Changing roles of frontline workers (FLWs) at health and wellness centres of south-west Bihar: A qualitative study

Dr. Swati Shikha
Assistant Professor, Department of Community Medicine, Manipal TATA Medical College, Jamshedpur, Manipal Aacademy of Higher Education, Manipal, Karnataka, India – 576104

Dr. Abhishek Kumar
Assistant Professor, Department of Community Medicine, Manipal TATA Medical College, Jamshedpur, Manipal Aacademy of Higher Education, Manipal, Karnataka, India – 576104
Corresponding author email: ak07mail@gmail.com

Prof. (Dr) Dilip Kumar Yadava
Retd. Professor, Department of Community Medicine, Narayan Medical College & Hospital, Sasaram, Bihar

Abstract---Background: Ayushman Bharat Program was announced by Government of India in February 2018 with a vision, which is supposed to deliver comprehensive primary health care services to the entire population. Objectives: To obtain views of FLWs about their changing role at health & wellness centre and the challenges being faced by them in service delivery. Methods: A qualitative study done in 10 Health and wellness centres selected nearby Narayan Medical College & Hospital of Rohtas District of Bihar. The frontline workers posted in the selected HWCs were the study participants. Total duration of the study was 10 months. IDI of FLWs were done and the analysis of the verbatims was done using ATLAS-Ti (Free trial version) software. Results: After analysis of the verbatims two broad themes were made and there were several domains & codes under which the result was stated. It was observed that the frontline workers posted at the selected health & wellness centres were aware of the expanded range of services like yoga, school health, geriatric & palliative care being provided but they were also facing some challenges like manpower, equipment, working hour in service delivery. Conclusion: It was concluded from the study that frontline workers posted at the selected health & wellness centres were aware of the expanded range

of services provided but they were also facing some challenges in service delivery.

Introduction

The existing Government Primary Health Care Facilities (GPHCFs) deliver a narrow range of services, due to variety of reasons including, at times, the non-availability of providers as well. Thus, the Government Primary Health Care Facilities (GPHCFs) in India are grossly underutilized & excluding for the mother and child health services, in 2013-14, only 11.5% of rural and 3.9% in urban people in need of health services used this vast network(1) (2) The Ayushman Bharat Program (ABP) was announced by the Indian government in February 2018 and consists of two components: (a) Health and Wellness Centres (HWCs), which will provide comprehensive primary health care (PHC) services to the entire population, and (b) Pradhan Mantri Jan Arogya Yojana (PMJAY), which will improve access to hospitalisation services at secondary and tertiary level health facilities for the bottom 40% of the population. The HWC component of ABP aims to modernise and operationalize 150,000 current Government Primary Health Care Facilities by December 2022. The first HWCs were inaugurated on April 14, 2018, in Jangla village, Bhairamgarh tehsil, Bijapur district, Chhattisgarh, India. (1) (3). Despite the fact that cPHC can meet up to 80% of health needs, the HWCs appear to be receiving significantly less attention of the two components in ABP. (4) (5) (6) GPHCFs such as Health Sub-Centers (HSC), Primary Health Centers, and Urban Primary Health Centers are upgraded versions of existing GPHCFs (UPHCs). The goal is to increase the number of available services from six to twelve. By March 31, 2019, 17,149 AB-HWCs were operational, compared to a goal of 15,000 HWCs in the first year. The goal of 40,000 HWCs has been set for March 31, 2020. The scheme of AB programmes has been shown in Fig 01.
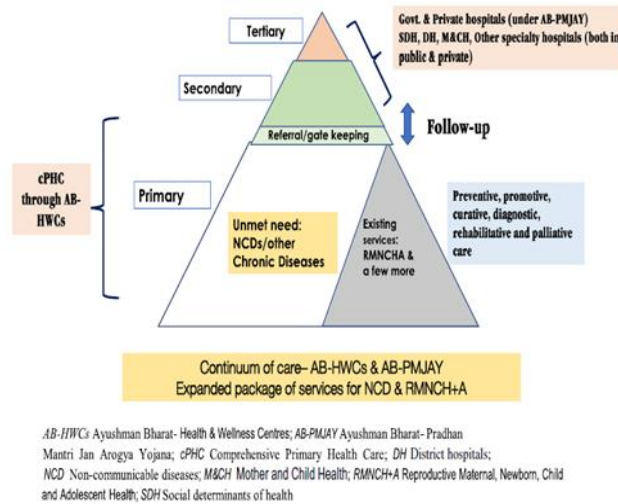
Fig 01 – Scheme for Ayushman Bharat Programme in India

Health Sub-centres (HSCs) and Additional Primary Health Centres (APHCs) are being upgraded to Health & Wellness Centres under the Ayushman Bharat Program, with the ability to deliver a 12 enlarged range of services, collectively known as complete primary health care (CPHC). In this view the role of frontline workers (FLWs) are also changing day by day and they are also facing many challenges in delivery of health care services. So this study aims to obtain views of FLWs about their changing role at health & wellness centre and the challenges being faced by them in service delivery.

Methodology

The proposed study was a qualitative study which was carried out in ten Health and wellness centres selected nearby Narayan Medical College & Hospital, Sasaram of Rohtas District of Bihar. The frontline workers (FLWs) posted in the selected HWCs were the study participants. Written informed consent was taken from all the participants before IDIs. The study was started in October 2020 but was stopped in January 2021 due to surge in COVID-19 cases across the country & state as physical interview was not possible at that time due to precautionary restrictions. The study was again started in July 2021 & completed in December 2021, so the total duration of the study was 10 months. The FLWs were asked about their views regarding their changing role at health & wellness centre and the challenges being faced by them in service delivery. A pre- tested questionnaire was used for data collection in the form of In-depth Interview (IDI) & the total number of IDIs were twelve. All the verbatim of IDIs were recorded by personal mobile phones and the recordings were transferred to the computer of the department on the same day. After that the verbatim were transcribed in English for identification of themes, domains and codes. Coding was done after reading the transcripts and necessary Domains and Themes were identified using ATLAS-Ti (Free trial version) software. One transcript has been excluded from the final analysis due to the thinness of the content. There can be different type of

relations observed between the formed codes. Social network and word clouds were constructed for better understanding of the study findings. Ethical approval for the study was obtained from the institutional ethics committee of Narayan Medical College & Hospital, Jamuhar, Sasaram. Social networks are self-organizing, explaining and complex patterns that appear from the interaction of the elements that make up the system. Network analysis is a collective form of concepts, measures, and techniques for relational analysis of the observed patterns. The newer way to visualize the text- based data is non-other than a word cloud. These are otherwise called text cloud or tag clouds. The more a specific word appears in the textual data the bigger and bolder it will appear in the word cloud. These are also can be used for visual comparison of two sets of text to find the wording similarity or dissimilarity.

It will help the researcher to find out the following points –

a) Finding the respondents pan view and opportunity to connect
b) Views about the roles of FLWs at Health & Wellness Centre
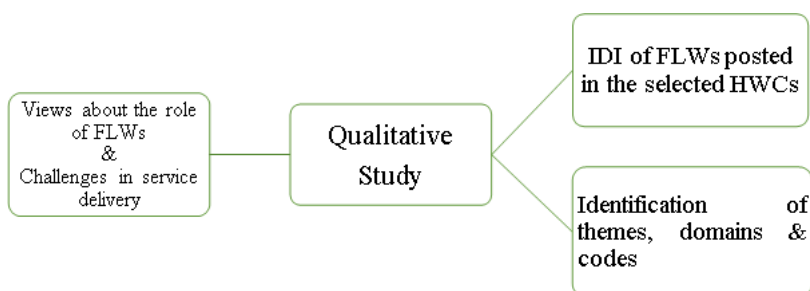c) Understanding what challenges are being faced by the FLWs in service delivery

Figure 02: The formative approach of the study

Results

There were total twelve (12) IDIs conducted in this study with the frontline workers posted at the selected health & wellness centres in the study after obtaining written informed consent. One IDI had been excluded from the study due to thinness of data. Findings of this study are presented in the following section –

Table 01: Themes of IDIs with Front Line Workers of Health & Wellness Centre

Themes	Domains & Codes
Views about the role of FLWs (Expansion of services)	Adolescent health
	Referral services
	Family planning
	EYE & ENT Care
	Mental health
	Geriatric care
	Yoga
	Payment reforms

	Increased vaccination Community mobilization Oral health Health promotion Laboratory tests Increased ANC School health Palliative care Telemedicine
Challenges in service delivery	Long working hours No telemedicine Poor infrastructure Increased OPD Increased ANC Laboratory tests Payment reforms Large population coverage Lack of manpower Lack of equipment

In the IDI the statements regarding the above-mentioned themes, domains & codes are described below:

Theme: Views about the role of FLWs (Expansion of services)

Domain: Geriatric care
IDI, FLW of Health & wellness centre, Rohtas
"Geriatric care OPD is being run along with normal OPD daily, not in a specific time and day"
IDI, FLW of Health & wellness centre, Rohtas
"Geriatric care services should be provided at the centres for elderly population"
IDI, FLW of Health & wellness centre, Rohtas
"Elderly population suffers many non-communicable diseases, so they must get services for the same"

Theme: Views about the role of FLWs (Expansion of services)

Domain: School health
IDI, FLW of Health & wellness centre, Rohtas
"Some school should be visited by doctors and staffs for their health check-up"
IDI, FLW of Health & wellness centre, Rohtas
"Teachers in the schools nearby the centre must be aware of common childhood illnesses"

Theme: Challenges in service delivery

Domain: Long working hours
IDI, FLW of Health & wellness centre, Rohtas
"We have long working hours sometimes due to increased number of OPD patients"
IDI, FLW of Health & wellness centre, Rohtas

"Long working hours make us tiered and service delivery is hampered sometimes"
IDI, FLW of Health & wellness centre, Rohtas
"Long working shift causes irritation at workplace with colleagues"

Theme: Challenges in service delivery

Domain: Lack of manpower
IDI, FLW of Health & wellness centre, Rohtas
"Increased services with less manpower is a difficulty in our duty"
IDI, FLW of Health & wellness centre, Rohtas
"Lack of manpower is a subject that needs to be addressed immediately"
IDI, FLW of Health & wellness centre, Rohtas
"Workload is increased very much due to less number of staffs at the centre"

Theme: Views about the role of FLWs (Expansion of services)

Domain: Yoga
IDI, FLW of Health & wellness centre, Rohtas
"Yoga sessions are very good for health and it can be planned at our centre"
IDI, FLW of Health & wellness centre, Rohtas
"Yoga is good for health"

Theme: Challenges in service delivery

Domain: Lack of equipment
IDI, FLW of Health & wellness centre, Rohtas
"Lack of equipment hampers our service delivery despite being available at centre"
IDI, FLW of Health & wellness centre, Rohtas
"Equipment available should be maintained to work properly"

Network Analysis

A collective form of concepts, measures, and techniques for relational analysis of the observed themes and codes. It has been presented in a form of radial network in which the theme and it's relationship with the codes underlying has been depicted in figure 03 and 04 respectively.

Figure 03: Network analysis of the Theme – Views about the role of FLWs (Expansion of services)
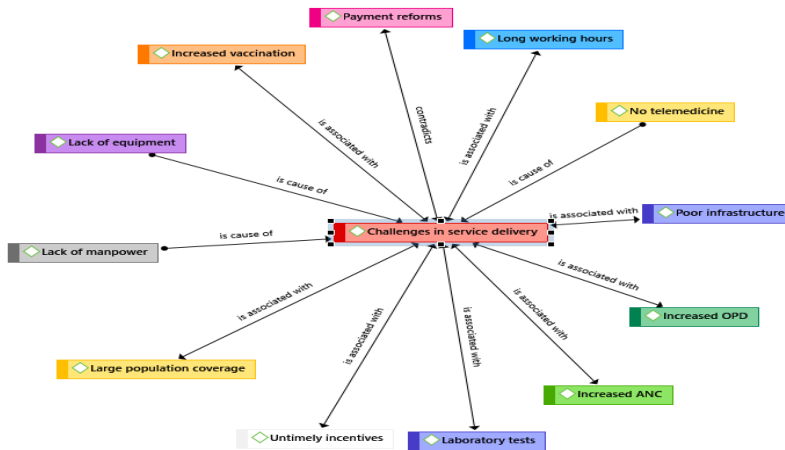
Figure 04: Network analysis of the Theme – Challenges in service delivery

Word cloud

The newer way to visualize the text-based data is word cloud also known as text cloud or tag clouds. The more a specific word appears in the textual data the bigger and bolder it will appear in the word cloud depending upon it's frequency of repetitions in the verbatims obtained as depicted in figure 05.

Figure 05: Word cloud of the codes found in the study under two themes

Discussions

Our study the emphasis was given to the expanded range of services and the challenges being faced by the front line workers in service delivery. The FMP was implemented in a short period of time, which may explain the lack of preparedness or inadequate planning that occurred throughout its implementation.(7) Without adequate training, Turkey's PHC workforce went from unqualified public employees working in community-based health centres to specialised contract-based FPs in charge of assigned patient lists, health facility management, and being evaluated against performance requirements in just 5 years (from 2005 to 2010). What has been described as a good reform could have benefited from a few further interventions(8). In general, as stated in the introduction, involving FM stakeholders in the development of health policies, particularly those relating to PHC (e.g., by involving FPs in the design and implementation of the adaptation training programme or the design of payment

mechanisms) would have facilitated the integration of FM into the health system, particularly in the context of developing a decentralised PHC service that places FPs at the front line (9). In decentralised and multi-stakeholder health systems, including stakeholders in policy and decision-making processes fosters a shared sense of belonging and supports the pursuit of common goals (10).

Limitations

We conducted interviews from the front line workers posted in only ten selected Health & Wellness Centres of South-West Bihar and presented their views which cannot be generalized to all the FLWs and Health & Wellness centres of the state. Our emphasis was mainly on the challenges related to expansion of services at Health & Wellness centres. Other challenges and roles of FLWs may also be explored in further studies and research.

Conclusions

It was concluded from the study that frontline workers posted at the selected health & wellness centres were aware of the expanded range of services provided. They were also expecting some facilities for smooth service delivery. At the same - time they were also facing some challenges in service delivery like manpower deficiency, untimely incentives & poor infrastructure. They further told that log working hour, large population coverage and payment reforms hamper the service delivery sometimes.

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