Accelearating MMR reduction in Rajasthan through improvement in accessibility and availability of maternal health services in Rajasthan

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National Health Mission

The National Health Mission (NHM) encompasses its two Sub-Missions,

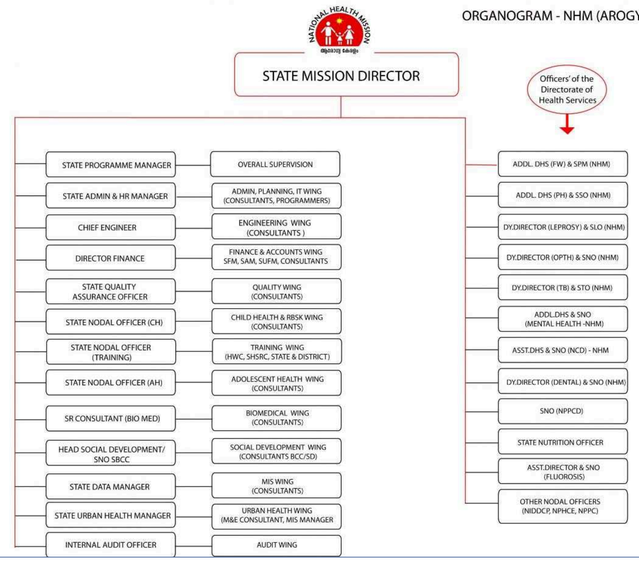
The National Rural Health Mission (NRHM) - **12th April 2005**

The National Urban Health Mission (NUHM)- 1st May 2013

Vision

"Attainment of Universal Access to Equitable, Affordable and Quality health care services, accountable and responsive to people's needs, with effective inter-sectoral convergent action to address the wider social determinants of health"

ORGANIZATION STRUCTURE



MATERNAL HEALTH

MATERNAL HEALTH-
Maternal health refers to the health of women during pregnancy, childbirth and the postnatal period . Each stage should be a positive experience, ensuring women and their babies reach their full potential for health and well-being

FLAGSHIP PROGRAMMS -

- Janani Suraksha Yojna (JSY)
- Janani Shishu Suraksha Karyakram (JSSK)
- Pradhan Mantri Surakshit Matritva Abhiyan(PMSMA)
- Labour room quality improvement initiative (LAQSHYA)
- Surakshit matritva abhiyan (SUMAN)

MATERNAL MORTALITY RATIO

Maternal Mortality ratio (MMR) is defined as the number of maternal deaths per 100,000 live births due to pregnancy or termination of pregnancy, regardless of the site or duration of pregnancy. The maternal mortality rate is used to represent the risk associated with pregnancy among women

RESEARCH QUESTION-

What are factors accelerating the reduction of Maternal Mortality Ratio?

OBJECTIVES-

- Analysis of NFHS data
- Identifying problems leading to Maternal Deaths & providing possible solution to address them to accelerate MMR reduction.

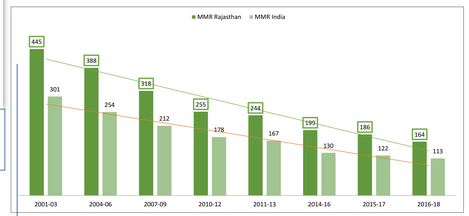
METHODOLOGY-

Various methods were used for collecting relevant information, including a review of literature (i.e. published and unpublished reports of government and non-government agencies), secondary analysis of data from National Family Health Surveys (NFHSs) and Sample Registration System (SRS), organizational structures and functions, and administrative support.

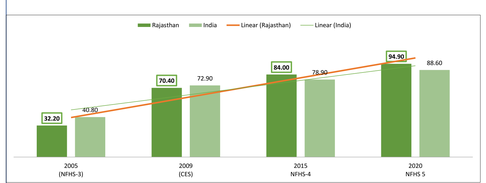
ANALYSIS AND FINDINGS

1. ANALYSIS OF NFHS DATA

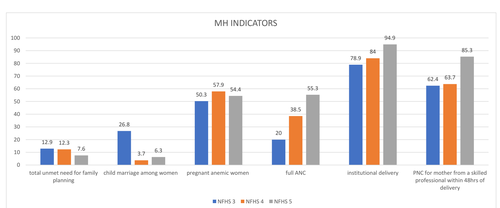
a) MMR



b) INSTITUTIONAL DELIVERY

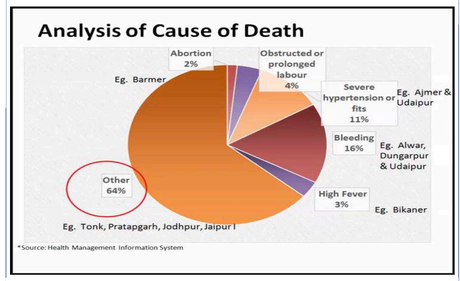


2. MATERNAL HEALTH INDICATORS



SWOT ANALYSIS OF ORGANIZATION

3.ANALYSIS OF CAUSE OF DEATH



4.ACCESSIBILITIES ISSUES –

1.FIELD LEVEL

- Accessibility to early registration
- Regular cheackups

2.HOSPITAL LEVEL

- Institutional deliveries
- Mobilization to PHC'S

5.PROBLEMS FACED –

- Referral linkages
- Functionalization of Blood storage units at FRU's.
- Quality ANC cheackups

6.STATE SPECIFIC INTERVENTIONS

- Balloon tamponade
- Ferric carboxy maltose

PRACTICAL EXPOSURE V/S THEORITICAL WORK

- Theoretically, I studied a lot about healthcare system, which when comes to practical implementation becomes a little difficult and more resource consumption as compared to written things.
- Theoretically it's easy to run any program in documents but practically at ground level it differs in criteria like the population where it's to be implemented ,place and behavior of the staff.
- Ground reality for real performance of any sector can be easily understood by practical aspects but theoretically it's only number can be analyzed which may or may not be same.
- Many of the schemes are provided to citizens by the government in documents but practically many of the things maybe missing.

CHALLENGES DURING INTERNSHIP

- First ever exposure to health care sector so, it was difficult to manage myself according to the norms of the organization.
- Field visit in the starting days was very new, so making communication with the professional and conveying the things was little difficult.
- It was difficult to handle many problems at a time and convey the things at the same time to higher authority.
- It was difficult to handle the staff at different HWCs if their problem not solved in time.

USEFULLNESS OF INTERNSHIP

- Great learnings of discipline, communication skills, leadership skills and the working in organization with the senior staff and able to find out my weaknesses.
- Get to know the exact situation of healthcare sector by visiting field and meeting with different professionals.
- Able to have good connections with the staff from lower to higher position.
- Able to gain confidence by applying both practical and theoretical concepts in field.

LEARNINGS AND VALUE ADDITION

- The Internship provided me the opportunity to work in health care sector.
- Provided me the exposure to witness how a Health care centre works & interact with the Health workforce (MO, CHOs)
- Provided practical knowledge of Health Programs that run at a health care facility.
- The internship provoded me to learn knowledge to collect data from NFHS,SRS AND PCTS.
- Internship provided me to interact with CHMO'S, SNO,s of different districts
- Provided me knowledge how to do Maternal death survilliance review .