

Assessment of Some Demographic and Health Aspects
In
An Upper Egypt Rural Community

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Abstract:

The medical care process of a community is surrounded by multiple influences, which constitute its environment. Improvement of such care could only be achieved through careful and comprehensive analysis of the health needs and related social, demographic and environmental aspects of the community. Thus, a household survey was carried out on 221 house units to identify the sociodemographic and health profile of an Upper Egypt rural community. Also, qualitative analysis was conducted within the rural health unit targeting both service providers and users.

The results showed that there is an apparent trend towards modernization as shown by the 65% shift of the buildings' style from the classic rural type and increase of the simple family type which constituted 62.4% of the studied group. However, studying the rural family health problems revealed marked low detection of chronic health problems among the above 15 years age group. The study detected low self-perceived prevalence rate of hypertension (3%), bilharziasis (2.95%), diabetes (1.62%) and rheumatic heart (0.76%). The morbidity pattern among the under 5 years children revealed that the acute respiratory tract infections and diarrhea constituted the highest 2 weeks prevalence rates 42.2% and 15.6% respectively. The fertility and marriage pattern among the studied female group showed that the mean age of marriage is 17.3 ± 3.2 years, the average number of pregnancies and live births are 5.4 and 4.3 respectively.

Assessing the quality of 13 services provided by the rural unit revealed that 8 out of the 13 studied items were regarded as unsatisfactory by more than 50% of the service users. Analyzing the causes of poor service quality revealed that lack of work interest and resources were the main reasons followed by lack of motivation and work supervision.

In conclusion, the rural communities are experiencing a rapid transition phase, which is not accompanied by a healthful lifestyle. The role of the rural health unit in health education should be greatly emphasized. More concern for quality of services provided through application of better work management protocols is a necessity.