

Community Health Worker training in India

MISSING BILLION

Geography and scale: Dehradun District, Uttarakhand, India

Type of Disability: Developmental Disabilities

Involved actors

- Latika Roy Foundation
- Sight Savers
- Accredited Social Health Activists (ASHAs)

**Best practice description**

Through a Sight Savers Innovation Grant, the Latika Roy Foundation trained Accredited Social Health Activist (ASHA) in four blocks of the Dehradun district (population: 754,753) on early intervention for children with developmental disabilities. As the Community Health Workers who visit homes for immunisation and maternal health programs, ASHAs also check on young infants. This program taught them to use the WHO tool to identify children with developmental disabilities or delays and refer them to the nearest early intervention centre. Over four months (February to May 2013), 18 ASHA facilitators were trained as master trainers by parents of children with developmental disabilities. From June onwards, these facilitators trained their own ASHA workers under supervision (320 total). Once these were completed by August 2013, follow up workshops were conducted on a monthly basis to understand current knowledge, application in the field and clarifications around understanding and implementation. Thereafter, each home visit would be accompanied by a short interview and assessment with the parents help to assess the development of infants and young children. Those who have been identified with potential delays are referred to the primary health center for further assessment and treatment.

Origin / impetus for best practice

- Despite the high prevalence of disabilities, children were not being referred to early intervention services as much as they should and as early as they should.
- Limited access to community-based services in the rural, mountainous state of Uttarakhand, meant the best feasible option seemed to train the community health workers who visited homes in far and remote areas as part of their national program agenda.
- Families' could not travel long distances for assessments and identification, limiting their ability to access local referrals for therapy for their children
- Limited funding and acute scarcity of professionals to support children with disabilities

Impact / results of implementing best practice

- The program helped with identification of hundreds of children with developmental disabilities who received early intervention.
- Health care workers received new skills, which will also benefit the typical children in their caseloads. Beneficiaries included 560 children; 560 parents; 18 ASHA facilitators, and 320 ASHAs.

Critical success factors for best practice

- Permission for training and implementation, as CHWs are over burdened with multiple government schemes.
- Salary for ASHA facilitators travel and time.
- Supervision and faith that tool would be implemented.
- Connecting with and motivating families to participate in an early childhood developmental evaluation.

Impact statement

"Since the program commenced in January 2013, 133 children have been followed up. A total of 46 follow up programs have been conducted as of July 2013." – Dr. Shubha Nagesh, Latika Roy Foundation

Lessons learned

- Local level health workers can be trained effectively to identify children with disabilities and facilitate early intervention.
- Most interventions are simple for CHWs to learn, teach, and transfer to families of all literacy levels.
- Early intervention is critical, but sustained funding is necessary to ensure these programs continue.

Sources

Census of India (2011). Government of India Census of India <https://www.census2011.co.in/census/district/578-dehradun.html>

Dunst, C. J., & Bruder, M. B. (2006). Early intervention service coordination models and service coordinator practices. *Journal of Early Intervention*, 28(3), 155-165.

World Health Organization. Disability and rehabilitation: WHO action plan 2006- 2011. Geneva: World Health Organization. http://www.who.int/entity/disabilities/publications/dar_action_plan_2006to2011.pdf.

Further links & information

- Mont D. Measuring Disability Prevalence. Disability and Development Team. The World Bank Human Development Network Social Protection. 2007. Available at <http://worldbank.org/DISABILITY/Resources/Data/20070606DMont.ppt>
- World Bank Report. People with disabilities in India: from commitments to outcomes. Washington DC: Human Development Unit, South Asia Region, World Bank, 2007.