

# Organising Community Health Workers in South Asia

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Community Health Workers are also called Accredited social health activist (ASHA) in India, Lady Health Workers (LHW) in Pakistan and Female Community Health Volunteers (FCHV) in Nepal.

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***Our Communities  
Our Work  
Our Rights***

***Community Health  
Workers are the  
backbone of the public  
health systems***



## CHWs across the South Asia Region



# Historical devaluation of women's care work



## Community Health Workers in South Asia: Country Comparison

Country	Pakistan	India	Nepal
Designation	Lady Health Workers (LHW)	Accredited Social Health Activist (ASHA) and Anganwadi Women Workers (AWWs)	Female Community Health Volunteers (FCHV)
Year	1994	2005	1988
No of CHWs	125,000	<ul style="list-style-type: none"> <li>▪ 1007045 ASHA workers</li> <li>▪ 2,400,000 Anganwadi workers</li> </ul>	53,000
Remuneration (yearly)	2250 USD	500 USD	250 USD
Main tasks	Maternal, neonatal and child health, family planning, health promotion, immunization	Family planning, institutional delivery, child health, health education, child education	Safe motherhood, child health, family planning, immunization
Training	3 months	23 days	18 days
Recognition	Public health workers	Volunteers/Honorarium workers	Volunteers



**Delivering critical  
and essential  
public health  
services in the  
region despite  
tough terrains**

## Organising Women Works!

After several rallies, protests and sit-ins where several women was arrested and injured in police violence, the LHWs finally won the right to be recognised as public employees, a minimum wage and a union.



# Recognition of LHW's work as work also paved way towards gender equality and recognition of women's unpaid labour





# JOINT DEMANDS OF COMMUNITY HEALTHWORKERS IN SOUTH ASIA



COMMUNITY HEALTH WORKERS ARE ALSO CALLED ACCREDITED SOCIAL HEALTH ACTIVIST (ASHA) IN INDIA, LADY HEALTH WORKERS (LHW) IN PAKISTAN AND FEMALE COMMUNITY HEALTH VOLUNTEERS (FCHV) IN NEPAL.

# Joint Charter of Demands

Governments have an obligation to ensure the safety and wellbeing of workers, including CHWs, as they perform their job.

## WE DEMAND :




- 1 adequate safety protocols as well as adequate personal protective equipment (PPE), following WHO or government standards, whichever is higher
- 2 PPEs made suitable for women who comprise most CHW in south asia
- 3 guidelines, protocols and training for COVID-19 care, personal safety, infection risk management, and the use of PPE, developed specifically for CHWs and accessible to them
- 4 an expansion of the definition of our 'workspaces' to include the homes, health posts, communities that we serve, and transport to these communities
- 5 adequate and timely payment that is not below the prevalent minimum wage for equivalent workers
- 6 transport facilities or fuel and transport costs allowance
- 7 proper accommodations and nutritious food while in self-quarantine post-work
- 8 measures to protect us against discrimination and forced work in unsafe working conditions



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**OCCUPATIONAL SAFETY AND HEALTH PROTECTION**

The pandemic has illustrated the importance of a robust health system supported by public health workers.

Community Health Workers (s) have been an essential part of the response to Covid-19. Most governments have failed to recognise us as public health workers.

## WE DO :



vision of primary medical health care



site awareness and provide information




Mobilisation and facilitation of public health care




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**RECOGNITION AS PUBLIC HEALTH WORKERS**


## WE DEMAND :



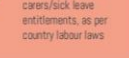
1 adequate and timely payment that is not below the prevalent minimum wage for equivalent workers




2 overtime pay as per country laws



3 higher pay scale depending on educational qualification and years of service



4 social security entitlements, pension payments, parental/carers/sick leave entitlements, as per country labour laws



5 additional pandemic payments

Stay safe! Don't forget to wear a mask!

Public Health policies are better when workers contribute to them.


## WE DEMAND :



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**A COLLECTIVE VOICE IN DECISION-MAKING PROCESSES**

- 1 democratic voice through our collective representation in the decision-making process
- 2 space for our representatives in national and policymaking committees for COVID-19 response and recovery plans
- 3 consultation in decisions relative to essential services in our communities
- 4 recognition of CHW unions as a social dialogue partner
- 5 mandatory social dialogue process in resolving health intervention implementation and monitoring issues

When governments treat CHWs as simply volunteers, and not critical public health workers, they are exposed to higher levels of risk, harassment and marginalisation.

## WE DEMAND :



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**DIGNITY AT WORK**

- 1 a work environment free of harassment and violence
- 2 a dedicated helpline for health workers where we can receive information and support relating to public health as well as problems we are facing
- 3 a grievance redressal mechanism to ensure timely action and resolution of grievances
- 4 a strong media campaign to explain to the community the role that CHWs play in the response to COVID-19 in order to help counter the stigma attached to the work that we do during this pandemic
- 5 proper menstrual health management for female frontline health care providers, as well as free menstrual hygiene products





GRIEVANCES




# Recommendations

## Recognition and inclusion:

- Formally recognise CHWs as part of the care workforce within the scope of relevant ILO Conventions, or through a separate standard-setting procedure
- Encourage Member States to systematically include CHWs in national care policies, strategies, and social dialogue mechanisms and to report on progress made.

## Decent work and social protection:

Urge member states to transition CHWs from volunteer status to public sector health workers with formal employment and decent work

## Training and professional development

Recommend that Member States invest in training, skills development, and career pathways to enable CHWs to enhance their capabilities

## Financing

Urge Member States to allocate adequate public funding

## International cooperation

- CECAR Recommendation
- Develop and adopt specific ILO guidelines or a dedicated instrument on decent work for CHWs
- International Standard setting Mechanism to be established