

Accredited Social Health Activists - SCHEMES

News: The Union Health Minister announced that **Accredited Social Health Activists (ASHA)** workers will receive enhanced remuneration.

- The announcement was made in the Rajya Sabha during the Question Hour.
- Opposition parties protested in Parliament, demanding an increase in ASHA workers' **honorarium to ₹21,000 and retirement benefits of ₹5 lakh.**

WHAT'S IN THE NEWS?

1. Bridge Between Community and Healthcare System

- ASHA workers act as a vital link between local communities and government healthcare facilities.
- They ensure that marginalized populations receive necessary medical assistance and awareness.

2. Promoting Health Awareness

- They educate families on hygiene, nutrition, reproductive health, and disease prevention.
- They conduct home visits to spread awareness about government health schemes and services.

Origin and Expansion of the ASHA Scheme

1. Launch under the National Rural Health Mission (NRHM) (2005)

- The ASHA initiative was introduced as part of NRHM to improve rural healthcare access.

2. Extension to Urban Areas (2013)

- Under the **National Urban Health Mission (NUHM)**, the ASHA scheme was expanded to cover urban populations.

3. Current Implementation

- The ASHA scheme is operational in all **States and Union Territories (UTs) except Goa.**

Training and Deployment of ASHA Workers

1. Training Support from Health Professionals

- ASHA workers receive training from **Anganwadi Workers (ANWs)** and **Auxiliary Nurse Midwives (ANMs)**.
- The training equips them with skills in maternal health, child care, and disease prevention.

2. State-Level Mandates for ASHA Employment

- Each state must appoint at least **one ASHA worker per 1,000 people**.
- In **tribal, hilly, and desert regions**, the ratio is adjusted based on workload,



with **one ASHA per habitation**.

Role of ASHAs in Developing India

1. Improving Maternal and Child Health

- ASHAs promote **institutional deliveries** by encouraging expectant mothers to visit healthcare facilities.
- They facilitate **antenatal care (ANC)** visits and track pregnancies in their communities.
- They assist in **early detection of pregnancy** using pregnancy test kits.
- They provide information on **nutrition, breastfeeding, and immunization** to mothers and families.

2. Enhancing Immunization Rates

- ASHAs play a key role in increasing **immunization coverage** among children and pregnant women.
- They receive **performance-based incentives** for ensuring vaccinations are completed.
- They promote **reproductive health services**, including contraception and family planning.
- They encourage **household sanitation** by motivating families to build and use toilets under public health initiatives.

3. Disease Surveillance and Early Detection

- ASHA workers **identify and report disease outbreaks** to healthcare authorities.
- They assist in government health programs like the **Revised National Tuberculosis Control Program (RNTCP)**.
- They guide families on **early diagnosis and treatment of common illnesses**.

4. Advocacy for Female Health and Hygiene

- ASHAs spread awareness about **menstrual hygiene, reproductive health, and maternal care**.
- They earn additional income through **social marketing of healthcare products**, including:
 - **Condoms** and **contraceptive pills** for family planning.
 - **Sanitary napkins** for menstrual hygiene management.

Honorarium and Payment Structure for ASHA Workers

1. Fixed Monthly Incentive

- ASHA workers receive a **fixed honorarium of Rs. 2,000 per month** for routine tasks.

2. Performance-Based Incentives

- In addition to the fixed salary, ASHAs earn **incentives for specific health-related activities** under various **National Health Programs**.

3. Centre-State Funding Pattern

- The **National Health Mission (NHM)** follows different funding models:
 - **60:40** funding split between the Centre and States.

- **90:10** for **8 North-Eastern states and 3 Himalayan states** (Centre contributes 90%).
- **100% central funding** for **Union Territories without a legislature**.

4. State's Role in Salary and Incentives

- **State and UT governments** have full administrative control over ASHA salaries and incentive structures.
- While NHM provides financial and technical support, states can **modify the honorarium within NHM guidelines**.
- Any changes in salary or incentives must be **widely communicated in local languages**.

Anganwadi Workers (ANWs) under ICDS

Anganwadi Workers (ANWs) are frontline functionaries responsible for **childcare, maternal health, and nutrition services** under the **Integrated Child Development Services (ICDS)** scheme.

Functions of Anganwadi Centers

1. Providing Supplementary Nutrition

- Serve **nutritional meals** to children under **6 years** and **pregnant/lactating mothers**.
- Address **malnutrition** and ensure **healthy child growth**.

2. Non-Formal Preschool Education

- Conduct **early childhood education** for children aged **3–6 years**.
- Prepare children for **primary school education**.

3. Maternal Health and Nutrition Awareness

- Conduct **nutrition and health education sessions** for mothers and pregnant women.
- Guide women on **healthy dietary habits** during pregnancy.

4. Immunization and Health Programs

- Assist in **vaccination drives** for children and pregnant women.
- Implement health schemes such as:
 - **Kishori Shakti Yojana** (for adolescent girls' health and nutrition).

- **Family planning programs** for reproductive health awareness.

5. Support from Anganwadi Helpers (AWHs)

- Anganwadi Helpers work **part-time** and assist in **food distribution, record-keeping, and community outreach**.

Auxiliary Nurse Midwives (ANMs) – Key Health Functionaries

ANMs (Auxiliary Nurse Midwives) are **female health workers** stationed at **health sub-centers and primary health centers (PHCs)**.

Key Responsibilities of ANMs

1. Focus on Maternal Health and Midwifery

- ANMs were originally introduced in the **1950s** to **provide maternal healthcare services**.
- They assist in **childbirth, postnatal care, and maternal health monitoring**.

2. Expanded Role Over Time

- Their responsibilities grew to include:
 - **Family planning services** (contraceptives, reproductive health counseling).
 - **Immunization programs** (for newborns, children, and pregnant women).
 - **Preventive care for infectious diseases** (tuberculosis, malaria, HIV/AIDS).

3. Designation as Multipurpose Workers (MPWs)

- ANMs are now called **Multipurpose Workers (MPWs)** due to their expanded responsibilities.
- They contribute to **general healthcare, sanitation programs, and health awareness campaigns**.

Conclusion

ASHA workers, Anganwadi Workers (ANWs), and Auxiliary Nurse Midwives (ANMs) form the backbone of India's **community healthcare system**. Their roles in **maternal and child health**,

immunization, disease prevention, and public health awareness significantly contribute to India's **healthcare infrastructure** and **development goals**.

Source: <https://www.thehindu.com/news/national/asha-workers-will-get-enhanced-remuneration-says-health-minister-nadda/article69317686.ece>