

ANNUAL PROGRESS REPORT

Year: 2017-18



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Prologue

Dear Friends, Well Wishers and Senior Colleagues,

I am pleased to present our annual report for the year 2017-18. This report will give a glimpse of our major programmes and activities carried out during this year. PRASAR with the support of The Hans Foundation have successfully implemented "Overall Women & Adolescent Health Care Programme" during the year in 88 villages from 21 GPs of Banki, Dewa, Masauli and Ram Nagar Blocks of district Barabanki (UP). This programme evidently sought to ensure maternal and adolescent health care through awareness and education and strong services delivery system having implication for substantial reduction in infant mortality rate (IMR) and maternal mortality ratio (MMR).

PRASAR has been engaged in strengthening the small organizations and women & adolescent girls groups for bringing about positive change in the society where the marginalized community can have access to the social and economic entitlements meant for them. The interventions are participatory so that the demand for development comes from the affected community as a result strong Mother & Adolescent groups at GP level in the operational villages in district Barabanki have emerged. For achieving the tangible and sustainable development, the target groups are to be empowered for availing opportunities and asserting their rights and entitlements. We further have taken initiative to strengthen various decision making bodies and committees at GP level such as- Village Health, Sanitation and Nutrition Committee (VHSNC), School Management Committees (SMC) and Matritwa Samiti for their effective functioning. We have also focused on building the capacities of our field level staff members through various training and orientation programs. Also, strategically we like previous year have planned to phase out 6 previous villages and accordingly phase in 6 new villages in the operational villages of district Barabanki.

We continued our partnership with SBI, Life Insurance, Lucknow this year also for developing the infrastructures of the government primary and Junior High Schools in operational blocks with kind support of SBI Life Insurance, we provided Table and Chair to 3975 children in 40 govt schools from blocks Banki, Masauli. We also have been working with UPVAN network to promote male participation in family planning.

*We are all set to work in all the 15 blocks of district Barabanki to promote safe abortion with support of **Ipass Foundation** and to implement Girls Icon Program which aims at promoting adolescent girls' health and education rights with **Milaan Foundation** respectively in coming years. Strategically more focuses have been laid on precautionary measures along with preventive ones. For this educating adolescent girls and young women who are the future mother about reproductive health, personal cleanliness and hygiene and help them develop communication and decision-making skills so that may lead a healthy reproductive lives. This will help to reduce the major hindering in the way of women empowerment and healthy growth of their children especially girls.*

I must place on record my appreciation for the efficient and committed performance of PRASAR staff and executive members. I owe my great and deep attitude to my team members stood by the organization in the pursuit of our mission.

Finally, I take this opportunity to thank our financial supporters, The Hans Foundation, New Delhi and SBI, Life Insurance who have all extended the financial and the moral support and have become partners in our endeavours.

Thanks.

*Shishupal
Secretary*

About PRASAR

Introduction

PRASAR a Lucknow based non profit Non Governmental Organization has been working selflessly with dedication and commitment to improve the lives of the marginalized group in the rural areas of Banki block of Barabanki district since 1998. The initial activities included information dissemination on local self – governance, mobilizing community for active participation in local level development and primary education especially of the girl child and marginalized sections of the community. It was in 2003 that PRASAR formally came into existence with the above thematic areas in focus. PRASAR envisages a society where the marginalized and weaker sections of the community have an opportunity to Develop and Enhance their abilities and capacities without discrimination of age, caste, class, gender and race so that they are able to take active part in the development process. PRASAR works in the areas of Health, nutrition, Early Childhood Care and Development, Education and Livelihood. PRASAR believes in Inclusive development and mobilization of women, girls Scheduled Castes and other marginalized communities in critical areas of health, nutrition, Early childhood care & development education and livelihood. PRASAR is presently working in Banki, Dewa, Masuali and Ram Nagar Development blocks of Barabanki with support of The Hans Foundation, New Delhi to ensure the overall health care to women and adolescent health. We continued our partnership with SBI, Life Insurance, Lucknow this year also for developing the infrastructures of the government primary and Junior High Schools in operational blocks with kind support of SBI Life Insurance, we provided Table and Chair to 3975 children in 40 govt schools from blocks Banki, Masauli. We also have been working with UPVAN network to promote male participation in family planning.

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PRASAR has a great deal of working experiences in the fields of health & nutrition, early childhood care and development, education and livelihood. PRASAR has worked in these areas from the year 2011 to the year 2015 with PACS Programme (A DFID Programme) in district Pratapgarh. However, the organization has expertise working in the areas of Health & Sanitation and Nutrition, Early Childhood Care and Development. PRASAR has already been working in Banki & Masuali Development blocks of Barabanki with support of The Hans Foundation, New Delhi since the year 2011 to ensure Maternal and Adolescent Health care through awareness and education and strong services delivery system having implication for substantial reduction in infant mortality rate (IMR) and maternal mortality rate (MMR) in 127 villages of Banki, Masuali, Deva and Ram Nagar Blocks in Barabanki District of U.P. It was initiated in June 2011 with the support of Hans

Foundation, New Delhi. The programme evidently sought the service delivery system involves Mobile Medicare Clinic with couple of lady gynaecologists, four staff Nurse, coupled with the provision of pathology test and free distribution of medicines. Official programmes with a qualified and experienced team members

Our Mission

Toward 'Social Democracy': 'One person one value'

It guides us to work for change, for supporting the excluded, poor and marginalized sections of the communities so as to enable them to meet their immediate needs of health, nutrition, education and livelihood and long term security.

Our Vision

Enabling people to end poverty

It is possible to change the human system and structure by working together to achieve a common goal of ending inequality and poverty for the common good.

Our Goals

Enabling and supporting excluded, poor and marginalized communities to avail opportunities and face challenges

- Extending the provisions of essential services like health care-Reproductive and Child Health in particular, Nutrition, Education-meticulously of girl child, good governance etc.to the poor and marginalized people.
- Creating conditions sustainable livelihood by developing necessary skill and know-how, facilitating access to capital and establishing market linkages.
- Addressing inequality and safeguarding earth's finite resources.

Our Objectives

- Achieving greater inclusion of poor and marginalized communities through the provisions of services like health, nutrition, education, credit, infrastructure etc. for reducing inequality in the socio-economic systems.
- Enabling these communities to access the basic rights and entitlements
- Seeking to pursue work in social and economic justice in livelihood etc., extends to concern like climate change, environment sustainability etc.

Existing Programme Focus

- Health & Sanitation, Nutrition, Early Childhood Care&Development(ECCD)

- Education- Primary education with focus on the girl child in general and those belonging to weaker and marginalised sections of the community in particular, strengthening School Management Committees.
- Empowerment of Excluded communities for livelihood generation and realisation of official rights and entitlements.
- Inclusive development and mobilisation of women, Scheduled Castes and other marginalised communities in critical areas of health, education and livelihood.

Geographical Area

PRASAR is currently working in Banki&Masuali Development Block of Barabanki and has worked in block Rampur, Sangramgarh in Pratapgarh district in the state of Uttar Pradesh from the year 2011-year 2015 with support of PACS Program (DFID)

Projects undertaken by the organisation

1. *Empowering Socially Excluded Communities (Women, Muslims and SC) to gain access to Livelihood opportunities and ensure entitlement of Basic Rights to lead a dignified life.*

The organisation has been implementing this project since 15th September 2011 with the support of Department for International Development (DFID-PACS) in 100 villages of block Rampur Sangramgarh of Pratapgarh District in U.P. The basic idea is to enable the target communities- Women, Scheduled caste and Muslims- to access livelihood opportunities and realise rights and entitlements pertaining of education, health, nutrition and education. The programme covers 2500 households in the span of 4 years.

This intervention is an essay of the idea of 'enabling'-being defined as freedom-freedom to take decisions from among the existing options. Our programme builds on the premise that economic and social rights essential factors in enhancing 'enabling' faculties of poor and, by implication, improve their quality of life, as well as the quality of their freedom

2. Hepatitis C Project

Implemented Hepatitis C project in 9blocks of district Barabanki with support of Mylon Foundation New Delhi

3. Ensuring Access of Safe Drinking Water

Implemented ensuring access of safe drinking water and sanitary disposal in blocks Banki and Masauli with support of SBI Life Insurance and covered a population of 3257

4. Promotion of male participation in family planning

Working with UPVAN network to promote male participation in family planning

5. Maternal and Adolescent Health Care Programme:

It was initiated in June 2011 with the finding and support of The Hans Foundation in 121 villages of Banki&Masuali Block in Barabanki District of U.P.However,since last

years we scaled up our operation in two more blocks Dewa and Ram Nagar covering 88 villages from 21 GPs. The programme evidently sought to ensure maternal and adolescent Health care through awareness and education and strong services delivery system having implication for substantial reduction in infant mortality rate (IMR) and maternal mortality rate (MMR). The service delivery system involves *“Mobile Medicare Clinic with a Lady Gynaecologist, four staff Nurse, every gram panchayats of One-Swasthya Sakhi coupled with the provision of pathology test and free distribution of medicines. Official programmes.”*

Major Activities under each project undertaken

1. Maternal and Adolescent Health Care Programme:

PRASAR with the financial support of The Hans Foundation has been implementing **Overall Women & Adolescent Health Care Programmes** since June 2011 in 127 villages of Banki and Masauli Blocks of district Barabanki (UP). However, since last year we scaled up our operation in two more blocks Dewa and Ram Nagar covering 88 villages from 21 GPs

The programme evidently sought to ensure maternal and adolescent Health care through awareness and education and strong services delivery system having implication for substantial reduction in infant mortality rate (IMR) and maternal mortality ratio (MMR). The service delivery system involves *Mobile Medical Health Services with a Lady Gynaecologists, four staff Nurse, every Gram Panchayat of One Swasthya Sakhi coupled with the provision of pathology test and free distribution of medicines.*

Coverage of the Programme:

Particulars	Total Coverage till date	Caste Composition		
		SC	OBC/Muslims	General
No. of Villages (Banki/ Dewa Block)	43	24	58	28
No. of Villages (Masauli/ Ram Nagar Block)	45	25.15	58.23	16.61

Activities Carried out during the year: 2017-18

PRASAR conducted the **Base line survey** in 6 new villages which include villages-Godaha, Devakaliya, Devagaon and Ajagana of block Dewa and Gurala, Nasirnagar and Hetampur of block Masauli, district Barabanki (UP) phased in the Financial Year 2017-18 with the objectives to know the knowledge, attitude and behaviour of the women & adolescent girls in particular and other community members in general related to maternal, Adolescent and child health. The major findings of the base line survey are as below-

- It precisely covered 2,656 households encompassing a population of 15198. The

majority of the population in these villages belong to OBC which is 53%, with 37% SC community, 18% Muslim whereas 2% with the population of general category.

- Majority of the population(52%) belong to the Below Poverty Line(BPL)
- Out of total population of 15198,37% are SC,53% are OBC,18% of them belongs from Muslim community whereas only 2% of them belong to the general category
- Reproductive health related issues are very common. Out of these,28.65% contacted to doctor for treatment long before
- 17.65% women/adolescent girls from excluded communities had bad experiences whereas 32.17% of them experienced very bad with respect to the doctors in this regard in getting treatment
- 63.25% community do not access the services of the government health department because of the neglecting attitude of the authorities while 13.28% of them had been the victim of the discrimination
- 78% population expect to get all the health services from HANS project/PRASAR
- Majority of the population have no trust upon the government services that is why only 8.5% of them wanted to get all the health services from government health department while only 3.67% wanted to get services related to maternal and child health from government health department
- Only 3.67% women/adolescent girls contacted to qualified gynaecologist/lady doctors for treatment of reproductive health problems while majority of them either contact to quakes (40.28%) or live with their problems (38.82%)
- Male members provide their support only in 27% families in taking the women doctors for check up and treatment
- In case of serious illness only 13.39% women are taken to the hospital in the city
- In case of sudden labor pain, only 42% families call for ambulance while rest of them rely either on ASHA/ANM, TBAs or neighbours.
- 33.24% people go to government hospital for delivery,12.31% go to the private hospital,16.47% births are attended by ASHA or ANM whereas 37.98% deliveries take place at home with or without help of Traditional Birth Attendants or Quakes
- Only 13% participate in VHND while 52% never got any help from VHNDs
- The rate of complete immunization is only 21%,Partial immunization is 43%,No immunization is 15.2%
- A majority of the adolescent girls(54.2%) are not using the sanitary pad
- Only 9.8% families have the availability of tricolour foods
- 13.21% of the families want no more than three children no matter whether boys or girls, 17.97% wanted the boys necessarily,for 21.2% of them the number of boys not matter but



they would not need more girls whereas 47.72% of them wanted the boys as in their opinion the boys are the assets for the family but the girls are not

- Only 12.21% of the families are of the opinion that both the boys and girls are equal.

PRASAR organized 773 *Mobile Medical Health Services* in 21 project operational Gram Panchayats and covered 37438 pregnant & lactating mothers and Adolescent Girls during the year

All the 37438 beneficiaries covered through the mobile health services have been provided required medicines free of cost followed by the counselling services.

This is basically to cater the needs of the target community at their door steps and providing better health facilities especially to pregnant and lactating mother and children; and adolescent girls. This facility is well equipped with health care unit comprising Gynaecological Specialist Doctor, Staff Nurses, *Swasthya Sakhis* and necessary health equipment's to give immediate relief to the poor women in remote gram Panchayats.

The health counselling have been the major part of these health camps-

- The weight of all the Pregnant & Lactating Mothers and Adolescent Girls was taken and the status of them was shared with each of them
- Weight of the under five years children was also taken and the grade of the malnourishment was shared with the respective mothers/Care Givers with necessary suggestions/advices
- The PWs and Lactating Mothers were made aware of importance of the IFA Tablets which are provided by ANMs
- The status of the Infant deaths, Still Birth and maternal deaths were shared with the mothers, adolescent girls and others with reasons of the same to sensitize them on the issue
- Importance of Early & exclusive Breastfeeding, Proper feeding practices, Caring practices and hygiene practices were discussed with the visitors during the camp



- The hand washing practices was focused and demonstration of the same was done with the girls in particular
- The pregnant Women and Lactating Mothers were encouraged to visit the VHNDs and get their children weighed each month with support of ASHSA, Anganwadi and ANM

Like the previous year, the *Mobile Medical Health Services* have followed by the follow-up interventions which includes: counselling of women associated with high risk pregnancy and lactating mother making them and their family members respond to the advice given by doctor; consumptions of medicines and food supplementations; taking care of new born babies etc. is pertinent for the success of taking up curative measures undertake through Mobile Medical Health Services.

Diagnostic Tests (Haemoglobin) of 1026 pregnant&lactating mothers and adolescent girls have been done during the year

295 Awareness meetings with Pregnant Women and Lactating Mothers have been conducted and covered 4307 mothers directly. The participants were made aware Signs and symptoms of anaemia and intake of



IFA tablets to combat the anaemia, importance of breastfeeding exclusively, Services of government's ambulances-102 for ensuring the deliveries in hospitals only, TT vaccination and its importance, Government health programs and schemes, Construction of toilets and its use under SBM, Preparation for

institutional delivery and JSY, Sanitation and hygiene issues were discussed, Signs and symptoms of risks involved during the pregnancies, Janani Suraksha Yojana, Mission Indradhanush

250 Awareness meetings with adolescent girls have been conducted with 7121 participants during the year. The issues related to the Personal hygiene practices during the menses, access of safe sanitary disposal particularly for the girls and women is important was highlighted, Use of mosquito nets to protect from malaria, Marriage of girls only after the age of 18 years, Preparation of indigenous sanitary napkins, its uses and disposal, Importance of inclusion of tricolour foods, Orientation on preparation of the sanitary napkin, Importance of TT immunization

Four Trainings-each for one day have been conducted. First with 28 participants(including 6 ASHA),second with 26 project staff, third with 26 project staff while fourth with 24 project staff respectively were organized during the year. Development of Pregnancy, Child Care Practices (thru film show), Care during pregnancy, PNC and Maternal Health(thru film show) were the major parts of the agenda of the training, Sharing of the major highlights of the base line survey report with recommendations, elimination of malnourishment and roles and responsibilities of decision making bodies such as Matritwa Samiti, VHSC and SMC were the major parts of the agenda, Care of child immediately to his/her birth, signs of healthy child and his/her care, signs and symptoms of risks involved in the neo natal child were the major parts of the agenda which were covered, Dangerous sign of Neo Natal Child, Care of the Malnourished Children, Health and Educational status of the adolescent girls, Female feticide and our roles, SWOT Analysis were the major highlights of the trainings



Follow Up of High Risk Pregnancies have been done on regular basis throughout the year. EDD overdue, anemia, swelling in the legs, night blindness, high blood pressure, excessive bleeding, fluid discharge, MTP etc were the major causes of the follow up. As a result of continue efforts in mobilization and awareness, many of the high risk women visits to the district hospital by their own for further check up and treatment. Average 5-6 home visits have been made to the high risk cases by the concerned Swasthya Sakhis in a month in all the three project operational blocks

Actively involved in strengthening the VHNDs in the project operational GPs as a result 5106 Pregnant Mothers, Lactating Mothers and Adolescent Girls visited in VHNDs during the reporting year from Banki, Masauli and Dewa operational blocks. The major points of discussion during the VHNDs have been Immunization schedule -Mission Indradhanush, Four key messages were delivered to the mothers/Care givers in general to ensure the complete immunization of the children, The pregnant women visiting the VHNDs were made aware of the Pregnancy Aid Yojana Scheme and importance of first 1000 days of life in nutrition, Due list of children age 0-2 years was prepared in advance to ensure the immunization of all the children. The measurement of weight of mother along with the child and BP of the mothers was taken by ANM. The blood test was also done whom it required. The distribution of the supplementary nutrition was ensured during the VHND, Use of sanitation was focused, Health, Hygiene and Nutritional Education were provided to the mothers during the VHNDs

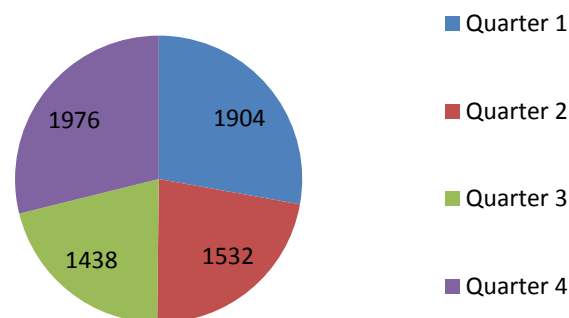


Monthly review meetings were conducted each month with project staff in which the progress made during the month with challenges and learning were reviewed and planning for the next months were done accordingly

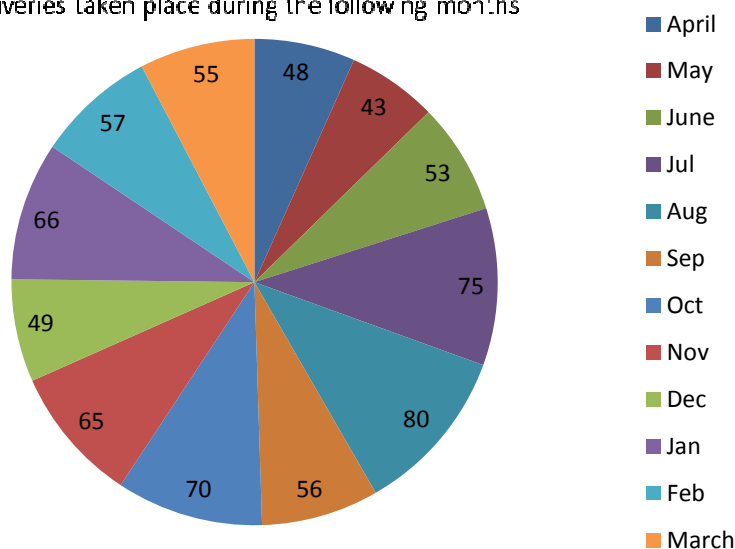
Major Achievements

- 6850 new registration of the pregnant & lactating mothers, STD/PID, RTI cases and general patients have been ensured for check up and treatment during the quarter. The quarter wise registrations of new cases have been shown in the pie diagram.
- 145 complicated cases have been referred during the year for further checkups and treatment.
- 518 follow up visits of high risk pregnancies were made and reached to 2590 pregnant women through these visits. Counselling services were provided during the visits and 158 complicated cases were referred to the district hospitals
- The cases of institutional deliveries have increased gradually up to 97% from 93% during last 12 months
- Rate of complete immunization children of age group 0-2 years have improved up to 75% -80%
- Monthly review meetings were conducted each month with project staff in which the progress made during the month with challenges and learning were reviewed and planning for the next months were done accordingly
- 571 Oral Contraceptive Pills and 1808 condoms have been distributed during the year during the Health camps and awareness meetings.
- Total 2154 children and 10264 pregnant women have been immunized during the year

Quarter wise status of new registration during the year



No. of Deliveries taken place during the following months



- Counselling sessions have been initiated during the camps. Importance of immunization has been explained and four key messages of immunization have been delivered during the camps which has resulted increased in number of fully immunized and complete immunized children
- The mothers, Care Givers and Adolescent Girls have been capacitated on GMC. The mothers/Care Givers mobilized themselves to weigh their children and know the status of malnourishment
- Conducted a 15 days long campaign during the reporting period on *Swachhata Abhiyan* to create mass awareness among the communities in project operational villages regarding Sanitation and Community Led Total Sanitation (CLTS). Oaths were also taken by the community to keep their surrounding clean.
- On the occasion of *Gandhi Jayanti* on October 2, 2017, meetings with the members of VHSCs were organized in which the components of hygiene and sanitation were highlighted. The proper utilization of untied fund was also discussed
- The Swasthya Sakhi participated in ODF village campaign in village Amadaha of block Masauli and made the community aware on use of the toilets
- The Swasthya Sakhis participated in the Indradhanush campaign in all the 21 project operational villages. Due list of children of 0-2 years were prepared and the immunization of the left out children was ensured
- 25 Male Champion for Family Planning from villages-Mohiuddinpur, Chacherua and Nigari from Banki block and from village-Khijirpur from Dewa block have been identified and deployed for creating awareness among the community on Family Planning among the male counterparts
- A Family Planning Awareness Camp with view to increase the male participation in the process of family planning was organized at the CHC in which the Medical Superintendent, ASHA, ANMs and Family Planning champions participated
- Conducted a week long campaign during the reporting period on Swachh Bharat Mission to create mass awareness among the communities in project operational villages regarding Sanitation and Community Led Total Sanitation (CLTS)
- The adolescent girls are organized in groups in each of the project operational GPs. They have started to raise their issues collectively. They come forward to ask the queries with doctors and project staff frequently regarding issues of their health and hygiene
- The no. of couples using contraceptive measures have increased gradually over the last three year
- The women are more sensitized towards the health and proper care of the below five years children. They now by themselves come forward to get their children

weighed during VHNDs and Health Camps and to know the status of grade of malnourishment of their children.

- The rate of demand of services by the mothers, care givers and other community members have significantly improved

2. Development of Infrastructure in the government schools.

We continued our partnership with SBI, Life Insurance, Lucknow this year also for developing the infrastructures of the government primary and Junior High Schools in operational blocks with kind support of SBI Life Insurance, we provided Table and Chair to 3975 children in 40 govt schools from blocks Banki, Masauli..



3. Promotion of male participation in family planning.

We also have been working with UPVAN network to promote male participation in family planning in eight blocks of the operational district Barabanki



Other Activities

World Breastfeeding Week

During “*World Breastfeeding Week*” from 1-7 August, 2017, the awareness meetings were organized in villages-Mohiuddinpur, Godaha and Nainamau from blocks Masauli/Banki in which 82 pregnant and lactating mothers participated actively. The specific theme of the year “*Sustaining Breastfeeding Together*” was focused. Promotion of early breastfeeding and exclusive breastfeeding and discouraging the bottle feeding were also the major highlights of the meeting during the week



Promotion of traditional celebration of Goad Bharai

The Goad Bharai celebration was done at the ICDS centres of all the operational villages during the year with the pregnant mothers in eighth month of their pregnancies in which proper food and care habits of pregnant women were promoted



Eye Check up Camps

6 *Eye check up camps* were organized in GP-Naseer Nagar and Hetampur in block Masauli and GPs-Ajagana, Godaha and Devakaliya in block Deva in which 564 women and men were provided eye check, required medicines and goggles free of cost.



Promotion of Health Rights & Family Planning and responsibilities of male counterparts

In order to promote the *Health rights and Family Planning among the target community and set & increase the participation of male counterparts in entire process*, a meeting with higher authorities of CHC Jahangirabad, health functionaries, ASHA, Anganwadi, ANM and

staff members was conducted by the

organization. In the meeting It was shared by the organization that only women are the central part in family planning/birth control. The participation of the male counterparts in this process is almost nil. In consultation with all the concerned stakeholders, it was decided that the male champion will be developed and trained in each of the operational GPs. As a follow up, 35 male champions were identified and trained who have been involved actively at GP level to promote health rights, Family Planning among the eligible couples and made the male counterpart aware their roles in reproductive health and family planning.



EK Sath Rashtriya Abhiyan

In order to promote the participation of the male counterparts in the process of family planning and maternal health, a campaign namely “*Ek Sath Rashtriya Abhiyan*” was launched during the year in 27 villages of operational blocks ensuring the active participation of identified and trained male champions. During campaign meeting with media, meeting with community members at village level, Wall Writing, Signature



Campaign, orientation of the male champions, meeting with health authorities and functionaries at village level were conducted. Apart from these activities, posters and pamphlets were developed and distributed among the communities for effective dissemination of the messages among the masses.

Challenges

The followings have been the major challenges faced during the year:

Major Challenges	Mitigation
Rumours were created in the new villages regarding the credibility of the organization	Meetings with the influential people and other stakeholders were conducted and the achievements of last six years in the old operational villages accomplished were shared
Mobilization of the community in newly phased in villages	The training and intensive handholding support to the newly appointed Swasthya Sakhis have been done
The women and adolescent girls are not aware of reproductive health and use of napkins during the menses in newly phased in villages	The women and adolescent girls are being made aware of these issues on regular basis
Early marriage of the girls still in practice in the project villages	Made an effort to create mass awareness during the meeting. Two early marriages of adolescent girls in village Medhia was stopped due to efforts made by the project
One infant death, two under five deaths, two maternal mortality and five still births in the month of August 2017 have been embarrassing and one of the major challenges for the project	Capacity building of the field staff and intensive home visits to ensure the access of the early health services have been focused
Low/No participation of the male counterparts in the process of family planning	Awareness meeting with support of higher health authorities was conducted at CHC, Jahangirabad to ensure the participation of male in family planning initiatives. The Male Family Planning Champions have also been identified and trained
No ASHA has been appointed in village Naseer Nagar from health department which affect the mobilization of the beneficiaries during the VHNDs and other government programs	The Swasthya Sakhi has coordinated with ICDS Worker to mobilize the community

Sign of Changes

1. Pratima

Efforts made by project ensured Motherhood after 7 years of marriage

Mrs. Pratima w/o Mr. Golachi resident of village- Amadaha (Hamlet-Kotawa) block Masauli belongs to an extremely poor family. Her husband picks up labor work with low income quite insufficient to meet even the basic needs of the family members. Mrs. Pratima was married seven years back but even after seven years of her marriage, she could not conceive due to which she in particular and other family members of her family in general would be very bothered and had become hopeless. Once when the Swasthya Sakhi of the project visited her home, Pratima shared all the ins and outs of her problem and noted down. Swasthya Sakhi advised her to visit the next health camps in her village and accordingly she visited the next health



camps where she shared with the doctor that she had gone for several checkups and treatment during the last seven years but all the efforts made so far went in vain and she could not conceive. However, the project doctor checked her up thoroughly and provided the required medicines followed by proper counseling as well. The project staff was asked to visit her regularly to ensure that she takes the prescribed medicines regularly and proper care is provided by her in-laws. Having taken the medicines from the project's health camps for seven months and close care by the concerned Swasthya Sakhi, a gala day came when Mrs. Pratima shared few of the symptoms of pregnancy with the Swasthya Sakhi during her home visit. Therefore, the pregnancy test of Pratima was carried out during the next health camp in the village and it was found that she was pregnant. She and her husband were very happy. She was also enrolled with the ANM and was immunized with TT1 vaccines. Mrs. Pratima and her husband Mr. Golchi are thankful of the project and efforts made by the concerned Swasthya Sakhi.

2. Manju Devi

Efforts made by project ensured Motherhood after 7 years of marriage

Mrs. Manju, 23 years old w/o Mr. Dharmendra Kumar resident of village-Gadaipur belongs to a poor SC family. Her husband Dharmendra Kumar, 25 years old, takes up labor work with low income quite insufficient to meet even the basic needs of the family members. Mrs. Manju was married seven years back but even after seven years of her marriage, she could not conceive due to which she in particular and other family members of her family in general would be very bothered and had become hopeless. Once when the Swasthya Sakhi of the project visited her home, Manju shared all the ins and outs of her problem and noted down. Swasthya Sakhi advised her to visit the next health camps in her village and accordingly she



visited the next health camps where she shared with doctor that she had gone for several checkups and treatment during last seven years but all the efforts made so far went in vein and she could not conceived. However, the project doctor checked her up thoroughly and provided required medicines followed by proper counseling as well. The project staff was asked to visit her regularly to ensure that she takes the prescribed medicines regularly and proper care is provided by her in laws. Having taken the medicines from project's health camps for seven months and close care by the concerned Swasthya Sakhi, a Gala day came when Mrs.Manju shared few of the symptoms of pregnancy with Swasthya Sakhi during her home visit. Therefore the pregnancy test of Manju was carried out during the next health camp in the village and it was found that she was pregnant. She and her husband were very happy. She expressed " Bahut Dawa Laen Raha,Jadi Buti Wali Aurat Ka Bhi Dikhain Raha Lekin Kauno Fayedda Nahi Bhawa Paraantu PRASAR ke Camp Ke Dawai Se Hamar Goad Bhari Gaye(I took medicines for a long, even consulted to a woman who gave herbal medicines but no result produced but I enjoyed the motherhood only after getting treatment from the health camps of PRASAR) She was also enrolled with the ANM and was immunized with TT1 vaccines.Mrs.Manju and her husband Mr. Dharmendra Kumar thankful of the project and efforts made by the concerned Swasthya Sakhi.

3. Manju Devi

After seven years of the marriage enjoyed the Motherhood with efforts of the project

Manju Devi, 23 w/o Dahrmdendra Kumar 25 years old is resident of village/Gram Panchayat Gadaipur under Masauli block. She belongs from a Dalit community of average income with the agricultural work as a major source of income. Ms. Manju Devi was married seven years back but was deprived of motherhood. She ran from pillar to post-approached the quakes and qualified doctors both to get conceived but did not get through. However, once she was brought under the treatment of the project's health camps, she was provided counseling and emotional support by the project on regular interval. She was taken to the health camps for regular check up and keeps an eye on her health and development. As a result of concerted efforts she was found pregnant in a pregnancy test conducted by the doctor of the health camp. She was also enrolled with the ANM and was immunized with TT1 vaccines followed by regular ANC's. She was also provided the supplementary nutrition and the IFA tablets in coordination with ICDS worker and ANM of her village. Apart from this she as well as her family members was made aware and motivated for the institutional delivery only. As a result she on 23.02.2018 gave birth of a healthy male baby of 3.5 Kg and both the mother and child are hale and healthy. The family members express their gratitude and thanks for everything the project did for healthy and safe delivery of the child after a long span of seven years of the spouse.



4. Renu Devi

After six years of the Marriage enjoyed the Motherhood with efforts of the project

Renu Devi, 25 w/o Rakesh 28 years old is resident of village/Gram Panchayat Devakaliya. She belongs from a Dalit community of meager income with the labor work as a major source of income. Ms. Renu Devi was married six years back but was deprived of motherhood. She ran from pillar to post approached the quakes and qualified doctors both to get conceived but did not get through. However, once she was brought under the treatment of the project's health camps, she was provided counseling and emotional support by the project on regular interval. She was taken to the health camps for regular check up and keeps an eye on her health and development. As a result of concerted efforts she was found pregnant in a pregnancy test conducted by the doctor of the health camp. She was also enrolled with the ANM and was immunized with TT1 vaccines followed by regular ANC's. She was also provided the supplementary nutrition and the IFA tablets in coordination with ICDS worker and ANM of her village. Apart from this she as well as her family members was made aware and motivated for the institutional delivery only. As a result she gave birth of a healthy male baby and both the mother and child are hale and healthy. The family members express their gratitude and thanks for everything the project did for healthy and safe delivery of the child after a long span of six years of the spouse.



5. Noor Jahan

Successful treatment of Anemia

Noor Jahan w/o Islamuddin, 30 years of age is resident of village Karsanda. Her family consists of four members-two children and spouses. She is illiterate and the labor work by her husband is the only source of income of her family which is too meager to meet even the basic needs of the family members. Noor Jahan again conceived only at the age of one year of her first child and due to which she became a severe anemic affecting the health of the child as well as the mother both. When the concerned Swasthya Sakhi visited her home, encouraged her to visit the health camps of the project in her village for proper checkups and tackle the anemic problem. She accordingly was brought to the camp and it was found that her level of hemoglobin was 6.0 gm% only in the checkup. She was provided required medicines



followed by the counseling too. She was also encouraged to take the seasonal available vegetables in her food. She was also enrolled with the ANM and was immunized with TT1 vaccines followed by regular ANC's. She was also provided the supplementary nutrition and the IFA tablets in coordination with ICDS worker and ANM of her village. As a result when again she was checked up at the seventh month of her pregnancy, it was found that the level of hemoglobin was improved to 9.5gm%.The weight of Noor Jahan was also found improved significantly and have no health problems at present. Both of the spouse are thankful of the project.

Our Governing Board Members

Sl.No.	Name	Designation
1.	Mr.Prabhakar Tiwari	President
2.	Mr.Hemant Kumar Verma	Vice President
3.	Mr.Shishupal	Secretary
4.	Ms.Sangita	Joint Secretary
5.	Ms. Rajvinder Kaur	Treasurer
6.	Ms.Seema Devi	Member
7.	Mr.KaushlendraYadav	Member

Media Coverage



संपत्ति में हो बेटियों की हिस्सेदारी

संवादसूत्र, मसौली (बाराबंकी) : एक साथ अभियान की शुरुआत हो गई है। जिसके अंतर्गत ग्रामीण महिलाएं और व्यक्तियां ने रैली निकालकर जागरूक किया। रैली के दौरान लोगों को जागरूक किया कि संपत्ति में हो बेटियों की हिस्सेदारी, महिला हिंसा और महिलाओं के साथ घरेलू हिंसा को रोकें।

मसौली के कई ग्राम पंचायतों में रैली निकाली गई, जिसमें स्वास्थ्य रहने के उपाय बताए गए। विश्व स्वास्थ्य दिवस के तहत प्रसार द्वारा बंकी ब्लॉक के खिजुरपुर, मोहिंदीनपुर, फतेहसराय, चचेरुवा के रैली के माध्यम से जागरूक किया गया। एक साथ अभियान की रैली में 4725 समुदाय के लोगों ने प्रतिभाग किया। रैली के बाद गांवों में बैठक के माध्यम से महिलाओं के प्रजनन स्वास्थ्य व अधिकारों को लेकर चर्चा की गयी। जिसमें कि परिवार नियोजन में पुरुषों की सहभागिता की बात की गयी। साथ ही सरकारी अस्पतालों के निजीकरण पर चिन्ता व्यक्त की गई क्योंकि आज निजी अस्पतालों में मरीजों के साथ बहुत अधिक लुट होती है और सरकार उसकी रोकथाम के लिए कोई मानक नहीं तय कर पायी है। चर्चा में खड़ा गया कि परिवार नियोजन कार्यक्रम में गर्भनिरोधक कार्यक्रम ज्यादातर महिलाओं को प्राथमिकता देती है। वास्तव में नसबंदी कार्यक्रम एक महिला नसबंदी अभियान



जहांगीरबाद में निकाली गई जागरूकता रैली

जनजागरण

- लोगों ने निकाली रैली, किया महिलाओं के सम्मान के प्रति जागरूक
- घरेलू हिंसा रोकने के लिए सभी को करना होगा प्रयास

बन गया है। अगर राष्ट्रीय स्तर के आंकड़े देखें तो 2014 में 96.7 प्रतिशत महिला नसबंदी तथा 3.29 प्रतिशत पुरुष नसबंदी हुई है।

इस प्रकार से परिवार नियोजन रणनीतियों ने गर्भनिरोधकों के लक्ष्य के रूप में औरतों पर ही ध्यान केंद्रित किया है। एक साथ अभियान के बारे में बताया गया कि यह अभियान समाजिक मानदंडों

में बदलाव व स्त्री-पुरुष बराबरी में पुरुषों की भागीदारी पर राष्ट्रीय अभियान है। प्रथम चरण में यह अभियान प्रदेश के 20 जिलों में विभिन्न थीम के माध्यम से आयोजित होगा। जिसमें कि कार्य स्थलों पर महिला हिंसा, महिलाओं के साथ घरेलू हिंसा, घरेलू कामों में पुरुषों व लड़कों को भागीदारी, देहेत्र उन्मूलन और सम्पत्ति में बेटियों की हिस्सेदारी, लड़कों व लड़कों के बीच शिक्षा, रोजगार व आवागमन के सामान अवसर पर चलाना गया। प्रसार के लिए पाल बादव में बताया कि अभियान के दूसरे चरण में अप्रैल से जून 2017 तक 25 जिलों में प्रजनन स्वास्थ्य अधिकारों में पुरुषों की भागीदारी पर की मुहिम पर चलाया जाएगा।



जहांगीरबाद में गुरुवार को जागरूकता शिविर का हुआ आयोजन • हिन्दुस्तान

नियोजन जागरूकता शिविर का आयोजन

मसौली। महाराष्ट्र फाउंडेशन के तत्वाधान में प्रसार संस्था द्वारा सामुदायिक स्वास्थ्य केंद्र जहांगीरबाद में एक दिवसीय परिवार नियोजन जागरूकता शिविर का आयोजन किया गया। शिविर में लोगों को परिवार नियोजन के सही तरीके बताते हुए उनसे दुश्मनों को भी जागरूक करने की बात कही गई। संस्था की स्टाफ नर्स महिमा मोहन ने बताया कि सोपेचसी में परिवार नियोजन की सभी सुविधाएं उपलब्ध हैं जिन्हें निशुल्क प्राप्त किया जा सकता है। इस मौके पर सपना वर्मा, जितेंद्र कुमार आदि मौजूद थे।

महिलाओं ने लिया स्वच्छता का संकल्प



स्वच्छता का संकल्प लेती महिलाएं।

मसौली/बाराबंकी (एसएनबी)। स्वच्छ भारत मिशन योजना के तहत स्वच्छता के प्रति लोगों को जागरूक करने के लिए, राष्ट्रीय रामनाथ कोविंद के आह्वान पर स्वच्छता हो सेवा है के क्रम में गुरुवार को ग्राम पंचायत टोटादीनपुर में महिलाओं द्वारा स्वच्छता संकल्प लिया गया।

संसद फेलो पुनिया द्वारा गौर गिरा ग्राम मौर्य, जितेंद्र सिंह यादव, प्रमिला उपस्थित पंचायत टोटा दीनपुर में प्रसार संस्था द्वारा

स्वच्छता अभियान चलाया गया जिसमें गांव की 45 महिलाओं ने स्वच्छता के प्रसार और गांव को स्वच्छ बनाने में प्रयास कर ली। इस कार्यक्रम के प्रति जागरूक करने के लिए कार्यक्रम के दौरान प्रसार संस्था के सचिव शिशुपाल यादव स्टाफ नर्स महिमा मोहन, जितेंद्र सिंह यादव, प्रमिला उपस्थित

जनसंख्या नियंत्रण में पुरुषों की भागीदारी जरूरी

सहारा न्यूज ब्यूरो

मसौली-बाराबंकी।

जनसंख्या नियंत्रण में पुरुषों की भागीदारी बहुत जरूरी है जिसके लिए हमारी संस्था गांवों में प्रजनन स्वास्थ्य अधिकार के प्रति महिलाओं के साथ साथ पुरुषों को भी जागरूक करने पर कार्य कर रही है। जिले के 3 ब्लॉकों के 167 राजस्व गांवों में हमारी संस्था के जरिये लोगों को जागरूक किया जा रहा है।

उक्त बातें रविवार को मसौली चौराहा स्थित मयूर बाबा पर जेष्ठ प्रजनन स्वास्थ्य व महिलाओं के अधिकार पर मीडिया के साथ वार्ता करते हुए प्रसार संस्था के सचिव शिशुपाल सिंह यादव ने कही। उन्होंने कहा कि 21 ग्राम पंचायतों के 167 राजस्व गांवों में किशोरों एवं मातृ एवं

कार्य किया जा रहा है। जिसके संचालन के लिए प्रत्येक गांव में स्वास्थ्य सखी की नियुक्ति की गई है जो गांवों की किशोरियों एवं महिलाओं को स्वास्थ्य के प्रति जागरूक करने का काम करती हैं।

संस्था के सचिव ने बताया कि प्रदेश में यह संस्था स्वास्थ्य पर वर्ष 2011 से काम कर रही है तथा 50 लाख से ज्यादा लोग संस्था द्वारा लाभान्वित किया जा चुका है। पुरुषों को प्रजनन के प्रति जागरूक करने के लिए प्रत्येक गांव चौपाल के रूप में चयन किया गया है।

उन्होंने बताया कि ट्रेनिंगों को पहले बच्चे के बाद दूसरा बच्चा कब। पहला बच्चा पढ़ने जाय तब पर लोगों को मोटिवेट किया जा रहा है। इस मौके पर संस्था की स्टाफ नर्स महिमा मोहन, सपना वर्मा, जितेंद्र कुमार आदि लोग मौजूद थे।

असुविधा से निजात मिल सकेगी। विधायक ने उपस्थित लोगों को निर्देश दिया कि मार्ग निर्माण में गुणवत्ता में किसी प्रकार की खामियां बर्दाश्त नहीं जाएंगी। इस अवसर पर मण्डल अध्यक्ष राम कुमार मिश्र, गौर सिंह, मनोप पटेल, प्रेम कुमार, विष्णु मौर्य सहित काफी संख्या में कार्यकर्ताओं सहित ग्रामीण उपस्थित रहे

क्षमता वृद्धि प्रशिक्षण आयोजित

मसौली-बाराबंकी (एसएनबी)। सामुदायिक स्वास्थ्य केंद्र जहांगीरबाद में रविवार को प्रसार संस्था के तत्वाधान में एक दिवसीय हंस फाउंडेशन द्वारा क्षमता वृद्धि प्रशिक्षण का आयोजन किया गया जिसमें दर्जन प्रतिभागी महिलाओं ने भाग लिया। प्रशिक्षक कासिम अली ने प्रतिभागी स्वास्थ्य सखी, आशा बहुल महिला स्वास्थ्य कर्मियों को 4 युग्म विभाजित करते हुए प्रशिक्षण उपरान्त क्षमता वृद्धि पर सवाल पूछे प्रशिक्षक कासिम अली ने गर्भावस्था के लक्षण तथा गर्भावस्था के दौरान होने वाली परेशानियों पर चर्चा की उन्होंने जच्चा-बच्चा की देखभाल, टीकाकरण एवं खानपान, जांच की जानकारी दी। इस मौके पर संस्था सचिव शिशुपाल सिंह यादव, स्टाफ नर्स महिमा मोहन, सपना वर्मा, जितेंद्र कुमार आदि दर्जन से अधिक प्रतिभागी महिलाएं मौजूद थीं।



कार्यक्रम में उपस्थित महिलाओं को जानकारी देते प्रशिक्षक।

