











OCTOBER-DECEMBER 2024

# INSTITUTIONAL UPDATE: COMPREHENSIVE PRIMARY HEALTH CARE

## KHPT's approach to Comprehensive Primary Health Care

Comprehensive Primary Health Care (CPHC) is a holistic approach to health and well-being, which encompasses all services and is delivered in partnership by an interdisciplinary team through a range of services and programs that are accessible, equitable, culturally appropriate, and effective. KHPT's goal is to design, implement, and sustain need-based urban and rural CPHC models to achieve Universal Health Coverage in select cities and rural areas in India.

#### KHPT facilitates virtual sessions for Mysuru government officials on CPHC self-assessment tools and guidelines

KHPT facilitated a virtual session on December 9 to orient government officials from health department, including **21** Medical Officers (MOs) from Urban Primary Health Centres (UPHCs), alongside Mr Diwakar, Program Manager, Dr Siraj, Reproductive and Child Health Officer (RCHO) and Dr Madhu, National Urban Health Mission (NUHM) Consultant from

#### KHPT conducts participatory workshops for GPTFs and government officials in Raichuru and Chamarajanagar, Karnataka

KHPT conducted a participatory workshop for stakeholders, including Gram Panchayat (GP) members, health system staff, community representatives, and officials from various departments such as Women and Child Development (WCD), Education, Rural Development and Panchayat Raj (RDPR), and Revenue, as well as representatives from SHGs and NGOs. The workshops were held from November 4 to 7 in Koppara and Amarapura GPs of Raichur district and from December 10 to 12 in Madhuvanahalli GP of Chamarajanagar district, including taluka-level workshops. The workshop aimed

#### KHPT conducts pilot training for Gram Panchayat elected members to support and capacitate as Health Ambassadors in Ballari

The Rural Development and Panchayat Raj (RDPR) department, in collaboration with State Institute of Rural Development (SIRD) and KHPT conducted a pilot training program at Ballari in December aimed at building capacity of elected members from 100 GPs, enable them to serve as Health Members/Ambassadors for their respective communities, enhancing community wellbeing. The Training program highlights the importance of collaboration and advocacy among health providers, non-governmental

## Government Engagement

Mysuru City, which aimed to discuss and provide orientation on Comprehensive Primary Health Care (CPHC) selfassessment toolkit and guidelines developed by KHPT. The toolkit is designed to evaluate the readiness of UPHCs, and Namma Clinics to deliver **12** CPHC services. During orientation, MOs' queries were addressed, ensuring clarity and alignment on their use for monitoring service delivery.

The meeting was chaired by Dr Sangeetha, State Nodal Officer (SNO), Government of Karnataka (GoK). She provided context and

to give participants an overview of Arogya Sangama Project, share key findings from formative research and baseline assessment conducted by KHPT, provide information about Department of Rural Development and Panchayat Raj (DoRDPR) vision for Gram Panchayat Task Forces (GPTFs), brainstorm, and collaboratively design activities to be included in intervention package. The workshop was conducted as part of Arogya Sangama Project that includes interactive activities and sessions



highlighted importance of understanding current status of CPHC service delivery. As a follow-up, KHPT district staff coordinated with Reproductive and Child Health Officer (RCHO) and District Health Officer (DHO) to take initiative ahead, reinforcing commitment to improving CPHC services in Mysuru.

The orientation session was facilitated by Dr Swaroop N, Thematic Lead for CPHC, Dr Prarthana BS, Thematic Lead for MNCH, and Ms Poornima BS, Deputy Director-Programs from KHPT.

about the members of GPTFs, how to identify them, their involvement in various stages, vision for success, linkages at multiple levels, and driving forces and factors. The workshop gave participants insights into importance of GPTFs in understanding the pathway. It highlighted how strengthening or capacitating GPTFs can help solve issues identified in villages through convergence. The KHPT and Johns Hopkins University (JHU) team facilitated the workshop.



The government officials from Devadurga taluk involved in discussion (left), GP, health and community members groups in brainstorming activity (right)

organisations (NGOs), and government departments. Ms Uma Mahadevan, IAS, Development Commissioner, and Additional Chief Secretary (Panchayat Raj) at RDPR, Government of Karnataka, envisioned this initiative. The training was conducted as part



KHPT and SIRD facilitators with training participants from various Gram Panchayats health members (left), and GP members participating in a brainstorming activity (right)

of Grama Arogya program, which prioritises health at grassroots level. KHPT developed the module for this training.

The training was conducted in four batches with **77** participants. KHPT and SIRD team facilitated the training program.















#### KHPT participates in review meetings for TB elimination campaign organised by District TB division in Mysuru

Two meetings of District TB division were held in December in Mysuru. The first review meeting of District TB unit on December 9 was chaired by Dr Javant MS, District TB Officer (DTO), GoK. During the meeting, DTO informed KHPT to support TB-related activities, including raising awareness, making referrals, identifying volunteers and TB Champions, and enrolling Nikshay Mitras at Kythamaranahalli, Yaraganahalli, and Shantii Nagara Primary Health Centers (PHCs) in Mysuru city, along with present interventions in three UPHCs, including Kumbarkoppalu, Vishweshwar Nagar, and Chamindipuram of Mysuru city.

The second meeting was held on December 13 to review 100-day campaign and discuss other initiatives, such as portable X-ray screening and procurement of CBNATT machines. The meeting was chaired by Mr Shri Lakshmikanth Reddy G, I.A.S., District Commissioner (DC), Ms Gayathri K.M, I.A.S., Chief Executive Officer (CEO) of Mysuru and other senior officers Dr P.C. Kumaraswamy, District Health Officer



Executive officer chaired the meeting (right)

## Community Engagement

Department of Community Medicine at JSS Medical College in Mysuru. Dr Swaroop's



Dr Swaroop N, presents at the KACH 2024 conference

materials, as well as conduct verbal screenings for Reproductive, Maternal, Newborn, Child, and Adolescent Health (RMNCH), Communicable Diseases (CDs), and Non-Communicable Diseases (NCDs) in urban.

The health management kit comprises nine point-of-care devices, including a blood pressure monitor, haemoglobinometer, glucometer, weighing machine, Body Mass Index (BMI) chart, pulse oximeter, infrared thermometer, and Mid-Upper Arm Circumference (MUAC) tape, which facilitate early detection of diseases and timely medical interventions.

As a next step, the UHSNCs will conduct health camps using health management kits to enhance health awareness through IEC materials and screening devices.

#### KHPT organises an information and advisory for Specially Abled Schemes in Singasandra

KHPT organised an information and advisory camp on Specially Abled Schemes in Singasandra, Bengaluru, on December

(DHO), Dr Jayant MS, District TB Officer (DTO), Dr Mohammed Shiraz Ahmed, Reproductive Child Health Officer (RCHO).

KHPT supports 100-Day Intensified Campaign for TB Elimination by assigning three staff members to designated Primary Health Centers (PHCs) in Mysuru city. Mr Praveen Kumar, Lead-Urban Intervention, KHPT, attended these meetings.



Mr Praveen Kumar participated in review meeting (left), District Commissioner and Chief

presentation focused on Implementing Public Health Grants in India: A Strategic Approach to Effective Grant Utilisation and approaches such as AKKA (elder sister model), Infrastructure upgradation, and capacity building for staff nurses at block level. He also explained interventions at

Health Impact. He elaborated on Kangaroo Mother Care (KMC) models implemented by KHPT in urban and rural areas, highlighting different levels, including pre-facility, facility level (KMC ward), and post-facility.

21, aimed to provide detailed information about various government schemes available for individuals with disabilities. We facilitated the issuance of Unique Disability ID (UDID) cards, assistance for hearing impairment, special school admissions, and the distribution of walking sticks, shoes, and tricycles. Additionally, we connected participants with Urban Rehabilitation Workers (URW) to ensure they receive the benefits available to them. The event was attended by URWs, Urban Health Sanitation



KHPT facilitating camp for specially-abled people

and Nutrition Committee (UHSNC), Mahila Arogya Samiti (MAS) and Self-help Groups (SHG) members. A total of 25 individuals with disabilities registered in the camp. Way forward project team will follow up and ensure they receive the benefits and services.

#### KHPT Presents at the KACH 2024 conference on Implementing Public Health Grants in India

Dr Swaroop N, Thematic Lead for CPHC at KHPT, Bengaluru, delivered a presentation on November 13 during 34th Annual Pre-Conference workshop of Karnataka Association of Community Health (KACH) 2024. The pre-conference workshop, themed "GRANT-Guidance for Research Grant Writing and Application of New Technologies," was organised by

#### **KHPT** distributes health management kits to UHSNCs to conduct health camps in Mysuru and Bengaluru

KHPT distributed health management kits to Urban Health Sanitation and Nutrition Committees (UHSNCs) in Kumbarkoppalu, Vishweshwara Nagar, and Chamindipuram Urban Primary Health Centres (UPHCs) of Mysuru, and in Singasandra, Gottigere, and Roopen Agrahara UPHCs of Bengaluru in October. The goal is to establish and operate mobile kiosks by equipping them with portable materials. These kiosks will serve as outreach points to display Information, Education, and Communication (IEC)



KHPT distributing health management kit to UHSNC members in Mysuru

#### KHPT organises event for Eligible Couples in UPHC Gottigere, Bengaluru

KHPT, in collaboration with Gottigere UPHC, organised an event for eligible couples (ECs) in Bengaluru on December 22. The event aimed to reach out to eligible couples who aspire to have a baby and provide them with knowledge about preconception care (PCC), screening services, linkages for health, nutritional, and psychosocial risk factors, and counselling on importance of PCC to ensure safe parenthood. During event, couples received information and underwent health screenings and referrals for higher services. Also, medical history, family history of genetic or chromosomal disorders, and menstrual history were collected.

KHPT conducts skill-building on

health Ambassadors in Bengaluru

KHPT conducted a two-day skill-building

(IIT) from October 18-19 for selected Child

Health Ambassadors (CHAs) at Government

aimed to refresh CHAs' basic understanding

School in Kudlu-Singasandra. The session

of Integrated Intensive Training (IIT),

conducted in April. It was followed by

a workshop to develop script writing,

rehearsal, and performance skills.

session on Interactive Intimate Theatre

**Interactive Intimate Theatre for Child** 

After screening, couples participated in a game called "Moving Together," designed to convey important messages about PCC. The game was facilitated by ASHA and Community Health Worker (CHW) of project. During game, couples received messages about safe and healthy parenthood. Couples were found to have normal screening results and were given Albendazole and Folic acid tablets. They were also counselled on proper consumption



Couple playing moving together game (left), Couple undergoing screening (right)

#### Capacity Building ------

On day one, participants were organised into diverse groups and introduced to a range of pressing topics to explore and present through scripted performances, such as environmental protection, challenges associated with garbage disposal, consequences of drug use, effects of alcohol on individuals and society, implications of mobile phone overuse, and importance of maintaining cleanliness in our surroundings. Once groups finalised their topics, process involved extensive brainstorming and collaborative efforts to ensure their messages were clear and



CHAs perform during rehearsal (left), community watches CHAs' performance in the colony (right)

#### Early insights from Arogya Sangama Project were presented at the JHU stakeholder meeting in New Delhi

Dr Swaroop N, Thematic Lead-CPHC at KHPT and Dr Shalini Singh, a Senior Researcher at Johns Hopkins Blomberg School of Public Health, Johns Hopkins University (JHU), presented a poster titled "Arogya Sangama- a Sustainable Model of Collaborative Governance for Primary Health Care (PHC) in Karnataka" at JHU stakeholder/partner meeting on November 18. The poster presentation focused on insights from formative research and design workshop for optimum functioning of Gram Panchayat Task Forces (GPTFs).

#### Partner Engagement

Mr Mohan HL, Dr Swaroop N, Ms Arin Kar, Ms Ambuja Kowlgi, Mr Vidyacharan Malave, Ms Poornima BS, from KHPT, and Ms Uma Mahadevan, IAS, Development Commissioner, Additional Chief Secretary, Department of Rural Development and Panchavat Raj, GoK, our research team.

#### KHPT presents an abstract on Capacity Building of Local Self-Government structure through Grama Arogya Initiatives at the Union World Conference on Lung Health

Ms Elizabeth Joy, Programme Support Lead of Grama Arogya, KHPT, Bengaluru, presented an abstract at the 2024 Union

and benefits of these tablets. Additionally, all couples received counselling from a special counsellor on PCC, importance of nutrition, and creating an enabling environment for good parenting. A total of 24 couples took part in event. The next step involves CHWs following up with individuals with low haemoglobin readings and providing them with necessary requirements like Albendazole and Folic acid tablets.



impactful. After, facilitator reviewed each group's work, offering valuable feedback and suggestions for fine-tuning content, delivery, and overall effectiveness. Following script refinement, groups dedicated time to rehearsal. On day two, groups took their rehearsed performances into the community, visiting various colonies. This allowed them to connect with residents by reaching over 200 households, raising awareness and provoking thought about these important issues, encouraging community dialogue, and inspiring positive action.

Mr Srinivasa N, a theatre artist from Mysuru, facilitated the sessions. At the end of training, CHAs understood how to narrate a story and perform as a group. Moving forward, CHAs will organise and perform health-related IIT activities monthly at various locations in Singasandra. These activities aim to support MAS and SHGs in providing information and raising awareness about health and well-being in urban areas.

World Conference on Lung Health, which took place in person on 12-16 November 2024 in Bali, Indonesia, under the track H1: "Systems for training and programmatic capacity building". Abstract titled Strengthening Tuberculosis Response



Ms Elizabeth Joy presents at 2024 Union World Conference on Lung Health

at Grassroots: Capacity Building of Local Self-Government Structures through Grama Arogya Initiative in Karnataka, India. Her presentation highlighted Capacity Building of GPs and GPTFs, including promoting local governance and local-level planning and implementation, covering topics such as tuberculosis, non-communicable diseases (NCDs), anaemia, undernutrition and social determinants of health. Additionally, GPTF

members were capacitated to do microplanning involving local resources to address various health-related challenges in the villages. This was one of the seven abstracts presented at the conference by KHPT.

## Case story

#### Transformation of Rehman's journey towards improved mobility and understanding of government services

Rehaman's (name changed) birth brought immense joy to his parents, who eagerly awaited him. He was a healthy baby, and all seemed well initially. However, by **15** months, he showed troubling signs. Unlike other kids, Rehaman struggled to stand and became unusually quiet, worrying his parents. Seeking answers, they took him to local hospital. Doctors assured them he was fine, attributing his delays to time, prescribing mild medication and suggesting exercises. Relieved but uneasy, his parents followed advice, but their worries persisted.

As years passed, Rehaman's struggles grew more visible. He couldn't stand or sit appropriately by age four, and his speech was delayed. Joyful sounds were replaced by silence. Seeking help, they went to a prestigious institute in Jayanagar, Bengaluru. Doctors recommended an MRI, which revealed Rehaman had periventricular leukomalacia, a brain injury linked to cerebral palsy, and sequelae of Hypoxic-Ischemic Encephalopathy, indicating birth-related oxygen deprivation. A treatment plan, including speech and physiotherapy, was recommended to help him develop essential skills. However, therapy costs exceeded family's budget. They managed speech therapy, but ongoing physiotherapy sessions vital for Rehaman remained unaffordable, leading to difficult financial decisions as they prioritised their limited resources.

Over time, they noticed irregular movements in Rehaman's eyes. Initially dismissing concerns, they soon realised movements were more pronounced. At five, they sought help at a specialised eye hospital, where he received treatment and was referred to Specialty Clinic. Despite completing his eye treatment, his parents were still troubled by his inability to walk. Determined to find answers, they consulted another specialist who recommended an X-ray of his pelvis and hip joints. The X-ray showed no abnormalities; both hip joints appeared normal. Yet, doctor stressed importance of physiotherapy for Rehaman's mobility. The family still found ongoing physiotherapy costs out of reach. Feeling hopeless, they thought they were out of options until a neighbour, noticing their struggles, offered a solution.

The neighbour suggested contacting KHPT's Community Health Worker (CHW). When Rehman's parents approached, CHW listened compassionately and informed them about free physiotherapy services at the Urban Primary Health Centre (UPHC) in Singasandra, which they were unaware of, and accompanied them, linking them to service. With CHW support, Rehaman began physiotherapy at the government hospital, focusing on his stiff calf and thigh muscles. The initial sessions were challenging, but thanks to dedication of physiotherapists and his parents' support, results began to appear. After one month, Rehaman's muscles softened, allowing him to stand with assistance and sit with minimal help. This slow progress filled his parents with renewed hope and pride as Rehaman's physiotherapy was closely monitored.

Rehaman's parents understood that, without community assistance or support, they might never have found free treatment options available in government hospitals.

## KHPT engage, innovate, empower

#### Over 20 million lives touched!

In 2024, we advanced our mission to empower communities and improve their health.

We look forward to another year of collaboration, compassion, and shared success.

Wishing you and your loved ones a New Year filled with health and happiness!

With gratitude, Team KHPT





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#### **KHP**T

IT Park, 5th Floor, 1-4, Rajajinagar Industrial Area, Behind KSSIDC Admin office, Rajajinagar, Bengaluru - 560 044 Ph: + 91 80 4040 0200 | Fax: + 91 80 4040 0300 | E: khptblr@khpt.org | W: www.khpt.org For more information on the above activities, please contact Jyoti M K, Manager - Communication CPHC at jyoti.kaujageri@khpt.org