

### 3. Measurable Outcomes of the ASHA Programme

In the course of conducting these five activities, the ASHA should ensure the following:

#### Maternal Health

1. That every pregnant woman and her family receive health information for promotion of appropriate healthcare practices – diet, rest and for increased use of services which would focus on care in pregnancy, delivery, postnatal care and family planning services.
2. That every pregnant woman avails of antenatal care and postnatal care at the monthly health worker clinic/VHND.
3. That every family with a pregnant woman has made a plan and is prepared for the event of childbirth.
4. That every couple that needs contraceptive services is counselled on where to avail of the service.

#### Newborn and Child Health

1. That every newborn is visited as per the schedule, more often if there are problems and receives essential home-based care as well as appropriate referral for the sick newborn.
2. That every family receives the information and support it needs to access immunisation.
3. That all families with children below the age of two years are counselled and supported for – prevention and management of malnutrition and anaemia and for prevention of illness such as malaria, recurrent diarrhoea and respiratory infection.
4. That every child below five years with diarrhoea, fever, Acute Respiratory Infection (ARI) and worms, brought to her attention is counselled on whether referral is immediately required or whether, given the problems of access to a doctor, first contact curative care with home remedies and drugs in her kit, the child can be managed.

#### Disease Control

1. That those individuals noticed during home visits as having chronic cough or blindness or a skin patch in a high leprosy block are referred to the appropriate centre for further check-up.
2. That those prescribed a long course of drugs for tuberculosis or leprosy or surgery for cataract are followed up and encouraged to take the drugs or go for surgery.
3. That those with fever which could be malaria (or kala – azar) have their blood tested to detect the disease and provide appropriate care/referral.
4. That the village and health authorities are alerted to any outbreak of disease she notes during her visits.

Note: Each outcome is not a separate activity. They are part of the protocol followed during a single activity – the home visit.