



\*\*\* (2) \*\*\*

“Some of the roads that lead to remote villages are rough and pass through hilly areas and some people live in difficult places which are very hard to reach by vehicles or two wheelers but I have no other option but to reach them on foot, so I walked.” said, Sushmita Majumdar, the Community Health Officer (CHO).

On interaction with some of the villagers, the team realized that the scare of the Corona virus, risk of exposure and subsequent health concerns had pushed some of the parents of not letting their children out of their homes.

However, the group has decided to visit the house of every child and adolescent in the village to counsel the parents on the needs for them where supplementation would be carried out under strict measures taking all COVID related precautions. After house to house visit the outcome was positive and many of the families have agreed to let their children take the supplement.

Sastirong Reang, Anganwadi Worker (AWW) has worked for nearly a decade in the locality said, “I would go door to door in my village distributing medicines under the guidance of our Community Health Officer.” She added, “I may not have a medical degree like other health practitioners but my regular training organized by the government gives me confidence to work as a health activist.” Sushila Reang, a Multipurpose Worker (MPW) who is also part of the team says, “We have to battle rain and hot weather while going out for duty but our priority is - well being of the vulnerable children that keeps us motivated to work tirelessly.”

In addition, the team also sent out a message to the villagers by creating awareness and showing demonstration on how to use face masks, regular use of sanitizers, to maintain social distance and stay hygienic by washing hands regularly.

When asked Jamita Reang, 28, a house wife of Dhani Chandra Reang Para of Bokafa RD Block says, “I have never expected that a group of women health worker will visit my house and show concern for my children’s well being.”

It is true that these frontline health workers in the field get just a pittance compared to what their counterparts in hospitals often earn. However, a worker like Suchitra Reang known as Asha didi says, “As for monetary compensation from the government, what I receives is very small amount of payment but seeing the goodwill initiatives for the people by the government a zeal makes me perform such a risky job harder.

To ensure proper implementation and coverage under MSSSKA drive among child and adolescent the group ensures minimum exposure during household visits for delivering essential medical services to the community. It is worth mentioning here that the group is hoping to ensure maximum coverage of targeted children and adolescent within the given dateline.

Every day the group would start their day at 8 am to work till sunset, distributing supplements to the targeted children and adolescent, getting them for check-ups, tracking children’s weight and body temperature, even supplementing tablets and syrup. On an average the group of women walks up to 25 km a day covering at least 100 families, telling people to stay home for administering medicines to the children, documenting the new infants and monitoring symptoms. They are looking forward to cover 7 villages of 486 households with a total population of 1974 within 15<sup>th</sup> September 2021 to make “Mukhya Mantri Sustho Soishob Sustho Koishore Abhiyaan” (MSSSKA) a grand success, says Sushmita Majumdar.

Being a health volunteer or frontline worker does not lessen their importance in the community. Their role is critical as they are the first point of contact between the formal health care system and the rest of the community. The extra effort they make, the extra steps they take, and the extra cares they give add up to a big difference to the lives of the people they touch.

\*\*\*\*\*