

Reproductive & Child Health Programme

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Introduction :

The reproductive and Child Health Programme was formally launched by government of India on 15th October 1997. as per Recommendation of international conference on population and development held in Cairo in 1994.

Definition

In ICPD at Cairo, Fatmalla, define RCH as “A state of complete, physical, mental, and social well being and merely the absence of disease or infirmity in all matters relating to reproductive system and its function and process.”

“A state in which people have the ability to reproduce and regulate their fertility are able to go through pregnancy and child birth, the outcome of pregnancy is successful in terms of maternal and infant survival and well-being, and couples are able to have sexual relations free of the fear of pregnancy and of contracting disease”

Objectives

To permit the health of the mothers and children to ensure safe Motherhood and child survival.

The intermediate objective is to reduce IMR & MMR.

- The ultimate objective is population stabilization, through responsible



Intervention/ concept of RCH :-

- Prevention and management of unwanted pregnancy.
- Maternal care(safe motherhood)
- Child survival
- Prevention and management of RTIs/ STD
- Prevention of HIV/AIDS.



Components of

RCH

Following services are included in the reproductive health area as proposed by Government of India.

- Family planning
- Child survival and safe Motherhood programme
- Prevention/ management of RTI/STD and AIDS.
- Client approach to health care.

Other activities

Providing counseling, information and communication services on health, sexuality and gender difference.

- Referral services for all above intervention.

Growth monitoring, nutrition education, reproductive Health Services for adolescents etc.

RCH Package for various services:

- i. For Maternal Services (Safe Motherhood): The services components are obstetric care, infection control and nutrition promotion.
- z. For Child Services (Child Survival) :- The essential care of the newborn, including care of the at risk newborn by prompt referral services.
 - Infection control measure
 - Nutritional promotion

3- Reproductive health

÷ Fertility control

MTP services(for prevention and management of unwanted pregnancies)

Adolescent

' HIV/AIDS

RCH Programme Phase -I :-

Under the RCH programme Phase-I, various provisions were made to improve the status of maternal and child health. These include.

Provision of essential emergency and essential care

Provision of equipment and drug kits to selected PHCs

And selected FRUs in all districts.

Provision for additional ANM, staff nurses and laboratory technician for selected districts.

Provision for 24 hours delivery services at PHCs and CHCs.

Referral transport in case of Obstetric complication

Immunization and oral rehydration therapy.

Prevention and control of Vitamin A deficiency in children.



New initiative Undertaker during Phase i of RCH
are:

Setting up of blood storage units at FRUs
Training of MBBS doctors in anesthetic skill* for
emergency obstetric care at FRU.

Lacunae of RCH

The out-reach services were not available to the vulnerable and needy population..

The management of financial resources were inadequate. the human resources such as doctors, nurses, health worker etc were deficient .

The management information and evaluation system was lacking .

The effective network of first referral units was lacking.

- Quality of service in PHCs and CHCs was poor.
- Lack of community participation.

RCH -2

RCH-z was started from 1st April 2005 to 200 .

RCH-2 vision articulates, ' improving access, use and quality of RCS services, especially for the poor and underserved.

AIM of RCH ÷—

- To reduce infant mortality rate
- To reduce maternal mortality rate
- To reduce total fertility rate
- To increase couple protection rate
- Immunization coverage specially in rural areas.

OBJECTIVES OF RCH-2

- To improve the management performance.
- To develop human resources intensively
- To expand RCH services to tribal areas also.
- To monitor and evaluate the services.
- To improve the quality, coverage and effectiveness of the existing Family Welfare services and essential RTH services with a special focus on the above mentioned EAG states.

COMPONENTS OF RCH 2:-

Population stabilization

Maternal health

Newborn care

Child health

Adolescent health

Urban Health

Rural health

Monitoring and evaluate.

I. POPULATION STABILIZATION ÷

By increasing the number of trained personnel like medical Officer of PHC and female health worker of sub centers.

- By covering the services at grass roots level by having linkage with ICDS

Involving Panchayati Raj Institution urban local bodies and NGOs

- By training one couple from each village to provide nonclinical family planning method services.

By involving district Urban Development authority (DUDA) cooperative societies and industrial workers in providing family planning services

- By identifying NGOs to provide financial technical and managerial support

2. MATERNAL HEALTH/ REPRODUCTIVE HEALTH

The strategies to improve and strengthen the quality of maternal services are

A. Essential obstetric care :

Three or more antenatal checkups

Two doses of tetanus toxoid

One pack of iron folic acid tablets during the last trimester

Counseling on planning of institutional delivery.

Emergency obstetric care

B. Emergency obstetric core:- This consists of operationalizing the first referral unit to be fully functional round the clock (24 hours)

First referral unit(FRU):- It is an upgraded PHC/CHC into a 30 bedded Hospital, having a well furnished and equipped operation theatre With a newborn care corner ,a Labor room, blood bank and laboratory to provide the services of obstetric emergencies such as cesarean section and adequate supply of drugs to the patients, care of sick children, family welfare services.

Newer scheme:-

Janani Suraksha Yojana scheme

- Prasoothi araker

Training of traditional birth attendants.

- Training of MOs in the skill of obstetric management.

3' NIW 8ORN CARE AND.CHILII HEALT

The effective health intervention for newborn starting from the Antenatal period, Intrapartum and immediate newborn care, early newborn care, late newborn care.

Navjat Sliishu Suraksha Karyakram(NSSF):- the main aspects of NSSK prevention of hypothermia, prevention of infection, early initiation of breastfeeding.

Facility based IMNCI :- It focuses on providing appropriate inpatient management of the major cause of neonatal and childhood mortality.

- Sick newborn care(SNCU)

Home based care(HBNC)



4- ADOLESCENT HEALTH:-

▶ This is implemented on pilot basis in those districts where more than 60% girls marry before age of 18 years.

▶ The adolescent health services are provided

by counseling once in a week in the PHCs and CHC..

▶ The services or management of menstrual disorders,

▶ nutrition counseling, counseling for sexual problems.



. URBAN HEALTH -

This is improved by providing quality primary health care to the urban poor by establishing Urban Health Centre (UHC) ratio is 1: 50000 populations.

Where 1 MO , 3-4 ANM , Lab assistant, 1 Public Health nurse, 1 clerk,, 1 peon and 1 chowkidar.

6. TRIBAL HEALTH (VULNERABLE POPULATION):-

These are the people who are underserved due to problems of geographical access and those who suffer social and economical disadvantage such as SC/ST and the urban poor.

Goal :- To improve their health status.

Objective : To bring their health status at par with the rest of the population

7. MONITORING AND EVALUATION:-

Management information and evolution system.

This is done by following measures:

Planning is done at various level of sub centre, PHC, CHC, district and state.

Monitoring is done by establishing consumer need assessment approach cell at district and state level with an officer in charge.

Evolution is done through district survey, National family health survey, focus studies and census reports.

Validation is by supervision and surveys.



8. OTHER PRIORITY AREAS:

- The services provided under RCH z are:

Health education

- TB Control Programme

storage and distribution of anti malarial drugs

ANC services

- Contraceptive distribution

Referral for terminal method

Thank
you!!!
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