

(INTERVIEW)

SHE CARES, SHE SERVES, SHE LEADS

In every community, there are women who work tirelessly, not for recognition, but out of responsibility and compassion. For our women-centered magazine issue, we felt it was important to bring forward the voices of those women who stand quietly at the frontlines of healthcare – Aasha workers and doctors in government hospitals. These women step out of their homes every day to care for others, often balancing family responsibilities with demanding professional duties. From guiding pregnant mothers to handling emergencies with courage, their work reflects strength, patience, and unwavering dedication. Through this interview, we aimed to honor their journey, understand their struggles, and highlight the powerful role they play in shaping healthier communities. Their stories are not just about medicine – they are about resilience, sacrifice, and the spirit of womanhood.

ASHA WORKER: FIGHTING FOR DIGNITY, WAGE , AND FORMAL RECOGNITION

An ASHA (Accredited social health activist) acts as a crucial community-level link between the public health system and rural villagers, focusing on improving healthcare access, particularly for maternal, neonatal and child health. The ASHA program was launched in 2005-06 under the National Rural Health Mission (NRHM); full implementation was targeted for 2012. The idea behind the ASHA was to connect marginalized communities to the public health care system. ASHA worker salary varying significantly by state and their work performed. In Bihar an ASHA worker get 3000 per month. Along with this, they earn extra incentives for health work like deliveries, vaccination, survey etc.

They play a crucial role in strengthening rural healthcare in India. They are trained community health workers appointed under government schemes to support maternal care, child health, vaccination drives, and awareness programs. Despite their vital contribution, their working conditions and financial stability often remain challenging.

To understand their ground realities, we interviewed two ASHA workers – Gayatri Devi and Sanju Devi.

INTERVIEW 1: Gayatri Devi

Q1. Do you receive your salary on time ?

Gayatri Devi expressed disappointment as she shared that salaries are often delayed. At the time of the interview, they has not received payment for 8 months. Their monthly salary is 3000, which, she feels is very less compared to the responsibilities they carry.....she explained that earlier, their work mainly focused on pregnant women and child care. But now , they are expected to assist in handling various diseases, vaccination drives, awareness campaign, and emergency cases - without any increase in pay. There was a quite strength in her voice , but also a visible fatigue.

Q2. How do you manage your household if salary is delayed?

She admitted that it became very difficult. She has five daughters and no son, and the financial pressure often worries their family. She said they somehow adjust expenses and manage , but it is never easy worker, she is also a mother carrying the weight of her family's future.

Q3. what motivates you to continue this job despite the challenges ?
She says that serving people give her satisfaction. When a mother safely delivers a child or when a sick patient recovers, she feels proud that she played a role in saving or improving someone's life. That emotional reward keeps her going.

Q4. Do you feel your work is respected in society?
She says that sometimes people respect them , especially when they need help. But at other times, families do not listen to their advice easily, and convincing them becomes emotionally exhausting .

INTERVIEW 2: Sanju Devi

Sanju Devi shared a slightly different experience.

Q1. Do you receive your salary on time?
She said that earlier, salaries were delayed, but now they are coming more regularly. The fixed honorarium is ₹3000 per month. However, she added that ASHA workers receive incentives based on the number of patients they bring to the hospital or assist. With incentives included, her monthly income sometimes reaches ₹10,000.

Q2. Is the income sufficient for your family?
She say that while incentives help, income is still uncertain because it depends on cases. Some months are better, some are not. Stability is still lacking.

Q3. Have you ever faced a difficult or emotional situation during work?
She share that there have been times when families refused hospital treatment due to fear or superstition. Convincing them, especially during emergencies, becomes very stressful. Sometimes they face blame if something goes wrong, even though they try their best.

Q4. What change would you like to see from the government?

Both say they want:

- Regular and timely salary
- Increase in honorarium
- Permanent employee status
- More respect and recognition
- Emotional Reflection

These interviews reveal not just financial struggles but emotional resilience. ASHA workers walk miles under the sun, knock on doors, face rejection, and still return the next day with hope.

They are mothers, daughters, and wives – yet they carry the responsibility of an entire community's health.

While hospitals may have doctors and machines, villages have ASHA workers – and without them, many lives would remain unseen and unheard.

Q5) What kind of work do you do?

Bringing pregnant women, taking care of children, and implementing any Central Government health programs. For example, currently a filariasis awareness/drive program is going on.

Q6) How do you manage all this work?

Everyone has their own area assigned (around 1000-1500 people). We have to visit houses and check on them. If there is any problem related to pregnant women or children, we look after it. But we do not get money for every single day's work.

“A Guardian of motherhood: In conversation with a gynaecologist”

Behind every safe delivery and every healthy mother stands not just medical science, but also the dedication of a doctor who works tirelessly day and night. At Sadar Hospital, one such committed professional is Dr. Priti Gupta, a gynecologist who has been serving women from rural and urban backgrounds alike.

As a government hospital doctor, she deals daily with cases of pregnancy complications, emergency deliveries, nutritional deficiencies, and lack of awareness among women. Her work does not only involve medical treatment but also counselling families, spreading awareness, and ensuring that government health schemes reach the right beneficiaries. Through this interview, we aimed to understand the real challenges faced by women in maternal health and how government hospitals are evolving to serve them better.

DR. PRITI GUPTA Gynaecologist, Sadar hospital

Q1) What are the most common problems among women?

The most common problems are related to pregnancy and delivery. Many women come at the time of delivery with complications.

Q2) What are the main reasons for these problems?

- Lack of proper nutrition.
- Not taking medicines on time.
- Lack of correct information about pregnancy.
- They often do not consult a doctor regularly.

Q3) Do women come on their own for treatment or has there been a change compared to earlier times?

Now, awareness has increased. Women do come and share their problems. However, there are still some women who do not come on time. Sometimes family members delay bringing them to the hospital .

Q4) Do people prefer private hospitals over government hospitals? Why?

Earlier, people preferred private hospitals. But now, government hospitals have improved a lot. Many facilities are available, including operation facilities. Financial help schemes are also available.

For example, after delivery, financial assistance is provided and money is directly transferred to their bank accounts. Support is given for normal delivery and breastfeeding awareness.

Q5) Do patients complain that medicines are not available in the hospital and they have to buy them from outside medical stores?

Sometimes, a few medicines are not available. In such cases, patients have to buy them from outside. However, treatment itself is not stopped because of medicine shortage.

Q6) What are the common things that women ignore regarding their health?

Women usually visit a doctor only when the problem becomes serious. They do not consult during the early stage of symptoms. They should stay in regular contact with doctors instead of waiting for complications.

Q7) Earlier, when women became pregnant at a very young age, were there more complications compared to now?

Yes, earlier early pregnancy was more common and complications were frequent. Now awareness has increased. Women understand pregnancy better. Earlier, even before the age of 20, many would conceive, which created health risks for both mother and baby. Now, with better awareness and education, such problems have reduced.

PERSONAL INTERPRETATION

This interview was not just a project for us – it was an emotional experience. When we sat in the hospital and listened to Gayatri Devi talk about her delayed salary and her five daughters, we did not just see an ASHA worker. We saw a mother trying to balance her responsibilities at home and in society. Despite financial struggles, she continues to serve pregnant women and children with dedication. That deeply touched us. Hearing Sanju Devi speak about incentives and uncertain income made us realize how unstable their lives can be. They work every day, walk from house to house, convince families, and handle emergencies – yet their efforts are often unnoticed. When we spoke to Dr. Priti Gupta, we understood another side of the struggle. Many women still ignore their health until it becomes serious. We felt a sense of concern realizing how lack of awareness and hesitation can risk a mother's life. This entire experience made us feel both proud and emotional. Proud of these women who work tirelessly, and emotional because their hard work does not always receive the respect and recognition it deserves. It changed the way we see healthcare workers. Now, whenever we think of hospitals, we will remember the faces, voices, and silent strength behind the system.

CLOSING NOTE

This interview was conducted by Silky Subala, Priya Kumari, Himanshu Mishra, and Rahul Kumar as part of our academic project. For us, this was more than just collecting information – it was an experience that allowed us to understand the real struggles and silent dedication of healthcare workers. Meeting ASHA workers and interacting with Dr. Priti Gupta helped us see the human side of the healthcare system. We feel grateful for the opportunity to listen to their stories and share their voices. This experience has left a lasting impact on us and has deepened our respect for those who serve society selflessly every day.

SILKY SUBALA

ENGLISH DEPARTMENT

2023-27

230158

PRIYA KUMARI

ENGLISH DEPARTMENT

2023-27

230310

HIMANSHU KUMAR MISHRA

ENGLISH DEPARTMENT

2024-28

240594

RAHUL KUMAR

ENGLISH DEPARTMENT

2024-28

241110