

### **EAST DELHI RIVERBED SLUM DEVELOPMENT PROGRAMME**

East Delhi Riverbed Slum Development Programme is a holistic intervention by Asha in the riverbed area of river Yamuna, unique in its topography as well as contours to serve one of the most vulnerable slum communities living in Delhi. Apart from the socio-economic distress, the tough challenges posed by external conditions create acutely difficult conditions for living.

To cite a specific example, the dwellings made of mud, scrap materials and other items like discarded plastic sheet gets washed away almost every year during the rainy season because of floods and it is a common sight for every passer-by to see destitute men and women, having lost their every belonging, standing on the nearby flyover waiting for the water to recede. Asha's model of development with healthcare and



other determinants like empowerment, education, financial inclusion, environment improvement and infrastructure development are slowly creating an impact in target population.

The programme supported by **Accelerated Education Publications** has shown that the indicators in terms of healthcare, education as well as social and development infrastructure is showing continuous improvement. However, there is some distance to cover before significant outcome is achieved.

The Objectives vis-à-vis Achievements in the Programme are as follows:

**Objective 1- Maternal and Newborn Health Programme-** To increase awareness of and access to quality maternal and newborn health services.

**Achievement-** Access to Maternal and Newborn Health programmes has shown a steady increase during the period. Almost 80% deliveries were conducted in hospitals or by trained midwife. This has resulted in elimination of services of quacks and untrained midwives. Regular drives were conducted to register new cases of Antenatal check-ups, and requisite check-ups, basic lab investigations and ultrasounds were carried out. Due to increase in awareness programmes and availability of facilities within reach, there was an increase in Health Seeking Behaviour amongst the residents of riverbed area of Seelampur. The objective

is to ensure that all the pregnant ladies in the area undertakes compulsory 3 ANC check-ups and 100% deliveries are done in hospitals.

Objective 2- Child Health Programme- To increase awareness of and access to quality health services for children under five.

**Achievement-** In order to provide quality healthcare services to children under five years, well baby clinics were conducted weekly in the slum colony by paramedical staff. CHVs and lane volunteers visited the community homes of all the children under five years of age for check-up and vaccination of preventable diseases like Tuberculosis, Diphtheria, Pertussis, Tetanus, Polio and Measles. The children also received MMR vaccination. Vitamin A supplementation was given in every 6 months to children between 9 months to five years. The children were checked for malnutrition and delay in physical growth on regular basis. CHVs regularly conducted home- visits to advise on personal hygiene, nutrition and discontinuation of bottle feeding. Malnourished children were referred to the clinic for advice and treatment. Special focus was given towards treatment of respiratory and gastrointestinal diseases. More than 70% children in 0-5 years' age group received BCG Vaccine and 70% children in 0-1 years received Hepatitis B vaccine. 80% children in the age group of 1-2 years received 3 doses of DPT/OPV and 80% children in age group of 1-5years received vaccination for Measles. 75% children in the age group of 2-5 years received MMR vaccination and 78% children in the age group of 2-5 years received vaccination for Typhoid. 99% children were provided Vitamin A supplement and 77% children were born healthy. More than 70% children were immunized with necessary doses of immunization. The overall rate of immunization in the riverbed area have increased by more than 10% compared to last year.

Objective 3- Reproductive Rights Programme- To increase access to and raise awareness of reproductive, sexual and family planning services for eligible couples.

**Achievement-** Considerable activity as part of family planning services for eligible couples in new area of Seelampur were organized. Usage of condoms, IUD and Oral Pills was promoted. Awareness programmes on Family Planning and need for proper spacing was organized in the community. CHVs were regularly trained on family planning services and different types of methods used in spacing. Along with family planning services, meetings were organized to provide health education to the target beneficiaries. Asha's focus on empowerment of women was the critical chain of community development and transformation at new area of Seelampur which is making them confident, independent and has enhanced their decision-making power towards family planning as well as for negotiating with their husbands on equal terms. Another positive trend is increasing number of institutional delivery or delivery under the supervision of trained dais which has gone up to more than 80%.

Objective 4- HIV/AIDS Awareness Programme- To increase awareness on various aspects of HIV/AIDS through training of Women's groups and CHVs, in order for them to pass on the

information to eligible men, women and adolescents as part of behavioural change intervention.

**Achievement-** Regular awareness programmes were organized in the riverbed area to educate people about safe sex, being faithful to one partner, treatment of STI, types of HIV infection, controlling the spread of infection, removing myths and misconceptions, destigmatization and mainstreaming of people living with HIV. In spreading the message of HIV, it was ensured that Guidelines prescribed by National AIDS Control Organization(NACO)- Government of India under NACP-IV were followed. Symptoms causes, and prevention of HIV with TB was also discussed amongst the community residents. Suspected patients expected mothers and other High-Risk Individuals underwent HIV tests at Asha Polyclinic. Those patients who required further tests were referred to NACO's Voluntary Counselling and Testing Centers for further counselling and testing. It was ensured that Test and Treat Policy of NACO was complied with.

**Objective 5- TB Control Programme-** Identify and screening of suspected TB patients and refer them to accredited DOTS Centre for testing and treatment of TB, Monitoring and Supervision of confirmed TB patients and ensure that the patients regularly follow their medication schedule.

**Achievement-** Community Health Volunteers and the Asha team made regular home visits to identify people with symptoms of TB. All cases of suspected TB are referred to the nearby DOTS center for timely detection and treatment. Regular awareness programmes on health issues



including prevention and control of TB, symptoms of TB, precautions and treatment were organized in the community which had a significant impact. When a person was confirmed with TB, it was ensured by Asha team that all the medicines were taken on time as per schedule. Awareness programmes were also held on how to control the spread of infection and keep the surroundings clean and sanitized. Around 52 workshops were organized in the riverbed area for spreading awareness on TB and inculcating Behaviour Change in the community towards TB patients. The programme worked in close collaboration with Government of India's DOTS Programme following RNTCP Guidelines. Special care is taken to ensure that patients does not miss their medicines and follow the treatment regimen.

**Objective 6- Establishment and Training of CHVs-** From within the established women's groups in the community, women were identified and trained as Community Health Volunteers (CHVs) or barefoot doctors. The CHVs were provided a toolkit and trained to set up with a mandate of delivering primary healthcare services in the communities through detection, monitoring, advice, education and referral.

**Achievement**- - In the riverbed area of Seelampur, one Women's Group or Mahila Mandal had been established which has 45 members. 2 CHVs were identified and trained in primary healthcare systems in detection of symptoms of diseases, monitoring patient's situations and providing necessary advice regarding treatment and medicines. CHVs went door to door in the area, motivated and counselled people on health issues. Refresher Trainings for CHVs were also held in each quarter as part of capacity building and skill development exercise. CHVs also referred critical patients to hospitals or health centers for advanced healthcare and also accompanied the patients to the centers for treatment. Further, they monitored patient's conditions regularly and ensured that they took their medicines on time. The effort of the CHVs ensured that almost 80% pregnant ladies in the riverbed area had completed the three mandatory ANC Check-ups and 60% deliveries were either institutional or through trained birth attendants. Each CHV covered around 250-300 households in their respective locations across the riverbed. CHVs are good examples of Empowerment of Women which complimented Asha's Development Model.

Ten trainings were organized on the above topics for CHVs during the year.

**Objective 7- Exchange Visits**- CHVs and Lane Volunteers (LVs) from the communities in the riverbed area to visit Asha's other programme areas for an opportunity of increased learning based on shared experiences for widening of knowledge and awareness, strategy input and better understanding of activities in different areas.

**Achievement**- CHVs and Mahila Mandal members (LVs) from the riverbed area went to different centres of Asha as part of exchange visits. This gave them knowledge, education and awareness on various aspects of Asha's programme. They participated in various activities at the centre which provided them Learning opportunities and ideas to plan and incorporate in their programmes. They also participated in Internal Evaluation of programmes at various Asha centres which gave them inputs for improvement of their own programme and map out Strengths, Weaknesses, Opportunities and Threats. These Exchange Visits also provided opportunities for CHVs and Lane Volunteers to learn more about Record Keeping and Documentation and incorporate Better Practices from other centres. The Learning Outcomes were documented, and strengths and programme processes were discussed. Five such visits were organized during the year to strengthen the programme.

**Objective 8- Regular training of Asha staff**- Fortnightly training to be provided Asha staff on various aspects of slum development.

**Achievement**- Asha staff who were responsible for implementation of the programme at the new area of Seelampur were given fortnightly training on issues pertaining to Health, Community mobilization, Programme Management. The topics covered in the training were as follows.

## Regular Training of Asha Staff-

S. No.	Description of Training Contents	No. of Staff Attended
1	Programme Management Issues	6
2	Behavioural Change Communication	6
3	Monitoring and Supervision	7
4	Community Management and channels of communication	6
5	Stakeholder Management, Developing Linkages and Network	6

Asha staff is a crucial link in managing the programmes. Hence training of staff helped them in enhancing their skills and develop capacity to tackle programmatic challenges.

### Monitoring and Evaluation-

In the long run, Asha envisions in sustaining all the activities that have been rigorously carried out at new area of Seelampur to develop a holistically enhanced and transformed community, living their life in fullest of health, joy, confidence and dignity. To achieve Sustainability, Replicability and Scale of Asha's programme delivery at riverbed area of Seelampur, a robust Monitoring and Evaluation system had been developed. The M&E Framework is developed on the basis of Input, Process, Output Outcome and Impact Indicators and incorporated in the Results Framework. Besides, regular Management Evaluation of the Programme is undertaken so that any deviation or variance in the programme delivery is immediately captured and corrective action taken. Also, Staff meetings, Field Visits and Programme team meetings were held regularly to brainstorm new ideas and find out solutions for challenges.

### Case Study 1- The story of Ajmirul

Ajmirul is a resident of Seelampur's riverbed slum. Her husband Md. Halim is a rickshaw puller. The family has 8 members including 6 children. Unfortunately, there is domestic violence in the house and Ajmirul regularly gets beaten at the hands of her husband who is an excessive alcoholic. Ajmirul's last child Amir was born in the year 2017 on 27<sup>th</sup> November. He was born very weak and suffered from malnutrition. Moreover, acute challenges of poverty, cramped space, lack of proper hygiene and nourishment and poor socio-economic factors made child care more difficult. Also, domestic violence and marital disharmony aggravated the problems. Asha team and CHV started taking care of the



child and ensured that immunization schedule was followed. Amir has completed BCG, PENTA-1,2 and 3 along with two doses of Vitamin A injections. This has resulted in better health condition for Amir and he is growing up normally.

Ajmirul is a Mahila Mandal member and regularly attends the meeting. This has increased her confidence and made her resolute not to take things lying down from her husband. The Asha team also visits her house regularly and counsel's the husband. The situation is improving gradually although there is still a long way to go. Asha team's intervention has also ensured that four of Ajmirul's children are going to school. The Healthcare and Empowerment model of Asha's programme is slowly impacting the residents of East Delhi riverbed slum.

### **Case Study 2- The story of Choti's solution to Health problems**

Choti lives in the East Delhi riverbed slum area with a family of 4 people including 2 children. Her husband Moni is a daily wage labourer, but his meagre earning is too insufficient to meet both ends meet. Choti suffered from gynecological problem and her periods were not only irregular and painful, but the discharge would never stop. Asha's CHV took her to the Asha's clinic at Seelampur and her treatment was started. Earlier, she could not hold on to her pregnancy. However, with six months of regular medicines and treatment at Asha clinic, her problem was cured, and she delivered a baby boy named Tanvir Alam without any major complications. The child was born with normal weight and is undergoing immunization as per schedule. Both the mother and child are doing well.

