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QUARTERLY NEWSLETTER BY UP-TSU

A NOTE BY THE EXECUTIVE DIRECTOR

Dear friends,

With great privilege, I am presenting to you the 18th edition of PAHAL newsletter. This edition delves into UP-TSU's key areas of support in the second quarter of 2023.

This issue provides an update on UP-TSU's efforts in integrating Gender e-module in SBA training, feedback workshop with GoUP health officials by medical college RRTC faculty members and support Monitoring and Evaluation division of National Health Mission on capacity building workshop for State/Division/District officials to improve data-driven decision-making.

We promise to keep up the momentum of our efforts throughout the year and I hope that you all find this issue to be a stimulating read.

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.

IN THIS ISSUE

Highlights of RMNCHA+ Nutrition Services

pg | 02

- Family Planning

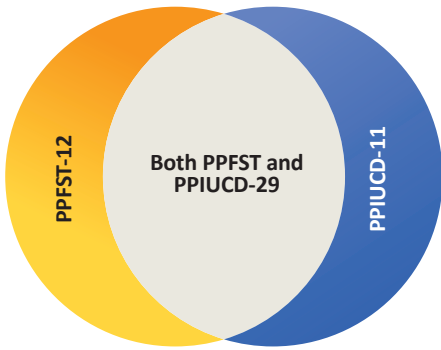
pg | 03 - 08

- Facility Level Initiative
- Nutrition
- Community Outreach
- Monitoring & Evaluation

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

Write to us at iec.uptsu@ihat.in

52/58 EmOC doctors are providing PPFST services



41/52 EmOC doctors are doing PPFST
40/52 EmOC doctors are providing PPIUCD services



Active Participation by RMNCHA+N counsellors



Group exercise on Medical Eligibility Criteria (MEC) Wheel



Re-orientation on integrated counselling approach

BUDDY-BUDDY DOCTORS EMERGING AS FAMILY PLANNING CHAMPIONS

To strengthen the postpartum family planning services (PPFP) in health facilities where Buddy-Buddy doctors are posted, the UP-TSU tracked the performance of the EmOC doctors in terms of providing postpartum family planning services mainly PPFST and PPIUCD. Out of 58 EmOC doctors enrolled in this model, 52 EmOC doctors (90%) are actively providing the postpartum family services. These doctors emerged as Family planning champions specially in PPFP.

For rapid activation of FRUs, GoUP adopted the Buddy-Buddy (BB) approach in 2019. This initiative incorporates policy enablers for posting and leveraging available MBBS government medical officers trained either in Emergency Obstetrics (EmOC) or in Life Saving Anaesthesia Skills (LSAS), as a pair with complementary skills that are required to conduct C-section deliveries at inactive FRUs.

PPFP is crucial to achieve the FP goals, as NFHS-5 data shows that unmet need in postpartum period in UP is almost double as compared to overall unmet need (24% vs 12.9%) whereas the uptake of long acting reversible contraceptives (LARC; IUCD and injectable) is low with only 2.5% and that of female sterilization is at 3%. The immediate postpartum period provides a unique opportunity to discuss family planning options and counsel the clients to adopt a method of their choice. Postpartum sterilization and PPIUCD are two methods that can be provided immediately after the delivery (normal/C-section).

TESTIMONIALS FROM BB DOCTORS



I am posted at CHC Ghatampur under BB initiative since 2021. I perform C-section deliveries at this facility and motivate the women for adopting any postpartum family planning method if they want to delay or limit their family.

I provide PPFST/PPIUCD services to the women who agree to adopt any of these methods and if they don't agree. I advise them to use Chhaya/Condom until they plan their next pregnancy.

Dr. Anamika Singh
EmOC, CHC Ghatampur
Kanpur Nagar



मेरा नाम डॉ. रेखा सिंह है तथा मैं Buddy-Buddy मॉडल के अंतर्गत 19 मई 2019 से जनपद कानपुर नगर में सीएचसी शिवराजपुर पर तैनात हूँ। मेरी जबसे यहाँ तैनाती हुई है मैं यहाँ परिवार नियोजन की सुविधाएं (PPIUCD / PPS) उपलब्ध करवा रही हूँ तथा हमेशा मेरी यही कोशिश रहती है की प्रसव पश्चात कोई भी महिला परिवार नियोजन के साधन के बिना नहीं जाए जिससे की वह अपने अगले बच्चे में 3 साल का अंतर रख सके जिससे माँ और बच्चा दोनों स्वस्थ रहें। जिन योग्य दंपतियों का परिवार पूरा हो चुका है उन्हें स्थायी विधि महिला या पुरुष नसबंदी के साथ अन्य दम्पतियों को अस्थायी साधन के बारे में परामर्श एवं सेवा देती हूँ। मैंने वर्ष 2022-23 में 102 c-section, 60 पीपीआईयूसीडी और 31 प्रसव पश्चात नसबंदी की है।

डॉ. रेखा सिंह
EmOC, सीएचसी शिवराजपुर,
कानपुर नगर

DISTRICT LEVEL RE-ORIENTATION OF RMNCHA+N COUNSELLORS

In-person mentoring session for 11 RMNCHA+N counsellors with less than 50% OSCE score was conducted at the CMO office in Prayagraj on 30th May, 2023. This re-orientation focussed on integrated counselling approach was aimed to enhance the competency of these counsellors to provide client centric and comprehensive counselling to individuals on nutrition, ante/postpartum care including family planning.



1st delivery conducted in PHC Niwari Muradnagar. MO SBA trainer from CHC then visited to review the client.



"I attended SBA ToT for 2 days at SIHFW Lucknow. I learnt several new things during this ToT and I want that we should be trained from time to time so that we stay updated. I have trained 5 batches of nurses from PHC, CHC and DWH. SBA training has improved their practices especially in the management of birth asphyxia."

Ms. Sarojini
Nursing Officer, SBA trainer
DWH Rae Bareli



"I found the SBA ToT workshop at Jhansi refreshing and motivating. The instructors were thoughtful, very knowledgeable and willing to answer questions as they came up. I feel better equipped to manage after completing the course. There was a great balance between theory and practice and the concepts were clearly and professionally explained."

Dr. Priti Bhagunde Bhasin
CMS DWH Kanpur Dehat and
SBA trainer

GENDER E-MODULE INTEGRATED SBA TRAINING: UPDATE

In continuation to the SBA training started in November 2022, 3023 additional staffs have been trained up till March 2023, including 66 AYUSH LMOs, on topics including the gender module. During this training a record 91% attendance was registered. Subsequently, follow-up trainings of the MOICs and SNs of 48 facilities saturated with SBA and gender trainings across 22 districts were held online in June 1st week to decide the gender action plan to make their facility gender discrimination free.

IMPACT OF THE SBA TRAINING

Activation of new delivery points in Ghaziabad

SBA training was initiated in Ghaziabad in Nov 22. As of March 2023, 80 SNs and ANMs have received this training. Following this, new delivery points have been activated by these staff, and now deliveries are conducted on a regular basis.

Name of SBA trained ANMs	Name of facility	Date of 1 st delivery	Total Number Of Deliveries conducted till mid-June
ANJU SIROHI	SC BANTHALA (LONI)	05-12-2022	1
RASHMI	UPHC MAHARAJPUR	17-11-2022	9
PREMLATA	UPHC SARASWATI COLONY	25-11-2022	4
SAVITA	UPHC ARTHALA	26-11-2022	14
NEELAM	SC TEELA (LONI)	17-12-2022	2
POONAM	UPHC RAJBAGH	15-01-2023	11
SHIVA SHARMA	UPHC BHOPURA	25-12-2022	2
GAYITRI	PHC NIWARI(MURADNAGAR)	14-05-2023	1

Staff nurse successfully resuscitates a new born after SBA training in Amroha

After receiving SBA training, I conducted delivery of a mother named Reena r/o Hathiyakheda, in which the baby did not cry immediately after birth. I immediately resuscitated the baby and stabilized it. After the infant was stable, I referred the baby to SNCU for additional observation and management. The baby is fine now. I am therefore more competent in identifying and managing newborn complications as a result of my SBA training.



Jahan Ara
S/N CHC Hasanpur
District Amroha



"My experience at SBA ToT workshop in Jhansi Skill Lab was very enriching. It helped me to brush up my skills as per the latest protocols. I was then involved in providing SBA Trainings at District Women Hospital, Orai (Jalaun). I really appreciate the initiative undertaken by the government and I believe these trainings will go a long way in achieving our goal of reducing maternal mortality, neonate and Infant mortality within the state and ultimately at National level."

Dr. S.K. Pal
MBBS, MD, Paediatrician
District Women Hospital, Orai

SAVING NEWBORNS THROUGH NBSUs

Bringing down the neonatal mortality rate and still birth in the state is a commitment of GoUP. Establishment of Newborn Stabilization Units (NBSU) at block level facilities is a key intervention that aims achieve this. With support of UP-TSU 246 out of sanctioned 435 NBSU is currently functional across 75 districts of UP. UP-TSU is supporting the districts Identification of space, availability of functional radiant warmer and phototherapy unit, posting and training of staff nurses and doctors, availability of documents, drugs, supplies and regular reporting, orientation of government officials at block and district level.

KASGANJ: A ROLE MODEL DISTRICT

Kasganj district is a high priority district with only 46.6% institutional delivery in public health facilities, where 25% women are married by 18 years of age. There are only 3 paediatricians, 3 gynaecologists



NBSU at CHC Soron



District level review meeting of Nurse Mentors and NBSU staff under the chair of CMO Kasganj



Mentoring of NMs on OSCE



Certificate distribution

and 30 MBBS doctors in the entire district catering to 15 lakh population of the district. Despite these challenges the district succeeded in establishing 6 NBSUs against 7 blocks and 1 SNCU at the district hospital, which is a significant milestone for the district. All the 6 NBSUs are functioning 24x7. Dedicated NBSUs are set up near labour room, having at least two functional radiant warmers & 1 phototherapy unit. 18 dedicated staff nurses supported by one medical officer cater to the sick new-borns.

The district team of UP-TSU are regularly mentoring NBSU staff on key new-born care related topics e.g. training of sick new-born, use of radiant warmer, etc. as well as reviewing the quality of care, documentation and reporting. Total 29, 54, 52, 80, 36 and 47 newborn were admitted at blocks Amanpur, Ganjdundwara, Kasganj, Patiyali, Sahawar and Soron respectively totalling 298 admissions between March to May 2023 as reported on FBNC portal.

The district health administration has also created a WhatsApp Group, engaging all staff nurses, nodal medical officers, MOICs and district officials, for real time communication, review the quality of care and guide the staffs if they have any queries. The work of NBSU is being reviewed during the monthly review meetings of the NBSU staff along with nurse mentors at CMO office.

The SNCU at the DCH, Kasganj serve as the local apex facility for all critical referred cases from the blocks as well as a guiding facility for these NBSUs.

FROM THE DESK OF DR. DINESH SHARMA, PAEDIATRICIAN, NODAL FOR SNCU AT DCH KASGANJ



After the establishment of 6 NBSUs, the management of referred newborns from the blocks has much improved also the number of referrals in last 3 months declined. Yet the journey has just begun and much work is required to be done e.g. timely referral of sick newborn, sharing details of diagnosis and management in the referral document, referral with oxygen & bag & mask etc.

MENTORING METHODOLOGY TRAININGS- CONTINUOUS JOURNEY TOWARDS EXCELLENCE

To improve the knowledge, skills and practices of the staff nurses engaged in maternal and new-born care in the intrapartum and post-partum period, 820 Nurse Mentors (NMs) have been appointed by the Government of Uttar Pradesh across the blocks of 75 districts.

The training on mentoring methodology grooms the NMs on basic principles of adult learning principles, establishment and use of mini skill labs, use of mannequins, conducting mentoring & OSCE of staff nurses, quality circle meetings and improved quality of reporting from the facility.

Total 5 batches of trainings on mentoring methodology were carried out between 5th-21st June 2023 in which 123 of 131 nurse mentors (94%) from across 75 districts have been trained. With these trainings, 698 NMs of 720 NMs who are in place have been trained in mentoring methodology module.

The facilitators for these trainings were senior consultants and NMs from the technical team of UP-TSU. The Government Officials e.g., GM and DGM Maternal Health also graced the trainings and interacted with the participants to know the progress of mentoring in the blocks as well as to address their challenges. It is expected that following this training the nurse mentors would conduct the mentoring activities with more confidently.

Refresher Training (DAKSHATA) for Nurse Mentors

A total of 37 batches for a 3-day Refresher Training (DAKSHATA) have been planned across four skill labs (SIHFW, Lucknow; RHFUTC, Jhansi; RHFUTC, Varanasi; DCH, GB Nagar) for the FY 2023-24 to update the knowledge and skills of Nurse Mentors and also to learn about the challenges they face in the field, to further improve the program. Out of 448 NMs planned to be trained, 162 NMs have been trained in the 18 batches completed till June 2023. UP-TSU has extended its support in these trainings, to ensure quality of these trainings.



Session on Breastfeeding at Skills Lab, RHFUTC, Jhansi



AWW counselling mother of 0-6 months' child on No water only breastfeeding during Home Visit, District Moradabad



AWW counselling a group of mothers on No Water Only Breastfeeding during a Mothers Meeting, District Moradabad

WORKSHOP WITH GoUP HEALTH OFFICIALS BY MEDICAL COLLEGE FACULTY MEMBERS

Under the chairpersonship of Principal Secretary Health alongside the MD-NHM & all Directorate Generals (Family Welfare, Training, and Medical Health) an interactive RRTC feedback workshop was organized by the Medical College faculty members on 12th May, 2023, with support of the health department.

This workshop marked a significant milestone in the Doctor's Mentoring Program as it facilitated a convergence of 117 participants representing a diverse range of backgrounds and expertise. That included 11 government officials, members from various organizations, 32 faculty members representing 16 Medical Colleges, 21 doctors from Community Health Centre (CHC) and First Referral Units (FRUs), 11 individuals from the Bhopal IHAT Team, 3 members from the Madhya Pradesh IHAT team, along with the UP-TSU team.

PSH congratulated IHAT UP-TSU for organising this RRTC workshop and also thanked all the faculty from 16 Medical College who were present in full strength. The entire purpose of the feedback meeting was to analyse the progress of the work and identify key areas where further improvement is needed.

Way forward:

In continuation to the workshop, PSH directed to explore the possibilities of expanding RRTC platform beyond RMNCH to atleast two more areas including cardiac care in lower facilities. They suggested to the RRTC Medical College Faculty members to motivate the PG students undergoing specialist training to join the GoUP medical health services as their contribution to fill the critical gap of specialist doctors in government hospitals. They also suggested DG-MH with support of ED-UP-TSU to design a google form to get direct feedback from the CHC doctors on the issues/challenges and suggestions to improve services.

PROMOTING EXCLUSIVE BREASTFEEDING THROUGH "NO WATER ONLY BREASTFEEDING" (NWOB) CAMPAIGN

During the months of May and June 2023, the ICDS Department implemented the 'No Water Only Breastfeeding Campaign' (NWOB) in all 75 districts of Uttar Pradesh. The objective of the campaign was to promote exclusive breastfeeding in infants until six months of age by addressing myths and misconceptions around exclusive breastfeeding of the baby during summer. The ICDS Directorate issued an order that included a weekly activity plan together with the roles of different convergence departments. UP-TSU supported the department in designing and implementation of the campaign in the state. Between 2018 and 2023, the coverage of the campaign has progressively increased from 25 high priority districts to all 75 districts of the state.

Key Highlights of NWOB Campaign Coverage in Uttar Pradesh, May 2023



About **10,222** rallies organized across districts and about **2,46,249** people participated in the rallies



About **12,916** (beneficiary, community and SHG) meetings organized



About **8,28,427** mothers and guardian of children aged 0-6 months counselled on "No water only breastfeeding" at the VHSND



About **6,82,626** mothers of children aged 0-6 months counselled on "No water only breastfeeding" during home visits



In About **23,372** schools (Govt & Non-Govt), teachers provided information on "No water only breastfeeding"

Source: NWOB campaign data, ICDS Department, May 2023



ENHANCING IRON SUCROSE UPTAKE AT MATERNAL ANAEMIA MANAGEMENT CENTERS

GoUP is being supported by UP-TSU in its efforts to reduce maternal anaemia by promoting the utilization of Iron Sucrose among severely anaemic pregnant women at Maternal Anaemia Management Centres. The UP-TSU team facilitated the development of a micro plan to enhance the competencies of ANMs and ASHAs through Nurse Mentors and ASHA Sanginis respectively. MOICs and staff nurses underwent training on the technical aspects of IS administration. Linkages between SAPWs and MAMCs were established, and efforts were made to strengthen communication and collaboration between MAMCs and primary healthcare, ensuring improved service uptake.

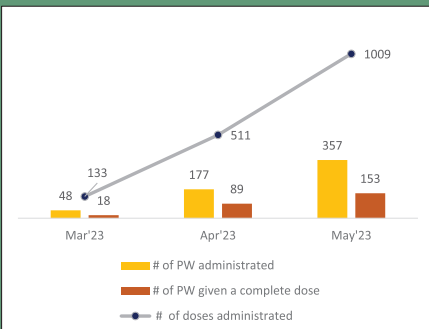
In December 2022, the Government of Uttar Pradesh (GoUP) issued guidelines on anaemia management and the establishment and functioning of Maternal Anaemia Management Centres (MAMCs) for pregnant women. While these guidelines were being implemented, there was a need to enhance the uptake of the services of Iron Sucrose administration at MAMCs.

As per the HMIS data, only 6% of severely anaemic pregnant women (SAPWs) in Kushinagar received Iron Sucrose between October 2022 and March 2023. Retrospective interview data for 663 SAPWs during the same period showed that 25% of SAPWs received two or fewer doses, and a mere 0.3% of women received the complete prescribed dosage of iron Sucrose. These findings were shared with district-level health officials. Based on these findings, the officials recommended the establishment of Maternal Anaemia Management Centers (MAMCs) in all CHC-FRUs of the district.

UP-TSU (district-level community outreach team in collaboration with the facility team) took the lead in enhancing the coverage and appropriate administration of intravenous Iron Sucrose at MAMCs. It was first piloted in the Motichak and Ramkola blocks of Kushinagar district and based on the learnings intervention was expanded to all 14 blocks of the district. The UP-TSU team conducted technical workshops for MOICs and staff nurses on patient management, Iron Sucrose dose calculation and administration. The community outreach team facilitated the development of a micro plan to enhance the competencies of ANMs and ASHAs through Nurse Mentors and ASHA Sanginis respectively. It was made sure that the ASHA line listed the SAPW whenever a pregnant woman was identified to be severely anaemic at the CIVHSND site. Additionally, ASHAs accompanied SAPW to MAMC for the administration of IS and maintained record of dosage and frequency to identify any dropouts. The team also devised a register format for recording the administration of Iron Sucrose at the facility level. The UP-TSU team ensured close collaboration of ASHAs, ASHA Sanginis, and MOICs to strengthen linkages and follow-ups at the community level. One of the mechanism was a WhatsApp group at each MAMC level to disseminate information about SAPW identification, treatment, and follow-ups.

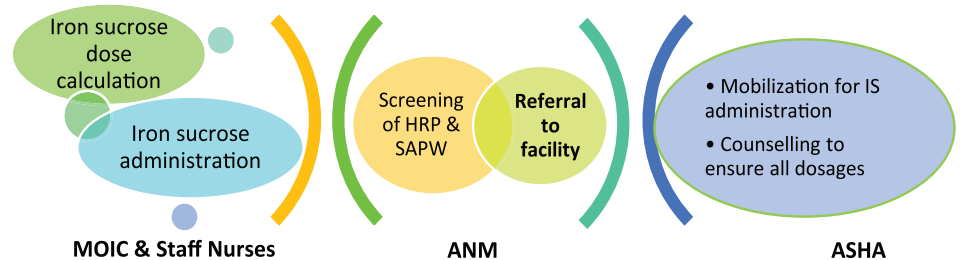
KEY OUTPUTS FROM THE INTERVENTION

The administration of Iron Sucrose was monitored and recorded throughout the district and it was observed that its uptake significantly increased from 133 in March 2023 to 1009 in May 2023. Additionally, the total number of PW who have received IS increased from 48 to 357. The PWs who received all the prescribed IS dosages also increased from 37.5% (18 out of 48) in March 2023 to 42.8% (153 out of 357) in May 2023.



IS dose administration

CAPACITY BUILDING PLAN:



Capacity building of community and Facility team members for Anaemia management

WAY FORWARD:

The district administration acknowledged UP-TSU's assistance in scaling up the coverage and ensuring an adequate amount of iron sucrose dosage delivery. In the future, digital systems like eKavach and e-Sushrut will record SAPW tracking, assuring intra-facility data flow as well as between facilities and communities. Additionally, accessible on the dashboard, this data can be monitored and evaluated. The team will also focus on developing appropriate IEC materials to be shared with ASHAs and ANMs in order to enhance their expertise in identifying SAPWs and convey the significance of administering a complete dose of iron sucrose for improved anaemia management.



Inauguration of the workshop by PS (Health) and ED-UPTSU



Training session at the state level workshop



Certificate distribution to the participants by PS (Health) and AMD at the state level workshop



Group work presentation by the participant

BUILDING ANALYTICAL CAPABILITIES FOR IMPROVED DATA-DRIVEN DECISION-MAKING

The Government of Uttar Pradesh (GoUP) aims to achieve SDG goals (reduction in maternal and neonatal mortality) through the achievement of universal access to equitable, affordable & quality healthcare services that are responsive to the need of the population. Different program nodal teams were responsible for tracking program progress & making key decisions. Multiple data systems (HMIS, eKavach, e-Shushrut, etc.) & national/state-level surveys provide data for periodic progress tracking and decision making. To promote the consistent use of data for programmatic decisions, the Monitoring and Evaluation division of the NHM, in collaboration with UP-TSU, developed three-day capacity building workshops for government officials from DGMH, DGFW, and NHM.

Workshop objectives:

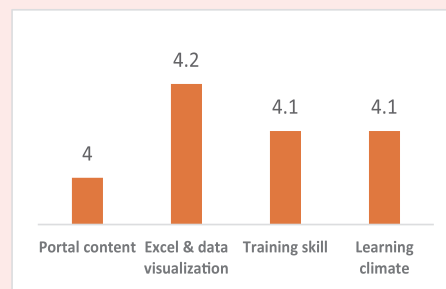
1. To improve the program team's capacity for data analysis and data use for strategic planning across all the sections of health departments (DGMH, DGFW and NHM).
2. To develop the list of critical indicators and factsheet of each program areas for regular review and planning/decision making.

Till date four state-level training batches & nine division-level training batches were conducted with a diversified group of 662 officials.

Number of participants	Trained staff at State level		Trained staff at district and divisional staff	Total
	NHM	DGMH/DGFW		
Sr. Program officers (Director, AD, JD ACOMO RCH/FP and General Managers)	9	20	58	87
Jr. Program Officers (Program officer, DGM, Divisional PM DPM etc.)	28	16	65	109
M&E and data person (consultants, M & E officer, Assistant DDM etc.)	48	16	402	466

Success of the workshop

- **Excellent participation:** Of the 662 participants, 621 attended full three-days of the training (96%).
- **Acceptance of training methodology/ contents:** On a scale of 1 to 5, the average score provided for the workshop's various components ranged from 4 to 4.2, indicating considerable acceptance.
- **Effective skill development:** For developing the group presentations - 11% did not need any support, 77% required moderate support while only 12% required intensive support.
- **Imparting desire to learn:** 76% of the participants requested for such customised training in future.



Module wise rating given by participants

Participant's voices:

"We are using survey data for a longer time but today we got clarity on the applicability of NFHS and SRS data at different levels to review the program progress along with routine data."

"It was helpful in learning new tools in the form of charts and advance excel, which will help us in making presentation/data analysis in different aspect. The session on GIS and preparing maps was insightful."

STRENGTHENING 100 ASPIRATIONAL BLOCKS – FACILITATED BY RI-PMU

The UP-RIPMU, CHAI-UPTSU facilitated a review meeting of 100 Aspirational blocks of Uttar Pradesh led by State Program Managers through an interactive discussion. This discussion successfully facilitated the collaboration of all program officials from health department, SACHIS and partner organizations (WHO, UNICEF, UNDP, JSI, CORE group, Rotary International) involved in the RMNCHA (Reproductive, Maternal, New-born, Child, and Adolescent Health) space. The agenda of the discussion involved:

- Review of Routine Immunization & MCH indicators using eKavach, HMIS, E-Vin, concurrent monitoring etc. as data sources.
- Sensitization of block officials (MOIC/ACMO-RCH) on key RI and MCH indicators crucial to improve health outcomes of Aspirational Blocks.
- Guide block officials to find solutions for hyper-local issues related to logistics, supply chain, resources, etc., to enhance functionality.



State level review meeting of 100 AB

Principal Secretary (Health), MD-NHM, and Director General (Family Welfare) provided their invaluable inputs and emphasized that MOICs as leaders must take the ownership of their blocks. Over the course of three days, the review meetings were conducted in three batches where block officials presented the Block Action Plan (RI) they had developed to ensure cross-learning and creating a template for progress tracking. Principle Secretary (Health) instructed the program officials to conduct similar orientations for all MOICs across the state in batches.

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
Abhishek Sahu - Designing Support

LOW POSTNATAL STAY: A CROSS-SECTIONAL STUDY IN 182 CHCs OF UTTAR PRADESH

Post-partum is a crucial phase for both mother and new-born health. Existing evidence from Uttar Pradesh shows low postnatal stay in the hospitals, as only 28.4% stayed for 48 hours or more (RFS+, 2021). Given the high percentage of neonatal deaths in the first two days after birth (66% of total NMR of 35.7 according to NFHS-5, 2020-21), ensuring longer postnatal stay would be beneficial. To understand the reasons for low postnatal stay, a rapid assessment was conducted in 182 CHCs, which were SBA training sites, spread across 75 districts of Uttar Pradesh. The study collected information on facility readiness as well as self-reported reasons for low stay from the beneficiaries, using a structured schedule. From each facility, duration of stay (in hours) was gathered for 5 women who had a normal delivery and discharged recently from the facility equating to 896 records in total. In addition, 2 women (excluding C-section delivery) from each facility equating to 233 women were interviewed during their stay at facility.

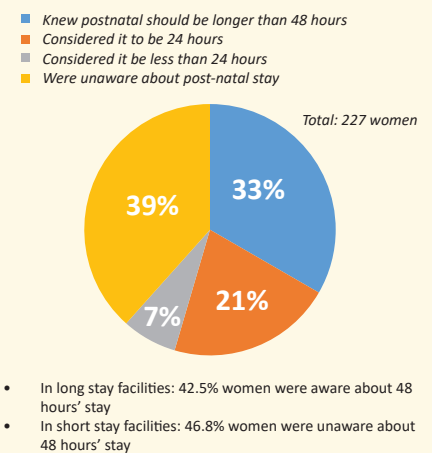
Key findings

The average duration of stay across the 182 facilities was **17.4 hours** (median=13 hours, IQR= 7 - 24, range across facilities: 5-51 hours). Overall, close to half of the women (45.1%) left the facilities within 12 hours, a quarter left the facility between 12- 24hrs and another quarter stayed for more than 24 hours (Fig 1). To better understand the variations in the length of stay, all the facilities were grouped into 3 categories based on mean length of stay: **short stay** (less than 12 hours), **medium stay** (12-24 hours) and **long stay** (more than 24 hours).

The reasons for the short stay were identified as:

	Infrastructure and services: Even though the majority of healthcare facilities have basic infrastructure, challenges still persist in providing specific services such as: breastfeeding corner, restroom for ASHA, space for attendant and fix day menu service.
	Staffing in PNC wards: In many facilities, the PNC wards are understaffed (70% have cleaning staff, 35.7% have at least one staff nurse, and 15.4% have full-time security guard).
	Provisioning of food services during night stay: Only 63.5% of women reported receiving food services during their overnight stay, with women from low stay facilities reporting more of the same.

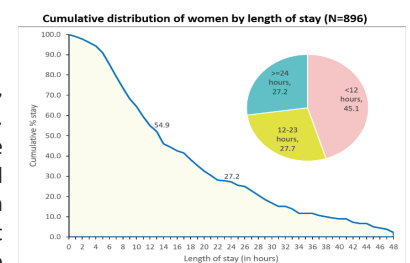
Women's knowledge about duration of stay in facilities



Reported reasons for not staying for 48 hours in facilities for PNC: The reasons for low postnatal stays varied across the women. The **'Need to take care of family'** was reported as a major reason for low postnatal stay (55.9%) among women. **Space for attendant, good food and safe environment at facility** are some of the reported services needed for 48 hours stay in low stay facilities.

Conclusion

Postnatal stay can be improved through a systematic effort, working on the lapses in the provider and beneficiary sides. Facilities were SBA training sites and were expected to be ready to provide services, but the assessment identified room for improvement. The knowledge of women about the duration of stay appears to be an important determinant in postnatal stay duration. Through the existing nurse mentors, efforts can be made to ensure that women are more informed about the same.



Uttar Pradesh Technical Support Unit
India Health Action Trust

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