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GLIMPSE OF THE PAST

EDITORIAL

The year started with the spread of a highly contagious omicron variant of SARS CoV2, although less severe compared to the earlier variants. Our country has made extraordinary progress in COVID-19 vaccination in a short period of time. However, expansion for the coverage of mass vaccination of marginalised population with poor access to services remains to be addressed. During these unprecedented and challenging times, PHRS team in Odisha and Jharkhand has shown immense commitment and has tirelessly provided support to the district administration in managing COVID 19 and extended support in mobilising community for vaccination. We have worked closely with the district health teams to support COVID 19 vaccination among the marginalised community and in far flung areas.

In Odisha, during this period we expanded the vaccination programme to 5 blocks in two districts namely- Rayagada, and Malkangiri. In December '21, the efforts taken by the district teams were recognised and appreciated by the Nabrangpur district administration and our district team was also felicitated during an event- 'Surakshit Hum Surakshit Tum Abhiyan' by Shri Kamal Lochan Mishra, OAS (Special Secretary), District Collector and District Magistrate . Apart from COVID 19 related activities, we have also been

successfully running crèches in Odisha under our programme entitled 'Mainstreaming crèches to reduce malnutrition in Odisha' and this has led to community demand for crèches in the state. A delegation of mothers from the Padampur village in Koraput and Kalyansingpur block in Rayagada approached the District Collector to extend their support for continuation of crèches in their villages. A continuous effort is being made to mobilise resources for the crèches through various sources. Our intervention in urban areas in Puri districts has also demonstrated the efforts taken toward accelerating actions on non communicable disease to promote good health. With support from GAIL Gas Ltd and district administration, the PHRS team in Puri organised a free NCD screening and referral camp in Urban Primary Health Centre, Baliapanda. The camp supported free medical consultation and referrals for non-communicable diseases.

We also congratulate Mr Shahnawaz Khan, Senior Programme Coordinator for presenting a paper on "Impact of COVID-19 pandemic on nutritional status of children between 6 months to 3 years enrolled under crèche program in southern Odisha" at the 'Delivery for Nutrition in South Asia 2021' conference.

A heartfelt thanks to entire team, network members and partners for their support.

NEWS FROM THE SECRETARIAT

Series on Nutrition and Early Childhood Care to Life- The Bastion Magazine

Dr. Vandana Prasad and Dr. Dipa Sinha contributed their insights for bringing up a two part series on nutrition and early childhood care to life to 'The Bastion' magazine. The series were on the topics:

[Raising Healthy Children is Society's Responsibility, Not Mothers' Alone](#) by Dr Vandana Prasad and Prof Dipa Sinha: In this series Dr. Vandana and Dr. Dipa explained the measures that need to be taken by the government to address the numerous nutrition and health challenges faced by the children, pregnant women and lactating mothers. Dr. Vandana discussed about the importance of nutrition during

the critical period of growth in children especially among children under 2 years of age. They also discussed the impact of COVID-19 on the food security as the Anganwadi centres has been closed for almost two years now and suggested for services and AWC to restart with fair degree of care. A brief insight on the inclusion of breakfast in the mid-day meal program for school children was shared and major bottlenecks in right to food for children and mothers were also discussed. <https://thebastion.co.in/interviews/raising-healthy-children-is-societys-responsibility-not-mothers-alone/>

[Counting on Crèches: How Community-led Interventions Can Create Lasting Change](#) with Dr Vandana Prasad:

Dr. Vandana Prasad discussed about the crèche model that addresses malnutrition among children under three years of age. She talked about setting up of the crèche model along with the series of Participator Learning and Action with the community on health and nutrition to demonstrate child-care services for young children. She described crèches as the resource centres for children and mothers where young children are taken care of. She further talked about the importance of involving the communities in such programs in overcoming the burden of malnutrition while the government can provide support in training, capacity building and allocation of resources. <https://thebastion.co.in/film/counting-on-creches-how-community-led-interventions-can-create-lasting-change/>

Executive committee meeting

PHRS executive committee meeting was held on 22nd October 2021. During this meeting discussions were held on the increasing attrition of human resources as the project is on the verge of closure. A proposal on salary increment was shared with the EC members. A detailed discussion on accounts and admin issues, various proposals submitted and ongoing project activities was also done. The members also discussed to organize a meeting with PHRS team members in Jharkhand to decide the further course of PHRS run crèche in Jharkhand.

Roundtable- Policy on Mandatory Food Fortification

Dr. Vandana Prasad was invited as a key participant for a roundtable on "Policy on Mandatory Food Fortification" on 25th October 2021, organised by Bharat Krishak Samaj at the India International Centre, New Delhi. The roundtable involved discussions on:

1. micronutrients/ nutrition malnutrition and fortification in that context
2. Nutrition/conflict of interest/ decentralized alternatives and business
3. Production, processing and themes around it

Governing Board Meeting

PHRS 12th Governing Board Meeting was held on 18th December 2021 on a virtual platform. During this meeting, de-

tailed discussions were held on the financial and organisational updates of the organisation. The board was apprised on the income and expenditure and organisation's turnover of the financial year 2020-2021. The board was updated on the human resource status and status of all the ongoing projects along with their deadlines. A brief discussion was held on the status of new projects submitted to various organisations such as the expansion of OPNIP PMU and comprehensive nutrition work in Odisha. The board members during the meeting also paid their respect to Ms. Radha Holla for her contribution and support to PHRS.

NEWS FROM ODISHA

PROGRAMME UPDATES

Mainstreaming Crèches to reduce malnutrition in Odisha

The efforts of Public Health Resource Network have been recognised by the district administration of Nabarangpur for their support in combating COVID-19 pandemic in the district. Shri Kamal Lochan Mishra, OAS (Special Secretary), District Collector and District Magistrate felicitated the district team on 13th December 2021 during the programme meeting of 'Surakshit Hum Surakshit Tum Abhiyan'. The district administration is coordinating this abhiyan with the support of Niti Ayog and Piramal Foundation. PHRS has been supporting the programme as a member of the Aspirational District Collaborative for the period of 2021-22.



Communities demanding for crèches

A delegation of mothers of children under three years of age from four villages of Padampur GP of Koraput district led by the Sarpanch met Sri Abdal M Akhtar, IAS, Collector and District Magistrate, Koraput on 2nd December 2021 and submitted a letter for continuation of the crèches in the villages. The crèches are currently being run and managed by PHRS and APF and are scheduled to be phased-out after May 2022. A second delegation of mothers from Kalayansingpur block of Rayagada district met the Block Development Officer for continuation of the crèches with support from the Government of Odisha.

Participation in nutrition conference

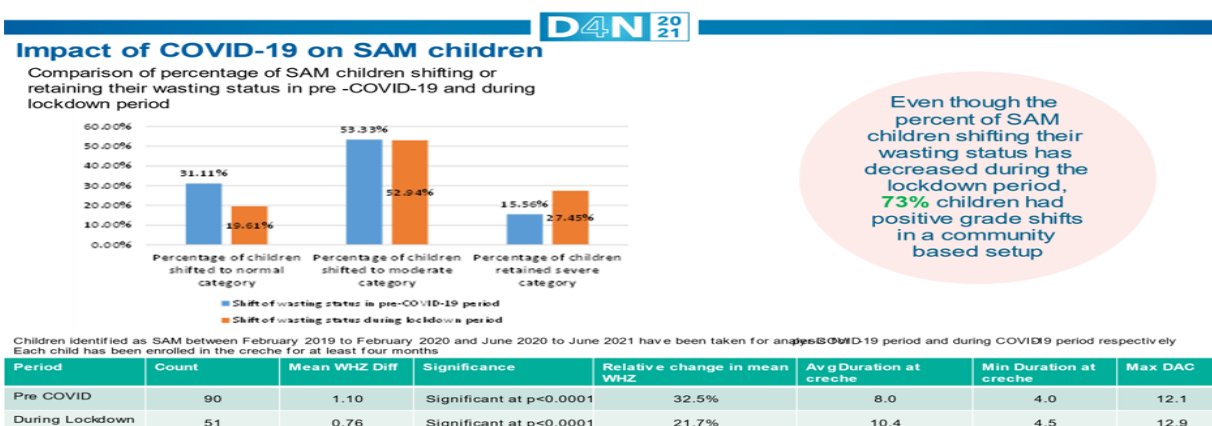
An abstract titled “Impact of COVID-19 pandemic on nutritional status of children between 6 months to 3 years enrolled under crèche program in southern Odisha” was selected for presentation at the ‘Delivery for Nutrition in South Asia 2021’ conference.

The focal area of the presentation was ‘Impact of COVID-19 on infant and young child feeding practices, diet quality, food security, nutritional outcomes’. The presentation was done by Mr. Shah Nawaz Khan from PHRS on 1st December 2021. The presentation highlighted



the change in the strategy of the implementation of the programme ‘Mainstreaming Crèches to Reduce Malnutrition in Odisha’ and the impact of the COVID-19 and subsequent lockdown on the nutritional status of the children

identified as SAM enrolled in the crèche programme. A comparison of SAM children enrolled before the pandemic was made with the ones who got enrolled in the crèche programme during the lockdown period.



Training of Nutrition Coordinators on e-Kalika (MIS for crèche programme)

e-Kalika is a Management Information System for the crèche programme currently being used for 150 PHRS-APF run crèches under the programme “Mainstreaming Crèches to Reduce Malnutrition in Odisha”. e-Kalika has now been up scaled by the Government of Odisha as the MIS platform for every crèche in the state as a part of the 5T programme. ST&SC Development, Minorities and Backward Classes Welfare Depart-

ment, Government of Odisha has taken over 25 crèches in the PVTG villages and also has a plan to open new crèches across the state in the PVTG villages under the “Odisha PVTG Nutrition Improvement Programme (OPNIP)” programme. e-Kalika would be used as the MIS platform for these crèches as well. In this context, a two-day residential training was conducted on 29th and 30th November 2021 for 17 nutrition coordinators working at the micro project agency level in 12 districts of Odisha. PHRS as part of the PMU-OPNIP facilitated the ses-

sions of the training programme.



“Capacity Building to improve the health and nutrition status of women / adolescents from the underprivileged community of Puri district, Odisha”

In the current quarter the program team had an intense engagement with the women collectives (SHGs) in the intervention areas of two urban slums of Puri. The change vectors actively transacted the micro modules during the PLA meeting cycles with the handholding support of the program facilitators. The PLA meeting cycles for six micro-modules has been completed so far. Besides, the program facilitators have been conducting the home visits, counselling, growth monitoring in coordination with the frontline workers of health and ICDS including documentation of case studies.

SHG-AWW-ASHA interface

As an impact of the PLA meeting cycles and other follow up measures by the CVs and the PFs there has been an increase in the number of SHG women and community members in accessing the public health facilities and the ICDS services. Increased access to public health facilities enabled them in identifying the service delivery gaps as a result of which women collectives demanded a face-to face discussion with the frontline workers to understand the reason behind these service delays. Therefore looking into the demand of the community the PFs with the support of the CVs have been organising interface/ convergence meeting between the women collectives and the FLWs of health and ICDS depending upon the need to minimize the service delivery gaps. From our SHG-FLW interface/ convergence meetings it was

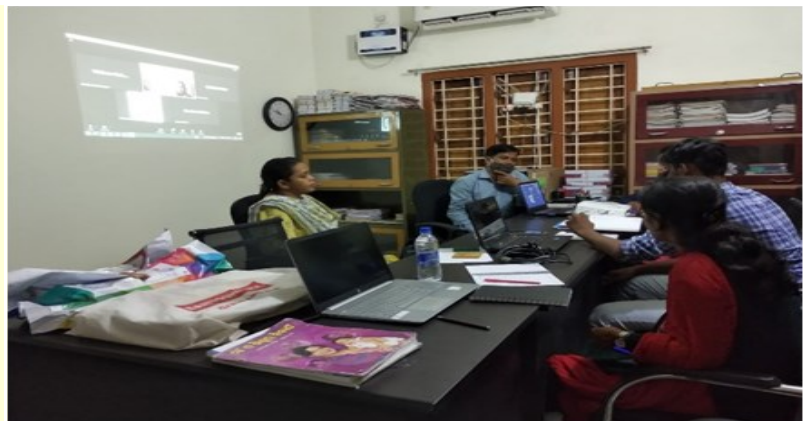
seen that a lot of service delivery gaps have been addressed however certain gaps require intervention at the administrative level. Based on the experience of interfaces/meetings the team has started approaching the concerned higher authorities of health and ICDS and the municipal corporation to address the identified issues.

Meeting with the adolescent girl

With the PLA meetings the need for separate meetings for adolescent girls was felt. Thus the Program facilitators re-operationalised the Advika sessions/ Kishori Balika meetings and started engaging with the adolescent girls in the community. Discussions on adolescent nutrition, health and hygiene takes place now in the field in presence of the frontline workers.

Training of Trainers (ToT) of the program facilitators:

Three day training was organised for the program facilitators in Bhubaneswar from 13th to 15th November. The modules on gender, early marriage, adolescent health and wellbeing, reproductive health with focus on adolescents, rights and entitlements were transacted in the TOT with the active support of the state resource team members Ms Swati Das, Ms Pramita Satapathy, Ms Swagata Tarafdar, Mr Dillip Basantray and Mr Satya Patnaik. The training ended with an interactive session with the national team in with queries of the program facilitators relating to the training as well as in the field were responded by Dr. Aditi Hegde.



Health camp on screening, counselling and referral of NCDs

Public Health Resource Society (PHRS) in collaboration with NHM and GAIL Gas Ltd. organised a health camp for screening, counselling and referral of NCDs among the residents of Baliapanda and Penthakata slum on 28th November 2021 at UPHC, Baliapanda, Puri. The camp was attended by officials namely Mr. Ashok Kumar Sitha from Integrated Child Development Services (ICDS), Dr. Pradyut Swain and Dr. Sunil Tarai from National Health Mission (NHM), Ms. Dipti Das from



through the health camp on NCDs.

A team of two doctors, three ANM, two pharmacist and two support staff from the UPHC Baliapanda were appointed for the camp. The Programme Facilitators and the Change Vectors supported the camp

mia and obesity were also high. The disease burden of NCDs in the community indicated for immediate measure to be taken to curb the increasing burden of NCDs in the community. The camp concluded with closing remarks from Mr. Anandmoy Pradhan,



Child Welfare Committee (CWC) and the staff from GAIL Gas Ltd along with Mr. Anandmoy Pradhan, DGM, GAIL Gas Ltd.

Awareness generation activities were done in advance to create awareness in the community and mobilise the community for the camp. The chief guest, Mr. Anandmoy Pradhan addressed the participants of the camp in the inaugural session and briefed about the capacity building programme in the urban slums of Puri district. He further expressed the benefits that would be entailed by the community

by ensuring registration of the participants and guiding them for the check-ups.

Parameters like height, weight, blood pressure were recorded in the camp along with blood glucose and haemoglobin. Following this, based on the results, the doctors of the UPHC prescribed the medicines and advised a follow-up visit to the participants of the camp.

A total of 106 participants attended the event. The results of the camp showed that significant proportion of people were hypertensive and diabetic. The disease burden of ane-

DGM, GAIL Gas Ltd in which he appreciated the efforts taken by PHRN in organising the health camp and stressed on the needs of such camps in improving the health status of the community.



NEWS FROM JHARKHAND

तेजस्विनी क्लब – मेरी ताकत

तेजस्विनी क्लब हिसरा-1, चैनपुर, पलामू के प्रशिक्षण में उस दिन कुल 16 किशोरियाँ प्रशिक्षण ले रही थी। मैंने उनलोगों से जब बात किया तो पता चला कि अब तक वहाँ एक भी ए.जी.वाई.डब्ल्यू ने कोरोना का टीका नहीं लगवाया है। कारण पूछने पर उन्होंने बताया कि 3 ए.जी.वाई.डब्ल्यू को छोड़कर बाकी सभी 18 वर्ष से कम उम्र की हैं। 18 वर्ष से अधिक उम्र वाली 3 ए.जी.वाई.डब्ल्यू से जब टीका नहीं लेने का कारण पूछा तो एक ने बताया कि सूई लेने से डर लगता है इस कारण से टीका नहीं लगवाया है। दूसरे ने बताया कि, सुना है कि टीका लेने से लोग बीमार पड़ रहे हैं इसी डर से टीका नहीं लगवाया। तीसरे ने बताया कि वह बीमार रहती थी इसलिए टीका नहीं ले सकी और अभी गाँव के आस-पास कहीं टीका नहीं लग रहा है। मैंने जब उसके बीमारी के बारे में जानना चाहा तो उसने बताया कि उसका नाम नेहा है और वह 18 वर्ष की है। पहले वह महीने में लगभग 12 से 15 दिन बीमार रहती थी। वह बहुत कमजोर थी जिसके कारण वो अक्सर बेहोश हो जाती थी और उसके सिर एवं पेट में दर्द रहता था। उसके बीमारी से परेशान होकर उसके माता-पिता उसकी शादी करने के लिए रिश्तेदारों में बात चलाने लगे थे। उसके पिता को आँख से दिखाई नहीं देता है।

उसकी माँ घर पर एक छोटा सा दूकान चलाती है तथा थोड़ा सा जमीन है जिसमें खेती करती है। जब नेहा तेजस्विनी क्लब से जुड़ी तो उसके माता-पिता ने विरोध किया कि क्लब जा कर क्या करोगी। पर गाँव की अन्य लड़कियों को क्लब में जाते देख, उसके भी मन में तेजस्विनी क्लब से जुड़ने की इच्छा बढ़ने लगी। इसलिए उसने अपने माता-पिता को समझाया और क्लब में आने लगी तथा क्लब की हर



गतिविधि में भाग लेने लगी। सबसे पहले उसने तेजस्विनी उन्मुखिकरण प्रशिक्षण में भाग लिया फिर जीवन कौशल के सभी चार विषयों के प्रशिक्षण में भाग लिया। जीवन कौशल के विषय-3, स्वास्थ्य एवं पोषण, का प्रशिक्षण प्राप्त करने के बाद उसे पता चला कि उनका खान-पान का तरीका गलत है। उसने बताया कि, मैंने अपने खान-पान के तरीके में बदलाव लाया और नियमित रूप से हरे साग-सब्जियों को अपने खाने में शामिल किया।

गाँव में आसानी से प्राप्त होने वाले फलों का भी सेवन करती हूँ। अपने व्यक्तिगत साफ-सफाई पर मैं ध्यान देने लगी हूँ। क्लब से जुड़ने से पहले मैं मासिक धर्म के दौरान कभी भी पैड का प्रयोग नहीं करती थी परन्तु प्रशिक्षण के दौरान पैड के महत्व एवं अन्दरूनी साफ-सफाई के बारे में समझने पर अब सिर्फ पैड का प्रयोग रह रही हूँ। आगे उसने बताया कि उसे यह महसूस होता है कि इस सब के परिणाम से वह पिछले 2-3 महीने से बीमार नहीं हुई है और अब वह व्यर्थ की चिंता भी नहीं करती है।

आगे उसने बताया कि पहले बीमार रहने के कारण वह पढ़ाई नहीं कर पाती थी जबकि अब वह अपने पढ़ाई के साथ-साथ गाँव के बच्चों को ट्यूशन भी पढ़ाती है और घर के काम में हाथ भी बटाती है तथा उसके ईलाज में खर्च होने वाले पैसों से अन्य जरूरतों को पूरा कर पा रही है। बहुत खुशी के साथ नेहा ने साझा किया कि उसके माता-पिता अब उसकी शादी के बारे में बात भी नहीं करते हैं। अब वह खुद से अपने दोस्तों एवं अन्य लड़कियों को स्वास्थ्य एवं पोषण सम्बन्धी जानकारी देती है। नेहा दसवीं की छात्रा है और आगे पढ़ना भी चाहती है तथा तेजस्विनी क्लब से जुड़कर सीखते रहना चाहती है।

राजमणि भास्कर

ट्रेनिंग एवं यूथ डेवलपमेंट स्पेशलिस्ट,
तेजस्विनी प्रोजेक्ट

Convergence for Vaccination Campaign in all districts

The district administration has been seeking help of Tejaswini Project team for supporting them in door to door campaign for COVID vaccination. In all 6 districts namely Palamu, Chatra, Koderma, Deoghar, Pakur and Godda; the team members of Tejaswini have worked hand in hand with the front line workers of health department, ICDS and Jharkhand State Livelihood Promotion Society (JSLPS) to achieve immunisation targets of the district.

Some of the team members have also supported the district authorities in the control rooms. Several Tejaswini Project block level representatives, cluster coordinators and

youth facilitators were felicitated by the district administration for their excellent ef-

forts in mobilizing the community during vaccination campaign.



Convergence for Apke Adhikar Apki Sarkar Apke Dwar program

Tejaswini team have mobilised the community in several districts to participate in Apke Adhikar Apke Sarkar Apke Dwar program. Through this

program efforts have been made by different departments namely health and family welfare, women and child and social security, rural development, agriculture to converge for extending their services to the community.

Tejaswini Project teams have extensively participated in these camps along with the AGYWs and their families to access the services and linkages have been established for aadhar related issues, bank account, vaccination, e-job cards etc.

Efforts for linkage with vocational training and business skills

In all the 6 districts a list of eligible AGYWs has been generated who will be taken for the Psychometric Assessment under the programme guidelines. The psychometric assessment test (PAT) is being taken through an app developed by Jharkhand Women Development Society and is being operated by each Youth Facilitator in the clubs with the identified AGYWs. The assessment will now lead to skill related trainings for the AGYWs.



Tejaswini- a support system for adolescent girls to respond and fulfill their aspirations

It started in the month of November 2019. The adolescent girls and young women aged between 14 years to 24 years came together for clubs. One club in the catchment of two AWC. They listened to the youth facilitators and cluster coordinators patiently during 7 days induction training and series of meetings.

meet the state team. Post interaction, the clubs started their performances such as poetry, skit, song, dance etc.

We were worried for state team as it was getting late and they were supposed to return back to Ranchi. At 4.30 the Cluster Coordinator Nikhat Parveen decided to end the programme.

After group photo and chanting of Tejaswini slogans we started dispersing. State team left and came on road in their car. We also started to leave.

He is practising village doctor (RMP / quack) and Maulana of the area. We faced lots of problem and were almost rejected by the community but the club stood firmly and revolted against the Maulana and community on the issue of playing football. Since then they are engaged in several issues such as sex determination, foeticide, dowry, education of girl child etc.

These days we have many such clubs, peer leaders and AGYW who are becoming vocal to



Their aspiration was high and were too eager to address their concerns with the help of the platform in the form of clubs. They were happy as they got some free time from routine household chores assigned at family level. On one hand COVID-19 restricted them for few months due-to restrictions imposed. On the other hand the clubs received seed grants and establishment cost (Rs 25000). They planned and started to act together for addressing the social barriers.

I am sharing one of the story of change I witnessed. Recently state team of JWDS visited few clubs in Deoghar for evaluation of progress achieved in the capacity of AGYW. In Madhupur, three clubs came together to

But the club Nemobad Lalgarh with its peer leader Kanj Fathima blocked the road and forced the state team and us to see their performance before leaving. Again at the meeting place we settled down to see their performance. It was a very nice group dance performance. We appreciated them. They told us “ Hum Log Tejaswini hai aur humari baat to sunna hi padega”.

It became very happy moment for all of us. This change within them started nearly a year back when they decided to play football like other community girls and women were playing in nearby clubs. They started playing football in proper outfits. One powerful person of the village revolted.

place their opinion, raise their concern and almost ready to move towards better social and economic empowerment.

The project has identified several AGYW who were keen to restart their education e.g Deoghar 1070, Godda 590 and Pakur 450. But during pre-assessment for starting bridge education we found drop out in significant number e.g. Deoghar 335, Godda 158 and Pakur 188.

At the beginning we were worried for decline in family support. Then we decided to do home visit and start counseling of parents. Within fifteen days we are so pleased to share some of the field reports of Field Coordinator Bridge Education.

Case Studies

मैं सुशील मुर्मू फ़िल्ड कॉर्डिनेटर बोअरीजोर। आज मैं TC jamujhar-naki Dropout AGYW निगा परवीन और हाफीजा खातून से मिलने गई थी जिन्होंने Pre test दि थी। पर सीसीसी के द्वारा पता चला कि हाफीजा खातून की मां उन्हें पढ़ाई करने के लिए मना कर रही थी। बोल रही थी कि हम लोग का बहुत सारा काम है तुम काम छोड़कर पढ़ाई करोगी तो घर का काम कैसे होगा। तो मैंने सीसी दीदी से उनके घर का पता लिया और खुद उनके घर पहुंचा। मेरे साथ जिला से सुनील सर और बीसी सर भी आए हुए थे। जब हम लोग पहुंचे तो संयोग वश किशोरी



से भेंट हो गई। उन्होंने हम लोगो को बैठने के लिए बोला। मैंने पूछा कि दीदी आप पढ़ना चाहते हैं तो वो बोली हां। फिर मैंने उनकी मां को बुलवाया। उनकी मां पहले मना कर रही थी कि अब यह पढ़ लिख कर क्या करेगी। घर में बहुत सारा काम है, अब नहीं पढ़ेगी। तो मैंने समझाया की

चाची आजकल पढ़े-लिखे का ही जमाना है। अभी इनका पढ़ने का उम्र है तो पढ़ने दीजिए, कियोकी पढ़ने का उम्र खत्म होने के बाद तो ये सारा जिंजी घर का काम कर के ही बिताएंगी और इनका पढ़ाई का सारा खर्च सरकार दे रही है। तब जाकर उसकी मां मान गई और बोली ठीक है।

मैं अनीता देवी पोरेयहाट की फ़िल्ड कॉर्डिनेटर हूँ। मैं आज सिंदबांक क्लस्टर की 5 स्कूल ड्राप आउट AGYW से मिली जिसमें से यह एक सोनाली कुमारी है। मैं जब इसकी माँ से मिली और बात करना शुरू ही कि थी कि इसकी मां बोलने लगी कि इसका शादी लगा दिए हैं, एक सप्ताह पहले ही और इसका शादी करवा देंगे अब ये नहीं पढ़ेगी पढ़के क्या करेगी और 2 साल कोन रखेगा अपने घर में पढ़ने के लिए। तब मैं उसको बताई की अभी इसकी शादी की कोई उम्र भी नहीं हुआ है इसको अभी पढ़ने दीजिये, अगर यह स्कूल जाती है तो 2 साल लग जायेगा 10वी करने के लिए ,लेकिन हमारे तेजस्विनी परियोजना के माध्यम से

सिर्फ 9 माह में ही 10वी पास कर जाएगी इसके लिये आप को घर से एक रुपया भी खर्चा नहीं होगा। इसके पढ़ाई के लिए सारा खर्च सरकार देगी और इस बच्ची का पढ़ाई पूरी हो जाने पर संस्था आपको पैसा भी देगी। बहुत ही देर समझने पर इसकी माँ कुछ समय के

लिए चुप हो गयी और कुछ देर के बाद बोली ठीक है! हम एक बार घर मे बात कर लेते हैं और इसके ससुराल में भी, अगर इसको पढ़ाने के लिए तैयार हो जाता है तो हम इसे जरूर पढ़ाएंगे। इतना सा बात कर के आये हैं उम्मीद तो है की इसकी माँ इसको पढ़ने देगी ।



मैं शिवानंद शिवम क्षेत्र समन्वयक मुलाकात हुई। उनके सास-ससुर खेत में थे यहाँ मात्र इतने ही समय में आप मैट्रिक (सेतुशिक्षा) सुंदरपहाड़ी, गोड्डा में और वो घर का काम कर रही थीं। जैसे उत्तीर्ण कर जाएंगी और फिर आगे की तेजस्विनी परियोजना से जुड़ा हूँ। ही मैं पहुँचा वो काफी उत्साहित दिखी पढ़ाई कर सकती हैं। फिर मैंने कहा कि आज मैं अपनी उपलब्धि नहीं बल्कि इस साथ उनके चेहरे से कुछ प्रश्न भी झलक आपने अपने सास-ससुर से अनुमति लेली



परियोजना की उपलब्धि के बारे में बताता चाह रहा हूँ, जो कि मुझे तेजस्विनी क्लब बरियारपुर की सदस्या मारिया दुलचीस हांसदा से मिलने के बाद महसूस हुआ। दो दिनों की छुट्टी के बाद जब मैंने क्लब की YF दीदी को बताया कि आपके क्लब की AGYW से घर जाकर मिलूँगा तो उन्होंने स्वीकृति में अपनी हामी भरी। चूँकि अचानक से मुझे सुनिल सर से मिलने सुंदरपहाड़ी जाना पड़ा तो मुझे विलंब होने लगा। उस दौरान भी मुझे वहाँ से बार-बार फ़ोन आ रहा था। फिर जब मैं वहाँ पहुँचा तो मुझे मारिया दुलचीस हांसदा से रहा था। मैं वहाँ उसकी 3 वर्षीय पुत्री से भी मिला। बातचीत के दौरान पता चला कि उसकी कम उम्र में शादी हो गयी उस वजह से उसकी पढ़ाई रुक गयी। फिर उसने दुबारा पढ़ना चाहा लेकिन गर्भवती और फिर माँ बनने के कारण उनकी पढ़ाई अधूरी रह गई। जब मैं पहुँचा तो मुझसे पहला प्रश्न यह था कि मुझे कितने दिन पढ़ाई करनी होगी। तो मैंने कहा कुल 9 महीने। वो थोड़ी असहज दिखी फिर कहा इतना दिन? मैंने फिर समझाया कि यदि आप रेगुलर कोर्स से पढ़ाई शुरू करती तो आपको 2 साल लग जाएंगे। और काफी खर्च भी होगा। है? तो उसने बोला हाँ सास-ससुर और पति सभी ने मुझे पढ़ाई शुरू करने को कहा। मैं तो कब से सोच रही थी कि मैं कैसे पढ़ाई शुरू करूँ? ऐसे में मुझे जब दुबारा पढ़ाई शुरू करने का मौका मिला तो ये मेरे लिए बहुत बड़ा अवसर है। फिर मैंने यूँही उनसे उनका प्रमाण पत्र माँगा तो उसने मुझे आठवाँ उत्तीर्ण का मार्कशीट दिखाया। मैंने देखा कि उसे काफी अच्छा प्राप्तां कभी प्राप्त हुआ है। अतः मैंने पहले कहा कि ये इस परियोजना की उपलब्धि है। यदि हम सभी पूरी शिद्दत से लग जाएं तो निश्चित

राहबाद क्लब में किशोरी के माता पिता से ज्ञान सेतु शिक्षा के बारे में जब हम बात किये तो 3 किशोरी तैयार होगयी जुड़ने के लिए और इसमें एक ऐसी किशोरी भी जुड़ी जो की दूसरे क्लस्टर से आयी है। उनका शादी राहबाद क्लब में हुवा। उनको भी हमने राहबाद क्लब से

ही जोड़े। इससे उनके घरवाले काफी खुश हुए। तेजस्विनी परियोजना अंतर्गत शिक्षा सेतु मैं नामांकित छातापत्थर क्लब की लीलमुनि मुर्मू और चांदमुनि मुर्मू का घर गए वहाँ पता चला कि चांदमुनि मुर्मू का शादी हो गया है परंतु लीलमुनि मुर्मू अकेले जाने से हिचक रही थी परंतु जब

मैंने उनके पिता और एजीवाईडब्ल्यू को समझाया तो एजीवाईडब्ल्यू और उनके पिता दोनों मान गए और शिक्षा सेतु से जुड़ने के लिए तैयार हो गए हैं। कल उनका असेसमेंट भी लिया जाएगा!

NEWS FROM CHHATTISGARH

Extract adapted from the upcoming chapter:

Nandi S. & Das N. (2022). Chapter: Impact of Covid-19 on health and the health system: Glimpses from Chhattisgarh. In "COVID-19- A View from the Margins" Yogesh Jain and Sarah Nabiya (Eds). New Delhi: Manohar Publications

Failure of the Private Health Sector

Private hospitals had initially shut down their services completely. There were reports of private hospitals throwing out patients, who they suspected to be COVID-19 positive. Later, services were resumed for non-COVID patients, and even then there were several reports of patients being turned down. There were also instances where patients from private hospitals were transferred to AIIMS Raipur medical college, when the patient became critical. In Durg, a private hospital was converted into a government COVID care centre. Later on, the Chhattisgarh Health Department also hired a third-party contractor to run a

COVID dedicated hospital at the ESIC building in Raipur at a subsidized rate. While there have been some cases of patients having to incur some out-of-pocket expenditure for medicines in government hospitals, services were mostly free. On the other hand, the expenses incurred in private hospitals have been catastrophic. Chhattisgarh government had announced price caps for COVID-19 treatment in private hospitals, but the amounts were several times higher than the same packages under the state government's health scheme.

Moreover, the rates fixed by Chhattisgarh Health Department were much higher than many other states, such as Rajasthan, Maharashtra, Telangana, Andhra Pradesh and Kerala. The state health department failed to hold the private hospitals accountable for providing treatment at rates fixed under DKBSSY/AB-PMJAY.

As a result, most patients admitted to private hospitals have had to pay exorbitant amounts. Despite the clear evidence on the private sector failing to provide services, or engaging in price gouging during the pandemic, Niti Aayog, central government and many

state governments have proceeded to implement public-private partnerships for handing over public hospitals to private sector medical colleges.

PMJAY for non-COVID services

Under PMJAY even the other claims decreased drastically during the pandemic. During ten weeks of the lockdown, there was more than a 51 per cent decline in the average weekly claim numbers, compared to 12 weeks before the lockdown, and a 76 per cent reduction in the claimed amount in the early period of the lockdown. There was also a 3 per cent shift in claims for women both before and after the lockdown. For conditions (such as pneumonia, respiratory failure, fever, etc.) that may be related to COVID-19, there was a 68 per cent decline in the number of claims in the first week of the lockdown.

While part of the reason for this may have been due to the inability of patients to travel for treatment due to the lockdown, the major reason was that the private hospitals suspended their services or refused to admit patients under the PMJAY.

STAFF NEWS

Sulakshana Nandi participated in the 10th Global Conference on Health Promotion for Well-being, Equity, and Sustainable Development organised by the WHO. She was a panelist for the technical deep dive session on 'Health equity–

the foundation for well-being' on 14 December 2021. She spoke about the role of civil society in health promotion for wellbeing and in reducing health inequities.

Publication

Dasgupta R. et al. (2021) Universal Healthcare and Univer-

salising Health Insurance: Examining the Binary Through the RSBY/MSBY in Chhattisgarh. In: Qadeer I., Saxena K.B., Arathi P.M. (eds) Universalising Healthcare in India. Springer, Singapore.

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GLIMPSE OF THE QUARTER



Public Health Resource Network (PHRN) is a growing network of individuals and organizations with the perspective of strengthening technical and management capacities to take action towards the common goal of 'Health for All'. Its main objective is to contribute and strengthen all efforts directed towards the goal of 'Health for All' through promotion of public health, social justice and human rights related to the provision and distribution of health services, especially for those who are generally left underserved. PHRN is currently working directly in the states of the states of Chhattisgarh, Jharkhand and Odisha and has contributed to the on-going work of strengthening public health systems in other states through its partnerships with other institutions.

Public Health Resource Society (PHRS) is the core group that has initiated the network. PHRS is a national level organization that is registered in Delhi under Societies Registration Act 1860 (Act XXI). It comprises of a small group of members and full timers that provides leadership to the network as well as functions as its secretariat.

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