Assessment of working of Mahila Arogya Samiti (MAS) & suggestions regarding their better outreach health activity

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NATIONAL HEALTH MISSION

NHM was launched nationwide on 1st May 2013 by the Government of India which consists of two submissions:
1) National Rural Health Mission (NRHM) 12th April 2005
2)National Urban Health Mission (NUHM) 1st May 2013.

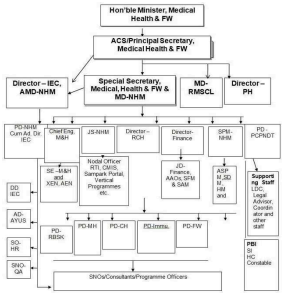
VISION

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

National Urban Health Mission (NUHM)

NUHM was launched in December 2014 as a Sub-Mission under National Health Mission (NHM) for providing equitable and quality.
primary health care services to the urban population with special focus on slum and vulnerable sections of the Society.

ORGANIZATIONAL STRUCTURE



ACTIVITIES OF NUHM

AREA OF STUDY

UPHC Sanganer *UPHC Sanganer* *UPHC Kesar Vihar, Jagatpura*

ASSESSMENT METHOD

- Interaction done with Chairpersons & Secretaries of MAS.
- Qualitative data from the interviews were gathered in the form of questionnaire.
- Attended MAS Meetings with all age groups of MAS.

OBJECTIVE

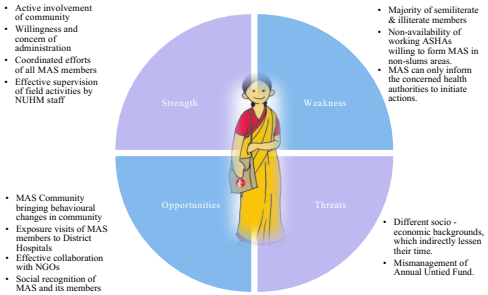
Assessment of working of Mahila Aarogya samiti (MAS) & suggestion regarding their better profiling of outreach activity.

STUDY DESIGN:
A qualitative exploratory approach
SAMPLING STRATEGY:
MAS meetings being conducted in the district Jaipur II with the MAS residing in Sanganer, Manoharpura, Kundannagar, Jagatpura.
DATA COLLECTION:
Data was collected in the month of May. Several meetings with MAS members done.
DATA ANALYSIS:
The qualitative data from the interviews were gathered with the help of a framed questionnaire and common responses were grouped and coded and analysed.
DATA EVALUATION:
Knowledge, Working, Experiences, Perceptions

MAHILA AROGYA SAMITI

- MAS is a voluntarily formed women's group of 8-12 locally residents, formed for urban vulnerable settlements.
- They mainly aims at health planning, Nutrition, Water, Sanitation, and Social determinants at the slum level.
- They also work for promoting community participation in health at all levels.
- One MAS covers approximately 50 -100 households and act as community-based peer education group in slums.
- MAS actively covers preventive and promotive care and facilitating access to identified facilities.

SWOT ANALYSIS OF MAHILA AROGYA SAMITI (MAS)



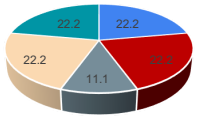
Strength
- Active involvement of community
- Willingness and concern of administration
- Coordinated efforts of all MAS members
- Effective supervision of field activities by NUHM staff

Weakness
- Majority of semiliterate & illiterate members
- Non-availability of working ASHAs willing to form MAS in non-slums areas.
- MAS can only inform the concerned health authorities to initiate actions.

Opportunities
- MAS Community bringing behavioural changes in community
- Exposure visits of MAS members to District Hospitals
- Effective collaboration with NGOs
- Social recognition of MAS and its members

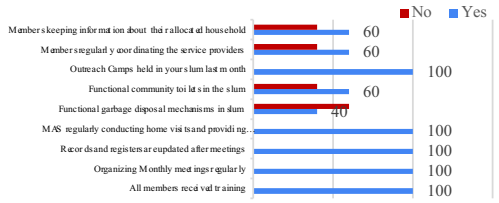
Threats
- Different socio - economic backgrounds, which indirectly lessen their time.
- Mismanagement of Annual Untied Fund.

RESULTS & FINDINGS



- Prevention from Dengue/Malaria
- Seasonal Diseases
- Family Planning
- Sanitary Pads Disposal methods
- Booster Dose Vaccination

Key Discussions done



Assessment of working of MAS in their respective area (in %)

LEARNINGS & VALUE ADDITIONS

- Exposure to core public healthcare world in real.
- Practical knowledge of departments, organization structure and work of NHM during our orientation session scheduled for a week.
- Practical knowledge of working of Mahila Arogya Samiti.
- Took a training session on " What are Menstrual cups & Tampons, How to use them ?" to Samiti Members.

CHALLENGES FACED DURING INTERNSHIP

- Extreme Hot environmental conditions (43 degree and above).
- Convincing Community members for their cooperation for interaction.
- Lesser time for interaction due to different socio-economic backgrounds of every MAS member.

SUGGESTIONS

- Creating sustainability of MAS is a long-term process.
- It requires on-going training and supportive supervision by ASHAs and other health functionaries.
- Training of MAS should be conducted through quarterly workshops.
- These trainings should be conducted as a part of induction training for ASHAs, following which they will support the training of MAS members.
- Reward and recognition to well performing MAS can provide motivation for their continued activities.