



Community Action for Health in India (CAHI): from the National Rural Health Mission to Universal Health Coverage – June 2022

The George Institute
for Global Health India

Facts:

- Decentralisation enabled local innovations and NRHM enabled its scaling up in Kerala.
- NRHM brought in new human resources (and leadership) in Kerala, but there are political tensions.
- NRHM's tendency towards bureaucratized delays and 'hyper-centralisation' continues, but community action continues "in spite" of this.
- Boundary spanning decision-makers created invited spaces for CSOs, and subnational models to influence national policy

Background:

- The Civil Society Engagement Mechanism (CSEM) for UHC2030 is interested in understanding lessons in social and community participation in health in various contexts across the world to advance its mandate on citizen engagement for Universal Health Coverage (UHC)
- India's experience in implementing community participation models under the National Rural Health Mission (NRHM) has lessons for the world but has not been adequately documented

Aims:

- Document the experiences of forms of community action in health supported and endorsed under the aegis of NRHM
- Create a historical record of these activities, while also identifying gaps in this record, as well as priority areas for action and further research

Methods:

- The method of *Witness Seminar* is adopted for this documentation work which involves semi-formal group discussions (with 5-10 participants) about the events, people, and processes involved and various contextual factors that helped shape the community participation framework and its implementation under NRHM.

Project Cycle:

Dec 2020 – Dec 2022

Partners:

Civil Society Engagement Mechanism (CSEM) for UHC2030

Supporters:

The George Institute for Global Health

Principal Investigator

Dr Devaki Nambiar

Impact:

- Citizens will have access to the history of community action – directly from those who shaped it – and can understand the history of what has worked and not worked in processes of decentralisation and health in Kerala as well as the communitization of NRHM
- Our project is designed to create a model of engagement and documentation of community action in health, which may be replicated globally, and contribute to the growing global research emphasis on the need to include citizen and community voices in UHC by understanding from this research.
- This will also feed into the CSEM UHC2030's strategy for advancing citizen engagement for UHC

Contact:

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