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Poor health services plague

Funds are there but the healing touch is missing; community-based monitoring undertaken

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SAYVAN (THANE DISTRICT): "I brought my wife to the Sayvan primary health centre when she was bitten by a dog, but they asked me Rs. 50 before treating her," said Janu Babar. He did not know that treatment for dog bite is free for Adivasis. They just have to produce a below poverty line (BPL) card. If they don't bring the card, they will have to pay Rs. 50 as refundable deposit. Eventually, Janu paid Rs. 120 to get his wife Devli treated in a private clinic.

This was one of the issues raised at a public hearing on the National Rural Health Mission (NRHM) at the Sayvan PHC in Dahanu taluk on Friday. The exercise is part of community-based monitoring of health services being conducted in five districts of

Maharashtra.

Out of Maharashtra's annual budget of Rs. 1,000 crore under the NRHM, only Rs. 860 crore was spent last year, according to Dr. Nitin Jadhav of Sathi, State coordinator for community-based monitoring. Before the hearing, NGOs conducted a study of the five villages which come under the PHC, catering for a population of 41,000.

A report card of the study presented at the hearing, presided over by Dr. Anand Phadke of CEHAT, an NGO, revealed that the situation is quite serious in four villages where the people did not even recognise the multipurpose health worker (MPW). In some cases, the auxiliary nurse and midwife (ANM) did not perform her duties. Medicines are in short supply and the State has no stock of tetanus injection. The ANMs

spend their money to buy it and get reimbursement later.

The area, inhabited by Adivasis, has reported cases of malnutrition, infant and maternal mortality. Last year in one hamlet alone, four infant deaths were reported. However, the NRHM is supposed to provide "untied funds," as Dahanu taluk health officer Madhukar Rathod pointed out. At the public hearing at Ganjad on Thursday, he said it was raining money. Each PHC gets Rs. 1.75 lakh while sub-centres are given Rs. 10,000 for expenses.

Of the Rs. 32-crore budget for Thane district last year under the NRHM, Rs. 19 crore was spent, Dr. Rathod said. Despite all this money coming in, the situation had not improved. More serious was the problem of doctors not attending to patients and people having to pay for services.

At the Ganjad hearing, an Adivasi complained that she was refused treatment for a badly cut hand when she went to the PHC at 7 a.m. on a Sunday. She had to go to another hospital, where 18 stitches were put. When the two PHC doctors were asked to explain, they said it was too early on a Sunday and so they did not treat the woman, according to Dr. Jadhav.

When Bharati Mahale took her sister-in-law to the Sayvan PHC for delivery, no doctor was present and she was asked to take the pregnant woman to the sub-district hospital at Kasa, 15 km away. The ambulance driver charged her Rs. 150 for diesel. At Kasa, the doctor made them wait and when Bharati lost her patience, she was almost assaulted. Her sister-in-law was then taken to a private hospital and Bharati had

Thane Adivasi area

to pay another Rs. 300 towards diesel charges.

It is not only patients, doctors too are suffering. T.R. Bansode, medical officer of the Sayvan PHC, said he had not been paid salary since March. The PHC itself is a shambles, there is no water and electricity. The operation theatre remains closed and the delivery room is dusty. The laboratory is non-functional.

The rain of money has not helped much. Kavita Raote, who had a second daughter three months ago, said the infant was not vaccinated. It was a home delivery, but no ANM visited her within a week, which is mandatory. Kavita is entitled to Rs. 800 under the Matrutva Anudan Yojana and Rs. 500 under the Janini Suraksha Yojana, but she got no money under either scheme.



POST-MORTEM: A public hearing in progress under the National Rural Health Mission at Sayvan village in Maharashtra on Thursday. — Photo: Handout