





ADHUNA Quarterly Newsletter

Advancing

Delivery of (Quality)

Healthcare through

Upgraded

Newborn (and Intrapartum Care)

Approaches

In this newsletter

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ADHUNA completes a year

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Foreword

Dr. Sunita Tandulwadkar President FOGSI. 2025

Dear Partners and Colleagues,

It is my great pleasure to address you as Project ADHUNA celebrates its first anniversary, marking a year of significant milestones and transformative work in maternal and newborn health.

Under FOGSI's leadership, the project has made substantial progress in capacity building, successfully onboarding a large number of private health facilities and training hundreds of dedicated doctors and nurses across our target districts. This massive scale-up is a testament to the dedication of our members and the successful implementation of our strategic roadmap. To ensure our knowledge and updates are widely shared, I am delighted that Project ADHUNA's social media handles are now fully live, serving as a comprehensive repository of evidence-based practices and project developments. As we move forward, I urge all FOGSI members to continue championing ADHUNA, ensuring the project sustains its momentum in accelerating quality healthcare across the private sector in India.

I look forward to yet another exciting quarter with ADHUNA's champion voices, launch of our social media handles and intense field level engagement to ensure the best care for mothers and newborn.

Best Regards,

Dr. Sunita Tandulwadkar

Dr. Suvarna Khadilkar Secretary General, FOGSI, 2025

Dear Partners and Colleagues,

Project ADHUNA is moving miles on the field with our District Coordinators

working tirelessly to onboard private health facilities on to the project and delivering on the 'touchpoints' across all onboarded facilities. In just three months we have onboarded several health facilities on to ADHUNA and they are receiving periodic visits by our district coordinators, essential IEC material on quality of care, access to innovations in intrapartum and newborn care advocated under ADHUNA, and participation in baseline/endline studies by sharing information on their practices and challenges.

Various 'touchpoints' at the health facilities include EMOTIVE wall stickers placed in their labour rooms, health communication posters and suggested social media posts on important health related days.

In the coming months we hope to onboard the target number of health facilities and continue engaging them to adopt the best practices to improve the quality of care they offer to mothers and their newborn.

Wishing the team all the very best.

Best regards,

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Dr. Suvarna Khadilkar



Dr. Jaydeep Tank Project Lead ADHUNA, Imm. Past President, FOGSI

Dear Partners and Colleagues,

I am happy to share that ADHUNA is showing steady progress in all its outcome areas in this quarter.

We have completed CPD 1 sessions on improvement in quality of intrapartum and newborn care in nearly all the districts that ADHUNA is working in covering more than 3000 healthcare professionals from small private hospitals. The feedback from doctors and paramedic staff has been very encouraging and we are taking into account their suggestions for the next round of CPDs.

A key objective of ADHUNA is to build FOGSI's voice to communicate and advocate for the quality of maternal and newborn care and we are doing this through the ADHUNA Champion network consisting of FOGSI leaders and key state representatives. This vital initiative is enabling doctors to build a strong collective voice through an enhanced social media presence. The upcoming months will bring forth learnings from the field collected through the baseline survey and from CPD feedback, and help us engage more effectively with the private health practitioners as we design our next learning sessions on managing prematurity and newborn care.

Best regards,

m/al

Dr Jaydeep Tank

ADHUNA completes a year!



It has been one year since Project ADHUNA began its activities and we are pleased to report that several major milestones have been completed in this time. The project has been activated in all 29 districts of UP, Bihar, MP and Odisha, and demonstrated significant progress across several functional areas, including setting up of a robust execution team, capacity building of more than 3000 healthcare providers, digital dissemination, and onboarding more than 1400 small private health facilities on to ADHUNA to support them in improving the quality of intrapartum and newborn care.

A Robust Execution Team is in Place



6 member Program Enablement Unit (PEU) based in Mumbai FOGSI office, leading the project.



14 experienced District Coordinators spread across the four states covering between 1 to 3 districts each.



16 ADHUNA State Coordinators supporting ADHUNA in the four states.



75+ ADHUNA Champions onboarded to become FOGSI's voice advocating for women's health.

Capacity Building and Technical Assets Created



30 CPDs with 150 learning hours delivered across all districts



1300+ OBGYNs/ Other Doctors trained



1900+ Health Facility Staff trained (nurses, pharmacists, etc.)



6 Knowledge Products on best practices, survey findings, technical specifications, etc.

Ongoing Dissemination and Field Activities



1400 (and ongoing)
Private Health Facilities
Onboarded



Weekly Touch Points at every health facility



Regular updates on district level WhatsApp groups



5 Active Social Media handles for dissemination



4 Quarterly Newsletters published

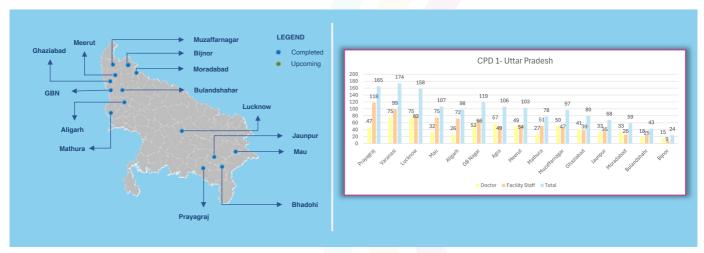


16 CPD modules published on ADHUNA's YouTube Channel

Focus this quarter

(3-!)

CPDs in Uttar Pradesh





Doctors' hall

Facility staff hall

Bijnor

	Date of CPD: Venue:	July 25, 2025 JVS Resort, Bijnor
	External faculty	Dr. Priyanka Garg and Dr. Anshu Raina
	Chairpersons and Panellists	Dr. Alka Bishnoi, Dr. Nirupama Chaudhary, and Dr. Beena Singh
	Moderators & Faculty	Dr. Manju Prabhakar, Dr. Purnima, Dr. Divya and Ms. Tanika Chandna
	Feedback from the society	"The CPD is much appreciated should also address the Health Care Professionals in the periphery as well."

Ghaziabad

Date of CPD: Venue:	August 12, 2025 Hotel Fortune District Centre, Ghaziabad
External faculty	Dr. Archana Verma and Dr. Ritu Khanna
Chairpersons and Panellists	Dr. Alpana Agarwal, Dr. Manisha Agarwal, Dr. Chhaya Goyal, Dr. Isha, Dr. Smitee, Dr. Parinita, Dr. Himalee, Ms. Khushi, Ms. Priyanka, Ms. Sakshi, Ms. Nisha, Dr. Kirti Gupta
Moderators & Faculty	Dr. Mansi Chaudhary, Ms. Monica Joseph and Ms. Tanika Chandna
Feedback from the society	"The sessions were interactive and engaging. Liked and appreciated by the facility staff as well."



Doctors' hall



Facility staff at the EMOTIVE drill station

Second CPD in Bihar for further engagement





Having completed the initial CPD -1 session in all 29 districts, our focus has shifted to maximizing outreach and onboarding of health facilities to ADHUNA. With feedback from the on-ground team and the State Coordinators for wider engagement in select districts, a second CPD session is being organised in certain areas to widen our reach and onboard more facilities to ADHUNA. The first Patna CPD was conducted in late 2024 and we carried out a second session in August 2025 which was well-attended and planned under the guidance of our Bihar State Coordinators.

Patna

Date of CPD: Venue:	31 August 2025 Hotel Lemon Tree Premier, Patna
External faculty	Dr. Abha Rani Sinha and Dr. Meena Samant
Chairpersons and Panellists	Dr. Jyoti Agrawal, Dr. Minie Anand, Dr. Monika Anant, Dr. Shradha Chakhiyar, Dr. Pragya Mishra Choudhary, Dr. Nibha Mohan, Dr. Rajani Priyanka, Dr. Neelam, Dr. Nimisha Agrawal, and Dr. Srishti Sinha.
Moderators & Faculty	Dr. Pramila Modi, Dr. Kumkum Sinha, Dr. Vinita Singh, Dr. Himanshu Roy, Dr. Manju Gita Mishra, Dr. Alka Pandey, Dr. Rita Kr. Jha, Dr. Supriya Jaiswal, Dr. Pragya Mishra Choudhary Dr. Nibha Mohan, Dr. Mukta Agrawal, Dr. Zarin Rahman and Ms Tanika Chandna.
Feedback from the society	"The CPD done at Patna was a grand success where the senior members and Juniors of Patna Obstetric and Gynaecological Society participated enthusiastically. The Paramedics were in large numbers and they actively participated, learnt and happily received ADHUNA Certificates".



Doctors' hall



Facility staff hall

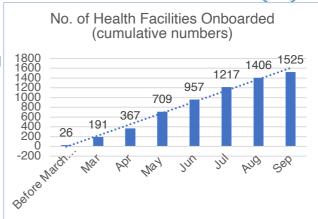
Second CPDs are also being planned for Lucknow and Gautam Buddha Nagar districts in Uttar Pradesh in the next quarter. These will be held in areas such as, Bahraich near Lucknow and Greater Noida area, that fall under the local FOGSI societies but did not have much participation in the first round of CPDs conducted in late 2024.

Onboarding Hospitals & Field Level Touch Points





Onboarding of health facilities to ADHUNA is a critical activity on the field that requires both skill and persistence on part of the District Coordinators. We are pleased to share that at the end of September around 1400 health facilities - close to 65% of the target - have been onboarded onto ADHUNA. This has been possible with the support and guidance of our leadership, State Coordinators and Champions. We are aiming to complete our target by year end.



ADHUNA District Coordinators are actively engaging with the onboarded health facilities, meeting doctors and nurses to hand over CPD certificates, displaying the WHO **EMOTIVE Bundle sticker in their labour rooms** and encouraging the use of the Labour Care Guide (LCG). They are also supporting the monitoring partner, FRHS, with scheduling interactions with the doctors and nurses to understand current practices and challenges in intrapartum care delivery.

Highlights



100% of the ADHUNA CPD attendees have received their certificates.



1580+ EMOTIVE stickers have distributed in 29 districts



20 LCG are being sent for pilot for feedback fro our districts.



Social Media Channels

We post weekly twice across all our handles to update our community on essential health information, celebrate health related days, report on CPDs and national and international events where ADHUNA was showcased.

- · Hosts the online CPD Modules
- 375 total collective views and an impressive +45% growth in engagement in the last one month.



Highest engagement on 'IV-FCM Therapy for Maternal Anemia'



• 1,415 collective views, nearly half of which (~46%) are from non-followers, proving that the content is gaining new traction and bringing fresh eyes to Project ADHUNA's mission.



• 2,211 organic impressions



Growing followers and interaction on videos



ADHUNA Showcase



Gates Foundation, Global Health Strategies and ADHUNA team members at Colombo. (Centre) The Marketplace display on anaemia and PPH management



Dr Jaydeep Tank presented ADHUNA's work in Odisha conference PRACHEECON

Nourishing South Asia Regional Conference on Reducing Anaemia in Adolescent Girls and Women in Colombo, Sri Lanka

- ➤ Project ADHUNA recently made a significant ➤ We are happy to share that a short overview impact Colombo on 9-11 July, 2025. Our participation, facilitated by the Gates Foundation and Global Health Strategies, was a key moment to showcase our innovative work at the event's Marketplace. Our stall stood out by highlighting ➤ the critical link between postpartum haemorrhage and anaemia-a connection overlooked in broader discussions. We presented a comprehensive approach that tackles both bleeding and anaemia simultaneously, drawing significant attention from global health leaders.
- Project ADHUNA's stall at the Nourishing South Asia Conference drew significant interest. Dr. Lisa Rogers of WHO discussed our integration of the E-MOTIVE bundle and calibrated drape designs, expressing interest in field-level insights for upcoming PPH guidance. Dr. Chris Elias from the Gates Foundation also viewed our drape Prof. K.A.C. innovations. Wickramaratne suggested we engage with Sri Lankan stakeholders to adopt drapes in national including Other organizations. protocols. UNICEF, Nutrition International, Evidence Action, and PATH, expressed interest in knowledgesharing partnerships.

PRACHEECON 2025, Bhubaneshwar

- video of Project ADHUNA was showcased at PRACHEECON 2025. First International Conclave held in Bhubaneswar, 18-20 July.
- This gave us an opportunity to introduce the project to a wider audience of healthcare In the "LEGEND SPEAKS" professionals. podcast hosted by Dr. Maya Padhi, Dr. Jaydeep Tank, Project Director ADHUNA highlighted the project's vision and introduced our District Coordinator for Odisha, Dr. V. Nikhila Priya as a moment of recognition and encouragement. The event also served as a valuable platform to connect with doctors and share ADHUNA's work through our collaterals.



ADHUNA Showcase







ADHUNA team at the Gates Foundation Office in New Delhi

FEMMTEK - V, The International Conference on Reproductive Medicine & OBGYN.

> Project ADHUNA participated in a dedicated 60- > In a recent meeting, Project ADHUNA was minute Panel Discussion titled "Strengthening Maternal Health in the Private Sector in India through Strategic Partnerships" on 3rd August **2025** in Mumbai.

- > The session, moderated by Dr. Sunita Tandulwadkar, President of FOGSI, brought together a distinguished panel of experts, > The discussion centered around the work that is including: Mr. Rizwan Koita (Koita Foundation), Dr. Bhaskar Pal (FOGSI President-elect 2026), Dr Madhuri Patel (FOGSI President Elect Dr. Vikas Yadav (Gates Foundation), Dr. Amit Shah (JHPEIGO) and Dr. Jaydeep Tank (Project Director, Project ADHUNA).
- > The discussion explored various facets of private sector participation that FOGSI has spearheaded, including some of the work around digital tools. The session highlighted how digital tools can be used for various purposes, including managing memberships, facilitating trainings, and improving clinical practice.
- > The ADHUNA team's participation focused on the > Our quarterly newsletters was shared with the project's strategy and its on-the-ground implementation. The panelist from ADHUNA discussed: How the project has adopted a digital lens in its execution, using tools like monitoring dashboards and online learning modules. The crucial role of partners like GHS, Sattva, and MEL in technology with clinical bridging relevance.

Showcase of Project ADHUNA with PAC team from the Gates Foundation

- presented to Dr. Sanjana Bhardwaj, Deputy Director οf Policy. Advocacy Communications (PAC) and her team from Gates Foundation, in New Delhi on September 3, 2025. The briefing covered ADHUNA's strategy and team, and the work done in the last one year.
- being done in collaboration with the Global Health Strategies Team on communication and advocacy, which is helping to amplify the project's impact. Amplifying ADHUNA's work across national and international forums was discussed, and the design of the collaboration was explained would allow hub that conversations between specialists for better maternal and newborn outcomes in India.
- > We also talked about sustaining the changes being advocated under ADHUNA by building strong connections with FOGSI, engaging key leadership, and championing local engagement.
- group as well and invoked a lot of interest in the range of activities being implemented under ADHUNA to engage the private health sector.





Advancing Quality of Care in Private Health Facilities: IDF's Ongoing Study

This quarter (July–September 2025), Ipas Development Foundation (IDF) deepened its Quality of Care (QoC) work in private-sector RMNCH facilities under the ADHUNA project, generating evidence on the most impactful pathways for engagement. From mapping provider perspectives to segmenting facilities with the highest potential for change, IDF has progressed toward actionable strategies to strengthen maternal and newborn health outcomes.

Select findings from the recently completed qualitative gap-filling initiative:

- Larger private health facilities (with more than 30 beds) tend to follow SOPs and protocols more consistently than other facility types.
- Mid-sized facilities focus more on personalized clinical care and continuity of care.
- On parameters related to referrals, there are no standard protocols or practices across facilities.
- Availability of transport is mostly limited to large private hospitals, and the major reasons for referrals are mothers and babies requiring critical care, vaginal bleeding, and PPH—similar patterns were observed in our quantitative study.
- In the case of anemia management, most large and mid-sized facilities provide treatment with varying dosages the most commonly used dosage was 500 mg FCM, followed by 1000 mg, and in some cases, split dosages (e.g., 1000 mg + 500 mg) were administered based on body weight, timing of delivery, and Hemoglobin levels.

IDF has also identified priority facility segments with the greatest potential to improve RMNCH quality of care (QoC) across four intervention states Uttar Pradesh, Madhya Pradesh, Bihar, and Odisha. Using a logical weight-based scoring model built on 29 indicators from Phase 1–2 gap-filling quantitative and qualitative data in the QoC landscaping, the analysis indicates that mid-sized facilities (10–30 beds) offer the highest impact potential, followed by large facilities (with more than 30 beds). On parameters related to facility infrastructure and human resources, both facility types scored similarly with minor variation. However, on parameters related to access and equity in receiving RMNCH services and the intention to improve the quality of RMNCH care, mid-sized facilities scored higher. Moreover, mid-sized facilities are spread across geographies—from urban to semi-urban to rural areas—while large facilities are mostly concentrated in urban pockets. These findings provide a clear roadmap for targeted engagement under the ADHUNA framework.

UPCOMING: Review of Quality of RMNCH care in AB PM-JAY empanelled facilties:

In 82 facilities across four states and 12 districts, the study will identify:

- enablers and barriers to quality,
- assess state-level variation, and
- document good practices and scalable interventions within AB PM-JAY facilities.

Qualitative data collection is complete, and analysis is underway. We will share insights and key findings in the next newsletter.

An exhaustive reference document basis secondary review of AB PM-JAY that consolidates available research and evidence.

IDF has also begun on assessing the feasibility of QoC indicators identified through earlier reviews, with facility visits planned to validate their practical applicability for final recommendations.





Project Baseline Activity

As the MEL partner for the ADHUNA project, FRHS advanced its efforts this quarter to complete the baseline assessment across the remaining project states. Building on the momentum of previous months, the team conducted extensive interviews with doctors and facility staff to capture a comprehensive picture of intrapartum maternal and essential newborn health practices, as well as facility preparedness. To ensure systematic and high-quality data collection in Odisha, a dedicated state team was constituted.

These visits proved highly valuable, serving not only to document clinical practices and infrastructure but also to provide a space where providers could share their experiences and perspectives as inputs to the project. In addition to structured data, the team gathered nuanced insights through focused discussions and open-ended questions on key ADHUNA thematic areas. This combination of quantitative and qualitative information offers a rich understanding of existing gaps and opportunities to strengthen the quality of care for mothers and newborns.

Through onsite visits to clinics and hospitals, as well as virtual engagements, FRHS has now completed the baseline assessment across all 29 ADHUNA project districts. In total, 303 facilities were covered, with 342 doctors and 367 facility staff participating in in-depth discussions.



Some Preliminary Findings from the Baseline Survey:

"There is a clear preference for IV FCM over other treatment options, as doctors find its results better; 92% reported using it to treat anemia during the 2nd and 3rd trimesters of pregnancy."

"Many doctors routinely use Carbetocin for prevention of PPH, with 55% giving it for the Active Management of Third Stage of Labour."

"There is an emerging need to focus on facility staff in terms of capacity building (specifically for identification and management of emergencies)"

"Early initiation of breastfeeding is widely recognized and practiced across all project districts, with nearly 85% of doctors reporting that women start breastfeeding within the first hour after a vaginal delivery."





Glimpses from discussions with doctors and facility staff during baseline activity



Voices From the Field:

- "Learning about Carbetocin and its effectiveness is encouraging. We're eager to adopt it in our practice."
- Doctor, Gaya (Bihar)
- "For the first time, we nurses were part of such a drill (mock drill from CPD). It made us feel recognised."
- Nursing staff, Agra (Uttar Pradesh)
- "Including Jaunpur in this project means rural districts like ours will also see better maternal and child health outcomes."
- Doctor, Jaunpur (Uttar Pradesh)
- "Calibrated drapes use for high risk pregnancies looks highly useful. It will help me make prompt decisions and reduce complications."
- Doctor, Bhopal (Madhya Pradesh"

Dashboard Updation and Maintenance

Real-time monitoring through the ADHUNA dashboard was further enhanced this quarter to improve visualization and utility. The upgraded dashboard now allows more granular tracking of CPD outcomes, thematic sub-areas, and district-and state-specific interventions. In parallel, the MEL team undertook rigorous data validation and analysis to ensure accuracy and generate actionable insights that inform program planning and decision-making.

Upcoming Priorities

- Collate and share the insights from the baseline assessment with ADHUNA partners.
- Refine processes and tools to better track project progress and strengthen ongoing engagement with clinics and hospitals.
- Initiate a series of deep-dive learning activities to explore priority themes in greater detail – for sharper insights to fine-tune strategies and further enhance the quality of implementation.





Global Health Strategies

Between July and August, Global Health Strategies (GHS), as the communications and advocacy partner for Project ADHUNA, continued to strengthen the project's visibility and engagement with clinicians across the four implementation states. The focus during this period was on building communication capacities through Continuing Professional Development (CPD) sessions, shaping the health communications training at the next phase of the CPD sessions, and laying a strong foundation for wider public and professional outreach in the months ahead.

Strengthening capacities through CPDs

As part of ADHUNA's capacity-building efforts, GHS conducted dedicated health communication sessions at the three CPDs held in Bijnor, Ghaziabad, and Patna. These sessions, delivered under both the CPD first phase and the refresher CPDs, were designed to equip both doctors and paramedical staff with practical skills to communicate effectively, primarily with patients, peers, and policymakers. For doctors, the sessions emphasized the role of advocacy in advancing maternal and newborn health, the importance of credible, evidence-based communication, and the growing relevance of social media as a professional advocacy tool.

For facility staff, the training focused on interpersonal communications, covering verbal and non-verbal cues, empathy, and patient interaction, to enhance the overall patient experience and quality of care.



GHS team taking the session on health communication at the

Insights from post CPD assessments

Post-session assessments conducted by FRHS indicate a strong grasp of key principles of health communications across both doctors and paramedic staff who attended the CPD.

Doctors (N=467) achieved an average score of 79.1%, reflecting high awareness of how advocacy and clear messaging support better health outcomes.

- ➤ Over 90% correctly identified that effective messages must be simple, relatable, and consistent.
- ➤ 94% recognized social media's importance in health communication and advocacy.
- ➤ 54% correctly associated advocacy with influencing policy and social change through evidence-based information.
- State-level performance was strongest in Madhya Pradesh (81.8%), followed by Bihar (78.2%).

Facility staff (N=1,163) scored an average of 73.1%, showing good understanding of interpersonal communication and soft skills.

- > 71% correctly identified non-verbal communication as "very important."
- ➤ 78% demonstrated strong awareness of soft skills such as eye contact, tone, and gestures.
- Odisha (80.2%) and Madhya Pradesh (72.8%) showed particularly high scores, indicating improved comprehension of effective communication at the facility level.

These findings reaffirm that communication-focused modules are resonating well with both clinical and nonclinical cadres, setting a strong foundation for the upcoming capacity-building exercises under the next phase of CPDs.



Global Health Strategies

Preparing for CPD 2.0

As the project inches closer to the second phase of CPDs, GHS is preparing the session on communications around Kangaroo Mother Care (KMC), which will a focus area in the upcoming trainings. The session will focus on equipping providers to effectively counsel and motivate families to initiate and sustain KMC, through empathetic, culturally sensitive, and consistent communication. Preparations are underway to develop facilitator materials and patient-facing IECs that blend technical accuracy with compassion, ensuring providers are confident in translating clinical recommendations into everyday care practices.

Collaboration Hub

The Collaboration Hub is envisioned as a shared platform unifying the voices of professional associations and partners across the maternal and child health ecosystem. By consolidating knowledge and fostering collaboration, the Hub will strengthen the collective voice of professional bodies, align messaging, and scale proven solutions.

Following consultations on June 18, July 21, and October 3, 2025, GHS advanced preparations for the Collaboration Hub. There is a revised concept note which outlines a phased plan spanning across consensus-building, prototype design, and scale-up, along with a proposed governance model and sustainability framework. The host organization for the Hub remains to be finalized, with the option of establishing an interim secretariat in the following phase, as per the plan.

To inform this design, GHS has reviewed 11 comparable platforms (including AlignMNH, PMNCH, and Learning4Impact). identified practical features such as member-led governance, resource libraries. communities of practice, and highlighted gaps in practice for such networks, like limited interactivity and fragmented association efforts. These findings have been consolidated in the mapping matrix and scoping note. As next steps, GHS will convene a small-group convening with priority associations to validate the concept, confirm focus areas, and outline provisional roles, followed by development of a clickable prototype (microsite) and a larger stakeholder consultation for sign-off.

Convenings and Communications Activities

For FOGSI's upcoming Annual Presidential Conference (November 14–16, 2025, Pune), GHS has conceptualized **a panel discussion to engage parliamentarians**, MoHFW and state officials, FOGSI leadership, and ADHUNA partners n scaling evidence-based maternal health innovations: E-MOTIVE for PPH, IV-FCM for anaemia, and newer postpartum contraceptives, drawing on district-level lessons and aligning next-phase priorities.

Additionally, a Vox Pop is planned on the sidelines of the panel discussion on November 15. This activity will engage champions and other attending doctors to get their perspectives on issues and innovations related to maternal health, with short interviews edited into reusable assets for the project and for social media and training purposes.







Social media presence and digital products

On digital outreach, the team supported PEU to set up official ADHUNA accounts across five platforms—Facebook, X, Instagram, YouTube, and LinkedIn—and prepared a social media content calendar covering July—December 2025 to ensure steady, consistent messaging from the project handles. To support field communications, GHS designed four IECs on IV-FCM and maternal anaemia management, along with the position papers on DMPA-SC and subdermal implants. Additionally, the team also supported the Anaemia Conference in Sri Lanka with background material and event posters aligned to programme priorities.

Champion engagement

Building on the inaugural champions' call in June 2025, GHS organized a second session, led by Dr Saritha Nair, Head, Policy and Communications, Indian Council of Medical Research. The session focused on how clinicians can use social media to build a credible professional presence and amplify evidence-based messages aligned with ADHUNA's goals. The exchange drew a lot of interest and follow ups.



Screenshot of ADHUNA Champions on call with Social Media Expert

What's coming up next quarter (Oct-Dec 2025)

- ➤ Refresher and Pilot CPDs (select districts): Deliver health communications sessions at refresher CPDs to reinforce core modules and conduct pilot CPDs to test the KMC communication session (GHS-led), and gather feedback.
- ➤ Small-group meeting Collaboration Hub: Convene priority associations to validate the concept, confirm initial themes, and outline provisional roles; inputs will inform prototype and broader stakeholder consultation.
- ➤ White paper launch at the Presidential Conference: Release the whitepaper on 'Emerging Technologies in Fetal Monitoring' that maps current and near-term tools (including digital/Alenabled approaches), evidence gaps, and policy/innovation pathways for India.
- ➤ Video conversation (FOGSI doctor × influencer) A living-room style discussion on why respectful care matters, timely recognition of PPH (E-MOTIVE), treating anaemia with IV-FCM, and simple contraceptive choices after birth (DMPA-SC, subdermal implants).
- ➤ Radio engagement with state coordinators: Use community and commercial radio (local languages) to: raise awareness on IV-FCM for anaemia and the E-MOTIVE bundle for PPH; normalize PPFP/PAFP with simple myth-busting; and position FOGSI champions/state coordinators as trusted voices translating clinical guidance into clear, relatable messages for women, couples, and youth in focused districts.





Strategy Workshop Led by Sattva - An Opportunity to Pause and Review

As a part of the ADHUNA team from the very beginning, Sattva has played the critical role of program steering. Sattva's efforts have been focused on bringing together the various program threads, owned by each partner, towards enhancing project ADHUNA's outcomes. This is done through a rigorous governance and tracking routine while looking at program data against the operational realities of the project.

Sattva conducted a strategy workshop with Dr Jaydeep Tank and the PEU team to pause and reflect on ADHUNA's activities and achievements so far, and plan towards optimizing outcomes and impact that the project has already created.

The session was designed around three focus areas:

- Reviewing program data and looking at pathways to enhance the outcomes further
- Furthering the adoption of practices that are ADHUNA's focus
- ➤ Planning towards sustaining ADHUNA's practices and outcomes

The session featured the Sattva and PEU teams reflecting on close to one year of program implementation, putting on the strategy hat & whiteboarding together. The group aligned on the following areas of focus for ADHUNA's next phase:

- Tracking important correlations in project data on an ongoing basis
- > Furthering adoption of practices in the areas of calibrated drapes, IV FCM and family planning
- > Pathways for sustainability that will be pursued in parallel with program implementation

Sattva will conduct a similar productive session with the full group of partners in the upcoming months.



Sattva with the PEU and Dr Jaydeep Tank at the strategy workshop in Mumbai

Looking ahead

(3!)

With one year under our wing, ADHUNA has several activities planned over the next few months across capacity building, operations and digital outreach. Future efforts will include planning for CPD 2 along with our faculty and District Coordinators. Onboarded facilities are being monitoring routinely by our teams and partners, and various touch points have been planned to strengthen knowledge and practice on quality of care. These include webinars, supplementary learning opportunities, IEC material, clinical tools, calibrated drapes, and an ADHUNA mobile app to support areas like EMOTIVE and FCM dose calculator.



ADHUNA will also have its own website along with a unique portal for medical practitioners to undertake the certified online CPD. For continued learning we are also working with external partners to organize supplementary learning opportunities for our cohort of learners in small private hospitals.

In my upcoming year as FOGSI President in 2026, I am looking forward to many more milestones under ADHUNA and taking forward FOGSI's commitment to improve quality of maternal and newborn care in private health facilities in our project areas.



Dr. Bhaskar Pal FOGSI President Elect, 2025



CPD 2: The next round of CPDs will focus on prematurity and newborn care - the learning material is being curated and readied for the ToT and pilot CPD sessions.



Touch points with ADHUNA onboarded facilities: Dissemination of tools (such as Labour Care Guide) and distributing IEC posters on areas such as IV FCM, Family Planning, Anaemia, etc.



ADHUNA Website and Digital Tools: ADHUNA microsite will now become a full-fledged website, with access to CPD programs with certification and an innovative FCM dosage calculator.



Small Group Webinars: Periodic online tutorials are being planned for our districts on specific need-based topics, led by our Master Trainers.



National/ international showcase: ADHUNA will be present at the XXV FIGO World Congress of Gynecology and Obstetrics at South Africa from October 5-9, 2025 & FOGSI Presidential Conference in Pune on November 15-16, 2025.



Contact Information

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For more information on Project ADHUNA please visit our

website: https://www.fogsi.org/project-adhuna/

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