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To

All Collectors.

Sub: New conditional Cash Transfer Scheme of State Government for mothers-"Mamata".

Madam/Sir,

It is well documented that intrauterine nutrition has a strong impact on birth weight and subsequent malnutrition of children. However, often, both during pregnancy and lactation, the women are forced to go for work, thereby neglecting their own health and that of the child. Thus, proper rest and adequate nutrition during pregnancy and child care are essential not just for the mothers health and well being but also for the infant. World over, it has been found that conditional cash transfers are a strong incentive for behaviour change. Thus, a State Govt. conditional cash transfer scheme called "Mamata" is being rolled out from September, 2011 to enable mothers to compensate for some wage loss and get adequate rest and nutrition, and also to incentivize positive health seeking behaviors like immunization, appropriate child feeding practices etc.

The scheme marks a departure from any other cash transfer scheme as it is founded on the principle of timely e-transfers into the eligible woman's account. Timeliness is important, both because the payments are linked to fulfillment of certain conditions, and also because the woman must receive payment while she is at a particular stage of pregnancy/child rearing. You will agree that any delay in payments defeats the very purpose of the scheme by denying the benefit to the mother.

Thus, effective coordination at the district level is of paramount importance. The collectors are required to ensure that:

1. Zero balance accounts are opened for all eligible women as soon as possible, and definitely before she is due to receive her first payment at 6 months of pregnancy. This will have to be monitored strictly on a monthly

basis as every month new beneficiaries will be entering the pool of eligible women. The department is also taking this up with the SLBC for issuing necessary instructions to the banks.

2. Secondly, the photo copy of the pass book of the woman is essential for the first payment. It has been communicated by the field staff that there is often a delay in this. Since this is a critical activity, the banks will have to be told to ensure issue of pass book simultaneously with the opening of the bank account. This is of paramount importance as non compliance of this factor alone can delay payment to the eligible woman.
3. Next, the Mother and Child Protection [MCP] Cards will be printed and distributed to the Anganwadi workers by NRHM through the CDMOs. This requires constraint interdepartmental coordination. A joint letter to this effect has been issued by Secretary Health and Family Welfare and myself [L.No.17128 dated.10.8.2011], the modalities laid down in which may please be adhered to and monitored.
4. The formats and returns prescribed under the scheme must be closely studied and monitored during the monthly ICDS meetings. The flow of funds statement from the AWW to CDPO, scrutiny of accounts at the CDPO level and triggering e-payments are essential steps, and need monitoring at every level.
5. The scheme will require intensive monitoring as the entry and exit of beneficiaries is a dynamic database, there can also be leakages unless close monitoring is done, and detailed follow ups are required at each level and stage so that the eligible beneficiaries get their dues on time. The monthly ICDS meetings must discuss the scheme in detail, review the tours and monitoring done at different levels, and sort out different issues encountered.
6. As was done in the decentralization process, please open a dedicated grievance help line for getting complaints/ suggestions under the scheme. The helpline should be opened in the office of the DSWO, and the consultants appointed under Unicef for the W&CD Department may be asked to initially receive and monitor calls.

7. Wide publicity needs to be given to the scheme. A campaign at the state level is being designed and will be taken up. Districts should also use the kala jathas widely for this. Separate funds will be sanctioned for this. However, till receipt of the same, please ensure that all eligible women know about the scheme and avail of the benefits. Information booklets for the women and their families have been developed and are also being sent to you prior to the launch of the scheme.

In order to strengthen the WCD programme management, and to ensure better implementation of this and other schemes such as NSAP, each district will get the following support shortly:

- i. A Programme assistant/DEO in the CDPO office. He/She shall help the CDPO in monitoring and supervision of this scheme. Please ensure that the guidelines [being issued separately] for their engagement followed and they are made functional immediately.
- ii. PMU in each district with a District Programme manager and a Programme assistant. They should compile data, monitor, man the grievance helpline, and manage the MIS etc.
- iii. Collectors have been asked to supply computers to all CDPO offices. Please ensure these are installed and ready to use by end-August.

The detailed guidelines for the scheme are attached with this letter. Please discuss them positively by the end of August in the monthly ICDS meetings at the district, block and sector level, and draw up action plans for implementation.

The "Mamata" scheme has the potential of transforming the nutritional status of many underprivileged women and children. It is a great opportunity for all of us to contribute in the reduction of maternal and child mortality and give a head start in life to the next generation.

We look forward to your personal involvement and monitoring of the scheme.

Yours faithfully,

(Arti Anuja) 17/8/01

## 1. INTRODUCTION

There exists a close relationship between maternal nutrition and pregnancy outcomes. During pregnancy the foetus is solely dependent on maternal food intake and nutritional stores, mostly fat, for its energy. Poor maternal nutrition during pregnancy in turn implies a risk of poor nutritional availability to the foetus resulting in low birth weight babies. (mainly due to pre-term births or intra-uterine growth retardation ) In the case of undernourished women, however, 30-40% of their children will have low birth weights (World Resources Institute, 2000).

Various studies have shown that low birth weight infants have less chances of survival and even when they survive they are more prone to disease, growth retardation and impaired mental development (Lancet Series, 2008). Also, intrauterine growth retardation contributes largely to the high incidence of low birth weights (LBWs). Moreover, even after pregnancy women resume work much before the body has recuperated which leads to a depletion in the nutrient stores of the body. This results in higher rates of neonatal morbidity and neonatal and perinatal mortality.

Although Orissa has made considerable progress in curbing the high rates of maternal mortality ( 258 per 100,000 live births) and infant mortality [( 65 per 1000 live births (SRS, 2009)], a lot still needs to be done before we reach the Millennium Development Goals (MDGs).

To address the situation and alleviate the problem of maternal and infant undernutrition, Government of Orissa (Department of Women and Child Development) has envisaged a state-specific scheme for pregnant and lactating mothers called '**MAMATA**'- a conditional cash transfer maternity benefit scheme. The scheme will provide monetary support to the pregnant and lactating women which will enable them to seek improved nutrition and promote health seeking behavior.

## **2. MAMATA - THE SCHEME**

### **Goals and Objectives**

#### **Goals**

1. Contribute as a factor in reducing maternal and infant mortality.
2. Improve the health and nutrition status of pregnant and lactating mothers and their infants.

#### **Objectives**

1. To provide partial wage compensation for pregnant and nursing mothers so that they are able to rest adequately during their pregnancy and after delivery.
2. To increase utilisation of maternal and child health services, especially ante-natal care, postnatal care and immunization.
3. To improve mother and child care practices, especially exclusive breastfeeding and complementary feeding of infants.

### **2.1 Target Beneficiaries and Coverage**

This scheme is operational in all the 318 rural projects of the State.

Pregnant & Lactating women of 19 years of age and above for the first 2 live births, except all Government/Public Sector Undertakings (Central and State) employees and their wives will be covered.

Age, number of live births and employment status would be as reported by the beneficiary in the format prescribed. In case of wrongful claim by the beneficiary, the amount paid to her would be recovered as per law. A signed undertaking to this effect will be necessarily taken from the beneficiary at the time of registration under MAMATA.

## **2.2 Beneficiary Registration:**

1. To avail the benefits under this scheme, a pregnant woman has to register herself at the AWC/ mini AWC to which she belongs.
2. For all new cases of pregnancy, registration at the AWC should be done within 4 months of conception. However for claiming the first instalment under Mamata scheme, a pregnant woman may be allowed to register within 6 months of conception.
3. Care should be taken to see that every pregnant woman registers her pregnancy at the AWC/mini AWC in whose service area she ordinarily resides. (A pregnant woman may avail services at any AWC, but she will receive her entitlements under MAMATA only from the AWC where she is registered. For e.g. If a woman discovers her pregnancy at her maternal home, she may go for her ANC at the maternal village, but her pregnancy should be registered at the AWC in whose service area she ordinarily resides).
4. In case of AWW vacancy, the beneficiary will register in the nearest AWC. However, the AWW while sponsoring her name to the CDPO shall mention the name of the AWC to which the beneficiary originally belongs and the reason for sponsoring her name. In that case the AWW will submit two separate reports for two AWCs.
5. It is the duty of the AWW to see that every pregnant woman registered at the AWC receives an MCP card. The AWW shall keep a duplicate copy of all cards issued with her. The MCP card will be used as a means of verification of the conditionalities for payment. Hence the AWW and ANM should ensure that the MCP card is provided to every beneficiary and the required information is filled in this card on time.
6. The names of all pregnant women who have registered at the AWC/ mini AWC will also then be entered in the ante natal register along with an entry in the MCP Card..
7. From among the pregnant women, the AWW shall identify those women who are eligible to receive entitlements under the MAMATA scheme.

8. All such eligible women shall be asked by the AWW to open an account in a bank which has core banking facility. The account should be a single account in the name of the beneficiary. (A joint account or an account other than in the name of the beneficiary shall not be accepted). The beneficiary must give the photocopy of the first page of the bank passbook with her name to the AWW. The AWW should check the correctness of the details so submitted. It is extremely important that the bank details are submitted correctly to the AWW as the mode of payment is e transfer and any mistake will result in non sanction of funds to the beneficiary. The bank details shall be filled up by the AWW in the MCP card at the appropriate place i.e. reverse side of the cover page.
9. All such women shall then be given the MAMATA leaflet and two copies of the self declaration form (**Annexure-B**). The beneficiary should fill up both copies of the self declaration form, with two photographs and return it to the AWW as soon as possible.
10. The AWW shall keep one copy of the self declaration with her at the AWC and submit one copy to the CDPO through the supervisor. The CDPO shall then enter the details in the MIS format. The CDPO should keep all copies of self declaration forms given by the AWWs, AWC wise, in her office for purpose of cross verification and audit.
11. The AWW should also get the beneficiary to sign a declaration on the MCP card at pg 4 after first instalment that she will i) initiate breastfeeding within one hour of delivery ii) continue exclusive breastfeeding till six months.

### **2.3 Amount of Payment and Conditionality**

The beneficiary will receive a total incentive of Rs.5000 in four instalments, subject to the fulfillment of specific conditions. Payment will be made by e-transfer from the CDPO to the beneficiary account.

Why four instalments and why incentive of Rs.5000 only?

- The first three instalments and amounts have been worked out such

that the beneficiary gets a reasonable amount every three months after the second trimester of pregnancy up to nine months after delivery (including the JSY tranche).

- This is a part wage loss compensation given as maternity benefit, for ensuring that the mother takes the much required rest before delivery and soon after delivery, to enable her to take better care of herself and her young infant. This amount should be used for improving the nutritional intake of pregnant and lactating women.
- The fourth instalment is intended to ensure continuing contact with the mother to promote continued breast feeding, ensure appropriate complementary feeding and full immunization of the child at 9-12 months.

Every beneficiary shall be sponsored for the first instalment, only then can subsequent instalments be claimed. No beneficiary can enter at any other stage. Claim for every subsequent instalment can be made, if only the previous instalment has been cleared.

#### **2.4 First Instalment:**

**Amount: Rs.1500.** Given only **at the end of the second trimester of pregnancy** i.e., completion of six months of pregnancy, on fulfillment of **all the five conditions** mentioned below:

- i. Pregnancy registered at the AWC/Mini AWC.
- ii. Received at least one antenatal check-up (out of optimal 3).
- iii. Received IFA tablets.
- iv. Received at least one TT vaccination (out of optimal 2).
- v. Received at least one counseling session at the AWC/ Village Health and Nutrition Day (VHND).

2.4.1 Conditions one to four shall be verified through the MCP card. Condition five should be verified through Mamata Scheme Register at



the AWC/mini AWC.

- 2.4.2 All pregnant women who have **a.** fulfilled all the conditions of the first instalment (including, submitting the self declaration form specified in Annexure B) and **b.** completed the second trimester of pregnancy (i.e. have completed 6 months of pregnancy) are entitled to receive the first instalment.
- 2.4.3 The AWW shall then submit a list of all such eligible women, due to receive the first entitlement to the supervisor at the sector meeting in the form prescribed at **Annexure-D**. The AWW should follow the same ICDS month, as followed in ICDS reporting, i.e. 26<sup>th</sup> to 25<sup>th</sup> for this scheme too. Every AWW must submit the monthly report to the supervisor concerned by the 30<sup>th</sup>. Of each month without fail.
- 2.4.4 It is to be noted, that even if a woman fulfils all the conditions of the first instalment before completion of the second trimester of pregnancy, her name shall be submitted by the AWW only after she completes the second trimester .i.e. after completion of 6 months of pregnancy.

## 2.5 Second Instalment:

**Amount: Rs.1500.** Given only after completion of **three months** after **delivery** on fulfillment of **all the six conditions** mentioned below:

- i. Child birth is registered.
- ii. Child has received BCG vaccination.
- iii. Child has received Polio 1 and DPT-1 vaccination.
- iv. Child has received Polio 2 and DPT-2 vaccination.
- v. Child has been weighed at least two times after birth (out of optimal 4 times including weighing at birth).
- vi. After delivery, mother has attended at least two IYCF counseling sessions at the AWC / VHND / Home Visit (out of optimal 3 times), as certified by the AWW.

- 2.5.1 Conditions one to five are to be verified through the MCP card.

Condition six should be verified through Mamata Scheme Register at the AWC.

## **2.6 Third Instalment:**

**Amount: Rs.1000.** Given after the infant **completes six months** of age, on fulfillment of **all the five conditions** mentioned below:

- i. Child has been exclusively breastfed for first six months.
- ii. Child has been introduced to complementary foods on completion of six months.
- iii. Child has received Polio 3 and DPT-3 vaccination.
- iv. Child has been weighed at least two times between age 3 and 6 months (out of optimal 3).
- v. Mother has attended at least two IYCF counseling sessions between 3 and 6 months of lactation, at the AWC/VHND/Home Visit (out of optimal 3).

2.6.1 Conditions one and two shall be self certified by the beneficiary in page 4 and 6 of the MCP card. Conditions three and four shall be verified through the MCP card. Condition five should be verified through Mamata Scheme Register at the AWC/mini AWC.

## **2.7 Fourth Instalment:**

**Amount Rs.1000:** Given after the infant **completes nine months** of age on fulfillment of **all the four conditions** mentioned below:

- i. Measles vaccine has been given before the child is one year old .
- ii. Vitamin A first dose has been given before the child is one year old.
- iii. Age specific appropriate complementary feeding has started and is continuing.
- iv. Child is weighed at least two times between six months to nine months of age.

- 2.7.1 Conditions one, two and four shall be verified by the MCP card. Conditions three shall be self certified by the beneficiary in page 6 of the MCP card.

The AWW must fill up the details of beneficiaries who fulfil conditions for receiving the first, second, third and fourth instalments in the monthly format at Annexure D. This format shall be submitted to the supervisor during the sector meeting before 30<sup>th</sup> of each month without fail. It is again reiterated that every beneficiary shall be sponsored for the first instalment, only then can subsequent instalments be claimed. No beneficiary can enter at any other stage.

## **2.8 Special Conditions:**

- i. If the beneficiary fulfills the conditions for the 1<sup>st</sup>.instalment, but undergoes a miscarriage she may be given the 1<sup>st</sup> instalment upon producing proper documentation.
- ii. If the beneficiary has a still birth, she will be eligible for the 2nd instalment subject to attending 2 counseling sessions for her own health and wellbeing. This is to be certified by the AWW based on records available.
- iii. If the beneficiary fulfills the conditions for the 2nd instalment but the infant does not survive between birth and 3 months of age, she will be given the 2nd instalment.
- iv. If the beneficiary on her first delivery gives birth to live twins she can avail the benefit of the Scheme only once (since the wage loss and rest required would be only once).
- v. If the beneficiary has one child and then in second delivery gives birth to twins she can avail the benefit of the Scheme for the second time (even though there are now 3 children).

## **2.9 Verification of the Conditionality: How, When and by Whom?**

### **2.9.1 Verification by AWW:**

Means of verification of each conditionality to be used by AWW are listed below (further details in Table 1):

#### **1. Mother Child Protection (MCP) card.**

##### **1.1 HOW TO FILL UP THE MCP CARD.**

- 1.1.1 As the main source of verification of the fulfilment of conditions under this scheme is the MCP card, due care shall be taken while filling up the MCP card. The MCP card has pages which have to be filled up by the ANM and some pages to be filled up by the AWW. This is clearly mentioned on the top right hand corner of every page as to who should fill up that particular page.
- 1.1.2 The bank details should be written on the reverse side of the cover page of the MCP card by the AWW.
- 1.1.3 It shall be the duty of the ANM and the AWW to enter in the MCP card, the details of services provided, on the same day as the provision of service. There should not be any time lag between services provided and entry in the MCP card. The AWW should ensure that the copy of the MCP card kept with her is also updated and there is no difference in the two cards.
- 1.1.4 The entry of services provided in the MCP card should have the signature of the ANM or AWW with the date. The ANM should sign in the relevant box for that service. (It should not be just a tick).
- 1.1.5 Every pregnant woman coming to the VHND session must carry the MCP card with her.
- 1.1.6 The MCP Card meant for the woman should not be retained with the AWW. In case the card is lost by the woman, a duplicate can be issued on application to the CDPO office. For any Duplicate

MCP Card issue by the CDPO, the CDPO should refer to the copy retained at the AWC.

**B. MAMATA Scheme register (format at Annexure - C)**

C. Exclusive breastfeeding, initiation of complementary foods and giving age specific complementary foods are **to be self-certified** by the beneficiary. **(in the MCP card at pg. 4 and 6)**. The beneficiary should sign in the MCP card with the AWW to the effect that **she has fulfilled** the conditions.

**2.10 Role of ICDS Supervisor and CDPO:**

2.10.1 The supervisor should make sure that every AWW sends the scheme report every month in the format prescribed. In case of AWW being absent, the AWH and the tagged AWW (as decided by the Supervisor) should bring the monthly report on time i.e. by 30<sup>th</sup> of every month.

2.10.2 She must ensure that all formats of all the AWCs under her jurisdiction are collected by her during the sector meeting. It is the responsibility of the supervisor to collect these formats from every AWC in her jurisdiction in the sector meeting. The supervisor shall be held responsible if any AWW fails to submit information in the prescribed format on time. Even if for a particular month, an AWC has no eligible beneficiary, a nil report should be filed by the AWW.

2.10.3 The supervisor shall then submit the forms collected from all the AWWs in her jurisdiction to the CDPO by the 1st. of the next month. (for example all the forms collected in April sector meetings should reach the CDPO by the 1st. Of May.) The reporting month should be the same as that of the ICDS MPR (26<sup>th</sup> to 25<sup>th</sup>)

2.10.4 During field monitoring visits, the ICDS supervisor should

check at least 20 cases sponsored by the worker every month. At the same time the Supervisor should ensure sufficient spread across different AWCs. She should check the scheme register for correctness and verify the fulfillment of conditionalities through **discussion with beneficiaries**. She should also check the MCP cards and compare them with the scheme register and the display calendar at the AWC/mini AWC.

2.10.5 It is the responsibility of the CDPO to enter the data so collected from the workers, in the prescribed MIS format. As payments will be made online, the CDPO should ensure that the details are entered correctly and there are no errors at the data entry level. The CDPO in her role as authorizer in the online payments will certify every payment being made. The CDPO will ensure that online payments to all beneficiary accounts are made by the 10<sup>th</sup> of every month. Only those beneficiary details shall be entered as are submitted by the AWW through the supervisor. No new names can be entered at this level.

2.10.6 The CDPO shall randomly check 20 cases every month through field visits. She is responsible for effective delivery of scheme benefits and smooth implementation of Mamata in the project area.

2.10.7

## **2.11 Role of Programme Assistant at the Project Level**

2.11.1 The Programme Assistant at the project will ensure that the information of all AWCs submitted by the Supervisors is entered in the MIS format at the project level. It is his/her duty to see that the data is entered correctly and within the deadline i.e. 10<sup>th</sup> of every month.

2.11.2 The Programme Assistant will ensure that for all new cases, the information in the self declaration form shall be first

entered in the MIS format. This is static data which shall remain constant till all the due cash transfers to the beneficiary are completed. This will be entered only once.

2.11.3 Further, the Programme Assistant shall enter the monthly information submitted by the Supervisors to the CDPO. As payments to the beneficiaries will be triggered online at the CDPO level, there should not be any mistake at the data entry level. He should enter only those names as are given in writing by the AWWs in the prescribed formats. No new names can be entered at his level.

2.11.4 The Programme Assistant shall scrutinize all entries made by the Programme Assistant before any payment order is issued by the CDPO. The Programme Assistant will have to ensure that all data entered are without any mistake or misrepresentation.

2.11.5 The Programme Assistant shall coordinate with the nodal bank and ensure that all transactions are made as per the procedure prescribed.

2.11.6 The Programme Assistant shall be responsible for ensuring that the entire process of online payments functions in a smooth manner.

2.11.7 The bank will make available to the CDPO details of all payments credited to the beneficiaries. This list will also show if any payments have not been made due to wrong entries etc.

2.11.8 The list received from the bank showing payments made, shall be given to the AWWs by the Supervisor. The AWW will put up this list received from the banks in the calendar format prescribed for display outside the AWC/mini AWC **(Annexure-F)**.

2.11.9 In case any payment has not been made by the bank, the list shall be immediately reviewed by the Programme Assistant

and a report must be furnished by him/her to the CDPO by 15<sup>th</sup> identifying the reasons for non payment and enabling the CDPO to take corrective actions.

2.11.10 The Programme Assistant will also make field monitoring visits and should check at least 30 cases sponsored by the AWW every month. At the same time the Programme Assistant should ensure sufficient spread across different AWCs. He/She should check the scheme register for correctness and verify the fulfillment of conditionalities through **discussion with beneficiaries** and checking of MCP cards and compare them with the scheme register and also tally with the display calendar. He should report his findings to the CDPO regularly.

2.11.11 The Programme Assistant will have to collate his/her supervision visit details along with that of the CDPO, all Supervisors, and send it to the DSWO by 5<sup>th</sup> of every month through e-mail with copies to Programme Manager (Mamata) at the district level . This again will have to be collated at the district level and submitted to the Collector for his/her review along with other reports on Mamata.

## **2.12 Role of Programme Assistant at the District Level**

2.12.1 The Programme Assistant at the district will ensure that the information of all Projects submitted by the CDPOs is compiled at the district level. It is his/her duty to see that the data is entered correctly and within the deadline i.e. 12<sup>th</sup> of every month.

2.12.2 The Programme Assistant at the district will ensure that the reports from Projects are received on time. In case of delays he/she should followup with the Projects and inform the DSWO accordingly.

2.12.3 The Programme Assistant at the district level should provide



technical support on computers and packages to the Project offices.

2.12.4 The Programme Assistant at the district level should undertake periodic audits as per guidelines to be issued later.

2.12.5 The Programme Assistant at the district level will have to collate all supervision visit details received from the Projects and submit it to the DSWO and Collector by 7<sup>th</sup> of every month.

2.12.6 The Programme Assistant at the district level should maintain the grievance helpline for MAMATA scheme.

### **2.13 Role of Programme Manager at the District Level**

2.13.1 The Programme Manager shall coordinate with the nodal bank at the district level for the MAMATA scheme.

2.13.2 The Programme Manager shall coordinate with all banks to sort out issues arising in the process of implementation of the scheme.

2.13.3 The Programme Manager shall make field monitoring visits, and should check at least 50 cases sponsored by the worker every month. At the same time the he/she should ensure sufficient spread across different AWCs. He/she should check the scheme register for correctness and verify the fulfillment of conditionalities through **discussion with beneficiaries**. He/she should also check the MCP cards and compare them with the scheme register and the display calendar at the AWC/mini AWC.

2.13.4 The Programme Manager shall coordinate with Health and other Departments for smooth implementation of the scheme.

2.13.5 The Programme Manager shall prepare presentations and

reports on supplies of MCP Card, IFA Tablets, Vaccines, and also delivery of services by ICDS, Health, etc. every month for the interdepartmental coordination meeting.

2.13.6 The Programme Manager should undertake periodic audits as per guidelines.

2.13.7 The Programme Manager should maintain and manage the grievance helpline for MAMATA scheme. He/she shall be responsible for maintain the compliance and keep the Collector updated on it.

2.13.8 The Programme Manager shall ensure all IEC/BCC activities as per the guidelines issued.

#### **2.14 Role of Jaanch Committee, Mothers' Committee and PRI representatives.**

2.14.1 The AWW will keep the copy of the bank list with her for record and verification purposes. An abstract in the calendar format prescribed shall be put up outside the AWC. Members of the Jaanch Committee, Mothers' committee and PRI representatives should check the veracity of the display with the Mamata Register kept with the AWW and the bank statement. In case of any wrong doing, they should immediately bring it to the notice of the Collector of the district.

**TABLE 1**

<b>Conditionality</b>	<b>Primary Responsibility to ensure service delivery</b>	<b>Means of Verification</b>
<b>First Instalment</b>		
1. Pregnancy registered within 6 months at the AWC/mini AWC or Health Centre (Sub-centre/ PHC/ CHC/ District hospital / empanelled private doctor under JSY	AWW	MCP Card & Scheme Register
2. Received at least one antenatal check-	ANM	MCP Card
3. Received IFA tablets	ANM	MCP Card
4. Received at least one TT vaccination	ANM	MCP Card
5. Received at least one counseling session at the AWC/VHND/Home Visit	AWW	SCHEME Register
<b>Second Instalment</b>		
6. Registration of child birth	AWW	MCP Card
7. Child received BCG vaccination	ANM	MCP Card
8. Child received Polio-1 and DPT-1 vaccination	ANM	MCP Card
9. Child received Polio-2 and DPT-2 vaccination	ANM	MCP Card
10. Child weighed at least two times after birth (out of optimal 4 times including weighing at birth)	AWW	MCP Card
11. Mother attended at least two IYCF counseling sessions at the AWC/VHND/Home Visit after delivery (out of optimal 3 times).	AWW	SCHEME Register
<b>Third Instalment</b>		
12. Exclusive breastfeeding for first 6 months of life	AWW	Self-certification on MCP Card
13. Introduction of complementary foods on completion of 6 months of age	AWW	Self-certification on MCP Card

<b>Conditionality</b>	<b>Primary Responsibility to ensure service delivery</b>	<b>Means of Verification</b>
14. Child received Polio-3 and DPT-3 vaccination	ANM	MCP Card
15. Child weighed at least two times between age 3 and 6 months	AWW	MCP Card
16. Mother attended at least two IYCF counseling sessions at the AWC/VHND/Home Visit between 3 and 6 months of lactation.	AWW	SCHEME Register
<b>Fourth Instalment</b>		
17. Measles vaccination between 9-12 months for infant	ANM	MCP Card
18. Vitamin A first dose given at time of measles vaccination	ANM	MCP Card
19. Age-appropriate complementary feeding has started and continuing	AWW	Self-certification on MCP Card
20. Child weighed at least two times between six and nine months.	AWW	MCP Card

### **3. SCHEME LINKAGE WITH JANANI SURAKSHA YOJANA (JSY):**

AWWs should encourage the beneficiaries to avail the JSY package for institutional delivery. This should also be emphasized by ANMs during VHND. All delivery attendants should be sensitized to motivate mothers to initiate breastfeeding within an hour of birth, colostrum feeding and for exclusive breastfeeding of their infant for the first six months.

### **4. PROCEDURES FOR PAYMENT:**

#### **a. Payment to the beneficiary:**

Transfer of amount to the beneficiary will be through bank e-transfer only. No disbursement would be in the form of “cash” or “cheque”.

Responsibility for opening a bank account lies with the beneficiary.

**b. Incentive to the AWW and AWH:**

All AWWs and AWHs have bank accounts in which their honorarium is credited. The incentive under the scheme to the AWW and AWH should also be credited in the same account on 10<sup>th</sup> of every month through e-transfer.

**5. ROLE OF AWWS:**

- i. To ensure early registration and fulfillment of conditionalities of each beneficiary in close coordination with ASHA and ANM.
- ii. To motivate the beneficiaries for fulfillment of conditionalities.
- iii. To ensure along with health functionaries that the required supplies/services for fulfilling the conditionalities are available. In case of any difficulty, AWW should immediately report the same to the Supervisor.
- iv. To ensure that beneficiaries are regularly counseled in the VHND or through home visits.
- v. To maintain all records perfectly.
- vi. To display names of beneficiaries and amounts received in prescribed format outside the AWC.
- vii. To discuss beneficiaries and payments received in the monthly meeting of GKS.
- viii. To submit monthly report to the Supervisor at the sector meeting before the 30<sup>th</sup> of every month.
- ix. To share the details of all new pregnancy registration at the AWC, with the ASHA concerned in the format prescribed at **Annexure E**. The AWW and ASHA should compare the names of Pregnant Women in both their registers and match it every month.
- x. The AWW should give special focus to pregnant women with disability. She should ensure through home visits that they avail benefits under the Mamata Scheme.

## 6. **ROLE OF AWHs:**

- i. To motivate beneficiaries to follow conditions.
- ii. To make home visits to ensure counseling.
- iii. To motivate beneficiaries to come VHND and FID.

## 7. **INCENTIVE TO THE AWW AND AWH:**

- i. The AWW will receive a cash incentive of Rs. 200 **per beneficiary** after all the **due** cash transfers to the beneficiary are completed.( including AWWs in mini AWCs).
- ii. The AWH will receive a cash incentive of Rs.100 per beneficiary after all the **due** cash transfers to the beneficiary are completed.

### **What is a due cash transfer?**

Completion of due cash transfers to a beneficiary is when either of the following conditions are met.

- a. The beneficiary has received all the 4 instalments amounting to Rs. 5000.
- b. The beneficiary has had a miscarriage and has received the first instalment of Rs. 1500 only.
- c. The beneficiary has had a still birth and has received till the second instalment only.
- d. The beneficiary has a child who has died within three months of age and hence receives till the second instalment only.
- e. The beneficiary has a child who has died after three months of age and has received till the second instalment only.

## 8. **RECORDS AND REGISTERS**

- i. One MAMATA survey register has to be maintained at the AWC by the AWW. The Mamata Survey Register is meant to keep record of all pregnant

women and then to identify the MAMATA beneficiaries, in a particular AWC area. (**Annexure A**)

- ii. The self declaration form (**Annexure B**) including photograph and photocopy of passbook shall be collected from the beneficiary in duplicate. One copy shall be retained by the AWW and the other copy shall be sent to the CDPO through the supervisor.
- iii. One MAMATA beneficiary tracker register (**Annexure C**) has to be maintained at the AWC by the AWW. The **Mamata Register** is meant to track and record for all beneficiaries in a particular AWC area.
- iv. The MCP cards with the beneficiary and the AWW shall be updated regularly.
- v. The AWW will give a Monthly Progress Report (MPR) on the MAMATA Scheme to the Supervisor in the prescribed format. (**Annexure-D**)
- vi. The AWW will share on monthly basis, details of all new pregnancy registrations in the AWC to the ASHA in the prescribed format. (**Annexure-E**).
- vii. The CDPO will fill up the formats prescribed for her and send monthly report to the DSWO by 10<sup>th</sup> of every month.
- viii. The DSWO shall report to the W&CD department & the Collector by 15<sup>th</sup> of every month.
- ix. Mamata Payment Calendar (**Annexure-F**) to be displayed outside the AWC with all details.

## 9. MONITORING AND SUPERVISION

- i. The monitoring and supervision mechanism set up under the ICDS at all levels will be used for this Scheme. Field visits should be undertaken by the District Social Welfare Officer / PO/CDPO/Supervisors as per the supervision schedule prescribed in Table 2.

Sl. No.	Category of Official	Schedule/ Proposed requirement
1	Programme Assistant at project level	Should check at least 30 cases sponsored by the AWWs in that project every month.

2	Supervisor	Shall randomly check 20 cases reported by the AWWs in her jurisdiction so as to cover maximum number of beneficiaries per visit.
3	CDPO	Shall randomly check 20 cases sponsored every month.
4	Programme Manager (MAMATA) at district level	Shall randomly check 50 cases every month.
5	Programme Officer (ICDS)	Shall randomly check 20 cases every month.
6	DSWO	Shall randomly check 20 cases every month.

- ii. The AWW shall update the scheme register every month. She should share the details of the register with the Jaanch committee GKS and Mothers committee. It is her duty to see the scheme register is kept up to date and all details are entered there.
- iii. She shall keep one copy of the self declaration form along with the photograph submitted by the beneficiary with her at the AWC. The other copy shall be sent to the CDPO through the supervisor in the manner prescribed.
- iv. The details of payments credited to the beneficiaries through e transfer shall be sent by the CDPO to the AWCs through the supervisor. This list shall then be entered by the AWW in the calendar format prescribed and displayed outside the AWC.
- v. The records and documents at the AWC shall be open to verification by the members of the Jaanch committee, Mothers' committee and the PRI members.
- vi. The supervisor shall randomly check 20 cases of all those reported by the AWWs in her jurisdiction so as to cover maximum number of beneficiaries per visit. This **shall not only be a check of the documents**, but she must also interact with the actual beneficiaries and see whether payments due have been received by them or not. She should also compare the bank statement with the display at the AWC.
- vii. The CDPO must randomly check 20 cases from among those beneficiaries



sponsored every month. The DSWO and PO must randomly check 20 number of the beneficiaries every month.

- viii. An AWW shall be responsible for every case that she reports. It is her responsibility to ensure that only names of those beneficiaries that fulfill all the conditions are submitted. In case it is found, that an AWW has deliberately given false data regarding a beneficiary, enabling an ineligible woman to get benefits, then strict action shall be taken immediately following due procedure against the AWW and beneficiary.
- ix. In case a beneficiary is registered at one AWC, but has received services in another AWC, her name shall go to the CDPO only from the AWC where her initial registration is done. This will ensure that a woman can claim the financial benefits of this scheme only from one AWC.
- x. The formats designed under this scheme should be carefully filled out by the AWW. At the CDPO level, the data entry should be meticulously done. Care should be taken to see that there are no errors which will deny a beneficiary from receiving the benefits under this scheme.
- xi. It is extremely important that VHND and Fixed Immunisation Day are strengthened as most of the conditionalities of this scheme will be met in the VHND. The ANM must ensure that vaccine stock is adequate and all pregnant women receive ANC and counseling. The VHND should also be publicised well in advance, so that every pregnant and lactating woman is aware of VHND.
- xii. All beneficiaries under this scheme should come with their MCP cards to the VHND and the services provided by the ANM should be entered by the ANM with her signature and date on the same day itself. The duplicate cards with the AWW should also be updated at the VHND.
- xiii. The DPMU (Mamata) at the district level shall work under the overall supervision of the Collector of the district. It is his duty to ensure that the scheme implementation is as per the guidelines.
- xiv. Every district should have a toll free number for registering grievances. This number shall be widely publicized at every AWC, block and GP office and

displayed both at AWC and GP office.

- xv. **The Collector of the district shall have overall responsibility for the implementation of this scheme. He/She shall monitor the implementation of this scheme closely. In this work the Collector shall be assisted by a PMU at the district level comprising a District Programme Manager (MAMATA) and a Programme Assistant (MAMATA).**

He/she shall hold meetings with banks in the district to ensure that the banks open Zero Balance account for the scheme beneficiaries and they issue passbooks simultaneously with the opening of account. He/she shall hold interdepartmental coordination meetings every month to monitor supplies of MCP Card, IFA Tablets, Vaccines, and also delivery of services by ICDS, Health, etc.

- xvi. **The Collector should initiate regular audits to prevent possibilities of leakages, with the assistance of the PMU at the district level.**
- xvii. **The Collector should ensure engagement of Project Programme Assistants at Project level and PMU at the district level. He/she should ensure early filling-up of vacancies whenever such situation arises.**
- xviii. **It is the duty of the district Collector to set up a grievance redressal system at the district level including a toll free number. In the role of an Enquirer he will also be able to check the online transactions being effected. He/She must ensure that the field visits are taking place as per schedule. The Collector must also initiate any action required on the basis of field visit reports etc. The scheme implementation must be reviewed by the Collector once every month.**

## **10. Grievance Redressal**

- i. **Issues and grievances related to the Scheme should be discussed in the meeting of the Jaanch Committee. The Jaanch Committee President/Secretary must sign every month on the calendar displayed at the AWC. The AWW must share the details of the beneficiaries who have**

received the benefits with the PRI members, GKS and the Jaanch committee members. The Mothers committee should also be informed about the beneficiaries sponsored by the AWW/Mini AWW.

- ii. Entitlements under the scheme, eligibility criteria and list of beneficiaries should be displayed at the AWC/Mini AWC level. The scheme should be an agenda point during the Gram Sabhas and panchayat meetings.
- iii. The block and GP level Womens' SHG federations should actively discuss this scheme and help generate awareness of this scheme among their members.

## Annexure-A



### MAMATA Scheme AWC Survey Register (Part-1)

#### SUMMARY RECORD OF ALL PREGNANT WOMEN IN THE AWC AREA

Name of the Project:

Name of the GP:

Name of the Sector:

Name of the Village:

Name of the AWC:

Name of the SC:

AWC Code No.:

Name of the CHC/PHC:

Sl.No	Month and Year	Total no. of Pregnant women in the AWC Area (as per the Ante Natal Register)	No. of pregnant women registered under the scheme
1	2	3	4
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			



# MAMATA Scheme AWC Survey Register (Part-2)

## Annexure-A

### RECORD OF ALL PREGNANT WOMEN IN THE AWC AREA

Name of the District:

Name of the Project:

Name of the Sector:

Name of the GP:

Name of the CHC/PHC:

Name of the AWC:

Name of the Village:

Name of ASHA/s:

AWC Code No.:

Sl.No.	Name of Pregnant Women (First, Middle & Last Name)	Name of Husband/Father	Habitation/Village	Date of Registration at AWC (dd /mm /yy)	Age (in completed years) as on date of registration	No. of live births (no of live child delivered till now)	Self / Husband Working in Govt./ PSU ( Yes-Y No-N )	MCP Card No.	Pregnant woman eligible under the Scheme (Yes-Y No-N)	Month of exit of actual beneficiary from Scheme
1	2	3	4	5	6	7	8	9	10	11

(Write 'Y' if Col. 6 is ≥ 19  
& Col. 7 is 0 or 1 & Col.  
8 is No.  
Otherwise write N)

(Received all due  
installments-1,  
Maternal Death-2,  
Infant Death-3,  
Miscarriage-4, Still  
Birth-5)



## Mamata Scheme

### UNDERTAKING BY THE BENEFICIARY

(TO BE FILLED BY THE BENEFICIARY AT THE TIME OF REGISTRATION)

AWC Name: \_\_\_\_\_

AWC No: \_\_\_\_\_

Project \_\_\_\_\_

District \_\_\_\_\_

Passport size

Photograph

#### APPLICATION FOR REGISTRATION UNDER THE SCHEME

##### MY PERSONAL DETAILS

Name \_\_\_\_\_ (full name)

MCP Card No \_\_\_\_\_

Wife/daughter of \_\_\_\_\_ (name of Husband/Father)

Resident of \_\_\_\_\_

\_\_\_\_\_ (contact address as per the bank pass book)

Contact no \_\_\_\_\_ (Mobile)

Caste (1=ST) / (2=SC) / (3=OBC) / (4=Others) (Circle appropriate)

BPL Yes / No (Circle appropriate)

Age \_\_\_\_\_ (age in completed years)

No of live births \_\_\_\_\_

I certify that I or my husband is not an employee of the Central/State Government/Public Sector Undertaking. In case I am employed elsewhere, I certify that I am not entitled for any paid maternity benefits at my place of employment (if any). I have registered myself on / /  (date) with AWC

\_\_\_\_\_ (name and address of AWC) to avail benefit under the scheme. **I am not enrolled with any other AWC for this Scheme.**

The aforesaid statements made by me are true, complete and correct to the best of my knowledge and belief. I also agree that any misrepresentation of information would mean removal from the Scheme. I undertake to repay the amount paid to me in such a case. Failing, I may be made liable for prosecution.

**Signature/thumb print of Beneficiary:** \_\_\_\_\_ **Date:** \_\_\_\_\_



## Mamata Scheme

I will support \_\_\_\_\_ (Name of beneficiary) in her care and improved nutrition during this Pregnancy and child care.

**Signature/thumb print of adult family member of the Beneficiary:** \_\_\_\_\_

**Relation:** \_\_\_\_\_

**Date:** \_\_\_\_\_

-----  
**Enclosed: Photocopy of the first page of passbook**

Bank Details

Bank Name	Branch Name	Branch Code	A/C No



## MAMATA Scheme Beneficiary Tracker (Part-1)

### SUMMARY RECORD OF ALL SCHEME BENEFICIARIES IN THE AWC AREA

Name of the Project:

Name of the GP:

Name of the Sector:

Name of the Village:

Name of the AWC:

Name of the SC:

AWC Code No.:

Name of the CHC/PHC:

Sl.No	Month and Year	Total no. of MAMATA Scheme beneficiary in the AWC Area	Total no of beneficiaries receiving ANY Instalment this month (=Col.5+ Col.6+ Col.7 +Col.8)	No of beneficiaries receiving First Instalment this month	No of beneficiaries receiving Second Instalment this month	No of beneficiaries receiving Third Instalment this month	No of beneficiaries receiving Fourth Instalment this month
1	2	3	4	5	6	7	8
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							





## Mamata Scheme Beneficiary Tracker (Part-2)

Name of Beneficiary (mother) MCP Card No

Wife/Daughter of: Date of Delivery

Address1 Place of Delivery (1=Govt institution, 2=Pvt institution, 3=Home 4=Others)

Address2 Outcome of Delivery (6=Single live birth, 7=Twin live birth, 5=Still birth)

Address3 Bank Name

Contact No. Branch

Date of Registration: Branch Code

Expected Date of Delivery Bank A/C No

Caste / Tribe (1=SC, 2=ST, 3=OBC, 4=Others)

Srl No	Details	(Yes / No)
1	2	3
	Undertaking taken (Yes / No)	
	Undertaking on MCP card taken (Yes / No)	
<b>First Instalment (at the end of 2nd trimester)</b>		
1	Pregnancy registered at the AWC/mini AWC or Health Centre (date from register)	
2	Received at least one ANC (date of 1st ANC from MCP Card/Immunization card)	
3	Received IFA tablets (1st quantity from MCP Card/Immunization card)	
4	Received at least one TT (date of 1st TT from MCP Card/Immunization card)	
5	Received at least one counseling session (date _____)	
	<b>Satisfied all five conditions (Yes / No)</b>	
	Request submitted at Project Office (Reporting Month)	
	Received Rs 1500/= in the account (date) (CDPO to inform the AWW)	
<b>Second Instalment (at the end of 3 months after delivery)</b>		
1	Child birth is registered (from register) (Yes/ No)	
2	Child has received BCG vaccination (date from MCP Card/Immunization card)	



## Mamata Scheme Beneficiary Tracker (Part-2)

3	Child has received Polio-1 and DPT-1 vaccination (date from MCP Card/Immunization card)	
4	Child has received Polio-2 and DPT-2 vaccination (date from MCP Card/Immunization card)	
5	Child has been weighed at least two times after birth (weights from AWW register or MCP Card) (dates ____)	
6	Mother received two IYCF counseling sessions (dates) (dates _____)	
	<b>Satisfied all conditions (Yes / No)</b>	
	Request submitted at Project Office (Reporting Month)	
	Received Rs 1500/= in the account (date) (CDPO to inform the AWW)	
<b>Third Instalment (after infant completes 6 months)</b>		
1	Child has been exclusively breastfed for first six months, unless told to stop by doctor (self certification on MCP Card)	
2	Child has been introduced complementary foods on completion of age six months (self certification)	
3	Child has received Polio -3and DPT-3 vaccination (date from MCP Card/Immunization card)	
4	Child has been weighed at least two times between age 3 and 6 months (dates) (dates _____)	
5	Mother received at least two IYCF counseling sessions between 3 and 6 months of lactation (dates _____)	
	<b>Satisfied all conditions (Yes / No)</b>	
	Request submitted at Project Office (Reporting Month)	
	Received Rs 1000/= in the account (date) (CDPO to inform the AWW)	
<b>Fourth Instalment (after infant completes 9 months)</b>		
1	Child has recd Measles 1st dose vaccination (date from MCP Card/Immunization card)	
2	Child has recd Vitamin A first dose (date from MCP Card/Immunization card)	
3	Child is receiving appropriate complimentary feeding (self certification on MCP Card)	
4	Child has been weighed at least two times between age 6 and 9 months (dates) (dates _____)	
	<b>Satisfied all conditions (Yes / No)</b>	
	Request submitted at Project Office (Reporting Month)	
	Received Rs 1000/= in the account (date) (CDPO to inform the AWW)	
	<b>Exited from the scheme (Yes / No)</b>	
	<b>Reason for exit</b> (Received all due installments-1, Maternal Death-2, Infant Death-3, Miscarriage-4, Still Birth-5)	
	<b>No of Instalments received</b>	
	<b>Total amount received by the beneficiary</b>	

Registered in Janani Suraksha Yojana (Yes / No)

Received money from Janani Suraksha Yojana (Yes / No)

**NB: One page for every beneficiary in AWC**



# Mamata Scheme AWC Monthly Report

(To be collected by the Supervisor and submitted to the CDPO)

Name of the Project:

Reporting Month :

Name of the Sector:

Year:

AWW Name:

Name of the AWC:

AWH Name:

\*AWC Code No.:

Total No of beneficiaries for whom the claim is being made this month:

Total No of beneficiaries exiting from the scheme without any claim this month:

<b>First Instalment</b>						
Sl No	Name of Beneficiary	Bank A/C No	Unique ID No	Amount Due	Reason for exit	Entry Done (For CDPO Office use)
1.						
2.						
3.						
4.						
5.						
(Reason for exit: Miscarriage-4)						

**Second Instalment**

Sl No	Name of Beneficiary	Bank A/C No	Unique ID No	Amount Due	Reason for exit	Entry Done (For CDPO Office use)	Date of delivery	Outcome of delivery
1.								
2.								
3.								
4.								
5.								

(Reasons for exit: Infant Death-3, Still Birth-5)

(Outcome of delivery: Single live birth-6, Twin live birth-7, Still birth-5)

**Third Instalment**

Sl No	Name of Beneficiary	Bank A/C No	Unique ID No	Amount Due	Entry Done (For CDPO Office use)
1.					
2.					
3.					
4.					
5.					

(Reason for exit: Infant Death-3)

**Fourth Instalment**

Sl No	Name of Beneficiary	Bank A/C No	Unique ID No	Amount Due	Reason for exit	Entry Done (For CDPO Office use)
1.						
2.						
3.						
4.						
5.						

(Reason for exit: Received all due instalments-1)

**Special Conditions**

Srl No	Name of Beneficiary	Reason for exit	Remarks	Entry Done (For CDPO Office use)
1.				
2.				
3.				
4.				
5.				

(Reasons for exit: Maternal Death-2, Infant Death-3, Miscarriage-4, Still Birth-5)

**AWW & AWH Payment**

Sl No	Name of Beneficiary	Reason for exit	Amount Due to AWW	Amount Due to AWH	Entry Done (For CDPO Office use)
1					
2					
3					
4					
5					

(Reasons for exit: Received all due installments-1, Maternal Death-2, Infant Death-3, Miscarriage-4, Still Birth-5)

Declaration :

I certify that the above beneficiaries have fulfilled necessary conditions to get their respective installment as per the scheme guidelines. I also agree that there is no misrepresentation of information on my part.

Name of AWW

Signature with date

Collected by:

Name of Supervisor

Signature

Date:

Data Entry by (For CDPO Office use):

Name of DEO

Signature

Date:

**\* Presently centre code not to be filled up AWC Monthly Report (Part-1)**





# Mamata Scheme Beneficiary Payment Calender

Name of the Project:

Name of the GP:

Name of the Sector:

Name of the Village:

Name of the AWC:

Name of the SC:

AWC Code No.:

Name of the CHC/PHC:

**Month:**

Sl.No	Name of the beneficiary	Name of the Husband	Instalment Due	Instalment Received

**Signature of AWW with Date**

**Signature of Janch Committee President/ Secretary with date**

**\* This shall be put up outside the AWC in A-3 size with all details filled up.**





ଗର୍ଭବତୀ ଏବଂ ପ୍ରସୂତି  
ମା' ମାନଙ୍କ ସଶକ୍ତିକରଣ ନିମନ୍ତେ  
ରାଜ୍ୟ ସରକାରଙ୍କ ଯୋଜନା

**'ମମତା'**



ମହିଳା ଓ ଶିଶୁ ବିକାଶ ବିଭାଗ, ଓଡ଼ିଶା ସରକାର

# ଗର୍ଭବତୀ ମହିଳା ୩

**ପ୍ରଥମ କିସ୍ତି  
୧୫୦୦ ଟଙ୍କା**

**୨ୟ କିସ୍ତି  
୧୫୦୦ ଟଙ୍କା**

ଆପଣ ୬ ମାସ ଗର୍ଭାବସ୍ଥା ପରେ ଏହି ଅର୍ଥରାଶି ପାଇପାରିବେ, ଯଦି ଆପଣ ନିମ୍ନ ସର୍ତ୍ତ ପୂରଣ କରିଥାନ୍ତି

ଆପଣଙ୍କ ଶିଶୁକୁ ୩ ମାସ ହୋଇଗଲା ପରେ ଆପଣ ଏହି ଅର୍ଥରାଶି ପାଇପାରିବେ, ଯଦି ଆପଣ ଶିଶୁ ପାଇଁ ନିମ୍ନଲିଖିତ ପଦକ୍ଷେପ ନେଇଛନ୍ତି :



- ଗର୍ଭାବସ୍ଥାର ୬ ମାସ ମଧ୍ୟରେ ଅଙ୍ଗନୱାଡ଼ି କେନ୍ଦ୍ରରେ ପଞ୍ଜିକରଣ କରିଛନ୍ତି ।



- ଗର୍ଭାବସ୍ଥାର ୬ ମାସ ମଧ୍ୟରେ ଅନ୍ୟତମ ଥରେ ସ୍ୱାସ୍ଥ୍ୟ ପରୀକ୍ଷା କରିଛନ୍ତି ।



- ଲୌହଯାତ୍ରକ ବଟିକା (IFA) ଖାଇବା ଆରମ୍ଭ କରିଛନ୍ତି ।



- ଅତିତ ୫ ଗୋଟି ଏ ଧନୁଷ୍ଟଳୀର ଇଞ୍ଜେକ୍ସନ୍ (ଟି.ଟି) ନେଇଛନ୍ତି ।



- ଅତି କମ୍ରେ ଅଙ୍ଗନୱାଡ଼ି କେନ୍ଦ୍ରରେ / ଗ୍ରାମ୍ୟ ସ୍ୱାସ୍ଥ୍ୟ ଏବଂ ପୁଷ୍ଟି ଦିବସରେ / ଏ.ଏନ୍.ଏମ୍. ବା ଅଙ୍ଗନୱାଡ଼ି କର୍ମୀଙ୍କ ଗୃହ ପରିଦର୍ଶନ ସମୟରେ ସ୍ୱାସ୍ଥ୍ୟ ଓ ପୁଷ୍ଟି ସମ୍ବନ୍ଧୀୟ ପରାମର୍ଶ ନେଇଛନ୍ତି ।



- ଶିଶୁର ନାମ ପଞ୍ଜିକରଣ କରିଛନ୍ତି ।



- ଶିଶୁକୁ ବି.ସି.ଜି ଇଞ୍ଜେକ୍ସନ୍ ଦିଆଯାଇଛି ।



- ଶିଶୁକୁ ପୋଲିଓ ୧ମ ଅନୁପାନ ଏବଂ ଡିପିଟି ୧ମ ଅନୁପାନ ଇଞ୍ଜେକ୍ସନ୍ ଦିଆଯାଇଛି ।



- ଶିଶୁକୁ ପୋଲିଓ ୨ୟ ଅନୁପାନ ଏବଂ ଡିପିଟି ୨ୟ ଅନୁପାନ ଇଞ୍ଜେକ୍ସନ୍ ଦିଆଯାଇଛି ।



- ଜନ୍ମଠାରୁ ୩ ମାସ ମଧ୍ୟରେ ଶିଶୁ ଅତିକମ୍ରେ ୨ ଥର ଓଜନ ହୋଇଛି ।



- ପ୍ରସବ ପରେ ଅଙ୍ଗନୱାଡ଼ି କେନ୍ଦ୍ର ବା ନିଜ ଘରେ ଏ.ଏନ୍.ଏମ୍. ବା ଅଙ୍ଗନୱାଡ଼ି କର୍ମୀଙ୍କ ଠାରୁ ୨ ଥର ଶିଶୁମାନଙ୍କ ଖାଦ୍ୟ ସମ୍ବନ୍ଧୀୟ ପରାମର୍ଶ ପାଇଛନ୍ତି ।

# ପ୍ରସୂତି ମା' ମାନଙ୍କ ପାଇଁ

**୩ୟ କିସ୍ତ୍ରୀ  
୧୦୦୦ ଟଙ୍କା**

**୪ର୍ଥ କିସ୍ତ୍ରୀ  
୧୦୦୦ ଟଙ୍କା**

ପୁସ୍ତକର ୬ ମାସ ପରେ ଆପଣ ଏହି ଅର୍ଥରାଶି ପାଇପାରିବେ, ଯଦି ଶିଶୁପାଇଁ ନିମ୍ନଲିଖିତ ପଦକ୍ଷେପ ନେଇଛନ୍ତି :

ଶିଶୁ ଜନ୍ମର ୯ ମାସ ପରେ ଆପଣ ଏହି ଅର୍ଥରାଶି ପାଇପାରିବେ, ଯଦି ଆପଣ ନିମ୍ନଲିଖିତ ସର୍ତ୍ତ ଗୁଡ଼ିକ ପୂରଣ କରିଛନ୍ତି :



- ଶିଶୁକୁ ପ୍ରଥମ ୬ ମାସ କେବଳ ମା' କ୍ଷୀର ଖୁଆଇଛନ୍ତି ।



- ଶିଶୁକୁ ମା' କ୍ଷୀର ସହ ବୟସ ଅନୁଯାୟୀ ଅନୁପୂରକ ଖାଦ୍ୟ ବାଲୁ ରଖିଛନ୍ତି ।



- ୬ ମାସ ପରେ ମା' କ୍ଷୀର ସହ ଅନୁପୂରକ ଖାଦ୍ୟ ଆରମ୍ଭ କରିଛନ୍ତି ।



- ୬ ମାସରୁ ୯ ମାସ ବୟସ ମଧ୍ୟରେ ଆପଣ ଅଙ୍ଗନୱାଡ଼ି କେନ୍ଦ୍ର ବା ନିଜ ଘରେ ଅଙ୍ଗନୱାଡ଼ି କର୍ମୀ ବା ଏ.ଏନ୍.ଏମ୍.ଙ୍କ ଠାରୁ ୨ ଥର ଶିଶୁ ଖାଦ୍ୟ ସମ୍ବନ୍ଧୀୟ ପରାମର୍ଶ ନେଇଛନ୍ତି ।



- ପୋଲିଓ ୩ୟ ଅନୁପାନ ଏବଂ ଡି.ପି.ଟି ୩ୟ ଅନୁପାନ ଇଞ୍ଜେକ୍ସନ୍, ଶିଶୁକୁ ଦିଆଯାଇଛି ।



- ୩ ମାସରୁ ୬ ମାସ ବୟସ ମଧ୍ୟରେ ଶିଶୁକୁ ୨ ଥର ଓଜନ କରାଯାଇଛି ।



- ୬ ମାସରୁ ୯ ମାସ ମଧ୍ୟରେ ଶିଶୁ ୨ ଥର ଓଜନ ହୋଇଛି ।



- ୩ ମାସରୁ ୬ ମାସ ବୟସ ମଧ୍ୟରେ ଆପଣ ଅଙ୍ଗନୱାଡ଼ି କେନ୍ଦ୍ର ବା ନିଜ ଘରେ ଅଙ୍ଗନୱାଡ଼ି କର୍ମୀ ବା ଏ.ଏନ୍.ଏମ୍.ଙ୍କ ଠାରୁ ୨ ଥର ଶିଶୁ ମାନଙ୍କ ଖାଦ୍ୟ ସମ୍ବନ୍ଧୀୟ ପରାମର୍ଶ ନେଇଛନ୍ତି ।



- ଶିଶୁକୁ ୯ ମାସରୁ ୧୨ ମାସ ମଧ୍ୟରେ ମିଳିମିଳାଇ ଇଞ୍ଜେକ୍ସନ୍ ଏବଂ ଭିଟାମିନ୍ 'ଏ' ଦିଆଯାଇଛି ।

**“ମମତା” ଯୋଜନାରେ ଲାଭ  
ଉଠାଇବା ପାଇଁ ଆପଣ ....**

**“ମମତା” ଯୋଜନାରେ ଆପଣ  
ଉପକୃତ ହୋଇପାରିବେ  
ଯଦି ନିମ୍ନ ୪ ଗୋଟି ମର୍ତ୍ତ୍ୟ ଆପଣ  
ପୂରଣ କରୁଛନ୍ତି**



• ଅଙ୍ଗନୱାଡ଼ି କେନ୍ଦ୍ରରେ ଆପଣଙ୍କର ନାମ ତୁରନ୍ତ ପଞ୍ଜିକରଣ କରନ୍ତୁ ଏବଂ ମା' ଓ ଶିଶୁ ସୁରକ୍ଷା ପତ୍ରିକା ପ୍ରଦାନ କରନ୍ତୁ ଏବଂ ନିଜ ପାଖରେ ହିଁ ରଖନ୍ତୁ ।



• ନିକଟସ୍ଥ ବ୍ୟାଙ୍କରେ ନିଜ ନାମରେ ଏକ ଆକାଉଣ୍ଟ ଖୋଲନ୍ତୁ ।



• ମା ଓ ଶିଶୁ ସୁରକ୍ଷା ପତ୍ରିକାରେ ଉଲ୍ଲେଖ ଥିବା ସମସ୍ତ ସେବା/ପରାମର୍ଶ ପାଇବା ନିମନ୍ତେ ନିର୍ଦ୍ଦିଷ୍ଟ କରନ୍ତୁ ।



- ଆପଣ ଗର୍ଭବତୀ ଅଛନ୍ତି
- ଆପଣଙ୍କ ବୟସ ୧୯ ବର୍ଷରୁ ଉର୍ଦ୍ଧ୍ୱ
- ଏହା ଆପଣଙ୍କ ୧ମ ବା ୨ୟ ଗର୍ଭଧାରଣ
- ଆପଣ କିମ୍ବା ଆପଣଙ୍କ ସ୍ୱାମୀ କୌଣସି କେନ୍ଦ୍ର ସରକାରୀ/ରାଜ୍ୟ ସରକାରୀ/ରାଷ୍ଟ୍ରାୟତ୍ତ ସଂସ୍ଥା (ପବ୍ଲିକ୍, ସେକ୍ଟର ଅଣ୍ଡରଟେକିଂ) ରେ କାର୍ଯ୍ୟ କରୁନାହାନ୍ତି ।

**ଉଚ୍ଚ ସହାୟତା ରାଶି (୫ ହଜାର ଟଙ୍କା) କେବଳ ଗର୍ଭବତୀ ମହିଳା ଓ ପ୍ରସୂତି ମା' ମାନଙ୍କର ସ୍ୱାସ୍ଥ୍ୟ ଓ ପୁଷ୍ଟିର ଉନ୍ନତି ଉଦ୍ଦେଶ୍ୟରେ ଖର୍ଚ୍ଚ କରାଯିବା ପାଇଁ ଉଦ୍ଦିଷ୍ଟ ।**

**ଅଧିକ ସୂଚନା ପାଇଁ ଆପଣ, ଅଙ୍ଗନୱାଡ଼ି କର୍ମୀ ଏବଂ ଏ.ଏନ୍.ଏମ୍.ଏଲ୍ ସହ ଯୋଗାଯୋଗ କରନ୍ତୁ ।**