

## **Final report**

# **Assessing the availability and utilization of reproductive health services at government health facilities among women in selected sites in Maharashtra**

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## **Introduction**

Health and reproductive health in particular is major neglected area where the differences of care are quite obvious and requires considerable effort towards betterment. Despite efforts from government and non-governmental agencies to improve the health of women, there exist many problems at the health care system. Many a times the health care providers have an insensitive approach to the needs of women and the problems women face. There is little understanding of what women want from the health system (particularly with respect to reproductive health) and the problems in utilizing the services provided at the government health centres/hospitals.

The study seeks to provide insights into issues related to availability and accessibility of care at the government Health Posts with respect to reproductive health status of women in the community by conducting qualitative research among women in the community in selected locations in Maharashtra, namely Bail Bazar, Shivaji Nagar, Bhiwandi and Malwani. In addition to understanding the views of the women, regarding the services they avail at a health centre, few service providers were also interviewed.

## **Objectives**

The overall objective of the study is to find out the health status of women in the Muslim community and to provide recommendations for better health.

The specific objectives of the study are to investigate the:

1. Health status, including reproductive health of women.
2. Reproductive health seeking behavior of women (including barriers and facilitating factors)
3. To investigate delivery of health care services at the government facilities towards women

## **Methodology**

In the selected sites of Maharashtra, namely Bail Bazar, Shivaji Nagar, Malwani (Mumbai city) and Bhiwandi (Thane district), the following data was collected using the following methods:

### **Qualitative data collection using**

- i) Key Informant interviews
- ii) Focus group discussions with women stake holders
- iii) Focus group discussions with service providers
- iv) Exit interview of women clients who have availed the health care services at government health facilities.
- v) Interviews among women and men in the community

#### **i) Key Informant Interviews (KII)**

Key informants are individuals in the local area who, by nature of their position, life experience, informal leadership qualities, analytic capabilities and verbalization, are able to give useful perspectives on practices existing in the community regarding husbands' involvement during pregnancy and post partum period. The key informant interviews were carried out to understand the kind of reproductive health services available in the community, the activities focused to health at community level and the response of community members to such activities. Detailed guidelines on these issues were developed prior to its initiation.

Seven women and three men each in formal and informal leadership positions in the four respective study communities were selected as key informants. The information about these informants was obtained from the people in the community. The selection of these individuals has tried to be as representative as possible.

### Key Informants Interviews

Area	Total
1. Bail Bazar	10
2. Shivaji Nagar	10
3. Bhiwandi	10
4. Malwani	10
<b>Total</b>	<b>40</b>

Before the interview the participant information sheet was provided to them and consent was taken for conducting the interview. In cases where they had agreed for the interview to be taped, that has been done.

#### ii) Focus Group Discussions- Community perspective

The purpose of focus group discussions (FGDs) is to obtain information about a group's beliefs and attitudes on a utilization of government health facilities in their respective communities. FGDs differ from individual interviews in that the discussion allows for interaction among all the members of the group. FGDs differ from surveys in which participants provide detailed opinion about the issues.

The utilization of services may vary according to the age of the respondent and hence, it was decided to choose women accordingly. Thus, women for the FGD were currently married women and belonged to two groups according to the criteria of selection. In each area two FGD were conducted viz: Newly married women (less than two years- Group I) and Women who are elder (where the duration of marriage was more than two years and less than five years- Group II) before the study period. Around 8-12 women participated in each of the FGDs.

For organizing the FGDs, the help of key informants was taken. Women were informed a week before the event and were reminded about it almost every alternate day when the team was in the community. The consent of each participant was taken before conducting the study. A team member moderated the discussion while the

other person noted down the points. Also tape recorders were used wherever possible.

#### **Focus Group Discussions (Women)**

Area	Group-I	Group-II	Total
1. Bail Bazar	2	2	4
2. Shivaji Nagar	2	2	4
3. Bhiwandi	2	2	4
4. Malwani	2	2	4
<b>Total</b>			<b>16</b>

#### **iii) Focus Group Discussions- Service provider perspective**

In order to provide a holistic view of the situation at the health centre, it is important to understand the perspective of the health care providers. Three focus group discussions were conducted among the service providers at Shivaji Nagar, Malwani and Bail Bazar Health Posts.

#### **Focus Group Discussions- Service Providers**

Area	No. of FGDs	Total
1. Bail Bazar	1	1
2. Shivaji Nagar	1	1
3. Malwani	1	1
	<b>Total</b>	<b>3</b>

#### **iv) Interviews among women and men in the community**

Men and women in the communities were contacted to understand about whether they were using the services provided by the Health Posts located in their communities, the advantages or disadvantages of the services provided; their experience of using the services and the usage of private facilities for health care. While exit interviews with women in the Health Posts gave an idea about the experience of service utilized then, community interviews gave a holistic picture of those using as well as not using the services and reasons for using or not using these services. A total of 30 men and 60 women were interviewed.

### Interviews among women and men

Area	Male	Female	Total
1. Bail Bazar	10	20	30
2. Shivaji Nagar	10	20	30
3. Malwani	10	20	30
<b>Total</b>	<b>30</b>	<b>60</b>	<b>90</b>

#### v) Exit interviews

In addition to understanding the views of the women at the community, women who had used the services at a Health Post located in the community were interviewed. They were asked about the type of service they had received and the kind of treatment they got at the respective Health Post.

#### Exit interviews (Women)

Area	No. of interviews	Total
1. Bail Bazar	10	10
2. Shivaji Nagar	10	10
3. Bhiwandi	10	10
4. Malwani	12	12
	<b>Total</b>	<b>42</b>

#### Ethical considerations

Ethical clearance was obtained from the institutional ethical committee before initiating the study. Written permission from head of the health department of health of Municipal Corporation of Greater Mumbai (MCGM) was obtained to carry out the study. Informed consent for the key informants, exit interviews among women, interviews among women and men in the community and FGDs for women and service providers was obtained from the participants individually before collecting information. Each study participant was adequately informed about the objectives, methodology and the anticipated benefits of the study. They were also informed that they were at liberty to abstain from participation in the study and free to withdraw

their consent to participation at any time. During data collection privacy and confidentiality was maintained.

## **Results of the qualitative data (FGDs, KIIs)**

### **1. Common problems in the locality:**

Most of respondents complained of civic problems like irregular water supply, lack of cleanliness and unhygienic living conditions, garbage disposal problem, overflowing gutters and drains. Some of the participants also said that they had to pay the 'bhangi' (sweeper) in order to get their area cleaned (CP-FGD).

*We don't get regular supply of water. The garbage is not cleared for days; this gives rise to various diseases (CP-FGD 7 –Shivaji Nagar).*

*We have a huge problem of sanitation in our area. There are unclean and dirty drains running all over the area, we get dirty drinking water. The common toilets are not maintained and unhygienic. Garbage disposal is a big problem in this locality. There are no dedicated dumping bins or a place, where we can dispose off our garbage. So people go and throw it in the drains. Nobody cleans the drains on regular basis, therefore during monsoons the drains get choked and over flow, and the dirty water enter our house.*

*In the morning when we receive our daily water, it comes in full force but it is very smelly and unsafe to drink or use (CP-FGD 9- Malwani).*

*We get dirty drinking water in our locality; the garbage is not cleared on a regular basis. The sweeper visits once a week to clean the common toilets, we don't have any dedicated garbage disposal bins to throw the waste, so we face a lot of problem due to this (CP-FGD 10- Malwani).*

*We have a huge problem with the drainage system here. When the drains are full and overflowing, dirty water from the drains enter our rooms. For two to three days continuously we can't step down on the floor and therefore are forced to sit on the bed. Due to the lack of hygiene and sanitation, there are lots of mosquitoes in this area, which lead to cold, cough and*



*malaria amongst the children. The manhole near our toilets is always over flowing with filth (CP-FGD11-Malwani).*

*We have been facing this water problem since the past 6 years. Water supply is not good and the water we get is extremely dirty. Because of which we suffer from jaundice, loose motions, vomiting, fever and pneumonia. Everybody here keeps falling sick. The gutters fill up very quickly and no one comes to clean them. If the municipality people come to clean the gutters, then we have to pay Rs 10-20, only after which they agree to clean the gutter (CP-FGD 7/12-Shivaji Nagar, Malwani).*

*There is a problem with the common toilets here, as they had broken the toilets. It's been nearly 6 months, but no one has come until now to repair them (CP-FGD 12- Malwani).*

*The gutters are always filthy and overflowing. They are full of worms and insects, our children tend to fall sick due to this. Each house has to contribute at least two to three rupees to the bhangi and get the work done. We have to pay money to the bhangi even if he is employed by the municipality.*

*We don't get a regular supply of water, which is a big problem in our area. Since we have to travel long distance to collect water, we tend to fall sick (CP-FGD 13 –Bhiwandi).*

*We are facing a lot of problem due to lack of proper toilets. Currently we are using temporary toilets, due to which there is so much of filth and waste in our area. Due to the temporary toilets there is unbearable stench along with mosquitoes and other health problems. They broke our permanent toilets a year ago. Now they have constructed some temporary toilets, but our entire area is dirty due to that.*

*No they don't clear the garbage on time; the garbage keeps on accumulating over months. But no one comes to clear it off. The gutter is always overflowing with muck and dirty water. Whenever we call the authorities to clear them they don't pay any heed to our plea (CP-FGD 15-Bhiwandi).*

*'We were facing drainage problems, but after repeated complaints to the authorities. They have constructed and repaired the drains and the gutters. However, they still need to repair one more gutter. The rest is okay.'*

*They had made slabs/covers for the gutters, but they're ill-fitting. People of this area throw garbage and their excreta wrapped in plastic bags into these gutters. Now people, who live close to these gutters, have to bear the unbearable stink coming from the gutter. They also face trouble while cooking, as the house is swarmed by mosquitoes and flies. Due to this people had fallen sick in our area, two-three months ago there was an outbreak of Cholera here. The open gutters are a breeding ground for mosquitoes.*

*The area behind my house is also very dirty. We have to complain so many times to the sweeper to clear the gutter. But he doesn't do his job properly.*

*Water supply is irregular here, currently we're getting water. But sometimes they just abruptly stop the water supply. Then for three to two days we have to manage without water supply (CP-FGD16-Bhiwandi).*

Majority of the respondents from Shivaji Nagar, Bhiwandi and Malwani said that garbage disposal, water supply and flowing gutters are the major civic problems. Whereas few women reported having problem with toilet facilities in their vicinity. The participants also mentioned that, most of them were prone to diseases like malaria and fever due to mosquito bites and lack of cleanliness. Women from Shivaji Nagar reported that they usually clean the surroundings and the toilets themselves. Whereas some respondents from Bhiwandi stated that they go to the Corporator to address the issue. More or less women from Malwani & Shivaji Nagar said that government servants do the cleaning in the area (KII).

*Our area is overflowing with garbage and dirty water. Due to the dirty water, a lot of us suffer from loose motions, vomiting and fever. Due to the garbage, we get malaria and fever. Due to fever we get tuberculosis, we contract most of the diseases due to the unhygienic conditions of our area. Whenever the municipal van comes nearby our area, we have to plead to the authorities to visit our area. Only then they come to our area (KII 11- Shivaji Nagar)*

*There are many problems here, like overflowing gutters, irregular disposal of garbage. Due to which there is a large presence of mosquitoes, which leads to various illnesses. The water is dirty, common toilets are far away and ill-maintained. The cleaners come after 4 days to clean the toilets. There are no proper health care clinics in our area. Plus most of us are poor and everything is so expensive. There are no services provided by the government (KII 12- Shivaji Nagar)*

*The gutters are always overflowing, there is garbage everywhere. Due to the lack of cleanliness people fall sick. We suffer from malaria and other diseases due to mosquito bites. The children usually tend to play near the garbage and waste dump. The municipality workers come once in 2-3 months to clear the garbage. Due to the lack of cleanliness we tend to fall sick and suffer from malaria and typhoid (KII 36 – Bhiwandi).*

Most of the participants said that they had approached the BMC/local authorities to address their issue, but the authorities have not solved their problems (FGD).

*We have complained on several occasions to the ward member of our area called Mr. Aslam. But he is ineffective and only gives us false promises of looking into the matter. Then finally the people from our locality visited the municipal authorities and pleaded to them about our state. They then visited us after 15-20 days, and did their little bit of what they can (CP-FGD 9-Malwani).*

*To solve these problems, all of us had given a written complaint to the BMC officials, but there was no action taken. Finally we collected money from all the houses and got our locality cleaned. We also clean the drains during monsoon (CP-FGD 10-Malwani).*

*We approach our local leaders and urge them to look into these issues. We also give written complaints to them, but they pay no heed to our problem. The garbage and dirt keeps accumulating at its usual place. The municipal authorities do nothing to solve our problems (CP-FGD 11-Malwani)*

*We complain to the regular cleaner who cleans the gutter. But he doesn't pay any attention to our problems. We also pay money to the cleaner but despite that, the cleaner doesn't do a good*

*work of cleaning the drains, gutter and our common toilets. During monsoon the drains and gutters are always overflowing, because of this, worms and insects enter our house. We are really tired of dealing with this issue (CP-FGD 12-Malwani).*

*No one helps us, we all get together and dispose the garbage. During monsoon when the area gets flooded, no one comes forward to help us fill the mud. Even the general secretary is of no help to us (CP-FGD 13-Bhiwandi).*

*Sometimes they just come without any notice to carry the sanitation work. We complain to our local leader. He then sends some workers, but no one from the municipality visits our area. The cleaning work happens after one-one month, nobody pays attention to our area (CP-FGD 15-Bhiwandi).*

*Nobody complains to the BMC, we tell the sweeper to clean the garbage. He is irregular about his work' (CP-FGD16-Bhiwandi).*

## **2. Common health problems in area caused due to unhygienic living conditions**

The common health problems due to lack of cleanliness as reported by the participants were; cold, cough, fever, malaria, dengue fever and typhoid. The children usually suffer from loose motions, vomiting, stomachache and heats boils (CP-FGD).

*The common illness here is pneumonia, malaria, typhoid, dengue fever' (CP-FGD 9-Malwani)*

*Most of us suffer from malaria, cold, fever and typhoid. The children usually suffer from boils and skin disease (CP-FGD 10-Malwani)*

*The doors of our common toilets are broken, due to which excreta piles up. Which in turn gives birth to mosquitoes and we contract all kind of diseases from them (CP-FGD 11-Malwani).*

*Yes, we do know that this gives rise to disease.*

*We suffer from vomiting, fever and loose motions due to unsafe drinking water.*

*Malaria and typhoid is caused due to lack of hygienic living condition.*

*I had recently admitted my child in IGM hospital for loose motions and vomiting.*

*Along with children even adults fall prey to such illness. The doctors give us medicines for 4 days. My sister-in-law has been unwell since the past one week (CP-FGD 13-Bhiwandi).*

*Due to the lack of cleanliness in our locality, many of us suffer from cold, cough, fever double typhoid and malaria. Both my sister-in-laws have had typhoid twice.*

*My one-year old daughter has been suffering from Malaria, because the gutters have been overflowing and the children play very close to these gutters (CP-FGD 15-Bhiwandi).*

*The person, who lives near this open gutter, had three sick members in her family and was hospitalized. They were suffering from Malaria and high fever; they were penniless after taking the expensive treatment. Now their daughter has recovered and is feeling better. Loose motions, vomit, body and stomachache. Children keep falling sic' (CP-FGD 16-Bhiwandi).*

Most of the respondent from Bhiwandi, Malwani mentioned that they suffer from Malaria, cold cough, and loose motion and at times they reported of skin diseases and asthma due to the filth in the area. On the other hand one fourth of the respondent from Bhiwandi and Malwani mentioned to suffer from Typhoid, cholera and dengue. More or less respondent from Bail Bazaar stated that Tuberculosis is also one of the diseases which are prevalent (KII).

### **3. Common diseases in the area**

Majority of the FGD participants complained of common health problems like cold, cough, weakness, fever, body/stomach/leg/hand ache, malaria. Some of them also complained of other problems like mental tension, stomach pain during menses, jaundice, sore throat, diabetes, Bp and TB. Whereas the children mostly suffer from headache, stomachache, cough, loose motions, fever, jaundice and skin problem (CP-FGD).

*We suffer from regular health problems like, cold, body ache and cough.*

*I suffer from headache and also experience severe pain in my legs.*

*Yes, a lot of us suffer from head ache and leg pain.*

*When we go visit the doctor they tell us that this is due to calcium deficiency (CP-FGD1-Bail Bazar).*

*Most of us suffer from mental tension, domestic and health problems. Most of the women suffer from cold, fever and stomach pain during menses. The children usually suffer from cold, fever, stomachache and loose motions (CP-FGD 2-Bail Bazar).*

*When we suffer from cold, cough and fever, it causes unwanted tension in our domestic life. We can't do our household chores, which leads to fight and disagreements in the family. There is no serious illness that happens here frequently, but most of us suffer from illnesses like cold, cough, and fever. My child was suffering from loose motions, so I took him to X nursing home and got him some medicine (CP-FGD 3-Bail Bazar).*

*Currently the general health of the women living in this area is good. None of us is suffering from any serious illness (CP-FGD 4-Bail Bazar).*

*We usually suffer from cold, cough and fever. The women usually suffer from stomachache, dizziness, back ache and pain during pregnancy.*

*We normally suffer from headache and dizziness; the children too have the same problem. So of us also suffer from back ache, leg pain and stomach ache before getting our period (CP-FGD 5-Shivaji Nagar).*

*We mostly suffer from cold, headache, loose motions, sore throat, and tension. During summer we tend to drink cold water, so we get cold, cough and throat problem. Most of the children suffer from headache, cold, fever, cough and jaundice, because these children tend to eat outside food (CP-FGD 6-Shivaji Nagar).*

*The common illnesses here are pneumonia, malaria, typhoid, dengue fever. We have lots of mosquitoes in this area, and there have been cases of malaria due to this. Itching, skin irritation and skin disease are some of the common problems amongst the children here (CP-FGD 9-Malwani).*

*We suffer from cold, cough, fever, leg and back ache. Some of us also have Blood pressure and Diabetes, sugar-related problem and body ache. If we drink too much juice then we suffer from cold and fever. And if we consume too much of sugar then we get Diabetes and sugar-related problems. The children suffer from cold, cough and fever, as the children tend to drink cold drinks and juice outside in the hot sun (CP-FGD 11-Malwani).*

*We suffer from Jaundice, as the water we receive is dirty and unsafe for usage. That's why we fall sick. Mosquitoes are a very big problem we suffer from malaria due to these mosquito bites. Main problems here are with mosquito, dirty water and over flowing gutter.*

*The children are also prone to pneumonia. When the gutter is overflowing and choked, we get worried and it adds to our woes (CP-FGD 12-Malwani).*

*We usually suffer from cold, cough and fever. We also suffer from loose motions and malaria.*

*Women suffer from back ache, burning sensation while urinating and stomach pain during period. Many of the women suffer from weakness, I too suffer from weakness. I some time get my periods twice in a month (CP-FGD 14-Bhiwandi)*

*We suffer from cold, cough, weakness and jaundice. We suffer from back ache and breathlessness as we have to climb the steep stairs in or area.*

*Cold, cough, fever and malaria are some of the common problems seen amongst the children. During summer they have heat boils. The children also suffer from Jaundice. I took treatment for my child a month ago from Kalyan, he is feeling better now (CP-FGD 15-Bhiwandi).*

*We suffer from body and back ache, weakness, swelling in the body due to this unsafe drinking water. I have been suffering from severe back and hip pain from three years (CP-FGD 16-Bhiwandi).*

Most of the participants said that fever, cold; TB and leprosy are the commonly reported illness in the area (SPP).

*TB, fever, cold, dysentery, typhoid, malaria, water borne diseases during monsoon. In children skin problems are commonly seen as they play in mud and dirty places (SPP- FGD 1-Malwani)*

*Tuberculosis and white discharge is a common problem in this area.*

*There are also many HIV cases in Zarimari, Bail Bazaar area.*

*We also get cases of vomiting, diarrhea, fever and leprosy (SPP FGD 2- Bail Bazar)*

*Skin diseases, fever, cold, cough, tuberculosis, leprosy (SPP- FGD 3- Shivaji Nagar)*

#### **4. Place and treatment sought for the common health problems**

The participants gave a mix response for this questions, majority of them preferred visiting a private clinic for their health problem. Whereas very few participants visited a municipality hospital or a Health Post for their treatment (CP-FGD).

*We go to the private clinic.*

*We go the private clinic situated in our locality.’ (CP-FGD 1-Bail Bazar)*

*We go to the municipality for treatment and for medicines. The doctor prescribes us some medicines and then tells us to come again after 15 days. They don’t check us properly (CP-FGD 2-Bail Bazar).*

*When we fall sick, we go to the Health Post in Kurla. I had done my first birth registration in that dispensary so I prefer going there (CP-FGD 3-Bail Bazar).*

*Some go to private and some go to the municipality. (CP- FGD 5- Shivaji Nagar).*

*They go to the private clinics. (CP-FGD 7- Shivaji Nagar).*

*Most of them go to the private clinics. (CP-FGD 8 – Shivaji Nagar).*

*We mostly go to the private clinics.*

*Yes, we to go to the private clinics where we have to pay Rs 10 to 20. If we don't get the treatment in private, only then we visit the municipality (CP-FGD 9-Malwani).*

*Most of us visit these smaller clinics operating in our area, or else we visit a bigger private hospital known as Shah Clinic (CP-FGD 10-Malwani).*

*Some of us go to the municipality and others go to the private clinic (CP-FGD14-Bhiwandi).*



Mostly women from Bail bazaar, Malwani, Bhiwandi visit private clinics. Most of the respondent from Shivaji Nagar mentioned that they usually visit government hospitals. Therefore the respondent from Bhiwandi, Shivaji Nagar and Bail bazaar stated that they have 50-50 ratio (KII).

*They have a relaxed attitude towards the patients. Earlier when I used to be a fruit seller, I had admitted myself in the X Y Z hospital as I was very sick. I was constantly vomiting and passing motion. I was admitted for three days, but they gave me only two bottles of saline and one tablet. So I thought, it's better to return back home rather than stay at the hospital. They give the same medicine for all kind of diseases (KII 35- Bhiwandi).*

## **5. Reproductive health problems faced by women**

Most of the participants complained of excessive white discharge, burning sensation while urinating, stomach ache, body/back ache, menstrual problems like irregular period and getting periods twice or thrice in a month. Some of them also mentioned other issues like swelling in the body, breathlessness and weakness (CP-FGD).

*Most of us don't suffer from any such problem, so we are not aware of anything (CP-FGD 3- Bail Bazar).*

*We usually suffer from back and stomach pain during our menses. We experience a burning sensation while passing urine (CP-FGD 6 – Shivaji Nagar)*

*Yes, we suffer from excessive white discharge (CP-FGD 8-Shivaji Nagar).*

*We have problems with our monthly period, 6 out of 8 months my periods are either delayed or late. I feel dizzy, weak and experience burning sensation along with leg pain. When I bleed heavily during my period, it makes me very weak. When I take Mala-D I get my period for only one day (CP-FGD 11-Malwani).*

*We have problems with our menstrual cycle.*

*I didn't get my period for 2 months, so I had taken medicine and treatment for this.*

*I at times, get my period twice or thrice in a month (CP-FGD 12-Malwani).*

*Most of them suffer from white discharge.*

*We suffer from excessive white discharge and pain after inserting Copper-T.*

*I suffer from back, leg and hand pain.*

*I have been experiencing pain during my periods. I have been getting irregular period since the past three months (CP-FGD 13-Bhiwandi).*

*Women suffer from back ache, burning sensation while urinating and stomach pain during period. Many of the women suffer from weakness, I too suffer from weakness. I some time get my periods twice in a month (CP-FGD 14-Bhiwandi).*

*White discharge, breathlessness due to walking, body and head ache'*

*Most of the problem is due to white discharge (CP-FGD 15-Bhiwandi).*

*Mostly white discharge, cough and stomachache.*

*We suffer from body and back ache, weakness, swelling in the body due to the unsafe drinking water (CP-FGD 16-Bhiwandi).*

Majority participants said that they suffer from white discharge and periods-related problem. Three fourth of the respondents from Shivaji Nagar mentioned of suffering from menstrual pain and white discharge. Whereas a few of them from Bail bazaar, Malwani, Bhiwandi mentioned of the same. More or less all the respondent from Bail bazaar, Shivaji Nagar, Malwani and Bhiwandi reported of weakness, back ache, urinary tract infection, cold, cough and fever (KII).

*Most of the women suffer from white discharge. Some of them get their periods twice in a month and some don't get their periods regularly. Other problems include burning sensation during urinating and infection in uterus (KII 31- Bhiwandi).*

Majority of the participants said that white discharge, back ache were the main reproductive problems faced by the women. Other complains included cervical cancer and problems due to lack of nourishment and weakness (SPP).

*They usually complain of white discharge and itching around genital area. Sometimes they also complain of irregular menstrual cycles. Whenever they complain to us about their reproductive problems, we tell them not to worry and consult a doctor. However most of the women don't share their reproductive health problem with us. Because they feel hesitant to talk to us about their internal problem, as it is very personal in nature. We tell them if they feel shy and don't discuss their problem with us freely. Then in future this could cause adverse effects on their health. We urge them to let go of their inhibitions and consult a doctor for whatever problem they're suffering from. We advocate prevention is better than cure.*

*There are two or three patients who suffered from cancer, so they were sent to X Hospital in Goregaon. Many gents suffer from cancer, in plot no 4 one man was suffering from throat cancer. They (men) get cancer due to bad habits like consumption of tobacco, gutka and alcohol. Children as young as 12-15 years old consume Goa (gutkha). These children in order to look stylish smoke beedis, cigarettes and chew gutka. Whenever we come across such young boys, we scold them and dissuade them from doing this any further. We educate them about the ill-effects of tobacco consumption. In Akashwani area there are many TB patients because they consume alcohol and tobacco (SPP- FGD 1- Malwani).*

*The usual problems like white discharge, menstrual problems, weakness, back and body ache. We tell these women to visit our Health Post for free of cost medicines and treatment. The doctor is available every Thursday to treat such problem. In case women refuse to visit the health post, we forcefully bring them to the health post. After some of them get good treatment, seeing them other women also turn up at the Health Post (SPP- FGD 2- Bail Bazar).*

*Most of the patients prefer going to private clinics for reproductive health problems, rather than visiting the Govt. Health Post (SPP- FGD 2- Bail Bazar).*

*They usually complain of white discharge and back ache (SPP- FGD 3- Shivaji Nagar).*

## **6. Place and treatment sought for reproductive health problems**

Majority of the participants said, that they visit private clinics to seek treatment for any gynecological problem. As there are more lady doctors in private clinics, the participants feel comfortable visiting them for their treatment. Since there are very few

lady doctors in municipality, the participants felt shy to disclose their health problems to the male doctors. Few participants also mentioned other reasons like inconvenient OPD timings and ineffective medicines given in hospitals as reasons for not visiting municipal hospitals for gynecological treatment (CP-FGD).

*The women would prefer to visit a lady doctor in private (CP-FGD 3-Bail Bazar).*

*There are no facilities available for women in Shivaji Nagar. Everyone has to either visit Sion or Shatabdi hospital or another bigger hospital for treatment (CP-FGD 5-Shivaji Nagar).*

*Most of the women don't go to the municipality as there are no lady doctors available, and they feel shy to discuss their problem with a male doctor. Therefore they visit private clinics, where there are lady doctors' available (CP-FGD 6-Shivaji Nagar).*

*We usually take medicines from private clinic (CP-FGD 7-Shivaji Nagar).*

*Most of them go to the private clinics (CP-FGD 8-Shivaji Nagar).*

*We usually go to the lady doctors from private clinic for our Gynae. Related problems. There are lady doctors in municipality, but we prefer going to private (CP-FGD 9-Malwani).*

*We prefer going to the private, as the doctors present in municipality are usually male and there are no lady doctors, which is why we are very hesitant and shy to talk to them about our problem. That is why we prefer visiting the lady doctors who practice in private hospitals.*

*We go to the local Health Post, where they give us some pills. At times, they also send us to Choksi hospital and Govind Nagar; they do our check up there. Sometimes they tell us, 'we don't have the medicines so come later (CP-FGD 11-Malwani).*

*We go to the private clinics as the timing in municipality is usually in the morning, which is inconvenient. And we are usually busy with our household work in the morning and we have to look after the children. That's why we prefer going to the private. There are no facilities available in municipality. In the morning we have to fill water in pots, prepare breakfast for*

*our children. In the municipality the doctors are available only during the morning time which is inconvenient for us. That is why we prefer visiting these small private clinics for treatment.*

*I suffer from hip ache problem and experience stomach pain during my periods. Then I visited the nearest municipality for treatment, they then gave me some medicines for this. They don't prescribe medicine according to the illness; they give us a common medicine to for every illness.*

*They also tell us if the medicine doesn't affect you, they will give some other medicine.*

*They constantly give us the same type of medicine, the white tablet. They tell us to consume this tablet and say that we will be fine.*

*Then I visited a private doctor for my MC problem, Dr x and Dr y. But they couldn't cure me of my problem. So finally neither did the private or municipality medicine cure me.*

*I too suffer from irregular period; I have missed two months out of the four months of my menstrual cycle. Then I too approached the same doctor for treatment, but it didn't benefit me in any.*

*I too suffer from severe pain during my period, along with white discharge, weakness and inability to do any household work. I get pain in my back, head and at times in my hand (CP-FGD 12).*

*We go to the private clinics for treatment. We don't go to government hospital as these facilities are not available in the hospital (CP-FGD 14-Bhiwandi).*

*For our white discharge problem we go to government hospital. When I was suffering from white discharge and MC problem, I had gone to the government hospital for the treatment. But their medicines were ineffective, so I finally took the treatment from a private clinic.*

*No one goes to the government now, as they don't give us good treatment and pay very little attention to us. Therefore we prefer going to the private clinics for out treatment (CP-FGD 15-Bhiwandi).*

*Most of the ladies suffer from white discharge and we don't get any medicine from the municipality. We also don't know the reason behind excessive white discharge. The doctors tell us that, white discharge is due to the weakness in our body.*

*I had once asked a private doctor, X bhai about my white discharge problem. He told me 'Beti, yeh kamzoori ke wajah se hota hain.' He then gave me some medicines which helped me.*

*I had taken treatment for my white discharge problem from a municipality in Baranpur and it was very helpful (CP-FGD 16-Bhiwandi).*

*In the local Health Post tests are conducted for white discharge (KII 11- Shivaji Nagar). They conduct test for cervical cancer in the Health Post (KII 4- Bail Bazar).*

## **7. Preference for visiting a private clinic for various health issues**

Majority of the participants gave the following reasons for not visiting a municipal hospital for their treatment:

- Ineffective medicines, purchase of bulk of medicines from outside, lack of facilities
- Time consuming process, long queues and over crowding in the hospital
- Inconvenient OPD timings as the women have to manage their household chores and look after the children in the morning.
- *Doctors are always unpunctual and inattentive while handling a patient*
- Misbehavior and mental harassment by the hospital staff

Majority of the participants said that the treatment given in a private clinic is very good, as the patient is provided with all the medicines along with proper care and attention (CP-FGD).

*There is nothing special offered. When we go, they examine our abdomen. They don't give us any medicines, except for some powdered dose. Once I had a bitter experience while taking treatment from the municipality. I started experiencing labour pain in the night, so when I went to the hospital. They told me, "Tumhey, itni der sey dard ho raha hain, ab kyun aaye ho, itni der ghar pe kya rahey the?" The doctor then said that my blood pressure is high and I need to do some blood test. My mother had to spend Rs 1000 on the blood test. They send my mother*

*at 2-3 am in the night to get these tests done. Whenever they wanted any medicine or any other requirement, they would tell us to buy it from outside. They did not provide anything from the hospital, even if they had it their stock. They lacked respect and courtesy while talking to us. They passed comments like, 'Private main Mohammedan log zyada hai. Aap kahin bhi private main jao, apke Mohammedan log hi hai. Appko wahan milenge naqab wale.*

*When the municipality staff doesn't take care of us, why should I go to the municipality? I will instead go to a private clinic, even though I may have to spend more money. I will get relief from my problem. I had taken infertility treatment for two years from them (municipality). But I still haven't been able to conceive. I spend a lot of money for the treatment and medicines. I had to take every report from outside. They scared me beforehand, 'that don't get admitted here' (CP-FGD 1-Bail Bazar)*

*Taking any treatment from the municipality is a very time consuming process. They take one whole day to do all the check-up and the report is given on another day. When we go to a private clinic, we have pay almost the same amount of money for our check up and get better services. Also the waiting period is less and so we save on time (CP-FGD 2-Bail Bazar).*

*Because they give us the same type of medicine for every problem and the treatment is ineffective. Two days ago I had taken my sick child to the Health Post, as he was suffering from loose motions since the past 10 days. But, the staff in the Health Post did not check him properly nor did they put him on saline drip. They gave us a long list of medicines that had to be purchased from outside, and told us to come the next day. Seeing this, I pawned a piece of my jewelry and got my child admitted in a private clinic. In the private clinic they admitted him immediately and put him on IV and started his medication (CP-FGD 3-Bail Bazar).*

*There are many reasons why we don't go to the municipality. They don't give us the right medical treatment; the hospitals are always over-crowded with people. So they don't pay enough attention to every patient. Lastly they don't give us medicine according to the date mentioned on the case paper.*

*Since the municipality lacks facilities, the doctors refer us to other hospitals. However on going to the other hospital, the condition remains unchanged in terms of treatment and care. Once I*

*was suffering from severe stomachache. So I decided to go to Shatabdi Hospital, but the doctor there told me to go to Hospital. On reaching there, the doctor there again told me to go to S hospital. When I reached S hospital, the doctor there after conducting my check-up said, there was nothing wrong with me, and that I am absolutely normal. I came back home, and later got my self admitted in Shatabdi Hospital. The doctor admitted me, but then warned me, that I will be responsible in case of any problem. These doctors made us run from one hospital to another.*

*The doctors in the hospital tell us to take the treatment at our own risk. The ayah bais in the hospital don't do their work properly. We have to pay them money for each and every work. For e.g. if someone pays the ayah Rs 20-30, then only they give attention and care towards the patient.*

*When the visiting hours are over they send us back home without meeting or giving us any medicines. We have to pay for the case paper and the staff misbehaves with us. They don't have any facility for Sonography. If a patient is rich then they visit private, or else out of choice we have to go to Rajawadi or Sion Hospital. They should provide some services in Shivaji Nagar, we wait in the line from 10 am to 12 noon, and the women have to leave their household chores to visit the hospital (CP-FGD 5-Shivaji Nagar).*

*The women are made to run from pillar to post for any test and examination in the municipality. After going to a municipality, we have to stand in the queue for medicines. After check-up they tell us to purchase medicines from outside, the doctors don't check us up properly. Even if the doctors are present in the hospital, the staff tells us that the doctor is not there. There are more male doctors in the municipality, so we feel shy to share our health problem with them. I was once suffering from throat-infection, so when I visited the municipality. They made me wait for 30 minutes, and after check-up the doctor prescribed me some costly medicines from the outside chemist. They always tell us to buy the medicines from the chemist. The doctors don't give us time and attention when we visit them. When we go to the hospital's pharmacy for medicine, they tell us that the stock is over. If we reach the hospital late, they don't hand us our case paper. We have to pay Rs 10 for the case paper, and then Rs 50 to buy the medicine, our entire day goes in a hospital. Therefore we think its better, to go in a private hospital and get good treatment in a short span of time. Sometimes due to the lack of*



*facilities in a municipality, they keep on transferring us to other hospitals, which causes delay in the treatment and results in the death of the patient. I had once visited the Shatabdi hospital for treatment and I was made to wait for 5 hours; despite this I was not treated (CP-FGD 6-Shivaji Nagar).*

*The municipal hospital is far away from our place (CP-FGD 7-Shivaji Nagar).*

*Because we are harassed in a municipality, we have to stand in long queues. In a municipality they tell us to buy the medicines from outside. The doctors are unpunctual in a municipality (CP-FGD 8-Shivaji Nagar).*

*We prefer going to the private hospitals as in municipality we are made to stand in long queues. After waiting for our turn they send us to ten different wards or misguide us. Then after doing the check up, they give us small doses of liquid medicines and shoo us away. Even after three days when we visit the hospital they give us the same old medicine.*

*In municipality they harass us a lot, when we go to seven number Health Post. They ask us many questions, bring this report, from where did you do this test? Now during emergency we go to private, but then later, when we go the municipality. They tell us, why did we go to the private hospital? Why have you come here now? They don't take prompt action when we go to municipality. If we have the good luck of meeting a good doctor, then it is ok. But if not, then they harass us a lot, that's why we prefer going to private. For children we prefer visiting private hospital, as the doctor comes early in the morning, therefore we can quickly go meet him and take the medicine. After all we women have to manage both our household chores as well as, meet the doctor. We all have small children at home, and we can't depend on our in-laws as they are old. So we have to juggle between our household work and the hospital (CP-FGD 9-Malwani).*

*The treatment is good in a private clinic. Also when we visit the municipality for treatment, they tell us to purchase medicines from outside. The municipality only stores medicines for cold and fever. So we feel it's better to take treatment from private and also save on our time (CP-FGD 10-Malwani).*

*Because the treatment is very bad in municipality, then you have to stand in a long queue since morning. Sometimes, when the medicine stock is finished in the hospital's pharmacy, they tell us to purchase it from outside.*

*Even pregnant ladies have to stand in line, sometimes when the time for taking the form gets over; we have to come the next day. Our children are left all alone at home.*

*The Bais in the hospital misbehave with us and speak roughly and use abusive language towards us. That's why most of us prefer going to private.*

*Whenever we got to the municipality, the doctors present there don't give us enough time. If we ask them any question or query, they don't pay enough attention to us or answer our query correctly. They hand us our case paper and then tell us to go the pharmacy to buy the medicines. Unlike private hospitals where, we are prescribed with tablets in a strip, in municipality they give us powdered doses of white medicine and liquid medicine, for which we have to get the bottle from our house. We are told to purchase the main medicines from the medical store outside, therefore we have stopped visiting the municipality.*

*We have to pay Rs 10 for the form, and then we have to stand in the long queue. By the time we get to meet the doctor, his consulting timings are over. They don't give us good medicine, or tonic or any iron tablets.*

*It is called a municipality just for namesake; we have to stand in a separate line for the form, another line for the medicine and another line for the check-up. We have to purchase most of the medicines from outside.*

*They don't give injections properly to the children; they at times inject them in the hand and at time in their leg. I had asked the doctor to give the injection to my child in the hand, but the doctor injected him in the leg (FGD 12-Malwani).*

*Because we get effective medicines from the private clinics and it is provided by them (CP-FGD 13-Bhiwandi).*

*They give contraceptives, Mala-D and condoms to women in municipality. Some of us prefer going to the private clinics, as we have to stand in long queues for two to three hours in a municipality. It's a very time consuming process, so we go to private clinics.*

*In private the doctors take good care of the patient. They give the right treatment and properly conduct the check-up (CP-FGD 14-Bhiwandi).*

*Most of us prefer going to private clinics, because they pay attention and give good treatment. (CP-FGD 15-Bhiwandi).*

*The ones who can't afford the costly treatment in private clinics prefer visiting the municipality. Those who can afford the private clinics go there.*

*When women go to municipality, the staff is very impatient and rude. Their medicines are ineffective. The staffs taunt us and tell us to go to private.*

*Whenever we tell them about our health problems, they prescribe us two or three medicines, which are given in small quantity.*

*We have to stand in separate queues for our turn to meet the doctors. When our turn comes, the doctors shoo us away by saying, "Jao hamara time khatam ho gaya. Yeh time hai kya aney ka?"*

*The doctors are available from 10-11 am in the morning and they leave by 12-12.30 pm. Now people, who're waiting last in the line, miss their opportunity to meet the doctors.*

*Sometimes the medicines are also out of stock in the hospital pharmacy. During delivery most of the items have to be brought by us, like injections for pain relief. They don't return the unused/excess injections to us, they keep it to themselves. Sometimes we bring 5 injections and they use 2 of them, the rest three are not given back to us.*

*We also have to buy sanitary napkins. They're very calculative about the number of sanitary napkins that are given to us. We have to give them a count of napkins that we have used in the*

*morning and in the evening. They pass remarks like, "Laga rahi hain kya, pad kha rahi kya?" (CP-FGD 16- Bhiwandi).*

Most of respondents said they visited the private clinics as there were lady doctors available in the clinics. Most of the women from Shivaji Nagar, Malwani and Bail bazaar said that private services have better check up and treatment services available and proper care and attention is given. Other complaints against the municipal hospital included mistreatment from the staff, none of the items being provided by the hospital and the misconception of polio drops causing infertility amongst children. Majority of the women from Malwani and few women from Shivaji Nagar said that Government hospitals provide good piece of information (KII).

*Because there are no lady doctors available in the hospital, therefore most of the women are hesitant to visit the municipal hospital. The women can't freely share their health problems with the male doctors. So there should be more lady doctors available in the hospital (KII 5-Bail Bazar).*

*We don't go to the municipal hospital as they give our children polio drops. Due to the polio drops our population will reduce, our children won't be able to produce any more kids. That's why we don't go to the municipal hospital (KII 33- Bhiwandi).*

*Most of the poor people go to the municipality. The doctors don't talk with the patients; the senior sister is also very impolite. The patient is already writhing in pain, and this misbehavior from the hospital staff adds the woes. They ill-treat new patients and women who have come from the village. They make us purchase most of the items from outside, like gloves, injections and medicines. That is why we prefer going to a private clinic, as the staff is well behaved. There are no queues and we get good medicines in a private clinic (KII 2- Bail Bazar).*

Three fourth of respondents from Shivaji Nagar, Malwani, Bhiwandi mentioned the distance of government hospital is between 5-15 mins. Few respondents from Shivaji Nagar said that some hospital are as far as half and hour.

*There are so many patients that it takes one-two hours for our chance to come. There are only one or two doctors on duty. If there are more doctors, then they can check the patient. Due to lack of doctors, the number of patients keeps increasing. Therefore we have to wait for our turn even if we are suffering from minor problems like cold, cough and fever (KII- 36 – Bhiwandi).*

*Yes, it takes us a long time to reach the hospital. After reaching the hospital we have to stand in the queue for 2 to 3 hours. They don't give us the right medicine; people get fed-up and therefore prefer visiting the private hospital. When they're injecting the DTP medicine, they are very reckless with the patient. Once the hospital staff carelessly injected my grand daughter, she later had a swollen leg and was running high fever. When I complained they didn't take any action, so then on I stopped giving polio drops to my granddaughter (KII- 37- Bhiwandi).*

#### **8. Services and facilities available in the Health Post**

The FGD participants said that the followings services are usually available in a Health Post/municipality:

- Medicines for cold, cough, fever, loose motions, TB and other common/minor health problems. Regular polio drops and vaccination to children.
- Availability of contraceptives like Mala-D, Copper-T and Nirodh.
- Calcium tablets and injections provided to pregnant women.
- HIV and TB test conducted.

Most the participants also said that when they visited the municipality, they had to purchase most of the important medicines from outside. The participants also said that, they are usually referred to municipal hospital for various tests like blood, urine and Sonography (CP-FGD).

*We have to purchase the medicines from outside. They give us very few medicines from the hospital's pharmacy. Only thing that we don't have to pay is the doctor's fee. You will only get pain relief tablets from the Health Post.*

*Yes, you also get calcium tablets. But they tell us to buy Iron tablets and tonic from outside, so what is the use?*

*Whenever we suffer from skin infections like boils, rashes or itching they mostly tell us to buy the medicines from outside (CP-FGD 1-Bail Bazar).*

*We get medicines for cold, cough, fever and loose motions from the Health Post in Bail Bazar. But we have to stand in a long queue for the medicines and for the case paper. They give us few medicines and tell us to purchase the other important medicines from the chemist shop. We then go to private, and in 15 rupees we not only get the medicines for cold, cough and fever but also end up saving our time. In the Health Post they also give us contraceptives like Mala-D and Copper-T. During check-up the doctors tell us that our hemoglobin is low and to do Sonography. For which we travel far to the Bhabha hospital (CP-FGD 2-Bail Bazar).*

*Most of us avoid going the Bail Bazar Health Post, as they don't care about the patient. They misbehave and harass us unnecessarily. They only give the polio drops on time, rest everything is useless. For injections they make you come again and again as they say, the stock is over (CP-FGD 3-Bail Bazar).*

*We get medicines for cold, cough, and fever. They also give vaccination to children, TT injection to pregnant women. They also conduct HIV and TB tests. They supply condoms, Mala-d and copper-t. They also give treatment for white discharge and dog bite. For blood, urine and sonography tests we go to the Kurla-Bhabha hospital. For Sonography we have to pay Rs 100 in the Bhabha Hospital. For our delivery we go Bhabha, Rajawadi and Muktabai hospital (CP-FGD 4-Bail Bazar).*

*In Deonar hospital they do blood test of pregnant women. Before conducting the blood test, they inform us about HIV (CP-FGD 8-Shivaji Nagar).*

*During pregnancy they conduct check up. They insert copper-T and also give medicines for cold, cough and fever.*

*When we have problem using the Copper-T and if we tell the sister to take it out. The Sister refuses to take out the Copper-T. They just keep postponing it, and tell us to adjust.*

*They tell us that the pain we are experiencing is nothing. It won't affect us in any which way. It's our wrong thinking (CP-FGD 13-Bhiwandi).*

*In municipality they usually give good medicines for HIV and TB. They give pay good attention to TB patients. They give contraceptives, Mala-D and condoms to women in municipality (CP-FGD 14-Bhiwandi).*

*We don't get complete treatment in our nearest Health Post. They give us some light medicines for common cold, cough and fever. Besides this they give injection and medicines to pregnant women and polio drops. They don't give any medicines to elderly people (CP-FGD 15-Bhiwandi).*

*The staff is good in Doosri Bawdi, they take good care of us and give effective medicines. They give calcium tablets to pregnant women and to women who suffer from excessive white discharge. They also give medicines for weakness and for TB.*

*During pregnancy the doosri bawdi Health Post give us injections and tablets to the woman. In Indira hospital they tell us to buy medicines from outside. I had once taken TB treatment for 9 months and after that I gave birth to a dead baby boy in the Indira hospital. After that I have never gone to Indira.*

*They give medicines for cold, fever, pain killers (CP-FGD 16-Bhiwandi).*

Most of the respondents from Bail bazaar, Malwani, Bhiwandi mentioned facilities like immunization i.e. polio, medicines for skin irritation, medication for T.B, registration for pregnancy, ANC check up, tablets for worms in the stomach, calcium tablets, iron tablets etc. On the other hand, most of the respondents from Bail Bazaar, Shivaji Nagar mentioned that they also get information on family planning, blood test and HIV test. Few women from Bail Bazaar reported that they do get medication for STIs. RTIs and for any venereal disease (KII).

*We get TB medicines from our nearest Health Post. They also come door to door to give polio drops. If we are unable to go to the Health Post for polio immunization, the health workers then visit our area (KII- 23- Malwani).*

*We insert Copper-T in the Health Post. We also give contraceptives like Mala-D and Nirodh to the woman. In case if they suffering from infertility, we refer them to Parel's Wadia Hospital for further treatment. Because the infertility treatment is cost-effective and good in Wadia Hospital.*

*We also explain them about the days when they ovulate and have a better chance to conceive. We have a separate room to insert Copper-T, during an insertion the doctor and an ANM is present to supervise the proceedings. We maintain privacy while inserting the Copper-T (SPP-FGD 2- Bail Bazar).*

## **9. Medical camps/services in the area**

There was a mix response from the participants for this question. Few participants said that there were health camps and mobile health unit in their area. Whereas some of the participants said that there were no health camps held in their area. Majority of the participants from all project areas said that there is no such trust working in these areas (CP-FGD).

*They organize camps in our locality for bar dancers, and only these women are allowed to go to these camps for treatment. They treat them for white discharge problem.*

*These camps are organized by the trust in this area.*

*These camps are exclusively organized for bar dancers we are not allowed to visit the camp.*

*This trust should also organize camps for women like us.*

*The camp is organized near the big masjid, and they have senior and experienced doctors visiting the camp.*

*Yes, women from all the religions are allowed to visit the camp, provided they are bar girls (CP-FGD 10-Malwani)*



*Yes, the mobile vans do come, but even there we have to pay them Rs 10 for the eye check up. For the injections we pay them between Rs 50-250. At times they don't do the eye-check up properly and give us the wrong eye power (CP-FGD 11-Malwani).*

*No there are no health camps organized.*

*Yes there is a camp organized on one of the roads, when they calls us they give us medicines which are close to the expiry date. Therefore they give us these medicines in large quantity.*

*They give us medicines for every problem. They give medicines for cold, cough, fever and body ache.*

*This camp is held once in two years (CP-FGD 13-Bhiwandi)*

*There are no camps held here.*

*They organize camps near the temple, but they tell us to first pay them money and then come for the check-up (CP-FGD 15-Bhiwandi).*

Most of the respondents from Malwani mentioned that there are certain camps that provide them with some health care facilities like Blood test, HIV test and at times RTI, STI test. However these medical camps are exclusively held for the bar girls. Whereas respondents from Bhiwandi mentioned they also get information on family planning, blood test and HIV test. They said that these camps are held every month and they are totally free of cost and they take proper benefit from such camps (KII).

*There is a private hospital in plot number six, were a 'hakim' (a doctor who give herbs and other traditional form of medicines) gives us medicine. Many people visit that hospital; they also give medicines for Venereal Disease and STD (KII 30- Malwani).*

*There are around 30-to 40 bar girls living in this area. Once in every month a health camp is set-up, in different locations of Malwani. These health camps are rganized for RTI/STI check-up. These health camps are rganized by a local trust. They have many doctors participating in this health camp. These camps are usually held in a local resident's house. During these camps the lady of the house goes door-to-door to call the bar girls to attend the camp. If any of*

*the women are detected with any kind of disease, they're provided with counselling. This camp is free for all bar girls and no money is charged. They give good guidance and counselling in this camp (KII 26- Malwani).*

*Most of the facilities are available for bar girls. There are doctors and lady doctors in this camp, they conduct blood test etc. If someone is suffering from AIDS, they are given the right medication and guidance. The doctors talk to the bar girls about necessity of practicing safe sex. The bar girls are given proper guidance and counselling about various disease (KII 23- Malwani).*

*They explain about HIV. They also provide us with condom and Mala-D. They give us medicines for cold, cough and fever. If someone suffers from white discharge they are referred to the Indira Gandhi Memorial hospital. If some is suffering from menstrual problem they're given the appropriate medicines (KII 32- Bhiwandi).*

*There is a camp organized by the government hospital in our area. We get medicines for cold, cough and fever in this camp. This camp is held once in every 15 days or once in a month. Many of us fully utilize the services available in this camp. We go door-to-door to inform everyone whenever this camp is held. The medicines are available for free of cost in this camp (KII 31- Bhiwandi).*

## **10. Health awareness programmes**

Majority of the participants said that they wanted health awareness programmes to be held in their area. As this will create awareness amongst the women and educate them about the various health problems (CP-FGD).

*This will be extremely beneficial for the women as they will be aware about the cause and the preventive measure, for any health problem.*

*There should be regular meetings conducted with all the women groups of this area, which will make them aware about such issues (CP-FGD 6- Shivaji Nagar).*

*Such camps will help us understand which hospital to approach in time of distress. (CP-FGD 10 -Malwani).*

*There will be no illness, we will come to know what the main problems are and in this way, we can help each other. If such awareness drives are organized, then we will be aware about the problems faced by others, because most of the times, people are shy to disclose their problems.*

*If any awareness campaign is held in our locality, then the medical officials can also direct us to the right hospital for the right treatment (CP-FGD 12-Malwani).*

*Yes it will be beneficial for all of us.*

*We will be aware about the health issues.*

*We will come to know about the facilities available.*

*We shall be aware about the diseases (CP-FGD 13-Bhiwandi).*

*We get to know about contraceptives from TV. But women, who don't have Television set at their home, can be informed about birth control measures through these camps. These camps will help them become aware.*

*We will become more aware and educated. We shall have an idea about how to reduce the likelihood of pregnancy and birth control (CP-FGD 15-Bhiwandi).*

*Yes, it will benefit us. We'll be more aware about general health. When we'll have fewer children, we shall be able to give them better education (CP-FGD 16-Bhiwandi).*

Few from Bail bazaar, and Malwani reported that there are no such health awareness programs held in the community. Very few respondents from Bail bazaar and Bhiwandi reported that women will get optimum benefit from such programs and also people in the community will get some information (KII).

## **11. Ante-natal care**

Majority of the participants said, that they visit the local Health Post or the nearest municipal hospital for their regular check up, ANC registration and injections. Only one group of participant said that those, who can't afford treatment from private clinics prefer going to the municipality (CP-FGD).

*The pregnant women go to Bhabha hospital, but the treatment is very expensive there. So, we go to private clinics and purchase medicines from outside (CP-FGD 2-Bail Bazar).*

*During pregnancy we get ourselves registered for an ANC check up in Bail Bazar Health Post (CP-FGD 4-Bail Bazar).*

*Most of the women go to the Deonar clinic and some also go to the Shatabdi Hospital. In Shivaji Nagar, there is no facility for pregnant women (CP-FGD 5-Shivaji Nagar).*

*They usually go to municipality; the nearest BMC hospital for us is Maulana Abdul Kalam Azad hospital. We also go to the local health post in number seven (CP-FGD 9-Malwani).*

*Most of the women prefer visiting the private clinics for their check-up. Only those, who can't afford the treatment from private clinics, prefer going to the municipality. Doctors from Maulana Abdul Kalam Azad hospital send first time mothers to Choksi or Bhagwati hospital.*

*Most of the women from our locality visit the private clinics, there are very few who go to the municipality (CP-FGD 10-Malwani).*

*They go to the Health Post in six number, where they give pills and injections to the expectant mother. They also register our name and then call us for check up on regular basis (CP-FGD 11-Malwani).*

*Yes, they regularly conduct check-up for pregnant women in the local Health Post (CP-FGD 13-Bhiwandi).*

*We also go to Rukumini Hospital to register our names and take treatment. During pregnancy we go to government, they register our name (CP-FGD 15-Bhiwandi).*

Three fourth of the respondents from Bhiwandi, Malwani and Bail bazaar reported of visiting government hospital for ante-natal check ups. Whereas most of the respondents from Shivaji Nagar reported visiting private hospitals (KII).

There was a mix response to this question; all of them said that they provide the basic TT injections, IFA tablets and immunization facility to pregnant women. Only one Health Post reported that they conduct detail tests and give guidance and counselling to pregnant women (SPP).

*No we don't provide any ANC facilities. We get so many patients who want to insert a Copper-T. But since we don't get water in this Health Post, we can't carry out any Copper-t insertions in this Health Post. Therefore we have to refer them to Health Post number seven. For the blood and urine tests the pregnant women are referred to Maulana hospital for such tests.*

*During ANC the pregnant women are only provided with tetanus injections, iron and calcium tablets (SPP- FGD 1- Malwani).*

*During ANC we give them TT injections and iron tablets. We tell them to take ample rest and eat nutritious food. We tell them to eat more green leafy vegetables, eggs and milk.*

*Besides this, we also hold OPD for pregnant women every Wednesday. Their weight and BP is checked, necessary tablets and pills are provided by us. We also counsel them about the benefits of a good diet and healthy eating habits. At times, we give advice based on the financial condition of the patient. So that they're able to afford healthy food and fruits and follow our advice.*

*During PNC, in case there has been a home delivery in our area. We give the child BCG and HBB shots. We also tell the mother to get the new born checked for weight and other problems. In case if a woman is unable to lactate, then we refer her to the doctor and give her medicines. We also provide psychological counselling to new mothers. We also regularly keep updating the list of woman who has delivered in our area, along with the ANC, PNC cases. We check their card to see if they have vaccinated their children and have taken the necessary medicines. We then total the number of such cases and submit it in a report by the end of each month.*

*We have to submit these report every month, we mention the number of Copper-T, TL, ORS and ANC/PNC cases in the area. Along with the number of Mala-d and Nirodh distributed in the area (SPP- FGD 2- Bail Bazar).*

*We give injections and immunization (SPP- FGD 3- Shivaji Nagar).*

## **12. Guidance and advice during ante-natal period**

Majority of the participants said, that they were given proper guidance and counselling on healthy diet, HIV/AIDS and cancer prevention and family planning. Few participants said that they did not receive any guidance or counselling from the hospital (CP-FGD).

*The doctors explain us everything very patiently like eating healthy and nutritious food and about birth-control pills (CP-FGD 2-Bail Bazar).*

*They give us an information sheet, which contains details about the treatment and preventive measure for Cancer (CP-FGD 3-Bail Bazar).*

*They educate us about HIV/AIDS.*

*They tell us if we produce more than two children, then we will be fined.*

*They tell us if we produce more than two children, then we won't be able raise them properly. You won't be able to feed all of them. If you have one or two children, you shall be able to take good care of them (CP-FGD 7-Shivaji Nagar).*

*Yes they do give us proper advice, they tell us to eat nutritious food like milk, fish, meat, eggs, and vegetables. The doctors, nurses present there tell us about the different exercise that a pregnant lady can do (CP-FGD 9-Malwani).*

*They don't provide us with any guidance or counselling regarding this. They only do the basic check-up and then tell us to purchase the medicines from the chemist (CP-FGD 10-Malwani).*

*No they don't give us any advice; they just give us some TT injections.*

*We're given guidance and counselling in private hospitals. They tell us to eat nutritious food. (CP-FGD 15-Bhiwandi).*

*No, they give us such information. When we visit them, they talk to us in a very loud manner, which scares us.*

*When we complain to them about our health problems. They pass lewd comments on us. They tell us, "Soney acha laga tha, yahan ea key sabar nahin kar saktey. Zara si takleef hoti hai to chila ne lagtey hain. Jao private main" (CP-FGD 16-Bhiwandi).*

Yes, they do provide guidance and counselling. They give advice on how the mother and the child should be healthy and fit. The health workers also visit our locality to check who is pregnant and who is not. They do a survey on this (KII 21- Malwani).

### **13. Care provided by family members during pregnancy**

Majority of the participants gave a positive response for this question. The participants said that the husband and in-laws would take care and co-operate during pregnancy. Few participants said their husband would get irritated and misbehave with them (CP-FGD).

*They are concerned and take care of us, they tell us to go for regular checkup (CP-FGD 1-Bail Bazar).*

*They tell us to take medicines from private clinics, in this way they co-operate with us (CP-FGD 2-Bail Bazar).*

*My husband and mother-in-law take good care of me.*

*All my family members take care of me; they tell me to take rest.*

*My family members help me in household chores.*

*Our husbands help us in household chores and take us to the doctor when we're ill (CP-FGD 4 – Bail Bazar)*

*Yes, our family members and husbands do take care of us (CP-FGD 5-Shivaji Nagar).*

*When a woman falls sick it is a big problem in the family. The family members don't consider her problem in any which way, we have to continue doing our daily house work in the same state of illness. When there is no child in the family our husbands do take care of us, but once after we have produced children they don't care about us anymore.*

*My husband physically and mentally abuses us. Today morning since I wasn't feeling too well I told my husband, but he instead of being kind and caring towards me. Verbally abused and slapped me and told me to do the household chores. My mother-in-law and sister-in-law also don't allow me to go to the hospital. They harass me a lot and give me mental tension.*

*My mother-in-law is good, she understands by nature. My husband adjusts according to the situation, when I fall sick he orders food from outside and manages (CP-FGD 6-Shivaji Nagar).*

*They look after us.*

*They cook food, go to the market and look after the children.*

*Our families take good care of us (CP-FGD 7-Shivaji Nagar).*

*When I was pregnant, I did all the household work for three months. After that I went to my maternal home.*

*When I was pregnant, my husband would wash the pots used for storing drinking water. He would also set the bed and help me in other household chores (CP-FGD 8-Shivaji Nagar).*

*My husband is very supportive, whenever I fall ill. He gets me all the medicine and besides this he also gets me food, fruits and juice to drink.*

*My husband and in-laws take good care of me.*

*Yes, our husband accompany us to the doctor whenever we fall sick.*

*Yes, my husband does help me in some household work whenever I fall sick. He fills water in the pots, sweeps the floor, prepares breakfast for me and tidies our bed.*



*Whenever I fall sick, my husband inquires whether I have eaten or not? And my in-laws prepared food for me during those days (CP-FGD 9-Malwani).*

*My husband takes good care of me when I fall sick.*

*When I fall sick, my husband tells me not to worry about cooking, and that they will manage by eating an egg.*

*My husband does all the household chores and also washes the dirty dishes.*

*My husband brings me medicines (CP-FGD 10-Malwani).*

*Husband does take care of us, but at times they also get slightly irritated. They cook food, fill water and also tell us to take rest until we are fit enough to work. Some of the men also carry their sick wife to the hospital and nurse her to good health (CP-FGD 11-Malwani).*

*Yes, they look after each other.*

*The husbands support their wives.*

*The husband accompanies his wife to the doctor.*

*The mother-in-law also takes care of her daughter-in-law (CP-FGD 13-Bhiwandi).*

*Yes our family members and husband take good care of us.*

*My husband is very supportive; he cooks food during my illness.*

*My mother-in-law is also very helpful. Though she suffers from poor vision she helps me in cooking (CP-FGD 14-Bhiwandi).*

*Our mother in law helps us in the household chores.*

*My husband helps me, he accompanies me to the hospital and also cooks food and does the house work.*

*They help me in my household work*

*My family members accompany me to the hospital (CP-FGD 15-Bhiwandi).*

*Obviously, if the lady of the house falls sick. Everybody in the house is worried about her and gets affected somehow.*

*If one member of the family falls sick, everyone is affected by it. They get worried and tensed. Sometimes our husband or in-laws take us to hospital.*

*We cannot prepare food or cook when we're sick. The children then help us.*

*My husband and children help me during my sickness by preparing food.*

*My husband is very helpful; when I had delivered my baby. He did not allow me to touch water for 2 months. He would prepare food, feed me and clean the utensils. I have no tension that way. He managed the household chores.*

*My in-laws help me in all the household chores (CP-FGD 16-Bhiwandi).*

Majority of the participants said that the men did not take care or take time off for their wives. Three fourth of the respondents from Malwani, Bhiwandi, Bail Bazaar and Shivaji Nagar said that the husband and the older child looks after the women. Few women from Shivaji Nagar and Malwani stated that the family takes the women to the doctor as a precautionary measure to avoid any further medical complication. Whereas few from Bhiwandi stated that nobody took care of them (KII).

*This depends from 'mohalla to mohalla' (area to area). If the woman belongs from a poor family, then there is a lack of care and attention towards her. But if she has the money and resources then the family does take care and provides her with all medicines (KII 33-Bhiwandi).*

*The family members don't take care, the men are alcoholic and don't go to work. No cares about the woman (KII 5- Bail Bazar).*

*The husband doesn't care, but the family members do take care about the woman (KII 7-Bail Bazar).*

*Most of the men are unable to give time to their wives, due to work. But the family members and neighbours accompany the woman to the medical centre (KII 10-Bail Bazar).*

All the participants said that the men never accompany their wives to the Health Post. The woman is usually accompanied by her neighbour or any other family member (SPP).

*No the husbands never accompanies their wives. They usually come alone to the Health Post (SPP- FGD 1- Malwani).*

*No, the men never accompany their wives. The woman is usually accompanied by their mother-in-law, female friend or neighbour. We have mostly seen that the neighbour usually accompanies the pregnant woman to the health post. We have rarely seen men coming along with their wives. However the current generation of Muslim men, do accompany their wives during check up and meet the doctor.*

*However we do tell the woman, to get her husband along whenever she comes for a check up. As this will help the husband understand her health problems and he can also contribute and take good care towards her betterment (SPP- FGD 2- Bail Bazar).*

*No the men never accompany their wives, when they visit the Health Post. The women usually come along with their neighbours or mother-in-law (SPP- FGD 3- Shivaji Nagar).*

#### **14. Facilities available for women during pregnancy in the Health Post.**

Majority of the participants said they give pills and TT injections, iron and IFA tablets, regular blood, urine and HIV tests along with conducting physical examination of the abdomen (CP-FGD).

*They give us two injections, one in the seventh month and the other in the eight-month of pregnancy. They also give tetanus injection (CP-FGD 1-Bail Bazar).*

*During pregnancy they give us the necessary injections. They also provide us with medicines for TB, dog-bite and conduct the BCG test (CP-FGD 2-Bail Bazar).*

*During pregnancy we get ourselves registered for an ANC check up in Bail Bazar Health Post. There we are given two TT injections and IFA tablets (CP-FGD 4-Bail Bazar).*

*They examine the abdomen to see if the baby is moving inside the womb. They also prescribe us Iron tablets.*

*They give TT injection during the 7<sup>th</sup> and 8<sup>th</sup> month of pregnancy (CP-FGD 5-Shivaji Nagar).*

*They do blood and urine test, give tetanus injection. We have to pay five rupees for the injection needle. We have to buy the calcium tablets from outside. They conduct HIV test during pregnancy check-up (CP-FGD 7- Malwani).*

*We get medicines for cold, cough and TB. When a woman is pregnant they give injection, they also give Nirodh and Mala-D. They do blood and urine tests. They give vaccination to the children (CP-FGD 8-Malwani).*

*We get medicines, tetanus injection and general check up. They check for blood pressure, physical examination of the stomach, blood test and urine test. They also do blood test for HIV. In the first few check ups they conduct the routine blood, urine test (CP-FGD 9-Malwani).*

*They do check-up of pregnant women, they take blood, BP and urine test. And conduct physical examination of the abdomen of the expectant mother (CP-FGD10-Malwani).*

*They go to the Health Post in six number, were they give pills and injections to the expectant mother. They also register our name and then call us for check up on regular basis (CP-FGD 11-Malwani).*

*We only go there during pregnancy and for ANC check up. They conduct physical examination of the abdomen. They first do the blood test, then take us inside a room and conduct physical examination of the abdomen and lastly give us an injection (CP-FGD 16-Bhiwandi).*

Three fourth of the respondents from Shivaji Nagar and Malwani mentioned of receiving immunization. Few from Shivaji Nagar and Bhiwandi stated that they do receive iron and calcium tablets. Whereas few from Bhiwandi mentioned of doing blood and urine test, and on the other hand few from Malwani mentioned of getting information on diet and nutritious food through posters. Most of the women from

Malwani reported that they get breakfast and lunch at the hospital and good attention and care is given. Where as few from Bhiwandi also mentioned that the medical staff was well-behaved and provided information on mother and child care. Rs 600/- is given after delivery (after first or second child) (KII).

*The pregnant women are checked for their weight, physical examination of the abdomen and HIV test. They also give tetanus injection and prescribed medicines from outside (KII 25- Malwani).*

*I decided not to register myself in a municipal hospital and chose to go in a private clinic. But, when I registered myself in the private clinic I was told that I will have to undergo a C-Section, after hearing this I shifted to a municipal hospital, Aziz Glass in Jogeshwari and had a normal delivery (KII 22- Malwani).*

### **Services and facilities available during delivery in a municipal hospital**

Most of the women from Bail Bazaar, Shivaji Nagar said that they don't give proper care and treatment. Whereas few from Bail bazaar, Malwani, Bhiwandi reported that they tell us to bring most of the things from outside, they don't give pain killer injection, health check-up are not appropriately done, proper treatment and guidance is not given, they use foul language. The respondents said that they have to pay Rs 200 and if it's the third child then they fine them (KII).

*There are no services during delivery in a municipal hospital. They don't provide us with any pain killers and tell us to bear the pain. We even have to purchase castor oil from outside (KII 24- Malwani).*

*They tell us to purchase all the items required during a delivery from outside. They don't even provide us with the injection for a quick labour (KII 34- Bhiwandi).*

*My daughter-in-law delivered her child in Kurla's Bhabha hospital. We rushed her to the hospital at 3 am in the night. She was in severe labour pain, so we took her to the emergency ward. I wanted them to take my daughter-in-law inside the labour ward, so I kept calling the sister and ayah bai. But none of them responded as they were fast asleep. Due to the excruciating pain, my daughter-in-law was unable to climb the stairs, and therefore she*

*delivered her child there and then. After the childbirth they cut the umbilical cord and then told me, “aapki aulad hai, ap hi usey tray main dalo. Mainey bachey ko utha key tray main dala” (KII 3- Bail Bazar).*

There were only two responses to this questions, again the responses was varied from one Health Post to the other. The Bail Bazar Health Post staff said they only have the facility of early registration and immunization. The Shivaji Nagar Health Post provided other facilities like advice and guidance on food and healthy diet for expectant mothers, along with various ANC test (SPP).

*We only have early registration and immunization facilities in this Health Post. For blood tests, sonography and other tests, we refer them to Kurla-Bhabha or Rajawadi Hospital. Those who can afford tests in private clinics, go there. However most of them prefer to go to private clinics. There are no delivery services available in the Health Post (SPP- FGD 2- Bail Bazar).*

*We provide counselling for family planning in the Health Post along with HIV test. We carry out various tests during pregnancy, to ascertain the condition of the foetus. During family planning we maintain complete privacy. We also provide advice and guidance on food and health diet for expectant mothers (SPP- FGD 3- Shivaji Nagar).*

## **15. Place of delivery**

**Majority of the participants said that they go to the various municipal hospitals in and around their area during delivery (CP-FGD).**

*Most of the women go to the Bhabha hospital for their delivery (CP-FGD 4-Bail Bazar).*

*They usually go to Deonar hospital, the Shivaji Nagar Health Post does not have the required facilities for a delivery. They don't take good care in Deonar Hospital (CP-FGD 5-Shivaji Nagar).*

*Some women go to Deonar hospital and some go to Rajawadi hospital (CP-FGD 8-Shivaji Nagar).*

*They usually go to a municipality, the nearest BMC hospital for us is Maulana Abdul Kalam Azad hospital. We also go to the Malad-based Choksi hospital for delivery (CP-FGD 9-Malwani).*

*The ones who are rich and can afford better treatment go to the private clinics, and the ones who are poor go to the municipality (CP-FGD 10-Malwani).*

*We have heard that the, Health Post in number 6 doesn't allow first time deliveries, as they say they don't have the required facilities. So they send us to Choksi hospital; the Health Post only does delivery of women who are expecting their second or third child (CP-FGD 11-Malwani).*

*Many of them go to municipality or the nearest medical centre or to Choksi (CP-FGD 12-Malwani).*

*Most of us go to Indira Gandhi Memorial hospital for our delivery (CP-FGD 16-Bhiwandi).*

Majority of the women from Malwani, Bhiwandi, Bail bazaar and Shivaji Nagar go to the Government hospital. Whereas few from Shivaji Nagar also visit private hospital **(KII).**

Majority of the participants said that the women preferred visiting the municipal hospital for their delivery (SPP).

*Most of the women go to Mualana Azad hospital and Choksi hospital. It's a BMC hospital. It's walking distance from here (SPP- FGD 1- Malwani).*

*Most of them got to Bhabha and Rajawadi hospital. At times, the patients are also referred to KEM, Sion or Sarvodaya hospital. There also number of private nursing homes operating in this area.*

*But we urge them to deliver in municipal hospital as the cost of delivery and charges would be less as compared to a private set up (SPP- FGD 2- Bail Bazar).*

*Most of the women go to Shatabdi and Deonar hospital (SPP- FGD 3- Shivaji Nagar).*

## **16. Home delivery**

Majority of the participants from Bhiwandi said that home deliveries do take place in their area. The reason cited for home delivery was misbehavior with pregnant women in municipality (CP-FGD).

*Yes, earlier there used to be home deliveries in this locality. But now since there are hospitals nearby, most of deliveries happen in the hospital. There has been a home delivery in the adjoining plot (CP-FGD 9-Malwani).*

*Yes, most of the home deliveries take place here, as we are unable to reach the hospital on time. Therefore many deliveries take place on the way to the hospital (CP-FGD 11-Malwani).*

*Yes, home deliveries take place in your locality.*

*70% of deliveries take place at home.*

*30% of the deliveries take place in a municipality. Most of the Hindu women deliver in the hospital, whereas the Muslim women prefer home delivery.*

*The delivery facilities are bad in a municipality, plus they hit the pregnant women. So instead of spending money in a municipality, its better to spend the same amount of money on a home delivery and on a Dai (CP-FGD 13- Bhiwandi).*

*Yes, home deliveries do take place here.*

*I and my neighbour have delivered at home. Both my children were born at home.*

*No, most of the women deliver in the hospital. Only the two of us delivered at home because we were scared about delivering in the hospital. We had heard that they beat women at the hospital. They don't take proper care while delivering the child, so we chose to deliver our baby at home (CP-FGD 14-Bhiwandi).*

*No, everyone goes to the hospital for their delivery.*

*Previously there have been two or three home deliveries, but not now (CP-FGD 15-Bhiwandi)*



*Yes, home deliveries do take place here (CP-FGD 16-Bhiwandi)*

Majority of the women from Malwani said it's not prevalent anymore. Majority of the women from Shivaji Nagar and Bhiwandi said that home delivery still takes place since the staff in government hospital screams, abuses and uses foul language and doesn't treat them well. Few said that poverty is also a reason for home delivery **(KII)**.

*Yes, home deliveries do take place. As we are helpless, we have to pay Rs 300-500 in Indira Gandhi Hospital for delivery. They don't conduct a delivery without money. Money is very important for us; we can use this Rs. 300-500 for our daily needs. So that is why we give childbirth at home (KII 32- Bhiwandi).*

*Earlier many women used to delivery at home. But since the time the delivery facilities have been made available in private clinics, the women prefer going there. There are no delivery facilities available in the local Health Post. In Bhabha hospital the staff is ill-mannered, they abuse us when we're taken to the delivery room. If a female patient is lying on the stretcher writhing in labour pain. The sister and ayah bai, pass lewd comments like, 'Pati ke saath sotey waqt dard nahin hua. Abh kyun chila rahey ho?' (KII 9 – Shivaji Nagar).*

Majority of the women from Shivaji Nagar and Bhiwandi stated that Home delivery still takes place because mostly in the government hospital the staff screams, abuses and uses foul language, doesn't treat them well and few said that poverty is also a reason for home delivery **(KII)**.

*In a municipal hospital the doctor and sisters, scream at us if we have more than two children. When have to pay a fine if we have more than two children. That's why we prefer to pay money to the Dai and do the delivery at home. The dai also gives massage post delivery for 8 days (KII 33- Bhiwandi).*

*Most of the people in Bhiwandi are very poor. They have meager salary, some people don't even have Rs 10 with them. The people can't afford to go the hospital for treatment Therefore they prefer home deliveries. The other reason being, the misbehavior meted towards the patient from the staff of Indira Gandhi Hospital (KII 32- Bhiwandi).*

Majority of the participants said that home deliveries do take place in their area. But the rate of home delivery is very few (SPP).

*Yes, home deliveries take place in Akashwani area. Out of 100 women, at least two women delivery at home. The women prefer home delivery as it is money saving and they can produce multiple children. This area is full of Muslims and migrants from UP and Bihar. No matter how much we tell them to register themselves in a hospital, but they still prefer home delivery. Since this way they can avoid paying the hospital charges and sterilization post delivery. When we ask them why did you delivery at home, they tell us various excuses like, 'Ghar pe koi nahin tha, rickshaw main hogaya, achanak hogaya, ghar main ho gaya' (SPP- FGD 1- Malwani).*

*Yes, home deliveries do take place in our area. Two to three home deliveries take place in a year. (SPP- FGD 2- Bail Bazar).*

*Yes, home deliveries do take place in this area, but they happen occasionally (SPP- FGD 3- Shivaji Nagar).*

Most of the participants said, that there has never been any mortality due to home delivery.

*The doctor who is present during the delivery gives them TT injection and attends to their problem. So far there has been no mortality due to home delivery. Many times when the pregnant women is not admitted in the hospital, on her way back home she delivers in a rickshaw or at her home (SPP- FGD 1- Malwani).*

*No, so far there has been no mortality case reported. However when we come across home delivery cases we ask them about the doctor, the 'Dai' who delivered the child. We take full details about the people involved in the delivery, only after verifying the details. We issue them a birth certificate (SPP- FGD 2- Bail Bazar).*

### **Medicines availability**

Majority of the participants said that medicines like IFA tablets, calcium tablets and contraceptives were available in the health post (SPP).

*Mala-D, Vitamin-C tablets, FS tablets, Nirodh, Iron-Folic Acid tablets. Tablets for adolescents, ORS, chlorine tablets. Most of the medicines are available in the Health Post (SPP- FGD 1- Malwani).*

*Yes, we give them medicines like Ciplox, Metrogyl, Dodoxcin. These medicines are given to women who suffer from excessive white discharge, back ache etc (SPP- FGD 2- Bail Bazar).*

*We give them IFS tablets to pregnant women during ANC and PNC. We tell them to purchase Calcium tablets from other shops (SPP- FGD 2- Bail Bazar).*

*Yes, we give TB medicines (SPP- FGD 3- Shivaji Nagar).*

### **17. Trained Dai / Mid-wives**

Majority of the participants said that there was a Dai in their area who lacked formal training. The dai had gained knowledge through practice and several years of experience. Few participants also mentioned that the Dai would call a private doctor in case of a difficult childbirth (CP-FGD).

*No she has no formal training, but is an experienced dai (CP-FGD 7-Shivaji Nagar).*

*Yes, there is a Dai our area, she does home delivery and post delivery also does massage (mallish) to the child. She is not a qualified Dai, but she has been practicing since many years so she knows the technique (CP-FGD 9-Malwani).*

*There are no trained Dai in our area, but there is a woman who knows how to deliver a child, as she has the knowledge and experience. (CP-FGD 11-Malwani)*

*Yes there is a Dai in our area. Since she is very knowledgeable and literate. So she knows everything.*

*If we do a home delivery then we have to pay the Dai at least Rs 1500.*

*The Dai ma brings along the delivery kit with her.*

*Sometimes the Dai ma injects pain killer and at times we call a private doctor in such a case. If the Dai ma is untrained and doesn't know how to inject, then a doctor is called.*

*In case if a patient becomes serious during her delivery, then the dai refuses to take any responsibility. She tells us, "Ab mere bas ki baat nahin hai."*

*The dai first conducts a thorough check-up of the patient. If she feels that the delivery will be normal and without complication, only then she proceeds ahead (CP-FGD 13-Bhiwandi).*

*Yes there is a Dai in our area.*

*She is not a trained Dai. She has gathered experience over the years. However during a serious case or any medical complication, she calls a private doctor to assist her in the delivery.*

*The dai doesn't carry any surgical tools with her, we have to get them (CP-FGD 14-Bhiwandi).*

*Yes, there is a Dai in our area.*

*Her name is Hamila, she stays near the temple.*

*No, she doesn't have any training.*

*She is a 'Khandani' dai. She learned this skill from her mother-in-law, who also used to deliver children (CP-FGD 15-Bhiwandi).*

*There is a 'Dai' in our area, she works in a private clinic in the day and does home delivery in the evening.*

*The dai charges between Rs 1,500-2,000 per delivery, depending from case to case (CP-FGD 16-Bhiwandi).*

Majority of the respondent from Shivaji Nagar and Bhiwandi said that there are dai maa in the community and respondent from Bhiwandi mentioned that these Dia maas were well trained. Whereas rest from Bail bazaar, Shivaji Nagar were not very sure whether these dai maa are trained (KII).

## **18. Demand for money/baksheesh by the hospital staff after delivery**

Out of the 14 FGDs conducted, participants from 4 different FGDs said that they had to fulfill the monetary demand made by the hospital staff. Some of the participants said that they were forced to give baksheesh when a son is born. However this was not applicable if it is a girl child. Other responses include force and threat from the staff, refusal to handover the case papers (CP-FGD).

*After my child was born our relatives were denied to see the child until we paid them baksheesh. They told my relatives, "First give us baksheesh only then we will allow you to see the baby's face." They told us to not give them just Rs 100, since there were total 6 to 7 of them. They demanded Rs 600-700, so that they can share the money amongst themselves. Earlier in Bhagwati Hospital, after any delivery, they would give us money, food and a bed sheet. But, now they have completely stopped giving any such thing.*

*Each and every ayah bai demands money, they tell it is their right to ask money. And if we refuse to pay money then they will not hand over our file to us.*

*When we refuse to pay them money, they get irritated and fight with us (CP-FGD 10-Malwani).*

*Yes, they do make monetary demands. We give them whatever little we can afford, despite this, sometimes they ask for a higher amount (CP-FGD 11-Malwani).*

*After we give birth to a third or a fourth child, the staff demands Rs 500. If we refuse to pay them that amount, then they threaten us that they will operate us and tie our fallopian tubes to stop anymore child birth.*

*The nurses speak to us in a very harsh manner and after child birth, demand money, and if we refuse to give them money, then they say, you have given birth to a boy, so you have to give us money. The ayah's also demand money and tell us to give money willingly. We are already tensed due to the child birth and despite this, we have to fulfill these demands. Since we are poor and cannot afford costly treatment, we go to municipality, but we have to meet such unreasonable demands here (CP-FGD 12-Malwani).*

*Yes, they do demand money from us. The ayah who cleans the ward demands money from us. We have to pay small amount of money to everyone. We also have to pay money to the doctor after the delivery. However the doctor accepts whatever we give him, they're not as demanding as the sister and the nurse. We give them money and 'Bakshees' according to our financial status.*

*They say since you have given birth to a son, give us money. "Mithai ka dabba lao, sari aur kapdey do."*

*They don't make so many demands if a girl child is born (CP-FGD 13-Bhiwandi).*

*When we got to a hospital, they ask us if we have registered our name. They yell and talk to us. If we tell them that we know a local party worker, then they don't misbehave with us. When the delivery is done, they tell us to out put Rs 200 in a box. The madam in the hospital tells us, to put Rs 200 if it's a girl and Rs 400 if it's a boy in the box (KII 31- Bhiwandi).*

## **19. Contraceptives used by the women**

All the participants are aware about the various contraceptives available in the Health Post (CP-FGD).

*We know about sterilization for men and women to stop any further child-birth (CP-FGD 2-Bail Bazar).*

*Yes, we do know about condoms, Mala-D and Copper-T and sterilization (CP-FGD 3-Bail Bazar).*

*We use Copper-T, Mala D and take injections.*

*Contraceptives used by the men (CP-FGD 5-Shivaji Nagar).*

*We know about birth-control pills like 'Choice' and Copper-T. We also use condoms. However during intercourse, the condoms break, that's why we have stopped using them. Choice doesn't suit everyone; it makes some of us sick (CP-FGD 6-Shivaji Nagar).*

*Most of the women are aware about family panning. They use various measures for family planning. We get Mala-d, Nirodh and copper-T from the Health Post (CP-FGD 7-Shivaji Nagar).*

*We get contraceptives like birth control pills and condoms from health workers who visit us at home from the seven number Health Post. They also advice us to use Copper-T, but most of us are uncomfortable with it. So we use pills and condoms. Copper-T facility is available at the seven number local Health Post and at the Maulana Azad hospital (CP-FGD 9-Malwani).*

*We get Mala-d and Nirodh from the six number Health Post. If we want to use Copper-T, the health workers from six number Health Post refer us to the seven number Health Post. There are doctors in the seven number Health Post, whereas there are no doctors in the six number Health Post, therefore we have to go to the 7 number post for any problem. They also give treatment to children below 5 years in the 7 number Health Post.*

*We get Copper-T, Mala-D and condoms, they visit our locality to distribute Mala-D and also provide us with Copper-T. But we are very scared to use Copper-T, so we avoid it. When we visit the municipality they provide us with condoms on asking (CP-FGD 10-Malwani).*

*We know that there are contraceptive available like Mala-d, Nirodh, I-pill, Unwanted 72 and copper-T, which helps in birth control. Women who don't wish to have any more children can also opt for sterilization.*

*I was told by my friend and my sister-in-law, that they use birth control pills as contraceptives. After that, I removed my Copper-T and have started using these pills (CP-FGD 11-Malwani).*

*Yes, we are aware about the contraceptives and the availability of Mala D, condoms. 72 hours medicine (I-pill), shown on TV helps birth control and unwanted child birth. We prefer using the birth control pills.*

*I had got my Copper-T inserted from private clinic.*

*We know about birth control pills, but we avoid using it regularly (CP-FGD 12-Malwani).*

*Yes contraceptives are available in our Health Post.*

*Yes, we get condoms but I have never used them (CP-FGD 13-Bhiwandi).*

*They give us condoms, Mala-D and injections to prevent pregnancy. They are given for free (CP-FGD 14-Bhiwandi).*

All the respondents from Bail Bazaar, Shivaji Nagar, Malwani, and Bhiwandi are well aware about Family Planning. Mostly respondent from Shivaji Nagar get information through the medium of television and Government hospitals. And few of them from Bail bazaar get information only through Government hospital. Majority of the women from Shivaji Nagar take optimum use of family planning methods. Whereas few respondents from Bhiwandi and Malwani reported use of contraceptive methods (KII).

Majority of the participants said that most of the women do use contraceptives like Copper-T and Mala-D. However there still remains a certain amount of resistance towards sterilization and other family planning methods from women (SPP).

*Yes, they do enquire about contraceptives and family planning. We also provide them with Mala D. We tell them to maintain a gap of few years between two children by using contraceptives. The women are more aware about Mala-D and Copper-T. We also educate them about Tubectomy. The men usually use condom, but they don't agree for vasectomy. Most of the Muslim men have 6 to 7 children they don't want to undergo vasectomy. They give reasons like Islam forbids sterilization, no one will accept us in our community and no one will attend my funeral. These people who belong from UP, Bihar and Banaras are hostile towards sterilization. The Muslim women say if we get sterilized then no one will marry our daughters. Most of the men don't support their wives, even if they ready to undergo any sterilization. The women fear that their husband will disown them if they get sterilized. Many women take oral pills from us but they hide it from their husband and then consume it. Many a times the woman is ready to take contraceptives, but due to family pressure they are left helpless. Sometimes the women also say, if the husband undergoes a vasectomy he will become weak, he won't be able to work or lift any heavy objects during work. The women tell us, 'Bachey Allah*



*ke den hai, tumko kya problem hai. Bacho ko humein palna hai. Humko operation nahin arma hai (SPP- FGD 1- Malwani).*

*Yes, Muslim woman do use contraceptives like Mala-D and condoms. In recent times due to inflation and high cost of living, these women have started realizing the importance of a small family and limited children. They regularly use Mala-D and condom, but they're averse to sterilization.*

*The women now listen to our advice and pay heed to us. But earlier when we had newly recruited we have faced hostility from both Muslim and Hindu women (SPP- FGD 2- Bail Bazar).*

### **What is the commonly used family planning method?**

Commonly used contraceptives are Copper-T, Nirodh and Mala-D.

*Condom and Mala-D. For Copper-T we have to refer the patients to Health Post number 7 (Malwani) as we don't have water facility in our Health Post. Many a times the female patients change their mind about inserting a Copper-T, as Health Post number 7 is far away from this area. Therefore they have to travel that distance and therefore they lose the motivation to insert it. They want the Copper-T facility to be started in this Health Post number 6. The women also demand for lady doctors. Most of the women say, 'Ladies doctor hoga toh hum ayengay copper-T laganey, gents hoga toh nahin aayege'. They feel shy as their religion forbids any other man besides their husband to touch a Muslim woman (SPP- FGD 1- Malwani).*

*They use condom, 'Choice' and other birth control pills. If we tell them to take Mala-D from us, they refuse. As they say that they suffer from stomachache and other forms of side effects after consuming it. They consume pills from private clinics.*

*Muslim men also ask for contraceptives. We also visit the area regularly to distribute contraceptives. Plus when they visit the Health Post they also ask us for contraceptives. Besides women the men also ask for Nirodh (SPP- FGD 2- Bail Bazar).*

*Copper-T, Nirodh and Mala-D. People from the Muslim community don't agree for sterilization. They usually prefer using Copper-T, Malad-D and condoms (SPP- FGD 3-Shivaji Nagar).*

## **20. Health problems due to the use of contraceptives**

Majority of the participants said, that they had side-effects after using contraceptive pills and Copper-T. Most of them complained of excessive white discharge, dizziness, weakness, body ache and heavy bleeding. Few of the participants also said that, the doctors should tell them about the side-effects of using contraceptives, and advice them accordingly (CP-FGD).

*I had inserted my copper-t from the Health Post in Bail bazaar and I was experiencing a lot of problems. Like excessive white discharge, heavy bleeding during period, so I had to remove the copper-T (CP-FGD 3-Bail Bazar).*

*I had Copper-T, but my uterus was swollen due to it. So I got my Copper-T removed.*

*I used to take 'Choice', but it was not suiting me and I used to fall sick, I used to feel dizzy and weak. So the doctor then told me to stop using the birth-control pill and instead suggested me to use the Copper-T. When I started using the copper-T, I used to get stomachache; as they did not insert the Copper-t correctly. My period used to be delayed, and I was tired of taking treatment for this. I got my period after 6 months and then sometime later, I was pregnant.*

*I had inserted my Copper-T in a municipality and I'm happy with its result. Copper-T works for some women and for some it does not. I used to experience headache after taking birth-control pills. I told the doctor about my headache, so he told me to stop consuming the birth-control pills, as it may adversely affect my uterus (CP-FGD 6-Shivaji Nagar).*

*Yes, I had side effects after taking 'Choice' birth control pills. I used to run high fever, and I lost weight. Since then I have stopped consuming Choice.*

*Yes, my sister-in-law used to get fever and dizziness after she started using Mala-D.*

*I got my copper-T removed, after it reached my chest. I used to bleed heavily, so I visited the doctor and got my Copper-T removed and then later I underwent sterilization (CP-FGD 10-Malwani).*

*Yes, there was a lot of white discharge and because of which I became very weak and lost weight. It was just 2 or 3 months, since I had inserted the Copper-T but that made me very weak. Later, when I got them removed in a private clinic, my doctor told me, that the Copper-t inserted was rusted, due to which I was experiencing the problems (CP-FGD 11-Malwani).*

*I had inserted my Copper-T from the municipality, but I had too many problems with it. My MC was irregular after I started using the Copper T, I told the doctor regarding this problem and he gave me some medicines to be purchased from the medical shop. I used these medicines for more than two months on a regular basis. After a year, I removed my Copper-T, but my problem is still going on.*

*I too had started experiencing severe back and hip ache, after I started using Copper-T (CP-FGD 12-Malwani).*

*Yes, after I began using Copper-T, I started experiencing excessive white discharge and there were some marks in my uterus. Due to this I contracted tuberculosis. The doctor told me due to excessive white discharge I became weak, and therefore I contacted tuberculosis.*

*Whenever I take Mala-D, I feel dizzy and get back ache.*

*They should advice various birth control measures according to what suits the person.*

*They should not give medicines which create heat in the body.*

*First they should check the women and accordingly advice for Copper-t, condom or oral pills (CP-FGD 13-Bhiwandi).*

*No they don't come forward and provide us with any such information on family planning in municipality. Only if we ask them about family planning, then they bother to tell us.*

*On asking them, they tell us to use Copper-T, Mala-D and then they give us male contraceptives like condoms. They don't talk in detail about family planning or birth-control.*

*They don't guide us properly about Copper-T. Two or three months ago I had used Copper-t, but it didn't suit me at all. I was sick for 15-20 days. I was bleeding heavily and passing motions. I felt good after removing the Copper-T. I had inserted the Copper-T in Indira hospital. They didn't bother to explain me the reason behind my sickness, when I told them to remove the C-T they removed it without questioning me.*

*They don't bother to explain the reason why Copper-T does not suit everyone.*

*I used to take Choice birth control pills, but the pills didn't suit me. I used to wake up with severe body ache, swelling and heavy bleeding.*

*They don't inform us about the side-effects due to birth-control pills and Copper-T (CP-FGD 16-Bhiwandi).*

Most of the respondents from Bhiwandi reported that they have heavy bleeding during their menstruation. Whereas few from Malwani mentioned of white discharge, physical weakness, and irregular periods. Complains include severe stomachache and swelling in body parts. Majority of the women from Shivaji Nagar and Bhiwandi reported that, there should be proper medical check-ups, suitable medication as per individual requirement, and regular check-ups should be available (KII).

*I underwent sterilization in a Delhi hospital. I later started experiencing severe stomachache, but I ignored it. When the pain became unbearable, I visited the doctor who told me that since I did not take ample rest after the operation. Both of my fallopian tubes have been infected and I will have to undergo an operation to remove them. I later admitted myself in a private hospital and got my fallopian tubes removed, since then I haven't faced any problem (KI 30- Malwani).*

*There are many problems due to Copper-T. Some women are unable to cope with the side-effects related to Copper-T. Sometimes the Copper-t moves from its original position and we don't know about it. Sometimes women get pregnant despite using a Copper-T. After using*

*Mala-d, some develop swelling in the body. Usually there is a certain amount of side-effects after using contraceptives (KII 12- Shivaji Nagar).*

*We visit the private clinics to avail birth control measures like Copper-T, Mala-d etc. As I had once seen a woman, who wanted to remove her Copper-T from the municipality. But she suffered many problems and was harassed by the staff. That's why people fear that the Copper-T will reach the chest and will cause their death (KII 11- Shivaji Nagar).*

*I want that the doctors should first check the lady and then prescribe here the right contraceptive. As many women suffer from various side-effects after using contraceptives, it doesn't suit everyone. If a woman is weak, then they should recommend her the appropriate birth control tool that will suit her (KII 12- Shivaji Nagar).*

Majority of the participants said that they receive complains like heavy bleeding, stomach pain, body ache and weakness after using contraceptives (SPP).

*Some of the men complain of itchiness after using condoms. The women also suffer from various side effects after consuming Mala-D, like stomach pain, weakness, dizziness. Some of them prefer purchasing pills like 'Choice' from outside. Before we give them Mala-D, we verify with them whether they're suffering from high BP, weakness or are they breast feeding. If they give a positive response for any of these problems, then we don't give them Mala-D. In such cases we educate the women about the safest period to have sex and not to conceive. While using Copper-T, many women suffer from excessive bleeding which scares them and therefore many of them remove it. But then we advise them some medicines. Some of the women also tell us that the Copper-T has moved from its original position to their chest, they also complain of stomachache, body ache and swelling.*

*Some of the women also tell us that use injectable contraceptives, but we are not aware of these. But we have not heard about these injectables. Most of these women use these injectables from private clinic (SPP- FGD 1- Malwani).*

*Sometimes few women suffer from side-effects after using Copper-T. Like body ache, weakness etc...they get frustrated. At time there have been cases, were the woman has conceived despite using a Copper-T or after TL operation.*

*We counsel women when they come for Copper-T or family planning. As many of them are hesitant or scared to use any contraceptives. Due to certain pre-conceived notions and misconceptions in their mind. We tell them the benefits of using Copper-T and other birth control measures.*

*We do receive complains for Copper-T and Mala-d. Like heavy menstruation, body ache, weakness, white discharge. When they complain to us, we tell them to visit our Health Post and meet the doctor (SPP- FGD 2- Bail Bazar).*

*Those who use Copper-T complain of heavy bleeding, other complains include white discharge (SPP- FGD 3- Shivaji Nagar).*

### **Family planning awareness programmes**

Majority of the participants gave a positive response to this question. They said that they organize monthly health talk and family panning programmes in various areas of the community (SPP).

*We conduct IEC activities in the area. We gather a group of woman and organize health talk for them. We motivate them about health issues. These health talks are held 8 times in a month (PHN) (SPP- FGD 1- Malwani).*

*Yes, we organize health talk with the women in various area, 8 times in a month. We explain them by using flip charts, diagrams etc. We talk about general health, family planning and contraceptives. Around 40-45 women usually attend such camps. These camps are usually attended by CHVs, Doctor, MPW, PHN and ANMs. Along with any local group leader or Anganwadi worker.*

*At times we also receive request to organize such health talks from the women living in the locality. But usually they want these health talks to be organised in the evening or on a*

*Sunday. So that their husband and other men can also participate in such health camps and be aware (SPP- FGD 2- Bail Bazar).*

*Yes, we do organize family planning and health awareness programmes in the area. We conduct 8 sessions in a month in the community on different topics. We show them short films etc. The CHVs provide information regarding Nirodh, Copper-T and Mala-D (SPP- FGD 3- Shivaji Nagar).*

### **Awareness amongst women about family planning methods**

There was a mix response to this question. Some of the participants said that the current generation of young Muslim women are aware about family planning and actively ask for contraceptives and pills from the CHVs. But there still remain a percentage of Muslim women who are against the idea of family or undergoing sterilization (SPP).

*The current generation of Muslim women are aware about family planning. They willing visit the Health Post to insert Copper-T. However they are usually very secretive about this, as they don't want their family members or the mother-in-law to know about the contraceptive being used. The younger women also ask for Mala-d and Condom. They also request us not to inform their mother-in-law about them using contraceptives. As the older generation, doesn't allow them to use any family planning tools. The younger Muslim women know it's better to have a small family. Only few young Muslim women believe in multiple children and no family planning. When we visit their home to give them condom, the young Muslim women tell us, "Hamrey ghar pe maat aoa, hamri saas ghar pe hogi na tab maat ao." We sometimes have to conceal the contraceptive and give them. Sometimes we leave the contraceptives at the neighbour's house, so that the woman can collect it later. Or we suggest them, whenever they come to drop their children to school, they can quickly visit the Health Post and collect the contraceptives. Even college students take contraceptives from us (SPP- FGD 1- Malwani).*

*We get 50-50 responses from the Muslim women. Sometimes the mother-in-laws are co-operatives and broad minded. So they follow our advice of family planning. But at times they*

*refuse to listen to us. For example, yesterday we met a Muslim woman who had three children, she was well-educated, with a graduate degree. But when we told her to undergo sterilization, she refused and told us, "Mere saas ne bol hai operation nahin karneka. Mera aadmi kamata hain naa, main sambal leygi." First time mothers are usually unaware about family panning methods. So we have to educate them about this. Oriya women are totally clueless about family planning.*

*Once I met a woman who had 6 children, so I told her to go for sterilization. On hearing this, her husband came out angry and started abusing us. He said, "Bachey hamrey hain, hum paltey hai tumko kya." He told us don't ever visit us again. The older generations of Muslim women don't plan family at all (SPP- FGD 2- Bail Bazar).*

*Migrants from UP & Bihar have no awareness and knowledge about family planning. They're also very hostile to contraceptives (SPP- FGD 3- Shivaji Nagar).*

## **21. Source of information for contraceptives**

The participants gave two main responses for this question. They said TV commercials/newspaper and information provided by the health workers and hospital staff were the main source of information (CP-FGD).

*We get the information about contraceptives from TV. As they show ads of birth-control pills, like Unwanted 72, Mala-D and condoms. Earlier some health-workers would also visit our place and distribute birth-control pills, and condoms. When we visit the hospital, the doctors tell us to use Copper-T (CP-FGD 6-Shivaji Nagar).*

*No they don't tell us anything from the hospital. In my maternal home, a lady had visited us from the hospital, she informed me about Copper-T (CP-FGD 8--Shivaji Nagar).*

*We usually get this information from the lady health workers in municipality.*

*No there are no such camps held for us. We get this information only when we visit the municipality (CP-FGD 10-Malwani).*



*Earlier when we used to visit the municipal Health Post in seven number, they would educate us about family planning and the benefits of contraceptives. We also learn a lot from the advertisement shown on TV about Mala-D, unwanted 72 and Nirodh (CP-FGD 11-Malwani).*

*Our main source of information is the Television and at times we are also provided with information from the hospital staff.*

*When we are pregnant and visit the hospital, that time they inform us about various birth control measures like, Copper T, Mala-D and condoms. Nobody conducts any counselling or personal meeting with us regarding these issue (CP-FGD 12-Malwani).*

*I have read about condoms and birth control pills in newspaper.*

*We have also seen ads in the TV about condoms, OP and Copper (CP-FGD 15-Bhiwandi).*

*I came to know about Copper-T from Indira Gandhi hospital.*

*We get to know about condoms and pills through TV. Also through other women who use contraceptives. Most of us prefer using birth-control pills (CP-FGD 16-Bhiwandi).*

Majority of the participants said that primary source of information was through CHVs and information broadcasted on TV (SPP).

*We CHVs visit the area and inform the women about family planning methods and contraceptives. We inform women about the various contraceptives that can be used post-delivery. If the woman is ready to use a Copper-T, we accompany her to the Health Post number 7. We also give them Mala-D. Besides us, the women also get information from TV and other media. When the women visit the Health Post, for polio injections we inform them about contraceptives and family planning (SPP-FGD 1- Malwani).*

*Their primary source of information is through us, when we visit the area to distribute contraceptives. We inform them about Copper-T, Mala-d and Nirodh. We tell if you have one child, use contraceptives. They also learn a lot from the ads and information shown on TV (SPP- FGD 2- Bail Bazar).*

*They learn a lot from the ANMs and other Health Post staff. We organize health talk every month. Besides this they also get to know about family planning and other methods from TV (SPP- FGD 3- Shivaji Nagar).*

### **Women's attitude during family planning**

Most of the participants said that the Muslim women were more receptive when a Muslim CHV would approach them on issues of family planning and population control. Issues like illiteracy, poverty, religion and lack of awareness are some factors that influence women's attitude towards family planning.

*We have one Muslim CHV. This Muslim CHV has brought two vasectomy patients (PHN). I showed them the charts and diagrams about how the surgery will be conducted. I try clearing all their misunderstanding and fear related to vasectomy. Most of the time the men are scared that post-surgery, they won't be able to lead a normal life. Or it might affect their work. We also tell the male patient that they will be given money if they agree to undergo the sterilization. At times when we succeed in convincing the man to undergo sterilization, the wife intervenes and scolds him and us for advising the husband for sterilization. The wife tells us that she would rather undergo sterilization than send her husband for any surgery. The reason behind this is, there have been certain cases of medical negligence where the woman was pregnant despite the man been sterilized. This leads to the man being suspicious over his wife and makes him think that his wife has been committing adultery. Therefore to avoid such unwanted situations the women prefer undergoing sterilization rather than send their husband (SPP- FGD 1- Malwani).*

*They're usually least interested in listening to our talk. Most of them are scared about facing ire from the husband. Though some of them may be interested in family planning, but due to lack of support from the family and due to illiteracy they don't take any initiative. However there are few Muslim women, who willingly come forward to enquire about family planning and the other measures available. But most of the Muslim women just listen to us and then care to follow it (SPP- FGD 2- Bail Bazar).*

*The women tell us not to inform or tell the families whenever they use contraceptives, as their religion forbids them. The women usually prefer Mala-D and Copper-T (SPP- FGD 3- Shivaji Nagar).*

## **22. Community support provided during health crisis**

Majority of the participants said, that they help each other during any health crisis. They offer moral support, and help each other by cooking, take the sick person to the hospital and at times by providing financial help (CP-FGD).

*We always help our neighbours and community members, no matter how busy we are in our work. We always try to accompany them to the doctor and give them moral support (CP-FGD 6-Shivaji Nagar).*

*The neighbours look after and take care. if a woman doesn't have anyone to support her during her health crisis (CP-FGD 7-Shivaji Nagar).*

*Whenever we fall sick, even if it is in the middle of the night, our neighbors are very helpful and are always there to lend a helping hand. They take us to the hospital and if we don't receive the right treatment, they are always ready to accompany us to any other hospital (CP-FGD 11-Malwani).*

*Yes, we do take care of each other. If someone amongst us falls sick, we take that person to the hospital for treatment and get them the necessary medication. We are always there for any help.*

*I have a neighbor who is very poor, once when she was running high fever. She was in a terrible shape, she couldn't stand. That's when I helped her and took her to the local Health Post in number 5 for treatment and medicines. She was so weak from illness that they had to give her saline for four to five days. Meanwhile all of us took good care of her and looked after her until she was fully fit (CP-FGD 12-Malwani).*

*If someone is poor we help them financially (CP-FGD 13-Bhiwandi).*

*Yes, we help each other. We take the sick person to the hospital. We cook food and wash clothes for them. If the sick person is short of money, we also give them financial help.*

*We take care of their children (CP-FGD 15-Bhiwandi).*

*We help each other by taking her to the doctor.*

*If the sick woman is unable to cook food, we help her by preparing food for her family (CP-FGD 16-Bhiwandi).*

Majority of the participants said that the relatives are usually co-operative with the health staff.

*Yes, they do listen to us. They're co-operative (SPP- FGD 1- Malwani).*

*Yes, they are co-operative (SPP- FGD 2- Bail Bazar).*

*The patients are very impatient and rude when they visit the Health Post. They all want quick service. The patients create ruckus and disorder if they have to wait in the queue for their turn to come (SPP- FGD 3- Shivaji Nagar).*

### **23. Behaviour of the staff in a Govt. hospital with the patients**

Majority of the participants said that the ayah and sisters are the most abusive and misbehaved people in the hospital. They pass derogatory remarks and use foul language while talking to the patient. Most of the participants also complained of lack of attention, medical negligence during treatment and unavailability of the doctor during childbirth. Only few participants mentioned about good behaviour from the medical staff (CP-FGD).

*They are very rude with us and don't talk politely. They use foul language with the female patients and there is a lack of cleanliness in the premises (CP-FGD 2-Bail Bazar).*

*In a municipality, the ayahs misbehave with us. The doctors are very careless in their work; they don't give enough attention while checking a patient. Sometimes in a municipality the doctors, ayahs and nurses are not available in time of an emergency. This leads to mental*

*tension and we feel it's better to spend more money and visit a private clinic for treatment (CP-FGD 4-Bail Bazar).*

*The sister yells at us, "Burkha pehan ke nahin aney ka. Burkha nikalar key aney ka.*

*They took my case paper and flung it away. They said, "Pehle bachey ka certificate lekar ao".*

*During delivery the Sister comes only when the baby is about to emerge out of the vagina. During the physical examination, they tell us to hurry and untie our drawstrings. I once saw a woman lying on the stretcher after giving her childbirth. She was bleeding heavily, so the Sister came and inserted her hand inside the woman's vagina, to clean the wound. The woman started screaming in pain, hearing this, the Sister said, "Mard ke paas gayee toh nahin chilayee, ab kyun chila rahin hai."*

*The ward boys and ayabais send forward their acquaintances and friends before us. BMC workers are given good treatment. During physical examination the doctor inserts his finger in the vagina, which is very painful.*

*The doctor is available in the hospital only during an emergency.*

*Once a village woman had come to the hospital, and she wasn't able to tell her own name. So they told her, "Kis jaat ki hai? Dedh ki hai ya chamar ki." If it's the first child they don't hesitate make an incision on the vagina, for the child to come out easily. Once a woman delivered her child while passing her stool in the toilet (CP-FGD 7-Shivaji Nagar).*

*They ill-treat us, abuse and pass derogatory remarks against us.*

*When pregnant women go for their check-up in the hospital, the doctor is very rough during the physical examination.*

*In the hospital the sister and ayah shout and talk to us.*

*They scream at us when we go to collect our case paper or medicine. They don't check us properly.*

*In Deonar hospital when we go for our delivery, the sister and ayah bai don't pay attention and instead yell at us (CP-FGD 8--Shivaji Nagar).*

*You know how they behave with us? They keep screaming and shouting at us. They keep ordering us to sit properly, and when we complain they say, you people will never listen to us if we talk properly with you.*

*The staff of Aziz Glass are well behaved with us.*

*In Mohd Aziz Glass they make the entire preparation for an operation, we don't have to get anything. They also give us food, milk and lunch.*

*No, in Aziz Glass we have to get some of the items from outside like Dettol, medicine, threads for stitching the wound. They only perform the operation in the hospital. Like my mother had to remove her uterus, so they did the operation very well, and also looked and took care of her. But, I had to buy many of the items from outside like medicines etc. Aziz Glass also refers patients to Cooper and KEM hospital depending on the case (CP-FGD 9-Malwani).*

*The ayah's and mausi keep shouting at us and don't instruct us properly. They use abusive language against us. They don't guide us about which queue to stand in or which counter to go for our tests.*

*They misbehave with us and speak very rudely. The ayah's in particular are very bad with us, post delivery when a woman is bleeding, and if her blood stains the floor. The ayah's pass remarks like, 'You Muslims can only produce multiple kids, now you clean the floor'. They make the pregnant women walk down the corridor.*

*When I was in my seventh month of pregnancy, I started bleeding profusely at my place. I was taken to the Bhagwati Hospital, where I delivered a baby girl. When I delivered the baby she was alive, however due to the negligence of the doctor my baby died. If they would have kept her under observation in an incubator, she would have been alive. When we told them to shift the baby to the incubator, they said that they don't have this facility. My child was kept on oxygen and she was breathing, however that night around 1 am she passed away and I was not informed about it. The hospital staff instead accused me that since it was a baby girl; I must*

*have done something and killed her. They treated me so inhumanely. We leave our home early in the morning but they take so much time, that we end up coming back only by evening.*

*When we go to the municipality for delivery, the staff shouts and passes rude remarks on us. They tell us, 'You people produce so many children like dogs, you all are so dirty and also make the hospital premises dirt (CP-FGD 10-Malwani).*

*They talk very roughly to us.*

*During labour pain, they tell us to lie on the bed and bear the pain. They hit us on our leg and thighs and pass lewd comments like, "Delivery ke waqt rotey ho aur aadmi ke saath sotey waqt rotey nahin ho. Khudsey dard lo, aur khud se delivery karney ki khoshish karo." They attend to the female patient only when the newborn is about to come out of the cervix.*

*If the delivery is getting delayed and if the baby's head is not visible, they don't hesitate in using a blade to make a long incision. They don't try too hard to make the delivery as normal as possible.*

*They tell us, "Aadmi ke saath main soney ko mazza ata hai, bacha nikal neke waqt rona ata hai?"*

*The doctors don't misbehave or speak in such a foul language; it's usually the sisters and the ayahs who misbehave with us.*

*During delivery the doctor is never present, the delivery is usually supervised and conducted by the sister and the nurse. Since the doctor is never present during any delivery, we have no idea about their behaviour. The sisters are always scolding and screaming at us, whereas the ayahs are always passing lewd comments.*

*When we visit the hospital, the staff doesn't talk to us properly. They keep on talking in Marathi and tell us, "Chala baher nigha" (CP-FGD 14-Bhiwandi).*

*They scold us, when my sister-in-law had visited the hospital during delivery. She was screaming in pain, but they hit her. The sisters misbehave with us and pass derogatory remarks. They don't pay any attention to the patient. They're very negligent.*

*They constantly keep scolding us, they don't talk to us politely.*

*No, sometimes they talk properly with us.*

*When we collect our form, they keep on shouting at us. In government. the doctors tell us that they don't have any time for us (CP-FGD 15-Bhiwandi).*

*When we go to Indira, they hit us a lot. Poor people go to government., but they charge Rs 1000/- per delivery if a boy is born. If you pay them money, then they take good care. But people, who can not afford to pay money, are abused and assaulted and their children are neglected by the hospital staff.*

*I lost my unborn baby in government. Whenever I would go to the hospital, they would postpone my delivery and tell me, "There is time for you to deliver the child." The night sister is good, but the day sister never checked me. My baby died inside my womb (CP-FGD 16-Bhiwandi).*

Around three fourth of the respondents from Bail bazaar, Malwani, Shivaji Nagar, and Bhiwandi reported that the medical staff is rude with them. Only few reported from Shivaji Nagar and Bhiwandi that if a local area corporator accompanied them to the hospital. Then the government staff would talk properly with them. Few from Shivaji Nagar and Malwani reported that incase if a patient has any relative/family/friend working in the government hospital. Then they show their identification card or use their influence to easily sneak in the queue and get their work done much faster. Most of the women from Bhiwandi and Malwani said that the Medical staff ill treats them. Few from Bail Bazaar and Bhiwandi said that the medical staff doesn't understand the severity of the case and takes it very lightly (KII).

*Most of them are okay in their behavior, but they're usually tensed and annoyed. The reason for their frustration is excessive people and few staff members to control the crowd. That is why most of the staff members are irritated (KII 5- Bail Bazar).*



*The number of times I have visited the hospital, I have never felt that the staff is rude. The staff is well-behaved, they visit our home after every 15 days to enquire about the health of our children. They treat everyone with respect (KII 6- Bail Bazar).*

*Yes, I was subjected to numerous such incidents. When I had successfully finished delivering my child I was left in the same naked condition. I was not taken care or cleaned. Post delivery, when my vaginal opening had to be stitched, they send a student doctor to do that, who sewed my wound in a wrong manner. When the senior doctor came to see me, she pointed out the mistake to that student doctor and therefore the faulty stitches had to be taken out again and I had to be re-sewn. I had to endure this painful ordeal all over again because of wrong treatment. Post-delivery I was not in the position to walk since I was weak from delivery, when I could hear my baby cry. I wanted to feed the baby, but they didn't hand over the baby to me. Later when they shifted the baby to a different floor, they made me climb stairs in order to reach the baby. I was in a bad state as I was constantly feeling dizzy. But the aya bai and ward boys were of no help. They stood like mute spectators witnessing my struggle to climb the stairs. They passed so many snide remarks like, "Tu peheli aurat nahin hai bacha paida karne ko. Acting kar rahi hai kya. Apney shohar ke saath maaza karney maaza aya tha na?" Finally with the help of my husband and my mother I climbed the stairs and reached my baby. The treatment and behaviour in a private hospital is so different, in a private hospital post delivery the woman is taken in a wheel chair or stretcher and then shifted in the recovery room. But here in municipal hospital, they just don't care (KII 22- Malwani).*

*We talk with the staff in Marathi language then they behave with properly. But when they see a Muslim or a North India bhaiya, they speak rudely (KII 23- Malwani).*

*The doctors and sister working in the local Health Post are well-behaved. If we talk politely with them, then they too will be courteous with us. If we talk rudely to them, then it's but natural that they will also be impolite with us. But when we go to the governmental hospital, the staff and doctors are ill-mannered; they scream and scold us (KII 34- Bhiwandi).*

*It so happened that I considered a lady as my sister and had send my daughter in her house to work and at the same time educate her in Urdu. But that lady and her husband assaulted my*

daughter with a cable wire, which resulted in a deep wound on her back. They admitted her to Wadia Hospital without my knowledge. I'm a widow, I have no one to support me and I have another older daughter who is eighteen years old. I don't have a husband or a son who will earn money for us. So my source of livelihood is by taking care of others children and doing some moti work. So I left my elder daughter in-charge of my younger daughter in the hospital. As I was busy, trying hard to meet few acquaintances for financial help for the treatment of my daughter in Mumbai. On seeing my elder daughter in the hospital, the sister asked her about my whereabouts. My daughter told her about my effort to get money. So the sister replied back saying, "Tumahari mummy kitney dinno sey madat mang rahi hain, ki nahin mil raha. Tumhara ammi ko bulao, warna tumhe chutti dengey?" So my daughter told her to discharge us, as we were unable to make the payment that time. This irked the Sister-In-Charge and she started scolding my daughter. The Sister-In-Charge later complained to a senior madam, and they came and scolded us again. I kept quiet, as I thought maybe it was our mistake. After that incident, once it became very late for my elder daughter to return home. So we both mother and daughter slept under the cot of my younger daughter in the ward. When the senior madam saw us...she slapped my elder daughter. My intention was to leave my elder daughter with my younger daughter in the ward and sleep outside in the passage. But, by the time I could leave the ward, the Sister-In-Charge saw us...and without any hesitation she slapped my daughter. I then told the Sister-in-charge, "agar main bahar nahin jati, toh tumhey marney ka haq tha." But the Sister behaved very rudely with us and said, 'we are doing natak'. My younger daughter was due for an operation there, but I took discharge from the hospital, as I was aghast by the mistreatment. I had gone there to take treatment not to be beaten and humiliated by the hospital staff (KII 35- Bhiwandi).

The ayah and mausi do misbehave, but then the public visiting the hospital are also careless. The public should also realize that they are being responsible for their actions and behaviour. If the staff is not strict with the patients, then the patients will harass them and will create chaos. The doctors are usually well behaved, but they too get tired after attending so many patients. They have to interact with so many people from various walks of life. While meeting the doctor many female patients tend to stand in close proximity of the doctor. So then the doctor has to tell them to stand at a distance (KII 36- Bhiwandi).

The respondents complained of misbehavior and medical negligence from the medical staff. There was a mix response on this question; some respondents said that the medical staff in the hospital is usually well-behaved. The staff tends to be under pressure due to the lack of man power and more patients, so slight irritation from their side is expected. Few respondents said that they have experienced misbehavior and snide remarks from the medical staff of a municipal hospital (KII).

Three fourth of the respondents from Shivaji Nagar area also reported that they have to wait in a long queue, doctors don't do the check-up/investigations properly, medications have to be brought from outside, due to the presence of male doctors they feel shy to undergo any kind of physical examination, and most of the time is consumed. Few of the respondents from Bail bazaar and Malwani reported that the doctors are careless (KII).

*I heard this particular case in Bhagwati hospital. Which involved a woman who was 6 months pregnant; her baby was not growing inside her womb. Her blood pressure had shot up, but the doctors did not inform her about her BP. And neither did they tell her about any preventive measures and the correct diet. That she needs to follow, in order to get her BP back to normal. So due to her high blood pressure, her baby had stopped growing inside her womb...and the baby weighed less than one kg. When the baby was born, they had to put the baby in the incubator and the infant was in a bad state (KII 22- Malwani).*

All the participants said that they don't discriminate between Hindu and Muslim patients.

*No, we don't differentiate. We can't misbehave or get irritated with them, as we have to finally work for them. However the Muslim women do complain to us about the misbehavior they face on visiting government hospital during delivery. Sometimes due to the misbehavior from the Govt. health staff towards Muslim women, we have to face the ire of these women when we visit the area. As they think we are from the Govt. hospital and they take out their frustration on us. We also feel that whenever we refer or suggest a patient to visit a government hospital, for further treatment. The staff shouldn't misbehave with the patient, as this de-motivates the*

*patient from visiting the municipal hospital in the near future and our efforts are wasted (SPP- FGD 1- Malwani).*

*No, we don't discriminate with Muslim patients.*

*When we go to the area, we can't afford to discriminate between a Muslim, Bhaiya or Oriya. We see them is same light. We have to be very courteous with them and explain each and every thing very politely. Whether they listen or not, we always try to do our best (SPP- FGD 2- Bail Bazar).*

#### **24. Attitude of staff in the Health Post towards Muslims**

There was a mix response from the participants for this question. Response from two of the FGDs conducted, mentioned Muslim women being targeted and mistreated by the hospital staff. Whereas some participants said that the staff misbehaved with all the poor people irrespective of their community. One group said that North Indian-Bhaiyas are mostly ill-treated by the hospital staff (CP-FGD).

*See I have mostly seen the North Indians (Bhaiyas) being ill-treated by everyone, right from the doctors, to nurses to the ward boys. Patients from this community are more ill treated than any one, irrespective if they are Hindu bhaiya or Muslim. Everyone speaks roughly with them. They are always seen as illiterates, gавars!*

*Yes, the staff in hospital misbehave with us most of the time.*

*They target north Indians a lot, I had once seen a North Indian woman screaming in pain inside the delivery ward. The nurse there got so annoyed, that she made her husband come inside the ward and made him stand near his wife and then the nurse started complaining to him about his wife's screaming. The nurse started taunting the husband, "that you bhaiyas are pathetic, despite having so many children at home you keep on producing more and lie to us that this your first child (CP-FGD 9-Malwani).*

*Yes, it usually happens with Muslim women. But, their behavior is same with anyone who comes to the municipality. If you don't give them sweets and money after delivery, they misbehave with you, no matter which community you belong too! (CP-FGD 10- Malwani).*

*Since we are Muslims and cannot understand Marathi. Therefore they harass us furthermore. They misbehave with us, they taunt and scold us. They don't care during our labour, when the baby is almost out of the cervix only then they come to attend the female patient. When we call them, they don't come immediately. Only if someone screams and shouts they come. They don't even provide us with a stretcher or a mobile bed while taking us inside the ward. They force us to walk in this condition (CP-FGD 13-Bhiwandi).*

*No they don't discriminate between any communities. They misbehave with one and all (CP-FGD 14-Bhiwandi)*

*Nothing like that. They misbehave with all the poor people irrespective of their community (CP-FGD 15-Bhiwandi).*

*Yes, they do misbehave with Muslim women. They say, "Muslim ki jaat hi bahut gandhi hai." During excruciating pain if we lean on the wall, they scold us and pass remarks like, "Eh side main ho ja, deewar gandha karne ka irada hai." Once an illiterate Muslim woman after her operation, had asked a Sister or the Senior Madam, about how long should she abstain from sex? The sister instead of explaining her patiently passed a remark, "Jake abhi so ja, mera baap ka kya jata hain?" (CP-FGD 16-Bhiwandi).*

There was a mix response to this question; one respondent said that the staff does discriminate between Hindus and Muslim. Whereas the other respondent said the staff did not differentiate between any community. Few respondents from Bhiwandi and Bail Bazaar said that the medical staff treats everyone equally (KII).

*No, they don't misbehave with everyone. However if a Muslim comes to the hospital, they have a very complacent attitude. If a Hindu brother comes, then the staff speaks politely with them. During delivery whenever a Muslim or a north Indian patient is in severe labour pain, the sister scolds her and says, "Chal rukh abhi, udhar jake baith." They don't care for that patient. The staff is more attentive towards rich patients, as they know they will be rewarded later by the patient (KII 32- Bhiwandi).*

*No, they don't discriminate amongst anyone. The hospital staff in Indira Gandhi memorial hospital is good; they behave equally with a Hindu and a Muslim patient (KII 34- Bhiwandi).*

Majority of the CHVs complained of low salary, lack of basic facilities in the Health Post like water, toilets and benches to sit. They also want that more CHVs should be recruited in the Health Post, as each CHV is overburdened with too many areas and houses. They also felt that there needs to be male CHVs in the team, as the male CHV can easily motivate and educate the men in the community. The CHVs also felt that Muslim CHVs shared a better rapport while communicating with the Muslim women. Most of the Hindu CHVs at some level have faced prejudice from the women in the community due to their religion. Some CHVs also demand that they should be provided with a uniform so that it is easy to identify them as Govt. health workers. Also give them bags as they tend to carry heavy items. The CHVs also mentioned that they themselves suffer from various kinds of health problems. Due to their trips to the slums, especially during the monsoon season. They therefore demand free medical treatment to be available to them in municipal hospital (SPP).

*They tell us, that you don't provide us with any medicines when you visit our areas. You come and ask us questions. Now when they're suffering from dysentery and vomiting, we supply them ORS. But they want us to give them pills and tablets, they ask us why we don't carry medicines. We direct them to our Health Post for further treatment, but these people expect immediate and door-to-door medical services. Many a times when we ask them their names and other details, they tell us, "Tumko hamra naam kyun chahiye. Tum kya humko dawai dene waley ho? Hamara naam kitney baar likh chukey ho, phir bhi koi facilities nahin hai?" They also tell us, "Bar bar hamrey bachhon ko polio kyun pilatey ho. Bar bar nahin pila neka."*

*They are so used to us visiting them door-to door for polio immunization. That they are too lazy to attend the polio camp held in their area. They never come to the centre, because they know we will eventually come to their area for polio drops. Even for the BCG injection, they refuse to come to the centre; they want the injection to be given at their door step. Some of the women also refuse to get their children vaccinated with polio drops, as they feel that this will lead to infertility and reduce the Muslim population.*

*I being a Muslim CHV try to reason it out with many of the Muslim women, by telling them. That these polio drops are given to every child living in Maharashtra. If the government had any plans of using polio drops as a medium of population control, then none of the non-Muslim people would have taken polio drops. The Govt. would only target polio vaccination for Muslim population. But despite my assurance, many Muslim women still feel hesitant and suspicious about vaccinating their child. When my Hindu CHV colleagues visit these Muslim pockets, the local women don't listen to them. But when I approach these women, they do listen to me. When I approach a Muslim woman I quote the Quran, the mullah, the Masjid and try correcting their misconception about vaccination and certain issues. But despite my efforts, there are still some women who refuse to vaccinate their children with polio medicines. This is one of the major problems in Muslim community.*

*When we tell them the side effects of not vaccinating against polio, then they agree to get their children vaccinated. But, they want the vaccination to be done at their place of convenience and avoid visiting the Health Post. They're so habituated to the door-door service, that we receive very poor response when we have to hold the five day polio camp. They know that even if they miss attending the polio vaccination camp, we will come to their door step later for polio vaccination.*

*During monsoon we contract various kinds of diseases; we have to wade through dirty water to reach the house of the people. We have to climb steep steps and reach homes that are placed high up on the hill. After we return from the community, we often experience itching, boils and skin problem. The living condition is so bad in slum areas, despite this we work through out the year, no matter if it rains, shines or thunders. Despite working so hard, we are not given free treatment in the Govt. hospital. We don't get free medical service in big municipal hospital. We can avail free case paper only in the Govt. dispensary (SPP- FGD 1- Malwani).*

*There are total 16 CHVs working in the Health Post. One CHV covers 60 houses per day. We all have different area, but it is very challenging for us. Some people misbehave with us, some co-operate with us.*

*We suffer the most during monsoon. We suffer from Malaria, fever, cough and cold. We are paid so less, we want our salary to be increased.*

*Though we're qualified ANM, we have no authority or the power to prescribe medicines. In case of an emergency if a sick patient visits the Health Post. And if the doctor is unavailable in the Health Post. We don't have the authority of giving them any medicine. Despite the medicines being available in the Health Post. So we want that power to be given to us. Whenever we go to the area and if we come across a sick person, we can't give them any medicines.*

*There is no place for the CHVs to sit in the Health Post. Since we have to write reports we need a proper seating area. We also want the Govt. to give us new bags, as our bags wear and tear due to the heavy items we have to carry with us. We also want Male CHVs to be included in the team, as they can talk and convince men easily (SPP- FGD 2- Bail Bazar).*

*Many a times during our regular visit to area, we slip and fall and injure ourselves. During monsoon we always fall sick due to the unhygienic condition of the area, we also have the fear of being electrocuted during this season. As the slums have too many electric wires running loose all over the place. Sometimes we have to face so much of ire from the people in the community during polio vaccination/drops. They threaten us as they feel that our polio drops will harm their children. During monsoon when we tell them, to boil drinking water before consuming it. They taunt us back saying, "Rockel (kerosene) lakey do." In the Health Post there is an acute shortage of space, we don't have any place to sit. We require a separate store room, but due to lack of space one our office is converted into a store room and we also attend the patients from this room. The refrigerator used to store medicines has not been working since along time. There is not water or toilet facility in the Health Post (SPP- FGD 3- Shivaji Nagar).*

## **25. Prejudice faced by women**

All the participants complained of being told to remove their veil, 'burkha/naqab' by the doctors and the staff when they visited a municipal hospital. Due to this few of the participants, later chose to continue their treatment from a private lady doctor. Few of the participants also mentioned being discriminated and abused due to their religion (CP-FGD).



*When we go to the municipality, we want the doctor to be well behaved. They shouldn't force us to remove our veil. The veil is very important to us, but they insult us due to our veil. We get angry when they tell us to remove our veil. We want them to treat everyone equally; they shouldn't discriminate between a Muslim, North-Indian or a Hindu. If the doctors think, that we are wasting their time. Then they should leave this job and sit at home taking care of their wife and children. They shouldn't work in a hospital (CP-FGD 1-Bail Bazar).*

*The doctors also force us to remove our veil. Most of us wear a burkha and are not comfortable about taking off our veil in public. So we then prefer visiting the lady doctors in private clinics. (CP-FGD 2-Bail Bazar).*

*I had once gone to Choksi hospital for a check up, and since I am a Muslim I am supposed to wear my purdah in front of other men. I was told by a male doctor to lift my veil before they could even do my check up, so I was very angry. The male doctors were more interested in seeing my face. Their concern should have been with my check up and not seeing my face. So after that I never visited them for any treatment and I have been going to a private lady doctor (CP-FGD 9-Malwani).*

*The sisters and nurses harass us a lot with their behavior and comments. During delivery they tell us, "Why do these Muslim people produce so many children. Do they want to make their children terrorists? Why don't they stop producing children? They dirty the bed sheets" Poor people and bhaiyas listen to these taunts and quietly bear it (CP-FGD 12-Malwani).*

*When I had gone to Rukumini hospital, a Sister there told me not to wear a Burkha and come to the hospital. She said, "Pehle burkha bahar nikalo, phir andar aoa" (CP-FGD 15-Bhiwandi).*

## **26. Recommendations for improving services and facilities in a municipal health centre**

Majority of the respondents gave the following feedback:

- All the medicines should be available in the hospital.
- The hospital should have facilities to treat every health problem and not refer the patients to any other hospital.

- The hospital should be fully equipped with X-ray, sonography and other diagnostic facilities/equipments.
- Important tests should be conducted by the hospital. Patients need not go to any private testing centers.
- The doctors, ayahs, sisters and other staff members should not misbehave. They should take good care and pay attention to the patients.
- The doctors should be punctual and come on time.
- Increase the number of doctors, especially lady doctors in the hospital.
- There should be more senior and specialists doctor in the hospital.
- The hospital should be fully equipped to handle emergency cases.
- There should be drinking and seating facilities for the patient's relatives (CP-FGD).

*The ayah bais don't talk to us properly, seeing them the doctors also misbehave with the Muslim people. We want them to respect and treat us properly. Nobody goes to a hospital for fun; we have to go because of sickness.*

*A woman may have delivered two or three children, but she still feels shy talking to a male doctor. These male doctors pass lewd comments like, "When you enjoy delivering children in front of us. Then why do you have problem taking treatment? Don't you enjoy while taking physical pleasure. Now why are you shying away" They pass such disgusting remarks on us.*

*There should be medicines x-ray facilities available for children, along with medicines for cold, cough, gas and iron tablets. We should get all the facilities in a municipality not everyone can afford to go to private clinic. They should conduct Sonography.*

*We should get all the medicines that they tell us to buy from outside, from the hospital itself. When the Doctor tells us to admit the patient, the staff refuses to admit them. They tell us, "Tumse zyada humein maloom hai. Humein mat batao." My niece was constantly vomiting, so we took her to the municipality but they refused to admit her. We then had to admit her in a private clinic. They don't easily admit patients in a municipality. They keep sending us away*

*and tell us to come the next day. If by chance we get delayed, they then taunt us by saying, "Were you sleeping at your house all this while?"*

*During my delivery, I saw this poor man along with his pregnant wife in the hospital. The wife was close to delivering her baby, but since the man was so poor he couldn't buy any medicines from outside. When he couldn't pay the hospital charges, the doctor insulted him and his wife. The doctor said, "Paisey nahin hai toh yahan per kyon atey ho? Jakar bacha rasta pur paida karo".*

*My two-month old son was suffering from gas problem. So I took him to Bhabha Hospital for the treatment. The doctor there checked him, but I think the doctor wasn't unable to diagnose the problem. So he referred us to a second doctor, the second doctor told us to visit the third doctor. The third doctor directly referred us to KEM hospital. But I didn't take my child to KEM hospital; I got him treated from a private hospital. The doctor gave him some medicines and my child recovered within 2 days.*

*They give treatment only for minor health problem. If the case is serious then they refer us to KEM hospital. They tell us to go to any big hospital, when I had taken my child to the municipality they insulted and harassed me. They told my husband, if anything untoward happens to the child they will not take any responsibility.*

*The doctor should be more attentive while attending to a patient. Many a times the doctors don't use the stethoscope for checking us.*

*More than the doctors, it's the ayah bais who misbehave with us.*

*When I was admitted in Cama hospital my child touched something in the ward. The lady doctor scolded my child in a very bad manner. The doctor said, "Itney sarey bachey kyun paida kartey hain, jab sambalney nahin hota. Dekhtey nahi , kahan kahan haath laga deytey hain.?" The lady doctor then told the ayah bai to take the file and to wipe it, which was touched by my child. Will an innocent child's touch spread any disease?*

*The doctors should realize that the poor go to the municipality, due to the low cost treatment. But if the doctors harass the poor people, then they are forced to taken loan and go to the private clinic for their treatment.*

*My pregnant sister who had returned from our native place started experiencing severe labour pain. We took her to the hospital in the afternoon, but the doctor told us to bring her in the hospital in the morning and get her registered. But her pain was uncontrollable, so my sister insisted on getting her delivery done on that day. A lady doctor then came and checked her and got my sister admitted. My sister then delivered a still baby at 3 am in the night. The doctors knew that the baby had died in the womb, but they avoided informing us (CP-FGD 1-Bail Bazar).*

*There should be good facility in our nearest Health Post for pregnant women and for delivery cases. They should not refer us to far away hospitals for basic tests like blood and urine. They should increase the number of doctors attending the patient, so that the number of patient waiting outside for their turn reduces. The doctors should not misbehave with the patient. They should have lady doctors for female patients, there should be information counters set up for the common man. The staff is very rude and non-co-operative in Bhabha hospital; they harass us a lot during delivery. Despite being in labour pain, they make us stand in a line. (CP-FGD 2- Bail Bazar)*

*The doctor should come on time in the hospital, as we have to wait for them and this leads to a large number of patients waiting to be checked by the doctor. They should increase the registration counter from one to two, since the number of people standing in the queue to collect their form gets too long. If there are two counters set up, then the waiting period would be less. This would in turn help us in getting additional time to meet the doctor, and there would be less chaos and confusion. We should be provided with all the medicines from the hospital itself, as most of the time we have to purchase the bulk of medicines from the chemist shop. They only give some amount of medicine to the children, however when a child as to be admitted in the hospital, they don't react (CP-FGD 3-Bail Bazar).*

*There should be more services available in a municipality.*

*All of us should quick service, so that we can get immediate relief from our problem. All newly married women should be informed and educated by the hospital about family planning programme.*

*There should be 24 hours medical facility available. They should increase the number of lady doctors.*

*They should conduct blood, urine and Sonography test. They should also start a MTP centre in our area. During emergency the doctors instead of referring us to a bigger hospital, should treat us there and then. As the patient's condition deteriorates when he/she is referred in other hospitals (CP-FGD 4-Bail Bazar).*

*There should be some amount of facilities available in our local Health Post. Whenever any child or an aged person falls sick, we have to visit the private clinic for the treatment.*

*There should be good facilities for pregnant women; they should have x-ray machines, and other diagnostic equipments to facilitate them.*

*The governance should be good, and they should think about the upliftment of the poor. We have been continuously facing shortage of water; the garbage is not cleared on regular basis. So they should look into this matter.*

*The dispensary should be big enough to admit anyone who falls sick. As poor people can only afford to go to the municipality. Unlike some people who can afford private treatment, poor people have to go to hospitals like Rajawadi and Sion. Poor people cannot afford the money to travel so far. We demand an increase in the facilities and services in the Shivaji hospital, as our area is large (CP-FGD 5-Shivaji Nagar).*

*They should have all the facilities to handle an emergency case. There should be doctors available around the clock. The staff from the Shivaji Nagar Health Post, sends us to other hospitals for delivery. Therefore we have to go to Shatabdi, many times we deliver the child on the way to the hospital, as Shatabdi is far from here. They should not charge us for tetanus injection. They should pay more attention and care while inserting the Copper-T. All the medicines should be made available in the hospital and we should not be made to purchase any*

*medicine from outside. They should have specialist for pregnant women. There should be Intensive Care Unit in hospitals. We shouldn't be made to stand in long queues and finish our check-up and the rest of the work in one hour. The staff should conduct a meeting with all the visiting female patients, and inform them about the facilities available in the hospital. The doctors and the staff of the hospital should treat us kindly and not misbehave with us. They should have the patience while dealing with a patient and not use any foul language while talking with us (CP-FGD 6-Shivaji Nagar).*

*The doctors should pay attention to the patient and all the medicines should be provided by the hospital.*

*Emergency services should be made available. The ayabai should behave in a civilized manner. During delivery, the doctor should be present to supervise it. They should try their best to conduct a normal delivery and avoid a C-section.*

*If it's a home delivery then they should not charge us 200 rupees to issue a birth certificate. The staff should not misbehave with us (CP-FGD 7-Shivaji Nagar).*

*The doctors and ayabai should be well-behaved. There should be drinking water available. There should be more benches for resting and sitting. They should give us medicines. Calcium tablets and other pills which they tell us to buy from outside should be provided by the hospital. (CP-FGD 8- Shivaji Nagar).*

*Firstly the doctors should be on time, routine tests like blood pressure, weight check are done quickly. But post these tests, we have to wait for nearly 3 hours for the doctor to arrive. For example, if one goes to the hospital by 9 am, most of the tests are over by 12 noon. From 12 noon to 3 pm we have to wait for 3 hours only for the doctor to come. Now, if the doctor arrives on time, each every check up can happen smoothly and effectively. Like the BP check up can happen at one place, the weight check can happen simultaneously at another place and then finally the doctor can assess the patient's health. So this way everything thing is done systematically & we can reach home early and save time. Since the doctors never come on time, usually we have to skip our afternoon meals, as we are under the fear that we may miss the*

*doctor, if we go to eat our lunch. So after the routine tests are done, we just wait patiently for the doctor to come. But the doctors never come on time.*

*In Maluana Abdul Kalam Azad hospital they have no facilities for first delivery. Only if it's a second or a third delivery, they admit the patient. That's because the hospital lacks facilities and machines. The sister does the delivery there, that too if it's a normal delivery. For a C-section they refer the patient to Choski or Aziz glass hospital. They should take patients who are first time mothers.*

*We want Sonography facility to be available in Maulana Azad hospital the way it is available in Choksi hospital. Our husbands don't earn much and we have to pay at least Rs 500-1000 in private to get our Sonography test done.*

*There are only two doctors in Maulana Azad hospital, they should increase the number of doctors in the hospital. They should be fully equipped to handle any type of case and not refer or send us to some other hospital. We also want them to perform hysterectomy operation in this hospital and not send us to Choksi.*

*The hospital should provide some facility for the relatives of the patient, like drinking water, sitting room or benches.*

*The doctors are never on time in the local Health Post in number 6. The doctor is supposed to come in the post at 12 noon, but he arrives by 1.30 pm. We go and sit in the post from 12 noon, so it's an absolute waste of time.*

*See wherever we go for treatment, the doctor is always late. Even in Aziz glass hospital, the doctor is supposed to come by 12 noon for check up and physical examination of the abdomen. But the doctor arrives by 3 pm and by the time he is done it is 7 pm in the evening. Routine tests like weight and blood are done quickly. But for the check up we have to keep waiting until the doctor arrives.*

*We leave our children behind in the house when we go for any check up to the hospital and visiting the hospital for any check up or treatment consumes our entire day (CP-FGD 9-Malwani).*

*The doctors should be on time, the employees should not misbehave with us. There is should be no need for us to purchase any medicine from the medical store, they should provide each and every medicine from the hospital. They should keep the hospital premises clean and hygienic. During delivery, the staff should be kind with the patient. They shouldn't differentiate between any patients, and should be respecting everyone equally. If we get good treatment and services, then why would we visit any private hospital? (CP-FGD 10- Malwani).*

*All the medicines should be available in the hospitals. They should increase the number of doctors, especially lady doctors. They should be fully equipped for dealing with an emergency situation or case. There should have sufficient X-ray machines and other diagnostic equipments. If we are provided with these amenities, then we would never visit any other clinic (CP-FGD 11-Malwani).*

*They do only certain tests in municipality like blood and urine test, they should also have the facility for other tests. They should also provide us with all the necessary medicines, like iron tablets. We are poor people; we cannot afford to buy medicines from outside.*

*Some times we have to get the x-ray done from other clinics. These X-rays and check up cost us Rs1000-15000 at times, so I want that, the hospital should have all the x-ray machines and necessary equipments. They should also have good qualified senior doctors and they should take good care of the patient admitted.*

*In most of the municipality they have the student or junior doctors who treat us or do our check-up. I want good and experienced doctors to be available in the municipality, as we get the experienced doctors only in private.*

*During delivery they should provide us with good medicines and take good care of our health. And they should also speak to us in proper manner, avoid being rough and rude.*

*When I was going to give birth to my fourth child I was in severe labour pain. So I went to the municipality, the nurse there present told me, that since I have already produced three children. I should try and control the pain and give birth by myself. A lady besides me saw the pain and agony I was going through. She too requested the nurse to come over and help me.*



*But the nurse replied back saying, "She has already produced three children previously, so let her try on her own. When she is ready to give child birth, then we will come to help her." Due to this negligence I lost my child inside my womb.*

*During delivery there are no doctors present, the nurse and ayah bais conduct the delivery. The doctor pays a visit once in the morning. I too had a similar experience, during my child birth. The staff kept telling me to bear the pain and control myself. When I went to relieve myself in the toilet, a portion of my baby came out. They just don't care about the patients in municipality.*

*In municipality they don't give us proper breakfast.*

*After I lost my baby, the doctor shouted at the nurse, and asked her why she didn't call him, as I was a serious case. Most of the delivery cases are handled by the sisters and the nurses, the doctor visits the hospital only twice a day for an hour.*

*When we refuse to get our sterilization done, the staff threatens us and passes remarks like, "Tell a politician to open a dispensary fro you, so that you can produce more children. Or go to some other hospital for this delivery.*

*Since the doctors are never present, the sisters and nurses are the main troublemakers in the hospital, as they have full control and power over the way the ward functions. They behave the way they want and have a careless attitude. Mostly people fall sick in the night; but the doctors are never available in the night. Even delivery patients come in the night.*

*They should give more attention and care during child birth.*

*They should increase the facility and treatment for children. There should be a pediatric or a senior doctor who should specialize in treating children (CP-FGD 12-Malwani).*

*First of all they should control the inflation. They should readily admit a serious case in the hospital.*

*They should check us properly when we visit them in the hospital. They shouldn't misbehave with us and not harass us by sending us to other hospitals.*

*The doctors are always late, they should arrive on time. As the patients suffer a lot due to the unpunctuality of the doctor. The doctors are supposed to reach by 10 am in the hospital, but they reach only 12 noon. Many patients lose their life due to this attitude.*

*There should be more lady doctors present in a municipality. As we feel shy to discuss about internal health problems with the male doctors. We shall feel more comfortable while discussing our problem with the lady doctor (CP-FGD 13-Bhiwandi).*

*They should provide us with effective medicines. They should have patience while dealing with a patient. They should not scold us for minor reasons.*

*They should work on their communication skills.*

*We should get all kind of treatment from hospital including treatment for white discharge problem. They should not send us to any other hospital for treatment.*

*There should be better facilities for delivery. They should provide us with a birth certificate, even if it is a home delivery.*

*The staff should be well-behaved.*

*There should be medicines available for every illness.*

*The doctors should respect us (CP-FGD 14-Bhiwandi).*

*They should pay more attention towards the patient. The careless attitude should be done away with. Sometimes due to long queues, we don't get our turn to meet the doctor. So they should increase the number of doctors on duty from 2 to 6.*

*They should charge us less money and give us good medicine. The staff lacks decency in talking and behaving appropriately with the patient.*

*Since they don't operate after 6 pm, they refuse to admit the patient. I want them to admit the patient after 6 pm also. After 6 pm they send us to Thane hospital as they say they don't have the facility.*

*If we forget to carry a bottle for the liquid medicine for cold, cough and fever. The staff insults us and sends us away, they should stop this kind of misbehavior.*

*There should be complete treatment available for each and every disease.*

*The staff should be well-behaved; they should prescribe us the right medicine (CP-FGD 15-Bhiwandi).*

*We only go there during pregnancy and for ANC check up. So if we get treatment for minor health problems like cold and cough in the local Health Post, it will be very helpful. As we have to spend double the amount, to travel to the hospital for such minor treatment.*

*They should start facility for X-ray and sonography test. As we have to pay huge amount of money for these tests.*

*They should start delivery services and should be equipped to treat emergency cases. In government depending from person to person they ask any amount of money for treatment. So they should be considerate about the money being charged to us. We go to a municipality as they offer low-cost treatment (CP-FGD 16-Bhiwandi).*

Most of the women from Shivaji Nagar, Malwani, Bhiwandi reported that people in their area are not happy with the services/facilities provided in the Government hospital. On the contrary some were not sure because some are happy with few services in the hospital but not all the facility (KII).

*Yes, we are satisfied with the medicines given from the municipality, as they are effective. As sometimes the medicines given from private clinics are ineffective. We're also provided with contraceptives for birth-control, like Mala-D and condoms from municipality. They also give Iron tablets to women and children, which is very helpful (KII 29- Malwani).*

Few of the respondents from Bail bazaar, Shivaji Nagar, and Malwani preferred 24 hours service/ facility in nearby government hospital. Health Post should have blood and urine test, sonography facilities, Medical staff must treat them well, pregnant women must get better treatment, lady doctors should be available. Few of the respondent from Shivaji Nagar stated that the government hospital should be palatial /big, there should be availability of benches, fan and drinking water. There should be some provision for group discussion. Doctors should come on time, the hospital should provide proper guidance, quantity of medicines should be increased and after every 15 days there should be medical check-up. Specialist doctors should be available, better facilities during delivery , lastly registration/admission facilities should be there in nearby government hospital. Very few from Malwani reported that there should be surveys especially for women, various facilities available in the private hospitals should be there in government hospitals also and effective and useful medicines should be provided. Few from Bhiwandi reported that medical staff needs to be increased, operation facility should be there, and lastly cleanliness needs to be maintained (KII).

*Incase of any emergency or a serious case, I want the municipality to admit the patient. This way we can avoid going to the private. We do get basic medicines from our nearest Health Post, but I want them to start facilities for pregnant women and conduct delivery. Women face a lot of difficulties during their delivery. There should be more lady doctors as we feel comfortable interacting with them. Hospitals like JJ, Nair and KEM are open till late night; similarly we want the Health Post to be open till 9-10 pm in the night. They shouldn't tell us to buy any item from outside during delivery. Also each and every item that we're told to purchase, should be fully utilized by them. The ayah bai and nurses should treat us properly. There should be good facilities for delivery. This is my heartfelt request (KII 23- Malwani).*

*The most important need is that, whichever medicine is kept in the hospital's pharmacy should be regularly checked for the expiry date. Because India still has many illiterate women who can not read and write and many who do not understand English. So it should be the staff's responsibility to ensure no expired medicines are being given to the patients. Secondly costlier*

*medicines are never provided by the municipal hospitals. They will always tell you to purchase costlier medicines from outside, and will give you only the cheaper ones from the hospital. So I want that all the medicines should be available and given to us from the hospital itself, after all if I have come to a municipal hospital for cheaper treatment. They should provide the facilities accordingly (KII 22- Malwani).*

*Since this area is full of poor people, the municipality should give us good medicines for every disease. If we get effective treatment from the Govt. hospital, then why would we go to any private clinic? We should be given complete facility in the Health Post. A poor person earns little money, but ends up spending a lot of money in private clinic. If we get effective medicines in Govt. hospital, it will be helpful to every poor person. The government should think about these issues (KII 29- Malwani).*

*There should good facilities for small children in municipal hospital. For example if a child is suffering from jaundice and has to be put in an incubator. The Govt. should increase the number of incubators in a hospital (KII 25- Malwani).*

*They should increase the stock of medicine and give effective medicines. They should not send us home by giving us a small dose of medicine. We should be given medicines for all the disease (KII 3- Bail Bazar).*

*They should increase the medical facilities in Shivaji Nagar Health Post. They should admit us in the Health Post. The watchman and bai should patiently answer our queries. During delivery every woman is in pain, during this time the sister screams and hits her. Therefore we want the sister should not misbehave with the patients during delivery (KII 11- Shivaji Nagar).*

Most of the respondents said that the medical facilities should be improved in the municipal hospital. The staff should be polite and courteous while dealing with a patient and effective treatment should be provided (KII).

FGD participants (service providers) suggested to i) increase the number of CHVs, include male CHVs and more Muslim CHVs ii) each Health Post should be given

basic facilities like water, toilet and a place for the employees and health workers to sit  
iii) increase the facilities and tests for pregnant women in the Health Post (SPP).

*This area is so huge; the population is so vast here. So we feel the Govt. should increase the staff in our Health Post. Secondly we have not been receiving water since a year. We want this basic facility to be available here. If water is available here, then we can start the Copper-T service in this Health Post. We don't get credit when we refer the Copper-T patients to the other Health Post. They should also increase the number of Health Post in Malwani, as the population is constantly increasing and we are unable to cope up with it. There should be at least two more Health Posts established in Malwani area, especially in Akashwani, Rathodi, Kharodi area. We also want that more CHVs should be recruited, one CHV handles 8 plots, each plot has 150 houses. The CHVs are not paid well, they should increase our salary. We get paid Rs 1,500 which is too less in today's time. Our work and efforts are not recognized by the higher authorities.*

*We think the government should organize awareness programmes for men living in the area. Films and Audio Visual clips which create awareness about health and family planning should be screened on regular basis. So that the misconception exists amongst men and women about family planning can be eradicated. Most of the men feel hesitant to talk about such issues with female CHVs. When we talk to men about sterilization, many of them feel that since we will get some kind of commission if we get a patient for sterilization. Therefore we are trying so hard to convince them. They feel that we have a target to achieve. That is why we are telling them to undergo sterilization. We also feel a male CHV can convince men more easily than female CHVs, as Muslim men are not comfortable talking to us (SPP- FGD 1- Malwani).*

*We want proper seating facilities in the Health Post. We also want more health charts, maps be given to us. Each one of us should be given IEC materials, these materials should not be given to only one staff in the Health Post.*

*Sonography facility should be available in the Health Post. Since we have ANC patients, this would help us in the diagnosis. We can determine the condition of the foetus, and accordingly give diet advice to pregnant women. HB test and development test should be started here.*

*Sonography, x-ray and other diagnostic equipments should be available (SPP- FGD 2- Bail Bazar).*

*We want more space to be given to us, the salary of CHVs should be increased. CHVs should be given a uniform something similar to what the Ayah Bais wear, so that people can identify us as people from the health department. The Health Post staff is also called on duty during Ganapati, election and other occasion. So we should be paid and given more facilities accordingly (SPP- FGD 3- Shivaji Nagar).*

## **Results of quantitative data**

### **a. Report of the interviews of women and men in the community**

Men and women in the communities were contacted to understand about whether they were using the services provided by the Health Posts located in their communities, the advantages or disadvantages of the services provided; their experience of using the services and the usage of private facilities for health care. While exit interviews with women in the Health Posts gave an idea about the experience of service utilized then, community interviews gave a holistic picture of those using as well as not using the services and reasons for using or not using these services. A total of 30 men and 60 women were interviewed.

#### *Age*

The age distribution of men and women in the study area showed that the mean age for men and women was 35.5 and 28.4 years respectively. The age ranged between 26-50 years for men and 20-45 years for women. Around 62 percent women and 20 percent men were between the ages 20-29 years. One third men were in the age group of 30-34 years and that of women, little above one-third were in the age group of 25-29 years (Table CI. 1).

#### *Education*

One-fifth of men and one-sixth of women had no formal schooling. Around one-third of men and nearly half of the women had studied up to primary. Around 37 percent men and 30 percent of women had studied up to Secondary school level. Around 7

percent men and 5 percent of women had studied beyond secondary school (Table CI. 2).

### ***Occupation***

Over three fourth (78%) of women were housewives. Among men 43.3 and 33.3 percent reported that their nature of work was 'Manual work' and 'skilled jobs' respectively. One-fifth of men reported that their occupation as 'Business' (Table CI. 3).

### ***No. of children***

Two fifths of men and little over 50 percent of women reported that they had up to 2 living children. Two-third of men reported that they had more than 2 living children, while 46.6 percent of women reported so (Table CI. 4).

### ***Common health problems***

Among the health problems faced in the last two years, 'Cough and Cold' was prominently reported by 70 percent of men and 53.3 percent of women followed by fever 53.3 & 40.0 percent men and women respectively. Nearly 12 percent of women reported that they had no health problem during the last two years (Table CI. 5).

### ***Place of treatment***

Utilization of Government health facility was low. Around 73 and 79 percent men and women respectively reported that they went to private clinic/hospital for their health problem. Remaining men and women reported that they visited Government Hospital/Health Post for their health treatment (Table CI. 6).

### ***Preference for visiting this health facility***

A little over half of the men and three-fourth of women reported 'good treatment' was the main reason for visiting the preferred health facility followed by proper care and attention (30% men). Time saving was one of the reasons reported by 13.3 percent men 20.8 percent women (Table CI. 7).



### *Time taken to reach the health care facility*

Time taken to avail the preferred health facility was within 15 minutes as reported by nearly 87 percent of both men and women who were interviewed (Table CI. 8).

### *Visit to the health care center*

Half of men said they visited the health care center once in a month. Nearly 27 percent of men and 70 percent of women reported that they visited the preferred health care center whenever necessary (Table CI. 9).

### *Health care facility*

Two fifth of men and four fifth of women reported that weight check-up services were offered at health care center followed by urine test facility (70% of men and 72% of women) and blood pressure check-up (20% of men and 75% of women). Around 58 percent of women reported the advice about 'Food and Diet' and nearly 42 percent reported that of physical examination of abdomen. One fifth of men and three fifth of women reported about the TT Injections at the health care center (Table CI. 10).

### *Last delivery*

Nearly 43 percent of men and 52 percent of women reported that their spouse or they had their last delivery at Government hospital. Around one-third of both from men and women reported the last delivery at a private hospital. 20 percent of men and 5 percent women reported that the last delivery of the child was at their home (Table CI. 11).

### *Reason for home delivery*

Out of six men who reported that their spouse had last delivery at home, three of them told that they were comfortable at home. One reported that his spouse had last

delivery at native place and the other two reported as 'not necessary to disclose'. Among women, two mentioned that they preferred home delivery due to lack of facilities at the hospital and the one mentioned that she was comfortable at home (Table CI. 12).

### ***Vaccination of the child***

All the Men and 96.6 percent Women respondent reported that their children were vaccinated. Only 2 Women respondents reported of not vaccinating their children and the reason being it will cause harm to the child and the hospital staff don't inject the child properly (Table CI.13 & CI.14).

### ***Use of contraceptive Method***

Around 90 percent of the Men and 65 percent of the women reported of using contraceptive method. Among women who had not used contraceptives stated the reason as follows. Don't find the need to use it (38.1 %), there are too many side-effects (23.8), husband and family doesn't allow (24 %). On the other hand all the three men who were not using any contraceptive method mentioned that their religion forbids (Table CI. 15).

### ***Most commonly used Contraceptive method***

Among those who were using contraceptive methods, nearly 30 percent of men reported they used condom as a contraceptive method. Around one third of the male respondent reported of their wife had undergone tubectomy followed by Copper T (18.5%) and Oral pills (11.1%). Very few mentioned of traditional method like Rhythm/Withdrawal. Among female respondents, 30.8 percent each reported of using oral pills or their husband using condom. Similarly 25.6 percent of women had reported of either undergone Copper-T insertion or tubectomy respectively (Table CI. 16).

### ***Availability of contraceptive methods***

Multiple sources have been reported for obtaining contraceptive methods. Around 30 percent of men mentioned that they received contraceptives from the Government

hospital followed by through a friend (18.5%), medical shops (7.4%) and private doctor (7.4%). Equal number of women (30.8%) reported of getting contraceptives from Government hospital and medical shops followed by private doctors (20.5%) (Table CI. 17).

#### ***Side effects due to contraceptive and types***

Almost 90 percent of the men reported of no side-effects due to the use of contraceptive, whereas few (3 men) reported of some kind of side effects. Nearly 54 percent of the women did not report any side-effects. Among those who reported side effects mentioned about weakness (27.8%), Body ache/stomach/head/backache (22.2%), heavy menstrual bleeding (27.8%), weight increase (11.1%), dizziness (11.1%) (Table CI. 18 & CI. 19).

#### ***Source of information of contraceptive methods***

The major source of information of contraceptive methods reported by men was family and friend (56.7%), Government and private hospital (26.7%) and Health Post staff (10 %). Similarly, 40 percent women reported Health Post staff as a major source followed by family and friends (36.7%) and 8.3 percent each from community health worker and media respectively (Table CI. 20).

#### ***Reproductive health problems***

Majority of the men (90%) and women (73.3%) had heard of reproductive health problems. One fifth of men reported that they suffered from reproductive health problems, such as increase in frequency of urination, pain during intercourse; burning sensation during urination and premature ejaculation. Around two fifths of the women reported that they suffered from reproductive health problems such as white discharge, Lower abdominal pain, burning sensation during urination, itching/redness in/around genital area, increased frequency of urination and pain during intercourse (Table CI. 21 TO CI. 23).

#### ***Treatment taken from***

Among those who suffered from RH problem, all the men and little over 50 percent of women sought treatment at Private clinic. However 14 women reported that they visited government health facility. All the men and majority of women who had taken treatment at the private health facility reported that they preferred private hospitals over Government and remaining women respondent preferred private hospital due to availability of the women doctor (Table CI. 24 & CI. 25).

#### ***Satisfaction with the service available at the Health Post***

Around 13 percent men and 53 percent women were satisfied with the services at the Health Post (Table CI. 26).

#### ***Experienced any problem while availing treatment at govt. health facility***

About 76.7 percent of the men and 45 percent women had experienced problems when they sought treatment at the government services (Table CI. 27).

#### ***Problems faced at Government health facility***

Majority of the men and women respectively reported that they faced various problems at the government health facility such as they have to wait in long queues (69.6% & 70.4%), it's a time consuming process (39.1% & 55.6%), doctors don't do the investigations properly (26.1% & 14.8%), the health staff have negligent attitude (21.7% & 44.4%), most of the medicines have to be purchased from outside (13% & 33.3%), and rest of them stated that the doctors were not punctual, trainee doctors and discrimination from the health staff on religious ground, misbehaviour of doctors, and the government set-ups are far from their house (Table CI. 28) .

#### ***Suggestions to improve service facilities at the Health Post***

Around 50 & 45 percent of the men & women respectively reported that they should receive good treatment and polite behavior from the health staff, whereas 40 & 48.3 percent of the men and women stated that medicines should be available / free of cost.

The delivery services be made available as reported by 20 percent men and 28.3 percent women. 10 percent of men and 40 percent of women expressed the availability of lady doctor and 10% of men and nearly 32 percent of women suggested regarding availability of Sonography, urine and other important tests. Other suggestions by men and women expressed were 24 hour medical services, punctuality of doctors and health staff, good treatment for pregnant women etc (Table CI. 29).

### **b. Report of Exit Interviews**

The choice of health facility people avail is decided by a range of factors including the distance people have to travel to the facility to the quality of service provided at the health facility. Exit interviews allow us to collect information of an event (consultation) that has just occurred, when the experience is still fresh in the minds of the patient. However, the exit interviews just provide a snapshot of the health care accessed by few women who have visited the health facility and have been satisfied by the way it functions. This may exclude those who have for some reasons avoided going to the Health Posts.

Interviews were conducted among 42 women in the study sites to get a quick review of women's perception to the services provided at the health facility. This constitutes, around 10 women each, who were randomly selected from government urban Health Post available at Bail Bazar (Kurla), Shivaji Nagar (Govandi), Malwani and Bhiwandi. In one of the places two more women were interviewed in addition to the pre decided number as they came forward with volition to provide information (*Table EI. 1*). Women who had visited the health facility for a particular problem were requested to answer a few questions. Women were provided the participant information sheet and consent was taken before they answered to a set of 18 pre-coded questions which took around 5-7 minutes each. All women had agreed to this.

The following illustrates the response to the questions asked to the women.

### *Age*

Women belonged to the age group of 18-45 years with mean age of the respondent 30 years (*Table EI. 2*).

### *Time take to reach the health facility*

Availability of health infrastructure is one of the necessary conditions motivating women towards the utilization health services. Distance traveled and time taken to reach the health facility could be a deterrent to reaching the health facility. The time taken to reach the health facility is an indicator of the distance at which the health center is located from their place of residence. If the women have to travel far to reach the health centre, they might as well seek out for health services which are available in the vicinity of their residence.

In this study women were asked about the approximate time they had traveled to reach the health centre located in the place where they reside. On an average 59.5 percent women reported that they reached the health centre in approximately 15 minutes (*Table EI. 3*).

### *Frequency of visit to the health facility*

People visit health centers in the event of an illness. However, if they are not satisfied with the health services they might not visit the center even if they have a reason to do so. Frequency of visit to a health centre could be a proxy to the quality of services provided at the centre.

In the study, women were asked about the number of times women have attended the health centre for health check-up. Majority (81 percent) of women have reported that they visit the Health Post at least once in a month for any of the illness they have (*Table EI. 4*).

### *Waiting time at the health facility*

Waiting time at a particular health facility indicates the time a patient spends before consulting the doctor. Long waiting hours at the government health facility has been reported as one of the reasons for non-utilization of the services provided there. In settings, where women are overburdened with household responsibilities, lesser waiting time at the health facility may be a motivation to seek services.

On the day of the interview, women were asked question regarding the time they had spent to meet with the doctor/health care provider. On an average 59.5 percent women said that they had waited for around 15 minutes before they actually met the doctor (*Table EI. 5*).

#### ***Consultation time at the health facility***

The time spent with the doctor is one of the important determinants of consulting in a particular health facility. Women feel happy if the doctor has spent enough time and provided her with the appropriate treatment. Of course this is a variable, as the illness of the patient would perhaps determine the time the doctor needs to spend with them.

Women were asked about the time the doctor spent with them understanding their illness and providing them with proper treatment. On an average, women said that the doctor had spent around 5 minutes with them. Nevertheless this varied from 1 minute per patient to even approximately half an hour with a particular client (*Table EI. 6*).

#### ***Satisfaction regarding time spent with the provider***

The doctor might spend time according to the illness of the patient. The doctor may even have time constraints due to overcrowding on a particular day or the doctor may purposefully hurry the procedures of examinations so as to the wind up the consultation time. These are some of the views of the provider. To understand the views of the patient regarding whether she was satisfied with the time the doctor spent with her, this question was asked to her.

Around 67 percent women (28) stated that the time doctor spent with them was the right length of time they had desired to have. Around 29 percent women felt that the doctor had spent very little time with them (*Table EI. 7*).

### ***Satisfaction of the treatment provided***

Patients would visit any particular doctor or health facility only if they were provided with the service they had sought for. If the service is not provided, then patients would move out to other health facilities where the services are provided promptly.

Women were asked about whether they were provided with the service for which they had visited the health facility. Two-third of women reported of being provided with the service they had sought for at the Health Post (*Table EI. 8*).

### ***Meeting the healthcare provider in private***

Maintaining privacy and confidentiality of the patient while physical examination and counselling is going on is an inevitable part of quality of service provided. When the patient feels that the place where she has been provided health service has offered enough privacy so as to share her concern with the doctor, she feels satisfied with the service. Women do not wish to go to places where her confidentiality will not be maintained. These issues are more important in terms of family planning services and certain specific infections/ diseases (TB, RTI/STI/HIV) which have a certain amount of stigma associated with it.

Women were asked about whether they had a chance to meet the doctor in private. A little more than half of them said that they could meet the doctor in private while the others said that they could not (*Table EI. 9*).

### ***Attitude of the health care providers including doctors***

Attitude of the health care provider is one of the most essential factors influencing the patients while visiting a particular health facility or doctor. Studies demonstrate that



patient-provider relationships greatly influences service use and programmes that address this interface will be effective in improving both quality and utilization.

A series of questions were asked to understand the attitude of the health care provider.

Patients may feel uncomfortable during discussion on reproductive health needs with providers, particularly if providers are unfriendly and do not respect the patients. Women were asked if they were treated with respect at the Health Post. Around three fourth (71.4%) women responded that they were treated with respect at the Health Post (*Table EI. 10*).

The communication between the health care provider and the patient is important in terms of access of health facility by the patient. In that regard the tone in which providers interacts becomes important. The provider may use derogatory language indicating the negative attitude they have towards patients. Around three fourth (76.2%) women responded that they were treated with respect at the Health Post (*Table EI. 11*).

Being compassionate to the patient by asking her about the illness would also help the patient explain her problem effectively. She would then feel motivated for a follow-up at the Health Post. Women were asked if the staff cared about the women and her well being. Around half of the women (52.4%) reported that they thought that the health care provider had been compassionate enough and cared for their feelings (*Table EI. 12*).

Women were asked if she had a chance to ask any of her concerns, particularly if she had asked any question on the day of the interview. She was also asked if she understood the explanation provided by the health care provider to the women. Only few women (14) said that they had not asked any of their concern as they felt that the providers were too busy to answer their questions. Those who had asked had got satisfactory answers.

In the case of follow up services, patient feel that they need to adhere to the drug and diet regime prescribed by the doctor. Nevertheless follow-up services may be applicable to only those women who have had some problem which needs a follow-up consultation. Women were asked if she had been called for a follow up service. Around twenty five women (59.5%) reported of being called for follow-up services (*Table EI. 16*).

Returning to the same health facility implies that they are satisfied with the health care provided at the health center. Women were asked if she would return to the health facility in case of any other health related problems. Overwhelming 76.2 percent women reported that they would come back to the health facility in case of any further health problem (*Table EI. 17*).

Women were asked if in general the health facilities provided for women in terms of reproductive health services (family planning, safe motherhood, and STI/RTI) were convenient and easy for women like her. Most of the women (78.6%) responded that the services were quiet convenient and easy for women (*Table EI. 18*).

#### **Suggestions for improvement at the Health Post** (*Table EI. 19*)

Women were asked about the suggestions they had to improve the quality of care at the facility. The following responses were emphasized across all the interviews:

- Doctors should provide proper care and give enough time with the patients
- Medicines should be available at the Health Post and the patients should not be sent to different places for that
- There are many patients resulting in queues for a long time, this should be reduced.
- Attitude of the health care provider should be amicable and good.
- Proper referrals should be made in case all the services are not provided here.

## **Conclusions**

The following section gives in brief the highlights of problems faced at the government health facility (majorly Health post) and the suggestions provided by the various community persons. These illustrate the need to improve the facilities provided in the urban slums. The facilities in the Health Post have not been able to cope up with an increase in proportion of population demanding these services. Hence, the community has raised their concern over the existing facilities. In view of bettering health of the people, efforts should be taken to improve the condition of the health facilities. Also, the Health Post staff, especially those that directly come in contact with the community should be sensitized.

### **Common problems faced at Government health facility**

- Have to wait in long queues
- It's a time consuming process
- Doctors don't do the investigations properly
- The health staff have negligent attitude
- Most of the medicines have to be purchased from outside
- Doctors are not punctual and trainee doctors provide the services. There exists discrimination from the health staff on religious ground. Misbehavior of doctor's is also reported.

- Government facilities/hospitals are far from their houses.

### **i) Community perspective and Key Informants**

- All the medicines should be available in the hospital/Health Post.
- The hospital/Health Post should be fully equipped with X-ray, sonography and other diagnostic facilities/equipments.
- Important tests should be conducted by the hospital/ Health Post. Patients need not go to any private testing centers.
- The doctors, ayahs, sisters and other staff members should provide care and pay attention to the patients.
- The doctors should be punctual.
- The number of doctors should be increased, especially lady doctors in the municipal hospital.
- There should be more senior and specialist doctors in the hospitals.
- The hospital should be fully equipped to handle emergency cases.
- There should be drinking water and seating facilities for the patient's relatives.

### **ii) Exit interviews**

- Doctors should provide proper care and spend enough time with the patients
- All medicines should be available at the Health Post and the patients should not be sent to different places for medicines.
- There are many patients resulting in queues for a long time, this should be reduced.
- Attitude of the health care providers should be amicable and good.
- Proper referrals should be made in case all the services are not provided at the government health facility.

### **iii) Service Providers' Perspectives**

- Majority of the health care providers who participated in study said that most of the women do use contraceptives like Copper-T and Mala-D. However, a resistance towards sterilization was observed. So, efforts should be taken to promote sterilization.

- Current generation of young Muslim women is aware about family planning and actively asks for contraceptives and pills from the CHVs. But, there still remains a large proportion of Muslim women who are against acceptance of family planning or undergoing sterilization. Awareness needs to be created among them for adoption of family planning services.
- There is a need for lady doctor as, women do enquire and ask about a lady doctor.
- All the providers said that they never discriminate between Hindu and Muslim patients.
- Providers also felt that male CHVs should be there in the team, as the male CHV can easily motivate and educate the men in the community.
- Providers felt the need to have Muslim CHVs proportionate to the Muslim population in respective areas.
- Every Health Post should be given basic facilities like water, toilet and a place for the employees and health workers to sit.
- Every Health Post should have facilities of various tests for the pregnant women.

#### **iv) Community Interviews**

- Health care providers should provide good treatment.
- Polite behavior from the government Health Post staff is expected.
- Medicines should be available /free of cost.
- Delivery services should be made available at Health Post level.
- Lady doctor should be available in all the Health Posts
- Services such as sonography, urine and other important tests should be available.
- Good treatment should be provided for pregnant women.
- Doctors and Health Post staff should be punctual

Based in the above conclusions, here are a few recommendations

- Medicines should be made available at the Health Post.
- The hospitals/Health Posts should be equipped with X-ray, sonography and other diagnostic facilities/equipments, so that patients need not go to any private testing centers.
- Attitude of the health care provider should be amicable and good. The doctors, ayahs, sisters and other staff members should not misbehave. They should provide care and pay attention to the patients.
- The doctors should be punctual. They should provide proper care and spend sufficient time with the patients.
- There should be sufficient number of doctors, especially lady doctors in the municipal hospitals.
- The Health Posts/hospitals should be fully equipped to handle emergency cases.
- There should be drinking water, toilet and seating facilities for the staff, patients and relatives.
- Proper referrals should be there in case all the services are not provided at one place.
- Awareness needs to be created among women for adoption of family planning methods and efforts should be taken towards promoting sterilization. Male workers associated with the Health Posts can play an important role in easily motivating and educating the men in the community.

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#### (Interviews of women and men in the community)

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Table CI. 1: Age

Age in years	Men (n=30)	Women (n=60)
20-24	0.0 (0)	26.7 (16)
25-29	20.0 (6)	35.0 (21)
30-34	33.3 (10)	18.3 (11)
35-39	20.0 (6)	18.3 (11)
40-50	26.7 (8)	1.7(1)
<b>Mean</b>	<b>35.5</b>	<b>28.4</b>
<b>Range</b>	<b>26-50</b>	<b>20-45</b>

Table CI. 2: Education

Education (School yrs)	Men (n=30)	Women (n=60)
Illiterate	20.0 (6)	16.7 (10)
Primary (1-7)	36.7 (11)	48.3 (29)
Secondary (8-10)	36.7 (11)	30.0 (18)
Higher Secondary(11+)	6.7 (2)	5.0 (3)

Table CI. 3: Occupation

Occupation	Men (n=30)	Women (n=60)
Housewife	0.0 (0)	78.3 (47)
Manual/worker	43.3 (13)	5.0 (3)
Skilled/ technical	33.3 (10)	10.0 (6)
Teacher/ Tutor	0.0 (0)	5.0 (3)
Business	20.0 (6)	1.7 (1)
Unemployed	3.3 (1)	0 (0)

**Table CI. 4: Number of living children**

No. of children	Men (n=30)	Women (n=60)
1-2	40.0 (12)	53.3 (32)
3-4	50.0 (15)	28.3 (17)
4+	10.0 (3)	18.3 (11)
<b>Mean</b>	<b>2.8</b>	<b>2.9</b>

**Table CI. 5: Common health problems (last two years)**

Common health problem	Men (n=30)	Women (n=60)
Cough and cold	70.0 (21)	53.3 (32)
Fever	53.3 (16)	40.0 (24)
Ache (Back/Head/Body/Eye pain)	6.7 (2)	11.6 (7)
Skin problem/itching	3.3 (1)	8.3 (5)
Loose motion	10.0 (3)	3.3 (2)
Malaria	6.7 (2)	3.3 (2)
Typhoid /Tuberculosis/ Asthma	6.7 (2)	5.0 (3)
Other health problems*	0.0 (0)	20.0 (12)
No problem	0.0 (0)	11.7 (7)

\*Heart problem/ Tumor/ Swelling/Weakness/Chest pain/Palpitation//piles/Gas problem

**Table CI. 6: Place of treatment**

Place of treatment	Men (n=30)	Women (n=60)
Private Clinic	56.7 (17)	77.4 (41)

Health Post	10.0 (3)	20.8 (11)
Government Hospital	23.3 (7)	5.7 (3)
Private Hospital	16.7 (5)	1.9 (1)
No response	0.0 (0)	1.9 (1)
Not Applicable	0.0 (0)	(7)

**Table CI. 7: Preference of health facility**

Reasons for visiting health facility	Men (n=30)	Women (n=60)
Time Saving	13.3 (4)	20.8 (11)
Good treatment	53.3 (16)	73.4 (39)
Properly care and attention	30.0 (9)	1.9 (1)
Low cost of treatment	3.3 (1)	3.8 (2)
Not Applicable	0.0 (0)	(7)

**Table CI. 8: Time taken to reach the health facility**

Time taken (in minutes)	Men (n=30)	Women (n=60)
10-15	86.7 (26)	86.8 (46)
30	6.7 (2)	5.7 (3)
60	6.7 (2)	1.9 (1)
60+	0.0 (0)	5.7 (3)
Not Applicable	0.0 (0)	(7)

**Table CI. 9: No. of visits to health facility**

No. of visits	Men (n=30)	Women (n=60)
Once in week	0.0 (0)	1.9 (1)
Once in every 15 days	6.7 (2)	22.6 (12)
Once in a month	50.0 (15)	5.7 (3)
Once in six months	16.7 (5)	0.0 (0)
Whenever necessary	26.7 (8)	69.8 (37)
Not Applicable	0.0 (0)	(7)

**Table CI. 10: Antenatal/postnatal care services offered at the health care center**

<b>Facilities offered</b>	<b>Men (n=30)</b>	<b>Women (n=60)</b>
Weight check-up	40.0(12)	80.0(48)
Blood pressure check-up	20.0(6)	75.0(45)
Urine test	70.0(21)	71.7(43)
Physical examination of the abdomen	3.3(1)	41.7(25)
Food and diet advice	3.3(1)	58.3(35)
Delivery date	10.0(3)	33.3(20)
TT Injection	20.0(6)	60.0(36)
IFA tablets	13.3(4)	56.7(34)
Blood test	13.3(4)	31.7(19)
Sonography	13.3(4)	5.0(3)
Do not know	6.7(2)	0.0(0)
Not attended/No need/ gone to private	13.3(4)	5.0(3)

**Table CI. 11: Place of delivery**

<b>Place of delivery</b>	<b>Men (n=30)</b>	<b>Women (n=60)</b>
Government hospital	43.3(13)	51.7(31)
Private hospital	36.7(11)	33.3(20)
Private clinic	0.0(0)	10.0(6)
Home delivery	20.0(6)	5.0(3)

**Table CI. 12: Reasons for home delivery**

<b>Reasons for home delivery</b>	<b>Men (n=30)</b>	<b>Women (n=60)</b>
Lack of facilities/quality	0.0(0)	3.3(2)
Long distance from the house	3.3(1)	0.0(0)
We are comfortable with this	10.0(3)	1.7(1)
Any other	6.7(2)	0.0(0)

NA	80(24)	95(57)
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**Table CI. 13: Vaccinated child**

<b>Vaccinated Child</b>	<b>Men (n=30)</b>	<b>Women (n=60)</b>
Yes	100(30)	96.7(58)
No	0(0)	3.3(2)

**Table CI. 14: Reason for not vaccinating**

<b>Reason for not vaccinating</b>	<b>Men (n=0)</b>	<b>Women (n=2)</b>
It will cause harm to the child	-	50.0 (1)
They don't inject the child properly	-	50.0 (1)

**Table CI. 15: Reasons for not using any contraceptives**

<b>Reason for not using any contraceptives</b>	<b>Men (n=3)</b>	<b>Women (n=21)</b>
Husband does not allow	0.0(0)	9.5(2)
Family does not allow	0.0(0)	14.3(3)
Too many side effects	0.0(0)	23.8(5)
Religion forbids	100.0(3)	1.4(1)
No need	0.0(0)	38.1(8)
Husband expired	0.0(0)	9.5(2)

**Table CI. 16: Contraceptive methods used**

<b>Contraceptive methods used</b>	<b>Men (n=27)</b>	<b>Women (n=39)</b>
Male Condom	29.6(8)	30.8(12)
Oral Pills	11.1(3)	30.8(12)

Copper-T	18.5 (5)	25.6(10)
Tubectomy	33.3 (9)	25.6(10)
Traditional method (Rhythm/Withdrawal)	7.4 (2)	0(0)
Not using any contraceptives	10(3)	35(21)

@ Multiple responses

**Table CI. 17: Availability of contraceptive methods**

Contraceptive availability at	Men (n=27)	Women (n=39)
Friend	18.5 (5)	0.0 (0)
Government .hospital	29.6 (8)	30.8 (12)
Health Post	3.7 (1)	7.7 (3)
Medical shop	7.4 (2)	30.8 (12)
Private clinic	7.4 (2)	20.5 (8)
Relatives/ neighbour/ angan wadi/ doctor/Compounder	3.7 (4)	0.0 (2)
Not reported/Don't know	18.5 (5)	5.1 (2)

**Table CI. 18: Side effects due to contraceptive**

Side effects due to contraceptives	Men (n=27)	Women (n=39)
Yes	3.7 (1)	35.9 (14)
No	88.8 (24)	53.9 (21)
Sometimes	7.5 (2)	10.2 (4)

**Table CI. 19: Type of side effects**

Type of side effects	Men (n=3)	Women (n=18)
Weakness	33.3 (1)	27.8 (5)
Body ache/swelling/stomach/head/back	33.3 (1)	22.2 (4)

Nausea	0(0)	5.6 (1)
Heavy menstrual cycle	0(0)	27.8 (5)
Weight increase	0(0)	11.1 (2)
Itching	33.3 (1)	5.6 (1)
Dizziness	0(0)	11.1 (2)
Blackness	0(0)	5.6 (1)
Missing period	0(0)	5.6 (1)

**Table CI. 20: Source of information of contraceptive methods**

Source of information	Men (n=30)	Women (n=60)
Community health visitors	0.0 (0)	8.3 (5)
Health staff in the Health Post	10.0 (3)	40.0 (24)
Media	0.0 (0)	8.3 (5)
Medical shop	6.7 (2)	1.7 (1)
Friend and family	56.7 (17)	36.7 (22)
Doctor	3.3 (1)	6.7 (4)
Husband	0(0)	1.7 (1)
Hospital (Trust Govt./Private)	26.7 (8)	0.0 (0)

**Table CI. 21: Heard of any reproductive health problem**

Heard of Reproductive health problem	Men (n=30)	Women (n=60)
Yes	90.0 (27)	73.3(44)
No	10.0 (3)	26.7(16)

**Table CI. 22: Suffered from reproductive health problem**

Suffered from RH problem	Men (n=30)	Women (n=60)
Yes	20.0(6)	38.3(23)
No	80.0(24)	61.7(37)

**Table CI. 23: Type of reproductive health problems**

Reproductive health	Men (n=6)	Women (n=60)
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<b>problems</b>		
White discharge	0	13
Burning sensation during urination (m/f)	1	5
Increased frequency of urination	2	2
Itching/redness in/ around genital area	0	4
Pain during intercourse(m/f)	2	2
Lower abdominal pain	0	6
Genital lesion	0	1
Loss of sexual desire	0	1
Premature ejaculation	1	0

**Table CI. 24: Treatment taken at**

<b>Treatment taken at</b>	<b>Men (n=6)</b>	<b>Women (n=23)</b>
Public hospital	0	14
Health Post	0	2
Private Clinic	6	12
Homeopathy	0	1
No treatment	0	5

**Table CI. 25: Reason for visiting private hospital**

<b>Reason for private treatment</b>	<b>Men (n=6)</b>	<b>Women (n=12)</b>
Prefer private over public	6	7
Prefer Women doctor	0	5

**Table CI. 26: Satisfied over the service availability at Health Post**



Satisfied with the services available at HP	Men (n=30)	Women (n=60)
Yes	13.3 (4)	53.3 (32)
No	46.7 (14)	26.7 (16)
Can't say	40.0 (12)	20.0 (12)

**Table CI. 27: Experienced any problem while availing treatment at the government health facility**

Experienced problem	Men (n=30)	Women (n=60)
Yes	76.7 (23)	45.0 (27)
No	23.3 (7)	55.0 (33)

**Table CI. 28: Problems faced at government health facility**

Type of problems	Men (n=23)	Women (n=27)
We have to wait in long queues	69.6 (16)	70.4 (19)
Time consuming process	39.1 (9)	55.6 (15)
Doctors are not punctual	4.3 (1)	25.9 (7)
Doctors don't check up properly	26.1 (6)	14.8 (4)
Most of the medicines purchased from outside	13.0 (3)	33.3 (9)
Discrimination of health staff on religious ground	4.3 (1)	11.1 (3)
Negligent attitude of the health staff	21.7 (5)	44.4 (12)
Under trainee doctors	4.3 (1)	0.0 (0)
Far from house	0.0 (0)	3.7 (1)
Misbehavior of doctors	0.0 (0)	7.4 (2)

**Table CI. 29: Suggestions to improve service facilities at the Health Post**

<b>Suggestions</b>	<b>Men (n=30)</b>	<b>Women (n=60)</b>
24 hour medical services	6.7 (2)	35.0 (21)
Delivery services should be available	20.0 (6)	28.3 (17)
Sonography, urine and other important tests	10.0 (3)	31.7 (19)
Availability of lady doctor	10.0 (3)	40.0 (24)
Medicines should be available/ free of cost	40.0 (12)	48.3 (29)
Good treatment & polite behavior from staff	50.0 (15)	45.0 (27)
Good treatment for pregnant women	0.0 (0)	30.0 (18)
Doctors and staff should be punctual and available in time of crisis	6.7 (2)	20.0 (12)
Proper guidance and counseling to pregnant women	0.0 (0)	6.7 (4)
Facilities like bench, fan, water, should be made available to relative of patient's	0.0 (0)	11.7 (7)
T.B. and Diabetic test	0.0 (0)	1.7 (1)
Doctors should be see daily, bigger registration window, back data	1.7 (1)	1.7 (1)
Low cost treatment	0(0)	1.7 (1)
Medicine be available ,cleanliness, bigger hospital,	1.7(1)	5.0 (3)
Not Applicable	0.0 (0)	3.3 (2)

**List of tables  
(Exit interviews)**

<b>Table No.</b>	<b>Particulars</b>
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<b>2.</b>	<b>Age of the respondent</b>
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<b>4.</b>	<b>Number of visits to health facility</b>
<b>5.</b>	<b>Waiting time meet a doctor</b>
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7.	Length time with the doctor
8.	Required services provided
9.	Privacy provided
10.	Respected by service provider
11.	Kind tone of service provider
12.	Care by service providers
13.	Enquiry made by service providers
14.	Questions asked to service providers
15.	Understand the answers given by service provider
16.	Next appointment given
17.	Attended this facility for other services
18.	Services easy & convenient
19.	Suggestions for improving services

### Exit interview

**Table EI.1- Area wise distribution of respondents**

Age	Number	Percent
Bail Bazar (Kurla)	10	23.8
Shivaji Nagar (Govandi)	10	23.8
Malwani (Malad)	10	23.8
Bhiwandi	12	28.6
<b>Total</b>	<b>42</b>	<b>100</b>

**Table EI. 2 - Age of the respondent**

Age	Number	Percent
Up to 19 years	2	4.8
20-24 years	6	14.3

25-29 years	14	33.3
30-34 years	5	11.9
35 years & above	15	35.7
<b>Total</b>	<b>42</b>	<b>100</b>

**Table EI. 3- Time taken to reach to health facility**

<b>Time (minutes)</b>	<b>Number</b>	<b>Percent</b>
Up to 15 minutes	25	59.5
16 minutes & above	17	40.5
<b>Total</b>	<b>42</b>	<b>100</b>

**Table EI. 4 - Number of visits to health facility**

<b>Number of visits</b>	<b>Number</b>	<b>Percent</b>
One visit in a month	22	52.4
Two visits in a month	3	7.1
Three visits in a month	3	7.1
Four visits in a month	5	11.9
Once in 6 months	4	9.6
Once a year	5	11.9
<b>Total</b>	<b>42</b>	<b>100</b>

**Table EI. 5 - Waiting time meet a doctor**

<b>Time (minutes)</b>	<b>Number</b>	<b>Percent</b>
Up to 15 minutes	25	59.5
15-30 minutes	10	23.8
31-60 minutes	4	9.5
One hour & above	3	7.2
<b>Total</b>	<b>42</b>	<b>100</b>

**Table EI. 6 - Consultation with the doctor**

<b>Time (minutes)</b>	<b>Number</b>	<b>Percent</b>
Up to 15 minutes	25	59.5
16-30 minutes	10	23.8
<b>Total</b>	<b>42</b>	<b>100</b>

**Table 7 EI. - Length time with the doctor**

<b>Length of time</b>	<b>Number</b>	<b>Percent</b>
Too short	12	28.6
Too long	2	4.8

Right length of time	28	66.7
<b>Total</b>	<b>42</b>	<b>100</b>

**Table 8 EI. - Required services provided**

Required services provided	Number	Percent
Yes	28	66.7
No	14	3.3
<b>Total</b>	<b>42</b>	<b>100</b>

**Table EI. 9- Privacy provided**

Privacy provided	Number	Percent
Yes	22	52.4
No	20	47.6
<b>Total</b>	<b>42</b>	<b>100</b>

**Table EI. 10 - Respected by service provider**

Respected by service providers	Number	Percent
Yes	30	71.4
No	12	28.6
<b>Total</b>	<b>42</b>	<b>100</b>

**Table EI. 11 - Kind tone of service provider**

Kind tone of service providers	Number	Percent
Yes	32	76.2
No	10	23.8
<b>Total</b>	<b>42</b>	<b>100</b>

**Table EI. 12- Care by service providers**

Cared by service providers	Number	Percent
Yes	22	47.6
No	20	28.6

<b>Total</b>	<b>42</b>	<b>100</b>
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**Table EI. 13 - Enquiry made by service providers**

<b>Enquired by service providers</b>	<b>Number</b>	<b>Percent</b>
Yes	15	35.7
No	27	64.3
<b>Total</b>	<b>42</b>	<b>100</b>

**Table EI. 14 - Questions asked to service providers**

<b>Questions asked</b>	<b>Number</b>	<b>Percent</b>
Yes	14	33.3
Did not have questions	23	54.8
Did not feel comfortable to ask	1	2.4
Doctor/Pvt. doctor was busy	4	9.5
<b>Total</b>	<b>42</b>	<b>100</b>

**Table EI. 15 - Understand the answers given by service provider**

<b>Understood answers</b>	<b>Number</b>	<b>Percent</b>
Yes	14	33.3
Not applicable	28	66.7
<b>Total</b>	<b>42</b>	<b>100</b>

**Table EI. 16 - Next appointment given**

<b>Appointment given</b>	<b>Number</b>	<b>Percent</b>
Yes	25	59.5
No	14	33.3
Not required	3	7.1
<b>Total</b>	<b>42</b>	<b>100</b>

**Table EI. 17 - Attended this facility for other services**

<b>Attended</b>	<b>Number</b>	<b>Percent</b>
Yes	32	76.2
No	4	9.5
Don't know	6	14.3

<b>Total</b>	<b>42</b>	<b>100</b>
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**Table EI. 18 -Services easy & convenient**

<b>Services easy &amp; convenient</b>	<b>Number</b>	<b>Percent</b>
Yes	33	78.6
No	8	19.0
Don't know	1	2.4
<b>Total</b>	<b>42</b>	<b>100</b>

**Table EI. 19 - Suggestions for improving services**

<b>Suggestions</b>	<b>Number</b>	<b>Percent</b>
Provide medicines from health	15	35.7
Should have lady doctor/ proper check up by lady doctor	3	7.1
Clinics crowded- arrange properly, should have more facilities	17	40.5
Staff should behave properly	2	4.8
Don't know	5	11.9
<b>Total</b>	<b>42</b>	<b>100</b>