Role Of Accredited Social Health Activists (ASHA) Workers In Assam: An Analysis In The Context Of Coronavirus Disease Of 2019 (COVID-19) Pandemic

Mouchumi Kalita¹, Gitika Borah², Minakshi Koch³

Abstract: The whole world is fighting against the pandemic situation created by the outbreak of COVID-19. Health workers, all over the world, are rendering service by putting their lives at stake. Health workers of Assam are also working relentlessly. This study attempts to analyse the role of the Accredited Social Health Activist or the ASHA workers of Assam in the fight against this pandemic situation. They have been serving the community to save it from this pandemic. They have faced a number of challenges while delivering their service. An attempt has been made in the current study to understand those challenges and to understand their side of the story.

Keywords: Pandemic, Corona virus, Assam, ASHA workers.

1. INTRODUCTION

The Accredited Social Health Activist (ASHA) is one of the communitisation programmes of the National Rural Health Mission (NRHM) of India. The Mission strives to ensure accessible, equitable, affordable and standard health care to the vulnerable rural people of India. The North-Eastern States are among the focus areas of the Mission along with Empowered Action Group (EAG) states and Jammu and Kashmir. The primary motive of this Mission is to form one complete operational and community-owned health delivery system at every level of the focused States. The ASHA is instrumental to this motive. The ASHA workers are community health volunteers at village, block and districts levels serving as the network between the people of the concerned levels and the public health system.² It seems that the success of the Mission largely depends on the effective working of the ASHA workers as they are the forefront health workers.

The health care sector in India has been confronting a situation of crisis since the outbreak of the novel Coronavirus. The World Health Organization (WHO) has declared it as a pandemic that has been affecting above 115 countries in the world. India has witnessed its first COVID-19 case on 30th January 2020 in Kerala.³ The virus has infected around 10, 031,659 people in India out of which 145, 513 and 9,580,402 were reported to be dead and

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¹Doctoral Fellow, Department of Political Science, Gauhati University, Assam

²Doctoral Fellow, Department of Political Science, Gauhati University, Assam

³Doctoral Fellow, Department of Political Science, Gauhati University, Assam

recovered respectively.⁴ The number of active cases until 20th December 2020 are 26, 624.⁵ In Assam, the first COVID-19 case was reported on 31st March 2020. The infected number of people was about 210068; 204718 were recovered; 958 were dead and 4389 active cases up to 20th December 2020.⁶ The magnitude of the crisis has demanded quick accessible health service at the bottom level of the country. In this context, the ASHA workers have been the leading service providers in Assam. It has been stated that despite serving as the frontline workers during the pandemic, the contributions and challenges of the ASHA workers in Assam are hardly addressed.⁷ This study is an attempt to fill this gap.

Objective

The objective of this study is -

- (a) to identify the challenges faced by the ASHA workers in Assam while delivering their services during the COVID-19 pandemic.
- (b) to study and discuss the role of the ASHA workers in Assam in the context of the COVID-19 crisis.

2. METHODOLOGY

The study is descriptive and based on both primary and secondary data. The focus group interview method was used to collect the primary data. An unstructured questionnaire was prepared beforehand. The interviews were conducted in Nagaon and Dibrugarh districts of Assam; the districts with highest COVID-19 confirmed cases. Besides, newspaper articles, the official website of the Ministry of Health and Family Welfare (Government of India and Government of Assam) were referred for the secondary data.

Who are the ASHA Workers?

The ASHA programme was launched in 2005 as a community-based programme of NRHM. The aim was to deal with the issue of scare human resource in the rural areas of the 18 focus states of the Mission. Assam was one of those states. Under this programme, every village of the focus states is to be provided with a trained female community health activist known as Accredited Social Health Activist or ASHA. The ASHA workers are community health workers; chosen by the community of the village which makes them accountable to them. The programme has stated that an ASHA must be a woman resident of the village. She may be married/ widowed or divorced and ought to be a literate woman with formal education up to class eight, preferably in the age group of 25-45 years. The members of Gram Panchayat recommend few candidates from the village for the recruitment of ASHA on the basis of their skills and knowledge. Eligibility of the recommended women is further verified by health officials of the health development block. On the basis of their verification the most eligible one is recruited as ASHA worker. Information regarding the recruitment of ASHA is passed by the Block office to NRHM district office. Subsequently registration of ASHA is done at the district level. In absence of any suitable literate candidate, semi-literate women with formal education lower than eighth standard are selected. After the recruitment they are trained for building their capacity to deliver their services and also to facilitate the goal of bridging the community and the public health system. The ASHA workers are provided with performance-based fee for their different works like promotion of universal immunization, referral and guiding services to Reproductive and Child Health (RCH) and other health care related activities like creating health and hygiene awareness in the villages, organizing the deprived sections of the villages like women and children and addressing their health related demands, supporting the people of the villages to access the health services available at the

Angadwadi, sub-centers and primary health centers. They are to fill the gap between the community and the health system and make the services approachable and accessible.

In Assam there are 32546 ASHA workers serving to bring the community closer to the health system. They are primarily working to facilitate the entire delivery process of pregnant women and guide them in family planning. The support mechanism of the ASHA includes 2877 ASHA Supervisors. One Supervisor has been supervising a group of 10-12 ASHA workers. The District Community Mobilizers (DCMs) at the district level supervise the Block Community Mobilizers (BCMs), the ASHA Supervisors and the ASHA workers. ¹⁰

Contribution and Challenges of the ASHA Workers in Assam during the COVID-19 Crisis. The ASHA workers have been the forefront health workers during the COVID-19 crisis. It has been reported that the ASHA workers are the chief facilitators of the community surveillance programme in 18000 villages of Assam which was launched to track the health status of the people during the crisis. The task of every ASHA worker is - to visit each household of their concerned area and gather information on their current health status; to report about the travel history of anyone; to check on the people staying in home quarantine. One of their significant contributions is creating door-to-door awareness on how to maintain hygiene at home, demonstrating hand wash and the steps to be taken outside home. The door-to-door visits during the peak of the crisis were nearly 300 households every day.

The ASHA workers needed to work for more than 12 hours a day during the COVID-19 pandemic as they work at the grassroots level. They have always played a very significant role in providing healthcare awareness and facilities at the grass root level, but the work load escalated rapidly during the pandemic. But the cause of concern was that they are poorly paid and hardly recognized for the services that they have rendered. The task assigned to the ASHA workers during this pandemic were- to spread awareness among the people about Covid-19, to aware people about preventive and control measures for Covid-19, to address the myths regarding this deadly virus. 13 While rendering these services they have to take care of their wellbeing as well. They need to do a lot of field work to collect all the necessary information and in doing so they did come in contact with a lot of people which raises the chance of getting infected by this contagious virus. Unfortunately, in some places they had to face discrimination. In comparison to the services they have rendered and the stigmas faced by them, the payment received by them is meager. One of the participants of the interview conducted in the Dibrugarh district has commented that "the workload has increased due to the pandemic. The number of home deliveries has also increased and sometimes the 108 ambulance service fails to reach on time. The support from the government is not enough to deal with the difficulties that we face. We have to come in direct contact of the people yet we are not provided with enough masks and sanitizers that can be used daily". Another participant stated that "we got only 3000 rupees for three months for our service during the COVID-19 times but our service has not ended in three months, it extended beyond that period. People are not kind while we go for home visits. They think that the virus will spread because of us". Two participants of the interview conducted in the Nagaon district have stated that "sometimes people are reluctant to hear what we say or demonstrate to create awareness. We buy our own masks and sanitizers. Whatever is given from the Government is not enough."

It may be said that the ASHA workers are one of the most exposed health workers of the crisis period. Corona myths and rumors have made their task more difficult. Despite performing their assigned duties, they have to come across a lot of challenges from the community itself. The community people are hardly responsive and their grievances are not appropriately addressed by the people in authority. Whereas they have occupied a significant position in the fight against COVID-19 pandemic.

3. CONCLUSION

Thus, it has been observed in the above discussion that along with other employees of the health department, ASHA workers have been in the forefront of this struggle against the pandemic. They have been performing their duties. They can be considered as the fighters at the grassroots level. Even though they receive small amount of incentives, they have been working round the clock for the development of the community health system. Several organisations and individuals have urged the government to regularise the services of ASHA workers for the sake of community healthcare. It is indeed a reasonable appeal. During this pandemic situation they have been serving the community by putting their lives at stake. They are very much passionate about their work. Their role and service towards community in this situation is praiseworthy.

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