

District Level Dissemination Meeting

State Institute of Agriculture Management
Tonk, Tuesday, 30 June 2010

Event Report

Improving Service Delivery through Measuring Rate of Absenteeism in 30 Health Centres in Tonk District of Rajasthan, India



Organised by

CUTS Centre for Consumer Action, Research & Training (CUTS CART)

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Introduction

CUTS Centre for Consumer Action, Research & Training (CUTS CART), in partnership with the Results for Development Institute organised a District Level Dissemination Meeting (DLDM) under the project 'Improving Service Delivery through Measuring Rate of Absenteeism in 30 Health Centres in Tonk District of Rajasthan, India', being implemented in Tonk District of Rajasthan, at State Institute of Agriculture Management, Jaipur on June 30, 2010

Background

Good governance is one of the pathways to achieve the vision of Consumer Unity & Trust Society (CUTS) and so it has been continuously working for improving status of governance at all levels of government through the use of various methods and approaches. CUTS center for Consumer Action, Research & Training (CUTS CART) has been utilizing various social accountability approaches in various flagship schemes of GoI for enhancing client power and engagement in the processes of implementation.

CUTS CART is implementing a project 'Improving Service Delivery through Measuring Rate of Absenteeism in 30 Health Centres in Tonk District of Rajasthan, India' in partnership with Results for Development (R4D) institute under its Transparency and Accountability Programme (TAP). Through the implementation of various research activities and use of social accountability tools like Citizen Report Card and Community Monitoring under the project for the duration of 10 months now, the project has come up with concrete findings related to the delivery of health services in Tonk district and the findings as well as the advocacy points drawn out of evidence were disseminated through DLDM

Objective

The overall objective of dissemination was to advocate for making changes and engaging community in the implementation procedure for the improved service deliveries at the PHCs and also to show the effectiveness of community monitoring done as a project activities for better outcomes and cooperation among the service providers and service recipients.

Participants

The event experienced participation of around 80 relevant stakeholders including Dr. Ramawatar Jaiswal, Deputy Director, Department of Health & Family Welfare, Dr. R. P. Meena, Chief Medical & Health Officer (CMHO), Dr. R. K. Jawa, Dy. CMHO, Dr. Gopal Saini, RCHO, Tonk, Md Suboor Khan, District Programme Manager-NRHM, B. L. Bairwa, Chief Planning Officer,



Block CMHOs, Block Programme Managers, Doctors from PHCs, Representatives of PRI, Media and others.

Courtney Tolmie (CT), Senior Programme Officer from Results for Development Institute came down to Jaipur to be part of DLDM

Details of the Proceeding

Screening of the Film

A film 'Social Accountability in Action: Experiences from Grassroots' showing the experiences from grassroots of using the tools of Social Accountability in getting better service delivery was shown to the participants.

Welcome, Amar Deep Singh

At the outset, Amar Deep Singh, Project Officer, CUTS welcomed the distinguished participants and presented the overview of the project in brief

Introductory Remarks, George Cheriyan

George Cheriyan, Director, CUTS International, started with saying about the objective of the dissemination meeting of the project findings is to ensure maximum benefits of the health services in the primary health centres of Tonk by providing recommendations based on the evidences collected through various research activities and the use of social accountability tools to the district administration.



He further added that this project was not a fault finding mission but an effort to suggest certain measures based on citizens' report on the quality and quantity of service delivery entitled to poor and marginalized under NRHM. He said that huge budget is allocated for the National Rural Health Mission and is increasing every year as focus of government is to provide quality health service delivery to the people of this country so it should be made sure that the money is used in a proper and transparent way. He said this is possible when community monitoring aspect of NRHM is emphasized and implemented correctly.

He also added that out of all 33 district of Rajasthan, Tonk was selected to understand what is working well in the district as it is known as one of the progressive district under NRHM in Rajasthan. The idea behind considering Tonk is to see whether things are really working well and if working, then what is working well, so that it can also be replicated in other district of Rajasthan. At last he thanked Results for Development Institute and Courtney Tolmie for providing support to CUTS to do this study and also for coming down to Tonk to participate in the DLDM.

Opening Remarks, Courtney Tolmie

Courtney Tolmie (CT), Senior Programme Officer from Results for Development Institute started with her comment on the presence of all kind of stakeholders in the meeting and said that such mix groups are rarely seen in the US. She appreciated the CUTS works being done in the area of research and advocacy and said that she is very excited about the findings emerged out of the study done here in Tonk district of Rajasthan. Stating about the work done by Results for Development Institute, she said that it works in the area of transparency and accountability mainly in health and education sector. She said that R4D supports the organizations in the countries who know their country best instead of working directly.



She further added that the problem of absenteeism is rampant all over the world and it has major financial implications. She reiterated that her organization is committed to identify problems of service delivery in the countries of Asia, Africa & Latin America to identify problems and come out with solution

Release of communiqué-Engaging Eyes by Courtney Tolmie

A communiqué based on the findings of the project was released by Courtney Tolmie during the DLDM and distributed to the participants.

This communiqué will work further as an advocacy tool during the project and later for bringing changes in the health service delivery. The electronic version of it will be circulated among a wider audience



Presentation of the findings, Om Prakash Arya

Om Prakash Arya, Project Coordinator, CUTS, presented the key findings emerged out of the various research activities and information gathered through the use of social accountability tools like Citizen Report Card and Participatory Absenteeism Tracking Process. A few of the key findings and recommendations are enlisted below.



Key findings

Absenteeism among all categories of health officials exists on an average at the rate of 27 percent. However, the range of absenteeism was found to be between 12 percent in case of the male nurses and 36 percent for the Doctors or the Medical Officers.

Medicines to the PHC reach once or twice in a year only, not round the year. Only 10 out of 35 listed medicines are made available and when they get exhausted, nothing can be done. Few medicines available at PHC are given to any one, irrespective of the ailments to the people.

Lack of faith in community towards Services at PHCs, Poor awareness on entitlements, People don't know any grievance redress mechanism, Negligible VHSC meetings, community monitoring, Low OPD Count (Fake names), Villagers are not sure about the services available at the PHCs

People do not know about any grievance redress mechanism under NRHM. Lack of Infrastructural facilities for a healthy life style for health officials, Doctors are given lot of other work, Not given leave, 24*7 hospitals have one doctor, PHCs are not located centrally, not evenly distributed

Community do not cooperate with health official of PHCs sometimes, Political interference in transfers, selecting PHCs location. Uneven distribution of staff, Poor availability of doctors to work in rural areas

Report card on JSY and Child health

S. No.	Provisions/Entitlements under JSY	Yes
1	Are you registered under JSY?	80
2	Were you given the iron tablets during pregnancy period?	76
3	Was any lab test done at the PHC during pregnancy?	75
4	Does government encourage institutional delivery in your opinion?	82
5	Do health workers come to patient's home for delivery purpose?	50
6	Whether your ANM has required skills for delivery?	87
7	Was economic help given after delivery?	68

8	Does your hospital have 24-hour delivery facility?	63
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S. No.	Child Health related activities	Yes
1	Is your child immunized?	93
2	Has your child been given Vitamin A supplement?	81
3	Were you told for exclusive breast feeding to your child?	88
4	Does your PHC provide your child security against malnutrition and other infectious diseases?	78

RESPONSES

Dr. Ramawatar, Dy. Director, DoFHW, GoR

Dr. Ramawatar Jaiswal praised CUTS by saying that its interventions in various areas are very effective. He further said that he is ready to accept

recommendations and it will certainly help in improving the quality of service delivery at health centers.

He added that the issue which is presented by Geroge Cheriyan is very relevant that budget is not an issue now but the issue is how to implement effectively the budget allocated under NRHM. He was remembering the days when due to lack of funds, CMHOs had to make visits to the PHCs on bicycles. He ordered the district health administration to make visits to the PHCs to look into their condition.



Dr. R. P. Meena, Chief Medical & Health Officer, Tonk

Dr. R. P. Meena was not agreeing with few of the findings related to the availability of medicines at the PHCs. He said that he will share the findings presented over here in the meeting of doctors and will see how medicines are not reaching to the health centers. According to him the medicines are not reaching because of lack of demand by the medical officers. Quoting the positive findings on service delivery, he said that the effort is visible through the reports of people and wherever there are problems, he will try to find out and rectify it.

Dr. R. K. Jawa, Dy. Chief Medical & Health Officer, Tonk

Dr. R. K. Jawa congratulated CUTS for the wonderful work it is doing and he said that it is very true that real development takes place when there is true community participation as evident in the findings of the project. He also pointed out that community should also come forward and send their children to the schools especially girls

Md. Suboor Khan, District Programme Manager, NRHM, Tonk

Md. Suboor Khan, in response to the presentation of findings says that it needs to be investigated again by the department that the cash assistance is reaching the people properly or not because according to his report, most of the people are availing cash assistance under JSY. He further said that the name and mobile number of CMHO is written on the wall of the PHCs and if it is not there, then he will make arrangements for that. He also said that few of the recommendations presented here is already taken in to account. Facility mapping is started in the Tonk where all the villagers know about where to go in different phases of the deliveries to get the better services. At last he added that he is pleased that CUTS has done such study and the information provided by it will be used for further planning.

Dr. C.D. Vyas, Representative of Doctors at PHCs

Dr. C.D. Vyas told that it is very true that the PHCs are not located at right place. Generally it is outside the village. Before selecting the place to construct it, it should have been discussed in the Panchayat. He said that presently anyone is given position or made members in the Village Health & Sanitation Committee (VHSC) and they don't own the VHSC. The members of the PHCs should be selected cautiously and made responsible for its activities. He also pointed out the problem of electricity and water supply. He said, to reach timely at the PHC, He had taken bath at PHCx for 66 days in last financial year, as the water supply does not come on time.

Murli Dhar Sharma, Representative, Partner NGOs, Tonk

Murli Dhar Sharma told in his response that the Participatory Absenteeism Tracking process (PATP) was completed quietly without any information to the health officials. Later on when we went to the PHCs and told about the process of PATP is done and it will continue further by the community members, the service delivery and the presence of health officials increased at the PHCs. Now, we get the phone calls from many community members about the availability of services and staff. The health officials are also getting cooperation from the villagers and representatives of PRI. He also mentioned about one of the incidences, when community helped the doctor in one fake charge of corruption on doctor that was sabotaged by a quack near by because doctor was very helpful to community in context of providing health facilities.

Open Session & Vote of Thanks

Several other participants responded on the findings relating to their experiences and responded accordingly by the project team members. Madhu Sudan Sharma, in his concluding remarks, pointed out that the project aimed at finding out the highlights and

gaps in the implementation of the scheme, which it has succeeded in and resulted in drawing recommendation for improvement at all levels.

He also proposed the vote of thanks. He thanked all the distinguished guests and participants, who attended District Level Dissemination Meeting from various places and gave special thanks to the partner NGOs and other officials of Tonk, who helped in the study for their efforts in various ways in supporting the project activities and showing their active presence in the meeting. He also thanked the team members like Shyam Sunder Vijay, Dharmendra Chaturvedi and Nikita Srivastava who helped in organizing the event.

Highlights

- Majority of the expected policy influencing government officials arrived to the meeting and showed their interest in finding of the study and also announced few decisions in order to improve the health service delivery
- Most of the findings were endorsed by officials and few of the problems found in study were taken seriously by the concerned authorities to look in to and find solutions
- Good electronic and print media coverage certainly drew attention of other relevant stakeholders who were not present in the meeting.