



Proshanti UK Monthly Field Activity Report

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Project Coordinator

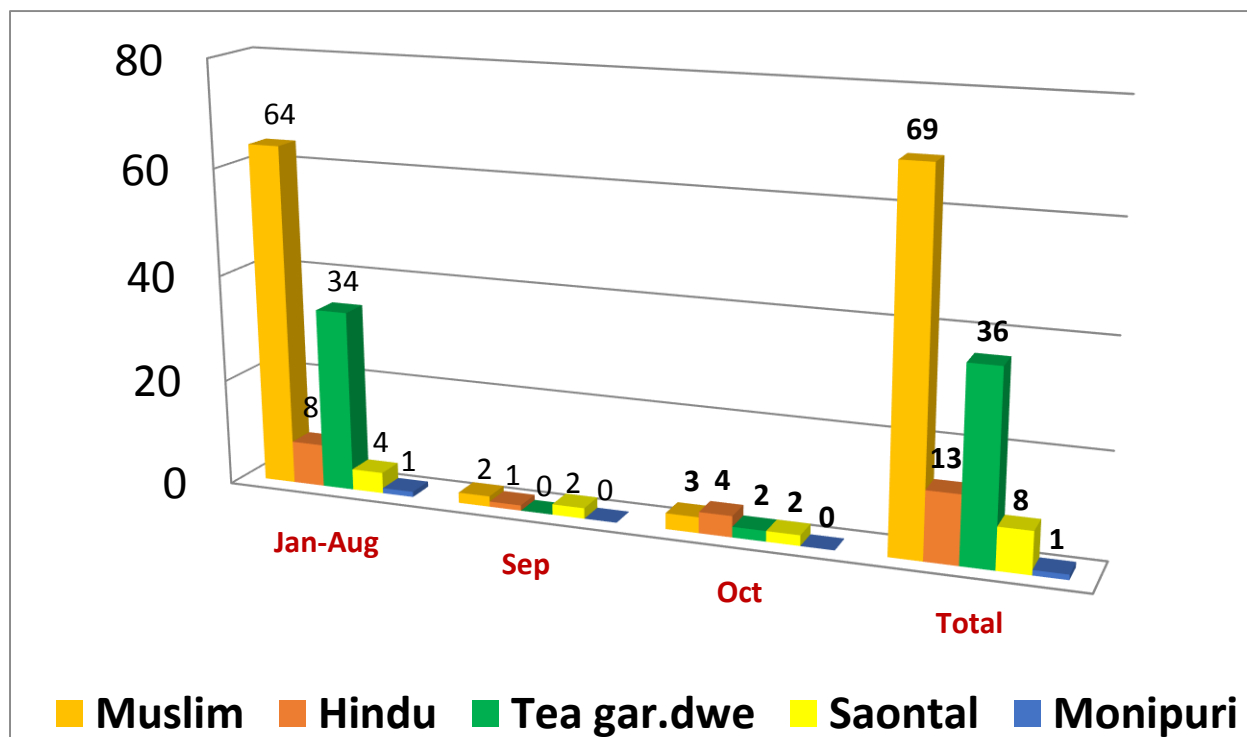
Month: October 2015
Date of submission: 30/11/2015

Patient statistics / turnover:

An English proverb says “Health is wealth” but the health and nutrition situation in Bangladesh is worse than some African countries (UN Global Health & Nutrition Report-2013). Government are trying to ensure public health with the help of different wings and took different type of activities & project; for that established different services delivery point like UHC, UH&FWC, CC, Satellite Clinic etc. But the service delivery points don't work properly and the people cannot claim their right to health. In this situation the government service providers are referring many clients to Proshanti UK for better services. We are silently contributing towards health success indicators of Bangladesh. Therefore we focused our activities on quality of ANC & PNC, client counselling & monitoring, health education, strong EDD follow up, safe delivery and control TBA delivery. In July we have started new client enrolment under UWT (Ummah Welfare Trust) funding that continued this month as well. Present client statuses are given below.

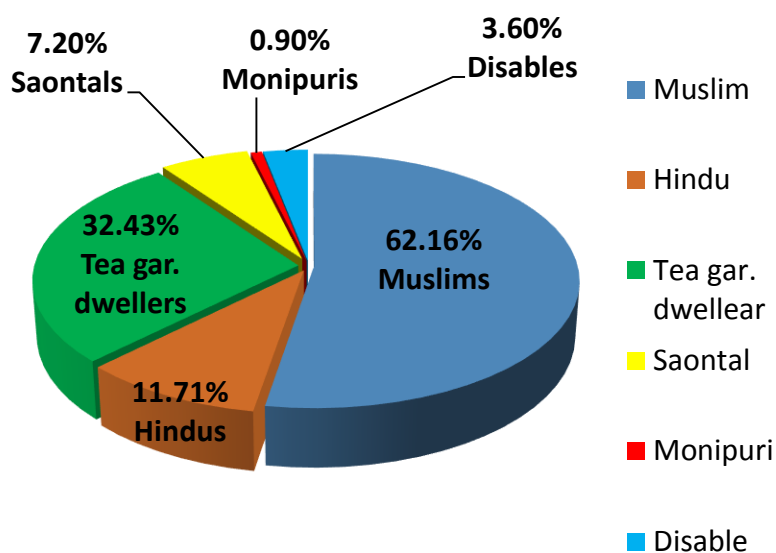
No. of old clients	New Enrolled	Drop Outs	Total delivered in Sep	Present Clients Stats
117	11	07	69	52

Client enrollment status Jan - October, 2015



We tried to enrol new clients from 6 unions of Juri Upazila strictly following Proshanti client selection guideline to avoid drop out but emphasis was given on minority groups like, tea garden dwellers, Hindus, Saontals and Monipuris. We did not get enough response from Fultalla and Sagarnal unions due to long distance and difficult communication. In October 2015 we enrolled 3 Muslim, 2 Saontals, 2 tea garden dweller and 4 Hindus clients from Jayfornagar, Goalbari, Pacshim Juri and Purba Juri unions.

Percentage of client enrolment between Jan - Oct, 2015



The biggest population in Juri –are the Muslims and minorities groups are Hindus, Saontals, Monipuris and tea garden labors but the socio economic condition of Monipuris are much better than Saontals and tea garden labors. The Saontals and tea garden labors little or less access to food, shelter, health and education. We ensured all Proshanti's service for all Saontal and Monipuris like supplement food pack, transport cost, better medicine etc.

Muslim-69, Hindu-13, Tea garden dwellers- 36, Saontals-08, Monipuris-01 & Disables-04

A.N.C Coverage in October, 2015

ANC-1	ANC-2	ANC-3	ANC-4+	Total ANC
11	18	05	08	42

We are committed to ensure quality of ANC that's why we ensured weekly checking of equipment and randomly cross checking is going on of clinical tests and medicines. We observed Weeks, Weight, BP, Hb, Urine Sugar & Albumin, Oedema, Fundal Height, Fetal Position, Fetal Heart Rate, Fetal Movement Felt during the ANC. In October we found some problems of mother like back pain, lower abdominal pain, gastrology, fever and anima. We have established one to one counselling on every ANC and quick referral.



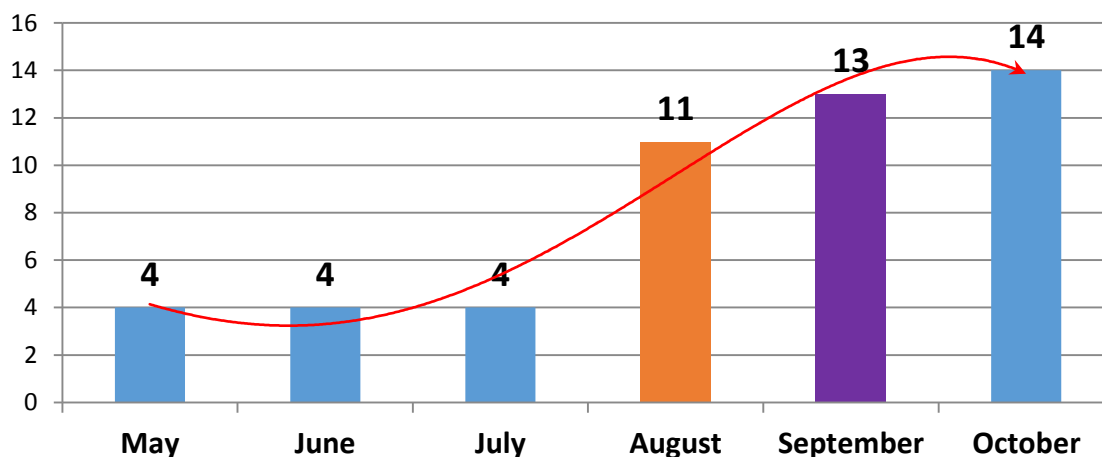
A Health Education session facilitated by Joni Das (MidWife)

Knowledge is the best power and it can change everything easily therefore we are trying to build awareness of our clients on different issues within the health educations. The clients are from the grassroots level and they believe in deep social prejudice and involved in practices. Clients and their relatives like mother in law, sister in law, mother e.g. in our health education season that why this family member serve health messages at family level. This particular awareness sessions conducted by our Nurse / Midwife using different type of logistics. We think these sessions are helping us to discourage TBA delivery.

Early Childhood development status from the pregnancy and it mostly depends on availability of food and quality of ANC. Nutrition is the most important issue during pregnancy it is also an indicator of quality of care we provide. The supplementary food pack grew up mothers' self-confidence and make them tension free about their necessary nutrition. In September we provided nutritional support to 14 malnourished mothers in the form of food package. In October we exclude one mother and include new two mothers for supplement food pack. They are (i) Brishti Suvacar (UWT-12) (ii) Mira Rabidas (PS-71), (iii) Lovely Uriea (PS-72), (iv) Santana Layak (UWT-2), (v) Shagori Rikhmon (UWT-08), (vi) Brishti Suvakar (UWT-12), (vii) Sritee Saontal (UWT-18), (viii) Nomita Saontal (UWT-19), (ix) Sholochana Saontal (UWT-20), (x) Baly Akther (UWT- 29), (xi) Pinki Pul (UWT-31), (xii) Tosumoni Saontal (UWT-32), (xiii) Ponoti Uriea (UWT-33) (xiv) Sreemotj Saontal (UWT-43) in October we carefully observed their change like weight, B.P, Hb%, fungal height, sickness & weakness ratio, etc and their smiling face showed

their inner happiness. Additional nutrition would help the growth of the upcoming child. We are also guiding the clients and their family members on how to make proper use of the nutrition supplement.

Growth of Food Distribution May - October 2015



This month the honorable Upazila Chairman and Upazila Vice Chairman visited our project activity and participates supplement food distribution programme. Upazila chairman told “this is most important and sensitive period of every woman and we are very happy that Proshanti UK is with us and she advised all pregnant mothers to follow midwife’s advice”



Upazila Chairman and Upazila Vice Chairman (juri) are handing over Supplement Food Pack.

We are continuing vitamin A fortified soybean oil and iodine enriched salt to the food pack from August 2015. Each food pack contains; (i) Flour (white) = 5 kg. (ii) Pulse (yellow) = 2.5 kg (iii) Vitamin A fortified soybean oil = 0.5 L.T and (iv) Iodine enriched salt = 0.5 kg.

In October 2015, we have allocated transport fare for 07 clients of (i) Sritee Saontal (UWT-18), (ii) Nomita Santal (UWT-19), (iii) Shulochana Saontal (UWT-20) and (iv) Rita Suvakar (PS-33) (v) Tosumoni Saontal (UWT-32), (vi) Ponoti uriea (UWT33) and Sreemotj Saontal (UWT-43) for ensuring ANC timely.

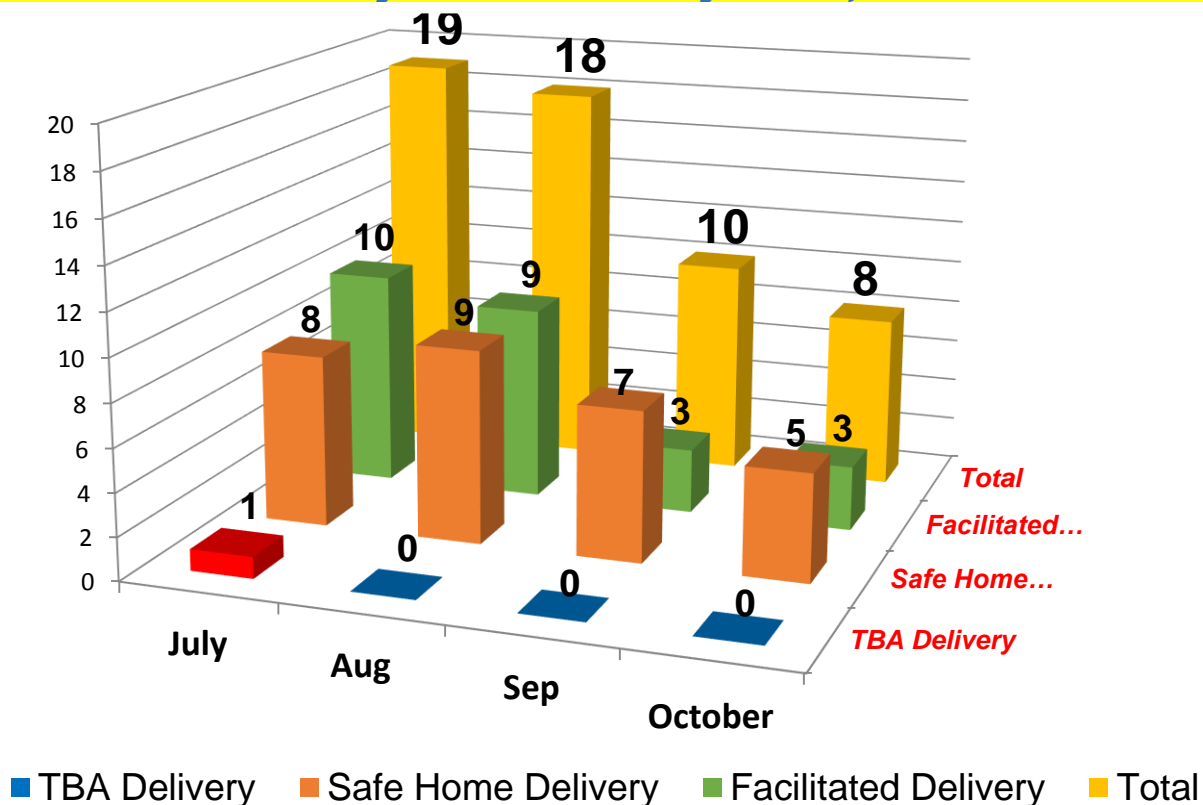
Delivery Conducted

Month	LUCS	Facilitated Delivery	Safe Home Delivery	TBA	Total	Remarks
Aug- 2015	02	07	09	00	18	Mus-11, TG-05, Hin-02
Sep- 2015	01	02	07	00	10	Mus-07, TG-01, Hin-01
Oct - 2015	00	03	05	00	08	Mus-04, TG-02, Hin-02

It is a big challenge to eliminate TBA delivery but we are committed to bring it down as much as possible to avoid any undue accident although the clients believe in deep social prejudice, family barrier, religious barrier and lack of education. As an action we tried to grow up client awareness during ANC and established a strong client monitoring system, one to one communication & relationship between Proshanti

and its clients in order to overcome this huge challenge. We can now claim that we have managed to reduce TBA delivery 'zero' since March 2015 within our own clinal.

Delivery status of July - Oct, 2015



P.N.C Service October, 2015				
<i>P.N.C-1</i>	<i>P.N.C-2</i>	<i>P.N.C-3+</i>	Total	<i>Remarks</i>
06	07	00	13	

We are trying to ensure a more focused PNC visit at home with the aim to monitor that the mothers are taking proper nutrition that helps her incoming child. During PNC visits midwives are counselling mothers on different issues like postpartum nutrition, importance of exclusive breast feeding, system and rules of breast feeding, infant and young child feeding, child vaccination, postpartum family planning etc. As a result of PNC visits 4 mother took Family Planning method in September for ensuring postpartum health. In October 2015 we have been able to ensure 100% postpartum IFA and vitamin 'A'.

Clinical issues:

We are continuing USG and all clinical tests at AAMC by Dr. Nisat Jahan and others. This month 32 clinical test has been done by AAMC. Within these tests 18 were routine tests and 14 USG tests. We nagged to ensure proper & quality medication as per prescriptions for our clients this month. Randomly clients' medicine packets were cross checked to ensure that no foul play was done by the any party. We shall continue to do this every month.

Critical case report:

This month we have successfully managed 3 high risk client, Susna Biswash (27) PS-42, Amana Begum (30) PS-52 both mothers delivered a live female baby and Mira Rabidas (22) PS-71 delivered live male babies. All babies and mothers were given proper treatment and now they are keeping well. In September we referred and managed 5 critical new-born successfully. This month the baby of Mira Rabidas (22) PS-71 has been died due to prenatal pneumonia. She is mentally retired and delivered a male baby on 10/10/2015 at AAMC and Dr. K Zamman referred the baby at OMC Sylhet after necessary treatments the authority of OMC discharged from the hospital dated on

17/10/2015 and the neonatal died on 24/10/2015.

Staff issues:

In October 2015, Aporna Rudra Pal and Joni Das conduct 5 home deliveries successfully and ensured proper documentation. Both of them are now capable enough to ensure quality of ANC, Delivery and PNC up to the Proshanti standard guidelines and earned clients trust. As a result we are experiencing increased client flow everyday.

We are continuing weekly sharing and coaching to enhance and establish working knowledge to improving quality of work of our staff. Documentation & knowledge cross-checking, on job training, coaching and mentoring are going on to develop the skills.



Joni Das (Midwife) is providing ANC to a Client.

Networking: UHC/UNO/NGOs:

Networking and coordination with different stakeholders are going on especially with the Local Government. This month we provided monthly progress reports to the UH&FPO, UNO and DC Office.

AAMC:

We are continuing daily sharing with AAMC in every service related issues and a friendly working environment is prevailing between AAMC and Proshanti UK.

Problems encountered:

- Dr. K. Zaman shifted his chamber from AAMC but has always given priority to our clients as usual.
- Client's tendency to hid primary information to get admission under this project is all difficult.
- Client's lack of access to a mobile phone has been a big hindrance for smooth communication.

Overall management concerns:

- Immediately arrange health card for client.
- Need a Multimedia or a Monitor.
- Need a Motorcycle.

Any other issues:

Our well-wisher **APEX Club of Hakaluki View, Juri** is a local voluntary social organization and involved with different social activities. This organization support & promote Proshanti's activities strongly and built a strong relationship day by day. APEX Club is continuing the partial assistance towards our food supplementary project for October, 2015.

In October the honourable project Director Hadi Hossain Babul visited project activity. He met with different stakeholders, Local Government, Local Administration and many Proshanti clients discussed about service, medicines, supplement food, different issues and their satisfaction and claims. He monitored staff activities and checks different documents especially financial documents.

