

## Programme Update on Community Action for Health Assam

### Background

Assam was one of the 9 states in which the pilot phase of Community Based Monitoring (CBM) programme was implemented from 2007 to 2009. The state Nodal NGO, the Voluntary Health Association of Assam (VHAA) led its implementation in 3 districts: Dhemaji, Chirang and Kamrup (Rural) across 135 villages with support from the district and block level NGOs. Key activities undertaken in the pilot were: (i) constitution of the planning and monitoring committees (PMCs) at various levels, (ii) organisation of training for the members of PMCs on community monitoring, and (iii) undertaking community monitoring and preparation of report cards based on collected data. This was followed by the organisation of Jan Samwads. Key learnings from pilot were: (i) requirement of a facilitator to mobilise and mentor the community to take up monitoring process forward; and (ii) empowerment of the community on monitoring processes and awareness generation on their health rights and entitlements.

<b>At a Glance<sup>1</sup></b>	
ASHAs	30,619
VHSNCs	27,673
Rogi Kalyan Samiti	1,226
Mahila Arogya Samiti	658

### Scale of Implementation

Over the years, the state continued to invest in the community monitoring and gradually the scale was increased till the FY 2017-18. The state nodal agency *Voluntary Health Association of Assam and the State Community Processes team* mentored the Community Action for Health (CAH) processes in the state. However, as per the State PIP approval in the FY 2018-19, the state is focusing on piloting community mobilisation and monitoring of Health and Wellness Centre (HWC) services across 7 aspirational districts: Baska, Barpeta, Darrang, Dhubri, Goalpara, Hailakandi and Udalguri, covering a total of 222 HWCs.

The table below describes the CAH scale of implementation in the state since its inception:

Year	Facilitating Agency	Districts	Blocks	VHSNCs
2007-09	Voluntary Health Association of Assam	3	9	135
2012-13	Voluntary Health Association of Assam	5	34	5,678
2016-17	Voluntary Health Association of Assam	18	105	4,220
2017-18	Community Processes team	33 <sup>2</sup>	149	12,000
2018-19	Community Processes team and trainers- Health and Wellness Centres (HWCs-222 nos.)	7	55	1,110
2019-20	Community Processes team and trainers- Health and Wellness Centres (HWCs-222 nos.)	7	55	1,110

<sup>1</sup> Source-Assam NHM PIP FY 2018-19

<sup>2</sup> Number of districts in the state has increased from 27 to 33 during fourth quarter of 2017-18.

## Role of AGCA in Assam

The Advisory Group on Community Action (AGCA) has been providing support to the state for planning and rolling out the CAH processes since 2013-14. Major areas of support provided to the state are:

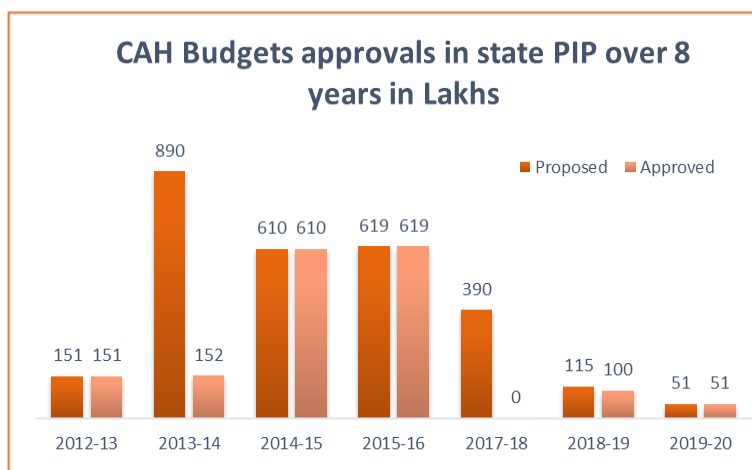
- Planning the 'community action for health' strategies and develop proposal for inclusion of CAH component in the state NHM PIPs.
- Build capacities of the state, district and block community processes team and state nodal officer to roll out the CAH activities.
- Support the state in developing the CAH tools and guidelines.
- Undertake field review visits for mid-course correction and strengthen the functioning of CAH processes.

## Pool of Trainers on CAH

The state has a pool of 63 master trainers' on CAH who included state officials, District and Block Community Mobilisers, Assistant Block Programme Managers and ASHA Facilitators. In addition, the state has been able to train the following officials on CAH:

State NHM Officials	VHSNC Members	PRI Members	NGO Staff	District Community Mobilizers	BCMs/ ABPM	ASHA Supervisors	ASHAs
16	5,310	5,310	129	45	152	2,818	5,310

## Budgetary Allocations for Community Action for Health in state Programme Implementation Plans



Post pilot, the state proposed the CAH component in the state PIP FY 2012-13. Though the MoHFW had approved the component in the consecutive three ROPs in the FYs 2013-14, 2014-15, and 2015-16, the state had yet to move forward the processes. Also, the NGO selection processes took around 21 months (May 2014 to January 2016) in the state. The budget approved for the FY 2014-15 was then carried forward to the FY 2016-17 – it was hence, not shown in the graph. The Ministry

had not approved separate funds for the FY 2017-18 and the state was communicated to use the ASHA resources for CAH activities. The CAH budgets proposed and approved in the FYs 2018-19 and 2019-20 have included the budgets approved for RKS training as well.

Subsequently, the state trained all the District Community Mobilizers (DCMs), Block Community Mobilizers (BCMs) and ASHA Supervisors on CAH. However, the momentum could not be built up for implementing CAH on the ground during FY 2017-18.

## Current Implementation Status

The state NHM designed community participation strategy under the community action for health component around 691 HWCs at the sub-health centre level especially during its formative stage itself to promote community ownership of the centres. The MoHFW approved this new initiative and budget was sanctioned for piloting community mobilisation and monitoring of 222 HWCs in 7 aspirational districts: Baska, Barpeta, Darrang, Dhubri, Goalpara, Hailakandi and Udalguri in the FY 2018-19. Since then the



**Orientation of master trainers on community based monitoring of Health and Wellness Centre services in Kamrup Rural, Assam**

state community processes unit has initiated this pilot intervention in the state. The AGCA Secretariat supported the state NHM in preparing the implementable plan, guidelines and monitoring tool, designing training of the trainers (ToTs) and training for VHSNC members. Regular mentoring and field review are done to guide the field processes and suggest the mid-course corrections, wherever required.

A total of 3,500 VHSNC members from 1,400 VHSNCs were oriented on HWC services. These trained VHSNC members are mobilizing communities to access services and have begun providing feedback to providers on services. Subsequently, the VHSNC members have visited 132 HWCs between March - December, 2019 and collected information on HWC functioning, costs incurred by the people in getting treatment, identification of gaps, etc., which were discussed with the HWC staff to resolve the possible issues at the local level. The feedback was compiled at the state level and analysed. In August 2019, the state Mission Director issued instructions to Joint Directors at the district level to take actions on the identified gaps. Following this, the district authorities have taken remedial actions on the issues identified by the community.

## Data Collection and Analysis

The data from the filled -in community monitoring forms was then entered by the respective district trainers in the presence of VHSNC members in google forms available on mobile through the link shared by the State Community Mobiliser. The Mission Director, NHM sent a directive to Joint Directors of all 7 aspirational districts to address the issues identified by the community.

Some of the key feedback from 132 HWCs till December 2019 are as follows:

Sl. No.	Indicators	Percentage
1	HWCs have Community Health Officers and MPWs (F) in place	98%
2	HWCs have MPWs (M) in place	85%
3	ASHAs were available in villages under HWCs	100%
4	HWCs have done population enumeration	98%
5	HWCs were renovated	85%
6	HWCs have power backup	77%
7	HWCs have blood sugar testing on a regular basis	98%
8	HWCs have blood pressure testing facility on a regular basis	100%
9	HWCs were conducting normal deliveries	97%
10	HWCs were providing family planning services	100%
11	HWCs were conducting Village Health and Nutrition Days.	100%
12	HWCs have safe drinking water facility	62%
13	HWCs reported to have medicines	85%
14	Sanitary napkins are made available	67%
15	Patients rated the behaviour of service providers as good	94%
16	Patients did not incur any expenditure while seeking treatment	28%

In addition to the monitoring parameters listed above, other issues raised by the community were: (i) construction of proper roads to 8 HWCs located in 5 districts (Darrang, Udalguri, Hailakand, Barpeta and Dhubri). Roads were damaged due to floods in some districts; (ii) the HWC in Goalpara demanded radiant warmer for delivery room; and (iii) lab tests were not conducted in HWC in Dhubri.

**Corrective Actions taken after the monitoring by Feedback team:**

- Joint Director, Health Services, Goalpara issued a letter to sub-divisional medical health officers to ensure adequate supply of essential drugs at the HWCs.
- In Udalguri district, non-functional generator in a HWC was repaired, waiting area was developed and drinking water was made available.
- At some places, the local village councils took initiative to build boundaries around HWCs and improve the seating area using its own resources.

**GOVT OF ASSAM**  
**OFFICE OF THE JOINT DIRECTOR OF HEALTH SERVICES**  
**CUM MEMBER SECRETARY, DISTRICT HEALTH SOCIETY, GOALPARA**  
**NATIONAL HEALTH MISSION,**  
**DISTRICT PROGRAMME MANAGEMENT UNIT, GOALPARA**  
 Pin No: 783101

No. NHM/GLP/Community Process/2019-20/ 734C Dated 27/08/2019

To

The SDM&HO/Incharge  
 Agia, Lakkhipur, Matia, Mornai and Ranguli BPHC

Sub :- Regular supply of essential drugs and medicines to Health and Wellness Centers (HWC)

Sir,

With reference to the subject cited above, I would like to inform you that as a part of Community Action for Health program VHSNC members are visiting HWCs to monitor the activity and functionality of all Health and Wellness Centers and their feedbacks are filled up online. Out of several gaps which came out during their visit one major problem is supply mechanism of drugs and medicines. You are requested to ensure and manage regular supply of drugs and medicines to HWC Sub centers so that CHO should not face any hardship for want of drugs and medicines.

This is for your information and necessary action

Jt. Director of Health Services cum  
 Member Secretary DHS, Goalpara

No. NHM/GLP/Community Process/2019-20/ 734C-19 Dated 27/08/2019

Copy to:

1. The Mission Director, NHM, Assam for favor of his kind information.
2. The Deputy Commissioner cum Chairman, DHS Goalpara for favor of her kind information.
3. The Executive Director, NHM, Assam for favor of his kind information.
4. The Incharges, all Link PHC, they are asked to take necessary action for regular supply of drugs and medicines to HWC Sub Centers on priority basis.
5. The State Community Mobiliser for information.

Jt. Director of Health Services cum  
 Member Secretary DHS, Goalpara

**Office of the Joint Director of Health Services cum Member Secretary**  
**District Health Society, National Health Mission, Udalguri, BTAD**

No. NHM/DHS/UDL/ASHA Incentives/2018-19/ 1309 Date:28-08-2019

To,

The Mission Director  
 National Health Mission, Assam

Sub: Action Taken Report on H&WCs Monitoring By VHSNC Members of Udalguri District

Sir/Madam,

With reference to the letter of the Mission Director, NHM, Assam, vide No.:NHM/CAH/MISC/14-15/Part-II/13080, Date: 19/08/2019, actions have been taken regarding Report on H&WCs Monitoring By VHSNC Members of Udalguri District:

• All Total H&WCs as priority Basis as Follows:

Name of H&WC	Action Taken	Remarks
Priority 1: Barjar Ashram & Borigaon Hatkhola	Barjar Ashram: The Old Generator has been repaired	With reference to the letter received from State HQ, NHM, Assam, vide No.NHM/CP/CORRESPONDENCE/2126, Date: 30/08/2018, Roll Out of H&WC Monitoring By VHSNC Members Training expenditure incurred under FMR Code: 3.2.4.2 (RoP 2018-19), only 10 No. H&WCs were approved for the VHSNC Members Training. (100% Training & Monitoring have been completed).
Priority 2: Pathakpur, Fatasimalu, Merabil, Mowamari, Suklai No. 2, Gitibari (Khoirabari), Gitibari (Udalguri) & Mazkhati	Suklai No. 2: Waiting area has been made neat and clean, Sitting arrangement has been done. Availability of Toilet for the patients has been done, Availability of safe drinking water has been done. As per supply from State HQ sanitary napkins will be made available for the adolescents at all Health & Wellness Centres.	
Priority 4: Khowrang Borigaon, Baligaon Panbari, Bhairabkunda, Kadabil, Bholatar No.3, Biskhuti & Ekbarari	Not Applicable	For the FY: 2019-20, 6 No. of H&WCs have been approved for the Roll Out of H&WC Monitoring by VHSNC Members. (Planned to be completed towards the end of October 2019)

The action has been taken for all the above mentioned H&WCs. Thanking you.

Jt. Director of Health Services &  
 Cum Member Secretary, DHS, Udalguri, BTAD

Memo No. NHM/DHS/UDL/ASHA Incentives/2018-19/1310-12 Date:28-08-2019

Copy To:

1. The Principal Secretary cum Chairman, DHS, Udalguri, BTC, Kokrajhar, for kind information.
2. Office Copy.

Jt. Director of Health Services  
 Cum Member Secretary, DHS, Udalguri, BTAD  
 Joint Director of Health Society  
 Member Secy, District Health Society  
 Udalguri District

### A Glimpse of Activities at the HWCs

