Regional meeting for Gwalior and Chambal Region was organized on 10th July 2018 at Dharti NGO’s office in Gwalior. 30 representatives of the grass-root level organizations from all the 8 districts of the region (Gwalior, Guna, Shivpuri, Sheopur, Datia, Bhind, Morena and Ashok Nagar) participated in this meeting. Team welcomed the 8 members who came for the first time in any MHRC meeting. Agenda of the meeting was:

- Update on work done in last 6 months
- Follow up plan of the workshops held by Sahaj in Bhopal and Vadodara
- Review of MHRC strengthening efforts especially of increasing membership
- Review of maternal health situation in state
- Future plan of action.

After a round of introduction, members from each district shared the work done by them.

**Sheopur-**

- Observed sterilization camps in Jan-Feb and shared the report with secretariat.
- Raised the issue of death of a woman after sterilization, took the case to district health authorities for necessary action and helped family in getting compensation amount of Rs. 50,000/- although still fighting for the due compensation assured by the govt.,
- Did advocacy for installing AC in post natal ward,
- Raised issue of inappropriate demand of money by the 108/Janani Express from women, two women gave affidavit and that proved useful in taking up the issue strongly to CMHO. Women got the money back but no satisfactory action was taken against the accused personnel.
- Raised issue of demanding money by the labor room staff in Karal CHC, took issue to the CMHO and the alleged staff got transferred. Money is being demanded in both cases- whether its baby boy or girl – if its boy then they ask to celebrate the birth of a boy and if its girl then they say ‘chalo, delivery to theek ho gayi’.
- Observed gender gap in NRC (Nutritional Rehabilitation Centre) and SNCU (Sick Neonate Care Unit)- More girls were seen admitted in SNRC but in SNU trend is opposite where more boys get admitted while both are linked. It clearly shows the discriminatory practices being observed by families with the girl child

**Guna-**
• Raised the issue of ANM who would not stay at SHC, a representation of 3-4 people met the BMO first but no satisfactory action was taken then we went to the SDM who gave instructions to the ANM and after that she started visiting and staying at the Sub Centre.

Datia-
• Raised the issue of sterilization death, took it to the CMHO, created pressure by involving other people. After 3 days family was given 50,000/- Rs. But in MDR taken out by the health department accused doctor was declared innocent.
• Observed services being provided on VHND in 15 villages for WHO report.

Bhind-
• Raised the issue of maternal death before but in lack of proper evidences it did not lead to any outcome which caused frustration among members.

During sharing it was observed that new members were not aware of many govt. programs/schemes related to maternal health, hence, senior members oriented them on:
• VHND- what it is, what services should be provided, how it can be observed, what should be the steps like engaging community, distribution of responsibilities among members to observe various parts of it etc. [Secretariat has taken the responsibility to send them tool for VHND monitoring]
• ANC- What are the various checkups – urine, hemoglobin, blood pressure and weight observation, height measurement etc, what is Lalima abhiya (As a part of NIPI (National Iron Plus Initiative) – how iron and folic acid tablet and calcium should be taken as per updated schedule.

Participants were also oriented about the govt.’s LAQshya initiative of improving labor rooms for making childbirth a positive experience for women.

Strengthening MHRC through increasing membership was also discussed and it was reinforced by the conveners that what should be points to consider while inviting new membership.
Some concerns were shared by the participants:

- **Increasing practice of sonography during ANC** - since the sonography service is not available below the district hospital, it has caused patient load at district hospitals. One reason for long queue is that not more than 20 tests can be screened so others have to either return to come some other day or they get pushed to go to the private clinic. Some women are referred with a mark of ‘Urgent’ so they are taken first which again cause problems for those who are waiting since before. And more over it consumes time, energy and money for a family. District hospital Bhind is considered one of the best hospitals but situation is same here as in other district hospitals of the region.

- **Situation of maternal health services**: although the state was awarded for reducing MMR at a very fast pace of about 22% reduction in 2015 as compare to situation in 2011-13 but participants raised concern over poor quality of ANC being provided during VHND. PNC is still a neglected aspect. Situation worsens more in case of birth of baby boy as families in most cases bring the boy themselves, totally unconcerned about the post natal care for the mother. In many cases families do not allow to take weight of the baby boy – important to track the growth of the baby – that it will cast a bad eye on boy (nazar lag jaayegi). There is found to be increase in referral cases as minimal or no services are available at the primary level.

After discussion all participants developed an action plan for the next 3 months:

1. VHND will be monitored to assess the range of services and quality of services being provided
2. Sonography service will be observed at the district hospital at least for one day to gather evidences (patient load, burden on family in terms of time taken, distance covered, money spent and other challenges being faced by the woman)
3. If possible, women who had recent childbirth in district hospitals will be interviewed to know their experience as to know about LAQshya initiative taken by the govt.

Meeting was concluded with deciding the dates for district meetings. New participants felt the meeting was useful and they learnt a lot today. They found the discussion useful and that they will start the similar work in their area as shared by the other senior members who assured them full support and guidance as and when required.