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ABSTRACT SUBMISSION

Title: Impact of community based surveillance on reported postnatal complications among adolescents and young married women in a slum community in India

Abstract No. 0336

Title Impact of community based surveillance on reported postnatal complications among adolescents and young married women in a slum community in India

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Text Abstract

Background: More than 60% maternal deaths occurred in postpartum period. In developing countries, 80% of postpartum deaths caused by obstetric factors occurred within one week. (Gynae&Obs Vol4, P1-10)

In 2015, following a baseline study, an intervention consisting of monthly surveillance by community health workers and active linkage with health providers, was undertaken in 12 slums in Pune, India.

Methods: Systematic random sample of 200 women was selected from list of married adolescent girls and young married women 20-24 years, following a census in 12 study slums. Sample size was calculated to detect a 10% difference in prevalence of reproductive morbidity by assuming an alpha of 0.05 and using a two-sided test to achieve 80% power. A similar sample was taken from 12 control slums. Impact of intervention was assessed using log regression.

Results: At end-line, respondents from study and control sites were similar for most key socio economic, health utilization and health status indicators.

In 2017, 18 months after implementing the intervention, knowledge about postnatal complications increased significantly at study sites compared to control sites OR 1.70 CI(1.02-2.83). At end line, prevalence of multiple postnatal complications was found to be significantly reduced at the study sites as compared to control sites [OR 0.36 , CI(0.20-0.64)]

Self reported prevalence of post partum hemorrhage was significantly reduced at study sites as compared to control sites [OR 0.37, CI(0.22-0.61)]. Significant reduction in anemia at study sites Vs control sites [OR 0.58, CI(0.42-0.81)], and significant reduction in breast engorgement/infection at study sites Vs control sites [OR 0.52, CI(0.36-0.75)].

Discussion: Monthly surveillance of health needs and morbidity followed by active linkage with health providers leads to increased utilization and significant reduction in postnatal morbidity. Scaling up is imminently attainable wherever community health workers are recruited.

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