

# Socio-demographic Profile of Accredited Social Health Activist (ASHA) of Jaipur City

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**Abstract**—Government of India launched the National Rural Health Mission (NRHM) on 12th April 2005, to provide accessible, accountable, affordable, effective and reliable primary health care, especially to the poor and vulnerable sections of the population. And ASHAs are a 'bridge' or an interface between the community and health service outlets. NHM set some standard for ASHAs. So this study was conducted to assess the socio demographic profile in Rajasthan. This cross-sectional study was conducted on 172 ASHAs working in Jaipur city. Majority were in the age group of 26-45 years but few were <25 years and >45 years. Majority of ASHAs were having their family size 5-8. About only one fifth of ASHAs were middle pass otherwise others were more than middle. Majority (91.8%) of ASHAs were married remaining very few were either widowed, divorcees or unmarried and majority i.e.101 (58.72%) were having 1-2 children. Likewise, majority 42.44% of ASHA were having 25-48 months (2-4 years) service and majority (69.77%) trained by ASHA Supervisor in this study but remaining were trained either of MOs, CDPOs, LHVs, LSs and ANMs Although majority 86.05% were not doing other job simultaneously with ASHA job.

**Key words:** ASHA, Socio-demographic profile

## I. INTRODUCTION

Government of India launched the National Rural Health Mission (NRHM) on 12th April 2005, to provide accessible, accountable, affordable, effective and reliable primary health care, especially to the poor and vulnerable sections of the population.<sup>1,2</sup>

One of the key strategies under the NRHM is having a community health worker who is an Accredited Social Health Activist (ASHA) for every village with a population of 1000. These ASHA workers should preferably be female, in the 25-45 years age group and have a qualification of at least eighth class.<sup>3</sup>

**Accredited** means recognized by the community, **Social** means she is from the same community, by the community and for the community, **Health Activist** means she has to spread awareness for health concerns and promotes change in health related practices.<sup>4</sup>

These village level community health workers would act as a 'bridge' or an interface between the rural people and health service outlets and would play a central role, in achieving national health and population policy goals.<sup>5,6</sup>

They can play an important role in identifying problems at the earliest and help in improving community health status.

To address the urban poor population in addition to NRHM, National Urban Health Mission (NUHM) was launched having urban PHCs and CHCs and ASHA in urban areas. Therefore the present study will be undertaken to assess the socio-demographic profile of ASHA workers in a urban community.

## II. METHODOLOGY

A cross-sectional, community-based study was carried out on 172 ASHAs working in Municipal Corporation Boundary of Jaipur city in since 1st June 2014 to September 2015.

After taking approval from Research Review Board (RRB) of SMS Medical College, Jaipur every ASHA worker working in the Municipal Corporation Boundary of Jaipur city will be identified and identified ASHA was interrogated as per pre-designed semi-structured proforma.

Personal information of each ASHA was collected using a pre-designed, semi-structured proforma including socio-demographic information of ASHA along with details of their selection procedure, duties, work experience and trainings regarding their job responsibilities.

Information gathered was entered at assigned place in proforma by the investigator. Data will be thus collected will be summarized and classified in the form of master chart in MS Excel worksheet

**Statistical analysis:** Data obtained was entered into Microsoft Excel and analyzed using statistical software. Frequencies were obtained using descriptive statistics.

## III. RESULTS

**TABLE 1**  
**BIO-SOCIO-DEMOGRAPHIC DISTRIBUTION OF ASHAS**

S. No.	Bio-Socio-demographic Variables		Number	Percentage
1	Age	≤ 25 Years	14	8.14
		26 - 35 Years	103	59.88
		36 - 45 Years	53	30.81
		> 45 Years	2	1.16
2	Family Size	≤ 4	62	36.05
		5 - 8	84	48.84
		9 - 12	17	9.88
		> 12	9	5.23
3	Education	Middle	34	19.77
		Secondary	73	42.44
		Hr.Sec./Inter.	40	23.26
		Graduate	21	12.21
		P.G.	4	2.33

Out of total of 172 ASHAs working in Jaipur City, majority (59.88%) were in the age group of 26-35 years, followed by 36.45 years. But 14 ASHAs (8.14%) were <25 years and 2 (1.16%) were above 45 years. Majority 84 (48.845) of ASHAs were having their family size 5-8 and 62 (36.05%) were having ≤4 but 26 (15.11%) were having their family size >8. (Table 1)

Among all 172 ASHAs only 34 (19.77%) ASHAs were middle pass otherwise others were more than middle, even so that 21 (12.21%) and 4 (2.33%) were graduate and postgraduates respectively.(Table1)

Out of 172 ASHAs, majority i.e.158 (91.8%) were married remaining 14 (8.2%) were either widowed, divorcees or unmarried. (Figure 1)

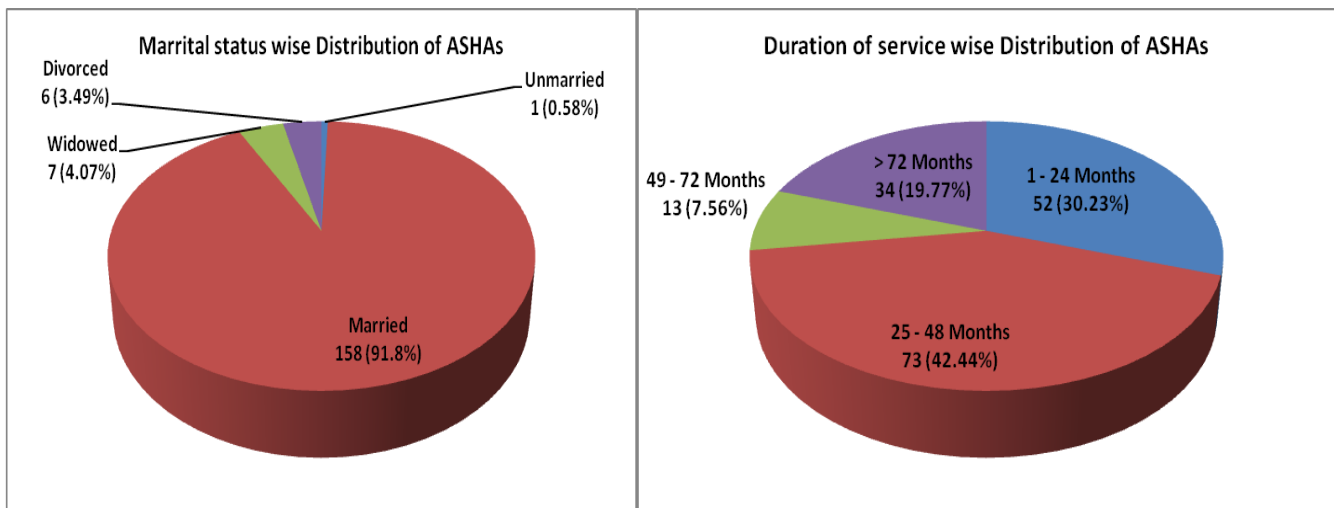
Likewise, majority i.e.73(42.44%) were having 25-48 months (2-4 years) service and sizable number of ASHAs i.e. 52 (30.23%) were having less than 2 years service. (Figure 2)

Figure 1

Figure 2

**Marital status wise distribution of ASHAs**

**Duration of Service wise distribution of ASHAs**



Out of 172 ASHAs, majority i.e.101 (58.72%) were having 1-2 children but sizable number i.e. 64 (37.21%) of ASHAs were having more than 2 children. (Table 2).

When obstetric history of ASHAs was analyzed it was found that only 31 (18.2%) ASHAs were having bad OH otherwise majority were with normal OH. (Table 2)

**Table 2**

**Obstetric History wise Distribution of ASHAs**

S. No.	Obstetric Variables		Number	Percentage
	No. of Children	NILL	7	4.07
		1 - 2	101	58.72
		3 - 4	62	36.05
		>4	2	1.16
	Bad OH	No	141	81.98
		Yes	31	18.02

Out of 172 ASHAs, although majority i.e.148 (86.05%) were not doing other job simultaneously but 24 (13.95%) were not doing other job simultaneously. (Table 3).

When training given by whom was asked to ASHAs, although majority i.e.120 (69.77%) said that trainer was ASHA Supervisor but remaining said either of MOs, CDPOs, LHVs, LSs and ANMs. (Table 3).

**Table 3**  
**Occupation Related Variable wise Distribution of ASHAs**

S. No.	Bio-Socio-demographic Variables		Number	Percentage
1	Other Occupation	No	148	86.05
		Yes	24	13.95
2	Training Given By	MO	3	1.74
		CDPO	6	3.49
		ANM AND MO	1	0.58
		ASHA COORDINATOR	8	4.65
		ASHA Sup.	120	69.77
		LHV	11	6.40
		LS	22	12.79
		ANM	1	0.58

#### IV. DISCUSSION

In this study, although majority (89.7%) were in the age group of 26-45 years but 14 ASHAs (8.14%) were <25 years and 2 (1.16%) were above 45 years. NRHM<sup>3</sup> documented that ASHA worker should be within the age group of 25-45 years. But here in this study 10.3% of ASHAs were either <25 years or >45 years. Study conducted in other areas also reported <25 years and >45 years ASHAs. Shrivastava et al<sup>7</sup> who conducted a study in a Taluka of Thane district of Maharashtra, reported 47.9% ASHAs workers under 25 years. Observations made by Other author<sup>8,9</sup> who had conducted study in Bhopal district of Madhya Pradesh, were also well in resonance to the observations made in this present study. Like wise Kohli et al<sup>9</sup> who has conducted study in North east of Delhi, also reported almost similar observations.

In this study, only 19.77% ASHAs were middle pass otherwise others were more than middle, even so that 21 (12.21%) and 4 (2.33%) were graduate and postgraduates respectively. Almost similar observations were made by other authors<sup>7,8,9</sup> also. Shrivastava et al<sup>7</sup> married and Kohli et al<sup>9</sup> reported that majority of ASHAs were secondary, they reported 67% and 61.8% respectively.

Present study observed that majority 91.8% of ASHAs were married. Almost similar observations were made by other authors<sup>8,9</sup> also, who reported proportion of married ASHAs more than 90% .

Present study also observed that majority (42.44%) were having 2-4 years service and sizable number of ASHAs i.e. 52 (30.23%) were having less than 2 years service. A study<sup>10</sup> conducted in 4 state of India reported average length of services of ASHA in Bihar Chhattisgarh Rajasthan U.P. 4, 6, 4 and 4 years respectively.

In the present study, although majority (86.05%) were not doing other job simultaneously but 24 (13.95%) were not doing other job simultaneously. Although NRHM<sup>3</sup> recommend that ASHA should be dedicated to this work only but other authors<sup>8,9,10</sup> also made observed well in resonance to this study.

Majority (69.77%) trained by ASHA Supervisor in this study but remaining were trained either of MOs, CDPOs, LHVs, LSs and ANMs. In contrast to this other study reported that majority were trained at district level. This may be because here in Rajasthan ASHA Supervisor made responsible for conduction of training, although training was conducted by MOs but they were more in contact with ASHA supervisor.

## V. CONCLUSION

Majority were in the age group of 26-45 years but few were <25 years and >45 years. Majority of ASHAs were having their family size 5-8 . About only one fifth of ASHAs were middle pass otherwise others were more than middle. Majority (91.8%) of ASHAs were married remaining very few were either widowed, divorcees or unmarried and majority i.e.101 (58.72%) were having 1-2 children. Likewise, majority 42.44% of ASHA were having 25-48 months (2-4 years) service and majority (69.77%) trained by ASHA Supervisor in this study but remaining were trained either of MOs, CDPOs, LHVs, LSs and ANMs Although majority 86.05% were not doing other job simultaneously with ASHA job.

## CONFLICT OF INTEREST

None declared till now.

## LIST OF ABBREVIATIONS

NRHM: National Rural Health Mission

NUHM: National Urban Health Mission

NHM: National Health Mission

ASHA: Accredited Social Health Activist

MO: Medical Officer

CDPO: Child Development Project Officer

LHV: Lady Health Visitor

ANM: Auxiliary Nurse Midwife

LS: Lady Supervisor

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