Neo-natal deaths in Dharmapuri - a fact finding mission

During the third week of November 2014 a series of neonatal deaths, unusually higher than expected, were reported to have taken place in the Dharmpuri government district hospital, Tamilnadu. This issue was discussed in the media, civil society and the Tamil Nadu state legislative assembly in a big way. As a health group, constituents of the *Makkal Nalavazhvu Iyakkam* (MNI–People's Health Movement, Tamilnadu) decided to appoint a committee with credible members and visit the site to enquire into the fundamental problems underlying these deaths. The visits were made on 14th and 15th December 2014.

The members of the fact finding team were Dr. P. Chandra, Dr. C.S. Rex Sargunam, Prof. K. Shanmugavelayudham, Prof. P. Raja Manickam, Mr. M. Shankar, Mr. K. Ameerkhan.

Representatives of member organisations of Dharmapuri Voluntary Agencies Network Initiative (DHVANI), Ms. Shanthi, Ms. Lakshmi, Ms. Sudha and Mr. Velliyangiri as well as other individuals Ms. T. Sharanya, Mr. D. Suresh, Dr. P. Naresh Kumar.

The team met 12 mothers of children who had died and visited Dharmpapuri district hospital. The team divided into two and collected facts and information about the deaths. The following are the joint observations of the entire team.

THE COMMONALITIES:

- All the mothers were from rural poor families and supposed to be 'at risk' mothers (Anaemic etc).
- Most of the children were low weight at birth
- They were registered at the respective Primary Health Centres (PHCs) through the Village Health Nurse (VHN) as per records
- They had regular check-ups as per records for blood pressure, blood & urine tests and scan/ ultrasound
- Most deliveries were carried out in the respective PHCs, who referred them to the district hospital. A few children were born in the district hospital.
- No information on the infant's health was shared with their mother or relatives during the children's admission in the Intensive Care Unit (ICU)
- JSY (Janani Suraksha Yojana) money was distributed after delivery in most cases.

GREY AREAS:

At the Village level:

- VHN and Anganwadi worker's role was found inadequate during the pre-natal period though they call pregnant women for regular monthly medical check up
- The Village Health and Sanitation Committee does not find any place in mothers care and even in regular functioning of health facilities
- Though the visited VHNs are staying in two Health Sub-Centres, all the time VHNs are at PHC and busy with other works
- Supply of nutritional supplement by the Anganwadi is not regular due to problems on both sides
- Distribution of money from the Dr. Muthulakshmi Reddy scheme is erratic and found corrupt
- The role of the health sub centre was found to be nil in most of the cases.

At the PHC level

- Scan facilities at PHC are inadequate, and the doctor's observations and recommendation are lacking.
- Though the mothers were given Registry of their conditions the doctors were not verifying it. Entries were not made at the time of observations.
- Though scan was done, weight of the baby is not calculated and found out
- Late arrival of the ambulance from District Hospital
- One mother has taken a private scan
- Quality of antenatal care is not optimal.

At the District Hospital level

- No adequate facilities for infant care. More than one baby was put in one unit.
- No adequate doctor and other medical personnel in ICU which was mostly run by students
- One mother said that when they wanted to take the child to a private institution they recommended a particular doctor
- Hygienic practices were not followed with visitors.
- Mothers were not allowed to see the baby. Though the child was capable of mother's feeding they were not allowed to feed. But they were told to extract milk and that milk was not fed to their children
- Those who paid money to the security personnel were allowed to see the baby
- Though the children were in ICU the mothers were not given care during that period. They were lying in the verandah and on the floor of the ward
- All mothers were asked to purchase "*Panju*"- the infant diaper every day
- Some mothers have spent nearly Rs.20,000/= towards their stay and their families during the care of the infant.

CONCLUSIONS AND SUGGESTIONS:

- Though the Primary Health Care system is well set, it is not working effectively from the Village level to District – there is need for strengthening with adequate staff and monitoring of care
- Nutrition status of the mothers should be monitored and strengthened.
- The at risk mothers were not given the required attention at the Health Sub Centre and PHC. Though the institutional deliveries have increased there is no

plan for at risk mothers which led to infant deaths at the institution. Analysis of at risk mothers must be done at PHC and DD level. Must give more focus on safe delivery and survival of the infants.

- PHC doctors must see the pregnant mothers and monitor and guide the staff and families.
- PHC must be provided with the scan which will give the weight of the baby and enable the taking of appropriate actions
- District Hospital infrastructure and manpower is inadequate. Need a massive improvement in infant units
- A violation of mother's rights and patients rights occurs at all levels.
- Corruption at different levels starting from Dr. Muthulakshmi Reddy Scheme to tips to the security personnel at the district level. This needs to be changed immediately.