



Annual Report

2022-2023

Foundation for Research in Health Systems (FRHS)

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LIST OF ABBREVIATIONS

AWWs	Anganwadi Workers
ANMs	Auxiliary Nurses and Midwives
ECCE	Early Childhood Care and Education
ECHO	Extension for Community Healthcare Outcomes
FRHS	Foundation for Research in Health Systems
GoI	Government of India
ICM	International Confederation of Midwives
IITB	Indian Institute of Information Technology- Bangalore
IITB	Indian Institute of Technology- Bombay
IIPHG	Indian Institute of Public Health- Gandhinagar
LSE	London School of Economics
MRC	Medical Research Council, UK
SEAR	South-East Asia Region
UGOT	University of Gothenburg
UNICEF	United Nations' Children's Fund (Previously called United Nations International Children's Emergency Fund)
UNFPA	United Nations' Population Fund
WHO	World Health Organization

FROM THE PRESIDENT'S DESK

On May 5th, 2023, the WHO declared that Covid-19 no longer constitutes a public health emergency of international concern though it remains an established and ongoing health issue. We have to congratulate ourselves for having survived and lived through 'a once a century' pandemic which will remain a subject of interest for public health specialists in particular for a very long time.

For FRHS and like organizations the period has been difficult in many ways. Changes in priority for research support, access to the field and availability of personnel being the major ones. With the return of near normal times research projects seem also to be returning to near normalcy. At the time of writing FRHS has completed two research assignments with seven ongoing and one upcoming project. The description of these is provided in the annual report and will be summarized at the forthcoming council meeting.

S. Krishna

MEMBERSHIP OF THE GOVERNING COUNCIL

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EXECUTIVE SUMMARY

Foundation for Research in Health Systems (FRHS), was established as a not-for-profit research organization in the year February, 1989. FRHS is registered in New Delhi, under the Societies Registration Act 1860 with the administrative headquarter located in Bengaluru, while undertaking projects across India. FRHS is recognised as a SIRO (Scientific and Industrial Research Organization) by the Department of Science and Technology, Government of India.

In line with the Foundation’s vision and mission, FRHS’ activities in 2022-23, continued with a specific focus on health systems strengthening, and the international collaborations established by FRHS in 2021-2022 were further strengthened through joint research and scientific writing:

FRHS – in collaboration with UGOT – was successful in its bid with World Health Organization South-East Asia Regional Office to undertake a project exploring the work environment of midwives and nurses working in maternity wards in the hospitals of Bangladesh and Nepal. The FRHS-led consortium of Indo-UK research institutes completed their MRC-funded research on documenting the quality of midwifery services as case studies in Gujarat and Telangana and initiated processes for scientific publications during 2023. FRHS-UGOT researchers led a first-of-its-kind study in Karnataka, validating a standardized questionnaire measuring women’s birth experiences.

Researchers from FRHS-LSE explored the everyday resilience and capacity-building in primary healthcare in selected districts of Karnataka; and are currently engaged in studying the Geographic Information Systems for primary healthcare management in India. In 2022 FRHS researchers bid for a BMGF grant to document the midwifery initiative in India as co-applicants to IIPHG and succeeded. The project supported by this grant is expected to start from August 2023. In 2022, FRHS – as a co-applicant to UGOT researchers – prepared a concept note for UNFPA Bangladesh, seeking their support for a 4-years-long project on developing an accreditation system for the midwifery education in 147 education institutes in Bangladesh and has received funding, w.e.f. July 2023. In 2022 FRHS – as the Indian lead of the Indo-UK research consortium – applied for a two-stage grant application by MRC exploring “postnatal care in India (2024-2027)” for which the Stage 2 decision is due in Nov 2023. The other ongoing project is Concurrent Learning’s on Complication Management in Maternal and New-born Care.

FRHS’ research contribution was acknowledged during several panel discussions during the triennial Congress of International Confederation of Midwives held in Bali in June, 2023, where four of FRHS’ recent projects were disseminated and discussed in presence of MoHFW authorities, Government of India.

SECTOR DEVELOPMENT (2017- 2023)

1. One Health:

World Health Organization defines one health as an integrated, unifying approach to balance and optimize the health of people, animals, and the environment. The aim of one health is to prevent, predict, detect and respond to the global health threats such as the COVID-19 pandemic. Mobilization and collaboration of multiple sectors – such as public health, veterinary and environment sectors – disciplines, and the communities at various levels of the society is critical to actualize the concept of One Health, as this generates innovative ideas that address the root cause and create sustainable and global solutions for global problems. The concept has been primarily introduced to promote food and water safety, nutrition, control of zoonoses, pollution management and combating antimicrobial resistance. Due to its multi-sector construct, the One Health calls for the governments, researchers and industries to work together, especially when addressing health threats, either short- or long-term.

In March 2022, The Embassy of Sweden, New Delhi hosted the European Union representatives and lead researchers from India and EU to explore Indo-EU collaborations around One Health with special focus on vaccine development, Artificial Intelligence and public health deliberations around One Health. Director, Research and Training, FRHS was an invitee and stressed the need for contextualization of any One Health solution in line with local social and cultural beliefs and the role played by FRHS and similar research foundations to generate the information to roll out any such intervention designed under One Health to promote its acceptability and utility at grassroot level.

2. Maternal and Child Health:

November 2022 marked a significant milestone for maternal and child health in India when India's Maternal Mortality Ratio dropped to 97/ 100,000 live births (*Special bulletin Registrar General of India, Nov 2022*). The government of India has launched several initiatives to improve the quality of maternal and child health services in recent past, most importantly the *LaQshya initiative* to improve and upgrade the labour rooms (LaQshya guidelines 2017), in addition to the *Dakshata training guidelines* (2015) for on-the-job MCH skill updation of healthcare providers; and the *Surakshit Maatritva Abhiyaan* (2016) aiming for assured and improved quality of antenatal services for women in India, all playing a role in improving the perception of communities about the quality of childbirth and other maternity services in India. However, the current MMR is a national representative figure, meaning some states are still lagging when compared to the UHC 2030 targets, and will need focused interventions to achieve this target (Meh et al, 2022).

This is noteworthy in the light that the morbidity burden on mothers and their neonates due to health conditions and care during pre-conception, pregnancy, childbirth and postnatal period remains high (WHO, 2020). It is estimated that 22% of all Postpartum Indian women suffer from postpartum depression (Upadhyay et al 2017); many deaths occur due to poor management of pregnancy and childbirth complications.

FRHS is currently collaborating with Sambodhi Foundation for a project documenting the management of

Maternal and Neonatal Complications in UP. FRHS also applied for and has proceeded to the second stage of UK funded application on “postnatal care in India”.

3. Midwifery and Nursing:

The WHO called out the national leaders across the globe to invest into development of competent nurses and midwives in their countries. This was in light of the growing evidence that committed, competent midwives are capable of handling all normal pregnancy and births; while they can accurately identify 85% of complications in their early stages and effectively engage with the obstetricians in managing such complication (State of World's Midwifery, WHO, UNICEF, UNFPA; 2014). Since then, several countries – including Nepal, Sri Lanka, Bangladesh, and Timor Leste – have launched professional midwifery with promising early results from midwifery-led care interventions. In January 2019, Government of India released its first guideline on establishing midwifery as a profession in India. In May 2019, the World Health Assembly declared the year 2019 as the "Year of the Midwives" and the year 2020 as "the Year of the Nurses and Midwives". This has attracted a renewed interest in furthering the evidence-generation on nursing and midwifery within India and in South-East Asia region.

FRHS – in collaboration with IIPHG and UGOT – has made contributions to several ground-breaking research project in India and South-East Asia and continues working for strengthening midwifery and nursing in India and the region. Currently, FRHS is involved in three long-term projects involving midwives and nurses.

4. Pandemic preparedness in light of COVID-19:

The COVID-19 outbreak was first reported in Nov-Dec 2019, which rapidly evolved as a global pandemic, affecting both High Income and Low-and-Middle Income Countries with equal magnitude. The pandemic preparedness of health systems has since then received focused global attention (WHO, 2020). While large sections of scientists have generated evidence around the microbe, and its pathology, several public health research avenues have also opened up in the field of Pandemic preparedness, like:

A quick review of published articles shows that while the lockdowns have proven an effective strategy to breakdown the spread of infection chain (1), the lockdowns in themselves delayed service seeking for routine/emergency health services for the common public, especially for patients on treatment for chronic debilitating illnesses (2). A working paper by Canadian researchers Brodeur et. al. (2020) studied the google search trends and their association with loneliness, unhappiness and boredom among people under lockdown due to COVID-19, and reported significant surge in numbers of above-mentioned searches indicating severe impact of lockdowns on general public's mental health. A study carried out in Italy reiterated an increased level of stress and anxiety among people under lockdown who reported lack of sleep, decreased quality of sleep, anxiety and depressive symptoms (3).

In case of healthcare providers, the review of studies from HIC and LMIC show that the self-reported mental stress by healthcare providers was proportional to the time they spent among COVID-19 patients: Out of the 14 studies carried out from January- March 2020 in HIC and LMIC, extreme stress was reported by nearly 14.5% of all care providers working with COVID-19. Such healthcare providers were also reported to be at a higher risk of developing anxiety, panic attacks and depression (4). A UK-based study reported development and evaluation of an e-Package for the use of healthcare providers to mitigate the stress related to managing COVID-19 (5). The package outlines the actions that team leaders can take to provide psychologically safe spaces for staff; promoting self-care strategies like rest, work breaks, sleep, shift work, fatigue, healthy lifestyle behaviour; and managing emotions such as moral injury, coping, guilt, grief, fear, anxiety, depression, preventing burnout and psychological trauma (5). A US study reported using the ‘battle buddy’ strategy – devised by US army's buddy

system – pairing up two healthcare providers as buddies to vent out the stress and anxiety of dealing with COVID-19 (6). It is noteworthy that most of the published studies have reported studies from HIC, and most have reported support strategies for the healthcare workers. FRHS initiated discussions with several national and international public health researchers specializing in pandemic studies, however, none of the joint applications have actualized till date.

5. *mHealth initiatives:*

In the field of health services too, several *mHealth initiatives* have been launched by the Government of India under its Digital India initiative; with several end-user apps launched in past years, such as mDiabetes (2015); *No More Tension* (2016); *India Fights Dengue* (2016); *NHP Swasth Bharat* (2016). The 'Vaccine Tracker' app was launched (2016) by GoI under *Indradhanush* immunization scheme for parents to track and remember essential immunization for their children. Similar apps have also been launched for the health workforce to aid them in undertaking their activities systematically: The *Aide Memoire* (2015-2016) is a smart phone app for ASHAs and ANMs to promote prompt services to Pregnancy, Childbirth and Postpartum care. *The Mother and Child Tracking System* is a mobile app for the community-level health care providers to track pregnant/postnatal women and under-5 children in their designated areas The '*Kilkari*' initiative – accessed by more than 7 crore people from 11 Indian states – comprises of 72 free weekly and time-appropriate audio messages on pregnancy, childbirth and newborn care; through calling a toll free number '*Nikshay*' is an initiative based on missed-call call-center, which has been implemented across all Indian states and Union Territories for monitoring, counselling and providing treatment support to TB patients. Approximately 85 lakh patients have been registered under this initiative.

While the apps developed by individual institutions are being tested for their impact on access to health information, the apps made available by the GoI seem to be unregulated in terms of their effectiveness in improving access to health information. This interpretation is drawn because the relevant websites of ministry of health and family welfare, Government of India merely list the numbers of time a particular app is downloaded (in millions); but no information can be found about how the app is being used, primary beneficiaries and how the information gained impacts the health seeking behaviour. This knowledge gap provides some research opportunities which could be considered by FRHS. The DRISHTI app; and the m*Mitra* and m*Check* interventions developed by FRHS are strong first steps, and other such interventions could be further conceptualized.

In 2019-2020, FRHS has supported maintenance and field-testing of the mSakhi app for ASHA workers. Originally developed by IntraHealth, the App is now freely available in public domain and can be adapted and re-purposed for varied health scenarios including pandemic preparedness.



Annual Activity Report

April 2022 - March 2023

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BACKGROUND

The Foundation for Research in Health Systems (FRHS) was established in 1989 as a not-for-profit research organization with an aim to find ways for a healthier nation through research, innovation and interventions. FRHS' mission is to combine research with practice to make health research relevant to health workers, programme managers and policy makers. FRHS' research and intervention areas include public health research, Information Communication Technology (ICT) solutions, decentralized planning, evaluation, community monitoring, and health management information systems.

FRHS predominantly works in the areas of maternal health, adolescent health, child health and nutrition, reproductive health, family planning and prevention of HIV/AIDS. In these areas, FRHS focuses on programme planning to strengthen existing systems; carrying out monitoring and evaluation; and programme/policy evaluation, and has received funding support from organizations such as World Health Organization (Regional and Country Offices); UKAid, Medical Research Council United Kingdom, University of Gothenburg, Wellcome Trust, Rockefeller Foundation, CARE, DFID, UNICEF, and ICICI Social Initiative Group.

Intervention research is another of FRHS' focus areas, specifically in designing and implementing Health Management Information System (HMIS) and to use the HMIS data to reach out to the target beneficiaries and to build capacities of programme managers in making service delivery, efficient and effective.

Table 1 presents a brief overview of all projects active in the financial year 2022-23.

Table 1: Report on Activities and Research Projects Status

I. Projects with FC (External)Funding							
Sr. No	Project Title	Period	Budget (in Lacs)	Sponsor	Location	Key Staff involved	Status
1	Improving maternal-neonatal outcomes through implementing Quality Midwifery Services in India: a case study of facilitators and barriers	April 2021 to April 2023	35.78	Medical Research Council (MRC)- United Kingdom		Dr. Paridhi Jha & Ms.Lali LB	Completed
<p>Description of the Project: Seed grant to undertake a feasibility testing study amidst newly trained midwives being posted in public health facilities and then impact on Quality of Maternal and new-born services and outcome. This included systematic review of available policy and guidelines on Midwifery services by an audit of maternal and neonatal deaths in facilities where midwives are posted (Pre-post analysis) and by direct interviews with women, their families and midwives to understand the acceptability and utility of midwifery. four research manuscripts have been developed using the findings, two have been submitted and two will be submitted by September 2023.</p>							
2	Psychometric validation of the Childbirth experience questionnaire -CEQ2 in Karnataka	Aug 2021- December 2022	6.97	University of Gothenburg		Dr. Paridhi Jha and Dr. Purna Chandra Sahoo	Completed
<p>Description of the Study: The study was undertaken as a community-based survey where <i>Kannada</i>-translated and digitized version of Childbirth Experience Questionnaire 2 (CEQ2) was circulated to 251 women who had given birth to at least one healthy live neonate vaginally or through Caesarean Section. Principal Component Analyses and Confirmatory Factor Analyses were performed using IBM SPSS 25 and Amos Software. The construct of K-CEQ2 mimicked the structure of the original CEQ2 with four domains: Own capacity; Professional support, Perceived safety and Participation. A manuscript reporting the findings has been submitted to Plos One.</p>							
3.	LSE International Development Department RIIF Grant: Everyday Resilience and Capacity-Building in Primary Healthcare: A study of Village Health Sanitation and Nutrition Committees (VHSNCs) in Rural India.	Dec 2021 to Dec 2022	2.99	London School of Economics		Dr.S Krishna & Dr. Shirin Madon	Completed
<p>Description of the Project: This project extends theory development by drawing on the concept of ‘everyday resilience’ as discussed in health policy and planning literature. The aim is to study how the VHSNCs can help strengthen absorptive, adaptive and transformative capacity for addressing chronic diseases as well as current and future pandemics.</p>							

4.	LSE Department of Management RIIIF Grant: Geographic Information Systems for Primary Healthcare Management in India.	February 2022 to Dec 2023	7.76	London School of Economics		Dr.S Krishna & Dr. Shirin Madon	Ongoing
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Description of the Project: This project focuses on the urgent need to make accessible timely and relevant information at PHC level for routine public health operations as well as for management during pandemic situations.

II. Projects with Indian (External)Funding

Sr. No	Project Title	Period	Budget (in Lacs)	Sponsor	Location	Key Staff involved	Status
1	To carry out Regional Analysis and assessment on working conditions and Environments for Nurses and Midwives in the south East Asian Region	18th April 2022 to 31st December 2022	20.55	WHO SEARO	Bangladesh and Nepal	Dr. Paridhi Jha Dr. Purna Chandra Sahoo	Completed

Description of the Project:

The researchers from FRHS reviewed and contextualized two standardized questionnaires: Copenhagen Psychosocial Questionnaire version III and Burnout Assessment Tool (BAT) that have been extensively used across the world in HIC- as well as LMIC (40 and 29 countries respectively). Nearly all participants reported being bullied, harassed, assaulted (physically and/or sexually) at their work place at least once in their lives. Participants who were older (≥ 45 years) were more likely to experience work challenges such as lack of career opportunities, professional advancement and often felt left-out. Participants ≤ 25 years old – especially if they were males – were more likely to face financial stress, job insecurities and lack of trust on their supervisors and colleagues. Detailed country-specific policy recommendations were also developed and shared with WHO SEARO office.

2	Concurrent Learnings on Complication Management in Maternal and New-born Care	Nov 2022-30th April , 2024	28.12	Sambodhi Research and Communications Private Limited (BMGF)		Dr. Nirmala Murthy, ,Dr.Meenakshi Jain, Dr. Roli Seth, Dr.Paridhi Jha Mr.Mahalingam	Ongoing
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Description of the Project:

Evidence suggests that annually more than half a million women —most of them from low to middle income countries (LMICs)— die due to pregnancy related complications and nearly 40 percent of neonatal deaths are found to happen either during labor or within the first 24 hours of birth. In Uttar Pradesh, multiple interventions have been advanced, targeting quality of care provisioning at public health facilities. Directed at different stakeholders and levels, some of these developed in support with development partners like Uttar Pradesh Technical Support Unit (UPTSU), include Nurse Mentoring – to improve skills and practices of staff nurses involved in labor and delivery procedures, Regional Resource Training Centre (RRTC) – involving medical colleges to support Continuing Medical Education for improved Maternal, Newborn and Child Health (MNCH) outcomes among doctors and facility health-care teams, and facilitating the Labor room quality improvement initiative LaQshya certification and support in activation of First Referral Units (FRUs) in all

block level public health facilities.

The proposed study on “**Concurrent Learnings on Complications in Maternal and Newborn Care**” is an attempt to understand the workings and derive the learnings from the set of practices and processes followed in management of maternal and newborn complications. The study will enable program managers to undertake evidence-based refinement in provisioning of services towards improving maternal and newborn care in public health facilities in Uttar Pradesh. The study in Uttar Pradesh will offer important insights and build knowledge on the sets of interventions working to address clinical complications (maternal and newborn) in public health facilities.

III. Projects with FRHS (Internal) Funding

Sr. No	Project Title	Period	Budget (in Lacs)	Sponsor	Location	Key Staff involved	Status
1	Video-based learning on “Sanitation, Hygiene, and Infection Control in Hospital	Jan 2020-		FRHS	Tested in Karnataka	Dr. Nirmala Murthy Dr. Paridhi Jha	Ongoing

Description of the Project: This 5 hours long eLearning programme, contains 10 modules on Hospital Sanitation, Hygiene and Infection Control, provides an orientation to Infection Control practices in Hospital. The scientific content for this program was compiled based on WHO guidelines, GOI’s *Kayakalp* Guidelines and LaQshya Guidelines. Each module runs for about 30 minutes, and is presented as a video. Each session starts with a pretest consisting of 10 questions, and ends with a post-test consisting of 10 questions. The results are shared with the learner. A learner getting more than 70% marks on the post-test gets certificate of proficiency. This program is aimed at healthcare providers working at any level in the hospital including nurses, midwives, physicians, lab technicians, and hospital housekeeping supervisors. One module was pilot-tested among 75 nursing students from NIMHANS College of Nursing. The result showed percent of learners getting the passing score of 70 was 52% at the pretest, which increased to 95% at the immediate post-test. The course likely to be offered by the SRM university and the TDU as a part of their regular degree program.

Free Webinar conducted by FRHS on Hospital Sanitation, Hygiene, and Infection Control. 84 students joined the webinar from College of Nursing, NIMHANS, Bengaluru and FRHS has provided them the participation certificate.

CURRENT MEMBERSHIP: RESEARCH ADVISORY BOARD, FRHS

FRHS' Research Advisory Board was formed in Dec 2018, in line with the requirements for getting licensure from Department of Scientific and Industrial Research (DSIR), New Delhi. Eminent researchers from public health, theological representative and a lay-person representing the community were invited. The current list of RAB members – four external and two internal – is shared below:

Name	Designation	Internal/External	Email Address	Contact Number
Dr. N Girish	Professor of Epidemiology, Centre for Public Health, NIMHANS	External (Chairperson)	girishn@nimhans.ac.in	9341226277
Dr. Hemanth Apte	Anthropologist, Independent Consultant	External (Member)	hamapte@gmail.com	020- 25561158
Dr. Nirmala Murthy	Founder, Foundation for Research in Health Systems	Internal (Member)	murthy.nirmala@gmail.com	080-26720135 26723937(O)
Dr. Padma Venkat	Dean, Public Health, SRM University	External (Member)	padmavenkatl@gmail.com	9482582825
Dr. Biju KC	Professor, Department of Media, Christ University	External (Member)	fr.biju@christuniversity.in	9742704212
Dr. Paridhi Jha	Director Research & Training- FRHS	Internal (Member)	paridhijha@frhsindia.org	8349192280

CURRENT MEMBERSHIP: ETHICAL REVIEW BOARD, FRHS

The Institutional Review Board of FRHS reviewed and approved all research projects undertaken by the Foundation during 2022-23. The present ERB is formed by following research experts:

Name	Email	Title	Location	Phone
Dr. Hemant Apte	hamapte@gmail.com	Chairman	Pune	09422512256
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Dr. Nirmala Murthy	murthy.nirmala@gmail.com	Member	Bangalore	09448116094

FRHS PUBLICATIONS: 2022-23

Published Research Articles:

One scientific article and one book chapter have been co-authored by FRHS researchers since August 2020. Please find below the list:

- Erlandsson K, **Jha P**, Sharma B, Bogren M. Contextual factors influencing the implementation of a new midwife education programme in India: a qualitative study. BMC Medical Education, 2022; 22:755. Available from: <https://pubmed.ncbi.nlm.nih.gov/36333775/>
- Bogren M, **Jha P**, Sharma B, Erlandsson K. Contextual factors influencing the implementation of midwifery-led care units in India. Women Birth [Internet]. 2022;(February). Available from: <http://www.ncbi.nlm.nih.gov/pubmed/35641395>
- Madon S, **Krishna S**. Theorizing community health governance for strengthening primary healthcare in LMICs. Health Policy and Planning, Published by Oxford University Press, Jun 13;37(6):706-716. doi: 10.1093/heapol/czac002. PMID: 35077543; PMCID: PMC9189612.

Manuscripts submitted:

- **Jha P**, Sharma B, Erlandsson K, Malin B. Psychometric properties of *Kannada*-translated Childbirth Experience Questionnaire 2. Plos One.
- Sowmya R, Nagpal J, Rawat S, McFadden A, **Jha P**, Sharma B, Thota S, Singh N, Marshall J, Simon A. Are Maternal and Neonatal Death Reviews a Feasible Approach to Highlight Gaps in Care: Findings from a Case Study in India (Indian Journal of Medical Research)
- Sowmya R, Nagpal J, Rawat S, McFadden A, **Jha P**, Sharma B, Thota S, Singh N, Marshall J, Simon A. Rapid review of maternal and child health indicators reported from SEAR. BMC public health

Manuscripts to be submitted by September 2023:

1. Integrating midwives in India's existing health systems: case studies from Gujarat and Telangana
2. Development and psychometric testing of a self-assessment questionnaire measuring the confidence of midwifery practitioners based on ICM's list of essential competencies (2014).
3. Development and psychometric testing of a self-assessment questionnaire measuring the confidence of midwifery educators based on WHO list of essential competencies of midwifery educators (2018).

Project Reports:

1. Report for the project titled "Building a sustainable working environment for midwives and nurses in the South –East Asia region".

Manual/Training Material/Module Development

- Digitization of FRHS' Health Monitor (2020)
- **Developing E-Learning modules on Registration of Birth Death (RBD) Act: Procedures and Rules for training registrars of birth and death**

FRHS STAFF MEMBERS: 2022-23

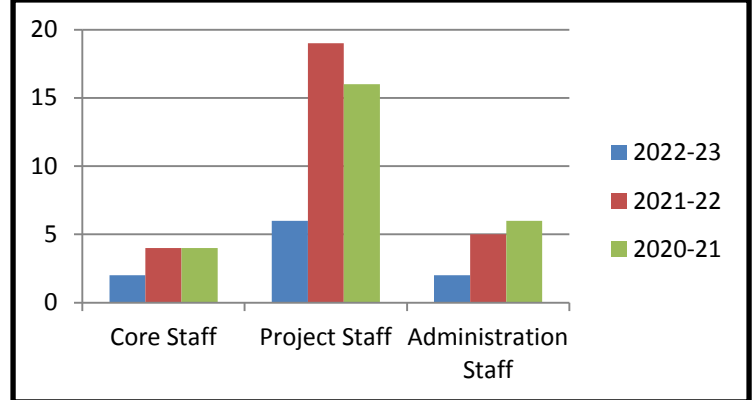
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Mr. K Lakshmana	k.lakshmana66@gmail.com	Field Staff	Bangalore	Technical Staff

FRHS INTERNS 2022-2023:

Name	Email	Location	Phone
Mr. Vignesh S	tharunvignesh0309@gmail.com	Chennai	06369183208

YEAR-WISE STAFF STRENGTH

Year wise Staff Strength				
Year	Core Staff	Project Staff	Administration Staff	Total
2022-23	2	6	2	10
2021-22	4	19	5	28
2020-21	4	16	6	26



REVENUE and EXPENDITURES 2020-2023

YEAR-WISE INCOME AND EXPENDITURE STATUS (As on March 31st 2023, 2022 and 2021)

The provisional financial audit report for the year 2022-23 is attached with this report. The financial trends of FRHS over the past three financial years (2020-21; 2021-22 and 2022-23) follow:

Revenue (in lakhs)	2020-21	2021-22	2022-23
Receipts from projects	51.51	37.35	27.72
Interest income	10.81	4.31	3.98
Miscellaneous income	0.32	0.00	0.11
Total Revenue	62.36	41.67	31.81
Total Expenses	111.17	88.81	48.83
Excess of Income over Expenditure	-48.81	-47.14	-17.02
Reserves and Surplus at the beginning of the year	205.55	156.74	109.61
Reserves and Surplus at the end of the year	156.68	109.61	92.59

SUMMARY:

FRHS – in collaboration with UGOT – was successful in its bid with World Health Organization South-East Asia Regional Office to undertake a project exploring the work environment of midwives and nurses working in maternity wards in the hospitals of Bangladesh and Nepal. The FRHS-led consortium of Indo-UK research institutes completed their MRC-funded research on documenting the quality of midwifery services as case studies in Gujarat and Telangana and initiated processes for scientific publications during 2023. FRHS-UGOT researchers led a first-of-its-kind study in Karnataka, validating a standardized questionnaire measuring women’s birth experiences. Researchers from FRHS-LSE explored the everyday resilience and capacity-building in primary healthcare in selected districts of Karnataka; and are currently engaged in studying the Geographic Information Systems for primary healthcare management in India. In 2022 FRHS researchers bid for a BMGF grant to document the midwifery initiative in India as co-applicants to IIPHG and succeeded. The other ongoing project is Concurrent Learning’s on Complication Management in Maternal and New-born Care. The proposed study on “Concurrent Learnings on Complications in Maternal and Newborn Care” is an attempt to understand the workings and derive the learnings from the set of practices and processes followed in management of maternal and newborn complications. The study will enable program managers to undertake evidence-based refinement in provisioning of services towards improving maternal and newborn care in public health facilities in Uttar Pradesh. The study in Uttar Pradesh will offer important insights and build knowledge on the sets of interventions working to address clinical complications (maternal and newborn) in public health facilities.

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