Appendix I

Interview Guide for Senior Officials at the State Level:

Interview Guide for the Health secretary Government of Orissa:

1- Brief overview of Orissa’s health services during the last decade (in terms of provisioning, financing, training, manpower and drugs).

2- Motivations for reforms and the role of donor agencies. Among the donor agencies whom do you think as the major player in the health care sector in Orissa?

3- Why the House Committee on health sector reforms was formed?

4- Why did the Committee focused on the following areas of reform only? Or how did the committee prioritized the areas for reform?

   i- Introduction of *user charges in medical colleges and district hospitals*. What is the proportion of below poverty line families using these services? (How the below poverty line families are identified).
   ii- Granting greater autonomy to major hospitals. What are the components of greater autonomy? What has been its experience?
   iii- Abolition of private practice by government doctors. Has the government been successful in implementing this scheme and what are the hazards faced?

5- DFID suggested reforms in three areas after going through an evaluation of their earlier work. How did the government react to the DFID evaluation? Did they agree with the DFID on the following areas of reform namely:

   i- Maintenance of buildings and equipments.
   ii- Medicine (a new drugs policy) and
   iii- Mobility of Para-medics.

   How far have the reform measures had an impact on these areas?

6- There are shortages of doctors and paramedics in the state. The three medical colleges are not producing enough number of doctors. How the state plans to address this situation? Could you please tell us the unemployment level among doctors in Orissa?

7- Health care budget has not increased in Orissa in the nineties and the state is also in a fiscal crisis. In this context how do you visualize about achieving the goal of universal health care in Orissa?

8- In the last decade where has the health sector budget stagnated and where it has increased? (Like in Curative, Preventive, and Family Welfare etc.)
9-The mandatory Pre-PG rural scheme was introduced in the state. How it has performed?

10-What has been the role of World Bank in the health care sector in Orissa?

11-Are there conditionalities attached to loans from the Bank?

12-In “Orissa Economic Revival Package”, are there any components of health sector reforms?

13-Whether the Bank is able to put pressure on health sector reforms through this package?

14-There are allegations that the World Bank even though contributes a little in terms of money, it influences in the policymaking. In case of Orissa how far do you think it to be true?

15-Interviews with the donor agencies have suggested that the health services structure in the state is not a pyramidal one, which is hampering in implementation of policies in the long run. What are the constraints faced by the state government in making the structure a pyramidal one?

16-The vision document 2010 talks about introduction of public-private initiatives in the state. But the private sector in Orissa is very small and these are concentrated in urban areas. Further the experience of handing over PHCs to NGOs suggests that it has not worked due to lack of experience and resources on behalf of NGOs. Hence is not it a difficult task?

17-It seems that the reforms are heading towards an idea where the health care cost has to be borne by the people? (For example measures like introduction of user charges and contracting out cleaning etc. and plans for encouraging the private sector). In a state where 47percent of the people are living below the poverty line, how is it going to improve the health care situation?
Interview Guide for the Director of Health Services:

1- What are the components of health sector reforms being addressed by your department?
2- As Technical Head and expert of General Health care delivery services of the government of Orissa, in your opinion what are the strengths and weaknesses in the health care services structure of Orissa?

3- As Cadre controlling authority of State Cadre non-Gazetted employees and also disciplinary authority, how do you plan to address the shortages of Para-medics in the state?
4- The introduction of district cadre for paramedics, whether it has helped in maintaining the morale of the cadre?

5- As head executive & Inspector of various health related projects operating in the state, which donor agency in your opinion is the major foreign player in the health sector reforms in Orissa?
6- Whether and how do the donor agencies play a role in influencing health policy in Orissa? (Pathways of influence).

7- As budget controlling authority of primary and secondary health care services of the state, is there any evaluation of the quality of services?

8- As you are responsible for portfolio management including financial restructuring and reformation, what are the financial constraints Orissa is facing for achieving universal healthcare?
9- As appellate authority of district cadre employees under health directorate administration, what are the problems of the district cadre employees and what are your constraints in addressing them? How are you going to overcome these constraints?

10- As you hold key position in Central Purchase of Drugs and Consumables, instruments and equipments, after the introduction of new drugs policy has it improved from the earlier situation? If so, how and what are the areas of improvement? What is the proportion of high tech equipment procured during the last five years? (X-ray, ECG, EEG etc.)
11- As you assist government of Orissa in formulation of Budget, what are the constraints you face in formulating the health budget in the state as the state is in a deep fiscal crisis?

12- As a member of various health related committees and societies under sanction of state government, can you elaborate the role of House Committee on health sector reforms? What are the changes those have occurred after the amalgamation of various societies at the district level?

13- Why the health care cadre structure in the state is not pyramidal in nature. What are the constraints you are facing to address these issues?
Interview Guide for the Director of Family Welfare:

1- As the principal objective of the Directorate is to stabilize the population and to provide health services including (Immunization) to both pregnant mother and children, it seems that you have been successful in lowering the population growth rate in Orissa significantly and in Immunization also you have done very good job.

However there is an area that remains unexplained which is that the poor opt for more children for economic reasons and by this logic Orissa should have higher population growth rate than India as a whole. Hence in a poor state like Orissa how your population control strategies were different than other states?

2- In immunization Orissa has done really well whereas other states that started simultaneously with Orissa have not done so well. What are the reasons for this?

3- What role the World Bank and other agencies are playing in RCH program in the state?

4- Whether over the years there has been changes in the approach towards maternal and child health care in Orissa? If yes what are those changes?

5- Whether population control, HIV/AIDS and RCH is implemented in an integrated manner in the state?

6- What role do you visualize for the donor agencies for better performance of your department?
Interview Guide for the Director of Medical Education & Training (DMET):

1. As Administrator of three Government Medical Colleges and its attached hospitals what are the challenges you are facing? What are the constraints you are facing in updating the syllabus in medical colleges?

2. There are acute shortages of doctors in the state and the three medical colleges are not producing enough of them. What are your constraints to address this situation and how you are going to tackle them? Could you please tell us the level of unemployment among doctors in the state?

3. What was the idea behind Rural Health Centers and how the RHCs’ of Jagatsinghpur/Digapahandi/Attabira are functioning? What are the strengths and weaknesses?

3. As Administrator of Sardar Vallav Bhai Patel Post Graduate Institute of Pediatric, Cuttack and selection of P.G.(Medical), in your opinion how the mandatory pre-PG rural posting has helped in addressing the problem of absence of doctors in remote areas?

4. As you are in charge of Nursing Selection & Training Programme could you tell us as to what are the constraints that you are facing to address the shortages of nurses in the state and how are you going to overcome these challenges?

5. Establishment of private Medical Colleges/Dental Colleges and of private Nursing Schools in the State comes under your office. Till now there is not a single private registered medical college/ nursing school in the state. What are the reasons for it?

6- As Orissa is facing acute shortages in Para-medics in the state, are you planning to establish newer Pharmacy Colleges in the state?

7. Have you received any application for establishment of private Physiotherapy/occupational therapy/speech therapy Colleges in the state?

8. As Registration of Clinical Establishments comes under your office (Nursing Homes, Patho Clinics etc), what are the initiatives you have taken for registration of private practitioners in the state? What are the constraints you have faced in this regard?

9. Medical Referral cases are the responsibility of yours. In tribal districts the traditional practitioners are being involved in referrals. What has been your experience so far in this regard?
10. As you select in-service candidates for training, inside the country and abroad, what are the areas you focus for training?

11- The whole society values success and the more one consume the better status one has. In this situation is it not an injustice to ask the aspirants for a PG degree for mandatory rural posting for one year, where they will face difficulties for providing quality education for their children and maintaining a status in the society?
Interview Guide for the director of State Institute of Health & Family Welfare (SIHFW) Orissa:

1- As the objectives of the institute are to develop the skills of health personnel for demand generation by public and promote voluntary action by people in Health & Family Welfare services, how far the multi-skilling of health personnel has helped in tackling the shortages of manpower?

2- Your Institute takes a comprehensive view of Reproductive and Child Health Programme, could you please elaborate on this?

3- You are also involved in other health programmes by which you want individual's families and community to accept and adopt desirable health behaviors and practices. Please elaborate on this aspect also.

4- What has been the change towards the approach to RCH over the years?

5- Do you have any research reports in this regard?
Interview Guide for the director of Indian Medicine & Homeopathy in the State of Orissa:

1- What role homeopathy and Ayurveda play in health care provisioning in Orissa?

2- What are the constraints you face in regularizing the traditional practitioners in the state?

3- In tribal districts these traditional practitioners are being used for referral services. What has been your experience so far in this regard?

4- What is the attitude of allopathic practitioners towards these traditional practitioners?

5- Your views on AYUSH (Aurveda, Unani and Siddha).

6- Whether the indigenous systems practitioners are being posted in primary health care centers? What are the advantages and disadvantages of this phenomenon?
Interview Guide for the director of Drugs Control, Government of Orissa:

1- How far the essential drugs list of World Health Organization and shifting towards generic drugs from the brand names and centralized procurement of drugs has helped in reducing cost and rational prescription of drugs?

2- What is the situation of availability of drugs after the implementation of these new measures?

3- How far have you been successful in making available to the public, effective and safe drugs in required quantities and in appropriate dosage forms with acceptable quality, at all public/Government Health Care Institutions in the state in time?

4- What are the constraints you have faced in ensuring that banned, misbranded, and adulterated drugs, irrational and sub-therapeutic formulation (both Allopathic and Homoeopathic) are not available in the state and that the labeling, storage and preservation of drugs at appropriate temperature are carried out properly and effectively to preserve the potency of the drugs in all places before consumption by the patient?

5- What was the nature and forms of corruption that existed before the introduction of new drugs policy? What kind of pressures you faced when you restructured the new drugs procurement and delivery system?

6- What are the constraints you have faced in ensuring the availability of quality drugs in the state?

7- Has the system of weir-housing for drugs are in place in the state? If yes, then has it improved the situation in terms of availability of drugs in the state?

8- As you are responsible to ensure availability of essential drugs at a fair price to all patients of the state, what are the constraints you face in this regard and what steps you have taken to address these issues?

9- Another of your role is: grant of manufacturing and sales licenses of narcotic drugs and formulations containing narcotic drugs, allotment and utilisation of narcotic raw materials etc. under the provision of Narcotic Drugs and Psychotropic substances Act, 1985. What are the constraints you have faced in this regard?

10- What is the situation at the government, private clinics and stores functioning under the CDMOs and missionaries hospitals in terms of procurement, storage and distribution of drugs in the state?
Interview Guide for Project Director OHSDP (Orissa Health Systems Development Project):

1- Whether the OHSDP is being implemented separately or within the structures of the health services in Orissa?

2- What were the compulsions and motivations for the state to approach the World Bank for implementing this project?

3- What was the basis for opting for this project?

4- How the components of this project were prioritized and decided? Was there consultation with the state government and whether the state government had consulted with the CDMOs, MOs; and Health Officers etc.? Describe the process of consultations and different actors who all were involved.

5- The World Bank is implementing the Orissa Economic Revival Package. Whether funds for OHSDP are subject to fulfilling the conditionalities in the Economic Revival Package?

6- What are the elements of OHSDP?

7- OHSDP aims to strengthen the planning, management and implementation capacity at the state, district and lower levels. How this is being implemented and in which parts of Orissa? What has been your experience so far in this regard?

8- It also aims to strengthen the Health Management Information System and the capacity for surveillance of major communicable diseases. Which part of Orissa it has been implemented and how it has been implemented and what is your experience so far in this regard?

9- This project intends to improve service quality, access and effectiveness by:
   a. Upgrading area, sub-divisional, district hospitals.
   b. By upgrading clinical, managerial and support services at the facility level (CHC/PHC level. How far this component has been implemented and in which part of Orissa and your experience in this regard.

10- Is there any valuations across districts in the state and specifically in the districts of Sundergarh and Khurda?

11- Another aim is to improve access to basic health services at the community level through:
a. Selective upgrading of community health centers.
b. Promoting health services in tribal areas and for disadvantaged groups.
c. Improving referral mechanisms and strengthening linkages between the different tiers of the health care system.

Which components of the above mentioned has been implemented and your experience in this regard.

12- What about the sustainability of the reform measures initiated in this project in terms of financing, infrastructure, equipments and drugs?
Appendix II

Interview Guide for the Donor Agencies at State and Central Level
The background and history of donor’s operation in the state in general and health sector in particular. What prompted the agency to move into the health sector? What were the specific areas of intervention and the reasons for choosing those areas? Were these areas for intervention based on an assessment of the health sector? (Was there a report that was available? What was the experience of the donor agency with regard to the state government (Opportunities and Constraints)? What kind of changes these interventions have brought about, say in terms of infrastructure, drugs and governance? The experience with other donors and their role for the next ten years.
Appendix III

Interview Guide for the Officials at the District Levels and Below

Interview Guide for CDMOs/ADMOs (Public Health, Medical and Family Welfare):

1- What are the strengths and weaknesses in the health care delivery structure in the district?

2- Are you aware of HSR? Did you participate in the consultative process of HSR?

2- In district hospitals user charges has been introduced. What are the services for which user charges have been introduced? What is the proportion of those below poverty line and other income groups in the district? How this scheme has performed so far? What are the mechanisms for identifying BPL population? What has been the perception of people who are paying user charges? Whether the income from user charges has been able to sustain the recurrent expenditures of these institutions?

3- For petty maintenance of buildings and equipments funds has been allocated to the MOs in the PHCs/CHCs. How this scheme has performed in your district?

4- New Drugs Policy: At present Orissa has an essential drugs list prescribed by WHO. Also generic drugs are being used rather than branded drugs and central purchasing of drugs is being done. What is the scenario in the district in terms of availability of essential drugs? What is the difference the new drugs policy has created compared to the earlier policy? Whether you views were taken before introduction of this drugs policy?

5- Whether the district cadre for paramedics has been introduced in this district? If yes, then how far the scheme has been successful in boosting the morale of the paramedics? And whether under the scheme you can recruit the required number of paramedics for your district?

6- There are shortages of doctors and paramedics in the district. What are your constraints to address this situation?

7- Whether the mandatory pre PG rural scheme is applicable to the district? If yes, how far it has performed in addressing the availability of doctors in remote areas?

8- Whether any PHCs were handed over to NGOs in this district? If yes, what has been your experience till now?

9- How is the Zilla Swasthya Samiti functioning in the district? Has the situation improved with creation of this body?

10- What is the role of World Bank in the RCH program of this district?
11- Whether population control, HIV/AIDS and RCH is implemented in an integrated manner in the district? If yes, do you see any difference in terms of results at the ground level?

12- Whether there has been changes over the years in the approach towards maternal and child health care in the district? If yes, what are those changes?

13- Whether traditional practitioners at the primary level care are being involved in the referrals in your district? If yes, what are the terms for involvement of traditional practitioners? What are the inputs from government in terms of training etc.? For what diseases/conditions are they expected to do referrals? And where do they refer?

14- What is multiskilling and at what level is it happening? Does multiskilling result in downsizing staff? How does it address the shortage of human resources?

15- Medical Internship training introduced in 2000. Under the Internship training, the interns are sent in groups of two and three to community health centers under the control of the CDMOs. They are exposed to real community health situations and get ‘hands on’ training. They are supervised both by the medical officers in charge of the institutions as well as the medical college teachers.

Whether these trainings produce better trained doctors than the earlier scheme? And has it led to better attendance of doctors in rural health institutions, as it was the intension of this training?

16-Pancha Byadhri Chikitsa (Five Diseases Treatment) Scheme introduced in 1999, reintroduced in 2001. Objective: To ensure that every patient who goes to a public hospital is guaranteed treatment at government cost for diseases such as malaria, leprosy, diarrhoea, acute respiratory infection, and scabies.

How this scheme has performed in the district?

17- Before introducing the above mentioned changes whether your views were taken into consideration?
Interview Guide for Medical Officers at the CHC/PHC level:

1- For petty maintenance of buildings and equipments funds has been allocated to the MOs in the PHCs/CHCs. How this scheme has performed in your PHC/CHC?

2- Under the new drugs policy whether the essential drugs are available in your institution?

3- Whether this PHC/CHC has adequate staff in terms of MOs and paramedics? In case of shortage in the staff what are the challenges that you face in your day to day functioning?

4- What is your opinion on mandatory pre- PG rural scheme in Orissa?

5- There are talks about handing over PHCs to NGOs. What do you think about this?

6- There is an idea that the multiskilling of health personnel would help in overcoming the shortages of paramedics in the state. What is your opinion on this?

7- For increasing the referrals, the traditional practitioners are being involved in tribal districts? Do you think that this will increase the referrals? Will it not legitimize the quacks in the state?

8- The earlier existing different societies at the district level have been amalgamated to create one society. Has it improved the situation?

9- Do you think that over the years there has been change in the approach towards maternal and child health care in this district? If yes, what are those changes?

10- What are your strategies for Population control, HIV/AIDS and RCH?

11- For Internship Training, two to three medical interns are sent to CHCs under the supervision of CDMOs. Do you think that this has helped in better training of doctors and whether it motivates the interns to work in the rural areas after training?

12- The objective of the Pancha Byadhi Chikitsa scheme has been to ensure that every patient who goes to a public hospital is guaranteed treatment at government cost for diseases such as malaria, leprosy, diarrhoea, acute respiratory infection, and scabies. How do you evaluate this scheme?

13- What is your opinion about introduction of user charges in district hospitals and medical colleges in the state?

14- In your opinion what are the strengths and weaknesses in the health services structure in the state? What measures you would suggest for their amelioration?
15- There are problems of communication, infrastructure, and lack of better schools in remote areas of Orissa. And the government expects you to perform in those conditions. Don't you think that this is an injustice to those in service and the aspiring doctors in the state?

16- Don't you think that the syllabus in the medical colleges are not updated from time to time and hence is not equipping doctors to face the challenges in the field?

17- Any other matter you would like to mention.