



# Inspiring through actions

A rural municipality’s experience with health reform offers testament to the potential for change at the community level under good leadership and prioritization

**T**o understand how crucial strong leadership is for social transformation, one need to look no further than the Ajayameru Rural Municipality and the radical change that healthcare service delivery has recently undergone therein. Playing a central role in this is the rural municipality’s Chairperson whose proactive, people-centric approach to the issue has given the healthcare system in the area a much-needed uplift.

Located in Dadeldhura District in far-western Nepal, present-day Ajayameru was formed in 2017 by the merging of five former Village Development Committees – Dewaldibaypur, Chipur, Bhadrapur, Ajayameru and Samaeji – as part of the country’s shift to a federal system of governance. It comprises a population of 17,066, dominated by Chhetris,

Brahmins and people from the marginalized Dalit community, spread across six wards.

When the Chairperson first took office following the local elections, the state of healthcare services in the rural municipality was far from ideal. The five existing health posts were ill-equipped and health workers were in short supply. In fact, locals were forced to walk two hours to get to the nearest district-level facility, even for minor ailments. Not surprisingly, there was a general sense of dissatisfaction with health facilities among Ajayameru residents.

Recognizing the need for affordable and accessible healthcare, the Chairperson knew he had to get the ball rolling quickly. The first step was to gain the confidence and ownership of stakeholders, thereby setting

the foundation for cooperation. For this, he began to hold frequent meetings and dialogues with both government officials including the health workers.

The Chairperson was also determined to utilize the expertise and experience of health professionals to create a more forward-looking environment overall. During consultations – both formal and informal – he urged health staff and facility in-charges to share not only their concerns but also innovative ideas for policies and programmes to improve public health services. As a result of these discussions, various schemes were reviewed and re-designed according to local requirements.

That health reform as increasingly become a priority for Ajayameru is evident in its



budget allotment. In the fiscal year 2017/18, around NRs. 4,500,000 was allocated to healthcare. This was increased by nearly one third (31%) to NRS 5,900,000 in 2018/19.

Thanks to these focused efforts, the health sector in Ajayameru witnessed various positive developments in the fiscal year 2017/18. These included:

- Unveiling of the Health and Sanitation Act 2075 (2018), one of the first municipalities to have its own Act. The Act is in the link <http://www.ajayamerumun.gov.np/act-law-directives>. The Act delves into basic health services provider and its management while discussing on standards to establish and operate health facilities. It also includes provisions for health professional and health volunteers and provisions for procurement, storage and distribution of medicines and health equipment. It also sets out minimum cost and quality for health services and provisions for social security monitoring among others.
- Establishment of two new Community Health Units (CHUs), one of which also functions as a birthing centre and two more CHUs will be added in FY 2076/77.
- The CHU of Ward No. 6 is being upgraded to health post. The federal government has already allocated budget for the construction of the health post building. The laboratory and birthing centre were added

in CHU by the newly elected local representatives.

- Revamping of all five health posts with essential equipment, including for birthing facilities, as well as laboratory and nebulizer services.
- Increased uptake of maternal and child health services, including institutional delivery thanks to a) provision of performance-based incentives to Female Community Health Volunteers; b) coverage of mobile phone costs for Auxiliary Nurse Midwives working at health facilities; and c) provision of packages containing food and hygiene items to pregnant women to encourage them to get regular ante-natal check-ups.
- Introduction of hand-washing equipment and nail-cutting services at health facilities. Over 1,000 people benefitted from these services in the fiscal year 2017/18.
- Provision of computers and printers to all health facilities.
- Installment of CCTVs and e-attendance system for staff in all health facilities.
- Mobilizing community health workers (CHW) to conduct community-level health-related activities. Each ward has a designated CHW responsible for regular outreach campaigns and collecting information on the health status of their respective wards.

- Distribution of free of locally-manufactured high-nutrient flour – a mix of soybeans, corn, wheat and barley – and clarified cow butter to mothers as part of the Golden 1,000 Days campaign through health facilities.

The role played by the chairperson in these milestones was well acknowledged during a recent discussion between the Department of International Development (DFID)-funded Nepal Health Sector Service Programme (NHSSP) and stakeholders. An apparent display of team work was seen at the interaction when health coordinators praised the Chairperson's dedication to reform and strengthening of the health system, often going beyond the call of duty. As an example, they cited the time the chairperson had liaised with an NGO to bring dental equipment from Kathmandu for a health post in Ajayameru.

Of course, with Nepal having newly transitioned to a federalized administrative set-up and responsibilities now devolved to provincial and local levels, there remain numerous issues to iron out. Clarity, for instance, is still lacking on certain conceptual, programmatic and policy areas, with guidance and support yet to come from the federal level. There are also logistical hurdles to overcome, including acquiring an office building.

All these challenges make what Ajayameru has achieved so far in terms of health reform all the more impressive. And with the Chairperson at the helm, there is likely to be more to celebrate in the days to come.