

Mother Child Protection Card –empowerment tool to improve maternal and child Health

Background

Maternal and child survival, health, growth and development are serious concerns of the state of Haryana and India. Integrated management of childhood illnesses (IMCI) was recommended by WHO and UNICEF as a strategy for reducing infant and early childhood mortality and morbidity (1). To maximize the gains of IMCI, 12 key family and community practices that influence child survival, reduce morbidity and promote healthy growth and development were recommended based on a systematic review of evidence (2). W.H.O. growth standards were prepared for universal application and endorsed by the member states to address the problem of undernutrition in children (3). Policy briefs have been disseminated for wasting (4) and stunting (5) in children with identification of global targets to be achieved by 2025. The evidence on the crucial role of early childhood development (ECD) on improved survival, nutrition and development including influence on early onset of adult hood diseases has been growing (6). WHO and UNICEF has advocated the application of early childhood development (ECD) in child care (7). Addition of ECD to the portfolio of interventions is crucial since this is a great equalizer (8). The role of timely vaccination to prevent childhood illnesses has been endorsed globally.

A lot of progress has been made in the reduction of mortality in mothers and children, but there is a lot of scope for acceleration in reduction of mortality and undernutrition. National Rural Health Mission (NRHM) and Ministry of Women and Child Development (WCD) have undertaken several initiatives to accelerate reduction in mortality and child under nutrition. Efforts have also been ongoing to integrate the various services using a continuum of care approach. Amongst these one prominent effort of the Government of India is the development and use of mother child protection card (MCPC).

What is MCP Card?

The Mother and Child Protection Card (MCP Card) has been developed jointly by the Ministry of Women and Child Development and the Ministry of Health & Family Welfare, Government of India with support from UNICEF and NIPCCD and introduced jointly in April, 2010 (9). It was disseminated in the year 2010-11 for implementation by the States. The card was then rolled out (10). It replaces the immunization card. The MCP card is a recording-monitoring cum-counselling card and a learning tool for informing and educating the mother and family on different aspects of maternal and child care and for linking maternal and childcare into a continuum of care from pregnancy till the child is three years old through the Integrated Child Development Services (ICDS) scheme of Ministry of Women and Child Development and the National Health Mission (NHM) of the Ministry of Health & Family Welfare (MoHFW). This comprehensive multipurpose health card also provides information to the parents/guardians on various types of services delivered through ICDS and NHM, which the families can access and utilize for growth and development of their children and health of the mothers. The card also records some key services delivered to the mother and the baby during ante natal , intra natal and post-natal period for ensuring that a minimum package of services are delivered to the beneficiary. At the same time guidance provided in the card can help the families to improve care during all these critical stages of life.

Why MCP card?

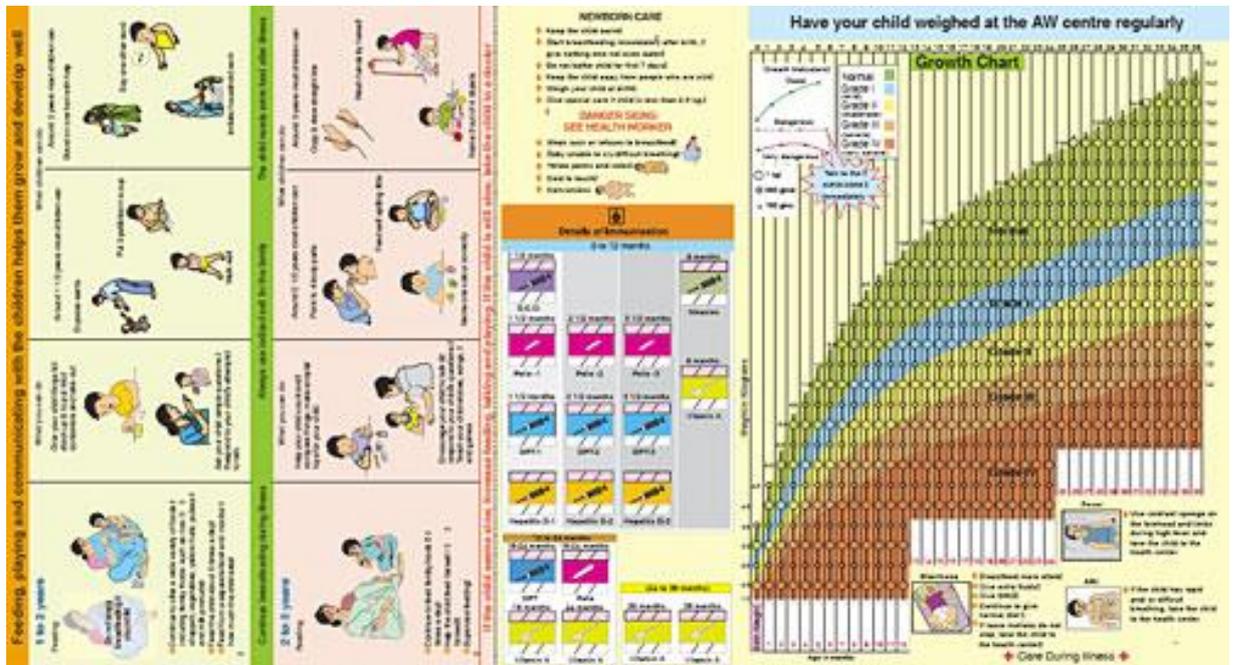
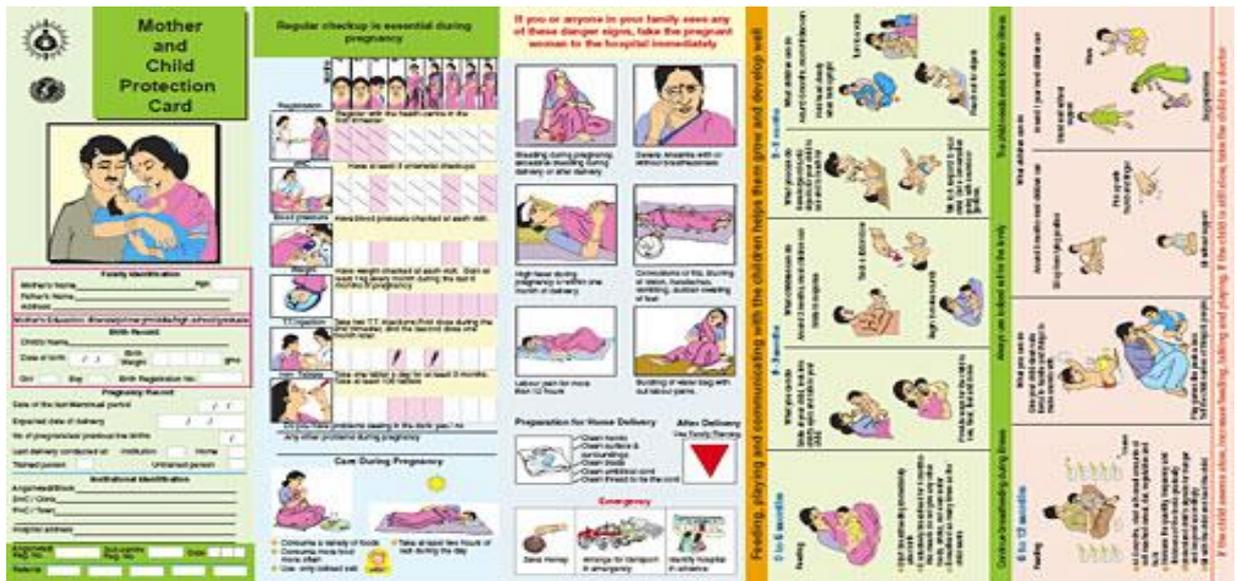
- It serves as a learning tool for individuals/families/community to learn, understand and follow the evidence based good practices for achieving good health of pregnant women, young women and children up to three years of age
- It provides information on different types of services which need to be accessed for better health and wellbeing of women and children up to three years of age.
- It empowers the mother and the family to take decisions for their own health and also improve the growth and development of their children (0-3 years)
- It keeps a record of the service rendered during pregnancy, post-partum period and childhood (0-3 years) and helps in the monitoring the growth of children by using weight for age record.
- It helps timely recognition and referral of complications with mother during pregnancy, child birth and post-partum period and in new-borns for better management at appropriate facility.
- It serves as a counselling tool for care providers (Accredited Social Health Activist-ASHA, Auxilliary Nurse Midwife- ANM, and Anganwadi worker- AWW) to counsel the client and her family on pregnancy care, safe delivery and age specific feeding and play and communication of children.

Who should use this card?

1. Family:- Parents, grandparents, adolescent girls for getting knowledge, utilizing available services, practising evidence based positive behaviours, monitoring the growth of their children
2. Village based voluntary groups :- Mahila Mandal , Sakshar mahila samuh (SMS), or any other voluntary group working on women and children can use MCP card as a tool for discussion to educate the family, and monitor the effectiveness of service delivery system.
3. Community based meetings:- the MCP card can be used effectively during village health and nutrition days and in village health and sanitation meetings.
4. Care provider:- Accredited Social Health Activists (ASHAs), and Anganwadi workers (AWWs) can use this card to counsel and educate the family, record information on services rendered and facilitate referral to appropriate health facilities based on danger signs
5. Supervisors: - Ensure that card is available with the beneficiary families (pregnant women and family with children up to 3 years of age), they have been explained why and how to use the card, and ensure that available services are efficiently and effectively delivered to the beneficiaries.

What does it contain?

The Government of India has standardized the health care information that a mother should receive during ante natal and post-natal period. It has standardised information on children up to 3 years of age. The benefits received from MCP card would largely depend on how



Key sections of mother child protection card recommended by Government of India

(Source: NRHM and WCD)

effectively the family uses this card and how effectively the care providers have explained its benefits to the targeted family. It has various components for care provider, care giver or both. Main components of MCP card include the following:-

1. **Safe mother hood:-** Provides information on services related to pregnancy care, dietary advice and rest, problems during last pregnancy, danger signs during pregnancy, registration and benefits of Janani Surakshya Yojana (JSY), institutional delivery, preparedness for home delivery, advice on child spacing, services to be provided at home after delivery

2. **Newborn care:-** Information on home based post-natal care of the new-born, what is to be checked by care provider (to check for baby passing urine, stool, baby having fast/difficult breathing, chest in drawing, jaundice, etc.) danger signs to be observed by family for immediate referral
3. **Growth and Development:-** Age specific information on feeding of the child and play and communication activities both for mother and the child, for better growth and development of the child and for mother's happiness. W.H.O. growth chart separately for boys and girls are included for growth monitoring and to take appropriate action in case of growth faltering.
4. **Immunization:-** Immunization Schedule – what vaccination to be given and when to be used by care provider for recording and for family for learning and to access immunization services as per schedule.

How to use this card?

- Information given in the cover page of the card contains family identification and birth record which should be filled by the care provider before it is given to the family
- Family should be explained to bring this card whenever they visit a care provider or facility (ASHA, Anganwari centre, sub centre, health centres, private doctor or a hospital)
- Family should be advised to keep the card safe and prevent it from any damage
- Various sections of the card should be explained to targeted family, so that they get maximum benefit from its use.

The card has been adapted and translated in local language and is pre- dominantly pictographic. Even an illiterate person can understand many of the things from seeing the pictures.

Where is the card available?

It is available with ASHA, AWW, ANM and at all the government health facilities free of cost. It is not generally available with the private care providers and private health care facilities though there might be some adapted versions of it that are in use.

Key points

- In the present scenario of expanded outreach services provided under ICDS and NHM under which there is Village Health and Sanitation Committee and Village Health and Nutrition Day, the Mother Child Protection Card would enable the existing large network of ASHAs, ANMs, AWWs and Anganwadi helpers to converge their efforts and utilize the opportunities of contacts more efficiently and effectively.
- Being an entitlement card, it would ensure greater inclusion of under privileged and unreached group in the community to demand and universalize access to available Maternal and Child Health services, thereby address the critical issue of equity.
- Mind-set of the functionaries that it is meant for 'recording of services provided' and it 'increases their workload' is major stumbling block. This should be addressed on a priority basis so that it empowers the beneficiaries optimally.
- MCP card can help intersectoral convergence at the local level and improve integration of services required for the improvement of maternal and child health. It is an 'Entitlement

Card’ and an ‘Empowerment Tool’ in the hands of the mother and the family. The cards are being used but mere distribution of the card will not contribute to improvement in health. A lot more needs to be done to make MCP card serve the real purpose for which it was developed.

- A lot of effort was made through many years of discussion and deliberation which includes orientation of health and ICDS functionaries and guidance and support to families on why and how to use it. This card can be universally used for improving survival growth and transformation of our future generations.

Key references

1. Integrated management of childhood illness: a WHO/UNICEF initiative. Bulletin of the World Health Organization, 1997, 75 (suppl. No. 1).
2. Zelee Hill, Betty Kirkwood and Karen Edmond, Public Health Intervention Research Unit Department of Epidemiology and Population Health London School of Hygiene and Tropical Medicine. Family and community practices that promote child survival, growth and development A REVIEW OF THE EVIDENCE WHO 2004
3. WHO child growth standards Growth velocity based on weight, length and head circumference Methods and development WHO 2009
4. Wasting policy brief WHO. Global Nutrition Target 2025: Wasting Policy Brief. WHO,2014,http://www.who.int/nutrition/topics/globaltargets_wasting_policybrief.pdf
5. WHA Global Nutrition Targets 2025: Stunting Policy Brief Global targets WHO 1000 days WHO/NMH/NHD/14.3, 2014
6. The Foundations of Lifelong Health Are Built in early Childhood. Center on the Developing Child at Harvard University (2010), <http://www.developingchild.harvard.edu> © July 2010,
7. Care for Child Development. Improving the Care of Young Children. WHO, UNICEF 2012
8. Lori G. Irwin, Ph.D., RN Arjumand Siddiqi, Sc.D., MPH Dr. Clyde Hertzman, MD, M.Sc., FRCPC Equalizer Early Child Development : A Powerful Equalizer Final Report for the World Health Organization’s Commission on the Social Determinants of Health Prepared by June 2007, WHO.
9. National Institute of Public Cooperation and Development, New Delhi. (2013). Guide Book: Mother and Child Protection Card. New Delhi. 125 p.
10. UNICEF (2012). Rollout of the WHO Child Growth and Development Standards and the Family Retained Mother and Child Protection Card in 13 States of India. New Delhi.42 p.

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