

Research Article

A Descriptive Study to Assess the Awareness Regarding Services Rendered for Screening and Control of Non-Communicable Diseases (NCDs) at Ayushman Arogya Mandir (AAM) Among People in a Selected Community of New Delhi.

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A B S T R A C T

Non-communicable diseases are a leading cause of morbidity and mortality worldwide, placing a significant burden on healthcare systems. The Government of India has strengthened primary healthcare services through Ayushman Arogya Mandirs, which provide comprehensive services including screening, prevention, and management of NCDs. However, the effectiveness of these services largely depends on the awareness among the community.¹ The present study aims to assess the level of awareness regarding services rendered for the screening and control of NCDs at AAM among people in a selected community of New Delhi. A quantitative approach, descriptive survey design was carried out on 100 people (above 18 years) residing in Tughlakabad village New Delhi. Purposive sampling technique, structured demographic and awareness questionnaire and descriptive statistics was used. The findings revealed that majority of the sample subjects i.e. 39% were highly aware, 37% were moderately aware and 24% were least aware, indicating there is still a need to improve continuous community-based health education to promote better health outcomes.

Keywords: Non-Communicable Disease, Ayushman Arogya Mandir, Awareness, Services

Introduction

Non-communicable diseases have emerged as one of the most significant public health challenges globally, contributing to a steadily increasing burden of morbidity, disability, and premature mortality among people. Delays in symptom detection have become a serious worry for those who frequently manage their own health only after taking care of home duties. As a result, screening programs

are crucial for early diagnosis, prompt referral, and long-term disease management. In India, non-communicable diseases are thought to be responsible for two-thirds of all deaths, with the most common causes being hypertension, diabetes mellitus, cancer, and cardiovascular diseases. The prevalence of lifestyle-related risk factors is significantly higher in urban areas like New Delhi because of elevated stress levels, decreased physical activity, exposure to

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poor food surroundings, and sociocultural obstacles that prevent people from getting frequent checkups. Even while public health programs promote preventive care, many people are still ignorant of the services that are available, the significance of early identification, or the long-term consequences of untreated risk factors for non-communicable diseases. Consequently, non-communicable disease screening is still underutilized, especially in low-income or marginalized communities.¹

The Ayushman Arogya Mandirs (AAMs) are easily accessible, neighborhood-based medical institutions that provide full primary care services. These facilities provide a strong emphasis on routine screening for disorders that disproportionately affect people, such as diabetes mellitus, hypertension, anemia, and common malignancies like breast, cervical, and oral cancer. Additionally, the effort aims to lessen the stigma and myths associated with preventive health services while promoting health-seeking behavior, self-care practices, and informed decision-making. These services are available, however there are frequently discrepancies between policy and reality. Lack of understanding, cultural norms, fear of being diagnosed, low perceived susceptibility, restricted autonomy in healthcare decisions, financial restrictions, or mistrust of healthcare providers are some reasons why people might not seek screening. Participation rates will unavoidably rise if people have positive attitudes regarding health seeking behaviors and are aware of the goals, methods, and advantages of screening. On the other hand, even the most well designed public health programs may be less effective due to unfavorable attitudes or a lack of understanding.²

Increasing screening coverage, raising early detection rates, and eventually lowering the community's long-term burden of non-communicable diseases all depend on these insights. Research repeatedly shows that although many individuals may have heard of diseases like diabetes mellitus or hypertension, they frequently don't know about risk factors, how these conditions proceed silently, or the significance of routine screening even in the absence of symptoms. Additionally, there is still a lack of knowledge in a number of localities regarding government-funded screening services or national programs.³

The Ayushman Arogya Mandir (AAM) project, which attempts to provide complete primary healthcare services, including screening and control of non-communicable diseases, is one of the measures the Indian government has started to combat non-communicable diseases. India's lifestyle habits have drastically changed as urbanization picks up speed, leading to decreased physical activity, increased intake of processed foods, chronic stress, environmental pollution, and an increase in alcohol and tobacco usage

among some demographic groups. These variables are linked to diabetes mellitus, cancer, and hypertension, all of which need to be managed throughout life and detected early.⁴

In the past, maternal and reproductive health have been the main factors used to assess people's health in India. Although significant, the emphasis has obscured the growing number of people who suffer from chronic illnesses. Furthermore, people frequently put their family member's health ahead of their own, which further postpones regular checkups and screenings. The rebranded and improved Ayushman Arogya Mandir (AAMs) primary healthcare facilities, which are intended to provide complete primary health services, are essential to the execution of this program. With free or reasonably priced tests, counselling, follow-up services, and referrals, these centers act as the initial point of contact for communities. The purpose of their strategic location inside local communities is to lower accessibility, cost, and travel related hurdles. Additionally, the program's outreach is improved by integrating community health officers, ANMs, ASHAs, and other frontline workers. This makes it possible for the program to reach underprivileged individuals who might not otherwise be able to access the official healthcare system.⁵

In order to lower complications and enhance quality of life, early detection by routine screening and prompt management is essential. Ayushman Arogya Mandirs were founded with the goal of enhancing primary healthcare by offering all encompassing services, such as community level non-communicable disease screening, prevention, and control. However, people's awareness and comprehension of these services availability and significance are crucial to their efficient use. In order to find gaps and enhance outreach, utilization, and general health outcomes, it is crucial to gauge people's awareness of non-communicable disease screening and control services at Ayushman Arogya Mandirs.⁶

This study is necessary to assess awareness regarding services rendered for screening and control of non-communicable diseases in community people. Understanding their awareness is important for improving their awareness about services rendered for non-communicable disease, as non-communicable illnesses continue to negatively impact people's health in urban India. By concentrating on a particular community in New Delhi, this study seeks to offer insightful thoughts that promotes awareness among community people, enhance better understanding and develop thoughtful insights through dissemination of informational pamphlet.

Problem Statement

A descriptive study to assess the awareness regarding services rendered for screening and control of non-

communicable diseases (NCDs) at Ayushman Arogya Mandir (AAM) among people in a selected community of New Delhi.

Objectives

- To assess the awareness regarding services rendered for screening and control of noncommunicable disease (NCDs) at Ayushman Arogya Mandir (AAM) among people in a selected community of New Delhi.
- To develop and disseminate informational pamphlet on services rendered for screening and control of non-communicable disease (NCDs) at Ayushman Arogya Mandir (AAM) among people in a selected community of New Delhi.

Methodology

The present study adopted a quantitative, non-experimental descriptive survey design to assess the awareness regarding services rendered for screening and control of non-communicable diseases at Ayushman Arogya Mandir among people in a selected community of New Delhi. The study was conducted in the Tughlakabad community, where the population comprised individuals aged 18 years and above. A sample of 100 participants was selected using a purposive sampling technique based on predefined inclusion and exclusion criteria. Data were collected using a

self-structured, bilingual (Hindi and English) questionnaire administered through google forms, consisting of two sections: demographic profile and awareness-related questions. The tool was validated by seven experts from the fields of Community Health Nursing and Medical-Surgical Nursing to ensure content validity. Prior to data collection, formal permission was obtained from the concerned authorities, and informed consent was secured from all participants while maintaining confidentiality and anonymity. A pilot study was conducted on a total of 6 students, and the findings revealed that it was feasible to conduct the study. The data collection process was completed within a period of approximately 4–6 weeks. The collected data were organized and entered into MS Excel for analysis. Descriptive statistics, including frequency, percentage, mean, and median, were used to interpret the data. The results indicated varying levels of awareness among participants.

Results

Analysis and interpretation of demographic data of selected community of New Delhi in term of age, education, gender, religion, occupational status, monthly income, marital status.

Findings of structured knowledge questionnaire

Table 1. Frequency and percentage distribution of the subjects according to their demographic characteristics (age, education, gender, religion, occupational status, monthly income)

(N=100)

S.No	Categories	Frequency (n)	Percentage (%)
1.	AGE		
	Up to 20 years	15	15%
	21 to 30 years	53	53%
	31 to 40 years	20	20%
	Above 40 years	12	12%
2.	EDUCATION		
	Primary Education	23	23%
	Secondary Education	39	39%
	Graduate	30	30%
	Postgraduate	08	08%
3.	GENDER		
	Male	47	47%
	Female	53	53%
	Other	0	0%
4.	RELIGION		
	Hindu	53	53%
	Christian	01	01%
	Muslim	45	45%
	Others	01	01%

5.	OCCUPATIONAL STATUS		
	Unemployed	35	35%
	Self employed	47	47%
	Private service	17	17%
	Government service	01	01%
6.	MONTHLY INCOME		
	Up to 10,000 Rs	54	54%
	10,001 to 20,000 Rs	23	23%
	20,001 to 30,000 Rs	19	19%
	More than 30,000 Rs	04	04%

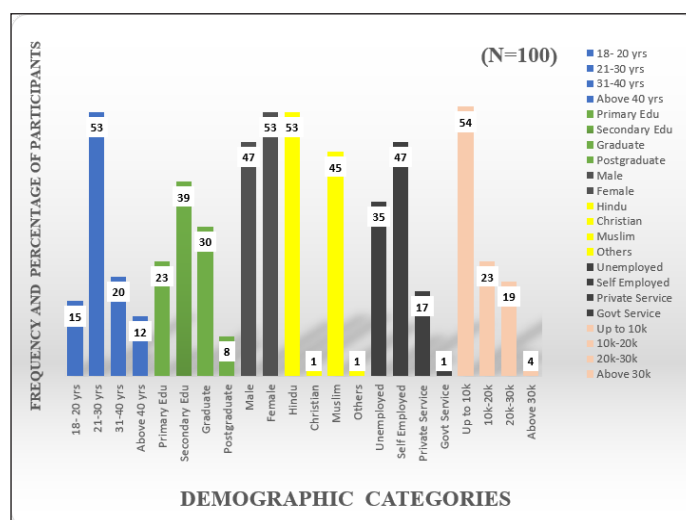


Figure 1.A bar diagram showing the frequency, percentage distribution as per demographic categories of participants

Table 2.Frequency and percentage distribution of the subjects according to their demographic characteristics (type of family, marital status, distance from health facility, ever visited to Ayushman Arogya Mandir, primary source of awareness)

(N=100)

S.No	Categories	Frequency (n)	Percentage (%)
1.	Type Of Family		
	Nuclear family	47	47%
	Joint family	41	41%
	Extended family	04	04%
	Single parent	08	08%
2.	Marital Status		
	Married	55	55%
	Unmarried	43	43%
	Widowed	01	01%
	Separated	01	01%
3.	Distance From Health Facility		
	Less than 1km	45	45%
	1 to 5 km	34	34%
	6 to 10 km	07	07%
	More than 10 km	14	14%

4.	Ever Visited To Ayushman Arogya Madir		
	Yes	60	60%
	No	40	40%
5.	Primary Source of Awareness		
	Printed media/newspaper	25	25%
	Television / radio	12	12%
	Health professional	23	23%
	Other	40	40%

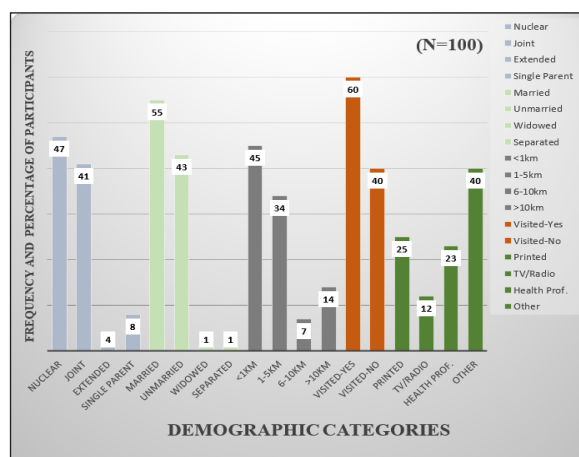


Figure 2.A Bar diagram showing the frequency, percentage distribution of participants as per demographic

Table 3. Frequency, percentage, mean and median distribution according to the awareness score of the participants (N=100)

S.No	Category	Score Range	Frequency (N=100)	Percentage (%)	Mean (M)	Median
1	Least Aware	0 – 8	24	24%	13.78	14.12
2	Moderately Aware	9 – 16	37	37%	-	-
3	Highly Aware	17 – 25	39	39%	-	-

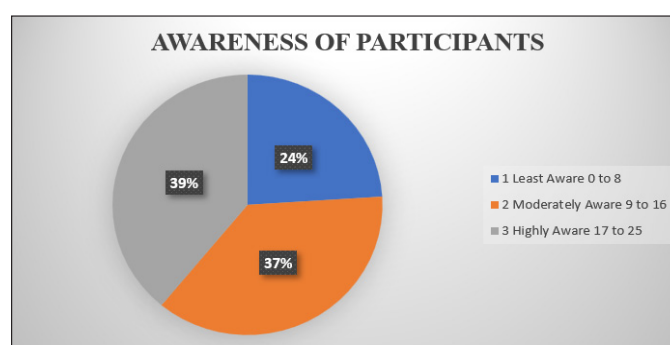


Figure 3.A pie diagram showing the frequency and percentage distribution as per level of awareness regarding services rendered for screening and control of non-communicable disease at Ayushman Arogya Mandir

Discussion

The findings of the present study reveal that the majority of participants were highly aware 39%, followed by moderately aware 37%, while a smaller proportion of participants were least aware 24%, indicating an overall

high level of awareness among the participants. This high level of awareness may be attributed to regular health education activities, regular community outreach programs, and adequate dissemination of information related to available screening services. Participants were aware of

services such as blood pressure monitoring, blood sugar testing, free diagnostic services, availability of essential medicines, lifestyle counselling, and referral services.

The findings of the present study were consistent with the study conducted by Harini, Priya S., et al., in 2024 in Madhurai district, Tamil Nadu, among 165 participants using cross sectional survey sampling method, which reported that a considerable proportion of participants i.e., 80% had high awareness regarding services provided under Ayushman Arogya Mandir for non-communicable disease⁶

The finding of the present study was in contrast with the study conducted by Kumar S., Rai S., et al., in 2025 Varanasi District among 607 participants using systematic random sampling method, which reported that a considerable proportion of participants i.e., 52% had low awareness regarding services provided under Ayushman Arogya Mandir for non-communicable disease.⁷



Figure 4.

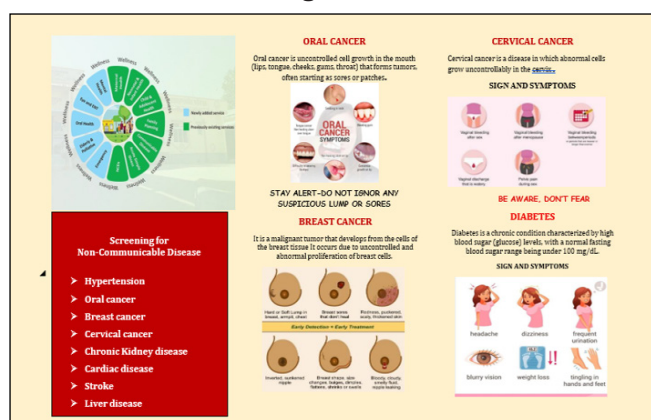


Figure 5.

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