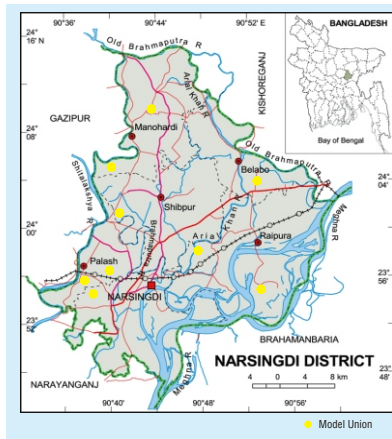


SAFE MOTHERHOOD PROMOTION PROJECT (SMPP)

সেফ মাদারহুড প্রমোশন প্রজেক্ট

A Technical Cooperation Project of Ministry of Health & Family Welfare supported by Japan International Cooperation Agency (JICA)



Profile of Narsingdi District	
• Population	: 2,267,997
• Area (sq. Km)	: 1,021
• Population density (per sq.Km)	: 2,221
• Total upazila	: 6
• Total unions	: 71
• No. of eligible couple	: 374,237
• No. of Hospitals	: 8
District Hospital (100 beds)	: 1
Sadar Hospital (100 beds)	: 1
MCWC (20 beds)	: 1
Upazila Health Complex (31 beds)	: 5
• No. of Sub -Centre/RD	: 18
• No. of H&FWC	: 58
• No. of private clinics	: 34

Safe Motherhood Promotion Project (SMPP) is being implemented in Narsingdi district by the Ministry of Health and Family Welfare (MoHFW) from July 2006 for a 4-year period with the support of Japan International Cooperation Agency (JICA). JICA invited CARE Bangladesh as an another implementation partner for Community Mobilisation activity (Community Support System). SMPP aims at improving health status of pregnant/post-partum women as well as neonates in the district, and as a pilot project, the Project is designed to replicate good practices proven in Narsingdi to other districts.

IMPLEMENTED ACTIVITIES IN 1st QUARTER OF 2009

Model Union Related Activities

9 Model Unions held Action Plan Review Workshop

All Model Unions completed Action Plan Review Workshop in March, 2009. During May to September 2008, each Model Union developed its own Action plan by organising participatory Planning Workshop. After 6 months implementation period, each Action Plan was assessed for the progress and revised in the Review Workshop. The participants of the Review Workshop were consisted of selected community members, Union parishad members, and MoHFW care providers, mainly who were involved in Action Plan development last year. Based on the experience of 6 months implementation following previous Planning Workshop, the participants revised their action plan through giving more realistic view. The revised action plan reflects the experiences of the Model union and remaining needs. The activities of revised Model Union Action Plan can be categorized in the following 6 components:

In the Review Workshop, the FWV in each model Union reported the performance of MNH service delivery in 2007 and 2008. All report showed increase in the service utilisation. The achievement will be re-assessed by the Endline survey of Model Union scheduled for end of 2009. Additionally, the revised Action Plans will again be reviewed after a set period of implementation.



25~30 community members in each Model Union actively discussed on their Action Plan

- i. Human Resource (posting, staff training, behaviour of staff, etc.)
- ii. Infrastructure/Supply & Logistics
- iii. Service delivery
- iv. Health Education/Awareness raising/community mobilization activity
- v. Monitoring, Supervision & Coordination
- vi. Others

Applying the above mentioned categories, the revised action plan shows the following composition of the categories of activities (see table right).

Model Union (Upazila)	Category wise revised Action Plan	Total # of activity
Danga (Polash)	HR(0), IS(2), SD(9), MSC(5), HEA(6), OT(0)	22
Narayanpur (Belabo)	HR(1), IS(2), SD(6), MSC(0), HEA(13), OT(0)	22
Panchidona (Sadar)	HR(6), IS(2), SD(4), MSC(2), HEA(11), OT(1)	26
Gorashal (Polash)	HR(1), IS(1), SD(9), MSC(5), HEA(9), OT(0)	25
Mirzanagar (Raipura)	HR(2), IS(4), SD(3), MSC(4), HEA(10), OT(0)	23
Dulalpur (Shibpur)	HR(7), IS(4), SD(0), MSC(0), HEA(5), OT(0)	16
Daulatpur (Monohardi)	HR(2), IS(3), SD(4), MSC(1), HEA(15), OT(0)	25
Chalakchar (Monohardi)	HR(6), IS(2), SD(4), MSC(4), HEA(9), OT(0)	25
Bashgari (Raipura)	HR(4), IS(3), SD(2), MSC(2), HEA(11), OT(0)	22

HR: Human Resources, IS: Infrastructure/Supply & Logistics, SD: Service Delivery, MSC: Monitoring, Supervision & Coordination, HEA: Health Education & Awareness raising, Community mobilization, OT: others

TBA orientation organised in 9 Model Unions

SMPP developed education materials (poster and card) on neonatal danger signs and harmful practices. In order to introduce the new materials as well as to disseminate the message of essential newborn care, the Project organised 1-day orientation for Traditional Birth Attendant (TBA) in 9 Model Unions in collaboration with RADDAMCH-FP Centre. Around 20 TBAs, actively assisting delivery, were selected in each Model Union. In total, 188 TBAs attended the Orientation. The Project is planning to conduct a follow-up survey to assess the changes in participants' knowledge and practice.



Orientation was provided using various visual education materials, such as posters, flip chart, and infant dummy for demonstration.

Raipura Char C-SBA Trainees successfully passed Mid-term exam

A batch of private Community-based Skilled Birth Attendant (C-SBA) training is ongoing at LAMB hospital in Dinajpur District since December 2008. SMPP sent 11 trainees from 8 Unions at Char area (hard to reach area) in Raipura Upazila, Narsingdi. Because of the geographical condition, only limited health workers are available in Char area, therefore, SMPP initiated the first trial in Bangladesh creating private C-SBA recruited from local women who do not have any medical background. Since the training began, several project members visited the training centre to monitor the progress of the training. At the beginning of the training period, the trainees



Trainees from Raipura Char made good progress in C-SBA training at LAMB hospital

expressed their excitement to learn new things, however, they also informed the problems related to food, commodities and medical treatment, etc. In consultation with LAMB management, those problems were minimized. At the end of April, SMPP received good news that all trainees passed Mid-term exam with excellent marks. Now trainees are placed at the rural Health Care Centres to have more practical experience on the job training. The training program will last until mid June 2009. If the trainees pass the final exam, they will be registered as C-SBA by the Government and is expected to provide safe delivery service in the remote area.

Hospital Improvement Activities

Infection Prevention Practice (IPP) training

The project in collaboration with Engender Health developed curriculum for infection prevention practices and organized training (2-day long in 3 batches) at District Hospital in March. The objective of this training was to improve the infection prevention practices at the hospital that includes proper hand washing, decontamination (with 0.5% chlorine solution) and sterilization of equipment and waste disposal. In total 80 hospital staff

(doctors, nurses, cleaners, health education officer, ward master, aya etc.) attended the training. Follow-up visit showed some visible changes, such as the staff are using chlorine solution at emergency, OT and delivery room, staff are sterilizing equipments properly and using safety box to dispose syringes. SMPP is now planning to organise the same training at the UHCs.



Demonstration of disinfection

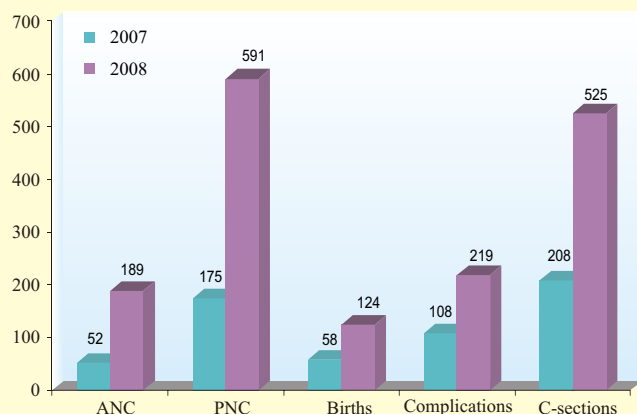
Delivery Room Renovation at Raipura, Polash, and Belabo Upazila Health Complex

As a part of hospital improvement intervention, SMPP has taken initiative for renovation of delivery room and operation theatre (OT) of the selected Emergency Obstetric Care (EmOC) facilities in Narsingdi. Up to 2008, OT of District Hospital, Raipura and Polash UHC were renovated, and provided necessary equipments for providing CEMOC services. In the first quarter of 2009, delivery rooms of Raipura, Polash and Belabo UHC were renovated. The renovation work includes reconnecting electric line, repairing of bathroom, washing basin, and laying tiles on the walls. Now these facilities are expected to increase the utilisation and providing quality delivery assistance service.

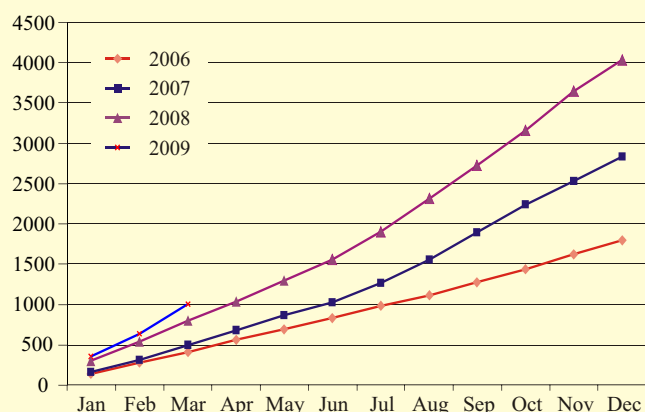


Before and after renovation of Polash UHC

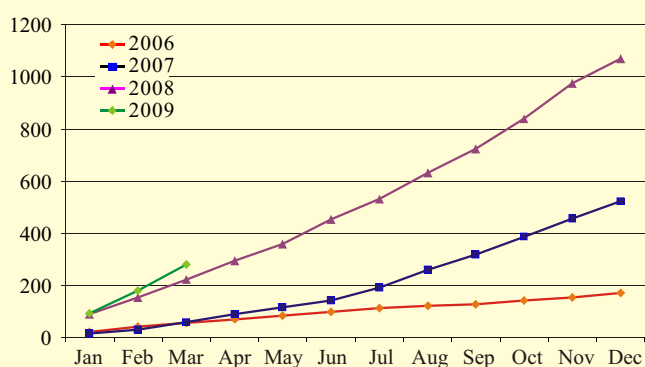
Percentage increase in utilization of services in 2007 and 2008 compared to 2006 (Public Facilities)



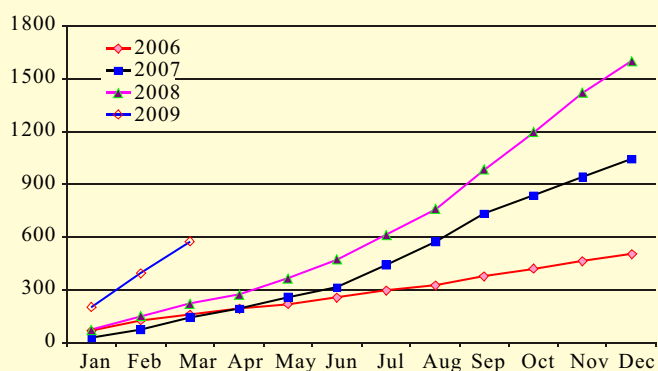
Cumulative no. of births conducted at GoB facilities by month: 2006 - 2009



Cumulative no. of C-sections done at GoB facilities by month: 2006-2009



Cumulative no. of complications treated at GoB facilities by month: 2006-2009



Facility based data of all GoB (Government of Bangladesh) hospitals in Narsingdi were analyzed for 2008 to assess the changes in utilization of services. The data indicates that MNH related services, such as ANC, PNC, institutional delivery, complications treated, and C-sections at those facilities have increased substantially compared to 2006.

Maternity Class started at MCWC

In the training follow-up workshop in June 2008, the former participants of midwifery training in Japan decided to organise Maternity Class session (a group health education session for pregnant women and their family) as a training follow-up activity.

Since then, the participants had monthly meeting for necessary preparation, such as developing module and posters. In March 2009, the first Maternity Class was held at the waiting space in MCWC, Narsingdi district. The Maternity Class consisted of

three parts, namely pregnancy, delivery and post-partum period, and each part took around two hours including Maternal Exercise. The Maternity Class, therefore, was conducted on three separate days (15th, 19th, and 22nd March, 2009). Each Class had 15-20 participants, they particularly enjoyed Maternity Exercise which is probably introduced first in Narsingdi. Several participants requested to organize this kind of group health education session regularly at MCWC. Now the former participants of midwifery training in Japan are planning to organize Maternity Class in their own responsible areas.



First performance of Maternity Class held at MCWC



Maternity Exercise

National Workshop on Community Mobilisation in Dhaka

SMPP organised a national workshop "Towards Equitable Health Systems through Community Participation: Community Support System and community Clinic" on 13th April at Bangladesh China Friendship Conference Centre in Dhaka. Mr. Shaikh Altaf Ali, Honable Secretary, MoHFW (Chief guest), Mr. Md. Abdul Mannan, Joint Chief, Planning, MoHFW, H.E Mr. Masayuki Inoue, Ambassador of Japan, Prof. Dr. Hosne Ara Tashmin, Additional Director General of Health Services, Mr. Md Abdul Qayyum, Director General of Family Planning, Ms. Nobuko Suzuki Kayashima, Chief Representative, JICA Bangladesh were invited as guest.

SMPP recently developed an Operational Guideline on Community Support System (CmSS) for further replication of this community mobilisation activity. The Workshop, therefore, aimed at introducing the newly developed guideline as well as sharing the Projects' (SMPP and other) experience to discuss how community mobilisation activity could contribute improvement of local health status. In total, more than 250 participants from MoHFW, NGOs, development partners, local governments, and selected community members attended the workshop from Dhaka, Narsingdi and other districts.

After the speech of the guest of honour, the concept of CmSS and the newly developed guideline were introduced to all participants. The experiences of community mobilisation activities at Chowgacha UHC in Jossore, Bramanpara Community Clinic in Comilla, Lalmonirhat Community Clinic in Dinajpur, SMPP in Narsingdi were shared in the plenary session with oral presentation by the representatives of each programme. In response to the presentations, the participants openly discussed their own activities, current local situation, and problems they face.

The open discussion continued after lunch. Through participatory discussion, the participants made various suggestions and recommendations concerning local resource mobilisation, accountability, governance, and sustainability of community mobilisation activity. Since several MoHFW senior officials attended the Workshop, it was an opportunity for community representatives to have direct dialogue with central level officers on their local situation of health services. The Workshop was closed by Prof. Dr. Shah Monir Hossain, Director General of Health Services with his remarks. He concluded the Workshop by appreciating CmSS as an effective approach for community participation in health care and emphasised on working all stakeholders together for further improvement.



Visitors

The following visitors visited Narsingdi project site during January-March, 2009. It is notable that SMPP arranged donor agency visits in this quarter for information sharing among MNH stakeholders.

Government of Bangladesh:

- Joint Chief and Deputy Chief, Planning, Ministry of Health and family Welfare
- Director General Health Services
- Director General Family Planning and Director MCH

Development partners:

- DP Consortium group (EU, Aus AID, UNICEF, UNFPA, GTZ, SIDA) UN MNH joint program staff
- World Bank MCH Advisor from Washington

CARE Bangladesh:

- CARE MNH advisor and regional advisor
- CARE Good will Ambassador (Super Model from USA)

Other:

- JICA partnership seminar group



SMPP organised site visit of development partners

Welcome New JOCV in Monoholdi



Ms. Sayaka Oka, newly assigned JOCV member, arrived at Monoholdi on 15th April. Her major in University was lifelong education. She is particularly interested in health education activity for women in the community.

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