

A Case Study of the Community Health Center in Pfutsero Town, the Highest Altitudinal Town in Nagaland, India

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Abstract: *Community Health Center in Pfutsero Town plays an important role in enhancing the health of the people, catering to their needs in every possible ways. Majority of the residents of the town prefer to go to the nearby state capital Kohima and only a handful of the people prefer to go to the Health Center. The main groups of people who get the benefit are the neighboring villages around the Town. The Center urgently needs the appointment of good specialist doctors; improve its infrastructure by installing new technology like ultra sound, C.T scan and pathological laboratories for the diagnosis of various diseases. Health is Wealth, so the role of the Community Health Center in the Town needs to be regulated and checked frequently to provide better Health facilities to the localities.*

Keywords: Pfutsero, Kohima, Health, Technology, Infrastructure

1. Introduction

Pfutsero town is the highest altitudinal town in Nagaland situated at a high elevation of 2133.60 meters (6998 ft) above sea level. It is located 70 kms away from the state capital of Kohima and mostly inhabited by the Chakhesang tribes. There are eleven localities in Pfutsero Town i.e. Rukizu, Mission, Forest, Ketoupa, Chikri Nasa, Menitsuda, Reku, Zhipa, Public Work Department, Seed Farm and Tese

Colonies. It is an agrarian society, where terrace rice field and shifting cultivations are largely practice and most of the people depend on primary occupation for their livelihoods. The Community Health Center in Pfutsero Town was first established as a Civil Hospital on 1st December 1970 till 1st April 2002. The Center had a thirty bedded capacity with six Doctors and seven staff Nurses, one sister in charge and five, Female Health Workers (F.H.W.) and one ambulance.



Plate no. 1: Community Health Center, Pfutsero Town, Nagaland

2. Database and Methodology

The data for the study have been collected through primary and secondary database source. Primary data have been collected through questionnaires (household survey) and Interview Schedules for Medical Doctors, Records from Community Health Center (Pfutsero) and Government Reports. Secondary sources of data include information obtained from various books, Articles and Journals. Samples are drawn from each locality in the town and the methodology is based on Simple Random Sampling technique.

3. Community Health Center and its Facilities

The Community Health Center in Pfutsero Town provides various schemes and services to the people under the Ministry of Health and Family Welfare, Government of India. There six major such schemes initiated in the Health Center viz:-

- **Integrated Counseling and Testing Center (I.C.T.C.):** Is a scheme to initiate the testing and diagnosis of H.I.V./A.I.D.S patients. It was established in February 2007, where it has tested 351 patients approximately. Monthly average the center used to test about 40-50 patients. During the years 2008-2010, 756 general patients and 465 pregnant mothers were tested in the Center. Out

of which 13 are HIV positive and 5 were HIV positive mothers.

- **Dental Ayush:** It is a scheme for conducting free Dental camps in school to cater to the needs of the children.



Plate no. 2: The author with her aunt (Staff Nurse) in Community Health Center, Pfutsero Town, Nagaland



Under this scheme Dental camps are conducted in school to give free Dental health care.

- **Revised National Tuberculosis Control Programme (R.N.T.C.P.):** It is a scheme in India for the free diagnosis and treatment for tuberculosis patients, under the WHO-recommended Directly Observed Treatment, Short Course (DOTS) strategy to control TB; as One-fifth of globally incidence TB cases occur in India (National Rural Health Mission Report). The center used to test on a day 7-8 patients. The following table shows the records for the last eight years of the number of patients tested and the number of patients tested with positive results.

Table 1: Registration of Patients for T.B. Control Program (2002-2009)

Year	Patients getting tested for T.B.	Percentages	Number of patients with positive results	Percentage
2002	17	0.77	6	2.78
2003	75	3.42	20	9.26
2004	315	14.34	30	13.89
2005	508	23.13	40	18.52
2006	334	15.21	31	14.35
2007	265	12.07	34	15.74
2008	359	16.35	35	16.20
2009	323	14.71	20	9.26
Total	2196	100	216	100

Source: Community Health Center Registration of Patients report for (RNTCP) T.B. Control Programs

- **National Malarial control programme:** It is scheme which provides free medicine to the patients tested positive for malaria. The maximum number of patients getting tested in the Center occurs during summer season, on an average 5 to 6 patients are tested on a day. The following table shows the records for the last two years (2008-2009).

Table 2: Registration of patients for Malarial Control Program

Year	Number of patients tested	Percentage	Number of patients tested positive	Percentages
2008	35	33.65	9	37.50
2009	69	66.35	15	62.50
Total	104	100	24	100

- **Anti Natal Counseling and Post Natal Counseling and Janani Suraksha Yojana (J.S.Y.) National Rural Health Mission:** It is a free medical check-up and counseling given during the time of pregnancy. Janani Suraksha Yojana is a scheme which provides subsidies to women who deliver in the Health Center. An amount of Rs.700 is given to the mother during her delivery. Aha/ link workers who have help the mothers are paid Rs. 200 from town and Rs. 600 from villages. After this scheme was implemented in 2007, more women have preferred to go to the Health Center. However 90% of the women prefer to deliver at home and only a handful of 10% prefer to go to the Health Center for delivery. Medical treatment during pregnancy is very essential, during the survey it has been found that 37% of the women go for regular checkups. 44% goes for checkup sometimes and 19 % doesn't go for checkups at all.

Apart from all these schemes and facilities the Community Health Center also conduct various health awareness campaigns quarterly in a year regarding family planning, T.B. control program, Iodine deficiency, Malaria and HIV/AIDS.

4. Delivery Reports for last ten years in the Health Center (2000-2009)

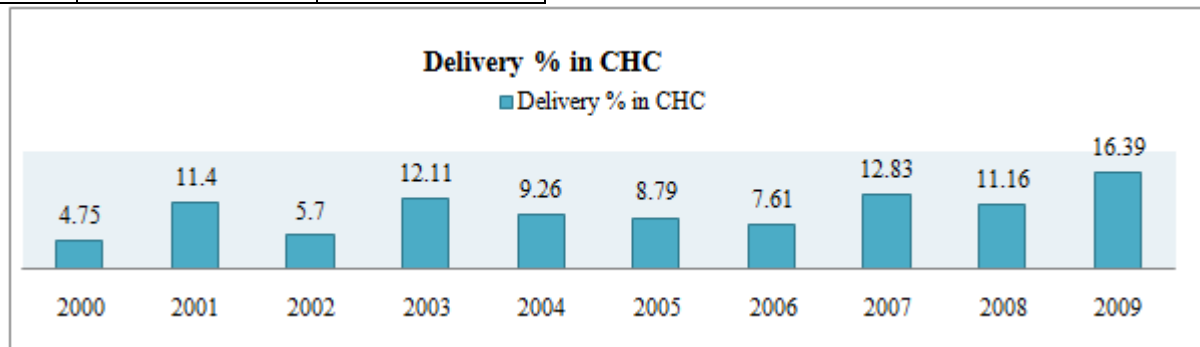
The following reports have been collected from the Community Health Center, Pfutsero. It has been found that after the implementation of Janani Yojana Suraksha (J.Y.S.) Scheme there is some positive response in the outcome of delivery rates in the Health Center.

Table 3: Delivery Reports recorded for ten years (2000-2009)

Year	Number of Delivery	Percentage
2000	20	4.75
2001	48	11.40
2002	24	5.70
2003	51	12.11
2004	39	9.26
2005	37	8.79

2006	32	7.61
2007	54	12.38
2008	47	11.16

2009	69	16.39
Total	421	100



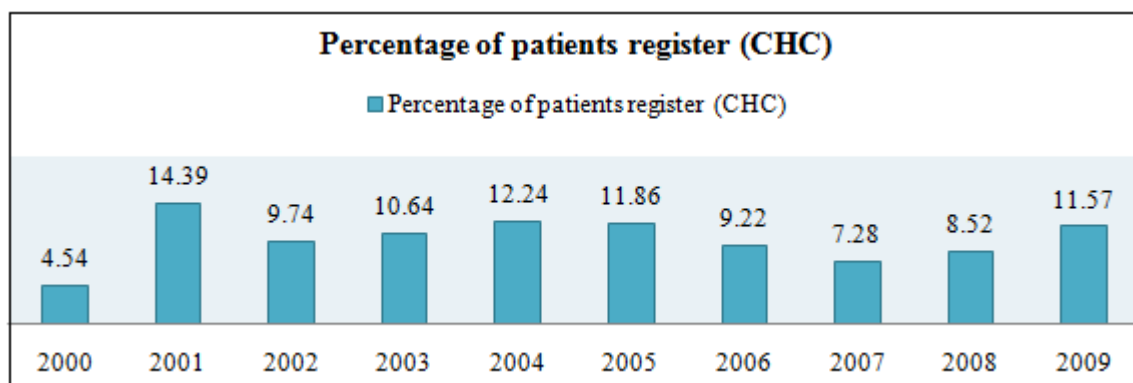
Source: Community Health Center, Pfutsero, Nagaland

5. The number of patient getting registered in the Community Health Center for the last ten years (2000 -2009)

Table 5: Registration of patients in the Community Health Center (2000-2009)

Year	Number of Patients Registered	Percentage
2000	122	4.54
2001	387	14.39

2002	262	9.74
2003	286	10.64
2004	329	12.24
2005	319	11.86
2006	248	9.22
2007	196	7.28
2008	229	8.52
2009	311	11.57
Total	2689	100



Source: Community Health Center Reports for (2000 -2009), Pfutsero

6. An Overview from the Medical Officers about the Community Health Center

The number of patient intake in a month is 250-400, the highest patient intake occurs from April to October during the mid- spring and summer. The number of patient's intake can be related to the seasonal variations. There is a close linkage between the seasons and the number of patient's intake. The Doctor patient ratio is 41:6 approximately. Most of the patients however are from the neighboring areas under the Pfutsero sub-division.

7. Commonly Reported Health Issues in the Health Center

Most commonly reported health problems in the Community Health Center according to the Medical Doctors are Respiratory tract infections, Hypertension, Peptic ulcer and Viral fever. The main factors affecting the health of the people according to the Medical Doctors are due to ignorance, poor socio-economic condition, illiteracy,

unhealthy lifestyles like excessive drinking habits, chewing tobacco and smoking etc.

8. Management of the Community Health Center and Its Facilities

The Community Health Center at present does not have adequate facilities, 74% of the population are not satisfied with the present infrastructural facilities in the Health Center. From the survey it is found that the most urgent need is the appointment of specialized doctors in the Center, laboratories for blood testing needed to be upgraded and new advanced technology, equipments like Ultra Sound, C.T scan etc need to be implemented.

The main problems faced in the Health Center are the lack of specialist doctors, inadequate water supply, irregular of electricity, lack of diagnostic instrument and basic medicines for first aid. Therefore for its smooth and better functioning regularity of Doctors need to be check, improvement of drainage system, regularity of water and power supply, more hygienic toilets, basic instruments and first aid medicines all

these necessities needs to be given the utmost priority towards its development plan.

9. Conclusions

The Community Health Center in Pfutsero Town provides a lot of facilities which are largely beneficial to the nearby villages under the Pfutsero sub-division. Some of the major facilities and schemes provided are Integrated Counseling and Testing Center (I.C.T.C.), T.B. control program, National Malarial control program and recently trauma center has being set up. Majority of the people particularly in the area does not visit the Health Center from the survey 69% of the people rarely visit and 31% never visited the Health Center. Instead the people in the area frequently visit the state capital Kohima, as the Health Center doesn't have adequate facilities.

Health awareness campaigns are conducted quarterly in a year, for HIV/AIDS, T.B. control program, family planning and malaria by the Center. Towards its development the Health Center urgently needs the appointment of good specialist doctors, improve its infrastructure by providing better medical facilities to the people; by initiating the use of new advanced technology like ultra sound, C.T scan and pathological laboratories, for the diagnosis of various diseases. In this way the Community Health Center can fulfill its purpose and served the community better by providing basic medical assistance at the needed time.

10. Acknowledgments

For the present Research article I want to convey my sincere thanks and gratitude to my Aunt who helped me throughout the various stages of data collections from the Health Center. I also want to sincerely thank Ani, Ate and Chera for their valuable suggestions and guidance during the farming of the research design, questionnaires and Interview Schedules.

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