

Course name:

**Health Education and interpersonal
communication**

Course code:

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Community Diagnosis



Definition of a “Community”

A cluster of people with at least one common characteristic (geographic location, occupation, ethnicity, housing condition.....)

A group of people with a common characteristic or interest living together within a larger society

Definition of Community Diagnosis

The identification and quantification of health problems in a community as a whole in terms of mortality and morbidity rates and ratios, and identification of their correlates for the purpose of defining those at risk or those in need of health care.

The Community Diagnosis Process is application of techniques of diagnosis of an individual to the community

Comparing individual diagnosis with community diagnosis

(Similarities)

clinical diagnosis

1. Obtain a history of the patients' symptoms.
2. Examine the patient and observe sign.
3. Perform laboratory test, x-ray and others.
4. To infer causation from the history and test result to make the diagnosis.
5. Provide treatment.
6. Follow-up and assess effectiveness of the treatment.

Community diagnosis

1. Obtain health awareness of the community by informal meeting and discussions.
2. Obtain measurable facts of causes through basic demographic survey. (indicator)
3. Conduct specific survey based on finding of basic demographic survey.
4. Make inference from the data (indicator) to make the community diagnosis.
5. Prescribe community treatment or community health action as part of community health programme.
6. Evaluate (follow-up) the effect of community health action

Comparing individual diagnosis with community diagnosis

Differences:

Individual (clinical) diagnosis

1. Patient aware of the problem.
2. Patient take initiative for problem solving.
3. Pathological condition affects patient alone.
4. It may or may not be related to

Community diagnosis

1. Community may or may not be aware of the problem.
2. Community rarely takes initiative.
3. Can not be treated as isolated occurrences.
4. Each condition is linked to the inter-related factors in the environment.

Purposes of community diagnosis:

- Identification and quantification of health problem
- Identification of those who at risk
- Identification of community needs and problems
- Determine available resources
- Set priorities for planning .

Importance of Com. Diagnosis

- Provides baseline information about the health status of community residents.
- Ensures that decisions are based on solid information and evidence.
- Helps set priorities.
- Helps Regional Health Authorities assess outcomes and results in the longer term.

Importance of Com. Diagnosis

- Gets community members, stakeholders and a wide variety of partners
- involved in the decision-making process, helps them understand the difficult choices that need to be made, and builds support and commitment for addressing health needs on a community-wide basis..

Community Diagnosis is done using a tool called "Health Indicators" which are the variables used for the assessment of community health.

Indicators must be:

valid, reliable, sensitive, specific, feasible and relevant.

Health indicators can be classified as:

- Mortality indicators
- Morbidity indicators
- Disability rates
- Nutritional status indicators
- Health care delivery indicators
- Utilization rates
- Indicators of social and mental health
- Environmental indicators
- Socio-economic indicators
- Health policy indicators
- Indicators of quality of life
- Other indicators

Community analysis:

Community analysis is the process of examining data to define needs strengths, barriers, opportunities, readiness, and resources. The product of analysis is the “community profile”

Types of Community diagnosis

- Comprehensive community diagnosis
 - ▣ Aims to obtain general information about the community
- Problem Oriented community diagnosis
 - ▣ Responds to a particular need

Steps of community diagnosis

Community Diagnosis :

Steps in Implementation Phase

11

- **.1 - Determine the objectives**
- **2- Define the study population**
- **3- Determine the data to be collected**
- **4- Collecting the data**
 - Records review
 - Surveys & Observations
 - Interviews
 - Participant observation

Community Diagnosis :

Steps in Implementation Phase^{-cont.}

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- **5- Developing the instruments**

- ▣ Survey questionnaires
- ▣ Interview guides
- ▣ Observation checklist

6- Actual data gathering

Community Diagnosis :

Steps in Implementation Phase^{-cont.}

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- **7-Data collection & Data summarization**
- **8- Data Presentation**
- **9-Data Analyses**
- **10- Problem identification :**
 - (Magnitude, Trend, Comparison) -
 - (Health Status , Health -related, Health Resource)

Community Diagnosis :

B- Steps in Implementation Phase^{-cont.}

□ . 11- Priority-setting

- Nature of the condition/problem presented
 - Classified as health status, health resources or health related problems
- Magnitude of the problem
 - Severity of the problem which can be measured in terms of the proportion of the population affected by the problem

Community Diagnosis :

B- Steps in Implementation Phase^{-cont.}

□ . 11- Priority-setting

- Modifiability of the problem
 - Probability of reducing, controlling or eradicating the problem
- Preventive potential
 - Probability of controlling or reducing the effects posed by the problem
- Social concern
 - Perception of the population or the community as they are affected by the problem and their readiness to act on the problem

Characteristics of community diagnosis

- ability to address important community problems
- ability to identify most of the targeted health events
- adequacy in reflecting changes in distribution of events over time, place and person
- participatory,
- uncomplicated,
- sensitive, timely,
- and inexpensive

Basic Data in community diagnosis process

1. Background/ Setting

1.1 Local history

1.2 Geography – Part of which Region, Municipality/ City – Boundaries whether land locked, coastal or both – Land area – Subdivisions, political, economic or social

1.3 Climate

2. Demography

2.1 Geographic distribution Age – sex structure (Population pyramid)

2.2 Factors such as: Migration; Age dependency (18-49 yr); Birth/death rate; Ethnic dist; Density

3. Economic status

3.1 Sources of income

3.2 Indications of economic status:

Employment; Income per capita; Poverty level; Economic organizations

4. Social Indicators

Education Housing, Communication,
Transportation, Sources of health care
and health information Public assistance
Leadership pattern

Health Data in community diagnosis process

1. Health Status of the Community

- Top Mortality
- Top Morbidity

2. Environmental Indices

- Water Supply
- Excreta Disposal
- Insect Control
- Sanitation,
- Garbage Collection

3. Food / Nutrition

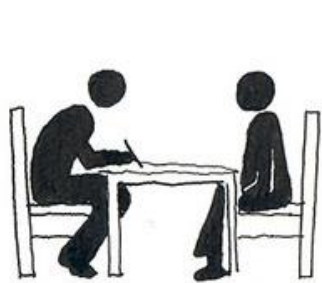
- Sources of food: Markets/ Public eating establishments
- Prevalence of Malnutrition

4. Health Resources

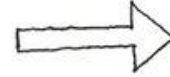
- Manpower / Health officer, nutritionist, Nurse, Doctor
- Health facilities
- Health financing: Public funds versus private funding
- Health related legislations: National; Local

5. Organized Community health programs

- Expanded program on Immunization
- Maternal and Child health
- Reproductive health
- Nutrition programs



HISTORY



PATIENT
DIAGNOSIS

EXAMINATION

TESTS



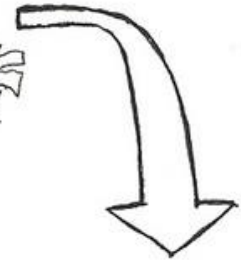
TALK WITH
COMMUNITY



RECORDS



SURVEYS



COMMUNITY
DIAGNOSIS