

OUR
COMMUNITY
OUR FAMILY

BHS Newsletter Issue 9

October '22

NEW

Physiotherapy Pg 5

Phulwari Specials Pg 6

All the times the people
came forward with zeal,
responsibility and love!





Fig. 1: Conceptual Framework of Primary Health Care.

What are we trying to say?

The framework for primary health care consists of 3 pillars one - multisectoral (government, non-government, ministries and more) policies and action, two - delivery of quality primary care and essential health functions as the core of health services and three - empowered people and communities. While we speak about policies, decisions and primary care functions quite a bit, we miss out on the third leg that is just as important, the people!

'People should be empowered to optimize their health, both in terms of self-care and as informal care givers, and as engaged communities, whereby people are active partners and actors in health services.' - [An Economic Case on Primary Health Care by World Health Organization.](#)

How can we not celebrate stories of when the community took accountability of their right to health? They came forward, not only for themselves and their families but also for extended loved ones and strangers. This newsletter is solely dedicated to those unsung heroes who contribute to community health, to Primary Health Care with no intention other than serving love.

TABLE OF CONTENTS

Giant leaps, big wins

03 The Spotlight Story

The three short stories

04 The tales of Nanki Bai, Makhna Bhai and Laxman

One step at a time

05 How Gouta's family is managing their 4-year-old child's extrapulmonary TB recovery process

First of its kind

05 The Panchayat held the fort for the very first Rural Sensitization Program in North India.

Phulwari Specials

06 Stories on relocation and an affectionate mother.

Your health, our responsibility

07 The story that inspired us to write this newsletter

Publications

08 Frequent writings, research and more.

Numbers

09 Quarterly Data

Safe passage to life

By Dashrath Chundawat, Community Coordinator

Nanki Bai, our Swasthya Kiran (Community Volunteer) from Futiya Kheda Hamlet, Morwal Village set a new record this quarter. When she learnt that home deliveries can be fatal for the mothers and the infants in her hamlet, she started bringing every pregnant woman and the family to visit the clinic for safe institutional deliveries. Nanki Bai has brought 12 women ever since. If there are patients who need financial support to travel to the clinic, she lends a hand there as well. **She is our voice, and we draw our strength from the bridge she has created between primary care and the people! Like Nanki Bai, we have a cadre of 70+ Swasthya Kirans who volunteer tirelessly towards making the community healthier and safer, one conversation at a time!**



An SK using a uterus model to promote Family Planning.



Tradition weds Medicine

By Sajju, Senior Health Worker

Makna Bhai from Chhani Phala, Manpur Village is a 60-year-old man who is a staunch devotee for the past 20 years. People in his hamlet respect him. When his niece was severely ill with Malaria, they tried treating her in many traditional ways, but her state only got worse. At the very last minute, Makna Bhai listened to the advice of a person from his village who had taken treatment at Amrit Clinic and brought his niece to us. With care received, she recovered. This incident strengthened Makna Bhai's faith with us. Ever since then, he is a vocal advocate for services provided at our clinic, encouraging people to place their trust on us, like he did. Makna Bhai is one of our trusted advisory members. **He brings the fine convergence of ancient tradition and modern medicine among his people!**

"Just come and see!"

By Ramlal, Male Health Worker

48-year-old Laxman Bhima from Gothda Village (40 kms away from the nearest Amrit Clinic) is a construction worker by profession. He had once brought his young nephew suffering from TB after he heard about treatment at Amrit Clinics from other people in the neighboring villages. After his nephew's recovery, Laxman informed the Sarpanch of his hamlet that they need an Amrit Clinic in their village as well. He requested us to come to his village and speak to his people too. The Sarpanch also called the clinic to set up a meeting. **Laxman has linked almost 15 patients dealing with TB, Diabetes and other chronic illnesses and countless people just to visit and see the place that cured his nephew's life altering illness.**



Let us take one step at a time...

Deekshita Yadav, Physiotherapist

Four year old Gouta resides in a village about 5 kms away from Amrit Clinic Ghated. He was brought to the clinic by his parents and diagnosed with Extrapulmonary TB in the knee. Gouta couldn't bend his right knee. He was unable to walk and had difficulty standing. His mother expressed, "We want to see him play like other children, go to school and study. But now, we have to take him to the field with us. We feel very hopeless."

Due to financial constraints, his family stopped his TB treatment earlier this year. Upon learning this, the clinic team immediately found a solution to resume his treatment in June.

Through careful inspection of his condition, we understood that Gouta needs to practice some physiotherapy exercises along with his medications. After receiving consistent physical therapy and medication for three months, Gouta was finally able to stand and take small steps without assistance. Because of the consistent dedication and commitment by his parents towards improving their child's life, the results are fruitful. His mother's commitment to ensuring the recovery of her child has been admirable and outstanding. She never missed a day of helping him with his exercises and made certain that he never skips his medications.



In my initial days of starting the Physiotherapy Program with BHS, I faced numerous challenges. I was worried about how accepting and trusting the community would be with regard to exercises, given the prevalence of various unreliable but quick methods of relief. Mothers like Gouta's continuously restore my faith. "My son can stand, move his knee and take a few steps independently. Thank you..." she whispered softly.

First of its kind!

A Rural Sensitization Program was organized for young doctors from Gujarat and Delhi to explore the grassroot health realities in India. Preparations for this event were set in motion almost 2 months in advance. However, on the very last days, we were left stranded. Due to a bridge collapse on the way to the decided venue we were in need of a new location to host the RSP. With no options available, we were on the verge of calling the program off. That's when the Sarpanch from Nithauwa generously and kindly offered the Panchayat Bhavan for 3 whole days. The Bhavan became the centre of the program, a lush green place in the heart of the village. The event was successful, inspiring all 35 of us!



WHY FEAR? THE COMMUNITY IS HERE!



The Inaugural Ceremony

A Phulwari runs by renting a local house within the hamlet. Most of them are made of mud, are poorly lit and have weak roofs. This year, the house of the Bhopa Kheda Phala Phulwari needed to be shifted. The house owner's previous house was falling apart, requiring him to shift his family to a safer home. After tedious attempts at finding another house for the Phulwari, we were unable to locate a space that matched the requirements. With no hope, we decided on closing the Phulwari down. That's when Anda Ram ji and his wife offered a suggestion. Anda Ram ji, built a house **from scratch** so that the children of his hamlet continued to receive care. He built the house during the merciless rains. "I want to see the children in our hamlet healthy and happy." shared Anda Ram ji. We inaugurated our new Phulwari in Bhopa Kheda last month and the story doesn't end here. We were asked not to bring any laborers for the shifting process. The children in the village made a human chain, running from the old Phulwari to the new one with all the things that needed to be transported. The women in the villages helped in the dusting and arranging of the items while the men carried the big guns - the cupboard, the gas and the trunk of materials. Men, women and children of Bhopa Kheda, they know that this Phulwari victory is all theirs!

"I want to see the children in our hamlet healthy and happy."



Health Workers Geeta, Sundar & Anda Ram ji (extreme right)



My sweet mother...

Bherulal Meena, Nutrition Supervisor

Dholakakar Phulwari has about 28 children enrolled. Some children in this Phulwari are accompanied by their mothers every day and few of them take special care, not only of their child but also of every child that comes to the Phulwari. Meera Bai is one of them. She bathes her children early in the day, attends every Parent's Meeting and encourages mothers from the hamlet to take good care of their children. Some parents are unable to look after their children because of several problems. In turn, children are deprived of care. Meera Bai goes above and beyond her capacity to engage with her children at home and at the Phulwari. Today, both of the kids are healthy and are also visibly bright, narrating stories, reciting poems, identifying birds and animals and also singing the alphabet. Meera Bai is an important role model for other mothers in the hamlet and Phulwari Workers alike!



Labour Room

Your health, our responsibility.

The story that inspired this newsletter's theme.

Ganga Narayan was brought to Amrit Clinic in Bedawal village after being refused to deliver her baby at another establishment. They visited a few private hospitals but were denied admission. She was also denied admission at a Primary Health Center on the day of her delivery.

Ganga comes from a modest family of farmers; her husband works in the field and sometimes migrates to cities for construction related work.

Ganga's body had swollen all over, she was at full dilation ready to deliver her baby when she arrived at Amrit Clinic. Ganga's HB was just 3 grams at the time. All these factors together posed as a challenge for the team, but Ganga delivered a baby boy weighing 1.5 kgs soon after. A very weak, low birth weight baby.

Such cases are referred to the nearest tertiary hospital, and that's what we advised her family as well post-delivery. But they refused.

"They don't treat us well at big hospitals. We don't like going there. Whatever treatment needs to be done, can be done here. We won't be taking her anywhere" shared her husband.

"They don't treat us well at big hospitals, whatever treatment needs to be done, can be done here. We won't be taking her anywhere."

The nurses, health workers and even the doctor present weren't able to convince the family. The next day, a SK (community volunteer) visited Ganga. Upon hearing the severity

of the situation, she spoke empathically to the husband and the family. At the same time, Mr. Hemraj who had come in for his son's treatment also asked if he could step in and speak to the family. He dropped his son home and came back with a bunch of bananas. He offered it to the family. Our SK Bhulki bai and Hemraj ji, who is an active member of our Advisory Committee, together convinced the husband to place their trust on Amrit Clinics and follow our advice. The family agreed. Ganga was accompanied by Bhulki Bai all the way to Udaipur to a tertiary hospital where she received blood transfusion as well. She recovered from there and is now doing fine.

It is sad that her baby boy passed away at 17 days. Ganga wouldn't be here either if it weren't for Bhulki Bai and Mr. Hemraj. Her life was saved, and in many ways so was the life of her 4 children back home.

Publications

[A Low BirthWeight Baby with Sepsis: The Role of Primary Health Centers \(PHCs\) in Managing Sick Newborns](#)

Written by Pradeepa Sekar, Sanjana Mohan and Pavitra Mohan

This is an official publication of the Indian Academy of Pediatrics. This Case Study is a detailed piece on the discovery, diagnosis and management of an infant suffering from Sepsis and how Primary Care rightly intervened to save the child's life.

[The long road to the 'Right to Health' in India](#)

Written by Naina Seth and Pavitra Mohan

This article talks about the new bill passed by the Rajasthan Legislative Assembly with regard to health care being a fundamental right of the citizens. A critical piece gently highlighting the flaws of the bill and the reality of healthcare services in Rajasthan.

[Silicosis: The Occupational Hazard of doing God's Work](#)

Written by Vania D'souza

India Fellow has placed 6 fellows with us, and BHS has been their host organization from 2017 onwards. They have written several blogs over the years. Here is one of them.

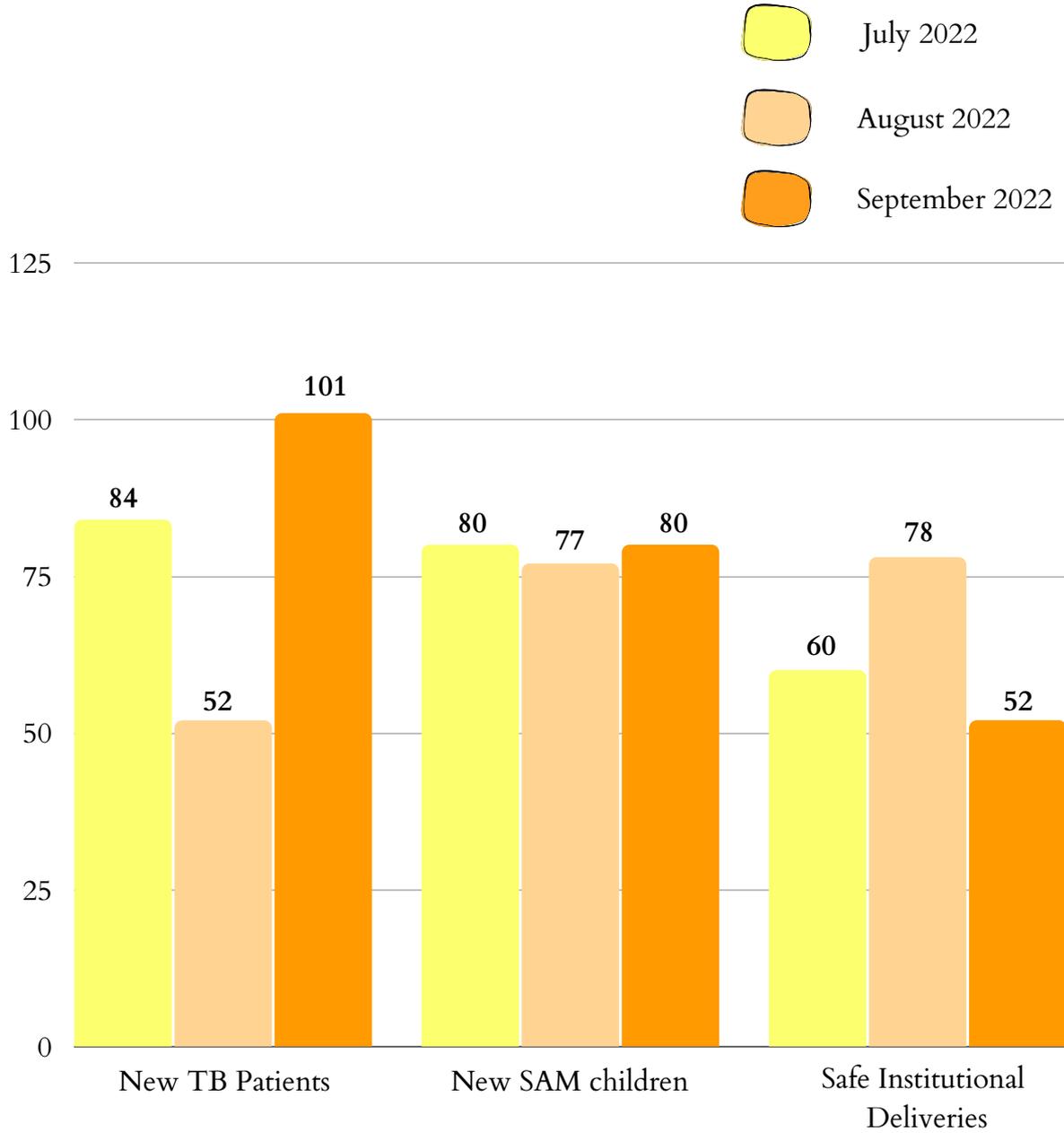
This blog gives the reader a brief introduction to the trajectory of trauma, tragedy and death in the stone grinding and mining industry.

Frequent writings on experiences and observations within the BHS community are recorded through the [blogs](#) on our website.



NUMBERS

Amrit Clinics + PHC Nithuawa have together received a total footfall of **21,503** patients in this quarter!



In this quarter, **769** patients suffering from noncommunicable diseases were treated.

Check out our socials!



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