

SUMMER INTERNSHIP PROGRAM

at

NHM GUJARAT



From 06/05/2024 to 05/07/2024

A REPORT BY

ILA GUPTA

Master of Business Administration

(HOSPITAL AND HEALTH MANAGEMENT)

2023-25

under the Mentorship of

DR. ANOOP KHANNA, PROFESSOR





Certificate of Internship

This is to certify that ~~Mr./Miss.~~ Dr. Ila Gupta student of IIHMR University, Jaipur has successfully completed the Internship of MBA (Hospital and Health Management) from 06.05.2024 to 05.07.2024 at SNC, CoH, Gandhinagar.

During the period of ~~his~~/her internship programme with us, ~~He~~/She has been exposed to different processes and was found diligent, hardworking & inquisitive.

We wish ~~him~~/her every success in life & career.

Mrs. K.M. Sheth, GAS
Programme Officer(Admin)
National Health Mission, Gujarat

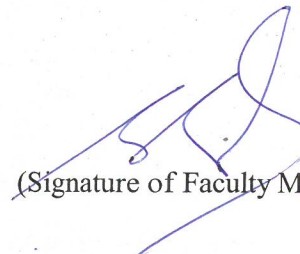
Remya Mohan, IAS
Mission Director,
National Health Mission, Gujarat

IIHMR University Faculty Mentor Approval

This is to certify that **Dr. Ila Gupta** of academic year **2023-25** of **INSTITUTE OF HEALTH MANAGEMENT RESEARCH** has prepared a poster with respect to her summer internship held during May-June 2024.

She has carried out work as per the guidelines. Her poster is approved for presentation.

Date: 22nd July, 2024

A handwritten signature in blue ink, appearing to be 'Dr. Anoop Khanna', written over a horizontal line.

(Signature of Faculty Mentor)

A small, stylized signature in blue ink, likely belonging to Dr. Anoop Khanna.

Dr. Anoop Khanna
Professor
IIHMR UNIVERSITY JAIPUR

Organization History, Vision & Mission

History

On May 1, 2013, the Union Cabinet authorized the National Urban Health Mission (NUHM) to be established as a sub-mission of the National Health Mission (NHM), which served as the primary sub-mission. In 2013, MoHFW launched RMNCH+A program to ensure integration of health services. A need had been felt to address the issues of malnutrition through integrated intersectoral holistic approach, the strategy now includes nutrition as an important pillar. RMNCH+A strategy focuses on nutrition and linkages between the healthcare services.

Vision

The NHM seeks to provide equitable, easily available, excellent health care services that are accountable and sensitive to the demands of the public.

Mission

Through human resource management, community involvement, decentralization, rigorous monitoring and evaluation against standards, the convergence of health and related programs from the village level upwards, innovations and flexible financing, and interventions to improve health outcomes, the mission is to make the public health delivery system fully functional and accountable to the community.

ORGANIZATIONAL STRUCTURE



AIM OF THE STUDY

To identify and analyse the underlying causes of the gaps in supply and field implementation of Iron and Folic Acid (IFA) supplements among adolescent girls (10-19 years).

OBJECTIVES

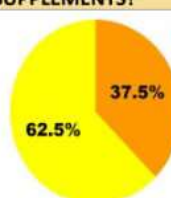
- To identify gaps and barriers that hinder uptake and adherence to regimen of IFA supplements in adolescent girls
- To understand perceptions and attitudes of adolescent girls, their families and healthcare providers towards IFA supplementation
- To assess knowledge of community healthcare workers regarding IFA supplementation

DISCUSSION AND RESULTS

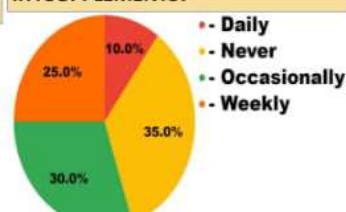
- A significant portion of adolescent girls are unaware about the need and benefits of IFA supplements
- Even if aware, there are certain factors like myths and misconceptions, fear of side effects and dislike for taste, due to which there is an adherence issue among girls for the IFA regime
- There was a lack of either pink or blue or both the supplements at some centres due to which adolescents were sometimes given supplements that were not intended for their age group
- Knowledge gaps were found among healthcare providers (ASHA & ANM) about IFA supplements

KEY OBSERVATIONS

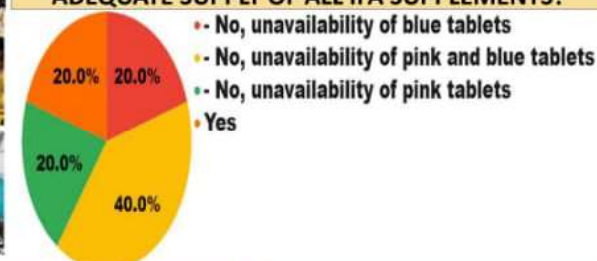
ARE YOU AWARE OF THE BENEFITS OF THE SUPPLEMENTS?



HOW REGULARLY DO YOU TAKE THE IFA SUPPLEMENTS?



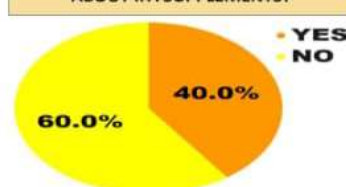
ADEQUATE SUPPLY OF ALL IFA SUPPLEMENTS?



DOES ASHA HAS FULL KNOWLEDGE ABOUT IFA SUPPLEMENTS?



DOES ANM HAS FULL KNOWLEDGE ABOUT IFA SUPPLEMENTS?



Learning and Value Additions

Difference between theory and practical exposure

IIHMR-U	NHM GUJARAT
- Aided in gaining a theoretical comprehension about the aim, value, target and beneficiaries of a program - Theoretical understanding of the primary research - Theory of implementation, functioning and monitoring of a program	- Provided a detailed knowledge about the program's functioning and implementation - Got an opportunity to conduct a study by primary data collection - Through various field visits, analysis of various gaps and issues in the working area

CHALLENGES

- Difficulty in communication due to lack of understanding of native language

USEFULNESS OF INTERNSHIP

- Various field visits helped in gaining an insight of the actual situation of healthcare sector
- Practical understanding of the working of an organization

LEARNINGS

- Primary data collection
- HMIS
- Data analysis
- Report writing
- Interdepartmental collaboration
- Field level monitoring and evaluation

SUGGESTIONS

- Enhance linguistic inclusivity within the organization
- Implement training sessions for community health workers (ASHA/ANM) to fully educate them about the AMB program and the IFA supplements
- Ensure Anganwadi centres are spacious and hygienic enough to properly accommodate the food stock and conduct various programs like Mamta Divas properly
- Improve supply chain management of IFA supplements to ensure an adequate supply of each IFA supplement at all the centres in all districts.
- Appropriate IEC materials needed, to create awareness and improve adherence to IFA regime

SWOT Analysis

Strengths

- Comprehensive approach employing 6x6x6 strategy
- Combines dietary instruction, hemoglobin monitoring, deworming, and IFA supplementation.
- Uses local centers and community health workers to reach beneficiaries

Weakness

- IFA supplements are inconsistently available; certain facilities don't have certain kinds of tablets.
- Inadequate knowledge among some community health workers
- Gagging and reluctance to take the supplements are caused by a dislike of their taste.

Threats

- Program outcomes can vary depending on the efficiency with which different regions administer a given program.
- Budget cuts may have an impact on the availability of finances required for the expansion and continuance of programs.
- Deep-seated cultural beliefs and misconceptions about anemia and IFA supplements can hinder program acceptance and adherence.

Opportunities

- Enhancing adherence rates by creating focused communication tactics to dispel myths, misunderstandings, and side effect anxiety
- Implementing training sessions for community health workers to make them knowledgeable about the program and IFA supplements
- Utilizing alliances with businesses in the private sector

Weekly Reports

Name of the Organisation: NHM Gujarat

Area/ Department/ Project of Summer Internship Program: State Nutrition Cell

Name of the Student: Dr. Ila Gupta

Roll no: 1717

Stream: MBA HM 28

Week no: 1

From...06/05/2024.....**to.....**11/05/2024.....

Activity Done	• Reported at NHM Bhawan to the mission director • In the COH office, got introduced to the officers, got introduced to SNC department, read about various programs running in Gujarat related to nutrition • Field visit to 2 CMTCs and nursery to observe VHND • Suggested the topic AMB and read about its guidelines
Linking theory (Classroom learning) with practice at your organisation	Subjects taught in 1 st year like national health programmes, biostatistics and healthcare delivery systems, helped in understanding the programs like Anaemia Mukht Bharat and other nutrition related programs and subject like Behaviour change communication helped in understanding significance of IEC materials as a means of communication and creating awareness among people.
Gaps identified on the working area.	• Went to 2 CMTCs and observed the differences between the two. • One of the CMTC, located in Gandhinagar district, was quite big, beds were kept with proper spaces between them, separate playing area and kitchen area, IEC materials like poster showing the breastfeeding practices were displayed on the walls and boards were available bedside to display the information of the children. • Other CMTC, located in Vijapur was quite small with conjoined beds and IEC materials were not put on the wall.

Suggestions for improvement	Beds in the Vijapur CMTC should be kept with the proper spacing, IEC materials and comparison table were available in the CMTC but should be put on the walls, slippers should be provided for an outsider to enter.
Plan for the next week	Interacting with the project officer of Anaemia Mukta Bharat, reading secondary data and going for field visits in order to collect data.

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Week no: 2

From...13/05/2024.....to.....18/05/2024.....

Activity Done	• Reviewed research article about gap analysis in the supply of IFA supplements in various states of India • Read about the status of adolescent girls in Gujarat and its role in improving economy • Went to field visit to a gatisheel CMTC allocated in the CHC in Sanandh, Ahmedabad and an anganwadi centre • Data entry of no. of AMB targets of 2024-25 • Comparison of the no. of targets of 2023-24 and 2-24-25
Linking theory (Classroom learning) with practice at your organisation	Subjects taught in 1 st year like epidemiology and research methodology helped me in understanding the type of research study used for the research in the review article, National Health Programs module helped in understanding the beneficiaries of AMB
Gaps identified on the working area.	• Gaps identified in the gatisheel CMTC and anganwadi centre • Gatisheel CMTC was quite smaller than NHM CMTC and also had various like cook was untrained, unavailability of proper IEC materials, unavailability of proper space for playing area, no proper visit by physician • In anganwadi centre, interacted with ASHA who told that she does not need to supply IFA supplements to the adolescent girls as their Hb level is not that low, she does not even check Hb using Hemoglobinometer
Suggestions for improvement	• Gatisheel CMTC needs improvement in various areas like availability of proper space to make playing area and keep the beds with proper spacing • Cook needs to be trained specially about the preparation of sugar solution that is given to children while admitting them • Proper IEC materials regarding IYCF should be made available and put on the walls • Doctor visits at the regular interval • ASHA should be told to check the Hb using Hemoglobinometer whenever she has to supply IFA supplements to home

	• Proper record should be maintained by ASHA about supply of IFA supplements and immunisation of mother and children
Plan for the next week	• Learn about supply chain management • Data collection and interaction with AMB beneficiaries by going on the field visit

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Week no: 3

From...20/05/2024.....to.....24/05/2024.....

Activity Done	• Data entry for AMB targets of various districts of Gujarat for 2024-25 • Read research articles on “IFA supplementation of adolescents” and “coverage of IFA supplementation in India” • Made a presentation displaying information about “Anaemia Mukd Bharat” program • Attended a meeting related to review of MAMTA CARD where various necessary changes to be updated in the card were discussed • Made questionnaire to ask adolescent girls and analyse gap in IFA supplementation
Linking theory (Classroom learning) with practice at your organisation	Subjects taught in 1 st year like epidemiology and research methodology helped in framing the questionnaire for study purpose and helped in analysing and reviewing the research article
Gaps identified on the working area.	
Suggestions for improvement	
Plan for the next week	Going on the filed visit for data collection

Signature of the Student



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Week no: 4

From...27/05/2024.....to.....01/06/2024.....

Activity Done	• data entry of AMB targets 2024-25 • %age comparison of 2024-25 target data with that of 2023-24 • Data analysis of AMB denominators showing changes in number of targets in 2024-25 from 2023-24 • Formed a questionnaire to interact with beneficiaries of AMB and the health workers • Read about supply chain management of IFA supplements, HMIS formats for AMB and national guidelines on lactation management centres
Linking theory (Classroom learning) with practice at your organisation	Subjects taught in 1 st year like national health programs helped in understanding about ‘Anaemia Mukd Bharat’ program
Gaps identified on the working area	There are some gaps in AMB dashboard which fetches data from HMIS. The data entry for IFA stocks for various months is missing. Also, there has been a huge reduction in AMB targets from last year in several districts
Suggestions for improvement	• Data entry for IFA supplements in the HMIS portal needs to be taken care of • Population estimation for the target beneficiaries needs to be done properly
Plan for the next week	Field visit for data collection

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Week no: 5

From:...03/06/2024.....to.....07/06/2024.....

Activity Done	• Went to field visit at Anganwadi centre in Koba, Raysan, Randesan Gram Panchayat and Municipal UHC in Madhupura, Ahmedabad • Observed Mamta Divas at Anganwadi Centre • Interacted with ASHA, ANM and adolescent girls at all the 3 places about IFA coverage • Collected data based on the interaction • Reported observations of the field visit to the local mentor
Linking theory (Classroom learning) with practice at your organisation	Subjects taught in first year like National Health Programs helped in understanding about the program 'Anaemia Mukh Bharat' and subjects like 'Research Methodology' helped in forming appropriate questionnaire and collecting data
Gaps identified on the working area.	• Unavailability of supply of blue IFA tablets at Anganwadi centre of Raysan and Randesan Gram panchayat since 1 year • Lack of awareness about the need and importance of these supplements among adolescent girls • Lack of knowledge among ASHA and ANM about the program
Suggestions for improvement	• Improvement in supply chain needs to be done to ensure the supply of all IFA supplements at all the centres • ASHA and ANM should be guided to make the beneficiaries aware about the need and benefits of the supplements by teaching them about the life cycle approach • Coverage of IFA supplement supply should be made available at schools so that adolescents can be taught about the benefits of supplements
Plan for the next week	Field visit for data collection

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Week no: 6

From:...10/06/2024.....to.....15/06/2024.....

Activity Done	• Data analysis of infrastructure and children admission at CMTC/NRC • Read about nutrition status and different interventions in various states of India • Went to field visit to Anganwadi Centre in Dudheshwar, Ahmedabad and Gatisheel CMTC and Anganwadi in Vasan, Anand
Linking theory (Classroom learning) with practice at your organisation	Subjects taught in first year like “National Health Programs” helped in understanding about “Anaemia Mukht Bharat” program which helped in understanding various IFA supplements given to various age groups and beneficiaries which helps in the gap analysis of the supply of these supplements at anganwadi centres
Gaps identified on the working area.	• Gaps were identified in the supply and field implementation of IFA supplements and also in the knowledge of ASHA and ANM • At one centre, pink and blue tablets were unavailable due to which they were supplying red tablets to adolescent girls • Some girls perceive that the supplements are not needed or does not take due to fear of side effects even if aware about the benefits of the supplements • Some ASHA and ANM are not knowledgeable about program which makes it hard to create awareness among beneficiaries
Suggestions for improvement	• ASHA and ANM needs to be guided about creating the awareness among beneficiaries for better field implementation • ASHA and ANM needs to be made aware about the program so that they can give a better understanding of the program and IFA supplements to the adolescent girls • Anganwadi centres were quite small to accommodate all the ration and also celebrate Mamta Divas in the same space. So these centres need to be given some more space

Plan for the next week	• Data analysis of data related to CMTC/NRC • Field visit for data collection • Data analysis of the collected data
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Week no: 7

From:...17/06/2024.....to.....21/06/2024.....

Activity Done	• Analysis of the difference between the budget allotted to NHM and Gatisheel CMTCs to provide the salary to their human resources • Went for the field visit to NRC centre in district hospital in Mahesana and an Anganwadi centre in Nandasan, Mahesana to observe Mamta Divas and to collect data by interacting with the adolescent girls who are the beneficiaries of AMB program to analyse the gap in the supply of IFA supplements and field implementation • Started the data analysis of the collected data and making report of the study done
Linking theory (Classroom learning) with practice at your organisation	Subjects like National Health Programs gave a better understanding of the AMB program which helps in understanding the gaps in the supply of IFA supplements and other essential drugs given to pregnant ladies. Subjects like Research Methodology helped in understanding the formation of a report of the study
Gaps identified on the working area.	• There was a lack of supply of pink IFA tablets in the anganwadi centre due to its lack in the sub centre which provides the supplements for supply to the anganwadi centre • There was a gap on the awareness about the supplements and their benefits among some adolescent girls
Suggestions for improvement	• Indentation of the supplements has to be properly taken care of to provide with all the supplements at all the centres • At the NRC centre, renovation needs to be taken care of to provide the better living surroundings for both the mother and child
Plan for the next week	• Designing the summer internship report and poster

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Week no: 8

From:...24/06/2024.....to.....29/06/2024.....

Activity Done	• Read research articles to get understanding about the progress of IFA supplements under AMB program and make the report • Made report of the study done • Went to field visit to Kudasan, Gandhinagar to observe Mamta Divas, to observe the storage of vaccines and interact with ASHA and ANM about the IFA supplements • Preparation of SIP poster and the compiled report • Learned about HMIS portal
Linking theory (Classroom learning) with practice at your organisation	Subjects taught in 1 st year like Research Methodology, helped in a better understanding of the report formation and appropriate literature review
Gaps identified on the working area.	• Lack in the knowledge of ASHA and ANM about IFA supplements • Ice packs were completely frozen, no conditioning was done • Lack in the knowledge of ASHA about the immunization schedule • Poor positioning of the session site without any waiting area for the beneficiaries
Suggestions for improvement	• ASHA and ANM both needs to be educated about the immunization schedule and storage of vaccines to immunize the children appropriately • They also need to be educated about the programs to provide the beneficiaries with appropriate knowledge and the correct supplements with adherence to the regimen • Session sites should be spacious enough to keep them hygienic during the session along with a waiting area for the beneficiaries • Proper storage of vaccines needs to be taken care of
Plan for the next week	Completion of the SIP poster

Signature of the Student



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Compiled Report

Name of the Organisation: NHM GUJARAT

Area/ Department/ Project of Summer Internship Program: STATE
NUTRITION CELL

Name of the Student: Dr. Ila Gupta

Roll no: 1717

Stream: MBA HM 28

Activity Done	• Field visits to: ➤ 2 NHM CMTCs and an anganwadi centre to observe Mamta divas in Gandhinagar ➤ Gatisheel CMTC allocated in the CHC and an anganwadi centre in Sanandh, Ahmedabad ➤ Anganwadi centre at Raysan, Randesan Gram Panchayat ➤ Municipal UHC at Madhupura, Ahmedabad to observe Mamta Divas and interaction with the adolescent girls for data collection ➤ Anganwadi centre in Dudheshwar, Ahmedabad to interact with the adolescent girls ➤ Gatisheel CMTC in Vasan, Anand to observe its situation in various aspects like space allotted to the CMTC, its surroundings, availability of IEC materials and comparison tables, availability of trained cook who knows how to make sugar solution, proper entries in the register and physician's visit on regular intervals and ➤ Anganwadi centre in Vasan, Anand to interact with the adolescent girls for data collection and also educated the girls about the need and benefits of IFA supplements and the anganwadi workers about guiding the beneficiaries and creating awareness in an appropriate way to improve the adherence of IFA supplements among the girls ➤ NRC centre in district hospital in Mahesana and an Anganwadi centre in Nandasan, Mahesana to observe Mamta Divas and to collect data by interacting with the adolescent girls who are the beneficiaries of AMB program ➤ Kudasan, Gandhinagar to observe Mamta Divas, observe the storage of vaccines and interacted with ASHA and ANM about IFA supplements • Reviewed research article about gap analysis in the supply of IFA supplements in various states of India • Data entry of no. of AMB targets for 2024-25 and its comparison with that of 2023-25 • Made a presentation displaying information about Anemia Mukht Bharat program
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	• Attended a meeting related to review of MAMTA CARD to discuss the necessary changes that needs to be updated in the card • Made questionnaire to interact with adolescent girls and community health workers (ASHA/ANM) to analyse the gaps in supply of IFA supplements, field implementation and adherence to IFA regimen and to assess the knowledge of ASHA and ANM about IFA supplements • Read about supply chain management of IFA supplements • Data analysis of infrastructure and children admission at CMTC/NRC • Analysis of the difference between the budget allotted to NHM and Gatisheel CMTCs to provide the salary to their human resources • Data analysis of the collected data and report of the study done • Read research articles to get a better understanding of the progress of IFA supplementation under AMB program and to make the report • Preparation of the SIP poster and compiled report
Linking theory (Classroom learning) with practice at your organisation	Various subjects taught in 1st year helped in gaining the theoretical understanding of various programs, their aim, objectives, beneficiaries, functioning and implementation which further helped in understanding the existing gaps and issues in the program and the healthcare centres. ➤ National Health Programs helped in gaining an insight into various programs like Anemia Mukh Bharat which helped in identifying various issues and gaps in supply of the IFA supplements ➤ Literature review of various papers for the purpose of writing a report of the study done, making questionnaires to interact with the beneficiaries, identifying the type of study to be performed, all can be linked with what was learned in Research Methodology and Epidemiology modules ➤ Significance of IEC materials as a means of creating awareness among the population so that the program can be implemented appropriately
Gaps identified on the working area.	• NHM CMTC located in Vijapur was quite small with no IEC materials displayed on the walls, beds were quite constricted • In a Gatisheel CMTC allocated in CHC in Sanandh, Ahmedabad, significant gaps were present like the CMTC was quite small such that there was no proper playing area and beds were lying in quite constricted way, cook was

	untrained, no proper visits by the physician, unavailability of proper IEC materials • In several Anganwadi centres visited during the internship, certain gaps and perceptions were observed related to the IFA supplements supplied to adolescent girls as a part of AMB program: ➤ At one place, ASHA had a perception that girls of nearby area do not require IFA as their Hb level is not that low, Hb is not checked using Hemoglobinometer ➤ Unavailability of supply of: blue IFA supplements at the centre in Raysan, Randesan gram panchayat since 1 year, both pink and blue tablets at the centre in Dudheshwar, Ahmedabad, pink tablets at the centre in Nandasan, Mahesana ➤ Lack of awareness about the need and importance of these supplements among adolescent girls ➤ Some girls perceive that the supplements are not needed or does not take due to fear of side effects even if aware about the benefits of the supplements ➤ Some ASHA and ANM are not knowledgeable about program which makes it hard to create awareness among beneficiaries ➤ At the anganwadi centre in Raysan, adolescent girls are supplied with the pink tablets and other centres where there is unavailability of blue tablets, girls are supplied with red tablets • Huge reduction in AMB targets from last year in several districts • During a Mamta Divas observed at Kudasan, Gandhinagar, it was observed that ice packs were completely frozen, no conditioning was done • Lack in the knowledge of ASHA about the immunization schedule • Poor positioning of the session site without any waiting area for the beneficiaries
Suggestions for improvement	CMTC/NRC • Several Gatisheel CMTCs need to be improved. These CMTCs need to be made spacious enough so that beds can be kept with proper spacing, with display board on the bedside walls showing the information of the admitted child. Enough area for the kitchen and playing should be provided • CMTCs and NRCs should be properly equipped with the IEC materials, regarding IYCF, that can convey appropriate information and the comparison tables with the standard weight and height to determine which child should be admitted • Slippers should be provided for an outsider to enter

- Cook needs to be trained specially about the preparation of sugar solution that is given to children while admitting them
- Doctor visits should be conducted at the regular interval
- Renovation needs to be taken care of at some centres to provide the better living surroundings for both the mother and child

ANGANWADI CENTRES, MAMTA DIVAS, IFA

- ASHA should be told to check the Hb using Hemoglobinometer whenever she has to supply IFA supplements to home
- Proper record should be maintained by ASHA about supply of IFA supplements and immunisation of mother and children
- ASHA and ANM should be made properly aware about the program and IFA supplements so that they can provide appropriate knowledge to the beneficiaries and can help them to adhere with the IFA regime
- Healthcare workers should be knowledgeable about both the therapeutic and prophylactic doses of IFA supplements. This ensures that they do not mistakenly assume that a girl does not need IFA supplementation at any given time.
- Proper IEC materials need to be created to spread the awareness about benefits of AMB program among the beneficiaries
- Population estimation for the target beneficiaries needs to be done properly
- Improvement in supply chain needs to be done to ensure the supply of all IFA supplements at all the centres
- IFA supplement supply should be made available at schools so that adolescents can be taught about the benefits of supplements
- Some Anganwadi centers were too small to accommodate all the ration and host Mamta Divas in the same space. Therefore, these centers need to be provided with additional space.
- Indentation of the supplements for each district has to be properly taken care of, to provide with all the supplements at all the centres
- ASHA and ANM both needs to be educated about the immunization schedule and storage of vaccines to immunize the children appropriately
- Session sites for Mamta Divas should be spacious enough to keep them hygienic during the session along with a waiting area for the beneficiaries

	• Proper storage of vaccines needs to be taken care of according to the vaccine carrier DATA ENTRY • Population estimation for the AMB targets needs to be done properly so that all beneficiaries can be provided with the correct supplement • Timely data entry for IFA supplements in the HMIS portal needs to be taken care of
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