

From Policy to People : Activating Jan Arogya Samiti's for Equitable Healthcare in Tribal Regions of Maharashtra

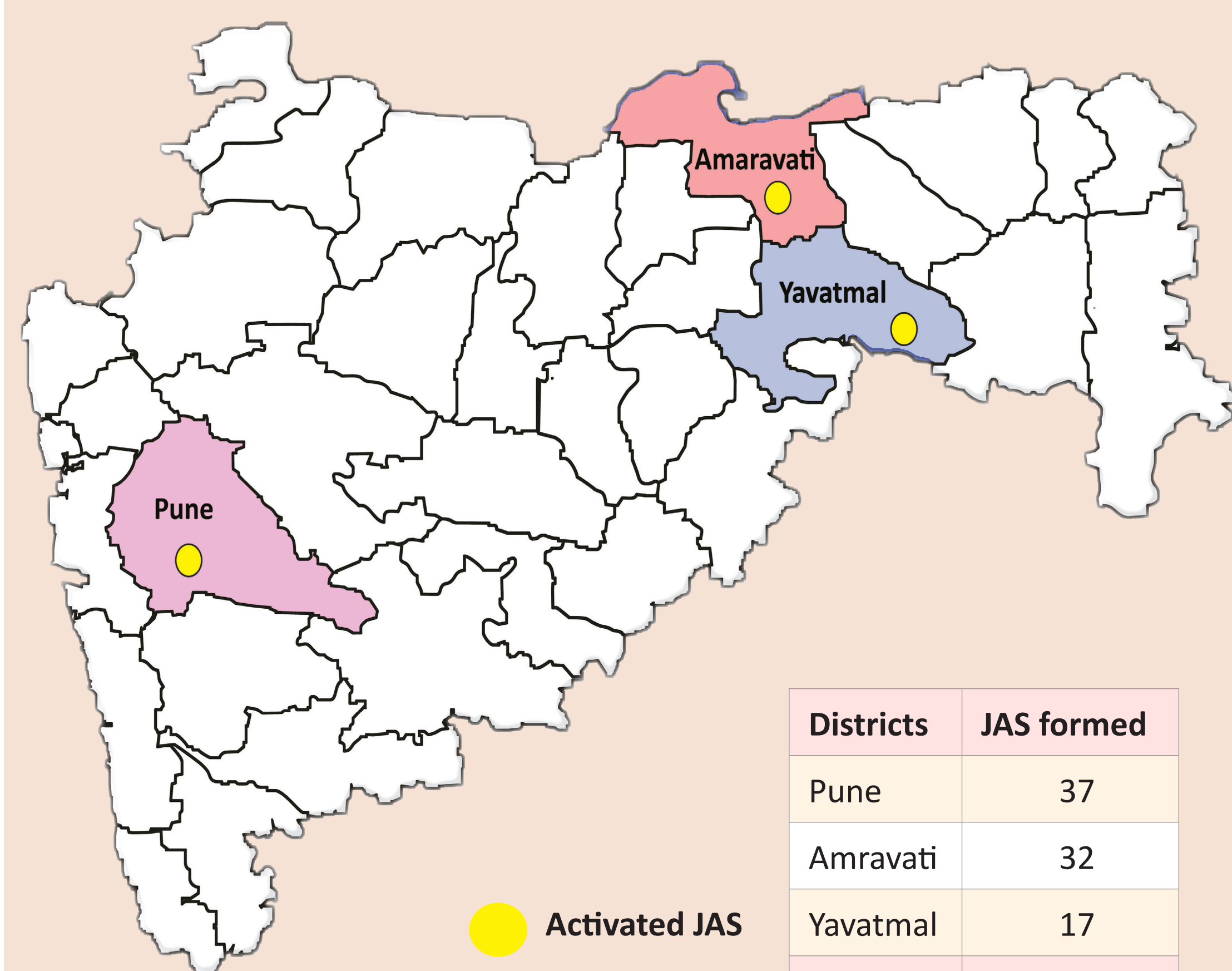


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Introduction and background

Anusandhan Trust-SATHI is strengthening Jan Arogya Samitis in tribal Maharashtra to improve access to Health and Wellness Centres and government health schemes. This initiative boosts primary care outreach, empowers communities, and enhances accountability in healthcare and nutrition services in remote and underserved areas during the period April 2024-March 2025.

Geographical scope of intervention

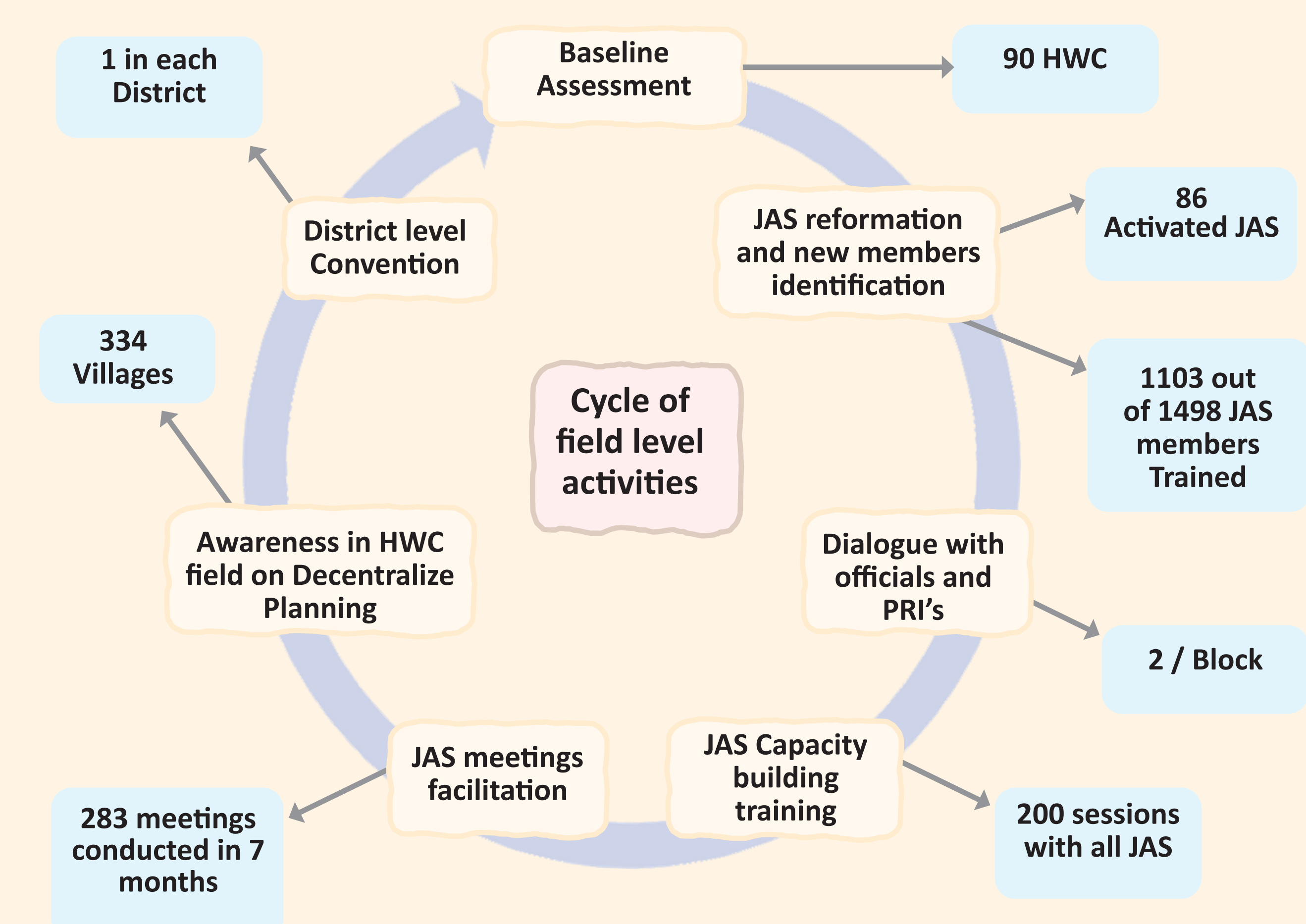


Core Strategy

Through the JAS activation, JAS members work with the core strategies of problem-solving approach, grounded in active, multi-level stakeholder engagement to improve access to healthcare for vulnerable tribal communities.

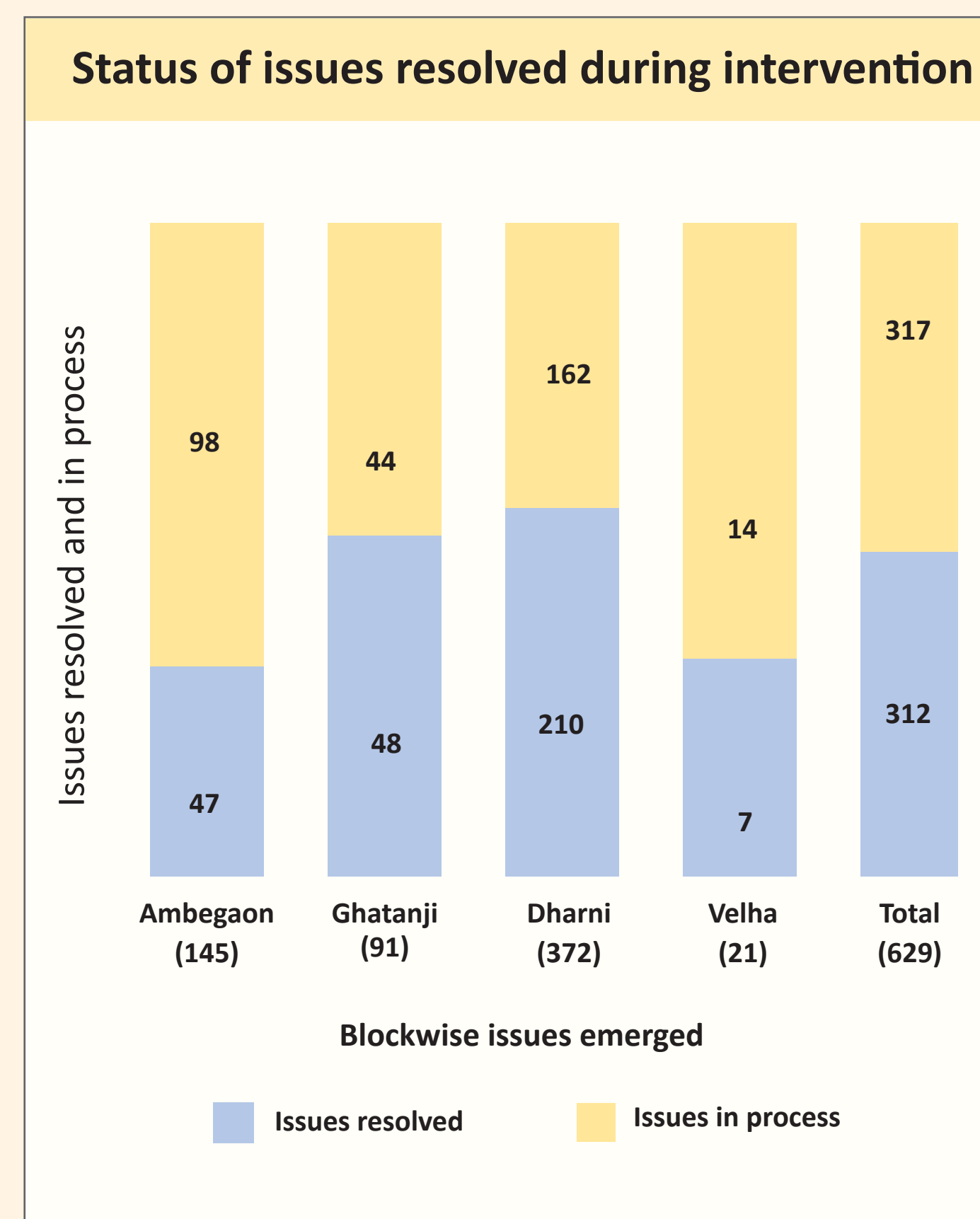
Health & Wellness Centre (HWC) needs Assessments	Identify service delivery gaps, systemic barriers, and community-specific health challenges.
Capacity Building and Coordination with Public Health Services	JAS members as mediators between HWCs and higher health authorities, with a focus on facilitating cross-departmental coordination at the block level to address local issues effectively.
Jan Arogya Samiti (JAS) Engagement and Problem-Solving	JAS members were actively involved in structured discussions to analyse issues, propose context-specific solutions, and enhance linkages between communities and the public health system.
Decentralised Community Monitoring and Planning of Services and Local Resources	Monthly JAS meetings to enable continuous, on-the-ground monitoring of health services and to sustain community oversight and accountability mechanisms.

Intervention cycle



Key Findings

- JAS reconfiguration and member activation were crucial innovations, supported effectively by capacity building trainings that clarified roles and responsibilities, enhancing participation and problem-solving.
- The intervention led to tangible service improvements, including resolution of 312 out of 629 issues and the organisation of 530 NCD screening camps for enrolling 2069 new patients.
- In collaboration with the Gram Panchayat, minor repairs to security walls and cleanliness drives at the Health and Wellness Centre (HWC) premises were undertaken. Essential equipment for the sub-centre-including a refrigerator, blood pressure monitor, weighing scales, furniture, and medicines -was procured using local funds allocated under the 15th Finance Commission and PESA funds.



Summary Table - Role of Jan Arogya Samiti (JAS) in Strengthening HWC-Level Health Services

Key Area	Key impact
Interface between community-health system	JAS members act as connectors between communities and health providers, fostering trust and communication, leading to better utilisation of HWC services.
Accountability & Responsiveness	Regular involvement of JAS members helps channel community feedback to health officials, improving medicine supply and infrastructure.
Inter departmental coordination	JAS members facilitate coordination with ICDS, Gram Panchayats, and block malnutrition committees, promoting a holistic approach to health determinants like nutrition and sanitation.
Sustainability Strategies	To address the voluntary nature of JAS roles, sustainable engagement can be achieved through regular training, public recognition, non-monetary incentives, and formal roles in planning structures like GP health committees.

HR structure for the model

Human resource structure for HWC-JAS strengthening

LEVEL	ANUSANDHAN TRUST - SATHI				HR
DISTRICT	Field coordinators				3
	Pune	Amaravati	Yavatmal		
BLOCK	Field facilitator				4
	Ambegaon	Velha	Dharni	Ghatanji	
HWC	Field worker				16
	5	2	6	3	

Conclusion and Future Directions : Jan Arogya Samiti (JAS)

While the primary responsibility for healthcare service delivery rests with frontline service providers, community-based platforms like the Jan Arogya Samiti (JAS) have emerged as powerful facilitators of change. The table below outlines future directions for strengthening their role.

Focus Area	Future Direction
Strengthening Problem-Solving Role	Institutionalize structured problem-solving within JAS for timely and local resolution of health issues.
Enhancing Multistakeholder Collaboration	Promote deeper coordination between JAS, frontline workers, Gram Panchayats, and other departments to strengthen shared accountability.
Scaling Community-Led Models	Replicate effective practices from tribal blocks to other underserved areas to amplify community voices in health planning.
Sustaining Participatory Governance	Reinforce JAS as a permanent community-based monitoring and facilitation mechanism to ensure sustained citizen participation in health systems.

