

PAHAL

QUARTERLY NEWSLETTER BY UP-TSU

A NOTE BY THE EXECUTIVE DIRECTOR

Dear Friends,

I am delighted to introduce to you the 17th edition of PAHAL – the first for the year 2023.

This edition focuses on the support provided by UP-TSU to GoUP in developing guidelines to provide beneficiary centric ante natal care through community platform and its quality certification (Chhaya Integrated VHSND - CiVHSND) and the systemic effort to converge the services by ASHA-AWW area alignment in each of the revenue villages. UP-TSU is committed to provide state-wide roll-out support.

Further, an innovation in digital SBCC campaign was achieved by executing the D2C campaign on awareness and management of Lymphatic Filariasis in 18 districts of UP.

We will keep the momentum going and share upcoming updates throughout the year.

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 the 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.

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- IEC/BCC

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

Write to us at iec.uptsu@ihat.in



Session on menstrual cycle and conception (MEC)



Discussing the importance of strengthening PPF services



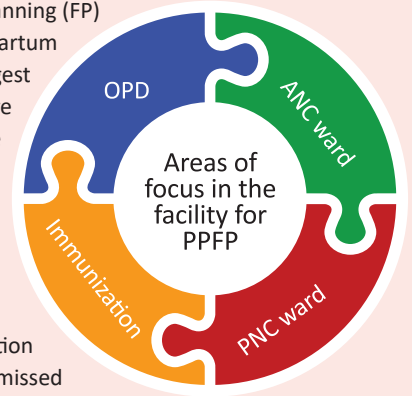
Group exercise on MEC wheel



Discussion on return to fertility

PPFP TRAININGS AT DISTRICT WOMEN HOSPITAL (DWH)

NFHS 5 data suggests that unmet need for family planning (FP) is the highest during immediate and extended postpartum period (1st year post-delivery). Evidences also suggest that family planning counselling is most effective when integrated in the ANC and PNC period. Since the unmet need is highest among women in the postpartum period (24%), improving access to contraceptives and counselling services during the antenatal and postpartum period would contribute significantly to reduce the unmet need.



Most providers at the facility have minimal orientation to PPF which results in low prioritization and missed opportunities to counsel clients. This is because the current model of offsite training is limited to a few providers from each facility. To overcome these challenges, UP-TSU created a whole-site on-site training strategy for district hospitals as they have a high volume of maternity clients.

Whole-site on-site counselling training approach was adopted to create an enabling environment for PPF at the facility. This will allow engagement of the entire staff to understand the importance of contraceptives, thereby, ensuring uniformity in the information provided to the clients and the attendants. Various healthcare providers at the facility play a crucial role during ANC, labor and delivery and in the post-partum period. When multiple cadres within a facility are well oriented on the importance of family planning, it enables them to provide customized and client-centred counselling.

The whole-site on-site training approach made use of interactive techniques (like case-based learning, simulation based Q&A and immediate feedback on performance) in small doses of targeted learning contents that don't last longer than 2-3 hours. The training methodology focused on what providers “need to know,” thus eliminating what is “nice to know”.



“Most women coming at the facility have more than 2 children with birth spacing less than two years. Almost 50% of women in the reproductive age group are anaemic as they do not get the required rest between pregnancies and focus on their nutrition which could help in breaking the cycle of anaemia. Anaemia is also one of the major reasons for maternal mortality. Therefore, **focusing on improving counselling on family planning in the post-partum period can help women choose a family planning method and save themselves from unwanted pregnancies.**”

We have integrated family planning counselling as an essential part of our daily routine service delivery. The RMNCHA counsellor and ARSH counsellor counsel clients in PNC ward during ANC and immunization visits, thus maximizing all available opportunities. We provide all the services of Antara (injectable contraceptive), Chhaya, interval IUCD, condoms and OCPs for spacing along with post-partum sterilization services during both normal and caesarean deliveries. Along with post-partum FP services, we make sure to counsel the women for post-abortion family planning and encouraged them to adopt an FP method to keep spacing between the pregnancy.”

Dr. Sushma Karnwal
CMS, DWH Sitapur



Resource Package Revision Workshop at KGMU



Induction workshop for faculty Master Trainers of 16 Medical Colleges at KGMU



Establishment of Skills Labs at 16 Medical Colleges



Regional Training of FRU doctors at Medical Colleges

PROGRESS OF DOCTORS MENTORING PROGRAM (RRTC PROGRAM)

BACKGROUND (DEC 2021- DEC 2022):

1. Orientation and Coordination workshop with 16 Medical Colleges was held in December 2021 that involved 73 faculty members
2. Establishment of RRTC Skill Labs at 16 Medical Colleges and their service agreement with all 16 RRTCs
3. Online orientation of Nodals of 16 Medical Colleges as RToTs and way forward of RRTC Program
4. Resource Package Revision Workshop conducted in March 2022 with 48 faculty members with participation of 48 faculty members
5. Induction workshop for faculty Master Trainers of 16 Medical Colleges at KGMU Lucknow (7 Batches- May –July 2022) in which 268 faculty members participated
6. 3 Regional ToTs at each Medical College for Specialist and MBBS doctors of District Hospital has been conducted in which 481 doctors have been trained.

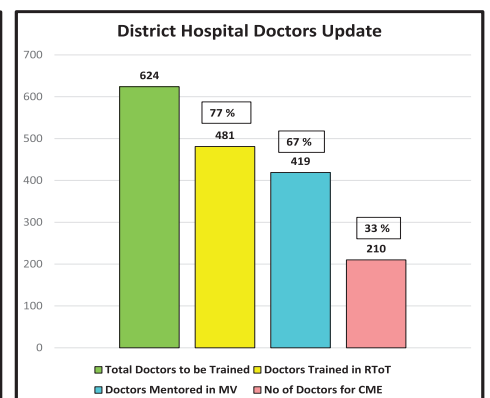
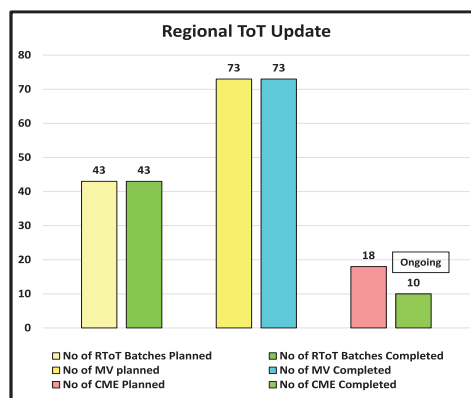


MENTORING DOCTORS TOWARDS BETTER MATERNAL AND NEONATAL HEALTH (JANUARY TO MARCH 2023)

UP-TSU has been working towards facilitating knowledge dissemination and skill building of doctors across the state geographies. Regional Resource Training Centres (RRTCs) across Uttar Pradesh were launched to strengthen the capacity of specialist/MBBS doctors to manage maternal and new born complications. A total of 73 mentoring visits were held during the RRTC training and continuing medical education sessions were conducted after each of these visits. To further build on the mentorship training, a district pool of 375 trainers was created for strengthening of Community Health Centre and Referral Centres. Thus, continuing our initiative to build a strong collaboration between academia and public health service delivery system.

DEVELOPMENT OF RRTC MASTER POOL OF TRAINERS

RRTC Activities Update



Note: 1. Two facilities are under staggered approach (Sambhal & Banda), 1 facility is converted into Medical College (Shahjahanpur)
2. Sixteen new joinees will attend the CME

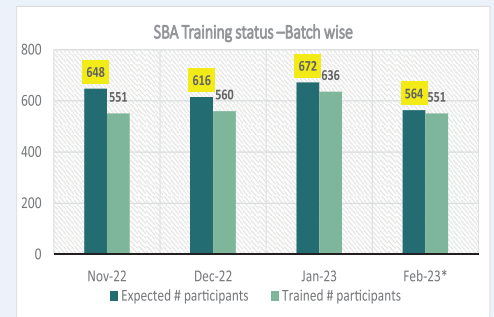
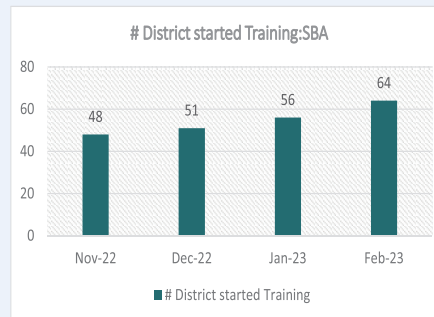
REFRESHER TRAININGS TO ENHANCE CLINICAL KNOWLEDGE OF NURSE MENTORS

The mandate of the nurse mentor training in Uttar Pradesh is to provide one time trainings on Daksh, Dakshata and Mentoring methodology modules. On the basis of onsite reviews, feedback received from field and revised technical guidelines, there was a need felt for the annual refresher trainings for nurse mentors. The government of India in 2022-2024 PIP approved annual refresher training based on Dakshata module for 820 nurse mentors. This need based annual refresher training aims to enhance the quality of the clinical knowledge and practices of the nurse mentors. A batch of Dakshata TOT resulted in creating a pool of 26 master trainers to be utilized for refresher trainings. These trainings are being conducted at skill labs of Gautam Buddha Nagar, Varanasi and Jhansi. A training microplan has been developed to train 406 NMs in 34 batches between 2022-2023. So far, 122 nurse mentors have received refresher training in 12 batches.



SBA TRAINING INTEGRATED WITH GENDER E-MODULE

With 1217 master trainers and 270 training sites across 75 districts, UP now has the capacity to train all delivery point staff in SBA by the end of financial year 2023-24. The district trainings which started in November 2022 in 48 districts scaled up across 72 districts in March 2023. As per attendance available by first week of March, approximately 2298 staff has been trained in SBA against an expected staff of 2500 (91%) across the state. These staff members are also being trained in gender e-module to provide gender sensitive and dignified care to the clients in their health-facilities. The process of initiating trainings for the FY 2023-24 has also started by doing a delivery-point wise mapping of un-trained staff members to ensure 100% saturation by the year end.



REVAMP OF NAVJAT SHISHU SURAKSHA KARYAKRAM (NSSK) TRAINING

Despite multiple efforts and various programs run by the state, NMR (35.7) and IMR (38/1000) in Uttar Pradesh is way behind the country's average of 24.9 and 28 respectively. Birth asphyxia still remains the leading cause of newborn deaths in the state. Considering this, NAVJAT SHISHU SURAKSHA KARYAKRAM (NSSK) training was revamped keeping Essential Newborn Care (ENBC) and Newborn Resuscitation (NBR) as two fundamentals of newborn care.

After a national level TOT in Delhi, a total of 10 batches of state level TOTs were planned to develop state and district level trainers. The detailed micro-plan was shared with NHM with 234 participants and 4 State skill labs were utilised for these TOTs. Starting from January 2023, these TOTs were completed within a month with the support of UP-TSU. Rigorous follow-up by the district teams ensured 87.6 % attendance in a short span of time.

During the training, activities such as ENBC, NBR, Kangaroo Mother Care (KMC) and immunization were practiced with the help of mannequins, flip books and flowcharts.

The district level trainings will now start with strong pool of state wide trainers who will conduct trainings for approximately 13,000 staff across state, which is planned to be finished by the end of FY 2023-24.



ACTIVATION OF NEWBORN STABILIZATION UNITS (NBSUs) ACROSS UTTAR PRADESH

UP-TSU has supported the GoUP to increase the coverage of NBSUs and save more babies closer to their homes. The number of sanctioned NBSUs have been increased by 83 covering all FRUs. Targeted efforts for activation have been made at 66 previously sanctioned NBSUs, which have the required HR and essential equipment. UP-TSU has supported UP-NHM in the formation of NBSU technical guidelines and skill enhancement of NBSU staff by supporting training on a new NBSU training module and providing regular mentoring to the staff nurses by zonal nurse specialists and District Senior Specialists. The District Senior Specialists in each district carry out dissemination of guidelines to CMO, ACOMO-RCH, DPM and concerned block-level MOICs, the nomination of NBSU nodal officers in the facilities, ensuring availability of medicines and consumables, constant follow-up for equipment purchase, their installation and AMC and postings of staff nurses in NBSU.



Newborn being managed at CHC Joya, Amroha

Case Study - Mrs. Muskan was admitted to CHC Joya, Amroha for delivery. During labour, the amniotic fluid became meconium stained and she delivered a baby who cried at birth on March 9, 2023, at 07:10 am. However, after a few minutes, the baby became apnoeic and unconscious. The new born was immediately transferred from the LR to the Newborn Stabilization Unit (NBSU) within the same facility where the NBSU staff followed all protocols and resuscitated the baby for 15 minutes after which the baby revived. Oxygen therapy was provided and after stabilizing the baby was referred to the Special newborn care unit (SNCU) for further management. The baby was eventually discharged from SNCU with no complications. The timely care provided at the NBSU in CHC Joya saved the baby's life, which would not have been possible until last year since the NBSU was not functional. Most remarkable have been Agra and Aligarh divisions where 11 NBSUs have been activated in 2022. Until 2021, around 60 NBSUs were reporting data and by the end of 2022 around 140 NBSUs are admitting new born across UP.

SIMULATION EXERCISES FOR STAFF NURSES IN CASE MANAGEMENT

UP-TSU initiated the simulation exercises to build the skill and improve practices of staff nurses in case management. These exercises are conducted once every month in a facility in different cycles of LaQshya in all 18 Divisions of U.P. facilitated by Zonal Nursing Specialist.

During simulation, case scenario is identified, which is either normal case e.g. normal delivery with essential new-born care or a complicated case e.g. PPH with birth asphyxia. The simulation places facility staff in a virtual clinical situation whereby staff practices and learns how to work together efficiently to successfully manage a life-threatening emergency and normal cases as per protocols.



These exercises are conducted under the supervision of a gynecologist and it is designed in such a way that all staff find it interactive and are actively involved in the learning process. At the end of the exercise, mock situations are given to the staff to understand how well they have understood the whole exercise and based on their performance debriefing session is conducted to fill any gap.



Phototherapy being provided at NBSU in CHC Gajraula, Amroha



Newly established facility at Firozabad: CHC Tundla

RECOGNIZING THE NURSE MENTOR OF THE MONTH

The 'Star Nurse Mentor of the month is a unique concept introduced in Sitapur district started from October 2022 as a monthly rewarding activity based on fulfilment of a set criteria aligned with TOR of nurse mentor.

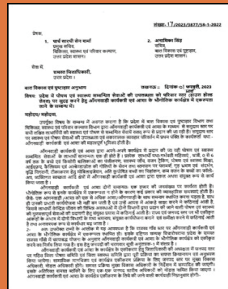
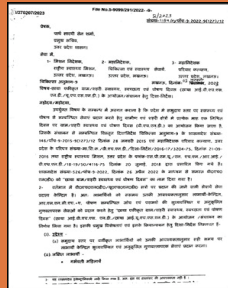
Besides improvement in nurse mentoring program, it has resulted in consistency in DRMs with active participation of all the nurse mentors. It has encouraged nurse mentors to be punctual in District review meetings and actively discuss their problems, manage SBA trainings, mentoring and punching OSCEs, strengthening of documentation and data entry in UPHMIS/HMIS/MANTRA, referral system, QC meeting reviews and LaQshya quality improvement initiatives.



KEY PROGRESS: COMMUNITY OUTREACH

GO ISSUED TO IMPROVE THE QUALITY OF CIVHSND

With an approach to deliver a systematic, customized and beneficiary focused package of defined RMNCHN services for women and children, enabling convergence to improve the quality and effectiveness of services, a GO on Chhaya Integrated VHND (CIVHSND) initiative has been developed. Simultaneously, to improve the credibility of the CIVHSND platform in the community by recognizing good-performing CIVHSNDs and to reward and recognize ANM & ASHA, 'Certification for the CIVHSND' sessions was proposed. The GO was presented to MD, NHM and was duly signed by Principal Secretary- Health & Family Welfare on 3rd Feb 2023 for the state wide roll out.



GO ISSUED ON ASHA AWW AREA ALIGNMENT

To align working areas of ASHA and AWW, UP-TSU, in consultation with UP-NHM and District Administration, conducted a social mapping exercise using PRA (Participatory Rural Appraisal) technique to map ASHA and AWW areas and identify overlaps and left out areas of 101 RVs of Bahua and 185 RVs of Sewapuri blocks of Fatehpur and Varanasi districts respectively. This exercise was proposed to be replicated across the state. For this purpose, a GO was developed and put forward to the state government for approval in 2021-2022. The GO was duly signed on 1st March 2023 by the Secretary, WCD, GoUP.

FORMATIVE RESEARCH TO GUIDE GROUP ANTENATAL CARE (g-ANC) INTERVENTION IN UTTAR PRADESH

Group ANC integrates the usual individual pregnancy health assessment with tailored group educational activities and peer support, with the aim of motivating behaviour change among pregnant women, improving pregnancy outcomes, and increasing women's satisfaction. A formative research is being conducted to develop appropriate and effective implementation approaches for g-ANC intervention and phase 2 of the same is in progress.

In phase 2 of formative research, testing and measurement of group formation, group sessions, observations, and program monitoring are initiated in the Haswa and Bhitaura blocks of district Fatehpur. g-ANC interpersonal communication materials and a facilitator guide have been developed. ANMs, ASHAs, CHOs, and AWWs were oriented on the g-ANC module. Homogenous and heterogenous groups of PWs are formed. ASHA and AWW (supported by ANM and ASHA Sangini) are facilitating the sessions at the Health & Wellness Center and the CVHND session site.



HOME BIRTH INTERVENTION

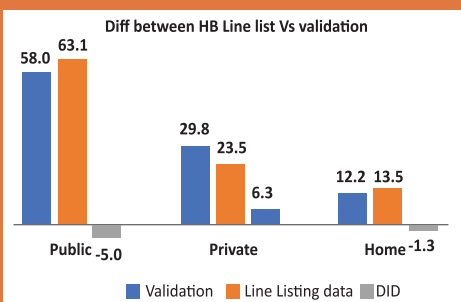
UP-TSU presented a situation analysis of the home birth scenario to MD, NHM. The findings of the dipstick study conducted in districts of Bahraich and Shahjahanpur, and a comparative analysis of NFHS 4 & 5 home birth data points were presented. Based on the current situation, a decision was taken to issue a guideline to map home birth pockets of 30 high-home birth districts. Post this, in-depth interviews with home-delivered women were held to understand the reasons for choosing home birth.

Key progress

Line Listing of home birth pockets: In consultation with NHM, a tool was developed to identify high home birth pockets. Post-field testing, the tool was converted into Open Data Kit (ODK). State-level in-person sensitization cum orientation workshops were conducted with ACO-MCH, DCPM, DPM, BCPM, MoIC, and MH-Consultant in 30 districts. ASHA Sanginis completed the line listing through ASHA-VHIR and entered the data in the ODK. The dashboard was created for real time data sharing with NHM and field team.

Validation of line list: A line list of 60 ASHAs were generated through random sampling for the data validation exercise. The data validation shows no significant difference in the line listing of the deliveries. Public deliveries show -5%, private deliveries show 6.3%, and home deliveries show -1.3% of the difference.

Piloting Format B: A structured tool refined to conduct interviews with the Home delivered (HD) women. It was converted in ODK and piloted successfully in the Ahrori block in Hardoi district.





सहयोग एप को लेकर सीडीपीओ व मुख्य सेविकाओं को दिया प्रशिक्षण

नेशनल एक्सपोज़र खुलू अमरीला।

बाल विकास सेवा एवं पुनर्वास विभाग के तत्वावधान में मंगलवार को विकास बल गवाहर में सहयोग एप के इस्तेमाल के बारे में प्रशिक्षण कार्यक्रम हुआ। इसमें बाल विकास अधिकार अधिकारी (सीडीपीओ) व मुख्य सेविकाओं को भी दिवसीय प्रशिक्षण प्रदान किया गया।



मुगलना और कार्यभारों में सुधार के लिए ऑनलाइन कार्यकर्ताओं का सहयोग किया जा सकेगा। इसी साल विकास अधिकार अधिकारी व मुख्य सेविकाओं को प्रशिक्षण के पहले दिन यूटीडीएलए के अंगुण पुस्तक के एप से जुड़ी कार्यभारों के बारे में जानकारी दी। इस एप में एक पैक रिपोर्ट होगी, उन्हीं के अनुसार ऑनलाइन केन्द्रों से संबंधित सूचनाओं को अपलोड किया जाएगा। केन्द्रों के निरीक्षण की

अवस्था, गैरहाजिरी की स्थिति, केन्द्रों के लिए सामग्रीयों का परीक्षण सहित कई बिंदुओं पर जानकारी दी गयी। इस एप से ऑनलाइन केन्द्रों की समस्याएं जानकारी ऑनलाइन उपलब्ध हो सकेगी और जहाँ से भी ठीक किया करे पर जल्द के प्रसन्न केन्द्रों में संशोधित होने वाली गतिविधियों के बारे में जानकारी मिल सकेगी। इससे कार्यभारों को और पारदर्शीकर किया जा सकेगा।

ANM COMPETENCIES STRENGTHENING INITIATIVE

UP-TSU supported NHM in drafting the proposal to provide training to the newly recruited ANMs. Also, supported in drafting a reference booklet with the standardize content with integrated RMNCH+N, HWC, Gender, and Ekawach modules.

A total of 288 Masters Trainers (MoIC, ACMO-RCH, DHEO/HEO, and Public health nurse tutor/ Nurse mentors) representing 75 districts were trained in SIHFW, Lucknow. UP-TSU developed a training micro plan with guidelines for 12 days of district-level training. UP-TSU coordinated and supported NHM district officials to complete 69 batches of training covering 2000 newly joined ANMs of 65 districts.

59 batches of training have been completed with the training of 1658 newly joined ANMs . UP-TSU also supported NHM in preparing supplementary PIP 2023-24 to train 5000 ANMs.

SAHYOG APPLICATION

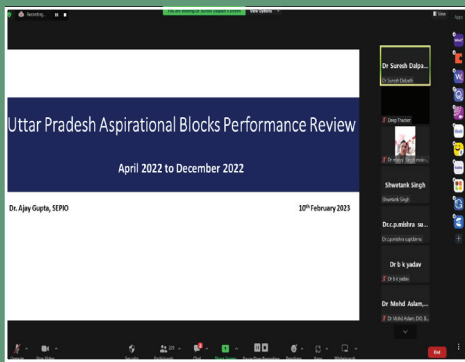
Sahyog Application is a supportive supervision app for CDPOs and Mukhya Sevika developed by the Women and Child Development Department (with support from development partners). UP-TSU Community outreach team supported the WCD in the successful rollout of district-level training by covering CDPOs and Mukhya Sevikas across Uttar Pradesh. Around 92.9% of CDPOs and 93.2% of MSt were trained in 115 batches on the usage of the application.

"100 ASPIRATIONAL BLOCKS: STRENGTHENING RI PROGRAM - PROACTIVE REVIEW AND PROGRESS TRACKING"

In close collaboration with the State RI Cell, DG FW, and all Immunization Development Partners, a new approach has been adopted to proactively evaluate the progress of immunization in the 100 Aspirational Blocks (ABs). The primary aim of this revitalized mechanism is to streamline the immunization program in these blocks, improve its efficiency, and encourage the DIOs/MOICs to take ownership of their respective areas of responsibility.

On the 10th of January 2023, the inaugural review meeting was held at Lucknow in collaboration with UNICEF, where the MOICs (Medical Officers in Charge) from the 100 Aspirational Blocks (ABs) participated actively. This was followed by two virtual reviews on 10th of February and March, where the team supported the state RI cell in planning and conducting the reviews. The objective of the physical review meeting was to evaluate the progress of the immunization program in these blocks and identify the areas that require improvement.

To build on these initiatives, a series of offline one-day review workshops have been planned in April 2023 by GoUP with support from RI-PMU and active involvement of all the Immunization Development Partners.



INSTITUTIONALIZING BLOCK REVIEW MEETINGS FOR ENHANCED DATA-BASED DECISION MAKING

The government of Uttar Pradesh (GoUP) is working to establish evidence-based decision-making at different levels. As a part of this initiative, the state has developed UP Health Dashboard currently being used as a tool to facilitate the district-level meeting of Medical Officers In-Charge (MoICs). As the block is the lowest administrative unit, none of the structured program review platforms exists at the block level. UP-TSU conceptualized and started institutionalizing block-level review meetings in selected blocks spread across all 18 divisions. A block review tool was developed to facilitate the data analysis by identifying poorly performing indicators, facilities, and geographies so that an appropriate block action plan could be developed.

Objectives of block-level review meeting tool

- To establish data based review mechanism at the block for improvement in service delivery
- To enable the program manager with easy to use tool and facilitate data-based decision-making at the block level

Key features of block-level review meeting tool

- An easy to use excel-based tool developed on HMIS/UPHMIS data
- The tool ranks the sub-centres using 7 indicators and provides the SC-wise performance for all relevant critical indicators.
- Automatic calculation and ranking of SC of blocks, identification of facilities and within the facility the program domains that require strengthening
- Helps program manager to review the trend of individual facilities (based on the critical data elements/Indicators) of their blocks and identify the areas for prioritization



BPM Pipraich, Gorakhpur explaining the block review tool and data based decision flow to Rajani Ved, Director of Health, India, BMGF, and Tracy McNeill, Director of Health, BMGF, during PST team visit on 09.02.2023

Expected Participants:

- MOIC (Chairperson)
- Medical Officers representative from CHC and PHC
- Block Program Manager (BPM)
- Block Community Process Manager (BCPM)
- Block ARO
- Pharmacist
- Lab Technician
- Staff Nurse
- ANM from all SCs
- CHO from HWCs
- Representatives from development partner

Key process involved

- Monthly meetings are proposed under the Chairmanship of MoIC, mostly in the 3rd/4th week before the commencement of the district-level review meeting.
- Data updation and generation of key insights for the meeting by the Block Program Manager (BPM)
- Discussion during the meeting based on the findings
- Development of the action plans and responsibility allocation
- Follow up on previous decisions in the next meeting



Ms. Shakuntala (BPM Farendra, Mahrajganj) making a presentation using the block review tool. She found this useful in saving her time and conducting effective analysis for review meeting.

Current status

- Rolled out in 29 districts across 15 divisions by 13 March 2023.
- 64 blocks from 12 divisions have been provided with extensive support to roll out the tool
- The feedback and learnings from the meeting are collated by Divisional M&E to identify the areas for further improvement in the tool and pathways to scale it up across the state.

MISSION PARIVAR VIKAS (MPV) CAMPAIGN

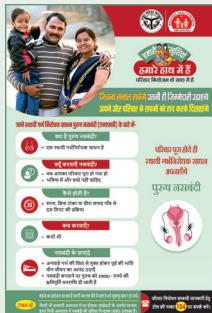
Mission Parivar Vikas - A fortnightly campaign was launched in January 2023 to promote the adoption of limiting methods across the state. The campaign aimed to endorse the use of modern family planning (MFP) methods, and empower people with knowledge about their overall well-being. Secondary analyses were done to understand the barriers and enablers. To address the barriers, the campaign's overarching theme conveyed that Family Planning is not just a means of contraception; it is a way to improve the overall quality of life and only couples can take decisions at the right time and make their life better. To impress upon the message, a theme slogan "हमारी खुशियाँ हमारे हाथ में हैं, परिवार नियोजन के साथ में हैं" was used across all communication channels. UP-TSU developed an SBCC package of audio-visual and print material featuring the real beneficiaries - the positive acceptors of limiting method/MFP - who came forward with their stories. This was the first time in a BCC campaign that the pictures of real beneficiaries were used. This helped in building trust among people and encouraging them to adopt limiting and MFP methods.

D2C CAMPAIGN ON LYMPHATIC FILARIASIS

A D2C campaign on Lymphatic Filariasis (LF) aimed at increasing awareness, dispel myths, and understand reasons for not taking MDA/IDA drugs was launched in 18 districts of Uttar Pradesh with the support of Directorate, PCI and WHO. It targeted specific audiences with customized messages through multiple communication channels like IVR call, SMS, WhatsApp, and chatbot. The targeted audience included the general population, SHG women, school principals, panchayati raj and ASHA workers.

Key features and learnings:

1. **User-initiated action:** User-initiated action was facilitated by providing opportunities to users like missed call and whatsapp keywords to connect as per their convenience.
2. **Easy access for women to get information as per their ease:** During the campaign, total 22,101 women and 38,597 men self-initiated the interaction to get the information via missed call or WhatsApp. It reflects the demand for seeking more information on both the gender sides.
3. **Customized messaging for various target audiences like:** SHGs, Principals/teachers, Panchayat members and general population etc.
4. **Whatsapp chatbot** for FLWs so that they can effectively address the key barriers related to LF during home visits.



EDITORIAL TEAM

Dr. Vasanthakumar N., Executive Director
 Manish Kumar P, Director-Nutrition and HR
 Dr. Shalini Raman, Sr. Team Leader - IEC/BCC

COMMUNICATION TEAM

Pritika Ojha - Community Process
 Neha Parveen - FP
 Tapaswini Swain - Nutrition
 Shreya Mazumdar - System
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