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Doctors For You

Doctors For You (DFY) is a pan India humanitarian organization with international presence and is working in various disaster hit zones since last 11 years. DFY focuses on providing medical care to the vulnerable communities during crisis and non-crisis situation, emergency medical aid to people affected by natural disaster, conflicts and epidemics. We are also committed to reducing disaster risk to human society by delivering trainings and capacity development in emergency preparedness and response. The work of DFY is guided by 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.

Doctors For You was founded in India in 2007, by doctors, medical students and like-minded people with a vision of “Health for all.” Currently, DFY is working on various projects in four states of India involving health professional, Disaster Management Practitioners, Social Workers and Administrative Staff. Our organization received several recognitions from various international communities for our contribution in the field of medical humanitarian response. We received the SAARC Award for 'outstanding contribution to humanitarian works in the aftermath of the disasters' for our Bihar Flood Response work in 2008. And more recently, we also received the prestigious British Medical Journal Group Award in 2011 for the 'Best Medical team in crisis zone'.

Doctors For You was Established in 2007 by doctors, medical students and like-minded people with a vision of “Health for all” and 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) for its 'Outstanding contribution to humanitarian works in the aftermath of the disasters’, and The British Medical Journal Group Award (2011) for the 'Best Medical team in crisis zone'. 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.

Vision and 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.
‘Poshan’ Project

Janssen Pharma
January-2017 to April-2018

Project Poshan aim was to supply daily supplementary requirement of drug resistant tuberculosis patient. In the project, patients with drug resistant tuberculosis were given monthly nutritional supplements in the form of dry ration. The target Number of patients are being supplemented half of energy requirement and 2/3rd of protein requirement through monthly ration kit. Given below are items which were provided in the 14 districts of Madhya Pradesh and 4 districts of Bihar for free, every month for the period of six months or until Intensive Phase (i.e. 9 months), whichever is applicable.

<table>
<thead>
<tr>
<th>S/No.</th>
<th>Items</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Wheat flour</td>
<td>7</td>
</tr>
<tr>
<td>2</td>
<td>Rice</td>
<td>3</td>
</tr>
<tr>
<td>3</td>
<td>Whole Moong</td>
<td>2</td>
</tr>
<tr>
<td>4</td>
<td>Masoor Dal</td>
<td>1</td>
</tr>
<tr>
<td>5</td>
<td>Whole Chana Black</td>
<td>1</td>
</tr>
<tr>
<td>6</td>
<td>Jaggery</td>
<td>1</td>
</tr>
<tr>
<td>7</td>
<td>Rajma</td>
<td>1</td>
</tr>
<tr>
<td>8</td>
<td>Groundnut</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td><strong>Total</strong></td>
<td><strong>17 Kgs</strong></td>
</tr>
</tbody>
</table>

| Per Day Kcal | 1984 |
| Per Day Protein | 74   |

Project ‘Poshan’ Objectives:

I. Conducted Nutritional assessment of newly registered MDR Tuberculosis patients at the time of registration and then at every month till six months of Intensive phase of treatment.

II. Conducted Monitoring and evaluation of nutritional supplement recipient TB patients every month and in between, as and when required.

III. Ensured compliance to treatment for the nutritional supplement recipient TB patients.

IV. To measure the impact of consumption of daily required nutrition by the MDR/ XDR patients.

For this baseline and end line was conducted before and after the project respectively.

Project Overview:

The Project ‘Poshan’ in Madhya Pradesh and Bihar was started in January, 2017 with the target number of 600 patients (i.e. 300 each from either states) to be benefitted during the project time. Mention below are the impact of project:

<table>
<thead>
<tr>
<th>Name of states</th>
<th>No. of districts</th>
<th>Project started in</th>
<th>Project completed in</th>
<th>Current status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Madhya Pradesh</td>
<td>14</td>
<td>January, 2017</td>
<td>April, 2018</td>
<td>Completed</td>
</tr>
<tr>
<td>Bihar</td>
<td>4</td>
<td>January, 2017</td>
<td>April, 2018</td>
<td>Completed</td>
</tr>
</tbody>
</table>
**Project Impact:**

<table>
<thead>
<tr>
<th>Name of States/Districts</th>
<th>Total No. of enrolment.</th>
<th>Enrolment period (in months)</th>
<th>No. of patient successfully completed six months in the project (i.e. impact)</th>
<th>Total No. of dropout</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Madhya Pradesh</td>
<td>301</td>
<td>12</td>
<td>244</td>
<td>57</td>
<td></td>
</tr>
<tr>
<td>Bihar</td>
<td>300</td>
<td>11</td>
<td>266</td>
<td>45</td>
<td></td>
</tr>
</tbody>
</table>

**Photo Gallery**

![Photo Gallery Images]
Nutritional Rehabilitation Program

Supported By: Shapoorji Pallonji
April-2017 to March-2018

Nutritional Rehabilitation and Treatment centre for urban Slum & Resettlement Colony (Community Based Management of Under Nutrition among children below 5 years) was designed to counter the problem of complete nutrition below the children of 5 years in M east ward area including slum area of Lallubhai Compound SRA, Sathe Nagar and Tata Nagar, Mankhurd, Mumbai. The project was based on Community based of malnutrition by socially and culturally acceptable Nutritional Therapy and Supportive Counselling to Mothers

Project Objective:

a) To enrol 650 malnourished children from various slum areas and resettlement colonies of M east ward area of Mankhurd.
b) Coordination and roll out of the project in collaboration with ‘Anganwadis’ will be undertaken.
c) To address the medical needs of these malnourished children i.e. health check-up, investigation and medicines.
d) To establish Nutritional and Rehabilitation centre and provide Nutritional Therapy in the form of RUTF and Hyderabad Mix to the Severely Acute Malnutrition (SAM) and Mild Acute malnutrition (MAM) children.
e) To promote IYCF (Infant and Young Child Feeding) Practices in mothers to prevent malnutrition through home-based care and nutritional Counselling.
f) To provide Vitamin A supplementation and De-worming.
g) To build the Capacity of Anganwadi Worker (AWs) and Anganwadi helper in community-based management of malnourished children.

Project Activities:

a) Establishment of Nutritional and Rehabilitation centre at the MRVC-DFY health centre.
b) Enrolment of 650 malnourished children for the project.
c) Procurement and distribution of RUTF and Hyderabad Mix for the children.
d) IYCF Nutritional Counselling and training of mothers.
e) Follow up visit of the child every week.
f) Follow up of the treated child.
g) Analysis of the results.

Technical process of providing Nutritional supplement:

The registered children are given RUTF & Hyderabad mix as supplementary food. Initially the SAM kids were given RUTF MAM kids were given Hyderabad mix. But later due to high rate of the discontinuation
of the supplementary food the kids were not responding quickly to the treatment so we gave the kids / mothers the option of choosing which ever food they liked. We had good response to this intervention. The RUTF is procured from outside, the Hyderabad Mix is made in our self-help group of ladies at one of our centres. The Hyderabad Mix consists of wheat flour, chana dal, Peanut & bhura (non-refined sugar). RUTF is given from quarter packets per meal to 2 packets a day as per acceptance. Hyderabad Mix is given up to 2.5 kgs per week to the target registered children of Severely Acute Malnutrition (SAM) or Mild Acute malnutrition (MAM)

<table>
<thead>
<tr>
<th>Supplementary Food</th>
<th>Quantity</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hyderabad Mix</td>
<td>236</td>
<td>36.30</td>
</tr>
<tr>
<td>RUTF</td>
<td>279</td>
<td>42.92</td>
</tr>
<tr>
<td>Mixed</td>
<td>139</td>
<td>21.38</td>
</tr>
</tbody>
</table>

Project Outcome:

<table>
<thead>
<tr>
<th>Number of affected children</th>
<th>Number of registered cases</th>
<th>Number of Default cases</th>
<th>Target number of beneficiaries</th>
<th>Severely Acute Malnutrition (SAM)</th>
<th>Mild Acute malnutrition (MAM)</th>
<th>Revived to Normal</th>
</tr>
</thead>
<tbody>
<tr>
<td>1201</td>
<td>705</td>
<td>69</td>
<td>650</td>
<td>352</td>
<td>298</td>
<td>604</td>
</tr>
</tbody>
</table>

Photo Gallery
Garima is a skill development-based project for youths who are either 10th passed or 12th passed. The project was launched in 2016 in support with Diversey across the 7 states of India. Namely; Delhi, Maharashtra, Bihar, Haryana, Uttar Pradesh, Madhya Pradesh, Rajasthan and Tamil Nadu. There are 25 active centres that is intensively training the candidates in two basic trade – Hygiene Technician and Safe Food Handler. The programs provide a unique opportunity to under privileged youth to avail a fully sponsored training where their training to study materials are provided for free. The program also supports with placement. Diversey School of Hygiene is linked with international top facility Management Company like Sodexo, ISS, UDS etc. To this date the project has trained over 7781 youth and provided employment to 3081 of them in malls, Airport, hotel, hospital.

Objectives:

a) The Program supports the overall development of the candidates. It skills the individual in basics of Professional Housekeeping and food handler through various practical Techniques.

b) It creates the pool of employment for the under privileged and marginal class of our society.

c) The program is a bridge between placement companies and suitable candidates.

Activities:

a) Screening of unemployed Candidates through local team
b) Training of the candidates for specific trade in the DFY centre with the standard training methodology adopted from Diversey school of Hygiene

c) Placing the trained candidates with partner agencies like Hospitals, IT Companies, Bank, Malls and Airports.

Project Outcome during the FY 2017-18:

<table>
<thead>
<tr>
<th>Total Number of Batches</th>
<th>Total Number of candidates trained</th>
<th>Total Number of Candidates placed</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>7071</td>
<td></td>
</tr>
</tbody>
</table>
Soap For Hope
Supported By: Diversey
Since July, 2016

Soap recycling program Soap For Hope is an international initiative by Diversey. In India, Diversey has partnered with Doctors For You (DFY) for implementation of the project. The program helps recycling the used soaps from the multiple hotels. The program is a multi-sector benefiting program as the program provides livelihood opportunity, sanitation & hygiene upliftment and health promotion. The project provides livelihood to the employees of this project, supports community by distributing recycled soap and support hotel chains by collecting their waste soaps. Thus, the overall impact of the program can also be measured through three categories that are livelihood support, community support and waste management. Till date DFY, has processed over 10,000 KG of soaps for last two years and last Jan – Dec 2018 DFY has Distributed 68,868 units of soap to Urban and Rural areas.

Objectives:

a) The primary objective is to improve the hygiene quality of under privileged community both rural and urban.
b) Provides livelihood to the employees of this project.
c) Supports community by distributing recycled soap.
d) Support hotel chains by collecting their waste soaps

Process:

a) Collection Phase:

Soaps are collected from Hotel chains from multiple locations. In the process, the hotels play a key role, where they employ a dedicated member to recover the used soaps from the rooms and send it to DFY through the logistic team.

b) Processing phase:

The soaps are brought to a production site for processing. For the processing, slum residents are employed so the program acts for livelihood generation as well.

For processing, the soaps are collected from site and brought to the processing site. At the processing unit, their outer layer of the soap is removed and then the soaps are dipped in a disinfectant solution. After this, the soaps are shredded to small pieces and shaped in a mould and then cold pressed. These new soaps are packed in a butter paper and then used in various hygiene promotion programs.

c) Distribution:
The processed soaps are distributed at multiple levels and it is not just linked with distribution but promoting hygiene promotion. These soaps are distributed during multiple WASH programs where the slum kids are taught healthy practices of hand wash, oral and body hygiene practices and basic public health awareness mechanisms. The soaps are also used in the promotion of immunization program where the soaps are gifted to encourage immunization among urban slum children.

**Project Outcome during the FY 2017-18:**

over 10,000 kg of soaps has been distributed during FY 2017-18. In other words, DFY has Distributed 68,868 units of soap in Urban and Rural areas.

**Student Led Total Sanitation**

**Supported By: Diversey**
Since July, 2016 to till date
**Total Costing for FY 2017-18: INR 15,76,504.00**

In support with Diversey, DFY started a project ‘Student Led Total Sanitation’ in 21 selected schools of Bihar to promote hygiene among students.

The programme christened Student Led Total Sanitation Programme was launched with a ceremony in district head-quarters in Saharsa, flooded by the launch of a mass clean-up of school campus in January 2016. The intervention had a number of components. Starting with conversation with School Principals and School Management committee to parents and creation of Child Clubs in the model of Bal Sansads/School Parliament a number of administrative catalysts were created before the implementation of project. Monthly visits to schools and events conducted quarterly led by volunteers and little leaders from Child Clubs who had been trained in communication and hygiene after selection by the implementation team.

**Objectives:**

a) To bring about behavioural change in hygiene practices among students.

b) Develop the student and school as the role model in sanitation for promoting personal, household and environmental sanitation.

c) Enhancement in innovativeness and leadership capacity of students.

d) Promotion of sustainable child friendly and gender friendly Water Supply and Sanitation (WATSAN) facilities in school.

e) (WATSAN) facilities in school.

**Process of change:**

The Hygiene component of WASH generally focused on awareness-raising and hygiene promotion and/or education using Information, Education and Communication (IEC) to improve people’s knowledge—mostly through health messages. With the realisation that improved knowledge and awareness alone often does not result in behaviour change, systematic efforts are made to apply successful practices from the field of social and behavioural change (SBC) in order to achieve better and more sustainable behaviour change results and outcomes and the desired improved health impacts from the investment in WASH programming.

**Step 1:** Formulation of a clear and unambiguous behaviour statement.

**Step 2:** Specification and description of the priority group.
Step 3: Formative research using BA survey (Barrier Analysis) to discover from a set of up to 12 common behavioural determinants, which are critical ones for selected behaviour and priority group, and the specific setting.

Step 4: Formulation of the Bridges to Activities.

Step 5: Formulation of Activities linked to the key determinant(s) through the Bridges.

Activities:

Based on following method, activity was planned and Children are motivated to mobilise the community through formation of Child Clubs in each of the selected schools to organise activities including but not limited to theatre performance, slogans, campaigns, rallies and songs.

Outcome:

a) Behaviour change among students and teachers towards health & Hygiene issues.
b) Improvement in School Attendance due to project, especially in schools in outskirts of District head Quarters.
c) Functional School Sanitation committee at every school who will continue to maintain the toilet after the project ends.
d) Greater awareness and willingness to maintain and keep toilets & school premises clean.
e) As a part of the program IEC Materials were developed and the teachers and members of Child Clubs were then trained and provided with lesson guides and various appropriate hygiene kits where distributed among students, school and hygiene technicians centred in each school. Interventions began in January, 2017 and is in operation till now.

Interventions:

- Basic Education Program
- Public School Intervention
- Distributing Hygiene Kits
- Green Earth Program: Swachh Program
- Library
- Mentoring Session
- Co-curricular Activity
- Yoga
- ‘Bal Sansad’
- Parents Meeting

Various programs aimed at behavioural change of students were formulated and implemented in all selected schools. Activities conducted included Health Talk, Hand Wash Activities, Counselling and finally Rallies in the community led by students themselves spreading the message of need for hygiene. Some of the important activities conducted and their impact is shared here after.

Milestone at a glance:

<table>
<thead>
<tr>
<th>Program component</th>
<th>Sub Component</th>
<th>Total Number of District</th>
<th>Number of School</th>
<th>Number of sessions</th>
<th>Number of Beneficiaries</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student Led Total Sanitation</td>
<td></td>
<td></td>
<td></td>
<td>NA</td>
<td>5500</td>
</tr>
<tr>
<td>Basic Education Program</td>
<td>Hygiene Kit</td>
<td>3</td>
<td>21</td>
<td>NA</td>
<td>461</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>228</td>
<td>5000</td>
</tr>
</tbody>
</table>
Naraindas Morbai Budhrani Trust Health Center, Masarhi

Supported By: Naraindas Morbai Budhrani Trust
Since 2015

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 provide accessible and affordable primary health care services prioritizing maternal and child health targeting rural population irrespective of caste, creed and gender considerations. The target 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 pro-motion 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 counselling, 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 1st November, 2015 but Official Inauguration was done on 20th December 2015.

To address the harshness, DFY in support with Naraindas Morbai Budhrani Trust initiated a first ever project of Health Center in 2015 in the area. As soon as the center becomes operational, patients from Masarhi and 9 other adjoining village have benefited so far from the services being offered at the center.

Mention below are the services being offered at the Health Center in Masarhi:

I. Family Planning
II. In patient Services
III. Immunization Services
IV. Antenatal Services
V. Delivery Services
VI. Referral Services
VII. Laboratory Services
VIII. Pharma Service

Achievement during 2017-18, at a glance:

<table>
<thead>
<tr>
<th>Variables</th>
<th>Status (in numbers)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Total OPD</td>
<td>10816</td>
</tr>
<tr>
<td></td>
<td>Total Foothall (OPD+Malnutrition)</td>
</tr>
<tr>
<td>---</td>
<td>----------------------------------</td>
</tr>
<tr>
<td>2</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Male</td>
</tr>
<tr>
<td>4</td>
<td>Female</td>
</tr>
<tr>
<td>5</td>
<td>Children &lt; 5 Years</td>
</tr>
<tr>
<td>6</td>
<td>Children 5-16 Years</td>
</tr>
<tr>
<td>7</td>
<td>Above 60 Years</td>
</tr>
<tr>
<td>8</td>
<td>Follow up</td>
</tr>
<tr>
<td>9</td>
<td>Malnutrition Follow up</td>
</tr>
<tr>
<td>10</td>
<td>Vitamin A Supplementation</td>
</tr>
<tr>
<td>11</td>
<td>Immunization</td>
</tr>
<tr>
<td>12</td>
<td>Malnutrition</td>
</tr>
<tr>
<td>13</td>
<td>Deworming</td>
</tr>
<tr>
<td>14</td>
<td>Filaria Prophylaxis</td>
</tr>
</tbody>
</table>

**IPD**

<table>
<thead>
<tr>
<th></th>
<th>No. of Admission</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>15</td>
<td></td>
<td>104</td>
</tr>
<tr>
<td>16</td>
<td>No. of Deliveries</td>
<td>5</td>
</tr>
<tr>
<td>17</td>
<td>Referral Services</td>
<td>50</td>
</tr>
</tbody>
</table>

**Health Promotive Services**

<table>
<thead>
<tr>
<th></th>
<th>Antenatal Check up</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>18</td>
<td></td>
<td>389</td>
</tr>
<tr>
<td>19</td>
<td>Postnatal Check up</td>
<td>35</td>
</tr>
<tr>
<td>20</td>
<td>Family Planning</td>
<td>12</td>
</tr>
</tbody>
</table>

**CMAM**

<table>
<thead>
<tr>
<th></th>
<th>Children Screened</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>21</td>
<td></td>
<td>772</td>
</tr>
<tr>
<td>22</td>
<td>Number of Children with SAM</td>
<td>83</td>
</tr>
<tr>
<td>23</td>
<td>Number of Children with MAM</td>
<td>121</td>
</tr>
</tbody>
</table>
Photo Gallery:
Bihar Flood Response, 2017

Doctors For You Initiative
August-2017 to September-2017

During the year 2017 in August, Bihar has witnessed the first wave of flood, heavy downpour since the first week of August and at its peak on 13th August 2017 engulfed almost the entire North and East of Bihar. According to Disaster management department Bihar, around 1.71 crores people have been hit by floods in 21 districts and 8394 villages affected in the state. Araria, West Chamaparan, Sitamarhi, Madhubani, Katihar, Kisanganj, East Chamaparan, Supual, Purnea and Madhepura districts were the worst affected. Doctors For You started the response in Bihar after getting permission from the district magistrate of West Chamaparan on 30th of August 2017 and completed on 19th September.

After preliminary field visits by Doctors For You team along with Sent Xavier team on 30th and 31st August 2017 at Gaunaha, Lauriya, Majhauliya and Narkatiyaganj the following areas in public health were identified that required urgent attention:

i. Maternal and Ante Natal Care
ii. Nutrition and
iii. Water and Sanitation Hygiene

After discussion with the District magistrate, Block development officer, Medical officers and local level partners the collaborations was decided and the response team was decided, which consist of:

1) Dr. Archana Thombare
2) Dr. Mridul Deka
3) Dr. Roopali Agrawal
4) Dr. Ravikant Singh
5) Mr. Ashrendra Kumar
6) Mr. Chandan Prasad
7) Mr. Kundan Kumar
8) Mr. Ranjeet Kumar
9) Mr. Sandeep Kumar

Area of Intervention:
Gaunaha, Narkatiyaganj, Majhauliya and Lauriya Blocks of West Champaran District.

Key Interventions:

a. Ante natal care check-up (ANC check-up)
b. Multi vitamin supplementation for lactating mothers
c. Vitamin A supplementation for 1 to 5 years children
d. Deworming: Albendazole for 2 to 5 years
e. Decontamination of hand pumps with bleaching solution
f. ORS distribution
g. Chlorine tablet distribution
h. Soap distribution for hand washing
i. Wash awareness camp
j. Active case finding of cases in diarrhoeal outbreak
k. Active collaboration with Government health machinery and Missionaries in the district
### Intervention in Figures:

<table>
<thead>
<tr>
<th>Activities</th>
<th>No. of beneficiaries/Services provided</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 ANC check-up for high risk pregnancies</td>
<td>264</td>
</tr>
<tr>
<td>2 Lactating Mothers</td>
<td>400+432*</td>
</tr>
<tr>
<td>3 Vitamin A supplementation</td>
<td>5125</td>
</tr>
<tr>
<td>4 Deworming with tab. Albendazole</td>
<td>5000</td>
</tr>
<tr>
<td>5 Hand pumps decontamination</td>
<td>425</td>
</tr>
<tr>
<td>6 Chlorine tablets distribution</td>
<td>12000</td>
</tr>
<tr>
<td>7 ORS distribution</td>
<td>5500 Sachets</td>
</tr>
<tr>
<td>8 Delivery Kits</td>
<td>50</td>
</tr>
<tr>
<td>9 Soap distribution</td>
<td>5500</td>
</tr>
<tr>
<td>10 No. of health camps conducted</td>
<td>23</td>
</tr>
</tbody>
</table>

Note: *432 Multivitamin distributed by local NGO Fakirana sister society and KR (Multivitamin given by Doctors for you)

### Picture Gallery:
Retinoblastoma

Supported by: Indian Cancer Society

January-2018 to March-2018

Doctors for You (DFY) have been working in the M-east ward of Mumbai for the past ten years for improvement in the socioeconomic and health indicators of the PAP’s resettlement colonies. The interventions are being carried out through health centres in the area. The Health centre in Lallubhai compound since 2013, the services are provided on daily basis by the team of doctors, paramedical staffs and outreach workers. The services are provided at the health centres on daily basis like general OPD, dental OPD, Tuberculosis treatment, Immunization, Growth monitoring OPD, family planning and maternal & child health services.

Activities:

a) Retinoblastoma education awareness sessions: Sessions were taken before the eye screening at the project site during all working days. The result was very surprised that none of the parents or teachers were heard about the cancer of the eye. It had a great impact and was eye opener to all the Participants.

b) Test: anterior segment evaluation, cover test, fixation test, pupil evaluation, anterior segment abnormality, Bruckner test with Direct Ophthalmoscope. Till date no case has been detected of Retinoblastoma.

Achievement:

<table>
<thead>
<tr>
<th>Month</th>
<th>Number of Visits</th>
<th>Number of beneficiaries Screened</th>
<th>Follow-up</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Male</td>
<td>Female</td>
<td></td>
</tr>
<tr>
<td>Jan-18</td>
<td>19</td>
<td>289</td>
<td>248</td>
</tr>
<tr>
<td>Feb-18</td>
<td>13</td>
<td>263</td>
<td>309</td>
</tr>
<tr>
<td>Total</td>
<td>29</td>
<td>552</td>
<td>557</td>
</tr>
</tbody>
</table>
Photograph Gallery:

Natwar Parekh Compound Health Center & Lallu Bhai Compound Colony Health Center.

Supported by: MMRD and MRVC
Since October-2010

DFY setup the Natwar Parekh Compound Health Centre under the sponsorship of MMRDA in October 2010. This Health project idea was conceived jointly by MMRDA; MRVC & Doctors for You (DFY) to provide health care facilities to the project affected people of resettlement townships. The project is a subset of a bigger Vision of MMRDA & MRVC to improve Mumbai’s Human Development Index (HDI) which includes increment in Life Expectancy, Educational Index and Standard of Living of the people affected by their projects. The Natwar Parekh Compound Subsequently, through an additional collaboration with the Mumbai Railway Vikas Corporation (MRVC) was able to sustain and expand its services to Lallubhai compound and Ambedkar Nagar Colonies in the year 2012-13.

Through this project DFY was able to increase its reach from around 4500 families (31,500 individuals) to around 20,000 PAP families of the three resettlement colonies of MMRDA & MRVC. The NP compound Health Centre has facilities like General/Paediatrics OPD, Immunisation OPD, Dental OPD, DOTS Centre, Injection/Dressing OPD, Chronic OPD, Gynaecology OPD, Ophthalmology OPD and even a De-addiction OPD. The Centre is also implementing various critical components of National Health Mission like immunization, polio eradication, maternal and child care, etc. The Centre is also effectively counselling target population on socially sensitive subjects such as family planning, nutrition, health and hygiene and sexually transmitted diseases.

Services being offered at our Health Centers are:

a) General OPD
b) Immunization OPD
c) Dental OPD
d) T.B OPD
e) DOTS Centre
f) ANC OPD
g) Family Planning OPD  

h) Ophthalmic OPD  

i) School health check up & de-worming  

j) Health Education Programmes  

k) Women Empowerment Programmes

**Health care service status:**

<table>
<thead>
<tr>
<th>Particulars</th>
<th>Natwar Parikh Compound Health Center</th>
<th>Lallu Bhai Compound Health Center</th>
</tr>
</thead>
<tbody>
<tr>
<td>General OPD</td>
<td>14955</td>
<td>25659</td>
</tr>
<tr>
<td>Existing TB Patient</td>
<td>137</td>
<td>199</td>
</tr>
<tr>
<td>Malnutrition Case</td>
<td>248</td>
<td>1385</td>
</tr>
<tr>
<td>ANC Check up</td>
<td>500</td>
<td>436</td>
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<tr>
<td>Family Planning Services</td>
<td>1028</td>
<td>490</td>
</tr>
<tr>
<td>Immunization Services</td>
<td>1095</td>
<td>1956</td>
</tr>
<tr>
<td>De-Worming Services</td>
<td>1432</td>
<td>1830</td>
</tr>
</tbody>
</table>

**Photo Gallery:**

![Photo 1](image1.png)

![Photo 2](image2.png)

![Photo 3](image3.png)

![Photo 4](image4.png)
Health Assistant Skill Development Program

Supported by: MRVC
6 Months

Health Assistant Program was based on such girls having literacy status up to class 8th. Under this program, the girls were trained for the period of 6 months with a provision of monthly stipend of INR 2500 every month. During the project period, 2 batches were held and 24 participants were trained and placed in the local clinics in Mumbai.

Dental Assistant Skill Development Program

Supported by: Rotary
4 Months

Dental Assistant Program was based on such girls having literacy status up to class 12th. Under this program, the girls were trained for the period of 4 months with a provision of monthly stipend of INR 1500 every month. During the project period, one batch was held and 6 participants were trained and placed in the local clinics in Mumbai.
Our Supporters