



Annual Report

(April 2003 to March 2004)

Vardaan Foundation, Baroda



During the seventh year, the organization set its priority more toward service oriented activities and hence formulated new innovative project for imparting services to the poor; underprivileged and deprived groups of society.

Adolescent Health: Earlier it was assumed that adolescent groups are disease free and hence were not in the priority health care programme. However after ICPD conference, the problems pertaining to reproductive and sexual health among adolescent were dealt with broader perspective. It very much highlighted that this period of age of any individual is a time of learning, which necessarily includes risk taking.

Using adolescents themselves as the primary source of information and involving them in the formulation of programme will ensure relevance, acceptability and long-term effectiveness. Thus creating a sense of ownership on the part of the community and of adolescents themselves is the key to successful implementation of RCH programmes through public health institutions at the grassroot level.

Based on the pilot experience, we have designed action cum research project specifically designed to explore the myths and realities of the adolescent towards reproductive and sexual health problems and guide them for right information and health practice in the family and also in the community.

The organization had prepared action policy brief to advocate the matter with Govt. officials and other funding agencies. Efforts are on to acquire necessary financial support for conducting action cum research adolescent project.

Mental Health: In Gujarat, it is estimated that there are 2.8 million adults with common and severe mental disorders. Each year there are 11,000 new cases of schizophrenia. Besides, on going natural and man-made events (earthquake and riots) exaggerate the problem substantially with the rise of cases of depression, trauma and anxiety. Given this mental disorder burden, it is astonishing to note that less than one per cent of the total health budget is spent on mental health.

Besides the mental health is totally absent in public health system and in private health, it is beyond the capacity of common individuals. The fact has been highlighted in the Mental Health Mission Report, (IIMA, 2003) that mental health needs of the affected population are not being met properly and urgent steps are to be initiated to develop innovative and indigenous techniques and procedures are to be undertaken. In addition emphasis on developing new concepts addressing issues of concern to specific target group such children, women, oldies, elderly etc. has also been pointed out. Today the mental health service is structured more towards care and treatment rather than to

prevent and promote sustainable delivery structure that address mental health wider extent.

The idea behind designing such project is to address hidden mental health problems in the community, through structured strategies to provide preventive and Promotive care for the identified mental health problems in rural and urban areas and improve the capacity and efficiency of the health care delivery system through education and training so that it can effectively address the felt mental health needs of the community and improve the access of mental health services to the community. It further addresses to improve quality of care in mental health service delivery and also sensitize the community volunteers to mental health issues and to empower it to identify its own priority on mental health issues and can support and sustain, at least some of the pilot interventions through structural alliance of public and private institutions.

Further, it also support involvement of the community enhancing its capacity to deal with the affected population imparting care and management skills to members of immediate family sensitizing decision makers at all levels including Panchayat Raj functionaries, primary teachers, the village level health services providers etc shall be focused of the project. Cost effectiveness of services offered, demystification of professional skills of helping imparting of attitudinal package to deal cope and manage problems will be key issues of concern and shall be addressed with help of expert and professionals through intensive experiential workshops and training programmer.

The main objective of the current project is to identify the hidden mental health problems of the community and to deliver effective, sustainable mental health services, to strengthen the psycho-social family and community participation in care and management of mentally ill people through education and training, and improve the quality of mental health services to the community at all level.

The organization could not get the desired financial assistance to carry out the aforesaid objective and hence with the help of little financial assistance given by The Royal Netherlands Agency, the organization is conducting a project on the capacity building of Rehabilitation activities in the hospital for Mental Health Vadodara. The current project has the following objectives:

- To enhance social skills and earning capacity of mental health patients treated in the Hospital for Mental Health at Baroda by providing extensive social and economic support as part of the rehabilitation programme of the hospital in a span of 1½ years.
- To develop a Management Information System for the Hospital for Mental Health thereby enabling them to maintain patient records, avoid duplication (by providing identification number to each patient), define a clear criterion to transfer patients to the rehabilitation unit and monitor and manage the rehabilitation programme.

The future need of the current project is to expand the rehabilitation services in the community and is looking for additional resource from individual or institutional donor agencies.

On Going Efforts

The organization is putting in efforts in developing project on e learning in GIS and seeking financial assistance with the ministry of science and technology, New Delhi.

Home based counseling for mentally retard and Cerbal palsy.

Conference Attended:

On the behalf of the organization, Dr. Harshit Sinha had participated in the following:

1. Participated for three days workshop on the Disaster Management for Gujarat conducted by World Health Organization in collaboration of Govt. Of Gujarat on May 27-29th 2003.
2. As a resource person, imparted one-day State level workshop on Application of GIS in Disaster Epidemiology for World Health Organization and Govt. of Gujarat on 11th June 2003.
3. As a participants: Attended and Presented poster on Sharing pilot experience of introducing quality in Public Health in three days Seminar on Improving Quality Improvement in Health in the context of Reforms; Directions, Experience & Challenges. At IIMA on 23rd to 25th Feb 2004.
4. Participated in the local forum for understanding the difficulties encountered by the mentally ill patients and their family members in the process from rehabilitation to resettlement. Dr. B.H. Buch was the main resource person at the Hospital for mental Health in Vadodara

PRIORITIES Set for 2004-2005

During the eighth financial year of the organization the following priorities as listed below:

1. To explore the funds for publishing the seven cases studies of disaster and crisis management in a book form.
2. Undertake a pilot district project under health sector reform to strengthen the policy for decentralization of the power; improving quality of services and empower the community to set their own priority to strengthen the rural health services.

3. Looking the success of the first national level workshop on application of GIS in Health Sector, it was decided to conduct second national level works for the same for the doctors and health professionals.
4. The Government of Gujarat in collaboration of the Royal Netherlands Embassy has taken initiatives to improve mental health services in the Gujarat State. The organization decided to emphasis on developing Community Rehabilitation Center for Mentally ill Persons.
5. Develop a project relating all types of disability with their development and promoting them to main stream.
6. The organization intends to explore the myths and realties among the adolescent groups for the reproductive health and devices the sustainable strategy to address their problems in the community.
7. Under the Community Initiative Disaster (CID) Programmes, the organizations intend to train the common citizen to combat the uneven situation during any disaster or uneven situation. The organization is keen to establish Training Center for Disaster Preparedness and Research. The organization had already developed concept of RESCUE ELEVEN and currently engaged in developing different module of training under CID Programmes.
8. Growing incidents of female violence, abuse against women workers, domestic violence, and human rights violations related to reproduction and female sexuality to lead to face women's in very disgusting situation especially the widows, the destitute and the disabled. Taking lead from this the organization planned to open vocational center for women.
9. Looking the pathetic condition of public health system or in backward areas non-availability of pathetic condition, we had designed an innovative project to impart at minimal cost to the social deprived and less privileged population residing in the backward area (Tribal villages/Town) healthy services.

In order to undertake such innovative project the organization will explore the financial support from individual donors, national and international agencies. We look for the kind cooperation for the aforesaid priority projects of the organizations. Owing to the set priorities, we are ready to work in any part of the country - all over India