MASTER OF PUBLIC HEALTH

Johns Hopkins Bloomberg School of Public Health & IIHMR University

PRACTICUM REPORT

By

Dr. Kanishtha Arora

Cohort-3
2015-17

Under the guidance of

Dr. Suresh Joshi

Professor, IIHMR University

TO WHOMSOEVER MAY CONCERN

This is to certify that Dr. Kanishtha Arora, student of Master of Public Health Program offered by Institute of Health Management Research IIHMR University, Jaipur in cooperation with Johns Hopkins Bloomberg School of Public Health, Baltimore has undergone Practicum Training at MAMTA Health Institutes for Mother and Child, New Delhi on the topic ***" Strengthening continuum of care by enhancing uptake of public maternal, newborn & child health and nutrition services by community based interventions"*** from 20th December 2016 to 30th January 2017.

The Candidate has successfully carried out the study designated to her during practicum training and her approach to the study has been sincere, scientific and analytical.

The Practicum Training is in fulfillment of the course requirements.

I wish her success in all his future endeavors.

Sd-

Dr. Suresh Joshi
Practicum Advisor

CERTIFICATE BY SCHOLAR

This is to certify that the Practicum Project titled ***" Strengthening continuum of care by enhancing uptake of public maternal, newborn & child health and nutrition services by community based interventions"*** submitted by me, Dr. Kanishtha Arora with Enrollment No. IIHMR-U/07/2015-2017/0007 under the supervision of Dr. Shantanu Sharma (Director for RMNCH+A, MAMTA Health Institutes for Mother and Child, New Delhi) for award of **Master of Public Health** carried out during the period *date 20th December2016 to 30th January* 2017 embodies my original work and has not formed the basis for the award of any degree, diploma associate ship, fellowship, titles in this or any other Institute or other similar institution of higher learning.

Dr. Kanishtha Arora
MPH Candidate 2015-17

MAMTA-HEALTH INSTITUTE FOR MOTHER & CHILD

(NGO IN SPECIAL CONSULTATIVE STATUS WITH THE ECONOMIC AND SOCIAL COUNCIL OF THE UNITED NATIONS)

24th March, 2017

TO WHOMSOEVER IT MAY CONCERN

This is to certify that **Dr. Kanishtha Arora,** student of Cohort-3, Master of Public health (IIHMR University, Jaipur in collaboration with Bloomberg School of Public Health, Johns Hopkins University has successfully completed her 180 hours of work (practicum) as Program Officer for RMNCH+A (Reproductive Maternal New born Child Health + Adolescent) for West Delhi district, at **MAMTA Health Institutes for Mother and Child, New Delhi**, from 20th December, 2016 to 30th January, 2017. This project focuses on continuum of care by enhancing uptake of public maternal, New born, Child and nutrition health services, in eleven districts.

As part of her work, she performed various duties that involved program planning, implementation and monitoring. She has also worked and developed on some of the project proposals and reports. While performing several duties, she has demonstrated analytical ability, written and oral communication skills. She has also demonstrated outstanding interpersonal skills and cultural competencies while working with the outreach workers and community.

Best Wishes.

MAMTA-Health Institute for Mother & Child ★ New Delhi

Dr. Shantanu Sharma
Assistant Director (Technical, RMNCH+A)

About the Organization:

MAMTA-Health Institute for Mother and Child is a registered not for profit organization under the Society Registration Act -1860 of the Government of India. The organization was established in the year 1990 with a clinic in Tigri, a resettlement colony in Delhi, to contribute to maternal and new born health care and services. Over the past 25 years, the institutional work has diversified in critical areas of public health and its social determinants with Continuum of Care Approach under Maternal and Child Health; Sexual and Reproductive Health with focus on Adolescents (10-19 years) and Young People (10-24 years), Communicable Conditions and Diseases (Largely HIV, TB and Hepatitis B &C) and Non-Communicable new epidemiological trends and diseases (Hypertension, Diabetes, Obesity & Mental Health).

Besides, organization has Gender, Sexuality and Rights as specific areas for research and program implementation while adapting the principles and perspectives across the institutional program. The organization is an established and widely recognized institute for program implementation, advocacy, training and research; nationally and internationally.

Vision:

MAMTA's Vision is "Working together in building a world that is just, equitable and inclusive".

Mission:

"To empower the underserved and marginalized individuals and community through gender sensitive participatory processes for achieving optimal and sustainable /health and development."

Practicum Goals and Objectives:

The following core competencies will be developed through my practicum experience at MAMTA Health Institutes for Mother and Child .

The goals and objectives under each competency are provided below:

1. Analytical/Assessment Skills:
    a. Define a public health problem.
    b. Obtain and interpret data to define risks to the community.
    c. Ability to collect and analyze data that relate to health status of the populations
2. Program Planning Skills:
    a. Collect and prepare information to support program development
    b. Develop program recommendations.
    c. Participate in program planning and implementation.
3. Communication Skills:
    a. Formulate communication plans through input from stakeholders.
    b. Utilize learned skills to communicate effectively with a variety of stakeholders.
    c. Employ effective strategies of communicating with the media.
    d. Effectively communicate public health information using a variety of written and oral communication approaches.
    e. Employ advocacy skills.
4. Community Dimensions of Practice Skills:
    a. Create connections and collaborate with key stakeholders to promote health.

b. Ability to identify and maintain partnerships with stakeholders and community partners to promote the health of the population.

Job Position: Program Officer, Project Jagriti, West Delhi District

Location : West Delhi, New Delhi, India

Duration: 20th December, 2016 to 30th January, 2017

Name of the Mentor: Dr. Shantanu Sharma, Director RMNCH+A, MAMTA Health Institutes for Mother and Child, New Delhi.

Objectives of Practicum

1. Improve upon analytical skills, learnt as part of my course curriculum.
2. Polish my communication skills further by interacting with community, utilizing effective strategies for advocating change.
3. Develop cultural competency by engaging with diverse workforce, further by utilizing communication strategies for program implementation.

Project Jagriti :

This program is for increasing the continuum of care for the poor and marginalized section of the population. The program has been running since January, 2016. The baseline, area mapping, resource mapping, stake holder identification was completed in first three months of program implementation. Then the program developed in the following steps:

1) ***Identification and Line Listing of Target Beneficiaries***

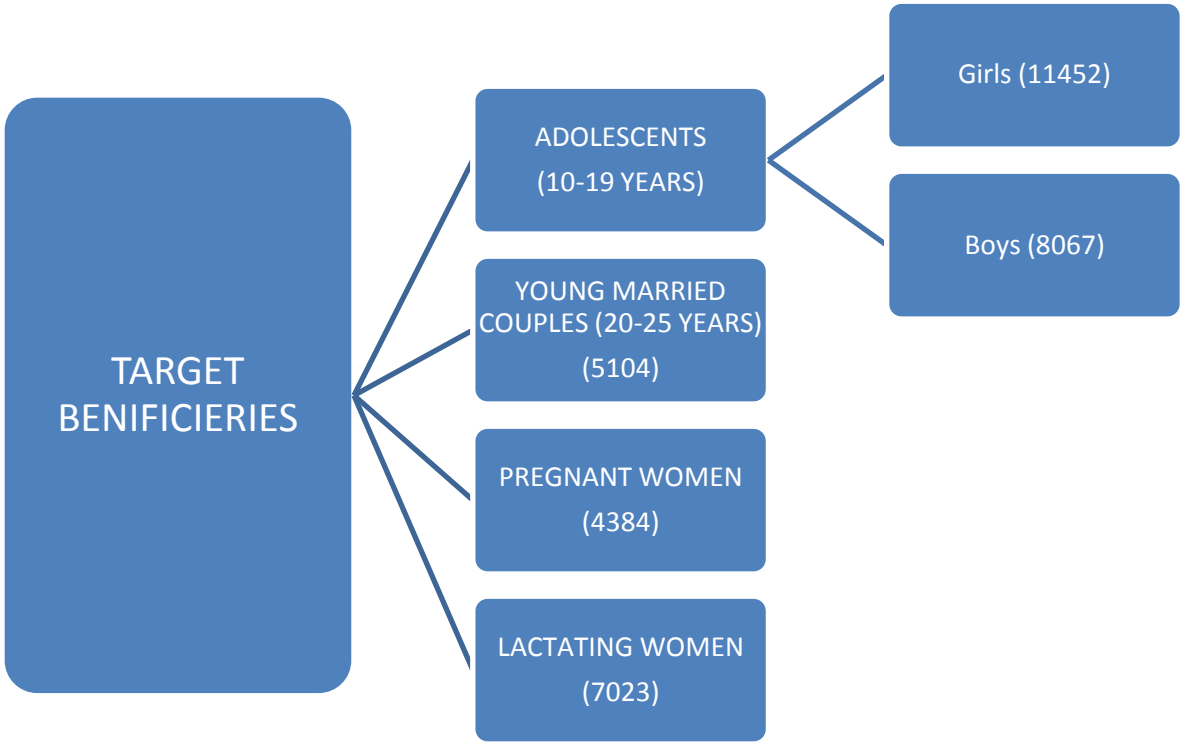

Fig: Showing the various groups of beneficiaries identified

During field visits and community meetings our field workers started identification of houses having our target beneficiaries (i.e. Adolescent boys & girls, Young Married Couples, Pregnant

Women and Lactating Mothers).These houses were spotted and identified in the community. After rapport building with head of the family and obtaining their consent, they were enrolled in line-listing format. These beneficiaries were also briefed about the project and what is expected from them in future. Identified individuals from all the intervention sites were contacted and were listed as beneficiaries.

Various topics covered *for* ***adolescent boys & girls and young couples*** during TOT are:

- Life skills
- Physical changes during adolescence
- Mental changes during adolescent age
- Importance of nutrition in this age group

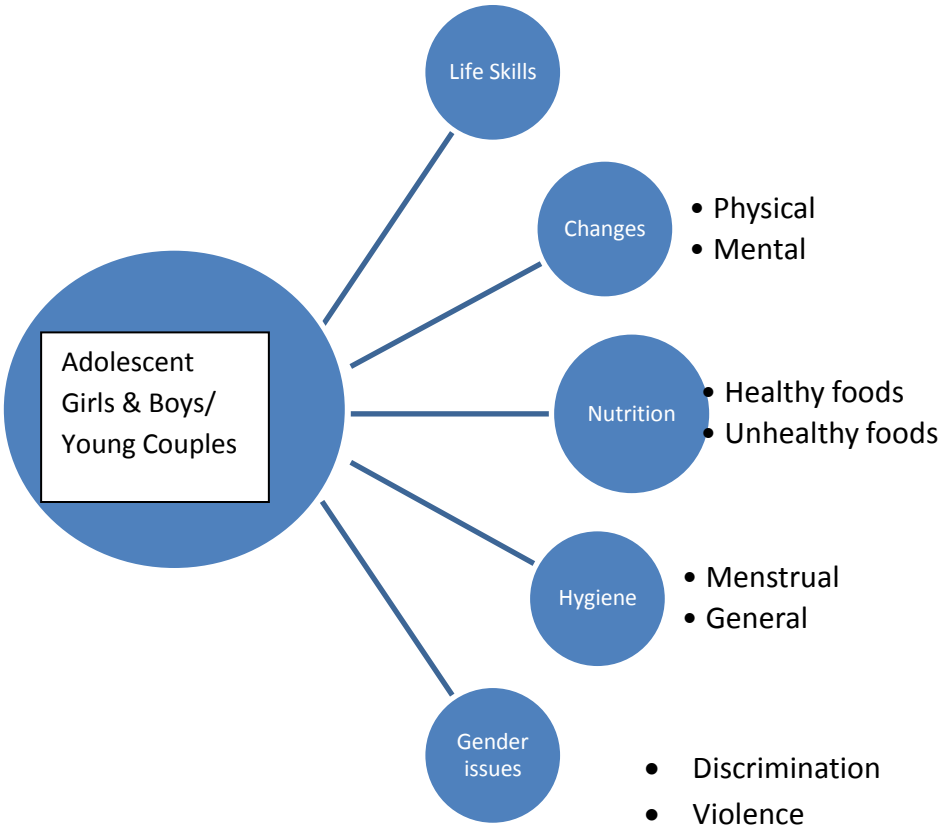

Fig: Topics covered for Training of trainers

- General and menstrual hygiene (for girls)
- Importance of education
- Gender discrimination.
- Violence

Whereas topics covered for ***pregnant and lactating women*** are:

- Early ANC registration
- Institutional delivery
- Examinations during ANC visits
- Importance of nutrition during pregnancy

- Danger signs during pregnancy
- Early initiation of breastfeeding
- Signs of good attachment
- Immunization
- Importance of nutrition during lactation
- Lactation during illness and recovery and
- Complementary feeding

A total of 743 adolescent peer leaders, 251 young couple peer leaders and 455 women peer leaders have been trained during the reporting period. Trained peer leaders started playing role of peer mentors among their groups and started imparting knowledge on the same not only to their groups alone but also to other adolescents in the community. These peer leaders are the ones, who are spreading key messages to communities and linking their friends with YICs.

Job Responsibilities:

- *Planning for the activities of the month:*

  This responsibility involves making a work plan for the month. This is done with the master plan of the program as the basis. The various activities to be planned are:

  - Preparing roster for YIC (Youth Information Centre)
  - Planning for special (health related) days celebration for increasing awareness in the community
  - Planning for the trainings and capacity building of the Out reach workers

While planning for the monthly activities, I was able to strengthen my ability to plan a program and also I was able to put to use the principles of strategic planning learnt during the course curriculum.

- *Preparing monthly budget:*

  This role involves preparing an approval for the various activities that are to be accomplished in a month. There is clear demarcation in the budgetary allocation for the activities to be completed in a month. The budget approval is prepared by 25th of every month and the expenditure sheet of the current month is also shared simultaneously with the reporting manager. One of the budgets and expenditure sheet prepared has been attached in the annexure.

  While making the monthly budget, I learnt how to practically apply the finance and accounting principles. Also it helped me strengthen my analytical abilities by keeping the master plan of the project as the guiding light, I developed the budget within the limits of the budget allocated to every activity separately. This happened to be the most challenging task, since a lot of precision is needed while planning for the finance of any activity.

- *Trainings for the capacity building of the ORWs (Out Reach Workers) for BCC sessions and the follow up of the beneficiaries:*

  This role involves utilising the communication skills, for behaviour change communication sessions to be taken by the out reach workers in the community. There are two training done in each month, to build the capacity and train them for making the community aware of the health needs in various target beneficiaries. The trainings

comprise of the sessions to be done with pregnant, lactating women, adolescent boys and girls and young couples. This involves sessions on nutritious food, menstrual health and hygiene, nutritious foods to be taken during pregnancy and lactation, family planning and birth spacing etc.

While doing these trainings, I was able to learn and develop more on the issues that are of great importance to all the beneficiary groups. Also, I brushed up the principles of behaviour change communication and utilised them to help achieve change in the behaviour of the staff. Answering the questions of the staff that concerned with the practical difficulties faced by them while convincing the mother in laws or the other family members for isuues like early registration of pregnancy for ANC visits or initiation of breastfeeding within half an hour of child birth, I improved upon my own communication skills and how to best use the theories of behaviour change.

- *Preparing the MPR (Monthly Progress Report):*

  This role involves tracking and keeping a note of various activities carried out during a month and the number of beneficiaries touched. These are named as indirect beneficiaries, as they are not the ones who have been identified and line listed for the program, rather they are those people who are also marginalised and lack basic awareness about health and health needs. So by reaching these people the community at large is targeted. The data is uploaded on the newly developed MIS named http://www.mamtamis.in/RMNCHA of the organization. While updating the MPR, I learnt and developed on my statistical abilities by sharing the cumulative reports of the indirect beneficiaries reached with the help of the project.

- *Making the YIC more active and vibrant:*

  YIC or the Youth Information Centre is a space in the community where anyone from the community can come and seek information related to health, well being and any health services that are available by the public health system. In addition to this, any other questions or queries related to pregnancy, family planning, birth spacing, sexual and reproductive health, menstrual hygiene may be brought in for clarification of any doubts. Also, many a times the community workers also accompany the people to the health facilities, if there is a need for medical advice or treatment. Many girls who had to drop out of the school because of family norms, have been re-admitted in the schools by the behaviour change communication sessions done with them and their families.

  To ensure, this space in the community to become much sought for, I started daily duty roster for the community workers. Daily one community worker is present at the YIC from morning 11 am to evening 4 pm. Also, games like carom board, lido have been arranged for this place, which turn out to be an attraction for the adolescents specially. I was able to practically apply the principles of access model that I learnt while my public health classroom training.

- *Develop proposals for Public Health Projects:*

  As part of this role, I developed rationale for Menstrual Health and Hygiene amongst adolescent girls in rural parts of Haryana. It helped me to develop my analytical ability, looking at the various data on District Household and National Family health survey

reports as to what is the prevalent scenario of menstrual health and hygiene among adolescent girls and how the school drop-out rate is directly co-related with this public health issue. This involved literature review too and my knowledge base with respect to the norms associated with the menstruation enlarged. The superstitions and taboos attached with a female who is menstruating are still existing in not just rural and uneducated group of people but amongst educated and urban settings as well.

I also developed a proposal for under five children to decrease the morbidity associated with malnourishment and stunting, for two blocks in the district of Ludiana, Punjab.

- *Document and prepare reports of the various ongoing activities:*

As part of this responsibility, I review the reports prepared for the various activities documented. This has helped me polish my written communication skills. It has given me hands on many formal documents to be prepared and shared within the organization and ones that are shared with the different funding agencies. Documentation of Mental health workshop for pregnant and lactating peer leaders, held for making them aware about the issue of mental health. Prepared report on stakeholders meeting,

- *Presentation for state level workshop on Non Communicable Diseases:*

  The state level workshop organised by the organisation to educate and train the district and block NGO representatives about Non Communicable Diseases. A presentation on what diabetes is and its types was prepared and shared to educate community about the lifestyle disorders and the changes that need to be brought about in lifestyle to lead a healthy life.

Delivering this presentation was an immense learning, since it helped me gain a lot of confidence and polish my communication skills. Since I was expected to explain the details of lifestyle disorders to people who had little knowledge of the medical terms.

- *Field Visits:*

  I visited the Nihal Vihar areas several times during my practicum training. It happens to be an urban setting with population that is mostly below poverty line and marginalised. Also the health indicators happen to be poor in comparison to the national averages. I interacted with all the beneficiary groups several times to understand how well the project is running and how the community is benefiting. It helped me learn the local language and how to ask and explain things to the community. I was able to develop on my communication skills while talking about issues related to pregnancy, child health, new born care and menstrual health and hygiene.

Difficulties faced and their resolution:

While performing several roles and responsibilities, the major issue that came up most often was keeping up the team spirit among the out reach workers. Since they come from within the community and work in the field, their motivation to work gets very low. On the contrary, the success of the program depends upon their performance.

I tried maintaining direct contact with the workers on daily basis. I tried team building techniques with them and tried to work as a team, rather than encouraging hierarchy in my functioning. Further to ensure the quality of meetings being conducted by the workers, I made surprise visits to the community meetings and also sent Assistant Program Officer for quality assurance.

Conclusion:

It has been an immense learning, while being posted at the field office of MAMTA. The exposure to the community has helped me develop more on my communication skills. It has been a direct interface with the work happening at the grass root level. The analytical ability that I had developed during the course curriculum has been polished further by working for the different proposals. I was able to strengthen my analytical ability by analyzing various district household and national reports. Further, going through various articles on the issues I was developing proposals on helped me identify the various variables on which menstrual health and hygiene amongst adolescent girls depend. Also, I was able to understand the taboos attached to menstruation, having interacted with the community directly, specially the adolescent girls. The adolescent girls form one of the beneficiary group for this project and they come from urban settings from marginalized households. So I have been able to learn and imbibe the practical nuances of team work and working with the people of diverse cultures.

Annexure-2 : YIC roster

YIC	WEEK	DAYS OF THE WEEK (timings 11:00am – 4:00pm)					
Days		**Monday**	**Tuesday**	**Wednesday**	**Thursday**	**Friday**	**Saturday**
G-Block	**1**	**-**	**-**	**-**	**-**	**Activity (Tanveer)**	**off**
	2	**Mamta**	**Tanveer**	**Seema**	**Anusha**	**Meenu + Mithlesh**	**Activity (Tanveer)**

	3	**Tanveer**	**Seema**	**Mamta**	**Meenu + Mithlesh**	**Activity (Tanveer)**	**Off**
	4	**Mamta**	**Meenu + Mithlesh**	**Tanveer**	**OFF (26th jan)**	**Seema**	**Activity (Tanveer)**
	5	**Tanveer**	**Mamta**	**Seema**	**Meenu+ Mithlesh**	**Activity (Tanveer)**	**off**
Days		**M**	**T**	**W**	**T**	**F**	**S**
K2-Block	**1**	**-**	**-**	**-**	**-**	**Activity (Seema)**	**off**
	2	**Neetu+ Neeraj**	**Seema+ Anuradha**	**Monika**	**Neeraj + Monika+ Mithlesh**	**Bharti**	**Activity (Seema)**
	3	**Seema + Anuradha**	**Anuradha + Mithlesh**	**Madhumita+ Chand**	**Bharti**	**Activity (Seema + Neeraj)**	**off**

	4	**Bharti**	**Seema**	**Neetu**	**OFF (26^{th} jan)**	**Neeraj +Mithlesh**	**Activity (Seema)**
	5	**Seema +Anuradha**	**Chand**	**Bharti**	**Neetu**	**Activity (Seema + Anuradha)**	**Off**

Annexure-3: Pictures

Photo 1: Stakeholders meeting at West Delhi Office.

Photo 2: MAMTA team with Mr. Faiyaz Akhtar (Director RMNCH+A) at West Delhi Office.