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FUNCTIONING OF ACCREDITED SOCIAL HEALTH ACTIVISTS (ASHAs) IN ICDS: AN EVALUATION

Dinesh Paul*, Shanta Gopalakrishnan** and Priyanka Singh***

ABSTRACT

The aim of the study was to assess the contribution of ASHAs in Integrated Child Development Scheme (ICDS) related activities. Data were collected through interview from 680 respondents comprising ASHAs, health and ICDS functionaries, beneficiaries and community leaders. Respondents were selected through using multi-stage stratified random sampling from five States. On the whole, it was observed that the knowledge of ASHAs in EAG states and North Eastern states was better than non-EAG states regarding care during pregnancy. Knowledge about bathing a newborn, care of low-birth weight babies, cord care, how to keep baby warm, etc., is found to be inadequate among them. Awareness level of ASHAs was found to be low with regard to nutrition and health education (71%) and referral services (41%) among the services provided under ICDS.

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PREVALENCE OF SELECTED ACUTE MORBIDITIES AND CHRONIC MORBIDITIES IN POOR ADULT POPULATION OF DELHI

Ramesh Chander*

ABSTRACT

A cross-sectional study was undertaken in 3000 poor adults of Delhi to determine the distribution of acute and chronic morbidities in the adultpopulation. The tool used for data collection was adapted from AHS household and house listing schedule. The data collection was carried out during June-October 2012. The study showed the distribution of acute morbidities of 14.4 per cent for ARI and 4.6 per cent for Diarrhoea. Agewise distribution of acute illnesses was 12.2 per cent in the age-group of 18-39 years, 17.2 per cent in the age-group of 40-59 years, 21.4 per cent in the age-group of 60-79 years and 60 per cent in the age-group of 80+years. It was found that 31 per cent of the patients preferred Government facilities for treatment while 64.8 per cent of them went to private health facilities. In terms of chronic morbidities, diagnosed chronic conditions such as Diabetes was reported in 1.7 per cent of the cases, Hypertension in 2.9 per cent, Asthma / Ch. Resp. in 0.7 per cent, tuberculosis in 0.5 per cent and Arthritis in 1.3 per cent of the reported cases. For chronic illnesses; 89.1 per cent of the respondents stated that they preferred Government health centres while 9.3 per cent preferred private health facilities.

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JOB SATISFACTION AMONGST CONTRACTUAL AND REGULAR NURSING STAFF IN TWO GOVERNMENT HOSPITALS OF DELHI: A COMPARISON

Sanju Kohli* and Rajni Bagga**

ABSTRACT

Nursing personnel constitute the largest group of health care providers. The outcome of the treatment of patients largely depends on the quality of the medical care which completely depends on the motivation and job satisfaction of health-care providers including nurses. Of late, a sense of dissatisfaction among the nursing fraternity has been witnessed due to shortage of nursing work force, poor working conditions, overload of work, less or no-involvement of the nursing staff in policy decisions involving them and lack of career prospect, etc. With the objective of comparing the job satisfaction-level amongst the contractual and regular nursing staff, this study was undertaken in two Government-run hospitals-Safdarjung Hospital and Vardaman Mahavir Medical College (SJH&VMMC), and Guru Teg Bahadur Hospital (GTBH). An exploratory research using interview schedule was undertaken to compare the job satisfaction level of nurses in these two hospitals. It was found that 40 per cent of the contractual staff stated to be overall satisfied with regard to their jobs in comparison to 85 per cent of the regular staff. The reasons for the lower satisfaction-level amongst the contractual staff were hugedifference in salaries, lack of job security and no career prospect.

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INTRA AND INTER-FAMILY INFLUENCES ON ORGAN DONATION AND TRANSPLANTATION

Reeta Dar*, Indu Grewal*, Anil Kumar** and S. V. Adhish***

ABSTRACT

The demand of organs is much higher than the supply in many countries. India needs more than 200000 organs every year. About 150000 kidneys and 20000 livers are required annually whereas only 3500 kidneys and 500 livers are transplanted every year and most of these transplant surgeries occur because of live donation mostly from family members. Many people advocate that a legal sanction for organ donation and transplant would put an end to unethical practice of organ trafficking, transplant tourism, sale of organ donation, etc. India and USA have family-centric single opt-in mechanisms where it is the family which has the last say in donating their relative's organs, irrespective of the will of the donor himself. Sweden and Denmark have the single opt-in system but the option to donate lies with the donor himself and family members cannot go against his/her wish.

It took India more than two decades to legalize organ donation from a brain stem-dead person which was made legal in 1994 with the Parliament enacted the law named the Transplantation of Human Organs Act 1994. Under the Act, near relatives i.e., mother, father, siblings, son, daughter, grandparents, grandchildren and spouse can donate organs to their family members in case the need arises¹¹. In these relations, it is believed that no financial transactions are made and such donations take place out of love and affection only. Swap-transplant was added in the amendment of the Act in 2011.

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DEMAND FOR CONTRACEPTION IN EAG STATES OF INDIA: FAMILY PLANNING STRATEGIES TO MEET THE UNMET NEED

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ABSTRACT

The study highlights factors influencing demand for contraception for spacing as well as limiting births in Empowered Action Group (EAG) states of India. Data on socio-economic, demographic and programme factors affecting demand for contraception have been drawn from the third National Family Health Survey (NFHS-3), 2005-06. The survey covered all the 29 states in India accounting more than 99 per cent of India's population. This study is confined to eight EAG states viz. Uttar Pradesh, Bihar, Rajasthan, Madhya Pradesh, Odisha, Jharkhand, Uttarakhand and Chattisgarh. The primary data pertain to 30285 currently married women aged 15-49 years in the EAG states. The Multinomial Logit Regression analysis has elicited relative significance and directions of effects of the selected socio-economic and demographic variables on the four components of demand for contraception viz. unmet and met need of contraception for spacing and limiting births. Multiple classification analysis suggests that strengthening of IEC component on family planning needs to be prioritized, misapprehensions on side-effects and health risks of contraception, alleviation of son-preference in the society, improvement in girls' enrolment in schools and women's education, women's gainful employment, mandatory implementation of legal age at marriage, reduction in infant and child mortality, involvement of village level health functionaries like ANMs, ASHAs, LHVs, etc. would not only reduce the unmet need but also enhance demand for contraception in the demographically backward EAG states of India. Rather simultaneous efforts on the supply-side along with demand-side factors influencing contraception would facilitate faster reduction in fertility and hasten the process of demographic transition and population stabilization in the EAG states of India.

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PATTERN OF ROAD ACCIDENTS SYSTEM RESPONSE AND QUALITY OF SERVICES IN EMERGENCY WARD OF A TERTIARY HOSPITAL IN DELHI

Chaman Prakashy*, V. K. Tiwari**, Sherin Raj T. P.*** and K. S. Nair****

ABSTRACT

The present study was undertaken in the Casualty Department of a tertiary care hospital of Delhi to analyse road accidents and to ascertain patients' satisfaction with the existing casualty services in the hospital. It is also intended to suggest corrective measures on the management of accident cases and desired emergency services. The study population mainly consisted of patients met with road traffic accidents but cases related to railway traffic accidents, fall from buildings and other structures, unknown poisoning and medical illnesses concerning somekind of accidents who attended casualty were also covered. The study was conducted in the Lok Nayak hospital during October- December 2005. During the study period, 350 patients were contacted in the casualty of Lok Nayak Hospital. Data were collected by interviewing patients with the help of semi-structured schedules. The road traffic accidents and assaults constituted 86 per cent of the total cases. Since most of the victims reached the hospital after an hour of the accidents; there is an urgent need for immediate transportation of the affected by effective coordination of all the concerned service providers such as traffic police, civil society, ambulance services, etc.

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