

Primary Health Care Services & Alcohol Abuse Awareness Programme

Introduction:

CORD's Lead and Resource Centre at Sidhbari started its work in 1985 with its primary healthcare & hygiene services as Chinmaya Rural Primary Healthcare &



Dais (TBAs) undergoing training



Gurudev with nurses trained by the CORD

Training Centre. From 1985 to 1992, CORD Sidhbari has trained 120 Multi Purpose Health Workers (MPWF) called nurses for government of Himachal Pradesh under USAID project. 32 Traditional Birth Attendants (TBA) & several Village Health Guides (VHG) associated with the project were also trained for domiciliary delivery and safe motherhood & management of minor ailments in the remote areas. CORD also ran six sub-centres in those villages where no government health services were in existence. These were withdrawn as government services were initiated gradually in these areas. Currently CORD Sidhbari has one primary healthcare centre serving nearby villages under its primary health care & alcohol abuse awareness programme.

Other sites of CORD at Orissa and Tamilnadu are also providing healthcare services under its comprehensive integrated rural development programme.



Health awareness at Siruvani

CORD Siruvani in Tamilnadu is running 5 sub-centres under the supervision of Dr. Meera Krishna, co-ordinator of the centre.

CORD at Lathikatta, Orissa is doing tremendous work on school health awareness & de-worming health camps for school children & villagers under the supervision of

Swami Kevaananda. Br. Somesh Chaitanya at CORD Deuldhia, Orissa looks after minor ailments. Remoteness of health services in Deuldhia makes referral services of severely ill patients a frequent intervention service being provided by CORD's ambulance.

Objectives:

- To improve the health care delivery system through Primary Health Care.
- Active participation in various national health programmes.
- To change the attitude and practices of the people through health education & training of staff.

CORD is providing services through health care centre as well as through field activities on various issues of preventive, promotive, curative and rehabilitation aspects.

Following are the major issues which are addressed under this programme:

- Lack of knowledge, attitude and practices leading to health problems in the communities.
- Ignorance, poverty and illiteracy.
- Non Availability of health institutions near the villages.
- Non-availability of various health programme services at the door step of the people like sanitation, immunization, family welfare, nutrition, National Diarrhea Diseases Control, care of women in the reproductive age, communicable disease like malaria, T.B., skin disease etc.

Services at the Centre:

Conducting central OPD for following services:

- Immunization, family welfare and nutrition programmes.
- Training and upgrading community health workers and dissemination of health information to grass root workers of all programmes for further dissemination and discussion in the field.
- Providing medical assessment and treatment for the disabled.
- Conducting basic health awareness interactions with all groups visiting the Centre.
- Working with the district authorities on important health issues and policies, as a member of the District Health Committee, for HIV/AIDS, MTP Act, Female Foeticide (PNDT Act), etc.
- Providing through networking focused services and referrals for poor patients with medical problems.
- Holding special camps with volunteers and specialists.
- Providing health services during spiritual camps at the Ashram.



- Building on the capacities of people to respond to their health needs.

Services provided at the field:

- Immunization in remote areas.
- Providing basic childcare at balwadies in association with balsevikas.
- School health programmes.
- Managing common ailments in remote villages through village health guides (VHG).
- Providing maternal and child health services, and conducting domiciliary childbirths in villages, through traditional birth attendants (TBAs/Dais).
- Creating health awareness in association with Community Based Organizations (CBOs) like Mahila Mandals, Yuva Mandal, Balwadi and Panchayat workers.
- Promoting basic sanitation and hygiene practices in association with above CBO workers.



Health check-up camp at Lathikatta

Process adopted by the health programme of CORD:

- Other than the provision of primary health care services, developing referral services and certain specific programmes, in collaboration with the Director at the Centre, most of the health services are community based health services. These are supplemented with health awareness and interventions with active participation of all groups and workers.
- Specific health issues are first taught and discussed at the Centre. Health issues are scaled up with seasonal variations in their incidence.
- To work towards a people-centered approach, to find solutions and take action integration with all programmes is essential.
- The traditional birth attendants and village health guides form important linkages with the formal health system in villages to provide health services in inaccessible areas.
- Discussions on the feedbacks received from the field workers are conducted to increase people and workers' management of health problems. Attempts are made to find local solutions with people's participation, and interventions encouraged through people's contribution.

CORD Sidhbari is now identifying Village Volunteer Resource Persons (VVRPs) on various issues of health in 26-28 focused Panchayats through the identification and training VVRPs. Sanitation, hygiene & "HIV AIDS" are specific topics to be dealt by specific VVRPs.

Alcohol Abuse Awareness Programme

The Alcohol Abuse Awareness (AAA) Programme began in 1987, first in Mahila Mandals and later in Yuva Mandals. The AAA program aims to create awareness and educate individuals on the excessive use of alcohol. Treatment & management of alcoholics began in early 2007 with the Sinclair Method with the help of Dr. Roy Eskapa from UK.



Excessive drinking of alcohol is a big problem in our society. Alcohol has become a status symbol in India. While some take occasional drinks at social gatherings others are addicted to regular drinking. This addiction is a disease which affects individual health, families, and society at large. Alcoholism refers to the addiction of an individual to alcoholic drinks in spite of knowing its harmful effects. Alcohol addiction is a dangerous preoccupation leading to severe mental as well as physical problems.

Uncontrolled alcohol consumption over a long period of time may result in withdrawal tendencies and dependence, often difficult to escape.

Scientists have proven that like other diseases, excessive consumption of alcohol is also a disease which can be cured through medical treatment. CORD's Alcohol Abuse Awareness program is currently using the Sinclair Method, clinically proven to be affective by the World Health Organization, to treat a number of alcoholism cases.

The World Health Organization (WHO) has shown that one man can safely drink in moderation up to 24 units (Pegs) (62.5ml/Peg) of alcohol in a week but not more than 5 units in a single sitting. And a woman can drink up to 18 units per week but not more than 4 units in a single sitting.



Ways to control alcoholism:

1. Alcoholism can best be controlled if the family co-operates.
2. With family support & insistence, there are improved chances of curbing this habit.
3. One can use tablets which have shown to increase the chance of stopping alcohol use after three to four months of treatment (The Sinclair Method).
4. Then the alcoholics need not rely either will power, Alcoholics Anonymous, or prayers to stop alcohol abuse.

Special case of Sudhir Kumar of the Village Ghorab

Sudhir Kumar at the age of 35 years started drinking and went ahead to become a heavy drinker worrying all his family members about his future. He was motivated by the Community Development Worker of CORD, Mamta Devi, to undertake Sinclair method treatment at CORD. Sudhir Kumar initially took 20 doses and was able to curb his desire to drink. Now if he has cravings he takes a pill before drinking in order to stop himself. Sudhir Kumar has already taken treatment from the CORD successfully and has completely stopped drinking. His health and family are in good condition and he is happy about the change he made in his life.



Village Volunteer Resource Person (VVRP):



Putli Devi, a 60 yr old president of Mahila Mandal from Hatwas Bhuned, had her son and cousin as alcoholics in her own family. She, as a six month trained resource person of CORD, was aware and motivated her own family to give up alcoholism using the Sinclair method of treatment. Both of them were treated successfully and are no longer alcoholics. Putli Devi as a VVRP of CORD's AAA has turned out to be very pro active with her women group and has got shut down a wine shop in the

village near by along with production of illicit local wine.

Glimpses of the programme: (From January 2007 up to June 2008)

Total number of patients up to June 2008	74
Total number of patients drop out	46
Total number of patients are on treatment	16
Total number of patients stopped drinking	12