



Janani Suraksha Yojana (JSY)

State Institute of Health & Family Welfare,
Jaipur



JSY

- A safe motherhood intervention, replacing the “National Maternity Benefit Scheme”, under NRHM
- 100 % centrally sponsored
- Integrates cash assistance with delivery & post-delivery care.



JSY: Vision

- To promote Institutional Deliveries
- To reduce overall
 - Maternal Mortality Ratio
 - Infant Mortality Rate



JSY: Strategy

- Early registration
- Identification of complicated cases
- 3 ANC & PNC visits
- Organizing referral services and transport
- Convergence with ICDS - involving AWW
- Transparent & timely disbursement of cash
- 24 X 7 delivery services at PHC
- Making FRUs functional
- Building partnership





JSY: Key features

States/UTs classified as:

- Low performance States (LPS)
 - States covered- 10
 - 8 EAG states
 - Assam
 - J& K
- High Performance States (HPS)
- Cash assistance linked to ID
- Incentive to ASHA



JSY: Key features

- Assistance for Caesarean Section – Rs.1500/-
- Compensation payment for Tubectomy/Laparoscopy
- Disbursement of cash assistance
- Partnership with private sector
- Provision to meet administrative expenses



Role of ASHA

- Identify pregnant woman
- Facilitate registration
- Assist in obtaining BPL certification
- Provide/help for 3 ANC
- Counsel for ID
- Organize delivery care
- Counsel for initiation of breast feeding
- Assist immunization of new born
- Motivator of family planning



JSY: Key features

- Tracking Pregnancy
- Micro birth plan: Informing mother about
 - Inform dates of 3 ANC & TT Injection (s) and ensure these are provided,
 - Identify the health centre for all referral,
 - Identify the Place of Delivery,
 - Inform expected date of delivery.
- Cash assistance
- Assistance for Home delivery
- Private institutions accredited
- Monitoring & Feedback mechanism



- Cash assistance also given for deliveries at accredited pvt. Institutions, but the beneficiary has to pay the total cost
- No incentive for ASHA for accompanying to pvt. Institution
- For home delivery cash assistance is 500/- in rural areas and in urban areas only BPL card holders are give the amount



JSY: Eligibility for cash assistance

LPS States	All pregnant women delivering in Government health centres like Sub-centre, PHC/CHC/ FRU / general wards of District and state Hospitals or accredited private institutions
HPS States	BPL pregnant women, aged 19 years and above
LPS & HPS	All SC and ST women delivering in a government health centre like Sub-centre, PHC/CHC/ FRU / general ward of District and state Hospitals or accredited private institutions



Scale of assistance for ID

Category	Rural Area		Total	Urban Area		Total
	Mother's Package	ASHA's Package	Rs.	Mother's Package	ASHA's Package	Rs.
LPS	1400	600	2000	1000	200	1200
HPS	700		700	600		600



Cash Payments under JSY

- To expectant mother
 - All payments in one installment (except BPL)
 - Responsibility of disbursement-ANM / ASHA
- To ASHA or equivalent worker
 - In 2 installments
 - Advance
 - Balance in 2 installments
 - 50% on discharge of JSY beneficiary
 - 50% after one month - (PNC, BCG, New born registration)
- Cause of delay to be dealt seriously
- Display of names of JSY beneficiaries



JSY: Special approach for LPS

- Age restriction removed
- Restricting benefits of JSY up to 2 births removed. In other words, the benefits of the scheme are extended to all pregnant women in LPS states irrespective of birth orders.
- No need for any marriage or BPL certification provided woman delivers in Government or accredited private health institution.



JSY: ID performance

(in Lakhs)

Year	India	Rajasthan
05-06	38.68	5.37
06-07	46.67	7.23
07-08	64.12	10.19
08-09	62.86	11.36
09-10 (30 th Nov.'09) Source: NFHS III	39.32	6.79 45.5% (DLHS 3, 2007-08)



Number of JSY beneficiaries (in Lakhs)

Year	India	Rajasthan
05-06	1.74	0.05
06-07	15.36	3.88
07-08	45.75	7.75
08-09	59.15	9.17
09-10 (30 th Nov.'09)	37.72	5.84

Source: NFHS III



Role of DACs

- Create database of ASHA
- Liaise with district level stakeholders for mobilizing support
- Supervision and monitoring of the ASHAs, NGOs and Block ASHA facilitators and PHC ASHA Supervisors.
- Attend ASHA meetings at block and PHC.
- Prepare annual training plan of ASHA for different rounds.



Role of DACs

- Compilation of monthly report with the help of Data Assistant of DPMU.
- Dissemination of guidelines related to ASHA to all functionaries at different levels.
- Follow up with Block ASHA facilitators/ BPMs on the progress of assigned job.
- Monitor timely payments of ASHAs
- Monitor physical and financial progress of the component.
- Field visits



Role of DPM

- Develop annual plan - ASHA selection & training
- Annual targets for CHC-PHC
- Adoption and implementation of plan & fund flow
- Support DAC in developing plans.
- Monitor physical & financial progress of the component.



Thank You

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www.sihfwrajasthan.com
or
contact : Director-SIHFW
on

sihfwraj@yahoo.co.in