



**ANNUAL  
REPORT  
2015-16**

**DOCTORS FOR YOU**  
“Health for All”

# FORWARD

Dear Friends,

It is my great honour to share with you, Doctors For You Annual Report 2015-16. This report comes to you with pride, as it is a collection of our most significant accomplishments and our most special stories from the past year.

Last year was significant in DFY's development as a well-recognised Organisation. With the support of our donors, partners, volunteers and other stakeholders, we were able to achieve significant success in reaching out to tens of thousands providing medical relief post disasters (in Nepal, Tamil Nadu and Assam), providing medical care to people excluded from contemporary health care system such as the PAP's of Govandi (Mumbai) and Thane and poorest of poor in Bihar and through various community empowerment initiatives across the country.

In 2015-16, DFY responded to its first disaster across the international border when it responded in Nepal during deadly earthquake of April 2015. DFY added more centers to its list of interventions with the addition of 2 health centers in Mumbai, 1 project in Kashmir, and 1 rural health center in Bihar. Further upon realisation that providing just health services may not bring about significant change that DFY is hoping for at the ground level, DFY started DFY-Center for Peace building through Community Empowerment (CPCE) a center aimed at implementing community empowerment initiatives at the grassroots level. By now, we have grass root level community empowerment initiatives running in Bihar, Jammu & Kashmir, Maharashtra and Tamil Nadu, with Assam scheduled to join the list at the earliest.

Each of our supporters are invaluable to us, however towards the end of this year I can't help but mention my special gratitude to Direct Relief for immediate support during Nepal earthquake, Wipro & Cipla for the support during Chennai floods and NMBT for their continued support to our dream project in Bihar.

As we move forward this year DFY intends to commence the functioning of DFY Hospital, the first of its kind in Bihar among other projects to



effect larger change in the grassroots level. Further we plan to cement our place as one of the leading organisation from this part of the world providing medical relief to victims of disasters and people affected by exclusion from regular health care system all the while trying to make a lasting change in our society through our community development initiatives.

We renew our promise to base our interventions evidence based, to address gender inequality, strengthening governance for change, holistic development, and the community itself being the voice of social transformation. Thank you all for your continued support on our journey.

Dr. Ravikant Singh

President, Doctors For You

# MESSAGE

Dear Friends,

As we approach the new financial year, we reflect back and see a year of great significance has passed. From Doctors For You's perspective the past year has been fulfilling and successful. As a team of like-minded people we all come together because we strongly believe in DFY vision of 'health for all' which is a bold statement to make but being a medical based NGO, DFY has core focus on uplifting the health standards of the country. As a nationwide NGO, we are unique because we address challenges and opportunities at scale, moving further, faster, together. We share ideas and create an open and equal platform for our team to jointly work towards the development of the organisation.

The past financial year started with the first international disaster response of Doctors For You when the unfortunate earthquake of April 2015 occurred in Nepal. The year also witnessed the opening of new initiatives like community development programmes, opening of new health centers in Mumbai, WASH project in J&K where DFY is building 508 toilets for under privileged community of Bandipora district. Doctors For You also continued operating through its USA chapter which has supported the heart surgeries of more than 50 children in last year and is more actively supporting such under privileged needy little ones. The USA chapter also continued its pilot project on juvenile diabetes under which it supports three children.

The organization also had to work on advancing its structure and management with the increasing field areas. The major steps have been implemented to advance the structure and new office set-ups have been made, partnerships have been created and specific guidelines have been set for all interventions. The new setups and mechanisms will also enable us to be more dedicated towards meeting our vision and mission for the upcoming year.

Looking forward, as a DFY vice-president, my aim is to advance our leading role in healthcare and disas-



ter risk reduction services. Our approach is not limited to responding to disasters but more focused on mitigating or altering the nature of risk and ensuring the sustainable development of the society. Many of us link human desolation and economic losses with disasters but now it's high time to understand that such devastation can be prevented through adopting disaster risk reduction initiatives. Reducing exposure to hazards, lessening vulnerability of people and poverty, wise management of land and environment, and improving preparedness for adverse events are all parts of our disaster risk reduction trainings and preparedness programs.

I would like to extend my thanks to all our funders, well-wishers, employees and other stakeholders for believing in us and crossing the year with constant inflow of enthusiasm, trust and supports. I will specially thank Direct relief international, CII corporation, WIPRO, CIPLA, NBMT, DFY-USA and other funders for supporting our core projects. We all believe that the spirit of collaboration from all our stakeholders will survive for the coming years as well.

Dr. Rajat Jain

Vice-President, Doctors For You

## Organization Background

Established in 2007 with a vision to become an outstanding organization in the delivery of medical and humanitarian aid to all, Doctors for You (DFY); a humanitarian organization based in India, has demonstrated pioneering work in community based disaster risk reduction, public health, training and disaster emergency response. DFY, since its inception in 2007, has been involved extensively with vulnerable communities in the six states of India providing efficient, effective and equitable distribution of health care for all. The thrust of DFY's work is to provide medical relief, sustainable healthcare services, capacity building and risk reduction activities in crisis and non-crisis situations. The organisation also received several awards viz. The SAARC Award (2010), and The British Medical Journal Group Award (2011) for its outstanding contribution to the humanitarian field. Presently, the organization is expanding in terms of its staff and operation with increasing volume of registered volunteers with the organisation who are ever ready to support in situations of crisis following a major disaster. DFY is also engaged in developing Disaster Management, Emergency and Trauma care services along with Training and Capacity building programmes throughout India.

# DOCTORS FOR YOU

## VISION & MISSION

The functioning of Doctors For You is guided by a set of ethical values and guidelines. DFY functions on humanitarian principles of humanity, impartiality, and neutrality. It offers services and assistance to people based on need, irrespective of race, class, caste, religion and gender. The following are vision, mission and guiding principles of Doctors For You (DFY).

### **VISION :**

"Health For All"

### **MISSION :**

Providing sustainable, equitable, effective and efficient health care services to the most vulnerable individuals and communities.

### **Guiding Principles:**

- ◆ Rapid response
- ◆ Reaching the unreached
- ◆ Accountable to our Partners, Donors & Communities
- ◆ Community Participation in decision making
- ◆ Neutrality & Non-Political

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# Doctors For You in 2015-16 at a Glance

## North East Regional Office

In the year 2015-16, DFY Assam implemented various projects. The major activity was emergency management exercise which is designed to optimize the strengths and of various line departments/institutions/organizations that are responsible for carrying out the emergency response mechanism of the affected community during the time of disasters. The team also responded to Goalpara floods, lower Assam floods etc. The team also participated in seminar on Conflict, Displacement and children's vulnerability.



## Bihar

In the year 2015-16, DFY Bihar started a new rural health center in Masarhi village. The center provide accessible and affordable primary health care services prioritizing maternal and child health targeting rural population irrespective of caste, creed and gender considerations. DFY Bihar also started CPCE (Center for peace building through community empowerment) which is a community development initiative project implemented by Doctors For You, Bihar.



## Jammu & Kashmir

In the year 2015-16, DFY launched its rehabilitation project in Jammu & Kashmir. The project is titled Community based risk reduction through health & hygiene promotion (CBR2H2). CHR2H2 is specially designed for flood affected villages near Wular lake in Bandipora district. The team is constructing 380 toilets for the most vulnerable groups and providing healthcare support for these ten villages. The team also trains community volunteers for emergency response.



# Doctors For You in 2015-16 at a Glance

## Mumbai

In the year 2015-16, Doctors For You Mumbai started multiple new initiatives like two new health centers, community development initiatives etc. The Mumbai team has successfully served 44,265 patients in OPDs at its health centers. DFY, Mumbai has also launched vocational skill enhancement courses where nursing students have been trained. Apart from these, Center launched various health primitive and disease control drives.



## Nepal

In the year 2015-16, DFY responded to April 2015 earthquake in Nepal. The team immediately responded to the earthquake and started providing healthcare in Nepal. Team DFY served more than 6000 beneficiaries through healthcare services and also provided medical equipments to the government health centers for resuming their functions post disaster.



## Tamilnadu

In the year 2015-16, Tamilnadu faced heavy rains in December 2015 that led to flooding. DFY immediately responded to these floods and started working in three districts that are Chennai, Thiruvallur and Cuddalore. The team intervened in healthcare and WASH sectors. The project continued from December 2015 to April 2016.



## Doctors For You—USA

DFY-USA continued its two ambitious projects : TRISHA & UDAAN in the last financial year as well. The Project Trisha supported heart surgeries of under privileged children whereas Project Udaan supported the children with diabetes.



# DOCTORS FOR YOU

North East Regional Office

## Emergency Management Exercises (EMEx)

Emergency Management Exercise (EMEx) is a weeklong capacity building exercise, conducted to test the response mechanism of the district administration as well as the community members of a certain community. The exercise is designed to optimize the strengths and of various line departments/

exercise, trainings of trainers is conducted and representatives from various departments are trained by various agencies. Doctors For You is one of the lead organisations which undertakes trainings on four of the most important tracks, i.e. Public Health In Emergencies, Community Based Disaster Preparedness, Mass Casualty handling for



institutions/organizations that are responsible for carrying out the emergency response mechanism of the affected community during the time of disasters. The aim of EMEX is to prepare the community at district level for any large scale emergencies

This exercise includes a series of events, i.e. trainings in various tracks, workshops followed by table top stimulation exercise and field drills. During the first three days of the

nurses & paramedics and hospital disaster preparedness. DFY also facilitated the table top exercises in the EMXEs. The purpose of the training is to enhance the ability of participants to learn essential skills and knowledge in emergency situations

The field drill is conducted at district level and the district administration as well as the regional emergency responders, educational departments, hospitals & other health facilities, health care professionals, humanitarian agencies, members of the

community, NGO's civil society organizations takes part in the drill to test the real time inter agency coordination and how emergency response mechanism is activated by all the stakeholders.

EMEx provides a platform for the participants to build up inter agency communication and coordination for responding to disasters/emergencies. It helps in developing practical skills for emergency managements of mass casualty events. EMEX also serves an important tool for evaluating and assessing the capabili-

ties of the emergency responders and to test the existing plans and identify the gaps of the system to deal with mass casualty events.

Two of the most important tracks on which DFY was facilitating trainings are Hospital preparedness & emergency management and Mass casualty handling for nurses and paramedics. DFY-NERO facilitated a total of 9 EMEx's in the district of Bongaigaon, Kamrup metro, Nalbari, Lakhimpur, Dhemaji, Dhuburi, Darrang, Sonitpur, Tinisukia and Sivasagar.

## Hospital preparedness and emergency management

This course on hospital emergency preparedness is aimed at enhancing the ability of the hospital management to efficiently provide



intra hospital care during mass casualty events. With considerations of surge capacity and available local resources, participants are provided an orientation to develop the Hospital Emergency Response System, activate the plan in real time, coordinate patient care at all level and effectively assess and mobilize hospital resources to cater maximum number of patients. Doctors from various health facilities (both government and private) and hospital administrators falls under the target group for this training program.

## Mass casualty handling for nurses and paramedics



This course is carefully designed to equip give first responders-EMS/ paramedics/ nursing staffs working in the hospitals with the skills, knowledge and confidence to provide critical and immediate care in disaster settings. This course deals with various emergency and mass casualty handling topics like, ex-

trication, log-roll & patient transportation, psychological first aid and triage.

## Capacity building trainings for community volunteers

Goalpara district is one of the most vulnerable district of Assam. In the year 2014-15 it was worst hit by floods due to cloud burst and unprecedented rains. Besides providing health care responses, DFY-NERO has been conducting various capacity



building trainings in the district in association with Assam State Disaster Management Authority. In the month of March 2016. DFY in Coordination with *Islamic relief worldwide, Goalpara*, conducted a community level training on capacity building and resilience and shelter support in flood affected areas of Goalpara district, Assam.

The training was scheduled for two days and the target population was community volunteers. Detailed sessions on first aid, basic life support, water sanitation and hygiene (WASH); extrication and psychological first aids were facilitated by resource persons from DFY-NERO.

## Healthcare response in Lower Assam Floods, 2015:

The August-September 2015 floods in lower Assam had affected more than 17,00,000 people. The house damages as well as 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 authorities for almost a week. It was difficult for the relief workers to reach these districts for the first week of disaster as bridges were also swept away by flood waters.

DFY-NERO carried out health care response in three districts of Lower Assam i.e. Kokrajhar, Dhubri and Bongaigaon. Health camps were organized in the affected villages and relief camps on basic health needs. The aim of the health camp was to address the basic health needs of the community by adopting a community based approach in organising the camps. The camps were organized at village level with the help of coordination with our local stakeholders like ASHA/ ASHA supervisor and school authority etc. The camps were organised with the active participation of the community stakeholders and ASHA workers of the villages. During these health camps health and hygiene talks were also conducted for the community. During the village level health camps complains of loose stools, cold, cough and geriatric issues were found prevalent. More than 900 patients were treated through these village level health camps. Deworming was conducted for 616 number of people.

Apart from health camps WASH promotion was another prime focus of DFYs response in lower Assam floods. WASH promotion activities were carried out 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. 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. The health care response in these three districts which included water testing, village level health camps, chlorination; health and hygiene talks, deworming and water, sanitation and hygiene campaign tried to provide basic health care facilities to maximum number of flood affected population and provided services to more than 2000 people within a span of 20 days.



# DOCTORS FOR YOU

Bihar State Office

# HEALTH CENTER AT MASARHI VILLAGE IN PATNA DISTRICT

Doctors For You with Naraindas Morbai Budhrani trust started a health center named as Naraindas Morbai Budhrani Trust (NMBT) Health Center in Masarhi village in Patna District of Bihar. The health Center intends to pro-



vide accessible and affordable primary health care services prioritizing maternal and child health targeting rural population irrespective of caste, creed and gender considerations. The tar-

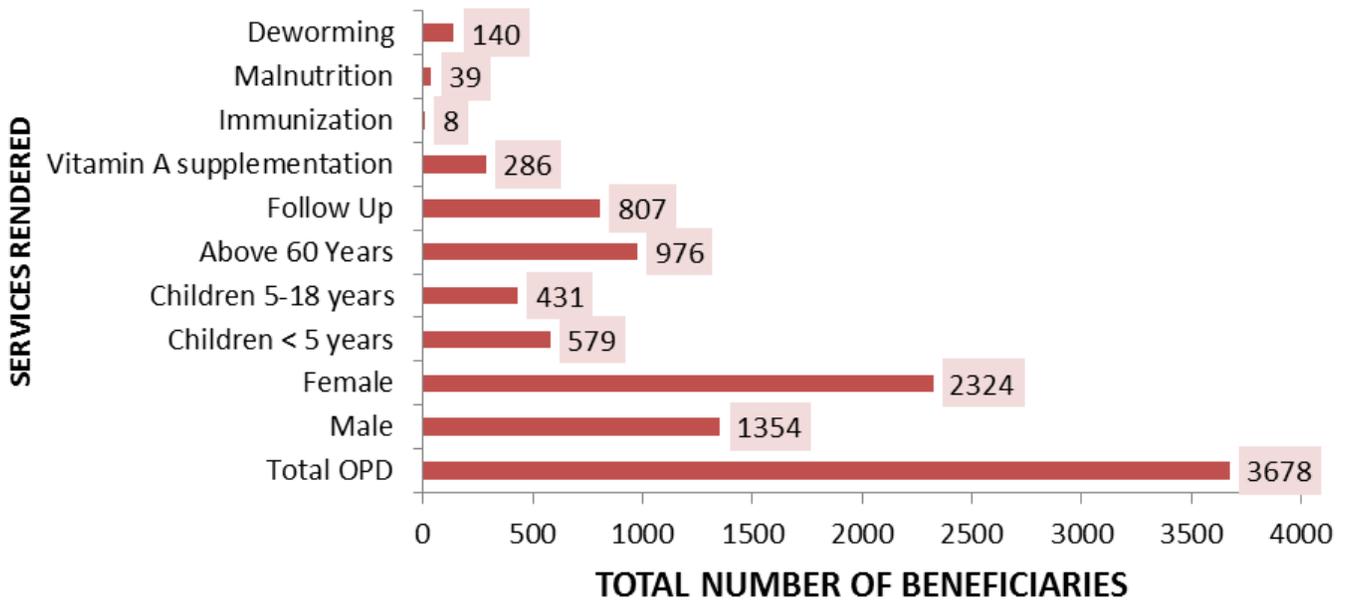
get area is within the 15 km radius of Masarhi region i.e. five panchayat (30 villages) of Fatuah Block of Patna District in the state of Bihar. This covers approximately 150000 populations.

The main focus at the health Center is on promotion and conducting institutional deliveries, ANC & PNC facilities, general OPD, basic pathological services, complete immunization, outreach and referral services, pharmacy and TB & Leprosy diagnosis & treatment, Nutrition counseling, Health Education. Thus, the health Center team is not only providing curative services at the Center but also the preventive and health promotive activities are focused upon. DFY team started its operation in the area from 1<sup>st</sup> November, 2015 but Official Inauguration was done on 20<sup>th</sup> December 2015.

## **SERVICES RENDERED BY THE NMBT HEALTH CENTER**

- ◆ 24 hours emergency obstetric care(EMOC)
- ◆ General OPD
- ◆ In patient services
- ◆ 24 hours Referral services
- ◆ Free ANC Check up
- ◆ Free Delivery & two days of hospitalization
- ◆ Post Natal care
- ◆ Immunization service
- ◆ Family planning services
- ◆ Neonatal care
- ◆ Community outreach for antenatal care
- ◆ Community outreach for Malnutrition
- ◆ 24 hour Laboratory services
- ◆ Generic Drug pharmacy
- ◆ Deworming
- ◆ Vitamin A supplementation
- ◆ Extensive IYCF ,immunization and family

## OPD SERVICES SINCE NOV 2015 TO MAR 2016



## Nursing Assistant Training Center

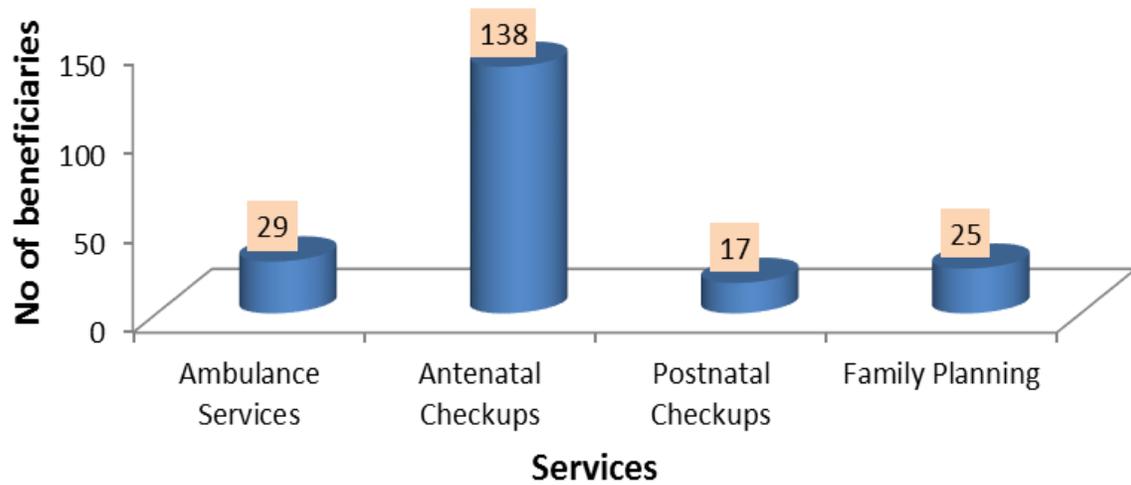
Doctors For You-NMBT health center Masarhi, Fatuha block, Patna, Bihar started Nurse Assistant Training Center, to create cadre of skilled, efficient, confident nurse assistants and to provide source of employment for school dropouts and unemployed youth in and around Masarhi health center. Duration of the course is six months through



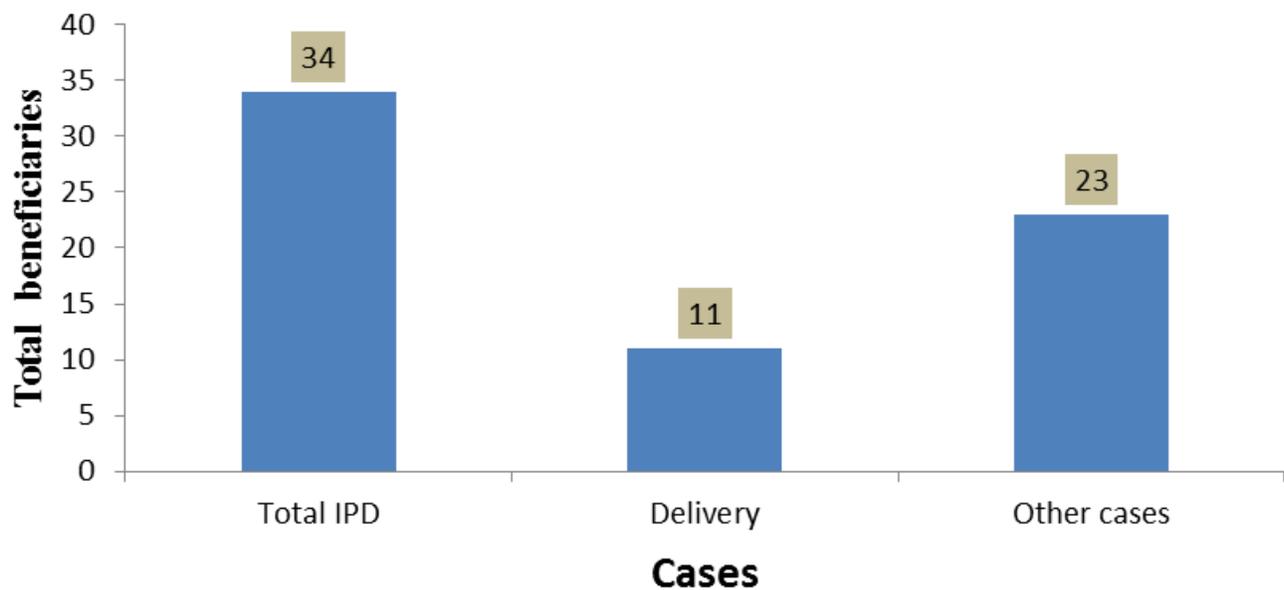
hospital and field based training. The syllabus of the course is adopted from the GNM, ANM training and Red Cross Nurse Assistant course syllabus. The syllabus includes Basic nursing

skills and procedures with basic anatomy, physiology, nutrition, and RCH and community health. Course also gives importance to English, Hindi comprehensives and personality development.

## Health promotive services since Nov 2015 to Mar2016



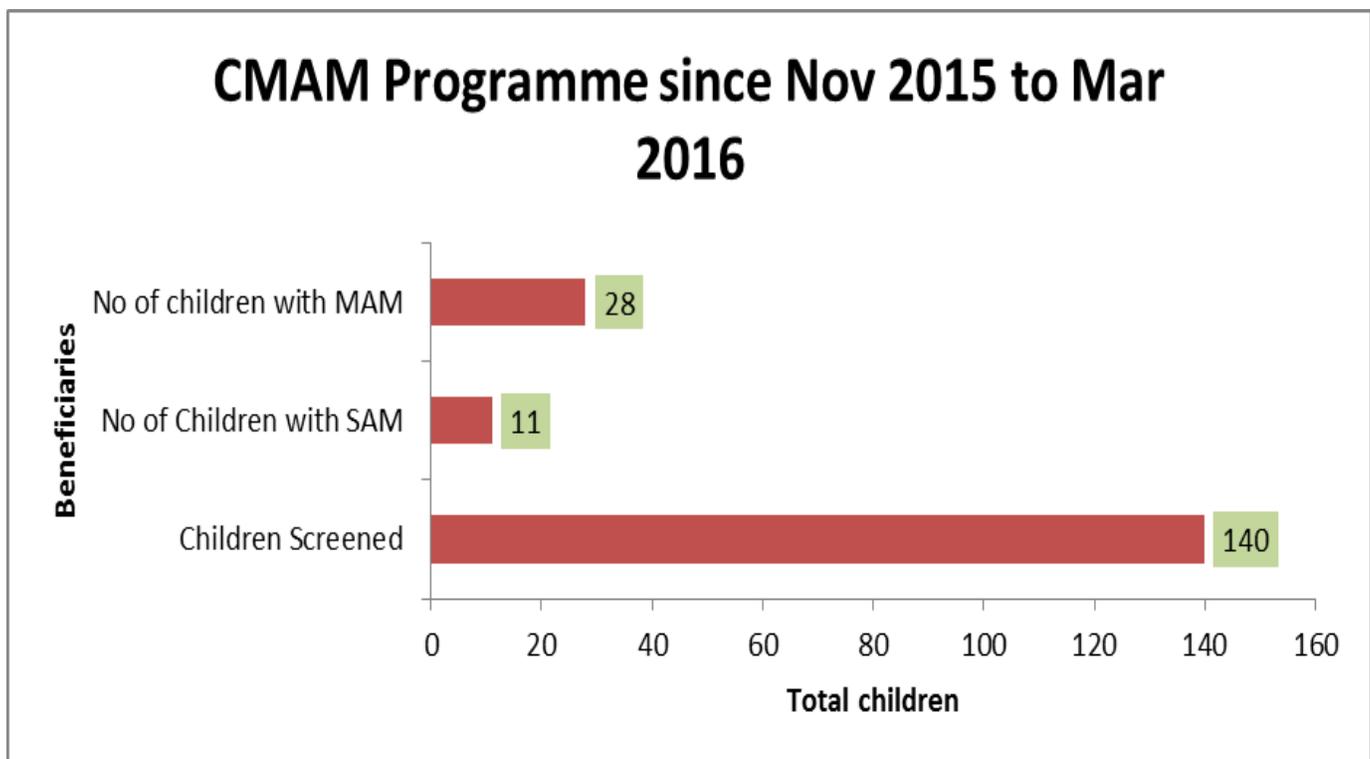
## Inpatient services since Nov 2015 to Mar 2016



## 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 method used for determining malnourished children is MUAC (mid upper arm circumference) tape including height and weight measurements. Those who fall under SAM category are admitted in the center and RUTF (ready to eat therapeutic food) is supplied to them after triage and appetite test. Their mothers are also advised on how to properly feed the therapeutic food to their children.

**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.**



# Community Development Initiatives (CDI) Programs

## Education Promotion

Under the CDI program, DFY launched various education promotions activities for the school going children, boys and girls. For the Primary school students DFY has been providing free tuition for all on everyday basis. Approx. 200 students from class I to class VIII enrolled in the program. The aim of the program was to empower the students of all the section of society to prepare and face the competition level for their future endeavors.

Apart from this , DFY also started free coaching classes on Mathematics and science for the students of class X who will be appearing in Bihar board exam 2016 . These classes were organized on Sundays where trainers from reputed coaching farms from Patna had come. Students from Masarhi and other villages as well had joined.

## Skill Development initiatives



DFY had launched a skill development program in Masarhi village from

December,2015. The program aims to empower the girls and women of the village. As a first step of this program, DFY opened a tailoring Center in Masarhi , where 64 girls and housewives had registered their names and were getting training from expert trainers from this Center.

For this course minimum monthly fee is INR 75.00/- per month and the fees are waived for economically and socially backward communities.



**Republic Day Celebration at -DFY Center**

**A community engagement exercise of Doctors For You**



# DOCTORS FOR YOU

Jammu and Kashmir State Office

# Rehabilitation Project in Bandipora, Kashmir

## Project CBR<sub>2</sub>H<sub>2</sub>

Bandipora district of Jammu & Kashmir is a potential flood zone that also faces 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. Post 2014 floods, DFY has launched its rehabilitation project to develop sustainable health practices and mitigate or alter the nature of health risks during normal time and also during emergency. The program is sponsored by CII. The aim of the project CBR<sup>2</sup>H<sup>2</sup> is to develop sustainable health practices in adopted villages through adopting a multi-sector approach. The project was launched in August 2015 and the team started working with three major divisions that are Health, Disaster risk reduction and WASH (Water, Sanitation and Hygiene).

During the last financial year, Medical team benefitted 1942 beneficiaries through its general OPDs (676), Gynecology OPD (120), physiotherapy OPD (9), ARSH (285), Immuniza-

tion (486) and VHND (366). The DRR team benefitted 2197 beneficiaries through its programs that are BLS training (500), Village response unit volunteer training (36), school safety program (520), child health and awareness program (308), sanitation drive (410) and cleanliness drive (423). The WASH team benefitted 86 beneficiaries through toilet construction and also supported various hygiene promotion and good sanitation practices promotion activities of DRR team.



# HEALTH ACTIVITIES

Doctors For You-Medical team is supporting the seven health facilities in its catchment area, with human resources and other resources. From the team, ANM, general physician, specialist doctors and support volunteers are sent to the adopted seven health facilities and conduct health clinics.

## Out reach and General Health OPDs

The very first kind of clinics in this system is general health OPDs. The key objective of organising general health OPDs are: 1) Increase the services provided at the health centers and strengthen the health facility with human resource support; 2) screening for critical cases to prevent infant and maternal mortality. During the general clinic, the team also screens for ANC cases and special cases are referred to the gynaecologists in their OPD. In the last financial

## Gynaecology Clinics

The team has special focus on supporting maternal health and welfare. One of the primary objectives of CBR<sup>2</sup>H<sup>2</sup> project is to strengthen



the MCH (maternal and child health) services. For the same, the medical team regularly organises gynaecology clinics at SC Aloosa. Basically, there are three patterns to cater the gynaecology cases: first, cases from all other five



year, the team had conducted 57 camps that benefitted 1456 beneficiaries.

health facilities are also referred to the gynaecology clinics at Aloosa; second, identified cases from ANC screening at general OPDs are specially called for gynaecology clinics; third, the team has oriented ASHA workers and take their support in bringing identified cases to the gynaecology clinics. To strengthen the system and motivate the patient visits, transportation cost is also taken care by the medical team. District health department has also provided its ambulance from NTPHC, Zurimanz and DFY take care of the fuel cost for it and uses for the critical services.

The medical team has also renovated and equipped gynaecology room at PHC Ashtingoo

Ghat for providing all the necessary facilities. The team has organised sixteen gynaecology clinics and benefitted 323 patients during the last finan-

cial year. The team has also displayed IEC material on breast-feeding in all seven health facilities and oriented all the ANMs in this health facilities.

## ARSH (Adolescent Reproductive Sexual Health) Talk for girls



The medical team launched ARSH program which is specially designed for young girls and

covers various topics like nutrition (with special focus on anaemia that is commonly found among girls in Kashmir), Personal hygiene, Menstrual cycle, menstrual hygiene, Sexual Health, Sexual abuse, good touch bad touch, early pregnancy etc.

During the last financial year, the program has catered 629 beneficiaries through 36 ARSH camps.

## Physiotherapy Clinics

The medical team regularly organised physiotherapy clinics for pregnant females with critical health issues.



Mainly, the patients were referred from the gynaecology clinics. This service focused on supporting child growth issues related to posture problems or any other critical health problems.

This service also ensured to support safe delivery. During the last financial year, 8 physiotherapy clinics were organized which benefitted 80 women.

## VHND Program

VHND program is a government program where DFY had taken the permission to participate. In this program, DFY's ANM and



health coordinator gave health talk, conducts counselling for specific cases from nursing mothers, adolescent females etc and supplied nutrition supplements on need basis, . The program benefitted 399 beneficiaries in 37 camps.

## Health facility Support

During the last financial year, CBR2H2 project supported the recovery of flood affected health facilities near Wular lake area. The targeted seven health facilities are PHC Ashtingoo Ghat, NTPHC Zurimanz, SC Aloosa, SC Leharvalpora, SC Mangnipora, SC Kulhama and SC Kema. Apart from these seven, UD Kehnusa was also provided partial support. During the last financial year, these health facilities were supported through four mediums. The first was human resource support; second was material support like medicines and other stationary, etc. The third medium was infrastructure support through various renovation works and the fourth medium was ca-

capacity building of existing health workers. During the last financial year, the major support has been provided to Ashtingoo Ghat – PHC, Zurimanz NTPHC, Aloosa SC, Leharvalpora SC and Kulhama SC. The support will be extended to other health facilities in the coming financial year.



## Immunization Support



To strengthen the MCH services remained one of the major goals of CBR2H2 project. For the same, DFY's medical team worked towards strengthening the immunization program. The Bandipora district has been facing Vitamin A shortage and to overcome this issue, DFY col-

laborated with Vitamin Angels and supplied Vitamin A to all the seven health facilities under Ashtingoo Ghat medical zone. DFY's role was to create awareness and supply vitamin A whereas the immunization had been taken care by district health department. During the last financial year, the program had benefitted 588 beneficiaries in 32 camps.



## WATER, SANITATION & HYGIENE ACTIVITIES

### CONSTRUCTING 380 TOILET UNITS FOR FLOOD AFFECTED

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.

Following are the major activities conducted by WASH team during the last financial year:

1. Baseline survey of ten villages
2. Soil and water table testing
  - Water absorption test on Bricks
  - Sedimentation test on soil sample
  - Purity test on sand
3. Construction of 86 toilets from targeted 380 toilet units



### Handover of constructed units



The WASH team gave handover of constructed units to the beneficiaries at Sarpanch offices. With handover hygiene kits were also donated. These kits contained bucket, toilet brush, hand washing soap, water tank, toilet cleaner etc. Along with this, the team also announced a competition for the good maintenance of toilets.

# DISASTER RISK REDUCTION ACTIVITIES

## Village Response Unit formation and mentoring

One of the major goals of CBR2H2 project is to strengthen the community's ability to face any disaster. The formation of various disaster risk units from the community volunteers is one of the best solutions to make the community self-sustainable. DFY's DRR team screened 36 community volunteers and selected eight village coordinators to de-

velop the village response units. These eight volunteers are being trained as master trainers and are given various opportunities to be a part of DFY operations. This team will further be training the village volunteers, school students etc.

## Sanitation Drives in Bandipora

The Disaster Risk Reduction team in Kashmir launched sanitation drive program. The complete program remained community participatory and organized to be community driven. During the last financial year, the program covered 410 children and

health talk, practical demonstration and public rallies.



52 teachers. The program is a combination of three activities that are

The topics focused in the program are Water borne diseases and open defecation; Flues and droplet diseases; 7 steps of Hand wash; Brushing technics; Basic personal hygiene- bath, brushing, nails and cloth washing ; Standard Water storage technique- Closed water sources, boiled/ filtered water for drinking ; Standard cooking practices – Washing vessels, vegetables and meats wash in clean water.

## Cleanliness Drives in Bandipora

The program focused on raising awareness for issues related with unclean environmental hazards. It included three activities, which are health talk, Public demonstration and public rallies.

The health talk covers the topics like Water borne diseases and water contamination; Epidemics; Air pollution; Proper disposal of liquid waste; Proper

disposal of Solid waste; Save trees – plantation drive and Water conservation methods. During the last financial year, the program covered 423 children out of which 211 are male and 206 are female. It also covered 55 teachers out of which 34 are male and 21 are female.

## ASHA training

All the ASHA workers from selected ten villages are enrolled with DFY's DRR team. During the last financial year, 19 ASHAs were enrolled in the program and three ASHA trainings had been conducted: the first was basics of Community based disaster risk reduction; the second training was on WASH and the third training was about Child health and hygiene. Few of these ASHAs were also trained on 'Public health in emergency' which was delivered by DFY trainers in collaboration with National Health Mission.

## School Safety Program

For community based disaster risk reduction, school safety planning is one of the inseparable aspect. DFY's DRR team along with village volunteer had done hazard mapping for two schools in Aloosa and Kehnusa. In hazard mapping, village volunteer, DRR experts and school authorities jointly conducts a survey of school, identify critical areas, design floor safety plan and makes a list of their requirements for school safety.

For both the schools, the DRR team completed required training for students and teachers.

## Child health and hygiene awareness program with focus on De-worming

During DFY camps, high worm infestation was found among children. The team provides de-worming tablets to younger children to control worm infestation.

The team also delivers health and hygiene talk with these de-worming sessions. Overall, the program is a combination of de-worming, child health awareness, WASH, dietary habits, general dos and don'ts for post flood.

The training topics covered basic life support, fire safety, earthquake precautions, landslide & avalanche precautions, flood safety and precautions towards man made disasters.





# DOCTORS FOR YOU

Mumbai State Office

## Launch of two new health centers in Kalwa slums (Thane, Maharashtra) and Santacruz (East) Mumbai:

In 2015-16, DFY expanded its wings and covered two more communities under its health care services, in addition to two existing areas in Govandi and Mankhurd. The 3<sup>rd</sup> DFY center was started in September 2015 in Kalwa slums of Thane district of Maharashtra state. This center is located right in the heart of 1.5 lakh slum population, which have only one Government center functional with limited services. The center was started with the support of Gabriel Project Mumbai (a Mumbai based NGO founded by Mr Jacob Stockzman from Israel). The main focus of this center is to cater health care needs of women and children, which are largely unmet with the existing health system.

The services provided are treatment of health ail-

ments and preventive services i.e. Immunization, tuberculosis prevention and control, family planning services and malnutrition control through Community Based management of acute malnutrition.

The other center was started in December 2015 in Santacruz (East) with the support of Gaondevi temple trust. This center caters nearly 70,000 slum population. At this center, school health services are main focus along with the curative services.

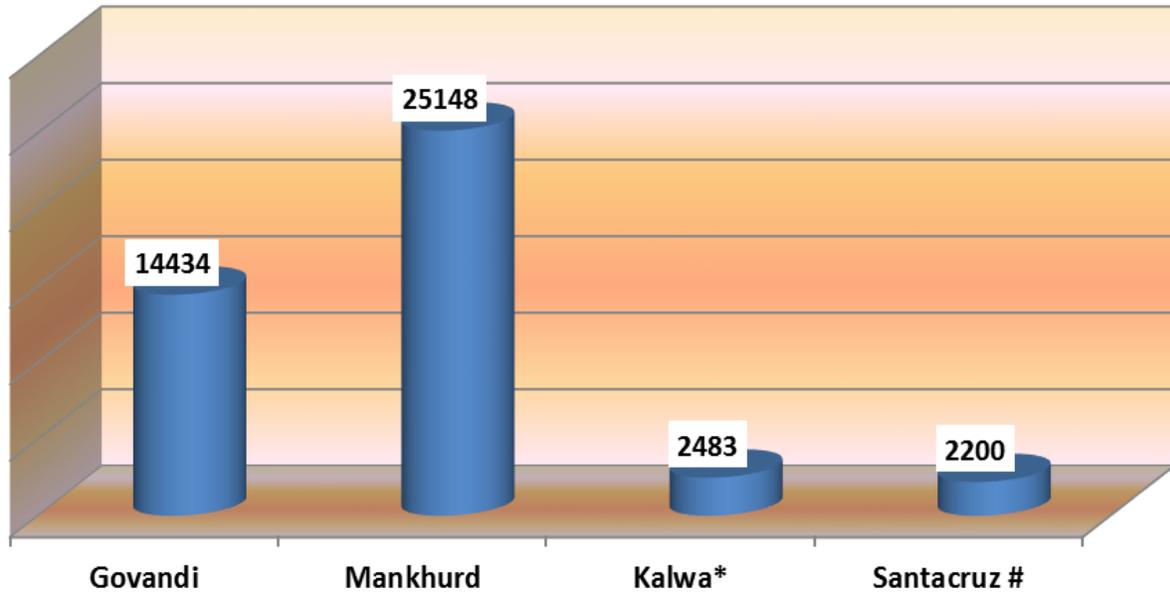
In this year, Mumbai health centers provided curative services to 44,265 patients, 2/3<sup>rd</sup> of which were women and children.

## Up gradation of Laboratory at Health Center in Mankhurd:

Prerna Charitable Trust, Mumbai provided support for buying semi automatic biochemistry analyser and reporting software. These new machinery has increased the skills and services of DFY health centers and this has enabled DFY to provide most of the tests at very affordable price. This upgradation done during the last year is definitely beneficial to all the patients who visits DFY center for any health issues.

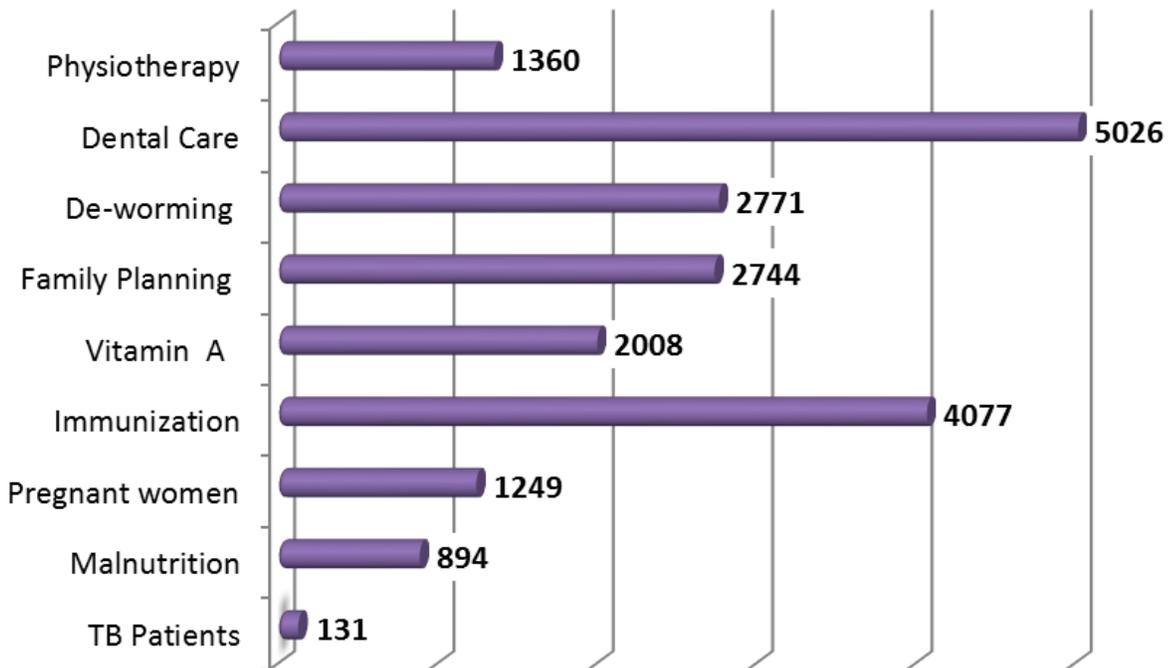


## Total number of OPD patients at 4 DFY health centres



\* Kalwa center started in September 2015 # Santacruz center started in December 2015

## Health promotive and disease control



## Start of Community Based Management of Acute Malnutrition (CMAM) at MRVC DFY Health center Mankhurd:

Malnutrition is a major public health problem in the area with 36% prevalence among children below 5 years of age. For such children, DFY launched CMAM program in October 2015. During this time period, 135 children were registered. These children were given nutritional supplements in form of RUTF and Hyderabad Mix.



## Tuberculosis control awareness campaign



## Nutrition Supplements to Drug Resistant Tuberculosis patients:

Malnutrition increases the risk of tuberculosis infection while Tuberculosis disease also leads to malnutrition. In Tuberculosis patients, adequate nutrition acts as medicine and improves the overall immunity and treatment outcome of disease. In association with Pharmaceutical division of Johnson & Johnson-Janssen, DFY provided protein rich dry rations to 30 MDR/XDR TB patients. This resulted in zero default rates among TB patients.



## Engaging with aanganwadi centers:

Anganwadi centers are focal point for delivering preventive & promoting maternal and child health program under ICDS program. DFY works with 40 anganwadi centers in Mankhurd. DFY team organizes health awareness sessions for mother, malnutrition and immunization session for children at anganwadi centers. DFY mobilized toys for children attending anganwadi centers.



## 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 (CDPO-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 Center by Goonj Organization and DFY.

## Certificate course for nursing assistant



In slum areas the health care services are provided by private clinics of general practitioners (GPs). These GPs hire girls and women from neighbourhood as assistant, at a very modest salary as these women and girls are untrained. At the same time, DFY also faced difficulty in hiring qualified staff for community outreach as well as health promotional activity. Sensing this gap as potential opportunity DFY started 6 months health assistant training course for adoles-

cent girls and women from the community. The course was tailor made for candidates with minimum qualification of 8<sup>th</sup> standard. The course material was also converted in Hindi.

In the first batch, 13 candidates completed the course. Out of 13, 10 candidates got immediate placement. The second batch of 15 candidates is currently undergoing training.

## Mehandi Classes

**Mehandi classes** for adolescent girls and women: In Mankhurd and Govandi area where DFY is providing health services, majority of population belongs to Muslim community. Applying Mehandi is practiced commonly and this is a source of income for many women, who work as free lancer or from their home. During this year, DFY trained 78 women and girls for 3 months in 4 batches.



## Community engagement activities

DFY team collaborated with Khula Aasman in organizing recreational activities for adolescent boys and girls from the community. The activities carried out were music and dance classes, outdoor games, sanitation drives, health and hygiene promotion etc. These activities prevent these children in engaging addiction or mingling with anti social elements.





# DOCTORS FOR YOU

Nepal Country Office

# NEPAL EARTHQUAKE RESPONSE

On 25<sup>th</sup> April 2015 (12 Baisakh, 2072), a massive earthquake measuring 7.8 in the Richter scale was experienced in Nepal. On 27 April 2015 DFY had dispatched its first medical team to provide humanitarian assistance. The team started with initial rapid assessment of four districts and based on the same, DFY designed its intervention in two forms.

The first was national level health system support in which DFY with DRI had procured medical equipment and medicines of over 4 tons and donated to Central health and population department. DFY also technically and logistically supported the redistribution of medicines to various district hospitals and tertiary care health centers located in Kathmandu namely Tribuvan University Teaching Hospital.

The second method was ground operations where DFY had deployed 14 Doctors (Gen. Physician, Surgeons, Paediatrics, Emergency Medicines, Community Medicine and Public Health Specialist), 7 Paramedic, 4 disaster manage-



ment specialist, 1 logistician and 7 support staffs to Nuwakot. DFY medical team established its first field clinic in Panchakanya VDC, Nuwakot. Later by end of May, DFY extended its support to District Hospital Nuwakot and Field hospital run by Qatar Red Crescent in Trishuli, Nuwakot. Later DFY extended its reach to other VDC in Nuwakot with outreach and mobile health camps. Overall DFY has provided health services to over 6200 disaster affected people . DFY also organized the Child health education and Mass De-worming program targeting schools and to promote safe drinking water, DFY had distributed Water fillers, water purification tablets and hygiene kits etc. to communities, school and health facilities.

## DFY's joint ventures

- **Direct Relief International:** DRI is DFY's International partner. DFY with assistance from Direct Relief International had purchased more than Indian Rupee 1.62 crore (USD 261,290) medicines and equipment which were distributed in various hospitals

affected by earthquake.

- **District Health Department Nuwakot:** In partnership with District Health department Nuwakot, DFY has started outreach program to reach remote parts of Nuwakot. In addition DFY provided specialist like Surgeons,

Emergency Medicine, Gynaecologist, Paediatrician etc. to District hospital Nuwakot.

- **Pacific Asia Travel Association- Nepal Chapter:** PATA is the DFY's local partner in Nepal. DFY in partnership with PATA has started its preventive and curative medical services work in Nuwakot. So far, DFY had set up a field clinic
- **Qatar Red Crescent:** Through joint partnership with QRC, over 3400 disaster affected people have received medical treatment in the field Hospital setup in Trishuli.

## HEALTH FACILITY SUPPORT

Based on the initial assessment of DFY and the information provided by Nepal government, DFY with assistance from Direct Relief International has purchased more than INR 1.62 crore (USD 261,290) medicines and equipments. The equipments were distributed in various hospitals affected by earthquake.



DFY delivering medical equipments to Namche Bazar Health Center staff and Pahpalu district hospital.

## HEALTH SERVICES TO COMMUNITY

### Field clinic in Panchakanya VDC



To continue the healthcare services which were disrupted by the disaster DFY estab-

lished a field clinic in partnership with PATA. The clinic was setup in Panchakanya VDC which was 2000 Meters above sea level. The mountainous regions of Nuwakot have become difficult to access

due to the damaged roads, electricity issues, monsoon rains and storms. Overcoming these challenges DFY team managed to set up camps near Panchakanya VDC and organised health camps and awareness among the affected people.

From 10th May 2015, organized a 13 days clinic at Panchkanya VDC. DFY had conducted health & hygiene orientation and also distributed 19 menstrual hygiene packs to adolescents. Total 1040 patients in hill top villages of Nuwakot have been treated by team DFY.

## Support to Trishuli District hospital

District Hospital Trishuli is one of the key health facilities in Nuwakot which caters to all the referral cases from the vicinity. DFY started supporting District hospital from early June onwards. DFY provided key resources like Surgeons, Paediatricians, Gynaecologist,



Emergency Medicines, General Physicians, Nurses, Paramedics and other technical specialist. The DFY team also supported the district administration in managing Maternity ward, Paediatric ward and Emergency Section. In addition DFY team has helped the district hospital in restoring the medical store and manage the incoming donations.

In addition, DFY team was also involved in conducting training sessions like Neo-natal resuscitate, Emergency Room management and general health sessions.

## Supporting Qatar Red Crescent's Field Hospital Trishuli, Nuwakot

DFY had established partnership with Qatar Red Crescent Society (QRCSS) society for resource mobilization and service delivery in Nepal. The ground collaboration lasted from 26 May to 28 June 2015. The joint team had catered to 1226 patients in OPD and 110 Trauma cases.



## Outreach and Health camps Nuwakot



In collaboration with District Health Department, DFY conducted over 21 health camps in different VDCs in Nuwakot and catered to 960 Patients. The outreach program was a combination of health camps, health awareness session for community, ANC check-up and Paediatric camps. DFY covered 20 remote VDCs through this program.

## Child Health and hygiene promotion

During DFY Health camps, it was found that there is high worm infestation among children. Thus DFY started student screening program, and spe-



cialised camp with paediatric doctors. In addition doctors distributed De-worming tablets in health camps with focus on young children. The program was a combination of de-worming, child health awareness, WASH, dietary habits, general dos and don'ts for post flood. Along with this program, water filters were also distributed/ placed in the schools. In the program over 2100 children were screened and de-wormed.

## Water filters and Chlorine Tablet distribution

In the primary observation, DFY noted that the water was highly contaminated in multiple



places. Thus the early intervention of the organization was to distribute the Chlorine tablets and later mobilized 100 water filters which were distributed in Schools, Health facilities, and among disaster affected community. In few districts, consumption of contaminated water is a high risk issue not just during the disaster but in general time as well. On an average 20, 000 People were benefited from WASH promotion program.



## Community Health service update

- Total 6200 patients served
- 345 Trauma patients attended in District hospital Trishuli and 110 Trauma patients in Qatar Red Crescents Field hospital
- 4234 patients attended in OPD in Health Camps, Trishuli district hospital, Qatar Field Hospital and DFY's Field clinic in Panchakanya
- 110 Deliveries attended by DFY Doctors in Trishuli district hospital
- 15 surgeries conducted by DFY Surgeon in Trishuli District hospital. In which 5 were life saving



# DOCTORS FOR YOU

Tamil Nadu State Office

# TAMILNADU FLOOD RESPONSE 2015-16

In the months of November and December 2015, Tamilnadu had received heavy rains and due to

expertise to government activities in zone 4, Chennai.



the spells of rain over a month the ground was saturated and the lakes and dams filled culminating in floods in Chennai and other districts such as Cuddalore, Kanchipuram and Tiruvallur. DFY sent its first team on 7th December 2015 for flood response and relief and after initial rapid assessment, medical camps began in Chennai from the 11<sup>th</sup> December, in Tiruvallur from 21<sup>st</sup> December and in Cuddalore from 24th December 2015. DFY also offered support and its ex-

From December 11<sup>th</sup> to the 31<sup>st</sup> March, a total of 114 medical camps were conducted benefiting 16,349 people who attended these camps and were provided medical aid and medicines. The maximum number of cases reported were in relation to respiratory issues with 6,057 cases reported. 26 CHA & Deworming camps were con-

ducted for 1,434 children in schools who were given deworming tablets. 22 Health Promotion Talks were conducted in schools for 1,584 students with whom the importance of personal and surrounding hygiene was discussed. 34 ARSH camps were held for 1,150 adolescents during which personal hygiene and adolescent issues were discussed.

## Support to government activities, Zone 4, Chennai

DFY offered its support and expertise to the government to aid with the response activities in Zone 4, Chennai. Recognized for its specialization and prior experience in post-disaster health interventions, the monitoring officer for Zone 4 permitted DFY to work from the Insti-

tute for Communicable Diseases (ICD), the focal point of the response programmes in Zone 4. DFY's primary role was conduct surveillance and monitoring activities and implement strategies to bridge the gaps. Based on its observations, the DFY team made

some suggestions.

1. **Line listing:** While line listing was being done, the team suggested an analysis and mapping of the cases to recognize areas with high cases or clustering of ADD/AFI cases.
2. **Surveillance/Monitoring:** The DFY team observed that two MMUs, sent from different areas, were working in the same area at the same time, only 100 metres, one street away from each other. It suggested better coordination so resources could be used to the utmost and reach more people, especially the more vulnerable ones. The decision was therefore made that all the divisions in the zone would send the line listing to the zonal office. The zonal office would send teams to those places that reported high cases to verify source of the problem.
3. **Aanganwadi Baseline Survey:** During a meeting with the state commissioner, ICDS, it was discussed that as aanganwadi had been affected by the rains for a long time, it would be helpful to conduct a baseline survey in all aanganwadi which would be implemented in the other districts in a week.
4. **Meeting with Aanganwadi:** Upon meeting the CDPOs, it was recognized that the situation of aanganwadi was dire. Upon DFY's suggestion, the monitoring officer called for a meeting with all aanganwadi workers of Zone 4. In the first meeting, the problems

faced by the aanganwadi workers was discussed and made note of, the measures to be taken in the post-flood scenario and a demonstration by the Director, DPH as to how bleaching powder should be used. This was followed by another meeting with the AWWs, which was attended by ministers from the government, where chlorine kits were distributed.

5. **Health Coordination Committee:** DFY suggested a meeting of all sectors connected or related to the health sector to improve coordination among them and avoid duplication of work. With everyone on the same page, issues could be dealt with properly without different departments overlapping in the same area while other areas were being ignored. There was a meeting held to this effect with the Family Welfare Department, Public Health Department and representatives from government and private hospitals in zone 4 with the Mr. Ratnoo and DFY. DFY discussed disaster terminologies and followed by further discussion on surveillance reports, dengue protocols and need for mapping of hospitals that have facilities for dengue patients.

## Medical Camps

The aim of the medical camps was to provide medical aid to those communities whose access to their regular aid was cut or made difficult to access in the post-flood scenario. The medical camps provided free services of doctors and the prescribed medicines. 114 medical camps reached over 15,000 people (taking into account follow up camps).



## CHA & Deworming camps



CHA & Deworming camps are conducted for children. Its primary aim was to provide children deworming medication to address the risk of them being affected by the rains, either by drinking the water or other ways. The deworming is combined With a Child Health

Awareness talk to spread awareness of basic health and hygiene to the young children. This would help the children be more aware of their surroundings and be careful about the water they drank and to maintain cleanliness around themselves. Total 26 camps were conducted in which 1434 children were given deworming medication.



## Health Promotion Talk

Health Promotion Talks are camps focused on promoting health and hygiene. These are conducted in schools when deworming for the children was recently conducted. As deworming cannot be done



for second time among, it is the only health and hygiene program that can be conducted. Thus the team conducted Health Promotion Talks in which hand washing techniques are taught, the children are encouraged to be aware of their personal and environmental hygiene. They are also encouraged to engage in a discussion and demonstrate the techniques they have learned. Total 22 Health Promotion Talks were conducted for 1584 children.

## ARSH Camps

Adolescent Reproductive and Sexual Health (ARSH) camps are conducted for adolescent children. Most adolescent children find it difficult to discuss the physical and emotional changes they go through during puberty. As they are unable to discuss it openly with anyone, they may be under incorrect notions of the changes they are going through and need to be provided the right information and set their concerns at ease. To address these issues, DFY began its ARSH camps to talk to young children on matters related to puberty and health of adolescents. The children are also encouraged to engage in discussions with the team, providing them with an open forum to voice their concerns, either during or after the session.

While the talks are generally focused on girls, the team in Chennai/Tiruvallur went one step further to engage the boys as well, wherever possible, in a separate discussion from the girls. Those who wanted to have a personal talk did so after the sessions. 34 ARSH camps were held for 1150 adolescents.



## Library

Apart from the medical services provided by the DFY team directly on the ground to the people, DFY was also involved in other activities to help people affected by the floods. DFY helped Shashtra, a student



wing of IIT-Madras, to set up a library for young children in Pattabiram, Tiruvallur. The group had over 500 books they wanted to donate for children affected by the floods. With DFY's support, a venue was acquired to keep the books and function as a library for the children. Motivational books, moral science

books and children's fiction books made up the majority of the collection. The day the library was officially opened, students living in the surrounding areas were gathered to explain the importance of reading and studying. Since it was established, three to four children visit the library on the weekdays. On the weekends, around fifteen children come to the library and some spend up to three hours at a time. They are satisfied to sit in the comfort and safety of the place since many lost all their books. One 13 year old boy from Tiruninravur said "I like this place where I can sit and see the pictures in the book. Reading the different stories makes me very happy. I come here every Saturday and Sunday".

## Camp at Bala Vihar

A camp was held at Bala Vihar, a Community Based Rehabilitation Center for the mentally challenged in Tiruvallur. The camp was conducted for the residents of the home for whom a medical check-up was done.



## Sanitation support:



While medical camps were being conducted in Tiruvninravur block, Tiruvallur district, which was affected by the floods to a great extent, it was observed by the DFY team that there was lack of proper sanitation facilities in some areas. An assessment was thereby conducted to this effect in Prakash Nagar, Ambikapuram and Nadukuthagai.

In Ambikapuram, the population are of the lower middle class who did not have proper access to sanitation facilities. The Palwadi School in the area also did not have toilets on its premises. Based on this, a need arose for toilets to be constructed in the area which could be used by the children and the people.

The toilet construction thereby began in January in Ambikapuram. There is one Indian style toilet that has been constructed. The sump is 4 feet deep and 2 feet wide. The plan was to have toilets maintained by one of the women employed by Goonj as part of their livelihood programme and monitored by the local coordinator. Upon the success of this programme, this programme can be expanded to other places that are in similar situations needing access to proper toilet facilities. The toilet in Ambikapuram caters to over 22 families living there.





# DOCTORS FOR YOU

USA CHAPTER

Doctors For You-USA was established with a mission to improve the quality of lives of underprivileged children across the world through building partnerships with other non-profits and developing programs focused on three broad areas: Medical Relief; Health Education; and Disaster Recovery. The DFY-USA chapter is currently running two projects: Project TRISHA and Project UDAAN.

### **PROJECT TRISHA**

The Project was launched in late 2014 to help underprivileged children by providing financial support to treat critical cardiac disorders and provide guidance and assistance to the families. The scope of the project includes critical but non-emergency cases, which require a surgical procedure resulting in significant improvement in the quality of life.

A heart defect (abnormality) that is present at birth is known as a Congenital Heart Defect (CHD). Nearly all of these are life threatening. Any child can be born with a congenital heart defect. Medical operation is often the only option for these children to have another chance to live. There are thousands of children with CHD waiting for their life-saving operations.

The project has successfully saved the lives of more than 50 children till now.

### **PROJECT UDAAN**

The Project has been launched as pilot model with three patients with Type 1 diabetes. In India care for children with type 1 diabetes is largely sub-optimal due to:

- No Health insurance. Families bear all expenses for purchasing daily use supplies like insulin syringes or pens, blood glucose testing kits etc.
- For families in lower middle class, monthly diabetes care costs may amount to almost 1/3rd to 1/5th of the household income
- In centers lucky to have an endocrinologist caring for these children, the physicians are running a one-man-show with no support of nursing staff, dietician or social worker.

PROJECT UDAAN provides freedom from financial burdens and ensures uncompromised diabetes care by availability of diabetes supplies, diabetes management with multiple daily injections and patient and family education on diet and diabetes management

# CHILDREN SUPPORTED UNDER PROJECT TRISHA



# CHILDREN SUPPORTED UNDER PROJECT TRISHA



# CHILDREN UNDER PROJECT UDAAN (PILOT PROJECT)





# DOCTORS FOR YOU

OUR FIELD STORIES

## EDUCATING YOUNG GIRLS ON HEALTH & HYGIENE



Doctors For You, Tamilnadu conducted a health and hygiene promotion camp at Government Higher Secondary School in Tiruvallur District. The camp was about educating the students on how to wash hands properly, demonstration of hand wash techniques. General hygiene awareness, nutritional based awareness etc. Most importantly, the team discussed on how one should take care and avoid falling sick in the post-flood scenario and the necessity to use clean water, importance of washing vegetables properly and keeping the surroundings clean. What seemed to be a routine day and routine camp for DFY had a bigger impact on the audience than expected. For a group of 13 year old girls, it was the first experience of being educated in detail about the proper techniques of hand wash. The young girls were surprised to learn that it was important to take special care to wash between the fingers and under the nails as well, and importance of using soaps to get rid of germs. The girls mentioned that before this the only hand wash practice they followed was to dip their hands in the water but now they have understood that not washing hands properly can lead to health issues.

The girls showed an excitement and eagerness to share the learnings with not just their families but with their neighbours as well. They were happy to have learned all the health and hygiene related practices and most importantly, the hand wash techniques. What may seem to be something as small and inconsequential to most, was the an important learning for these girls at the camp on the day.

## BRINGING THE BEST HEALTH PRACTICES IN RURAL BIHAR



DFY-Bihar, Cardiotocography (CTG) machine is an established tool for monitoring wellbeing of an unborn baby. It is as essential as the stethoscope for an obstetrician. But due to cost, lack of awareness and lack of technical skill to interpret the graphs, it is rarely used in Bihar outside Patna city. One CTG test in Patna costs Rs 800!!

The NMBT Center, Patna has started CTG monitoring of patients in their final month of pregnancy and during labour process. Relatives and patients were thoroughly intrigued on hearing the heart sounds and seeing the graph on the monitor of their unborn child! It has given something tangible to be experienced by a mother apart from baby's kicks and has reinforced in their minds the need for ANC check-ups! It has been a great aid for the center in determining the fetal wellbeing and the need for prompt referral of high risk cases.



In Kalgonam village which falls under Chidambaram Block in Cuddalore district, a medical camp was conducted by the DFY TN team with the support of Wipro. In those few hours, over 200 people were treated for various health issues that they were facing. Among them was Chinnaponnu, who despite her name, was a lady of 64 years. Her energy and enthusiasm was striking. She was at the camp because her back had been troubling her for some time. She explained to the doctor that her back ache was stretching from the middle of her back to the lower back. The doctor advised her to take rest for a few days. But she vehemently said that was not possible; she proudly claimed that despite her age, she had never missed a day of work however sick she was. At this, another person who had come to the camp asked

what about during the rains, at which she frowned and said she could not do anything about that and even then she had missed only four days. She was going back to work once she took the medicines. The doctor suggested some medicines and advised her not to lift heavy items and bend over too much if she was not willing to rest. She took the medicines and said that the camp was absolutely useful because she did not have to miss work at all.

## PROVIDING HEALTHCARE SERVICES IN TAMILNADU



For Kuppuppu, aged 72, living in Annavalli village in Cuddalore OT Block, Cuddalore district, having a medical camp so close to home was something she had never expected. At her age, she walked most of the way to the clinic. On her lucky days, she was able to travel partly by bus. On still luckier days, she could meet the doctor without waiting for too long and get her medicines quickly and return home. So, having a medical camp with doctors and medicines provided for free at her doorstep was a pleasant surprise for her.

It was such an easy process for her to go up to the medical camp, meet the doctors sitting there, explain her problem and not only be told what medicine to be used but also receive that medicine from there... all for free. She was extremely happy to have been able to step out of her house and walk a couple of streets rather

than the long journey for the same result. Service from the doctors was something she really liked. She said that the doctor who treated her listened patiently to what she said and asked questions on frequency and intensity of the problem. The doctor did not rush the process but was attentive throughout. For Kuppuppu, she was saved one long trip at least this one time.



In a village of the Cuddalore OT Block in Cuddalore District, a medical camp was held by DFY with the support of CIPLA foundation. Thamayathi, an old lady of 82 years who lived a few streets away presented with back pain and general bad health. She told the doctor that she knew that as she was getting old, she was not feeling too well but apart from feeling sick and tired occasionally, she was suffering from constant back pain. After the check-up, she came smiling to collect her medicines saying that she was extremely glad that she had visited the camp as the doctors were very helpful and she also got free medicines. On asking how they were helpful, she said the doctor had actually listened to her problem, asking her questions on her pain rather than randomly prescribing her medicines. She

thanked the team saying “My problem is old age and back pain. Thank you to the doctors and the whole team for doing these camps for the people for free. I hope more people in the younger generation do this”.

## HEALTHCARE SERVICES IN KASHMIR



### STORY 1

DFY, Kashmir, organises regular gynaecology clinic for women in Bandipora district. During one such camp, a patient named Jabeena came with six months of pregnancy and informed doctor that during her previous two pregnancies, she had miscarriages in her second month of pregnancy. Fearing the same, she presented to DFY gynaecologist. The Doctor assured her to not worry and suggested some investigations and kept her under close vigilance throughout. The patient has successfully completed her 8 months of pregnancy and seems very happy and positive about welcoming the new born.



### STORY 2

DFY, Kashmir team organises regular OPD clinics in its affiliated sub centers in Bandipora district. During one such general health OPD, an adolescent girl came to DFY OPD at SC ALOOSA and complained of ganglion in her right hand. She mentioned that she had taken treatment before as well but it was not getting cured. DFY surgeon performed sclero therapy to cure her ganglion ('elevated thing' in her words) . The girl was very happy that her elevated thing did not exist anymore.

## CONSTRUCTING TOILETS & DEVELOPING BEST HYGIENE PRACTICES



### STORY 1

Mohammad Maqbool Dar is a poor fisherman supporting seven family members with his income. The family has two handicapped members and Mohammad is only earning member among all seven members. He makes approximately 20,000 per annum and this annual income is also dependent on the climatic conditions. The whole family lives in a mud house of two rooms and have no electricity as that is non-affordable for them. Mohammad Maqbool Dar has been chosen as project beneficiary due to this economic condition and handicapped members in

the family. The whole family has expressed its gratitude towards the project.

### STORY 2

Abdul Razzaq Panchoo is a poor fishermen from Kulhama village in Bandipora. He is the only earning member of his family and is suffering from chest disease. Abdul lost his parents at the age of sixteen and from such early age, he took over the responsibilities of his family. His only earning source is fishing as he does not know any other art or has any agriculture land. For a man like Abdul who struggles to earn daily bread and butter for family, constructing a toilet was a last priority even though he knew the importance of it. He is grateful to CII and DFY team for supporting him & his family in adopting best health & hygiene practices.



# DOCTORS FOR YOU

OUR PARTNERS



Confederation of Indian Industry





# DOCTORS FOR YOU

THERE TO CARE

## BRANCH OFFICE LOCATIONS:

### DELHI

Doctors for You

135 Vardhman Grand Plaza Manglam Place Rohini  
sector 3 Delhi 110085

### ASSAM

Doctors for You

H/No 10, Jogesh Das Path,

Near Little Flower School

Hatigaon, Guwahati - 781038

Assam

### PATNA

Doctors for You

Ground Floor, Sagitanjali,

New Kunj Colony,

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[www.doctorsforyou.org](http://www.doctorsforyou.org)

DFY INTERNATIONAL CHAPTER: DFY USA



[www.dfyusa.org](http://www.dfyusa.org)

**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 estab-

## DISCLAIMER:

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