Stories of change - contribution to maternal health

Julkiben, TBA

Julkiben Raghubhai Kuvar is 60 plus. A known and trusted Traditional Birth Attendant (TBA)-locally called “dadi” – grandma, Julkiben lives in Vangan village which has a population of 3500 and is spread over 5 square kilometers. Julkiben has been working as a TBA, since the last 12 years. Julkiben learned the skills of being a TBA from accompanying a TBA called Jiviliben. She would observe all the activities that Jiviliben performed while conducting a home delivery. These “practical” lessons paved the way for Julkiben to be accepted as a dadi once Jiviliben stopped attending to calls from pregnant women.

Three years back, Julkiben was invited to Mankuniya Primary Health Care facility. There, she said she attended a training programme that was conducted by CHETNA. Julkiben said she learnt about the physiology and the anatomy of a woman, the important aspects about safe delivery and the importance of institutional deliveries. She completely agrees with the new concept of ‘deliveries at the hospital’. And after the training, she has been promoting institutional deliveries in her village. She said the training was a big lesson for her and numerous things especially the importance of cleanliness struck her positively. Also, she was happy that the 108 emergency ambulances respond when called, and come to fetch the pregnant women from the villages. With the schemes, ambulances and her conviction, Julkiben is a big promoter of institutional deliveries.

In and around Vangan, there are many families that live on the hillocks. Not that this has deterred Julkiben. In fact it has made her more resolute to get pregnant women from these homes to the hospitals for deliveries. She normally prefers the Government Collage Hospital at Vasda. She narrated one experience of a pregnant women, who lived on the hillock, she sent for Julkiben once the labour pains commenced. Before reaching the women’s home, Julkiben first called 108 emergency ambulance. She then went to the pregnant woman’s house and began collecting the necessary clean clothes and a lota(Vessel) that she would require. She also cut the clean dhoti into small pieces for them to be used at the hospital.

The women’s labour increased. She could barely walk. It was not possible for her to now climb down the hillock and reach the emergency ambulance. Julkiben called in young men from around the neighbourhood. She asked them to make a sling from the bed sheet she found in the house. The pregnant women’s amniotic sack had burst and she was steadily losing fluid. The young men quickly made a sling carried the pregnant women to the 108 emergency ambulance which sped towards the hospital. Julkiben said barely were they in the labour room that the pregnant woman delivered. At the hospital she gets no money but then Julkiben said she was happy to save a lot of pain, complications and even money for the pregnant woman that she got to the hospital. She knows she will be rewarded later.

Julkiben represented the “dadis” of Navsari at a meeting in Gandhinagar. She said she met lot of officials from the Government of Gujarat. She mentioned that all that she did was to request the officials not to close down the government facilities as these are the only ones that provide any help to the poor.
Vanitaben’s, Sarpanch,

A small single tar road winds through the hilly terrain. At one juncture, a mud road that goes further into the forest leading to Choravni Village in Vansada Block of Navsari District, Gujarat. Choravni is spread over 3 sq kilometres; and has 500 homes. The total population of the village is 3000. The mountainous land holdings are small. But the agricultural activities are primarily focused at producing enough for the families that will last them for a year. The main produce is rice, ground nut, mangoes and nagli.

Vanitaben A Raut, is 35 years old, is a home maker and also the Sarpanch – village head of Choravni. Her husband, who also is 35 years old, operates a grain shop under the government’s Public Distribution System (PDS). This shop was allocated to him in 1991. Vanitaben has five children – 3 daughters and two sons.

Vanitaben said that the team members from CHETNA met her regularly. She learnt about the importance of institutional deliveries and the use of 108, the emergency ambulance service from them. She also understood the importance of the various government schemes such as the Chiranjeevi Yojana or the Janani Suraksha Yojana. She was happy that the government was creating and implementing such schemes especially for the poor pregnant women.

She said that she always spoke with the pregnant women in her village about the importance of institutional deliveries. Some listen to her while some don’t. Vanitaben shared an experience. She said that a pregnant woman from her village was registered with the Krishna Hospital – a private facility under the Chiranjeevi Yojana. The total bill was more than what the scheme provided for. Vanitaben was called in as a Sarpanch. She negotiated with the hospital, got some amount reduced and also got credit for the woman and her family. Because she was a Sarpanch, the private hospital listened to her arguments and negotiated with her. This benefited the woman and her family. Vanitaben is proud to positively use the power that a Sarpanch carries.

For the pregnant women in her village, Vanitaben has three messages:

1. Register yourself under Chiranjeevi Yojana or the Janani Suraksha Yojana.
2. Go for regular checkups. The checkups will indicate the expected date of delivery and that way the pregnant woman can plan in advance.
3. Call 108 and use the emergency ambulance service to reach the hospital for institutional delivery.

Vanitaben believes that better services and more care will enhance the survival rate of mothers and infants.

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* Nagli is coarse hill millet grown by the tribals during the monsoons.
Self Help Group Members Credit to Saving Lives

Savitaben, Member of SHG, Charanvada Village

Charanvada is a village spread over 7 kilometres and has a population of 1500. It lies on the two sides of the state highway connecting Vansada and Ahwa. As one travels on the highway, homes dot both the sides the highway bisecting the Charanvada village. Savitaben came to live at Charanvada some 25 years ago.

Savitaben has been active and is the President of the Self Help Group named as Vaishnavi Mahila Mandal (VMM). Another SHG called the Jyotish Group also functions in Charanvada. The VMM has 20 women members.

Normally loans are given to members to make purchases of manure, fertilizers, to buy grass / hay in bulk, or for marriages. Once the group came in contact with CHETNA, the Vasavya Mahila Mandal (VMM) also extends loans to pregnant women who may need financial support for their delivery. The maximum loan given out is Rs.10,000.00. The VMM recently closed down their group after 5 years and shared the balance amount. Soon, the members re-grouped and formed a new SHG – Vaibhav Laxmi Mahila Mandal. Savitaben has always been the driving force for the group.

Savitaben remembered that there was a meeting organized at Mahuvas PHC. It was two day training with the Panchayati Raj Institution members and she too was invited by the PHC. Savitaben remembered that it was Chandrikaben, the PHC nurse who had invited her to attend this training since Savitaben was the President of the Self Help Group of Vaishnavi Mahila Mandal (VMM).

At this training, Savitaben learnt and understood about the importance of ante natal checkups, post natal checkups arranging for transport, institutional deliveries and the role of a trained TBA in an emergency. She also learnt the importance and benefits of the various government schemes – in particular the Chiranjeevi Yojana and the Janani Suraksha Yojana. Subsequently, CHETNA team members would come and meet her and the SHG members every month. They would reiterate the aspects that Savitaben had learnt at the Mahuvas PHC.

To begin with the use of the information, Savitaben first got her pregnant daughter-in-law registered under the Chiranjeevi Yojana. She first experienced the entire process within her family. The Chiranjeevi Yojana benefited Savitaben’s family and her daughter-in-law. This convinced Savitaben to spread the message with more conviction. Armed with information and the experience, Savitaben then helped her neighbour’s daughter-in-law.

Savitaben with the help of the CHETNA Team members began to educate the VLMM members about the importance of ANC, PNC and the need for institutional deliveries. This helped to educate the members about the benefits that the Chiranjeevi Yojana as well as the Janani Suraksha Yojana provides to the poor pregnant women. Savitaben also called the Jyotish Group members and educated them on the things that she was convinced about – safety for the pregnant women.

Savitaben stated that no one bothers to give them information. But the regular visit from the CHETNA Team members has helped her and the members of her VLMM and the Jyotish Group to know about the various schemes and the benefits. Savitaben said that without information there is no power.

Empowering Communities to Enhance Access to Maternal Health Care Services in Navsari District of Gujarat State