# **Original Research Article**

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# Utilization of health facilities at primary health centre by rural community of Pondicherry

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### **Abstract**

**Background**: The utilization of services at Primary Health Centre (PHC) by the community differs from place to place and changes over the time based on the availability of quality of services. It is also necessary to evaluate the utilization trend of primary health centre services by the community.

**Objective:** to know the pattern of utilization by rural community on availability, utilization and perception of facilities at primary health centre.

**Material and methods**: A cross sectional, descriptive, community based study was done during September to November 2014 in selected sample from PHC area by interviewing 300 families on various aspects at their doorstep. The date collected from each family on the aspects such as awareness, availability, utilization and perception of facilities at primary health centre.

**Results:** More than 80% were aware about the PHC, its location and more than 75% on availability of free medicines and laboratory investigations. Many preferred to visit PHC for their ailments and waiting time for treatment was less than 30 minutes and 70% of families visited the PHC at least once since last 3 months for some kind of health problems. The common ailments were respiratory problems, fever episodes and accidental injuries. Nearly 50% were aware about the contents in the display of posters on various health education topics.

**Conclusion:** Periodic assessment of pattern of utilization of PHC is important to improve the service utilization by the community through their involvement.



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# **Key words**

Primary health centre, Utilization, Pondicherry, Rural, Health.

# Introduction

Primary health care (PHC) is a strategy worldwide for the health and wellbeing of the individuals. Though the services are catered under the primary health care vary from country to country depending on the extent of various health issues. Developing countries focus attention on reducing the death and burden due to communicable diseases, MCH and sanitation problems [1]. The services availability and utilization are two different issues on effectiveness of primary health care.

The different indicators have shown decline in response to the participation of the community in seeking help or treatment for their health problems. The policy makers, program managers and other related authority have evaluated at international, national, district and local levels to know the impact of the service delivery and utilization in terms of both quantitative and qualitative ways [2].

In India the utilization of health services are varying on topics such as communication, maternity care, communicable disease and nutritional issues in different states [2, 3]. This will help to focus the delivery of services to sectors that are in most need [3, 4]. The feedback on the periodic evaluation throws light on the status of improvement of the indicators and quality of life [5]. Thus the study is planned in the rural community in Pondicherry with an objective to analyze the utilization of primary health centre.

### **Material and methods**

The union territory Pondicherry has 5 tertiary care level hospitals, 2 community health centres, 12 urban and 15 rural PHC, 14 urban

and 35 rural sub centres catering to a population of 12,44,464. The study period was September to November 2014 and sample sizes of 300 houses were selected. Ganapathi Chettikulam village belongs to primary health centre having population of 2514 people; situated 15 km from the city was selected for the study.

The houses were selected randomly in the village. The family members were explained the objective of the study and consent was taken. The information was collected by interviewing the family members in the house on various aspects of questionnaire and answers which are concordance to available family members were considered. The questionnaire was pilot tested before the final study. The information in the questionnaire contained the names, age, and sex of each family members, awareness and utilization of various health services available in PHC. The study Proforma included the questions on three broad areas such as availability, utilization and perception of health facilities to the individual. Most of the informants were female members of the family aged between 30 and 50 years.

### **Results**

The information was given by female family member in majority of the houses (90%). Nearly 86% householders were aware about the presence of primary health centre and 60% were able to say the approximate distance as per **Chart - 1**. Many the families were aware about the availability of free medicine and laboratory investigations. Very small proportions were aware about the free availability of Vitamin A and Iron Folic acid tablets. Nearly 72% of the families preferred to use primary health centre

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for their ailments and seventy percent visited at least once during the last 3 months.

Less than 50% of the families preferred injection as treatment and less than quarter of families were visited by ANM since last six month and 60% of families were getting medication when there is outbreak of disease. The waiting time for seeking treatment was less than 30 minutes, was the opinion of the family members. The common ailments which the family members were attending were respiratory infections and fever episodes as per **Chart - 2**. The families were aware about the importance of display of charts and posters on health awareness as per **Chart - 3**.

### **Discussion**

It is a belief that the primary health care takes the responsibility to deliver the services to the need of community depending on the demand disease load and requirements of basic health facilities. The first part of the utilization of health services starts with awareness about the available health facilities, such as primary health centre and approximate distance or time to reach there. It is convincing that nearly 86% of families were about the presence of primary health centre. The perception about the approximate distance was to know or cross verify the answer about the awareness about the PHC location. Total 60% were able to mention the approximate distance to the primary health centre from their locality in the village.

The presence of medical officer and free medicine are motivational factors for the community to utilize the primary health care. Nearly 80% were aware and satisfied about the good quality free medicine and most of the time the medical officer was attending the family members when they visit to seek various health

facilities. This is supported by the few studies, however the use of PHC for free medicine and availability of medical officer is better in this community [3, 5, 6]. This evidenced by the families suggesting that they prefer to visit primary health centre than the general hospital or private hospital as high as 72% and confirmed by their answer of visiting at least once during the last 3 months for ailments to their common minor and emergency conditions. This is supported by other studies which they focused mainly on communicable diseases or maternal child care and immunization services [3, 4, 5, 6].

The literacy level and awareness about the presence of local endemic disease plays an important role. In this study, families were aware about the effectiveness of getting or preferring medications through injection for limited conditions. As a result less than 50% preferred to visit PHC for treatment seeking injection as mode of therapy. This was a good practice in this community compared to other studies reported [2, 3, 6].

In many situations the medical officer will not be available while preoccupied with their administrative, supervisory or review meetings etc. in primary health centre as a result the patients have to wait for the doctor for few hours. In our study, the families were satisfied with the availability and competency of the medical officer in treating each patient. The community members opined that their waiting time to get treatment from medical officer is less than 30 minutes as mentioned by 72%. This is not the situation in other part of our country as reported [2, 3, 4, 7].

There are various pattern of utilization of primary health centres in treating common ailments prevalent in the community. In this rural community of Pondicherry, the families mentioned that the problems to which they visit

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the PHC were acute respiratory problems (55.6%) fever (47%), gastrointestinal problems (8%), animal or insect bites (8%), accident injuries (7%) and non communicable diseases follow up (6%). The pattern is similar with some reports and the proportion of the conditions from these studies [2, 3, 5, 7].

It is high time that the creating awareness about the local endemic and epidemic diseases through health education aids. The charts or display boards are conventional methods in use and take attention of the patients and attendants when they visit primary health centres. The community will utilize their waiting time in primary health centre in getting the contents in the display of charts, boards, posters etc. In this study, the family members were asked to list the health education messages displayed on their own language about the content and diseases as seen by them in the posters. Nearly 45% were able to say on displayed charts and posters, remaining 45% were able to appreciate the picture and unable to mention such topic or diseases in the poster.

The family members mentioned that serve communicable diseases (36%), breast feeding practice (12%), non communicable diseases (10%), nutrition and hygiene (9%), and immunization services (5%) were the displayed education issues. It is high time to reach the community with regarding the control or prevention of diseases through displayed posters, charts or boards in local language and pictorial way to highlight the need adopting the best practices on daily basis are also recommended in different studies [2, 3, 5, 8].

# **Conclusion**

Utilization of primary health centre in this community is satisfied because of availability of Medical Officer and free medicines, less waiting

time and health education activities. Periodic assessment is required to know the pattern of utilization of primary health centre by the community on their health problems.

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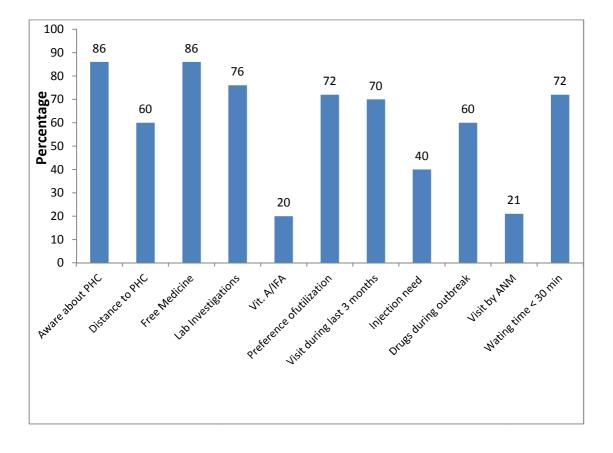
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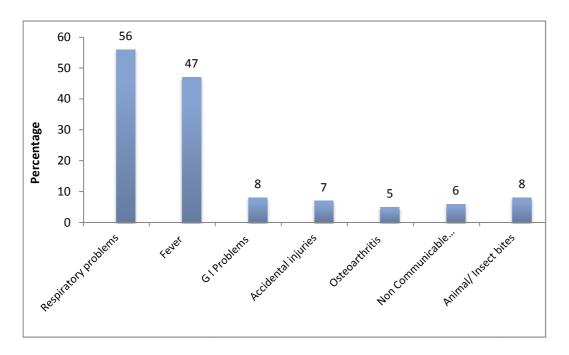
<u>Chart - 1</u>: Awareness of available services in primary health centre by the families.



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<u>Chart – 2</u>: Common ailments listed by families for visiting primary health centre.



<u>Chart – 3</u>: Contents of display posters as mentioned by families.

