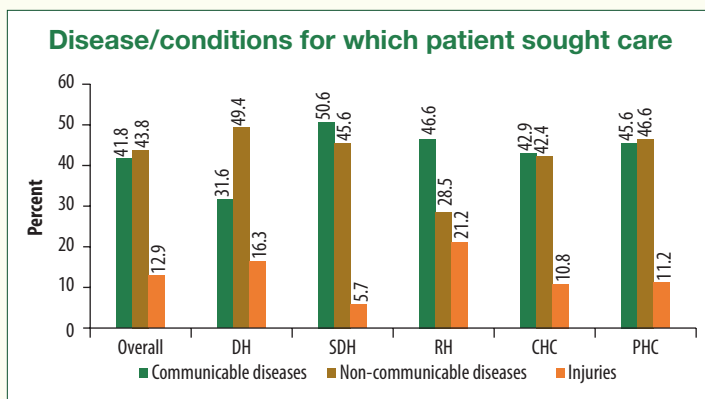


PREPARING THE PUBLIC SECTOR HEALTH FACILITIES IN BIHAR TO ADDRESS CHRONIC DISEASE BURDEN

With the continued primary focus of Bihar's health system's on maternal and child health care for service provision and capacity-building, without the much needed additional focus on chronic disease service provision or capacity of staff to deliver these services, universal health care cannot be achieved.

CHRONIC DISEASES

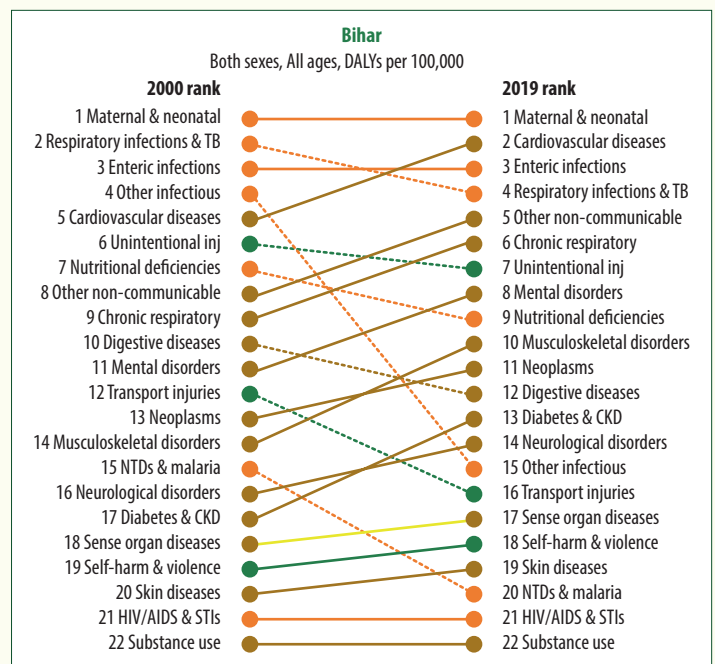
Chronic diseases currently are the leading cause of disability-adjusted-life-years in Bihar, as is the case in other states of India, and are projected to increase further during the next 25 years. The distribution of disease conditions for which the patients reported to seek health care services at the sampled public sector facilities also reflects the on-going epidemiological transition of disease burden from infectious to chronic diseases.



THE HEALTH SYSTEM CURRENTLY HAS EXTREMELY LIMITED CAPACITY TO ADDRESS CHRONIC DISEASES

The availability of service provision for health facilities was documented, defined as the facility reporting availability of a given service at least one day a week. Across and within the platforms, while the fundamental services such as routine deliveries, general medicine, immunization, and pharmacy were nearly universally available, the services for non-communicable diseases were predominantly available only at the district hospitals.

All district hospitals reported a wide range of services such as orthopedics, ophthalmology, dermatology, surgical services, dentistry. None of the facilities reported availability of alternative medicine. Importantly, though AYUSH trained doctors were available at some of the facilities, they were found to be practicing allopathic medicine (due to non-availability of alternative medicine drugs).



NCD Services	DH (n=4)	SDH (n=4)	RH (n=4)	CHC (n=15)	PHC (n=9)
Orthopedics	100%	0%	0%	0%	0%
Ophthalmology	100%	0%	25%	0%	0%
Basic cardiology	75%	0%	0%	0%	0%
Internal medicine	100%	100%	100%	100%	100%
Primary burn care	75%	25%	50%	7%	11%
Dentistry	100%	100%	100%	93%	89%
Mental health	75%	0%	0%	NA	NA
Cancer screening or treatment	50%	0%	0%	0%	NA
General dermatology	100%	75%	25%	47%	56%
Alternative medicine	0%	0%	0%	0%	0%
Radiology and Imaging Services	100%	50%	25%	33%	56%
Pathology laboratory	100%	100%	100%	100%	89%

WAY FORWARD

The sub-divisional and referral hospitals could be developed as points of service for chronic diseases

The number of out-patient visits in the district hospitals was 3.8 and 2.7 times more than that in the sub-district and referral hospitals, respectively. Also, these two platforms had poor availability of service provision for chronic diseases as the type of services available here was very similar to that available in the community/primary health centres. The state could consider developing the sub-district and referral hospitals as delivery points for chronic diseases to expand the coverage of chronic disease care for the community, which will also serve to reduce the patient load at the district hospitals.

Act to increase the availability and capacity of human resources to manage chronic diseases

Currently, the primary focus of Bihar's health system is on maternal and child health care. Universal health care cannot be achieved without Bihar improving the skill-mix of staff to address chronic diseases. Bihar can identify staff from sub-divisional and referral hospitals, and arrange for their training in management of chronic diseases. All relevant cadres should be trained including the doctors, nurses, laboratory technicians, radiologists, nutritionists, rehabilitation specialists, and pharmacists who are needed to deliver these services effectively.

Invest in infrastructure and equipment

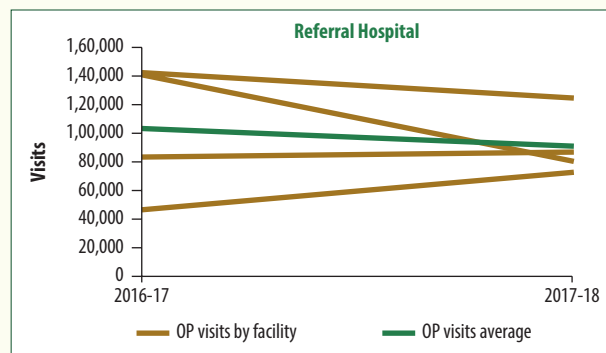
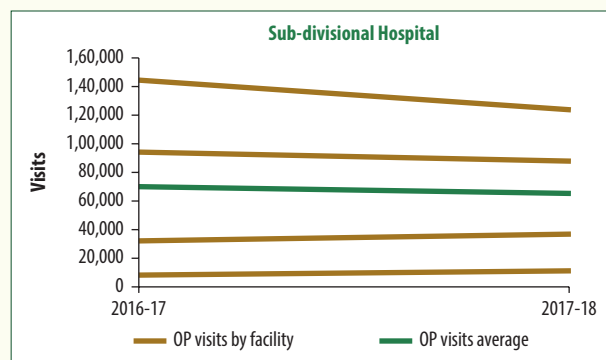
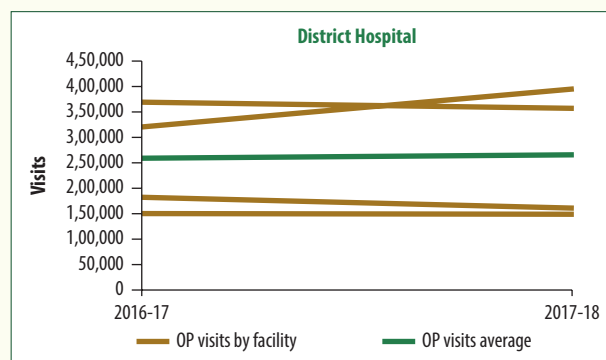
Patients with chronic disease have longer and varied treatment needs, which requires more hospital visits. The facility infrastructure needs to be able to accommodate increased patient visits and be accessible to older population. Investment will be needed in the relevant medical and non-medical equipment to diagnose, monitor and manage chronic diseases.

Assess and address implementation issues in the national programs addressing chronic diseases

With the variety of chronic diseases that need attention and the broader age group that these diseases affect (as compared with maternal and child health), better understanding of issues related to implementation of the current national programmes on chronic diseases is needed to highlight the gaps that need attention. Improvement is needed in both the coverage and quality to provide chronic diseases service under the Health and Wellness Centres as part of the Ayushman Bharat.

About ACCO Study

The Access, Capacity, Costs of Care and Outputs (ACCO) study of Public Health Care Delivery Systems in Four Districts of Bihar, is a collaboration between the Centre for Health Policy, Asian Development Research Institute, Bihar and the Public Health Foundation of India, Gurugram. The goal of the study was to provide decision-makers with the best possible evidence on efficiency of the public sector facilities. In addition, facility capacity for service provision, human resources and patient satisfaction were assessed in detail. A total of 84 facilities were included across Aurangabad, East Champaran, Purnea and Samastipur districts.



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