Improving and Assuring Quality, Increases Access to Reproductive Health Services: A Case Study of JICA-RH Project in Madhya Pradesh

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ABSTRACT

Introduction

India has launched the National Rural Health Mission (NRHM) in April 2005 to provide a new and integrated approach to the implementation of health programme in the country. It not only promises to adopt a public health measures but also promised quality health care services for the poor. RCH-2 being the flagship programmes of NRHM having the time line (2005-2010); has completed more than half of its processes. These two programmes are committed to improving the quality of reproductive and child health services provided through a vast net work of rural health facilities, which includes primary health centers (PHCs), community health centers (CHCs), Sub centre and RCH camps. It aims to improve RCH by identifying and filling gaps in the inputs and processes of RCH services delivery. But all these efforts could not meet to bring the desired out comes especially in the unserved and underserved areas.

Methods

In the state of Madhya Pradesh, the introduction of NRHM combined with RCH with its holistic approach to improve primary health care services especially focusing on the unserved and underserved areas has intended to bring about a desirable change for the health related MDG particularly MMR. IMR and institutional delivery. To improve the availability and quality of reproductive and child health with the provision of quality antenatal care (early registration, three antenatal checkups, two tetanus toxoid injections and IFA tablets) has been envisaged under the programme for the services at the sub- centre level. To fulfill the vision an intervention project was launched by the Government of Madhya Pradesh in collaboration with the Japan International Cooperation Agencies (JICA) in two demographically backward districts i.e. Tikamgarh and Damoh. Under the set provisions of NRHM, the project focus was made to enhance the skill and quality of the services provided by the grass root level worker based at sub centre level. It was done by providing qualitative and hand hold training to the Auxiliary Nurse and midwives (ANMs). The objective of the present paper is to examine the empirical evidences whether JICA-MP/ RCH intervention project has achieved its expected goals and objectives in terms of its efforts made for efficiency, effectiveness and quality impact on Maternal and Child Health. The paper also focuses to understand and analyze whether the intervention strategies adopted were made to enhance the work environment and improve clients as well as providers' perspective on utilization and the quality of locally available RCH services at sub centre level. For this purpose 30 ANMs from 30 sub- centre (15 sub- centre from each district) were selected for indepth interview. Sixty FGDs with community members (2 FGDs from each sub- centre and 30 FGDs from each district) were conducted to know their opinions about the services provided in the project areas.

Conclusions

The findings of the evaluation reveal that the need-based training with practical knowledge and skills as core competency training provided by JICA for ANMs/LHVs/SNs followed by its coaching and handholding sessions

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through follow-up visits, regular monitoring and supportive supervision to the day to day works has brought a spectacular qualitative change in the maternal and newborn health services and coverage leading to greater satisfactions among the villagers at Sub-centre levels. This has resulted in the reduction of maternal mortality and morbidity, neo- natal and infant mortality in the districts.