



BLESS



BLESS is currently running a project that consists in providing medical assistance to the vulnerable communities of Tamil Nadu through the organization of Medical camps.

Brief analysis of the situation :

The Constitution of India recognizes it as a primary duty for every state to improve public health among their population, providing proper services. In line with this, the 11th Plan (2007-2012) asserted the need to ensure provisioning of primary health services to the poorest. However, many health problems remain in India as well as in Tamil Nadu, where Bless implements its projects.

According to the *Worldbank Databank* of 2013, the Infant Mortality Rate (IMR) in India is of 41‰ live births and the Under-five Mortality Rate (U5MR) is of 53‰. Life expectancy at birth stands at 66 years old against 83 in Italy and France.

In Tamil Nadu, 48.75% of the households are inhabited by scheduled casts and tribes, who, as socially and economically vulnerable people, are more concerned by these health problems.

These poor health outcomes can only be the result of poor performance of the primary healthcare service and the fact that the Government is working to improve the situation does not mean that vulnerable people have to wait to get access to medical assistance. Indeed, as it is not possible to ameliorate the health system in one day, we consider that it is our job, as an NGO that

cares for people's well being, to provide some medical assistance to the needy, minimizing the consequences and pending the system to get better.

Therefore, Bless wants to contribute to the improvement of the situation by organizing medical camps every month in Cuddalore District, Tamil Nadu.

Brief description of the project :

Each month, a medical camp will be organized in a different part of Cuddalore district, in order to cover all the area. More than 300 beneficiaries are expected for each camp.

Thanks to a partnership with the *Aarupedai Veedu Medical College & Hospital* (A.V.M.C.H.), a team of 25 doctors and nurses will achieve a complete medical check-up for each beneficiary, including 6 kinds of examinations: general, ENT (ears, nose, tongue), eyes, dental, skin, gynecologic.

Depending on the importance of the issue detected, the doctors will provide the beneficiaries with the necessary tablets or will take them the A.V.M.C.H. for treatment.

Further information :

If you are interested in contributing to the project, please read the following description, which contains all the complementary

Medical Support to the helpless

Summary

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1. Name of the project

Medical Support to the Helpless.

2. Problem statement

a. General background

The Constitution of India recognizes it as a primary duty for every state to improve public health among their population, providing proper services. In line with this, the 11th Plan (2007-2012)¹ asserted the need to ensure provisioning of primary health services to the poorest. However, many health problems remain in India as well as in Tamil Nadu, where Bless implements its projects.

As per the third National Family Health Survey 2005-2006 (NFHS 3), the infant mortality rate (IMR) and under-5 mortality rate (U5MR) in India were respectively 57 and 74 per thousand live births in these years. These figures had to be drastically reduced so that India could achieve the Millennium Development Goals, for which the deadline is 2015. Indeed, India set the objective to reach a 28‰ live births IMR and a 41‰ live births U5MR. However, as we can observe on the *Worldbank Databank*², IMR was still high (41‰ live births) last year, as well as the U5MR (53‰). The fulfilment of the goals will probably not be possible for 2015 and will doubtlessly take another several years.

What's more, as per the *Worldbank* survey, India is part of the 25 lower ranked countries regarding immunization against DPT (diphtheria, pertussis and tetanus)³ and counts 176 cases of tuberculosis per 100.000 people, which is 25 times more than in Italy or France⁴. Finally, life expectancy at birth stands at 66 years old against 83 in Italy and France.

b. Target area background

The project is to be implemented in the state of Tamil Nadu, India. In Tamil Nadu, 48.75% of the households are inhabited by scheduled casts and tribes⁵, who, as socially and economically vulnerable people, are more concerned by these health problems. Indeed, IMR within the scheduled casts is of 66.4‰ while it is of 57‰ for the whole population.

Thanks to these camps, people who rarely or, for a great part of them, never consulted doctors will be able to know if they carry some disease and if so, they will get medical assistance.

¹ http://planningcommission.nic.in/aboutus/committee/wrkgrp11/wg11_rphfw1.pdf

² <http://data.worldbank.org/indicator/SP.DYN.IMRT.IN>

³ http://data.worldbank.org/indicator/SH.IMM.IDPT/countries?order=wbapi_data_value_2013+wbapi_data_value+wbapi_data_value-last&sort=asc

⁴ http://data.worldbank.org/indicator/SH.TBS.INCD/countries?order=wbapi_data_value_2012+wbapi_data_value+wbapi_data_value-last&sort=desc

⁵ Shreekanth IYENGAR, Ravindra H. DHOLAKIA, *Access of the rural poor to primary healthcare in India*, Indian Institute of Management, Ahmedabad, May 2011.

c. Target community background

This project mostly targets the Dalits and Tribal communities, which constitute a scheduled population that cannot access to medical assistance because of a lack of financial means, awareness an primary healthcare services.

3. Aim of the project

These weak health outcomes can only be the result of a poor performance of the primary healthcare service and the fact that the Government is working to improve the situation does not mean that vulnerable people have to wait to get access to medical assistance. Indeed, as it is not possible to ameliorate the health system in one day, we consider that it is our job, as an NGO that cares for people's well being, to provide some medical assistance to the needy, minimizing the consequences and pending the system to get better.

Therefore, Bless wants to contribute to the improvement of the situation by organizing medical camps every month in Cuddalore District, Tamil Nadu.

The main role of the intervention is prevention. Indeed, we cannot be sure that the Medical Camps will take place at the exact moment when the beneficiaries are sick and can still be healed efficiently. Hence the medical camps have the preventive aim to avoid people from contracting diseases and to give them awareness on what they should do to reduce their chances of warding off illnesses. Prevention is the only proper way to decrease infant mortality rate and to grow immunizations against DPT, measles (rubeola) and life expectancy at birth. Moreover, many children will attend to the camps, and particular attention will be given to them so they can gain awareness on healthcare, which is very important because they will constitute the next generation. Thus, they have the potential to participate to the improvement of health in the future and the sustainability of healthy habits.

Then, thanks to this medical assistance that will raise health awareness among the poorest, the health indicators in Tamil Nadu might get significantly improved on the short and long term.

4. Past experiences and lessons learnt

Bless has already achieved one medical camp, which was a pilot for the next ones.

During the pilot medical camp, which took place on the 1st of June 2014, we closely observed the beneficiaries in order to gauge their satisfaction and to notice any possible mistake that could be avoid for the following medical camps. People seemed eager to get checked up and helped. In our opinion, that testifies of a real need for medical help as well as of an awareness of this need. Indeed, the beneficiaries know that they should consult for a medical check up but they do not because of a lack of money. Therefore, the opportunity given by Bless was well received and helpful.

The Aarupadai Veedu Medical College & Hospital's doctors, who will voluntarily participate to the Bless' camps, already took part in our previous camp and in other Medical camps, so they have experience for such an event. They consider Medical

camps a very good and important event to improve health in India. Indeed, during their previous camps, they were able to detect and heal many diseases. The most common cases, according to them, are the following:

General	ENT	Eyes	Dental	Skin	Gynaecology
Breast cancer, diabetes, hypertension, blood pressure, fever, muscular pain, arthritis, inter-vertebral disc prolapse, malnutrition, urinal infections	Deafness, hard of hearing	Corneal ulcer, cataract, foreign body	Caries	Exema, infections	<u>White discharge</u> , menstrual disorder

Thanks to their experience, the doctors are prepared to face all of these medical issues and any one detected: either by giving tablets and other medicines or by taking them to the hospital. For example, they will take all the patients with a cataract problem to the hospital, give them surgery and send them back to their village.

What's more, during the camp, they will create awareness among beneficiaries about preventive aspects against certain diseases and teach them how they can detect them (breast cancer, for example).

Finally, their experience was useful to us for the organization of the camps. They observed that many people came knowing that they had a problem and only consulted the desk which could help for this only problem. That is why Bless will hire some employees to guide the beneficiaries and to make sure they get checked up at each desk.

5. Project description

a. Description

The Medical camps that Bless organizes are made possible thanks to a partnership with the Aarupadai Veedu Medical College & Hospital (A.V.M.C.H.). Indeed, around 25 doctors, nurses and assistants will voluntarily come to provide their services and help the people in need of medical assistance. Thanks to them, twelve camps will be organized, one the basis of one per month. They will be dispatched all over Cuddalore District so that a maximum people coming from different villages will be able to benefit from them. As mentioned above, the aim is to provide medical assistance to those who cannot afford it in order to prevent, detect or heal the potential diseases.

The organization of the camps will be as described below.

Pre-camp preparations :

The first step for Bless to proceed with the organization of the medical camp will be to inform the A.V.M.C.H. of a precise date when the camp will take place. Once the volunteer doctors confirm their availability to attend to the Medical camp, they will get the permission from the Government for their participation. Indeed, they need the Government's approval because they have to guarantee that they take full responsibility of the camps.

Once this first step is completed, Bless will have to go through a communication phase. Indeed, as people do not know about our project yet, Bless will have to inform the potential beneficiaries in order to ensure the efficiency of the medical camps. That is why we will, in different ways, communicate the event to the inhabitants of the targeted villages. The information will be relayed during the week before the camp thanks to the following means:

- The local channels will inform people about the event, giving them the place and date of the Medical camp.
- Bless will distribute handbills giving information about the event in the targeted villages.
- An auto-rickshaw will drive on the roads and in the villages with a loud-speaker on the day before the camp, in order to remind people of the event and to inform the last ones who still did not know about it.

The camps :

Approximately 320 beneficiaries are expected for each camp, which implies the necessity of consequent infrastructures. Therefore, all the Medical camps will take place in the concerned Panchayat common building, which is a building reserved for the community. In this building, six desks will be installed, counting one for each medical specialization :

- General examination
- ENT examination (ears, nose and tongue)
- Eyes examination
- Dental examination
- Skin examination
- Gynaecology

Thanks to the availability of these 6 specializations, the patients will get a full medical check-up. Each beneficiary will go from one stand to the next one to get checked up by the different doctors. A social assistance will be available to help people understanding how to proceed as well as to guarantee the smooth running of the camp. Also, these assistants will ensure that every patient goes to each desk. The event will go from morning (9:00am) to lunch (2:00pm). If a medical issue is detected, there will be two options:

- In case of a minor issue for which the healing only implies medicines, the doctors will give the necessary medicines and instructions to the patient. The medicines will be provided by the A.V.M.C.H. for free.
- In case of a major issue for which the healing temporarily implies a permanent care and some hospital equipment, the patient will be taken to the

Aarupadai Veedu Hospital and at its charge during the necessary time for treatment and recovery.

b. Key objectives

- Give medical assistance to vulnerable people from scheduled tribes.
- Achieve an awareness outreach on health.
- Foster prevention to avoid the appearance of diseases among people who cannot afford medical treatment for it.
- Provide the children with healthy habits to improve the next generation's health situation.

c. Estimated impacts

- Certified doctors will have checked up 3.840 vulnerable people who almost never had access to medical assistance.
- Medical treatment will have been given to the beneficiaries among whom a health issue have had been detected.
- Awareness on health will have been created among the 3.480 beneficiaries.
- Healthy habits will have been advised to the 3.840 beneficiaries.
- Children beneficiaries will have learnt healthy habits to maintain their health and the next generations' health.
- The health situation in Cuddalore District, Tamil Nadu, will have been significantly improved.

d. Costs

The cost for one medical camp is Rs. 14.350 (€ 187,56/\$ 232,05), including the campaign within the project, food for doctors and patients, the salaries for the hired staff and all the technical necessities for organizing and running the medical camps. Bless will not bear the costs related to the medicines or hospital treatment given to the sick beneficiaries, nor those for the accommodation, since they are respectively offered by the A.V.M.C.H. and the related Panchayat.

A detailed budget is available in the Annexes.

6. Project details

a. Exact location

To maximize the number of persons acceding from different villages to the **medical camps**, Bless determined to not concentrate them in a specific area, but instead spreading them on a larger territory of Cuddalore District: one camp will be located in Villupuram District also. The twelve selected locations for the project submitted to the Waldensian Church are the following ones:

Cuddalore District

Keerapalayam Block

- Valispet
- Palayamserndhangudi
- Soladharam
- Kumarakudi

Parangipettai Block

- Annankoil
- Parangipettai
- Manikollai
- Samiyaar Pettai

Cuddalore Block

- Cuddalore Old Town
- Pudukadai

Kurinjipadi Block

- Krishnankuppam

Villupuram District

Vanur Block

- Aruvapakkam

b. Number of beneficiaries

Since According to previous experiences and the information provided by the Aarupadai Veedu College, and considering five hours of opening, six medical specialties involved and two doctors generally present for each specialty, it is estimated that for each medical camp, the maximum number of persons who can be correctly examined is 300 up to 350 (conventionally we use the amount of 320).

So, people who will benefit from the project should be around 3.200, usually divided in these proportions:

- 20% men;
- 25% women;
- 55% children.

c. Members of the project

- Project coordinator : 1
- Camp assistants : 3
- Helpers : 3
- Report employee : 1
- Aarupadai Veedu College's doctors : 17

- Aarupadai Veedu College's nurses and assistants : 8
- Volunteers : irregularly
- Antigóna's project assistants : 3
- Total : ≥ 36

d. Supporters of the project & Partner organizations

- Bless, NGO – Reddichavaddi, Tamil Nadu, India.
- Aarupadai Veedu Medical College & Hospital – Keerumam Pakkam, Pondicherry, India.
- Antigóna, NGO – Bologna, Italy.

e. Project duration

12 months (1 camp per month).

7. Funds requested

As mentioned above, one Medical camp needs INR. 14.350 (€ 187,56/\$ 232,05) to be achieved. Therefore, the necessary amount to realize 12 Medical camps reaches INR.172.200 (€ 2.250,69/\$ 2.784,60).

For now, Bless and its partners have not find any funds for the project. Therefore, any donation of any amount, according to your affordability, will be welcome and useful to implement the project. That is why we ask to people as well as governmental organizations or NGO and private companies to help us. The value of the donations is your call and any kind of help would be appreciated and followed by great results, ameliorating, even slightly, hygiene and health in India. Therefore, anyone can help according to their affordability and give us the amount of their choice so we can achieve the project.

If the project interests you or if you care about it, you can let us know by donating or simply by sending a message of support to the e-mail address available in the Contact Details. Concerning donations, they can be sent thanks to the bank details mentioned in the Annex.

If you wish to get more details or precisions, we will be happy to give them to you. Reports regarding the evolutions of the project will be sent to every contributor.

Thank you very much for your time and consideration.

8. Related projects

This Tailoring for Livelihood project is part of a group of projects implemented by BLESS in order to improve livelihood, sanitation and health in Cuddalore district. Indeed, BLESS is running two other related projects :

- 300 Individual Household Toilets for the Dalits and Tribal Communities;
- Tailoring for Livelihood.

These projects are logically linked since when the three of them will be achieved, the beneficiaries will have been provided with a sustainable job, toilets and medical assistance. During each of the projects, BLESS makes sure that awareness is gained on the related issues. Therefore, at the end, the beneficiaries will have adopted healthy and hygienic habits and will have abandoned open defecation.

9. Contact details

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10. Annexes

Budget

S. No.	Item	Unit cost (INR.)	No. of units	Total Cost in Rs. (and €, € 1 = INR. 76,51)
A. Communication				
1.	Handbills	0,5	1000	500 (6,53)
2.	Local channels banners			750 (9,80)
3.	Auto-rickshaw with loud speakers	1000	1	1000 (13,07)
4.	Banner for the Panchayat building (explaining the event, mentioning Bless's activities)	750	1	750 (9,80)
Subtotal A:				3000 (39,21)
B. Accommodation				
5.	Building rental	0	0	0
6.	Furniture rental (50 chairs, 10 tables)			1000 (13,07)
Subtotal B:				1000 (13,07)
C. Food & water				
7.	Doctors' food (lunch, tea, biscuits, water bottles)*	150	25	3750 (49,01)
8.	Patients' biscuits and water	5	320	1600 (20,91)
Subtotal C:				5350 (69,92)
D. Staff salaries				
10.	Preparation + reception of beneficiaries (communication, contacts -7 days work)	200x7	3	4.200 (54,89)
11.	Place arrangement (arranging tables, cleaning) - 3 employees	100	3	300 (3,92)
12.	Written and media report employee	500	1	500 (6,53)
Subtotal D:				5000 (65,35)
Total				14.350 (187,56)
Total for 12 Medical Camps in INR.				172 200
Total for 12 Medical Camps in Foreign currencies:				
€ 1 = INR. 76,51				€ 2 250,69
\$ 1 = INR. 61,84				\$ 2784,60

* As doctors will work from 9am to 2pm for free, they asked that Bless provides a complete lunch.

Photo Gallery (Pilot medical camp)



Bank details

Name of the account	BLESS
FCRA Number	076010115
Account Number	0104000100086244
Type of Account	S/B – (Saving Bank Account)
Address of the bank	Punjab National Bank, 112, Bharathi Road, Cuddalore – 607 001 Tamil Nadu, India
SWIFT Code (Society for Worldwide Interbank Financial Telecommunication)	PUNBINBBCNG
IFSC/BIC (Indian Financial System Code/ Bank Identification Number)	PUNB0010400