MATERNAL ANEMIA TOOLS

From 2005-2011, the A2Z Project made significant contributions to worldwide efforts to reduce maternal anemia through the implementation of an integrated set of evidence-based, proven interventions. The project, in collaboration with governments and partners, was involved in anemia reduction programs in Cambodia, India, the Philippines, and Uganda. A2Z demonstrated that anemia reduction in pregnancy is a highly cost-effective strategy for improving the health of rural mothers and children. In the states of Uttar Pradesh and Jharkand in India, the A2Z Maternal Anemia Reduction Program (MARP), strengthened the capacity of the public health system by training front line health workers to offer a set of 5 services: early and complete registration, Iron Folic Acid supplementation, de-worming medication, nutritional advice, and malaria prevention. A unique tool created by MARP used system-generated population data to calculate registration gaps of pregnant women and forecast supply needs.

The Global Micronutrient Toolkit includes a package of tools developed by the India MARP to ensure successful program design, implementation, monitoring and evaluation. It also includes a training manual from Cambodia which focuses on nutrition and more specifically, iron supplementation for anemia reduction.

TOOLS

- 2.1 Baseline/endline survey instruments
- 2.2 Maternal Anemia Reduction Program Training Module
- 2.3 Cambodia National Nutrition Program Minimum Package of Activities (MPA) Module 10 Nutrition Facilitator Manual
- 2.4 Job Aids
- 2.5 Mentoring Checklist

2.1 Baseline/endline survey instruments

The MARP baseline survey was conducted to assess the level of health services provided by the government of India to reduce anemia among pregnant women in Uttar Pradesh and Jharkhand states. Analysis of the data gathered assisted in the development of the MARP training program aimed at enhancing the knowledge and skills of health workers about anemia reduction interventions in villages. An endline survey evaluated the success of the MARP interventions.

2.2 Maternal Anemia Reduction Program Training Module

The MARP training module was developed to build the capacity of front line health workers in India to effectively deliver a package of proven anemia reduction and nutrition interventions to pregnant women at the village level and block level facilities. Building upon India's rural outreach program in the states of Uttar Pradesh and Jharkand, health workers were trained to deliver an integrated set of 5 services: early and complete registration, Iron Folic Acid supplementation, deworming medication, nutrition advice, and malaria prevention to improve the nutritional status and health of mothers and children.

2.3 Cambodia National Nutrition Program – Minimum Package of Activities (MPA) Module 10 Nutrition Facilitator Manual

A comprehensive set of thirteen food control manuals present standardized procedures for the external and internal monitoring of fortified flours, oil, salt, and sugar in East, Central, and Southern African countries. The in-depth, step-by-step procedures provide technical reference resources for government food inspectors to build their capacity to enforce standards of micronutrient quality and safety specifications for fortified foods at a country level.

2.4 Job Aids

The Job Aids developed by the MARP in India were a valuable set of resources that assisted health workers to be more successful in the completion of their maternal anemia reduction activities in the states of Jharkand and Uttar Pradesh. As front line health workers were responsible for delivering the services, the Job Aids provide detailed guidance and instructions to fulfill their tasks. Five Job Aids were created for frontline health workers and their immediate supervisors in the block level facilities to complete the delivery of the 5 MARP interventions: Medical Officer In-Charge Self-Guide, HMIS Data Calculation Spreadsheet, Auxiliary Nurse Midwife Job Guide, Auxiliary Nurse Midwife/Anganwadi Worker Counseling Guide, and Anganwadi Worker Self Assessment Form.

2.5 Mentoring Checklist

The Mentoring Checklist, a critical management tool of MARP, was used to support and supervise the work of front line health workers in reducing maternal anemia in the states of Uttar Pradesh and Jharkand. Mentors were hired to serve a vital supervisory and quality control function role in the achievement of 80% coverage of the MARP services to pregnant women to reduce maternal anemia. Their responsibilities also included the assessment of the use and usefulness of the Job Aids developed for the Medical Officer In-Charge, Auxiliary Nurse Midwife (ANM) and Anganwadi Worker (AWW).

2.1 A2Z Maternal Anemia Reduction Program (MARP), India Baseline/ Endline Survey Instruments

PURPOSE:

The A2Z Maternal Anemia Reduction Program (MARP) baseline survey instrument was developed to assess the level of health services provided by the government of India to improve anemia levels among pregnant women in Uttar Pradesh and Jharkhand states. Analysis of the data gathered assisted in the development of the MARP training program aimed at enhancing the knowledge and skills of health workers about anemia reduction interventions in villages. Endline surveys evaluated the success of MARP interventions.

DESCRIPTION:

Two questionnaires were prepared for use with pregnant women and women who had recently delivered babies. Comprised of six sections, each survey instrument presents questions in great detail covering informed consent; background characteristics (includes pregnancy screening, village, age, marital status, religion, caste, educational level); antenatal care (number of visits, measurements taken for weight and blood pressure, blood test, advice received on safe delivery practices, newborn care, diet, breastfeeding, foods to eat if anemic, knowledge of IFA, de-worming, malaria, anemia); maternal diet (food consumed from Integrated Child Development Services); use of bednets; and exposure to behavior change communication messages on anemia and iron folic acid. In addition, the survey form used with pregnant women requested consent and permission to conduct a finger prick to test for hemoglobin levels in the blood.

None

INTENDED USERS:

For widespread global use by developing world government agencies, NGOs working in nutrition, maternal and child health, academic institutions wishing to study the impact of proven anemia reduction interventions, program managers

DEVELOPED BY:

A2Z Maternal Anemia Reduction Program (MARP) in India, 2011

IMPLEMENTED IN:

Jharkand and Uttar Pradesh states in India

BENEFITS:

Survey questions are presented in great detail and can be adopted and adapted for use in developing country settings. Data gathered can present a snapshot of the knowledge of rural pregnant women and those recently delivered about anemia and nutrition for good health.

LANGUAGE:

English, Hindi

GO TO RESOURCE:

PURPOSE:

The A2Z Maternal Anemia Reduction Program (MARP) Training Module was developed to build the capacity of front line health workers to effectively deliver a package of proven anemia reduction and nutrition interventions to pregnant women and mothers at the village level. Building upon India's rural outreach program in the states of Jharkand and Uttar Pradesh, health workers gain the requisite knowledge and skills to offer the 5 services of early and complete registration, Iron Folic Acid supplementation and compliance, de-worming medication, advising pregnant women to eat extra meals, and malaria prevention to improve the nutritional status and health of mothers and children.

DESCRIPTION:

Designed to be interactive and participatory, the training sessions engage the health workers in discussion, knowledge-building, self-learning exercises, and group activities. They learn about anemia, its occurrence during pregnancy and associated dangers for the mother and developing baby, and methods of control. Using data from their own work coverage area, the women health workers learn to calculate the total number of pregnant women who could be eligible for the program, those who are registered, supplies needed, and to identify the gap of those who are unregistered. Integral to the training is the development of microplans for reaching out and improving coverage of unregistered women who could benefit from the anemia reduction services for better health. Another key element in building health worker capacity is the inclusion of supervised counseling sessions that mimic client interactions. To further strengthen capacity building, health workers complete a self-assessment form (includes checklist of tasks, coverage performance) after their client visits for discussion with their supervisors. Pre- and post-training questionnaires provide input for current and future training sessions.

MARP developed several useful job aids to assist in the successful implementation of the program: Medical Officer in Charge Guide, HMIS Data Calculation Spreadsheet, Auxiliary Nurse Midwife Guide, Counseling Guide for Auxiliary Nurse Midwife/Anganwadi worker, and Self Assessment Form.

INTENDED USERS:

For widespread global use by developing world government agencies, NGOs working in nutrition, maternal and child health, academic institutions wishing to study the impact of proven anemia reduction interventions, program managers

DEVELOPED BY:

A2Z Maternal Anemia Reduction Program (MARP) in India, 2011

IMPLEMENTED IN:

Jharkand and Uttar Pradesh states in India

BENEFITS:

MARP led a successful implementation of *a set of integrated interventions* to reduce maternal anemia, improve nutritional status and overall health.

The training module can be adopted and adapted to meet the specific needs of programs focusing on rural health workers and village outreach to pregnant women.

LANGUAGE:

English, Hindi

GO TO RESOURCE:

2.3 Cambodia National Nutrition Program - Minimum Package of Activities (MPA) Module 10 Nutrition Facilitator Manual

PURPOSE:

The purpose of the Cambodia MPA 10 Nutrition Training Package is to strengthen the knowledge and skills of health centre (HC) staff about nutrition in order to improve the health of mothers and young children. Module 10, focusing on nutrition and the 5 main interventions of Infant and Young Child Feeding (IYCF), Growth Promotion and Growth Assessment, Vitamin A, Iron, and Iodine, contributes to the government's goal of reducing maternal and underfive child morbidity and mortality in the country.

DESCRIPTION:

Specially designed to support HC staff, the in-service training assists in accomplishing their responsibilities of educating communities about nutrition and providing nutrition services at health center and village level; providing support, training and supervision of village volunteers; and recording, reporting, and utilizing data to improve the nutrition status of the communities. Components of the training resource include a very detailed Facilitators' manual, Participants' manual, several Job Aids, and a Power point presentation with facilitators' notes. Primarily skillsbased and highly participatory, the training also contains the necessary theory for the various programs. The facilitators' manual presents the knowledge and techniques for effective facilitation, conducting pre- and post-training evaluations, detailed activities for the 10 training days, and information on recording, reporting and a unique peer follow-up activity that consolidates learning. The participant manual, serving as a reference book, consists of 11 chapters covering topics such as IYCD/Vitamin A, Vitamin A/Iron, Iron/Iodized salt, Immunization/Antenatal visits, Vitamin A distribution and stock calculations, etc. Master facilitators at the central level and at the Provincial Health Department (PHD) and Operational District (OD) level are trained using the MPA 10 package.

Job aids are specifically organized around the key contacts HC staff have with pregnant women and mothers, and integrate nutrition messages for:

Antenatal Contact, Delivery Contact, Postnatal Contact, Immunization Contact, Well and Sick Child Contact, VAC Distribution Contact

INTENDED USERS:

Government nutrition/Vitamin A training programs and organizations supporting nutrition/Vitamin A programs

DEVELOPED BY:

Cambodia National Maternal and Child Health Center and A2Z, March 2009

IMPLEMENTED IN:

Cambodia

BENEFITS:

The MPA 10 Nutrition Module is a comprehensive set of training materials, carefully designed, detailed, systematic, easy to understand with numerous individual and group exercises to facilitate learning. The Job Aids present detailed checklists to assist HC staff during visits with mothers and children.

LANGUAGE:

English, Khmer

GO TO RESOURCE:

2.4 A2Z Maternal Anemia Reduction Program (MARP), India Job Aids

PURPOSE:

The Job Aids developed by MARP were a valuable set of resources that assisted health workers to be more successful in the completion of their maternal anemia reduction activities in the states of Jharkand and Uttar Pradesh in India.

DESCRIPTION:

As health workers in MARP were responsible for accomplishing an 80% coverage of services to reduce maternal anemia, the job aids provide detailed guidance and instructions to achieve this objective. Five Job Aids were created to work in concert with the 5 interventions of MARP and strengthen the capacity of the Medical Officer In-Charge and the Auxiliary Nurse Midwife (ANM)/ Anganwadi Worker (AWW):

- Medical Officer In-Charge (MOIC) Self-Guide includes a CD with a HMIS Data
 Calculation spreadsheet to compute the total number of pregnant women in
 the program area, those who are registered, and gaps as targets for the ANM/
 AWW; ensure that health workers have adequate supplies of Iron Folic Acid
 (IFA) tablets and de-worming medicine; and guide primary health care staff
 on how to administer antenatal care to pregnant women.
- HMIS Data Calculation Spreadsheet, a computer-based tool employed by
 District health managers and MOIC, uses system-generated data to derive the
 total number of pregnant women for antenatal care (ANC) services, review the
 reach of ANC services against the expected number of pregnant women, and
 graphically depict the gap between the actual and expected coverage of ANC
 services. The spreadsheet is also available to ANM to make similar calculations
 by hand.
- Auxiliary Nurse Midwife Job Guide parallels the MOIC guide and assists
 the health worker to make similar calculations regarding numbers of
 pregnant women who would be eligible for MARP, preventing stockouts
 of supplies, and steps for administering antenatal care services and counseling
 of pregnant women.
- Auxiliary Nurse Midwife/Anganwadi Worker Counseling Guide provides a
 checklist of tasks with key messages for the pregnant woman. Tasks focus
 on early and complete registration at the Anganwadi Centre, take home food
 rations, counseling on the importance of nutrition and the need for extra food
 during pregnancy, need for IFA and compliance in taking tablets, use of
 de-worming medicine, and prevention of malaria by sleeping under bednets.
- Anganwadi Worker Self Assessment Form assists the health worker to carefully track the completion of her tasks outlined in the Counseling Guide and record the data. Her achievements and problems encountered serve as points of discussion at the block/cluster/sector meeting.

Medical Officer In-Charge Self-Guide, HMIS Data Calculation Spreadsheet, Auxiliary Nurse Midwife Job Guide, Auxiliary Nurse Midwife/Anganwadi Worker Counseling Guide, and Anganwadi Worker Self Assessment Form.

INTENDED USERS:

For widespread global use by developing world government agencies, NGOs working in nutrition, maternal and child health, program managers

DEVELOPED BY:

A2Z Maternal Anemia Reduction Program (MARP) in India, 2011

IMPLEMENTED IN:

Jharkand and Uttar Pradesh states in India

BENEFITS:

Specially designed for rural health workers, the Job Aids contain clear step-by-step instructions in a user-friendly format.

LANGUAGE:

English, Hindi

GO TO RESOURCE:

2.5 A2Z Maternal Anemia Reduction Program Mentoring Checklist, India

PURPOSE:

The Mentoring Checklist, a critical management tool of the A2Z Maternal Anemia Reduction Program (MARP) in India, was used to support and supervise the work of front line health workers in reducing maternal anemia in the states of Uttar Pradesh and Jharkand.

DESCRIPTION:

Mentors were hired to serve a vital supervisory and quality control function role in the achievement of 80% coverage of the MARP services to pregnant women to reduce maternal anemia. Their responsibilities also included the assessment of the use and usefulness of the Job Aids developed for the Medical Officer In-Charge, Auxiliary Nurse Midwife (ANM) and Anganwadi Worker (AWW). Tied to the 5 interventions of MARP, the Job Aids provide health workers with a list of tasks that need to be performed to improve the delivery of health services to pregnant women. Using the Checklist that specified the target objectives for each category of health worker, the Mentors were charged with regular observation of home visits, monitor and reduce the gap in coverage of unregistered pregnant women, ensure the availability of Iron Folic Acid tablets and compliance in taking them, adequate counseling to eat extra meals, and use of de-worming medicine. In meetings with front line health workers, mentors record data on the simple one page Checklist regarding the achievements of targets as well as the identification of problems for discussion at the block meeting.

None

INTENDED USERS:

For widespread global use by developing world government agencies, NGOs working in nutrition, maternal and child health, program managers

DEVELOPED BY:

A2Z Maternal Anemia Reduction Program (MARP) in India, 2010.

IMPLEMENTED IN:

Jharkand and Uttar Pradesh states in India

BENEFITS:

The simple, one page checklist supports the mentor in the supervision and management of front line health workers in fulfilling the target objectives of the program.

LANGUAGE:

English, Hindi

GO TO RESOURCE: