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Plan

- Background/Introduction
- Objectives
- Methodology
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- Conclusion



Background

- India accounts for the highest number of maternal deaths (289000 in 2013) globally.
- In 1990 the estimated MMR was 437 per 100000 live births.
- According to the Office of the Registrar General of India statistics, MMR status at all India level 2011-13 is 167
- India missed MDG target 109 per 1,00,000 live births by 2015.
- MDG report 2015 on India 120 women die per day
- Maternal deaths are under reported in India
- 67% of MMR -Four states i.e. UP, Bihar, MP and Rajasthan
- Bihar/Jharkhand(208),
- Madhya Pradesh/ Chhattisgarh (211),
- Orissa (222), Rajasthan(244),
- Uttar Pradesh/ Uttarakha.nd (285) and
- Assam (300)

VIDEO VOLUNTEERS

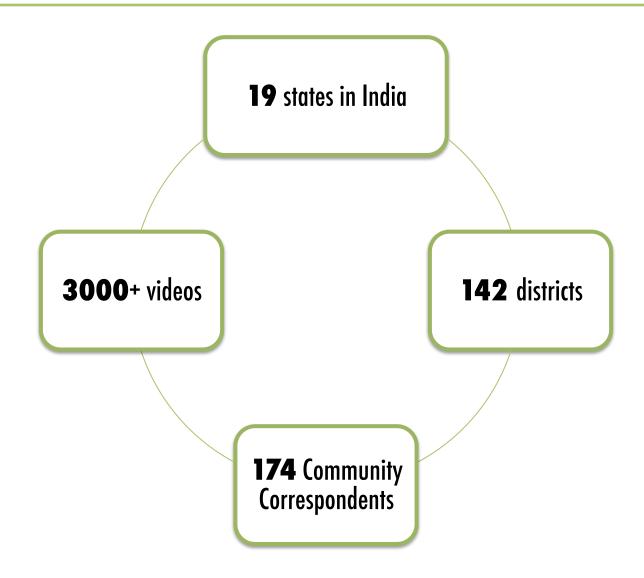
Identify, train and empower community representatives who create change in and for voiceless communities across India

Using video as a tool, these representatives identify gaps in entitlements and services, inform and educate communities about entitlements, and advocate with authorities to bring about change by addressing the gaps

In 2013-14, one out of every four reports published by VV's Community Correspondents led to the resolution of the entitlement violation that was highlighted

This shows that introducing a community journalism element into monitoring has great potential

Outreach



Impact

450+ videos managed to solve the problem they addressed



1,260,827 people benefitted

50,000 people took action

ASSERTING EVERY PERSON'S RIGHT TO A VOICE



National campaigns

Community
Monitoring of
maternal health





Campaign on maternal health

- Early 2015, VV launched a campaign, with support from Oxfam India. (vision is to help create an equal, just and sustainable society by empowering the underprivileged and believes in the 'Right to Life with Dignity for All').
- to monitor maternal health in India through the tool of communityproduced videos.
- VV felt there was an urgent need to bring out more community voices on this issue which gets scant media attention.
- 75 Community Correspondents from marginalised communities across four states Jharkhand, Bihar, Orissa and Chhattisgarh— were trained to examine gaps in the implementation of maternal health schemes, report on violations and devise solutions to improve the state of maternal healthcare in the country.

IT Aims

Monitoring implementation of government schemes

Holding officials publicly accountable

Facilitating
dialogue
between
community and
officials to
resolve issues

Why needs monitoring?

- It's empowering Villagers decide what matters and reports things of significance to them.
- It builds skills within the community
- Creates awareness about rights and entitlements
- Community monitoring holds govt. accountable
- Combined acts of monitoring, mobilizing, executing solutions and publicizing-by communities
- Govt. depts., function better and
- Communities proactively seek entitlements.

Training

- The CC's working in remote villages and they could monitor the programs in their neighbourhood.
- CC's will highlight the injustice towards women who died last year, turning them from a statistic into a person whose voice and story matters, even from the grave.



Objective

- To analyze the stories reported on maternal health issues .
- To analyze the violations of health system reported in the stories under different programs etc.
- To find out the impact of the stories in improving the status of women.

Methodology

- All the ground reports produced since 2010 till April 2015 analyzed.
- 35 ground reports are analyzed published till April 2015
- Till July 2015 -50 ground reports –presently in production.
- CC's working on impacts on stories produced
- Stories on impact produced.

Ground Reports

- Sunita Kasera took action in Karauli, Rajasthan
- Pregnant women receive vaccination cards, iron folic tablets etc.
- Saroj Paraste in MP Vaccination for pregnant women and immunization for children below 5 years

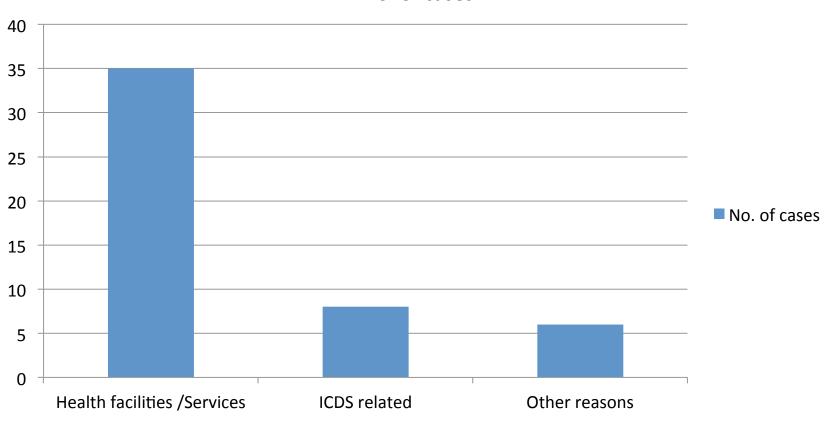
Results

Since 2010, following violations are noticed –

- Absence of a dignified & safe environment at health facilities
- Maternal health schemes are promising on paper but fail to reach its beneficiaries:
 - Poor/ missing infrastructure,
 - absence of Auxilliary Nurse Midwives or doctors at health centers.
 - lack of ambulances in villages;
 - -women not being provided medical care at hospitals right after delivery;
 - out of Pocket Expenditure
 - Shortage of/ absentee Frontline health workers
 - corrupt Frontline health workers

Results

No. of cases



Violations

Conclusion

- The key to preventing these deaths lies in our villages where one needs to make sure that fellow villagers get the services and entitlements they deserve,
- Camera gives sense of 'being watched for not doing your job'
 - -this fear gets duty bearers to do their job, ensuring that the issue highlighted in the video is resolved.
- Video reports reveal nuisances of what a violation means, or why the violation occurred in the first place.
- Community correspondents can bring in accountability
- Community media can help resolve issues at the ground immediately.

Support us

- Watch our videos & reach out to officials
- Be a part of solution to stop the health violations and get justice for women.
- Include community monitoring in your agenda.

video link

http://www.videovolunteers.org/

