

# ANNUAL PROGRESS REPORT

Year: 2018-19



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# Prologue

## Dear Friends, Well Wishers and Senior Colleagues,

*I am pleased to present our annual report for the year 2018-19. 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 135 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 initiated this year in all the 15 blocks of district Barabanki to promote safe abortion with support of **Ipas Foundation** and to implement Girls Icon Program which aims at promoting adolescent girls' health and education rights with **Milaan Foundation** respectively. We also have been working with UPVAN network to promote male participation in family planning.*

*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 they may lead a healthy reproductive life. This will help to reduce the major hindering in the way of women empowerment and healthy growth of their children especially girls.*

*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. Continuing our partnership with SBI, Life Insurance, Lucknow, we developed 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 have started new venture this year and are all set to promote safe abortion to work in all the 15 blocks of district Barabanki 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 We also have been working with UPVAN network to promote male participation in family planning

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" Awareness and Early Diagnosis project*

We had developed partnership with UPVHA, Lucknow supported by Mylan Foundation last year for implementation of Hepatitis C generation among the masses. We continued the project this year too and carried out the following activities which has helped us to make the beneficiaries aware of Hepatitis C

#### 3. *Ensuring Access of Safe Drinking Water and development of Infrastructures in Government Schools:*

During the last we entered into a new partnership with SBI, Life Insurance, Lucknow for ensuring access of safe drinking water to the masse. We implemented a project "**Ensuring Access of Safe Drinking Water**" with support of SBI-Life Insurance during the year. With the help of this project we have been able to ensure the access of safe drinking water to the population of 3773 from 381 households from 16 villages of block Masauli and Banki of district Barabanki.

Keeping in view the facts that the site for educational institutions like **schools** is a **crucial** concern as noise and temperature levels are said to affect the understanding levels in students. 40 **School** buildings, classrooms,



playgrounds and libraries are the most important aspect of **school infrastructure**, continuing our partnership with SBI, Life Insurance; we developed 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.

#### **4. Shivansh Khad-(Compost) Training**

PRASAR in recent years took up the task of educating the farmers about the benefits of making and using the **Shivansh** Fertilizer instead of chemical fertilizer. This is a step towards making the farmers self-reliant as the compost can be made by readily available materials with farmers and has helped in increasing their incomes by reducing dependence on chemical fertilizers. It is also a faster (18days) organic composting method.



#### **5. Promotion of safe abortion and implementation of Girls Icon Program**

We have started new ventures this year and are all set to promote safe abortion to work in 12 blocks of district Barabanki 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. Under Safe Abortion initiative 16 women have undergone for safe abortion from the project operational GPs. Under Girl Icon Program, 14 girls aged between 12-18 years have been enrolled in the project since the year 2018 from the families having income less than one lac annually. These Girl Icons are trained and involved in creating mass awareness on the right issues of Health, Education, Nutrition and Domestic Violence in their assigned GPs of respective block.



#### **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 & Masauli 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 135 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 Medical Services with a Lady Gynaecologist, Two 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:

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#### Coverage of the Programme:

Particulars	Total Coverage till date	Caste Composition		
		SC	OBC/Muslims	General
No. of Villages(Banki/Dewa Block)	69	24	58	18
No. of Villages(Masauli/Ram Nagar Block)	66	25.15	58.23	16.62

## Activities carried out during the year: 2018-19

### Base Line Survey

PRASAR conducted the **Base line survey** in 6 new villages which include villages-Ramavapur, Adaura Narayanbhari, Kutubapur, Rasoolpur, Ashokpur and Wazidpur, district Barabanki(UP) phased in the Financial Year 2018-19 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-

The villages have sizeable proportion of population of OBCs (62.7 per cent) and Scheduled Castes (25.6 per cent). General category people and minorities account for 6.2 per cent and 5.5

per cent, respectively. A total of 29.2 per cent population in these villages belongs to BPL category. Agriculture and wage labour are major source of income of this population, while contribution of service and business in the economy of these villages is miniscule.

Infrastructural facilities like Anganwadi, primary health centres and community health centres are either present in the villages or in vicinity. Villagers are still taking water from shallow hand pumps. Water quality of shallow hand pumps has been variously questioned. Toilets have been constructed in the recent past in the homes of villagers, though all homes are yet to be covered. The use of toilets is estimated from a low of 32 per cent to a high of 80 per cent in different villages. Primary schools are either available inside the villages or within 0.5 km distance. Junior high schools are available either inside the villages or within a distance of 2 km maximum.

This scenario affects overall quality of life of the villagers and has a serious adversely affects health of the villagers, particularly that of women. As a result women suffer from reproductive diseases in all the villages, with prevalence ranging from 20 per cent to 80 per cent.

Mean age of marriage of girls, as revealed by the respondents, was found to be 18.5 years, with many girls being married off below the prescribed minimum age of marriage for girls, which is 18 years. It is common in the villages to marry off girls as young as 15 years. These girls and their husbands do not have any knowledge or have little knowledge of family planning. Immediately after the marriage the young bride becomes pregnant and then starts a vicious cycle of unsafe abortions, miscarriages, ante-natal problems, etc.

The situation is made worse by non-availability of services from health facilities. Though infrastructure is there and necessary human resource too is there, services are simply not available or are occasionally available. Means of family planning are not available even at PHCs and CHCs, what to say of their availability with ASHAs and ANMs. The scenario is further made grim by the following:

- 61.1 per cent pregnant women are not administered TT vaccine.
- 76.1 per cent pregnant women have no health check-up.
- 48.7 per cent deliveries still taking place at home.
- 67.3 per cent children not at all immunised, or partially immunised.
- 82.3 per cent children not monitored for growth.
- 65.5 per cent women suffering from some kind of reproductive health issue.
- 69.0 per cent couples not using any mean of family planning.
- 59.3 per cent women eat whatever was available; just 21.2 per cent women were able to afford good nutritious diet.
- 23.0 per cent girls had sanitary napkin available right from the start of menstruation, while 21.2 per cent women did not know about this.
- 31.2 per cent women only had care of lady doctor available
- 3.5 per cent women reported maternal deaths in the family 12.4 per cent women reported child deaths in the family
- 58.4 per cent women were able to consult a health service provider only when money was available with the family



- 55.8 per cent women felt that they were denied health services either because of their caste, or because of their poverty.

### **Mobile Medical Health Services**

PRASAR organized 741 **Mobile Medical Health Services** in 21 project operational Gram Panchayats and covered 37438 pregnant & lactating mothers and Adolescent Girls during the year

***All the 38775 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.



Like the previous year, the follow up of **Mobile Medical Health Services** have been done on regular intervals. 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)**

***Diagnostic Tests (Haemoglobin)*** of 1236 pregnant & lactating mothers and adolescent girls have been done during the year.

### **Awareness Meetings with Pregnant Women and Lactating Mothers**

***308 Awareness meetings with Pregnant Women and Lactating Mothers have been conducted and covered 4499 mothers directly.*** The participants were made aware Early and Exclusive Breastfeeding, Personal Hygiene Practices and use of safe sanitary disposal, Family planning and temporary and permanent contraceptive measures, government services and

schemes related to health and nutrition, Maternal benefit schemes, JSY, importance of first 1000 days in life and Care of mothers, signs and symptoms of risks involved during the pregnancy, Sanitation and WASH Components were the major highlights of the awareness meetings.

## **Awareness Meetings with Adolescent Girls**

*271 Awareness meetings with adolescent girls have been conducted with 6235 participants during the year.*

The meetings were conducted each month-Use of safe napkin, Hygiene and sanitation, the way how to dispose off the napkins safely, Discussion on importance of TT and supplementary nutrition, Health and educational rights of the adolescent girls were the major highlights of the meeting, and Strengthening of the adolescent girls' groups was also the major highlights of the meetings.



## **Capacity Building Training of Project Field Staff**

*Four Trainings-each for one day have been conducted. First with 31 participants, second with 30 project staff, third with 26 project staff while fourth with 28 project staff respectively were organized during the year.*

Mission, Vision and objectives of the organization, Roles and Responsibilities of project staff, Malnutrition, situation and its impact, importance of first 1000 days in nutrition, film show on immunization, Promotion of early breastfeeding, Child and Maternal Care, Skill improvement in facilitation, State Nutrition Mission, PNC, Physical Changes during the adolescent ages etc were the major parts of the agenda of the trainings



## **Follow Up of High Risk Pregnancies**

*Follow Up of High Risk Pregnancies* have been done on regular basis throughout the year. Anemia, swelling in the legs, night blindness, high blood pressure, excessive bleeding, fluid discharge, MTP, EDD overdue 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

## **Strengthening VHNDs**

*Actively involved in strengthening the VHNDs in the project operational GPs* as a result 6240 Pregnant Mothers, Lactating Mothers and Adolescent Girls visited in VHNDs during the reporting year from Banki, Masauli and Dewa operational blocks. During the VHNDs, The pregnant women visiting the VHNDs were made aware of the Pregnancy Aid Yojana Scheme, Four key messages were delivered to the mothers/Care givers to ensure the complete immunization of the children, Due list of children age 0-2 years was prepared in advance to ensure the immunization of all the children, Immunization schedule was discussed, 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, Health, Hygiene and Nutritional Education was provided to the mothers during the VHNDs, Importance of immunization with its supplementary nutrition and IFA was ensured during VHNDs. The IFA tablets were mobilized from ANM during VHNDs and were distributed to the PWs. They were motivated to consume the same properly in full dose



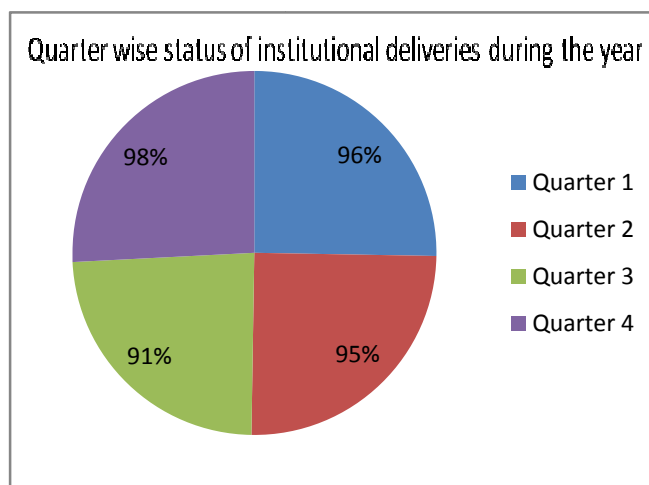
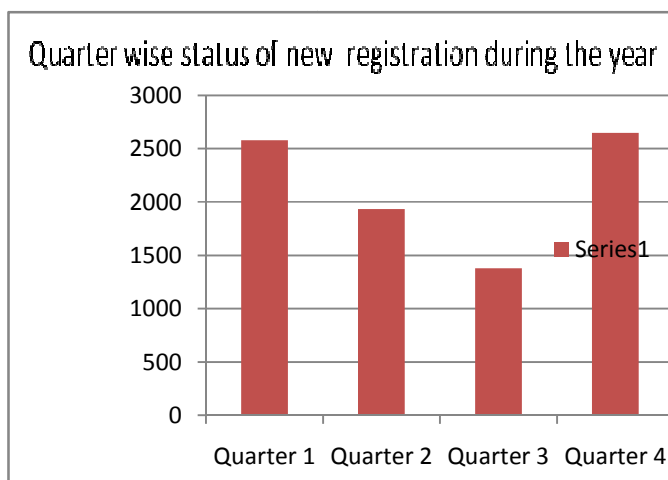
## **Monthly Review Meeting**

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. The impact indicators for the next three years were discussed and finalized. The presentation in this regard by one of the groups has been as follows:

Sl.No.	Indicators	Achievements from year 2017-18 to year 2018-19	Benchmark as on April 2019	Plan for three years from 2019-2022		
				Year 1	Year 2	Year 3
1	Institutional Deliveries	From 90% to 93%	93%	95%	98%	100%
2	Deliveries in private hospital	From 5% to 4%	4%	2%	1%	0
3	Deliveries at home	From 3% to 2%	2%	1%	0	0
4	IMR	From 61 to 52	52	45	30	10
5	High Risk pregnant women	From 4% to 3%	3%	2%	1%	0

## Major Achievements

- 8537 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.
- 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.
- 173 complicated cases have been referred during the year for further checkups and treatment.
- The cases of institutional deliveries have increased gradually up to 98% from 97% during last 12 months.
- 407 Oral Contraceptive Pills and 1536 condoms have been distributed during the year during the Health camps and awareness meetings.
- Total 2077 children and 10418 pregnant women have been immunized during the year.
- 16 differently able women and adolescent girls were checked up and medicinal support were provided accordingly during the camps.
- Two PwDs have been placed for the employment in different enterprises.
- 1310 children got immunized with Rubella vaccines.
- Strengthening of women and adolescent girls collectives through meeting with them.
- Actively participated in all the 21 operational GPs in **Goad Bharai** and **Annaprashan** activities organized at ICDS centers.
- The girls were made aware on **National Balika Diwas**.





- The awareness meetings to promote early and exclusive breastfeeding with focus on ***“Breastfeeding as Foundation of Life”*** were organized during the ***“World Breastfeeding Week”*** from 1-7 August,2018 and covered around 560 mothers/care givers under awareness campaign.
- Participated actively in Pulse Polio Vaccination in all the four operational blocks-Banki, Masauli, Dewa and Ram Nagar and ensured the vaccination of OPV of 2320 children.
- Participated actively in anti worms campaign in all the four operational blocks-Banki, Masauli, Dewa and Ram Nagar and ensured intake of Albendazol tablets by 5766 children
- Rallies were taken out in almost all the operational GPs in order to generate mass awareness among community towards the importance of de-worming.
- The activities were conducted in all the four operational blocks during the “World Population Day” to create mass awareness among the community.
- 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

## Other Activities

### Eye Check up Camps

Free Eye Check up camps were organized during the year in five GPs in which 360 beneficiaries (Male: 130 & Female: 230) were provided eye check up and required medicinal support. The beneficiaries including male and female both were benefited through these camps. Free eye check up and goggles were distributed to these beneficiaries. It was a pleasing experience to the beneficiaries who got their vision back.



## World Breastfeeding Week

Mass awareness rallies and meetings under Breastfeeding Week (1-7 August, 2019) to commemorate the “World Breastfeeding Week” emphasizing the theme: **‘Empower Parents, Enable Breastfeeding’** and IDCF in the project villages from July 27-8 August, 2019 were conducted in all the 21 project operational Gram Panchayats. Objectives of Breastfeeding Week, Importance of Breastfeeding & Colostrum feeding, Exclusive breastfeeding were the major parts of the awareness meeting. Approximately 600 participants were covered during the awareness meetings. It was emphasized that the Breast Milk contains important antibodies and it provides ideal nutrients for babies. It may reduce disease risk and promotes healthy weight. It was also highlighted that the breastfeeding make children smarter. It was further emphasized that feeding breast milk helps the mother to lose excess weight and helps the uterus contract helps mother



## Promotion of safe abortion and implementation of Girls Icon Program

We have started new ventures this year and are all set to promote safe abortion to work in 12 blocks of district Barabanki with support of **Ipas Foundation** and to implement Girls Icon Program which aims at promoting adolescent girls 'health and education rights with **Milaan Foundation** respectively. Under Safe Abortion initiative 16 women have undergone for safe abortion from the project operational GPs. Under Girl Icon Program, 14 girls aged between 12-18 years have been enrolled in the project since the year 2018 from the families having income less than one lac annually. These Girl Icons are trained and involved in creating mass awareness on the right issues of Health, Education, Nutrition and Domestic Violence in their assigned GPs of respective block

## World Population Day

World Population Day was celebrated on July 11, 2018 in each of the 21 project operational GPs focusing the theme of the year **“Family Planning is a Human Right”**. The primary aim of this mass awareness initiative was to increase awareness about reproductive health problems among the people. This is due to the fact that a large number of pregnant women succumb to poor reproductive health. Under this initiative we tried to get people to know and learn about population issues. Population



issues we highlighted included things like family planning, human rights, right to health, the baby's health, gender equality, child marriage, use of contraceptives, sex education, knowledge about sexually transmit disease, etc. through meetings, rallies, workshops and wall writings.

### **Family Planning Awareness Drive**

We organized a campaign to generate mass awareness on the need of family planning in each GPs of projects operational blocks of district Barabanki. The campaign aimed at enabling women who wish to limit the size of their families to do so. It was focused during the campaign that the evidence suggests that women who have more than four children are at increased risk of maternal mortality. It was also emphasized that by reducing rates of unintended pregnancies, family planning also reduces the need for unsafe abortion. The following methods of family planning were also explained during the campaign:



- Long-acting reversible contraception, such as the implant or intra uterine device (IUD)
- Hormonal contraception, such the pill or the Depo Provera injection.
- Barrier methods, such as condoms.
- Emergency contraception.
- Fertility awareness.
- Permanent contraception, such as vasectomy and tubal ligation.

### **Community Research to know the status of termination of pregnancies and related services**

We conducted a Community Research during the year in three PHCs & three CHCs from nine GPs of three blocks-Banki, Masauli&Dewa of district Barabanki with view to know the status related to termination of pregnancies and issues related to the contraceptive services in place. In a nut shell, the following were the major findings of the research conducted:-

#### **Level of awareness among community**

- Lack of awareness about the family planning measures and service providers among the women.
- Little awareness about how and where to go for safe abortion/MTP.
- Abortion among the families and communities is considered as a grave sin.
- The women usually either resort to the quacks or use the domestic herbs for termination of pregnancy.

#### **Availability of services**

- Lack of access of services for contraceptive measures.
- ASHA/ANM seldom provide the contraceptive measures/devices.
- Non availability of the contraceptive measures/devices at the most of the time at CHC/PHC and Health Sub Centres

#### **Behaviour/Attitude of service providers/higher authorities**

- No information/knowledge is provided regarding the reproductive health and family planning
- Services related to the Medical Termination of Pregnancy are not available at the nearest health centres
- Behaviour towards women at district hospital is not favourable
- Lack of awareness related to the termination of pregnancy

#### **Role of Media**

- Issues related to the Reproductive Health and Family Planning are not in the priority of the media
- Some changes have taken place in rural areas in termination of pregnancy
- The events are published

#### **Recommendations of research findings**

- To ensure the services related to the Medical Termination of Pregnancy at CHC and CHC level and ensure their easy access to the rural women/community. This needs to establish and strengthen a strong public health policy
- Promote family planning measures and safe abortion methods among the masses in order to bring about the reduction in the cases of unwanted termination of pregnancy
- Services of care facilities being provided by the pregnancy termination centres need to be improved. Minimum parameters need to be followed strictly while giving the approval for termination of pregnancy to any of the centres/institutions
- Seek the support of the NGOs/CSOs in creating mass awareness among the community related to the reproductive health and family planning



## Community Based Rehabilitation (CBR) of differently able Persons/Children:

In order to rehabilitate the differently able Persons/Children, the most neglected and deprived section of the community, the organization identified 80 number of differently able Persons and Children and took an initiative to get their certificates of disability as a result 31 number of differently able Persons & Children got the disability certificates and helped them for getting pensions and other welfare benefits. Two differently able youths were supported for professional training in marketing who in turn have been employed in a mall in the state capital. Rampal Gautam W/o Omprakash Gautam village Dahejiya, Masauli Block, Barabanki has been supported in getting enrolment in special school in New Delhi.



## Disability Certificate

31 PwDs/CwDs already identified were mobilized and taken to the district hospital in order to get the disability certificate during the month of July 2018 where the medical checkup of these persons/children was conducted. Having the medical report obtained, the forms were filled in and submitted with the medical report, photographs and other required documents-ADHAR etc to get their disability certificate. The date wise detail of progress made in this regard during the month of July 2018 is as follows:

Sl.No.	Name of the PwD/CwD	Name of Father/Husband	Village	Type of Disability
1	Priyanka	Mukesh	Ajagana	Locomotor
2	Mohammad Wasique	Kaleem	Ajagana	Mental Health Issues/Mental Illness
3	Archana	Rajesh Kumar	Kotawa	Mental Health Issues/Mental Illness
4	Vinod Kumar	Vishal	Amadaha	Mental Health Issues/Mental Illness
5	Ram Sumiran	Sumiran	Medhia	Visual Impairment
6	Laylatun	-	Amadaha	Visual Impairment
7	Anita	Murli	Amadaha	Visual Impairment
8	Nitin	Yash Kumar	Medhia	Visual Impairment
9	Rakesh Kumar	PyareLal	Jolia Banaraspur	Visual Impairment

10	Murli	Ambar Prasad	Hetampur	Visual Impairment
11	Ashish Kumar	Dharm Raj	Medhia	Locomotor
12	Vipin Verma	Ram Chandra	Medhia	Locomotor
13	Sharma Devi	Ram Manorath	Jeori	Locomotor
14	Badshah	Kasim	Amadaha	Mental Health Issues/Mental Illness
15	Arti Devi	Gaya Prasad	Khijirpur	-
16	Prema	Nokhe	Khijirpur	Locomotor
17	Sunita Devi	Amresh	Khijirpur	Hearing Impairment
18	Maya Devi	Indu Raj	Khijirpur	Hearing Impairment
19	Akila	Ismail	Ajagana	Locomotor
20	Neha	Jagjiwan	Jolia	Locomotor
21	Ranjeet	Brajesh Kumar	-	-
22	Tarannum	Mohammad Saleem	Medhia	Locomotor
23	Ranjeet Sharma	Santosh Sharma	Munshiganj	-
24	Salman	-	Jolia Banaras	-
25	Sagun	Babu Lal	Jolia Banaras	Locomotor
26	Sushil	Ranji Lal	-	Locomotor
27	Anita Devi	Rakesh Kumar	-	Locomotor
28	Arpita	Vinod Kumar	Kodari	Locomotor
29	Raju	Kailash Nath	Kodari	Locomotor
30	Maya Devi	Maya Ram	Dahejia	Locomotor
31	Sushil	Rajju Lal	Jolia	Locomotor

### Case Study-1

Mr. Pushpendra s/o Mani Ram Verma residents of village & Post Khijirpur, block Deva, district Barabanki is a graduate. He is married with two kids. He was deprived of one hand owing to which he did not get any employment and so had been suffering from inferiority complex. The behaviour of the community with him has been very desperate. However, with the help of the organization, Mr. Pushpendra got training for three months in marketing and once he completed his training, got employment in metro whole sale after an interview. He at present is earning Rs.12000.00 per month. He alongwith his family members are very happy and able to meet the basic needs of the family. The behaviour of the people towards him is now changed. He has become a model for the youths of his village and getting due respect from the community.



## Case Study 2

Shiva Chandra residents of village Inayatpur, Block Dewa, district Barabanki is a matric passed youth and belongs from Dalit community. Mr. Shiva Chandra and her wife both being differently able by legs and belonging from Dalit community, did not get due respect and from the community. However, with the help of the organization, Mr. Pushpendra got training for three months in marketing and once he completed his training, got employment in metro whole sale after an interview. He at present is earning Rs.12000.00 per month. He along with his family members are very happy and able to meet the basic needs of the family. He is now leading a dignified life. The behaviour of the people towards him is now changed. He has become a model for the youths of his village and getting due respect from the community



## Case Study 3

Child Ram Pal S/O Mr. Om Prakash Gautam resident of village Dahejia, block Masauli, district Barabanki is of age of 12 years. Child Ram Pal belongs from an extreme poor Dalit family and is blind of both eyes. Child Ram Pal wanted to study but due to lack of resources he would have not been able to go for study. However, some how or other child Ram Pal came in the knowledge of PRASAR. The concerned Swasthya Sakhi contacted his family and conducted a meeting with his family and discussed the issues in detail. When asked with the child Ram Pal about what he wanted to do, he expressed his will to go for education. During the visit of the authorities from The Hans Foundation (THF), New Delhi, the case was discussed with them. Fortunately the THF representative showed interest in the rehabilitation of this child and collected all the related documents required for his enrolment with the special education centre in New Delhi. Again fortunately the child was enrolled within a span of 15 days in a reputed special education centre in Delhi where the child is getting his education well. The child and his family are now looking forward for a bright future.



## Collectives of Women and Adolescent Girls

PRASAR have formed 21 Community Based Organizations (CBOs) of Women and Adolescent Girls both separately having 460 members in 21 GPs of Maternal and Adolescent Health Care Program. These groups aim at creating awareness on health and nutrition issues in particular, and address the right issues of women and girls and to promote Child Rights with focus on Right of Children to Free and Compulsory Education respectively. The members of women groups are involved in promoting saving & credit activities also among the group members.

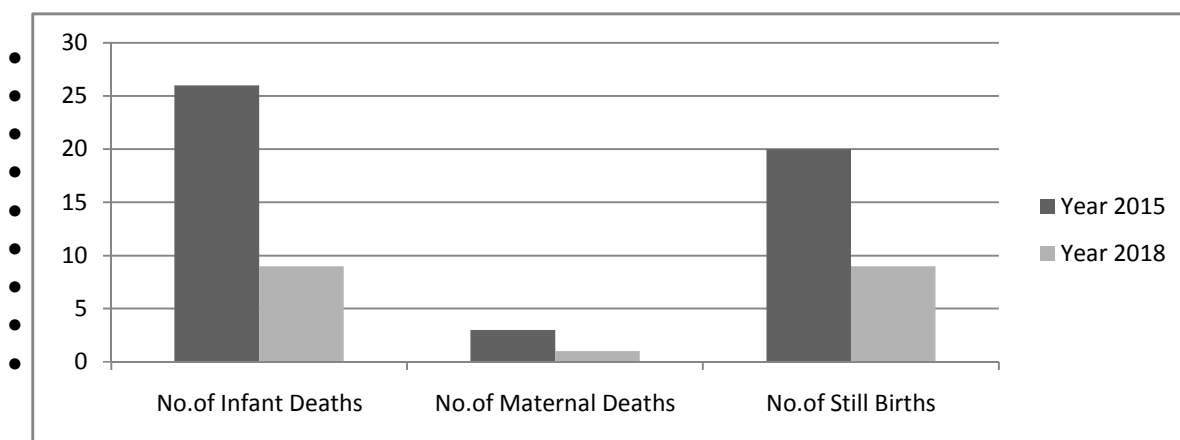
## Ek Saath Rashtriya Abhiyan

200 Peers based on gender equality were formed under Ek Saath Abhiyan. Fortnightly meetings are conducted with them and gender equality is promoted. 55 newly married couples from block Siddhaur were made aware of family planning under this campaign. 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.

## Major Outcomes/Impacts

- The No. of Infant Deaths, Maternal Deaths and Still Births have reduced in last three years:

Particulars	Year	
	Year 2015	Year 2019(Till March)
No. of Infant Deaths	26	9
No. of Maternal Deaths	3	1
No. of Still Births	20	9



- Rate of complete immunization children of age group 0-2 years have improved up to 80% -85%.



- Rate of institutional deliveries increased up to 98%.
- No maternal deaths took place since last three years.
- 137 strong Community Based Organizations (CBOs) of women having 1644 members have emerged in PACS Program area working on their right issues.
- 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.
- Rate of demand for government services-ICDS & Health have comparatively increased.
- The no. of couples using contraceptive measures have increased gradually over the last three year.
- The adolescent girls consult to the doctor without any hesitation if the menses delay even after 16 years of age.
- They have learned the benefits of homemade sanitary napkins. They know that Its use protect us from RTI.
- The adolescent girls resort themselves to get vaccinated with TT .
- The number of couples using contraceptive measures increased gradually

## Challenges

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

Major Challenges	Mitigation
To stop still births emerged as a major issue in the project villages	More focus laid on ANC's during the camps and awareness meetings. As a result No. of still births have reduced during the year
Low participation of male counterparts in maternal health	The male champions are being developed and trained to increase the participation of males. The Situation comparatively changed
Myths with regard to Cu-T	Awareness to create correct information regarding the use of CuT. Correct information has been disseminated
Lack of support of the ICDS workers, ANM and ASHA in newly phased in villages	Meeting with these functionaries was conducted and reiterated to support the organization in meeting its objectives. The support was comparatively improved

## Sign of Change

### Successful Treatment of repeated Miscarriage

Sunita, 28 w/o Pawan 31 years old is resident of village Tera Daulatpur, block Masauli. She belongs from an extremely poor Dalit community of meager income with the labor work by her husband as a major source of income. Ms. Sunita was married 10 years back. She has one female child while four pregnancies were spoiled due to the frequent miscarriage. This caused her as well as her husband anguished. When it came in the knowledge of the project's concerned Swasthya Sakhi, she visited her home and suggested Sunita to contact with the doctors of the PRASAR for check up and treatment. As a result she turned up at the health camp of the project in the month of May 2018 first time. Once Sunita 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 at the interval of 15 days and keeps an eye on her health and development. She was also found anemic and so the treatment was done accordingly. As a result of concerted efforts she was found pregnant in a pregnancy test conducted by the doctor of the health camp which later sustained and no miscarriage took place again. 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. Her hemoglobin level also improved to normal from 9.6gm%. As a result she gave birth of a healthy baby of 2.75 Kg in government hospital thru operation on 09.10.2018. Both the mother and child are hale and healthy. The family members expressed 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. They expressed as ***"Agar PRASAR Sanstha prayas na karti to Hamar Bachava Fir Kharab Hoi Jat..."*** (We would have been lost our child once again if the efforts had not been made by PRASAR project)



## Meena Devi

### Successful Management of Triplet Birth of kids at one time to a mother

Meena Devi, 26 w/o Arun Maurya 28 years old is resident of village Amadaha, block Masauli. She belongs from an extremely poor backward community of meager income with the labor work by her husband in a private company as a major source of income for a family of 8 members. Ms.Meena Devi was married 7 years back. She had a girl baby after three years of her marriage. After having the first child the family was motivated to have space for at least three years between the two children. As a result the family adopted the temporary family planning measures and successfully kept the space of around three years between the first child and second wanted pregnancy but unfortunately Meena failed to conceive due to some unknown reasons. This caused her as well as her husband anguished. However, the concerned Swasthya Sakhi suggested Meena to contact with the doctors of the PRASAR for check up and treatment. As a result she turned up at the health camp of the project where the doctor diagnosed that she had infection in her fetus. Once Meena 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 at the interval of 15 days 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 which later sustained. After three months of the pregnancy, Meena was suggested to go for further checkups and ultrasound tests in district hospital where it was found that she had triplet pregnancies. In this situation, family members were suggested to provide extra care of the would be mother of three children at same time. 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. She was continued for checkups in six months, 7.5 months and 9th month's pregnancy. Her BP and weight were also measured and monitored on regular basis. Apart from this she as well as her family members were made aware and motivated for the institutional delivery only. As a result she gave birth of three healthy babies-two male while one female babies thru operation in a private hospital in state capital Lucknow. Both the mother and three children are hale and healthy. The family members express their gratitude and thanks for everything the project did for healthy and safe delivery of the children in such a critical situation of triplet pregnancies. The spouse expressed special thanks and gratitude for everything the project did in saving the life of the mother and safe delivery of three children at the same time.





## Family Planning Champion

### Anita Devi

Ms. Anita Devi 27 years old w/o Dileep Kumar 29 years old residents of village Gadaipur under Masauli block belongs to a poor family having labor work as a major source of income of the family. The family had four children which includes two boys and two girls. The last delivery had taken place recently therefore the concerned Swasthya Sakhi resorted her to convince her for the sterilization. She was counseled and was tried to understand that proper care and education of the children they have at current are more important than that of having more children but the spouse were not agree to go for sterilization but somehow or other the husband of Ms. Anita agreed to use condom for mean while. However, the concerned Swasthya Sakhi did not lose her heart and continue to prepare her for sterilization in proper counselling during her home visits. The spouse were also taken to the doctor of the health camp who in turn also counseled them. Also, one of the women who had recently got sterilization was used as peer educator. She shared her experience of having sterilization which dispelled the fear of Ms. Anita and as a result of continuous efforts; she agreed to go for sterilization. Finally she was sterilized in the camp of Badagaon with the support of ASHA worker of her village. She is now completely healthy and fine and now she motivate the other women too for choosing sterilization after the births of two children with proper space between two births.



## Successful Treatment of High Risk Case-1

### Sufia Bano

Sufia Bano 35 w/o Mohammad Jaan 40 years old is resident of village Jawahirpur, block Dewa. She belongs from an extremely poor minority community of meagre income with the labor work by her husband as a major source of income. Ms. Sufia Bano was married 16 years back. She has eight children which includes four boys and four girls. Once she was again pregnant and it was her ninth pregnancy but was in high risk as she was acute anaemic and this pregnancy occurred without any proper spacing between 8th and 9th pregnancies. The spouse was worried as they had no money to go for proper check up and treatment outside home. When the case came in the knowledge of the project's concerned Swasthya Sakhi, she visited her home and suggested Sufia Bano to contact with the doctors of the PRASAR for check up and treatment. As a result she turned up at the health camp of the project. Once Sufia Bano was brought under the treatment of the project's health camps; she was provided counselling and emotional support by the project on regular interval. She was taken to the health camps for regular check up at the interval of 15 days and keeps an eye on her health and development.



She was also found underweight and so the treatment was done accordingly. 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 200 tablets of IFA 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. Her haemoglobin level also improved to normal from 8.0 gm% to 11.5 gm%. As a result she gave birth of a healthy male baby in hospital. As the mother was already made aware, the baby was given the Colustrum within one an hour. However, regular home visits are made by the concerned Swasthya Sakhi and ASHA and have been found both the mother and child hale and healthy. The couples were motivated to opt the permanent family planning measures as they have nine children by now. The follow up for the same is in the plan of the concerned Swasthya Sakhi



### Successful Treatment of High Risk

#### Raj Kumari

Raj Kumari, 25 w/o Pravesh 29 years old is resident of village Munimabad, block Masauli. She belongs from an extremely poor Dalit community of meagre income with the labor work by her husband as a major source of income. Ms. Raj Kumari was married 6 years back. She has two children, one boy and another is girl. The first child was born with a big operation. She was again pregnant and it was her third pregnancies but was in high risk as she was acute anaemic and having pain in her legs. She was also suffering from lack of appetite. The spouse was worried as the first child was caesarian and in her third pregnancy she has been suffering with anaemia associated with other problems. When it came in the knowledge of the project's concerned Swasthya Sakhi, she visited her home and suggested Raj Kumari to contact with the doctors of the PRASAR for check up and treatment. As a result she turned up at the health camp of the project. Once Raj Kumari was brought under the treatment of the project's health camps, she was provided counselling and emotional support by the project on regular interval. She was taken to the health camps for regular check up at the interval of 15 days and keeps an eye on her health and development. She was also found having swelling and so the treatment was done accordingly. She



was also enrolled with the ANM and was immunized with TT1 vaccines followed by regular ANCs. 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. Her haemoglobin level also improved to normal from 8.6gm% to 11.5 gm%. As a result she gave birth of a healthy male baby after a successful operation. Both the mother and child are hale and healthy. The couples were motivated to opt the permanent family planning measures as they have already three children by now. As a result the couple visited the district hospital and got sterilized

## 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.	Mr. Virendra Kumar	Member
7.	Mr. KaushlendraYadav	Member

## Media Coverage





ग्राम  
जित  
सिंह  
गन्ना  
गन्ना  
लित  
गन्ना  
चिव  
टिक  
सिंह  
ने दी

# महिलाओं को किया जागरूक

रैली के जरिए से मौलिक अधिकारों की दी गई जानकारी

संवादसूत्र, मसौली (बाराबंकी) : ग्राम पंचायत गढ़पुर और गोख में महिला जागरूकता कार्यक्रम आयोजित हुआ। इसमें रैली के मध्यम से महिलाओं के मौलिक अधिकार बताए गए। साथ ही महिलाओं को योजनाओं की जानकारी दी गई।

रैली में एनएम, आशा बहू, अंगनवाड़ी कार्यकर्ता व गांव की महिलाएं शामिल हुईं। रैली गांव सहित आस-पास में पहुंची और वहां पर महिलाओं को जागरूक किया गया। महिलाओं के सुरक्षा, मौलिक अधिकार व योजनाओं की जानकारी दी गई। किशोरियों के खान-पान और जांच कराने की सलाह दी गई। रैली का शुभारंभ प्रसार के सचिव शिखर पाल ने किया। रैली समापन के बाद गोख में महिलाओं को स्त्री रोग विशेष डॉ. अल्फा जैन ने बताया कि गर्भवती



मसौली क्षेत्र के गढ़पुर में जागरूकता रैली निकाली महिलाएं • जागरण महिलाओं को तीन जांच करानी आवश्यक है।

जन्म के बाद मां का पीला-गाढ़ा दूध पिलाना चाहिए। इस दूध में वे सरे तत्व पाए जाते हैं, जो आवश्यक है। इससे बच्चा कुपोषित नहीं होता है। शिशु

पाल ने बताया कि वृद्धा पेंशन, दिव्यांग और विधवा पेंशन संचालित हैं, जिनका ऑनलाइन सेवा ली जा सकती है। इस मौके पर सपना वर्मा, रीतु वर्मा, आरती, ब्रिजिता, पूजा, जितेंद्र सिंह आदि मौजूद रहे।

6 दैनिक जागरण तखनऊ, 19 अप्रैल 2018

बाराबंकी



रोटी गांव में स्वास्थ्य शिविर में सभी महिलाओं की पीछ • जागरण

## पहला पीला-गाढ़ा दूध पिलाएं, कुपोषण मिटाएं

संवादसूत्र, बाराबंकी : रोटी गांव में आयोजित स्वास्थ्य शिविर में कुपोषण उन्मूलन के उपाय जानने में महिलाओं की उत्सुकता देखते बनीं। विशेषज्ञ चिकित्सकों की देखरेख में महिलाओं का स्वास्थ्य परीक्षण किया गया। महिलाओं को गर्भवस्था के दौरान होने वाले संकष्ट और खान-पान के बारे में बताया गया।

बुधवार को विकास खंड रामनगर के ग्राम पंचायत रोटी गांव में गर्भवती एवं धात्री महिलाओं तथा किशोरियों के प्रजनन स्वास्थ्य तथा अधिकार विषय पर संगोष्ठी आयोजित हुई। जिसमें चिकित्सक सपना वर्मा ने महिलाओं को बताया कि प्रसव के बाद पीला-गाढ़ा दूध शिशु को पिलाना चाहिए। जिससे बच्चे कुपोषण का शिकार नहीं होते हैं, वे स्वस्थ और मजबूत रहते हैं।

महिलाओं को गर्भवस्था के दौरान हो रही संकष्टों और दूध, घी का सेवन कर, खान पान पर विशेष ध्यान रखा जाए। कम से कम तीन जांच करानी चाहिए। पहली जांच गर्भवस्था के तुरंत बाद जांच करनी चाहिए।

दूसरी जांच तीसरे और चौथे माह में और फिर सातवें या अठारवें माह में जांच करनी चाहिए। खून की जांच विशेष तौर पर करानी चाहिए, जिससे महिलाओं में खून का पता चल जाता है। वैसे तो गर्भवस्था के बाद जब कभी दिक्कत हो तत्काल चिकित्सक के पास जाकर राय और परीक्षण कराना चाहिए।

स्वास्थ्य शिविर 23 गर्भवती, 15 धात्री, 34 सामान्य महिलाएं एवं 19 किशोरियों को डॉक्टर ने परामर्श के बाद निरुत्सुक दवा का विवरण दिया। इस दौरान प्रसार व हंस के सिमुलत वादक मौजूद रहे।



जहांगीराबाद के सीएचसी पर टीकाकरण संबंधी प्रशिक्षण लेती महिलाएं

## महिलाओं को दिया गया टीकाकरण का प्रशिक्षण

संवादसूत्र, मसौली (बाराबंकी) : जहांगीराबाद के सामुदायिक स्वास्थ्य केंद्र पर एक दिवसीय स्वास्थ्य सखी क्षमता वृद्धि प्रशिक्षण कार्यक्रम का आयोजन किया गया। जिसमें बंके, देवा एवं मसौली ब्लॉक की 21 ग्राम पंचायतों की स्वास्थ्य सखी, आशा मौजूद रही।

कार्यक्रम में 35 प्रतिभागियों ने प्रशिक्षण में प्रतिभाग किया। आयोजित प्रशिक्षण की शुरुआत वंदना गौत से की गयी। (नली सी जान फिल्म दिखाई गयी) फिल्म के माध्यम से गर्भवती महिलाओं का खान-पान, प्रसव पूर्व तैयारी के बारे में विस्तार पूर्वक चर्चा की गयी। गौत के बाद संस्था सचिव ने प्रसार के बारे में संक्षिप्त जानकारी प्रतिभागियों को दी। सामुदायिक स्वास्थ्य केंद्र जहांगीराबाद में रविवार को प्रसार संस्था के तत्वाधान में एक दिवसीय क्षमता वृद्धि प्रशिक्षण का आयोजन किया गया। जिसमें 3 दर्जन प्रतिभागी महिलाओं ने भाग लिया। प्रशिक्षक कासिम अली ने प्रतिभागी

स्वास्थ्य सखी, आशा बहूओं, महिला स्वास्थ्य कर्मियों को 4 घुंघों में विभाजित करते हुए प्रशिक्षण उपरान्त क्षमता वृद्धि पर सवाल पूछे गए।

गर्भवस्था के लक्षण तथा गर्भवस्था के दौरान होने वाली परेशानियों पर चर्चा की उन्होंने जल्दा-जल्दा की देखभाल, टीकाकरण एवं खानपान, जांच की जानकारी दी। इस मौके पर संस्था सचिव शिखर पाल सिंह, वादक, स्टफ नर्स महिमा मीन, सपना देवी, विमल सहित तमाम महिलाएं मौजूद रही।

वैठक आयोजित

बाराबंकी : जनहित एकता संगठन के पदाधिकारियों की बैठक शिवाजीपुर में हुई। अकरबर शाह ने कहा कि 15 जून को मौलवी अहमद उल्ला शाह का शहीदी दिवस मनाया जाएगा। बैठक में मकसूद, नंदकिशोर यादव, दीपराज सिंह यादव, रामहर्ष रावत, जिनुवन चर्मा, अमरेंद्र सिंह मौजूद रहे।

mycity

बृहस्पतिवार • 19.04.2018

बाराबंकी

अमर उजाला

## शिविर में 72 महिलाओं व 19 किशोरियों का इलाज

हाई रिस्क गर्भवतियों को जिला अस्पताल किया गया रेफर

अमर उजाला ब्यूरो



बाराबंकी। गर्भवती महिलाओं में निरंतर खून की कमी होने की समस्या को दूर करने के लिए बुधवार को रोटी गांव में स्वास्थ्य शिविर में महिलाओं की जांच कर उन्हें दवाई वितरण की गई। जो महिलाएं हाई रिस्क पाई गईं उन्हें उपचार के लिए जिला अस्पताल रेफर कर दिया गया।

रामनगर क्षेत्र के ग्राम पंचायत रोटी गांव में बुधवार को स्वास्थ्य शिविर का आयोजन किया गया। शिविर में स्त्री एवं प्रसूति रोग विशेषज्ञ डॉ. निरजा सिंह ने गर्भवती एवं धात्री महिलाओं की जांच की। जांच में खून की कमी मिलने पर आयुर्वेद के लिए समेत अन्य दवाई वितरित की गई।

शिखर पाल ने शिविर में पंजीकरण कराकर इलाज की अपील की गई। सपना वर्मा ने गर्भवती व धात्री महिलाओं तथा किशोरियों को स्वास्थ्य के बारे में जागरूक किया। शिविर में 23 गर्भवती, 15 धात्री व 34 अन्य महिलाओं तथा 19 किशोरियों का पंजीकरण कर इलाज किया गया। इस मौके पर स्टफ रीतु वर्मा, फार्मासिट जितेंद्र यादव व स्वास्थ्य सखी काजल रावत आदि मौजूद रहे।





# Appreciation letter of Gram Pradhan

**राकेश कुमार**  
प्रधान  
(वरिष्ठ उपाध्यक्ष प्रधान संघ)  
ग्राम पंचायत देवकलिया  
वि०ख० देवा, बाराबंकी

निवास-  
ग्राम पंचायत देवकलिया  
पो० सदरुद्दीनपुर, तह० नवाबगंज  
बाराबंकी  
मो०- 9415595930, 8052802752

पत्रांक.....

दिनांक.....

प्रमाणित किया जाता है कि प्रसार संस्था 633/663 काशी नगर कालोनी कंचनपुर मरियाही लखनऊ की स्वयंसेवी संगठन द्वारा अप्रैल 2018 से अग्रिम तक ग्राम पंचायत कोडरी ब्लाक देवा बंकी जिला बाराबंकी में स्वास्थ्य शिखर के साथ महिलाओं एवं किशोरियों के स्वास्थ्य के प्रति जागरूक करना बैठक एवं प्रशिक्षण सफल आयोजन किया जा रहा है। स्वास्थ्य शिखर में तीसरी विशेषज्ञ डा० का परामर्श के साथ साथ निशुल्क दवाई एवं पैथालॉजी जांच भी की जाती है। शिक्षा स्वास्थ्य एवं पोषण के मुद्दे के प्रति समुदाय में जागरूकता का प्रचार प्रसार करने के उद्देश्य से प्रशंसनीय कार्य कर रही है। मैं इनके उज्ज्वल भविष्य की कामना करता हूँ।

अनुभव प्रमाण पत्र  
ग्राम पंचायत देवकलिया  
वि०ख० देवा-बाराबंकी

**शीला देवी**

(ग्राम प्रधान)

ग्राम पंचायत कोण्डरी  
विकास खण्ड देवा  
जिला-बाराबंकी

अनुभव प्रमाण पत्र

**निवास:-**

ग्राम जगदीशपुर  
पो०-कोण्डरी  
देवा, जिला-बाराबंकी  
मो० : 9838174622

दिनांक.....

प्रमाणित किया जाता है कि प्रसार संस्था 633/663 काशी नगर कालोनी कंचनपुर मरियाही लखनऊ की स्वयंसेवी संगठन द्वारा अप्रैल 2018 से अग्रिम तक ग्राम पंचायत कोडरी ब्लाक देवा बंकी जिला बाराबंकी में स्वास्थ्य शिखर के साथ महिलाओं एवं किशोरियों के स्वास्थ्य के प्रति जागरूक करना बैठक एवं प्रशिक्षण सफल आयोजन किया जा रहा है। स्वास्थ्य शिखर में तीसरी विशेषज्ञ डा० का परामर्श के साथ साथ निशुल्क दवाई एवं पैथालॉजी जांच भी की जाती है। शिक्षा स्वास्थ्य पोषण के मुद्दे के प्रति समुदाय में जागरूकता का प्रचार प्रसार करने के उद्देश्य से प्रशंसनीय कार्य भविष्य के लिए कर रही है। मैं इनके उज्ज्वल भविष्य की कामना करता हूँ।

शीला देवी

★ मैं प्रधान हूँ ★  
ग्राम पंचायत कोडरी  
वि०ख० देवा-बाराबंकी

24-11-2018

प्रधान का नाम

अनुभव प्रमाण पत्र

**सुभाष चन्द्र रावत**  
प्रधान

ग्राम पंचायत- गोदहा  
वि०ख० देवा, बाराबंकी,

निवास-  
ग्राम-गोदहा  
बाराबंकी  
मो० 9838980715

पत्रांक.....

दिनांक.....

प्रमाणित किया जाता है कि प्रसार संस्था 633/663 काशी नगर कालोनी कंचनपुर मरियाही लखनऊ की स्वयंसेवी संगठन द्वारा अप्रैल 2018 से अग्रिम तक ग्राम पंचायत गोदहा बाराबंकी में स्वास्थ्य शिखर के साथ महिलाओं एवं किशोरियों के स्वास्थ्य के प्रति जागरूक करना बैठक एवं प्रशिक्षण सफल आयोजन किया जा रहा है। स्वास्थ्य शिखर में तीसरी विशेषज्ञ डा० का परामर्श के साथ साथ निशुल्क दवाई एवं पैथालॉजी जांच भी की जाती है। शिक्षा स्वास्थ्य एवं पोषण के मुद्दे के प्रति समुदाय में जागरूकता का प्रचार प्रसार करने के उद्देश्य से प्रशंसनीय कार्य कर रही है। मैं इनके उज्ज्वल भविष्य की कामना करता हूँ।

अनुभव प्रमाण पत्र  
ग्राम पंचायत गोदहा  
वि०ख० देवा-बाराबंकी  
11-11-2018

**ग्राम पंचायत जोलिया बनारसपुर**

**सुभाष चन्द्र वर्मा**  
(ग्राम प्रधान)

मो०- 9451262401

**निवास-**

ग्राम- जोलिया बनारसपुर  
वि.ख.- देवा  
जिला- बाराबंकी

पत्रांक

अनुभव प्रमाण पत्र

दिनांक.....

प्रमाणित किया जाता है कि प्रसार संस्था 633/663 काशी नगर कालोनी कंचनपुर मरियाही लखनऊ की स्वयंसेवी संगठन द्वारा अप्रैल 2018 से अग्रिम तक ग्राम पंचायत जोलिया बनारसपुर वि०ख० देवा बनारसपुर में स्वास्थ्य शिखर के साथ महिलाओं एवं किशोरियों के स्वास्थ्य के प्रति जागरूक करना बैठक एवं प्रशिक्षण सफल आयोजन किया जा रहा है। स्वास्थ्य शिखर में तीसरी विशेषज्ञ डा० का परामर्श के साथ साथ निशुल्क दवाई एवं पैथालॉजी जांच भी की जाती है। शिक्षा स्वास्थ्य एवं पोषण के मुद्दे के प्रति समुदाय में जागरूकता का प्रचार प्रसार करने के उद्देश्य से प्रशंसनीय कार्य कर रही है। मैं इनके उज्ज्वल भविष्य की कामना करता हूँ।





सद्गुरु दातासाई

**महेन्द्र कुमार रावत**  
प्रधान

ग्राम पंचायत-रोटीगाँव  
वि०ख० रामनगर, बाराबंकी



निवास  
ग्राम-रोटीगाँव  
पो० बुधेड़ा, जिला-बाराबंकी  
मो० 9792586231

पत्रांक...1.7.9.3...

दिनांक 2.11.2018

### अनुभव उपाण पत्र

उपाणित किया जाता है कि उपाण नं० 633/663  
काशीनगर कॉलोनी कन्नपुर महिला वस्त्रालय की  
स्वयं बेरी संगठन द्वारा अप्रैल 2018 से अभी तक  
(1) ग्राम पंचायत रोटीगाँव ब्लाक रामनगर जि० बाराबंकी  
में शिविर के साथ महिला एवं छिछोरियों को  
स्वास्थ्य के प्रति जागरूक करना एवं बैठक  
उपस्थित का सफल आयोजन किया जाता है।  
स्वास्थ्य शिविर में स्त्री विशेषज्ञ डॉक्टर का  
परामर्श के साथ-2 निः शुल्क खाँसे एवं  
पेन्सिलों की जाँच की जाती है। शिक्षा  
स्वास्थ्य एवं पोषण के मुद्दों के अति समुदाय  
में जागरूकता का प्रचार-प्रसार के करने के  
उद्देश्य से उपस्थित गर्भ भू रही है।  
में इनके उच्चतम अविद्य की कामना करता हूँ।