

Chapter 3

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How to use this chapter:

This chapter can help anyone hoping to receive care in their medical system, especially if getting care in a clinic or hospital is new to you. It will help you know what to expect and how to prepare. Because many medical systems have problems, including a lack of respectful and high quality care for women and other groups that face discrimination, the chapter offers suggestions about how to get better care and what communities can do to improve medical and health care systems.

The Medical System



Most areas of the world have several kinds of health care. There may be community health workers, midwives, traditional healers, doctors, nurses, and others. They might work in their own homes, in clinics or health centers, or in hospitals. They may be in private clinics or hospitals (charging more 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.

Many illnesses go away on their own and some health problems are commonly treated at home. But sometimes you or your family will need care from the medical system.

Unfortunately, the health system does not work well for everyone. Good care is hard to get when you lack enough money or live far from health services. Even when a health clinic is nearby or low-cost, it may not offer the services you need. And people who face discrimination also often receive poor health care. This happens to many women, including transgender and homosexual women.

► When trained promoters give basic health care in the community, everyone gets better care for less money.



Solving Health Problems

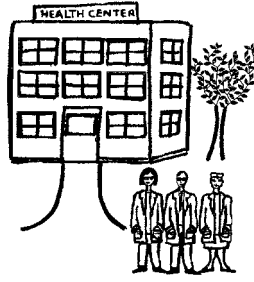
The Medical System



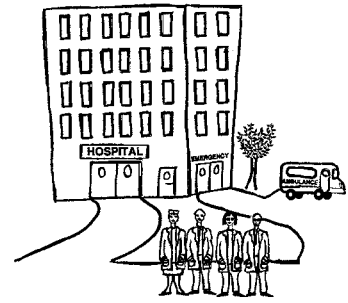
health promoters



health promoters
and nurses



doctors and
nurses



doctors, nurses,
and specialists

Not all communities have all levels of medical services. However, for people to get good care, those working in different services in the medical system need to communicate with each other and work well together.

IMPORTANT HEALTH SERVICES

The medical system offers many kinds of services. Some services, like surgery, x-rays, or ultrasounds (see page 37), are usually only available in hospitals. But the following services 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, *hepatitis*, HPV, and COVID.
- **care during pregnancy** (*prenatal care*) to find and treat problems before they become serious.
- **family planning services** to help people with safe, effective methods to prevent pregnancy, allowing them to decide when or if they have children.
- **health exams** to help find and treat problems such as *anemia*, malaria, high blood pressure, diabetes, and *sexually transmitted infections (STIs)*, including *HIV*.

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. Other tests require specialized laboratories and equipment that are more likely to be found in a larger health center or hospital.

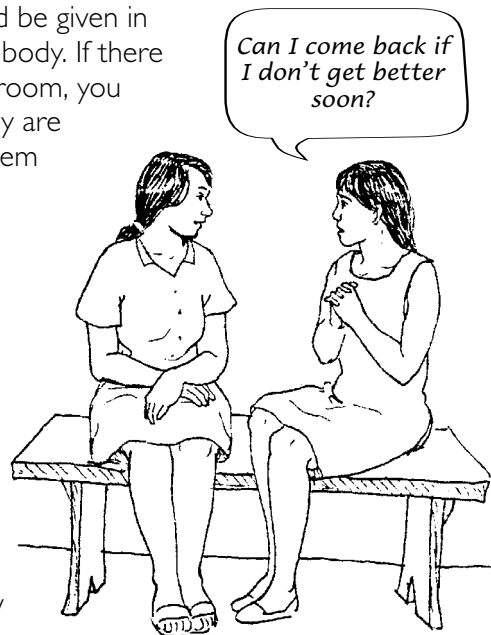
Some services are only available in hospitals. For a serious illness, *complications* from childbirth or abortion, or an *operation*, a person will probably need to go to a hospital.

Find out about the clinic or hospital

Before you get care, find out about the health service by talking with people you trust who have been there. Ask if there are social workers who can help patients get or pay for services. Also look for online information or their website.

No matter where you go for health care, anyone helping you 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, the language you speak, how you express your gender or sexuality, 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 health worker should invite you to ask questions and 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 have choices about where to go for treatment.
4. **Safety.** Treatments should be safe and offered because a good result is more likely than any harm. Any risk should be explained, as well as how to take any medicines or any other actions needed to safely recover.
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 should have the right to tell them to leave if you do not want them there.
7. **Comfort.** Being touched by a health worker or their medical instruments may be uncomfortable. They should take steps to make you 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 see the same person, or have a written record of the care you received to take to a new doctor, nurse, or health worker.



How to Get Better Care



risks and benefits of treatment

► *It often helps to plan ahead and write down the questions you want to ask before you go for medical care.*



- *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?*

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 AND WHAT TO ASK

Try 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 problem and the possible causes. For help thinking about health problems, see Chapter 2, “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 using, including aspirin, traditional remedies, or family planning methods.

You will want the health worker to give you a clear explanation about your health problem so you can choose the best treatment and do what is needed to get better. If you don’t understand what you are told, it is not your fault. Some doctors and nurses are not good at explaining health problems.

Asking questions shows that you care about your health. Be respectful but firm! Even very busy health workers should want you to fully understand your situation. They will not know what information you need unless you ask. Prepare your questions in advance to remind you, in case only some are answered in the information you are given.

The exam

To find out about your health problem and if it is serious, you may need an exam. 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 the part of your body that is affected. If you would feel more comfortable, ask a friend to be in the room with you during the exam. You can ask if the exam will be uncomfortable or if there are ways to make it hurt less.

Tests

Tests can give more information about a health problem and the best way to treat it. 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).
- taking *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 they will learn from the test, and what would happen if the test was not done.

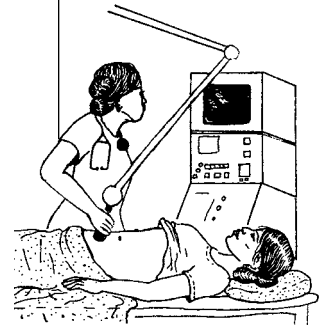
BRING A FRIEND OR FAMILY MEMBER

Many people worry about seeking medical care—even for illnesses that are not serious. When you are not feeling well, it can be hard to speak up and get the care you need. Having someone you trust with you can help. A friend can:

- help think of questions to ask, remind you to ask them, and make sure they are answered.
- answer questions if you are too sick to talk.
- keep you company while you wait and help you watch your children.
- stay with you while you are being examined, to support you and make sure the doctor acts in a respectful way.



pelvic exam



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.*



If you are very sick, someone who can give information should go with you.

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.



If 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 you do go to a hospital, 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 they 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 help prevent mistakes and decide if you want them to do it.
- 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 health records when you leave.

Common procedures for reproductive health problems

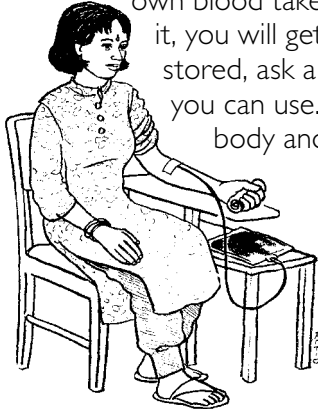
When there is a serious health problem with the reproductive system (see Chapter 4, “Understanding Our Bodies”), a procedure is sometimes the only answer. Some procedures involve cutting into the skin to fix problems inside the body and must be done by doctors in a hospital. Other procedures can be done in different settings by a variety of trained health workers. Common procedures for reproductive health problems include:

- **Emptying the womb** using a combination of suction and medical instruments. Called a D&E, this is sometimes necessary during or after a miscarriage or abortion, or to find the cause of abnormal bleeding from the vagina. Both a D&E and an MVA—which uses suction only to empty the womb (see page 244)—can be done in clinics and other settings by many types of trained health workers.
- **Birth by operation** (*cesarean section* or *c-section*). When complications make normal labor and birth too dangerous, a cut is made in the belly area so the baby can be born. C-sections can be life-saving, but many are done when they are not needed. See Chapter 6, “Pregnancy and Birth.”
- **Sterilization**. During this operation, the tubes between the ovaries and the womb are cut and the ends tied. This prevents the eggs from reaching the womb, so sperm cannot cause pregnancy (see page 222).
- **Removing the womb** (*hysterectomy*). A hysterectomy should be done only when there is no better way to solve your health problem (see page 381).

Blood transfusions

A *blood transfusion* may be given in an emergency, when you have lost a lot of blood. It can save your life. However, if the hospital has not tested for and rejected contaminated blood, it may carry diseases such as hepatitis or HIV. Avoid blood transfusions except in cases of life or death emergencies.

If you must have an operation that you know about ahead of time, ask to have 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 if they are willing to donate blood that you can use. The person has to have a blood type that will work in your body and be checked for hepatitis and HIV.

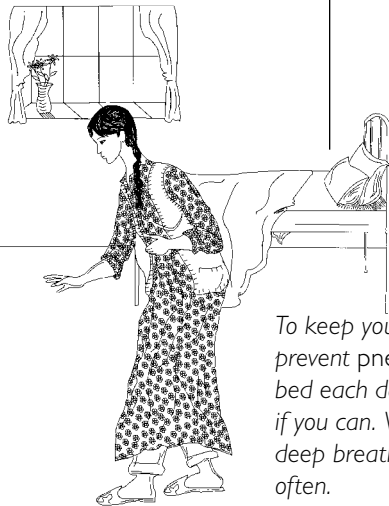


If you must receive blood from an unknown person and the hospital does not test its blood for HIV, there is a risk that you might become infected. After the transfusion, protect your partner by practicing safer sex for 3 months and then get tested for HIV. For more information, see Chapter 17, "HIV," and Chapter 12, "Sexual Health."

After you have an operation

Before you leave the hospital, ask:

- How should I clean the area where the cut is healing?
- What should I do about pain?
- How long should I rest?
- Are there foods I should eat or avoid?
- When can I have sex again? (If you feel too shy to ask this, perhaps your partner or a friend helping you can ask the health worker.)
- Do I need to see a doctor again? If so, when?



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

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

Watch for signs of infection: fever, or the area that was cut is red, swollen, hot or painful, has pus, or smells bad. 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.

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 poor people, especially women, from using them.

Working together with health workers, we can organize to change the medical system. We can make it a resource—rather than a barrier—for solving health problems. The medical system will not change on its own, though. It will change only when people demand it, when we develop creative ways to bring better quality health care directly to the people who need it most.

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

I live very far away. If there were a health worker close by, it would save my family the 2 weeks' wages I spend every time I have to come.

I wish they didn't run out of family planning supplies. I got pregnant last year because the clinic ran out, and I can't afford to buy a lot all at once when they do have them.

These city doctors look down on us. I would feel better if people from the village helped run the clinic.

I wish they could give us Pap tests here. I've heard they are important, but I can't afford to go to the city.

I want there to be separate rooms where we could be examined without everyone listening.

I don't like having a man examine me. I wish there were women health workers.

This clinic doesn't really know or care about the problems young people most worry about. They should ask us!

I would like the clinic to be open in the evenings after I have finished my work.

There is always such a long wait. If someone asked right away what each person needed, then the really sick people could be treated sooner.



We can also work together to:

- help every member of the community learn about health problems that need more attention. For example, you can organize a campaign to explain the benefits of good prenatal care in pregnancy. Help everyone learn which exams and what kinds of care are most important, and encourage people to use the services that already exist. The more people use existing services, the easier it is to demand services not yet available, such as better screening and treatment for cervical and breast cancer.



- improve existing health resources. For example, if there are already community midwives, how can they get training in new skills?
- make health care available in new ways. Think about the health services you want, 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?
- find ways people can share their own experience and knowledge about health care, for example, by discussing together all the “health work” people already do in the community. It is usually women who care for the sick, teach children ways to stay healthy, prepare food, keep the home and community clean and safe, and help deliver the babies. Through this work, they have learned many skills that they can share and use to care for each other and every member of the community.

► You can find more ideas and examples about changing health systems in the chapters: “Taking Action for Women’s Health” and “Communities Organize for Women’s Health,” in Hesperian’s book, **Health Actions for Women: Practical strategies to mobilize for change.**