



Sources for sick child care in *India*

One in a series of analyses by SHOPS Plus

July 2018





Purpose of this analysis

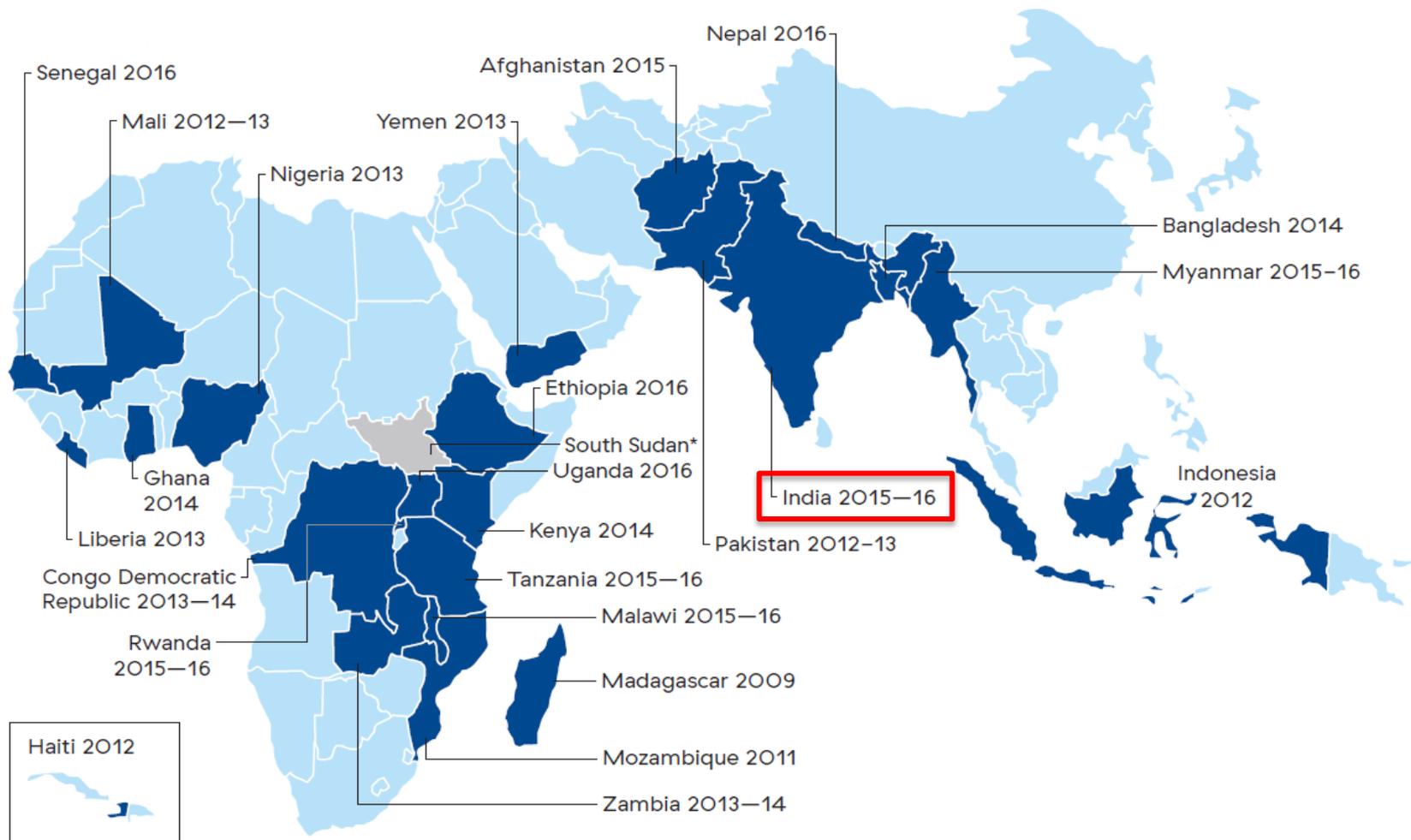
- Understand whether and where Indian caregivers seek advice and treatment for their sick children
- Examine differences in care-seeking patterns by illness and socioeconomic levels, and within public and private sectors
- Share data in a usable format
- **Inform policies and programs to prevent child deaths**





Demographic and Health Survey (DHS) data analyzed from 24 priority countries

USAID priority countries analyzed using Demographic and Health Survey data



*No DHS data are available for South Sudan.



India 2015-16 DHS data: Interviews with mothers of young children



Mothers of children five years old or younger were asked:

- Whether their children had experienced fever, symptoms of acute respiratory infection (ARI), or diarrhea in the past two weeks
 - If yes, asked whether they had sought advice or treatment from any source
 - If yes, asked where they had sought advice or treatment



This analysis will tell you:

1. What percentage of children in India experience fever, ARI symptoms, and/or diarrhea?
2. What percentage of caregivers seek advice or treatment outside the home for children with these illnesses?
3. Among those who seek out-of-home care, what are the sources?
 - a) Public, private, other
 - b) Clinical vs. non-clinical
4. How do patterns of care-seeking vary by:
 - a) Illness: fever, ARI, diarrhea
 - b) Countries within the Asia region
 - c) Wealth quintile: poorest and wealthiest Indians



How frequently do children in
India experience fever, ARI
symptoms, and/or diarrhea?

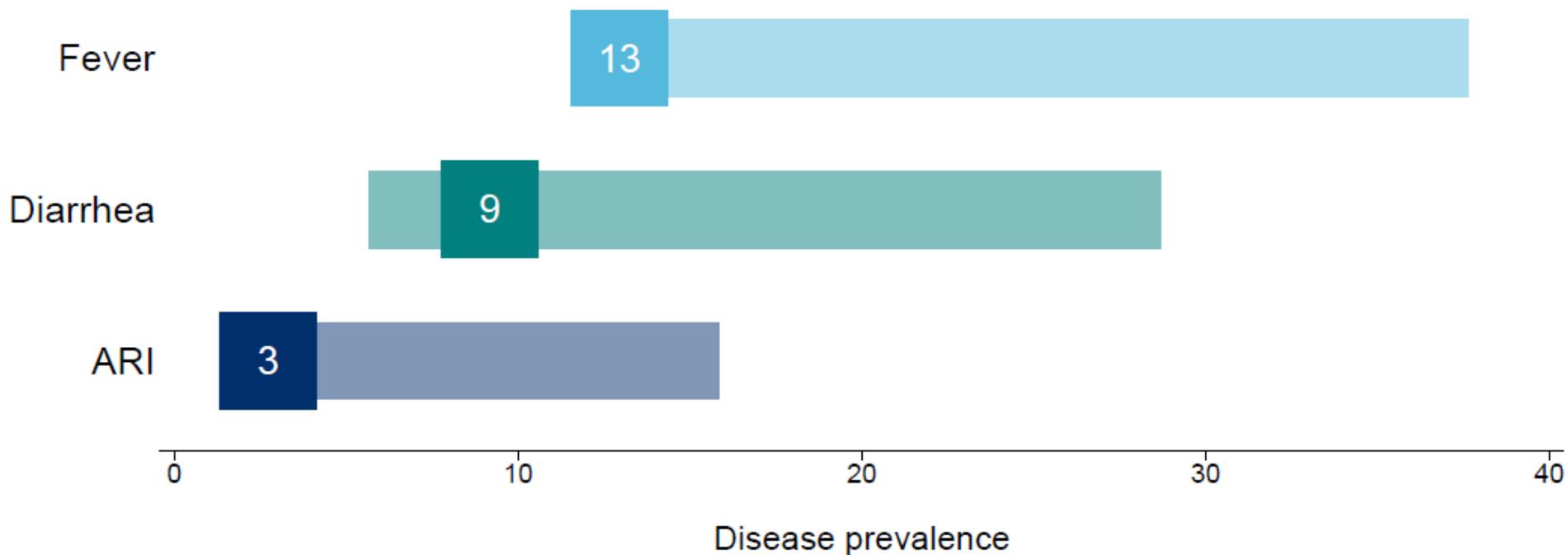




India has lower child illness prevalence compared to many of its neighbors

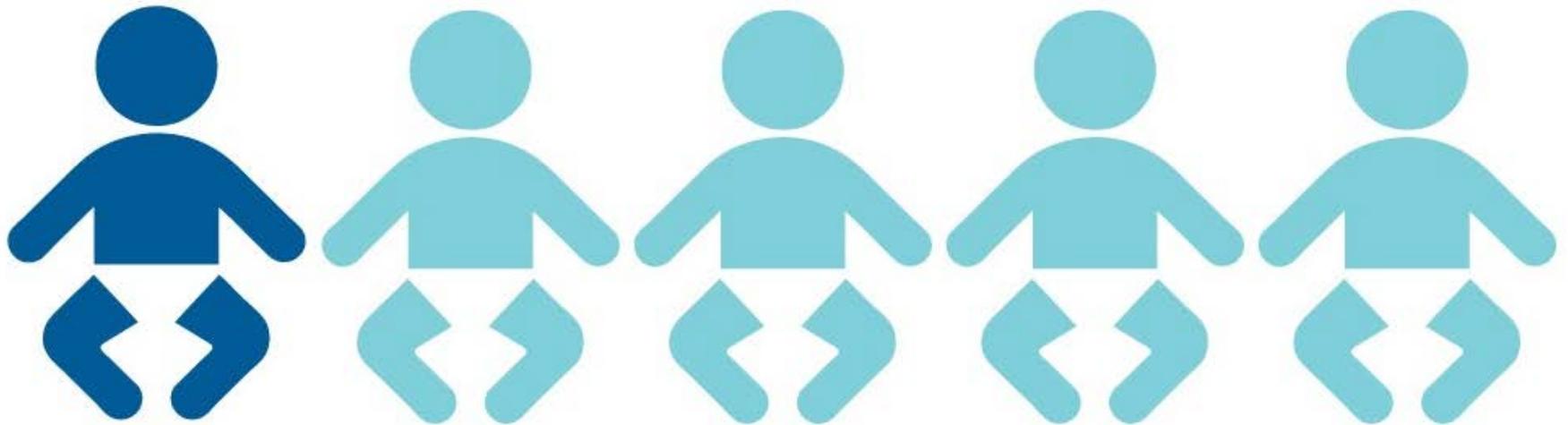
Bars show **range** across Asian USAID priority countries; squares show **India**

Illness prevalence: India and Asia





1 out of 5 children in India experienced fever, ARI symptoms, and/or diarrhea in the last 2 weeks.



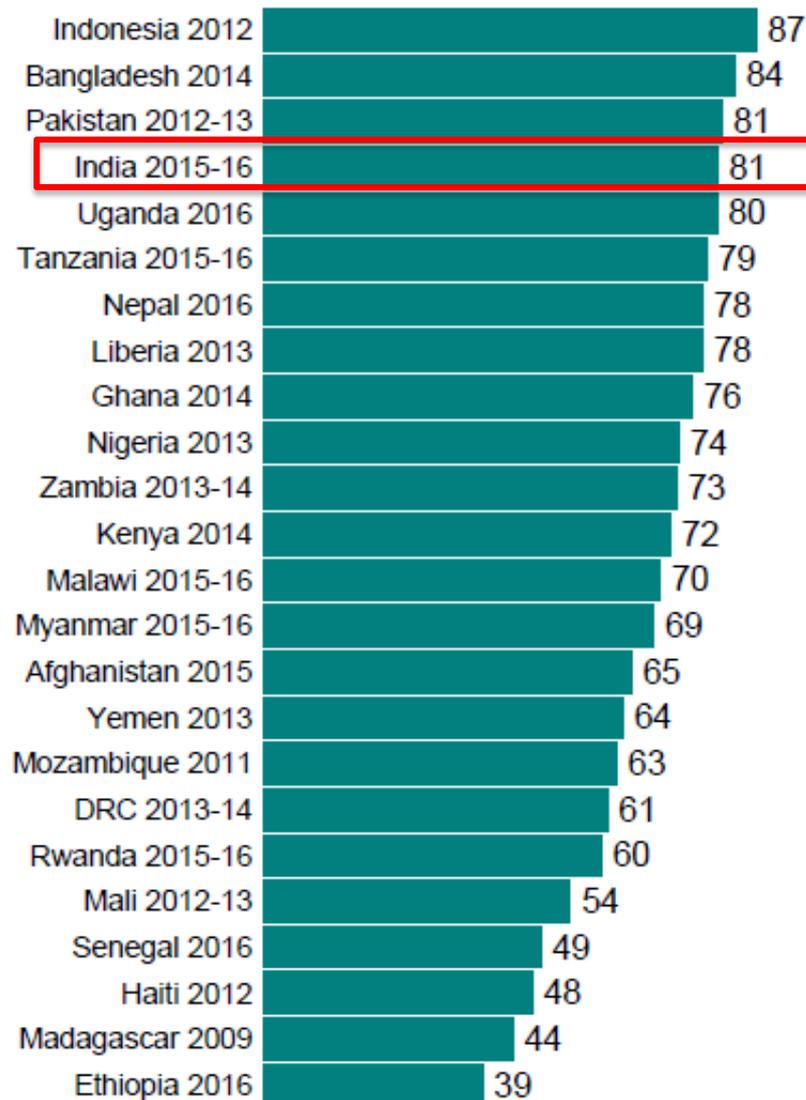


How frequently is out-of-home care sought for Indian children with these illnesses?





India's care-seeking level is among the highest compared to in other USAID priority countries



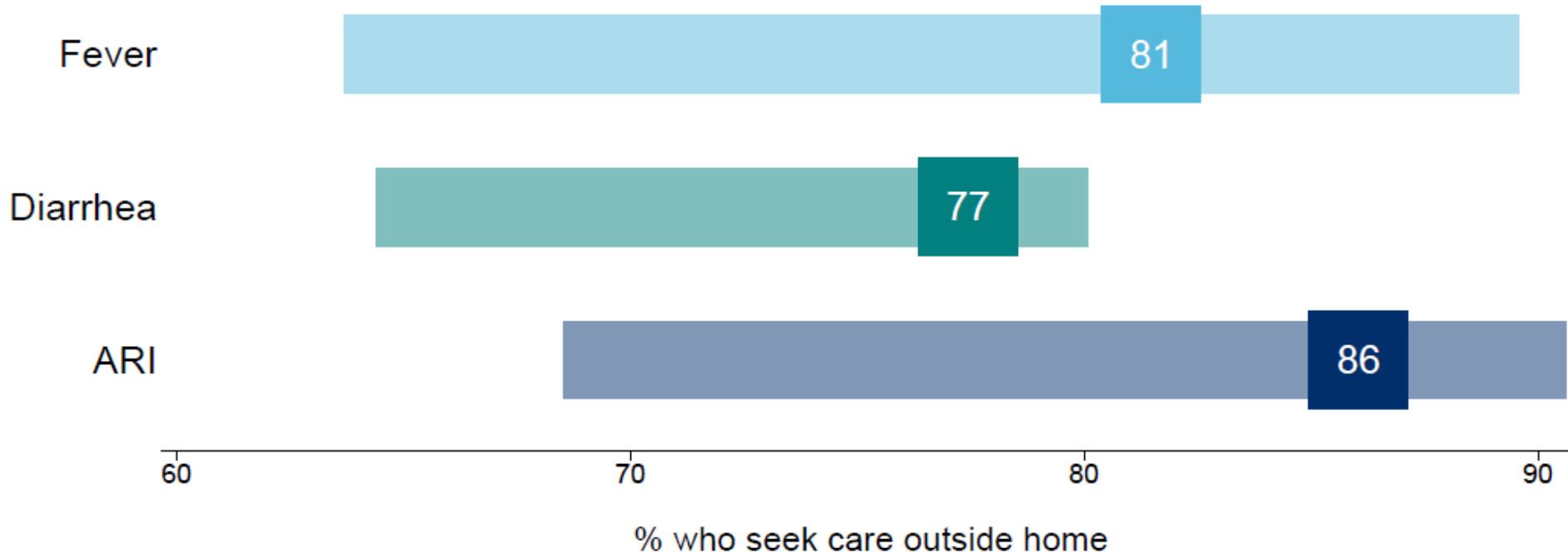
% of caregivers who seek treatment for children with any of the three illnesses in each of the 24 USAID priority countries analyzed



India's care-seeking levels are higher than some of its neighbors'

Bars show **range** across Asian USAID priority countries; squares show **India**.

Caregivers who seek care outside the home: India and Asian priority countries





Among Indians who seek out-of-home care, what are the sources?

Public, private, other





Sources of care

Public sector	Private sector	Other
<ul style="list-style-type: none">· Hospitals, rural hospitals, government dispensaries· Primary health centers, urban health posts, urban family welfare centers, community health centers, sub-centers· Integrated child development scheme centers (<i>Anganwadi Centers</i>)· Mobile clinics· AYUSH facilities· Accredited social health activists (ASHAs)	<ul style="list-style-type: none">· Private clinics, hospitals, doctors, paramedics, and AYUSH facilities· Nongovernmental organizations· Pharmacies, shops, and drugstores	<ul style="list-style-type: none">· Traditional healers· Friends and relatives



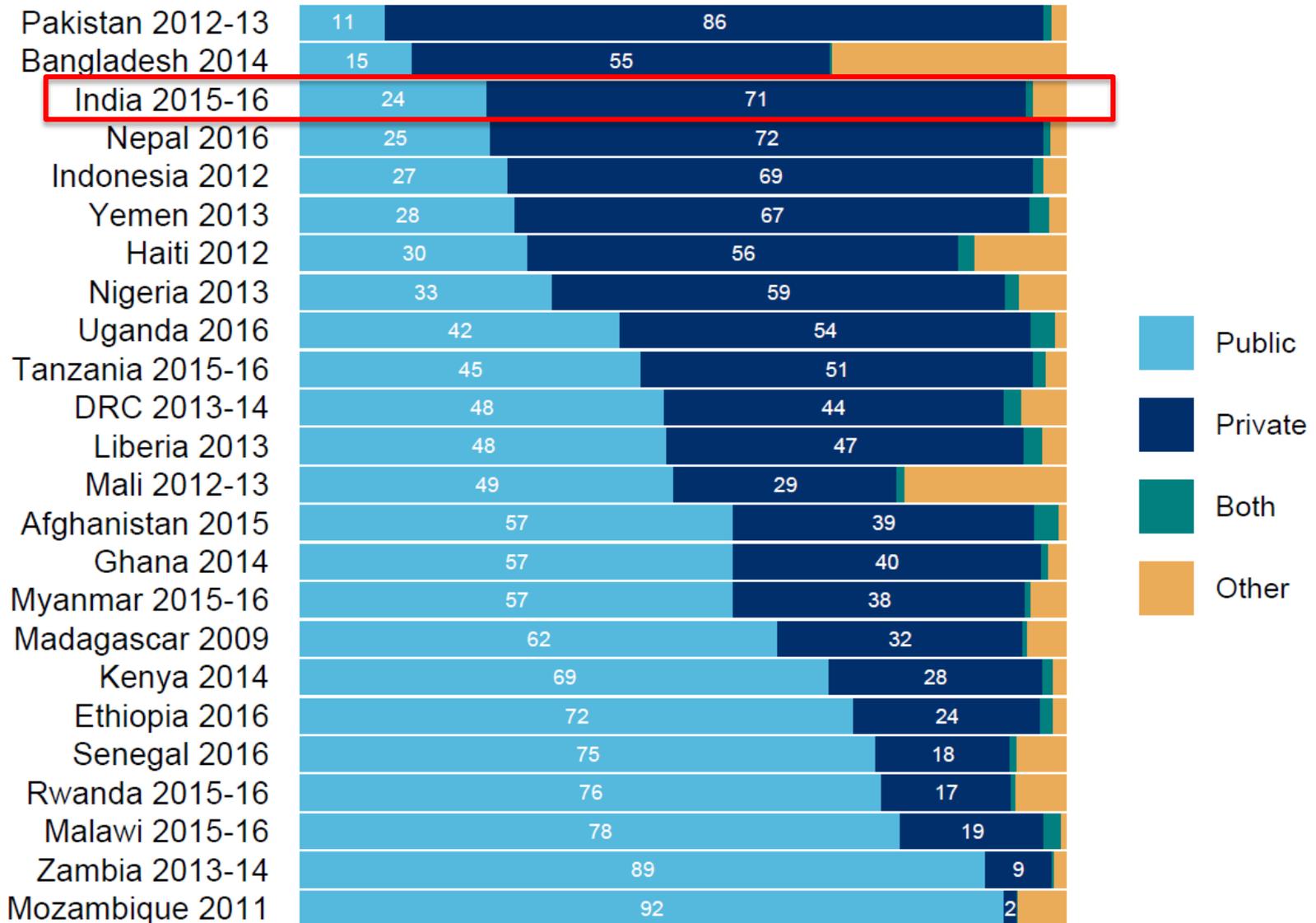
Across all three illnesses, the **private** sector is the dominant source of care in India



Source among Indians who seek sick child care outside the home

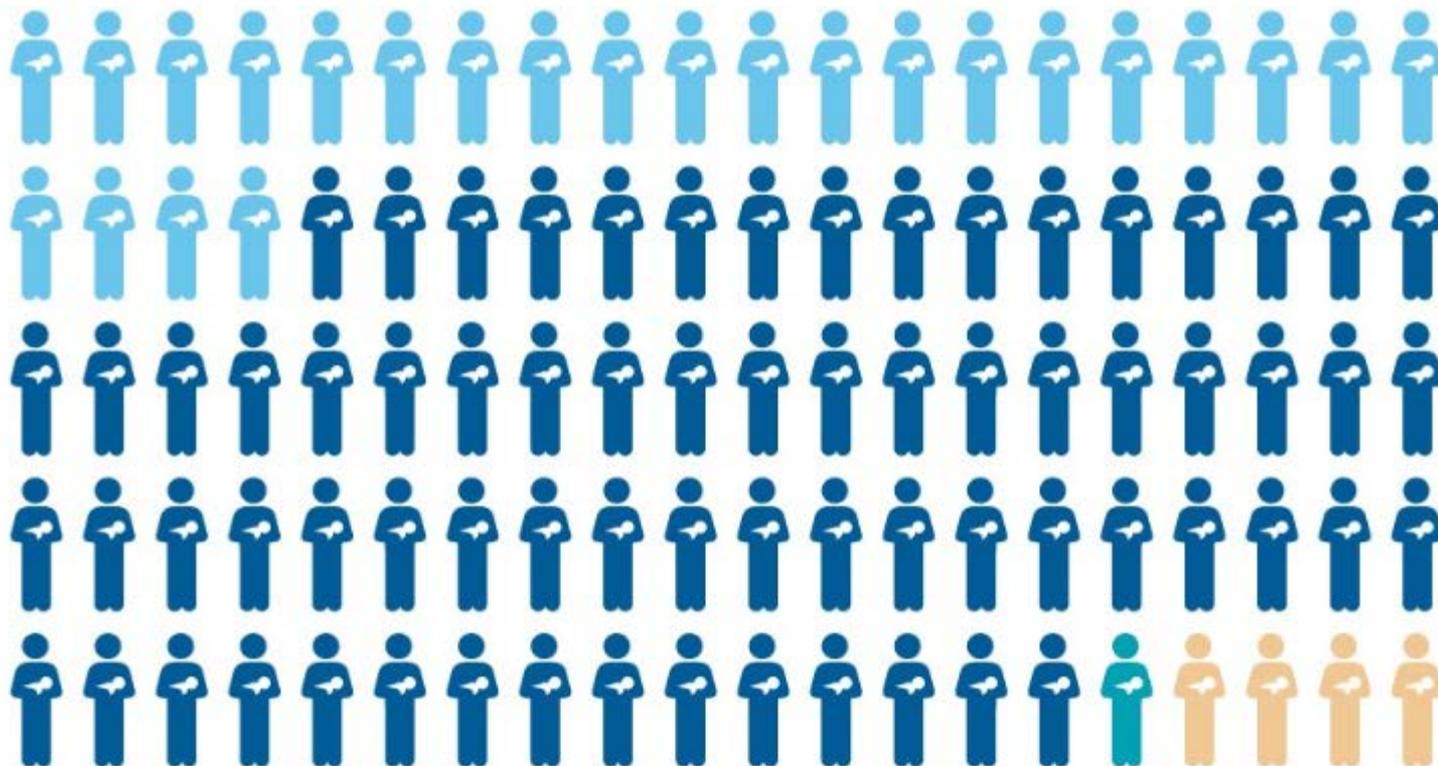


India has one of the highest private sector care-seeking levels among USAID priority countries





Among caregivers who seek sick child care outside the home, **71%** seek treatment or advice from private sector sources and **24%** from public sector sources.



Public source

Private source

Both

Other



Sources of care: Clinical versus non-clinical





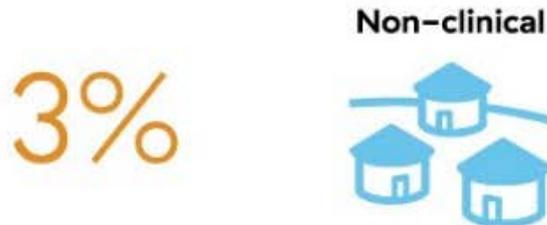
Sources of care: Clinical and non-clinical

	Public sector	Private sector
Clinical	<ul style="list-style-type: none">· Hospitals, rural hospitals, government dispensaries· Primary health centers, urban health posts, urban family welfare centers, community health centers, sub-centers· Integrated child development scheme centers (<i>Anganwadi Centers</i>)· Mobile clinics· AYUSH facilities	<ul style="list-style-type: none">· Private clinics, hospitals, doctors, paramedics, and AYUSH facilities· Nongovernmental organizations
Non-clinical	<ul style="list-style-type: none">· Accredited social health activists (ASHAs)	<ul style="list-style-type: none">· Pharmacies, shops, and drugstores



Clinical care is dominant in the **public** and **private** sectors

Public sector:

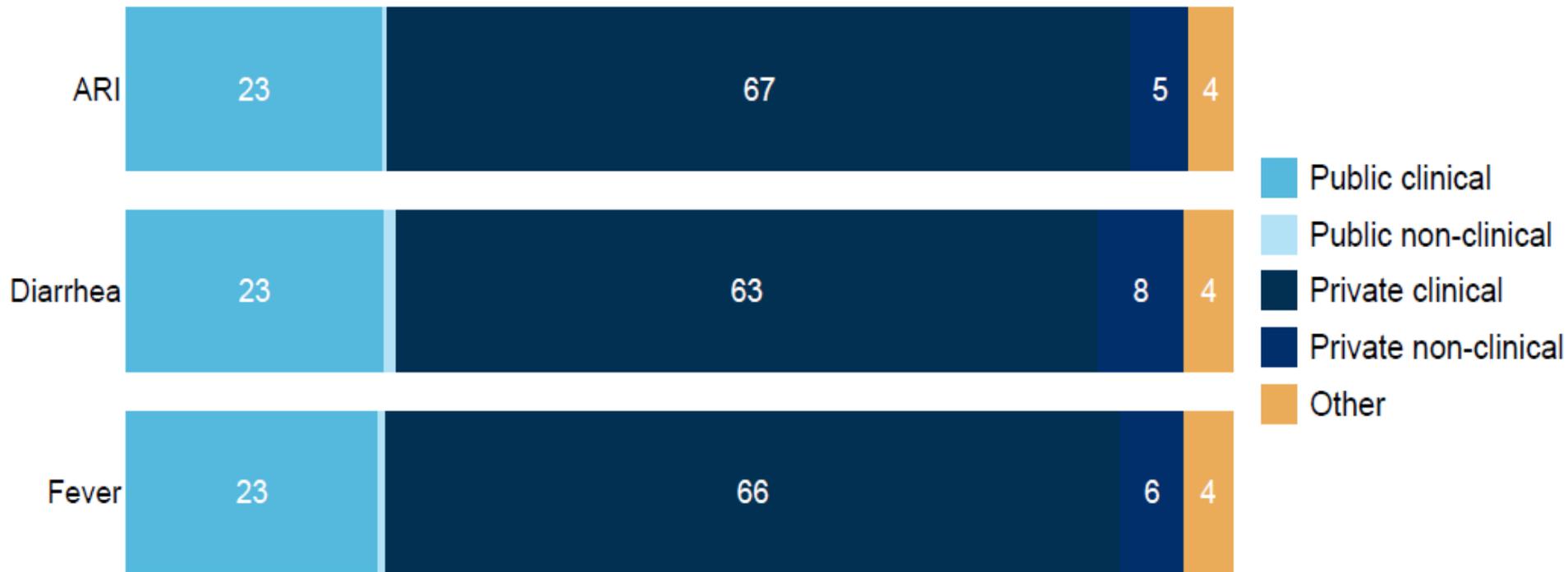


Private sector:





By illness: *Little variation* in clinical vs. non-clinical sources of care



Source among Indians who seek sick child care outside the home



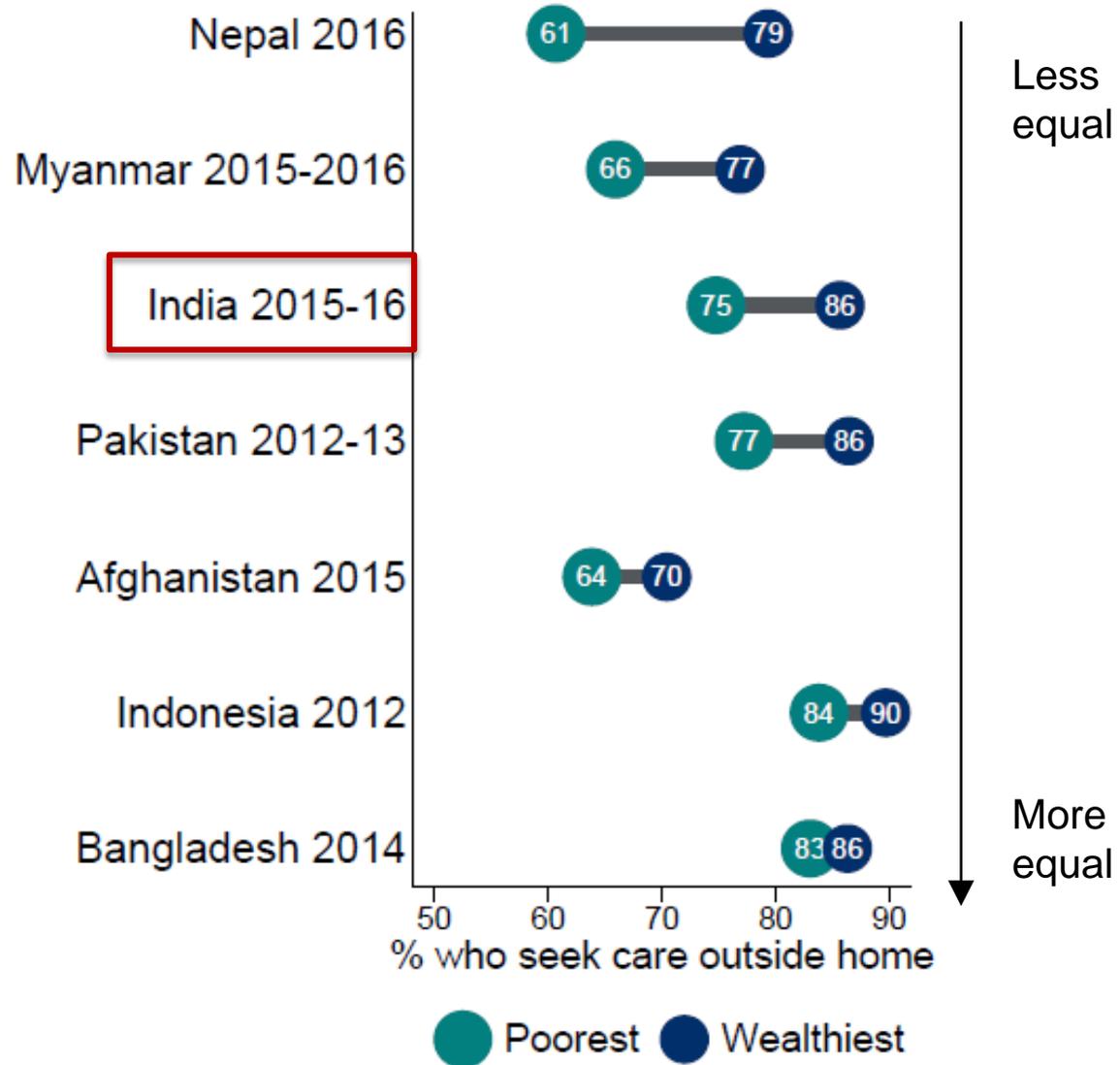
How do patterns of care-seeking vary between the poorest and wealthiest Indians?





India's care-seeking levels are less equitable than among some of its neighbors

- Wealthiest
- Poorest





Private sector is dominant for both **poorest** and **wealthiest** Indians



Source among those who seek care outside the home

Q1 = poorest

Q5 = wealthiest



Public



Private



Both



Other

The private sector is the dominant source of care across income levels

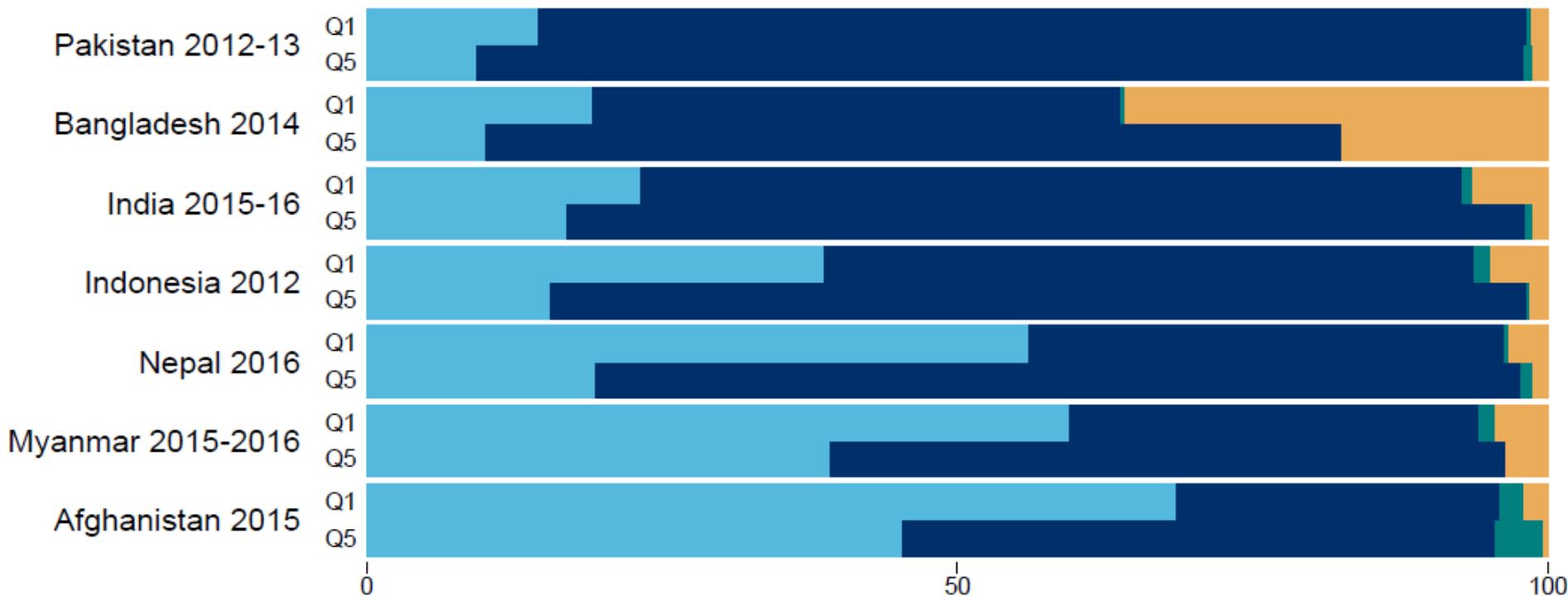
- 70% of poorest and 81% of wealthiest caregivers use private sector

Use of the public sector is moderate

- 23% of poorest and 17% of wealthiest caregivers use public sector



India's **poorest** care-seekers rely on the **private** sector more than the poorest in many other Asian countries



Source among those who seek care outside the home

Q1 = poorest

Q5 = wealthiest

Public

Private

Both

Other



Summary

- **1 out of 5** children experienced a treatable illness in the past two weeks
- **81%** of caregivers seek treatment outside the home
 - **71%** use the private sector
 - **24%** use the public sector
- **Private sector** is dominant
 - India has one of the highest levels of private sector use among USAID priority countries
 - Private sector is dominant across SES
- Minimal differences in care-seeking sources by SES
 - **81%** of wealthiest and **70%** of poorest caregivers use the private sector
 - **23%** of poorest and **17%** of wealthiest use public sources
- Clinical vs. non-clinical sources
 - Private sector: **91%** used clinical sources, **9%** used non-clinical sources
 - Public sector: **97%** used clinical sources; **3%** used non-clinical sources



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About SHOPS Plus

Sustaining Health Outcomes through the Private Sector (SHOPS) Plus is USAID's flagship initiative in private sector health. The project seeks to harness the full potential of the private sector and catalyze public-private engagement to improve health outcomes in family planning, HIV, child health, and other health areas. SHOPS Plus supports the achievement of U.S. government priorities, including preventing child and maternal deaths, an AIDS-free generation, and Family Planning 2020.



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