

Guideline of Village Contact Drive

The communication activities through Village Contact Drive carried out in the vulnerable/ unreached and media dark areas where penetration of Television and Radio is poor. With poor penetration of modern mass media tools, folk dance, folk shows, magic shows etc. are still the most preferred medium for information dissemination. In those media dark and hard to reach areas we can organize social mobilization campaign as a day long activity and the shows should be organised around the areas. This may also be organised in the advantageous locations nearing Swasthya Kantha through different traditional / folk media activities like puppet show/magic show, Street theatre/ jatra/palla, pada yatra/rally, Video Show/ and exhibition with enough pre-publicity.

- The communication activities carried out for each thematic issue is the part of supplementary programme in the Swasthya Kantha Campaign “Kantha Kahe Kahani”.
- Every quarter one drive to be carried out at the block level with clear supervision by district level Officials. The thematic area are given below;

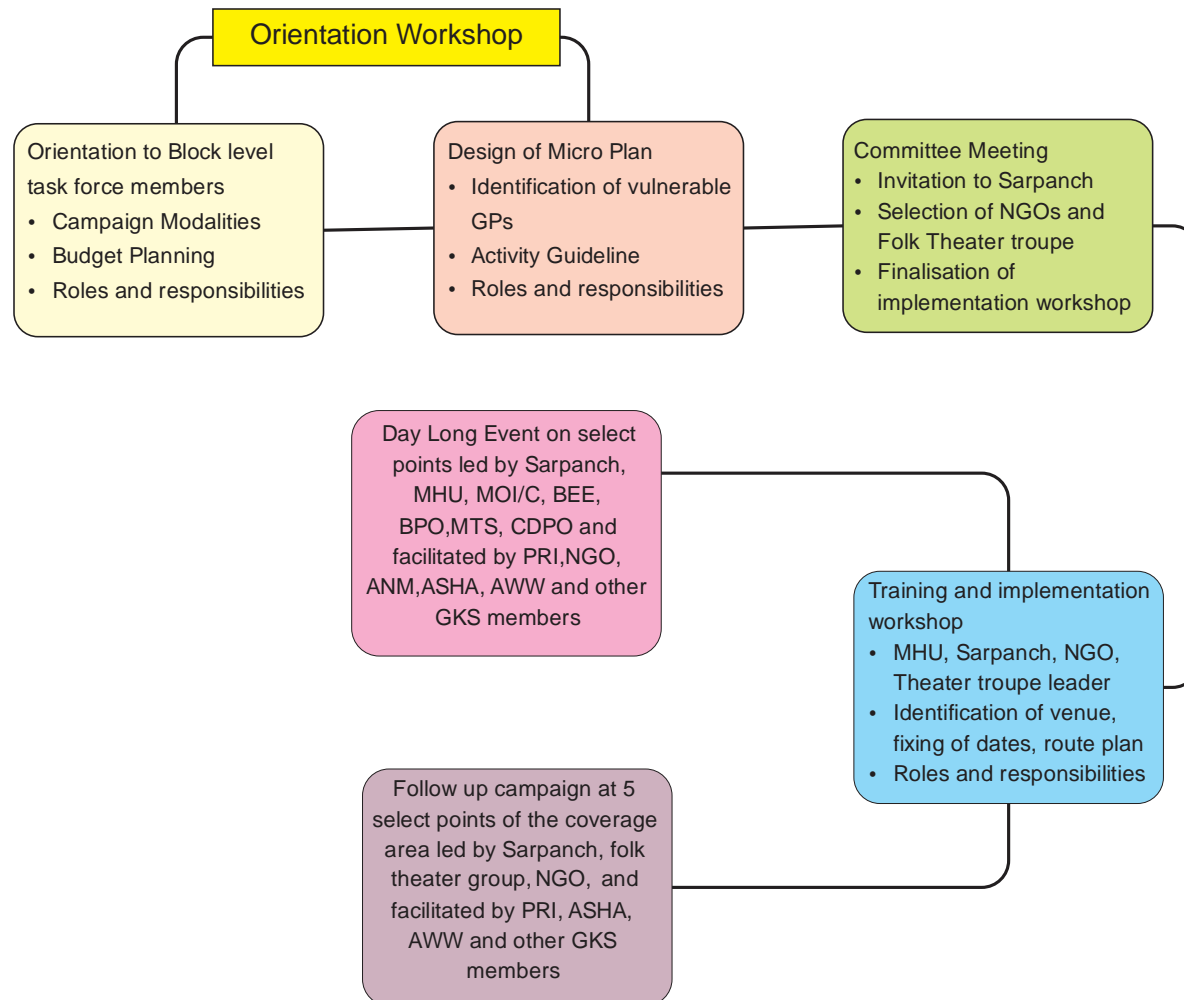
Thematic Components: (RCH-II)

- Maternal Health : Focus on postnatal care and 48 hour stay and promotion of schemes like JSY and Janani Sisu Surakshya Karyakram
- Child Health : Neonatal care and HH level diarrhea management
- Family Planning : Fixed day Approach and promotion of sterilization
- Tribal Health : Contextual and need based campaign
- Adolescent Health : RTI/STI and counseling
- Immunization : Hepatitis B and bundling of Vitamin A+ Albendazole
- PC & PNDDT : Save girl child

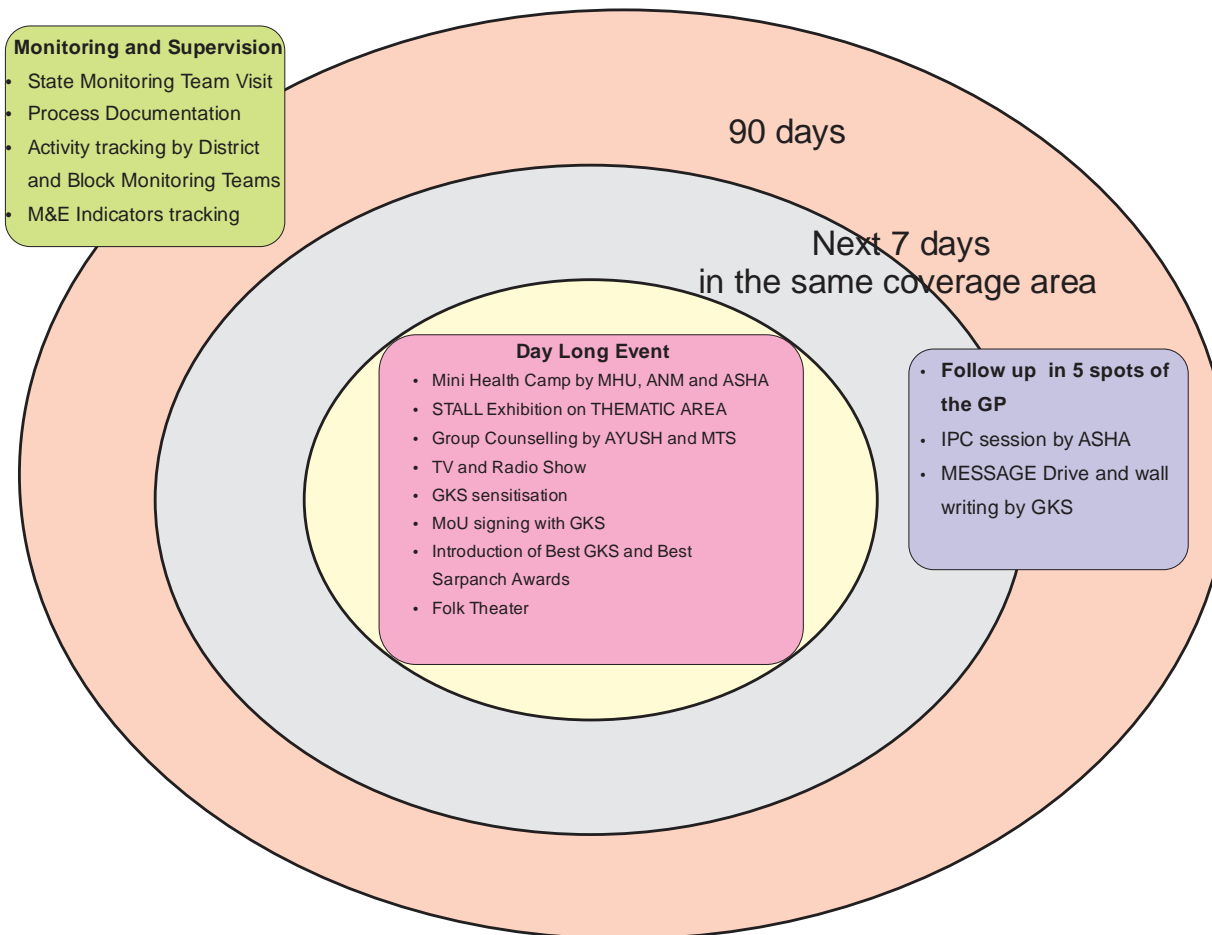
Salient features

- 5 most vulnerable patches to be identified in each block for organization of village contact drive.
- The communication activities is a combination such as;
 - A day long event comprising of an exhibition on given thematic area, health camp, Folk/Video show, focus group discussion* with facilitated by MHU Doctor and other health functionaries etc.
 - Pre-publicity of the event through miking, poster in swasthya kantha, banners, orientation to GKS members and village leaders and any other medium suitable to the condition.
 - Play the radio / video episodes of Kantha kahe Kahani during the event

BLOCK LEVEL ACTIVITY MODEL



VILLAGE/GKS LEVEL ACTIVITY MODEL



Execution level

- The block is the unit for the execution of the communication activities on each issue and MO I/C will be the overall in charge of the programme.
- The Child health with immunisation programme will be continued for three months from March to May 2011 as part of the Swasthya Kantha Campaign and in that supplementary Village Contact Drive carried out in the RCH high focus blocks on 1st quarter 2011.
- The communication activities carried out in the last 3 quarter in the year of 2011-12. The flexi pool budget given to the district @ Rs. 45,000/- each block on RCH high focus districts and @ Rs. 30,000/- each block in the other districts. The details list of RCH high focus districts are given at annexure-I for your reference.
- The Public Health Extension Officer will be primarily responsible for effective implementation of the programme taking support from BPMSU and selected NGO/CBO.
- A block level committee will be formed under the chairmanship of MOI/C, CDPO, PHEO, BPO, MHU Doctor and AYUSH Doctor (Head quarter) for the finalization of the entire activities. The suitable venue of the campaign may be selected by clubbing 2-3 Sub-centres. The selection should be done in the Block level committee with prioritization of area vulnerability and media dark area.
- The block level committee will identify the 5 most vulnerable areas in their block based on the vulnerability as hard to reach factor and will plan accordingly for the campaign integrating health camp with village contact drive. Identification of locations for events giving the coverage of the catchment area and target group.
- The entire events may be organized through PPP Mode or involvement of NGO/CBO partner.

- Selection of NGO by the Committee, if the activity carried out through the PPP mode or involvement of NGO/CBO
 - How to select the NGO: The Social Mobilisation programme will be carried out through a partner NGO, preferably FNGO working at block level. If the FNGO is not available in the block, the block may prefer other PPP NGO which is involved in the Health/ NRHM programme at block level. Where the FNGO/PPP NGO are not available in the district, the block may prefer the NGOs those who are involved in the any other programme of health department like Malaria, RNTCP and GKS training programme etc. at block level. Where as the above mentioned NGO are not available in the block, a formed block level committee will decide any other NGO at their level. NGO/ Voluntary Organisation/CBO should have adequate credibility and having substantial experience in implementing RCH & other Health & Family Welfare programs with strong presence in the area.

The PHEOs at block level will be responsible for preparing a micro-plan with support of NGO for their respective block and submit it to the district through MO I/C. Micro plan should contain;

1. Finalise the route plan for publicity in the catchment area
 2. Population details
 3. Date, Venue and other materials
 4. Activity plan with budget
 5. Co-ordination and planning with MHU for location and date of events
 6. Monitoring and Supervision plan
 7. Documentation
- Two types of services i.e. Curative and preventive services should be delivered in the entire campaign process.

Curative Services

- A Health Camp will be organized in the identified spot with provision of MHU/AROGYA Plus, if MHU/AROGYA Plus is not available in the block MOI/C arrange a doctor for this purpose.
- As per the Health Camp, the MOI/C will be responsible for the details arrangement like doctor, medicine, para medical staff etc. in the camp.

Preventive Services

As a part of the social mobilization campaign to address the RCH issues, it is intended that a package of day long programme will be carried out at the identified media dark areas (where Mass Media reach is very poor) / Un reached area/ Vulnerable area.

Budget Details – Village Contract Drive (RCH High Focus District)

Sl. No	Activities	Unit Cost	No of Programme	Total Budget	Remarks
1	Workshop at Block level	Rs. 500/-	1	Rs. 500/-	One time
2	Publicity Any local media like drum beating, Miking etc. to engaged Swasthya Kantha updates by ASHAs	Rs. 500/-	5	Rs. 2500/-	Rs. 15,000/-(per quarter)

3	Camp Arrangement- as per the need(refreshment/stage etc.) may be made available	Rs. 500/-	5	Rs. 2500/-	
4	Display Material on thematic area	Rs. 300/-	5	Rs. 1500/-	
5	Folk Shows with local troops (Street Play/ Magic Show/ Puppet show/ Pala/ Dasa katthia etc.)	Rs.1000/-	5	Rs. 5000/-	
6	Followed by question answer session (award for each right answer)	Rs.200/-	5	Rs. 1000/-	
7	Rally	Rs.300/-	5	Rs. 1500/-	
8	Contingency	Rs. 500/-		Rs. 500/-	
9	Mobility Support				Budget met from BPMSU
10	IPC at VHND by ASHA/AWW				Budget met from VHND
11	Up date of Swastya Kahanta				Budget met from GKS
	Total			Rs. 15,000/-	

Budget Details – Village Contract Drive(Other District)

Sl. No	Activities	Unit Cost	No of Progra me	Total Budget	Remarks
1	Workshop at Block level	Rs. 500/-	1		Budget met from BMSU
2	Camp Arrangement- as per the need(refreshment/stage etc.) may be made available	Rs. 500/-	5	Rs. 2500/-	Rs. 10,000/-(per quarter)
3	Folk Shows with local troops (Street Play/ Magic Show/ Puppet show/ Pala/ Dasa katthia etc.)	Rs.1000/-	5	Rs. 5000/-	
4	Followed by question answer session (award for each right answer)	Rs.200/-	5	Rs. 1000/-	
5	Rally	Rs.300/-	5	Rs. 1500/-	
6	Mobility Support				
7	IPC at VHND by ASHA/AWW				Budget met from VHND
8	Up date of Swastya Kahanta by ASHA				Budget met from GKS
	Total			Rs. 10,000/-	

Budget

The entire budget will be met from NRHM flexipool and booked under the component –B.10.3.1.5.2 Communication activities on thematic area (IEC/BCC PIP-2011-12)

Fund Released

If, the programme will be carried out through the NGO/CBO partner, the fund released procedure is given below. After the selection of NGO, a Memorandum of Understanding (MoU) should be signed between Chief NGO functionary and MOI/C of concerned block. After the signed of MoU, advance 50% of fund may be released to the NGOs for implementation of the Programme. Balance 50% may be released to the NGO after submission of SoE/UC, report and photograph for the detail programme.

Awareness Generation

The community life of Orissa is full of rich cultural practices & traditional entertainments. It is intended to carry out Awareness Generation programme at identified surrounding area particularly haat, bazar, Congregated places, village to village through miking before the camp.

Pre Camp Arrangement

- Before 2 days of the Camp, Awareness/ propaganda will be carried out through the miking or drum beating.
- Sufficient advertisement containing the date, place, venue and services provided under the camp should be fixed at the prominent places in the entire area for mobilizing the people to the camp.
- The block should ensure the updating of all the swasthya Kantha with the help of GKS.
- The block should ensure to mobilise the community through key persons like ASHA /AWW / GKS Members/ PRI members/ teachers/other village leaders of the community.

Camp Arrangement

- Adequate steps must be taken both the block level officials and NGO partner to mobilize sufficient audience and pre-publicity. Focus given to school Children, Lactating Mothers, pregnant women, eligible couple, SHG members, etc for the particular day.
- Awareness meeting will be organized at the Camp and facilitated by PHEO along with health worker (male/female) , ASHA and AWW.

Exhibition at identified spot

- It is intended to execute this activity to generate awareness among communities on RCH issues through a number of IEC Activities organized during the camp. During this occasion the crowd movement in and around the venue should remain at its pick. So this is in fact an apt occasion to spread the key Health messages among the people. Needless to say that, if IEC/BCC activities are taken up in a plan and meticulous way, then it will certainly help increase the level of awareness among the people and will pave the way for information dissemination to a large numbers of audience within a short period of time.

Stall Arrangement:

The organization would select the area with consultation of MOI/C and PHEO of the block level. The frontal portion of the stall should be attractively decorated depicting key health messages on thematic health issues taken up. Minimum 2nos of stall will be arranged for the day long programme. The location may be decided in consultation with GKS members.

- Stall -1- Basically for the Treatment side for sitting arrangement of doctors and paramedical staffs
- Stall-2- Exhibition and counseling stall

Handling visitors queries

The organization/ BPMSU will arrange local health personnel like Health Worker (M/F)/ ICDS Supervisors, etc equipped with relevant information should be deployed on rotation basis to attend the queries from the visitors and to conduct counseling on RCH issue.

Equipping the Stall

The interiors should be well decorated with Exhibits, Flex banners, posters and Display boards (available at block level). Audio-visual unit to be set up in the stall for viewing of community.

State will provide audio-visual materials from Kantha kahe Kahani programme for using them in stall and existing materials to be used selected by PHEO.

Folk Show/ Street theater/ Magic Show

A local troupe should be assigned to play one or multiple show on any RCH issue identify the block and mentioned in the objectives as correct and incorrect practices. Issue pertaining to the local problems on RCH and script should be local language. This is an effort through which we would be able to draw the attention of maximum number of crowd present at the venue. The troupes must be having 3-4 exerts on locally used & relevant instruments. The troupes will asked to submit the script , the block should be validating and subsequently approved the script by the formed committee before the troupes carry out the shows at the spot.

Suggestion Box

Provision of suggestion box can also be good idea at the suggestive measures and any other suggestions in paper chits and drop them in the box. This will certainly give some idea about the general health scenario in the communities and in turn help remedial strategies.

Documentation: Submission of report and photograph

The Block will submit a detailed process documentation report and photographs (good quality) after the completion of the drive to the district. A CD of documentation will also be made available to the SIH&FW from respective districts.

Quarter Wise Theme

1st Quarter- Child Health & Immunisation

2nd Quarter- Family Planning

3rd Quarter- Maternal Health

4th Quarter- Tribal Health & Adolescent Health

SI No	Activity	Executi on level	Responsibility		Time line	Remarks
			Primary	Secondary		
1	Village Contact Drive	Block	PHEO	MOI/C/ BPO	As per Micro plan	1. Prepare the micro plan containing date, venue for VCD. 2. After completion of the programme the document and photographs to be share district a copy to the State.

Director

State Institute of Health & Family Welfare, Orissa