

AWARENESS AND UTILIZATION OF NATIONAL NON COMMUNICABLE DISEASE CONTROL PROGRAMME FOR PREVENTION AND CONTROL OF CANCER DIABETES MELLITUS, CARDIO VASCULAR DISEASE AND STROKE AMONG GENERAL POPULATION.

Nursing

Sowmini T

Lecturer, Co operative college of Nursing, Trivandrum.

Amudha M*

Professor, HOD, Community Health Nursing Department, Sree Gokulam Nursing College, Trivandrum. *Corresponding Author

Aswathy S K

Associate, Professor, Community Health Nursing Department, Sree Gokulam Nursing College, Trivandrum.

ABSTRACT

Non Communicable Diseases (NCD) are the leading cause of adult mortality and morbidity in worldwide. NCDs are rapidly increasing globally and reached epidemic proportions in many countries. Non Communicable Diseases mainly result from lifestyle related factors such as unhealthy diet, lack of physical activity and tobacco use. Changes in lifestyle, behavioral patterns, demographic profile, (aging population), socio cultural and technological advancements are leading to sharp increases in the prevalence of NCD. A Descriptive quantitative research study design was conducted at Nellanadu Panchayath regarding awareness and utilization of national non communicable disease control program for prevention and control of cancer, diabetes mellitus, cardiovascular diseases and stroke among general population. 200 subjects were fulfilling the inclusion criteria they were selected by convenient sampling technique with duration of study was 30 days which was done by structured questionnaire on awareness and checklist for utilization of NPCDCS. Majority 84.5% of the subjects had good awareness and 39.7% of subjects had average utilization of NPCDCS in diabetes mellitus. There was a significant association between type of ration card in awareness and utilization of NPCDCS ($p < 0.01$).

KEYWORDS

Awareness, Utilization, NPCDCS services and NCD Clinic,

INTRODUCTION

The Government of India launched National Program for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS) during the 11th 5 Year Plan NPCDCS was launched in 100 districts in 21 states with the aim to prevent and control these diseases through awareness generation, behavior and life style changes, early diagnosis of persons with high levels of risk factors. NPCDCS program undertake capacity building of health professionals at various levels. Health care providers are trained for health promotion, NCD prevention, early detection and management of Cancer, Diabetes, CVD's and stroke. The objectives of NPCDCS program were to determine the level of awareness and utilization of NPCDCS program among general population and to determine the association between utilization of NPCDCS program for prevention and control of cancer, diabetes mellitus, cardiovascular diseases and stroke with selected socio personal variables. The WHO has compiled a report "On Non Communicable disease country profile 2014" shows the progress that has been made in controlling non communicable disease. The WHO global action plan is designed to thwart the epidemic and reduce premature death from NCD by 25% by 2025. In the ICMR study on assessment of burden of NCDs in India, the prevalence rates of diabetes varied from 103 per thousands to 12 per thousand in these studies. The overall prevalence rate of diabetes in urban and rural areas combined was estimated as 62.47 per thousand. Projection estimates show that the number of people with diabetes in India is 40.9 million and is expected to rise to 69.9 million by 2025.

India is undergoing an epidemiological transition, with the burden of non communicable diseases increasing significantly over the past 25 year. Cardiovascular disease is now the number one cause of death, accounting for 28.1% of deaths in India and 14.1% of life – years lost. Hypertension is one of the primary risk factors for cardiovascular disease, with 54.6% of cardiovascular diseases disability adjusted life style attributes to high systolic pressure. A study was conducted among rural and urban area with and without NCD on 400 adult used by structured questionnaire and the result revealed that 65% of the urban group and 35% of subjects had least awareness of NCD clinic.

A cross sectional study was conducted to assess the awareness of NPCDCS services at Delhi by using a structured questionnaire and the result shows that history of previous screening for hypertension and diabetes was reported by 73% (34.2%) and 40 (35.4%) patients respectively. A medium or high risk of having diabetes mellitus as per the IDRS score was present in most 88.4% patients. On current screening 8.2% men and 8.7% women were identified as undiagnosed hypertension cases. Only 4 % women had undergone a clinical breast exam, and just 8.7% women ever had a Pap smear examination. The utilization of NPCDCS at Karnataka by using a pretested, predesigned

questionnaire and the study result shows that the prevalence of diabetes was found to be 4.8% and the prevalence of hypertension was found to be 4.99% and among the screened population 69% of the ANMs had received training regarding NPCDCS and the all necessary equipment were adequate except for the referral cards.

India needs assessment and planning for a community based diabetes prevention trail at Kerala by used focused group interviews. The study result shows that many environment and personal determinants of these unhealthy lifestyle changes, including less than ideal accessibility to and availability of health services, cultural values and norms, optimistic bias and other misconceptions related to risk, and low expectations regarding one's ability to make lifestyle changes in order to influence health and diseases outcomes. A descriptive interventional study on effect of a health education program on cancer awareness among college students in India used by structured questionnaire, this study revealed that knowledge about cancer was found to be lacking among students as assessed in various spheres such as epidemiology 59.8%, clinical features 22.7%, diagnosis 41.0%, treatment 41.3% and preventive measures 63.9% . Statistically significant improvement in knowledge was found after health education. The percentage of students with poor knowledge was reduced from 43.1% to only 18.4% following health education.

MATERIALS AND METHODS

The study was conducted using a descriptive cross sectional study design at Nellanadu Panchayat in Trivandrum district. Nellanadu Panchayat had 16 wards, from which two wards were selected randomly for the study purpose (ward 12 and 14, Mukkunoor and Alanthara respectively). The convenient sampling technique was used with 200 subjects who were full filled the inclusion criteria such as people residing at Nellanadu Panchayat who above 30 years of age with NCD and able to understand Malayalam. The structured knowledge questionnaire used to collect the data regarding awareness of NPCDCS among general population and Utilization check list were to assess the utilization of NPCDCS services among general population and also socio personal Performa were used to collect the base line data that were in study population. The awareness score was interpreted as Poor 0-8, Average 9 – 16 and Good awareness was 17 – 25 respectively. Utilization checklist was prepared by investigator includes 17 items with two options Yes and No. Yes carried score 1 and No carried score was Zero. The total was interpreted as Poor utilization was 0 – 6, Average 7 – 12 and Good 12 – 17 respectively. Before starting the data collection permission was obtained from Institutional Ethical Committee, Research committee and Nellanadu Panchayath.

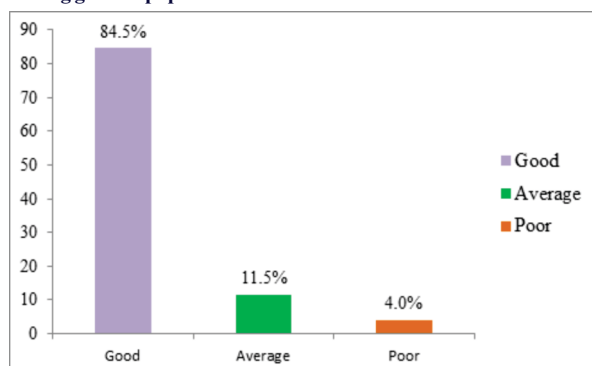
RESULTS AND DISCUSSION:

I. Socio personal variables

The nearly half of the subjects 31.8% were in the age group of above 60

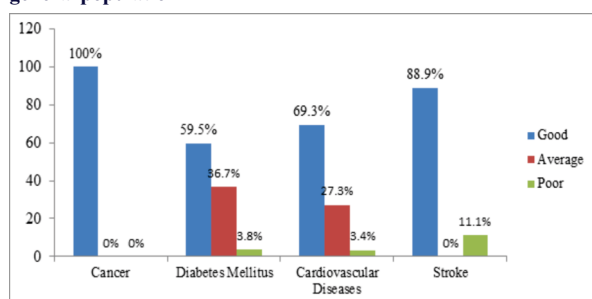
years and most of them were in female 59% when compared to males 41%. Majority (37.5%) of them had completed secondary education whereas only 14% were them in undergraduate. 46.5% of the subjects were in semi skilled workers and majority of them 39.5% had a priority category of pink ration card. Out of 200 subjects related with various NCD, majority of the subjects 50.5% were in cardiovascular diseases, 41.5% subjects had diabetes mellitus, 7% of them had stroke and only 1% of them had a cancer. More than three fourth of subjects 78.5% were had the duration of illness above 24 months. Majority of subjects 89% had treatment from NCD clinic and only 11% had not received treatment from NCD clinic.

II. Level of awareness regarding National Non communicable Diseases Control Program for prevention and control of cancer, Diabetes mellitus, cardiovascular diseases, cancer and stroke among general population.



Most of the subjects had good awareness (84.5%), 11.5% subjects had average and only 4% of them had poor in awareness of NPCDCS regarding prevention and control of diabetes mellitus, cardio vascular diseases, cancer and stroke.

III. Level of utilization regarding National non communicable diseases control program for prevention and control of cancer, diabetes mellitus, cardio vascular diseases and stroke among general population



The above bar diagrams depicts that all of the subjects 100% had good utilization of cancer services, three fourth of subjects 88.9% had good utilization of stroke services, more than half of the subjects 69.3% had good utilization in cardio vascular diseases and 59.5% of had utilization of diabetes mellitus in good, 36.7% of subjects had average utilization of diabetes mellitus services and only 27.3% of subjects had utilized in average services of cardio vascular diseases. In the category of poor, 11.1% of subjects had utilized in stroke services in poor and 3.8% and 3.4% of subjects had utilized in poor category of diabetes mellitus and cardio vascular diseases services respectively.

Chi square test was revealed that was a significant association between awareness and utilization of NPCDCS services for prevention and control of cancer, diabetes mellitus, cardio vascular diseases and stroke among general population with selected socio personal variables of pink ration card.

DISCUSSION:

The major findings of the present study shows that 32.0% of subjects were in the age group of 51-60 and 59% of were in females. Most of them 35.5% subjects were in secondary education and majority of them 46.5% were in semi skilled workers. The majority of subjects 39.5% were in priority category of ration card. More than half of the subjects had cardio vascular diseases and 41.5% of them had diabetes

mellitus and around 78% they had the duration of illness more than two years. Ninety percentage of participate had aware of NPCDCS services and majority of the subjects 100% had taken treatment. More than three fourth of the subjects had good awareness 84.5%. The utilization rate of the NPCDCS services was good in cancer, diabetes mellitus, cardio vascular diseases and stroke. The findings is supported by a study conducted by C. K. Bhagyalekshmi, Babu Prakash which revealed that about 56.28% individual with NCD received NPCDCS services from public health sector.

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