
DISSERTATION



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STUDY TO ASSESS
KNOWLEDGE AND
PRACTICE OF ASHAs IN
PROVIDING POST NATAL
CARE SERVICES AT
SIDHPURA BLOCK OF
KASGANJ DISTRICT,
UTTAR PRADESH



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Introduction

- Reducing infant and child mortality is one of the foremost goals of NHM.
- A high proportion of the infant death burden is related to new born deaths. **Kashiram nagar-IMR-71, NMR-51** AHS 11-12
- Despite the increasing number of institutional deliveries a substantial proportion of neonatal deaths occur in the home.
- Thus the provision PNC is critical. For effective promotion PNC, NHM offers several platforms which include the presence of trained ASHA in every village.
- GoI released HBNC guidelines in 2011 with revision in 2014 to increase access to Post newborn care through ASHAs.
- The guidelines expect ASHAs to make home visits to promote essential newborn care, identify illness, and refer infants if needed.

Literature Review

A situation analysis on performance of ASHA to provide post natal care services by Emil Das et.al. showed that through the guidelines of Government of India on post natal care expect ASHA to make home visit health counseling, vaccination, physical examinations of women, nutrition, immunizations to promote essential newborn care, identify illness and refer infant if needed.

Study suggests that routine clinical examination and observation of the woman and her baby, routine infant screening to detect potential disorders, support for infant feeding and ongoing provision of information and support. It provides maternal and child health services, including health counseling, vaccination, physical examinations of women, nutrition, immunizations, as well as weighing of children under five years of age, all conducted on a monthly basis. Study concludes that Knowledge–practice gaps existed among mothers counseled by ASHAs.

Uttar Pradesh : IMR- 70 ; NMR- 50; POST NMR- 20; U5MR- 92 (AHS11-12)

Research Question

What are the knowledge and Practices of ASHAs in providing PNC services at Sidhpura Block of Kasganj District of Uttar Pradesh ?

Objectives

- To assess the Knowledge of ASHA regarding services delivered under Post natal Care.
 - To assess the Practice of ASHA regarding services delivered under Post Natal Care.
 - To study various factors influencing the effective provision of PNC services by ASHA.
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Methodology

- **Study Design** : Descriptive Cross Sectional Study
 - **Study Area** : Sidhpura Block of Kasganj District, U.P.
 - **Study Duration** : 3 Months
 - **Study Participants** : ASHAs of Sidhpura block
 - **Inclusion Criteria** : Working ASHAs
: Active ASHAs
: who have undergone Module 6&7 training
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- **Sampling** : Focused block Sidhpura was selected out of 4 TSU Blocks by Simple Random Sampling. And all the working ASHAs of the block were taken as Sample and interviewed.
- **Sample size** : Total ASHAs - 165
 - Working ASHAs 157 + 8 Inactive ASHAs
 - (All 157 working ASHAs of Sidhpura Block were taken as respondents out of total ASHAs of the block).

Data Collection And Analysis

- Data collection Technique : Interview
- Data Collection Tool : Semi- structured questionnaire
- Data was entered in Ms-excel and analyze with the help of "Pivot" Function and "COUNTIF" Function

Results

Results : Knowledge N-157

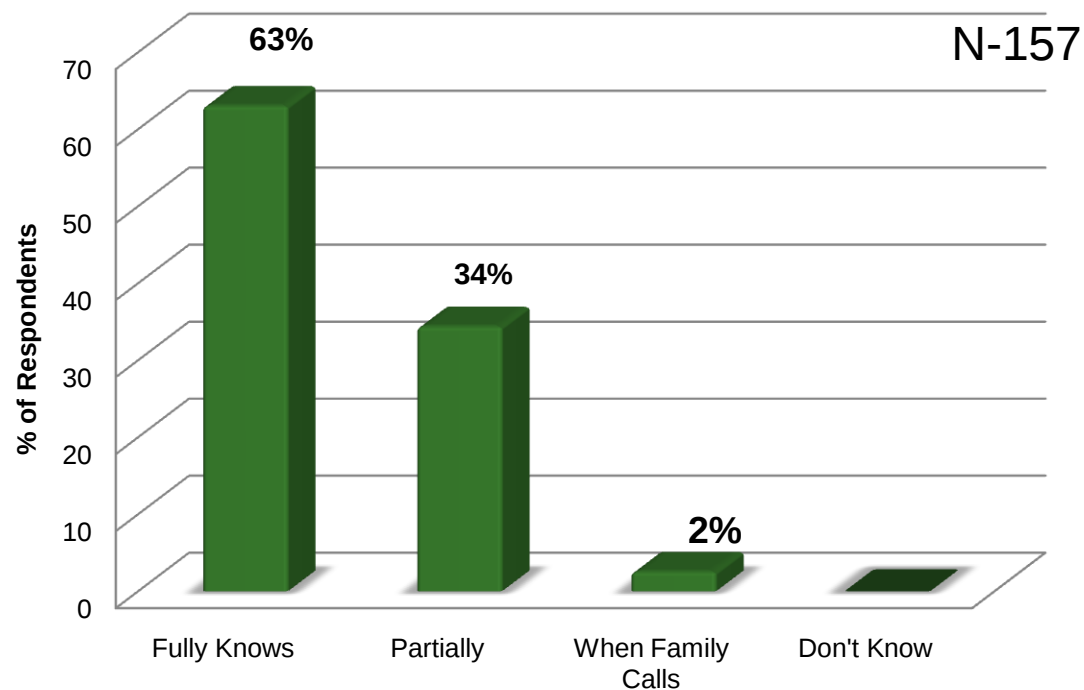
* Correct answer 1,3,7,14,21,28,42,)

* Partially Correct answer - Acc. to the tool of UPTSU, any single visit is consider as all HBNC Visits. So they replied only one day out of (1,3,7,14,21,28,42).

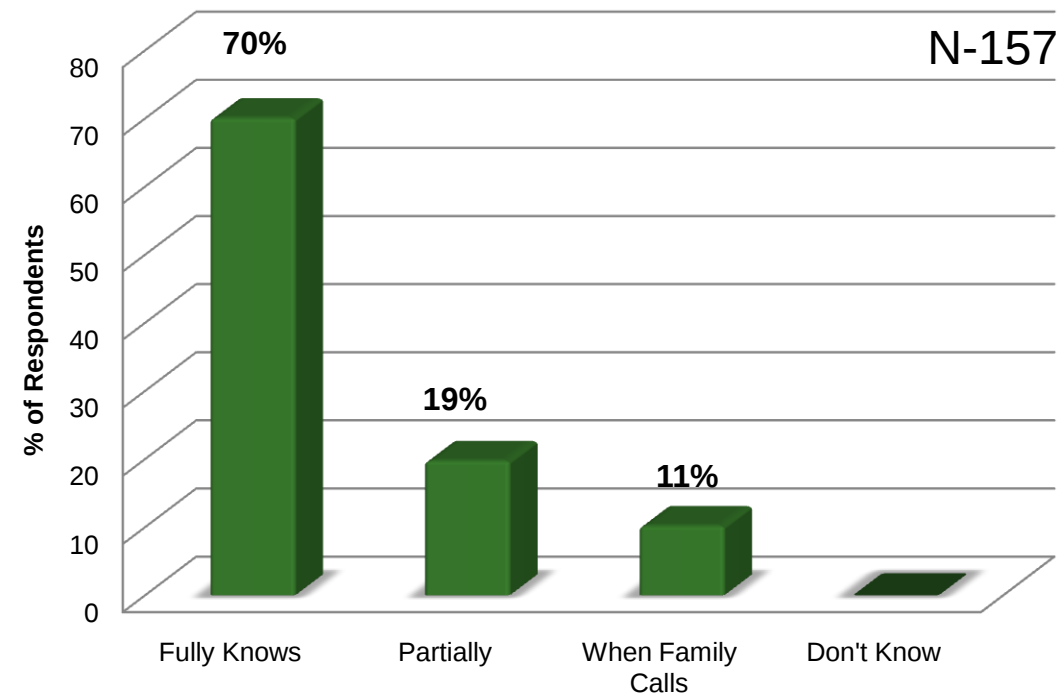
* Correct answer 3,7,14,21,28,42,)

* Partially Correct answer - Acc. to the tool of UPTSU, any single visit is consider as all HBNC Visits. So they replied only one day out of (3,7,14,21,28,42).

Home Visit in case of Home Delivery

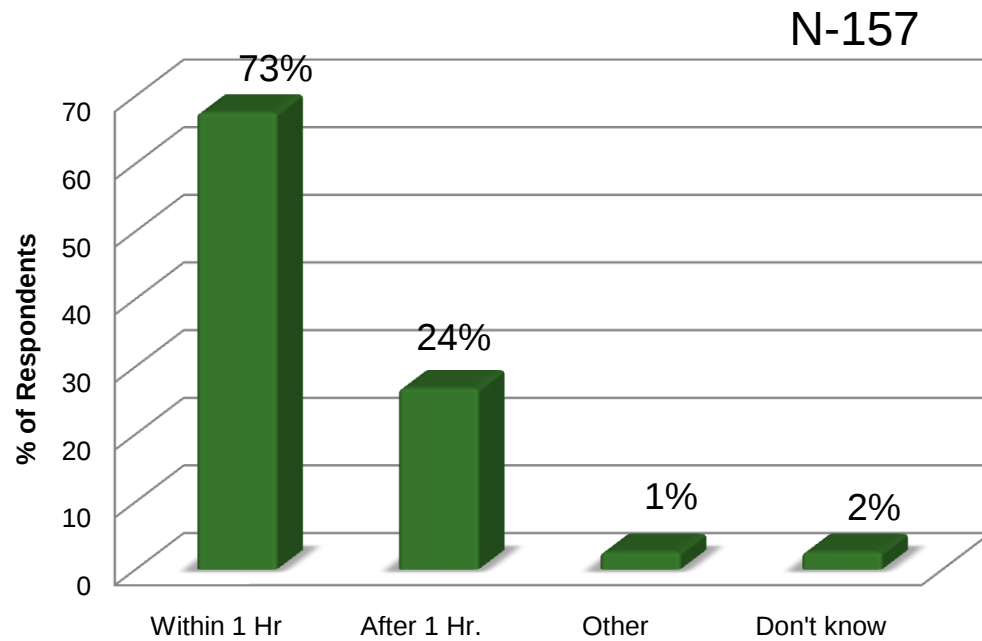


Home visit in case of Institutional Delivery

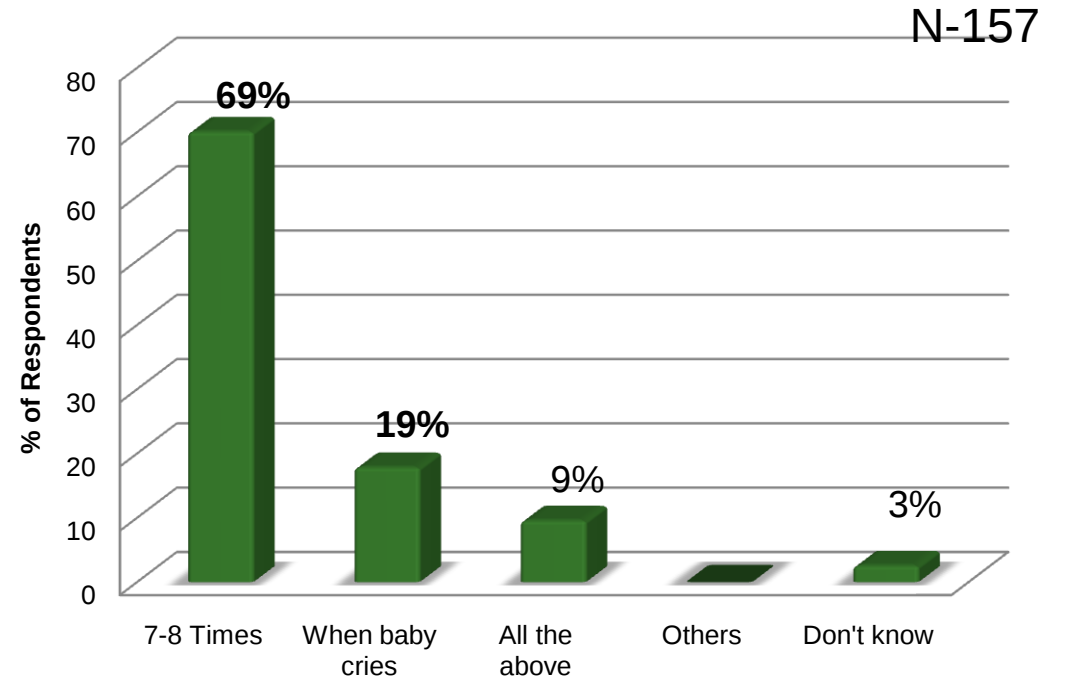


Results : Knowledge N-157

Initiation of Breast Feeding



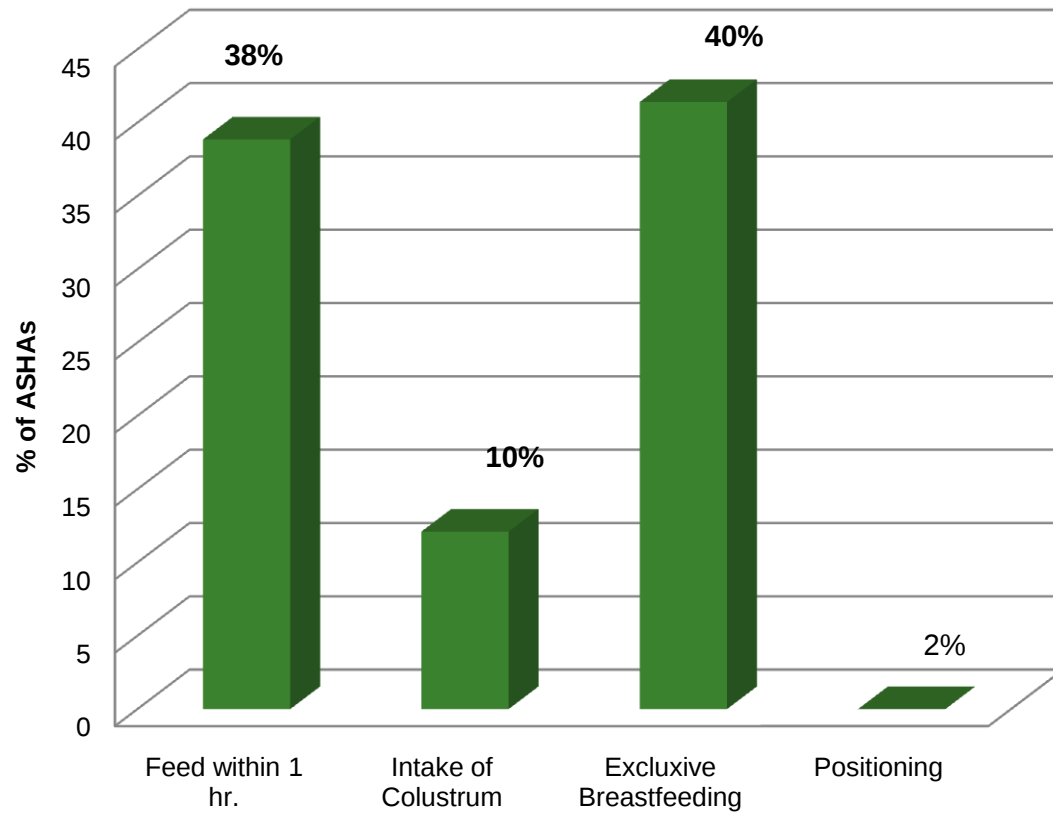
Knowledge about frequency of feeding within 24 Hrs.



When
bleeding is
high

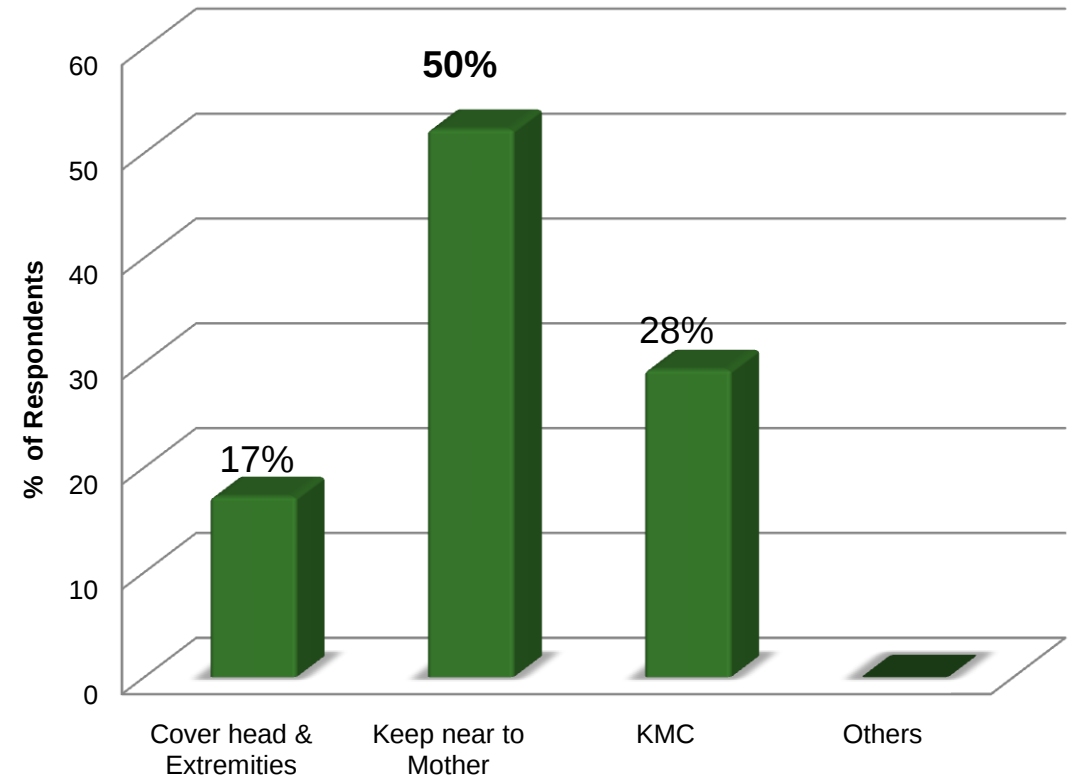
Results : Knowledge N-157

Knowledge about Feeding Practices



*10% were denied to answer this question

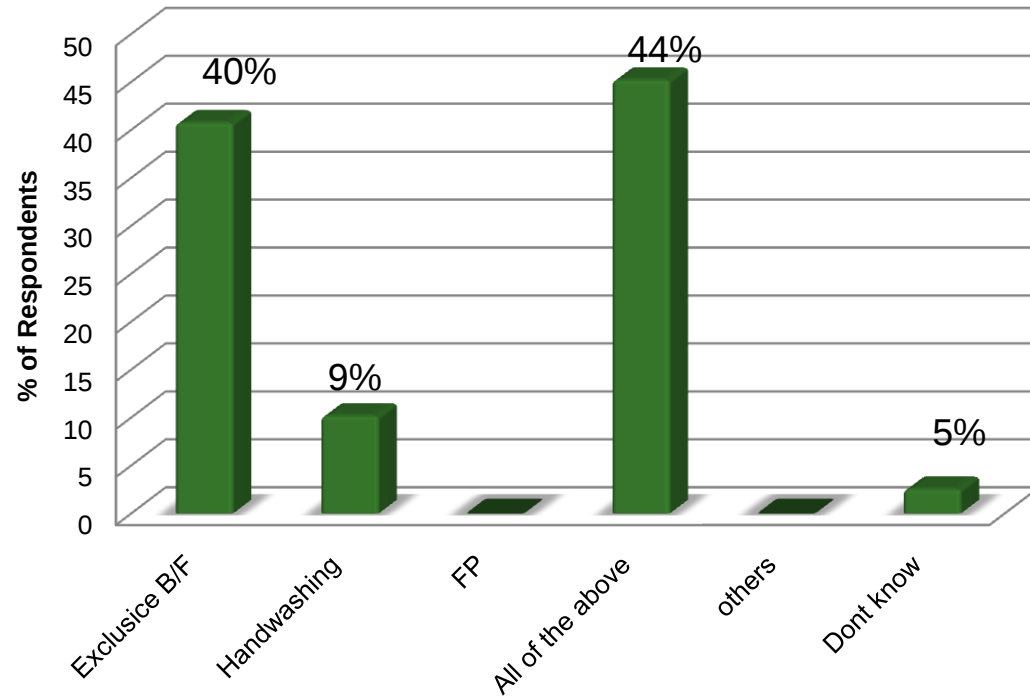
Knowledge regarding maintenance of Temperature of the baby



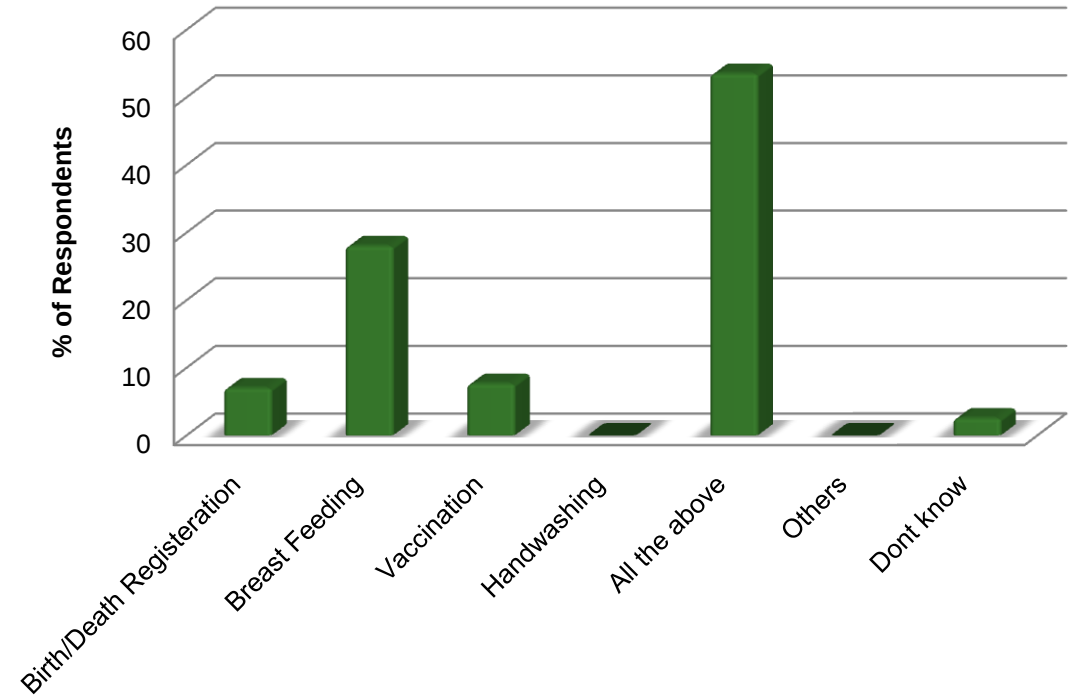
*5% were denied to answer this question

Result : Practices N-157

Information Related to Mother after Delivery

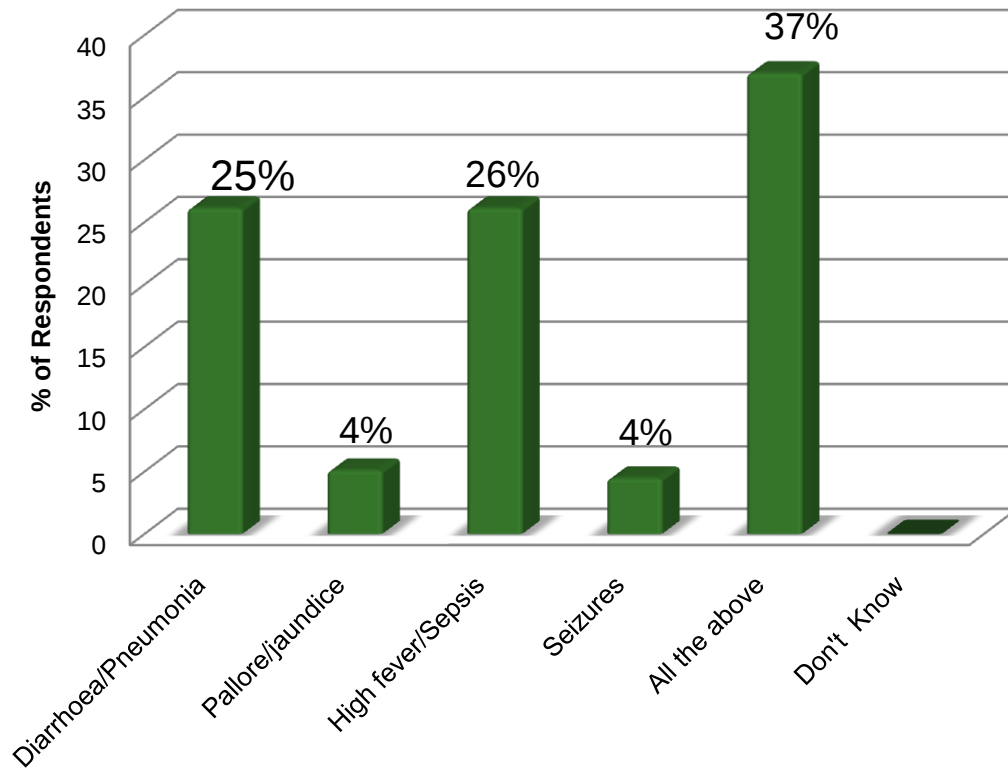


Information related to Baby gave to mother

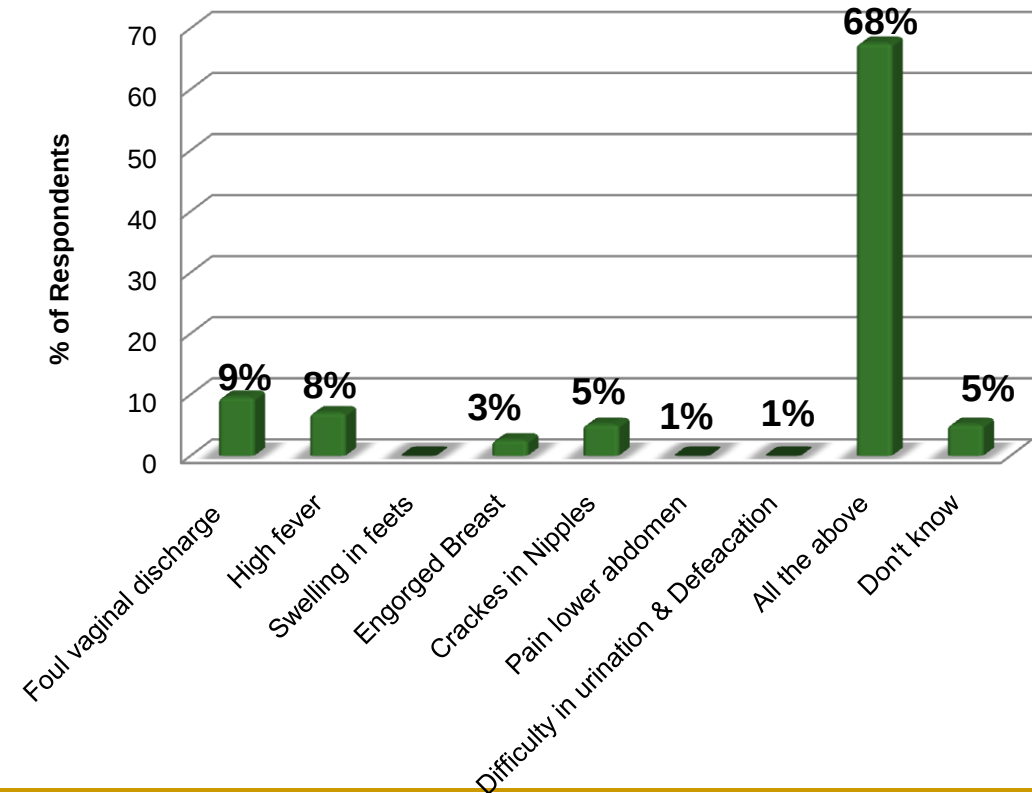


Result : Practices N-157

Complications Need to observe in Baby

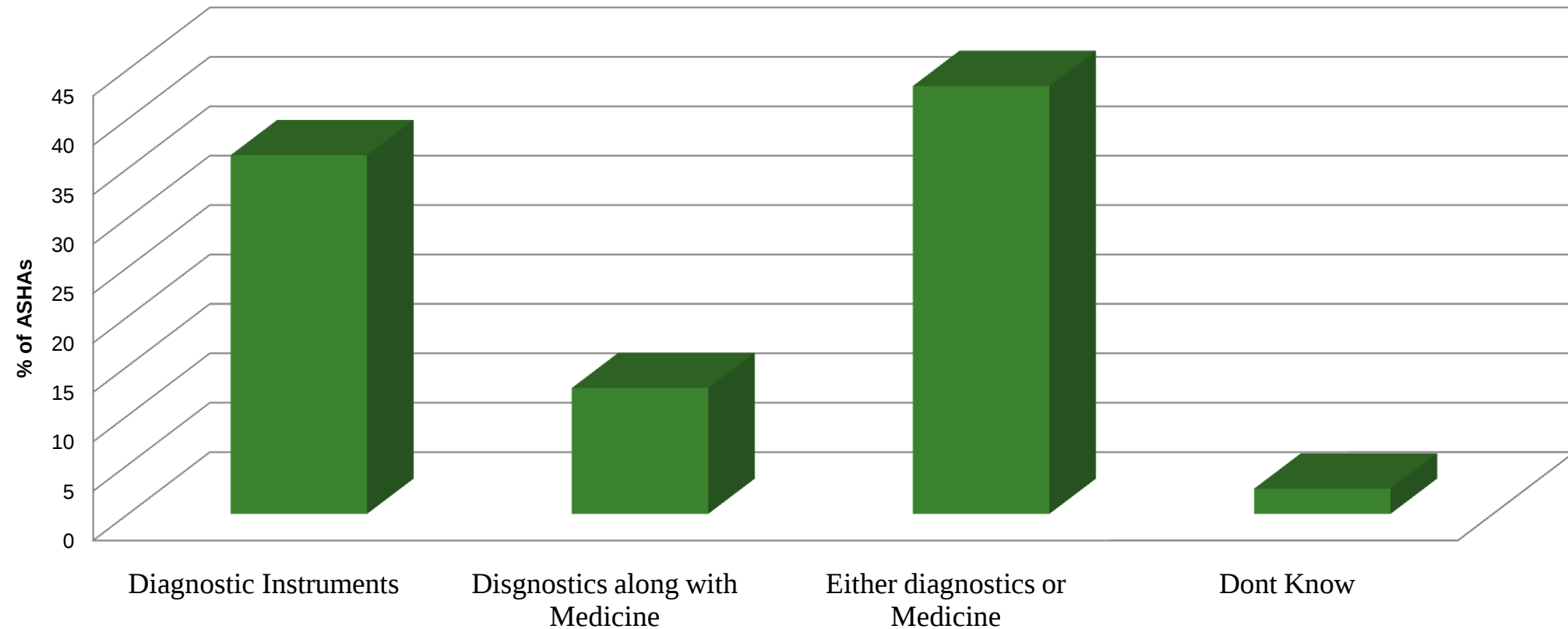


Complications Need to observe in Mother during PNC Home Visit



Result : Practices N-157

Things Carrying during Home Visit



Results : Factor Influencing Provision PNC Services

	Response	Number of ASHAs	Percent
Received Checklist N=157	Yes	138	87.98%
	No	16	12 %
Filling of Checklist N=138	Yes	65	47.101%
	No	73	52.89%

Awareness about the incentives (N-157)	Number of ASHAs	Percent
Yes	118	75%
No	39	25%
ASHAs undergone Module 6 & 7 Training	138	88%

Results : Factor Influencing Provision PNC Services

	Response	Number of ASHAs	Percent
Problem Faced by ASHAs N=157	Yes	104	67%
	No	53	33 %
GOI SS in ASHA Area	Yes	116	74%
	No	41	26%

Types of Problems faced by ASHAs	Number of ASHAs	Percent
Don't listen	41	26%
Conveyance	19	11%
On time Incentive	47	30%
All the above	50	33%

Conclusion

- Most of the ASHAs had correct knowledge regarding the number of Home visits to be made for HBNC.
- Most of the ASHAs carry weighing machine and thermometer during home visit but leave other important items like Paracetamol, cotton, gauze, timer device, soap, spoon etc.
- Most of the ASHAs gave advices on Breast Feeding, Care of cord and Hand Washing practices but less than half of the ASHAs advice included other important issues like vaccination, maintenance of temperature & birth registration of new born.
- Most of the ASHAs had knowledge regarding early initiation of Breast Feeding.
- Advice regarding intake of colostrum remained a neglected practice by most of the ASHAs.
- Just 30% of the ASHAs advice regarding Kangaroo Mother Care.
- During home visits, checking weight and temperature was done by majority of ASHAs but rest other signs of the new born were examined by half or less than half of the ASHAs only, which showed there was a need of capacity building.
- Lack of supplies of HBNC checklists and delayed payments of incentives to ASHAs also affected the provision of HBNC services.

Recommendations

- Ensuring Training of all the ASHAs
- Provision of refresher training
- Ensuring supply of checklist to all ASHAs
- Regular supportive supervision
- Timely payment of incentives

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THANK YOU
