



Role of Mohalla (Community) Clinics in Providing Primary Healthcare: A Study in Delhi

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Abstract: The paper titled *Role of Mohalla (Community) Clinics in Providing Primary Healthcare: A study in Delhi*, gives insight into the state of primary healthcare for the residents of Delhi. The Government of Delhi introduced the concept of Mohalla Clinics to reduce the burden of secondary and tertiary level hospitals and to meet the health needs of the community. This research was conducted in 11 Mohalla Clinics situated in each district of Delhi. Stratified random sampling technique was used to identify the Mohalla Clinics and purposive sampling was used to identify respondents for the interviews. A multi stakeholder approach was followed to conduct the study with 11 doctors, 84 patients and 6 paramedical staff. Salient findings of the study highlighted that most of the patients felt that the Mohalla Clinics save money, provide doorstep consultation, medicines and diagnostic tests. The Mohalla Clinics were perceived to be easily accessible, available and affordable for majority of the patients. Thereby indicating the increase in the reach of primary healthcare to the community. The study concluded that the Mohalla Clinics had achieved the basic goal of bringing primary healthcare closer to people.

Index Terms: Community Clinics, Government of Delhi, Mobile Medical Units, Mohalla Clinics, Primary Healthcare

I. INTRODUCTION

One of India's largest service sectors is healthcare. Every nation has its own health care program, and the most common aspect is primary health care. Hospitals managed by private people, health practitioners, medical colleges, program administrators, etc. are part of the Indian health system. The primary purpose of the health care system is to provide quality health care services and to improve health status of the community. Generally, people who belong to lower income groups rely on affordable, accessible and available healthcare services around them. In every nation, the primary role of the health care system is to provide quality health

care services and to increase the reach of health care services. Therefore, good delivery of healthcare services plays a vital role and serves as a fundamental input to the health status of the population. Primary care responds to the broad health needs and the epidemiological priorities of the community. It is first level of contact that individuals and communities have with the health system. According to Perry (2013) primary care approach also addresses underlying social and environmental determinants of poor health, including safeguards to ensure access to water, sanitation, nutrition, and education. The main aim of primary care is to focus on the comprehensive and interrelated aspects of physical, mental and social health and wellbeing according to WHO.

A. Importance of Primary Health Care

Primary health care plays a key role in addressing the underlying determinants of health and by emphasizing population-level services that prevent illness and promote well-being and by reducing household expenditure on health. It is a cost-effective way of delivering services, and a best way for countries to move towards universal access. Government of India has expanded its health infrastructure by increasing the number of Primary Healthcare Centers (PHCs), Community Health Centers (CHCs) and district hospitals, huge shortfalls of between twenty to forty percent remain across the country (GOI, 2013). These gaps are particularly large in Bihar, Jharkhand, Madhya Pradesh, and Uttar Pradesh. We are far from meeting the facility to the population as spelled out by Indian Public Health Standards. Besides limited coverage, which is exacerbated by high vacancy rates and absenteeism (Rao et al., 2011).

B. Healthcare Administration in Delhi

The multiplicity of authority in the political sphere is a salient

feature of the city of Delhi, and its healthcare sector is no exception. Healthcare in Delhi is provided by three main administrative organizations the Government of the National Capital Territory of Delhi (GNCTD), the Municipal Corporation of Delhi (MCD) and the Delhi Cantonment Board (DCB). In addition to these three organizations, various private and civil sector organizations also provide healthcare facilities. This research focusses on the services provided by the GNCTD in the healthcare sector. The Department of Health and Family Welfare, GNCTD is responsible for the provision of healthcare to the people of Delhi. The Ministry has various departments and secretaries which report to the Principal Secretary, who in turn reports to the Minister of Health and Family Welfare, GNCTD (Delhi Citizens Handbook, 2017). For administrative purposes Delhi is split into eleven districts and twelve zones. The Chief District Medical Officers (CDMOs) are under the administrative control of Delhi Government Health Scheme (DGHS) and the CDMOs have assigned the responsibility (The State of Health of Delhi, 2017).

C. Genesis of Mohalla Clinics

In 2015 Government of Delhi launched an initiative known as Mohalla Clinics or Community Clinics to provide primary healthcare at the doorsteps of the common people. This idea primarily originated from ancient approach of Medical Mobile Units (MMUs) or Mobile Vans. These MMUs exist across most Asian countries. The mobile vans as clinics provide health services in underserved areas, transfer doctors and different workers along with medicines and provide services to people through a modified tempo or similar vehicles. In early 2014, the then Aam Aadmi Party government in Delhi set to expand the network of MMUs within the state and later in 2015 Mohalla Clinics became a reality (Rai, 2017). The key motive of Mohalla Clinics was to provide primary healthcare services. They play a key role in reforming urban health service delivery, addressing health inequities, strengthening primary health care and the health system in Delhi. There was a need to have a robust linkage with existing programs, such as Urban Primary Health Centers (UPHCs) under National Urban Health Mission (NUHM) and be supplemented with augmented efforts for innovations and other related reforms (Lahariya, 2017). Mohalla Clinics were started to remove congestion from hospitals across the cities and constitute the bottom most layer of 3 tier healthcare system- Primary Health Centers, polyclinics and hospitals. Mohalla Clinics run on a zero-cost to community model, as it is providing free access to medical consultation, medicines and diagnostic tests to the poor (Lahariya, 2017).

II. OBJECTIVES OF THE STUDY

General Objective:

To study the role of Mohalla Clinics in providing primary healthcare services to people in Delhi.

Specific Objectives:

1. To study the staffing pattern and infrastructure available at Mohalla Clinics.
2. To seek the opinion of patients, doctors and staff about the services offered in Mohalla Clinics.
3. To analyze the perceptions of users regarding utility and limitations of Mohalla Clinics.

III. RELEVANCE OF THE STUDY

Health is always the first priority of everyone. We all rely on better health infrastructure, doctors and staff to address our health needs. Delhi is one of the most populated cities in the world with huge scale migration into the city every year. There is a lot of stress on the public facilities in Delhi especially on the health sector. Mohalla Clinics aimed to provide health services at the community level, thereby reducing the load on secondary and tertiary health facilities in Delhi, especially for those who cannot afford costly health services (World Population Review (2017). A study to document the users' experiences and management of Mohalla Clinics will provide insights to improve the services and maintain good practices. This study gives insights on the status of primary health provided by the Government of Delhi to the people. This also shows a clear picture of the health status of the capital of India in terms of user's perspective. This study seeks the opinion of patients, doctors and staff in order to understand the range of services offered at Mohalla Clinics. An analysis of the perceptions of users regarding the health services provided by Mohalla Clinics will be useful in planning the delivery of good primary health care services to the masses. Thus, the study will be able to throw light on the model of health care adopted by the Delhi Government and reflect on the model's acceptance, feasibility and replicability in other cities in India and perhaps the world.

IV. METHODOLOGY

A multi-stakeholder approach was used to study the health services provided by Mohalla Clinics to people. Opinion of patients, doctors and staff was sought to understand the range of services offered. Their perceptions regarding the health services provided by Mohalla Clinics were also studied. This research was conducted in one Mohalla Clinic located in each of the 11 districts of Delhi, namely, North, South, East, West, South-east, South-west, North-east, North-west, Shahdara and Central and New Delhi. Thus, a total of 11 Mohalla Clinics were included in the study sample. The details of sample selection are provided below. The overall study sample design is explained in Table I.

Mohalla Clinics: The sample of Mohalla Clinics was selected by Stratified Random Sampling method. Delhi Government categorized Mohalla Clinics into two categories on the basis of

the nature of the premises, permanent and non-permanent premises. From this list 100 Mohalla Clinics with permanent rented premises were identified. These Mohalla Clinics were further categorized district-wise. Using the random sampling method, one Mohalla Clinic from each of the 11 districts was selected for the study.

Patients: The sample of patients were selected by purposive sampling technique that is patients who have visited their selected Mohalla Clinic more than once in the last 6 months. Thus, the sample included 88 patients (44 men and 44 women, 4 from each Mohalla Clinic.

Mohalla Clinic Staff: A sample of doctors were selected by purposive sampling technique, in which doctors who were posted in the selected Mohalla Clinic for the last 6 months were included. Thus, the sample included: 11 doctors, 11 paramedical staff from each Mohalla Clinic.

The tools used for the Data Collection for the study were an Observation guide for understanding the situation at the Mohalla Clinics, a Semi-Structured Interview Schedule (SSIs) for patients, a Semi-Structured Interview Schedule (SSIs) for Doctors and Staff, Semi-structured interview schedule (SSIs) for Doctors and other support staff.

Table I. The Study Sample Design

Sample	Sample Size	Sampling Technique	Inclusion Criteria
Patients	84	Purposive sampling	Patients who have visited the Mohalla Clinic more than once in the last 6 months from the date of data collection.
Doctors	11	Purposive sampling	Doctors posted in the Mohalla Clinic for 6 months from the date of data collection.
Paramedical Staff	11	Purposive sampling	The staff who were posted in the Mohalla Clinics for 6 months from the date of data collection.

Method of Data Collection:

Primary data collection for the study was done with the approval from DGHS (Directorate General of Health Services) Delhi Government. Data collection started with a rapport formation with the doctor and patients associated in Mohalla Clinics. After that interviews were conducted with each of them separately. Apart from this a separate Observation Guide was prepared to analyze the situation and services available in clinics. Also, short videos were made so as to take the record and use it in further study. All

of which is done by taking proper approval and consent by the doctors, patients and also the higher authorities.

The study was based on multi-stakeholder approach to get the holistic viewpoint about the situation and to understand the core problems. The research was conducted at three levels. Firstly, interviews were conducted with patients, secondly it was conducted with doctors and staff and thirdly there was an observation tool which was made for personal interpretations of the research to seek and analyze the situation. This approach gave a multi-level analysis of the quality primary healthcare provided by the Mohalla clinics in Delhi.

V. RESULTS AND DISCUSSION

The study findings are presented below in terms of awareness of patients regarding Mohalla Clinics, services provided there, challenges faced by them, the scope of improvement, patient satisfaction, and the extent to which doctors disseminated relevant information to all patients.

A. Profile of Patients

Total 84 patients were selected as study sample from eleven Mohalla Clinics situated in different districts of Delhi. Majority of the sample were adult women between 30-59 years of the age. Around 60.7% were women and 39.3% were men More than one-third of the sample was comprised of senior citizens. Further, it was observed that most of the women who were visiting Clinics were house wives, and men were mostly doing service. Most of the patients were literate as per the data, 42.8% of patients were studied up to class 10th, and more than one-third were graduates, in addition only 3.6% were illiterate who were not able to read and write. Further, it was found that majority of the sample were living in joint families.

B. Profile of Doctors and Para Medical Staff

Majority of doctors were between 31-50 years of the age group. Para medical staff working in clinics were in 20-35 years of age group. Basically, all the doctors were well educated and experienced doctors as well as staff. Majority of the doctors has more than 10 years of experience in their respective medical field. All the doctors who were interviewed were males while the para medical staff were both male and females.

C. Physical Accessibility of Mohalla Clinics

In terms of distance, Mohalla Clinics were easily reachable for the patients. Mohalla Clinics were fulfilling their objective of providing primary healthcare at the doorstep. People were satisfied with this concept. The majority of respondents said that it takes only 5-15 minutes to reach Mohalla Clinics from their place. There were around 3-4% who said that it takes around 20-30 minutes because

doctors of a specific Mohalla Clinic refer their patients from one clinic to other clinic depending on the need of the patient. Also, sometimes the Mohalla Clinic situated nearby was not having all the services, that is why they prefer going to the Clinics which were fully operational and working.

Table II. Accessibility of Mohalla Clinics from patients' house (n=84)

Responses	Frequency	%
Less than 5 min	11	13.10%
5-10 min	21	25.00%
10-15 min	31	36.90%
15-20 min	14	16.70%
20-25 min	4	4.80%
30 min or more	3	3.60%
Total (n)	84	100%

Table II shows the accessibility of Mohalla Clinics from the patients' home. The result clearly states that the maximum number of respondents 37% said that the Mohalla Clinic was around 10-15 minutes from their home. Nearly all the patients reported that the Clinics were near their homes. Therefore, it is easily accessible.

D. Effectiveness of medicines provided in Mohalla Clinics

To seek the efficiency and effectiveness of medicines prescribed by the doctors in the clinics the following data was collected. It was asked by the patients to get an idea that the medicines were beneficial or not.

Table III. Opinion about utility of Medicines provided in Mohalla Clinics (n=84)

Responses	Frequency	%
Yes	57	67.85%
No	2	2.40%
Sometimes	25	29.76%
Total (n)	84	100.00%

Table III presents that majority of people stated that the medicines provided in Mohalla Clinics were mostly effective and curative. Hence, this initiative by Government of Delhi provided a positive picture in terms of providing free medicines, free consultation and free diagnostic tests. It shows that patients who were interviewed were happy because they were getting health services free of cost along with some suggestions for improvement.

E. Opinions about the Mohalla Clinics

Mohalla Clinics provides free medicines, free consultation and free diagnostic tests. As depicted in Table IV below, it was found that majority of patients were fully satisfied by the services provided in the clinics, the main reason which was found behind this was that all the services were provided free of cost.

Table IV. Opinions about the Mohalla Clinics (n=84)

Responses	Frequency	%
It is a very good initiative by the government	49	58.3%
It will reduce the burden on hospitals	18	21.4%
It is a good initiative, especially for poor families who can't afford costly health services.	54	64.3%
Total (n)	Out of 84	100%

Out of 84 respondent's majority of respondents said that it was a good initiative especially for those who were unable to access health service and belonged to the lower and middle-income group. The opinions given by the respondents reflects the positive aspects Mohalla Clinics by the Government.

F. Referral Services

All the respondents including patients, doctors and staff who were interviewed said that referral services were provided in Mohalla Clinics. Depending on the patient's need doctors refer them to nearby government hospitals or diagnostic centers which were easily accessible for the patients.

G. Suggestions for Better Functioning of Mohalla Clinics

1. Patients: 82.14% patients suggested that there was a need of improving infrastructural facilities which includes sitting arrangements, fans, lights, reading boards, drinking water facilities, medical equipment, storage facilities etc. Space was the problem faced by the patients, as these clinics were made in a very small area, due to which sometimes patients also need to wait outside on roads. 50% of the respondents suggested to improve cleanliness and sanitation.

2. Doctors and Para Medical Staff: According to the data, 34.5% of doctors suffers from lack of space including lack of storage space for medicines and other medical equipments. Around 24% said that they face shortage of staff too in clinics because it becomes very difficult to manage patients. Major challenges faced by Para Medical Staff were that they get a very low salary as per the work which brings down their motivation.

VI. CONCLUSION

This study was done to understand the present condition of Mohalla Clinics by Delhi Government and to seek the opinions of patients, doctors and para medical staff who were working in the clinic. These evaluations were done on the basis of awareness of patients regarding Mohalla Clinics, services provided there, challenges faced by them, scope of improvement, patient satisfaction, and the extent to which doctors disseminate relevant information to all patients. The study found that the eleven surveyed Mohalla Clinics have done a commendable job in

achieving the basic goal of bringing primary healthcare closer to people. Patients appreciated the proximity of these clinics to their homes. These clinics have elicited positive reactions from the general public which has lauded them for the ease with which they can be accessed.

Majority of the sample were literate adults and senior citizens, of which most of them were women who were housewives. Most of the sample were living in joint families. Whereas in profile of doctors and staff majority who were interviewed were males and were well experienced and qualified doctors. In terms of physical accessibility of Mohalla Clinic it was concluded that clinics were easily accessible for majority of the sample. It was a kind of relief for all the people when quality healthcare is provided at their doorstep. Referral services were provided in each of the Mohalla Clinics. On the basis of the medical treatment doctors referred patients accordingly to local hospitals and dispensaries. Some suggestions given by patients were to improve infrastructural facilities in the Clinic, proper drinking water facilities and proper hygiene and sanitation facilities. Even doctors and staff suggested to increase space and staff members in the clinics to manage the crowd more efficiently. Providing facilities for the disabled or senior citizens was also desired by the respondents.

Thus, a common finding from respondents from all the eleven clinics was that there was a need to improve the infrastructural facilities, proper space and proper time needed for consultation. Many patients were not to be aware of the various government health schemes. Hence, it was concluded that the government needs to make more efforts about to run awareness campaigns and use print, audio and video media to create public awareness about healthcare services in the community and also in the Mohalla Clinics. However, the opportunity of getting free consultation, free medicines and free diagnostic tests drew the respondents towards availing the services of Mohalla Clinics. This certainly helped in reducing the burden of additional out of pocket expenditure for the patients. Hence, Mohalla Clinics were found to be offering very useful and vital primary health services to the community at their door step.

VII. KEY RECOMMENDATIONS

The primary health care services delivery model offered by Mohalla Clinics in Delhi is a very successful model. Free medical services like medicines, diagnostic tests and consultation should be continued in the Clinics in order to make it more affordable for lower strata of the society. The strategy of opening Mohalla Clinics within easy reach of people in all areas should be continued. Improving the basic infrastructure is important to improve service delivery. Ensuring that the Mohalla Clinics are made accessible for the disabled and senior citizens by providing ramps, wheelchairs and stretchers, will increase accessibility of health services to these groups also. Appointment of doctors,

paramedical staff and sanitation staff should be ensured to sustain the delivery of health services. The good practice of offering referral services was much appreciated by the patients and should continue to be offered by the doctors at Mohalla Clinics. It is recommended that healthcare providers like ASHAs, ANMs, Anganwadi Workers and other local groups may be linked with the Mohalla Clinics to ensure better community mobilization and participation for improved community health. Further, it has been established that the Mohalla Clinic (Community Clinic) model of door step delivery health care is not only successful but also much needed. Hence, the Mohalla Clinic (Community Clinic) model should be adapted and replicated by governments in the other states of India, and perhaps anywhere in the world.

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