Dear Readers,

Greetings from SIHFW!

The period April, 2015 onwards has been full of expansions of research horizons for SIHFW. New feathers have been added to the Hat! New research studies were done including independent monitoring, surveys, compliance study etc at SIHFW.

Research exposure has helped not only the staff to learn and grow, but also established a system of data entry and data base of freelance investigators and supervisors required for further such endeavors.

Please find a newsletter based on wide range of activities implemented, coordinated and facilitated by SIHFW.

We would solicit your feedback and suggestions.

Director

**Inside:**
- Events at SIHFW
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**Health and Social Days**

April –May– June ‘15
- World Autism Awareness Day April 2
- World Health Day April 7
- World Hemophilia Day April 17
- World Earth Day April 22
- World Malaria Day April 25
- International Nurses Day May 12
- World No Tobacco Day May 31
- World Environment Day June 5
- World Day Against Child Labour June 12
- World Blood Donor Day June 14
- International Yoga day June 19
Trainings, Workshops and Meetings

Orientation Training on Community Assessment

Independent research team members were oriented about objectives, tools and methodology of the research study. The tool was field tested in neighboring rural areas of Jaipur district, wherein Focused Group Discussions were also done. The orientation was done at SIHFW on May 2, 2014.

Orientation Training PCPNDT study

During May 13-15, 2015 freelance investigators/supervisors were orientated at SIHFW. They were oriented with the precautions to be taken while collecting data and doing the mapping exercise, to avoid any conflicts. Role plays and demonstrations were used to make participants understand the methodology of qualitative and quantitative data collection required in the study.

Orientation cum Review meeting of Mission Indradhanush (M.I.) Monitoring

The independent monitors were oriented in a one day Review cum orientation meeting held on April 25, 2015 at SIHFW, after the first M.I. round. The objective was to share experiences and observations of M.I. first round monitoring and orientation for further rounds monitoring. The format was explained to all participants.

There were telephonic updates of all monitoring rounds as per feedbacks given by monitors. Along with monitoring there was hand holding support given by monitors for gaps in M.I. such as session site planning (Block and District planning meetings), IEC display and community mobilization. The success stories have been documented through reports of Independent monitors.

Refresher ToT SBCC

Two batches of Refresher Training of trainers for all master trainers of SBCC trained under SBCC partnership, were organized at SIHFW. The batches were held on April 27 and 28, 2015 at SIHFW. The refresher was done to refresh the knowledge of SBCC trainers and discuss future strategy of AAAs orientation at sector level, being to be implemented with coming month in all 10 HPDs with priority in HPD blocks. There were sessions on motivation and group work for planning AAAs orientations to be done at Sector level in high priority blocks of 10 HPDs.
Monitoring/ Visits done by SIHFW personnel

Hand holding and monitoring of SBCC training

SIHFW has been given responsibility of implementing all training and research activities under PIP sanction for accelerating RMNCH+A services in Rajasthan. One of the major activity was to train all Block functionaries in Social and Behaviour Change Communication (SBCC) and Inter Personal Communication (IPC) in all 10 High Priority Districts.

The batch at Udaipur was organized during May 26 to 29, 2015. For hand holding and monitoring support SIHFW representative Ms Archana visited the training batch during May 27 and 28. New Delhi National Team members were also present at the training.

There were sessions on Key factors of IPC, Social Mapping, exclusion and inclusion, and planning for MCHN / IPC days. Mock sessions were organized for each individual for practicing good Inter personal communication.

Trainees Feedbacks

1. The training has helped me learn new skills, specially the Hands-on sessions. This gave me confidence.
2. Good knowledge of Government procedures and Rules for managing the health care centre, was received in training at SIHFW.

Source: Training feedbacks from participants

Research Studies

Facility Assessment Study
Facility Assessment of PHCs and Sub Centres of 12 identified districts of Rajasthan was done by SIHFW in partnership with WISH foundation. The study was of one month done in May, 2015. The selected districts were: Udaipur, Banswara, Dungarpur, Pratapgarh, Rajsamand, Chittorgarh, Kota, Bundi, Baran, Jhalawar, Sawai Madhopur and Churu.

The objectives of study –

1. To document the gaps related to building, infrastructure, equipment which affects the quality of delivery of services at both PHC and all attached sub-centres
2. To understand and document the current delivery of healthcare services and any challenges
3. If the gaps in the infrastructure and equipment are significant to identify in discussion with the CMHO, 1-2 PHCs within the same block where the gaps are not that significant

Task performed
1. The assessment tools for the survey were developed by SIHFW looking into the parameters on the basis of which a facility can be assessed
2. SIHFW trained a team of 12 supervisors and 36 investigators who were the Nursing Tutors and PHNs from each of the survey districts. In addition, supervisors from WISH team also visited the districts
3. After the completion of data collection process, all the field in forms were duly checked for correction and completion and the same were submitted to WISH for further analysis and action
**District Eye Healthcare Facility Survey**

The study on ‘District Eye Healthcare facility Survey’ was conducted in Banswara district to conduct a baseline survey of District Eye healthcare facilities of district Banswara so that sight savers organization can develop a model (PPP) for ophthalmic services in the district.

**Task performed**

1. A team of Public Health Specialist, Ophthalmic Assistant and SIHFW consultant was formed for the visit.
2. The team visited DH -1, CHCs- 3, PHCs- 5 and private hospitals (Ophthalmic facilities) – 3 with the WHO tool – DEHAT (District Eye Health Assessment Tool).
3. Team also collected data on District profile, District Eye health budget and its utilization and prevalence & treatment of ophthalmic diseases in the district.
4. First draft of the study has been shared with the funding agency.

**Community Assessment for the RMNCH+A**

Community Assessment Exercise for the RMNCH+A activities was done in 10 High priority Districts of Rajasthan. SIHFW did the study in partnership with UNFPA. The study was conducted during 4 months i.e. April to July, 2015. The 10 HPDs are Banswara, Dungarpur, Udaipur, Rajsamand, Jaisalmer, Bundi, Barmer, Jalore, Dholpur and Karauli. Under the RMNCH+A a life cycle approach has been taken, which devoted for strengthening the service delivery of almost all major care or services required at various stages of life. In Rajasthan 10 high priority districts has been identified and currently a variety of activities have been undertaken to strengthen the health care delivery system. Therefore, it is of great importance to understand how and what type of services are being provided by the health workers and the barriers in accessing public health services by the women of the community. Assessing the information from the beneficiaries of health services can help to improve the accessibility and availability of health service to the community by reducing the barriers. At the same time, the information may help to design better service provision quality of reproductive, maternal, and child health services in the state. The intention of this study is to evaluate the services provided by ANMs and ASHAs among the beneficiaries for family planning, natal, antenatal and post natal services, newborn and child care services. Following are the objectives of the study–

1. To know the extent of utilization of public health care services (especially related to family planning services, ANC care services, delivery and PNC care services, HBNC, and child care services) among the women of the 10 High priority districts (HPDs)
2. To understand the attitude and perception towards public health care services provided by public health system
3. To assess the level of satisfaction for the services availed by them and to understand the barriers to avail the services.

**Task performed**

1. Schedules and guidelines for FGDs, In depth interviews and structured questionnaires developed by SIHFW in consultation with Department of Medical and Health Services, UNFPA and other developmental partners
2. For data collection 33 investigators and 7 Supervisors were trained in taking in-depth interviews using schedules and Focused Group Discussion using guidelines.
3. The study carried out across all 10 HPDs. Two blocks per district were selected based on scorecard generated for districts based on 16 dashboard indicators and on the basis of that a high performing and a low performing block was selected
4. From each of the selected block, two PHCs were selected; one nearest and one farthest from block head quarters.
5. Similarly, from each PHC, 2 sub centers were selected based on the distance criteria i.e. one nearest Sub centre and one farthest from PHC.
6. The study covered in total 1040 beneficiaries (104 per district) across 10 HPDs. The selection criterion for beneficiary was all those mothers who had children in the age group of 2 months to 1 year. From each sub-centre, one ANM and one ASHA from the sub centre village were covered for the study. Therefore a total of 80 ANMs and 80 ASHAs were covered across 10 HPDs.
7. In addition, for the purpose of qualitative assessment, FGDs were also carried out in each district. One FGD per PHC was carried out, therefore a total of 40 FGDs were carried out across 10 districts.

Achievement so far: The data collection process has been completed by SIHFW. After thorough data analysis, report writing is in process at SIHFW.

Mapping of Ultrasound Clinics and Assessment of implementation status of PC-PNDT Act

In coordination with National Health Mission, study on assessment of Mapping of Ultrasound Clinics and implementation of PCPNDT Act was done by SIHFW in Rajasthan. The study started was done during April to June. Data has been collected and analysis with report writing is in process at SIHFW.

The core objectives of the proposed study are:
- The primary objective of the study was to create an up-to-date database of ultrasound clinics across the state of Rajasthan
- To assess the status of preparedness of various stakeholders in the Implementation of PCPNDT Act in the state.
- To understand the views on and role of different stakeholders in implementing PCPNDT Act in the state.

Data was collected through developed pretested research tool- (Check List, Stakeholders schedules).

Secondary data was also collected from State Coordinator –PC&PNDT Act and PC PNDT Cell, District CM&HO and District PC PNDT Cell, Sub divisional Level PC PNDT –Cell or Committee, IMA/FOGSI, Association of Radiologists, Private Medical Practitioners Society. For purpose of mapping following actions were done -

- Transect walk for mapping the availability and provisions of USG facilities
- Interviews with Key informants
- FGDs with Potential user of USG

Independent researchers, mapping team members were oriented at SIHFW with demonstrations and role play. Data was collected from State level, all Districts and all 248 Blocks of 33 Districts. Data has been analyzed and report writing has been done at SIHFW.

Mission Indradhanush (M.I.)-Independent Monitoring

With objective to achieve full immunization coverage, by immunizing all left out/ drop out immunization targets, the GoI initiative of Mission Indradhanush was monitored in State by independent monitors in monthly rounds of M.I. during April to July months (7 to 13 of every month). For purpose of mass awareness and information printed IEC material was also provided by SIHFW. This included printing and supply of leaflets for information on dates of Mission Indradhanush, every month and Appeal of Hon Health Minister for local bodies and Sarpanch at the initiation of first round of M.I. ie.e April. Concept of rainbow colours was adopted for social branding.

SIHFW, in partnership with UNICEF, did independent monitoring of each of the M.I. rounds in all M.I. districts. The monitors were oriented on IPC and monitoring formats of GoI (PHC, Session site and district level) at SIHFW on April 25.

SIHFW also printed the Appeal from Hon Health Minister, before the onset of first round of M.I. in April, appeals were also for local governance leaders. Leaflets for each day in colour code of each rainbow colour was also printed and distributed by SIHFW, for community awareness.

Oriented mentors did a great deal of community mobilization in hand holding support for session sites, wherein difficult to access or rigid communities were brought to session site and immunized their children. All monitoring was telephonically followed up by SIHFW staff and observations from field revealed high visibility of SIHFW printed M.I. leaflets in community. Raw data was shared with UNICEF after data entry.
Compliance Assessment Survey under COTPA 2003

In Rajasthan Jhunjhunu was declared as the first smoke-free district on ‘World No Tobacco Day’ in 2012. Efforts have been made to tobacco free Rajasthan and district Jhunjhunu, Ajmer, Alwar, Nagaur, Ajmer Bharatpur, Bhiwada, Bikaner, Jodhpur (City), Nagaur (City), Udaipur (City), Jalore (City) & Pali (City) have been declared as smoke free based of assessment studies conducted by SIHFW.

The study on Compliance Assessment Survey in Kota district of Rajasthan was conducted by SIHFW with support of Population Services International, Jaipur, India. The objective of the study was to - assess the level of compliance of sections 4, 5, 6 (a), 6 (b) and 7,8,9 of COTPA Act with respect to Public places, Educational Institutes Point of Sale and Warning on Packaging. Objectives of the study were:

- To measure the level of compliance to Section 4 of COTPA in public places across Kota district of Rajasthan.
- To measure the level of compliance to Section 5 of COTPA at Points of sale (PoS) across Kota district of Rajasthan.
- To assess the compliance of Section 6 (a) of COTPA at Points of Sale across Kota district of Rajasthan.
- To measure the level of compliance to Section 6 (b) of COTPA in educational institutions across Kota district of Rajasthan.
- To measure the status of compliance to Section 7, 8 & 9 of COTPA across Kota district of Rajasthan.

It was an observational study. Around 347 public places, 338 educational institutions and 317 tobacco retailers were observed in Kota city and Ladpura, Pipalda, Digod and Sangod. As per findings, Kota district has above 80% compliance.

Global

India and USA sign agreements to strengthen cooperation in health sector

India and the United States of America (USA) signed Memorandums of Understanding (MoUs) on Cooperation on Cancer Research, Prevention, Control and Management and Collaboration in Environmental and Occupational Health and Injury Prevention and Control, and a Letter of Intent (LoI) on Antimicrobial Resistance Research, here today. The MoU on Cancer Research and LoI on Antimicrobial Resistance Research were signed by Shri B P Sharma, Secretary (Department of Health and Family Welfare and Department of Health Research), Ministry of Health and Family Welfare and Prof. K Vijay Raghavan, Secretary (Department of Biotechnology), Ministry of Science & Technology and Mr. Richard Verma, Ambassador of the USA to India. While, the MoU on Collaboration in Environmental and Occupational Health and Injury Prevention and Control was signed by Shri B P Sharma and Mr. Richard Verma.

The MoU for cooperation on cancer research prevention, control and management was signed between the National Cancer Research Institute of the All India Institute of Medical Sciences, the Indian Council of Medical Research (ICMR), Department of Health Research, Ministry of Health and Family Welfare, the Department of Biotechnology, Ministry of Science and Technology and National Cancer Institute of the National Institute of Health and Department of Health and Human Services (DHHS), USA. The main areas of cooperation under this MoU are-

1. Increased bilateral cooperation on cancer research, prevention, control and management;
2. Development of collaborative research projects on population-based cancer control and implementation science;
3. Development of projects in the areas of basic and epidemiological research, pre-clinical model development, clinical research and oncology care delivery;
4. Collaboration for conducting research and training on development of low-cost technologies, diagnostics and combination of existing medications against common cancers and development of existing therapies for novel indications related to oncology;
5. Discovery and development of new anti-cancer agents;
6. Research on cancer screening and early detection;
7. E-health, M-health and telehealth approaches to cancer education, early detection and treatment;
8. Health systems research to strengthen cancer care delivery mechanism and build public health capacity for cancer care;
9. Development of Cancer Registries;
10. Organization of joint conferences, symposia and other scientific meetings of mutual interest;
11. Information and scientific exchanges, and the sharing of experiences;
12. Participation in professional and scientific meetings conducted in both countries; and
13. Any other area as mutually decided between the Participants if and to the extent consistent with applicable statutes, regulations and policies.

The second MoU was signed between the Centre for Disease Control (CDC) and Prevention, Department of Health and Human Services of the USA and the Indian Council of Medical Research (ICMR), Department of Health Research, Ministry of Health and Family Welfare on Collaboration in Environmental and Occupational Health and Injury Prevention and Control. The MoU aims to further the cooperation in the fields of environmental and occupational health and injury prevention and control research, education and training, infrastructure development, and capacity-building for their reciprocal and mutual benefit. The main areas of cooperation include, but are not limited to, the following:

- The prevention of illness related to toxic chemicals and hazardous substances;
- The development and use of improved tools, technologies and methods for enhancing environmental and occupational public health, and injury prevention efforts, including surveillance;
- Public health effects of ambient and indoor air pollution including a focus on exposures associated with burning of solid fuels for cooking and heating;
- The prevention of illness and injury related to hazards at the workplace and related research;
- Planning, preparedness, and response for chemical releases and radiation events;
- Research into the environmental and occupational causes of illnesses, including the assessment of exposure to, and disposal of, industrial and chemical waste materials;
- Use and application of biomonitoring and biomarkers in environmental and occupational health;
- Prevention efforts and research related to access to water, water quality, sanitation, and hygiene as related to their environmental health impacts;
- The public health effects of urbanization and the built environment;
- Impact of climate variability and climate change on health; and
- Public health approaches for injury prevention and control including the areas of road safety, burn injuries and unintentional injury.

A Letter of Intent (LoI) on Antimicrobial Resistance Research was signed between the Indian Council of Medical Research (ICMR), Department of Health Research, Ministry of Health and Family Welfare, the Department of Biotechnology, Ministry of Science and Technology and the National Institute of Allergy and Infectious Diseases, National Institutes of Health, Department of Health and Human Services of USA. This aims to strengthen cooperation between the two countries in antimicrobial resistance research.

Source: PIB, June 25, 2015

India

National Aids Control Organization (NACO) observe “World Blood Donors Day”

The National AIDS Control Organization (NACO), Ministry of Health and Family Welfare observed the “World Blood Donor Day” under the aegis of National Blood Transfusion Council (NBTC), at Connaught Place, New Delhi on June 14, 2015. The World Blood Donors Day celebrates their altruistic gift and thanks the unsung heroes for their priceless contribution. The theme for this year’s campaign is “Thank you for saving my life” focuses on thanking blood donors who save lives every day through their blood donations and encourages more people across the world to donate blood voluntarily and regularly with the slogan “Give freely, give often. Blood donation matters.”

On this occasion, Shri K. B. Agarwal, Joint Secretary, NACO launched the blood donation drive for willing donors to donate blood on this occasion. He also launched the Database of Blood banks on the National Health Portal. The National Blood Transfusion Council has made available directory of all 2760 licensed blood banks at National Health Portal. To begin with the data of all 76 blood banks in Delhi, NCR and 524 blood banks from across the country has been made available and the process of uploading data of remaining licensed blood banks in the country is under process and will be made available soon.
After launching the Mobile blood Bank Locator App to promote easy access of information regarding the nearest blood bank the Joint Secretary felicitated contributors of technology for promotion of Voluntary Blood Donation on this occasion, these include National Health Portal, Centre for Development of Advanced Computing (CDAC), Department of Electronics and Information Technology (DEITY), National Informatics Centre (NIC), Friends2support.org, Blood Connect, Indianblooddonors.com, Think Foundation, Blood On Call, Blood For All and Blood For Life.

To promote Voluntary Blood donation a National Short film contest was also declared open on this occasion. This is being organized by the NBTC in collaboration with friends2support.org. The last date for submission of entries would be 31st August 2015. After the recommendation of jury, 15 films would be shortlisted and announced on 15th September 2015. Winners would be felicitated on 1st October 2015 on the occasion of National Voluntary Blood Donation Day. Almost 500 people had gathered at the Connaught Place, New Delhi to donate blood.  

Source: PIB, June 14, 2015

**Rajasthan**

**Rajasthan’s primary health centres to run in PPP mode**

Primary health centres (PHCs) in Rajasthan will now run in the public-private partnership (PPP) mode. This decision was taken at the state cabinet meeting chaired by Chief Minister Vasundhara Raje on June 15, 2015. “We have taken a decision to run PHCs and affiliated sub-centres in PPP mode due to shortage of staff,” state Parliamentary Affairs Minister Rajendra Rathore told media persons.

The move would be undertaken in phases, and in the first phase, 90 out of 2,082 PHCs would be handed over to be run in the PPP mode, he said. “These identified PHCs are those where medical officers and facilities were not available as per the standards,” Rathore said.

The minister said the health centres would be given to private partners through the open bidding system. Private operators would provide doctors, paramedics and other staff, free OPD, and 24-hour emergency scheme among other things.

The cabinet also took other decisions, including to raise the grade pay of forest guards.

The parliamentary affairs minister said the cabinet also decided to restructure the Rajasthan Tourism Development Corporation (RTDC) to strengthen it financially.

"We have also decided to increase fixed payment to probationer trainees of the state government by 10 percent from July 2015 onwards," Sri Rathore said.  

Source: Business Standard, June 16, 2015