

## Programme Update on Community Action for Health in Uttarakhand

### Context

Community Action for Health (CAH) is a pillar of the National Health Mission (NHM) that places the community at the center of the process to ensure the health needs and rights of the community are fulfilled. It gives people the opportunity to participate and provide regular feedback on the progress of NHM interventions, and to strengthen healthcare services in their community, therefore, bringing the public into public health.

### Background

CAH process is implemented in the state since FY 2014 – 15 as an integral component of the NHM. The state has been implementing the ASHA programme with support from the District ASHA Resource Centre (DARC), which is functioning under the guidance of State ASHA resource center. The state NHM adopted the same ARC structure to implement the CAH process effectively in all 13 districts of the state.



*Jan Samwaad at Khirsu PHC, Pauri*



*Jan Samwaad at Pauri Block, Pauri District*

Though the CAH process was effectively implemented and the issues from the field were resolved through the DARC structure, the state NHM decided to dissolve this NGO structure and absorbed all the staff working under this structure to the NHM based on the positions and tiers and made functional (As per the CP guideline of NHSRC). Hence, the CAH process has been implemented by District Programme Management Unit (DPMU) and Block Programme Management Unit (BPMU) at district and block level since FY 2017 – 18. During the course of implementation, the state with support from the Advisory Group on Community Action trained 144 master trainers at state level and 344 people at the district and block levels to take forward the process through the suggested structures.

Jan Samwads organised at the district and block levels		
Financial Year	District	Block
2016 – 17	13	95
2017 – 18	Not proposed in PIP	84
2018 – 19	7 (Not organised in 6 districts due to Parliamentary Election Code of Conduct.	68
2019 - 20	13	95

## Current Status

The state NHM constituted the ASHA mentoring group to provide guidance and strengthen functioning of the ASHAs and its processes in the state. The group has been formed with the objectives as envisioned in the national guideline to: (i) provide technical guidance and inputs on the overall implementation and development of the ASHA programme, (ii) meet annually to share the key observations and assessment reports related to programme progress, challenges and innovations across districts, (iii) support the state in undertaking programme evaluations at regular intervals, (iv) enable evidence based understanding of the Programme effectiveness and proposed strategies for improved outcomes, and (v) identify the emerging priorities and support in planning future goals to enable long term sustainability of the programme. The state has convened the first meeting of the ASHA mentoring group in 2019 – 20.



Jan Samwads in progress

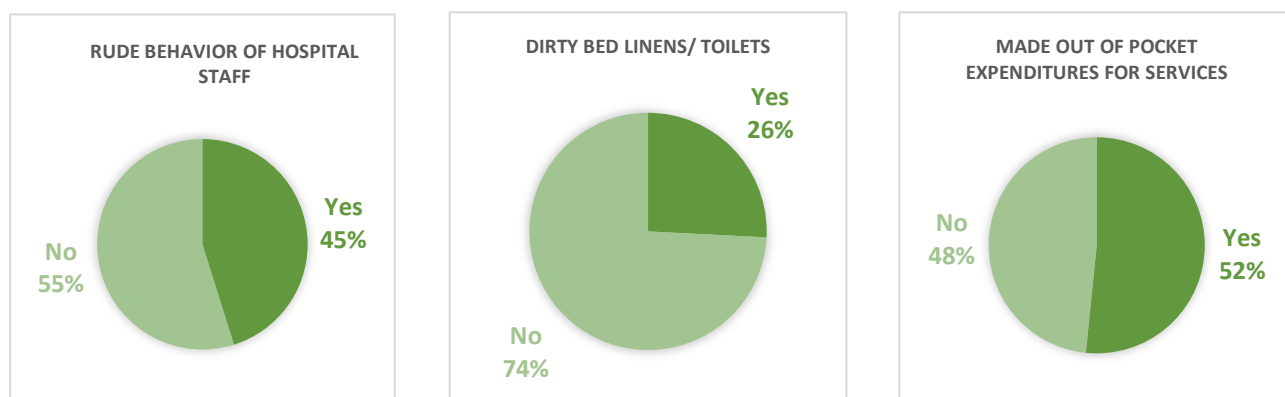
The state NHM has adopted a multipronged strategy for effective implementation of the CAH processes, where the efforts will not only be implemented in rural interventions but in urban areas as well. This include: (i) the CAH processes are being implemented in all 13 districts through the District ASHA Resource Centers, where the community mobilization is being done by the VHSNC members at the village level with support from the ASHAs and ASHA facilitators; (ii) the state NHM in partnership with Uttarakhand Social Accountability and Transparency Agency (USAATA) undertook a prescription audit of health services in Uttarakashi district in the FY 2018-19. Encouraged by the positive outcomes, the state has planned to scale up this process to 30 blocks across 13 districts in the state; and (iii) the state NHM under Urban Health Mission has strengthened the efforts of Mahila Arogya Samities (MASSs)

*“When the delivery of my wife took place, Dr. XXXX forcefully demanded charges for it. I have written proof for that. I had to finally pay Rs. 1,500 to Dr. XXXX and Rs. 500 each to other staff. Even though I did this, I was not given the drop-back facility and had to take a private vehicle and pay an additional amount of Rs. 400 to get dropped at our residence”  
Said Mr. XXX.*

to seek feedback on the urban health and nutrition day, urban primary health center and also the utilization of untied funds that are available at MAS level.

To develop a synergy between the departments for its effective implementation through ASHA Resource Centre and Social Audit unit, several meetings and discussions were organised with teams to streamline the following: (i) understand the learnings and challenges from the pilot social audit in Uttarakashi to include in the scale up phase planned for 30 blocks across 13 districts; and (ii) field based issues were identified before USAATA team undertakes community monitoring at the field level such as (a) free drugs and diagnostics; (b) Khusiyon ki Savari (ambulance services); and (c) services under Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA).

Key observation from the social audit processes held at Uttarakashi district (District Hospital, CHC and PHC) (FY 2019 – 20).



The State NHM through its approved budget from the FY 2019 – 20 has organised training on social audit process for district community mobilizers and block community mobilizers from all 13 districts and 95 blocks. A group of USAATA staff was also trained on the processes to implement the process in a similar way in selected blocks.

#### PIP Proposed Vs Approval for Community Action for Health

S No	Financial Year	Budget proposed (in Lakhs)	Budget approved (in Lakhs)	Activities approved
1.	2015-16	54.74	30.86	<b>Activities approved:</b> Training of District and Block Community mobilizers from all 13 districts. Training of VHSNC master trainers and selected VHSNC members; Community Monitoring of health services in 95 blocks,
2.	2016-17	57.91	24.57	<b>Activities approved:</b> (a) Orientation workshops, trainings and capacity building of PRIs for RKS at DHS, CHC/PHC; (b) AGCA working/quarterly review meetings; and (c) Jan Samwad at the district/block levels.

3.	2017-18	48.73	48.73	<b>Activities approved:</b> Orientation of community leaders and of VHSC, SHC, PHC and CHC; State visioning workshop; 13 District level visioning workshop; and 95 Jan Samwads and printing of CAH programme officer booklet.
4.	2018-19	32.85	19.00	Approval for 95 Blok level Jan Samwad @ Rs. 20,000 each.
5.	2019-20	170.54	165.42	<b>Activities approved:</b> 1 state level workshop & four regional workshops and one social; 13 district Jan Samwad; 95 block level Jan Samwads; PLA meeting at 11651 units
	<b>Total</b>	<b>364.77</b>	<b>288.58</b>	

#### **Plan of Action for CAH in the FY 2020-21**

- Organisation of training for a pool of 40 master trainers from Uttarakhand Social Accountability and Transparency Agency (USAATA) to promote institutionalization of the process.
- Organisation of training for 2,850 VHSNC members in a phased manner. 5,700 VHSNC members were trained so far on their roles and responsibilities.
- Organisation of Jan Samwads in all districts and blocks; and in urban areas under the National Urban Health Mission.