



ADHUNA

Quarterly Newsletter

Advancing
Delivery of (Quality)
Healthcare through
Upgraded
Newborn (and Intrapartum Care)
Approaches

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and Showcases

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Dr. Sunita Tandulwadkar
President
FOGSI, 2025

Dear Partners and Colleagues,

It is with a heart full of gratitude and pride that I pen this foreword as your outgoing President for FOGSI for the year 2025. Project ADHUNA is a fine example collective progress and what we have achieved together over the past year has far exceeded my expectations.

This year ADHUNA has made tremendous progress with the completion of the first round of trainings, district level presence with our field team, collective efforts by ADHUNA State Coordinators and Champions, and dissemination of ADHUNAs achievements and progress in national and international forums. The FOGSI Presidential Conference in November 2025 brought together the ADHUNA Partners for sharing learnings and lessons, and fireside chats with experts laid out the importance of calibrated blood collection drapes to identify post partum haemorrhage and management of preterm births. ADHUNAs impact is evidenced in the requests for support coming in from other states in India for capacity building and technical advice.

Being an integral part of ADHUNA and supporting the team has been one of the most rewarding chapters of my professional life. From our very first initiative to our most recent milestones, the spirit of collaboration and dedication has been our driving force. I am sure in the coming months the project will scale newer heights and take longer strides in improving the quality of care in small private hospitals in India.

Best Regards,

Dr. Sunita Tandulwadkar

Dr. Bhaskar Pal
President Elect, FOGSI



Dear Partners and Colleagues,

Having been an integral part of Project ADHUNA since its very inception, it brings me immense pride to share through this newsletter the evolution of this project and the achievements of the year gone by.

To date, we have successfully expanded our reach across 4 states and 29 districts, completed 29 CPD sessions, resulting in the training of 3100+ healthcare professionals including doctors and paramedical staff. We have onboarded 1,592 small private facilities to ADHUNA and are regularly engaging with them providing technical material, IEC posters and tools. We have engaged more than 80 Champions who serve as the backbone of our mission and includes leading gynaecologists at the district level, FOGSI leaders, State Coordinators, and the FOGSI Office Bearers.

In my upcoming tenure as President of FOGSI in 2026, I look forward to supporting the ADHUNA team and partners in expanding their reach, covering all districts with another round of training on newborn care and prematurity management, launching the ADHUNA website and learning portal, and disseminating the project in key forums.

I am incredibly excited to see where the next leg of this project takes us as we continue to innovate and support the professional growth of our members.

Best Regards,

Dr. Bhaskar Pal

Foreword



Dr. Suvarna Khadilkar
Secretary General, FOGSI



Dear Partners and Colleagues

As the calendar year draws to a close, it is heartening to reflect on how this initiative has bloomed from a visionary concept into a robust ecosystem dedicated to enhancing obstetric and gynecological care across the selected districts. Our mission has always been to empower the OBGYN community with accessible, high-quality resources.

The ADHUNA on-ground team at the district level is tirelessly working to onboard the small private health facilities and has so far reached more than 1500 facilities, inching closer to the target of 2000 health facilities in the project period. The doctors and paramedic staff at these facilities receive and display pertinent IEC material for providers and patients on topics such as IV FCM, breastfeeding, and modern contraceptives.

In the coming months, we are preparing for the next round of CPDs at the district level and dissemination of ADHUNAs work during the upcoming event such as the AICOG 2026. I am sure the next year will be filled with new highs for ADHUNA as we grow our reach at the district level and work with Champions for advocacy on women's health.

Best regards,

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 the year gone by. We have gained significant momentum on ground with our district coordinators and partner teams.

We concluded the baseline survey in this quarter with support from our monitoring and evaluation partner. The findings from this survey have underscored the relevance of our interventions with small private facilities such as CPDs in every district, learning material, IEC material and advocacy through our social media channels. Our focus on innovations such as calibrated blood collection drapes, and use of IV FCM for management of anaemia will support the healthcare providers and their paramedical staff with the required knowledge and resources to improve QoC in their clinics.

ADHUNA's endeavour is to bring forth evidence-based practices and innovations to our health providers, and it makes me pleased that we launched the ADHUNA App during the FOGSI Presidential Conference in November 2025. The app includes clinical tools such as calculators for IV FCM dosage, Gestational Age, and Modified Shock Index, along with a digital guide for the WHO EMOTIVE stages to help manage postpartum hemorrhage. Our hope is that these tools will support doctors and paramedics in their daily clinical work and improve the quality of care delivered.

I look forward to yet another eventful year with ADHUNA, launching the next round of CPDs and expanding our reach on ground.

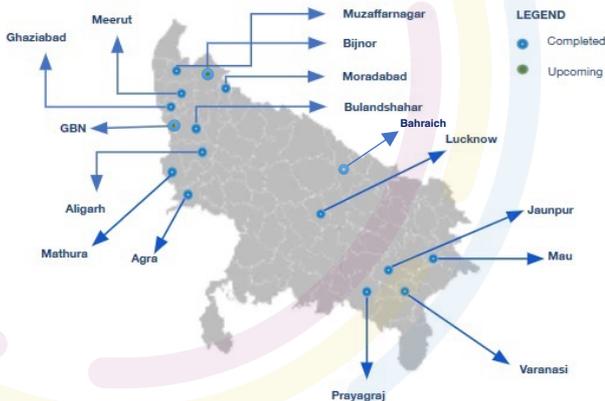
Best regards,

Dr Jaydeep Tank

Focus this quarter



Second CPD in UP 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. Lucknow OBGYN Society (LOGS) has several members belonging to neighbouring areas such as Bahraich district that fall under LOGS, but were unable to attend the CPD due to the distance to be traveled.

With feedback from the on-ground team and the State Coordinators for wider engagement, a second CPD session was organised in Bahraich on October 12, 2025 which was well-attended and planned under the guidance of our UP State Coordinators.

Bahraich

Date of CPD:	12 October 2025
Venue:	Leisure Resort, Bahraich, UP
External faculty	Dr. Varda Arora and Dr. Madhulika Hind
Chairpersons and Panellists	Dr. Shashi, Dr. Rajul Singh, Dr. Chhaya Srivastava, Dr. Silky
Moderators & Faculty	Dr. Swati Agarwal
Feedback from the society	<i>CPD-1 was well received by participants. The programme, too, was well organised, and participants expressed interest in continuing their learning through future CPDs.</i>



These follow up CPDs have been useful for the Project to extend its reach and also onboard the required number of health facilities in every district onto the project. Our District Coordinator for Lucknow worked in coordination with the society to identify local health facilities in Bahraich and invited them to attend the session and become a part of ADHUNA.

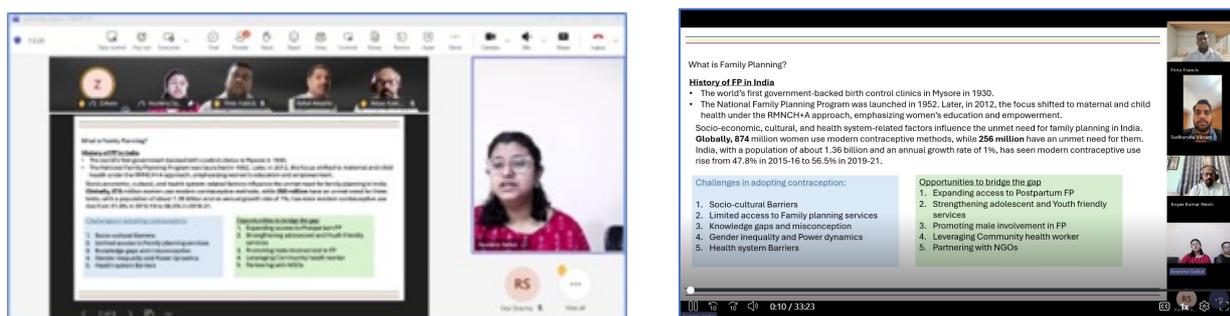


Learning Series for ADHUNA's District Coordinator Team

The District Coordinators engage with the small private facilities on a daily basis, meeting with the OBGYNs, other doctors and paramedic staff, to share information regarding upcoming training programs and to share IEC material, technical documents and position statements that are issued under the project from time to time. We conducted a six-part learning series on select topics for our district coordinators to empower them to engage with the doctors and paramedic staff in a meaningful way, moving beyond mere information sharing. This has equipped them with the theoretical knowledge and soft-skills needed to nudge healthcare facilities toward sustainable practice change.

- The series covered EMOTIVE, IV FCM, and DMPA-SC in required detail, to standardize the narrative on-ground and ensure consistent messaging.
- The learning components also included the labour care guide (LCG) that has been mandated by the WHO as an essential tool for management of labour.
- We apprised the DCs on the baseline findings pertaining to their districts. By analyzing current performance data, the session equipped the DCs to identify specific gaps within their assigned facilities and customize their approach and messaging during visits.

We are hopeful that this learning component will support the DCs to not only perform their administrative functions but support them to customize their strategy while approaching facilities and meeting the doctors, and gently nudge them to adopt the evidence-based practices.



Screenshots from the online learning series

ADHUNA webinars for onboarded health facilities

CPD – 1 has been completed across all 29 districts in the four states, however, learning needs to be continuous and practices have to be reinforced. District FOGSI societies have requested to continue supporting their facilities on a routine basis, and hence we are hosting a series of clinical webinars to reinforce key CPD-1 topics and facilitate organic adoption of evidence-based practices at the facility level.

- In Muzaffarpur, Dr. Meena Samant led an in-depth session on the EMOTIVE bundle and IV FCM, providing critical insights into the standardized management of postpartum hemorrhage and anemia.
- Dr. Ekika Singh conducted a session in Mau focused on the EMOTIVE bundle approach, emphasizing rapid detection and bundled treatment protocols.

Both webinars were well attended by facility staff, who were freely engaging in the Q&A session with the expert. These small group webinars are proving to be an important step towards sustainable practice change through collaborative persuasion and clinical advocacy.



Dr Meena Samant delivering CPD webinar for Patna facilities

Facility Level Touch Points – A Unique Project Initiative

ADHUNA CPD – 1 has been completed across all 29 districts in the four states, covering more than 3000 healthcare providers, and we are continuing to engage them through webinars periodically, with support from our master trainers. Additionally, the presence of District Coordinators in every district provides opportunities to engage with individual health facilities and nudge them towards adoption of innovations and evidence-based practices.

Our MEL partner, FRHS, recently concluded a **baseline study on current practices and approaches in intrapartum and newborn care** across a carefully selected sample of 350 health facilities. The findings from the study have supported in curating the facility level touchpoints such as IEC material, posters, clinical tools and also influenced our online messaging on our social media channels. Between CPDs these touchpoints support in maintaining connect with the doctors and nudging them to adopt these practices.

This section provides some glimpses of our touchpoints including IEC material, clinical tools and social media posts:

87% health facilities said they don't have any **RMC** guidelines. ADHUNA posters advocating for respectful care during and after delivery.



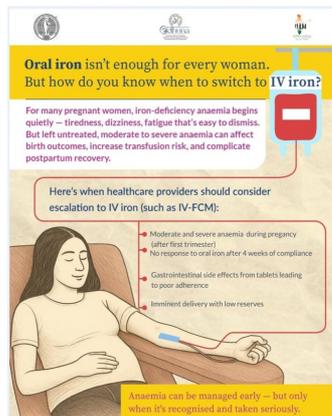
76% hospitals studied in the project districts use visual estimation for blood loss. Only 4% use **calibrated** containers. ADHUNA has provided access to calibrated drapes at subsidized rates

41% of facilities practice the EMOTIVE bundle. ADHUNA onboarded facilities display the WHO **EMOTIVE** guidance sticker in every labour room



Immediate **breastfeeding** is limited in C-section births, owing to socio cultural beliefs. ADHUNA's patient centric posters for waiting areas educate parents-to-be.

Only 28% of facility staff know the correct method of **IV FCM** admin. 4% still believe a test dose is required. ADHUNA posters on correct and timely use of FCM.



Labour monitoring remains largely experience driven, and use of clinical tools such as **LCG** remains low. ADHUNA LCG provided to facilities in an easy-to-use flip-book format



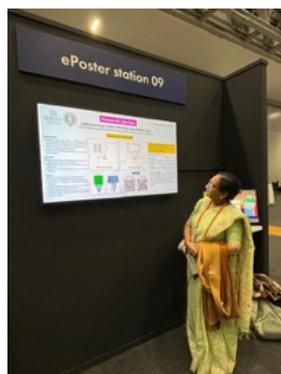
ADHUNA'S engagement and showcases



XXV FIGO World Congress of Gynecology and Obstetrics, Cape Town, South Africa, Oct 2025

Presidential Conclave of the Vasai-Nalasopara-Virar OBGYN Society

- Project ADHUNA, made a significant impact at the XXV FIGO World Congress held in Cape Town, South Africa, from **October 5–9, 2025**.
- The project's participation was highlighted by a specialized e-Poster presentation on Calibrated Drapes on October 5th, which drew substantial interest from neighboring and international delegates, including those from Thailand, Bangladesh, Sri Lanka, Pakistan, and Rwanda. This poster underscored the importance of objective blood loss measurement in preventing Postpartum Hemorrhage (PPH).
- On October 6th, on the sidelines of FIGO, Project ADHUNA hosted high-level Panel Discussion on FOGSI initiatives in maternal health that engaged over 90 participants from 8–10 different countries,
- This was followed by another panel on 'Successful Strategies on Engaging the Private Sector in Maternal Health that fostered global dialogue on clinical innovations and quality of care.
- At the FIGO World Congress, Project ADHUNA's contributions culminated in high-impact technical sessions and innovative product showcases aimed at addressing postpartum hemorrhage (PPH) on a global scale. On **October 12th**, Dr. Jaydeep Tank delivered a compelling session titled "The E-MOTIVE Bundle: Everything, Everywhere, All-at-Once," which advocated for the rapid, simultaneous implementation of life-saving PPH interventions rather than a sequential approach. Complementing this clinical strategy, the project presented various calibrated drape designs, which are essential tools for the early and accurate detection of blood loss. These designs garnered significant interest from international attendees, who recognized the drape as a practical, low-cost solution for improving maternal outcomes in both resource-limited and private healthcare settings.



ePoster station and Panel at FIGO



ADHUNA'S engagement and showcases



FOGSI Presidential Conference, 2025

- Project ADHUNA participated at the Presidential Conference in Pune (November 15–16, 2025), utilizing the platform to evaluate its journey and solidify its strategy for strengthening Maternal and Newborn Child Health (MNCH) in India's private sector. We held a side meeting with our partners and champions to showcase the achievements of ADHUNA to date.
- Key clinical highlights included the launch of a fetal monitoring booklet and a digital application for dosage and gestational age calculations, alongside Fireside Chats on the evolution of calibrated drapes for accurate blood loss measurement and evidence-based protocols for intrapartum care in prematurity.
- The conference also served as a vital advocacy hub, capturing over 40 Vox Pop clinician interviews to amplify frontline voices and launching a dedicated exhibition stall to demonstrate resource materials.

Gates Foundation Uttar Pradesh Health Partners Meet, 2 December 2025

Project ADHUNA was invited to present their work at the meeting of the various health related project partners in Lucknow on 2nd December 2025.

The forum was an opportune place for the project to highlight the work that is being done in the private health sector in UP, showcase our understanding of the sectors landscape, and design on our project leveraging FOGSI societies and office bearers to reach the small private health facilities in our focus districts.

ADHUNA PEU presented our work along with the project partners IDF and GHS elaborating on their activities and milestone in the year gone by.

The presentation was very well-received and appreciated by the Gates Foundation leadership and this will be followed up by a dissemination meeting to the larger team at Gates in early 2026.



Fireside Chat on Preterm Births



PEU, GHS and IDF at Gates Meeting in UP.

Exploratory Study on RMNCH services delivery in AB PM_JAY empaneled facilities

This quarter (October 2025 – January 2026), Ipas Development Foundation (IDF) achieved significant milestones in its Quality of Care (QoC) research under the ADHUNA project. IDF completed the exploratory study on RMNCH service delivery in AB PM-JAY empanelled private facilities, developed a comprehensive secondary research document on AB PM-JAY, and initiated a feasibility assessment of QoC indicators.

- IDF completed its exploratory study across 82 AB PM-JAY empanelled private facilities spanning four states (Uttar Pradesh, Bihar, Madhya Pradesh, and Odisha) and 12 districts
- The study employed a qualitative methodology with in-depth interviews involving healthcare providers, administrators, and Ayushman Mitras.

Key findings from the study are:

- Empanelment Process & Experience: Early adopters (2018-19) included medical colleges and trust-based hospitals; mid-sized nursing homes joined during COVID (2020-21); smaller facilities empanelled in the consolidation phase (2022-24).
- Key motivators for empanelment: improved patient access for economically vulnerable sections, increased footfall and assured revenue, competitive positioning in local health markets, and alignment with social responsibility goals.
- Barriers identified: cumbersome documentation requirements, slow reimbursement and follow-ups, resource and staffing constraints in smaller facilities, communication gaps regarding process requirements, and increasing stringency over time.
- RMNCH Service Coverage Under AB PM-JAY: Multi/super-speciality hospitals show high Ayushman patient volume (40-70% of IPD) but low RMNCH utilization (5-15% of Ayushman cases), with orthopaedics, surgery, and dialysis dominating. Child/paediatric hospitals demonstrate highest RMNCH focus, with 50-70% Ayushman patients and nearly 90-100% of these being neonatal/paediatric cases.

Most of RMNCH packages (normal delivery, C-section, hysterectomy) are restricted to government facilities, with only select private medical colleges and trust hospitals permitted emergency cases with prior patient history. Widespread dissatisfaction with package rates, particularly for neonatal care, obstetric complications, and paediatric ICU services rates often do not cover actual treatment costs. Claims payment experiences vary significantly by state: Madhya Pradesh facilities report relatively smoother processing, while UP and Bihar face delays of 3-6 months with some claims pending over a year. Digital platforms (BIS, HEM, TMS) are functional but pose challenges for smaller facilities with limited IT infrastructure and trained staff.



QoC Indicator Feasibility Assessment

As a key exercise under the Landscaping Study, IDF initiated a "Feasibility Check of Quality-of-Care Indicators" in ADHUNA and other private sector facilities. This assessment builds on IDF's previous secondary research document on exhaustive QoC indicators, developed in consultation with the FRHS team and Foundation.

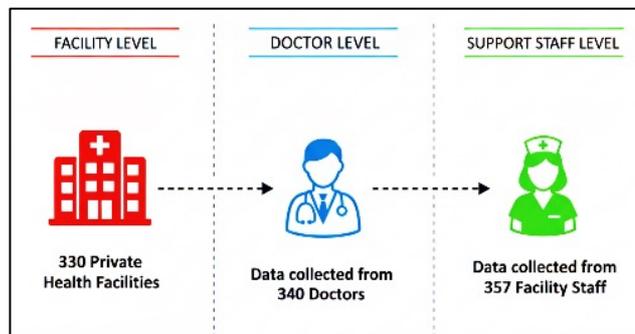
Status:

The data collection and consultation phase is now complete, and IDF is currently analysing the findings. Based on the results, IDF will recommend a set of indicators to be captured as part of M&E for the ADHUNA project. The findings will also provide insights into current data recording practices, records compilation methods, and facility readiness to adopt new documentation standards.

Situational Overview

As the Monitoring, Evaluation, and Learning (MEL) partner for the ADHUNA project, FRHS successfully completed a situational overview or baseline study across all four project states and 29 districts, culminating in a comprehensive analytical report spanning all key project themes. The study covered 330 private health facilities and data collected from 340 doctors and 357 facility staff, providing a robust and representative snapshot of prevailing practices across the intervention districts.

With support from ADHUNA District Coordinators, in depth discussions were conducted with both doctors and facility staff at each facility and findings are based on quantitative and qualitative data.



Presented below are the key findings from this situational overview. These findings establish a critical foundation for understanding existing practices and gaps and enable deeper analysis to generate actionable insights. The insights are being used for designing CPD sessions, facility touchpoints, and other ways to engage health facilities continuously.

Key Findings from the Baseline Study:

- ❖ 92% doctors prefer using IV FCM to treat anaemia during the 2nd and 3rd trimesters of pregnancy.
- ❖ 78% of facilities reported that IV FCM is administered by nursing staff under doctor supervision; however, there are gaps in how IV FCM is prepared and the duration of infusion.
- ❖ Carbetocin is used in 56% of cases during active management of the third stage of labour (AMTSL).
- ❖ 17% doctors highlighted the heat stability of Carbetocin injection as a practical advantage.
- ❖ Labor monitoring in private facilities remains largely experience-driven, with limited use of structured tools such as the Labor Care Guide.
- ❖ Visual estimation is commonly used to assess blood loss after delivery, and multiple uterotonics are used for the prevention of postpartum haemorrhage.
- ❖ Early initiation of breastfeeding is widely practiced across project districts, with doctors reporting that breastfeeding is initiated within the first hour for 84% of women following vaginal deliveries. The rates following caesarean section are 54%.

Rollout of Quarterly feedback system

A structured quarterly Feedback System – using a Facility Monitoring Checklist (FMC) for assessing project progress was developed to capture facility-level service delivery practices, identifying on-ground challenges and systematically tracking the adoption of project innovations to support evidence-based activity planning. This tool also supports documentation of good practices and assessment of capacity-building needs of facility teams. FRHS successfully piloted the FMC across 6 districts, with participation from 55 hospitals and clinics. The combined use of a self-administered approach and district coordinator support has resulted in effective engagement and demonstrated the facilities' willingness to provide structured feedback.



Discussion on facility monitoring checklist in progress

Upcoming Priorities

Over the next quarter, FRHS will focus on the deployment of FMC across the project intervention districts with the help of the district coordinators and undertake learning activities to document key project lessons and use them to support scale-up and strengthen engagement with the private sector. The team will document case studies and success stories, capturing both challenges and effective practices to support program refinement and knowledge sharing. In addition, FRHS is working on the updating the project dashboard with CPD-2 analysis and providing facilitation support for the upcoming second round of CPDs and refresher CPDs.



Strategic Communications and Advocacy Overview

During the October 2025 to January 2026 period, Global Health Strategies (GHS) continued to support Project ADHUNA through a focused communications and advocacy strategy aimed at advancing evidence-based maternal health innovations and strengthening the role of professional stakeholders in shaping quality and equity-centered maternal health practices. GHS's work during this quarter prioritised structured engagement, knowledge translation, and narrative building to ensure that technical evidence is meaningfully integrated into professional discourse and public-facing platforms.

Advancing Professional Engagement

A key area of work during this period was the support for preparations for a health partners' meeting held in Lucknow in December 2025. The meeting reviewed progress across key health interventions with a particular focus on achievements in 2025 and priorities for 2026. As part of this forum, Project ADHUNA presented, with GHS contributing to the articulation of progress under Outcome 3, which focuses on strengthening the capacity and role of FOGSI and its members at the national, state, and city levels to advance women's health practice rooted in scientific evidence, innovation, quality, and equity.

Thought Leadership and High-Level Convenings

Thought leadership remained a central pillar of GHS's communications and advocacy support during this period. GHS curated and supported a high-level panel discussion at the STAR Sampoorna 2025 conference titled "Progress Thus Far: Scaling Evidence-Based Maternal Health Innovations in India." The session was moderated by Ms. Suchi Mahajan, Vice President, Global Health Strategies, and brought together senior stakeholders from government, philanthropy, professional associations, research institutions, and the consulting sector.

The panel included Dr. Pawan Kumar from the Ministry of Health and Family Welfare, Dr. Anchita Patil from the Gates Foundation, Dr. Bhaskar Pal from FOGSI, Dr. Sushanta Banerjee from IPAS Development Foundation, and Ms. Lakshmi Sethuraman from Sattva Consulting. GHS developed detailed session briefs and discussion frameworks to ensure a coherent, evidence-informed, and action-oriented discussion on pathways for scaling proven maternal health interventions within India's health system

GHS also supported a white paper titled "Advancing Fetal Health: Emerging Technologies in Fetal Monitoring," which focused on fetal monitoring. The paper was designed and formally launched at STAR Sampoorna 2025, followed by dissemination among FOGSI office bearers and publication on the ADHUNA website.





Innovative Content and Clinician-Led Storytelling

To complement high-level discussions with practitioner perspectives, GHS conceptualized and executed an innovative vox-pop video initiative at STAR Sampoorna 2025. The initiative involved end-to-end ideation, development of guiding questions for the moderator, and outreach and coordination with participating clinicians. Moderated by Dr. Rohan Palshetkar, the initiative resulted in the recording of 36 short video bytes from doctors, capturing on-the-ground reflections on maternal health innovations and implementation challenges. These videos are being disseminated through ADHUNA and FOGSI digital platforms to amplify clinician voices and strengthen peer-to-peer learning and advocacy.

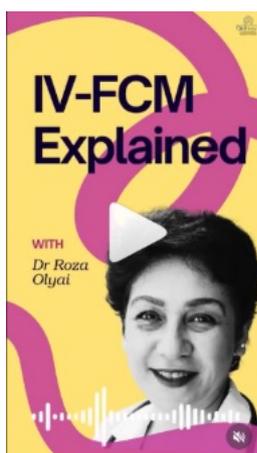
Knowledge Products and Capacity-Building Communications

In addition, GHS collaborated with the Foundation for Reproductive Health Services (FRHS) to develop the communications component of a facility monitoring checklist questionnaire, strengthening the clarity, usability, and relevance of monitoring tools.

GHS also contributed to capacity-building efforts by developing CPD 2.0 communication decks for clinicians and paramedics. These materials focus on strengthening counselling skills, empathetic communication, and effective engagement with women and families, reinforcing the role of communication as a critical component of quality maternal and newborn care.

Media Engagement and Digital Outreach

Media engagement formed an important component of GHS's communications and advocacy strategy during this period. GHS supported radio-based outreach to extend the reach of ADHUNA messaging beyond professional audiences. This included a radio interview with Dr. Preeti Kumar in Lucknow, as well as the development of radio scripts for additional clinicians, including Dr. Ritu Khanna, Dr. Roza Olyai, and Dr. Shweta Kaul, to support consistent and accurate dissemination of maternal health messages through mass media channels.



Together, these efforts have laid a strong foundation for sustained thought leadership, deeper professional collaboration, and expanded outreach through both traditional and digital channels, supporting ADHUNA's objectives for scale and impact in the year ahead.



Calibrated Drape Experience-sharing Exercise by Sattva

As a partner in the ADHUNA team, Sattva has been supporting the program through a combination of high-level program steering and practical grant management. In line with this, Sattva will be supporting the broader objective of scaling clinical innovations under Outcome 2 by running an experience-sharing exercise on **calibrated blood collection drapes**, in collaboration with the PEU.

The calibrated drape is a vital tool for the accurate detection of blood loss during birthing, recommended within the EMOTIVE bundle of practices. In an attempt to transition this innovation from ecosystem knowledge to standard practice:

- Sattva will be running a multi-state experience-sharing exercise on two types of drapes, with doctors, associated paramedical staff and mid-wives, from varied types and sizes of facilities.
- Participating practitioners will receive samples of two types of drapes for use in routine deliveries over a 10-week period. (see pictures below)
- Participants will then share their experiences, which will support the following key objectives:
 - Assessing practitioners' experience with the drape in real-world settings and using these insights to develop standardised user guidelines
 - Encouraging and enabling the use of the drape in day-to-day practice and across varied birthing styles
 - Collecting practitioner feedback to strengthen the design and usability of the drape

In the spirit of ADHUNA, the exercise is an effort towards safer intrapartum practices across the ecosystem.

If you are interested in contributing to this experience-sharing exercise are encouraged to reach out to the ADHUNA PEU!



Drape from Primewear



Drape from Pregna

Looking Ahead



Dear FOGSlans,

Namaste.

As I look ahead to my tenure as President in 2027, I am excited about the journey that ADHUNA is on. I have had the privilege of being part of Project ADHUNA since its very inception and I have seen the project grow from a foundational concept into a flourishing movement has been one of the most rewarding experiences of my professional life.



My travels across various districts as faculty for the Continuous Professional Development (CPD) sessions have been particularly inspiring on the potential there is to impact quality in small private facilities. There is a unique, enthusiasm with which our local teams operate; their dedication to bringing global standards to the grassroots level is truly the core of this project.

I look forward to working with Dr Jaydeep Tank and Project ADHUNA team in creating tangible, lasting value within the private sector by inculcating innovations and evidence-based clinical practices in intrapartum and newborn care.

M.A. Patel

Dr. Madhuri Patel
FOGSI President Elect, 2027

Upcoming Activities

- **AICOG:** The PEU and Partners will be part of the AICOG 2026 at Delhi.
- **Pilot CPD:** CPD 2 pilot will be carried out in two to three districts.
- **Training of Trainers (ToT):** We will be hosting the Training of Trainers for CPD 2 in February 2026
- **Webinars:** Periodic online tutorials are being planned for our districts on specific topics basis requirements emerging from the field.
- **Launch of ADHUNA Website, ADHUNA App & Learning Hub** for online learning and certification.

Glimpses from the Field



Facility Level Touch Points by ADHUNA District Coordinators



Zohara Siddique
MP - Bhopal & Jabalpur



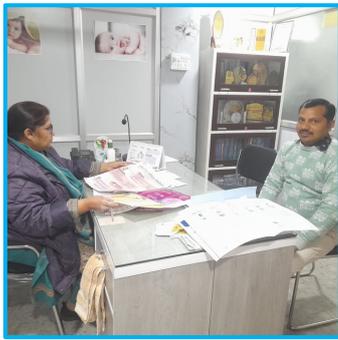
Sudhanshu Vikram
UP - Mau & Varanasi



Anyas Kumar Navin
BH - Patna, Gaya & Navada



Brijendra Pandey
UP - Jaunpur & Prayagraj



Rahul Awasthi
UP - Aligarh & Bulandshahr



Ravi Sharma
UP - Agra & Mathura



Amit Kumar Jain
MP - Ujjain & Indore



Nikhila V Priya
OD -Khorda, Ganjam and Cuttack



Chandan Kumar
BH - Muzaffarpur, Sitamarhi & Darbhanga



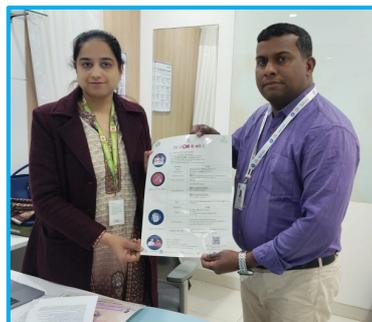
Amit Kumar Sharma
UP - Bijnor & Moradabad



Saeed Ahmad
UP - Lucknow



Roop Kumar
MP - Gwalior



Finto Francis
UP - Gautam Buddha Nagar & Ghaziabad



Faisal Anwar
UP - Meerut & Muzaffarnagar



Advancing Delivery of (Quality)
Healthcare through Upgraded Newborn
(and Intrapartum Care) Approaches

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