

Comprehensive Strategies for Pregnancy Outcomes and Early Childhood Development in Mokhada's Tribal Communities, Palghar, Maharashtra

Organization: Impact India Foundation (IIF)

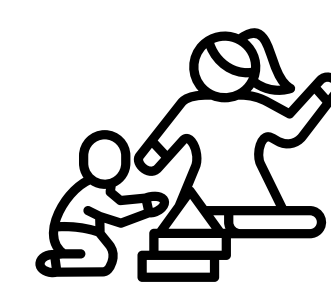
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INTRODUCTION

- The **Mokhada tribal block in Palghar** is grappling with significant public health challenges, including exceedingly high rates of anemia (between 65% to 75%) and malnutrition in pregnant women, as well as developmental delays in children.
- To tackle these pressing issues, a comprehensive initiative is needed to address critical gaps in maternal and child healthcare

OBJECTIVES

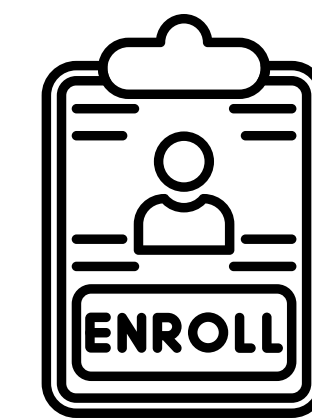


To reduce anaemia and malnutrition among pregnant women and children, thereby improving developmental outcomes for infants and young children.

To enhance community awareness and engagement in maternal and child health, while strengthening local health systems and building capacity for sustained healthcare support

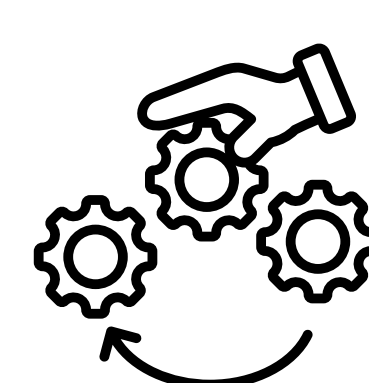
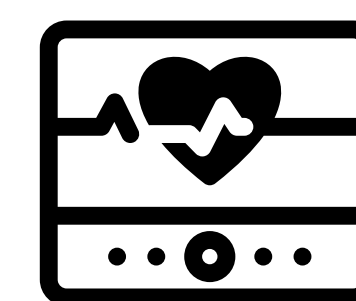
LONGITUDINAL COHORT INTERVENTION MODEL (2022-2025)

Enrolment: Conducted **door-to-door surveys** to identify women who have missed their Last Menstrual Period (LMP) by Community Health Officer (CHO). Pregnant women were registered in IIF's Janani software platform.



Home Visits: During home Visit CHO ensures that **pregnant women were registered in Government CHC/PHC and received MCP card**. CHOs then followed her regularly monthly visits and biweekly visits for high-risk cases.

Health Monitoring: Performing thorough health check-ups to track vital indicators like **Pulse Rate, Weight and Height, BMI, Blood Pressure, Haemoglobin, Blood sugar, Urine Albumin** during every visit. CHO ensured that every women got immunization and visited 3 ANC check-up.

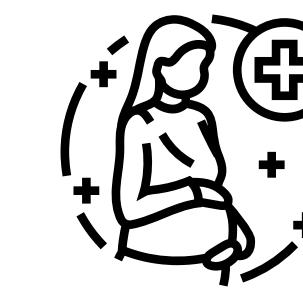


Care Interventions: Offering **essential supplements** where their insufficient stock from Gov. side, like Folic Acid, Iron Folic Acid, Calcium and Multi vitamin syrup to pregnant women. In high risk women referrals to healthcare facilities was done.

CHOs conducted regular visits to **monitor physical growth, developmental milestones, and vaccination status of children under six**, provided nutritional supplements, **referred SAM/MAM cases to NRCs**, and engaged with communities - **nutrition programs, health education, and training of local health workers.**



TARGET GROUPS



2081 Pregnant women were followed until delivery to 6 months after delivery



2060 children are tracked from birth to six years

KEY FINDINGS

- 13%** of the **16,791** women in the reproductive age group were part of the **intervention group**, and **1.5%** were in the **control group**.
- Illiteracy remains high:** 18% in the intervention group and 22% in the control group.
- A majority are wage laborers:** 68% in the intervention group and 71% in the control group.
- Vaccination coverage among mothers reached 91%**, contributing to 97% vaccination among children and supporting herd immunity.
- Hospital deliveries account for 83.8%**, with **95% being normal deliveries**, indicating increased community trust in healthcare.
- The program monitored **406 high-risk pregnancies (19% of total)**, enabling early complication detection.
- Anemia status:** 46% had moderate anemia, 34% had mild anemia and only 21% had normal hemoglobin levels
- 665 low birth weight cases** were addressed, improving newborn health outcomes.
- 1,531 children were vaccinated**, strengthening child health efforts

Indicator	Sub Indicator	1st Trimester	2nd Trimester	3rd Trimester	Total
Pregnancy Registrations		827 (38%)	796 (38%)	553 (26%)	2176
Age (<18 yrs)		97 (12%)	77 (10%)	48 (9%)	3
Anemia Status	Severe (<7 gm/dl)	1	0	2	3
	Moderate (7.1–9.9 gm/dl)	349 (42%)	389 (49%)	253 (46%)	991 (46%)
	Mild (10–10.9 gm/dl)	260 (31%)	274 (34%)	195 (35%)	729 (34%)
	Normal (>11 gm/dl)	217 (26%)	132 (17%)	104 (19%)	453 (21%)
Vaccination of Mothers	TT + Booster	776 (94%)	728 (92%)	471 (85%)	1,975 (91%)
High-Risk Pregnancies	No. of Mothers	163 (20%)	176 (22%)	67 (12%)	406 (19%)
Type of Delivery	Normal	741 (97%)	739 (93%)	522 (95%)	2,002 (96%)
	LSCS	25 (3%)	29 (4%)	25 (5%)	79 (4%)
Place of Delivery	Hospital	700 (85%)	651 (82%)	465	1,816 (83%)
	Home	66 (9%)	117 (15%)	82 (15%)	265 (13%)

DISCUSSION AND CONCLUSION

- The intervention in Mokhada tribal block has led to measurable improvements in maternal and child health**, demonstrated by high vaccination coverage, increased hospital deliveries, and early identification of high-risk pregnancies, showing the potential of integrated healthcare and community-based strategies in underserved areas.
- To sustain and scale these health gains, continued monitoring, strategy adaptation, and stronger collaboration with local organizations are crucial**, with focused efforts needed to address malnutrition through transgenerational approaches and further strengthen health infrastructure.

