# **Example of Village Health Summary Sheet**

Name of village : Khalia		2	
Block: Patnagar	{	Margidad rates gath Blangs	
Dist: Bolangir	\ \(\bar{n}\)	BAJANCIR Samua	
State: Orissa , India	]	Constraint Transport	
Total Number of Households	145		
No of Schedule Caste Household	32		
No of Schedule Tribe Household	17		
No of Other Backward Caste Household	96		
No of General Household	NA		
Total Population	1051		
Population	Male	Female	
No. of SC population	99	94	
No. of ST population	58	61	
No. of OBC population	383	356	
No. of General population	NA	NA	
Total current population of the village	540	511	

Main Illnesses of the community through free listing				
Malaria	• TB			
Headache	Jaundice			
Rhuematitis	Sickle cell			
<ul> <li>Dysentry</li> </ul>	Paralysis			
Skin disease	Eye problem			
Fistula	Dental problem			
Stomach problem	Gall bladder stone			

Fever	•	Diptheria
● Cough	•	Thalasemmia

# No of people got hospitalized due to sickness in last one year

S/N	Name of the Disease	Number of people admitted
1	Thalassemia	1
2	Malaria	1
3	Sickle cell anaemia	1
4	Anemia	1
5	Fever	2
6	Low BP	3
7	Diabetes	1
8	Cancer	2
9	ТВ	1
	Total Number	13

Out of 29 people who reported to suffered with health related problems, 16 of them got treatment done from the either from the Sub Divisional Hospital, private doctor, faith healers, Quacks, Primary Health Centre, ASHA (Community Health Volunteer), ANM (Health Outreach Worker) etc and can were seen as outpatient.

The village recorded 4 deaths in last one year due to cancer (2), sickle cell (1) and TB (1)

## Where do families go for treatment and why?

#### Complaint wise -

- Eye problem-Private doctor,
- Dental problem-private doctor
- Dysentry-ANM, Private doctor, SD
- Headache-ANM, Private doctor, quack
- Malaria-Quack, ANM, Private doctor, SDH
- Rheumatics-Quack, Private doctor, SDH, PHC, Faith healer
- Skin Disease- Private doctor

- Fistula- Private doctor, SDH
- Stomach problem- private doctor
- Fever-private doctor, quack
- Cough- Quack, Private doctor
- Jaundice- Quack, ANM, SDH, Private doctor
- Sickle cell- Private doctor, SDH
- Paralysis- Private doctor, SDH
- TB-SDH

#### Provider wise -

- Private hospital- as in government hospital doctors not treating patient seriously and preferring bad medicines which are also very expensive
- Sub Divisional Hospital as it is close by
- Quack —During the free listing exercise and Group Discussion (GD) it came out that women/people prefer to go to quack.

## Followings are the reasons:

- Quacks are available at door step as they roam around with their bike in the village.
- There is no need to pay them immediately, they can credit the money.
- No wage loss due to travel.
- No faith in free medicine provided by the hospital.
- There is a strong perception that in the Government hospital doctors do not check properly and also they do not prescribe
  proper medicine. But the same doctor in private practice examines them nicely and prescribes good medicines which have
  immediate effect.

#### **Referral Patterns**

- Quack Private doctor SDH (e.g. fever, cough, malaria, jaundice, rheumatics)
- ANM Private doctor SDH (e.g. dysentery, headache, malaria)
- Private doctor SDH (e.g. paralysis, sickle cell, fistula)
- Private doctor only (e.g. Dental problems, eye problems, skin)
- SDH only TB

In free listing exercise, it came out that the community's first contact point is quack for body ache and cold. For rest health problems people prefer to visit private doctor in Patnagarh. The GD and free listing reveals that people do visit to doctors during jaundice. The free listing has already taken out the diseases that are not considered amenable to medical treatment. We have collected information only of those who got treatment from the hospital or private doctor.

**Pregnancy and delivery** - The total number of deliveries in last one year was 23. Out of 23 deliveries, 19 were institutional and 4 were home. Women reported that usually they have to pay 600 — 700 for transportation. On average women have to pay for institutional deliveries from 2500 to 3000, which includes — transportation, delivery kit, wage loss, medicine, food and wage loss of accompanying person. The home based delivery costs 400 to 500. All institutional deliveries took place in Patnagarh govt. hospital.

#### Meeting cost for health care / consequences

- Family savings
- Loan for interest at 10%
- Mortgage/sell land or jewel
- People take loan from Self Help Group and landlord to meet the health need with 10% interest per month
- To avail Health Subsidy fund, women are forced to give Rs 300-Rs500 to the health provider
- Free medicines are not available in the Government Health Facilities

## Main Health related issues of the village

- Malaria is the major concern in the village
- People are unaware about health entitlement and financial entitlement
- People believed on faith healer and had trust on them
- People have no idea about Referral Transport Support
- Women are not aware about Rs 250 provided for transportation cost for delivery
- People know about Village Health Committee but no had no idea bout expenditure of the entire flexi fund like Annual Maintenance Grant
- Not a single woman got transportation cost under JSY scheme and the private transportation cost is very high in the area
- Women are not staying for 48 hours in the institution after delivery which causes vulnerability
- In need, women are forced to access services in the private sector as the behavior of Govt. doctor is not good
- Government doctors are engaging in private practice
- Health expenditure are increasing day by day
- Delivery kit are not free for the women in the SDH

## **Example of Village Map:**

