLRM MC, Meerut	DWH, Kanpur
	G.S.V.M. Medical College, Kanpur	DWH, Prayagraj
	I.M.S., Banaras Hindu University, Varanasi	DWH, Varanasi

Mr. Amit Mohan Prasad - Additional Chief Secretary

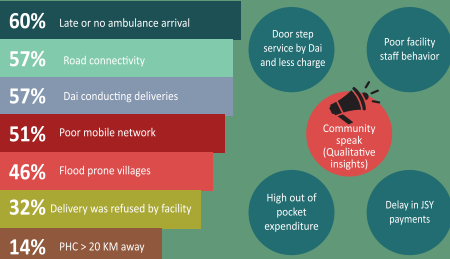
- LSAS training can play a pivotal role to reduce Maternal morbidity in UP.
- Giving respectful and joyful experience to mother and child at the facility.
- Ensuring a specialist (EmONC, LSAS) and providing 24x7 infrastructure and logistics for every DH and CHC to function as FRU
- 3620 new posts generated by UP Govt for FRUs to be functional 24*7, by revising new recruitment process under provisional medical services for Specialists and MBBS cadre.

Dr. G. P. Singh - Head of Department of Anaesthesia, KGMU Lucknow

- Basic theme of LSAS training is very intensive and Skill based in which we have to look after Mother and the safety of new born.
- From 2008 to 2020 we have progressed a lot, initially we faced many hiccups for organizing the training.
- Earlier trained doctors were not posted at FRU, but I hope this changed strategy of Health Department as Buddy-Buddy model will help us achieve the desired Goals.

Reasons for home deliveries : An analysis from Balrampur

Sub-centre wise analysis of home deliveries (N=173)



Anecdote from The field



Dr. Shohaib Ahmad
MoIC, Gaindas Bujurg Block,
Balrampur

"In our block, all of our ASHA Sanginis make a note of the Estimated Date of Delivery of all pregnant women, so that when they enter the third trimester of pregnancy, ASHAs can focus on their birth preparedness and facilitate institutional deliveries. This work has been greatly supported by UP-TSU"



Asha Gupta
AS, District Balrampur, Block
Gaindas, SC Nagwa

"In our block, Institutional Deliveries (IDs) have shown a consistent improvement and home births have reduced. To promote IDs, for the last 1 year, I ensure that each ASHA has the line list of all pregnant women with their EDD. Through EDD, I follow up with the third trimester pregnant women and motivate them for ID. UP-TSU supported us through the process."



Anju
ASHA, Block, Gaindas

"Using EDD tracking has helped us to focus more on third trimester pregnant women and to provide timely support. I always note down the EDD of all PW separately, so that I focus on the third trimester of PW to counsel them and their family for ID and ensure that she delivers in the facility."

Understanding Homebirth in select pockets of Balrampur

The analysis from 2019-20 UPHMIS data revealed that 173 out of 215 Sub Centres (SCs) in Balrampur reported home birth rate as high as 21%. UP-TSU conducted a dipstick study in these SCs to understand the factors influencing homebirths. The study captured quantitative and qualitative information and key findings reflected in Figure 1. The study findings revealed the interventions required to address home births in the selected pockets of Balrampur -

- Advocacy to address unavailability and inaccessibility of delivery points and ambulance services at block and district level.
- Community engagement to reduce homebirths

Maternal Mortality Rate (MMR) and Neonatal Mortality rate (NMR) has been a constant concern in Uttar Pradesh. According to an external evaluation conducted by Sambodhi, approximately 22% of the deliveries in the High Priority Districts (HPDs) happened at home. As per NFHS-4, 44% of new born deaths were among the babies born at home. Also, 52% of the new borns who had home birth in UP, died on the day of birth and 33% of the new borns who were delivered at home died between 1-7 days of birth (xMLE).

Key Initiatives undertaken by UP-TSU with the support of district health administration in Balrampur –

Activation of Delivery Points (DPs) – Regular advocacy with the concerned district departments led to the activation of delivery points in 15 SCs out of 173 piloted SCs. These 15 SCs on an average have a load of 122 deliveries per month.

Factors like unavailability of nearby delivery points (DPs) and far off hospitals emerged as the most prominent factors contributing to the homebirths. Balrampur district TSU team analysed ASHA wise incentives under Janani Suraksha Yojana (JSY) from the MIS Portal of BCPM (Block Community Process Manager) App to understand SC wise coverage of Institutional Deliveries (IDs) against estimated deliveries.

This analysis and regular follow up with the Medical Officer in Charge (MoIC) led to the activation of accessible and functional DPs.

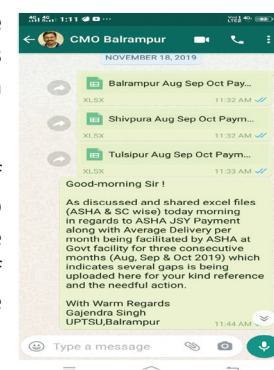
Birth Preparedness Slips – In order to ensure that each Pregnant Woman (PW) plans her delivery at the facility, a Birth Preparedness Slip is created. A Birth Preparedness Slip contains all necessary medical details of the PW and contact points for immediate action. To reduce home births, addressing delays in seeking care and thereby reaching the facility for delivery in time, these slips were created and distributed among ASHAs to be pasted at PW's house who were in their 3rd trimester. Special emphasis has been given to birth preparedness and complication readiness in these slips.

Estimated Date of Delivery (EDD) is now essential!

To encourage PW for institutional delivery, District released a letter instructing every ANM/ASHA Sangini(AS)/ASHA to list down the registered PW with their EDD details so that the district could ensure opening bank accounts of PW in their last trimester. Soon after the letter was released from the district, Block Outreach Coordinators (BOCs) supported Front Line Workers (FLWs) to prepare a register comprising all details related to the Last Menstrual Period (LMP), EDD and other necessary information required for follow up.

Key outcomes of EDD maintenance :

1. Overall there is a decline of more than 22% of reported home delivery in the year 2020-21 in comparison to 2019-20
2. About 61% of the SCs have shown a decline greater than 5%.

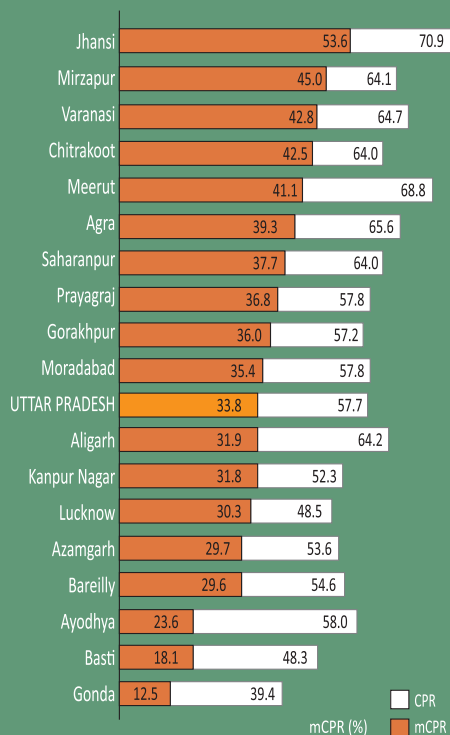


Status of Home birth with CMO through whts app messages

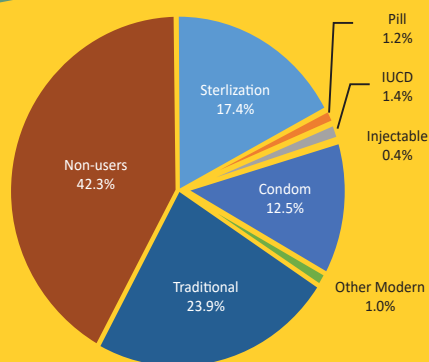


EDD tracking guidance to Blocks by ACMO Sir Balrampur

CPR and mCPR across 18 divisions of UP



Distribution of CMWRA by type of FP methods use, 2021



Integrated family planning survey in Uttar Pradesh, India

The proposed population policy 2021-2030, the Government of Uttar Pradesh aims to stabilize the population in the state through reducing the TFR from 2.7 to 2.1 per woman by 2026 and 1.7 by 2030.

UPTSU is supporting GoUP to increase the accessibility of contraceptive measures and population stabilization in the state. In this context, robust periodic data on family planning indicators are highly essential to identify gaps and prioritize evidence-based program planning. Though vital data on family planning are available through public surveys like NFHS; the periodicity of such surveys remains an issue. To enhance government efforts to improve FP service uptake, the University of Manitoba and India Health Action Trust through UP-TSU conducted Integrated Family Planning Survey across 18 divisions during December 2020- March 2021.

The community and facility level assessments were done to obtain a comprehensive understanding of community and the facility level factors affecting FP uptake in the state. The study covered 12,200 Currently Married Women in Reproductive Age (CMWRA) and 2132 service providers, including – ASHA, ANM, Doctor, Nurse and counsellor both at the community and facility.

The objectives of the survey -

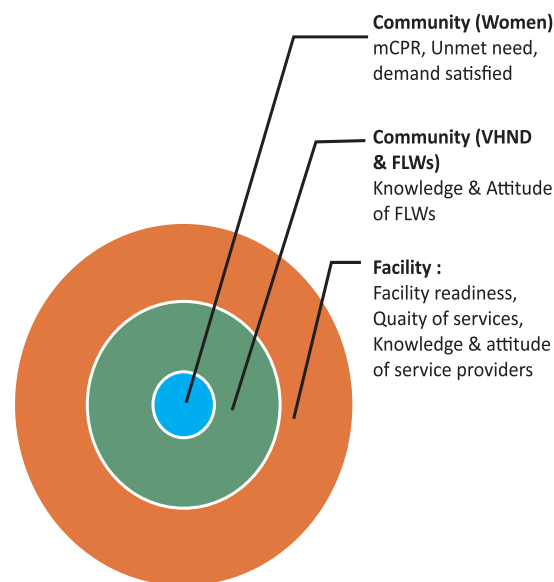
Community-level objectives :

1. To assess the level of modern Contraceptive Prevalence Rates (mCPR), unmet need for family planning, intent to use and demand satisfied for FP services at the state and divisional level.
2. To assess the quality of FP services received by users.
3. To assess the knowledge and attitude of ASHA/ANM on individual FP methods and provisions of services.

Facility-level objectives :

1. To assess the facility (including VHND) preparedness in providing a basket of choices.
2. To assess the availability and quality of FP services at the facility, including knowledge and attitude of health care providers on FP methods or available service at the facility.

360° Assessment



The initial findings suggest that the modern contraceptive prevalence rates (mCPR) of Uttar Pradesh is 33.8%, with an increase of 2.1 percentage points from NFHS-4 (2015-16) with a vast heterogeneity between administrative divisions, ranging from 12.5 mCPR in Gonda and 53.6% in the Jhansi division. Contraceptive Prevalence Rate (CPR) of the State has also increased from 48% (NFHS-4) to 57.7%, with a similar heterogeneity levels among the divisions as shown in mCPR. Sterilisation (17.4%) and condoms (12.5%) are found two highly used modern contraceptive methods. The use of the traditional method found to be 23.9% in the state of Uttar Pradesh. The analysis has been done to unfold the various aspects of FP uptake and answering the reasons for increase in uptake of certain methods.

Nutrition Initiatives



DNS orienting Anganwadi Workers on the use of growth monitoring devices in a sector meeting, Kaushambi.



Anganwadi Worker measuring the length of an infant using an Infantometer, Sonbhadra



Anganwadi Worker counselling a mother on complementary feeding at a VHSND site, Etah

Understanding exposure to SARS-CoV-2 infection in Uttar Pradesh, India

The Department of Health and family welfare, Government of Uttar Pradesh; King George Medical University, Lucknow, Lala Lajpat Rai Memorial Medical College, Meerut and Uttar Pradesh Technical Support (UP-TSU) Unit designed and conducted the second round of seroprevalence studies in the state to understand the population already exposed to SARS-COV-2 infection and potential for future wave of COVID-19 infection in UP.

Under this three different studies were conducted including sero survey in general population across 75 districts, four selected slums between the population aged 5 and above and Seroconversion study among COVID-19 positive patients.

While seroprevalence study aimed to understand the presence of antibody developed against SARS-CoV-2 infection in human blood cell, the seroconversion will inform the duration of acquired immunity from prior exposure or a result of COVID-19 vaccination. Findings helped the decision makers to plan adequate HR, infrastructure and drugs to manage the future wave COVID-19 more efficiently.

The aim was to answer the followings:

The overall state-level seroprevalence among the population aged 5 years and above by place of residence, age (5-17y; 18y and above) and gender (18+ population).

The overall heterogeneity in the prevalence of antibodies by district, within district by age (5-17y; 18y and above), and gender (18+ population)?

The change in prevalence of antibodies in the 11 districts where previous sero-epidemiological study was conducted.

The prevalence of COVID-19 antibodies in selected 4 urban slums and its comparison with the non-slum areas of that district?

Duration of sustainability of the SARS-COV-2 antibodies remains detectable among the COVID-19 positive patients?

The duration of the presence of antibodies differ by status at the time of infection (symptomatic/asymptomatic).

UP-TSU extended support in developing the study protocol, sampling, preparation of tools and developed ODK for mobile based data collection. It also aided techno-managerial support in conducting the training of divisional and district level staff, provided supportive supervision for data collection and data entry, and assisted the district level team in the smooth implementation of the survey. The Findings have been shared with GOUP for further action.

Type of survey under the study design	Sample coverage	Number of PSU	Number of Districts
Seroprevalence survey	55,800	2325	75 districts
Urban Slum	2592	72	4 districts
Seroconversion study among RTPCR positive (May2020-April2021)	3120		74 districts
Total	61,512		

BCC Partners Meet

As a response to the preparedness for COVID-19 pandemic's third wave, a Zoom Call was organised by BCC partners to discuss the COVID-19 vaccination program : challenges/solutions and adherence of Covid appropriate behaviours among community/ service providers. The meeting was fruitful as it had speakers sharing anecdotal information along with critical data to understand the barriers amongst target audiences. BCC partners came together to develop SBCC plan, repository of SBCC materials and capacity building programs.

Films on Saas-Beta-Bahu Sammelan Guideline



NHM UP is going to launch an innovative campaign 'Saas Beta Bahu Sammelan' across the state in the month of September. They issued detailed guideline and developed two short films based on it with support of UP-TSU. The films were based on 'Parichay Satr' and 'Gubbara Khel Satr'. The purpose of these films was to train ASHAs and ANMs for organizing similar sessions during 'Saas Beta Bahu Sammelan'.



Anganwadi Worker counselling a mother on exclusive breastfeeding, at an AWC-Etah

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Ms. Wahida Rohman -M&E
Ms. Deepshikha Khurana - Community Process
Ms. Neha Parveen - FP
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Publications

1. The Buddy Buddy Model: For Rapid Activation of First Referral Units

Link : <https://www.ihat.in/resources/the-buddy-buddy-model/>

Synopsis : The Buddy Buddy Model is an innovative policy initiative for activation of FRUs. It incorporates policy enablers for posting and leveraging available MBBS government medical officers trained either in Emergency Obstetrics or in Life Saving Anesthesia Skills, as a pair with complementary skills that are required to conduct C-section deliveries at inactive FRUs.



2. The Nurse Mentoring Program : Saving Mothers and New Borns

Link : <https://www.ihat.in/resources/the-nurse-mentoring-program/>

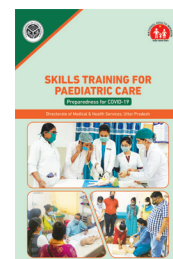
Synopsis : The Nurse Mentoring program was launched in 2014 beginning with 150 blocks of 25 HPDs in Uttar Pradesh. From 2019, it has been scaled up in all 820 blocks of 75 districts of Uttar Pradesh. The program aims to improve knowledge, skills and practices of the staff nurses around mother and newborn care, intra-partum and post-partum care and management of maternal and newborn complications, through its dedicated workforce/ change agents called Nurse Mentors.



3. State-wide Skills based training program for COVID-19 management in pediatric population

Synopsis : The teams at The Directorate of Medical and Health Services (DG-MH) and UP-TSU co-developed the State-wide Skills based Training Program for COVID-19 management in pediatric population using the existing guidelines from the Government of India and other job aides shared by Kalawati Saran Child Hospital and National Health Systems Resource Centre (NHSRC).

The training module has dedicated sections for the trainees to know the context and the modalities of the training, critical and support procedures required for facility based routine and emergency management of a sick child, including Infection Prevention Protocols.



4. Unified Data Platform for COVID-19

Synopsis : The report documents the technology-led, end-to-end solution in response to the pandemic, and highlights key challenges along with best practices and way forward, from March 2020 to May 2021. The development and implementation of the UP COVID-19 Unified Data Platform, successfully demonstrates Uttar Pradesh's ability to envision, develop and adopt large-scale digital system, in an integrated way across departments. This comprehensive Uttar Pradesh COVID-19 Unified Data Platform has brought together all the public and private stakeholders engaged in the state's COVID-19 health response and ensured that the State has a single point of truth with respect to the pandemic management.



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