

ACTIVITIES OF RRC-ORISSA

The Backdrop:-

Government of India emphasizes enhanced participation of NGOs through the State Government initiatives. Ministry of Health & Family Welfare, Govt. of India introduced Mother NGO (MNGO) scheme under NRHM/RCH-II, the ownership of which is decentralized to the State Government. NRHM, Orissa seeks to strengthen Public Private Partnership (PPP) as one of the strategies for achieving public health goals. PPP in the Health Sector of Orissa has been used as the most appropriate strategy following to its successful takeoff in both rural and urban areas. It has widened the scope for meaningful collaboration of the key players engaged in healthcare and service delivery sector including the Government Health System that triggered innovative local initiatives through resource convergence and active involvement of primary stakeholders.

Orissa time and again excel in nurturing civil society organisation under Mother NGOs scheme in particular, have been assigned supplementary or complementary role to that of the Government health care delivery system thus aiding it in reaching the masses meaningfully. The programme has been really beneficial to the people residing in cut-off zones and Hard to Reach Areas (HRA). MNGOs/FNGOs are in action across the State to facilitate RCH service delivery along with implementing the component of health education and awareness. Looking at the successful implementation of RCH programmes, NRHM has also started involving these civil society organizations (MNGO/FNGOs/PPP NGOs) in other disease control programmes. Apart from this, the organizations are also entrusted with the responsibility of community capacity building (training programme to GKS functionaries) along with imparting training to ASHAs on various themes. The services of these Organizations are also sought/ proposed to be sought in other public health exigencies as such breaking of epidemic, generating awareness on local public health issues .



RRC, Orissa : The Mandate

Way back in October, 2006, Regional Resource Centre, Orissa emerged as one of the pioneer hub and playing significant role with a comprehensive mandate to foster NGO involvement and their active participation in complementing & supplementing the state government's effort towards attainment of NRHM/RCH-II goal by the set timeframe. Equipped with a committed human resource pool and adequate logistics, RRC- Orissa delivers need based support services to MNGOs/ FNGOs, SNGOs and other health NGOs working across the state mostly in identified hard to reach/un-served as well as underserved areas. Be it programmatic or technical, RRC has been acting as a frontline resource centre in the areas of capacity building, project formulation, financial management & monitoring etc.

RRC, Orissa: The Distinctiveness

RRC, Orissa has distinct working relationship with NRHM and other Health Directorates of Govt. of Orissa that effectively facilitate health care services at the grassroots. RRC has been striving to promote Public Private Partnership (PPP) as an effective strategy to converge resources as well as expertise in health care service delivery in Orissa. It also provides technical support to both NGOs & District Health Administration i.e Zilla Swasthya Samiti (ZSS) and State for effective implementation of the NRHM/RCH-II programme and instrumental in providing technical and managerial support and information to the NGOs (M/F NGOs) and the State Government. RRC Orissa has distinctively capacitated to 1827 staff & functionaries of NGOs and thus indirectly providing support services to a large segment of population in the state of Orissa i.e., **10, 93,921** compared to RRC of other states. Apart from regular activities RRC Orissa is continuously extending support to NRHM, Govt. of Orissa on monitoring of various programmes, designing advocacy strategies, provide technical input in designing appropriate IEC/BCC materials. With regard to the training of ASHA, BCC and of middle level functionaries, RRC team has valuable contribution in meeting the quality standards. It has successfully established good rapport and contact with other stakeholders including the UN bodies and civil society organizations and facilitating effective GO-NGO collaboration/partnership especially in the NRHM programme domain.



Orissa is the first state, where the MNGO scheme & other PPP activities have been evaluated (Mid-term & Final) by the External Evaluating Agencies & the findings have also been shared with GOI, State/District Health Administration. This report provides a broad contour of MNGO/FNGO involvement in the health sector through different schemes that come under RCH-II/NRHM during 2007-10.

MOTHER NGO (MNGO) SCHEME

The Role of MNGOs & FNGOs- As per the RCH-II programme, the role of MNGOs is to undertake capacity building programmes for staff & Chief functionaries of FNGOs, supportive supervision, review of FNGOs activities, Sensitization about the programme to Govt. Service providers, compilation of FNGOs reports, advocacy, preparation of District specific IEC materials etc. In real sense the FNGOs are the frontline service providers of RCH services and carry information to the marginalized population residing in hard to reach areas .The low paid but motivated staffs, volunteers and functionaries facilitate routine immunization, ANC/PNC , advocacy of maternal and child health interventions, promotion of small & healthy family, promotion of exclusive breast-feeding for 6 months and introduction of semi-solid foods at the right time, social marketing of contraceptives and ORS, and most importantly sensitizing the community regarding the adverse consequences of sex-

Key service delivery under the MNGO Scheme

- i. Maternal & Child Health
- ii. Family Planning
- iii. Adolescent Reproductive Health
- iv. Prevention & Management of RTI

determination and sex selective abortions, improving community participation, counseling and motivating adolescents to delay age of marriage and delay first pregnancy for young couples, in addition to acting as the link between the community and healthcare providers. Involvement in conducting ASHA training is an evidence-based success story of RRC, Orissa and the input delivered was qualitative and replicated in their functioning. MNGO/FNGOs have maintained a regular contact with the Primary Health Centers to DHH to ensure regularity of their service delivery and better accessibility of services to the villagers and regular visit by the Auxiliary Nurse Midwives for maximum immunization/ANC/FP coverage & Keeping contact with the authorities for prevention of seasonal diseases e.g. diarrhea, malaria etc.

RRC, Orissa is continuously publishing quarterly News Letter "SANJOG" to enhance the knowledge base, practices and behavior of the staff, functionaries of the field NGOs on different schemes of NRHM, Government of Orissa . A **ToT Manual in Oriya Language(Hand book for Field NGOs)** has also been distributed to all field level functionaries with descriptions about their roles & responsibilities.

ACHIEVEMENTS up to 31st March,2010

- ▶ 21,538 children immunized against 25,045(86 %) - An increase of 25% during 2009.
- ▶ 11,596 institutional deliveries were facilitated against 16,806(69%) - An increase of 30 % in 2009.
- ▶ 21,248 pregnant mothers received Full ANC against 24,998(85%) - An increase of 30% during 2009.
- ▶ 3,955 adolescent girls were trained on ARH.
- ▶ 71% of eligible couples were adopted FP methods (NSV- 361, Tubectomy- 2218, IUD - 2610, OP – 17134 & 32178 - Condoms)
- ▶ 538 No of Balika Mandal Formed and 7146 No of girls Trained on Life skill education.
- ▶ 184 CBD Centres are promoting social marketing of Condoms, OCPs and Sanitary Napkins.
- ▶ 76 No of Matru surakhya Bahini are promoting institutional delivery.
- ▶ 3361 GKS formed with the initiation of MNGO/FNGOs in 13 Districts.
- ▶ Regular interaction made with PRIs, Block Health Officials, ICDS personnel and district health official for dissemination of different activities under MNGO scheme.

Apart from the ongoing activities, the MNGOs are supplementing to the implementation of both state and central Govt. sponsored schemes and programmes. e.g. -

- 13 nos of MNGOs actively participated in organizing & conducting ASHA training programme in partnership with Local health administration and NRHM, Orissa in 13 districts.
- MNGOs/FNGOs/PPP NGOs provided NISCHAY TRAINING to ASHAs in all 30 Districts.
- MNGOs & FNGOs of six districts are already capacitated to mobilize SHGs on gender, reproductive health and nutrition (a collaborative programme of W&CD, H&FW and UNICEF, Orissa)
- 29 functionaries of MNGOs and 119 functionaries of FNGOs were trained on HIV/AIDS and its prevention in collaboration with State AIDS Control Society.
- 39 MNGOs/FNGOs are involved in IRS (Malaria Control) activities in Orissa.
- MNGOs/FNGOs started sensitising the community about the use of LLIN across the state of Orissa.

- MNGOs/FNGOs/SNGOs/PPP NGOs are involved in PULSE POLIO PROGRAMME.
- MNGOs & FNGOs have taken the responsibilities for massive wall painting for dissemination of health information in 11 Districts.
- All MNGOs and FNGOs/PPP NGOs are member in the Rogi Kalyan Samiti and facilitate the process of formation of Gaon Kalyan samiti(GKS).
- Contributed and involved in designing District Health Action Plan
- MNGOs/FNGOs/SNGO/PPP NGOs are Advocating/facilitating transportation of pregnant women by Janani Express for better implementation of JSY.
- Continuously persuading the elected PRI representatives for involvement in ongoing health programme including smooth implementation of IRS activities, MDA, RCH Programme in the un-served/ underserved areas through sensitization, orientation training and dialogue in Orissa.

Membership of MNGOs & FNGOs in various committee at the district level :

- ❖ ZSS (Zilla Swastya Samiti)
- ❖ District NGO Committee
- ❖ District Rural Health Mission
- ❖ Core team of State trainers for ASHA
- ❖ Core team of District trainers on ASHA
- ❖ Member for preparation of District PIP for different NRHM activities
- ❖ RKS at District and Block Level

Capacity Building Programme for Staff of MNGOs .

To enhance the technical knowledge and skills of MNGOs on service delivery components of MNGO scheme under NRHM/RCH II with better understanding on different Govt policies and schemes, Capacity Building Programme for staff of MNGOs/FNGOs/SNGO were organized round the year. In this view, RRC, Orissa has undertaken several capacity building initiatives and workshops for:

- Individual Competency
- Managerial Competencies
- Technical/Functional Competencies
- Community Capacity
- Institutional Capacity

Resource persons from different Health Directorates have elaborated on key RCH issues & suggested for effective implementation of the RCH-II programme & its various components in un-served & underserved areas. Issues on Maternal health, Adolescent Reproductive and Sexual Health, New born care, RTI/STI etc. were the major topics dealt in the training. Deliberation was facilitated through presentations on maternal health issues, government programmes and schemes such as Janani Suraksha Yojna, best practices etc. devising an action plan focusing on Capacity Building, Monitoring (review of reports and field visits), Documentation, IEC, Advocacy on each component. The MNGOs were allowed to share their field issues with the resource persons for finding out immediate solutions.

The participants were provided reading materials in form of leaflets, handouts & copies of the presentation at the end of the different training programmes.

Tie up With HLPPT for Social Marketing

Hindustan Latex Family Planning Promotion Trust (HLPPT) has agreed to provide all forms of contraceptives to the NGOs at 35% discount rate. This is being regarded as a promising step in disbursing Contraceptive to the people of the rural area at a cheaper cost. 240 no. of CBD centres are being targeted as distributing units whereby MNGOs along with NGOs working in urban slums & PHC (N) got the benefit. Tie up of similar nature has been targeted whereby Sanitary Napkins will be available at the cost of Rs 1.30 paise to the community members in the distant places of the village.

Review of MNGOs/FNGOs

Review meetings were conducted regularly on quarterly basis to measure the progress/performance of MNGOs/SNGO working under RCH project during the year 2007-10. The review meetings were chaired by State Health Officials including Spl. Secretary to Govt., Health & Family Welfare Deptt. & other officials also were present to provide their feedbacks and observations for better implementation of MNGO scheme in Orissa.

The basic purpose of the review was to equip the MNGOs/SNGO about newly introduced scheme & programme of NRHM, Family Welfare Department Govt of Orissa. Simultaneously, the qualitative & quantitative achievements made by MNGOs/FNGOs & SNGO will be tracked & disseminated. Best practices/promising practices which have been tested in field & brought out with desired output could be replicated / incorporated in the core activities of Health & Family Welfare Department.

The shortfalls and gaps observed during review meeting were discussed and corrective measures along with necessary technical support was given to the MNGOs to rectify and comply immediately.

FACILITATION OF EVALUATION OF MNGOs/FNGOs/SNGO/UNGO/PHC(N) MANAGED BY NGOs

After completion of 03 years of intervention of MNGO & Service NGO Scheme under NRHM/RCH-II in 22 districts, NRHM, H&FW Department, Govt of Orissa empanelled 11 independent evaluating agencies to assess the effect, impact of the program over the targeted population. Prior to commencement of evaluation study, one workshop was organized to orient the evaluating agencies on MNGO/FNGO scheme & processes to be adopted for smooth conduction of evaluation. Draft questionnaires developed and shared and that was finalized to bring about quantitative and qualitative outcomes. The purpose of the evaluation was to identify various systematic and managerial issues including development of accountable and performance oriented systems, financial and program monitoring with involvement of community and local bodies, building trust and accountability in this system, effective integration and convergence and fostering true sense of partnership between the State and Non-Government sector. Similarly NGOs managing PHC(N) & Urban Slum Health Project are being evaluated by the external evaluating agencies with the above process facilitated by RRC. The draft evaluation report were shared with NRHM in the presence of DFW,DHS,JD (Tech) & other officials/consultants.

The feedback generated thus inculcated in the main body of the report. The final draft has also been submitted. The critical analysis of the reports were submitted with National Rural Health Mission for further action.

MONITORING/FIELD VISIT :

Extensive field monitoring visits by RRC team counts a lot and on spot hand holding support was given to MNGOs/FNGOs to better manage the activities towards fulfilling the needs and aspiration of the targetted beneficiaries. Interaction was made with Block /District level official & with other stakeholders in presence of the MNGOs/FNGOs to address gaps and to do advocacy for the good work of MNGOs/FNGOs. During this year MNGOs working in 14 districts were provided with technical support to strengthen their field work . In addition to this RRC also received various NRHM activities like Status of ASHA, Status of GKS, District training Programme, Status of Malaria control Programme and Status of Hospital activities. All these review reporting are being submitted to direction for information & further action

World Health Day Celebrated

The state level World Health Day was organized in the conference Hall of State Institute of Health & Family Welfare, Orissa on 7th April, 2010. The observance was attended by Sj Prasanna Acharya, Hon'ble Minister, Health & Family Welfare, Ms Anu Garg, Commissioner-cum, Secretary Health & Family Dept. , Dr. D. Muduli, Special Secretary(Technical). More than 100 Participants including ASHA, Civil Society Organisations' representatives, development partners etc were present.

The theme of the observance was "1000 Cities, 1000 Lives". On this occasion, the issues of poverty at urban slums were widely deliberated. The deliberation focused on the issues of marginalised survival condition people living within the urban survival pockets. Hence, a fresh look into these issues were emphasized and if possible the people living in the urban slums must be treated in the lines of the rural poor. The newsletter of the Regional Resource Centre "Sanjog"'s 8th edition was also launched by Hon'ble Minister on this occasion.

IRS PLANNING & SUPERVISION-MALARIA CONTROL

Malaria is one of the major public health issues in Orissa. It has been mounting pressure on public health officials. Indoor Residual Spray has been considered as one of the major strategies adopted in recent past to counteract the malaria issue. The Regional Resource Centre has extended necessary technical support to prepare the micro plan. The RRC coordinator has been entrusted the task of monitoring as well as guiding the district team in Kandhamal & Keonjhar for IRS.

The programme has been constantly monitored by the RRC coordinator. As a result of vigilant monitoring, IRS has been completed in time & the civil society organisation of the Kandhamal district has also supported the district administration. The Govt. of India team visited Kandhamal district to review IRS activities & satisfied with the action taken by District Health Authorities.

MALARIA NIYANTRAN ABHIYAN- STATE LEVEL ADVOCACY CUM SENSITIZATION PROGRAMME ON MALARIA

One state level advocacy cum sensitization programme on malaria control programme was organized on 18th November 2009. RRC coordinator was one of the members of the working committee constituted for smooth conducting of the programme.

As a key partner of the state level advocacy cum sensitization programme on malaria control programme, RRC was assigned following activities

- State & district level poster competition on malaria by the school children through NGOs.
- RRC Orissa was able to conduct the district level poster competition in all the 30 districts
- RRC Orissa was also assigned the responsibility of ensuring participation of MNGO/FNGO/SNGO & other NGOs at the programme.

RRC'S INVOLVEMENT IN OTHER PPP ACTIVITIES UNDER NRHM

RRC has been involved in the capacity building, reviewing the progress all PPP activities including PHC(N) management, urban slum health projects, Janani Express Orientation to WSHGs & Vulnerable Community . RRC has also involved in development of formats for field appraisal and desk appraisal of NGOs for contracting out PHC management, MNGO Programme and Urban Slum Project. RRC involved in monitoring and supervision of malaria control activities especially Indoor Residual Spray (IRS) & MDT Programme

Involvement of NGOs in Swine Flu related activities

A consultation meeting on 20th August 2009 comprising of MNGOs and other PPP NGOs had been convened outlining the role the of NGOs to generate awareness on Swine Flu taking account the emerging situation. 25 NGOs participated in the meeting. Again 36 nos. participated to chuck out the plan for generating awareness on swine flu. Decision was taken that the NGOs will engage themselves in their catchment areas to generate awareness on swine flu. The NGOs will communicate message on the transmission of swine flu, how to prevent it and what other precaution should be taken so that community will not be affected by it.

3 YEARS CONSOLIDATED FINANCIAL REPORT OF MNGOs & FNGOs PREPARED

The 2nd phase MNGO programme was implemented in 2007 in 14 Districts involving by 58 FNGOs for providing basic health care services to 8laks population in unserved areas. After completion of 03 years, RRC has prepared 3years consolidated financial report of both MNGOs & FNGOs which described about the financial transactions briefly.

National Level PC/PNDT Workshop by NIPPCCD/W&CD attended by staff of MNGOs

RRC facilitated 20 staff of MNGOs to participate in sensitization programme on prevention of female feticide for NGOs & paramedical personnel organized by NIPPCCD, Govt. of India in May, 2009. The participants sensitized about PNDT (regulation & prevention of misuse) Act, 1994-2003, registration of genetic counseling centre, Genetic laboratories & genetic clinics, offence & penalties etc.. Medical Method of Abortion – Termination of early pregnancy with two drugs Mifepristone (RU 486) and Misoprostol have undergone extensive research and is considered extremely safe under supervision with appropriate counseling. Use of Mifepristone (RU 486) followed by Misoprostol is an established and safe

method for terminating early pregnancy. In April 2002, Drug Controller of India approved marketing of Mifepristone for termination of early pregnancy, a method also known as Medical Abortion. Currently its use in India is recommended upto 7 weeks (49 days of amenorrhea) in a facility with provision for safe abortion services and blood transfusion.

PPP Cell under Planning Coordination deptt.,GoO

RRC made a presentation about the ongoing PPP activities in Health in Orissa in the presence of Secretary, Planning & Coordination Deptt. With the presence of Mission Director, NRHM, Orissa. Ongoing PPP activities of H & FW Department were incorporated and depicted as state owned programme.

REVIEW OF NGO ENGAGED UNDER URBAN SLUM HEALTH PROGRAMME :

The growing requirement for health services for the urban poor especially of urban slum population necessitates thinking about the collective approach of public-private partnership in urban areas. Out of 15,12,238 Urban slum Population of Orissa, 3,45,000 are covered by 12 NGOs in 06 Urban slum locations in Orissa. The review of Urban Slum Health projects in Orissa was held in the conference hall of National Rural Health Mission (NRHM), Orissa under the Chairpersonship of Mrs. Anu Garg, IAS, Commissioner-cum-Secretary to Government, Health & Family Welfare Department, Orissa organized by RRC.

A presentation was made by RRC on Urban Slum Health Projects in Orissa under PPP . After detailed deliberations, the major decisions taken are Municipal Health Officer shall be the nodal officer who will conduct monthly review meeting of the urban NGOs running urban slum Health projects in their respective areas with intimation to CDMO & the result of the review will be forwarded to the concerned CDMO with a copy to NRHM.

FACILITATED FINALISATION OF ROAD MAP FOR PPP ACTIVITIES IN ORISSA

Three rounds of discussion were made to prepare draft road map for promote Public private partnership programme in Orissa was facilitated by RRC-Orissa. A meeting was organized by TMST at NRHM under the chair person-ship of Commissioner-cum-secretary to brief about draft road map for PPP in Health sector in Orissa. Among others Director, Health services, Director, Family Welfare, Director, SIH&FW, Director, OSACS,DMET & other INGOs, The next meeting was held under the chairmanship of Mission Director & was organized by RRC. The third round meeting was held involving personnel from OSCAS,IEC, officer, RNTCP & RRC. The draft road map is submitted to Secretary for final approval.

FACILITATING INVOLVEMENT OF CORPORATE SECTORS IN HEALTH

With a commitment to provide improved and better health care service to the people of Lanjigarh Vedanta Alumina Ltd signed a MoU with ZSS, Kalahandi to upgrade facility at Lanjigarh Area Hospital, catering to the health needs of the Biswanathpur block in PPP mode. This initiative is marked as first ever corporate social responsibility led public private partnership in health sector.

Corporate agencies like Tata Steel Ltd. Sterilite Industries etc. are contacted to involve in health sector to manage PHC/CHC in other Districts. Different state level consultation meeting was organized to facilitate involvement of Corporate Sectors in Health under PPP with the involvement of Commissioner-cum-Secretary, Mission Director, DHS & DFW.

Vedanta Aluminum Ltd. is in a process to provide long lasting bed nets to all the households of Biswanathpur Block of Kalahandi District.

GLOBAL HANDWASHING DAY OBSERVATION

RRC Orissa was one of the key partners for organization of Global Hand washing Day in Bhubaneswar. RRC was instrumental in facilitating participation of civil society especially the NGOs in the Global Hand Washing Day. RRC Orissa ensured the participation of MNGOs & FNGOs so that they can integrate the hand washing campaign in their ongoing RCH II activities. Around 35no. of NGOs/NGO representative participated in the Global Hand Washing day observance .

INTERNATIONAL WOMEN'S DAY OBSERVED

RRC Orissa facilitated the State level Women's Day Celebration held 8th March 2010 under the chairmanship of Spl. Secy (Technical) To Govt. Dr. Dushsan Muduli. The chief guest for the occasion was Ms. Sulata Deo, Chairman State Social Welfare Board Orissa. Other dignitaries present in the dais were Director, Family Welfare, Director, SHI&FW, and Additional Directors & Joint Directors of Health Directorates. "Equal rights, Equal Opportunities: Progress for all" the theme was discussed by the participants. More than 100 participants took part in the programme whereby 22 of them were from civil society organization.

DELEGATES FROM MINISTRY OF H &FW GOI VISITED RRC,ORISSA

The team from MOH &FW visited Gol visited Regional Resource Centre from 25th to 26th of February 2010. The team visited different operational areas of RRC and overwhelmed by the response of RRC in finding out the leadership executed while offering technical and managerial support to the grass root agencies. The team also met with the Balika mandal as well as Matru Surakshya bahini in the operational area of JMS. The MNGO/FNGOs involvement in organizing Mega Swasthya Mela, IRS spraying in Malaria, thematic ASHA training, GKS formation & training as well as addressing health hazards during the disaster is praiseworthy the officials remarked.

The group also discussed with the Directors as well as addl. Directors of the different Health Directorates and identified that RRC has put up a robust monitoring & supervision mechanism to ensure that the NGOs bring in transparent, qualitative as well as affordable services to the people residing at the hard to reach areas as well as vulnerable areas.

Apart from field level visits, the officials also verified financial as well as administrative procedures at the RRC level & satisfied about the functioning of RRC in Orissa.

Women empowerment –targeting girls for empowerment and healthy development

FNGOs have assisted in education and vocational training on tailoring and embroidery to the economically weaker girls in the operational areas by operationalising SATHI centers. The endeavor was to make them economically self reliant to meet the health needs partially and thus empower them for responsive parenthood. Educational programme were also launched by FNGOs by campaigning with and motivating the parents to delay marriage. An intensive educational programme for adolescents was initiated by sensitizing them towards better menstrual hygiene. A social marketing approach was adopted by SRUSTI the MNGO Nuapada in making available sanitary napkins through local shop keepers at an affordable

price. The sale of sanitary napkins increased. The introduction of sanitary napkins for adolescent girls has enhanced the communication and helped a large number of them to solve their minor menstrual problems through a better understanding that was provided by Community health workers and MNGO staff. Output: Sanitary Napkins through SHGs distributed.

SELF HELP GROUPS

Self Help Groups (SHGs) of women in Orissa facilitated & promoted by FNGOs have been recognised as an effective strategy for the empowerment of women in rural as well as urban areas to bring women together from all spheres of life to fight for their reproductive rights & entitlements. Through SHGs, women can work on a range of issues such as health, nutrition, gender, livelihood, etc., besides income generation activities and seeking micro credit. In partnering with W & CD & UNICEF Orissa, SHGs of 40 blocks of 8 districts started working for their fellow community members on HEALTH, GENDER & NUTRITION. An ideal SHG consists of 15-20 members. Small groups allow for participatory discussion, which may be difficult in a larger group with diversified interests. Capacity Building Training of SHG Leaders was organised for members holding post in SHGs on risks sign during pregnancy, care during pregnancy and on facility available at health facility right from ANC to JSY benefit. Further the SHG members were educated about management of CBD centers and provided with information regarding nearest facility for Institutional delivery facility. MNGO Srusti introduced community savings pot concept to bring attitudinal changes amongst the women towards savings which can be used to meet the emergency health care expenses particularly the delivery cost. It is calculated 1956 WSHGs were strengthened by the MNGO/FNGOs cadre.

Promotion of contraceptives through depot holders- a social marketing approach through village based Women Groups/SHGs

Community Based Depot was established in more than 2835 villages in 18 districts & 287 community based field workers provide regular support for this. Through this network a system was established to make contraceptives available and accessible to the community in 2835 villages with a population of about 12 lacs (1.2 million). The social marketing focused on educating the target groups about the maintenance of small family norms, safe sex and prevention of STD, HIV/AIDS through pre marital and extra marital sex. FNGOs facilitated and trained depot holders who have marketed the products and spread the knowledge about the correct use of condoms and oral contraceptive pills. They have reinforced the need for adherence to correct practices. Through social marketing distribution has peaked to about 35,503 - Condoms and 20,238 cycles of oral contraceptive pills during this quarter.

Health Consumables & Contraceptive available at CBD:

- Promoting uninterrupted supply of medicines, family planning and health products.
- Development and distribution of IEC material.
- IFA Tablets
- Condom
- Oral Contraceptive Pills
- Posters, Booklets & materials to generate awareness & for BCC.

Peer group educators- the change agents in adolescent health

Considerable proportion of adolescents is out of school. Any health interventions or efforts to improve communication with them exclude them since they are out of reach of the school system. In the adolescent programme, peer group educators were identified, trained and made functional. They acted as a link in bridging the communication and information gaps with the adolescents.

MNGOs/FNGOs developed tools and administered the same. These were the FAQs and hand outs. The peer group educators were trained. Till December more than 360 PGEs have completed their training. They have contributed to dissemination of information solving problems of adolescents and referring those they cannot help. The PGEs have worked on through group meetings with adolescent girls. Guidance and support to the PGEs was provided by MNGOs/FNGOs staff & by local health officials on an ongoing basis and this has sustained their motivation to work in their own community/village.

NON SCALEPAL VASECTOMY CAMP HELD AT RAYAGADA FACILITATED BY MNGO USO

Women play a major role in the tribal communities. From the management of kitchen to forests the family depends on women. Polygamy among the tribals of the region is common. In addition to maintenance of children the women largely contributes towards the maintenance of male member in the family. Consumption of Alcohol among the male member is the main factor for poor economic standard of the family, despite the best efforts put in by women. Major part of the income of male members goes to drinking Excess drinking leads to unemployment and results in food shortage. Excess responsibilities of family maintenance does not provide any time for women to come together. In the absence of education and leadership the women are exploited in day to day activities of wage earning, marketing and social functions. The male members don't bother about how many children they need. More number of children and more number of wife is considered to be asset to the family, which the male member can enjoy from their income. When it comes to birth control or permanent sterilization it is the female than the male. From the family to the service provider the focus is to motivate the female for permanent sterilization as well as for temporary methods. In apprehension of becoming physically weak for labor as well as sexual act the male members doesn't prefer for permanent sterilization.

But the turnout in the NSV camp held at Padmapur on 26.02.2010 has established the fact that right approach in the motivation can bring a change in the behavior and beliefs of the people. The turnout of 210 persons in the first NSV camp of Rayagada district has encouraged the basic health care providers, the Medical officers, the health administration and the health NGOs to understand that it is possible. The credit goes to the leadership of Dr. Chandrasekhar Ojha, Medical Officer I/c. and the Team Members of Padmapur CHC. The encouragements, support from the Chief District Medical Officer and the DPMU, Rayagada is noteworthy. The first of its kind – the best initiative is the unfolding for the health system of Rayagada district.

ADOLESCENTS: REPRODUCTIVE AND SEXUAL HEALTH

Adolescent health is another significant thematic area of attention under the NRHM /RCH-II. MNGOs/FNGOs are involved in providing adolescent friendly health services/information in identified areas/villages to address the specific health needs of both in and out-of-school adolescents. To achieve the same, there is a need to create an enabling environment for young people and educate them. With the vision of dealing with the reproductive and sexual health needs of adolescents, sincere efforts are on the move by MNGOs and FNGOs. The main aim of this MNGO/FNGOs work is to raise awareness among the youth to deal with the reproductive and sexual health problems. Information is being provided to youth on reproductive and sexual

health so that they could overcome the problems. The trained manpower available with the MNGOs/FNGOs are continuously informed the adolescents about social discrimination; HIV/AIDS; reproduction and sexual health problems; and the ill effects of the early marriages and early pregnancy. Baskets of youth friendly activities and programmes are chalked out by the MNGOs/FNGOs to sensitize the adolescents

PRI sensitisation & involvement

Panchayat Raj institutions across the state have a vital role in mobilizing community for Healthy living. Realizing this concept MNGO & FNGOs have taken clear stand, undertake sensitization cum advocacy work for the PRI representative which adds color for better community participation & ownership. It is realized the representatives of Panchayat Raj Institutions are supporting & motivating the people of residing in isolated area on the usefulness of immunization, small family & on various schemes & on going programme of Health & Family Welfare Department, Govt. of Orissa. It is interesting to note that the Community Health worker positioned at FNGO operational area inviting Sarpanch/Samiti Savya during Mother meet, Campaign activities. During last IRS Campaign FNGOs of Malkangiri district extended full cooperation to District Health administration in Mobilizing the support of PRI representative. With active participation of elected Representatives they organized meeting at Panchayat level where the ANM, ASHA & Community leaders fixed the date & time of IRS activity.

PUBLICATIONS

MNGOs & FNGOs working in different unserved and under served area have been engaged in the publication of local specific resource and information materials in Oriya and colloquial language. The aim is to disseminate health information to the targeted population for healthy living and to bring desirable changes in behavior and practices. It is worth mentioning to spell the name of MNGO namely, SWWS, CARD, USO & SRUSTI who have developed IEC/BCC material on ARSH, Safe motherhood & Newborn care. The materials on various methods of Family planning developed by MY Heart were innovative one & got appreciation from Members of Joint Review Mission & by GOI.

MNGO namely USO and SEWAK published and shared their innovative and participatory community friendly strategy & success story on NSV and Malaria control activities respectively.

In order to focus the immunisation program in tribal area at all sub centre of the intervention area the wall painting activity has been undertaken with the captions written in tribal language. However it is really an acceptable program to the low literate tribal. Total nos. of wall painting done is 16. As an impact the tribal pregnant women are registered to get health services, more than last year.

Land mobilization for construction of ANM centre at Tumulo:

To support the Govt. functionaries in operationalization of their duties and community mobilization are the major role of NGO under NRHM. In order to make the project success the role of NGO in community mobilization is very essential this is proved again by the initiatives taken by our FNGO staff in motivating the community for mobilization of land to construct the ANM center. The detailed story narrated here can give a clear idea on the whole process.

An ANM centre has been allotted in Tumulo Sub-centre of Gumma Block. Since long the funds has been provided to construct the building but due to lack of coordination among the health staff and the community it could not be constructed. There remain a long gap of community mobilization and motivation. Due to lack of ANM centre at Tumulo around 16 villagers are depending upon the next nearest centre at Serango.

After the MNGO intervention the problem came to the notice of the staff working under the Sub-centre. During the orientation training the FNGOs were provided training on various topics and community mobilization is one of the important topics in that programme. During the deliberation of the topic the FNGO staff working under the sub-centre once again brought into notice about the situation. They were explained on various possible approaches and ways of motivation for the same. The process started in the area and after a long motivation and continuous meetings at various levels the community understood about the importance of the ANM centre. Finally Mr. Petua Gomango of Tumula village came willfully to the front with a supportive hand. He donated around 80 cents of land for the noble cause.

This is one of the biggest achievements which can be done through better coordination of the community, PRI and NGO personnel. Really the work of the FNGO staff especially the continuous motivation and community mobilization work are praise worthy.

Success Story:

Institutional Delivery – a Hope:

FNGO Filed Worker, with a caring heart - Pravakar, IDS Dasmanthpur. (Dola Photo)

Pravakar Semirali a Field worker in village Kumbhalulla of under Dasmanthpur Block was on her way back to home after completion of routine visit to a village when she got the information that a Manika Muduli is in labour pain last 12 hours. As Pravkar has approached the family several time in the past for institutional delivery i.e. at Block PHC Dasmanthpur which is at distance of 15 K.M. Since he knew that this is her prime issue and the mother is weak and feeble and her age will not be more then 17 yrs with visibly very anemic. So she immediately rushed to her home to take her to nearby hospital i. e Block. Head quarter Hospital,

Dasmanthpur. Pravakar was very keen to take her to hospital but what make it look quite impossible that they have to cover a river before reaching the road through which they might get a bullock cart. Owing to traditional belief and custom the elders of the family will not take her to hospital. But Pravakar knew that if he will not take major steps now then Manika Muduli will die without delivering. So called upon the Gram Sarpanch and other youth members of and prepare a bed using rope woven cot so that the mother can lie on the bed & they can carry them. With lot of pursuance they carry Manika in the cot and crossed the river .Then after reaching road they called for PHC ambulance and Manika was shifted to Dasmanthpur Medical. There The Medical Officer delivered the baby using his technical skill and Manika delivered a male boy with normal weight. Had there been Pravkar dared to take the women to hospital she should have died by any means. Now the villagers are treating pravkar one among them and always consult on health issue. Now the Villagers are making birth preparedness prior to delivery. It is really a commendable work done by sheer determination.

Conclusion

The efforts and resources utilised by MNGOs/FNGOs to address RCH need in identified un-reached pockets where the need is highest are praiseworthy. A well coordinated effort

initiated by NRHM/RCH-II, H & FW Department by involving the NGO's has created pace to address a number of crucial issues for effective rural health programming. MNGOs/FNGOs play an important role in identifying the neediest hidden pockets. Available resources have been better targeted to ensure benefit to the most vulnerable through a sensitive vulnerability assessment of villages. Innovative techniques and approaches of delivering RCH services/information develop which are context appropriate and involve the community right from planning to programming and evaluation. It is widely recognized the MNGO's can be effective community mobilizers to evoke community's awareness and thereby demand for quality health services. In view of the contributions that MNGO's can make to the inherent strengths and operational challenges of the Public Sector, Govt.- NGO partnership is vital for strengthening RCH services for underserved rural populations. Carried out with devotion, purpose and commitment MNGOs and FNGOs contribution would supplement and complement in realization of the goal and objectives of NRHM/RCH-II programme by the set timeframe-2012.

Value addition made by RRC towards mentoring of PPP In Orissa :

Public Private Partnership (PPP) in the Health Sector of Orissa has been recently introduced as an appropriate strategy to ensure maximum out reach of health services. It has widened up the scope for meaningful collaboration of the key players engaged in healthcare sector including the Government Health System that triggered innovative local initiatives through resource convergence and active involvement of primary stakeholders. Role of Regional Resource Centre (RRC), a frontline resource centre of the Health & Family Welfare Institute, Bhubaneswar is significant in providing programmatic and technical support in areas of training, capacity building, project formulation, monitoring and documentation of activities in line with PPP focusing the Reproductive and Child Health (RCH-II).

The MNGOs and FNGOs are working in difficult conditions in at least 89 blocks and 196 sub centres; to generate demand at the grass root towards effective delivery of quality RCH services, to collect information, and addressing the unmet needs of the identified target population. The RRC cadre consisting of 628 trained people is placed with the MNGOs and FNGOs to persuade and orient adolescents for responsive parenthood through life skill education, counseling and camp activities. A tailor made innovative gender responsive reproductive health services are provided to district and health authority and other stakeholders including PRI members. RRC, Orissa has been instrumental in providing technical and managerial support and information to the NGOs (M/F NGOs) as well as the State Government. Apart from regular activities RRC Orissa continuously extends support to NRHM, Govt.of Orissa on monitoring of programmes, designing of advocacy strategies and technical inputs for designing appropriate IEC/BCC materials. The RRC team meaningfully shares its expertise regards training of ASHA, BCC and middle level functionaries.

Field Visits

RRC team members visited 20 Districts & 46 Blocks to monitor the ongoing MNGO/FNGO scheme. The following activities were undertaken to strengthen PPP activities in Orissa:

- Handholding support to 17 MNGOs & 61 FNGOs on preparation of IEC/BCC materials & Financial Management
- Advocacy for better visibility of MNGO scheme & PPP initiatives
- Review of progress/performance of MNGOs/FNGOs in collaboration with District Health Authority(20 Districts)

- Visited 12 Districts as member of TST/state observer for SAB/Finalization of 24x7/ASHA Training
- Facilitated CRM/MTR/JRM team members visit to Orissa
- Regular Joint Monitoring to streamline MNGO programme

The key areas of RRC's functioning

- Provide technical assistance to Mother NGOs and Field NGOs through orientation on the revised MNGO guidelines and issue/need based training for all existing MNGOs on RCH service delivery issues.
- Appraisals, Monitoring and Supportive Supervision for Selection of appropriate MNGOs and SNGOs have been another important activity undertaken by the RRC-Orissa. RRC, Orissa has also been conducting Program Monitoring and Evaluation as well as Training Needs Assessment (TNA) of existing MNGOs & other RCH/Health Project under PPP initiatives.
- RRC-Orissa has been making effort towards liaisoning, networking and advocacy at all levels to develop close partnership between Central, State government and MNGOs/FNGOs at state and district levels.
- RRC-Orissa has been involved in doing advocacy at the State, Regional and District level to facilitate smooth implementation and understanding of the MNGOs Scheme by all stakeholders.
- RRC-Orissa regularly sharing RCH and Gender based issues, updates and innovative strategies/ case studies and views/information with MNGOs
- RRC-Orissa has update 'NGO Resource Directory' and MNGO Data Directory.
- In close consultation with NGO- Cell, NRHM, RRC- Orissa designed and developed TOR for MNGO/FNGO evaluation, Conceptual framework for PHC management and Urban Health Programme under PPP initiatives.
- Extensive field monitoring visits by RRC team counts a lot and on spot hand holding support was given to MNGO/FNGOs to better manage the activities towards fulfilling the RCH & Health needs and aspiration of the targeted beneficiaries.
- RRC-Orissa has been developed different PPP Guideline i.e. Operational Guideline of PHC(N) management by for Guideline of Vulnerable Population, Janani Express, Malaria Prevention & Control, ASHA-NGO Guideline, Urban Health Guideline , Guideline for training of WSHG on gender, Nutrition and RH programme, Guideline of involvement ASHA in operation of Malaria & Diarrhea etc.
- RRC-Orissa has developed TOR for evaluation of MNGO programme,NGOs managing health Centre, NGOs managing PHC (N)Urban Health , MNGO/ FNGO and Janani Express etc.