# A Study Report on Document Learning from Emerging Experiences in Universal Free Health Care, Particularly those Primary Level Health Workers and Citizens from Marginalized and Disadvantaged Communities

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**Background**

Since the beginning of the free health care policy implementation process, several concerns over implementation problems have been raised among the policy makers and implementers. There is a need to understand how other health reform policies (such as decentralization, public private partnership, Community Drug Program) influence the policy of free health care services. This evaluation can help assess the integrity of the established monitoring system and fulfill the information gaps on the process of implementation and impact of the policy. Nepal's experience in implementing free health care services could be an evidence for other countries to start such initiatives.

**Methods**

The study adopted both qualitative and quantitative method of data collection. Dolakha district is selected for the study since it is one of the low HDI district. District hospital, both of the primary health care centers, four health posts and three sub-health posts were purposively selected for the study. Qualitative data analysis included transcription of the interviews and focused group discussion, typing of transcription, colour coding and grouping in matrices with main domains. Similarly, the quantitative data was coded for computer entry and processed in Statistical Package for Social Sciences software program.

**Results**

Review of health register from the health facilities as well as experience of health facility in-charge showed that flow of the patient have increased with the implementation of Free Health Care Policy. The study showed that the trend of cases attending at district hospital and primary health care center is cyclic and increasing. Although majority of the people were aware of the free drugs and services, some do not prefer to go to government health centers because of the long distance and limited services and drugs provided by the government health centers.

**Conclusions**

After implementing free health care services, flow of patients has been increased in government health facility. However, most marginalized and poor living far from the health facilities is still seen deprived from such services, because of lack of information regarding the services and difficult access to the health services.

**Keywords:** Dolakha district; ethnicity; gender; free medicines; free health care policy; free health care services; service utilization.