



A Rapid Assessment of ASHA Newsletter

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LIST OF ABBREVIATION

ANC	Antenatal care
ANM	Auxiliary Nurse Midwife
ASHA	Accredited Social Health Activist
BDO	Block Development Officer
CHC	Community Health Centre
CMO	Chief Medical Officer
Dy. CMO	Deputy Chief Medical Officer
FP	Family Planning
IFA	Iron and Folic Acid tablets
IFPS	Innovations in Family Planning Services
HR	Human Resources
IEC	Information Education & Communication
MCH	Maternal and Child Health Care
MIS	Management Information System
NC	Natal care
NGO	Non Governmental Organization
NRHM	National Rural Health Mission
PG	Post Graduate
PMU	Project Management Unit
PM	Project Manager
OBC	Other Backward Castes
OPD	Out-patients Department
OT	Operation Theater
PHC	Primary Health Centre
PNC	Post Natal Care
RH	Reproductive Health
RCH	Reproductive and Child Health
RTI	Reproductive Tract Infections
SC	Scheduled Caste
ST	Scheduled Tribe
STD	Sexually Transmitted Diseases
SIFPSA	State Innovations in Family Planning Services Project Agency
SC	Sub-centre
USAID	United States Agency for International Development
TT	Tetanus Toxide

A Rapid Assessment of ASHA Newsletter

Introduction:

Under National Health Mission (NHM) Accredited Social Health Activist (ASHA) has been selected and placed in their village for creating awareness on health, mobilize the community towards local health issues and increase utilization and accountability of the existing health services.

Capacity building of ASHAs is done for enhancing her effectiveness in the community. The prime responsibility of these ASHAs is to promote good health practice in the community. Her role and responsibilities are as follows:

- ASHA will create awareness and provide information to the community on determinants of health such as nutrition, basic sanitation & hygienic practice, healthy living and working conditions information on existing health services and need for timely utilizations of health and family welfare services.
- Will counsel pregnant women on birth preparedness, importance of trained delivery, breast feeding and complementary feeding, immunization, contraception and prevention of common infections including Reproductive tract infection/Sexually Transmitted Infection and care of young child etc.
- ASHA will mobilize the community and facilitate them in accessing health and health related services available at the village level.
- She will work with Village Health, Nutrition and Sanitation Committee of Gram Panchayat.
- She will arrange escort/accompany pregnant women & children requiring treatment/admission to the nearest pre identified health facility.
- She will provide primary health facility at the grass root and will also act as depot holder. She will inform Sub-Centers/Primary health Center about the birth and deaths in their village etc.

Taking into consideration the role and responsibilities of ASHAs and their exposure on health activities, it was thought necessary to update the knowledge of ASHAs from time to time. To complement the classroom based training and capacity building of ASHAs, NHM UP, with support from SIFPSA, introduced a quarterly newsletter called 'Ashayein' with a vision to provide a medium to regularly update the ASHAs with information and knowledge about their work and skills required in problem solving, at the same time motivating them through recognition of best practices from the field.

Study Objective:

- Whether maximum ASHAs and ASHA Sanginis are receiving the newsletter.
- To what extent it is useful for them.
- Is the simple Hindi language used understandable by the readers or any revision is required.
- What more information they need to update their knowledge as it is a training tool as well as reference material for them also.

Study Methodology:

- The study was conducted across 48 blocks of 24 districts (02 blocks per district) covering 12 divisions of UP from all four regions i.e. four divisions from the Western region, four from the Eastern region and two divisions each from the Central and Bundelkhand regions.
- The data from 12 divisional districts of UP was collected by Div. PMU officers, while rest of the 12 districts (closest to the divisional districts) were covered by a team of officers from SIFPSA headquarter for the rapid assessment.
- From each selected block, 10 ASHAs and 1 ASHA Sangini were interviewed. In all, 528 ASHAs/ASHA Sanginis were interviewed.

Study Area:

Given below is the list of region wise districts selected for the study:

Selected Districts	Region
Firozabad, Agra, Rampur, Moradabad, Ghaziabad, Meerut, Muzaffarnagar, Saharanpur	Western
Chandauli, Varanasi, Ballia, Azamgarh, Sant Kabir Nagar, Basti, Barabanki, Faizabad,	Eastern
Kannauj, Kanpur, Raebareli, Lucknow	Central
Lalitpur, Jhansi, Hamirpur, Banda	Bundelkhand

Key findings of the survey:

Following are the key findings from the rapid assessment of ASHA Newsletter:

Sl. No.	Item	Percentage
1	Total number of ASHAs contacted	N= 528
2	No. of districts covered	24
3	No. of Blocks covered	48
4	At least one ASHA Newsletter received	98.3%
5	Whether 9th/10th Issues of ASHA Newsletter received	
	Yes	83.7%
	If yes, then when	N= 442
	Do not remember	46.6%
	During ASHA meeting	5.7%
	In 2015	3.6%
	In 2016	14.7%
	In 2017	26.0%
	Others	3.4%
	Received from:	
	BCPM/BPM	51.6%
	DCPM	6.1%
	CHC/PHC Staff	35.1%
	ASHA Sangini	0.9%
	Do not remember	6.3%

Sl. No.	Item	Percentage
6	Whether 11th/12th/13thIssues received	
	Yes	94.1%
	If yes, then when (Total respondents)	N= 497
	Do not remember	27.2%
	During ASHA meeting	9.1%
	In 2017	36.2%
	In 2018	23.1%
	Others	4.4%
	If received, from whom	
	BCPM/BPM/DCPM	84.7%
	CHC/PHC Staff /HEO	9.1%
	ASHA Sangini	2.8%
	Don't remember	3.4%
7	Whether you read theNewsletter	
	Completely	63.1%
	Partially	34.8%
	Not read	2.1%
8	Did you understand the newsletter's language	
	Yes	97.3%
	No	2.7%
9	What topics you remember?	
	Mission Parivar Vikas	18.1%
	Immunization related topics	14.2%
	Antra Injection	11.8%
	Family Planning	11.1%
	VHND	10.8%
	ASHA Bima Yojna	7.6%
	Radio Drama Series	7.6%
	Behavior Change	6.6%
	Mega Call centre	6.6%
	Adolescent health	6.6%
10	Which topics did you like most	
	Mega Call Center	17.8%
	High Risk of PW	13.6%
	Family Planning	12.3%
	Radio Drama	11.3%
	VHND	10.4%
	Sas Bahu Samelan	9.1%
	Sehat Ki Rasoi	9.1%
	Antra & Chaya New Contraceptive	8.7%
	MPV	7.8%
11	Did ASHA Newsletter help increase your knowledge	
	Yes	95.6%

Sl. No.	Item	Percentage
	No	4.4%
12	If Yes then which topics	
	Family Planning	16.6%
	ASHA Insurance	13.2%
	Sehat ki rasoī	12.0%
	Antara Injection	10.4%
	Immunization	9.5%
	Chaya Goli	8.9%
	HRP	7.4%
	Mega Call Centre	11.7%
	Karm Ki Pukar	5.2%
	VHND	5.2%
13	Did you face any problem in understanding the Newsletter	
	No	83.9%
	Yes	16.1%
14	If yes, then which topics did you face problem in understanding?	
	RBSK	22.2%
	Radio Dharawahik-Sunehare Sapne Sawrati Rahen	12.3%
	Mega Call Center	11.1%
	Non communicable disease (Gair Sanchari Rog)	16.0%
	Garbhnirodhak goli (Chhaya)	8.6%
	Prasav ke bad ma ko nawjat shishu ko kangaroo vidhi.	8.6%
	Information on full immunization.	14.8%
	Garbhnirodhak injection (Antra)	6.2%
15	Does BCPM help you in reading this newsletter during monthly meeting	
	Yes	92.0%
	No	3.8%
	Time to time	4.2%
16	Language of the Newsletter	
	Easy	95.6%
	Tough	4.4%
17	Photographs in Newsletter	
	Less	5.8%
	OK	67.8%
	More	26.4%
18	Quantity of Text material in the Newsletter	
	Less	7.0%
	OK	63.1%
	More	29.3%
19	Number of pages of Newsletter	
	Less	3.8%
	OK	63.4%

Sl. No.	Item	Percentage
	More	32.8%
20	Do you think the newsletter has helped you in any way in your work?	
	Yes	90.9%
	No	9.1%
21	If Yes, then which topics	
	Asha BeemaYojna	19.7%
	Immunization	15.0%
	Family Planning	11.4%
	VHND	8.3%
	High Risk of PW	7.5%
	New Information	7.1%
	RI Schedule	6.7%
	Health of child	5.9%
	Saas Bahu Sammelan	5.9%
22	What are the messages conveyed by the ASHA Newsletter?	
	Asha Beema Yojna	20.1%
	Immunization	12.8%
	Family Planning	12.0%
	Antra Injection	10.6%
	Mega Call Centre	10.3%
	Chaya Goli	7.9%
	Sehat ki Rasoi	6.0%
	VHND	5.4%
	MPV	5.2%
	Full Immunization of child.	4.9%
	New FP method	4.9%
23	Does the newsletter say anything which you don't believe to be true?	
	Yes	0.0%
	No	100%
24	Is there any article in the newsletter, which you don't want to continue?	
	Yes	0.0%
	No	100%
25	Which information/topic would you like to see in future newsletter issues	
	Information of PMMVY	21.5%
	Leprosy	10.8%
	Complete information of HBNC	22.1%
	About Kishor-Kishori	7.7%
	Information of Pulse Polio	7.2%
	About malnutrition	6.2%

Sl. No.	Item	Percentage
	About the PW	6.2%
	Care of Child	12.3%
	JSY	6.2%
26	Messages disseminated to villagers from the Newsletter	
	Antra Injection	19.2%
	Information for Eligible Couple	8.6%
	Pregnant Women	15.3%
	Chaya Tablet	7.8%
	Full Immunization	15.3%
	Information of Male Sterilization	7.8%
	VHND	7.1%
	PW about HRP	6.7%
	PPIUCD	6.3%
	HBNC	5.9%
27	Major suggestions to make this newsletter more informative and useful	
	The newsletter should be monthly	23.9%
	About the diseases caused due to cigarette smoking	14.9%
	Details Information of PMMVY	17.4%
	Poem & jokes should be added more	6.0%
	Institutional delivery to all PW	6.0%
	More IEC related materials	6.0%
	Sehat ki Rasoi	5.5%
	Sas Bahu Sammelan	5.5%
	News related to ASHA	5.0%
	Increase the number of page in ASHA Newsletter.	5.0%
	New information	5.0%

Analysis of Survey Findings:

- About 98% ASHA/ASHA Sangini received at least one ASHA Newsletter.
- About 83% reported receiving 9th & 10th issues while 11th 12th & 13th issues were received by 94% ASHAs/ASHA Sanginis.
- More than half (52%) of the 9th & 10th issues were reported to have been distributed by BCPM/BPM, while 95% ASHAs reported receiving the 11th, 12th & 13th issues from BCPM/BPM.
- 63% of the respondents said they had read the complete newsletter, while it was reported being partially read by 34%.

- 97.3% ASHAs/ASHA Sanginis reported having no problem in reading the newsletter.
- Topics that the ASHAs/ASHA Sanginis could instantly recall were Mission Parivar Vikas, Immunization related topics, Antra Injection, Family Planning, VHND, ASHA BimaYojna, Radio Drama Series, Behavior Change, Mega Call centre and Adolescent health.
- Topics most liked by the respondents were Mega Call Center, High Risk Pregnancies, Family Planning, Radio Drama, VHND, Sas Bahu Samelan, Sehat Ki Rasoi, New Contraceptives Antara & Chaya, Mission Parivar Vikash.
- About 84% ASHA/ASHA Sangini said that they faced no problem in understanding the text of ASHA Newsletter.
- About 16% reported facing some difficulty in understanding topics like: RBSK, Radio Dharawahik- Sunehare Sapne Sawarati Rahein, Mega Call Centers, non- communicable diseases, Information on full immunization, Kangaru method, Garbhnirodhak goli (Chhaya), and Garbhnirodhak injection (Antara).
- Around 92% ASHAs/ASHA Sanginis informed that BCPM helped in reading ASHA Newsletter during monthly meetings.
- About 96% ASHAs/ASHA Sanginis told that they found the text of ASHA Newsletter easy to understand.
- About 68% ASHAs/ASHA Sanginis found the number of photographs to be adequate. The text size was found to be sufficient by 63% and as many ASHAs/ASHA Sanginis found the number of pages adequate.
- About 91% ASHAs/ASHA Sanginis reported ASHA Newsletter helped them in their work/ strengthened their counselling efforts during home visits.

Conclusion

ASHAs form the bedrock of community connect and engagement for the entire NHM initiatives. Continued job capacity building to frequently update their knowledge level, beyond the classroom training, is of utmost importance, keeping their engagement relevant and ASHAs motivated. To complement the classroom based training of ASHAs, NHM UP, with support from SIFPSA,

introduced a quarterly newsletter called 'Ashayein' with a vision to provide a medium to regularly update the ASHAs with information and knowledge about their work and skills required in problem solving, at the same time motivating them through recognition of best practices from the field.

To understand the usefulness of the newsletter in terms of its access by ASHAs, their perception about its utility, recall of topics covered, content, language and suggestions for topics to be covered in future editions, SIFPSA conducted a rapid assessment covering 48 blocks spread across 24 districts in 12 divisions representing all four regions of the state.

As revealed by the rapid assessment, over 98 percent ASHAs/ASHA Sanginis received at least one ASHA Newsletter. However, *none reported receiving all editions of the newsletter, indicating need for further streamlining distribution mechanism of the newsletter, with accountability assigned to BCPMs and DCPMs in the field. Another important observation was delay in timely distribution of the newsletter by the district/ block officials among ASHAs.*

Though most ASHAs and Sanginis reported reading all the contents of the newsletter, finding the topics relevant and language easy to understand, some (barely educated upto 8th standard)*reported difficulty in reading the newsletter. In such cases it is recommended that BCPMs during monthly ASHA meetings hold combined reading sessions by topics followed by discussions for better absorption and clarification of doubts.*

As desired by ASHAs, the forthcoming editions of the newsletter should include information on diseases caused by cigarette smoking, home based remedies/first aid, detailed Information on PMMVY, institutional delivery, poems & jokes in every edition, more IEC related information, more photographs and more of Sehat ki Rasoi and want the newsletter to be made monthly. They are of the opinion that messages, real stories and best practices of ASHAs be given more space in the newsletter. The newsletter should also include government orders related to ASHAs timely and in easy language.

ASHAs/ASHA Sanginis see 'Ashayein' as a ready reckoner, updating their knowledge and strengthening their counselling efforts during home visits, empowering them to manage their work more effectively and take pride in having a newsletter specially designed and published for them, highlighting their work in the state.