

Chapter - 4 Key Findings

4.1 Socio-demographic and obstetric determinants, awareness and attitude

- Over half (51.6%) of the respondents lived below poverty. About half (45%) studied between class 6th and class 10th. The commonest profession among men included being engaged in manual labour or agriculture (20.7%), followed by self-employment (17.7%).
- Over 80% of the female respondents had ever been pregnant, and over 98% had practised breastfeeding.
- About 5.2% of the respondents were aware of HPV vaccination.
- Nearly a quarter (24.4%) of the participants were aware of cancer screening; the most common source of information for 80.3% included social and mass media.

4.2 Risk factor exposure:

This includes household-related and behavioural risk factors

4.2.1 Household related

- The proportion of solid fuel use was high in rural areas (79%). Over half (51.3%) of the population (rural and urban combined) used wood as cooking fuel.
- More than three quarters (77.4%) of the rural population used 'open stove' or '*chulha*' for cooking.

4.2.2 Exposure to tobacco and non-tobacco betel products

- Nearly half of the respondents (48.6%) were current tobacco users, comprising 61.7% men and 34.8% women. Over one third (38.8%) of men were current users of smoked tobacco

- The proportion of smokeless tobacco users (35.6%) was higher than those using smoked tobacco (21.9%).
- As many as 42.7% of the respondents used smoked or smokeless tobacco daily.
- Chewable tobacco (49.5%) and manufactured cigarettes (38.6%) were the most frequently used tobacco products.
- The mean age of initiation of tobacco use was 21.3 years, which was lower for men (20.6 years) than women (22.8 years).
- Over half of the population (56.7%) had been exposed to second hand smoke, of which a higher proportion (42.4%) had been exposed at home
- 42.1% of the respondents consumed non tobacco betel products, among which areca nut was the most frequently used product (33.1%), followed by betel quid (18.2%)

4.2.3 Alcohol consumption

- Close to a quarter (22.8%) of the respondents reported consumed alcohol over the past 12 months and 18.3% reported alcohol use within the past month.
- The mean age of initiation of alcohol consumption was 21.3 years, which was almost similar among males (21.1 years) and females (21.9 years).
- Among those consuming alcohol over the past year, 8.1% stated that they could not stop drinking once they started and reported consuming at least once a week. As many as 4% failed to do routine work due to drinking, while 3% felt the need to drink first thing in the morning, at least once a week.
- Among those who had consumed alcohol over the last 30 days, 9.7% reported heavy episodic drinking on a single drinking occasion, which was much higher for men (16.4%) than women (2.6%).

4.2.4 Diet

- The mean number of days on which either fruits or vegetables were consumed in a week was 0.8 days
- The mean number of servings of fruits and vegetables on any given day was 0.1.
- Over three-quarters of the respondents consumed preserved/salt curated and fermented products

4.2.5 Physical activity

- Close to 90% of the respondents appeared to be engaged in sufficient physical activity of which over 80% included moderate intensity activity during routine work either at home or in the workplace.

4.3 Prevalence of Co-morbidities

4.3.1 Overweight/obesity

- According to the WHO criteria, the proportion of those who were obese was 5.2%, while the prevalence of obesity was higher (27.6 %) using Asian cut off points.
- A higher proportion of women (6.3%) than men (4.3%) were obese.
- The prevalence of obesity was higher in urban areas (7%) than in rural areas (3.8%).
- Over a third of the respondents (38.9%) over 18 years of age had central obesity.

4.3.2 Raised blood pressure

- The prevalence of raised blood pressure was 28.7%, of which the proportion of newly detected (20.8%) was higher than previously known (7.9%).
- Over half of the respondents (51.2 %) had pre-hypertension.

4.3.3 Raised blood glucose

- The proportion of respondents whose blood glucose level was over 126 mg/dl was 5.1%, among whom the proportion of known diabetics was 3.3%.
- The prevalence of raised blood glucose was higher among males (5.3%) than females (4.8%) and nearly twice as higher in urban (6.6%) than rural areas (3.8%).
- The most frequently encountered co-morbidity among cancer patients was diabetes (5.8%)

4.4 Health seeking behaviour and access to care

4.4.1 Access to health advice, counselling and attempts to quit

- 6.9% of the current tobacco users had been ever advised to quit tobacco use, while 15% of current smokers had ever attempted to stop tobacco use.

- 2.9% of the respondents above 18 years had ever received advice to avoid alcohol use.
- 7.9% of respondents had ever received advice to maintain a healthy body weight.
- Close to two-thirds (63.3%) of the respondents over 18 years had ever received advice to get their blood pressure measured; the proportion of those receiving advice for undergoing blood glucose measurement was much lower (36.6%).

4.4.2 Access to NCD screening, cancer diagnosis and treatment

- While 72.4 % had ever undergone blood pressure measurement, a little over half (51.4 %) had undergone a blood pressure measurement over the past year.
- While 40.1 % had ever undergone blood glucose measurement, a little over a quarter (25.1 %) had undergone a blood glucose measurement over the past year.
- The proportion of female respondents above 30 years who had undergone screening for breast was 0.9%. 1% of the female respondents had undergone cervical cancer screening, while 0.4% of all adult respondents reported having undergone screening for oral cancer.
- Among the households that were included for the survey, 4% reported a cancer death, among which about 30 % of the patients had been diagnosed with cancer six months before death.
- Majority (63.6%) of the patients of cancer were availing of treatment at a government health facility. Close to a third (29.9%) had sought treatment outside of their State.
- Over a quarter (26%) of the cancer patients were self-financing their treatment; 5.8% were covered by health insurance.

4.4.3 Source of health care

- Out of those whose, blood pressure and blood glucose had been measured in the last one year, close to two-thirds had consulted at a government health centre.
- About 40% of those with raised blood pressure and glucose sought care from an allopathic doctor at a government health facility.

4.4.4 Treatment compliance

- Among those with raised blood pressure, over one third (37.3 %) were adherent to the prescribed treatment, and the blood pressure of over a quarter (26.6%) was reportedly under control.
- Among those with raised blood glucose, over half (55.4 %) were adherent to the prescribed treatment, and the blood glucose of over a half (51.3%) was reportedly under control.

4.5 Health facility preparedness

4.5.1 Primary Health Centre Preparedness

- Cancer screening for all three types of cancers (cervical, breast, oral) was available in 19.1% of the PHCs'
- Over one-third of the PHCs' provided counselling for tobacco (33.5%) and alcohol (33%) cessation.
- As many as 61.5% of the PHCs' had posters on cancer displayed at the centre.
- The proportion of medical officers who had been trained NPCDCS/NHM (NCD related)/State program was 54.3% for urban PHCs' and 40.9 % for rural PHCs'. Likewise, the proportion of staff from other cadres who had undergone NCD-related programme management training was low.

4.5.2 Secondary level public health facility preparedness: Community Health Centre and District Hospitals

- Cancer screening for all three types of cancers (cervical, breast, oral) was available in 20.4 % of the CHCs' and 35.7% % of the District hospitals.
- Less than a quarter (24.3%) of the District hospitals had daycare facilities for chemotherapy.
- Counselling facilities for tobacco cessation were available in less than half (48%) of the CHCs'.
- A few CHCs' had a specialist in position in the following departments: surgery (17.3%), medicine (39.8%) and gynaecology (36.7%).
- Less than 50% of the General Duty Medical Officers at the CHCs' and District hospitals had been trained for NPCDCS/NHM (NCD related)/State program. Likewise, the proportion of staff from other cadres who had undergone NCD-related programme management training was low.

- Facilities for histopathology were available in 21.4% of district hospitals and 5.1% of the CHCs'.
- While essential equipment (adult weighing scale, stadiometer/wall markings for height, measuring tape, stethoscope and BP Apparatus) was available in about three-quarters of the District hospitals and CHCs', most of the health facilities reported a shortage of equipment for laboratory and imaging procedures.

4.5.3 Private secondary level health care facilities preparedness

- Close to a quarter of the health facilities provided services for screening of oral cancer (21.1%), breast cancer (21.2%) and cervical cancer (22.4%).
- As many as 39.5% of the health centres had facilities for cancer treatment.
- Facilities for counselling for lifestyle modification were available in about one-third of the private health centres.
- Specialist doctors were available in over half (55.3%) of the health centre