

Importance of Accredited Social Health Activists (ASHA) in Promoting Women and Child Health in Rural Communities

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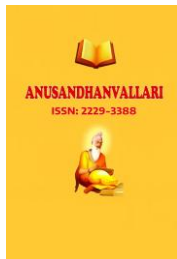
Abstract: The Indian government launched the Accredited Social Health Worker Activist (ASHA) program in 2005 as a flagship initiative under the National Health Rural Mission (NHRM). Over ten million ASHA employees have been employed in various Indian states. One of the NHRM's most significant initiatives in the future has been ASHA. A woman in the community is chosen as an ASHA employee and given the necessary training to oversee the improvement of the health of the residents in her immediate area. The paper is based on the following objectives. To understand the Role of Accredited Social Health Activists (ASHA) in Promoting Women and Child Health, and to examine the Role of Accredited Social Health Activists (ASHA) in Promoting Women and Child Health in Rural Communities. The study about the role of Accredited Social Health Activists (ASHA) in improving health needs is both analytical and descriptive. The paper is based on the engulment of objectives. It is prepared with a secondary source. The Indian government introduced ASHA activists as a crucial component in improving women's maternal health and concentrated on institutionalization the delivery of newborns through ASHA workers. ASHAs occasionally collaborate with Anganwadi workers to raise awareness of health issues and inspire people, particularly women, about their shared struggles.

Keywords: Accredited Social Health Activists (ASHA), Women and Child Health, Rural Community.

Introduction:

The advancement of health is crucial since it holds promise for the future. To provide health education, the government implemented several techniques. For underprivileged groups of people, particularly women and children, who have a hard time accessing health care in rural locations, ASHA is the first port of call for any health-related needs. Outpatient services and diagnostic facilities are used more frequently, which boosts wealth via health and opens up a pathway to financial inclusion for the entire community. Among Community Health Workers (CHWs), primary care has emerged as a key component for improving community health. The World Health Organization defines CHWs as people selected by and answerable to the community they serve, supported by the healthcare system, but with less training than qualified medical professionals. Although these characteristics outline the essential relationships that shape a CHW's role, they differ within and between nations according to the program's goals, including duties and responsibilities, hiring, training, and compensation. Two different discussion sets are used in the literature to conceptualize the CHW program: as community activists and as program extension staff.

A key component of India's National Rural Health Mission (NRHM), which started in 2005, is the Accredited Social Health Activist (ASHA) program. ASHAs serve as a link between the public health system and the community. They are trained female community health workers chosen from their villages. They are essential in advancing the health of women and children, particularly in under served and rural areas.



Objectives of the paper:

The paper is based on the following objectives.

1. To understand the Role of Accredited Social Health Activists (ASHA) in Promoting Women and Child Health
2. To examine the Role of Accredited Social Health Activists (ASHA) in Promoting Women and Child Health in Rural communities.

Methodology:

The study about the role of Accredited Social Health Activists (ASHA) in improving health needs is both analytical and descriptive. The paper is based on the fulfillment of objectives. It is prepared with a secondary source.

Reviews:

- 1.Kushwaha D & Chaudhary (2024) ASHAs' committed work at the community level and in helping individuals access facility-level health care has resulted in notable decreases in infant mortality rates (IMR), maternal mortality ratios (MMR), total fertility rates (TFR), etc.
2. ASHAs may meet the objectives established by the National Health Mission (NHM) with system assistance and appropriate support networks provided by families and Panchayati Raj Institutions (PRIs).
3. Nakel & Gattani(2015) state that the government does not provide ASHA with a set stipend. In exchange for encouraging BPL and lower caste women for institutional delivery, she has received case-by-case compensation.
4. The fact that she is not receiving the benefit is discouraging ASHA. It is absurd to note that there is no motivation to promote all hospital deliveries, even though every hospital delivery has a significant role in lowering the maternal mortality rate.
- 5.Sreelatha. C (2018) There has been a noticeable improvement in rural residents' health since ASHA was implemented. ASHA's initiatives, such as the newborn vaccination schedule, sanitation, and other health care initiatives, have been successful.
- 5.Dhavaleshwar C.U. (2016). Rural dwellers are now more conscious of health issues such as basic sanitation, hygienic habits, and nutrition, thanks to the adoption of ASHA.

The goal of ASHA's operations is to assist the rural populace. Therefore, the government and civil society must work together to improve the health and well-being of the rural populace and enable them to play a significant role in the nation's growth.

Objectives of the ASHA Programme:

1. Improving rural communities' access to healthcare is one of the ASHA program's primary goals.
2. Encouraging the health of mothers and children.
3. Promoting institutional births.
4. Spreading knowledge about cleanliness, immunizations, family planning, and nutrition.

Roles and Responsibilities of ASHAs in Rural Communities:

There were no such healthcare initiatives to meet the needs and desires of rural residents in the past. When the government recognised that most deaths in rural areas were caused by inadequate medical care, these initiatives were established. To raise awareness of this issue and provide assistance to the rural population, Accredited Social Health Activists (ASHA) were established. Today, ASHA is gaining popularity among the rural population through its Reproductive and Health Activist (RCH) initiatives and other healthcare programs.

Therefore, an effort is made to raise public awareness of ASHA programs and investigate the function of Accredited Social Health Activists in enhancing the health needs of the rural population through the implementation of ASHA. ASHAs carry out a variety of tasks that greatly enhance the health and wellbeing of women and children, including:

1. **Maternal Health:** ASHAs promote antenatal care (ANC) by encouraging expectant mothers to take iron and folic acid supplements, attend prenatal checkups, and get the necessary screenings. Supporting Institutional Delivery: They encourage families to choose medical facilities for deliveries and help them obtain financial incentives through programs such as the Janani Suraksha Yojana (JSY). ASHAs make sure that new moms receive postnatal care, which includes advice on diet, nursing, and contraception.

2. **Child Health: Immunization:** Under the Universal Immunization Program (UIP), ASHAs locate and arrange for children to receive vaccinations. Growth Monitoring: They monitor kids' development and growth, spotting and treating malnutrition. Disease Prevention: The ASHAs inform parents about frequent childhood ailments and the value of getting help from a doctor as soon as possible.

3. **Family Planning and Reproductive Health:** educating people about spacing techniques and encouraging the use of contraceptives. Distributing pregnancy test kits and contraception. Recommending, if wanted, permanent sterilization techniques to couples.

4. **Health Education and Advocacy:** educating people about clean drinking water, sanitation, and hygiene to prevent illness; spreading knowledge of government programs and health rights among local areas; and promoting behavioral changes to enhance the general health of the community.

5. **Community Mobilisation:** working with Anganwadi Workers (AWWs) and Auxiliary Nurse Midwives (ANMs) to plan Village Health and Nutrition Days (VHNDs). Serving as a liaison between the public and medical professionals to promote trust and accountability.

Challenges Faced by ASHAs in Rural Communities:

ASHAs face several difficulties despite their crucial role:

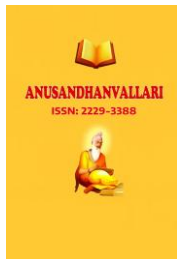
1. **Inadequate Training:** Their capacity to handle complicated medical issues is impacted by inadequate and irregular training.

2. **Low Compensation:** Performance-based incentives, instead of set compensation, are given to ASHAs, which might be discouraging.

3. **Work Overload:** Burnout is frequently caused by various obligations.

4. **Cultural Barriers:** In some areas, because of deeply ingrained sociocultural traditions, ASHAs encounter opposition from the local population.

5. **Limited Resources:** Their efficacy is hampered by inadequate infrastructure and medical supplies.



ASHAs have made great strides in enhancing mother and child health outcomes despite these obstacles: higher rates of institutional delivery, decreased incidence of newborn and mother death, increased vaccination rates, and increased knowledge about hygiene and health in the community.

Discussion and Social Implications:

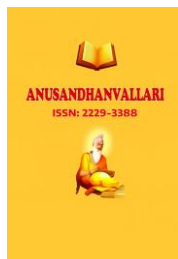
In India, ASHAs have substantially contributed to expanding access to healthcare in rural areas. Increased institutional deliveries, better vaccination rates, and greater community awareness of health and cleanliness result from their efforts. Regularising and raising their pay to improve the program further is crucial. Give them regular opportunities for skill development and training. Bolster their incorporation into the official medical system. As a public health advocate, ASHA will increase awareness of safety and its socioeconomic components, encourage community planning, and improve the utilisation and accountability of current healthcare services. These two viewpoints are consistent with the previously described second conceptual framework of CHWs as cultural bridges and broader agents of revolution.

Change. Our assessment of the origination's accomplishments will depend on whether actual reality lives up to this language by enabling ASHAs to carry out the roles of advocacy and arbitration rather than merely carrying out specific, government-mandated tasks. The purpose of ASHAs is to encourage women to keep track of births and local health centres, accompany individuals to the principal health centre (PHC) when necessary, take children to immunization clinics, support family development, especially medical serialization, provide first aid for common illnesses and injuries, preserve demographic records, and enhance neighbourhood cleanliness. ASHAs are designed to raise awareness of maternal health, disease, nutrition, and sanitation, as well as socioeconomic determinants, and to provide early adolescent and female reproductive health counselling. They also aim to grasp knowledge meetings.

To encourage mothers to give birth in a hospital, healthcare professionals should evaluate the demographics characteristics linked to home delivery, such as lower educational attainment, occupation, higher parity, and prior delivery experience. As a result, numerous long-term factors must be addressed with suitable long-term treatments. ASHA has a relatively short-term role, and its operating pattern can yet be improved. Regardless of the women's caste or socioeconomic background, ASHA ought to receive financial compensation for encouraging them to give birth in a hospital.

Conclusion:

ASHAs' duties include attending to expectant mothers' needs, which might occasionally arise at strange times. In most cases, the ASHA is supposed to help a lady get to and from the hospital if she has latenight maternal difficulties. Many ASHAs reported that their husbands angrily disapproved when they arrived home from work late. Since establishing ASHA, rural residents have become more conscious of health issues such as basic sanitation and nutrition. ASHA's work involves helping the rural populace enhance rural society, which in turn contributes to the advancement of our country. "The village is the heart of our country." Numerous activities have their roots in rural areas; in light of these facts, ASHA was founded and continues to be successful in its efforts to empower women and children.



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