



58.

OFFICE OF THE MISSION DIRECTOR
NATIONAL HEALTH MISSION, ASSAM
Saikia Commercial Complex, G. S. Road, Christianbasti, Guwahati - 781005
Ph. No. 0361 - 2340236:: Fax No. 0361 - 2340238
Website : www.nrhmassam.in E_mail ID : misnrhm.assam@gmail.com

No: NHM/CAH/MISC/14-15/2155/(part II)/ 29606

Date: - 30/12/2017

6/01/2018

From:

J.V.N. Subramanyam, IAS
Mission Director
National Health Mission, Assam

To: The Joint Director of Health Services &
Member Secretary, District Health Society,
(All Districts)

Sub: 1 Day orientation of ASHA Supervisors on Community Action for Health.


Sir/Madam,

With reference to the subject cited above, this is to inform you Community Action for Health is a key strategy of the National Health Mission (NHM), which places people at the centre of the process of ensuring that the health needs and rights of the community are being fulfilled. It allows them to actively and regularly monitor the progress of the NHM interventions in their areas. It also results in communities participating and contributing to strengthening health services, thereby, bringing Public into Public Health.

In this connection you are requested to conduct a **1 Day orientation of ASHA Supervisors on Community Action for Health** programme in your district at the earliest. Details, guidelines and budget break-up is annexed. You are also requested to prepare a training calendar and communicate to be undersigned.

Note: Expenditure is to be incurred under FMR Code: B.1.1.1.5.1
Enclosure: As stated above.

Yours sincerely,


(J.V.N. Subramanyam, IAS)
Mission Director
National Health Mission, Assam

Memo No: NHM/CAH/MISC/14-15/2155/(part II)/

29607-13

Dated: 30/12/2017

6/01/2018

Copy to:

1. PS to Hon'ble Minister of Health & Family Welfare for kind appraisal of Hon'ble Minister of Health & Family Welfare, Govt. of Assam.
2. PS to Principal Secretary to Govt of Assam, Health & FW Department, Dispur for kind appraisal of the Principal Secretary.
3. Principal Secretary of Autonomous Council/ Deputy Commissioner cum Chairman District Health Society (All Districts)
4. The Executive Director, NHM, Assam, for information.
5. Director, Finance & Accounts, National Health Mission, Assam for information.
6. The Member, AGCA, New Delhi, for information and necessary action.
7. The DPM/ DCM/DAM, NHM Assam (All Districts), for information and necessary action.


Mission Director
National Health Mission, Assam

Guidelines to use the Community Action for Health tool

Background

Assam has shown high maternal mortality (300) SRS- 2011-13 and infant mortality rates (44) - SRS 2016 when compared to the national average of 167 and 40 respectively. There is a concern in the state that the high proportion of maternal and infant deaths go unreported and the high risk pregnancies are not tracked. Moreover, high prevalence of anaemia among other factors, is contributing to the high risk pregnancies and hence, the maternal mortalities.

The state despite having the ASHAs and the support structures, is finding it difficult to fill the gap in tracking and reporting of the high risk pregnancies, maternal and infant deaths.

The state has hence, decided to use the community action for health strategy with the following objectives:

- a) Create awareness of the community on government schemes and entitlements for the pregnant women and the infants.
- b) Create public awareness on need to take care of the pregnant women and infants at the community level and provide support to the health service providers including ASHAs in making services available to the most vulnerable and high risk cases.
- c) Generate evidence for health planning and corrective actions by the community and the health department.

To fulfill the above objectives, three formats focusing on maternal and child health and the community perception of the health services are developed for using at the community level.

Format 1: Maternal health (Individual interviews-5)

The tool aims to capture the behavioural aspects and the services received by the pregnant women. The format contains 41 questions spread over in 8 sections covering nutrition; clinical and counseling services received; entitlements received; care received during the delivery and post-delivery; and the awareness on the maternal and child deaths.

Format 2: Child health (Individual interviews-5)

The tool aims to capture the behavioural aspects and the services received by the mother of children aged 0-24 months. The format contains 21 questions spread over in 5 sections covering newborn care, immunization, childhood illnesses, counseling and nutrition, and awareness on child death.

Format 3: General health services (Focus group discussions-2)

The tool aims to capture the availability of the health services in the village and the perception of the community on the health services. The format contains 28 questions spread over in 4 sections covering the availability of the health facilities and services; awareness on the services; and behavioural aspects of the community.

Guiding Notes for rolling out the training:

Participant: ASHA Supervisor

Batch Strength: 30 (+ /- 5 members)

- The training should be conducted only by the DCM/ BCM trained on CAH Tool during the DCM/ BCM Capacity Building workshop held in 2 batches from 6th to 8th October 2017 & 16th to 18th November 2017 respectively.
- The number of participants for each batch should be 30 per batch with an upper and lower limit of +5 or -5.
- The participants are to be informed well in advance regarding the training timing & venue.
- The venue should not be located too far away for the participants as this would attract low attendance.
- Prior to the training the trainers of the particular district should sit together & prepare the lessons to be covered during the training.
- A proper agenda for the training should be prepared and shared during the training.
- All the participants should be provided with the CAH Tool a pen, writing pad & folder.
- Arrangement of food (Breakfast, Lunch, Tea & snacks should be taken care of.
- A training completion report is to be provided once the training has been completed.
- After the Participants have been trained they should train the VHSNC members during the monthly VHSNC meeting & fix responsibilities to the active members of the VHSNC to conduct the individual interviews in the community as described in the CAH Tool & the VHSNC fund may be used for implementation of the same.
- The information collected from the individual interviews *via the CAH Tool* should be collected & compiled & shared with district & state thereafter for which the BCM & DCM shall be responsible respectively.
- The training calendar should be shared by the district within 7 days of receipt of this guideline.



Mission Director,
National Health Mission, Assam

1 Day Orientation of ASHA Supervisor on CAH Budget Breakup				
FMR Code: B.1.1.1.5.1				
Sl	District	Number of Participants to be trained	Number of Batches per District (Batch Strength @ 30 Participants per batch)	Fund allocation Cost per participant @ Rs. 253/-
1	Baksa	97	3	24541.00
2	Barpeta	149	5	37697.00
3	Bongaigaon	68	2	17204.00
4	Cachar	161	5	40733.00
5	Chirang	54	2	13662.00
6	Darrang	83	3	20999.00
7	Dhemaji	70	2	17710.00
8	Dhubri	131	4	33143.00
9	Dibrugarh	109	4	27577.00
10	Dima Hasao	22	1	5566.00
11	Goalpara	97	3	24541.00
12	Golaghat	100	3	25300.00
13	Hailakandi	67	2	16951.00
14	Jorhat	113	4	28589.00
15	Kamrup Metro	18	1	4554.00
16	Kamrup Rural	162	5	40986.00
17	Karbi Anglong	102	3	25806.00
18	Karimganj	109	4	27577.00
19	Kokrajhar	130	4	32890.00
20	Lakhimpur	104	3	26312.00
21	Morigaon	83	3	20999.00
22	Nagaon	202	7	51106.00
23	Nalbari	71	2	17963.00
24	Sivasagar	117	4	29601.00
25	Sonitpur	177	6	44781.00
26	Tinsukia	121	4	30613.00
27	Udalguri	101	3	25553.00
Total:		2818	92	712954.00


 Mission Director,
 National Health Mission, Assam

DLK