



# INDIA'S HEALTH AND WELL-BEING:

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# Caritas India Partners **Adopt Child and Women Focussed Strategies** for Malnutrition Eradication

## Director invites well-wishers to **JOURNEY WITH CARITAS**

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# INDIA'S HEALTH AND WELL-BEING:

## Community models have better penetration and access to solving India's health issues

Report by Amrit Sangma, PRCOM

**A** national NGO based out of Delhi advocated strengthening of community involvement to attain health and well-being as envisaged in the newly released national health policy.

To prove its point, NGO Caritas India featured a host of community health volunteers (CHV) amongst several intellectuals and veterans in a two-day national meet in Delhi from March 22-23.

Dr N S Dharamshaktu, special director general of health services in the Ministry of Health and Family Welfare, said during the inaugural function, "What is needed for

achieving sustainable development goals (SDG) is primary healthcare to (reach) rural and urban areas, tribal pockets, migration population and other vulnerable population."

Whether it is the concern of sanitation, hygiene and lack of psycho-social care during emergencies or chasing the lofty target of ending primordial diseases like tuberculosis and malaria, the role of community owned models suggest better reach, affordability and harmony.

Four proven examples, specific to HIV/AIDS and Malaria, presented at the seminar suggest that India's solution to health and well-being are in the hands of community.

### Health is not everything, but everything is nothing without good health



39 year old Pradeep Arora from Delhi is a three times suicide survivor. He was tested HIV positive in 2001. When he confessed his situation to his wife, expectedly she left for her parent's home from where she filed for a divorce. For the next six long years, Pradeep lived in trauma and despair.

In 2006, when Pradeep was invited to work with Deepti Foundation, a partner NGO of Caritas India working for HIV positive people, he gradually got convinced of a new mission in his life.

In the last more than 11 years, Pradeep has been able to support and nurture close to 3000 positive people. Some of his works are to provide medical counselling to MSM (men having sex with men), FSW (female sex workers),

transgenders and drug users who find easy to relate with and confide in him.

Pradeep's case is a unique example that goes to state his present mental health and overall well-being which he has acquired; something that he continues to enjoy despite his physical health which is under strict regulation.

His second marriage according to Pradeep is one of his biggest personal achievements. Although both he and his wife are positive, they have taken utmost care not to pass on the HIV virus to their 9 year old daughter.

### Community at the helm of service provision to the doorstep

Lilawati Mohanta, community health volunteer under Intensified Malaria Control Project – 3 from a remote village in Mayurbhanj district of Odisha, where many malaria cases are seen. In her village the cost of a blood test for malaria in her village ranges from Rs.150-200. And if tested positive, the cost of the medicine can go up to Rs.1500 in the hands of private medical practitioners.

The nearest Primary Health Center is around 6 km away, which may take up to 30 minutes on foot, where a patient may or may not be lucky to be greeted by a health practitioner always. In such a scenario, many cannot hold on to their patience and choose to either neglect their health or try their belief of jadu-tona (sorcery). In this process, many succumb to malaria, she said as tears started filling her eyes as if to suggest that she has seen and borne such pain in her own life.

Since the time she volunteered with Caritas India's Malaria project together with local partner Lepa Society in August 2016 after training, she has been administering free blood tests for malaria and if tested positive, medicines are also given free. She also is very active in community mobilization through various BCC activities.



## Harmonization of service provision in the village by ASHA and Community Health Volunteer (CHV)



Chiro, another community health volunteer from Tripura said that he treats 5 to 6 malaria positive cases in a month in his village which has about 500 families, roughly 2400 people. The village also has ASHA or Accredited social health activists are community based care providers. However one difference is that ASHAs are working in different health programs while I work only for malaria, said Chiro from Tripura, the land of renowned music composer directors SD Burman and RD Burman who ruled the Bollywood music industry between 1940-1990.

## Benefits of Community Health Volunteer (CHV) to the Community



Before I offered to become a CHV, I have served my neighbors in different capacities under the local village development platform of Tawipui South village, said Vanlallura from the hilly state of Mizoram, situated nearly 4000 feet above the sea level.

The 50 year old volunteer has administered tests to hundreds of patients since 2011 and treated positive cases in his village. He is available for 24 hours a day and seven days a week. This makes him a preferred choice for diagnosis and treatment in the case of malaria, he said.

Like Vanlallura, CHV Lalhuma's village in Mizoram was enrolled under the Intensified Malaria control project – 3 in September 2016. Within

these 7 months, he has treated 5 malaria positive cases

According to Lalhuma, there has not been a single death due to malaria in this year.



Take Away:  
Health & Well-being  
conference

Caritas India resolved 7 broad areas of action to be pursued in collaboration with its NGOs fraternity. According to the Executive Director Fr. Frederick D'Souza, the learning from the conference will help Caritas in developing a health strategy plan 2019-2022 which in turn will adequately compliment India's role as a signatory to SDG goal 3 (Good health and Well-being).

Some of the broad areas of action as declared at the valedictory ceremony are:

1. More space for community engagement,
2. Access, affordability and universal health coverage,
3. Holistic redressal of communicable and non-communicable diseases,
4. Mother & child care,
5. Malnutrition,
6. Health (including psycho-social care) in emergencies,
7. Socio-economy and geographic equities.

# Health and Well Being Programme Launched for Southern Tamil Nadu Partners

Report by Dr.John Arokiaraj, State Officer - Tamilnadu



Caritas India is committed to work in Tamil Nadu with all the partners in line with the developmental issues and challenges. It is in this interest the development initiatives that would bring more human dignity to the underprivileged are devised in a phased manner through cluster approach. Caritas India had a consultative discussions with the Diocesan Directors of Southern Tamil Nadu covering 7 DSSs namely Kottar, Thuckalay, Marthandam, Kuzhithurai, Palayamkottai, Vallioor and Tuticorin. "Health and Well Being" is identified as the prime area of concern in this region. Caritas India wants to address this concern through a clustered approach for a cumulative effect. Hence the

identification of common geographical and thematic areas with similarity on issues, strategies and common definite outcome.

"Health and Well Being" cluster programme was officially launched on April 4, 2017 at Caritas Towers, Nagercoil by Most.Rev.Peter Remigius, Bishop of Kottar. Most.Rev.Vincent Mar Paulose, Bishop of Marthandam gave the felicitation address during the launch.

"Caritas India is focused on long term impact creating sustainable programme which will bring change in the form of social transformation in the lives of poor people" said Fr.Frederick D'Souza, the Executive Director of Caritas India in his inaugural address.

Fr.Paul Moonjely emphasized that Volunteerism is the need of the hour and wished the programme to become a model health movement. Fr. Albert Thambidurai, Deputy Director of TASOSS also spoke on the need for voluntary community response to health issues.

The Deputy Director of Health Services Dr.Madhusudhan and Mr.Prince, MLA of Colachal constituency highlighted the importance of NGO-Government linkages and assured their support. 325 CBO representatives from 3 districts participating in the programme unanimously accepted and registered themselves as volunteers.

## Caritas India Partners

# Adopt Child and Women Focussed Strategies for Malnutrition Eradication

Report by Dr. Saju M.K., Zonal Manager - West Zone



Caritas India partners working to free Korku communities from acute food and nutrition insecurity have decided to adopt children and mother focussed strategies for securing physical and social well-being of Korku community. Caritas India had recently started the implementation of 'SABAL' programme in 93 Korku dominated villages of Khalwa block of Madhya Pradesh and Chikaldhara block of Maharashtra. SABAL seeks to achieve food and nutrition security for Korkus by working in the sectors of agriculture, protein sufficiency, forest rights and grassroots-level movements.

"Malnutrition of Korkus is a complex reality which has emerged due to several interrelated factors. It is necessary to realise that malnutrition of Korkus is not caused by a single factor. Therefore, we need to work with the Korku in an intensive manner with multiple strategies for helping them achieve food and nutrition security", said Bishop AAS Durairaj of Khandwa diocese. He appreciated Caritas India and the three partners for starting the intervention for Korkus. Bishop Durairaj expressed hope that the five-year intervention will provide sustainable solutions to not only the health backwardness of

Korkus but also the economic and social backwardness as well.

Caritas India implements SABAL in partnership with 3 grassroots level NGOs i.e., Spandan Samaj Seva Sanstha (SSSS), Khandwa Diocesan Social Services (KDSS) and Jeevan Vikas Sanstha (JVS) in Chikaldhara. SSSS and KDSS work in Khalwa block whereas JVS works in Chikaldhara block. During the five year project, SABAL will work with 16,000 Korku households which are largely landless, small or marginal land holding households which migrate regularly for livelihoods and wage labour.

Mr. Peter Seidel, project officer of Caritas Germany, appreciated the vigour that partners have demonstrated so far in the implementation of the project. He explained how the programme is in consonance with the expressed commitments of the Federal Ministry for Cooperation and Development (BMZ) of Germany. "The project is part of the 'hunger-free-world' vision of the Germany Ministry. Hunger, in all forms, should be eradicated from the face of world. The German government and Caritas Germany believe that hunger could be eradicated. For achieving this vision, partnerships have to be forged and strengthened at various levels and

intensive actions should be launched on the ground", Mr. Peter said. He appreciated both Caritas India and partners for rolling out the programme in right intensity.

Apart from diversifying and strengthening food crop production, SABAL also focuses on improving productivity of food crops, achieving protein sufficiency and functionalising public systems. Dr. Saju MK, Zone Manager of Caritas India in his address underlined the importance of movement building at community level for achieving lasting solutions to the food and insecurity of Korkus. "One of the commitments of SABAL is initiating people's networks and alliances that will work for advocacy on hunger and malnutrition of Korkus. SABAL designed as a community-based response to the severe hunger and malnutrition that has persisted among Korkus", Dr. Saju said.

During the two-day review, Caritas India partners presented the progress of SABAL and their strategies of working with the focus groups i.e., children, mothers, adolescents and community opinion makers including traditional healers and tribal leaders. Mr. Robin George, SABAL programme Manager facilitated the sessions.

# Director invites well-wishers to **JOURNEY WITH CARITAS**

It is an opportunity for people to engage with Caritas India's development work while we are gradually making a shift from "project to programs mode", Fr. Frederick D'Souza, Executive Director in Caritas India said as he officially launched the organization's online payment gateway on April 3. Ever since its inception in 1962, this is the first time the national NGO ever installed its own web-based donate button.



Fr. D'Souza who has served the organization now for more than 10 years said that it is a medium of communication with well-wishers of Caritas India, where in they will be able to journey with the Caritas in the works of nation building, irrespective of how small or big an amount one may decide to donate.

He set the example by donating Rs.5000 for the cause of women and child development, a sector where Caritas and its network of NGOs have been working for long.



Fr. D'Souza became the first donor to officially use this platform. Try the button here <http://caritasindia.org/donate-form-now/>