

# Rural Development through Asha Workers with special reference to Edathua Panchayath

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## ARTICLE DETAILS

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## ABSTRACT

Rural development is basically concerned with improving the standards of the mass of the low income population residing in rural areas and making the process of their development self-sustaining. The rural development programmes occupy significant position in India's economic planning, as nearly three-fourth of its population lives in villages. In fact villages represent real India. Hence without uplifting rural masses, we cannot think over accelerate the pivot of overall economic development. These health care activities were formed when the government realized the fact that majority of the rural people died because of improper medical treatment. ASHA is a first port of any health related demand of deprived section of the population especially women and children which finds it difficult to access health services in rural areas. Now a day's Accredited Social Health Activist [ASHA] is becoming popular among rural population with its Reproductive and Child Health [RCH] activities and other health care programs. Therefore an attempt is made to study the role of Accredited Social Health Activist [ASHA] in improving the health needs of rural population. The study is carried out in order to determine the effectiveness of the plan and to create more awareness among the public about ASHA plans. The development of industry leads to development of economy. The objective of this particular study is that to measure the effectiveness of activities of ASHA workers in health sector and to know the level of awareness among people about ASHA workers. The respondents were the villagers of Edathua panchayat and sufficient data were collected through questionnaire. And it is found that ASHA workers play a significant role in the rural development of the village.

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## 1. Introduction

The World Bank defines rural development as, "Rural development is a strategy to improve the economic and social life of a specific group of people, the rural poor, including small and marginal farmers, tenants and the landless. Thus rural development means to the process of improving living conditions, providing minimum needs, increasing productivity and employment opportunities and developing potentials of rural resources through integration of spatial, functional and temporal aspects. In the process of rural development rural society as a whole moves from one step of the economic status. A target group- the rural poor-has been identified for programmes of rural development. The National Rural Health Mission (NRHM) was launched on 12th April 2005 with an objective to provide effective health care to the rural population with emphasis on poor women & children. One of the key components of the NRHM is to provide every village in the country with a trained female community health activist i.e. Accredited Social Health Activist (ASHA). ASHA is a health activist in the community, who will create awareness on health and its determinants and mobilize the community towards local health planning and increased utilization and accountability of the existing health services. ASHA being the grass root level worker the success of NRHM depends on how efficiently is ASHA able to perform but the efficiency of ASHA or efficiency of performance of ASHA depends on their awareness &

perception about their roles & responsibilities in health care provision (SV GOSAVI, 2009)

## 2. Review of literature

It is not possible to raise the health status and quality of life of people unless such efforts are integrated with the wider efforts to bring about the overall transformation of a society. Good health and society go together. One of the key components of the National Rural Health Mission is to provide every village in the country with a trained female community health activist ASHA or Accredited Social Health Activist. Selected from the village itself and accountable to it, the ASHA will be trained to work as an interface between the community and the public health system. ASHA, a voluntary worker is the key functionary of NRHM. She is an activist and not a worker in the health system is similar to the very successful world famous concept of 'barefoot doctor's'(ChandrakanthLahariya et al). Following up with mothers for ANC visits and accompanying them for deliveries were the two primary activities of ASHAs(Bajpai, N. and Dholakia, H.R.,2011).

Indian Public Health Standards (IPHS) for subcentres Revised Guidelines, 2010, regarding the roles and responsibilities of ASHA, they shall take steps to create awareness and provide information to the community on determinants of health such as nutrition, basic sanitation & hygienic practices etc, which will mobilize the community and

facilitate them in accessing health and healthrelated services ASHAs shall provide primary medical care for minor ailments, inform about the births and deaths in her village, promote construction of household toilets under Total Sanitation Campaign.

The introduction of ASHAs has had a positive impact in increasing the proportion of women taking at least three antenatal checkups and immunisation institutional deliveries(A study by Bajpai et al ,2009). ASHAs create awareness on the need for skilled attendance at birth, on danger signs during pregnancy, counsel pregnant mothers for 26birth preparedness, motivate them for ante n atal check –ups and accompany them to health institutions at the time of institutional delivery, in addition to other roles and responsibilities(SMSMC, (2008). And almost all the ANMs agreed that they got help from ASHA. Some also took help in identifying pregnant women and give ANC. Similarly, almost all the ASHA reported that the ANMs helped them in replenishing the drugs, as also, in getting the immunisations done for their beneficiaries. It was found that in some areas, ANMs took assistance of ASHA home visits, health education and health programmes like malaria, pulse polio etc.

### 3. Objectives

1. To ascertain the role of ASHA workers in health sector of Edathua panchayat.
2. To know the level of awareness among people about ASHA workers.

### 4. Hypothesis of the study

Null hypothesis ( $H_0$ ): Respondents have moderate level of awareness about ASHA workers.

Alternate hypothesis ( $H_1$ ): Respondents does not possess awareness about ASHA workers.

### 5. Methodology

Primary data was collected from 80 respondents of Edathua panchayat through structured questionnaire method using convenient sampling technique. Secondary data for the purpose of study was collected from published sources such as books, journals, and internet. The collected data is analysed with the help of SPSS and presented in table and figures. Likert's scale is a psychometric sale commonly involved in research that employs questionnaire and it is the most widely used tool to measure the positive and negative responses. In a Likert's scale the respondent is asked to respond to 5 each of the statements in terms of several degrees such as highly satisfied-5 satisfied-4 neutral-3 dissatisfied-2 highly dissatisfied-1

### 6. Sample profile

Of the 80 respondents, 55% of the respondents were male and the remaining 45% were female.48.7 percent of respondents belongs to the age group of above 40 and only 15 percent of them belongs to the age group of 18-25. Majority of the respondents belongs to an income group lies in between 10000 and 20000 and the least lies above 40000.

## 7. Analysis and discussions

**Table- 1**  
Analysis regarding role of ASHA workers in health sector of Edathua panchayat

Factor	Response	Percentage
Assistance provided by ASHA workers	Fever	45.45
	Diarrhoea	7.58
	Delivery	9.09
	Others	37.88
	Total	100
Information regarding health	Yes	91.55
	No	8.45
	Total	100
Type of information provided	Nutrition	15.38
	Basic sanitation	38.47
	Hygienic practices	46.15
	Total	100

About 45.45 percent of the respondents of the study says that, ASHA has assisted them in Fever and only 7.57 percent of the respondents got assistance for diarrhea and majority of the respondents opined that ASHA provided information regarding health. 63 percent of the respondents opined that ASHA provide them information about Hygienic practices.

**Table - 2**  
Analysis regarding level of awareness among people about ASHA workers

Factor	Response	Percentage
Level of awareness about ASHA workers	Fully aware	23.75
	Partly aware	65
	Not aware	11.25
	Total	100
Source of information	Media	16.9
	Friends	21.13
	Relatives	26.76
	Awareness classes	35.21
	Total	100

Most of the respondents are aware about ASHA workers and their activities and the rest of the respondents are ignored in this study and further study was conducted with those who are aware. And about 35.21 percent of the respondents got aware of ASHA workers from awareness classes and only 16.9 percent of the respondents got awareness from relatives.

**Table - 3**  
Analysis regarding the effectiveness of ASHA workers.

Factor	Response	Percentage
Level of satisfaction	Highly satisfied	36.61
	Satisfied	54.94
	Neutral	4.22
	Dissatisfied	2.82
	Highly dissatisfied	1.41
	Total	100
Dedication of ASHA workers	Excellent	32.39
	Good	53.53
	Average	11.27
	Below average	2.81
	Poor	Nil
	Total	100

Most of the respondents are satisfied with the performance of ASHA workers. Out of 71 respondents, 53.5 percent of the

villagers says that ASHA workers have a good dedication towards their work. And from this the effectiveness of ASHA workers can be ascertained.

## 7.4 Hypothesis Testing

Null hypothesis ( $H_0$ ): Respondents have moderate level of awareness about ASHA workers

Variable	Sample Size	Mean	Standard Deviation	Significant value	df
Level of awareness of respondents	80	1.87	.585	.058	78

Alternate hypothesis ( $H_1$ ): Respondents does not possess awareness about ASHA workers.

Interpretation: Since the P value is more than the level of significance i.e. .05, there is an acceptance of null hypothesis. The respondents are having a moderate level of awareness about the ASHA workers.

## 8. Conclusions and Suggestions

### 8.1 Conclusion

With the introduction of ASHA there has been an evident development in the health of rural people. ASHA has been successful with its activities like immunisation schedule of new born babies, sanitation and various health care programs. The rural peoples are more aware about health like nutrition, basic sanitation and hygienic practices with the commencement of

ASHA. The activities of ASHA is supporting the rural peoples, so that there would be an upliftment among the rural society which in turn helps in the improvement of our nation. "The soul of our nation lies in the village" The various activities roots from the rural areas. Keeping in mind these facts ASHA was developed and is successful in its endeavors so long it will remain successful in the future in its activities of women and child empowerment.

### 8.2 Suggestions

- Government should allocate more funds for expanding the activities of ASHA workers.
- Frequent visit of ASHA workers is necessary especially for the remote areas of the village.
- Number of training programs for ASHA workers should be increased.
- Compensation provided to ASHA must increase so that more people will come forward to uplift the rural society.

### 8.3 Limitations of the study

- The time available for the study is limited; hence in depth study is not possible.
- Hesitation of some of the respondents to provide the required information affected the accuracy of the data.
- The information collected is limited as this study is confined only in Edathua panchayat so the sample taken is limited.
- Sample study reveals only an approximate conclusion and not a true or accurate conclusion.

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