Assessing the role of marginalized community groups and its impact on strengthening health systems of Gilgit-Baltistan and Chitral, Pakistan.

Department: Community Health Sciences

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Background: In every society, the poor and marginalized generally suffer from the worst health conditions and outcomes. Yet health systems usually are not structured to reach out to these people and ensure that they have full access to services, and that their specific needs are addressed in a respectful and non-humiliating manner. Even where community participation in the governance of health systems exists, it is rare for the poor and marginalized to be adequately represented and for their concerns to be taken into consideration. Their voices are thus excluded from decisions and resource allocations that could benefit them.

Primary Objectives:

- Refine the concept of "poor and marginalized" for this specific context
- Identify the specific needs and concerns of the marginalized regarding access and quality of service delivery
- Assess the role of marginalized groups in health systems governance, including resource allocation and evaluation of health providers
- Assess health system's responsiveness to the health needs and service concerns of marginalized groups
- Propose strategies to strengthen community involvement in health system management and evaluation

Methods: Participatory action research is the principle approach. Also qualitative methodologies such as family ethnographies and use of participatory rural appraisal tool will be utilized.

Research Impact\Expected outcome\Result: We will be looking for specific examples of how health systems with health committees have (or have not) sought to ensure that poor and marginalized people receive fair and dignified treatment. Some of the indicators of good treatment are as follows:

- Marginalized are not more likely to wait long or be turned away.
- Health providers are caring and pleasant to all people, regardless of whether they are marginalized.
- Marginalized feel that they can discuss anything with health providers without worrying about being humiliated or losing confidentiality.

- Marginalized feel special effort is made to help them to feel welcome in health facilities or by community midwives.
- those with little money still are able to get necessary health services; and
- Marginalized are asked their opinion of health services and feel that they can make suggestions for improvements.