Improving recovery outcomes for burns survivors in India: a systems approach - June 2022



### Facts:

- In 2019, 20% of global burns mortality; 23,000 fire-related deaths were reported in India. Around 1.5 million disabilityadjusted life years were estimated to be due to firerelated injuries.
- There are less than 1500
  hospital beds to cater for this
  huge burden of burns, with
  30 burn centres in the public
  sector and 37 in the private
  sector.
- The risk of incurring high out-of-pocket costs and catastrophic expenditure for the family is highest in case of burns injury.

# **Project Cycle:**

2020-2022

#### **Partners:**

- The George Institute for Global Health, India
- Directorate General of Health Services, MoHFW. Government of India

# **Supporters:**

Indian Council of Medical Research, New Delhi, India

# Principal Investigator

Dr Jagnoor Jagnoor

## **Background:**

- Burns is a major public health issue in India with a high burden of mortality and disability.
- The lack of effective coverage to quality burns services, and the absence of coordinated efforts within the health system, contribute to high mortality and morbidity rates.
- Our work identified three major knowledge gaps limited understanding about the pattern of burns, delays in healthcare seeking and, communitybased rehabilitation.

### Aims:

- To understand the clinical and epidemiological profile of burn patients seeking treatment at the tertiary care burn centres in Uttar Pradesh, India and how the data systems can be improved to inform quality burn care.
- To identify the features of the health systems which affect the burns care and its recovery outcomes.

### Methods:

- A mixed-methods approach is adopted for the implementation of burns registry, qualitative inquiry on health system gaps and policy analysis.
- The pilot study will implement a burn registry in selected burn centres in Uttar Pradesh to capture data on burn patients prospectively.
- The qualitative approach aims to build an understanding of stakeholders' perspectives on barriers and ways to improve systems and policy responsiveness.

## **Impact:**

- Knowledge gained through the study will create robust data and information gathering systems for burns.
- Health impact through ongoing quality improvement, better planning and program development.
- Policy impact through comparative analysis to improve implementation and rehabilitation services of burn care at a programmatic level.

#### **Contact:**

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