

WomEn Change

Stories of Social Transformation from Six Blocks of Madhya Pradesh







Acknowledgement

CHETNA has developed this document to capture some of the changes that took place in the project- "Empowering women to impact Health and Nutrition Indices" implemented in 406 villages of six Mission Antyodaya blocks of Madhya Pradesh. CHETNA is a Thematic Partner on Health and Nutrition in this multi-dimensional change initiative by the Transform Rural India Foundation. This is a collaborative effort of many people who have contributed to the development process both directly and indirectly. This intervention is heavily indebted to the Cluster level Federations, Village Organisations. Members of Self-Help Groups and Women leaders -Sachet Jiji /Sachet Didi who have voluntarily engaged with this programme to facilitate health and nutrition action in their villages. We express a heartfelt gratitude to them and other community members who contributed to the process.

CHETNAs' interventions included training and mentoring of Women leaders from Self Help Groups which we named -Sachet Jiji or Didi meaning "Aware Sisters". They volunteered to work on health and nutrition issues, during a participatory visioning process facilitated by TRIF team. The Sachet Jijis participated in three-day Perspective Building training and then roll out the micro modules in their respective SHGs. The SHG members reached out to other members of the groups and their own families and neighbour hoods. They also engage with the communities, service providers and public system as well as Gram Panchayat to push forward community needs and address social determinants. The village organisations were also trained through a 7-session module spread over two days. An action plan developed in the end was used to support the VOs for implementing the action plans. Engagement with the Village Health Sanitation Committees was to ensure their regular meeting, use untied fund to strengthen services and prepare village health Plans. Village Health and Nutrition Days were strengthened during regular visits by ensuring participation, coverage of services, including counselling. A detailed process document has been uploaded.

The stories have been documented by the field team of the project and we would like to thank the project team, the block mentors for their painstaking efforts. We would also like to acknowledge the block level teams of the Madhya Pradesh State Rural Livelihood Mission; block Medical and Health Officers and their teams; the Project Officers of the Integrated Child Development teams for their support. Engagement of frontline workers of the health and ICDS team was critical in the programme.

We would like to thank Mr. Gaurav Mishra and Ms. Neha Gupta from the state team for providing detailed inputs. Mr. Anirban Ghose - Co-Lead and Ms Runa Shamim, from TRIF are acknowledged for their support and inputs which were useful to gear the implementation as planned.

The stories are presented in three sections-Improved nutrition, Improved Social Status and Improved Health Services.

Please Note: Names of individuals have been changed in this document to maintain confidentiality.

Acronyms used in the document

ANM	Auxiliary Nurse Midwife
ASHA	Accredited Social Health Activist
AWW	Anganwadi Worker
AWC	Anganwadi Centre
ВМО	Block Medical Officer
CLF	Cluster Level Federation
COVID-19	Corona Virus Disease- 2019
FLW	Front Line Workers
GAK	Gram Arogya Kendra
GSSGTS	Gram Sabha Swasth Gram Tadarth Samiti
ICDS	Integrated Child Development Services
IYCF	Infant & Young Child Feeding
MA	Mission Antyodaya
MCHN	Maternal and Child Health Nutrition
MM	Micro Module
MPSRLM	Madhya Pradesh State Rural Livelihood Mission
NRC	Nutrition Rehabilitation Centre
NRLM	National Rural Livelihoods Mission
PB	Perspective Building
PHC	Primary Health Centre
SAM	Severe Acute Malnutrition
SHC	Sub Health Centre
SHG	Self Help Group
SJ	Sachet Jiji
SRLM	State Rural Livelihood Mission
T-NGO	Thematic NGO
TRIF	Transform Rural India Foundation
VHND	Village Health and Nutrition Day
VHSNC	Village Health Nutrition and Sanitation Committee
VO	Village Organisation

Executive Summary

The Government of India is committed to achieving the Sustainable Development Goals. As per the system developed by the NITI Ayog for tracking progress on SDGs, there is an improvement in India's the composite score from 57 in 2018 to 60 in 2019. However, Goal 2 on Zero Hunger and Goal 5 on Gender Equality require special attention and concerted efforts as both scores below 50.

The Transform Rural India (TRI), an initiative of Tata Trusts to transform our villages takes on this ambitious goal against a backdrop of villages becoming less isolated, better informed, and community's aspirations changing dramatically. TRI had initiated ground pilots in central and eastern states to develop process protocols for triggering multidimensional transformation of villages in endemic poverty regions.

Government of India, through the Ministry of Rural Development has launched Mission Antyodaya(MA) or Poverty Free Gram Panchayat (PFGP). The initiative seeks convergence of the government interventions with Gram Panchayats and pooling of resources for transformative multi-dimensional change in villages. CHETNA is a thematic partner with Transform Rural India Foundation (TRIF) for initiatives on Health and Nutrition.

Between August 2018 and March2021, CHETNA implemented activities in six block sof four districts - Alirajpur, Jhabua, Dhar and Dindori, of Madhya Pradesh. A two-pronged strategy was adopted:

- Build capacities of women leaders of Self-Help Groups (SHGs) and members of the SHGs, Village Organisations (VOs) and Cluster Level Federations (CLFs) for adoption of health promotion activities and uptake of services
- Building capacity of frontline workers for enhancing service delivery; Strengthening of Village Health Nutrition Days (VHNDs), Village Health, Sanitation and Nutrition Committees (VHSNCs) and Submissions to Block and facility level authorities.

The planned activities were implemented in 406 villages of six blocks. Trained team of CHETNA conducted community need assessment and public system gap analysis in 10 percent of the villages. The findings were shared with the block officials and guided intervention plan.

CHETNA deployed and trained a team of 37members on programme planning, technical dimensions, training of master trainers and mentors on three Perspective Building modules, VO module and CLF module, for them to facilitate implementation and conduct monitoring of the planned project activities.

CHETNA trained 679 Sachet Jijis (women leaders) on two perspective building modules-PB1 and PB2 and 87 on the third module PB3. CHETNA team provided mentoring support to 786 of the trained SJs in rolling out the 17 Micro Modules in their groups and conducting their mandated activities. A pre and post assessment showed an increase in the knowledge score levels of Sachet Jijis and that majority (>90%) were confident in using the tool kit and believed that their group members listened to them and according to 60 percent - sought their support on health and nutrition.

Members from 391 VOs were trained and provided support for implementation of action plans. The team also supported the members of VOs, who developed 390 village health plans These were submitted in 104 Gram Sabhasand uploaded on the NRLM portal.

CHETNAtrained 418 members of 18 Cluster Level Federations (CLFs). It conducted 198 followup visit satthe 18 CLF meetings. In three blocks - ondwa, Amarpurand Samnapurblock team also facilitated development of annual action plan on health and nutrition for the year 2021-22.

Tostrengthentheservicedelivery, CHETNA teamorganised 33 batches of capacity building trainings for 1066 frontline workers (ASHA, ANM, AWW). At the end of the training joint work plan was prepared. Observations of 3248 VHNDs were captured in a

checklistdevelopedbasedoncommunityprocessesmanualbyNationalHealthMission, Government of India and the frontline workers supported to fulfil the gaps observed.

In case of VHSNCs or Gram Sabha Swasth Gram Tadarth Samiti (GSSGTS) as they are known in the State. CHETNAT eamengaged with 239 VHSNCs to bring the members to get her and facilitated their monthly meetings. Based on CHETNA's

request, a directive from all the six blocks was is sued by the health department for including trained Sachet Jijiasa member in GSSGTS.

CHETNA Team also contributed incampaignssuc has Nutrition Month, Poshan Maah, Dastak Abhiyan, MissionIndradhanush, as well as celebrations of World Environment Day, In ternational Women's Day, National Safe Mother hood Day and Breast feeding week. In coordination with the media 39 Articles were published in digital/printmedia.

In response to COVID-19, CHETNA team continued it sworking during the lockdown. It reached out to Sachet Jijis (623), VO members (392), CLF members (39), front line workers (976), trained the monits seven COVID 19 modules and provided them with messages about precautionary measures to prevent the infection. It also extended support to TRIF in distribution of Take-Home Rations (THR) and Health kits to 1982 families during lockdown.

Outcomes of CHETNA's initiative and support for TRIF's efforts to transform villages were visible in the activities of village level platforms.

Interviews conducted with 356 trained SJs showed that

- A vast majority of them (>80%) changed their own practices and had started eating at least one daily meal with their family members and ate three colour food once in a day.
- More than 90 percent participated in VO meetings and facilitated discussion on health and nutrition.
- About 61 percent started participating in VHNDs. They joined ASHA and Anganwadi workers in counselling families for early registration of pregnant women and for institutional deliveries and parents and families of SAM children for their referral to NRC and of un-immunised children for timely immunization.1312 children were mobilized by them for immunization on VHND.

Interviews with women members of SHGs showed that

- More than three fourths (75%) of them were aware that breastfeeding should be initiated at birth, only
 colostrum should be fed to the baby,
- More than half (<=54%) were aware about excusive breastfeeding for the first six months and the age for initiation of complementary feeding
- 39 percent were aware that a COVID-Positive mother can breast feed her child.

Knowledge also seemed to have translated into practices for these women members with majority (>90%) having at least one daily meal with family members and including three colours in their meal. More than a third of them had started cooking in the iron kadhai(pot) and counselling family members against blaming women for the birth of a girl.

Most VOs (86%) which were exposed to training had started facilitating discussion on health and nutrition in their monthly meetings. More than three fourths had started participating in Gram Sabhas (village assemblies) and submitting village health plans, about 70 percent had started participating in the VHND sessions, supervising the sessions and conducting dialogue with service providers and 46 percent had started participating in GSSGTS meetings. Members routinely counselled families for immunization of children, referral of SAM children to NRCs and took up issues of domestic violence and gender discrimination issues in the village.

Based on records maintained, it was found that CLFs had initiated discussion on health and nutrition in their meetings, made annual action plans, conducted dialogue with block officials for service strengthening and took action for improving the health and nutrition of women in their respective villages. CLF members themselves took up issues such as vacancies of health staff posts, operationalization of health facilities, availability and delivery of mandated services at government facilities and at VHNDs or facilitated VOs in taking up these issues with district and block level officials. They also supported women members of SHGs in starting kitchen gardens.

Observation of services showed significant improvement in participation and services at VHNDs.

- Preparation of list of beneficiaries and prior information about the day was almost universal.
- At majority (>80%) VHNDs blood pressure and weight measurement and haemoglobin estimation services were available
- In more than three fourths (75%) VHNDs, counselling services to pregnant women and weighing of children had started taking place.
- In half the VHNDs (51%) SJs were present.
- Participation of pregnant women was 90 percent of expected
- Participation of children below two years of age was above 75 percent of expected.

Along with frontline workers, CHETNAteamidentified 556 SAM children and educated and counselled parents and followed up 431 of them. At the time of writing of this report, 49 percent of those followed up are healthy, 32 percent are moderately under nourished and 19 percent continue to be severely malnourished.

The outcomes show that during the limited time, a process of change has been ignited. Women leaders-named Sachet Didi have been trained to lead health and nutrition issues of their respective village. SHGs, VO sand CLF shave been trained and have started planning and contributing to health and nutrition activities in their villages. The trained frontline worker shave joint action plans, VHND shave been strengthened and VHNCs have been mobilized. CHETNA's substantial hand holding support has been critical to bring about at ransformation in the lives of wwomen and children residing in these remote and difficult blocks.

The stories of change brought about by women in their respective areas have been captured by CHETNA's field team and narrated in this document. While the names of village, block and district have not been changed, that of individuals have been changed.

Section I

IMPROVED NUTRITION

Rani stands on her own now!

Village: Badi Sirkheda

Block: Sondwa

District: Aliraipur

Three-year-old Rani who was barely able to stay erect, is now healthy and moves about. ani, three years old, was the eighth or ninth child in her family. She weighed four kilograms and her mid upper arm circumference (MUAC) was 11. She was lethargic and unable to sit erect when CHETNA team met her on 8^{th} February 2019.

CHETNA team had earlier met the Anganwadi Worker. "Rani is severely acute Malnourished she must be taken to the Nutrition Rehabilitation Centre" she said. So, they decided to visit Rani. They met Ranis' parents. After initial discussion about Rani's health, they suggested to get Rani admitted to the Nutrition Rehabilitation Centre at Sondwa, which was about 25 kilometres away. Ranis' parents were hesitant. "Who will look after the family when Rani is admitted? What are the facilities available? We are not sure," they said.

Sachet Didi Sabita, had participated in CHETNA's training on Health and Nutrition. She took up discussion on Rani's condition during the meeting of her SHG -Narmada and they decided to talk to Rani's parents. Later a team lead by Sabita Didi along with three other SHG members, Anganwadi worker Reena, MPW Mohan Singh and ASHA visited Ranis' house.

Her mother was at home and father was working in the field. Somebody went and called him. The team talked to Rani's parents, dispelled their fears, agreed to provide support. The members repeatedly urged Rani's parents and they finally agreed. Rani was admitted to NRC Sondwa on 13th February 2019. She and her mother stayed there for 14 days. She was taken for the mandated four follow up visits. On 12th March 2019, when the team visited, Rani weighed 5 Kilogram and was able to sit erect. She was taken to the Anganwadi centre regularly. Her condition continued to improve completely. By March 2021, her health improved and she came in healthy category. The family was happy that Rani is healthy and active.



Rani age 3 years, 4 kg on 8th February 2019



Rani age 3 years, 5 kg on 12th March 2019

Dev fights back to health!

Village: Narsinghpara

Block: Thandla

District: Jhabua



When CHETNA team visited the village Aanganwadi centre, they came to know about Dev who was Severely Acute Malnourished. He was 17 months old, youngest of the nine siblings.

CHETNA teamcontacted the ANM.
They tried to get him admitted to
Nutrition Rehabilitation Centre but

Dev with his mother at first visit his mother refused, as she has no help at home and she can't afford to spend even a day without work. Devs' weight increased at the NRC Dev with his mother at first visit



On 9th October 2019, CHETNA team met the Child Development Project Officer and discussed about admitting Dev to NRC. A support plan was charted where the CDPO arranged for meals to Dev's' family, through the Anganwadi worker. he Block Medical Officer offered to provide transport. A team of representatives from Khawasa PHC, ANM, ASHA, Anganwadi worker and

Devs' weight increased at the NRC Gram Sangathan President visited Dev's house. After a lot of effort, Devs' mother agreed but said

that she needs to talk to her husband first and then call her eldest daughter from her in-laws to look after the family. The team agreed. A couple of days passed by. Devs' sister did not come and his mother was not able to take him to the NRC. CHETNA team and VO leader Shaanti Didi again started discussion on Dev's grave condition. The neighbours also joined. Devs Condition Improves

On 11th October 2019, again ASHA and Anganwadi worker visited their house. After much discussion, Dev's mother

agreed. The Medical Officer sent a vehicle on 12th October 2019. Dev was immediately admitted to the PHC for 7 days. When his condition improved, he was admitted for 14 days in the NRC. On 11thNovember,2020 his weight was 5.910 kg and he was discharged from the NRC. With regular follow up and linkages with



Devs Condition Improves

the Anganwadi Centre, his weight increased And by December 2020, his weight was 6.380 kgs. CHETNA team is happy that Dev is healthy now, but it took substantial efforts by several people to save him.

"We had no hope that he would live, but because of everyone's effort he is healthy now." -Dev's mother.

Women grow their own veggies!

Village: Jubaniya

Block: Thandla

District: Ihabua

Seema didi volunteered to improve Health and Nutrition of women and children of hear village. She participated in the training of Sachet Didi's organised by CHETNAon health and nutrition topics. After the training, an action plan was prepared which focussed on eating three coloured meals at least once a day, use of iron vessels for cooking and growing own vegetables.

Seema Didirolled out the session in Roshni SHG. During the session on "our farm, our food and health" the members got interested and discussed in detail about Poshan Vatika or nutri gardens. Atotal of eight women members decided to grow their own veggies near their homes.

On 17.12.2020, CHETNA team visited Jubaniya to mentor Seema Didi during the rollout. Before moving on to a new topic, Seema Didi asked the members on their progress on the action plan prepared in the earlier meeting. Five members said that they have already started growing their own veggies where they have planted onion, fenugreek, garlic, brinjals, chilli, radish, coriander, spinach. On further discussion they also said that they prepare meals from those veggies and eat themdaily





Women grow veggies near their homes



Women ensure Health bhi, Wealth bhi!

Village: Jhakhimal

Block: Samapur

District: Dindori

Jakhimal is four kilometres away from block headquarters and one kilometre from Samnapur-Bichiya main road.

Sarita Didi in her Poshan VaatikaSarita Didi, a leader of Self-Help Group volunteered to work on health and nutrition issues. She participated in the training programme organised by CHETNA. On 5th March 2019, Sarita Didirolled out the Micro Module in her SHG. They decided to grow vegetables and develop a "PoshanVaatika" (Nutri Garden). To begin with Sachet Didi Sarita planted her "Poshan Vaatika" to set an example. She encouraged other members to visit and see her garden. This inspired and other women members also started to plant vegetables in their backyards.

When CHETNA team consolidated the effort, by the year 2020, seventeen women members had developed their own "Poshan Vaatika". They planted vegetables like tomatoes, yams, beans etc which they use for their own consumption as well as for selling. Now they can earn up to Rs. 5000-6000 by selling their produce. Women share that the experience of these nutrition gardens has been very beneficial for them.



Sarita Didi in her Poshan Vaatika

Suma Didi sets a role model



Dhanoli is located ten kms away from block head quarter of Samnapur, and four kilometresfrom Samnapur-Bichiya main road. The major tribesliving in Dhanoli are the Gond, Lohar, Ahir and Panika. The village has two tolas (hamlets), 1) Shikari tola and 2) Bade tola, two Anganwadi centres, Oneprimary school. The main occupation is agriculture and the main water sources are wells and hand pumps.

Suma is a resident of this village who lives with her four-yearold son. She is physically challenged. Her husband has left her and she manages her home by sewing and knitting wok. The money she earns is used for household and her son's education expenses.

She volunteered to work for improving health and nutrition if her village. Later we got to know that she often complained of weakness and fatigue. Perhaps this motivated her to work on health.

She participated in the three-day training on health and nutritionorganised by CHETNA where various measures to prevent nutrition deficiency anaemia were discussed. She learnt about cooking food in iron vessels, eating three coloured foods,

and eating more home cooked foods instead of purchasing them from market.

After a couple of months, one could see improvements in her health. She also said that now she doesn't feel weak as she used to do before. Earlier she had to spend Rs. 400-500 for her medical expenses which she can save now. She is very happy and even urges other women in the village to follow the same beneficial health practices.

CHETNA team is happy that our training was helpful in regaining her health.



Suma uses iron pot to cook food



Kamala Didi inspires women to go green!

Village: Nighauri

Block: Amarpur

District: Dindori

Kamala is the President of GramSangathan (Village Organisation) of Nighori village. She lives with her elder sister in a two-room house. They had opened a grocery shop but due to a family feud they had to close their shop. When CHETNA team met them, they did not have any income and survived on ration from the Public Distribution System.

Kamala volunteered to be a Sachet Didi and participated in thethree-dayperspective building training organised by CHETNA during 26-28th February 2019.In the training, she learnt about "Poshan Vaatika" and how she can save money by growing her own vegetables instead of purchasing themfrom the market. In this way they can save money spent on vegetablespurchased from the market. She decided to grow her own vegetables in the "Poshan Vaatika".

When she discussed this topic during the roll out of Micro Module, Six out of twelve Didi's showed interest to grow their own vegetables in "Poshan Vaatika" The members then discussed some of the problems they foresee in Poshan Vaatika, such as awaited of seeds, space knowledge about necessary fertilizers, watering the plants.

· They then explored the solutions to these problems and

CHETNA team provided them with information

- Seeds from vegetables that are cooked in homescan be dried and later planted in the Poshan Vaatika.
- Plantscan be grownin circular or square shaped rows which take up less space. They can also plant climbers, and also grow them in old pots and vessels.
- Plants can be grownnear the kitchen and the water used to wash pulses and vegetables can be used.
- Vegetable and fruit peels can be used and the soil needs to be tilled at regular intervals.

Kamala Didi helped herself and also other women and in this way Poshan Vaatika has provided them nutrition at low cost. Kamala Didi was felicitated on the occasion of International Women's Day at a public function.



Chandni becomes healthy!



When CHETNA organised a training of Village Organisation (VO) members of Sala village, Amita, one of the members, shared concern about her daughter Chandni who weighed eight kilo and 430 grams. CHETNA team met Chandni'sparents and asked them to admit her to the -Nutrition Rehabilitation Centre. They also provided them information on the care given at the NRC and contact details. The team had to put in substantial efforts and finally they agreed.

On 22nd August 2019, Chandni was admitted to NRC Anganwadi worker Niru Didi helped Amita, Chandnis' mother to get admitted. The ASHA remained in contact and provided the needed support so that they complete the mandated 14 days stay at NRC.

On completion of 14 days, Chandni was discharged from NRC. Chandni's parents completed the four mandatory follow-up visits. She also took her to the Anganwadi Centre and for vaccination on 24th September 2019 at the Village Health and Nutrition Day, where she was given the MR vaccine. Her mother

Amita is happy that now Chandni's situation has improved, she eats and plays properly and is gaining weight. CHETNA team is glad that they were able to contribute in improving Chandni's



Amita with her daughter Chandni at NRC

Rahul becomes healthy!

Village: Mathmath

Block: Petlawad

District: Dhar

Village Mathmath is spread across a large area. The Gurjars, the Bhils and the Harijansare the main inhabitants of this village. Health related issues such as malnutrition, anaemia and other common sickness such as diarrhoea, pneumonia, vomiting etc arecommonly observed diseases. They have to take loans from the village moneylenders which lead to debt trap. When they are unable to repay their loans, they leave the village.

Samta Didi volunteered to work on health and nutrition issues of the village. She participated in the perspective building training organised by CHETNA. As a follow up, on 10^{th} September 2019, Samta didi rolled outthe Micro Module for Child Nutrition and also discussed about the services of Nutrition Rehabilitation Centre for severely malnourished children. An action plan was developed, where the participants assured that they will identify malnourished children in their communities.

Rahul with his mother at the NRC On 9th December 2019, during the follow up visit by CHETNA team, women informed that they had identified a weak child three days ago and got him admitted in NRC atPetlavad. The child Rahul was born on 19th December 2018 and was weak. The frontline workers had made several

efforts to ensure his admission at NRC but these were not successful. When women SHG members intervened, on 07.12.2019 that Rahul's' mother went to Sachet Didi's house and said that now she is ready to admit the child at NRC.

Before admission to NRC, Rahul weighed5 kilograms, wasweak, couldn't eat and used to cry all the time. As a result, his parents couldn't go to work in the farms which meant loss of wages. They took loans and to repay, they had to do more labour work.

After returning from NRC, on 20th December 2019, Rahul's' weight was found to be 5 kilograms and 400 grams. His condition improved. The family thanked the Gram Sangathanmembers, Sachet Didi as well as ASHA and Anganwadi workers.



Rahul with his mother at the NRC

Mana Didi puts learning in to practice

Village: Kamkomohaniya

Block: Amrapur

District: Dindori

During the visioning exercise, Mohini Didi volunteered towork on health and nutrition issues of her village. In February 2019, Mohini Didiparticipated in the Perspective building training organised by CHETNA. After the training, she rolled out the Micro Modules in her Self-Help Group. In the discussions, Mohini Didi informed everyone about the importance of cooking in iron vessels and growingone's own vegetables in the "Poshan Vaatika",

After facilitating this session, Mana decided to practice what she preached. She decided to cook food in iron vessel, grow

her own veggiesand have meals with her family. On 23rd August 2019, Mana Didi bought iron vessel from Jalegaon village and started cooking in the vessel. At first, she had difficulty in explaining this change to her family, but eventually they also understood.



Mana cooking in iron vessel

There were eight members in her family and so the amount for purchasing vegetables was more and at times they reduced the quantity to cut the cost.



Mana grows vegetables in her Poshan Vaatika

So she started growing vegetables near her home and developed "Poshan Vaatika"

She was suggested to savethe seeds from the vegetables she buys from the market and grow vegetables in the Poshan Vaatika. This helped her save money spent on buying vegetables from the market.

After growing her own vegetables, she now has to spend only Rs. 100 instead of Rs,200/- onpurchasing vegetables She was glad that she could save Rs. 100 on purchase of vegetables.

Section II

IMPROVED SOCIAL STATUS

Ratna bai starts change from her home!



Ratna bai lives in Ghevari and has a family of five members. Her main occupation is agricultural work. During the off-season, she resorts to labour work.



Ratnabai starts eating with her family

Ratnabai volunteered to work on health and nutrition issues and participated in the three-day capacity building training organised by CHETNA. In this training, she learnt about anaemia, how low levels of haemoglobin in women can cause weakness and paleness. If proper care is not taken then this

problem can be serious. She also realised that women eating their food at the end, after their family eats, is one of the major reason women do not get adequate food. She could relate this with her own life as she ate at the end and went almost hungry. So, she decided to ensure that all members of her family will have their meal together.

She had several discussions with her family members and gradually all agreed. Now her family eats together.

She shared her own story of change when she rolled out the Micro Modules in her Self-Help Group. After the roll out, other group members have also started eating at least one meal a day together

Deepa takes a step for equal status in her family!

Village: Balapuri Block: Samnapur

Deepa is a Sachet Jiji who participated in the trainings on health and nutrition, facilitated by CHETNA. During the session on Gender and Health, the discussion was on gender equality and the fact that most women get to eat last and left overs.

"The usual practice in my house is that men eat first Once when the men were away, tired after working in the fields, I and my sister-in-law ate before the men returned home. They were very angry and asked us not to repeat this again" Deepa informed the group.

During the discussions it was emphasised that gender norms are created by the society and the widen the gender gap. So, these norms that result in inequality between men and women need to be changed. Deepa realised that first she had to bring change in her house, before reaching out to others. She invited CHETNA to have a discussion on gender and health at her home.

This session was held on 18th March 2019. Ten members of Self-Help Group, Deeps' mother-in-law and husband participated. Discussions focused on gender norms and how it impacted both men and women. The message was clear-women and men are equal so the family should eat meals together.



Deepa with her husband

Deepa's mother- in-law agreed buther husband was not convinced. Deepa and her group members did not lose heart and persisted. After several rounds of discussions, he was convinced.

During a training on 3rd April 2019, Deepa announced with a great sense of achievement, that now all members of her family have started eating together and also showed the photograph in her mobile phone.

CHETNA team is glad that they were able to help Deepa change one social norm at her home. This was an inspiration to several members of her group.

Sunita is now known as Swasthy Didi



Sunita Didi, was interested and volunteered to work on health and nutrition issues and participated in the perspective building (PB) trainings facilitated by CHETNA. As a follow up she was expected to roll out the micro modules in her group.

In February 2019, Sunita facilitated a session on health and nutrition in her SHG meeting. This generated interest among members and the group started meeting regularly and Sunita Didi gradually rolled out the modules as per the plan. The members found in her a friend, philosopher and guide who provided them with key information. As the word spread, other members of the villagealso



Sunita also uses gas cylinder obtained under Ujjwala scheme

started recognizing her as "Swasthya Didi"-one who gives suggestions on women health and nutrition. Her advice motivated people to become conscious of their health. They started availing Ante Natal Check-ups, Immunisation services on the Village Health and Nutrition Days and went for Institutional Deliveries. Women started visiting Sunita Didi's home for information on care after giving birth and at times also called on her mobile phone.

Sunita also provided them useful but simple ways to stay healthy. On her suggestion, women started cooking in iron vessels. They availed the benefits from Ujjwala scheme and started using gas cylinder for cooking.

On 9th July 2019, a woman went in to labour. The family was unable to contact ASHA as she was not available in the village. So, they called Sunita Didi. She arranged for Government ambulance. She went with the woman to the hospital and waited till she gave birth to a baby.

Sunita is happy that now she can support women and children of Andai village and improve their health!



Sunita Didi with the mother and her newborn



Sunita Didi at the hospital

Sunita is now known as Swasthy Didi



Kakadwal village is remote and hilly, with 6 hamlets. There is one concrete road to reach the village's 3 hamlets by two-wheelers, and one has to walk to reach rest of the 3 hamlets. The houses are scattered as people mostly build their houses on their farms.

On October 2019 when CHETNA team member visited the village for the first time, the ANM said that that very fewfamilies from the 3 hamlets, namely Uchla, Vasniyapani and Vaarti come for vaccination. Even pregnant women do not inform about their pregnancy, early and the subsequent check-ups are delayed. It was decided to discuss this with Sachet Didi and the Gram Sangathan members.

On 12th November 2019, during a session with Gram Sangathan (GS) members, on public health services and entitlements, the members informed that not everyone avails Government services. An action plan was prepared to visit the centres on VHND and mobilise women to avail services.

At the subsequent VHND, the president of Gram Sangathan, two GS members and Sachet Didivisited the Anganwadi Centre and observed that very few women and children had come to the centre. This observation was shared at the next meeting held in December where it was decided that parents of children who are to be vaccinated and women who were pregnant will be contacted and counselled.

Sachet Jiji-Rena, Jaya and Gita went to every hamlet and held discussion with women and their families about vaccination, especially in the three hamlets which were isolated.

When CHETNA team visited the village, the ASHA and ANM also informed that Rena, Jaya and Gita Jiji visit the centre during vaccination programs, and educate women about health and nutrition. Sachet Didi Rena, Jaya and Gita are happy that their efforts have resulted in more women and children being immunised and protected.



Women avail services at VHND



Session with the Gram Sangathan members

Sunita is now known as Swasthy Didi

Block: Samnapur

In Dhobakevalarivillage, the houses are scattered as most people are engaged in agriculture and live near their farms. The main tribes are Ahir, Gond, Dhoba and Pradhan.

Sachet Didi, Nalini volunteered to work on health and nutrition issues and participated in the training on Perspective Building Modules organised by CHETNA. After the training, she rolled out the micro modules in her SHG in which 16 SHGs of the village participated. After the discussion on nutrition and health, they decided to host "posh an mela" (Nutrition fair) so that more people are informed about the basic concepts. They collected resources and funds from the people of the village.

On 19th September 2019, more than 200 women participated in the poshan mela. During the "poshan mela", NaliniDidi discussed about health and nutrition issues. Role plays on child marriage, nutrition, care of pregnant women as well as Institutional deliveries were performed. Most people of the village, the Gram Panchayat and Anganwadi members appreciated the initiative. It was decided to host a "poshan mela" every year.

Besides, Nalini Didi also helped in registration of the pregnant women from the village and also admitted malnourished children to NRC. The village could see health related improvements due to the efforts of Sachet Didi-Nalini.



Participants at the Poshan Mela



Role Play at the Poshan Mela

15 Yamuna Didi is addicted to fight addiction



The population of Haldikarelivillage is very sparse and stands at 662 people in 165 Households. Majority of the population here belongs to the Gond tribes and does agricultural work. They also sell forest produce like Tendu, Chaarbij, Bhilawa etc in the markets and seldom consume it for themselves. The village is surrounded by a thick forest cover and has a river named Budhner just one kilometre away. The total area of the village is approximately 4 sq. kms. People migrate to cities like Raipur or states of Gujarat and Kerala after the agriculture season.

Most women of this village go to the forest to collect tendu leaves which they sell to the Government for making Bidis. Most young children do not get required breast milk. Most



women are anaemic with haemoglobin levels at 7-8 grams percentage. Addiction to tobacco and alcohol is rampant and starts at young age.

Two women leaders Yamuna and Chanda volunteered to work on health and nutrition issues. They participated in the perspective building training organised by CHETNA team. They were concerned about addiction in their village. During the session, Yamuna Didi mentioned about her twonephewswhowere addicted to tobacco chewing and unable to eat food properly. She decided to talk to them and encourage them to stop tobacco chewing.

After CHETNA's training, Yamuna Didi discussed with them about eating healthy and ill effects of addiction. At first, they paid no attention. But she kept on discussing and persuading them. After several rounds of persuasion, both of them stopped chewing tobacco. Due to her efforts, nobody in her family is addicted now.

Having gained some more confidence she reached out and also inspired two neighbourhood families to stop addiction and eat healthy. Earlier alcohol was served on every occasion in the village, now healthy snacks are served instead. Yamuna has plans to make the entire village addiction free. Yamuna was felicitated for her efforts at a public function on 8th March, International Women's Day.

Disha crosses the threshold for social good!



The population of Pipriyavillage is 1099 and has 242 households, it is mostly inhabited by Kol, Bega, Gond, Rathod tribes and majority of people do agricultural and labour work in MGNREGA schemes. The village has 7tolas (Hamlets) namely 1) Bega tola 2) Kisan tola 3) Chuhalla tola 4) Thakur tola 5) Brahman tola 6) Colony told 7) Sridhar tola. There are 3 Anganwadi centers in Thakur tola, Kisan tola and Bega tola; four schools, three primary schools and one middle school, and one SHC.

Marrying children at a very young age and mandatory covering their face with veils is a common practice. Girls are often forced to do household and agriculture work and not sent to schools. Women are not allowed to sit along with the men.

During the visioning exercise, Disha Didi volunteered to work on health and nutrition issues of the village. She had to face lot of resistance from the family as women could not go outside the village on her own. Team CHETNA visited her house and discussed with her family explaining

the larger benefit Disha would bring to the communities. They also shared the content of the trainingwhich was on health and nutrition, which will not only benefit her family but the village as well. Disha Didi also said that shewas keen to learn and work. Finally, her family agreed. She participated in CHETNA's three-day training.

When she rolled out the Micro Modules in her group, her husband and father- in-law also supported her. After this roll out, she explained to the men of the members' households that they should also support women; there shouldn't be any discrimination amongst the men and the women. After seeing this difference in Disha Didi's house,

people living nearby also got inspired by her. Now, women come out of their homes and work for the community.



SHG meeting facilitated by Disha Didi

Section III

IMPROVED ACCESS TO HEALTH AND NUTRITION SERVICES

Kela Didi takes lead for health and nutrition of communities

Village: Keolari Mal

Block: Samnapur

District: Dindori

The population of Keolari Mal village is 548 and has 265 households. The tolas (hamlets) are far from each other as people prefer to live near their fields. The main occupation of the people here is agriculture and majority of people belong to Gond tribe. There are three tolas in the village namely 1) Bich tola 2) School tola 3) Began tola. The village has 2 Anganwadi centres, 2 primary schools and one ration shop and the main source of drinking water is wells and hand pumps.

Kela Didi volunteered to work on health and nutrition issues of the village and participated in the perspective building training organised by CHETNA. After the training she rolled out the micro modules in her Self-Help Group and also facilitated discussion with adolescent girls. On 17.09.2019, she initiated a dialogue between the Gram Sangathan members, ASHA and Anganwadi workers. They discussed about health services provided by Anganwadi and health centres. ANM, ASHA Didi and Anganwadi workers informed about their own roles and responsibilities. The members asked the frontline workers to ensure regularity of food provided in Anganwadi centres. They visited the Anganwadi centre and ask the Anganwadicentres to maintain the quality of food provided to the children.

Discussions were held about child nutrition, mid-day meal in subsequent meetings of the Gram Sangathan. Adolescent girls were informed about nutritious food.

Kela Didi is glad that her efforts have brought women and services providers on a common platform and generated interest in the Sangathan members on nutrition issues.



Discussion between VO member and ANM

Dhani Didi's' help makes a woman healthy!



Singhwarahas a population stands of 695 and the number of households is 152. The majorinhabiting tribe is Gond tribe and they mostly do agricultural work, and after the season ends, they move to other states like Chhattisgarh, Gujarat and Kerala. They also sell fruits like Tendu, Chaarbij, Bhilwa etc in the markets and seldom consume it for themselves.

Dhani Didi, member of the Self-Help Group volunteered to improve the health and nutrition of women and children of her village. She participated in the perspective building training organised by CHETNA. After the training, she rolled out the micro module in her Self-Help Group.

During the roll out, the members shared their concern regarding health of one of their members- Dhanmotini. DhaniDidiand CHETNA team later visited her house. Theylearnt that Dhanmotini was under mental trauma and stress after her first child's demise. She didn't eat properly andwas hospitalized in a private facility at Katra, as she became very weak. As they did not have money, she couldn't complete her treatment. After having the second child her condition deteriorated but again, she couldn't get proper treatment.

The team informed Tulsiram, her husband that swelling in Dhanmotini's hands and feet is due to pale blood -lack of haemoglobin in her body and if she is not treated, she might be in danger. They informed him about free treatment at the Community Health Centre-CHC, Samnapur. Dhanmotini was then taken to the CHC where she was hospitalized for 3 days. After returning home, she was taken care of by the family and availed services from the Anganwadi Centre also. Dhani Didi motivated her to participate in the Village Health and Nutrition Day. At present she is better.



Dhani and CHETNA team meet
Dhanmotini and her husband



Dhanmotini treated at CHC Samnapur



Sudha Bai helps to get a prosthetic arm!



Sukhlal bhai, resident of Perkhand village got a new hope in life. When Sachet jiji Sudha met him for the first time he appeared helpless and powerless because one of his hands was amputed. Thanks to Sudhabais' effort, his life has changedand with the help of a prosthetic arm that can carry up to 10 kilograms of weight.

Sudhabai, a Sachet Didi from Perkhand village participated in the three-day training of Sachet Jiji on Perspective Building Module PB-01 which was heldduring 22-24 February, 2019. At this training, CHETNA invited the Block Medical Officer to share information on Health entitlements from the public system. He shared information on health-related schemes as

well as the upcoming health camp on 25^{th} February where people can come and get prosthetic limbs for free.

An action plan was prepared and the Sachet jijis planned to identify such people in their villages and ask them to go to the free health camp held in CHC Manavar with all necessary documents.

Sudha bai realised that this could be a life time opportunity for Sukhlal bhai of her village. She connected him with CHETNA team member who explained the process, required document and assured assistance during the Camp. On 25^{th} February 2019, Sukhlal bhai reached the Camp Site and got the prosthetic arm.

Dhoncha women act to get their entitlements!



DhonchaVillage has a population of 1159 with 179 households. The majority of the people are Adivasi and their occupation is agricultural work and labour.

Two members of Self-Help groups Chameli Didi and Sunita Didivolunteered for creating awareness about health and nutrition in their village. They participated in the perspective building training organised by CHETNA. As a follow-up, they rolled out various Micro Modules in their Self-Help Groups, with support from CHETNA team.

On 13th June 2019, when the micro module on food and nutrition was rolled out, one of the topics discussed was Ayushman Bharat (Government Insurance Scheme). Information about the Ayushman card and its eligibilitywas discussed. Since the card holders are eligible for free treatment up to 50 Lakhs, the members found it useful to register. Information regarding the necessary documents such as Aadhaar card, ID card, phone number etc was also shared. As an action plan, the members

planned to contact people and prepare a list of people who want to enrol in the Insurance Scheme and get their Ayushman card made.

In order to facilitate registration, a camp approach was adopted and the members were asked to inform the communities. On 8th September 2019a camp was organized where 45 women and 47 men registered for the card. They were promised the cards within a month.



Women use ladle for safe drinking water

Village: Kadvaali

Block: Petlavad

District: Jhabua

Ramila Didi and Jamna Didivolunteered to work on health and nutrition issues on the village. They participated in the perspective building trainingorganised by CHETNA. As a follow-up, they rolled out the Micro Modules in their Self-Help Group. A roll out was held in May 2019, in which 15-16 women from the village participated. One of the topics for discussion was Diarrhoea which was common during summer. The use ofladle for taking water from the pot was discussed. It was empathised that the long handle prevents contact with water and hence the water becomes safe. Women shared that people of the village used this long-handled ladle while making tea or buttermilk. They said that they never used it to take water from the earthen pot. As an action point, they decided to use theladle.





Sachet Didis roll out modules in their group

During the meeting conducted in June, when the action taken was reviewed, women said that they are now using the ladle. When the Sachet jiis visited the homes of SHG members, they were served water using the ladle. They thanked Sachet Didi's for giving them such useful information.





Didis use ladle for pouring water



Jeeva Didi helps women for safe birth!



Jeeva Didi volunteered to work on health and nutrition issues. She participated in the perspective building training organised by CHETNA.

In May 2019, Sachet Didi Jeeva rolled out the module on antenatal and postnatal care as well as the complications during pregnancy in her SHG.

Somi Didi, who was in her 6^{th} month of pregnancy also participated in the discussions. She found the discussion on birth preparedness very important and as an action plan said that she will discuss about the necessary preparations with her family.

Somi continued to participate in the roll out sessions focussed on new-born care, breast feeding etc. When the roll out was held in July 2019, Somi Didi who was in her 9th month of pregnancy, said that her delivery is expected in August and she has already decided about the hospital she would go to, how will she go there (vehicle), with whom she will go, preparing clean sheets and clothes and has started saving up money too. She also keeps in touch with Anganwadi Didi Sangita. Other members also shared their experiences and problems that they faced during their pregnancies.

On 12th September 2019, Somi Didi participated in the Gram Sangathan meeting with her 1.5 months old daughter. She gave birth to her daughter in Government Hospitalat Petlavad. Her daughter Arti, is healthy. She also said that the information she received from Sachet Didi helped her. She appreciated the support provided by Sachet DidiJeeva and other members of the VO.



Somi Didi with her recently delivered new born



Village Organisation of Ojhad takes lead



Ojhad village has 15 hamlets and some of them are located very far. Since the houses are scattered, providing health services becomes difficult.

When CHETNA team met the members of Self-Help Group, issues of irregular service delivery were shared by women. There was a Sub Centre in Ojhad, but the ANM was on maternity leave. A temporary arrangement of sending a block team for vaccination was made. Since they did not inform the villagers about their visit, people did not know and were unable to get the vaccination services. The ANM thenextended her leave for a year. Women were worried.

CHETNA team along with Sachet Jiji got together and facilitated training of members from the Village Organisation. The members raised concerns of service availability at the sub centre. The discussion continued for next several meetings.

On 24^{th} January 2020, the members of the Village Organisation along with team of CHETNA drafted a letter and presented to the Block Health Officer. Regular follow upswere done where it was informed that the ANM will return to dutyin next few months.

A total of 19 Severely Acute Malnourished Children were identified and the children's parents were counselled by the trained Sachet Jiji. Out of them, seven childrenwere admitted

to NRC and the rest 12 were advised home care. In March 2021, all the 19 children are healthy.

As some other children have become Severely Acute Malnourished, two lists of these malnourishedchildren were made, one for the Gram Sangathan and other for the Panchayat. These children were regularly checked up on the VHND where the weight of these children was tracked. Earlier, very few people came to vaccinate their children, approximately only 3 out of 10 children were brought. But now 7/8 out of 10 children are brought here for vaccination. We go to every Anganwadi centre to asses malnutrition among the children, if there is anyone, we make a list and contact their parents and guide them. – Rekli didi, Gram Sangathan President, Ojhad. Currently, the nutritional condition of the village has improved with regular health services being provided, timely VHND being organised and there is better awareness among the people. Now more women have started accessing health facilities.

Earlier, very few people came to vaccinate their children, approximately only 3 out of 10 children were brought. But now 7/8 out of 10 children are brought here for vaccination. We go to every Anganwadi centre to asses malnutrition among the children, if there is anyone, we make a list and contact their parents and guide them. - Rekli didi, Gram Sangathan President, Ojhad.

Kukadipada women act for Health Services!



CHETNA team facilitated a training of the Village Organisation (VO) members on 10th July 2019. One of the sessions was on Maternal and Child Health entitlements from the public health system. During this session, the participants said that the sub centre-SHC Kukadipada, located in the village was not operational. Earlier, the ANM used to come from the block headquarters only on Village Health and Nutrition Day. In April 2018 she got transferred to Udiyapura Sub Centre which is near her residence. The VHND had not been held for the past three months. As a result, services to four villages

Kukadipada, Nogawa Kaliya, Nogawa Somla and Nogawa Nagla were affected. Pregnant women and children had to travel around 20 kilometres to reach PHC Khawas for their check-up and immunisation. First VHND session a t Kukdipaada

The participants decided to submit a demand to the Gram



Letter given by PRI Kukadipada to CEO, JP, Thandla

Panchayat(Local Self Government). With CHETNA teams' assistance a letter was drafted and submitted to the Sarpanch(elected leader) and Sachiv (Secretary). The Sarpanch wrote a letter to Chief Executive Officer, Janpad Panchayat forwarding the demand made by Village Organisation members. The CEO immediately discussed the issue with Block Medical Officer, Thandla. As a result, the ANM was reinstated at SHC Kukadipada. After a gap of around three months a VHND session was organised at Kukadipada on 6th August 2019 in which 11 children, 17 pregnant women, 26 lactating women and 12 adolescent girls participated and received the services. VHNDs were

also organised in the remaining three villages. The VO members are happy that their action has resulted in services available at the Sub Centre.



First VHND session at Kukdipaada



Meena and her babies are healthy!



Meena lives in Bhanpur village andis a member of Self-Help Group. When Meena was pregnant, two years ago (in 2017), she was weak and did not receive any health services. She gave birth, at home, to a baby girl whose weight was 1.8 kilograms. On 5^{th} April 2018 the Anganwadi Worker asked her to get the baby admitted in Nutrition Rehabilitation Centre (NRC) as the baby was unable to feed properly. The baby was not taken to NRC.

Meena participated in the session on health and nutrition organised by Jaya and Seema, Sachet Didi's trained and mentored by CHETNA. Meena said thather babywas unable to breast feed and eat complementary food. So, Jaya, Seema and the Anganwadi Worker asked her to get the child admitted in NRC. After detailed discussion and persuasion Meena agreed. The baby was admitted on 10th April 2019 in the NRC and 14 days stay and four follow ups were completed. The baby's condition improved and she started eating. Meena became confident, interested and regularly participated in health and nutrition sessions facilitated by the Sachet Jijis.

Meena conceived for the second time in 2019. The Sachet Jijis informed her about care during pregnancy. She registered with the ANM and received all the mandated health and nutrition services. On 23rdDecember 2019, she was admitted at sub health centre, Nighouri. Sachet Jiji Seema, also went with her. She gave birth to a baby girl on 24th December 2019, who weighed 2.5kg. The baby was breastfed within an hour of birth and mandated care was provided. "As I was aware about the care during pregnancy and importance of institutional delivery, I did not have any problem. The services at health centre were good", she said. When CHETNA team visited during February 2020, Meena and both her babies were healthy and were timely immunised. Meena was happy that CHETNA's training helped her and her babies.



Meena at SHC when she was discharged



Bhaluchuha village women take lead!



When the Government of India announced lockdown during March 2020, CHETNA started virtual orientation of the community groups in six blocks of Madhya Pradesh. After a virtual orientation on corona virus disease and its prevention by CHETNA, the members of Bhaluchuha VO formed a committee. The members included Sachet Jijis, frontline workers- ASHA, ANM, Panchayat members and some influencers. VO leader GitaDidi; Sachet Didi- Usha and Kavitalead the activities. Some key activities carried out by committee are -

- Supported the front-line workers in providing the door-to-door services to pregnant and lactating women
- Prepared list of migrants returning to the village and ensured their screening and sent them in quarantine centre for 14 days at Samnapur.

- Members restricted all the routes to the village and started monitoring entry and exit of the village.
- Supported ASHA and AWW in wall writing in village for awareness

The committee managed the situation well and this helped prevent corona virus infection spreading in the village.





Women's group ensures lockdown in the village

Bahera village women make change happen!



CHETNA team organised training and mentoring of Sachet

Jijis, Village Organisations and visited the village regularly for strengthening the VHND. The team observed that some equipment and supplies were needed. The untied fund of the Village Health, Sanitation and NutritionCommittee (VHSNC/Gram Sabha Swasth Gram Tadarth Samiti) could be used.



Minutes of the Committee meeting

CHETNA team coordinated with the VHSNC members to hold a meeting. On 10th December 2019 the first committee meeting was held. A total of 17 members including ANM, ASHA, and AWW, VO members, Sachet Jiji and CHETNA team participated. CHETNA team oriented them on their roles and responsibilities and improving maternal and child health

services. One of the issues discussed was the need for a mattress and repairs /purchase of BP instrument, thermometer, and weighing scale. These were needed during the VHND session.

The committee members decided to purchase these from the untied fund of GSSGTS and the decision wasminuted. During the second meeting in January 2020, it was reported that the purchase was not done. The VO members regularly followed up and in March2020 a new BP instrument, weighing scale, thermometer and mattresswere purchased from untied fund of GSSGTS/VHSNC.

The VO members were happy that their participation in the VHSNC proved useful. Women and children will receive mandated and better care!



Purchases from the Untied Fund

ASHA takes lead to strengthen services!

Village: Dewri

Block: Amarpur

District: Dindori

At village Dewri, CHETNA team started observing services at the Village Health and Nutrition Day in January 2020. They observed that there was no sitting arrangement for women, no table for Ante Natal check-up, weighing scale and BP instrument was not functional. Despite the instruction provided by the block health official, VHSNC/GSSGTS meeting was not held. ASHA who is the convener of the committee, was also not taking initiative.

CHETNA team discussed with ASHA and also met the members of committee. They appraised them of their role and functioning of VHSNC. Later, ASHA visited the committee members to invite them for meeting. There was no quorum and so the meeting was postponed. CHETNA team and Sachet Jijis discussed the issue with ASHA and ANM and held one to one meeting to mobilise the members to participate in the committee meeting.

On 8^{th} September,2020 the GSSGTS meeting was organised and there was a quorum. It was decided to purchase

the required items from the untied funds. Regular follow up was done and ASHA purchased 4 chairs, ANC table, table sheet and a BP instrument from the untied fund of committee, before the next meeting which was organised on 10th November 2020.

ASHA is happy that this purchase will be helpful to provide better services to women and children participating on the Village Health and Nutrition Day.



ASHA and the purchase from untied funds

Safe Medicines are available for women and children



CHETNA team conducted visits to strengthen the services at the Village Health and Nutrition Day since May 2019. One of the activities was to check the expiry date of the medicines and ask the service providers to discard them immediately.







Medicines at VHND (Vitamin A, Framycetin skin cream-1 and Norlac-T – 10 bottles)

The services providers were asked to regularly check the medicines for the date of expiry and discard them if found beyond the date mentioned.

On 8th January 2021, CHETNA team found medicines in village Mugdara well beyond their expiry date. On 18th January 2021, CHETNA team discussed the issue with block officials and in sector meeting, ASHAswere instructed againfor removing the medicines beyond the expiry date. On 3rd March 2021, discussion was held with BMO and it was decided that the

directive will be issued from block health department for supervisors to ensure disposal of expired medicines at field level.

These observations were shared with the Block Officials at a meeting on 16th December 2020 and on 24th December 2020 with the Block Community Mobilize, Samnapur, LHVand Supervisor health.

After regularly following up, on 26^{th} December 2020 during ASHA meeting, verbal instruction was given by block officials for immediately removing the expired medicines from the centres.

On 21st December 2020, CHETNA team with VO members participated in VHND session of Umariya village and checked the expiry date of the medicines. Fortunately, there were no medicines beyond their expiry date, found at the session site. Women leaders and VO members decided to regularly visit VHNDs and keep an eye on expiry date of medicines.

CHETNA team is happy that their efforts were useful to ensure provision of safe medicines at the public health centres.

Village Organisation makes the PHC functional!

Village: Khandlai

Block: Manawar

District: Dhar

Khandlai is a tribal village and during monsoon, the village becomes inaccessible by road. The primary Health Centre-Khandlai is expected to serve around 57, 500 people and was constructed around 3 years ago. For the want of formal inauguration, it remained non-functional. Pregnant women had to travel as far as 20 kilometresto Manavar CHC for their deliveries.

CHETNA facilitated training on Health and Nutrition for the Village Organisation members on 22nd June 2019. Around 20 members from seven

self-helpgroups participated. As an action plan the participants decided to submit a letter to the Medical Officer.

CHETNA team acilitating VO training supported Sudha Jiji, the

Oleader and Sundari, Sachet Jiji to draft a letter. This was whetted by the members. They also discussed the matter with their families and got support from the men as well as women



VO letter for opertionalising PHC services

from nearby villages of Yadiyapur and Rajkhedi. On 12th July 2019, twenty-five women and two men reached the Manawar CHC on their own vehicles and submitted the proposal for starting PHC Khandlai services to the Block chief Medical Officer. The BCMO assured the VO members. He immediately sent a letter to the Chief Medical and Health Officer, Dhar mentioning the submission by VO

and requested action for operationalising PHC Khandlai.

On 22nd July 2019, VO meeting was held in which 28 members from seven SHG and CHETNA team member participated. The president and Sachet Jiji said that the proposal has been submitted. It was decided that members will regularly follow up with ASHA and ANM.



Letter from the block to the district health officer

Two to three months later, the PHC was opened and cleaned. Due to lack of necessary equipment, only vaccination services

were provided for two days in a week. The people of Khandlai were dissatisfied.

The next VO meeting was held on 26^{th} January 2020 where 35 members,28 men and CHETNA team participated. They proposed the VO leader Renabai to ensure that the PHC functions as per norms regularly. She promised action.

It took almost six months to equip the PHC and from July 2020 the Khandlai PHC has started functioning full flegedly with 11 SHCs which come under the Khandlai PHC.

The VO members and Sachet Jiji are happy that women and children as well as people of villages served by Khandlai PHC willreceive services near their residence.



Services begin at the PHC

Dhoncha Village Organisation get a sub centre!

Village: Dhoncha

Block: Manawar

District: Dhar

Dhoncha village has a designated Sub Health Centre (SHC). The SHC is expected to serve 4 villages and almost 5000 population. The Sub Centre services are provided from the Aanganwadi Centre. During CHETNA teams' visit to the village, women said that "we find it difficult to avail health services from the Anganwadi Centre. Since there is less space, medical equipment can't be kept and there is no waiting area. Children are present in the Anganwadi centre, pregnant women are not comfortable getting their check-ups done. During monsoon, the roof leaks which make it difficult to offer medical services. People of the village have to go the Manavar CHC for health services."



Anganwadi Centre used for providing health services



Building constructed for the Sub Centre

On 19th February 2019, a couple of women from the Village Organisation and CHETNA team visited the Aanganwadi Centre It was observed that there is no building of the SHC. Some of

the challenges shared by Frontline workers were that pregnant women not taking iron folic acid tablets, open defecation persisted. It was decided that these issues will be taken up by the VO.

Almost two months later, VO members participated in the Gram Sabha (Village Assembly) held on 14th April 2019. They submitted a proposal for sub centre building and the Sarpanch (leader of the



Proposal Submitted by VO members

village assembly, a woman) accepted the proposal and a resolution was passed. This was discussed with the block health officer and the process initiated.

The proposed land for construction of the SHC was 500 meters away from the village. This was not approved by the villagers as they said there was no point in building the centre outside the village. The building couldn't be constructed.

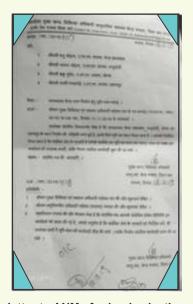
In November 2019, the block health officer sent a letter to the Tehsildar informing about the sanction of the SC and asking to

identify land. The VO members followed up regularly but there was no progress.

In January 2020, VO members brought up this issue in the Gram Sabha, again. The Gram Panchayat held a meeting with the VO members and ANM to discuss about selection of most suitable land. The members informed that personal land is available in the village. The Gram Panchayat members than met the land owner who readily agreed to give the land for construction of SHC in exchange of another plot in the village.

Having selected the suitable land, the construction of the SHC started in March 2020. But due to the pandemic, it stopped midway. The construction was completed in the month of February 2021, and currently plastering of the building is being carried on. While people were expecting its completion and functioning in March 2021, it has not happened till 30th June 2021, letter to ANMs for land selection

"I have raised the issue about the SHC since 2006, and from then I have been regularly trying and now I have the support of women from the Gram Sangathan. The construction of the centre makes it easier for me to provide the necessary services. Now, there will be no need for people to go to Manavar for primary health concerns issue." ANM, SHC Doncha.



letter to ANMs for land selection

Women get the Anganwadi Centre built



Mohdipada is a tribal village, located approximately 22 km way from Petlawad Block Head Quarters and the population is 1200. The nearest health centre is in Gangakhedi which is 3 kms away. The PHC is located 5 kms away in Karvad.

In Mohdipada, 3 to 4 years ago, construction of an Anganwadi building could not be completed due to the death of the contractor. So the Anganwadi worker continued to provide services from ASHAs' home and after some time from someone else's residence. The government provides monthly rent if the Anganwadi operates from a rented place. Since the rent was not provided, getting a place for the centre became difficult.

Since the Anganwadi Centre cannot be operated from individual's residence, the District Collector asked to use a room from the public school. With the support of members from the Village Organisation and the Cluster level Federation, the AWC was set up in the Government primary school. The AWC continued to operate from the school building for one and half years.

Once again, the need for the building of AWC was discussed in a district level meeting by the Government authorities. It was

decided to operate the AWC from a house in front of the school building butsince it had no doors, the AWC was not relocated.

Mahudi Pada, VO discussed this issue in every meeting and also informed the Cluster Level Federation leaders. They also included this in the Village Health Plan prepared for the Gram Panchayat Development Fund.

Due to the effort of the VO and CLF members and the oversight by the Gram Panchayat, the Anganwadi centre is now being built. People are expecting it to complete soon so that women and childrencanavail services







Construction begins

Anganwadi Centre Unlocked!

Village: Lakhankhot

Block: Thandla

District: Jhabua

A meeting was organised on 19th July 2019 in village Lakhonkot, where members from the Gram Sangathan, ASHA, ANM and other members of the village came together and formulated a Village Development Plan where topics like education, health, basic rights and employment were discussed and planned.

One of the issues was about the village Anganwadi centre where the owner of the land had locked up the place since last 6 months. This topic was again aised in the next village meeting held on 2nd October 2019 where members decided to have a conversation with the owner of that plot and arrive at a solution. The owner was invited to the meeting where he was told that he had no personal right over a government institution

and if he doesn't listen to the Gram Sangathan, legal action will be taken. The Sarpanch, the secretary and president of the Gram Sabha agreed to this course. After hearing this decision, the owner of the land decided to open up the lock next day itself. Now, the Anganwadi centre is functioning properly without any disruption.



VO meeting with the owner

Gram Santhan gets Ranni Sub Health Centre Started!

Village: Ranni

Block: Thandla

District: Jhabua

Ranni, 35Kilometres away from the blockheadquarters is the third biggest village of Thandla. It has a population of 4472(Census 2011). There are 8 hamlets. ThePrimary Health Centre is 12 Kilometresand the SubHealth Centre is twoKilometres from the main road. Since past three years (2016) the ANM is not posted at the sub centre. About 150 women (appx. 68 pregnant women and 76 lactating women) had to travel to Khawasa PHC to avail health services. A male Multi-Purpose Worker provided vaccination.

CHETNA conducted training of Gram Sangathan members where one of the topics was on services provided by the Sub Health Centre. Since the mandated services of the Sub Centre were not available, women members of the Village Organisation included the issues of the Sub Health Centre in the village Health Plan. They demanded reopening of the centre and also appointment of an ANM.

During September 2019, after the meeting of Village Organisation, the members visited the Anganwadi centre and the Sub Centre. The MPW informed that since the SHC remained closed, a family living nearby had taken hold of the building.

Gram Sangathan members discussed with the family members and after some persuasion they vacated the premises. And then the Untied funds were used for cleaning and painting of the SHC building. Furniture and equipment like ANC tables, chairs, and curtains were also bought.

In December, the services were reinstated from the SHC building. Now women are very happy that they will not have to go to Khawasa for availing health services. Ranni SHCSachet Jiji lalita, who was trained by CHETNA expresses satisfaction that with support from Gram Sangathan and CHETNA team, the Sub Centre started functioning.



Ranni SHC

Dhanpura VHSNC takes action!

Village: Dhanpura

Block: Petlawad

District: Jhabua

Dhanpurais an
Adivasi majority
village. It is15
kilometres
awayfrom block
headquarter.

CHETNA engaged with the VHSNC (called the Gram



First meeting with new VHSNC members

Sabha Swasth Gram Tadarth Samiti in Madhya Pradesh) members to facilitate their regular monthly meetings. When CHETNA team visited Dhanpura in March 2019 and held discussions with ASHA, ASHA Sahyogini, they shared that the committee meetings were not held since February 2019. The members of the committee were elderly and hence there was a plan to form a new committee, which was not done.

CHETNA team again met ASHA to facilitate the selection of new members. Sachet Jijis help was sought and three SHG members joined the VHSNC. The first meeting was held on 29^{th} June 2019 which had participation of old as well as new members.

CHETNA team oriented the members on the objectives of VHSNC; roles and responsibilities of its members develop village health plan and how to use the untied fund.

The committee members were informed that equipment such as weighing scale, hub cutter and BP instrument were not functional. The members decided to purchase the needed equipment from the untied fund. A new BP



Committee members with the purchase from untied funds

instrument, hub cutter and weighing scale were purchased from the untied funds. The Sachet Jiji also visited the VHND and observed that weight and blood pressure of pregnant women are checked. During the VHND visit in December, ASHA and Sachet didi also decided to seek approval for purchase of durries- mattresses using the untied fund.

Due to the regular meetings held by the committee, people from the village are getting better services.



Centre for Health, Education, Training and Nutrition Awareness
Supath-II, B-Block, 3rd Floor, Opp. Vadaj Bus Terminus,
Ashram Road, Vadaj, Ahmedabad-380013. Phone: 91-079-27559976/77
Fax: 91-079-27559978 E-mail: chetna@chetnaindia.org
Website: www.chetnaindia.org www.linktr.ee/CHETNA_Ngo

