

2026

GRANT PROPOSAL

Community Health Worker Training for Maternal Care

Strengthening antenatal and postnatal care in 25 urban settlements

PREPARED FOR

PREPARED BY

DATE

Programme Officer, Your
Funding Foundation

Dr. Farah Siddiqui, Medical
Director

March 2026

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EXECUTIVE SUMMARY

Many pregnant women in informal urban settlements miss antenatal check-ups and do not recognise danger signs. Asha Kiran Health Trust proposes to train 75 community health volunteers to track pregnancies, counsel families, accompany women to clinics and follow up after delivery, linking households with existing public health services.

75

25

18 months

Volunteers trained	Settlements	Duration
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BACKGROUND AND NEED

Women in these settlements often work daily-wage jobs and cannot easily visit clinics. Information about danger signs and nutrition is limited.

Public health services exist, but families may not know how to access them. Trained volunteers from the same community can bridge this gap.

GOALS AND OBJECTIVES

Increase timely antenatal and postnatal care for women in 25 settlements.

1. Train 75 volunteers in maternal health, counselling and record keeping.
2. Register pregnancies early and track check-ups.
3. Accompany high-risk women to health facilities.
4. Conduct community awareness sessions on nutrition and danger signs.

APPROACH AND ACTIVITIES

Volunteer selection and training

Select women trusted in the community and train them over 15 days.

Household visits

Monthly visits to registered pregnant women and new mothers.

Referral support

Accompany high-risk cases and follow up after referral.

Community sessions

Monthly group sessions on nutrition, hygiene and newborn care.

Deliverables

Deliverable	Description	Due
Training curriculum	Modules and job aids	Month 2
Trained volunteers	75	Month 3
Pregnancy register	Digital tracking sheet	Month 4
Final evaluation	Outcomes and lessons	Month 18

TIMELINE

The work plan below shows the main activities and their indicative timing.

Activity	Q1	Q2	Q3	Q4	Q5	Q6
Selection and training	■					
Household visits		■	■	■	■	■
Community sessions		■	■	■	■	■
Mid-term review			■			
Evaluation						■

TEAM AND GOVERNANCE

Name	Role	Responsibility
Dr. Farah Siddiqui	Medical director	Clinical oversight
Programme manager	Manager	Operations and partnerships
Supervisors (5)	Supervisors	Support volunteers
Health volunteers (75)	Volunteers	Visits and referrals

BUDGET

All amounts are estimates in Indian rupees and are provided as sample figures for planning.

Head	Details	Amount (₹)
Training	Curriculum, venue, trainers	380,000
Volunteer honorarium	75 × 18 months	1,350,000
Supervisors	5 × 18 months	900,000
Job aids and registers	Printing and phones	220,000
Community sessions	Materials and refreshments	180,000
Evaluation and admin	External evaluation, overheads	300,000
Total		3,330,000

MONITORING AND EVALUATION

Indicator	Target	How measured
Early registration	80% in first trimester	Register
Four or more check-ups	75% of women	Clinic cards
Postnatal visits	90% within 7 days	Visit logs
Volunteer retention	85%	HR records

RISKS AND MITIGATION

Risk	Likelihood	Mitigation
Volunteer drop-out	Medium	Honorarium and recognition
Migration of families	Medium	Handover between settlements
Data privacy	Low	Consent and coded records

SUSTAINABILITY

Volunteers will be linked with the public health system's community programmes, and the trust will seek municipal support to continue honoraria.

CONCLUSION

Trained community volunteers can make a measurable difference to the health of mothers and newborns.

Next step

Approve a grant of ₹33.3 lakh over 18 months.

Dr. Farah Siddiqui

Submitted by

Approved by (name, designation)