

# DFY Bulletin—The quarterly update

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## DFY & CII launches Rehabilitation program in Bandipora, Kashmir

Bandipora district of Jammu & Kashmir is a potential flood zone and also face multiple development issues like high infant mortality, under-development, malnutrition, frequent disease outbreaks, consumption of contaminated water and poor sanitation like open defecation, lack of toilets, etc. To change this condition, CII and DFY has launched a community based risk reduction project in ten villages to develop sustainable health practices and mitigate or alter the nature of health risks during normal time and also during emergency.

The aim of the project is to develop sustainable health practices in the proposed ten villages through adopting a multi-sector approach. The project works in coordination with five departments which are Panchayat, ICDS (Aanganwadis), Public Health Engineering, Education (Schools) and Health facilities (SCs & PHCs). Reduction of health risks is the most important aspect to develop sustainable health practices. Health risks here refer to any challenges for community at large that might aggravate due to the lack of awareness or any regular practices thus the planned project attempts to implement risk reduction techniques in the mentioned ten villages.

The project is broadly based on three major sections which are Health, Disaster risk reduction and WASH (Water, Sanitation and Hygiene). The target area of this project is 7 PRIs of Bandipora district. These seven PRIs are Kehnusa, Aloosa Ghat, Ashtingoo Ghat, Kema, Mangnipora, Kulhama and Laharvalpora.

The Medical team covers Astingoo Ghat medical Zone which has one PHC, one NTPHC, one allopathy dispensary, 14 sub centers, 1 medical center and 5 Unani dispensary. The main objective is to support flood recovery of these health centers and strengthen the immunization services, MCH services and other health facilities in the area. The DRR team is focusing on mobilizing community members and constructing 10 DRR units with selected volunteers from these 10 villages. These units will be a primary participant in all community based programs. WASH team is working for the elimination of root cause of many of the health issues which is 'lack of toilets'. The team is working to construct 380 toilets for under privileged families.

## J&K Operations: 380 toilet units to be constructed in Bandipora

Under the CII funded project DFY is constructing 380 Toilet units for individual households. This team started with a door-to-door baseline survey for each of the houses in these ten villages to collect the information on various scales, which includes social indicators, economic indicators, medical indicators, sanitation indicators and profile of the families. Based on the assessment potential beneficiary list was generated and presented to the community representatives, which included Sarpanch, PRI representatives

and village representatives. With the community participation a final list was created. First preference was given to widow/ woman headed houses holds/ PWD in the earning member of the family; Second Preference was given to BPL- AAY (Antyodaya Anna Yojana) category families; Third preference was given to BPL category families with least family income and unsecured jobs like fishing etc. In addition, WASH team has also visited schools, Aanganwadi centers to collect

WASH relevant data for next phase intervention.

As part of the construction one of the major problem faced is constructing a toilet unit near a bank without contaminating the ground water. The prime issue was that many of the places have high water table. Thus the team has derived three different designs one is for higher water table, second for medium level and last for low level.

## Selected Villages:

- Kehnusa PRI: Kehnusa, Zurimanz - Bangladesh, Khodamal - Kanibat
- Aloosa Ghat : Aloosa Paribal, Kanalbagh
- Astingoo Ghat: Astingoo Ghat
- Kema: Kema
- Mangnipora: Mangnipora
- Kulhama: Kulhama
- > Laharvalpora: Laharvalpora



## DFY Bihar launches Community Based Management of Acute Malnutrition (CMAM)

Under Bihar DFY-NMBT Rural Health Center initiative, Doctors For You has started its Community Based Management of Acute Malnutrition (CMAM) project for malnourished children in Masarhi Panchayat, Fatwa Block, Patna.

The screening of SAM children first began on 21<sup>st</sup> of September 2015 by Dr. Zarjan Zahid MD, DPHN, Health and Nutrition Program Manager (CHA) from Afganistan. Dr. Zarjan reached India during a fellowship program under Asian Disaster Risk Reduction Network (ADRRN). As of now more than 30 numbers of under 5 children were screened



Dr. Zahid Zarjan and Mr. Rinku screening a child

**Till now the center has screened more than 30 (under the age of 5 years) children out of which:**

- 6 Children were severely malnourished
- 15 were MAM (Moderate Acute Malnutrition)
- 9 were found normal

**Which means 70% of the children were found malnourished**

under CMAM project out of which 6 were SAM, 15 were MAM (Moderate Acute Malnutrition) and 9 fall under normal category. The method used for determining malnourished children was MUAC (mid upper arm circumference) tape including height and weight measurements. Those who fall under SAM category were admitted in the center and RUTF (ready to eat therapeutic food) were supplied to them after triage and appetite test. Their mothers were also advised on how to properly feed the therapeutic food to their children. These SAM children were screened every consecutive week until they fall under normal category. A ration card was given to them at the time of admission for follow ups. The MAM children mothers were advised to provide home-made food along with special care to their children. In future, initiatives for taking care of MAM children would be sup-

**In Bihar 58 percent of children under five are malnourished out of which 5.8 percent falls under Severe Acute Malnutrition (SAM). This accounts for 9 lakhs children which fall under SAM.**

ported by the center.

During screening it was observed that many children suffered from worm infestations and Vitamin A deficiency syndrome and some even complaining about night blindness. Therefore apart from screening for malnutrition, Vitamin A and de-worming drive was carried out especially among the children who visited the center. For long term planning and future project initiatives in Masarhi Panchayat a baseline household survey was also being carried out. The survey would help in assessing the current population health status and needs along with other socio-economic details.



### Story of Manish Kumar: A SAM Child in Masarhi, Bihar

Manish Kumar, age 12 months son of Bhim Manjhi (Father) and Baby Devi (Mother) was first screened on 21<sup>st</sup> of September 2015 with MUAC measurement below 105 mm. He was identified as SAM baby at the time of admission. For three consecutive weeks he was supplied with RUTF and his mother was advised to take special care and maintain basic hygiene care practices while feeding as per recommended guidelines under CMAM project. Every con-

secutive week MUAC, height and weight measurement were taken and it was found that there was simultaneous increase in all the measurements since admission. During his third visit his MUAC measurement shows an increase to 130 mm along with weight and height thereby indicating the baby as normal. After proper diagnosis of the baby, he was discharged from the center. As Manish mother said after discharge of her baby -

“I got to hear from my neighbor that a clinic for treating sick children was opened in my village. I decided to go for a checkup for my baby as his weight, height and other feeding habits were not normal as per other children near my neighborhood. After treating him with RUTF for more than three weeks I saw a dramatic increase in his weight and height. My baby is normal now and thanks to all the staffs and health center for this initiative.”



Manish Kumar with his Mother

## Assam Floods 2015—DFY operations

The devastating flood affected around 17,00,000 people all over Assam. In Kokrajhar district 90% of the houses were partially damaged, 8 % were fully damaged and 22% partially damaged as per JRNA-IAG. Infrastructural damages in terms of road connectivity of Bongaigaon, Kokrajhar and Dhubri district were severe. National highway connecting these 3 districts was inundated and closed down by the authority for a week. It was also difficult for the assessment team to reach Dhubri district for the first week of disaster as bridges were swept away by flood waters

### WASH assessment in flood affected districts

The second phase of assessments and health

care intervention in the flood affected districts of Kokrajhar, Dhubri and Bongaigaon revealed that the status of health services and water sanitation and hygiene remains crucial and still undermined by the district authorities. Compared to the districts of Lakhimpur, Dhemaji or Sonitpur where flood occurs on yearly basis the preparation for flood (like raised water source/boats to evacuate household items, livestock etc.) in the above mentioned three districts were found absent

Hand pumps and wells were totally inundated by the floodwater as water logging was observed above 3 ft. Collected water samples from the villages of Bongaigaon, Kokrajhar and Dhubri district were found contaminated. Open defecation was observed while the community was in the relief camps. The community continued practicing open defecation

even after returning to their villages as sanitation facilities were completely damaged by the flood water. Similarly the community who returned to their villages after flood water receded had no other option but drink the contaminated water creating high possibilities of water borne diseases.



### HEALTH CARE OUTREACH ACTIVITIES

Doctors For You (DFY) implemented immediate response program in the worst affected three districts of Kokrajhar, Bongaigaon and Dhubri after carrying out assessments in the affected villages with JRNA tools.

The basic objective of this response program was to address the basic health care need of the community that arises after flood situation.



after flood situation.

Village level intervention with primary health care service were initiated with the help of coordination with and active participation of our local stakeholders like ASHA/ ASHA supervisor and school authority etc. More than 1300 patients were treated through these village level health camps. Deworming was conducted for 800 number of people. During these health camps health and hygiene talks were also conducted for the community. It was found that complains of loose stools, cold, cough and geriatric issues were found prevalent among the flood affected community.



### WASH INTERVENTION

Focusing on the critical situation pertaining to Water, Sanitation and Hygiene, Doctors For You carried out extensive WASH promotion activities in all the villages and relief camps where health camps were conducted. Demonstration regarding disinfection of wells and tube wells using bleaching powder was shown to the affected community. In 10 villages across the three district of Kokrajhar, Bongaigaon and Dhubri, water sources samples were found contaminated. In few villages the community members stated that the district official distributed bleaching powders but the villagers were unaware about the usage of it. It was also observed that bleaching powders were sprayed in the camp surroundings which has little positive outcome. Water samples from all the assessed areas were collected through H2S kits and all the samples were found to be contaminated both at point of source and point of use. The community was also trained in preparation of stock chlorine solution for disinfecting drinking water along with distribution of chlorine tablets.

### PARTICIPATION IN SENSITIZATION WORKSHOP ON EMERGENCY RISK MANAGEMENT

Doctors For You-NERD participated in two days sensitization workshop on emergency risk management in Guwahati, organized by IAG (Inter Agency Group)-Assam in collaboration with Sphere India. The purpose of this sensitization programme was to help individuals, organizations and state to develop awareness and enhance capacity of health professionals on primary prevention, vulnerability reduc-

tion and strengthening community, health facility and health systems resilience by reinforcing a community centred primary health care approach. This high profile workshop were comprised of sessions on various emergency management issues, presented by WHO, UNFPA, NHM, ASDMA and Sphere India representative. Dr. Mridul

Kumar Deka from DFY-NERD presented a session on Minimum Initial Service Package in the context of Assam's humanitarian crisis situation and how MISP program was contextualised and implemented by DFY during BTAD violence 2012



## Opening of new health centre in Kalwa Slums, Thane:

Thousands of children living in Kalwa slums of Mumbai are living in substandard conditions with no access to medical care. Maternal and childhood care is scant and sporadic at best with the closest hospital a fair distance away. Access to vaccinations, vitamins, deworming and other basic health services are not readily available. The results are tragic: preventable illness injury and death among mothers, infants and children from disease, flu and diarrhoea.

Gabriel Project Mumbai (GPM) partnering with Sundara and Indian NGO Doctors For You (DFY)

started the Shravan Health Center (SHC), right in the heart of Kalwa slums of Thane district of Maharashtra, India. SHC will provide easily accessible and affordable quality health services to the underprivileged section of society. Through the health centre GPM and DFY targets to reach 10,000 mother and children in first year itself and will provide curative and preventive & promotive health care services i.e. treatment of common medical illnesses, family planning services, vaccination primary health care services, immunization, family planning services

and health education etc. SHC was formally inaugurated on 13<sup>th</sup> August 2015 and health



Dr Amit examining 14 month old girl child at Shravan Health Center, Kalwa

## DFY, Mumbai launched Community Based Management of Acute Malnutrition:

Malnutrition is a big health problem in the PAP's (Project Affected People) resettlement colonies and nearby slum population. The under Five clinic at MRVC Health centre in Lallubhai compound pointed out the alarmingly high prevalence of malnutrition. Among the 785 children screened, 278 were malnourished (121 severe underweight and 157 moderate underweight). Based on this, DFY Mumbai started malnutrition project to erase the vice that is malnutrition from its project areas. DFY field workers started reaching out to families with malnourished children in the area and children were rescreened. The project was formally launched on 16<sup>th</sup> October 2015 by MRVC (Mumbai Railway Vikas Corporation) Chairman and Managing Director Mr Prabhat Sahai, CDDP of Mankhurd project of ICDS, Ms Prema Ghatge and Dr Ravikant Singh. During this period, RUTF will be provided to SAM children.



18 months toddler affected by severe malnutrition & skin infection was enrolled for DFY's Community Based Malnutrition Management Project. He is not able to stand at his own or even without support. There are many such children in the area.



RUTF distribution by CMD MRVC Mr Prabhat Sahai



Launch of CMAM project at Mumbai

## Nutrition Week Celebration and distribution of Toys for Anganwadi

Every year 1<sup>st</sup> week of September is celebrated as Nutrition Week by Anganwadi Workers under ICDS project for promotion of Nutrition among pregnant women and children. This year, DFY team collaborated with Anganwadi workers under the leadership of Dr Ravikant Singh (President, DFY) and Ms Prema Ghatge (CDDP-ICDS, Mankhurd). On 1<sup>st</sup> September, the program for nutrition promotion was organized in Ambedkar Nagar (PAP colonies). The program was attended by 52 Anganwadi workers of area. Importance of 1000 days, starting from detection of pregnancy to first 2 years of life of child was explained by Dr Ravikant. On this occasion, Toys were distributed for children attending Anganwadi Centre by Goonj Organization and DFY.

## Start of F-ICTC (Facility based Integrated Counseling and Testing Centre) at MRVC Health Centre

DFY and MDACS (Mumbai District AIDS Control Society) signed a MOU and started HIV testing and counseling centre for high risk migrant population in Lallubhai compound and nearby area. The testing services will be provided free of cost to beneficiaries of PAP's resettlement colony i.e. Pregnant women, Tuberculosis patients etc.



at toys distribution to Anganwadi Centres

## Vocational training courses at DFY Health Centre

Skill building training at DFY Vocational Training Centre- In order to improve the living standards of Projected Affected People, DFY started Mehandi classes at Natwar Parikh Compound and Health Assistant Course at Lallubhai compound, Mankhurd. During 3 month long course 38 adolescent girls were trained. The course completed in august 2015. In the Health Assistant Training Course total 16 participants were enrolled.

## Doctors for You operations in Nepal

### Emergency Drug support to HIV infected patients in Nepal

There was sudden scarcity of HIV drugs in Nepal post disaster as the procurement process for drug in Nepal is lengthy. There were few patients who were on single drug regimen of ARV. But these specific drugs were not available due to disaster situation and the lives of infected patients were in danger. Hence HIV patients and the Central dept for Aids i.e NCASC was in emergency need of support. DFY was approached by logistics Management dept. Nepal, for emergency support for this situation. As ARV drugs are life saving drugs. It could cause immediate morbidity and mortality in HIV infected patients. Understanding this situation in this emergency period DFY immediately reacted to the demand and mobilized required drugs from India to Nepal within no time. Even in adverse political condition between two countries and at ground level in Nepal where there was serious political instability. With all these constraints DFY managed its consignment to be reached at the well in need HIV patients and save their life.

### Case Story of a HIV patient

Jyoti lama (changed name) is one of the many fighter / survivor fighting against HIV/AIDS. She has been taking anti retroviral drugs since 2001. For the past 7 years she was taking 1st line drugs. As the year passed the drugs started being less effective. Then she started taking 2nd line drugs out of which Abacavir drugs was found to be most effective for her. The 2nd line drugs was provided to her through NCASC by international organisation and doctors. But in disaster situation this process was hampered. She said "I was taking these ARV drugs past few years, post earthquake I suddenly found out that these drugs are hard to get as it was out of stock in Teku (the ARV distribution center) i.e. main storage office for HIV drugs and I was asked to replace my earlier drugs with different new regimen. I was reluctant to use and scared about my life thinking new drug regimen will be not helpful for me. I didn't want to take risk and take any chance. During this period I came in contact with "Doctors for you". Which was contacted through Govt dept. And I got my own earlier regimen drugs. Which was so important for me." Further she expressed that "these days it has been really tough for her as she was not able to find the drugs and that drugs means a lot to her."

She really wants to live and survive not only for her daughter but also for other women who are in need of those drugs. As she says "saving a mother means to save their children". She really felt that she got a new life and kind of relief after getting those medicines. She hopes to get some more medicine or fund to buy those medicines for other women too and if

### Capacity building and Training programme.

DFY in collaboration with EDCD dept is going to conduct training on Public Health In Emergency throughout Nepal in month of November and December.

DFY will be conducting 5 PHIE trainings in 5 different regions of Nepal. By this program DFY will strengthen RRT members (rapid response team), who are the first response team at district level in Nepal for any kind of disasters and emergency. Through this activity DFY will produce 140 skilled RRT members, public health officers and Medical officers in Public health in emergency, who will be operational in adverse situations, which is common in difficult terrain like Nepal. Hence in truth this will strengthen the system in Disaster Response and Mitigation activities in recovery phase.



Jyoti Lama (changed name) with DFY staff \_\_\_\_\_. The picture has been tempered for privacy concerns

### DFY- USA event at Delhi

#### Doctors For You-USA completed 26 heart surgeries of economically backward children

Doctors for You-USA & G.B. Pant Hospital New Delhi celebrated successful surgeries of 26 children from the very poor socioeconomic background (Family income <1 lakh/year) who can't afford costly surgeries. DFY supported 13 open heart surgeries and 13 interventional heart surgeries in last nine months period.



### DFY received 'Big Rakshak' Award

92.7 BIG FM's initiative BIG Rakshak rewards those individuals or organizations who are active in social life and works to support the underprivileged or needy. Through this Big FM aims to highlight the inspirational extraordinary individuals who are selflessly working to make India a better place. This is an initiative that celebrates the undying spirit of those ordinary Indian men and women who have performed extraordinary service, and done so selflessly.

Dr. Rajat Jain, Vice president, Doctors For You received 'Big Rakshak' award from Big 92.7 FM at Big FM studio. The award was presented on Rakshabandhan, in the presence of Olympic double medal winner Mr. Sushil Kumar.



### Words from Community:

"Our Dept NCASC is very much thank full of Doctor's For You for their support, we were in completely out of stock of HIV single drug regimen due to disaster and political instability and this support from DFY has helped us a lot. Thanks again." Dr. Dendra Raman, Director, NCASC, Kathmandu, Nepal.





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**Doctors For You (DFY)** is a medical humanitarian organization formed by a team of highly experienced and specialized doctors from various parts of the world. DFY’s focus is to address the most alarming and concerning problems faced by mankind today viz. healthcare, hygiene, disaster response and emergency medical aid in the most affected, developing countries, thereby touching millions of lives around the world.

**Genesis of Doctors for You**

The genesis of “Doctors for You” dates back to the time of crisis when Mumbai witnessed the one of the worst outbreak of Malaria & Dengue. Thousands of people were affected. A group of young doctors decided to take on the challenge and address this issue. The word spread, people flocked in to donate blood/platelets and many lives were saved. Owing to the success, the group organized various such drives all across the city. The group decided to formalize the initiative and registered the organization, and ‘Doctors For You’ was born. In 2008, during the Bihar floods (a national disaster), it was felt that there was no dedicated medical disaster response team in India for the disaster relief work. Doctors for You decided to fill this gap and immediately responded to the call of Nation. A team of 45 doctors was immediately sent to Bihar for flood relief work. The team worked in Bihar for six months treating over 130,000 patients especially women and children. At present DFY has established itself as an organization working on disaster health and primary health care for all.

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**Our Vision**  
 To be outstanding in the delivery of medical and humanitarian aid to all

**Our Mission**  
 To provide medical relief, sustainable health care services, capacity building and risk reduction activities for vulnerable communities in both crisis and non-crisis situation

**Core Values**  
**Passion:** We are passionate and highly motivated to help those in need  
**Accountability:** We are accountable to our partners, our volunteers and all the stakeholders in the society  
**Dedication:** We are dedicated and committed to make a positive difference  
**Respect:** We respect our people whoever they are, wherever they come from irrespective of their caste, creed, religion, race or nationality.

DFY INTERNATIONAL CHAPTER: DFY USA



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