

Locals at Araku valley help reach out to tribal women, ensure zero maternal deaths in last two years

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WHEN 29-YEAR-OLD Bariki Pramila learnt that Champawati, a tribal woman from Boduguda habitation in Araku valley, about 114 km from Visakhapatnam, had left the primary health centre just two hours after her delivery, she decided to convince her to return.

"The placenta was still stuck to her uterus and her stomach was bloated. Had we not intervened her condition would have become complicated," Pramila, who walked 15 km distance in the remote hilly area to Champawati's village, and convinced her and her husband to return to the health centre, says.

Reluctance to give birth to babies at a health centre is just one of the problems people like Pramila, a vital part of the Asara Tribal Health Programme run by Piramal Swasthya, a health care vertical of Piramal foundation, face. Pramila, herself a tribal woman from one of the villages in the picturesque Araku valley in Andhra Pradesh, says a tougher challenge is to tackle superstitious beliefs of the locals, like milk from cows is meant

only for the calf and must not be consumed by human beings.

Like Pramila, 26-year-old B Padma is another dedicated health volunteer reaching out to women in her Mulyagalagu village. Along with G Nayadu, another tribal from the valley, they travel on a two wheeler to remote villages and when the road ends, trek it to the mountains in the Eastern Ghats to ensure accessible health care.

The teams connect with the government based Accredited Social Health Activists and Auxillary Nursing Midwife (ANM), identify the list of new pregnant women and again embark on a door to door survey encouraging young women to register at the health centre. The Asara Tribal Health programme has in last six years reached out to at least 49,000 pregnant women across 181 habitations and their efforts have ensured that no maternal deaths were reported in last two years while the percentage of institutional deliveries has risen from 18 per cent to 68 per cent.

Vishal Phanse, CEO of Piramal Swasthya said that the Asara Tribal health programme commenced in 2011 but it took them four years to gain their trust. "Initially we did not know these habitats existed. Now lo-



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icals are part of the model programme and want to serve their own people. The plan is to reach out to 2.5 lakh population across 1179 hard to reach habitations in

11 mandals of the entire tribal belt in the Visakhapatnam district," he said.

While mobile health workers travel to remote habitations,

specialist doctor consultations have also been facilitated through few telemedicine centres. Doctors at the centre said that stunted or short stature of women (below 145 cm) was common here and hence there were problems related to child birth. Again screening pregnant women has helped identify one to two cases of malaria every month. Stray cases of Hepatitis and Hepatitis B have also been picked up, doctors said. Nutritional anaemia is another challenge often caused due to multiple and closely spaced pregnancies. To tackle this issue, the Asara Tribal health programme set up Gosthani nutrition project eight months ago where locals are being trained to grow their own vegetables and fruits and consume them.

According to Swarnalath Tirlupathi, General manager, Tribal health programme the Gosthani nutrition project has also helped provide a source of livelihood for tribals like T Durgamma who now makes ladoos of ragi that is grown at the nutri hub and then sells it to people at the youth training centre at the nearby Paderu mandal. Phanse also pointed out that their innovative programme was to supplement government efforts and added that their pub-

lic private partnerships were across 16 states.

Even as the country has registered a decline in the maternal mortality ration recording a 22 per cent reduction in deaths since 2013 according to the Sample Registration System released recently, the next few years are critical to prevent maternal deaths. The MMR has declined from 167/per lakh live births in 2011-13 to 130 in 2014-16 with only three states - Kerala, Maharashtra and Tamil Nadu meeting the Sustainable Development Target (SDG) of less than 70 per 1,00,000.

The Araku model hence is also being considered by some states specially across the tribal belt. While Visakhapatnam district medical health officer Dr Ramesh R said that the Asara tribal health programme had helped ensure uninterrupted service delivery in difficult situations, Sanjeev Kumar, Commissioner National Health Mission told *The Indian Express* that the Araku experience will be of immense use in Maharashtra.

(Anuradha Mascarenhas was part of a media group that visited Araku valley on the invitation of Piramal Swasthya, a healthcare vertical of Piramal Foundation.)