

Primary Care in Riobamba, Ecuador



Experiences of General Practitioners Caring For The Quichua Population Of Cacha

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Primary care delivery in Riobamba, Ecuador is complicated by many competing and interwoven factors. The aim of this study was to observe general practitioners in the community and identify the challenges they faced in caring for the population.

Maternal care

- 'embarazadas' are marked on a circular map, each ring representing 10 kilometres
- risk assessment depends on combination distance from hospital x maternal age x other health factors (poverty, employment, etc.)
- employment of doctor tied to successful maternal care
- biggest impediments are isolation and nutrition

Nutrition

- lack of nutrient rich diet main etiology of disease
- high demand for multivitamins, in particular calcium and iron
- traditional diet is nutritionally dense, but most produce is sold at market – people feed themselves from small bodegas that sell largely packaged food products
- government provides clinics with enough iron supplements to give during pregnancy, and for three months post-partum

Sexual health and reproductive rights

- abortion is illegal in Ecuador
- at home tests are expensive, blood tests are free in hospital – but this means patient must first get to the hospital
- government will supply free contraceptive implants, but these must be kept in for five years
- traditional for families to be very large, marriage and pregnancy not uncommon amongst very young teenagers

Poverty, oppression, and isolation in disease

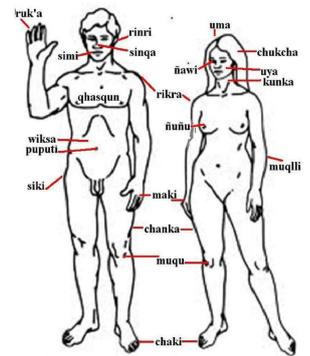
- most cases are chronic illnesses that cannot be divorced from living in impoverished conditions
- many patients come into clinic only when illness is at point where full recovery is not possible
- clinical visits are free but widespread mistrust in the community means allopathic care often seen as last resort
- distance of patients from clinics means high barrier to access of regular care



The main health clinic in Cacha. There are 12 other, smaller clinics located across the parish, but many patients are advised to access this one - if they can - as it tends to experience less shortages of medications, diagnostic tools, and healthcare workers. It is located approximately 50 minutes from the main hospital in Riobamba.



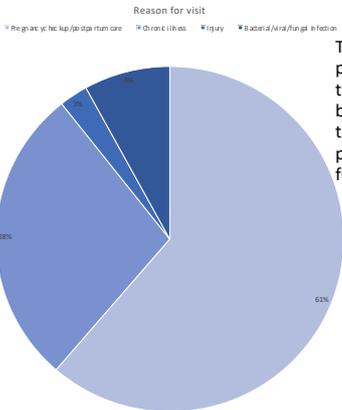
Toda una Vida – All of a Life medicine tree outside Cacha's principal clinic. There is a box to the side intended for free condoms, which is infrequently filled.



The vast majority of doctors are Spanish speakers, whereas the indigenous population predominantly uses *Quichua*. Sometimes younger, bilingual members of the community can help with translation, and sometimes doctor and patient must communicate with simple terms and hand gestures. This, obviously, complicates and impedes a fluid relationship.

Pregnant	Over 65	Under 5	Hypertensive	Diabetic	Handicapped	TB
5	1	8	1	2	2	1

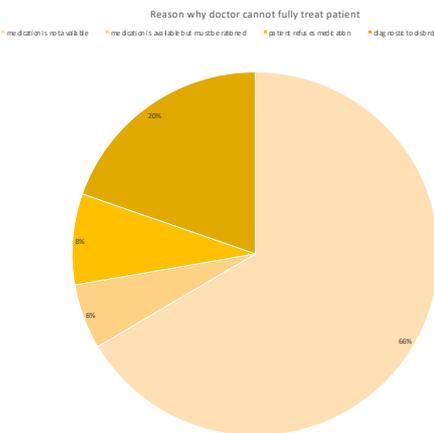
This table represents the 7 principal categories into which doctors divide their at-risk patients. Within an area of 3.5 square kilometres, these individuals are recorded and then mapped. Doctors check how frequently these patients visit and will make trips to their homes if they do not appear within a certain period of time depending on their condition. In this table are the average numbers of these patients, given a mean population of 45 persons per 3.5 square kilometres.



This chart was created from data gathered that recorded the chief presenting complaint/motive for visit by the patient. As can be observed, the majority of patients require maternal care. Injury and illness with bacterial/viral/fungal origin tend to be treated in the home. Only when these become unmanageable do patients come in, and often at that point their case comes under the chronic category as it can no longer be fully resolved.



Roads in Cacha are made of dirt, and often become impassible due to frequent rain. Both patients and doctors most often travel by foot.



This chart was created from data gathered that recorded the chief reasons why doctors could not fully treat a patient to their satisfaction. Half the battle is getting a patient to come to the clinic, or allowing the doctor into their home. Then in many cases they do not have the medication that the patient needs. This feeds a cycle where the patients feel that the doctors cannot help them, so they are reluctant to be treated by them - and on, and on.



Doctors on a home visit – in this case to administer a child's vaccines. They deal with difficult terrain, high altitude, and aggressive dogs.



Mapa Parlante de la Parroquia de Cacha – Keyed Map of the Cacha Parish. These 'talking maps' are hung outside of every clinic, and use symbols to show where both important landmarks and important groups (such as diabetics and pregnant women) are located. These are both for the doctors to keep track, as much as they are for the local community to do the same.



El Chimborazo

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