Divisional Orientation Workshop for Implementation of ORS- Zinc Project.

14thApril'13 to 16thApril'13







Venue:

Satkar Guest House, 99, Kailash Vihar Opp. Income Tax Office, City Center, Gwalior (M.P.)

State Institute of Health Management and Communication. Gwalior (M.P.)

Overview

Diarrhoea kills some 800,000 children under 5 each year. Children living in poor or remote communities are most at risk and evidence shows children are dying from this preventable disease because effective interventions are not provided equitably across all communities. In developing countries, children under three years old experience on average three episodes of diarrhoea every year. Each episode deprives the child of the nutrition necessary for growth. As a result, diarrhoea is a major cause of malnutrition, and malnourished children are more likely to fall ill from diarrhoea.

Countries most affected can end this staggering and unnecessary death toll by combating through an integrated approach. We already know interventions that work, such as:

- Exclusive breastfeeding for up to six months
- Improved sanitation and hand washing,
- Safe drinking water,
- Appropriate treatments to name a few

To reduce preventable deaths, children most affected must have access to these interventions and by use of simple and inexpensive public health solution - oral rehydration salts therapy (ORS) in combination with zinc formulated as dispersible tablets

Studies show that zinc supplementation results in a 25% reduction in duration of acute diarrhoea and a 40% reduction in treatment failure or death in persistent diarrhoea. These studies also revealed that children receiving zinc simultaneously experience a decrease in the severity of their diarrhoea episodes. A 14 day course has proven to provide protection against future bouts of diarrhoea for up to 2-3 months.

Following the implementation of zinc and ORS in combination, use has been monitored and research conducted to reveal user challenges. These include confusion of treatment guidelines for the different age groups, incorrect use of ORS and non-completion of the 14 day course of zinc. Though communication and media programs have increased awareness use of both zinc and ORS, but more can be done to fight diarrhoea.

Through this project CHAI and CID is emphasizing on capacity building of frontline workers in implementing preventive interventions in Gwalior and Chambal Division of Madhya Pradesh.

Registration and Inauguration

The program started at 9:00 am in the morning with registration and distribution of training material. As a mark of respect to Goddess Saraswati the Deity for Knowledge a lamp was lit by the chief guest Dr. Nidhi Vyas, followed by rest of the elite members who participated in the workshop. Mr. Umesh Vashishth introduces all the members of the dais.



Session One

Topic: Introduction of CHAI

Speaker: Dr. Jose Payyaapilly 'Sool'

Dr. Jose gave the introduction of William J Clinton Foundation. He informed that Clinton foundation is now renamed **as Hillary Chelsea Clinton foundation.** He said that the foundation has been working since 2001 to reduce child mortality rate in various South African countries in the field if HIV Aids and in India.

As an outcome of a survey it was found that Madhya Pradesh was one of the leading states in infant's death but death due to HIV was least. The major causes are pneumonia, malaria and

diarrhoea. The first two diseases required medical intervention of doctors or specialist but diarrhoea can be managed with the help of ORS and Zinc intake. So the foundation decided to work in the field of diarrhea management from 2011 and took three states namely Madhya Pradesh, Uttar Pradesh and Gujrat. For M.P. they team up with IKEA and for U.P. and Gujrat they team up with Bill gates foundation. This project has mainly



three components Public sector, private sector and care givers promotion. The public sector will emphasis on education and sensitizing the flws e.g. ASHA, ANM etc thru sectors meeting, VHSC, VHND, gram sabhas and one to one meetings The private sector ensure the availability of ORS and Zinc in the rural areas thru RMPs and local vendors, the third component with provide awareness to mothers and other care taker of the children directly thru rural media techniques.

Session Two

Topic: Background of CID Speaker: Dr. Vijay Gupta

Dr. Vijay Gupta, Chief Functionary and founder of Center for

Integrated Development welcome all the guest and a gave brief introduction of the organization. CID from its inception since 1992 is standing with its core value, commitment towards weaker sections of the society especially children, women, tribal and Dalits in particular and deprived section of the society in general. During its long journey, CID had achieved a place of reputed and responsible organization in the region particularly on the issues of child rights, women rights and empowerment,



tribal rights (Sahariya Tribal) through its consistent efforts on key aspects affecting their lives. CID has been effectively involved in many projects with TDH Geneva and Germany, ACTION AID INDIA, UNICEF, ILP, MPSACS, CHILDLINE India Foundation, NCLP, MPVHA etc

Session Three Speaker: Mr. Sumit Shrimali

He said that it is not possible for Health Department of focus only one issue of diarrhea management and it was bit difficult for timely procurement and distribution of ORS and Zinc as the usage and availability in stock was not clear so there was a gap between demand and supply but thru foundation now it will be possible to analyze the statistics and management of diarrhea case with be easier. He also assures that he will also personally ensure the active participation of department for the success of the project

Session Four Speaker: Mr. Suresh Tomar

He said that the most important factor that will directly affect the program is the care givers or the mother so great emphasis should be given to educate and aware them about the treatment and after effects of diarrhea till every remote majras and tolas and anganwadies can be very helpful for the same as they have number of ways to approach these caregivers. He added that some 12000

anganwadies have been indentified that will provide Tiffin service to mal nourished kids in the villages.

Session Five

Speaker: Dr. Nidhi Vyas

She welcomes foundation's step for improving the child health by bringing down the CMR in the division and assure the full cooperation of the Department. She said that along with the sensitization and education on diarrhea management an awareness related to hygiene of mother, child and surrounding should also be given as most of the cases are due bad hygiene. Dr. Vyas promised to provide every required support in the context of Diarrhoea Management project.



The Post tea session was started with pre test and after there was an interesting 'introduces your partner exercise.

Session Six

Topic: Introduction of Ors-Zinc Project Facilitator Dr. Jose Payyaapilly 'Sool'



In this session Project Manager Public Sector Dr. Jose "Sool" explain about the implementation methodology of the project and the role of public sector. He shared in detail about the objectives and the statistics of different health indicator which emphasis on need of the project in our state Madhya Pradesh. Dr Jose sang a motivational song, all the participants followed him.

Session Seven Topic: Care Givers Promotion Facilitator Mr. Samya Mandal

This session was related to the third component 'care givers promotions". He gave an over view about the methods and ways by which the message can reach the remotest village to spread the awareness among the mothers and other indirect cares takers. He informed that an agency by the name O&M has been hire who has been a leader in the field of rural marketing

lunchbreak

The post lunch Session started with the song carrying the spirit of the program. This song was composed by Dr. Jose.

Session Eight

Topic: Role of Private Sector

Facilitator: Mr. Mahipal Singh Rawal.

This session gave the understanding about the role of Private sector in this project. This sector will ensure the availability of ORS and Zinc in rural areas thru RMPs and Local Vendors with the help to 3 partners companies namely

- 1) Bioax Pharmaceuticals
- 2) PSI
- 3) FHI 360



Session Nineth

Topic: Technical Information on Diarrhoea Management

Facilitator: Dr. Archana Singhwekar

After that the technical session was taken by Dr. Archana Singhwekar Deputy Director PHFW Department and Pediatrician. She explains about the severity of diarrhea management as how serious diarrhea can be and what could be the result if not handled properly. In her presentation she clearly stated that Use of ORS can save many children lives and Zinc effectively reduces the number of episode in the year so it the most cost effective and easily available remedy for the prevention of d diarrhea. She said that about 70 percent of the cases that have been handled by the medical practitioner can be manages with the Usage of Ors and Zinc if solution is prepared with proper method.



Session Tenth

Topic: VHSCs and VHNDs Facilitator: Mr. R.P. Sharma

This was a very small session taken by Dr.Sharma on village level community health management thru arogya Kendra, ASHA and VHSC.

This was the Last session of the 1st day's induction program as the Block Coordinators were prepared for a demonstration of training session the very next day. They were given tips by DR. Jose on the imparting training to FLWs and Community groups and the point they should remember and take care while giving training and also on how to use the training material for having a visual impact of the people. 14 Block coordinators were divided into 2 groups of 7 -7 each namely Gwalior and Chambal group.

Day 2

The entire participants assembled at the Satkar guest house after breakfast. From there they were taken to a Government school at pichhori basti for imparting training to a group of some 50 women who belong the carpet weavers community. Mr. Umesh Vashishth, Regional Coordinator Gwalior introduces the team members to the women as tell them about the purpose of the visit. Dr. Jose gave them a brief view on program.

After that the group was divided into two teams and was shifted to two different rooms. The exercise

starts at 11 am and ends at around 2 pm. Both the Regional coordinators were asked to observe the team which they are not leading. Other then RCs, Mr. Mahipal Rawal, Ms. Celine and Dr. Jose 'Sool' were also observing each and every activity of the teams very minutely. After the finishing the demonstration community women were serves refreshments, some of them also exchange their thoughts and concerns with the team members. From the spot the team reaches to the FLWTC canteen for Lunch



lunchbreak

The Post Lunch session starts with the fed back comment. All the observers share their views and remark on the performance of the teams and highlighted the points which need improvement. Dr. Jose said that the he has seen the presentation of both the teams and found that each one of them have the quality to become a good trainer as all of them posses basis training skills all they need is to practice and polish



The day starts with the prayer song written by Dr. Jose followed by a thought for the day presented by Ms. Celine.

Session One Topic: Team Work

Facilitator: Ms. Celine Paul

In her presentation titled Flight of the geese she speaks about the importance of teamwork and leadership skills. A team is one wherein all team members work towards a common goal, ideally leaving behind their individual interests and preferences. To work in coordination, it is essential to understand and respect others in the team. Respect for each other's competencies, views and actions will minimize conflicts, ensure smooth functioning and enhance productivity and can achieve even the impossible targets. This presentation was to motivate the team.



Session Two

Topic: Management Information System

Facilitator: Dr. Ashutosh Mishra

There is a common saying that, "no job is finished until the paperwork is done". That is just as true for the Project as it is for the accountable job. The only way the progress and success of a project can be judged is how well the persons involved in are performing the job, is by reading the reports. Dr. Ashutosh Mishra has designed a Management Information System that has to be updated on regular basis and sent on weekly basis to the RCs and then RCs will send the same to the State Program Coordinator



fortnightly and state program coordinator will send the same to CHAI on monthly basis for effective project management.

lunchbreak

This session is followed by POST TEST and a very short Presentation on NSV was organized by the NSV state resource center incharge Mr. Sharma.

Session Three Topic: Priorities

Facilitator: Dr. Jose Payyapilly 'Sool'

Dr. Jose discusses the work priorities and shared the important documents such as MOA with Public

Health and Family Welfare Department, Government of Madhya Pradesh. Letter to the State health society for providing IEC Material at Arogya Centers and for the promotion of ORS and Zinc. Letter authorizing the partners i.e. CID, Samarthan , Lepra and MPVHA to spread awareness and sensitizing the FLW etc

At the end of this session the plan of action was disclosed as under:

- Need the block profile of all the blocks assigned to the BCs within 10 days.
- 2. District Level orientation and sensitizing program
- 3. Orientation of ASHA and ANMs
- 4. At least 10 meeting with the front line workers i.e. ANM, ASHA or MPW
- 5. Try to attend all the sector level and Block level meeting or maximum possible.
- 6. Support the Rolling out of Care giver promotion Activity.
- 7. Attend At least 2 VHND/ Gram Sabha/VHSC meetings



Session Four

Topic: Financial Reporting Facilitator: Ms. Celine Paul

It is very important that all the relevant financial information should be presented in a structured manner and in a form easy to understand as the entire movement of project—depends on the funds provided for different activities involved in the project. Also use of transparent financial reporting will create more accountability and encourage fair practice.

After this session participant were invited to put their views on the training program followed by vote of thanks by Dr. Vijay Gupta and Dr. Jose Payyapally 'Sool'.

Annexure 1: List of Guest and Facilitators

Annexure 2: List of Participants

Annexure 3: Pre and Post Test Format

Annexure 4: Pre and Post test scores

Annexure 5: Schedule

Na me	Designation
Dr. Jose Payyapalli 'Sool'	Project Manager – Public Sector CHAI M.P.
Mr. Mahipal Singh Rawal	Project Manager – Private Sector CHAI Gujrat
Ms Celine De silva	Manager, Admin and Finance CHAI M.P.
Dr. Ashutosh Mishra	Manager, M&E CHAI New Delhi
Dr. Vijay Gupta	Chief Functionary, Center for Integrated Development
Dr. Nidhi Vyas	Joint Director, Health Department Gwalior and Chambal Div.
Dr. Sumit Shrimali	Divisional Program Manager, Department of Health
Dr. Anand Sharma	State Trainer (ASHA) NRHM
Dr. Suresh Tomar	Joint Director, WCD Department.

Name	Designation
Nilofer Sherwani	State Project Coordinator
Umesh Vashishtha	Regional Coordinator
Ra hul Gupta	Regional Coordinator
Udham Singh Lodhi	Block Coordinator
Satish KumarSen	Block Coordinator
Karuna Nidhan Singh	Block Coordinator
Dharmedra Patel	Block Coordinator
Neera Soni	Block Coordinator
Kapil Pathak	Block Coordinator
Dharmendra Gupta	Block Coordinator
Shiva ji Shekha wat	Block Coordinator
Rajesh kr. Singh	Block Coordinator
Sheel Kumar Sachan	Block Coordinator
Arun Sharma	Block Coordinator
Raghuraj Sharma	Block Coordinator
Sandeep Sharma	Block Coordinator
Vija y Thapa k	Block Coordinator



सेन्टर फॉर इन्टीग्रेटेड डव्लपमेण्ट

प्रतिभागी का नाम दिनॉक	•••••	
प्रिषक्षण पूर्व/पष्चात् आंकलन प्रपत्र		
निम्न प्रष्नों के सही उत्तर पर सही (✔) का निषान लगाइयेः		
प्रष्न : 1 - हम कब कहेंगें की बच्चे को दस्त है ?		
(क) बच्चा केवल माँ का दूध पीता है और उसे बार बार ढीला पैखाना हो रहा है	()
(ख) 24 घंटे में तीन या तीन से अधिक बार पतला या पानी वाला पैखाना होता है	()
(ग) बच्चा कई बार पैखाना करे लेकिन वह पतला नहीं हो	()
प्रष्न : 2 - नमक चीनी के घोल की जगह दस्त से पीडित बच्चे को ओ आर एस(ORS	े) का घ	गोल
देना चाहिये ?		
(क) हॉ	()
(ख) नहीं	()
प्रष्न : 3 – दस्त पीडित बच्चों में कौन से लक्षण दिखाई देने पर उपचार हेतु तुरंत अस	पताल	
भेजेंगें /भेजेंगी ?		
(क) धॅसी हुई ऑखं	()
(ख) सुस्ती और बेहोषी	()
(ग) तरल पदार्थ न पी पाना या कम पीना	()
(घ) पेट की त्वचा पर चिकोटी काटने से धीरे धीरे से वापस जाना	()
(ढ) उक्त में से कोई दो लक्षण	()
प्रष्न : 4—निम्न में से कौन सा चिन्ह आसामान्य निर्जलीकरण में नही पाया जाता है ?		
(क) धॅसी हुई ऑखे	()
(ख) पानी न पी पाना	()
(ग) चिकोटी काटने से त्वचा धीरे धीरे से वापस जाना (2 सेंकड के अन्दर)	()
(घ) पीने के लिये उतावला या प्यासा होना	()

प्रष्न : 5-पॉच वर्ष की आयु के बच्चों में होने वाली मत्यु के तीन प्रमुख कारण कौन से	है ?श	!
(क) एडस	()
(ख) निमोनिया	()
(ग) डायरिया या दस्त	()
(घ) मलेरियाष्	()
प्रष्न : 6-श्दस्त के दौरान बच्चे को सामान्य भोजन देते रहें किन्तु दस्त समाप्त होंने के	बाद	दो सप्ताह
तक अतिरिक्त भोजन देना चाहिये ?		
(क) सही	()
(ख) गलत	()
प्रष्न : 7—श्जिंक की खुराक 6 माह से कम उम्र के बच्चे के लिये आधी गोली (10 मिल	ो ग्राम) व उससे
बडे बच्चे के लिये पूरी गोली (20 मिली ग्राम) कितने दिनों तक दी जार्न	चाहि	व्ये ?
(क) कम से कम 3 दिनों तक	()
(ख) कम से कम 7 दिनों तक	()
(ग) 14 दिनों तक	()
प्रष्न : 8- एक ऐसे बच्चे के निर्जलीकरण का वर्गीकरण करें जिसकी त्वचा बहुत धीरे	धीरे व	अपनी पूर्व
स्थित में जाती है और जिसकी ऑखे धसी हुई हैं		
(क) निर्जलीकरण नहीं	()
(ख) सामान्य निर्जलीकरण	()
(ग) गंभीर निर्जलीकरण	()
प्रष्न : 9— ओ. आर. एस(ORS) व जिंक का प्रयोग एक साथ ष्युरू किया जाना चाहिये	। दस्त	त रूकते ही
ओ आर एस(ORS) बंद कर देना चाहिये ?		
(क) सही	()
(ख) गलत	(()
प्रष्न : 10— दस्त के दौरान बच्चे को स्तनपान कराते रहना चाहिये ?		
(क) सही	()
(ख) गलत	(()

NAME	Pre test	Post test
KARUNA NIDHAN SINGH	9	9
DHARMENDRA KUMAR GUPTA	7	8
UDHAM SINGH LODHI	8	8
RAJESH KUMAR SINGH	9	9
DHARMENDRA PATEL	6	5
KAPIL PHATAK	7	8
SATISH KUMAR SEN	4	8
SHIVAJI SINGH SHEKHAWAT	4	9
RAGHURAJ SHARMA	7	9
SANDEEP SHARMA	7	9
VIJAY KUMAR THAPAK	4	9
SHEEL KUMAR SACHAN	7	9
NEERA SINGH	6	8
ARUN KUMAR SHARMA	4	9
Total	89	117

ज़िंक - ओ.आर.एस. परियोजना के क्रियान्वयन हेतु संभाग स्तरीय कार्यशाला

विनांक : 14-16 अप्रैल 2013 स्थान : सत्कार गेस्ट हाउस,ग्वालियर (म.प्र.)

विवरणिका

समय	विषय	सहजकता
		संघालन श्री उमेश वशिष्ट
STR: 9.00	पंजीयन	शहल
-	दीप प्रज्वलन	अतिथियाँ दवारा
	प्रार्थना गीत	डॉ. जोस सुल
	विद्यार मन्धन	सुश्री नीलोफर
	स्वागत व कार्यशाला का उद्देश्य	डॉ. विजय गुप्ता
	प्रतिभागी परिचय	डॉ. जोस सूल
	CHAI का परिचय	साम्या मण्डल
	अतिथि उदबोधन	- अतिथि गण
10.45-11.00	चाय	
11.00-11.15	प्री-टेस्ट	उमेश वशिष्व
11.15-12.30	जिंक – ओ.आर.एस. परियोजना का परिचय	
	अ. सामान्य परिदृश्य	साम्या मण्डल
	ब. प्राइवेट सेक्टर क्रियान्वयन	डॉ. जोस सूल
	स. पब्लिक सेक्टर क्रियान्ययन	
	द, केयर गिवर प्रमोशन	साम्या मण्डल
1.00-2.00	भोजनावकाश	
2.00-2.30	गीत गाँए स्वारथ्य बनाँए	डॉ. जोस सूल
2.30-3.30	दस्त प्रवंधन गॅमीरता, रोकथाम व उपचार तथा	डॉ अर्चना सिंगर्वकर
	राज्य की रणनीति	[डिप्टी डायरेक्टर, जे डी आफिस
3.30-4.30	ग्राम स्तरीय सामुदायिक स्वास्थ्य प्रबंधन ग्राम आरोग्य केन्द्र आशा कार्यकर्ता ग्राम समा स्वस्थ ग्राम तदर्थ समिति	डॉ. परशुराम तिवारी
4.30-4.45	चाय	
4.45-5.30	प्रशिक्षण देते समय याद रखने योग्य बाते	डॉ. जोस 'सूल'
5.30-6.00	समूह विमाजन एवं सत्र प्रदर्शन हेतु पूर्व तैयारी के निर्देश	डॉ. जोस 'सूल'

गृह कार्य : 🕶 समूहों को अपनी टीम में सत्र प्रदर्शन के दौरान लिये जाने वाले राजो का अच्छी तरह से पूर्वाभ्यास करना है

द्वितीय दिवस		
समय	विषय	सहजकर्ता
9,00-10,00	विचार मंथन गीत गार्थे स्वास्थ्य बनाएं पुनरावृत्ति	सेलिन डॉ. जोस सूल ग्वालियर संभाग प्रतिनिधि
10.00-10.30	चाय	
10.30-1.30	ग्रामीण महिला समूहों के साथ ओ.आर.एस. तथा जिंक आधारित दस्त प्रबंधन प्रशिक्षण सत्रों का अभ्यास (सत्रों का अवलोकन क्लिंटन फाउण्डेशन के साथियों द्वारा)	क्षेत्रीय परियोजना समन्वयक सत्र का अवलोकन करेंगें
1.30-2.30	भोजन अवकाश	
2.30-3.00	गीत गाँए स्वास्थ्य बनाए	डॉ. जोस सूल
3.00-4.00	सत्राम्यास का विश्लेषण एवं प्रतिक्रिया	सहजकती तथा अवलोकन कर्ता द्वारा
4.00-4.15	चाय	
4.15-5.30	बूझो तो जानें (दस्त प्रबंधन पर प्रश्नोत्तरी)	पुष्पराज कौशिक
5.30-6.00	महत्वपूर्ण शासकीय पत्रों की जानकारी	डॉ. जोस सूल
तृतीय दिवस	तन उपरान्त सभी प्रतिभागियौँ द्वारा गेट टूगेंदर (रंगारं	
9.00-9.45	विचार मंथन गीत गार्थे स्वास्थ्य बनाएं पुनरावृत्ति	सेलिन डॉ. जोस 'सूल' चंबल संभाग प्रतिनिधि
9.45-10.45	महिला एवं बाल विकास विभाग समेकित बाल विकास परियोजना अटल बाल मिशन	श्री राम तियारी (CDPO) श्री शेलिन
10.45-11.00	चाय	
11.00-12.00	एम.आई.एस.	डॉ. आशुतोष मिश्रा
12.00-1.00	वित्तिय प्रतिवेदन (त्रैमासिक) तथा लेखा जोखा संबंधी रमरणीय बिंदु	सेलिन
1.00-2.00	भोजन अवकाश	
2.00-2.30	गीत गार्थे स्वास्थ्य बनाएँ	डॉ. जोस सूल
2,30-3,15	तात्कालिक प्राथमिकतार्ये	क्षेत्रीय समन्वयकों की अगुवाई में
3.15-4.00	संभागीय कार्ययोजना समूह कार्य	निलोफर शेरवानी-राज्य परियोजन समन्वयक
4.00-4.15	चाय	
4.15-4.30	पोस्ट टेस्ट	डॉ. विजय गुप्ता
4.30-5.00		