

Effect of Intrinsic and Extrinsic Reward on Work Motivation of Community Health Workers : A Study of ASHA Workers in Assam

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Abstract

Reward is an inducement which stimulates one to act in a desired direction. This paper provides an overview of the effect of rewards, intrinsic as well as extrinsic on the motivation of voluntary health workers (ASHA) in rural areas. This could help to gain a better understanding of the contributing factors to ASHA workers motivation and their retention, as well as dissatisfaction and the discouraging factors they face during their work.

Key Words

Motivation, Extrinsic Reward, Intrinsic Reward, Dissatisfaction NRHM and ASHA workers.

INTRODUCTION

Recognizing the importance of health in the process of economic and social development and for improving the quality of life of its citizens, the Government of India tried to strengthen the functioning of its health care system by launching National Rural Health Mission (NRHM) in 2005. The goal of the mission is to improve the availability of health care services, especially to the rural population. The plan of action of the mission includes increasing public expenditure on health, increasing institutional deliveries, availability of medicine, formation of

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Rogi Kalyan Samitis (RKS) (the broad objectives of RKS are to improve the hospitals, upgrade the equipment and modernize the health services and development of physical structure, and ensure proper training for doctors and staff), Formation of Janani Suraksha Yojana, optimization of health manpower, mainstreaming Ayurveda, Unani, Siddha and Homeopathy (AYUSH), nutrition, safe drinking water, creation of Village Health Sanitation committee to ensure optimal use of health service in the village in maintaining quality health services and sanitation to prevent occurrence of epidemics in the villages, creation of ASHA (Accreted Social Health Activist) and effective referral hospital care at community health centre (CHC) level as per the Indian Public Health Standards in each block of the country. (Ramini and Mavalankar , 2005).

The most important creation under NRHM is ASHA, who works at lower levels through decentralization. Under implementation of ASHA provides an important opportunity to link community based and systematic change in health service. ASHA workers are the voluntary workers selected from the village itself and imparted few days training. They provide health education through household visits and community outreach activities, and are engaged in health promotion activities in their community. They coordinate with the community and work as bridge/ link between the health system and the community people. ASHA workers are not paid any salary but they are entitled for performance linked incentives under different programmes. Since, the ASHA workers are not financially compensated for their work in the form of salary, the spirit of volunteerism is crucial, this implies workers should be highly motivated towards their work for sustaining in poor communities.

Motivation is the willingness to exert high levels of effort toward organizational goal (Stephen P. Robbins). There are different factors which influence work motivation of an individual. Factors like salary, availability of equipment, incentives, certificate, holiday etc are called extrinsic reward and the factors such as supervision, access to training, reorganization, appreciation, etc are intrinsic reward. The term reward means an inducement which stimulates one to act in a desired direction. A reward has a motivational power. Kanfer (1990), states that employees are constantly involved in a social exchange for rewards. They also compare the effort or contribution that they put in towards accomplishing a certain task and acquiring rewards in exchange for the former. The reward is delivering to ASHA workers are to inspire and creating a sense of competition among them, and it will determine its effect on their work motivation. The purpose of this study was to analyze the effects of intrinsic and extrinsic reward on work motivation of ASHA workers and to find out the reasons for working and the benefits they

expected to derive from their volunteer work.

OBJECTIVES OF THE STUDY

The present study aims to determine, factors which motivate ASHA workers to work and their level of satisfaction pertaining to intrinsic and extrinsic reward. The present study also attempts to explore the discouraging factors that ASHA workers faced while at work. Therefore, the objectives of the present study are :

1. To study the factors which motivate ASHA workers to work
2. To rank intrinsic and extrinsic reward according to their level of satisfaction.
3. To determine the discouraging factors that ASHA workers faced while at work.

RESEARCH METHODOLOGY

Design of the study- Explorative survey method was employed to collect relevant information from ASHA workers of Sonitpur and Nagaon districts of Assam.

The study basically utilizes primary data collected from two important districts comprising Sonitpur and Nagaon of Assam. Primary data was collected through a sample survey (n=110) during the period June to December 2011, using a self- administered questionnaire as the data collection instrument. Sonitpur has 8 Health Development Blocks and Nagaon district has 11 Health Development Blocks. Four Health Development Blocks under NRHM from Nagaon district and Three Health Development Blocks from Sonitpur district (30% blocks from each district) were considered for this study. While selecting the blocks diversity of population was considered, for example, blocks having Schedule Caste, Schedule Tribe, Tea Tribes, Minority population. 10% of villages from each Health Development Block were selected by following simple random sampling method. One ASHA was selected by following simple random sampling method from each village as sample.

A pilot survey with 25 respondents was conducted and the questionnaire was duly modified based on the findings. The collected data was analyzed using the SPSS package.

MEASURES AND PROCEDURE

Data Analysis : Data analysis is done with the help of frequency distribution tables, measure of central tendency, and standard deviation. A reliability

coefficient (cronbach's alpha) was computed for the each variable/ questionnaire and the reliability coefficient was 0.69. Responses on satisfaction level of intrinsic and extrinsic reward and discouraging factors were given on five point Likert rating scale.

RESULTS AND DISCUSSION

The majority of ASHA workers of Nagaon and Sonitpur districts responded as the recognition for the work that they get from their community are the most motivating factors, similar findings was reported by Dieleman et al., 2003. This is followed by supervision and support provided by health officials, positive health outcomes of the community and enhancement of their status, which indicate that ASHA workers felt pride in being selected by their community for the voluntary health worker role. Their selection implies that the community appreciated them, gave them responsibility to teach about health and considered them knowledgeable, pay that they are getting for their performance or for each task is also found a highly motivating factor this gives an additional income to the family and financially empowers the ASHA workers. They responded training, accessories and certificate provided to them as the least motivating factors. This may be due to the reasons that training provided to them with the knowledge they needed to work as health workers is not sufficient. Some form of certification as an incentive was explored as well, which is not provided to ASHA workers in all the blocks. Receiving

Table 1

To achieve the first objective following factors have been studied which motivate ASHA workers to work

(N = 110)

Factors for motivation	Frequency	Percentage
1. Positive health outcomes of the community	99	90
2. Recognition	101	91.8
3. Supervision and support provided by health officials	100	90.9
4. Trainings	35	31.8
5. Enhancement of duties and responsibility by community as well as health officials	58	52.7
6. Enhancement of status	87	79.1
7. Pay for performance	60	84.5
8. Accessories	17	15.5
9. Certificate	4	3.6
10. Flexible working hour	67	60.9

certificate would be very encouraging and motivating for the workers.

As regards to objectives second, which aimed to describe ASHA workers' satisfaction with intrinsic and extrinsic rewards.

The extrinsic rewards were rated by ASHA workers as follows :-

Accessories (X = 2.56, sd = 0.97), felicitation (X = 2.25, sd = 0.82), certificate (X = 2.12, sd = 0.63) and pay for performance (X = 1.9, sd = 1.08). The findings reveal that ASHA workers are satisfied with accessories, certificate and felicitation they get for their work but they are dissatisfied with the pay provided to them for their performance.

The intrinsic rewards were rated by ASHA workers as enhancement of status (X = 3.91, sd = 0.48), flexible working hour (X = 3.89, sd = 0.69), positive health outcomes (X = 3.84, sd = 0.723), love and affection they get from their community (X = 3.70, sd = 0.64), reorganization (X = 3.65, sd = 0.86), support and supervision by health officials (X = 3.4, sd = 0.93), training (X = 2.7, sd = 2.7) this ranking indicates that ASHA workers of Nagaon and Sonitpur districts are highly satisfied with the intrinsic reward provided to them except training which hold last rank, this may be due to the reasons that training provided them with the knowledge they needed to work as health workers is not sufficient. They need more training to enhance their knowledge and motivation, which in turn could strengthen their effectiveness in their work. In comparing extrinsic and intrinsic reward, it seems that ASHA workers are more satisfied with intrinsic reward than extrinsic reward provided to them. Dissatisfaction in relation to the extrinsic rewards may reduce their motivation in the long run.

Table 2

(N=110)

Sl. No.	Discouraging Factors	Mean	Standard Deviation
1.	Non availability of funds and low allowances	4.05	0.89
2.	Lack of adequate training	3.74	0.75
3.	Lack in supply of drugs and transportation	2.61	0.63
4.	Lack of interest of community	2.41	0.55
5.	Heavy work loads.	4.15	0.87

To achieve the third objective, ASHA workers of Nagaon and Sonitpur districts were interviewed about discouraging factors that they faced during their work in order to understand how they remain motivated. And it was found that heavy work load (X = 4.15, sd = 0.87) is the most discouraging factors for ASHA

workers, They have to look on many health issues like maternal health, child health, adolescence health, sanitation, immunization, family planning, and are also responsible for organizing health awareness camp and meetings. They are performing multi-task and faced with over work load, this has an adverse impact on motivation of ASHA workers as they were being paid some fixed amount for each task under different scheme. Therefore, they were primarily motivated by self-interest. Secondly, most discouraging factor that they faced is the non-availability of funds ($X = 4.05$, $sd = 0.89$) due to which they cannot assist the beneficiaries (community people) in getting an access to the financial support as under different schemes. Thirdly, the most common problem that they faced is the lack of adequate training ($X = 3.74$, $sd = 0.75$). An adequate training could help them to feel more comfortable in performing duties as ASHA workers by enhancing their knowledge and updating their information. Sometimes they also face lack of supply of drugs and transportation ($X = 2.61$, $sd = 0.63$) and lack of interest of the community ($X = 2.41$, $sd = 0.55$) it would be hard for ASHA workers to remain motivated if they lack community support, therefore, ASHA workers should be trained appropriately so that they are capable of convincing the community people to accept changes in health related behaviors.

CONCLUSION

Motivation levels among ASHA workers are result of tangible and intangible elements and represent the overall programmatic environment, especially the critical relationship between ASHA workers their communities and the health system.

Thus, the study has revealed that the rewards provided to ASHA workers play an important role to motivate them and sustain volunteerism among them, thus, leading to improved health of households and communities. Reorganization and positive health outcome are the most motivating factors for ASHA workers, while the training provided to them is not sufficient to enhance their knowledge. Therefore, steps should be taken to provide more training to ASHA workers to have positive impact on their motivational level. ASHA workers are more satisfied with their intrinsic reward than the extrinsic reward provided to them. They consider themselves over loaded with work and they are dissatisfied with the present payment system that is associated with their work. This study indicates that although financial incentives are important, but they are not sufficient to motivate workers to perform better. To achieve better work motivation intrinsic reward like reorganization, appreciation, enhancement of status, supervision, collaborative interaction with the workers appreciation, support and feedback from the community are also very important. Therefore, programme should be taken as multi-dimensional

approach to the question of incentives for ASHA workers and explore a mix of options and strategies to continuously build up a culture of support and motivation.

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