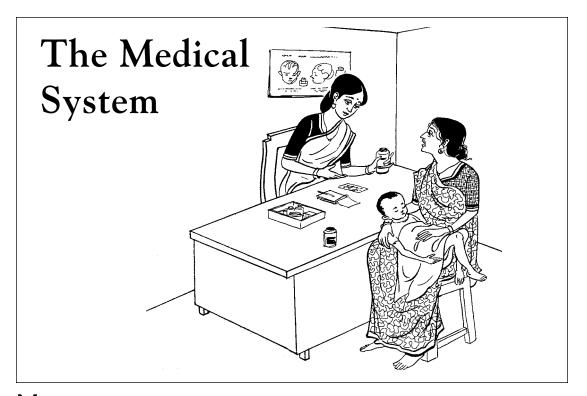
Chapter 3

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Nost areas of the world have several different kinds of health care. For example, there are community health workers, midwives and traditional healers, doctors and nurses. They might work in their own homes, in clinics or health centers, or in hospitals. They may be in private practice (charge money for their services), or they may be supported by the community, the government, a church, or another organization. Sometimes they are well trained and equipped—and sometimes they are not. Together they are called the medical system.

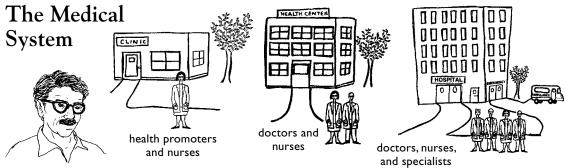
Most people use some combination of modern medicine and traditional remedies to treat their health problems themselves. This is often all they need to do. But sometimes they need to seek care from the medical system.

Unfortunately, many women have problems getting good health care. They may not have enough money to visit a clinic or buy medicine. Or maybe there are no health workers in their community. Even if women can go to a clinic, it can be difficult to talk with health workers about their problems. Sometimes the clinic or hospital does not offer the services they need.

This chapter gives some ideas about how women can get better health advice and better medical care. It also suggests ways that women can work together to change the medical system so that it better responds to their needs. ➤ When trained promotors give basic health care in the community, everyone gets better care for less money.



Problems



health promoter

Not all communities have all levels of medical services. However, whatever the combination of services available, women (and any other sick people) will receive better care if there are good links between them.

IMPORTANT HEALTH SERVICES

The medical system offers many different kinds of services. Some services, like surgery, x-rays or ultrasounds (see page 37) are usually only available in hospitals. But the following services that women need should be offered at low cost at the community level:

- health information so that everyone can make better decisions about their health, treat health problems correctly, and prevent illness.
- immunizations or vaccinations that can prevent many diseases, including *tetanus*, measles, diphtheria, whooping cough, polio, *tuberculosis*, rubella, and *hepatitis*.
- care during pregnancy (prenatal care) that can help a woman find and treat problems affecting her or her unborn baby before they become serious.
- *family planning* services and supplies. Family planning can save lives by helping women control how many children they have, and the amount of time between births.
- health exams to help find and treat problems such as weak blood (anemia), high blood pressure, and sometimes sexually transmitted infections (STIs).

Tests can give more information about possible causes of health problems. Some tests, like *Pap tests* for example, require some training but no expensive equipment. These tests should be offered at the community level. Some health centers have laboratories with the equipment needed to get the results of different tests. However, often a woman will need to go to a hospital to be tested.

Other services are only available in hospitals. If a woman has a serious illness, complications from childbirth or abortion, or if she needs an operation, she will probably have to go to a hospital.

No matter where you go for health care, you should be treated with respect.

All people who care for your health should do their best to provide you with:

- 1. Access. Everyone who needs medical care should be able to have it. It should not matter where you live, how much money you have, what your religion is, how much status you have in the community, the color of your skin, your political beliefs, or what health problem you have.
- 2. Information. You should be told about your problem and about what the different possible treatments mean for you. The person caring for you should make sure you understand what you need to do to get better, and how to prevent the problem from happening again.
- 3. Choice. You should be able to choose whether or not you are treated, and how. Also, you should be able to choose where to go for treatment.
- **4. Safety.** You should be given the information you need to avoid harmful side effects or results of treatment. You should also be told how to prevent dangerous health problems in the future.
- 5. Respect. You should always be treated with respect and courtesy.
- 6. Privacy. Things that you say to a doctor, nurse or other health care worker should not be overheard by others or repeated to anyone else. Exams should be given in a way that other people cannot see your body. If there are other people who need to be in the room, you should be told who they are and why they are there. You have the right to tell them to leave if you do not want them there.
- 7. Comfort. You should be made as comfortable as possible during an exam. You should also have a good place to wait and not have to wait too long.
- 8. Follow-up care. If you need more care, you should be able to go back to the same person, or be given a written record of the care you have received to take to a new doctor, nurse, or health worker.



Can I come back

How to Get Better Care



risks and benefits of treatment

➤ It often helps to think of the questions you want to ask before you go for medical care.



There are many decisions to make when you have a health problem. One decision is whether to see a health worker, and what kind of health worker you think you need. If there is more than one way to treat a problem, you will need to consider the *risks* and *benefits* of each kind of treatment before you make a decision. You will be able to make the best decisions—and get the best care—if you can take an active role in working with your doctor, nurse, or health worker to solve your health problem.

KNOW WHAT TO EXPECT

You will be best able to take an active role in your health if you are prepared and know what to expect when you seek medical care.

Questions about your health

It is best to learn as much as you can about your health problem before you use the medical system. Reading this book may help you understand your health problem and the possible causes. For help thinking about health problems, see "Solving Health Problems."

The doctor, nurse, or health worker who sees you should ask about the problem you are having now and about your past health. Try to give complete information, even if you feel uncomfortable, so that the person asking the questions can learn as much as possible about your health. Always tell about any medication you are taking, including aspirin or *family planning methods*.

You should also have a chance to ask any questions you may have. It is very important to ask as many questions as you need to make a good decision about how to solve your health problem. If these questions have not already been answered, you may want to ask:

- What are the different ways this problem can be treated?
- What will the treatment do? Are there any dangers?
- Will I be cured? Or will the problem come back?
- How much will the tests and treatment cost?
- When will I get better?
- Why did the problem happen and how can I keep it from happening again?

Many doctors and nurses may not be used to giving good information, or they may be busy and not take the time to answer your questions. Be respectful, but firm! They should answer your questions until you understand. If you do not understand, it is not because you are stupid, but because they are not explaining well.

The exam

In order to know what is wrong with you and how serious your problem is, you may need an examination. Most exams include looking at, listening to, and feeling the part of your body where the problem is. For most problems you need to undress only that part of your body. If you would feel more comfortable, ask a friend or female health care worker to be in the room with you during the exam.

Tests

Tests can give more information about a health problem. Many tests are done by taking a small amount of *urine, stool,* or coughed-up *mucus* and sending it to a laboratory. Or, a needle is used to take a small amount of blood from your finger or arm. Other common tests include:

- taking some fluid from your vagina to test for sexually transmitted infections (STIs).
- scraping cells from the opening of your *womb* (cervix) to test for cancer. (This is called a *Pap test*. See page 378.)
- taking tissue from a growth to test for cancer (biopsy).
- using X-rays or ultrasound to see inside your body. X-rays may be used to find broken bones, severe lung infections, and some cancers. Try not to be X-rayed during pregnancy. Ultrasound can be used during pregnancy to see the baby inside your womb. Neither of these tests causes any pain.

Before you have any test, discuss the cost. Ask the doctor, nurse, or health worker to explain what he or she will learn from the test, and what would happen if the test was not done.

BRING A FRIEND OR FAMILY MEMBER

Many people feel worried about seeking medical care—even for illnesses that are not serious. And when a person is sick, it can be even harder for them to demand the care they need. If another person can go along, it can help.

A friend can:

- watch the woman's children.
- help think of questions to ask, remind the woman to ask them, and make sure they are answered.
- answer questions if the woman is too sick to talk.
- keep the woman company while she waits.
- stay with the woman while she is being examined, to support her and make sure the doctor acts in a respectful way.



ultrasound machine

X-rays are safe if they are used properly. A lead apron should be used to protect your reproductive organs.

I am her mother. I can answer some of your questions.



U If a woman is very sick, someone who can give information should go with her.

If You Need to Go to the Hospital

Operations are sometimes done when they are not necessary, or when a medicine could have worked just as well. Get another medical opinion if you are not sure.



f you need to have an operation or you have a serious illness, first find out if it is possible to be treated without having to stay in a hospital. If a hospital is the only place you can get the care you need, this advice may help:

- Bring someone with you who can help you get the attention you need and help you make decisions.
- Different people may examine you. Each one should write down what he or she did on a card that stays with you. This way the next person who cares for you will know what has already been done.
- Before anyone begins a test or treatment, it is very important to ask what they are going to do and why. This way you can decide if you want them to do it and help prevent mistakes.
- Try to make friends with the staff at a hospital. They can help you get better care.
- If you need to have some kind of *operation*, ask if it is possible to have an injection to stop pain only in the area being operated on (local anesthetic). It is safer and you will get better more quickly than if you are given medicine to make you sleep during the surgery (general anesthetic).
- Ask what medicines you are being given and why.
- Ask for a copy of your records when you leave.

Common operations for women

An operation is sometimes the only answer to a serious health problem. During many operations, a doctor makes a cut in the skin in order to fix problems inside the body or to change the way the body functions. Here are some of the operations women commonly have:

- Emptying the womb by either scraping or suctioning (*D* and *C*, or MVA, see page 244). Sometimes the lining of the womb must be removed—either during or after an *abortion* or *miscarriage*, or to find the cause of *abnormal* bleeding from the vagina.
- Birth by operation (cesarean section or c-section). When complications make it dangerous for a woman or her baby to go through normal labor and birth, a cut is made in a woman's belly so her baby can be born. C-sections can be necessary, but too often they are done for the benefit of the doctor, not the woman. See the chapter on "Pregnancy."
- Sterilization. During this operation, a woman's *fallopian tubes* are cut and the ends tied. This prevents her eggs from reaching the womb, so a man's sperm will not be able to make her pregnant (see page 223).
- **Removing the womb** (hysterectomy). A hysterectomy is a serious operation, so it should be done only when there is no better way to solve your health problem (see page 381). Ask if you can have your ovaries left in.

Blood transfusions

A *blood transfusion* may be given in an emergency, when you have lost a lot of blood. It can save your life. But if the blood has not been tested properly, it can carry diseases, such as *hepatitis* or *HIV/AIDS*, that are passed through the blood. Avoid blood transfusions except in cases of life or death emergencies.

If you must have an operation that you know about ahead of time, see if it is possible to have some of your own blood taken in advance and stored at the hospital. Then if you need it, you will get your own blood back. If you cannot have

your own blood stored, ask a friend or relative to come with you to the hospital. Be sure she has been tested for hepatitis and HIV, and that neither she nor her partner has had a new sex partner in the last 6 months. Her blood must also be tested to make sure that it will work in your body.



If you must receive blood from an unknown person and the hospital does not test its blood for HIV, there is a risk that you might become infected. After the transfusion, protect your partner by practicing safer sex for 6 months and then try to get tested for HIV/AIDS. For more information, see the chapters on "AIDS" and "Sexual Health."

After you have an operation

Before you leave the hospital, ask:

- What should I do to keep the cut clean?
- What should I do about pain?
- How long should I rest?
- When can I have sex again? (If you feel too shy to ask this, perhaps the doctor or health worker can talk to your partner.)
- Do I need to see a doctor again? If so, when?

Eat soft, mild foods that are easy to digest.

Rest as much as you can. If you are at home, ask your family to take care of your daily chores. A few days spent taking care of yourself can help you get better faster.

Watch for signs of infection: yellow *discharge* (pus), a bad smell, fever, hot skin near where you were cut, or more pain. See a health worker if you have any of these signs.

If your operation was in the *abdomen*, try not to strain the area that was cut. Press against it gently with a folded cloth, blanket, or pillow whenever you move or cough.



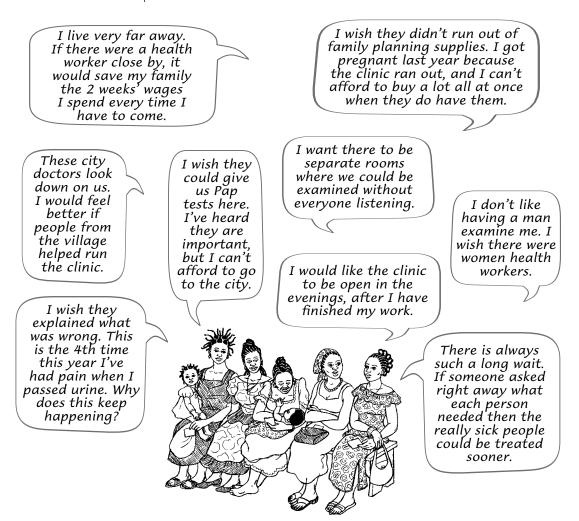
To keep your lungs healthy and prevent pneumonia, move around if you can. While in bed, take deep breaths and try to sit up often.

Working for Change

Millions of people throughout the world suffer and die from illnesses that could have been prevented or treated if they had access to good medical care. And even where health services do exist, there are many barriers that keep women, especially poor women, from using them.

But together, health workers and groups of women can change the medical system. They can make it a resource rather than a barrier—for women as they try to solve their health problems. The medical system will not change on its own, though. It will change only when people demand it, and when they offer creative ways to bring the health care that people need within the reach of all.

A good place to begin changing the medical system is by discussing the health care problems that affect people in your community—including lack of access to good care—with other women and men.



Women can also work together to:

• help every member of the community to learn about women's health problems. For example, you can organize a campaign to explain how important it is that women get good *prenatal* care. If women and their families know about women's health needs, women will be more likely to use the health services that already exist. They will also be more likely to demand that new ones—such as better treatment and screening for cervical and breast cancer—be made available.



- see how existing health resources can be improved. For example, if there is already a community midwife, how can she get training in new skills?
- find new ways to make health care available. It is important to think about what health services you want to have, and not just what you have now. So, if there is no health worker now, how can one be trained and supported? If there is already a clinic, could it offer new services like workshops or *counseling*?
- share the knowledge each woman has about health care. Women already do much of the 'health work' in the community. For example, it is usually women who care for the sick, teach children to stay healthy, prepare food, keep the home and community clean and safe, and help other women have babies. Through this work, they have learned many skills that they can use to care for each other and every member of the community.