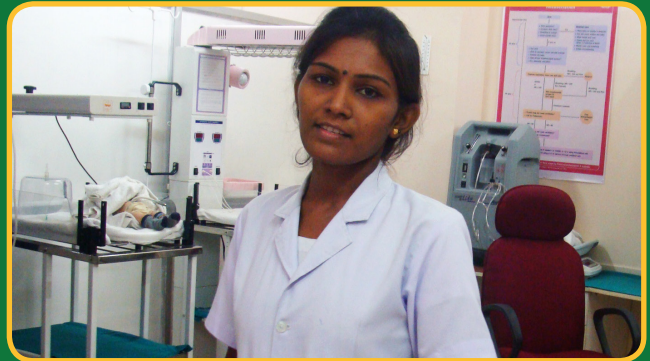


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INTERVIEW

Bottom-up approaches and transparency make all the difference at the grassroots

Anshuli Arya, Principal Secretary, PHED, Bihar, says the Bihar Technical Assistance Support Team (BTAST) interventions have helped a change in the government's approach towards social development. She speaks with OneWorld on how the right technology can make a difference in service delivery.

OneWorld: The Government of Bihar and DFID are working closely with the Public Health Engineering Department (PHED) on the Sector Wide Approach to Strengthening Health (SWASTH) programme. Can you please tell us more about this engagement?

Anshuli Arya: The PHED, looks after rural water supply and construction of toilets and their usage. BTAST has been associated with us for the last six years, and has given us financial assistance and technical assistance. Under financial assistance, the department has received approximately Rs 150 crore through which we have executed a number of important schemes like the 200 mini water supply schemes to rural habitations and five multi village pipe water schemes as well as built 300 WATSAN complexes. We have also undertaken blanket testing of hand pumps to monitor water quality with BTAST help.

OW: What kind of technical assistance has been provided by BTAST and how has this strengthened departmental initiatives?

AA: The supply of water as well as the construction and usage of toilets is a technical matter with a social engineering component. BTAST has helped us in many ways, including preparation of technical manuals for undertaking water quality, preparation of SOPs, a booklet related to technical assistance for the construction of toilets, mason training videos and Community Led Total Sanitation (CLTS) videos. In Bihar, we have taken the Open Defecation Free (ODF) approach using the CLTS methods wherein BTAST has given us a lot of material. They have undertaken field studies to see how the CLTS approach has been working and the gaps that we need to fill up. Our engineers also need to be kept aware about new technologies. BTAST and DFID have been able to acquaint us with these, by preparing several manuals and videos so that these social development concepts are easier. It has certainly helped improve service delivery and professionalism in the department. We also learning about best practices in other parts of India and the world, which has helped us in broadening our horizons.

OW: BTAST has helped in setting up a Central Grievance Redressal System (CGRC). Can you share more information on this?



AA: Bihar has followed a very innovative approach and our Hon'ble Chief Minister also wanted a system where we have a user friendly interface with the public. We have set up an Interactive Voice Response System (IVRS) enabled centralised grievance redressal system with a toll free number that works 24x7. Anyone can dial that number and register his grievance. We ensure that necessary action is taken. This has become very popular.

OW: Many districts in Bihar face arsenic and fluoride contamination in water. How is the PHED working to address these issues?

AA: Blanket testing will help us identify sources with arsenic contamination and to systematically address that problem. For meeting this challenge, SWASTH has provided us technical support on this and we are making a holistic plan for this redressal. Also, with SWASTH help we have four mobile water testing laboratories which send us data on water quality testing. These have proved useful in cases of flooding, melas and big gatherings.

OW: How important is behaviour change to the success of Open Defecation Free (ODF) villages? Can you share the initiatives taken by the department to promote and monitor toilet usage?

AA: We had been concentrating on the construction of toilets but found that it was not very successful. Toilets were being constructed but were not being put to use,

so the Government of India and other agencies like SWASTH, UNICEF all realised that behaviour change is more important than the construction itself. BTAST gave us technical support in 10 districts where we undertook CLTS approach which has been found to be very successful. BTAST developed technical manuals and a number of videos to motivate people and disseminate information. We hope to take this further.

OW: As a policymaker, what have been the key takeaways for you from SWASTH?

AA: What I have learnt from SWASTH is that we need to work closely with communities and follow a bottom-up approach for the success of any development programme. The beauty of this programme is that people are being involved, therefore, first people are motivated and then made to understand the benefits that are likely to accrue to them and if they change their habits. Besides community participation, the other important thing I have learned is transparency.

If we include these in our daily government functions, then we will be able to give better delivery to the people.

OW: PHED has adopted various SWASTH interventions, like, mobile water quality systems and the

CLTS approach. Which are the initiatives that can be replicated by other states?

AA: Some states are already following things based on their local conditions, but a basic thing is that to be able to reach out to people, whatever technology is required, we should go in for that. For example, in Bihar, since we have a large number of hand pumps in remote areas, we should have mobile testing labs and the data transfer too should be fast. Similarly, we have the IVRS technology where people can register their complaints and we should be able to redress these fast. But if we only register the complaints and do not redress them, it loses its real meaning.

OW: Drinking water and access to toilets is a priority area for the GoB and constitutes part of the seven commitments made to the people. So how has BTAST been able to contribute towards making this a reality?

AA: Certainly, the intervention by BTAST was a big contribution but it had its limitations because of the scale of the intervention as we would have liked to have it on a bigger scale. Now I hear the programme is closing down, so whatever lessons we have learnt from the programme, I am sure they are going to be useful for our future endeavours. □

REGIONAL UPDATES

Bihar constitutes State Monitoring Teams to improve health services

The Department of Health, Government of Bihar has constituted State Monitoring Teams to improve the quality of health services being provided under the National Health Mission and sharpen coordination up to the peripheral level.

STATE Monitoring Teams have been constituted by the Department of Health, Bihar, to improve the quality of health services being provided under the National Health Mission and sharpen coordination up to the peripheral level. These teams make visits to the health facilities and assess the quality of services.

The Bihar Technical Assistance Support Team (BTAST) is supporting this activity of the State Health Society Bihar (SHSB) as nominated members on these teams. Each team has been assigned a district for mentoring and supportive supervision. BTAST members have made visits to facilities in five districts—Patna, Nawada, Darbhanga, Gopalganj and Rohtas—in December 2015 as part of these monitoring teams.

The team assesses services including family planning, immunization services, maternal (Labour room, Blood Bank, Operation Theatre) and neonatal health services

such as Newborn Care Centre (NBCC), Newborn Stabilization Unit (NBSU), State Newborn Resource Centre (SNCU); Accredited Social Health Activist and hygiene and infection control measures being observed at the health centers.

The team records its observations and submits a report with the findings, observations and recommendations on these services. The inspection team shares its findings with the Civil Surgeon, Deputy Superintendent, Deputy Superintendent FRU and the District Health officials at a debriefing meeting.

During the meeting, corrective actions with timelines are discussed, in relation to any gaps or irregularities that may have been observed during the visit. Updates for each are finally provided to the Executive Director and the State Health Committee about the gap closure activities and compliance measures.

Plans are also on for the State Monitoring Teams to review the progress of other health programmes and schemes at the district level every month and submit their findings to the Executive Director and the State Health Committee. □

FEATURED UPDATES

Skills Labs help nurses and doctors learn and serve better

Two Skills Labs in Bhagalpur and Muzaffarpur districts of Bihar conduct RMNCH+A prescribed six-day training programmes for improving the skills of nurses and doctors in maternal and child health.

SKILL sets of health care professionals are crucial for delivering quality services. To enhance proficiency of doctors and nurses, two Skills Labs have been set up in Bihar under the Department for International Development (DFID-UK) funded Sector Wide Approach to Strengthening Health (SWASTH) programme.

The Skills Lab at the Jawahar Lal Nehru Medical College and Hospital (JLNMCH), Bhagalpur district, which aims at strengthening the public sector health system in the state, is aligned to the Government of India's Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCH+A) strategic approach.

The training follows a six-day curriculum for improving the skills of providers in practice and is divided into demonstration and knowledge sessions on topics related to maternal and child health. In hands-on sessions, participants practise on mannequins, conduct simulation exercises, and learn through demonstration videos and presentations. The theory sessions focus mainly on skilled birth attendance, Integrated Management of Neonatal and Childhood Illness, and the Navjaat Shishu Suraksha Karyakram curriculum.

The Skills Lab has skill stations for two levels – basic and advanced. There are 38 skills under basic and 13 skills under add-ons. The basic training conducted in the Skills Lab is for service providers like General Nurse Midwives, Auxiliary Nurse Midwives, Staff Nurses, Nursing Supervisors and Medical Officers who are key to delivering RMNCH+A services and are posted at 'Delivery Points'.

All States & Union Territories have identified Delivery Points above a certain benchmark of performance to prioritise and direct resources in a focused manner to these facilities for filling gaps like trained and skilled human resources, infrastructure, equipments, drugs and supplies, referral transport, etc., for providing quality & comprehensive RMNCH+A services.



The add-on skills are meant for service providers like medical officers, obstetricians & gynaecologists, and selected nurses, who are posted at First Referral Units, 24x7 Primary Health Centres and higher facilities.

Skills Lab Master Trainer, Princy P Samuel says, "The nurses are trained in ante-natal, intra-natal and post-natal care. No doubt, this training should be mandatory for all in-service nurses as it helps them in enhancing their skills."

Significantly, the Skills Lab training has also been incorporated in the nursing education programme for pre-service trainees and trainee nurses from the nursing school attached to the hospital. Additionally, the Skills Lab provides facilities for Continuing Nursing Education and Continuing Medical Education. Concerted efforts by various stakeholders and the considered set-up of the Skills Lab has ensured optimal utilisation of its facilities.

Safina Toppo, a Master Trainer at the Skills Lab in Bhagalpur, adds that the nurses are also trained on biomedical waste management and infection control. "The nurses enrolled at the Skills Lab go through several practice sessions that make them confident in delivering better results in the field," she says.

The training sessions are interactive and participatory and trainers proactively initiate dialogue with participants. Dr Om Prakash Prasad, Regional Additional Director,



Bhagalpur, says that Skills Labs are crucial for any Auxiliary Nurse Midwife (ANM) to learn as practical demonstrations are not done at the district level. “Four mandatory ante-natal care (ANC) check-ups are key to safe pregnancy and to prevent any complications during childbirth. If four ANC check-ups are done, then there is a high chance of the mother and the child being healthy. The Skills Lab is a safe space for ANMs to learn how to carry out ANC check-ups correctly,” he says.

Deepshikha, a staff nurse hailing from Bahadurgarh in Bhagalpur and working at JLNMCB, says that the six-day-training she received at the Skills Lab has helped her to extend much needed services to both the mother and the child. She says, “Enhancing my skills related to ante-natal, intra-natal and post-natal care, which are crucial in this field, has made me more confident and equipped me with the knowledge to serve better the mothers and children who come to me in need. For example, I am better equipped and feel competent in the use of partographs to monitor the well being of a pregnant woman.”

In the same vein, staff nurse Kirti Kiran Murmu who hails from neighbouring Jharkhand, says that the training has improved her counselling skills, which she has to use often in her job as a nurse. “We now understand the significance of routinely counselling mothers of newborns on topics like exclusive breastfeeding for the first six months and other precautions that need to be followed when taking care of a newborn,” she says. At the universal precaution skill station, she claims to have got a thorough understanding on the basic requirements for assisting childbirth - like hand-washing, preparation of chlorine solution, personal protective attire, and sterilisation.

Talking about the training at the Skills Lab, Vibha Kumari, staff nurse at JLNMCB Bhagalpur, says that skills acquired at the lab are crucial for preventing mothers and newborns from getting infections. She adds, “We have been given demonstrations on cervical dilatation and normal childbirth. But we have also been taught decontamination, cleaning, sterilisation and storage.”

Dr Vijay Kumar, Civil Surgeon, Bhagalpur, says that the skill building of health personnel is a must for delivering quality health care. “It’s necessary for proper health care management that the professionals know their work. Therefore, skill building of health personnel like nurses should be the first priority for any state and not just Bihar,” Kumar adds.

Arun Prakash, Regional Programme Manager, State Health Society-Bihar, Bhagalpur, says that the Skills Lab has brought efficiency in post-partum management.

He adds that most government nurses are not aware of basic practices of the labour room. “Every labour room has a newborn centre with essential equipment like vacuum and suction machines, oxygen and ambulance bags. Nurses should be able to handle this equipment. Various skills like the method for infusion of fluid in the body are crucial for performing basic duties like ante-natal care, post-natal care, and immunisation of children as per the laid down schedule,” he says.

Giving an overview of the training programmes, Mithilesh Kumar, Manager, Skills Lab, Bhagalpur, says that 40 batches of nurses were trained in the first year since the Skills Lab started in March 2013. In the last two years, from July 2013 to August 2015, the Bhagalpur Skills Lab has trained 1,246 participants in 88 batches.

The Skills Lab at JLNMCB is a regional training hub for the Bhagalpur division and covers 13 districts. Similarly, the Muzaffarpur Skills Lab covers 11 districts. Human resources for health are critical to quality of care and given the challenges in the health sector in Bihar, the state needs many more Skills Labs like the ones established under SWASTH with BTAST support. □



OTHER UPDATES

Bihar government holds gender sensitisation workshop for Judicial Magistrates and Protection officers

Women Development Corporation holds a one-day workshop for Judicial Magistrates and Protection Officers in Patna to increase awareness on domestic violence as well as sexual harassment at the workplace.

THE Women Development Corporation (WDC) of the Bihar government organised a state-level workshop for Judicial Magistrates and Protection Officers on the Protection of Women from Domestic Violence Act 2005 (PWDVA) on January 16, 2016. The workshop was held by the Bihar Technical Assistance Support Team (BTAST) under the Sector Wide Approach to Strengthening Health (SWASTH) programme and was supported by Muzaffarpur-based National Institute for Rural Development, Education, Social Upliftment and Health (NIRDESH).

The aim of the state-level workshop was to increase awareness about domestic violence as well as sexual harassment at the workplace. The well attended workshop saw the participation of Judicial Magistrates and Protection Officers from all districts of Bihar.

Dr N Vijaya Laxmi, Managing Director, WDC, highlighted the role of WDC as a nodal agency for implementing the provisions of PWDVA in Bihar. She said that PWDVA's successful implementation depends upon the work of judiciary, police and administration. Elaborating on the important role of the women's helpline in providing succor to women, she said: "It is not just a telephone line. It's a team consisting of a Protection Officer, a Counsellor and a Coordinator who deal with each case with the help of judiciary and police."

It is a unique achievement in Bihar under which a victim has to be given interim relief within three days and justice within 60 days, Dr Vijaya Laxmi added. Speaking on the occasion, the Hon'ble Justice of the Patna High Court Ramesh Kumar Datta said that PWDVA is not a very new Act, but many people are not aware of it. He said that the Act will succeed in curbing atrocities and violence against women only if all stakeholders join together to implement its provisions. PWDVA provides for free legal aid to women. He added that even many lawyers are not aware of the Act.

BTAST Team Leader Prakash Kumar shared some of the key achievements of the project. He added that one



of the very important things that is in process is the setting up of the Gender Resource Centre in Bihar for which the Department for International Development (DfID) has provided funding.

Bharat from Vishakha, a group for women's education and research in Jaipur, highlighted the unique features of the Act, the procedures to be followed and relief provided to the victims under PWDVA and the role of major stakeholders. □

WATCH VIDEO



Anshuli Arya, IAS, Principal Secretary, Public Health Engineering Department, Government of Bihar, speaks about the Sector Wide Approach to Strengthening Health (SWASTH) programme and its engagement with her department.



Note: To watch this video, please scan the QR code using your smart phone's QR code reader.

URL: <https://www.youtube.com/watch?v=PcKOPMxrc6M&feature=youtu.be>

Manual needed to help cope with public health emergencies



TO cope with public health emergencies arising out of repeated outbreaks of diseases like Acute Encephalitis Syndrome (AES)/JE in Bihar, a strategy manual for taking urgent actions to control the situation as well as prevent future outbreaks is needed. This was the unanimous view of the speakers at the State Level Consultation Workshop on Manual for Public Health Response in the Event of Disease Outbreaks in Bihar, held in Patna on 2nd December, 2015.

The workshop was attended by representatives from All India Institute of Medical Sciences (AIIMS) – Patna, Bihar Technical Assistant Support Team (BTAST), IPE Global, Norway India Partnership Initiative (NIPI), Integrated Disease Surveillance Programme (IDSP), State RMNCH+A Unit (SRU), World Health Organization (WHO), and government stakeholders.

Elaborating on the scope of the proposed manual, Dr Sumit Bansal, Disease Control Expert, BTAST, said, “The strategy manual would assist and guide the government staff to take appropriate and timely action, consistently, and scientifically, improve the quality of investigations and response, and strengthen the disease outbreak control capabilities of the government machinery.” He also talked about diseases requiring investigations, sources of information to detect outbreak, levels of response to different triggers, disease surveillance summary, disease outbreak investigations, evaluation of outbreak management including, etc.

“Any response can be more effective and efficient only when there is coordination in approaches of state

health officials, public health experts and medical professionals,” said Dr Dinesh Agarwal, Policy Lead, Health & Disease Control, and IPE Global. He not only, highlighted the need for coordinated effort from the state to the block level, but also underlined the importance of effective communication for prevention and management of such disease outbreaks.

Dr G K Singh, Director, AIIMS-Patna, suggested that clinicians should use their understanding of epidemiology in their practice. He emphasised on the importance of collecting evidence, which he said should be the basis for formulating policy.

The participants also discussed the need to have a communication plan for dissemination of the manual. Apart from disseminating it at the state and the district level to public and private healthcare institutions, they stressed on the need to share it with the Department for Animal Husbandry, and the Public Health Engineering Department. Besides this, there was a call to set up WhatsApp and E-mail groups of experts to share information related to disease outbreak.

Agreeing that dissemination is required to derive optimum benefits from the manual for setting up an effective system to prevent and manage the outbreaks, Prakash Kumar, Team Leader, BTAST, said that they would support the Government of Bihar and medical colleges in dissemination of the manual from the state to the block level. He also shared that BTAST has plans to support the State Health Society, Bihar, for printing of the manual both in English and Hindi languages. □

BTAST shares key SWASTH findings at a national conference

BTAST shares key SWASTH findings at a national conference Bihar government officials and BTAST experts working in the fields of health, nutrition, women empowerment, water and sanitation and monitoring and evaluation share experiences from the state.

SEVERAL academicians, researchers and practitioners from across India, got together in Thiruvananthapuram for sharing their knowledge and experience on research and practice with a special focus on health and development issues.

The conference, which was held from the 10th to 12th of December 2015, was organised by the Indian Association for Social Sciences and Health (IASSH) on, 'Health and Development: Research, Practice and Policy.'

Research papers on varied topics were presented by development experts from across the country. Development interventions taking place in Bihar were showcased by experts from the Bihar Technical Assistant Support Team (BTAST). The SWASTH programme has supported the health, nutrition and WASH sectors in Bihar over the past six years and learning from this was presented at the conference.

Presentations at the conference included, ones on understanding the linkages between poor sanitation practices and adverse pregnancy outcomes, the role of a state-wide nutrition campaign (Bal Kuposhan Mukh Bihar) on Anganwadi worker's knowledge levels, determinants of infant mortality in Bihar, the improvements seen in the services of Village Health Sanitation and Nutrition

Days, factors influencing violence against women, utilisation patterns of maternal health services in two districts of Bihar, and a presentation on Gram Varta – a community based intervention. These were supported by an overall presentation on SWASTH, and the successful initiatives undertaken by the programme such as capacity building, financial reforms, accountability and transparency that have contributed to better governance and improved services for people.

The team leader and senior officials of BTAST from each sector – health, nutrition, WASH, MLE, gender and programme implementation attended the conference. □



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REFLECTION Updates from SWASTH - BTAST

URL: <http://swasth.btast.oneworld.net/reflection-updates-swasth-btast>

SPECIAL FEATURE

Empowering women spurs change at the grassroots in rural Bihar

Gram Varta or Village Dialogue spreads awareness among women on health, nutrition, water, sanitation and hygiene.



“Ghar Ghar alakha jalaenge hum, hum badalenge zamana. Sab se banaenge mitti ko sona, jeevan banega upwan salona. Seejhake pull banaenge hum, hum badlenge zamana...”

(We shall transform the times by enlightening our society. Together we shall transform sand into gold, life would be like a beautiful orchard. Together we shall build a bridge and transform our society...)

THIS powerful song wafts through villages as women, with the aid of facilitators, begin to engage in dialogues on a range of issues that shape their everyday lives. Struggling to provide adequate and appropriate food to their infants, having no access to toilets, facing killer diseases like diarrhoea and malaria, lack of access to necessary healthcare are some of the realities that women in many rural areas of Bihar have lived with over the past several years. While there are many factors that are responsible for this situation, it is also true that women themselves had little access to

much needed knowledge and were therefore deprived of many rights.

But much of this is changing now. In the heart of Bihar, an unseen revolution is taking place through Gram Varta. Started under the Sector Wide Approach to Strengthening Health (SWASTH) programme in the state, in collaboration with the Bihar Technical Assistance Support Team (BTAST), Gram Varta (or Village Dialogue) adopts a Participatory Learning and Action (PLA) technique to educate women through a 20-meetings cycle on health, nutrition and sanitation.

It uses interactive methods to enable women to identify and prioritise problems related to poor nutrition and health, find local solutions, promote behaviour change and adopt appropriate actions for themselves, their children and families.

Testimonies of three women whose lives have been transformed as a result of Gram Varta are presented here.

Shirmani

Becoming a leader...



Thirty-five year old Shirmani, the mother of a teenage girl, is from Makhdumpur in Jehanabad district. For years she has led the life of any other rural woman trapped in the vicious circle of social taboos and poor health practices. Not just her, but her family too was steeped in traditional ways of healthcare behaviour due to the prevalent social and cultural practices.

But unlike several other women, Shirmani broke age-old barriers – thanks to Gram Varta. When her daughter attained puberty, Shirmani refused to let her be treated as ‘dirty’ during the period and strongly insisted on her to adopt hygienic practices. Her daughter now uses sanitary napkins, something unheard of a few years ago in villages of Bihar.

Shirmani says: “After attending the trainings by Gram Varta, I became conscious and took the initiative to talk to my daughter. I was concerned about the effect on her health if she did not follow the correct personal hygiene practices.”

A Master Trainer for Gram Varta, Shirmani says: “I have been associated with Gram Varta since its inception in Jehanabad. Initially, I joined as a facilitator but after completing 2-3 years, I was promoted and I became a Master Trainer.” As a Master Trainer, she is constantly addressing the challenging task of bringing changes in the knowledge, awareness and practices amongst the SHG members and within her community.

This helped Shirmani not only break boundaries, but also helped her emerge as a leader within her own community. She is beginning to see the results of her perseverance herself. “It took me three years to make half the village free of open defecation, especially the areas inhabited by the Mahadalit community. I used to conduct five group meetings in a month for all the phases at different places,” she says.

Shirmani confides that participating in Gram Varta makes her feel empowered, “Being a facilitator, I see myself as a person who supports the well-being of individuals. I am trained to deal with the problems of the community and find solutions in consultation with them. I am respected and admired for my work. I am someone who is looked up to with high regard in the family. I feel privileged to be a part of such an initiative. It should be continued for prolonged impact.”

Mamta Devi

Fighting against all odds...

Gram Varta has come as a big game changer for many other women. Mamta Devi from Kalanour village joined the local village Self Help Group (SHG) in 2012 and thereafter became a part of the Gram Varta meetings.

Through the Gram Varta meetings, she learnt about the benefits of cleanliness, hygiene and the importance of building toilets in every household.

Mamta says that when she became aware that open defecation can lead to diseases and ill health, she decided it was high time for her family to build a toilet in their house.

However, she found it difficult to persuade her husband and in-laws about constructing a toilet, who felt it was unnecessary. The cost implications were also to be considered. “Finally when they did not relent, I thought of going against the wishes of my family and construct a toilet for my children and myself. I went to the leader of my SHG and asked for a loan to build the toilet,” she says. With help from the SHG, she took the initiative and went ahead to get a toilet constructed in her house.

A confident Mamta proudly says that now even her husband appreciates her bold step as there has been a positive impact on their overall health. “Now, I am spreading the message further by propagating, ‘Jis ghar me shochalay banana, usi ghar me beti byahana’ (Marry your daughter only in a house that has a toilet).”



Gram Varta inspired many other women in these villages to take up issues like sanitation in their areas despite opposition from family members.

Saroj Devi

Ensuring a healthier tomorrow...

Most villages in Gaya district of Bihar are going through various phases of Gram Varta meetings. Several meetings in the cycle focus on nutrition and health check-ups to identify malnourished children. Severely malnourished children are then referred to a Nutrition Rehabilitation Centre (NRC) for intensive care and rehabilitation.

Saroj Devi, a 22-year-old mother of two, had been regularly attending the Gram Varta meetings. Here, she learnt about how children's growth can be monitored and why it is important to do so regularly. She was then keen to get children measured for their weight and height. Much to her shock and despair, one of her children was identified as chronically malnourished. With the help of a local Anganwadi worker she took the child to the NRC for treatment.

After her visit to the NRC, her child was put on an increased diet and she has been taking care of the child as advised at the NRC. "I was shocked to know that my child was malnourished. The NRC provided milk along with balanced meals four times a day. I also learned to keep the surroundings around my children neat and clean. The weight of my child increased after the visit," she says.

Whether it's Shirmani, Mamta or Saroj, each of these doughty women is bringing about change on the ground in rural Bihar, and what binds them as change-makers is the Gram Varta initiative. Neena Sharma from BTAST feels that Gram Varta has played a crucial role in enhancing the decision-making power of rural women. She is excited at the level of awareness generated by Gram Varta. "The success of Gram Varta shows that it has helped rural women take decisions related to health, nutrition, and hygiene not just for themselves but also for their families.

It has brought social change, generated livelihood opportunities, and increased their knowledge and awareness, truly empowering the community," she says. □



Gram Varta is implemented through the Government of Bihar's Women Development Corporation, JEEViKA (a rural livelihoods project) and Bihar Mahila Samakhya. It reaches out to nearly 800,000 women and their families through 78,300 Self Help Groups, which have a membership of around 10 - 12 women per group.



Sector Wide Approach to Strengthening Health (SWASTH)

Government of Bihar Initiative, Supported by DFID, UK

SWASTH programme aims to improve the health and nutritional status of people of Bihar by increasing access to better quality health, nutrition, and water and sanitation services particularly for the underserved groups. The focus of this programme is to strengthen the systems through better planning, organizational strengthening & human resource management, decentralization and convergence among key departments. The programme also uses community level processes to manage, demand and monitor services.

Bihar Technical Assistance Support Team (BTAST)

Sector Wide Approach to Strengthening Health in Bihar (SWASTH)

Main Office: House No. 10, IAS Colony, Kidwaipuri, Patna - 800 001, Bihar, India.

Phone: +91 612 2535577/2523049 | Fax: +91 612 2285674

Website: <http://swasth.btast.oneworld.net/>

Bihar Technical Assistance Support Team (BTAST)



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