

JSI R&T India Foundation

Annual Report April 2020 – March 2021



JSI R&T INDIA FOUNDATION

Narrative program report of past year's program and business activities

June 2021

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About JSI R & T India foundation

JSI R&T India Foundation (“Foundation”) is a not-for-profit company, registered in 2014 under Section 8 of the Companies Act 2013. Our **mission** is to improve the health and well-being of vulnerable communities through innovative, evidence-informed and replicable strategies in partnership with the government, private sector and civil society. Our **vision** is to be a catalyst for strengthening public health initiatives in India for improving the lives of individuals and communities

JSI R&T India Foundation works across the spectrum of public health to manage and implement high-impact, sustainable, and locally-owned public health initiatives in the areas of Nutrition, Immunization, HIV/AIDS, WASH, RMNCH +A, Primary Health Care, and Tuberculosis. It implements programs on the ground, builds the capacity of service providers, promotes behaviour change in the community, leverage and complement the work of existing partners, conducts research, monitoring and evaluation, manages grants and promotes shared value propositions.

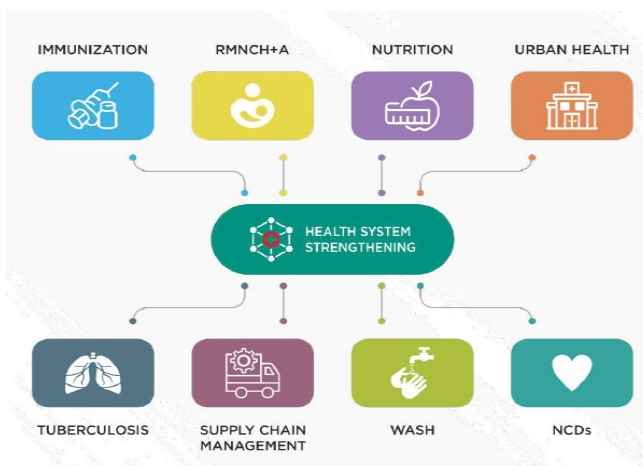


Image 1: JSI India R & T foundation's offerings

The foundation partners with governments, corporates, professional bodies and communities to implement programs that address contemporary health and development challenges. We also engage with the foundations, social entrepreneurs, impact investors, civil society and academia to leverage their capabilities and implement sustained social initiatives that create large scale impact. Examples of our Partners: Government of India, State governments, Global fund, Nayara Energy, GlaxoSmithKline Consumer Healthcare Ltd. We offer value to our partners through efficient public-private-people partnerships that integrate social good for both businesses and society at large.

Licensee Certification

JSI R&T India Foundation continues to work on issues with public health focus

We, at JSI R&T India Foundation, certify that during the Indian Financial Year 2020-21, we continue to work in areas of public health in India across all our ongoing as well as for all new business activities.

Arun Monga

Director

JSI India

Detailed Project Reports

Project Tushti

A unique partnership between the Government of Gujarat, Nayara Energy, JSI R&T India Foundation, and the Indian Institute of Public Health, Gandhinagar.

Introduction

Initiated in December 2019, the project aims to address the situation of undernutrition in Devbhumi Dwarka district of Gujarat. Tushti focuses on the ‘first 1000-day’ window, i.e., from pregnancy till the child is 2 years old. Project Tushti is being implemented in 249 villages spread across 4 blocks of the district.

Key achievements

1. Child profiling, growth monitoring and counselling sessions conducted for the beneficiaries
2. Paediatric camps organised and important days celebrated in coordination with ICDS.
3. Poshan Vatika kit and TUSHTI nutrition tele-counselling centre was inaugurated.

Key challenges/COVID-19 adjustments

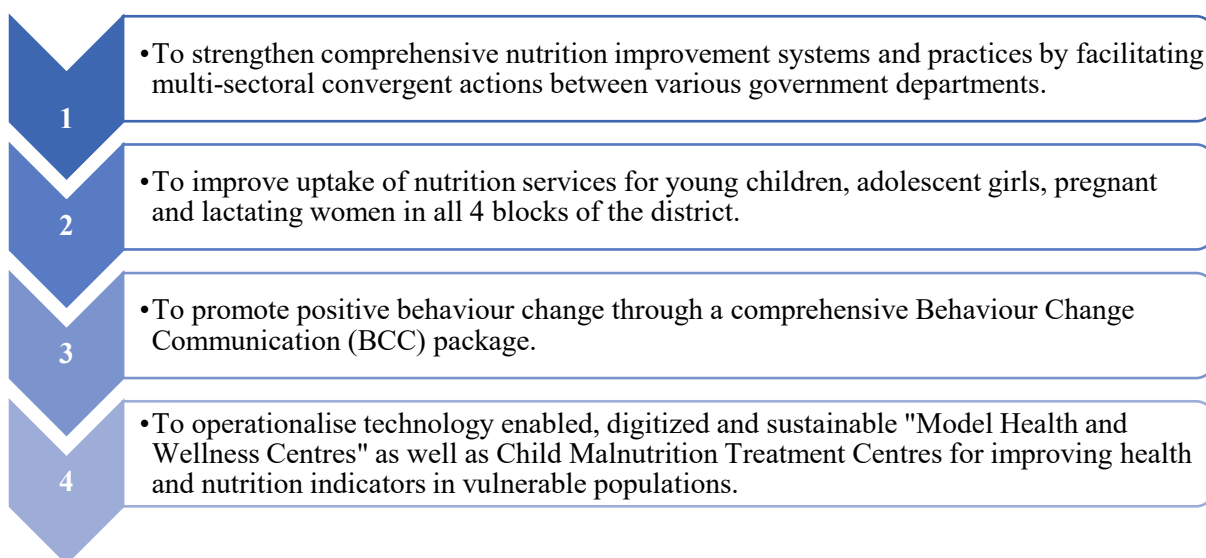
1. Due to COVID-19, movement around the district was restricted due to which field visits and important meetings were affected.
2. High personnel turnover affected project implementation.

Output

1. Poshan vatika kit (seeds, bio-pesticide, leaflet, card, and recipe booklet) to promote the consumption of locally available vegetables and dietary diversity.
2. TUSHTI nutrition tele-counselling centre to provide need-based counselling to the beneficiaries.

Objectives

Project Tushti has 4 strategic objectives:



Reach

Beneficiaries	Number of beneficiaries reached
Under 5 children	2747
Pregnant and lactating women	2462
Adolescent girls	2063
Foster parents	518
Frontline workers	567

Key Activities and Accomplishments

Child Profiling, Growth Monitoring and Counselling

Despite the unprecedented situation due to COVID-19, the project managed to complete home visits for child profiling, growth monitoring and counselling of 2747 underweight children (2139 Moderately Underweight- MUW and 608 Severely Underweight- SUW) as per ICDS data of March. This was accomplished by working jointly with AWWs and Anganwadi Helpers between October-December 2020. Growth Monitoring was conducted using *Weight for Age criteria*.

By the consistent support of the district authorities, FLWs, and the hard work done by the project, 19.1% (116 out of 608) Severely Under-Weight children (SUW) upgraded to Moderately Under-Weight (MUW) category and 15% (91 out of 608) achieved normal weight between. Similarly, 24.2% (518 out of 2139) MUW children achieved normal weight. Overall, 22.2% (609 out of total 2747) transitioned to normal category.



Image 2: Growth of children being monitored

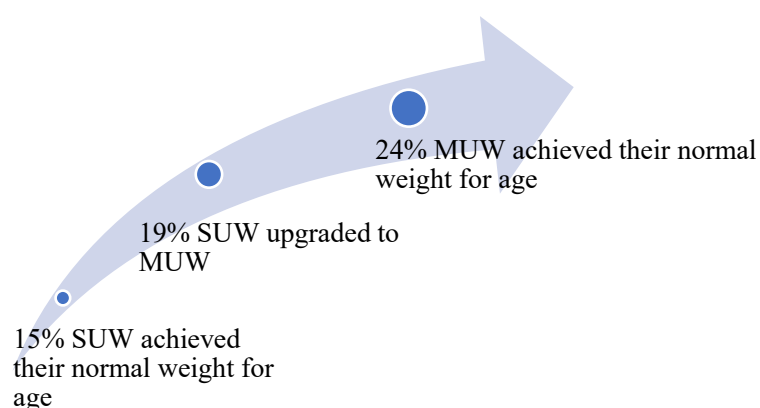
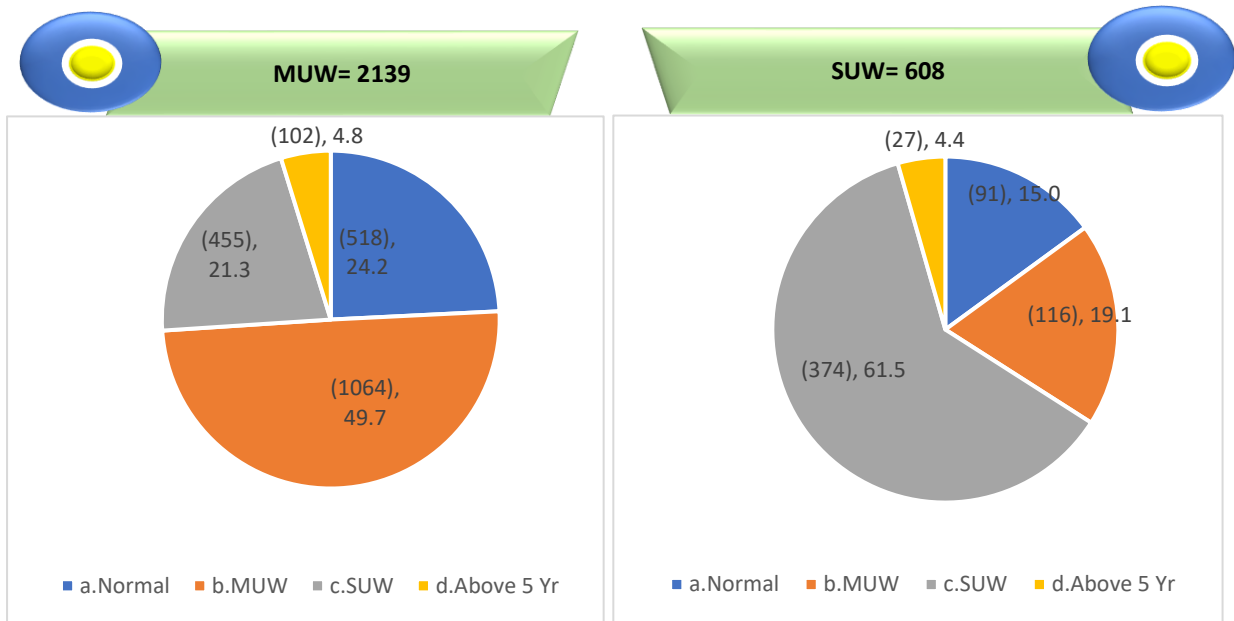


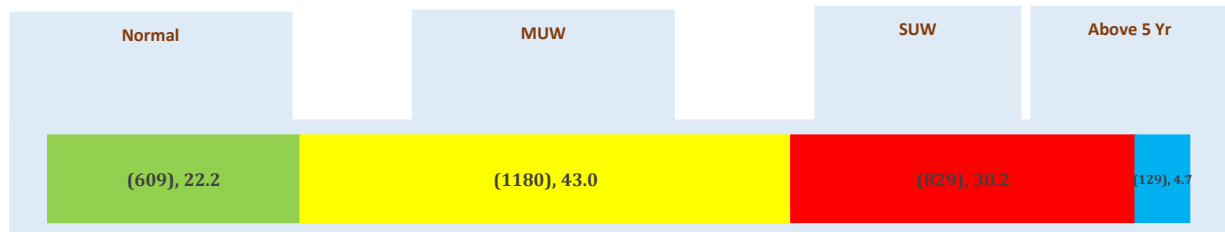
Figure 1: $n(SUW) = 608$, $n(MUW) = 2139$



Graph 1: Current status of MUW and SUW in the district:

However, 21.3% (445 out of 2139) MUW children went into SUW category.

The current status of under-weight children is depicted in the graph below:



Paediatric Camps

Project Tushti organised paediatric Camps in all 4 blocks of the district. **368** moderate and severely underweight children were screened and checked for any severe medical conditions. They were provided with multivitamins, Iron folic Syrup and other medicines required according to their diagnosis. Weight and height of children were also recorded and counselling of parents on importance of nutrition was also done.



Image 3: Paediatric camp being organised

Celebration of Important Events

Events like Breastfeeding Week, International Youth Day and National Nutrition Month were celebrated in collaboration and coordination with ICDS and Health Department of the District. **1882**

pregnant women, lactating mothers, mothers of underweight children, and over **500** adolescent girls were reached during these events. Target groups were counselled on importance of nutrition, infant and young child feeding practices, hygiene and sanitation, menstrual hygiene, Iron-Folic Acid (IFA) consumption, and reproductive system etc.



Image 4: From top right- On the spot administration of IFA tablets among adolescent girls of Bhanwad, Nutrition month celebration at Kambhalia, Video telecasted over local TV network during National Nutrition Month, Tree plantation at lactating mother's home during National Breastfeeding week.

Felicitation of Adarsh Families

53 families who were able to improve the nutrition status of their children were felicitated by representatives from ICDS, Health department and Nayara Energy.

Engaging Foster Parents

518 Foster parents were oriented on their roles and responsibilities through videos shared over WhatsApp groups and phone calls. **85** Foster Parents were engaged in events like Breastfeeding Week and National Nutrition Month.

Animated video for orienting foster parents was developed with messages from Secretary-Department of Women and Child Development, District Development Officer and Program Officer- ICDS.

Poshan Vatika

District Development Officer and Program Officer-ICDS inaugurated Poshan-Vatika kit (seeds, bio-pesticide, leaflet, card, and recipe



Image 5: Poshan-Vatika kit developed by Team

booklet) in February 2021, to promote the consumption of locally available vegetables and dietary diversity. Poshan Vatika has been promoted across **968** families.

Nutrition Tele-Counselling Centre:

Tushti Nutrition Tele-counselling centre was inaugurated by District Development Officer and team members of Nayara Energy in December 2020. Through this centre **515** parents of underweight children, pregnant and lactating mothers, adolescent girls, and foster parents were provided need-based counselling through phone till March 2021.

Digital Health and Nutrition Card

Tushti Digital Health and Nutrition Card has been prepared for individual tracking of Severely and Moderately Underweight children through a unique ID.



Image 6: Tushti tele-counselling centre

Key challenges/COVID-19 adjustments

- As a result of COVID-19 pandemic and lock-down, field visits could not be conducted. Activities such as strengthening of Village Health Sanitation and Nutrition Days could therefore not be conducted.
- High turn-over in the position of District Coordinator, affected on the ground project functioning.

Future Plan

- Scale-up Poshan Vatika across all 4 blocks in 2021. Tushti Champions: Engaging foster parents and orienting them using the animated video.
- Development of “Supushti”- a recipe book and orient the community through recipe demonstration to increase the consumption of Take-Home Ration.
- Improve the functioning of Nutrition Tele-counselling Centre.
- Develop GIFs, videos and other communication materials and disseminate over local cable TV and WhatsApp groups for promoting behavior change.

Supply Chain Management Project

Funded by GFATM, the project is led by Plan International (India Chapter) as Principal Recipient with JSI R&T India Foundation as the Sub-Recipient.

Introduction

The Supply Chain Management (SCM) Project for HIV/AIDS provides specialized technical assistance to National AIDS Control Organisation (NACO), Government of India to strengthen the supply chain system across the country for Anti-Retroviral (ARV) Drugs and HIV testing kits. The overall goal of the GFATM The Global Fund to Fight Aids, Tuberculosis, Malaria) funded project is to improve the delivery of ARV drugs and HIV testing kits through agile, responsive and effective supply chain.

Key achievements

1. Development of Learning material and a digital Learning Management System (LMS) for the staff on the Standard Operating Procedures (SOPs) for supply chain under National AIDS Control Program.
2. Technical assistance provided to the State AIDS Control Society (SACS).

Key challenges/COVID-19 adjustments

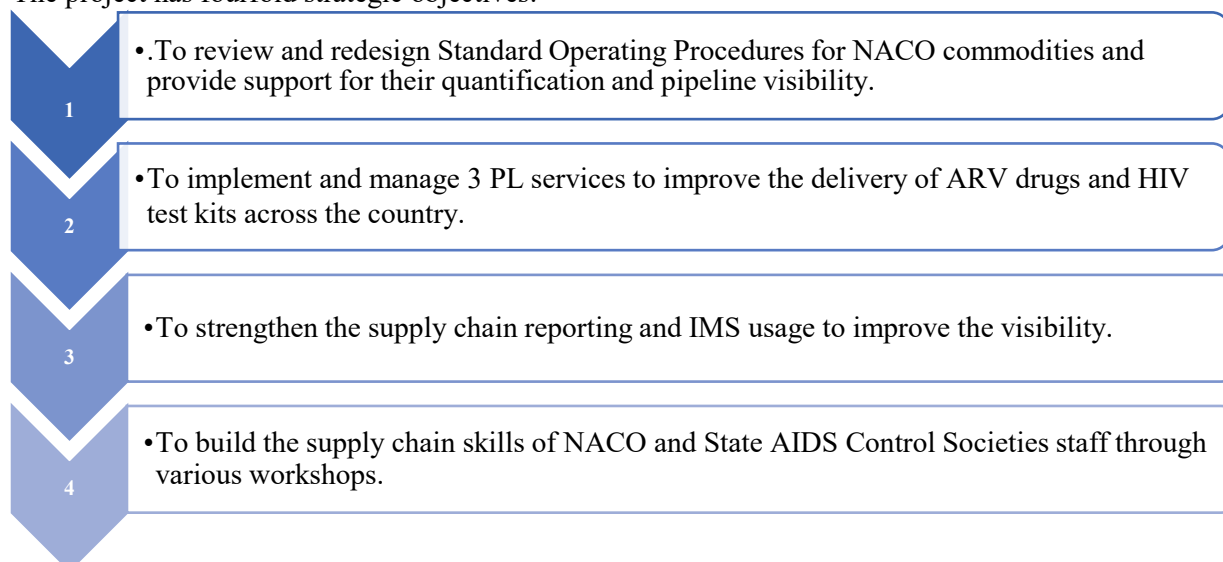
1. Due to disruptions caused by COVID-19, a comprehensive, customized and dynamic technology driven capacity building plan, also referred to as Learning Management System (LMS) having interactive e-learning content was developed.

Output

1. A learning Management System (LMS) with interactive e-learning content.

Objectives

The project has fourfold strategic objectives:



Key Activities and Accomplishments

a) Technical Assistance at National Level

The SCM Project plans to develop a system of regular capacity building of various cadres of staff engaged in the supply chain to improve technical efficiency and effectiveness, leading to improved planning and management of the supply chain and related results. Following activities were executed during the year 2020-2021:

Development of learning Materials for capacity building of supply chain staff:

A senior level consultant was engaged to develop the Learning Curriculum, Facilitators Guide and Participants Handbook along with Power Point Presentations for capacity building of supply chain staff at different levels on Standard Operating Procedures (SOPs) for supply chain under National AIDS Control Program (NACO).

Development of a Learning Management System:

The Covid-19 pandemic has thrown unique challenges to mankind including restricting person to person interaction, breakage of supply chains, diversion of health care workers towards COVID. As a result, teaching & learning has become a major challenge with all traditional teaching institutions being non-functional for indefinite period. At the same time, the pandemic has created a unique opportunity to explore innovative ways to embrace the “New normal”. *Leveraging development and penetration of digital technology for capacity building is one such ‘new normal’.*

In the above context, a comprehensive, customized and dynamic technology driven capacity building plan, also referred to as **Learning Management System (LMS) having interactive e-learning content** was initiated. C&K Management Limited, a reputed agency, was engaged, based on a competitive selection process to develop the Learning Management System (Application as well as e-Learning Content) on identified 8 modules of the SOPs. Process of LMS development involved requirement gathering, development of the application, learning objectives matrix, story boards, creation of animated videos using character animation through several rounds of review and meetings between all parties. Presentation was also made at NACO to get the buy-in and feedback from senior officials of NACO. The assignment is expected to be completed in June 2021.

b) Technical Assistance at SACS Level:

Distribution Planning

- Technical Assistance was provided to State AIDS Control Societies (SACS) in preparation of rational distribution plans based on consumption data, as well as available stock at store and following Min-Max level as per SOPs.
- SACS were oriented on implementation of the minimum- maximum stock ratio of Anti Retro Viral (ARV) drugs at facility level as per SOP and availability of drugs at SACS/CMSS store.
- Handholding support was provided to Store Officers of different SACS to dispatch monthly ARV drugs and HIV test kits to facilities using proper distribution plan and indents.

Strengthening of warehouse/store

- Store Officers were oriented to arrange store as per First Expiry First Out (FEFO) principle. Batch wise drugs are being arranged on pallets and racks.
- Fast moving drugs like TLD and ATV/r, and AL are being placed near the loading area to save time.
- Store Officers were briefed about physical count of ARV drugs and HIV test kits on half yearly basis. Physical counting was done by Regional Supply Chain Managers and differences were sorted out for better inventory management.



Image 7: From right to left: Pallet arrangement at the store, wall rack arrangement at the store

Capacity Building

- Assistance was provided to SACS officials for monitoring the stock availability at the facility level and incorporate the requirement in the distribution plan, thus resulting in zero stock out of ARV drugs across the Anti Retro-viral Treatment (ART) centres of all SACS.
- Capacity building of the Store Officer on periodic stock inventory, technical support on SOCH, use of FEFO principle during distribution, route planning etc.
- Store Officers were oriented on handling Temperature Loggers, storing Ice Packs in Deep Freezer and conditioning of ice packs.
- Virtual meeting through zoom calls were held with Additional Director- Integrated Counselling and Testing Centres (ICTCs) in several states in order to streamline the distribution of HIV kits from District AIDS Prevention and Control Units (DAPCUs) to facilities.

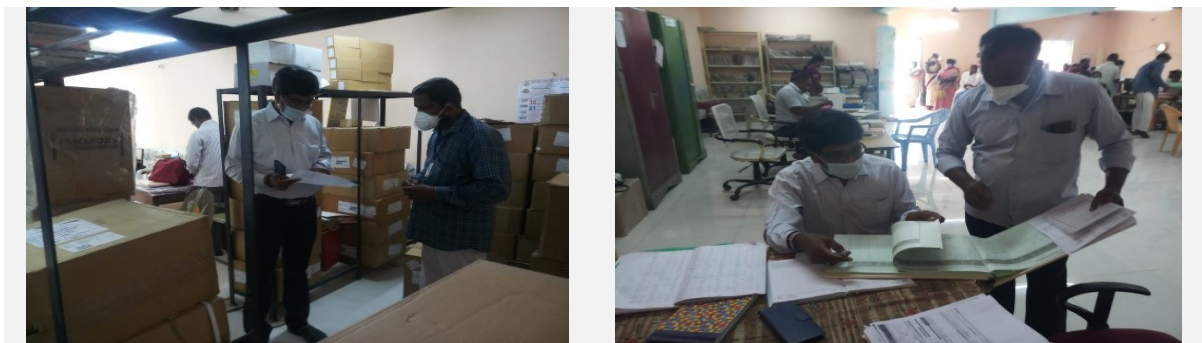


Image 8: From right to left: Stock verification at the ART centre Virudhunagar- Tamil Nadu, asset register verification at the ART centre Virudhunagar- Tamil Nadu

Future plan

- Completion of Learning Management System and its hosting on NACO Server
- Enrolment of staff for capacity building on SOPs and roll out of on-line capacity building on SOPs through LMS.
- Strengthen the use of data recording and reporting through SOCH.

Road to School Program, Khordha Bhubaneshwar, Odisha

Funded by Indusland bank, the Road to School program is a collaboration between JSI R&T India Foundation and Learning Links Foundation (LLF).

Introduction

Road to School Program began in Feb 2018 intending to improve health and wellness of ~10000 school going children of 6 to 14 years' age in 42 Government-owned schools, Khordha, Bhubaneshwar district, Odisha. The programme had three broad components: Learning Enhancement Programme; Health and Wellbeing and Community Engagement.

To undertake the learning enhancement programme, LLF recruited 42 resource persons to bridge the learning gaps amongst students in subjects like Maths, Odia & English. These resource persons were placed in all 42 government schools across Khordha District. Additionally, 5 community mobilizers were placed in the neighbouring villages to connect with the community.

Key achievements

1. Baseline assessment of knowledge and practices regarding health and nutrition completed.
2. IEC material developed in Hindi and Odia.
3. Digital health and nutrition sessions were organised.
4. Digital health screening of children was organised.
5. Community awareness camps were organised.

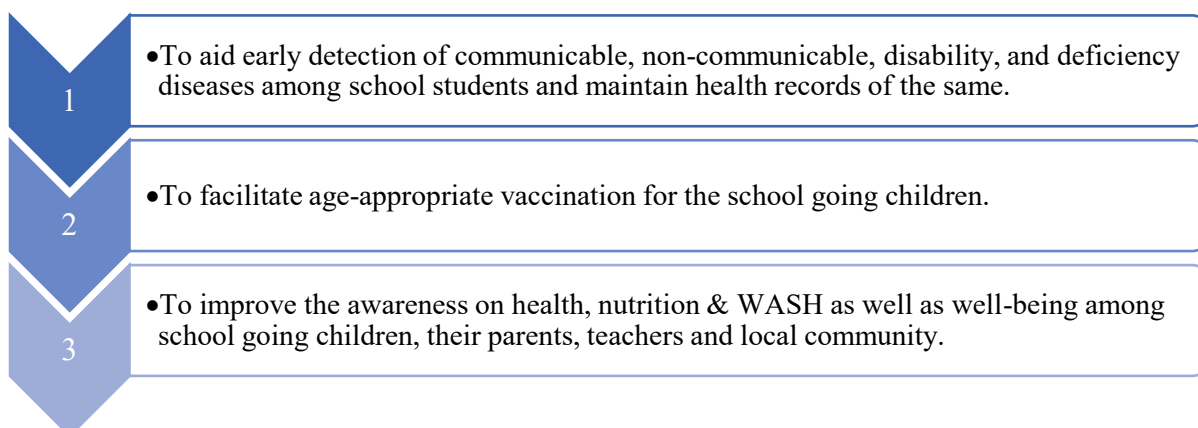
Key challenges/COVID-19 adjustments

1. Activities had to be reprogrammed and were implemented digitally.
2. Children did not have access to internet due to financial issues which created a major problem in program implementation.

Output

1. Flip book on Health and Nutrition in Odia
2. Activity and suggestion book for trainers
3. Activity kit for children

Objectives



Reach

10,000 school students (6- 14 years) spread across 42 schools in Khordha during January-December 2020.

Approach

The project was based on two key strategies: Health checkups and vaccination of children and awareness generation regarding health and nutrition among children, teachers and families.

The age group of 6-14 years was divided into two sub-groups for providing age-appropriate counselling on relevant topics as 6 to 9 and 10 to 14 years.

Activities planned

1. On boarding of project team and operational planning
2. Baseline Assessment
3. Development of communication and learning material
4. Organization of Digital Health and Nutrition Education sessions with children and at Off School Learning Spaces (OSLS) – Health and Nutrition Classes to cover around 10000 children
5. Organization of Community awareness programme
6. Digital Health Consultation and Screening for 10000 children
7. Capacity building of LLF RPs and teachers on Health and Nutrition issues

Key Activities and Accomplishments

On boarding of project team and operational planning

The project team consisting of one Project Coordinator and two Health and Nutrition Counsellors was on boarded. The project team was oriented on project activities.

Baseline Assessment

To understand the baseline levels of knowledge and practices around Health, Nutrition, WASH, psychological well-being data was collected using structured questionnaire for children of age group 6 to 9 years and 10 to 14 years in the months of July to September. The data was collected in hard copies from the children through resource persons and was entered in the excel sheet. The top line findings of baseline assessment report revealed that among the children of 14 years' age the dietary and physical activity related practices were not as per WHO recommendations. The children of 10-14 years' age group were practicing harmful behaviors such smoking bidi, chewing ghutka and alcohol consumption. They were facing psychological problems such as feeling loneliness, not able to cope with the comments of teachers, parents and peers. Girls in 10-14 year's age group were not aware about menstruation and safe menstrual hygiene practices.

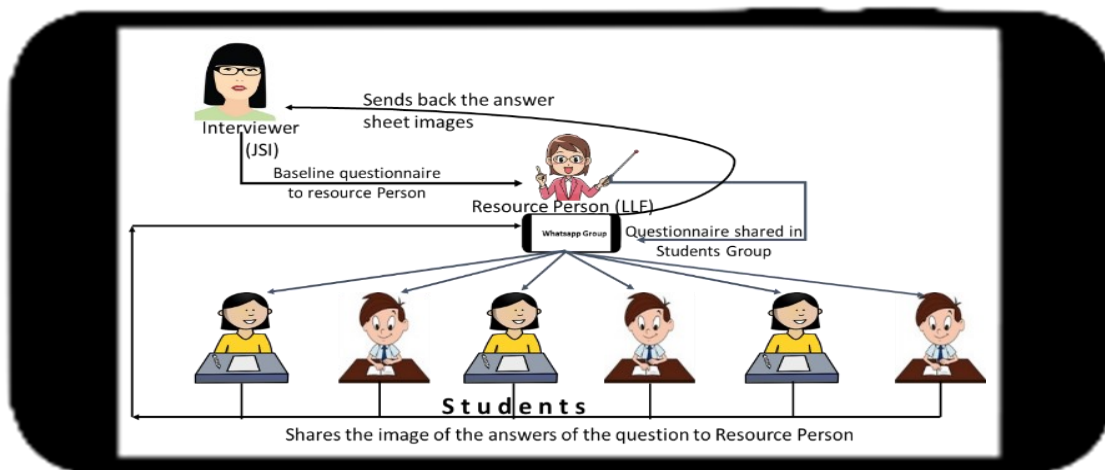


Image 9: Baseline assessment work flow

Development of Communication and Learning Material

The IEC materials including flip-books and activity books were developed in Hindi and Odia (local language) to inculcate healthy habits among children on important topics such as oral hygiene, handwashing before eating and after defecation etc. and orient the teachers, parents & guardians on the importance of nutritional food and prevention from common ailments. Different animation videos, songs, stories, posters, cards, games were developed by the team to involve students in a holistic way in the learning process. The project had developed following communication materials

- Flip book on Health and Nutrition in Odia
- Activity and suggestion book for trainers
- Activity kit for children

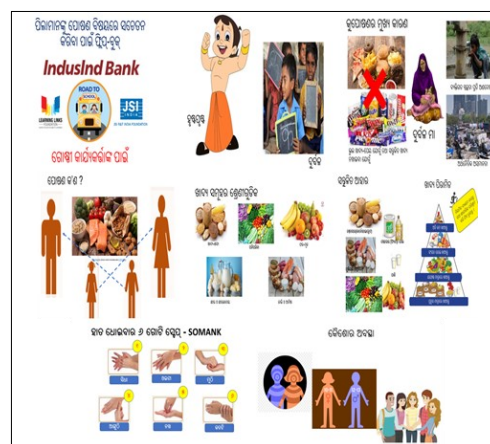


Image 10: IEC material in Odia

Organization of Digital Health and Nutrition Education sessions with children

In order to conduct health and nutrition sessions during lock down and COVID-19, a digital education plan was prepared consisting of three sessions. Each session was of 30 minutes. The focus of the health education was on nutrition that included - difference between healthy and unhealthy child, concept of nutrition, balanced diet, diet chart, home-made food, malnutrition and its causes, anaemia, and foods which are rich in iron and can prevent anaemia etc. Post session assessment was conducted after each session and children were suggested to support their parents in preparing nutritious food. During sessions, along with power point presentations, video links were used. LLF was responsible for ensuring the attendance of children in the sessions through their RPs. From September 2020 till 25th December 2020, total 4359 children from 29 schools participated through 910 digital sessions conducted by two Nutrition Coordinators and Project Coordinator.

Apart from this when lock down measures were relaxed, health and nutrition classes were organized in the community through Off School Learning Spaces (OSLS) – as per the list provided by LLF as schools were still closed. The health and nutrition education sessions were organized in 13 OSLS sites through field visits and digitally. 298 children from OSLS were reached.



Image 11: Project staff taking Health and Nutrition sessions in OSLS

Organization of community awareness camps

Based on the findings of the baseline assessment report, the project developed a concept paper on community awareness to cover the issues such as health seeking behavior, importance of immunization, importance of healthy dietary practices and physical activity, personal hygiene and effects of harmful addictions. Six community awareness sessions conducted in which 53 parents participated.



Image 12: Community Awareness programme

Organization of Digital Health Consultation and Screening

The project team developed the concept, developed a digital health consultation card, and created a pool of medical doctors to carry out digital health consultation and screening for the children in presence of their parents. A pilot digital consultation camp was organized in which 11 students were screened and prescribed medications as per the disease condition.



Image 13: Digital health screening

Special Month / Days Observations

Government of India has designated month of September as the 'Nutrition Month'. During the nutrition education sessions, the concept of 'Home Made Nutritious Food' was promoted among the children and they were encouraged to use their leisure time to prepare food of their choice. They were oriented to make Roti Pizza, Bread Pizza and Pan Cake. Many children had prepared food and shared pictures over WhatsApp.



Image 14: Drawings by children on World Hand Washing Day and Nutrition Month Celebrations

Key challenges/COVID-19 adjustments

All the project activities were planned as face to- face interaction in the school campus by organizing immunization camps and health screening camps. However, by the time preparatory activities were complete, there was emergence of COVID-19 pandemic across the globe. COVID-19 severely affected the face to- face interventions envisaged under the project due to lockdowns, restrictions on gatherings of people and closing down of the schools for unlimited duration. Project management team reviewed the situation and started reprogramming the activities through digital mode. The children mainly belonged to urban slums and urban poor families. The families were severely affected with financial hardships due to which the children did not have internet access.

The project was closed on 31st December 2020 with mutual agreement between JSI R&T India foundation and LLF team.

Pratiraksha –Suraksha Ki Dor: Improving immunization coverage by reducing drop outs in district Rewari, Haryana.

*GSK Consumer Healthcare in collaboration with Government of Haryana and JSI R&T India Foundation is implementing a unique, innovative, technology driven, comprehensive project **Pratiraksha-Suraksha Ki Dor** to address the issue of drop out in Rewari district of Haryana.*

Introduction

Immunization against Vaccine Preventable Diseases (VPDs) is one of the most successful child survival interventions across the globe, bringing about significant reduction in adverse health consequences and subsequently improving the health of millions. In India, as per the recent National Family Health Survey 4 (NFHS 4) 2015-16, only 62% children are fully immunized. To increase the full immunization coverage to more than 90%, the Ministry of Health and Family Welfare (MoHFW), Government of India (GoI) has launched a catch-up campaign – Intensified Mission Indradhanush. The key objective of this campaign is to reduce the drop outs. As per the Routine Immunization (RI) Monitoring Data 2019, apprehension of parents for events like fever, swelling at the site of injection accounts for 26% of the reason for drop outs.

Pratiraksha-Suraksha Ki Dor is three-year project, which will be implemented in entire district of Rewari covering rural, migrant, vulnerable and marginalized population in phased manner. The key feature of this project is use of a 360-degree approach for behavior change communication (BCC) to bring awareness about importance of full and complete immunization and use of syrup paracetamol for post vaccination adverse events among the parents and caretakers of 0-2 years' children. After preparatory phase of three months, field implementation of project interventions was initiated from 1st December 2020 onwards in two blocks of district Rewari namely Rewari urban and Bawal covering a population of 4,60,198 (41% of total population of the district).

Key achievements

1. Development of context specific communication materials
2. House to House visits by community mobilizers
3. Organization of awareness camps
4. Development of Job aids and IEC materials for ANMs
5. Development of digital project management information system
6. Observation of RI/VHSND sessions and participation in ASHA ANM monthly meetings.

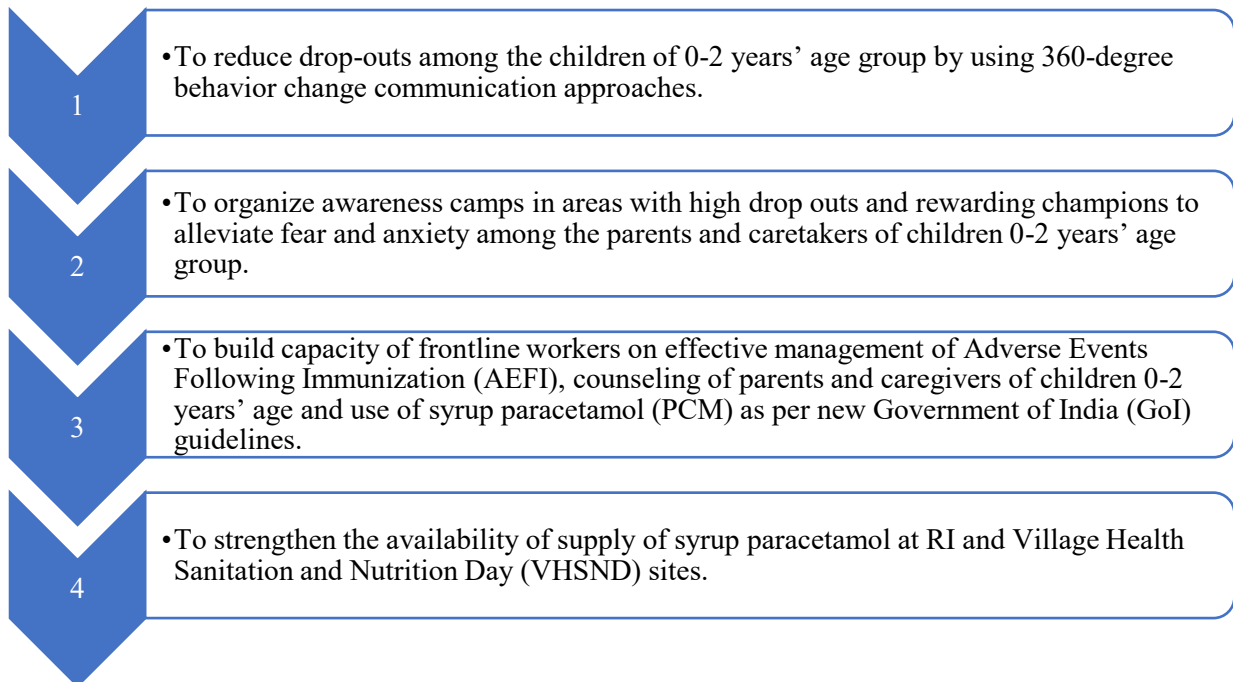
Key challenges/COVID-19 adjustments

1. Routine immunization program was impacted due to COVID-19.
2. The field movement of community mobilizers and monitoring visits by national and district team were affected due to lockdown and farmer's agitations.

Output

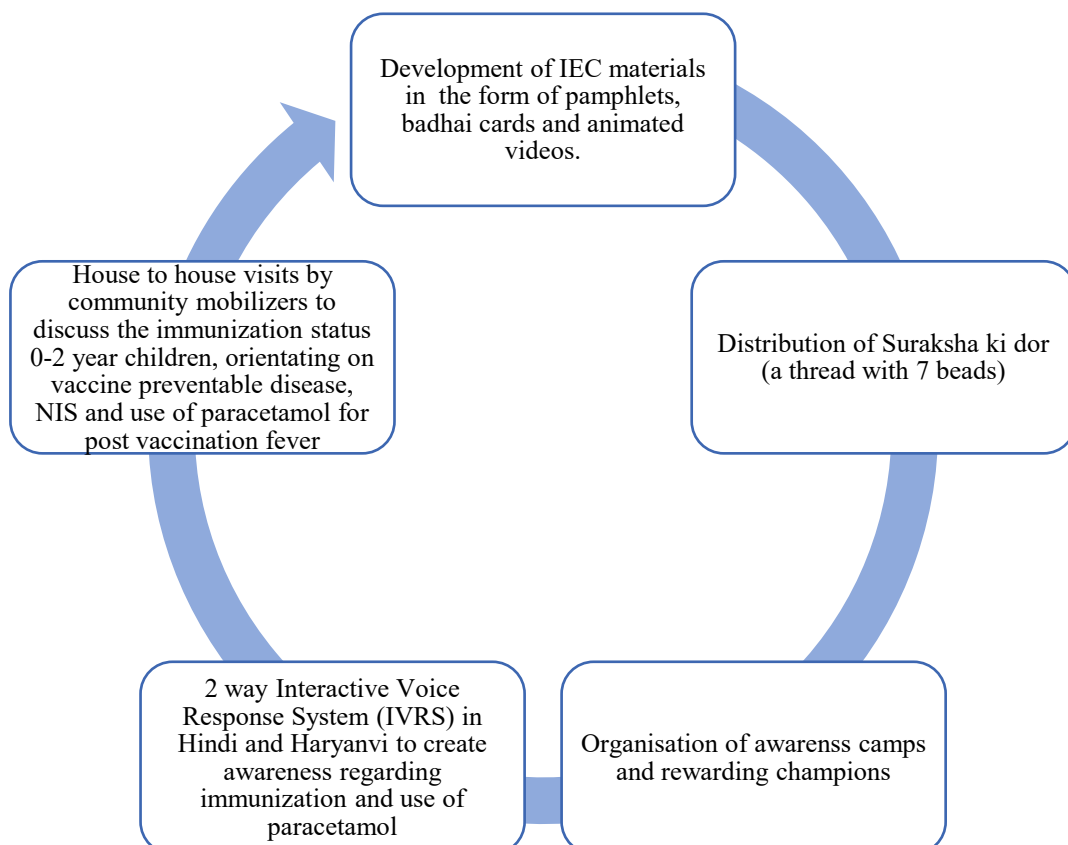
1. Parents and care takers of **4284/ 12000 (35.7%) children of 0-2 years' age** were reached out through House-to-House visits by Community Mobilizers.
2. **Suraksha ki Dor** has been **distributed to 2277 children** through home visits.
3. The availability of paracetamol with the parents improved from **51.3%** in month of December (at the start of Project) to **84.8%** by March 2021.
4. 87.6% of the children (1 year and above) line listed are fully immunized and 57.5% of parents resumed vaccination for their children.

Objectives



Approach

The 360-degree approach for behaviour change communication consists of following activities:



- Development of capacity building module for frontline workers and organization of capacity building workshops for Auxiliary Nurse Midwife (ANM), Accredited Social Health Activist (ASHA) and Aanganwadi worker (AWW).
- Face lift of 25 Aanganwadi centres (AWC) to support better organization of Routine Immunization (RI) sessions and Village Health, Sanitation and Nutrition Days (VHSNDs).

Key activities/ accomplishments

Preparatory activities



Image 15: JSI team meeting with the district health officials

A grant agreement was signed between GSK Consumer Healthcare and JSI R&T India Foundation with project start date as 1st Sept, 2020. Project team consisting of Project Coordinator, BCC Officer and 8 Community Mobilizers is in place. Inception meeting was held between Civil Surgeon, District Immunization Officer and JSI team to introduce the project team and project activities. District administration issued a letter of support. Project office is set up in the space allotted by the district administration. Based on Health Management



Image 16: Community Mobilizer distributing IEC

Information System (HMIS) data analysis the blocks were selected for first year of project implementation. Project team was oriented on project activities. They were provided with community mobilizer kit consisting of Tablet, Apron, Cap, umbrella, and backpack. A baseline qualitative assessment was carried out by interviewing key stakeholders at district, block and field level to understand the enablers and barriers for RI in the district Rewari. A report was prepared and shared with district administration and donor GSK Consumer Healthcare. The district and block profiles were developed.

Context specific communication material developed for behaviour change

Based on the gaps identified in the baseline assessment report, topics for IEC pamphlets were decided and two types of IEC pamphlets; one on Full immunization and another on use of syrup paracetamol are designed and field tested. Three animated videos were developed. The topics covered are importance of full immunization and correct use of syrup paracetamol. A project filler has been developed which describes the project interventions and reach. The IEC pamphlets and animated videos are very much appreciated by the state and district health administration as well as ASHA and ANM. For the first time such kind of IEC material has been developed for Rewari district. To reward the parents of children 0-2 years' age group who are fully and completely immunized, Badhai cards have been developed. Badhai card provides information on vaccines and vaccine preventable diseases and use of syrup paracetamol for post vaccination fever.

House to House visits by Community Mobilizers (CM)

Parents and care takers of **4284/ 12000 (35.7%) children of 0-2 years' age** were reached out through House-to-House visits by Community Mobilizers. During visits parents were motivated for completing the immunization as per schedule. **3964 IEC pamphlets** on full immunization and **3964 IEC pamphlets** on Paracetamol use were distributed. **1422**

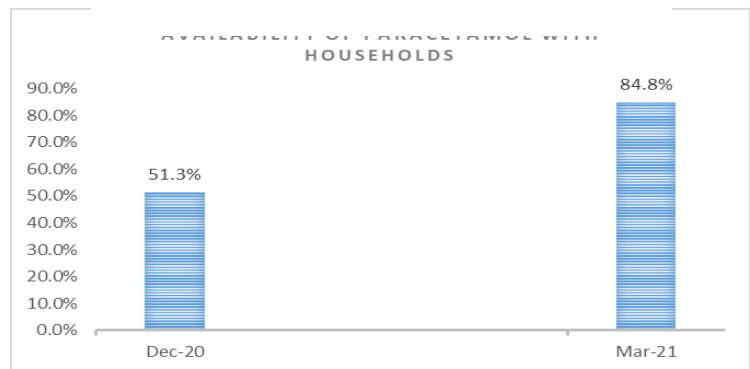
Parents were sensitized on importance of full and complete immunization and correct use of syrup paracetamol by showing animated videos. **Suraksha ki Dor** has been **distributed to 2277 children** through home visits. The household data is collected through tablet-based application. The availability of paracetamol with the parents improved from **51.3%** in month of December (at the start of Project) to **84.8%** by March 2021. 87.6% of the children (1 year and above) line listed are fully immunized and 57.5% of parents resumed vaccination for their children. All the field visits are being done following COVID appropriate behavior.

Organization of awareness camps

Awareness camps were organized regularly taking all COVID 19 related precautions (Use of mask, physical distancing and using hand sanitizer) in the areas with high dropouts. **19/38 (50%) awareness camps** have been organized in two blocks: Rewari Urban & Bawal. Around **550 parents of children 0-2 years** have been sensitized on importance of immunization through camps. Government officials like District Immunization officer, Medical Officers from Community Health Centre (CHC) /Primary Health Centre (PHC), area ANM and ASHA participated in the awareness camps and addressed the community members. The animated videos developed were shown to participants. Parents who fully immunized the child at age one and two years were selected from the area and a rapid-fire round quiz was organized for them and the winner of the quiz was rewarded with a bag and *Badhai card*. Rest of the participants were given *Badhai card* as a token of appreciation.



Image 17: Parents tying Suraksha ki dor



Graph 2: Availability of Paracetamol with households of 0-2 year children



Image 18: DIO addressing parents in awareness camps



Image 19: Rewarding champions with Badhai card and champion bag by ANM and ASHA

Development of Job Aids for ANM and IEC flex for ANM and RI/VHSND session site

Job aids for ANMs on use of syrup paracetamol have been translated in Hindi and were distributed. These job aids are as per Government of India guidelines. It was the first time that such job aids have been developed and distributed to **100 ANMs in Rewari district's two blocks**. Also, **100 IEC Flex on use of syrup paracetamol** for AWCs and SCs have been printed and displayed at Anganwadi Centres and sub centres where Routine Immunization sessions take place.



Image 20: DIO distributing Job Aids and IEC flex to ANM

Development of digital project information management system

All the data collection for the project related activities has been digitalized. A tablet-based application has been developed which allows real time data entry of the project activities. A dynamic dashboard has been developed which helps in monitoring the progress of project activities and name-wise tracking of children for immunization.



Image 21: Project MIS login page

Other activities

On every Wednesday and Saturday, Community Mobilizers visit the RI session sites and facilitate vaccination of drop-out children, check for availability of syrup paracetamol, Vaccines and AEFI kit. They participate in monthly ASHA and ANM meetings held at the PHC level and share their field

observations with Medical Officers. Regular update is provided to district health administration through one to- one meetings and telephonically by the project team.

Key challenges/COVID-19 adjustments

Due to the ongoing COVID 19 pandemic, there has been a disruption of routine immunization services. ASHA and ANM were diverted to COVID 19 duties, vaccine dry run etc. The Anganwadi centres were closed down. Some of the health facilities were also closed down for COVID infection control measures. The organization of awareness camp was allowed with restricted number of participants (30 or less). The field movement of community mobilizers and monitoring visits by national and district team were affected due to the lockdown and farmer's agitations.

Future Plan

In coming months apart from ongoing activities, new activities such as the facelift of 25 selected Anganwadi centres, capacity building workshops for ASHA, ANM and AWW and IVRS setup will be undertaken. Based on the encouraging results, a proposal for increasing the project reach to the entire district is under consideration.

Summary of all new business activities submitted by JSI R&T India Foundation

Sl.	Name of the funding opportunity	Donor	Funding level	Brief Activity Description	Status
1.	Supply Chain Management Strengthening Project	Global Fund	INR 200 million	The “Supply Chain Management Strengthening (SCMS) Project for HIV/AIDS and TB drugs” aims to strengthen the technical capacity of the National AIDS Control Organization (NACO), Central TB Division (CTD), State AIDS Control Societies (SACS) and State TB Cells (STC) to design, manage and monitor supply chains for improved access and availability of high-quality ARVs, TB drugs, diagnostics and other commodities across India.	Awarded
2.	Technical support for effective implementation of COVID-19 vaccination in three states	State Bank of India	INR 30 million	To ensure better coordination with the state government officials a, State COVID-19 vaccination roll out support team will be established in each of the three selected states. This team will work closely with the state and district immunization officials for strengthening the COVID 19 vaccine roll-out	Final stages of discussion