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FINAL PROJECT REPORT

SAMAGRA

*Establishing a resilient health system for
urban poor in India.*



Agreement Number: 4588-World Health Partners -11 December 2020

Project Duration: December 11, 2020 to March 10, 2022

Submitted by: WHP on May 21, 2022

Acronym

AMC	Ahmedabad Municipal Corporation
ANC	Ante Natal Care
ANM	Auxiliary Nurse Midwife
ASHA	Accredited Social Health Activist
AWW	Aanganwadi Worker
CCC	Centralised Control Center
CDMO	Chief District Medical Officer
CDPO	Child Development Project Officer
CME	Continuing Medical Education
DBT	Direct Beneficiary Transfer
DIO	District Immunization Officer
DSO	District Surveillance Officer
DTO	District TB Officer
ELA	Expected Level of Achievement
FO	Field Officer
INC	Intra Natal Care
IEC	Information, Education and Communication
IP	Implementing Partner
IUD	Intra Uterine Device
LOP	Length of Project
MCH	Maternal and Child Health
MDR TB	Multidrug-resistant Tuberculosis
MO	Medical Officer
MOIC	Medical Officer In-Charge
NED	North East Delhi
NPY	Nikshay Poshan Yojana
NTEP	National Tuberculosis Elimination Program
PNC	Post Natal Care
PSI	Population Service International
PUHC	Primary Urban Health Center
UHND	Urban Health and Nutrition Day
USAID	United State Agency for International Development
WHP	World Health Partners
XDR-TB	Extensively Drug-Resistant Tuberculosis

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I. Executive Summary

India is caught up in an epidemiological mosaic i.e. a mix of disease patterns of both developing and developed nations. While on the one hand we are still struggling with diseases of poverty, communicable (malaria, TB, HIV/AIDS) and non-communicable (protein energy malnutrition in children, anemia, and malnutrition among pregnant women), we are, on the other hand, fast catching up with diseases of developed nations like diabetes, coronary heart disease, and hypertension, brought about by a rapidly growing economy, sedentary lifestyle, faulty dietary patterns and obesity. To meet these rapidly emerging challenges, penetration of health services and their utilization by the population, particularly in urban slums which have very poor access to health services, is critical.

Project SAMAGRA aims to create an urban health ecosystem that is responsive, affordable, and equitable, and which provides quality preventive, promotive, and curative primary health care for the urban poor, with a focus on women, girls, and other vulnerable populations. Key focus areas of the project are family Planning, maternal and child health, tuberculosis and COVID-19.

During 15 month's project duration, 86,940 people were reached with messages on MCH services, of which 16,058 were referred for various services (ANC, PNC, Delivery and immunization) and 14,150 received these services. For family planning, 314,900 people were reached with messages on FP products and services. Of the 11,878 referred for various products or services, 8,194 adopted a method of their choice. Furthermore, the SAMAGRA partner reached out to 5,24,840 persons with TB messages of which 7,797 were identified as presumptive cases, 605 were diagnosed TB positive. In addition to this, to generate awareness on COVID-19, 5,21,064 people were screened and 9,332 were identified with COVID like symptoms. Of these, 518 tested COVID-19 positive. The SAMAGRA partner has also trained 639 front-line workers and 459 facility-based health workers to prepare for and respond to COVID-19.

Project Objectives

- To increase the use of modern contraceptives, case detection for tuberculosis (TB) and multidrug-resistant TB (MDR-TB).
- To improve maternal and child health care coverage to include antenatal care (ANC), intra-natal, and postnatal care (PNC) in these populations, along with improving immunization rates.

Geography

World Health Partners (WHP), the implementing partner of SAMAGRA works in slums of **North East Delhi (NED) and Ahmedabad Municipal Corporation (AMC)** in partnership with Population Services International, Government of India, USAID, and local private sector stakeholders.

II. Introduction

World Health Partners (WHP) was implementing SAMAGRA project in select slums of North East Delhi (NED) and Ahmedabad Municipal Corporation (AMC), covering approximately 500,000 people in partnership with Population Services International (PSI), Government of India (GoI), United State Agency for International Development (USAID), and local and private sector stakeholders.

SAMAGRA was awarded to WHP in December 2020 by PSI as an implementing partner (IP) of the project for two locations-Delhi and Ahmedabad. After 15 months of work, the SAMAGRA project is come to a close on March 10, 2022.

SAMAGRA, designed to improve urban health, with a focus on women, girls, and other vulnerable populations, will increase the use of modern contraceptives, case detection for tuberculosis (TB) and multidrug-resistant TB (MDR-TB). Additionally, it will also improve maternal and child health care coverage to include antenatal care (ANC), intra-natal, and postnatal care (PNC) in the target populations, along with improving immunization rates. Vertical programs integrated in Samagra are family planning, maternal and child health, tuberculosis and COVID-19.

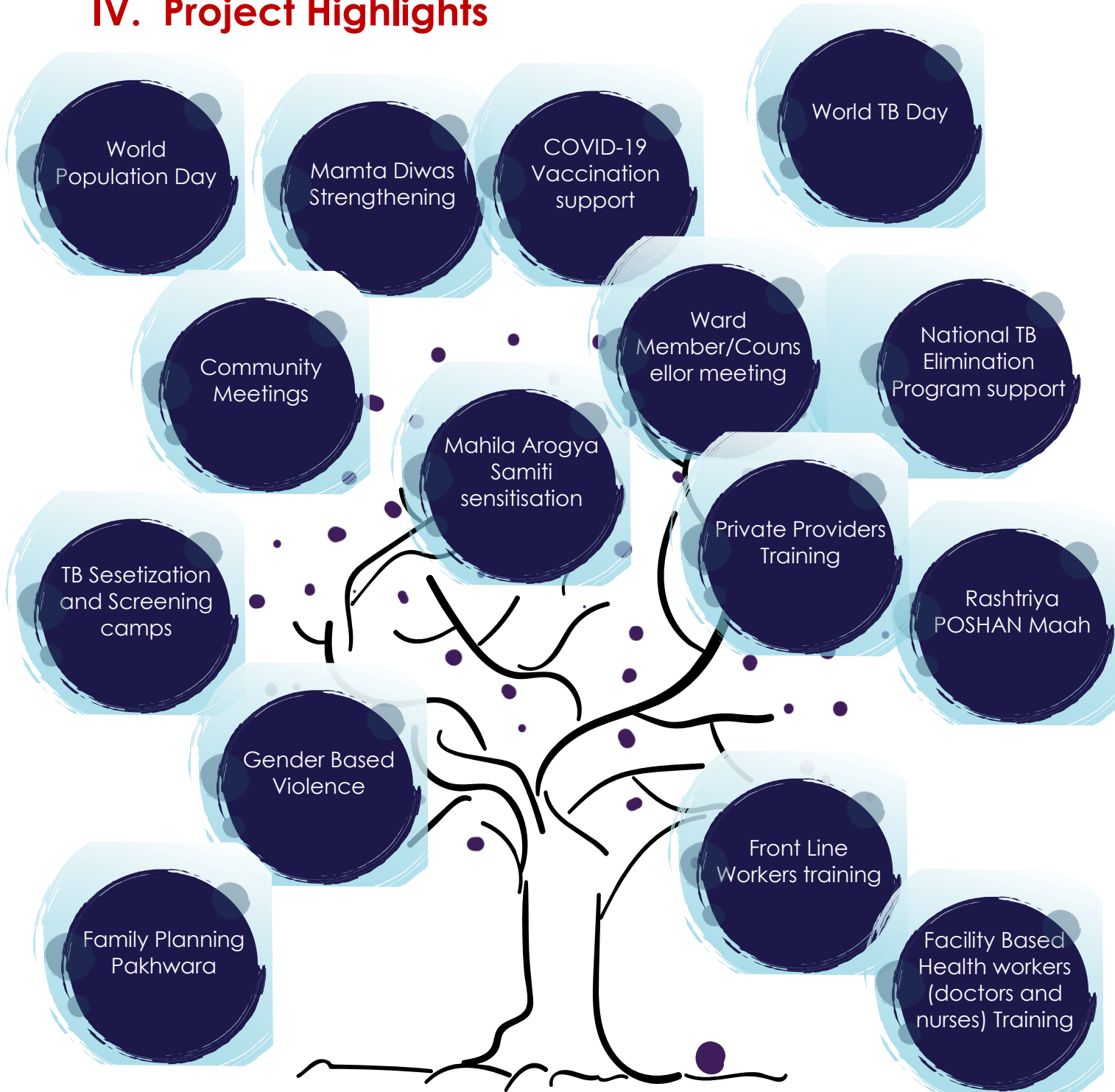
All project objectives are achieved by conducting household mapping, engaging the private providers, capacity building, counselling the community and family for FP and MCH, sensitization and screening for TB & COVID-19. A Centralized Control Centre (CCC) at the backend manned by trained personnel conduct tele-consultation, counselling and follow up. CCC role was significant and enormously helpful specially during the COVID-19 pandemic, where there were a lot of restrictions imposed in Delhi and Ahmedabad. CCC through its tele-callers and medical consultants provided counselling and medical consultations to over 25,000 beneficiaries. A client satisfaction survey was also done by the CCC, where 97% beneficiaries fully satisfied with the service they received and facilitated through project SAMAGRA.

SAMAGRA partner has achieved more than 100% in both the project locations– NED and AMC, against the expected level of achievements (ELA). The project was recognized and appreciated by the district health administration of NED and AMC on many occasions including World TB Day, World Population Day, Deworming Day and family planning fortnights. SAMAGRA partners is now member in various district level committees such as district task force for immunization, health days planning committees and committee for implementing mission Indradhanush 4.0.

III. Project Deliverables

Sr. No.	Reporting Indicator	ELA (NED+AMC)	Achievement	Ach. %
1	Total Population Coverage by intervention related to COVID-19 with USG resources	501,007	574,662	115%
2	# of the facility-based health workers (doctors, nurses, CHOs, pharmacists, ANMs, MPWs, Aanganwadi centers) trained to prepare for and respond to COVID-19 with USG support	400	459	115%
3	# of community frontline workers (e.g. ASHAs, TB champions, community volunteers, sanitation workers etc..) trained to prepare for and respond to COVID-19 with USG support	600	614	102%
4	# of people **reached with risk communication materials (note: does not include mass media and social media)	400,806	521,064	130%
5	# of copies of COVID-19 materials printed	100,000	150,000	150%
6	# of copies of COVID-19 materials distributed in USG supported geography	100,000	150,000	150%
7	# of suspected COVID-19 cases referred for diagnosis	6,280	9,332	149%
8	# of people reached with messages on FP products and services	303,813	314,900	104%
9	# of target population referred for FP products or services	11,865	11,878	100%
10	# of FP users (by method)	6,064	8,194	135%
11	# of people reached with messages on MCH services	85,925	86,940	101%
12	# of target population referred for MCH services (ANC,PNC, Delivery and immunization)	10,922	16,058	147%
13	# of target population received any MCH services	81,92	14,150	173%
14	# of people reached with TB Messages	400,806	524,840	131%
15	# of target population screened for TB	400,806	524,840	131%
16	# of presumptive TB cases referred for diagnosis	5,579	7,797	140%
17	# of total TB cases detected	559	605	108%
18	# of TB and MDR-TB cases receiving nutrition support	476	594	125%
19	# of TB cases diagnosed, who are put on TB treatment	559	605	108%
20	# of TB positive cases receiving TB Treatment	559	605	108%

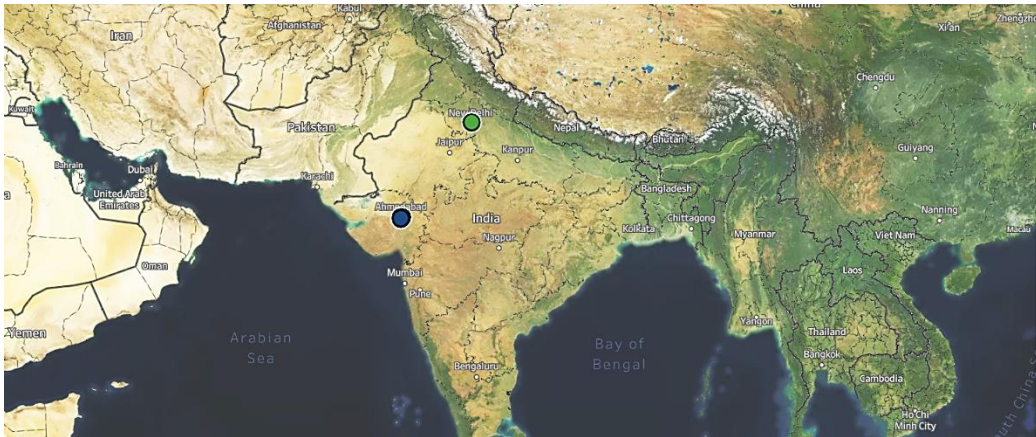
IV. Project Highlights



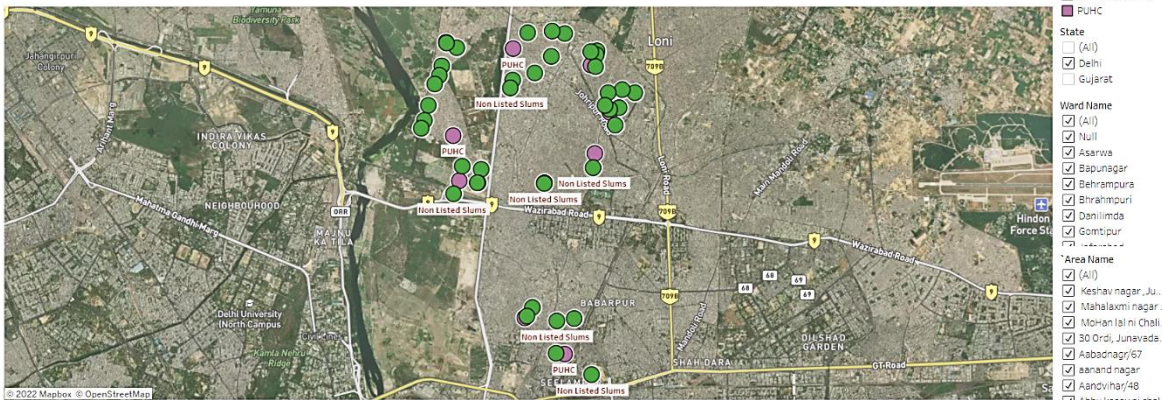
V. Geographic Information System (GIS) Mapping

Under the SAMAGRA project, the GPS coordinates of Urban Health Centers, Community Health Centers, Tertiary Health Centers, Aanganwadi centers, listed and non-listed slums falling under the respective geographies for both the project location were plotted. Colour coding was done to highlight the vividness of Samagra project and point of contacts under the public health care system.

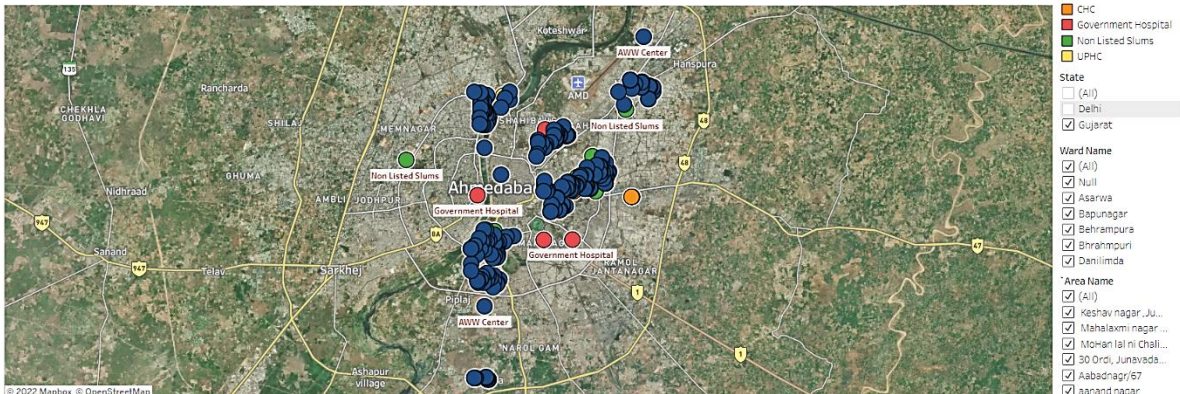
SAMAGRA Project Locations



North East Delhi

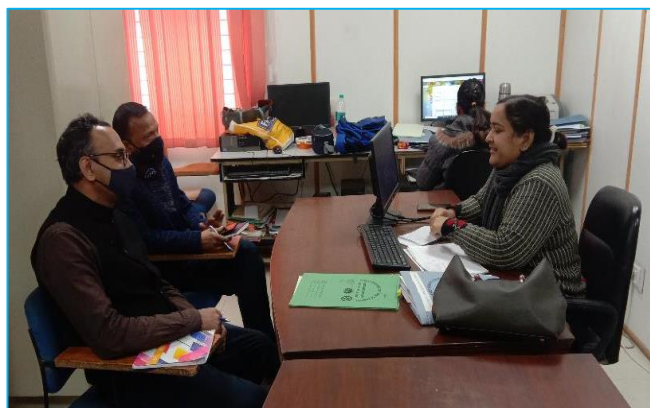


Ahmedabad Municipal Corporation



VI. Major Activities and Accomplishments – North East Delhi (NED)

- **Advocacy with government agencies:** SAMAGRA partner had series of meetings with key government officials both online as well as through in-person meetings. Immediately after signing the agreement, an introductory meeting was held with Chief District Medical Officer (CDMO), North East Delhi, where she and her staff was briefed about the project and its key components. Other than CDMO, District Surveillance Officer (DSO), District TB Officer (DTO), District Immunization Officer (DIO) and District Program Officer (DPO) were also sensitized about the project.



Meeting with District Program Officer – RCH at her office in NE Delhi

Other than these in-person meetings a virtual meeting for upcoming World Population Day was attended by the

Project Lead-Delhi. WHP was the only non-governmental organization invited in this webinar. Dr. Seema Agrawal, District Program Officer-RCH of North East Delhi appreciated WHP's efforts in stabilizing population. She assured all possible support and instructed her team members for the same. She also asked us to collect IEC material (which is under production) to be distributed among the community.

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Webinar for World Population Day Preparation

- **Webinar on National Deworming Day:** A webinar on National Deworming Day was organized on 29th July 2021. The webinar was organized by the CDMO, NE Delhi and attended by all the MOICs, DPM, CDPOs. The webinar started with the welcome address by the CDMO Dr. Sandeep Gautam. After her welcome address, Dr. Seema Agarwal, DPO-RCH, NE Delhi made a presentation on National Deworming Day and Anemia. Under this program, ASHAs will be distributing Albendazole and Iron tablets. She



Webinar on National Deworming Day in NE Delhi

After her welcome address, Dr. Sandeep Gautam. After her welcome address, Dr. Seema Agarwal, DPO-RCH, NE Delhi made a presentation on National Deworming Day and Anemia. Under this program, ASHAs will be distributing Albendazole and Iron tablets. She

requested WHP to use the Samagra field officers for distributing the same in Yamuna Vihar area, where ASHAs/AWWs are not available. We agreed to depute our team members for the distribution of Albendazole and Iron tablets for few days to strengthen the government initiative. WHP was the only NGO invited by the district administration for this meeting.

- **Training of facility based health workers on COVID-19 response:** During the project duration, 24 training sessions were organised by project SAMAGRA on COVID-19 management and response. Through these training sessions, 211 facility based health



MOICs training



Training of TB staff of Chest clinic, Jag Pravesh Chandra Hospital, North East Delhi

providers were trained. This includes the medical officers, ANMs, Nurses and TB staff at the chest clinics- chest clinic, Jag Pravesh Hospital, Shastri Park and Chest Clinic, Karawal Nagar. A detailed session on COVID -19 was conducted by the District Immunization Officer (DIO), North East Delhi district. He focused on vaccination drive, vaccination wastage, proper disposal of consumables. The training was also attended by the Chief District Medical Officer (CDMO), North East Delhi.

Before the training pre-test was taken of all the participants. Post training Majority of staffs have shown good results in COVID-19 post training test. In COVID-19 pre & post-test, it was observed that most of the participants were well aware of COVID-19. The average score was 67% in the pre-test and it increased to 85% after the training. 97 staff scored 100% in post training evaluation. Overall impact of the orientation and training was significant. We keep on adding the latest information on COVID-19 variant and vaccination. Post training, discussion with the staffs on latest development is found very helpful.

- **Health Days and Events:** In close coordination with the district health administration,



World TB day observed at Karawal Nagar Chest Clinic

project SAMAGRA observed various health days and events such as World TB Day and World Population Day. On World TB Day, two events were organized, one at Jag Pravesh Chandra Hospital, Shastri Park and the other at Veer Savarkar Hospital, Karawal Nagar. DTOs of Shastri Park Dr. Sandeep Saini and Karawal Nagar Dr. Surendra Raman attended the programmes. Awareness activity was carried out at Jag Pravesh

Chandra Hospital. While at Veer Savarkar, a TB and COVID-19 camp was organized. To ensure wider coverage of TB messages, four community meetings prior to World TB day were organized in coordination with Karawal Nagar Chest Clinic.

- **COVID-19 Mega Vaccination Camp:** A mega vaccination camp was organized on 10th Oct'21 at AD Institute of Technology and Management College, North East Delhi.

To make this camp a success, the SAMAGRA partner had been campaigning in the intervention area three days prior to the camp. Project staff (Field officers) also contacted sanitation workers, rag pickers or people who did not have any identity cards in the project area and asked them to get vaccinated and also carried out announcement in temples and mosque. All SAMAGRA field team members were present in the camp. In this camp total 20 vaccination centers were



District Magistrate (DM) and Chief District Medical Officer (CDMO) at SAMAGRA stall during the Mega Vaccination Camp

setup, one stall was also setup up by WHP where information related to all health facility, vaccination center and COVID-19 was disseminated. Through the WHP stall, 315 people registered for COVID-19 vaccination, out of which 217 beneficiaries were vaccinated. All Govt. officials including District Magistrate and Chief District Medical Officer, North East Delhi district visited the WHP stall and the project lead briefed them about WHP and SAMAGRA project and also demonstrated the toll free no 80 10 11 12 13 for teleconsultation and counselling. District administration appreciated WHP and SAMAGRA project contribution in COVID-19 vaccination. During this mega camp, a total 7,913 beneficiaries were vaccinated, making it a huge success.

- **COVID-19 vaccination camps at Informal Provider Centers:** SAMAGRA partner conducted health cum vaccination camps in association with SkyHealth center (informal provider center) and local health administration to provide health care



Covid vaccination camp at Sky health Centre

service, vaccination and accurate information about the COVID-19 vaccination. During these camps, SAMAGRA team spread the awareness about the COVID-19 vaccination and motivated people to get vaccinated, as well as sensitized people for FP, MCH, and TB. Leaflets were also disbursed with toll-free no 80 10 11 12 13 for free online health consultation. COVID Vaccination Center (CVC) was set up at the camp site, where the vaccines were to be administered,

and the civil defense staff were given the responsibility of registering the attendance of beneficiaries in the camp. Free health checkup was provided to people that included remedial measures, oxygen saturation checkup, free oxygen, whose oxygen level was low, diabetes test, eye test etc. Besides this, SAMAGRA partner also facilitated COVID-19 vaccination to 116 people with government support.

- **TB Sensitization and Screening camps:** During the project duration, SAMAGRA partner organized 38 TB sensitization and screening camps in intervention area of North East Delhi. TB camps aim to screen people with TB symptoms, identify presumptive cases, and refer for TB testing and diagnosis. Through these camps, 584 presumptive cases identified as they had TB symptoms - fever, cough for or more than two weeks, chest pain, sputum and were referred for further testing and diagnosis. Out of referred, 52 found TB positive and treatment initiated.



TB camp in North East Delhi

- **Participation in National Nutrition Day celebration:** The National Nutrition Day was organized and celebrated on 4th September in Karawal Nagar, North East Delhi. The main purpose of this event was to increase awareness about nutrition, health and adaptive eating habits among people so that malnutrition can be prevented in pregnant and lactating women and young children. The event was addressed by the Child Development Project Officer and Medical Officer In-Charge. They briefed that through initiatives like health nutrition campaigns and programs, central government's objective is to convey a strong message related to how



Nutrition day celebration

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children and youths may get immense benefits from the balanced diet and protein rich food right from birth.

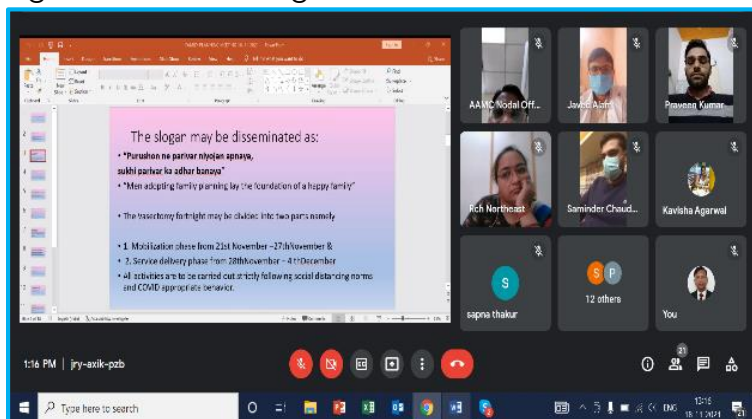
- **Har Ghar Dastak Campaign:** SAMAGRA partner participated in Har ghar dastak campaign organized by the Government of Delhi and provided support to the government staff in the campaign and for organizing COVID-19 immunization camps.



Household visit during Har Ghar Dastak campaign

850 vaccinations were done with the support by SAMAGRA partner. District administration and health officials appreciated the role of WHP in the campaign. To support the government initiative toward ramping up the COVID-19 vaccination, the SAMAGRA partner is also supporting the front line workers in their house to house visit as a part of community mobilization to generate demand for vaccination. Also, the team is holding special sessions for re-iterating the message of timely uptake of second vaccine dose either at community meetings or during the sessions at Primary Urban Health Centers (PUHCs).

- **Online Meeting for Vasectomy Planning:** The meeting was chaired by Dr. Seema Agarwal, District Program Officer – RCH & FP, North East Delhi. She explained all modern methods of family planning through a power point presentation. As per the directive from the central government, all states and union territories to observe Vasectomy Fortnight from November 21 to December 4, 2021 in order to provide quality male sterilization services at public health facilities. She appealed SAMAGRA partner to provide all the support in generating awareness for this campaign during their routine household visits. She appreciated WHP's efforts in World



Online meeting with District Program Officer – RCH and Family Planning, North East Delhi

campaign during their routine household visits. She appreciated WHP's efforts in World

Population Day and expected similar performance during this initiative. During the Vasectomy Fortnight two cases of NSV were done, out of that one was referred by SAMAGRA partner.

- **Mahila Arogya Samiti (MAS) Meetings:** SAMAGRA partner conducted six MAS meetings during the entire project duration of 15 months. The meetings were attended by total 131

people including MAS members, ASHAs, AWWs and other NGOs members. They were sensitized on MCH and family planning services other than COVID-19 awareness and vaccination to understand the existing cultural practice that affect the health seeking behavior among the community and shared the toll free number 80 10 11 12 13 for any health related issues. During the meeting, MAS members were also sensitized on various govt. schemes on MCH and FP services and TB identification, treatment available and services offered by government including the DBT and Nikshay Poshan Yojana.



Sensitization of MAS members

- **Intensified Mission Indradhanush 4.0 (IMI 4.0):** A virtual meeting was organised by PSI followed by the district health administration under the chairmanship of District



Child Vaccination by ANM under IMI-4.0 at AWC in Street No.13, Old Mustafabad, NED

Magistrate-cum-Mission President, IDHS, NE District for preparing IMI 4.0. The agenda of this meeting was to review the vaccination status in the district and get ready for IMI 4.0. During this meeting one PUHC (Old Mustafabad) was assigned to SAMAGRA partner to ensure 100% vaccination. SAMAGRA partner worked closely with the MOIC to reach out those houses from where children were not coming for vaccination. Efforts of SAMAGRA partner in successful completion of IMI 4.0 (1st phase) was

appreciated by the MOIC, DIO and other district health officials.

VII. Technical Progress - NED

COVID-19				
Sr. No.	Indicators as per PMP	ELA (LOP-15 months)	Achievements	%
C-19.1	Total Population Coverage by intervention related to COVID-19 with USG resources	2,50,000	3,02,101	121%
C-19.2	# of the facility-based health workers (doctors, nurses, CHOs, pharmacists, ANMs, MPWs, Aanganwadi centres) trained to prepare for and respond to COVID-19 with USG support	200	211	106%
C-19.3	# of community frontline workers (e.g. ASHAs, TB champions, community volunteers, sanitation workers etc.,) trained to prepare for and respond to COVID-19 with USG support	300	332	111%
C-19.4	# of people **reached with risk communication materials (note: does not include mass media and social media)	2,00,000	2,68,612	134%
C-19.5	# of learning materials (e-learning modules, self-learning digital tools, video/ animation tools) produced on COVID-19 using USG resources	NA	NA	NA*
C-19.6	# of copies of COVID-19 materials printed	50,000	75,000	150%
C-19.7	# of copies of COVID-19 materials distributed in USG supported geography	50,000	75,000	150%
C-19.8	# of suspected COVID-19 cases referred for diagnosis	3,150	4,067	129%
C-19.9	# of suspected COVID-19 cases diagnosed as positive	205	284	139%
C-19.10	# of suspected COVID-19 cases referred for TB diagnosis	945	1,193	126%
C-19.11	# of suspected COVID-19 cases referred for TB testing diagnosed as positive	47	104	221%
Family Planning (FP)				
Sr. No.	Indicators as per PMP	ELA (LOP-15 months)	Achievements	%
F.P.1	# of people reached with messages on FP products and services	1,50,000	1,61,695	108%
F.P.2	# of target population referred for FP products or services	6,169	6,156	100%
F.P.3	# of FP users (by method)	3,146	3767	120%
F.P.3.1	Female Sterilization	157	82	52%
F.P.3.2	IUCDs	472	672	142%
F.P.3.3	Depo (<i>injectables</i>)	31	24	77%
F.P.3.4	Pills	440	445	101%
F.P.3.5	Condoms	2,045	2544	124%
Maternal and Child Health (MCH)				
Sr. No.	Indicators as per PMP	ELA (LOP-15 months)	Achievements	%
MCH.1	# of people reached with messages on MCH services	42,250	43,124	102%

MCH.2	# of target population referred for MCH services (ANC,PNC, Delivery and immunization)	5,450	10,390	191%
MCH.3	Total number of pregnant women registered for ANC	1,022	3,691	361%
MCH.4	Out of the total ANC registered, number registered within 1st trimester (within 12 weeks)	715	1,733	242%
MCH.5	# of Pregnant Women received 4 or more ANC check ups	511	561	110%
MCH.6	# of Institutional Deliveries conducted (Including C-Sections)	766	998	130%
MCH.7	Total number of C-section deliveries performed	77	121	157%
MCH.8	Women receiving 1st post-partum check-up between 48 hours and 14 days	766	964	126%
MCH.9	# of children receiving OPV/BCG/Hepatitis at birth (Zero Dose)	766	1529	200%
MCH.10	# of children receiving Pentavalent 3/ DPT 3	1,366	1,516	111%
MCH.11	# of children receiving Measles 1st dose/ Measles & Rubella (MR)- 1st Dose	2,043	1,555	76%
MCH.12	Average percentage service coverage gaps between ANC1 and ANC4	NA	0	
MCH.13	Average percentage service coverage gaps between DPT 1 and DPT 3	NA	0	
Tuberculosis (TB)				
Sr. No.	Indicators as per PMP	ELA (LOP-15 months)	Achievements	%
TB.1	# of people reached with TB Messages	2,00,000	2,72,388	136%
TB.2	# of target population screened for TB	2,00,000	2,72,388	136%
TB.3	# of presumptive TB cases referred for diagnosis	2,722	3,644	134%
TB.4	# of total TB cases detected	272	285	105%
TB.5	# of TB patients notified by private providers	14	15	107%
TB.6	MDR TB patients notified	8	8	100%
TB.7	# of DOTS patients registered	259	223	86%
TB.8	# of DOTS cases completed successfully	100	98	98%
TB.9	# of TB and MDR-TB cases receiving nutrition support	204	274	134%
Cross Cutting				
CC.1	# of health care workers that successfully complete an in-service training program within the reporting period with USG support	100	100	100%
CC.2	Domestic resources mobilized to support health programs through USAID supported health projects	100	100	100%
CC.3	# of partnership (resource or technical) with private organizations (including NGOs/Corporate/foundations etc.) or public sector (District/Municipality/State/National level)	-	1	
CC.4	# of innovations supported through USG assistance	1	1	100%
CC.5	Percentage of people receiving health services from facilities in the project catchment area funded by USAID projects	-	-	

*It was supposed to be provided by PSI.

VIII. Major Activities and Accomplishments – Ahmedabad Municipal Corporation (AMC)

- School awareness session:** To aware school children on TB and celebrate the October month theme of TBMA. 78 students were briefed about TB signs and symptoms, how they can recognize them and promote a prompt healthcare seeking behavior in their homes and neighborhood. Two sessions were held at different schools for the above-mentioned topics.



School Awareness session at Odhav, AMC

- Menstrual Hygiene Management (MHM)**

session: The school administration has requested us to utilize the opportunity during TB session to add another MHM awareness session for the adolescent's girls. Hence, an



MHM session at Odhav, Ahmedabad

awareness session on MHM was taken by the respective field officer to make these 65 schools going girls aware of MHM, use of sanitary napkins, their proper disposal and how school can create an enabling environment to address these with parent's support.

- TB champions meeting:** To aware the positive TB patients for following complete treatment and take care

of their diet an awareness session was done at UHC for TB patients. Specific sessions were taken by TBU staff and TB cured patients. These TB cured patients narrated their journey, guided them on what to do and not to do and motivated them. Two sessions were taken one at Bapunagar and other at Rakhiyal UHC. A total of 35 patients were benefitted.



TB champion meet Bapunagar

- #HarGharDastak Initiative:** House to house visits made by the SAMAGRA partner during this initiative. The team



HH visit during the campaign

supported FLWs in microplanning and survey of communities to identify and map eligible beneficiaries. Other than this, they also supported facility staff in training and operational planning and organised community awareness sessions with the support of Mahila Arogya Samiti and local key influencers. A lot of focus of this initiative was on un-organised sector.

- Supporting the “Orange the world- End violence against women now”:** Sensitization of ASHA, AWWs, Mahila Arogya Samiti members and key community influencers were held in several batches to orient the women on what GBV is, gender concept, case studies and real life experience of survivors, and storytelling with supporting partners.



Supporting- Orange the World initiative!

- Sensitization of religious leader’s/ community influencers on TB, its identification and their role in its elimination:** With the aim to contribute towards TB Mukht Andolan a sensitization session with religious leaders was planned in Behrampur ward of the Ahmedabad Municipal Corporation. Nine Maulana and Maulvi’s were engaged and briefed on TB, its identification, services provided at nearest TBU, case management, support of Field officer and dispelling of myths related to TB. Special focus was laid on seeking the religious leaders support in creating stigma-free environment and leveraging their existing communication channels for reiterating the message of complete TB treatment and compliance. Government of India approved IEC material in form of pamphlets, infographics on Nikshay application and Audio-Visual videos specially crafted in local Gujarati language were shown to generate awareness.



Religious Leaders Meeting

- **Sensitization of Mahila Arogya Samiti (MAS) members:** To understand the existing cultural practices that affect the health seeking behavior among community and primary caregivers of young children, three MAS meetings were held in Junavadad, Rakhiyal and Naroda.



MAS Meeting

Discussion cum engagement session was taken on MCH, FP and COVID-19 to understand and explore. Though discussions were held on several topics of continuum of care and life cycle approach, but in-depth discussions were held on exploring social determinants of health pertaining to traditional practices followed on IYCF among native Gujarati communities, perspective of women on COVID-19

vaccination uptake and family planning.

- **Hand-hold support in installation of TB Arogya Sathi application:** TB Aarogya Sathi

empowers Citizens (including TB Patients under NTEP) and to serves as a Direct interface with the healthcare system. The App is aimed at augmenting the initiatives of the Central TB Division, Government of India in proactively increasing awareness among the citizens and ensuring availability of free and quality assured drugs and diagnostics to all citizens in the country. Field Officers during their facility based training sessions orient the ASHA workers and facility based workers on TB Arogya Sathi app, services offered over it and provide handhold support for installing it in their phones where ever applicable



Training on TB Arogya Sathi App

- **Private Providers training on TB:** Under the Samagra Project, sensitization of 15 private providers working in Ahmedabad was done. Discussions were held on the SAMAGRA

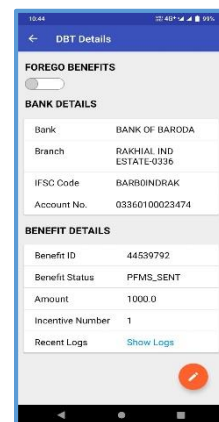


Private Providers Training

Project by the Project Lead in which overview of the project and need for focus on health indicators of urban poor was discussed. It was followed by interactive session on exploring the ways for close coordination and utilizing the project team to maximum potential for referral of patients, registering under Nikshay, ensuring treatment adherence etc. Detailed session was taken by Dr. Vishal Patel, MBBS Doctor working under Samagra project, on TB, its etiology, signs and symptoms,

classification as per MDR, XDR etc. and more importantly the treatment regime to be given to patients.

- **Supporting TB Unit staff in seeding TB positive patient's data:** As a part of supporting the government staff towards TB elimination, SAMAGRA partner supported the TB unit staff in fetching the demographic data from TB patients wherever applicable, assisting the TBU staff in seeding the details, installing TB Arogya Sathi application in TB patients and follow-up with TB patients on their treatment and nutrition incentive. Our officers have assisted 28 patients with this process.



- **Community level sensitization of diamond mill worker on TB awareness:** Industrial workers in Bapunagar Industrial Area are generally migrants and are engaged in work that involve



Sensitization of diamond mill workers

dust and aerosol fumes there by making them more susceptible to lung infection. An awareness generation session was held at community hall in one of the diamond mill in BPIA on TB identification and prevention. 48 diamond mill workers were sensitized on TB identification, its effect on lungs, methods of prevention and appropriate treatment available at government ends. The discussion was held by UHC Bapunagar TB staff and Project Lead Samagra project. IEC material from the TB unit on TB identification and

prevention were distributed during the session.

- **Sensitization of community kitchen workers on TB:** In Behrampura, Manav Sadhna charitable trust runs a community kitchen which offer hot cooked meals at a nominal price to more than 200 individuals daily including several TB patients. An outreach activity was done to sensitize 52 community kitchen workers, helpers and charitable trust staff on TB its identification/symptoms, treatment, modes of prevention and their nutritional requirements. TB UHC staff discussed on TB treatment, DBT Poshan Yojana and ongoing government efforts. Resource person and Field officer from Samagra Team discussed on nutrition requirements of TB patients, macro and micro nutrient balance required in diet and several model diets with incorporation of local Gujarati food in meals.



Sensitization of community kitchen workers

- **World Breastfeeding Week:** During the August first week SAMAGRA partner have taken extensive part in generating awareness among mothers and promote the theme of WBF-2021.



Sensitization of Breast Feeding

- **Rashtriya Poshan Maah 2021:** During the month of September, our field officers have extensively taken part in poshan maah and have supported the AWWs in conducting community level awareness activities. Right from organizing demonstration at AWC to promote use of supplementary nutrition in different recipes, FOs have promoted the development of POSHAN Vatikas etc.

- **Sensitization of elected ward representatives on**

TB: Community leaders plays a pivotal role in mobilizing the community, support the front line workers in promoting the reach of IEC on TB. They act as behavior change communicators to support the needy to seek help. To contribute towards their efforts, a meeting in Odhav area was planned. Elected ward representatives on government efforts towards TB elimination, their role to act as a channel for promoting the necessary political will among themselves and more importantly pave the way for development of enabling environment that imbibe trust in people to undertake proper treatment and promote stigma less healthcare seeking.



Sensitisation of Elected Ward Representative in Odhav

- **Sensitization session of Front Line Worker- AWWs on TB:** To promote the outreach activities on TB and create awareness generation about the subject, AWW of Gomtipur AWC were engaged. Session on TB awareness and where the role of AWW in community sensitization on TB identification can be explored and strengthened. Discussion on specific nutritional requirements and its linkages to immunity of the individual were discussed. AWWs shared the success stories from their respective areas where they have supported the ASHA workers in identification and treatment support. The government IEC material on TB was used during the session. Videos from National Health Portal on TB treatment adherence in local language were played for better understanding of the community.



Sensitisation of FLWs at Gomtipur, AMC

IX. Technical Progress - AMC

COVID-19				
Sr. No.	Indicators as per PMP	ELA (LOP-15 months)	Achievements	%
C-19.1	Total Population Coverage by intervention related to COVID-19 with USG resources	2,51,007	2,72,561	109%
C-19.2	# of the facility-based health workers (doctors, nurses, CHOs, pharmacists, ANMs, MPWs, Aanganwadi centres) trained to prepare for and respond to COVID-19 with USG support	200	248	124%
C-19.3	# of community frontline workers (e.g. ASHAs, TB champions, community volunteers, sanitation workers etc.,) trained to prepare for and respond to COVID-19 with USG support	300	307	102%
C-19.4	# of people **reached with risk communication materials (note: does not include mass media and social media)	2,00,806	2,52,452	126%
C-19.5	# of learning materials (e-learning modules, self-learning digital tools, video/ animation tools) produced on COVID-19 using USG resources	0	0	NA*
C-19.6	# of copies of COVID-19 materials printed	50,000	75,000	150%
C-19.7	# of copies of COVID-19 materials distributed in USG supported geography	50,000	75,000	150%
C-19.8	# of suspected COVID-19 cases referred for diagnosis	3,130	5,265	168%
C-19.9	# of suspected COVID-19 cases diagnosed as positive	203	234	115%
C-19.10	# of suspected COVID-19 cases referred for TB diagnosis	314	3,369	1073%
C-19.11	# of suspected COVID-19 cases referred for TB testing diagnosed as positive	38	244	635%
Family Planning (FP)				
Sr. No.	Indicators as per PMP	ELA (LOP-15 months)	Achievements	%
F.P.1	# of people reached with messages on FP products and services	1,50,604	1,53,205	102%
F.P.2	# of target population referred for FP products or services	5,696	5,722	100%
F.P.3	# of FP users (by method)	2,918	4,427	152%
F.P.3.1	Female Sterilization	146	308	211%
F.P.3.2	IUCDs	438	167	38%
F.P.3.3	Depo (<i>Injectables</i>)	29	21	72%
F.P.3.4	Pills	409	919	225%
F.P.3.5	Condoms	1,897	3,012	159%
Maternal and Child Health (MCH)				
Sr. No.	Indicators as per PMP	ELA (LOP-15 months)	Achievements	%
MCH.1	# of people reached with messages on MCH services	43,675	43,816	100%

MCH.2	# of target population referred for MCH services (ANC,PNC, Delivery and immunization)	5,472	5,668	104%
MCH.3	Total number of pregnant women registered for ANC	1,024	2,421	236%
MCH.4	Out of the total ANC registered, number registered within 1st trimester (within 12 weeks)	985	508	52%
MCH.5	# of Pregnant Women received 4 or more ANC check ups	980	478	49%
MCH.6	# of Institutional Deliveries conducted (Including C-Sections)	975	456	47%
MCH.7	Total number of C-section deliveries performed	146	123	84%
MCH.8	Women receiving 1st post-partum check-up between 48 hours and 14 days	975	456	47%
MCH.9	# of children receiving OPV/BCG/Hepatitis at birth (Zero Dose)	975	291	30%
MCH.10	# of children receiving Pentavalent 3/ DPT 3	1,513	773	51%
MCH.11	# of children receiving Measles 1st dose/ Measles & Rubella (MR)- 1st Dose	2,051	920	45%
MCH.12	Average percentage service coverage gaps between ANC1 and ANC4	0	0	
MCH.13	Average percentage service coverage gaps between DPT 1 and DPT 3	0	0	
Tuberculosis (TB)				
Sr. No.	Indicators as per PMP	ELA (LOP-15 months)	Achievements	%
TB.1	# of people reached with TB Messages	2,00,806	2,52,452	126%
TB.2	# of target population screened for TB	2,00,806	2,52,452	126%
TB.3	# of presumptive TB cases referred for diagnosis	2,857	4,153	145%
TB.4	# of total TB cases detected	286	320	112%
TB.5	# of TB patients notified by private providers	14	72	509%
TB.6	# of MDR TB patients notified	7	23	310%
TB.7	# of DOTS patients registered	271	186	69%
TB.8	# of DOTS cases completed successfully	105	21	20%
TB.9	# of TB and MDR-TB cases receiving nutrition support	272	320	118%
Cross Cutting				
CC.1	# of health care workers that successfully complete an in-service training program within the reporting period with USG support	100	100	100%
CC.2	Domestic resources mobilized to support health programs through USAID supported health projects	100	100	100%
CC.3	# of partnership (resource or technical) with private organizations (including NGOs/Corporate/foundations etc.) or public sector (District/Municipality/State/National level)	-	-	
CC.4	# of innovations supported through USG assistance	1	1	100%
CC.5	Percentage of people receiving health services from facilities in the project catchment area funded by USAID projects	-	-	

*It was supposed to be provided by PSI.

X. Centralized Control Centre

The Centralised Control Center (CCC) was an integrated system of project SAMAGRA that have managed multiple operational activities. The CCC plays many roles ranging from assisting the frontline workers in real-time, coordinating the functions of many links in



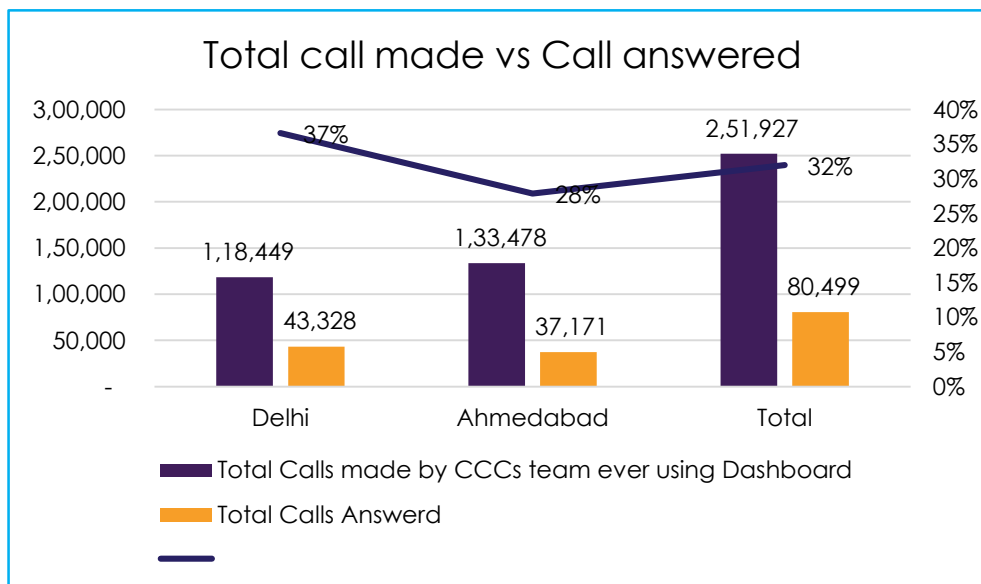
Tele-caller at Centralized Control

the process chain to ensure an efficient continuum of care, monitoring the fulfilment of functions at various levels, and adherence tracking. The centralized control center may emerge as an innovation that can be an effective modality for ensuring the quality and narrow the gap in FP, MCH, TB, and COVID-19 related health care delivery in low-resource settings.

Under project Samagra, CCC does follow up with the mapped family members tagged for family planning, ante-natal care, post-natal care, institutional delivery and immunization services.

Presumptive cases of TB and COVID-19 suspects will also be tracked to facilitate early and appropriate treatment. This also guides on referral pathways and existing emergency services to distressed patients. This Analysis comprises data of all activities Household mapping, Data collection for equity metrics, Follow-up with referral cases, Telemedicine services, Client satisfaction survey, Monitoring and data validation, and Follow-up with referral cases to sensitize on vaccination undertaken by CCC from February 2021 to 10th March 2022.

A total of 251,927 calls were attempted by tele caller to beneficiaries and 80,499 calls answered/responded by beneficiaries which is 32% for any kind of Samagra activities

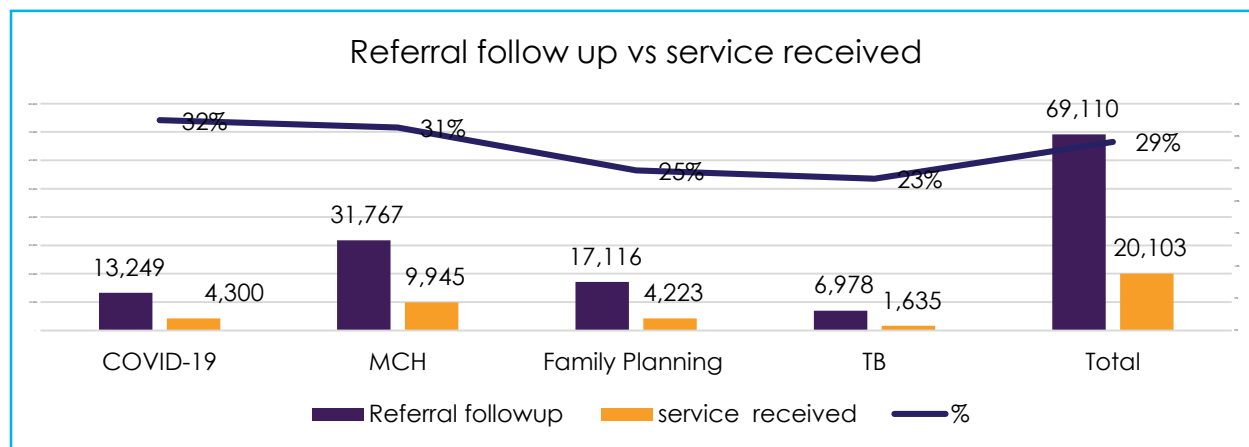


undertaken by CCC. The below graphs also shows the month-wise calls trend that is from February 2021 to 10th March 2022.

Follow up with referral/suspected/presumptive cases:

The CCC has a list of all referred cases shared by MIS, referred services and contact numbers. The CCC does regular follow-up calls for referred services to follow-up and reminds them to get those services. During the project duration, CCC team of tele-callers attempted call to **69,110** referral/presumptive/suspected cases, listed by Field Officer while household mapping and sensitization to people, of them, **32,459 (47%)** answered calls and 36,651 that is 53% not responded for follow-up status as they did not want to talk and discuss about the tagged service/test or they were outside or on work.

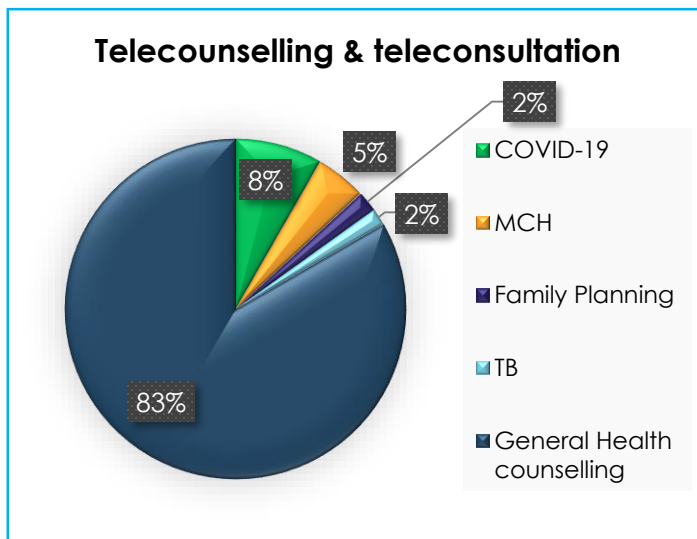
Tele callers completed the follow-up with **21,947** for services/test they are referred for and **20,103 (92%)** confirmed that they have got service/diagnosis test they are referred for. Through this process, tele callers also validated all the data and build a relationship with the patient and rigorously interact with the patient until he/she gets health care and complete the treatment.



Telemedicine services:

A dedicated Toll-Free Number **80 10 11 12 13**, distributed through leaflets among the community, has been assigned for attending queries of people on getting health-related suggestions and doctor's consultation for which doctors and tele-callers have been made available to work in this programme every day from 8:00 AM to 5:00 PM.

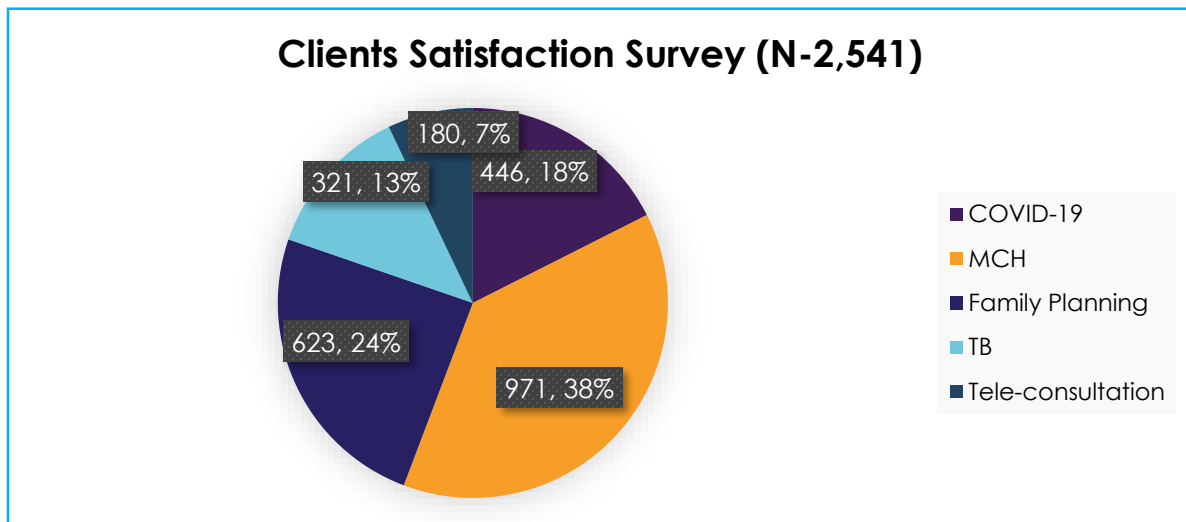
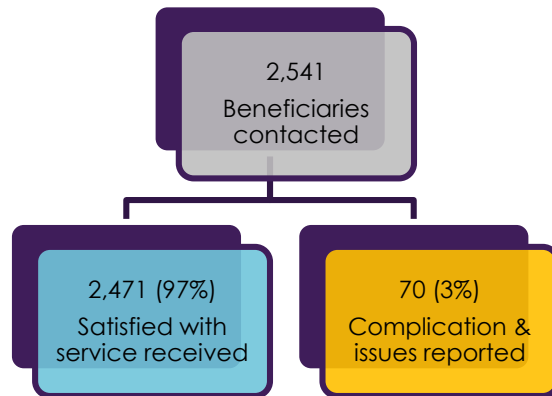
During the project duration in both the location Delhi and Ahmedabad, a total of **4,229** missed calls were received on CCC's dashboard through WHP Toll-free number, out of them, **1,075** people were provided tele counselling for FP, ANC, MCH, COVID & TB and **2,531** people were



also connected to the doctor for the more detailed explanation, expert advice on health issues and COVID -19 related consultation. After the consultation with Doctor, prescriptions were also sent to patients on their mobile numbers through the downloadable link as a PDF file.

Clients Feedback and Satisfaction Survey

Tele caller conducted client satisfaction survey with 2,541 beneficiaries, who have received any kind of service, test, tele counselling and consultations under the Samagra project either directly or through facilitation by WHP Samagra teams, this was done by calling to clients, with a random sample, and ask a set of questions which are developed for Client Satisfaction Survey and gathers their feedback, that helps us to make improvements in our system. **2,471 (97%)** beneficiaries fully satisfied with the service they received through FOs/CCC/ASHAs, only **3%** complained about any complication after service and issue regarding the delay in receiving prescriptions that have also been resolved.



XI. Case Studies / Human Stories

Transforming adversity into opportunity for a happy family!

Despite several challenges and lack of family planning services in government facilities due to Covid-19, SAMAGRA Field Officer Meena Kumari fulfilled her promise made to Shama Parveen from New Mustafabad.

A Mother of four, 27-year-old Shama Parveen is a resident of New Mustafabad area in North-East Delhi. Belonging to economically weaker section, is extremely difficult for her and her husband to take care of the family in their meagre income. When WHP Field



Shama, mother of four children realized the need of family planning after various round of meeting with Samagra field officer and decided to go with a permanent FP method

Officer Meena Kumari, Samagra project, visited her house, she explained how further increasing her family could make situation more difficult for all of them. Meena briefed her about various Family Planning services available and assured her of assistance in availing the services. As Shama already had four kids and was not keen to have another child in future, Meena encouraged her to adopt a permanent FP method. With the consent of her husband Md. Yameen, Shama agreed to go for permanent method-sterilization.

Meena, briefed her about the registration process and guided her to visit Jag Pravesh Chandra (JPC) Hospital, a government health facility, next day along with ASHA worker – Ms. Shamina. Upon visiting the hospital, they found that

sterilization services were unavailable due to COVID-19, hence they were advised to visit another government hospital in that area – Guru Teg Bahadur (GTB) Hospital. Next day, Shama visited GTB Hospital alongwith the Meena to inquire about sterilization services. They were told that the process for sterilization is lengthy, time taking and not available immediately. This experience of running from one to another hospital was frustrating for Shama. Moreover, she came under pressure from her in-laws when they heard about her opting for a permanent method as they considered it prohibited in their religion.

After getting unsatisfactory information from the two government hospitals, Meena started searching for a private facility in the area that provides good quality family planning services. She found out that Parivar Sewa Sansthan (PSS), an NGO in the area works on reproductive health and family planning services. However, the expense for sterilization was Rs. 5,000/-, an amount completely unaffordable for Shama. Meena continued her efforts to find out a way. Finally, she managed to get the information that

COVID-19 treatment: When the doctor was just a call away

For Shiv Vihar resident Ajay Roy, contracting COVID-19 in the midst of a brutal second wave dampened his spirit and lust for life. Timely intervention by Samagra Field Officer and regular tele-consultation through WHP's Centralised Control Centre (CCC), paved way for his fast recovery within the confines of his home.

The nightmarish second wave of Covid that started mid-March shook the country. There was a visible strain on the healthcare system, with hospitals running out of beds and oxygen supply sharply falling, it was stretched to the breaking point. The ensuing crisis created fear psychosis amongst common people in general and elderly in particular. Negative projections about pandemic have depleted their morale and confidence considerably, creating a sense of despair and gloom. Stepping out for Covid test was scary. Ajay Roy, 39, resident of Shiv Vihar slum area in North-East Delhi was in a similar flux. Though he was feverish with cough and sore throat from last several days, could not muster to generate enough courage to get tested. Like several others, he was extremely



Ajay after recovery from COVID-19

worried, due to the prevailing chaos and disturbing reports from all-around. Lockdown restrictions and the massive shortage of healthcare services further demotivated him. Though Ajay's symptoms were indicative of COVID-19, still he decided to take medicines from the near-by chemist shop instead of going for Covid test, which did not make much change in his condition.

When Samagra Field Officer Devendra Sharma visited him, during his routine household visit, he came to know about Ajay's condition and referred him for immediate COVID-19 test at Primary Urban Health Center (PUHC) Shiv Vihar Phase II, closest to where Ajay lived. Devendra was sure to leave information leaflet about WHP -

Centralised Control Center (CCC) toll free number, for free health consultations. Although, Ajay was still reluctant to get his test done. After Devendra's advice and to seek doctor's opinion, he called on WHP Helpline Number - 08010111213. As with missed call technology, the phone was disconnected but he immediately received a call back from the CCC. After initial registration by the tele-counsellor, he was able to talk to the doctor.

WHP Counsellor and doctor, undertook thorough examination of Ajay's condition and recommended COVID-19 test and urged him to get the test done quickly. Finally, Ajay got his test done the next day. After two days, he received the RT-PCR¹ test result on his mobile, and was diagnosed COVID-19 positive. By that time, Ajay was physically very weak, and in no position of visiting any health facility. Looking for alternative options, he recalled the consultation with the doctor through tele-medicine and decided again to call the helpline number. Post tele-consultation, he received a prescription on his phone followed-up by a call from WHP – CCC to confirm about the receipt of prescription and also to explain the medicines and other precautions needed to be taken during the treatment. He immediately started the treatment at home and isolated himself from other family members for the next 15 days, as instructed by the CCC's doctor. Within 3 days of the initial treatment signs of recovery were visible. His fever subsided but cough remained. After few days, he again consulted the doctor through CCC and completed his treatment as per doctor's guidance.

समाग्रा प्रोजेक्ट

आपको बेहतर स्वास्थ्य सेवाएं मिल सकें - परिवार नियोजन, मातृ-शिशु देखभाल, टी.बी, और कोविड -19 से सम्बंधित इसलिए हम आपको उचित निर्णय लेने में मदद करते हैं।

मुफ्त सलाह के लिए मिस्ड कॉल दें

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www.worldhealthpartners.org

The Leaflet provided by Devendra

During the course of his treatment, Ajay consulted four times and was relieved that he could get timely treatment without even visiting any health facility. "I never thought such kind of facility could exist and that too free of cost. After 15 days of quarantine and treatment, I went for RT-PCR test again and this time my report came negative," Ajay shared ecstatically. Ajay had defeated the virus successfully, without even stepping out from his home for treatment. He was amazed that medical help for him was just a call away. Ajay and his entire family thanked Field Officer Devendra and project Samagra for helping them during this crisis.

This pandemic of COVID-19 would mark a shift in the health care delivery system with more people accepting teleconsultation as a change in the face of the health system of the country. Patients and their families can further effectively gain from such established systems of telemedicine.

¹ Reverse Transcription Polymerase Chain Reaction (RT-PCR) is a laboratory test that can identify the virus that causes COVID-19. This test is intended for the detection of the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). It makes use of Real-Time Reverse Transcriptase (RT)-PCR Diagnostic Panels.

XII. Financial Update

Overall Project (Delhi and Ahmedabad)				
Line Item	Approved Budget	Cumulative Expenses (Up to 10th March'22)	Balance	Percentage of Utilization
I. Salaries	\$2,84,200	\$2,41,798	\$42,402	85%
II. Fringe Benefits	\$32,020	\$12,964	\$19,056	40%
III. Travel	\$11,600	\$5,540	\$6,060	48%
IV. Equipment	\$13,734	\$7,900	\$5,833	58%
V. Supplies	\$0	\$0	-	
VI. Contractual	\$68,000	\$18,599	\$49,401	27%
VII. Construction	\$0	\$0	-	
VII. Other Direct Costs (Any Other Than Above)	\$92,698	\$33,127	\$59,571	36%
Total	\$5,02,251	\$3,19,928	\$1,82,323	64%
Delhi (North East Delhi)				
Line Item	Approved Budget	Cumulative Expenses (Up to 10th March'22)	Balance	Percentage of Utilization
I. Salaries	\$1,44,600	\$1,29,362	\$15,238	89%
II. Fringe Benefits	\$16,260	\$8,466	\$7,794	52%
III. Travel	\$4,000	\$1,316	\$2,684	33%
IV. Equipment	\$6,867	\$6,613	\$254	96%
V. Supplies	-	\$0	\$0	
VI. Contractual	\$34,000	\$8,514	\$25,486	25%
VII. Construction	-	\$0	\$0	
VII. Other Direct Costs (Any Other Than Above)	\$46,313	\$17,669	\$28,645	38%
Total	\$2,52,040	\$1,71,940	\$80,100	68%
Ahmedabad (Ahmedabad Municipal Corporation)				
Line Item	Approved Budget	Cumulative Expenses (Up to 10th March'22)	Balance	Percentage of Utilization
I. Salaries	\$1,39,600	\$1,12,436	\$27,164	81%
II. Fringe Benefits	\$15,760	\$4,498	\$11,262	29%
III. Travel	\$7,600	\$4,224	\$3,376	56%
IV. Equipment	\$6,867	\$1,287	\$5,580	19%
V. Supplies	-	\$0	\$0	
VI. Contractual	\$34,000	\$10,084	\$23,916	30%
VII. Construction	-	\$0	\$0	
VII. Other Direct Costs (Any Other Than Above)	\$46,385	\$15,459	\$30,927	33%
Total	\$2,50,212	\$1,47,988	\$1,02,224	59%

XIII. Leverage

Under project SAMAGRA, leverage target was equivalent to the total budget amount. SAMAGRA partner achieved the leverage more than the assigned targets in both project locations-NED and AMC.

Leverage	Target (LoP)	Cumulative achievement	Percentage
North East Delhi	\$2,76,449	\$3,91,096	141%
Ahmedabad Municipal Corporation	\$2,74,546	\$3,30,125	120%
SAMAGRA Overall Leverage	\$5,50,995	\$7,21,221	131%

XIV. Annexures

Annexure I: Detailed GANTT chart of planned activities

Sr. No.	Activity	Sub-Activity	Jan'21 – Mar'22	Timeline Rationale / justification
1.1	Sensitization and screening for COVID-19	Field team training on COVID-19 management and prevention	√	Completed
		Household visits	√	Completed
		Screening for COVID-19 and refer the suspected cases	√	Completed
		Follow up visits (in person and virtual via Centralized Control Centre) to ensure COVID-19 testing for referred cases	√	Completed
		TB testing for those who are found COVID-19 negative	√	Completed
		Tele-consultation	√	Completed
		Development and printing of COVID-19 leaflets	√	Completed
		Generate awareness about COVID-19 and distribute leaflets with COVID-19 messages	√	Completed
2.1	Sensitization and screening for Tuberculosis	Household visits	√	Completed
		Screening for TB and contact tracing	√	Completed
		Refer the presumptive cases	√	Completed
		Coordinate with DMCs and Chest clinics for presumptive cases	√	Completed
		Generate awareness for Tuberculosis among the community	√	Completed
		Follow up visits (in person and virtual via Centralized Control Centre) to ensure TB testing for referred cases	√	Completed
		Treatment initiation of patients found positive	√	Completed
		Support the TB patients for DBT	√	Completed
		Counselling and adherence calls for successful treatment completions	√	Completed
		Tele-consultation	√	Completed
3.1	Counselling and referral	Household visit	√	Completed
		Counselling for the importance and adoption of various FO methods	√	Completed

	for Family Planning	Coordinate with public health facilities including ANMs and ASHAs to provide appropriate service to the identified clients	√	Completed
		Generate awareness for family planning among the community	√	Completed
		Follow up visits (in-person and virtual via Centralized Control Centre) to ensure adoption of any FP methods	√	Completed
		Counselling for FP services through CCC	√	Completed
		Distribution of FP products to the community members	√	Completed
		Support the FP camps organized at PUHCs and generate caseload	√	Completed
4.1	Counselling and referral for Maternal Health - Understanding barriers to Antenatal care and Institutional delivery	Household visit	√	Completed
		Counselling for maternal health - ANC, institutional delivery and PNC	√	Completed
		Referrals to public health facilities	√	Completed
		Follow up visits (in-person and virtual via Centralized Control Centre) to ensure adoption of any MCH services	√	Completed
		Coordination with ASHAs and AWWs	√	Completed
		Identify the gap and barrier to ANC and Institutional delivery	√	Completed
		Identify all pregnant women during household visit and refer for ANC and institutional delivery to Public Health facility	√	Completed
		Ensure the all mandates ANCs visits	√	Completed
		Ensure institutional delivery of all referred pregnant women	√	Completed
		Post-natal check of mother and child within 48 hours	√	Completed
4.2	Counselling and referral for New-born & Child Health	Household visits	√	Completed
		Counselling for the importance of new-born and child health care	√	Completed
		Referrals to public health facilities to monitor growth and development of new born and to identify ailments and provide treatment without delay	√	Completed
4.3	Referral and service facilitation for Child Immunization	Household visits	√	Completed
		Counselling of the importance of immunization	√	Completed
		Coordinates with ANMs, ASHAs, and AWWs to ensure immunization of all children in project area	√	Completed
		Generate awareness for immunization among the community	√	Completed

		Follow-up visits (in-person and virtual via Centralized Control Centre) to ensure adoption of immunization of referred children	√	Completed
		Track for # of children receiving OPV/BCG/Hepatitis at birth (Zero Dose)	√	Completed
		Track for # of children receiving all doses of Pentavalent/DPT	√	Completed
		Track for # of children receiving Measles 1st dose/Measles & Rubella (MR)- 1st Dose	√	Completed
5.1	Capacity building of Frontline Worker and Facility based Health Worker	Capacity building of facility based health providers for COVID-19 management and prevention	√	Completed
		Capacity building of Frontline Worker for COVID-19 Management and prevention	√	Completed
		Capacity building and skill development of 100 ASHAs on project mandated services related to FP, MCH, TB and COVID-19	√	Completed
		Engagement of 100 ASHA in project activities and service facilitation	√	Completed
6.1	Engagement of private providers with the objective of improved quality of TB in the private sector	Mapping and engagement of formal and Informal providers	√	Completed
		Capacity building and skill development of all engaged private providers	√	Completed
		Case finding, testing, diagnosis and treatment initiation for all identified TB cases through private providers	√	Completed
7.1	Setup Centralized Control Centre and its activities to initiate	Setup Centralized Control Centre	√	Completed
		Training and skill development on Project mandates	√	Completed
		Development of CCC SOP and implementation	√	Completed
		Follow up with the mapped family members tagged for family planning, ANC/PNC care, delivery and immunization services.	√	Completed
		Tracking of suspected and presumptive cases of TB and COVID-19 to facilitate early and appropriate treatment	√	Completed
		Tele-consultation and Tele-counselling to all people who seek experts' advice and service on health issue	√	Completed
		Data validation and verification	√	Completed

Annexure II: Recognition & Appreciations

The SAMAGRA partner has received recognition and appreciations for their exceptional work from health department of both project locations--Delhi and Ahmedabad.



SAMAGRA Project Lead (WHP) taking award from the CDMO, North East District, Delhi



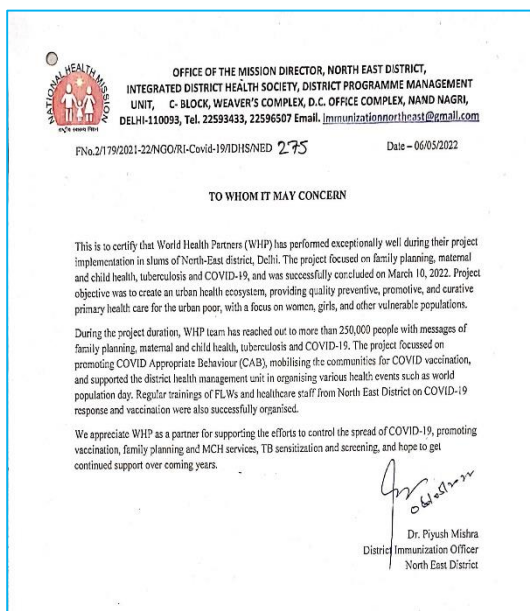
Field Officer, receiving appreciation letter from Medical Officer Gontipur, AMC



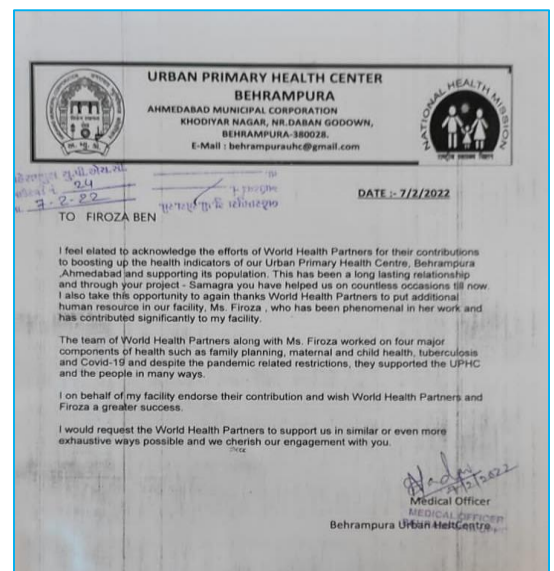
SAMAGRA Project Lead (WHP), sharing dais with the CDMO, NED (CDMO at the center)



SAMAGRA FO receiving appreciation letter from Medical Officer Behrampura UHC, AMC



Appreciation letter from DIO, NED



Appreciation letter to WHP- Project SAMAGRA

Annexure III: IEC

During the project duration, 150,000 COVID-19 leaflets (75,000 in Delhi and 75,000 in Ahmedabad) were printed and distributed during the household visits and community meetings to generate awareness on COVID-19. Apart from COVID-19 leaflet, 50,000 TB leaflets (25,000 in Delhi and 25,000 in Ahmedabad) were also printed and distributed in the community to generate awareness on TB.

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भारत सरकार

बचें और बचाएँ

अपने आपको और अपने प्रियजनों/सहकर्मियों को सुरक्षित रखने के लिए इन **पांच** व्यवहारों का टीकाकरण के बाद भी पालन करें

मास्क सही से पहने

हाथों को नियमित रूप से साबुन व पानी से धोएं या सैनिटाइजर का प्रयोग करें

आपस में 2 गज की दूरी बनाए रखें

लक्षण दिखने पर तुरंत खुद को दूसरों से अलग रखें

लक्षण दिखने पर तुरंत परीक्षण करवाएं

हम सुरक्षित, तो देश सुरक्षित!

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Health Inc.
Measurable results

WORLD HEALTH PARTNERS
HEALTHCARE WITHIN REACHABLE DISTANCE

COVID-19 leaflet

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भारत सरकार

HEALTHY PEOPLE
सुखी, स्वस्थ पीढ़ी

टीबी से है दुश्मनी मरीजों से नहीं

◆ पूर्ण उपचार से टीबी ठीक हो जाता है
◆ टीबी छूने या हाथ मिलाने से नहीं फैलता है
◆ टीबी मरीजों से मिलायें दोस्ती का हाथ, ना करें भेद भाव

टीबी हारेगा, देश जीतेगा

व्यक्तिगत अनुभव और विशेष जानकारी के लिए, टीबी आरोग्य साथी मोबाइल एप्लीकेशन डाउनलोड करें: <https://play.google.com/store/apps/details?id=com.tb.aarogya.sathi>

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TB leaflet

Annexure IV: Project Team



SAMAGRA-Delhi team (above) and Ahmedabad Team (Below)

During the project duration, SAMAGRA Delhi and Ahmedabad team members received the online course on US family planning and Aborting Requirements. Post training the team received a certificate also. This online course was very user friendly and quite informative for the SAMAGRA partner.