





RAPID FORMATIVE ASSESSMENT on Non-Communicable Diseases

TELANGANA







BRIEF SUMMARY

The Rapid Formative Assessment was conducted by PPHF with Magna Carta Research team in collaboration with the State Government of Telangana and supported by SANOFI India.

BACKGROUND

The objective of the RFA was to assess the community's needs, behaviours and perceptions on NCDs as well as the various factors both, on the demand and supply side, that affect the delivery of services for tackling non-communicable diseases. It also aimed to understand the knowledge and capacity of the health professionals to prevent and manage non communicable diseases.

STATE: Telangana DISTRICT: Hyderabad

ZONES: Charminar, LB Nagar, Khairtbad, Kukatpally, Secunderabad and Serilingampally.

METHODOLOGY OF THE ASSESSMENT

Qualitative

30 In-depth interviews

4 Key Informative Interviews

63 Unstructured Interviews

60 Patient-exit Interviews

10 Non-formal Interviews

Quantitative Sample Size-600

Health care Providers (nodal and Medical officers)

Frontline Workers-ASHAs and ANMs

People in the Community

Other local leaders

October- November (2021)

Preparation of study instruments

Data Collection and Audio Recording

Summarised Field Note Preparation English Translation of Field Notes

Data Coding and Analysis

Report Preparation

SUMMARY OF FINDINGS



Limited awareness about Health services at Basti Dhawakana's



Referral and Follow up



Need for Capacity building related to NCD



Effective Communication and counselling Materials

1 Limited knowledge of services in UPHC. Most of the respondents were aware of the NCD screening but none of them had seen a screening happen at the UPHC. The staff in UPHCs are occupied with heavy workload, and are unable to provide adequate attention to patients for their ailments. The books provided for NCDs are very useful for regular follow up and treatment.

- 2 Awareness about Basti Dawakhanas is low as more than half of the respondents (430/600) visiting the UPHC for treatment were not aware about services, location and purpose of Basti Dawakhanas. Most of the respondents were not aware of the risk factors and symptoms of NCDs. These are known to be major barriers for NCD screening.
- A majority of 261 respondents smoke daily; 232 respondents have a habit of chewing tobacco; 243 respondents consume alcohol daily.
- 4 Social stigma and inhibitions among the female population pose a serious barrier for Cervical and Breast cancer screening.
- 5 Treatment and supply of medicines to patients are regularly provided; stocks are maintained well. The Referral Mechanism from BD and UPHC are well maintained.
- 6 Frontline health workers expressed need for periodic refresher training on screening, counselling and management of NCDs.
- 7 Additional Manpower required as the healthcare staff at UPHC have requested for additional manpower for NCDs.
- 8 Limited Health Insurance as the sample population had limited knowledge and information about insurance and related services. Of the 600 samples, only 171 had Arogyasri, 81 had ESI cards and 80 respondents had private health insurance. A whopping number of 268 respondents did not have any health insurance.
- 9 Both Community and Health care professionals highlighted the need for creating awareness campaigns and outreach camps for mobilising the community for screening and management.

RECOMMENDATIONS

At the facility level:

- Strengthen the healthcare capacity by periodic and regular training on NCDs.
- Enable the provision of community mobilisers in each Basti Dhawakana and UPHC for better service delivery.
- Conduct a periodic review of all equipment with a strategy for its maintenance and replacement.
- Recruit and allocate adequate skilled healthcare professionals.
- Ensure regular and strict monitoring visits.
- Link the NCD patients with the state Aarogyasri health insurance scheme for better treatment adherence and follow ups.

At the community level:

- Develop resources and context-specific information and education communication materials.
- Create community awareness during outreach camps regarding NCD risk factors and an unhealthy lifestyle.
- Create a support and follow-up mechanism for suspected breast and cervical cancer cases.
- Schedule home visits by ASHAs and ANMs for suspected cases.

CONCLUSION

The findings of the assessment conducted in Telangana highlight the need to strengthen the screening and management of NCDs to reduce the mortality and morbidity. The primary focus must be on capacity building of the healthcare system to increase access and quality service delivery at all levels. Continuous monitoring and supportive supervision will play a cruical role in improving the health of the community.

About PPHF

PPHF is a non-profit organisation that works towards transforming lives for improved health and wellbeing through locally-driven solutions.

PPHF works closely with communities and key actors on sustainable solutions for public health challenges. These include:

- 1) Women, Adolescent and Child health
- 2) Non-Communicable Diseases
- 3) Nutrition
- 4) Infectious diseases-T.B, Malaria, COVID-19
- 5) Environmental Health

We focus on building public health capacity and community actions for better health outcomes. We work collaboratively with stakeholders, leveraging partnerships and influencing policies and practices.

Contributors:

People to People Health Foundation and Magna Carta Foundation

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Contact us:

People to People Health Foundation K-40, Third floor, Jangpura Extension, New Delhi 110014 E-mail: info@phfindia.org | Phone: 011- 35121441 (www.pphf.in)

