ASHAs as the Rays of Hope

Ankita Sagar
New York Medical College
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In the 2005 World Summit, global reproductive health was cited amongst the most significant factors influencing the development of a nation. India accounts for one-sixth of the world’s population, hence the successful achievement of the goals set forth by the Millennium Development Goals is highly dependent upon India’s success in achieving a higher standard of reproductive health. Impoverished women of developing countries, such as India, are at a higher risk of unintended pregnancies, maternal death and disability, sexually transmitted infections including HIV, and other problems related to their reproductive system and sexual behavior. Furthermore, the worldwide leading causes of morbidity and mortality among women of childbearing age are associated with reproductive health.

The district of Agra is an emerging cosmopolitan in the state of Uttar Pradesh (UP), India. Uttar Pradesh has a population of over 166 million people. UP’s increased fertility rate, incomplete immunizations of infants, low usage of prenatal care, as well as inadequate services for family planning play a significant role in lowering the standards of reproductive health for women. Furthermore, the distance between a village and a Primary Health Center (PHC) is an average of 4.2 miles, which may often limit a villager to choose healthcare assistance locally versus by a trained practitioner in a PHC. International researchers have cited that in order to raise the healthcare standard of a community, “improving education, immunization of children, mother and infant nutrition, as well as increasing the use of health services especially during pregnancy and delivery” is essential. Therefore, the Indian government developed an agency to address such obstacles - State Innovations in Family Planning Services Project Agency of India (SIFPSA). SIFPSA identified female residents of a village who would be exceptional community health volunteer workers, known as Accredited Social Health Activists (ASHAs). ASHAs are 25- to 35-year-old women, who volunteer their time as activists of community health. Their roles are those of advocates as well as advisors for community members on matters pertaining to maternal and prenatal health, child health and immunizations, and family planning services. Realizing the weight of the ASHAs’ responsibilities as well as the immense potential of their program, I developed a study in which to assess the knowledge, understanding and services provided by the ASHAs in the community of the district of Agra.

Towards the completion of the study, I realized my interaction with the ASHAs has left me with a deeper impression. As I spent time with these women, I began to understand the depth of their commitment to improving the conditions of their communities. They fight a battle against limited time, limited resources, limited education, and most of all societal restrictions. These women are asked to fulfill family obligations, such as providing for the family and household, with little help from their families. Many of them are regarded as naïve and foolish by their family members because they work without any compensation for their time. Some families have gone as far as forbidding them to continue their role as an ASHA due to fear of reprisal from conservative community members. Their role as an ASHA asks them to address key topics with villagers that are considered taboos – forms of contraception and family planning. Nevertheless, their spirit is not dampened.
Although their basic science knowledge may be imperfect, I would still consider them to be some of the most intelligent women I have met. They have an integral understanding of their communities’ health and the factors that dictate the prosperity of their communities. These women surprised me with their strength and commitment, as well as their resilience. When asked about their motivation, I was rendered speechless by one of the ASHAs’ response: “It is my village at risk. If I can make a change, my children will have better health, a better future, and so will my village.” In our native language, Hindi, ASHA means hope. To me, they represent hope for their families, neighbors, communities, villages, country and even the world.

This article is dedicated to these women, ASHAs, who have brought hope to so many, including myself. Their continued efforts to improve the health and future of their communities have inspired so many to continue the fight for better health standards for the world’s most vulnerable populations.

REFERENCES


