

RMNCH+A Highlight Series

Translating Strategy into Action: MCH Action Plan in Punjab



Photo by MCHIP

“I firmly believe that the Punjab Health Department will prove itself to be among the leaders and agents of change that India can be proud.”

Ms. Vini Mahajan, Principal Secretary to Govt. of Punjab - Department of Health & Medical Education

Story Contributors:

Mr. Niraj Agrawal and
Dr. Javvad Suri

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The Government of India’s Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCH+A) strategy, launched in 2013, seeks to meet the needs of women and their children at all life stages and across the continuum of care. Meeting this ambitious goal requires a robust and realistic action plan and strong leadership at the state level. Government of Punjab, which has already committed to providing preventive and curative services of the highest standard, has taken a step forward to transform the RMNCH+A Strategy into an Action Plan to bridge gaps in services and ensure comprehensive health care for all.

Background

The Government of India co-convened the global Call to Action for Child Survival in 2012 with USAID, Government of Ethiopia and UNICEF, and then hosted its own national summit to accelerate progress toward Millennium Development Goals 4 and 5 and the health goals of the 12th Five Year Plan. A new, comprehensive Reproductive, Maternal, Newborn, Child, and Adolescent Health (RMNCH+A) Strategy was launched at the summit and is currently being rolled out in all 29 states and 184 high priority districts.

Experience from across the globe has demonstrated that sound public health not only depends on the health of women and children, but also on that of adolescents transitioning from childhood to adulthood. The Mother and Child Health (MCH) Action Plan (2014-2017) is a comprehensive effort by the Department of Health & Family Welfare, Government of Punjab, to translate the National RMNCH+A strategy into a state level action plan for women, adolescents, and children which strives to:

- Implement and scale up evidence-based, cost effective, high-quality interventions through effective service delivery strategies across the continuum of care.
- Strengthen health systems to ensure affordable, equitable access to quality health care services for all adolescents, pregnant women, mothers, newborns, and children, with particular attention to the urban poor, scheduled castes, minorities, and other underserved groups.
- Promote multi-sectoral approaches to address social and structural factors that influence public health.

This comprehensive plan takes into account existing health dynamics in Punjab and clearly articulates good governance measures like supportive supervision, monitoring and evaluation, and program reviews necessary for ensuring the quality of services.

Creating the Action Plan

The State of Punjab has consistently excelled in providing quality health services to all age groups, especially mothers and children. The state's high per capita income, high literacy rate, and strong community development, along with well-developed state health care programs, have allowed Punjab to attain impressive health indicators. According to the 2012 Sample Registration Survey (SRS 2012), the infant mortality rate in Punjab is 28 per 1000 live births, versus 42 at the national level. The state's total fertility rate is 1.8, and has already reached replacement level; and the maternal mortality ratio is 172 per 100,000 live births, significantly lower than the national average of 212.

The development of the MCH Action Plan was in the hands of a task force within the Punjab Governance Reforms Commission (PGRC). This commission was set up in January 2009 to improve the welfare of disadvantaged, marginalized, and deprived populations in Punjab, and achieve good governance based on high ethical standards. The PGRC's mandate is to suggest changes in the design, implementation, procedures, rules, and regulations of public services. Within social development programs the PGRC is tasked with suggesting ways to improve service delivery and to ensure access to services by marginalized and deprived groups.

Task forces in existence within the PGRC include a task-force on health and medical education headed by Dr. K.K Talwar, Chairman, Medical Council of India and Former Director, Post Graduate Institute of Medical Education and Research (PGIMER), Chandigarh. Principal Secretary, Department of Health and Family Welfare, Directors from the Directorate of Health Services and Family Welfare as well as representatives from medical colleges are a part of the task force. Since the emphasis of the Punjab Government was to improve MCH services, a plan at the state level was necessary to achieve

the RMNCH+A objectives. A sub-group for preparation of the action plan was formed under this task force, chaired by Dr. Vinod Paul, Professor and Head, Department of Paediatrics, All India Institute of Medical Sciences, Delhi and Dr. Karanjit Singh, Director Health Services. All Program Officers from the Directorates of Health Services and of Family Welfare are a part of the task force.

The MCH Action Plan was developed through a series of discussions with the key stakeholders (including faculty of medical colleges, Post Graduate Institute of Medical Education and Research, technical experts from MCHIP national and state team, members of the State Program Management Unit – National Health Mission and a range of Consultants) jointly with officials from the Department of Health & Family Welfare to identify gaps in coverage, quality of care and health systems components, and to propose activities and alternatives to address the gaps with a clear cut timeline. This rigorous process of analysis and target setting led to the development of a realistic action plan aimed at specific outcomes.

The MCH Action Plan promotes a systemic and holistic vision for health of women, newborns, children, and adolescents and provides a pathway to ensure that health, nutrition and development interventions are equitably implemented across all levels in the state with active participation of all stakeholders and partners.

The action plan lays out specific annual targets for coverage of interventions across the continuum of RMNCH+A and for reduction of maternal mortality, under-5 mortality, infant mortality, and neonatal mortality. The plan specifies actions to be achieved within specific time frames to accomplish the interventions.

The action plan also sets targets for coverage of key interventions, which are to be achieved in a phased manner through 2015 and 2017. Some of the key interventions include the number of women who received at least four antenatal care visits (ANCs), ANC visits registered during first trimester, early initiation and exclusive breast feeding, complementary feeding, and full immunization. Additionally, the plan provides clear-cut approaches and targets for health

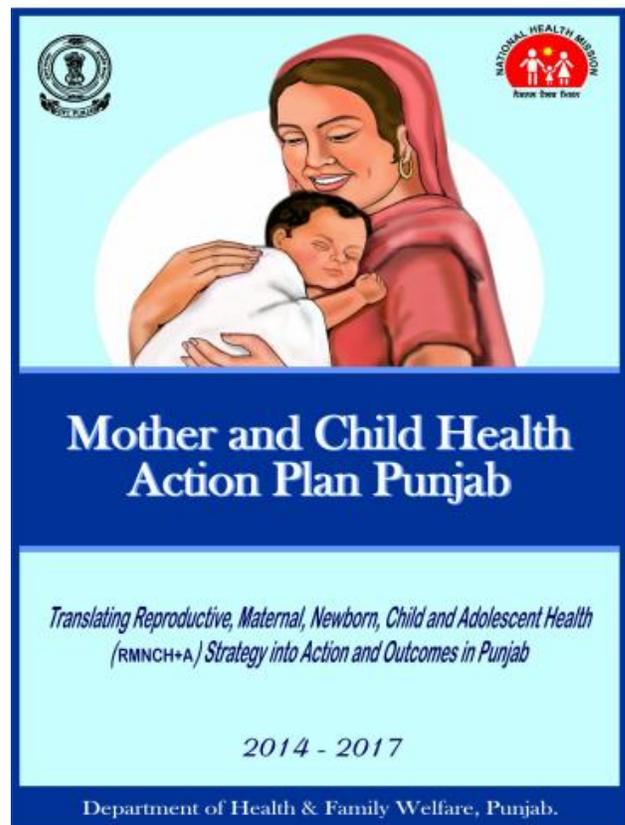
systems strengthening, with guidance on human resource deployment, retention, motivation, and training of human resources, and strengthening and upgrading health infrastructure.

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The MCH Action Plan has been approved by the Chief Minister and Health Minister, Government of Punjab, and its implementation began in January 2014. A core group, comprising of senior officials from the Directorate of Health Services, state program managers, and program officers, has also been constituted under the Chair of Director Health Services (Family Welfare) to ensure timely implementation of the steps in the action plan. The core group works in close collaboration with National Health Mission - Punjab and State Institute of Health & Family Welfare (SIHFV) who meet every month to deliberate and report on actionable outcomes achieved as well as desired outcomes for the current month. Mentoring and support to the core group is provided by Dr. Vinod Paul. District Family Planning Officers (in association with the District Immunization Officers) were designated as the key persons in each district to follow up on the implementation of action plan deliverables.

Conclusion

The Government of Punjab is committed to raising the health status of the people of the State. The MCH Action Plan (2014-2017) is a strong step in that direction. Smooth and timely implementation of the action plan will enhance the availability of affordable health care to adolescents, pregnant women, newborns, and children. The plan's goal is to help reduce maternal and childhood mortality as per 12th Plan targets.



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The author's views expressed in this publication do not necessarily reflect the views of the United States Agency for International Development or the United States Government.

MCHIP - Maternal and Child Health Integrated Program

1776 Massachusetts Avenue NW, Suite 300
Washington, DC 20036

<http://www.mchip.net/>