

CHAPTER 3
BENEFICIARY SURVEY

3 BEBECIARY SURVEY

3.1 OBJECTIVES

The objectives of the study were:

- To identify client's needs for RCH services provided at CHCs, PHCs and SCs
- To assess gaps between services expected by clients and services actually provided at Government facilities and in the home or community
- To analyse quality of care in reproductive and child health services provided at PHC, CHC, and sub-centre from the client's viewpoint
- To identify the problems and priority issues to improve quality of RCH care.

3.1.1 Study items

- Basic information on client: age, sex, education, occupation, etc.
- Reasons for visit to the institution: services that client seeks and expects
- Quality of care
- Distance required to travel, time that to be required, transportation means and cost
- Health education provided by health staff
- Supply of medicine to client
- Satisfactory levels of health / medicinal service provided
- Nutritional intake of pregnant women and children: number of meals a day, contents of meals, etc.

3.1.2 Coverage

The study was conducted in all five districts. The study sites were the same as those selected for the study on the health referral system and human resources. The table below presents the facilities where patients were to be studied.

District	Sub-centres	Sector PHC	Block-PHC	CHC
Damoh	14	7	3	1
Tikamgarh	12	6	2	1
Sagar	5	2	1	1
Chhatarpur	5	2	1	1
Panna	5	2	1	1
Total	41	19	8	5

Face-to-face interviews were conducted using a structured questionnaire. A total of 600 interviews were to be conducted, and 603 were completed. All women of reproductive age attending the health facility during the time interviewers were present at the health facility were interviewed. Because health facilities have very low utilization, it was also necessary to identify patients who had received care in the home and make home visits in order to have an adequate sample. The planned sample distribution of interviews is presented in the following table:

District	Sub-centres	Sector PHC	Block-PHC	CHC
Damoh	3 - 6 / facility	5 - 15	15 - 20	10 - 20
Tikamgarh	3 - 6 / facility	5 - 15	15 - 20	10 - 20
Sagar	3 - 6 / facility	5 - 15	15 - 20	10 - 20
Chhatarpur	3 - 6 / facility	5 - 15	15 - 20	10 - 20
Panna	3 - 6 / facility	5 - 15	15 - 20	10 - 20
Total	200	200	150	50

Client Exit Interview (CEI) survey was carried out at all the selected health facilities, viz. SCs, S-PHCs, B-PHCs and CHCs which were covered during facility survey across all the five districts,

viz. Damoh, Tikamgarh, Sagar, Chhatarpur and Panna. Simultaneously Beneficiary survey was carried out at the home of beneficiaries which was visited by health provider from any one of the health facility viz. SCs, S-PHCs, B-PHCs and CHCs across all the five districts, viz. Damoh, Tikamgarh, Sagar, Chhatarpur and Panna. Both these surveys were conducted in order to identify and assess gaps between services expected by clients and services actually provided either at Government facilities or at home and to analyse the current situation of quality of care of reproductive and child health services provided by government health staff at health institutions or at home from the services user's viewpoints. These surveys further addressed the reasons of low nutrition status of women and children and the problems and priority issues to improve quality of care.

Under the CEI a total of 387 clients were interviewed at the selected health facility in all the five districts. The distribution of client covered at health facilities was 124 clients in Damoh, 79 clients in Tikamgarh, 75 clients in Chhatarpur, 55 clients in Panna and 54 clients in Sagar. Under the Beneficiary survey a total of 216 beneficiaries were interviewed at home in all the five districts. The distribution of beneficiaries covered at home was 88 beneficiaries in Tikamgarh, 84 beneficiaries in Damoh, 29 beneficiaries in Sagar, 6 beneficiaries in Chhatarpur and 9 beneficiaries in Panna. In all a total of 601 services users were interviewed in all the five districts. The distribution of services users covered was 208 in Damoh, 167 in Tikamgarh, 81 in Chhatarpur, 83 in Sagar and 63 in Panna.

3.2 BACKGROUND CHARACTERISTICS OF CLIENTS

This section gives the selected background characteristics of service users, which includes current age, educational attainment, religion, caste, work status and marital status covered across all the selected five districts.

3.2.1 Current age

Table 3-1 shows that overall, 98 percent of service users were reported their age between 16 years and 35 years. This proportion was more or less similar in all the selected districts. Overall, average age of clients was worked out to be as 25 years. The mean age of service users was as high as 27 years in Sagar as compared to 25 years in rest of the four districts.

Table 3-1: Current age

(Base: All Clients)						
Current Age	Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
16-35 yr.	99.4 %	97.6 %	96.4 %	100.0 %	98.4 %	98.3 %
36-45 yr.	0.6 %	2.4 %	3.6 %		1.6 %	1.7 %
Total N	167	207	83	80	64	601
Average (in yr.)	25	25	27	25	25	25

3.2.2 Educational Attainment

Table 3-2 indicates that overall, about 53 percent of service users reported to be literate. This proportion was highest in Chhatarpur (71%) and lowest in Sagar (36%). About 24 percent of the respondents who were literate jointly in all the selected districts reported to be studied between 8th standard to 10th standard, highest proportion being 35 percent in Chhatarpur and lowest being 16 percent in Sagar. Average years of education was worked out to be 8 years in the study area and service users from Chhatarpur and Panna have higher average years of education at 9 years in comparison to 7 years in Sagar.

Table 3-2: Educational attainment

	(in percentage)					
	Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
Whether able to read and write						
Yes	60.5	46.9	36.1	71.3	48.4	52.6
No	39.5	53.1	63.9	28.8	51.6	47.4
Total N	167	207	83	80	64	601
Education attainment						
Up to 5th	21.6	13.5	16.9	10.0	14.1	15.8
6-7 th	2.4	4.8	4.8	7.5		4.0
8-10th	26.9	20.8	15.7	35.0	23.4	24.0
11-12th	6.0	6.3	2.4	12.5	6.3	6.5
12th and above	6.0	1.4	2.4	7.5	4.7	4.0
Total N	167	207	83	80	64	601
Average years of education	8	8	7	9	9	8

3.2.3 Religion and Caste

Majority of the service users across all the selected districts belonged to Hindu religion (ranging from 72% in Sagar to 98% in Panna). Overall, about 47 percent of Hindu service users belonged to other backward caste group. The corresponding proportion was highest in Chhatarpur (53%) and lowest in Damoh (44.7%). The proportion of Hindu service users belonging to scheduled caste was ranging from 13 percent in Panna to about 28 percent in Damoh. Overall, a small proportion of the respondents who belonged to Hindu religion was from general caste group (21%), the proportion being relatively highest in Panna (32%) and lowest in Chhatarpur (16%).

Table 3-3: Religion and caste

	(in percentage)					
	Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
Religion (Base: All Clients)						
Hindu	92.8	95.2	72.3	96.3	98.4	91.8
Muslim	6.0	3.9	26.5	1.3		6.8
Others	1.2	1.0	1.2	2.5	1.6	1.3
Total N	167	207	83	80	64	601
Caste (Base: Those clients who reported their religion as Hindu)						
SC	18.7	28.4	21.7	20.8	12.7	22.1
ST	12.3	8.1	15.0	10.4	7.9	10.3
OBC	45.8	44.7	45.0	53.2	47.6	46.6
General	23.2	18.8	18.3	15.6	31.7	21.0
Total N	155	197	60	77	63	552

3.2.4 Work Status

Table 3-4 reveals that overall, about 42 percent of service users reported to be currently working aside housework. As high as about 55 percent of them reported to be currently working in Sagar as compared to 44 percent in Damoh & Panna, 35 percent in Chhatarpur and 34 percent in Tikamgarh.

Table 3-3 further reveals that overall 42 percent of the respondents reported 'bidi rolling' or other type of work at home as their main occupation. The corresponding proportion was highest for Sagar (79%) and lowest in Panna (3%). Overall, 32 percent of currently working clients were mainly engaged in 'agricultural work'. About 73 percent of currently working clients in Tikamgarh reported the same and this proportion was highest among all the selected districts and lowest proportion was reported from Damoh (1%). Overall, about 15 percent of respondent reported mainly they worked as a labourer.

Table 3-4: Work status

	(in percentage)					
	Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
Whether currently working (Base: All Clients)						
Yes	33.5	44.4	55.4	35.0	43.8	41.6
No	66.5	55.6	44.6	65.0	56.3	58.4
Total N	167	207	83	80	64	601
Main Occupation (Base: Those clients who were currently working)						
Official	3.2	3.2			3.4	2.3
Agricultural Worker	72.6	1.1	12.8	48.3	58.6	31.9
Carpenter/Mason	1.6					0.4
Individual Merchant		1.1		3.4	3.4	1.2
Labour	11.3	15.1	2.1	31.0	31.0	15.4
Domestic Servant		1.1				0.4
Small Scale Merchant (Vendor)		1.1				0.4
Small Scale Entrepreneur (Small Business)	1.6	4.3	6.4	3.4		3.5
Bidi Rolling Or Other Piece Work In The Home	8.1	67.7	78.7	13.8	3.4	42.3
Political	1.6	5.4				2.3
Total N	62	93	47	29	29	260

3.2.5 Marital Status

Table 3-5 indicates that almost all the service users in all the selected districts reported to be married. Only 1-2 clients in Tikamgarh Sagar and Chhatarpur reported to be either separated or divorced. No such cases were reported in Damoh and Panna.

Table 3-5: Marital status

	(in percentage)					
	Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
Currently Married	99.4	100.0	96.4	97.5	100.0	99.0
Separated, Deserted	0.6		1.2	2.5		0.7
Widowed			2.4			0.3
Total N (All clients)	167	207	83	80	64	601

3.3 CURRENT USE OF CONTRACEPTION

Information on current use of any family planning method and use of specific method by the service users is presented in this section.

Table 3-6 reveals that overall, about 38 percent of the respondents reported to use some method of contraception at the time of survey. About 41 percent reported the same in Damoh & Panna, which is relatively highest among all the selected districts and lowest, was reported in Sagar (33%). Overall, about 37 percent of female current users were reported to be sterilised. The corresponding proportion was relatively highest in Sagar (50%) and lowest in Chhatarpur (25%). About 28 percent of current users were reportedly using pills, highest being in Damoh (33%) and lowest being in Sagar (19%). As high as 43 percent of current users reportedly using IUD/Loop in Chhatarpur, which is highest among all the selected districts and lowest, proportion was reported in Sagar (8%). A small proportion of current users, ranging from 4 percent in Chhatarpur to 23 percent in Sagar & Panna, reported to be using condom. Overall, about 2 percent of male clients were sterilised.

Table 3-6: Current users of contraception

	(in percentage)					
	Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
Whether currently using (Base: All clients)						
Yes	38.0	41.1	32.5	35.9	40.6	38.3
No	62.0	58.9	67.5	64.1	59.4	61.7
Total N	166	207	80	78	64	595
Type of Method using (Base: Current Users)						
Female Sterilisation	33.3	43.5	50.0	25.0	26.9	37.3
Male Sterilisation	4.8	1.2		3.6		2.2
Condom/Nirodh	17.5	10.6	23.1	3.6	23.1	14.5
IUD/Loop	17.5	11.8	7.7	42.9	26.9	18.4
Pill	27.0	32.9	19.2	25.0	23.1	27.6
Total N	63	85	26	28	26	228

3.3.1 Desire for More Children

In order to obtain information on fertility preferences, survey asked client: 'Would you like to have (a/another) child or would you prefer not to have any (more) children?'

Table 3-7 reveals that overall, desire for more children was reported to be high, as about 60 percent of non-sterilised service users reported that they wanted more children. The corresponding proportion was highest in Panna (81%) and lowest in Sagar (34%). About 31 percent of non-sterilised respondents reported of not wanting more children, the proportion being highest in Sagar (46%) and lowest proportion being in Panna (12%). Remaining of respondents in all the selected districts reported that either they could not get pregnant or it is up to god or they were undecided on this issue.

Table 3-7: Desire for child

	(in percentage)					
	Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
Desire for Child (Base: Those clients who were not sterilised)						
Want more	62.7	52.7	34.3	78.6	80.7	59.8
Want no more	30.3	37.9	46.3	14.3	12.3	30.7
Can't get pregnant	2.8		1.5			1.0
Up to God	0.7	1.2	7.5	1.4	3.5	2.2
Undecided	3.5	8.3	10.4	5.7	3.5	6.3
Total N	142	169	67	70	57	505

3.3.2 Reasons for visit

This section provides information on the reasons for visiting the health facility on the day of interview or the provider visited the beneficiary at home, whether had an emergency and whether service user had received the information and services. These information have shown in Table 3-8

(1) Reasons for Visit to Facility

In order to understand the reasons for visiting the facility today i.e. on the day of interview, a question "what was the reason for your visit today" was addressed to all the clients who visited any of the selected health facilities across all the five districts. Table 3-8 indicates that among all the reasons cited by clients for visiting health facility, antenatal care emerged as an important reason as overall, 31 percent of clients reported to visit the health facility at the day of interview. The same reason had emerged as an important reason for visiting health facility in Panna (49%), Chhatarpur (45%) and Tikamgarh (42%). 'Swelling in body' came out to be major reason for visiting health facility in Sagar and Damoh, as 35 percent and 28 percent respectively reported the same. Overall, child immunisation and treatment of sick child had also emerged as important reason for visiting health facility at the day of interview.

(2) Reasons for the Provider's Visit at Home

In order to understand the reasons for the visit of provider at home, a question "what was the reason for the visit from the provider" was addressed to all the beneficiaries who were visited by the health provider at home across all the five districts. Table 3-8 indicates that among all the reasons cited by beneficiaries for the visit of health provider, antenatal care emerged as an important reason as overall, 32 percent of beneficiaries reported to be visited by health provider due to this reason. The same reason had emerged as an important reason for the visit from health provider in Tikamgarh (40%), Sagar (28%) and Damoh (22%). Overall, child immunisation (18%), Well Child (14%) and treatment of sick child (13%) had also emerged as important reason for the visit of health provider at home.

(3) Whether Visit is Emergency

Further, for obtaining information on emergency of visit, those respondents were covered only who either visited health facility or provider visited them at home for the treatment of 'sick child'; 'antenatal' care; 'postpartum'; 'gynaecology'; 'curative service for adult' and 'others'. It is clear from Table 3-8 that majority of such respondents reported that the visit was not due to any emergency in Tikamgarh (73%), Damoh (76%), Panna (71%) and Chhatarpur (65%). In Sagar, half of the respondents reported the visit to be for emergency.

(4) Receipt of Services and Information

In response to receipt of services and information for which either the client had visited the health facility or the provider visited the beneficiaries at home, most of the respondents, ranging from 77 percent in Damoh to 98 percent in Tikamgarh reported that they had received the services for which either they visited the facility or the provider visited them. About 8 percent in Sagar and 16 percent in Damoh had reported in negative when they were asked about the receipt of services and information. The corresponding proportion in other selected districts was about 1-2 percent.

(5) Prior Visits

Table 3-8 further reveals that a small proportion of respondents, ranging from about 9 percent in Chhatarpur to 4 percent in Tikamgarh, had reportedly visited other health provider before coming to this facility or the provider's visit to their home. Information regarding provider visited first time, reason of visiting first time before coming to the place etc are not discussed here as the number of cases visiting other health provider before this facility is small.

Table 3-8: Reason for visiting the health facility today

	(in percentage)					
	Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
Reasons for the visit of health facility today						
Well Child	15.2	7.3	5.6	16.2	5.5	10.1
Sick Child	6.3	13.7	46.3	12.2	9.1	15.8
Antenatal	41.8	21.0	1.9	44.6	49.1	31.1
Postpartum	10.1	2.4	0.0	4.1	1.8	3.9
Family Planning	10.1	7.3	1.9	2.7	14.5	7.3
Gynaecology	0.0	2.4	1.9	20.3	0.0	1.0
Child Immunisation	15.2	17.7	7.4	0.0	20.0	16.6
Curative Services to Adults	1.3	0.0	0.0	0.0	0.0	0.3
Swelling in Body	0.0	28.2	35.2	0.0	0.0	14.0
Total N	79	124	54	74	55	386
Reason for the visit of health provider at home						
Well Child	14.8	14.5	13.8		22.2	14.4
Sick Child	11.4	16.9	13.8			13.0
Antenatal	39.8	21.7	27.6	50.0	55.6	32.1
Post Partum	2.3	14.5	10.3			7.9
Family Planning	8.0	15.7	6.9		11.1	10.7
Gynaecology		1.2				0.5
Child Immunisation	22.7	13.3	10.3	50.0	11.1	17.7
Curative Services to Adults	1.1		3.4			0.9
Swelling in Body		2.4	13.8			2.8
Total N	88	83	29	6	9	215
Whether had an emergency						
Yes	27.4	24.4	50.0	35.4	28.9	31.5
No	72.6	75.6	50.0	64.6	71.1	68.5
Total N	95	131	66	48	38	378
Whether received information and services clients wanted						
Yes	97.8	77.2	80.0	92.2	97.6	87.0
No	0.7	15.6	8.0	2.0	2.4	7.4
Partially	1.5	3.0	12.0	2.0		3.6
DK		4.2		3.9		1.9
Total N	135	167	75	51	42	470
Whether visited other health facility before coming to this place						
Yes	4.2	8.2	14.5	8.8	4.7	7.7
No	95.8	91.8	85.5	91.3	95.3	92.3
Total N	167	207	83	80	64	601

3.3.3 Additional Service Received during the Visit

Table 3-9 shows that overall about 15 percent of service users reported that they had also received additional services on the day of visit to the facility or the provider's visit. The corresponding proportion was highest for Damoh (22%) and lowest in Chhatarpur (15%). Table 3-9 also gives information on level of satisfaction of clients during the visit to the facility or the visit of the provider to home. This shows that nearly two-third of the respondents was somewhat satisfied with the services and information that was provided during the visit in all the selected districts except Tikamgarh. In Tikamgarh, about 49 percent of clients were very much satisfied about the services.

Table 3-9 further indicates that overall 69 percent of clients those visited the facility had told that they were not referred by anybody for visiting the facility. This proportion was highest in Sagar (87%) and lowest in Tikamgarh (58%). About 9 percent of respondents in Sagar to 32 percent in Tikamgarh reported that they were referred by ANM/MPW. A very small proportion of clients reported to be referred by doctor, JSR, Dai etc. in all the selected districts.

Table 3-9: Type of additional services provided and person who referred to this Places

	(in percentage)					
	Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
Receive additional service today						
YES	15.0	22.2	12.0	5.0	9.4	15.1
NO	85.0	77.8	88.0	95.0	90.6	84.9
Total N	167	207	83	80	64	601
Additional Services received						
Well Child	56.0	28.3	10.0	25.0	50.0	35.2
Sick Child	16.0	28.3	20.0			20.9
Antenatal	4.0	19.6				11.0
Post Partum		4.3	10.0			3.3
Family Planning	12.0	26.1	40.0	25.0		22.0
Gynaecology		4.3				2.2
Child Immunization	8.0	15.2		25.0	33.3	13.2
Curative Service For Adult				25.0	16.7	2.2
OTHER	4.0	6.5	20.0			6.6
Total N	25	46	10	4	6	91
Did very much/somewhat satisfied or dissatisfied visit today?						
Very satisfied	49.1	12.1	9.6	32.5	31.3	26.8
Somewhat satisfied	50.3	72.5	77.1	65.0	65.6	65.2
Dissatisfied	0.6	14.0	12.0	2.5	3.1	7.3
No opinion		1.4	1.2			0.7
Total N	167	207	83	80	64	601
Did someone refer you for this visit						
No one referred	58.2	66.1	87.0	70.3	69.1	68.7
ANM/MPWF referred	31.6	25.8	9.3	14.9	21.8	22.0
MPWM referred		0.8			1.8	0.5
Doctor or nurse referred		0.8				0.3
JSR referred	1.3					0.3
Dai referred	3.8	4.0	1.9	8.1	1.8	4.1
Friends/relative	5.1	1.6		6.8	5.5	3.6
AWW		0.8	1.9			0.5
Total N	79	124	54	74	55	386

3.3.4 Client's Opinion about the Waiting Time and Consultation Time

Table 3-10 shows that overall average waiting time was worked to be about 11.2 minutes. The mean waiting time was highest in Sagar (19.9 minutes) and lowest in Chhatarpur (6.5 minutes). It seems that the waiting time before being seen by the service provider is not long in all the selected districts. As it gets reflected in the client's opinion about the waiting time, as majority of the respondents opined that the waiting time was all right. In response to service user's opinion about the consultation time, majority of them opined that the consultation time with the provider was all right in all the selected districts.

Table 3-10: Client's opinion about the waiting time and consultation time

	Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
About how long did wait before being seen by service provider? (base is those who visited facility)						
Average time (in minutes)	9.48	13.17	19.87	6.5	6.78	11.16
Do you feel that, waiting time was too long/short or about right? (base is those who visited facility) (in percentage)						
Too long	5.1	25.0	11.1	2.7	3.6	11.7
Too short	1.3	18.5	35.2	6.8	1.8	12.7
About right	91.1	53.2	53.7	89.2	92.7	73.6
No opinion	2.5	3.2		1.4	1.8	2.1
Total N	79	124	54	74	55	386
Did time spent by provider was too long/short or about right (both for client & beneficiary) (in percentage)						
Too long	1.2	10.1	3.6	2.5	3.1	5.0
Too short	1.8	21.3	19.3	1.3	1.6	10.8
About right	94.0	66.7	75.9	96.3	92.2	82.2
No opinion	3.0	1.9	1.2		3.1	2.0
Total N	167	207	83	80	64	601

3.3.5 Client-Provider Communication and Privacy during Consultation

This section provides information about the service user's having questions to be asked to provider, provider permission to these questions and satisfaction gained from the provider's response and whether privacy was maintained.

Table 3-11 delineates that nearly two-third of the respondents in all the selected districts reported to have a question that they wanted to ask during their visit today (on day of interview) or the day of provider's visit and almost all the service users confirmed that the provider gave them permission to ask the question. Most of them who had a question to be asked were satisfied with the response of the provider in all the selected districts. Overall, about 59 percent of service users reported that enough privacy was maintained during the consultation at the time of visit. The corresponding proportion was highest in Tikamgarh (89%) and lowest in Sagar (27%).

Table 3-11: Client-Provider communication and privacy

	Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
(in percentage)						
Did you have any questions you wanted to ask?						
Yes	58.1	72.9	69.9	70.0	56.3	66.2
No	41.9	27.1	30.1	30.0	43.8	33.8
Total N	167	207	83	80	64	601
Did provider let you ask the questions?						
Yes	100.0	90.7	91.4	98.2	100.0	95.0
No		9.3	8.6	1.8		5.0
Total N	97	151	58	56	36	398
Provider respond to your question to your satisfaction?						
Yes	99.0	68.2	60.3	96.4	100.0	81.4
No		21.2	32.8	3.6		13.3
No opinion	1.0	10.6	6.9			5.3
Total N	97	151	58	56	36	398
Did have enough privacy during visit from the service provider?						
Yes	88.6	30.0	26.5	86.3	84.4	59.1
No	9.6	68.1	71.1	13.8	15.6	39.4
DK	1.8	1.9	2.4			1.5
Total N	167	207	83	80	64	601

3.3.6 Receipt of Brochure, Education Material and Medicine/ Injection and Reasons for Not Receiving Medicines

This section gives detail about the receipt of brochure, educational material and type of brochure for education material and medicine/family planning was received and also reasons for not receiving the medicines.

Table 3-12 shows that more than three-fourth of the respondents, ranging from 66 percent in Chhatarpur to 89 percent in Sagar reported that neither they were given or taken any brochure and education material during the visit. Those who were given or taken, a significant proportion of them had take or given antenatal /postnatal care brochure or educational material in the selected districts. Followed by 'immunization' and 'child health'. Overall, a very large proportion of respondent had reported that either client or their child had received the medicine or injection across all the selected districts. Those who had received the medicine, overall about 36 percent of them had received IFA tablets. The corresponding proportion was highest in Chhatarpur (51%) and lowest in Sagar (11%). In Sagar, about 41 percent of clients, who received any medicine, reportedly received 'paracetamol'.

Table 3-12: Receipt of brochure and educational material and medicine/injection and reasons of not receiving medicine

	(in percentage)					
	Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
During visit, were you given any brochures/education material?						
YES	26.9	19.8	6.0	32.5	26.6	22.3
NO	70.7	80.2	89.2	66.3	71.9	76.0
DK	2.4		4.8	1.3	1.6	1.7
Total N	167	207	83	80	64	601
What was the subject of the material?						
FAMILY PLANNING	6.7	24.4		11.5	11.8	13.4
ANTENATAL/POSTNATAL CARE	53.3	24.4		53.8	64.7	44.0
DELIVERY SERVICE		2.4				0.7
HIV/AIDS/RTIs		2.4				0.7
CHILD HEALTH	13.3	26.8		3.8		13.4
IMMUNIZATION/ORS/ARI	26.7	19.5	100.0	30.8	23.5	27.6
Total N	45	41	5	26	17	134
Did you/child recd. any medicine/injection today?						
YES	79.6	75.8	88.0	83.8	87.5	80.9
NO	20.4	24.2	12.0	16.3	12.5	19.1
Total N	167	207	83	80	64	601
Type of medicine/injection						
CONTRACEPTIVES	7.5	7.0	13.7	1.5	7.1	7.4
ORS	12.8	14.6	11.0	11.9	3.6	11.9
CONTRIMOXAZOLE	3.8	3.2	17.8			4.7
CHLOROQUINE, ANTIMALARIAL	1.5	1.3	1.4			1.0
IFA (IRON, FOLIC ACID)	40.6	33.8	11.0	50.7	42.9	35.6
VITAMIN A	1.5	6.4	5.5	7.5	14.3	6.0
PARACETAMOL	3.8	15.3	41.1	6.0	7.1	13.8
ANTIBIOTICS	1.5	9.6	8.2	1.5		4.9
TETNUS TOXOID	38.3	24.2	16.4	44.8	44.6	32.1
CHILD VACCINATION	34.6	22.9	15.1	35.8	42.9	29.0
OTHER	1.5	17.8	31.5			10.9
Total N	133	157	73	67	56	486

3.3.7 Clients Convenience on the Opening Hours of the Facility and Number of Clients Who Turned Away from This Facility

Table 3-13 reveals that almost all the respondents across all the selected districts reported that the duration for which this facility open was convenient for them (84% in Sagar to 100% in Panna). A large proportion (90%) of those who felt the timing is not convenient for them opined that the

convenient time for opening of the facility or the visit of the provider should be around noon (11am to 1pm). A large proportion of respondents, ranging from 79 percent in Damoh to 93 percent in Tikamgarh, had reported that no body had turned them away from the facility during official working hours. Most of them who reported that they were turned away stated absence of the provider or the facility being closed to be the main reasons for the same.

Table 3-13: Clients convenience on the opening hours of the facility and whether any client had turned away from the facility

	(in percentage)					
	Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
Are the hours this facility is open is convenient to you						
Yes	98.2	86.0	84.3	98.8	100.0	92.3
No	1.2	11.1	10.8			5.7
No opinion	0.6	2.9	4.8	1.3		2.0
Total N	167	207	83	80	64	601
Convenient hours						
Morning (7-11)	3.3	8.0	8.3	14.3		6.2
Around noon (11-1 pm)	96.7	86.0	80.6	85.7	100.0	89.7
Early afternoon (1-4 pm)		5.0	8.3			3.3
Late afternoon (4-6 pm)	1.1	14.0	19.4			9.1
Week ends		1.0				0.4
24 hours		5.0	2.8			2.5
Total N	91	100.0	36	7	9	243
Ever been turned away from SC/PHC/CHC during official work hrs.						
Yes	7.2	21.3	19.3	13.8	7.8	14.6
No	92.8	78.7	80.7	86.3	92.2	85.4
Total N	167	207	83	80	64	601
For what reasons were you turned away						
Provider(s) absent, facility closed	91.7	93.2	75.0	100.0	100.0	90.9
Got late	8.3	4.5	25.0			8.0
Due to cost		2.3				1.1
Total N	12	44	16	11	5	88

3.3.8 Clients Convenience on the Location of the Facility

Table 3-14 indicates that over all about 90 percent of clients reported that the location of the visited facility was convenient to them. 99 percent of the service users in Chhatarpur reported the same and lowest being reported in Damoh and Sagar (81%).

Table 3-14: Clients convenience on the location of the facility

	(in percentage)					
	Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
Is the location of that facility is convenient to you						
Yes	97.6	80.7	80.7	98.8	98.4	89.7
No	1.2	17.9	19.3			9.2
No opinion	1.2	1.4		1.3	1.6	1.2
Total N	167	207	83	80	64	601

3.3.9 Health Education

Health education is an important part of any RCH visit, especially among a population that has low levels of literacy and education, and thus few alternatives for learner healthier practices. In general inadequate levels of health education are provided during health care visits. This section provides information about the various topics related to family planning, antenatal care, delivery, postnatal care, RTI, HIV/AIDS, child immunisation, child growth and monitoring, oral dehydration and nutrition that was discussed either individually or in group by the providers at the facility or during their visit to the home of the beneficiaries.

A glance on Table 3-15 clearly indicates that majority of respondents in all the selected districts except Damoh reported that the family planning was not discussed with them during this visit. But in Damoh, about 68 percent of respondents replied in affirmative when asked about family planning discussion. About 43 percent of respondents reported that the providers discussed antenatal care with them. While 61 percent of the respondents in Panna reported this subject was discussed, only 10 percent in Sagar answered in affirmative. Overall 25 percent of respondents reported that the discussion on delivery services was held between them and provider during this visit, highest proportion being reported in Panna (41%) and lowest in Sagar (5%). A low proportion of clients, ranging from 11 percent in Sagar to 44 percent in Damoh, reported that the 'postnatal care' was discussed during this visit. The most frequently neglected topics are sexually transmitted infections as a negligible proportion in all the selected districts reported the providers had discussed about RTI during this visit to facility and HIV/AIDS as about 1 percent in Sagar to 13 percent in Damoh had told that providers had discussed this topic. Overall, about 64 percent of respondents reported that child immunisation was discussed with them during this visit. The corresponding proportion was highest in Damoh (84%) and lowest in Sagar (33%). The providers as reported by 11 percent of respondents in Sagar to 60 percent in Damoh during this visit discussed Child growth and monitoring. Majority of clients reportedly told that the provider not discussed oral dehydration during this visit across all the selected districts. A large proportion of respondents had told that that nutrition was discussed during this visit with the providers in all the selected districts except Sagar.

Table 3-15: Discussion by the health provider during this visit with the Clients on various topics

		(in percentage)					
		Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
Family planning	Yes	33.5	67.6	28.9	16.3	34.4	42.4
	No	66.5	32.4	71.1	83.8	65.6	57.6
	Total N	167	207	83	80	64	601
Antenatal care	Yes	46.7	45.4	9.6	50.0	60.9	43.1
	No	53.3	54.6	90.4	50.0	39.1	56.9
	Total N	167	207	83	80	64	601
Delivery services	Yes	37.1	22.2	4.8	12.5	40.6	24.6
	No	62.9	77.8	95.2	87.5	59.4	75.4
	Total N	167	207	83	80	64	601
Postnatal care	Yes	27.5	44.4	10.8	11.3	23.4	28.5
	No	72.5	55.6	89.2	88.8	76.6	71.5
	Total N	167	207	83	80	64	601
Reproductive tract infections or sexually transmitted disease	Yes		2.9	2.4	5.0	3.1	2.3
	No	100.0	97.1	97.6	95.0	96.9	97.7
	Total N	167	207	83	80	64	601
HIV/AIDS	Yes	4.2	12.6	1.2	2.5	9.4	7.0
	No	95.8	87.4	98.8	97.5	90.6	93.0
	Total N	167	207	83	80	64	601
Child immunization	Yes	61.7	84.1	32.5	52.5	56.3	63.6
	No	38.3	15.9	67.5	47.5	43.8	36.4
	Total N	167	207	83	80	64	601
Child growth & monitoring	Yes	52.1	59.9	10.8	48.8	50.0	48.4
	No	47.9	40.1	89.2	51.3	50.0	51.6
	Total N	167	207	83	80	64	601
Oral rehydration	Yes	23.4	32.9	7.2	38.8	35.9	27.8
	No	76.6	67.1	92.8	61.3	64.1	72.2
	Total N	167	207	83	80	64	601
Nutrition	Yes	79.6	45.4	20.5	83.8	81.3	60.4
	No	20.4	54.6	79.5	16.3	18.8	39.6
	Total N	167	207	83	80	64	601
Other	Yes	1.8	1.0	4.8	1.3		1.7
	No	98.2	99.0	95.2	98.8	100.0	98.3
	Total N	167	207	83	80	64	601

3.3.10 Perception of Service Users Regarding the Type of Health Services Available at the Health Facility

Table 3-16 indicates that majority of respondents in all the selected districts reported that the services related to antenatal care, postnatal care, family planning and immunisation was available at the visited health facility. About 10 percent in Sagar to 53 percent in Tikamgarh reported that the health facility also had services for childcare and growth and monitoring of child. Services related to care for the sick child was reportedly available in less number of health facilities as reported by 25 percent in Chhatarpur to 49 percent in Damoh. A very small proportion of respondents in all the selected districts reported the availability of services related to gynaecology and curative for adult at the health facility. Overall, about 32 percent of clients had reported that services related to delivery or maternity care was available in the facility. The corresponding proportion was about 8 percent in Sagar to 53 percent in Panna.

Table 3-16: Client's knowledge on availability on health services at health facility
(in percentage)

		Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
Antenatal care	Yes	97.6	51.2	31.3	88.8	96.9	71.2
	No	2.4	48.8	68.7	11.3	3.1	28.8
	Total N	167	207	83	80	64	601
Postnatal care	Yes	76.6	45.9	19.3	61.3	75.0	55.9
	No	23.4	54.1	80.7	38.8	25.0	44.1
	Total N	167	207	83	80	64	601
Family planning	Yes	88.6	67.6	45.8	76.3	89.1	73.9
	No	11.4	32.4	54.2	23.8	10.9	26.1
	Total N	167	207	83	80	64	601
Well child care/growth and monitoring	Yes	52.7	24.6	9.6	30.0	35.9	32.3
	No	47.3	75.4	90.4	70.0	64.1	67.7
	Total N	167	207	83	80	64	601
Care of the sick child	Yes	28.1	49.3	34.9	25.0	28.1	35.9
	No	71.9	50.7	65.1	75.0	71.9	64.1
	Total N	167	207	83	80	64	601
Gynaecology	Yes	16.8	1.9		7.5	10.9	7.5
	No	83.2	98.1	100.0	92.5	89.1	92.5
	Total N	167	207	83	80	64	601
Curative for adult	Yes	10.8	8.7	3.6	16.3	10.9	9.8
	No	89.2	91.3	96.4	83.8	89.1	90.2
	Total N	167	207	83	80	64	601
Immunization	Yes	97.0	79.7	67.5	95.0	95.3	86.5
	No	3.0	20.3	32.5	5.0	4.7	13.5
	Total N	167	207	83	80	64	601
Delivery/maternity care	Yes	48.5	17.9	8.4	38.8	53.1	31.6
	No	51.5	82.1	91.6	61.3	46.9	68.4
	Total N	167	207	83	80	64	601
Other	Yes	0.6	0.5	1.2			0.5
	No	99.4	99.5	98.8	100.0	100.0	99.5
	Total N	167	207	83	80	64	601

3.3.11 Service User's Knowledge on Family Planning Methods

This section gives the awareness of respondents about the permanent and temporary family planning methods. This information is presented in Table 3-17. The table reveals that more than 90 percent of respondents in Tikamgarh and Panna were aware of female sterilization as a family planning method. Whereas, in Sagar, this proportion was very low at 58 percent only. Awareness about the male sterilization was relatively low in comparison to women Sterilisation in all the districts, ranging from 5 percent in Sagar to 49 percent in Tikamgarh. Awareness about official modern spacing methods - IUD, Oral Pill and Condom was relatively better in Tikamgarh, Chhatarpur and Panna as compared to Damoh and Sagar. A negligible proportion of clients

reported to be aware of injectables etc. and natural spacing methods such as rhythm and withdrawal across all the selected districts.

Table 3-17: Client's awareness of family planning method

		(in percentage)					
		Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
Female sterilization	Yes	96.4	82.1	57.8	88.8	95.3	85.0
	No	3.6	17.9	42.2	11.3	4.7	15.0
	Total N	167	207	83	80	64	601
Male sterilization	Yes	48.5	18.4	4.8	23.8	28.1	26.6
	No	51.5	81.6	95.2	76.3	71.9	73.4
	Total N	167	207	83	80	64	601
Pill	Yes	95.8	79.2	55.4	91.3	96.9	84.0
	No	4.2	20.8	44.6	8.8	3.1	16.0
	Total N	167	207	83	80	64	601
IUD, loop	Yes	89.2	44.9	30.1	88.8	98.4	66.7
	No	10.8	55.1	69.9	11.3	1.6	33.3
	Total N	167	207	83	80	64	601
Condom, Nirodh	Yes	76.6	34.8	18.1	66.3	81.3	53.2
	No	23.4	65.2	81.9	33.8	18.8	46.8
	Total N	167	207	83	80	64	601
Injectables, depo provera	Yes	0.6	1.0			1.6	0.7
	No	99.4	99.0	100.0	100.0	98.4	99.3
	Total N	167	207	83	80	64	601
Other modern method	No	100.0	100.0	100.0	100.0	100.0	100.0
	Total N	167	207	83	80	64	601
Rhythm, timing	Yes	3.0	0.5	1.2	2.5		1.5
	No	97.0	99.5	98.8	97.5	100.0	98.5
	Total N	167	207	83	80	64	601
Withdrawal	Yes	1.2		1.2			0.5
	No	98.8	100.0	98.8	100.0	100.0	99.5
	Total N	167	207	83	80	64	601
Other traditional	Yes			1.2			0.2
	No	100.0	100.0	98.8	100.0	100.0	99.8
	Total N	167	207	83	80	64	601

3.4 NUTRITION

This section provides details about the food habits of service users, frequency of consuming different food items, frequency of eating meals per day, whether eating meals before, with or after the family. It further gives information about opinion on increasing consumption of food during pregnancy, type of food that should be taken and avoided during pregnancy, after the delivery and service user's willingness to pay for better healthcare.

3.4.1 Whether Takes Vegetarian Food

Table 3-18 shows that overall, 63 percent of client's reported to be vegetarian. The corresponding proportion was highest in Chhatarpur (80%) and lowest in Sagar (52%).

Table 3-18: Food habits

		(in percentage)					
		Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
Are you vegetarian	Yes	65.3	55.6	51.8	80	78.1	63.4
	No	34.7	44.4	48.2	20	21.9	36.6
Total N		167	207	83	80	64	601

3.4.2 Frequency of Consuming Different Food Items

Table 3-19 shows that about 46 percent of clients in Chhatarpur to 60 percent in Damoh reported to consume 'milk, curd, cottage cheese or yoghurt' daily. About 77 percent respondents reported to have 'pulses or beans' daily in all the selected districts. In Panna about 70 percent of respondent reported to be consuming the same daily. As high as about 80 percent of clients in Tikamgarh reported to take 'green leaf vegetables' daily as compared 44 percent to 53 percent in remaining four districts. A small proportion of clients ranging from 4 percent in Sagar to 9 percent in Panna reported to be consuming 'orange coloured fruits or vegetables' daily. But a significant proportion of clients across all the selected districts were taking the same occasionally. Most of the clients in all the selected districts either taking 'other fruits or vegetables' weekly or occasionally in all the selected districts except Sagar, where 40 percent of the clients were consuming the same daily. Considering the food consumption pattern of this area surprisingly a higher proportion of the respondents (21%) used to take eggs weekly basis. The corresponding figures for Damoh and Sagar were higher than the other three districts. A large proportion of clients reported that they had never consumed 'chicken, fish or mutton'. Almost all the clients across all the selected districts reported to be eating 'rice / potatoes / naan / bread' daily.

Table 3-19: Frequency of consuming different food items

		(in percentage)					
		Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
Milk, curd, cottage cheese or yoghurt	Daily	55.1	60.4	59.0	46.3	51.6	55.9
	Weekly	18.6	23.2	21.7	26.3	28.1	22.6
	Occasionally	22.8	11.1	19.3	22.5	20.3	18.0
	Never	3.6	5.3		5.0		3.5
	Total N	167	207	83	80	64	601
Pulses or beans	Daily	74.3	80.2	81.9	71.3	70.3	76.5
	Weekly	17.4	17.4	18.1	7.5	20.3	16.5
	Occasionally	8.4	2.4		21.3	9.4	7.0
	Total N	167	207	83	80	64	601
Green leafy vegetables	Daily	80.2	44.0	43.4	52.5	53.1	56.1
	Weekly	14.4	51.2	49.4	32.5	35.9	36.6
	Occasionally	5.4	3.9	7.2	15.0	10.9	7.0
	Never		1.0				0.3
Total N	167	207	83	80	64	601	
Orange colored fruits or vegetables	Daily	6.0	8.2	3.6	5.0	9.4	6.7
	Weekly	43.7	69.6	69.9	27.5	26.6	52.2
	Occasionally	49.1	18.8	25.3	66.3	64.1	39.3
	Never	1.2	3.4	1.2	1.3		1.8
Total N	167	207	83	80	64	601	
Other fruits & vegetables	Daily	19.8	37.7	39.8	2.5	9.4	25.3
	Weekly	42.5	39.1	32.5	57.5	43.8	42.1
	Occasionally	35.9	19.3	15.7	37.5	40.6	28.1
	Never	1.8	3.9	12.0	2.5	6.3	4.5
Total N	167	207	83	80	64	601	
Eggs	Daily	0.6					0.2
	Weekly	19.2	29.0	28.9	8.8	7.8	21.3
	Occasionally	18.0	16.9	16.9	10.0	17.2	16.3
	Never	62.3	54.1	54.2	81.3	75.0	62.2
Total N	167	207	83	80	64	601	
Chicken/meat/fish	Daily	2.4		1.2	2.5	3.1	1.5
	Weekly	10.8	18.8	20.5	6.3	7.8	14.0
	Occasionally	25.1	27.5	24.1	12.5	6.3	22.1
	Never	61.7	53.6	54.2	78.8	82.8	62.4
Total N	167	207	83	80	64	601	
Rice/potatoes/naan/bread	Daily	97.0	90.8	86.7	96.3	95.3	93.2
	Weekly	1.2	6.3	10.8	1.3	4.7	4.7
	Occasionally	1.2	2.4	1.2	1.3		1.5
	Never	0.6	0.5	1.2	1.3		0.7
Total N	167	207	83	80	64	601	

3.4.3 Frequency of Eating Meals Per Day

Majority of respondents in Sagar (54%) and Tikamgarh (53%) reported to be taking food thrice in a day. Majority of clients in Panna, Damoh and Chhatarpur, about 52 percent to 69 percent reported to be consuming food twice in a day. (Table 3-20)

Table 3-20: Frequency of eating meals per day

	(in percentage)					
	Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
Number of times a day eat a meal						
Once	1.2		2.4	1.3		0.8
Twice	44.9	61.4	39.8	68.8	51.6	53.7
Thrice	52.7	36.7	54.2	30.0	48.4	43.9
Four times	1.2	1.9	1.2			1.2
Five Time			1.2			0.2
Total N	167	207	83	80	64	601

3.4.4 Eating Meals before, with or after Family

Majority of the respondents in the study districts reported of taking meal after the family takes the meal. As high as about 71 percent in Damoh and 66 percent in Sagar reported to be eating meals after the family as compared to 35 percent to 48 percent in the remaining three selected districts. Overall about 34 percent of the service users reported to be eating food with family. The corresponding proportion was highest in Tikamgarh (52%) and lowest in Damoh (24%). (Table 3-21).

Table 3-21: Eating meals before, with or after family

		(in percentage)					
		Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
Do eat meals before/with/after your family	Before	7.2	5.3	1.2	21.3	15.6	8.5
	With family	51.5	23.7	31.3	27.5	31.3	33.8
	After	35.3	70.5	66.3	43.8	48.4	54.2
	As & when feel like	6.0	0.5	1.2	7.5	4.7	3.5
Total N		167	207	83	80	64	601

3.4.5 Opinion about Foods to be Consumed more during Pregnancy

Table 3-22 shows that a large proportion of clients in the entire selected district reported that women should consume more food during pregnancy. In response to the question about type of foods that should be taken more during pregnancy, overall, about 91 percent of clients reported that green leafy vegetables should be taken more during pregnancy. The corresponding proportion was highest in Tikamgarh (93%) and lowest in Sagar (75%). The other foods that should be eaten more during pregnancy were reported as 'milk, curd, cottage, cheese or yoghurt' (85%), 'pulses or beans' (65%) and 'orange coloured fruits or vegetables' (51%).

Table 3-22: Foods that should be consumed more during Pregnancy

	(in percentage)					
	Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
When women are pregnant, should she increase consumption of food?						
Yes	88.0	65.2	53.0	87.5	92.2	75.7
No	12.0	34.8	47.0	12.5	7.8	24.3
Total N	167	207	83	80	64	601
Food which a woman should increase during pregnancy						
Milk, curd, cottage cheese or yoghurt	90.5	74.8	68.2	94.3	94.9	84.8
Pulses or beans	72.8	48.9	72.7	60.0	83.1	65.1
Green leafy vegetables	92.5	91.1	75.0	92.9	94.9	90.8
Orange colored fruits or vegetables	68.0	19.3	22.7	70.0	81.4	51.2
Other fruits & vegetables	23.8	28.9	20.5	34.3	22.0	26.4
Eggs	8.2	11.9	11.4	1.4	3.4	7.9
Chicken/meat/fish	2.0	7.4	2.3	4.3		3.7
Rice/potatoes/naan/bread	9.5	7.4	6.8	17.1	5.1	9.2
Clean food	8.2	17.8	13.6	2.9	3.4	10.1
Hot foods	1.4	2.2	4.5			1.5
Daliya	15.6	6.7	4.5	14.3	10.2	11.0
Sour Brinjal		0.7				0.2
Total N	147	135	44	70	59	455

3.4.6 Opinion about Foods that Should be Avoided during Pregnancy

Table 3-23 shows that more than four-fifth of the respondents had reported that there were certain foods that a pregnant woman should avoid across all the selected districts, except Sagar (52%) and Damoh (69%). Table 3-23 further indicates that overall, about 76 percent of respondents had reported that a pregnant woman should avoid 'hot, spicy food'. This proportion was highest in Panna (96%) and lowest in Damoh (63%). The other foods that should be avoided during pregnancy were mainly 'stale food' (63%) 'unclean food' (59%) and 'cold food' (49%). As can be seen from the table a substantial proportion of the respondents also reported that eggs, chicken, meat and fish should also be avoided during pregnancy.

Table 3-23: Foods that should be avoided during pregnancy

	(in percentage)					
	Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
When a women is pregnant, are there foods she should avoid						
Yes	84.4	69.1	51.8	83.8	81.3	74.2
No	11.4	15.0	21.7	10.0	7.8	13.5
DK	4.2	15.9	26.5	6.3	10.9	12.3
Total N	167	207	83	80	64	601
Food a woman should avoid during pregnancy						
Milk, Curd	2.1	3.5		1.5	1.9	2.2
Pulses Or Beans	1.4	1.4		6.0	1.9	2.0
Green Leafy Vegetables	0.7	1.4	2.3			0.9
Other Vegetables	0.7	4.9	4.7			2.2
Fruits	1.4	0.7	2.3		1.9	1.1
Eggs	27.0	22.4	9.3	31.3	40.4	26.0
Chicken/Meat/Fish	52.5	21.7		65.7	71.2	41.7
Hot, Spicy Food	81.6	62.9	67.4	79.1	96.2	75.6
Cold Food	59.6	18.9	14.0	82.1	90.4	49.1
Unclean Food	83.0	28.0	34.9	65.7	88.5	58.7
Stale Food	85.8	42.0	18.6	82.1	67.3	62.6
Jaggery	10.6	2.8		4.5	7.7	5.8
Papaya, Pine Apple		0.7	7.0			0.9
Pickle	17.7			20.9	7.7	9.6
Mathha, Tea, Chane Ki Dal, Masur Ki Dal		29.4	37.2			13.0
Suran, Brinjal		4.9	2.3			1.8
Lemon		0.7				0.2
Total N	141	143	43	67	52	446

3.4.7 Opinions about Foods that Should be Avoided by the Women after Delivery

Table 3-24 indicates that majority of the clients ranging from 72 percent Sagar to 90 percent in Chhatarpur, reported that there were certain foods that a women should avoid after delivery. Overall, about 58 percent of clients who told about avoiding food after delivery, reported that a women should not take 'cold food' after delivery. The corresponding proportion was highest in Panna (89%) and lowest in Damoh (33%). The other foods that should be avoided after delivery were 'unclean food' (52%), 'stale food' (49%) and 'hot, spicy food' (50%).

Table 3-24: Foods that should be avoided after delivery

	(In percentage)					
	Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
After a women has given birth, are there food she avoid						
Yes	84.4	73.4	72.3	90.0	87.5	80.0
No	10.2	12.1	8.4	6.3	6.3	9.7
DK	5.4	14.5	19.3	3.8	6.3	10.3
Total N	167	207	83	80	64	601
Food a woman should avoid after delivery						
Milk, Curd	5.7	1.3	1.7	1.4	3.6	2.9
Pulses Or Beans	5.7	12.5	3.3	5.6	7.1	7.7
Green Leafy Vegetables	3.5	5.9	16.7			5.0
Other Vegetables		3.3	6.7	1.4	3.6	2.5
Fruits	1.4	0.7	6.7		1.8	1.7
Eggs	20.6	19.1	13.3	19.4	17.9	18.7
Chicken/Meat/Fish	36.9	21.7	3.3	50.0	51.8	31.6
Hot, Spicy Food	70.9	25.0	13.3	63.9	83.9	49.7
Cold Food	70.9	32.9	36.7	79.2	89.3	58.0
Unclean Food	80.1	21.7	21.7	59.7	87.5	52.2
Stale Food	72.3	27.0	21.7	58.3	80.4	50.5
Jaggery	7.1	3.9	1.7	1.4		3.7
Papaya, Pine Apple	0.7	1.3	1.7	1.4		1.0
Pickle	51.1	0.7		54.2	41.1	28.1
Lady Finger/Potato	2.8	41.4	65.0	2.8	1.8	22.7
Rice		7.9	10.0			3.7
Besan, Masur Dal		9.2	15.0			4.8
Total N	141	152	60	72	56	481

3.5 WILLINGNESS TO PAY FOR BETTER QUALITY OF HEALTHCARE

Table 3-25 shows that a majority of respondents, ranging from 63 percent in Sagar to 76 percent in Chhatarpur were willing to pay to government to improve quality of care. Regarding the average amount the respondent was willing to pay for various health cares it can be observed from the table that the service users from Sagar and Damoh were ready to pay comparatively a lower amount for various services in comparison to the other three districts. While the respondents were willing to pay a higher amount (Rs. 195/-) for health care after delivery, the same was very low in case of antenatal care (Rs. 68/-). The average amount to be paid for a packet of contraceptive pills varies from Rs. 7 at the lowest in Sagar to Rs. 16 at the highest in Tikamgarh. The same for a packet of 3 condoms varies from Rs. 5 in Chhatarpur to Rs. 8 in Damoh, Sagar and Panna.

Table 3-25: Willingness to pay to Government to Improve quality of care

	Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
Willing to pay to govt. to improve quality of care (In percentage)						
Yes	73.1	68.1	62.7	76.3	64.1	69.4
No	22.2	16.4	13.3	20.0	31.3	19.6
Someone else decide	3.0	4.3	2.4	2.5	1.6	3.2
DK	1.8	11.1	21.7	1.3	3.1	7.8
Total N	167	207	83	80	64	601
Average amount willing to pay for various services (in Rs.)						
Antenatal care	106	31	34	77	87	68
Packet of contraceptive pills	16	10	7	10	12	12
Packet of 3 condoms	6	8	8	5	8	7
IUD insertion	78	42	52	53	66	62
Tubectomy	178	112	105	166	169	148
Vasectomy	187	96	108	199	208	179
Health care after delivery	265	80	50	273	308	195
Total N	122	141	52	61	41	417

3.6 HEALTH PROVIDER'S COMPETENCY

The beneficiary study looked at health providers' skill using a methodology that compared what the provider did during a consult with what should have been done, commonly called the gold standard. In this case the client's recollection of what the provider did or said was used. While the methodology is generally regarded as less accurate than professional observation of the consult, nevertheless it has the benefit of allowing the opportunity to gather the opinions of the client about the services received. This study looked at three types of RCH services: family planning, antenatal care, and paediatric visits.

3.6.1 Family Planning Quality of Care

Information on family planning quality of care was obtained either from those clients who received family planning services either from the facility or at home from the provider. It also considered those cases where family planning services were received as additional services. As can be seen from the Table 3-26 only 12 percent of the service users received this care in the study area, with a variation of 4 percent in Chhatarpur at lowest to 16 percent in Damoh as the highest. Nearly half of the respondents those who received family planning services reported the reasons for this visit was either for re-supply or follow up. Only a third of the respondents received this either as new acceptors or as restarter.

Table 3-26: Family planning services received

	Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
(in percentage)						
Family Planning services received						
As regular service	9.9	10.6	3.6	2.5	14.1	8.5
As additional service	1.8	5.6	4.8	1.3	0.0	3.3
All type	10.8	16.4	8.4	3.8	14.1	11.8
Total N	167	207	83	80	64	601
Reasons for this visit						
New Acceptor or restart	44.4	33.3	-	66.7	44.4	36.2
Re-supply/follow up visit	55.6	36.4	100.0	33.3	44.4	47.8
Other reasons	-	30.3	-	-	11.1	15.9
Total N	18	33	6	3	9	69

The following should occur during the visit of a new family planning acceptor:

- The provider should describe all methods available to the client (informed choice)
- The client should receive the method of her own choice (voluntary choice)
- The method should be available at the service site

- The provider should tell the client when to return for a follow-up visit.

Nearly all clients reported that providers described other methods. More than 90% of clients received a method during the visit. Four-fifths of them received the method of their choice. A fifth reported that there was a method other than the one they received that they would have preferred to use, including users who would have preferred sterilization, a method that is not offered at this level of the health system. There was only one case where a user did not receive the method of choice because of a stock-out. The weakest point in the protocol was telling clients when to return for a follow-up visit: a third failed to do so, at least according to the recall of the patient, which is a reasonable criterion for this step in the service.

A slightly larger number of clients were making a follow-up visit or were coming for re-supply. These were in the main (85%) users of orals or condoms. In a follow-up the basic protocol calls for the provider to ask if the client is having any problem with the method, resolve it to the client's satisfaction if so, and re-supply the method if the client wishes it. Just under half reported that the provider asked if they were having any problem with the method. Fortunately, 94% reported they were not, so there were too few cases to learn anything about the provider's ability to resolve problems in this study. Almost two-thirds of clients had planned to get a re-supply of the method and all of these plus a few who had not planned to do so received a re-supply. Overall the performance was reasonably strong, but we were unable to make any assessment of the provider's ability to resolve problems. Also, a serious problem in the system is the over-reliance on female sterilization, which has been addressed elsewhere. Because this study was not conducted in hospitals or camps, we were unable to determine the extent of informed and voluntary choice of sterilization acceptors, but this issue is addressed elsewhere in this report in a discussion of satisfaction with the decision.

In focus groups, many people reported contraceptive failures for themselves or others in their communities, generally for pills or tubectomy. While a pill failure may reflect poor patient compliance or poor instructions in use of the method, a tubectomy failure can be explained only by poor provider skills. A sterilization failure should be a rare occurrence, and training should be improved.

3.6.2 Paediatric Care

Information on Well child services was obtained from those clients who visited the facility on the day of interview for Well child or those respondents who were visited by the provider for this purpose at home. As discussed earlier, that a small proportion of service users actually received this care. Therefore there are not enough cases for giving comparative picture among the selected five districts. Hence combined figures are being used during the discussion.

More of the visits under study were paediatric care of a child under three than for family planning. Children in their first year of life accounted for 70% of all under-threes, and they were seen in the lower levels of the health system. In a well child visit, the gold standard calls for the provider to:

- Determine how old the child is
- Weigh the child
- Measure her/his height
- Discuss with the mother how the child is growing
- Discuss the child's nutrition and what to do when the child has diarrhoea or a respiratory problem (major killers of children in this region)
- Provide any immunizations needed
- Set up a return visit
- Discuss the importance of delaying the next pregnancy.

(1) Weight, Height and Growth of Child

This section provides information whether the provider weighed, measured height and talked about the growth of the child with the client.

Table 3-27 reveals that over all 35 percent of clients reported that the provider weighed their child. About 22 percent of clients reported that the height of child was measured and nearly two-third of the respondents told that provider talked to them about the growth of child.

Table 3-27: Weight, height and growth of child

	(in percentage)					
	Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
Did provider weight your child?						
Yes	41.7	36.4	28.6	16.7	37.5	35.3
No	58.3	63.6	71.4	83.3	62.5	64.7
Total N	36	22	7	12	8	85
Did provider measure your child's height?						
Yes	27.8	4.5	14.3	41.7	25.0	22.4
No	72.2	95.5	85.7	58.3	75.0	77.6
Total N	36	22	7	12	8	85
Did provider talk with you about how well your child growing?						
Yes	69.4	52.4	42.9	75.0	75.0	64.3
No	30.6	47.6	57.1	25.0	25.0	35.7
Total N	36	21	7	12	8	84

(2) Child Immunization

Table 3-28 shows that overall about 54 percent of the service users reported that their child had received immunization. Overall about 76 percent of clients reported that the provider had asked them to return for other immunization.

Table 3-28: Child immunization

	(in percentage)						
	Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total	
Did your child receive any immunization during visit	Yes	50.0	50.0	71.4	50.0	75.0	54.1
	No	50.0	50.0	28.6	50.0	25.0	45.9
Total N	36	22	7	12	8	85	
Did provider tell you when to return for other immunization	Yes	77.8	70.0	57.1	83.3	87.5	75.9
	No	22.2	30.0	42.9	16.7	12.5	24.1
Total N	36	20	7	12	8	83	

(3) Discussed about Diarrhoea and ARI among Children

As can be seen from the table below 71 percent of the service users reported that the provider discussed with them regarding the foods the child should take. However, majority of the respondents in Damoh reported such discussions were never held during the visit. Table 3-29 indicates that overall more than 80 percent of respondents reported that the provider had discussed with them about the steps which one should take if child suffer from diarrhoea and another two-third reported there was discussion on the symptoms of respiratory problems among children.

Table 3-29: Discussed about diarrhoea and ARI among children

	(in percentage)					
	Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
Did provider discuss with you what food child should eat?						
Yes	85.7	45.5	57.1	83.3	75.0	71.4
No	14.3	54.5	42.9	16.7	25.0	28.6
Total N	35	22	7	12	8	84
Did provider discuss what to do when child has diarrhoea?						
Yes	86.1	77.3	42.9	100.0	62.5	80.0
No	13.9	22.7	57.1		37.5	20.0
Total N	36	22	7	12	8	85
Did provider discuss danger symptom- child has respiratory problem?						
Yes	35.3	33.3	42.9	25.0	37.5	34.2
No	64.7	66.7	57.1	75.0	62.5	65.8
Total N	34	18	7	12	8	79

(4) Discussed about Importance of Family Planning for Spacing

Table 3-30 delineates that overall two-third of the service providers for whom the visit was for well child consultation had told that the provider had discussed about the importance of family planning for spacing between two births during the visit.

Table 3-30: Discussed about the importance of family planning for spacing

	(in percentage)					
	Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
Did provider discuss importance of FP to space next pregnancy						
Yes	75.0	61.9	57.1	58.3	62.5	66.7
No	25.0	38.1	42.9	41.7	37.5	33.3
Total N	36	21	7	12	8	84

3.6.3 Ante-natal and Postnatal Care

Information on antenatal care was gathered from those respondents who visited the health facility for antenatal care or received the same as additional services.

Antenatal care is important to the successful outcome of a pregnancy and an opportunity to provide education about problems that may require immediate care and other issues in pregnancy and delivery. Enough antenatal care cases were identified to enable us to make reliable observations about their quality (192). The gold standard calls for the provider to:

- Check blood pressure
- Do an abdominal exam
- Listen to the baby's heartbeat
- Give tetanus toxoid and IFA
- Take a history of previous pregnancies
- Answer any questions the woman may have
- Schedule a return visit
- Discuss the progress of the pregnancy with the woman
- Educate the pregnant woman about proper nutrition in pregnancy, breastfeeding, the benefits of delivering in a medical institution, problems that occur during pregnancy, labour, delivery, and the postnatal period that need immediate attention.

It is clear from the previous section that about 21 percent of clients to 49 percent among all the selected districts except Sagar reported to visit the health facility for antenatal care. But in Sagar, only one such case was reported. Therefore during the discussion on antenatal care, Sagar district is excluded. Information on antenatal care was also gathered from those beneficiaries who

were visited by the health provider at home for antenatal care or received the same as an additional service. As discussed earlier, a significant proportion of beneficiaries reported the visit of health provider at home for the antenatal care in Tikamgarh and Damoh.

(1) First Ante-natal Visit

Table 3-31 reveals that except for Damoh and Sagar about 41 percent to 50 percent in Panna, Tikamgarh and Chhatarpur reported that it was their first antenatal visit for pregnancy. In Damoh and Sagar two-third of the service users reported the same.

Table 3-31: First ante-natal visit

	(in percentage)					
	Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
Was the visit was your 1st antenatal visit for pregnancy?						
Yes	43.5	69.6	66.7	50.0	40.6	51.6
No	56.5	30.4	33.3	50.0	59.4	48.4
Total N	69	46	9	36	32	192

(2) Checked Blood Pressure and Examined Abdomen

Table 3-32 indicates overall 52 percent of the respondents reported that provider had checked their blood pressure. While more than two-third of the respondents reported the same in Panna, only 11 percent in Sagar reported actually the provider checked their blood pressure. Table 3-32 further indicates that a larger proportion of the service users i.e., 56 percent in Sagar to 86 percent in Tikamgarh, reported that provider had examined their abdomen. However, only 46 percent of the respondents reported that the provider listened to the baby's heartbeat. Only in case of Chhatarpur a majority of them reported the same.

Table 3-32: Checked blood pressure and examined client's abdomen

	(in percentage)					
	Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
Did provider check your blood pressure?						
Yes	55.1	37.0	11.1	61.1	68.8	52.1
No	44.9	52.2	88.9	38.9	31.3	45.3
DK		10.9				2.6
Total N	69	46	9	36	32	192
Did provider examine your abdomen?						
Yes	85.5	67.4	55.6	72.2	75.0	75.5
No	14.5	28.3	44.4	27.8	25.0	23.4
DK		4.3				1
Total N	69	46	9	36	32	192
Did provider listen to baby's heart beat?						
Yes	44.9	41.3	33.3	55.6	46.9	45.8
No	50.7	50.0	66.7	44.4	50.0	50.0
DK	4.3	8.7			3.1	4.2
Total N	69	46	9	36	32	192

(3) Received TT Injection and IFA Tablets

Table 3-33 shows that proportion of clients receiving tetanus toxoid injection (TT) from provider during the ante-natal visit was 84 percent in Panna, 78 percent in Chhatarpur and Tikamgarh, 74 percent in Damoh. In case of Sagar all the respondents reported that they had received the same. Table 3-33 further reveals that a large proportion of clients (87%) in the selected districts reported to receive IFA tablets from the provider during the visit.

Table 3-33: Received TT injection and IFA tablets

	(in percentage)					
	Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
Did receive injection of tetanus toxoid?						
Yes	78.3	73.9	100.0	77.8	84.4	79.2
No	21.7	21.7		22.2	15.6	19.8
DK		4.3				1.0
Total N	69	46	9	36	32	192
Did receive IFA tablets?						
Yes	87.0	84.8	66.7	94.4	87.5	87.0
No	11.6	10.9	33.3	5.6	12.5	11.5
DK	1.4	4.3				1.6
Total N	69	46	9	36	32	192

(4) Talked about Previous Pregnancies and Birth and Foods Should be Taken during Pregnancy

Table 3-34 delineates that a majority of clients in Tikamgarh, Chhatarpur and Panna reported that the provider had asked about the previous pregnancies and births. A small proportion had reported the same in Damoh (35%) and Sagar (33%). Table 3-34 further shows that majority of clients, ranging 56 percent in Damoh to 88 percent in Panna, had reported that the provider had talked about the foods which respondents should eat during pregnancy.

Table 3-34: Talked about previous pregnancies and foods that should be taken during pregnancy

	(in percentage)					
	Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
Did provider ask you about your previous pregnancy & births?						
Yes		56.5	34.8	33.3	61.1	62.5
No		43.5	58.7	66.7	38.9	37.5
DK			6.5			1.6
Total N		69	46	9	36	32
Did provider talk on what foods you eat during pregnancy?						
Yes		84.1	63.0	55.6	75.0	87.5
No		15.9	32.6	33.3	25.0	12.5
DK			4.3	11.1		1.6
Total N		69	46	9	36	32

(5) Talked about Family Planning and Breast feeding

A significant proportion of respondents in Panna (66%), Tikamgarh (65%) and Damoh (63%) reported that the provider had talked about the family planning after the birth. But a small proportion had reported the same in Chhatarpur (42%). More than two-third of the respondents reported that the provider did talk about the advantages of breast-feeding with them during the visit in Damoh and Panna. But a small proportion in Chhatarpur reported the same (42%). (Table 3-35)

Table 3-35: Talked about family planning and breast feeding

	(in percentage)					
	Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
Did provider talk about family planning after birth?						
Yes	65.2	63.0	55.6	41.7	65.6	59.9
No	34.8	30.4	44.4	58.3	34.4	38.5
DK		6.5				1.6
Total N	69	46	9	36	32	192
Did provider talk about breastfeeding?						
Yes	63.8	76.1	55.6	41.7	71.9	63.5
No	31.9	19.6	44.4	58.3	28.1	33.9
DK	4.3	4.3				2.6
Total N	69	46	9	36	32	192

(6) Talked about the Benefits of Institutional Deliveries and Problems that Might Arise Due to Complication in Pregnancy

Table 3-36 shows that nearly two-third of the respondents reported that the provider talked about the benefits of institutional deliveries. Two-third of clients also reported that the discussion was held between provider and the client about the problem that might have occur during pregnancy that require immediate attention. Only a third of the respondents in Sagar reported the same. More than four-eighth of the respondents in Panna reported such kind of discussion did take place during the visit.

Table 3-36: Talked about benefits of institutional deliveries and problems related to complicated pregnancy

	(in percentage)					
	Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
Did provider talk about benefit of delivery in health centre/hospital?						
Yes		65.2	60.9	33.3	55.6	62.5
No		31.9	28.3	66.7	44.4	33.3
DK		2.9	10.9			4.2
Total N		69	46	9	36	192
Did provider discuss problems that occur during pregnancy that need immediate attention?						
Yes		78.3	47.8	33.3	66.7	67.2
No		20.3	30.4	22.2	33.3	25.0
DK		1.4	21.7	44.4		7.8
Total N		69	46	9	36	192

(7) Knowledge of the Client about the Danger Signs during Pregnancy

Table 3-37 indicates that overall about 62 percent of clients reported 'swelling of hands / face, hypertension' as the danger signs during pregnancy. The other danger signs during pregnancy that require immediate attention were fever (58%), anaemia fatigue (47%) and 'vaginal bleeding and spotting' (27%).

Table 3-37: Knowledge of clients about the danger signs during pregnancy

	(in percentage)					
Danger sign	Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
Problems during pregnancy that requires immediate attention						
Swelling of hands/face, hypertension		73.9	37.0	44.4	61.1	61.5
Vaginal bleeding or spotting		33.3	13.0	22.2	25.0	26.6
Fever		52.2	56.5	66.7	69.4	58.3
Anemia, fatigue		53.6	15.2	33.3	63.9	47.4
Foetus in wrong position		15.9	30.4	22.2	13.9	19.3
Total		69	46	9	36	192

(8) Knowledge of the Client on the Signs of Problem during Labour and Delivery

Table 3-38 indicates that overall about 78 percent of clients were reported to be aware of 'swelling of hands / face' as a danger sign during labour and delivery. The corresponding proportion was 56 percent in Sagar and about 87 percent in Chhatarpur and Panna. Overall 64 percent of respondent reported to be knowing 'labour for more than 12 hours' as a danger sign during labour and delivery. The other signs such as 'cord wrapped tightly around baby's neck' and 'tears, vaginal laceration' was reported to be aware by small proportion of clients.

Table 3-38: Knowledge of the client on the signs of problem during labour and delivery

Signs of problems	(in percentage)					
	Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
Labour for more than 12 hours	81.2	26.1	22.2	75.0	78.1	63.5
Cord wrapped tightly around baby's neck	13.0	6.5	11.1	11.1	15.6	11.5
Tears, vaginal laceration	21.7	17.4		11.1	6.3	15.1
Swelling of hands/face	76.8	71.7	55.6	86.1	87.5	78.1
Others		10.9	11.1			3.1
Total N	69	46	9	36	32	192

(9) Knowledge of Client Regarding the Signs of Problems that Require Immediate Action after Delivery

Table 3-39 shows that overall 57 percent of respondents were reported to be aware of 'heavy vaginal bleeding' as the danger sign after delivery. The corresponding proportion was highest in Panna (78 percent) and lowest in Sagar (11%). The other danger signs after delivery which respondents were aware of is 'baby depressed' (53%) and 'placenta not delivered with in 30 minutes' (42%).

Table 3-39: Knowledge of clients regarding signs of problems after delivery

Signs of problems	(in percentage)					
	Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
Signs of problems require immediate attention for you/baby						
Baby depressed, listless, not moving much	53.6	23.9	44.4	63.9	81.3	52.6
Placenta not delivered within 30 minutes	55.1	23.9	22.2	47.2	40.6	42.2
Heavy vaginal bleeding	62.3	37.0	11.1	66.7	78.1	57.3
Fever, sustained vaginal discharge	39.1	28.3		33.3	31.3	32.3
Convulsions	1.4	34.8	11.1	2.8	12.5	12.0
Other		6.5	11.1			2.1
Total N	69	46	9	36	32	192

3.6.4 Provider Answered Any Question One Might Have, Return for Another Visit and Talked about Progress of Pregnancy

Table 3-40 indicates that more than 90 percent of the clients reported that provider had answered all the questions that client wanted to ask. 89 percent of the respondents reported that the provider did mention about the return visit. A very large proportion of clients reported that the provider had talked about the growth of pregnancy in all the selected districts.

Table 3-40: Provider answered, return for another visit and progress of pregnancy
(in percentage)

	Tikamgarh	Damoh	Sagar	Chhatarpur	Panna	Total
Did provider answer any questions you may have?						
Yes	97.1	80.4	88.9	94.4	93.8	91.7
No	1.4	13.0		5.6	3.1	5.2
DK		2.2	11.1			1.0
Not questioned/not applicable	1.4	4.3			3.1	2.1
Total N	69	46	9	36	32	192
Whether provider return for another antenatal care or you go to SC/PHC/CHC?						
Yes	94.2	78.3	55.6	91.7	96.9	88.5
No	5.8	19.6	44.4	5.6	3.1	10.4
DK		2.2		2.8		1.0
Total N	69	46	9	36	32	192
Did provider tell whether your pregnancy is progress well or not?						
Yes	97.1	82.6	88.9	80.6	100.0	90.6
No	2.9	17.4	11.1	19.4		9.4
Total N	69	46	9	36	32	192