# Communitization in Nagaland: An Effective Approach Towards Community Empowerment



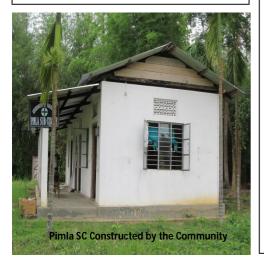
#### What is Communitization?

Communitization is a process of the government and the community getting into "partnership", working and sharing responsibilities in the management of public institutions and services in order to make them function optimally and deliver quality services for the overall growth and development and society.



#### Why Communitization?

- To address the deep crisis of "under utilization" of social institutions.
- to involve the community in the process of planning, formulation and monitoring of health programme/activities.
- to enable the community to take ownership and management of health institutions and services;
- to make community take active part in preventive health through education and action;



## How it evolved in Nagaland

- The "Nagaland Communitization of Public Institutions and Services Act, 2002" was passed / enacted by the state assembly in March 2002.
- To make people aware about the concept of communitization, series of awareness campaigns were organized, followed which were by of Village constitution Committees (VHCs) for health & family welfare, with an aim to ensure that people take ownership management of public institutions/facilities. Powers like checking attendance of staffs. disbursing their salaries, granting them casual leave, maintenance of building etc. were delegated to the committees.

## **Delegation of Power**

- The "Delegation of Financial and Cognate Power Rules 1964" was amended and sanctioning authority was given to local Drawing and Disbursing Officers.
- To maintain transparency & easy financial transactions committees were asked to open 2 accounts, current account for salaries and savings account for grant, contribution etc. to be jointly operated by the Chairman and the Member Secretary. The committee was also empowered to apply "No work no pay" principle while disbursing staff salary. This deducted amount is considered as "grant in aid" for the committees to maintain and upkeep the institution.

# Strategy Adopted for Communitization: Health Sector

- Committees were constituted at
- <u>At village level:</u> Village Health Committee (**VHC**) and Common Health Sub Centre Committee (**CHSCC**)
- <u>In town/urban based sub centres</u>. Urban Health Committees (**UHCs**)
- <u>At CHC / PHC level</u>: Health Centre Management Committee **(HCMC)**
- The Chairman of all these committees are selected / elected by the community, where as the Member Secretary is the senior – most health worker of the health centres and in case of CHC /PHC, it is the Medical Officer.

#### **Impact of Communitization**

- The VHC holds its quarterly meeting regularly and in case of urgency, meeting is held even before the schedule time:
- Staff attendances are checked resulting in reduced absenteeism;
- Social work of cleaning the sub centres, gardening and fencing are done with public contribution;
- Essential furniture items for the SCs have been bought with village development board fund;
- Mass awareness meetings are organized to generate awareness among masses regarding hygienic sanitation, importance of birth spacing, small family norms etc.;
- Major repair and renovation of the SCs, electrification and boundary fencing were done with individual/community contributions;
- With the villagers' contribution, fridges were bought which help in storage of vaccines and carrying out immunization.
- Some Quarters of MOs were also constructed with community contributions:
- Some Village councils have arranged water supply to the SCs through rainwater harvesting;
- Best performing VHCs were awarded during the State level VDB and Communitization Conference.



