

Tsunami-affected grassroots women - Arogya Sakhis for Health Awareness and Action (ASHAA) groups improve community access to Health, Water and Sanitation

Swayam Shikshan Prayog (SSP)

After the December 2004 Indian Ocean tsunami, Swayam Shikshan Prayog a development organization promoted the formation of ASHAA (Arogya Sakhi's for Health Awareness and Action) groups – village level grassroots women's organizations, to lead a community health initiative in two districts in Tamil Nadu. The village ASHAA groups have come together to create a community platform to improve community health, by improving awareness of health risks; improving water and sanitation; increasing access to health services; and reducing household health expenditure.

SSP began organizing ASHAA groups in 2005 by taking women in tsunami-affected areas to Maharashtra and Gujarat to expose them to health and sanitation related initiatives underway in those States. Afterward, the ASHAA initiative was launched after a survey conducted by SSP in 10 coastal villages of Cuddalore District in Tamil Nadu. The survey indicated that health expenditure was high per household in the villages, especially because of the loss of livelihoods and health problems related to poor living conditions. SSP identified active self-help groups focusing on savings and credit in Cuddalore and Nagapattinam districts, and gave inputs that provided their leaders the opportunity to go beyond saving and credit operations. Women were supported to gather and collectively analyze information from their communities. Women used their self-help groups as forums to educate women on health issues and discuss other development issues. ASHAA groups began to organize health camps, built linkages with Primary Health Centers to ensure that nurses visited their village regularly, ensure that community members receive proper attention when they visit primary health centers and negotiate for lower rates from private clinics, educate communities on government schemes on HIV/AIDS, pre-natal/post-natal care, etc. In addition women also began to work on solid waste management and improve sanitation in their villages. In some villages ASHAA groups have negotiated with government to improve water supply in order to gain access to potable water. Women also put their savings into a village health fund.

SSP currently facilitates the initiative with 240 ASHAA members who work with 180 self-help groups covering 46 villages in Cuddalore and Nagapattinam districts. Over 12,000 households benefit from the initiative.

Why is this good practice? After the tsunami in 2004, grassroots women excluded from decision making on programmes implemented by external relief agencies, demonstrated their ability to mobilize community support to address health and sanitation-related problems in their settlements. While empowering themselves, women are addressing vulnerabilities in their communities. They improved sanitation facilities, access to safe drinking water and access to health services. They created awareness and took measures to prevent disease or health problems and make health service providers accountable in a way that is directly related to building community resilience and addressing issues of poverty in their settlements.

Partnership

Swayam Shikshan Prayog headquartered in Mumbai is working across three states most affected by mass scale earthquakes in Latur (1993), Gujarat (2001) and tsunami in Tamil Nadu (2004). SSP partners with a growing grassroots network of over 4,000 women self-help groups with 47,000+ women in 1,064 villages across three states addressing crucial concerns around micro finance, sustainable livelihoods, access to health services, community managed water and sanitation in the context of disaster to development.

Since 2001, SSP with support from Citigroup/CAF has implemented a community-led reconstruction and development across 114 villages in Kutch and Jamnagar districts in Gujarat. SSP has initiated and partners with 485 women self-help groups with 8,020 members in these districts. It has built 15 Community Information Centres owned and managed by women's groups to provide a wide range of information on retrofitting of houses, disaster preparedness, and services for women's health, non-formal education for girls, enterprise and credit services.

After the Tsunami in Tamil Nadu (2004), SSP with Citigroup/UWI's support is developing social networks within communities devastated by the Tsunami in 46 villages in Cuddalore and Nagapattinam districts of Tamil Nadu. Activities include building capacities of women and children through access to promotive and preventive health services essential for recovery, micro credit fund to help women who are sole income earners in fishing communities, demonstration of safe construction through building 15 Community Resource Centers involving local masons and women's groups.