

HBNC+ FOR REDUCING DIARRHEA AND PNEUMONIA AND IMPROVING NUTRITION

In a nutshell: Addressing diarrhea and pneumonia, which are major factors contributing to the high infant mortality, compounded by high levels of undernutrition.

Nodal agency: National Health Mission, Government of Odisha

Diarrhea and pneumonia are major factors contributing to the high infant mortality in Odisha, compounded by high levels of undernutrition.

Since 2014, project HBNC+ (Home based Newborn Care) for reducing diarrhea and pneumonia and improving nutrition is being implemented in 3 districts of Odisha. The main component of the project is to follow up on infants beyond 42 days by ASHAs. It provides an opportunity to reach the infant at 3rd, 6th, 9th and 12th month. It promotes exclusive breastfeeding for first 6 months; improves routine immunization, early childhood care and development, correct use of ORS at the time of diarrhea, counselling on complementary feeding and administering Iron folic acid syrup with the objective to reduce diarrhea, pneumonia and malnutrition. A total of 3,027 ASHAs and 81 ASHA facilitators have been trained in HBNC+.

Outcome

Over 68% of the infants received complete four home visits in 3 districts. Overall, 9,303 supportive supervision visits were provided to 3,027 trained ASHAs and 79% of the infants who were undernourished at the age of 3 months improved by the time they reached the age of 12 months.

Implementing partners: NHM Odisha and NIPI.

Financial implications

One time cost per district was ₹45 lakh (training of 1400 worker). Recurring cost per year was ₹36.7 lakh (inclusive of printing and ASHA incentives @ ₹200 per infant)

Scalability

The model has the potential to be scaled up, given the universal availability of ASHA and ASHA facilitators in all high focus States.



Information dissemination to beneficiaries for Home Based Newborn Care (HBNC+)