

Free Health Camp at Ramechhap District GELU VDC, Sawa Danda



Project Run By: PRAYAS NEPAL

Project Duration: 2 Days

Target : Minimum 3,000 (Three Thousand people)

Submitted to: Poalo Ferrari Fund & Associazione Namaskar ONLUS

BACKGROUND

Nepal is a country of tremendous natural diversity, stretching along the central Himalayas. It's physical geography can be divided into five regions that range from the southern Terai plains at less than 100 meters to the northern high mountains that rise to nearly 8,850 m. this enormous range of altitude has resulted in a variety of ecological zones that have had a significant impact of the lives of local inhabitants. In times past, the rugged and remote landscape isolated people into distinct communities with their lack of education, health aware and the problem of employment. It is the right of every citizen of the country to use the opportunity of health and education equally without partiality. So the state should be responsible or should take guarantee to provide the health and fundamental rights of education to every citizens. But, in the age of science and technology in 21 century or in the present time, most of the rural people are beyond the service of common health service. So many people are died because of health unawareness. There is no feasible source to reach the medicine easily to the rural people. May villages has the same health problems and among them Ramechhap district is also the one- in which many people suffers from the above mentioned problems. It is their fate or it the lack of state responsibility to happen. Geographically, located in the remote area of Nepal, Ramechhap district has 55 VDC and GELU is one of the biggest VDC, which suffers most from health problems. 20 KM Northern-Western from the headquarter of Ramechhap District, Gelu has majority of ethnic community and marginalized people.

HEALTH STATUS OF NEPAL

As per the National Census of 2001 (the data of 2011 census is yet to come), Nepal is one of the very few countries in the world where a woman's average lifespan is less than that of a man. This is contributed by the fact of the low number of health providers in a country where the ratio of population is 18,439 per doctor, 4,987 per nurse, 2,349 per hospital bed and 2,071 per health care provider. Other contributing factors in the delivery of primary health care services are that of the quality of health services at the rural health institutions which is either very poor or unavailable because of the lack of medical supplies and supporting facilities, as well as shortages in health personnel. Management of the health delivery system is weak, resulting in poor services. The sub health post is usually the first point of contact for basic health services within the community, and is also the referral point for community-based health volunteers. Each level above the sub health post is also a referral point, and can be a first place of contact as well. At the sub health post, health post, and primary healthcare centre levels, the activities are supervised and monitored by the District Public Health Office or the District Health Office .

The poor human resources development and management policies have left large numbers of posts within the public health service vacant. This has particularly affected remote areas, where many sub health posts and health posts are persistently without health workers; in many of the remote districts, district hospitals operate without doctors. The main problems identified were lack of medicines, poor condition of the facility, the "bad" attitude of staff, and the lack of staff at certain times.

HEALTH PROBLEMS

Due to lack of knowledge, information and orientation in health and hygiene the grass root level villagers cannot understand the need of immunization, importance of growth monitoring, technique of low cost nutritious food preparation, different methods of birth control, spacing between two children, importance using sanitary or pit type latrine, preparation of safe drinking water, maintenance of personal hygiene and disposal of waste products from the home and practices to maintain good health. In fact sound health deteriorates herewith the increase of superstition and wrong method of treatment. So the incidence of maternal mortality, child mortality, morbidity, dehydration and malnutrition rate and other infectious diseases are quite high as per our community diagnosis.

There is only one Sub-Health Post and +2 Colleges in GELU VDC and it was the base to prepare the measurement of Development indications but it is the most challenging condition. There is no facility of Medical Doctors and till the date there was not held any health campaign. Dependent on Assistant health workers the people are to be cured and to reach HOSPITAL they are forced to walk more than 30 KM. Lack of fertility health facility many mothers and their children are dying day by day in this VDC. Lack of Adequate Service, nutrition and rest are the major cause to have the disease of Uterus and the cause of untimely death too. Many women didn't disclose their serious problem of Uterus because of unsensation and shy but they are inviting their death near and near themselves. The child won't be healthy unless their mothers are healthy. The children who are beyond malnutrition, disease and fundamental health service by birth are not only unhealthy, but they are the burden to their parents and the whole family. Except women and children, the men of GELU are suffered from heart, lever, teeth, eyes, chest and stomach. Mostly old men and women are the victim of cataract eye disease. Old men and women couldn't go so far the treatment. And mostly women and children have less access to their medical treatment being financially dependent. Therefore, it is the very pitiful condition of remote people who are dying without seeing hospitals and doctors even with the minor health problems.

Health is very sensitive issue for the human beings is one of the fundamental right of every citizen. Health citizen can give a healthy nation. Our government doesn't have still its approach in every part of Nepal to provide the easy medical assistance and due to poverty it is not possible to get the benefit for the marginalized people of the remote places. If we social organization can reach there and serve such people, then it is the real social service. It is a pity to mention and shows how critical the situation of health of country man. We did

carried our few free community health camps in near by area from Kathmandu and there were ladies who carried their disease from last 10-20 years which can be cured with simple surgery due to the poverty and getting less concern from the family for female health. And GELU VDC in Ramechhap is one of the most remote area in Ramechhap and people of this place have difficulty even to meet the needs of two time meal. We will conduct this camp in Sawa Danda of Gelu which is near from other three remote VDCs- CHANKHU, FULASI, and CHISAPANI VDC so the people of these VDCs can also take part in this free health camp. And all these people are who are totally dependent of agriculture.

Due to the monsoon season, only one road touched with GELU VDC has been stopped these days. The road will be starts to operate only after September/October. No more agriculture work will be there during Sep/Oct and the people will have enough time to take part in Health Camp. We are planning this for middle of September looking at the condition of the road.

1. OBJECTIVES OF THE PROJECT

The purpose of this project was to cure the people of the GELU VDC and to make them aware of the health matters; the vision of the PRAYS NEPAL funded “Health Camp” in GELU Village Development Committee, Ramechhap District.

- 1.1. To provide free health treatment and medicine to the remote people of Ramechhap who are not getting use the basic health service.
- 1.2. Identifying the disease of the people after their health supervision and provide the needful treatment and medicine.
- 1.3. To aware the people about health, hygiene and the environment,

2. Beneficiary People

- 2.1. Poverty stricken people of Remote Area of GELU VDC, CHANKHU VDC, FULASI VDC, and CHISAPANI VDC
- 2.2. Children, old women, men and others who are basically lacking to get the basic health treatment and health service.

3. Expected Result

- 3.1. The people of Remote Area will get health service in their locality.
- 3.2. The poverty stricken and remote people will directly get facilitated for the first time
- 3.3. The people will get more information on hygiene and the ways of treatment on health issues and to maintain their environment and life healthy.
- 3.4. To provide healthy life to the people of Ramechhap.

Medical Team:

Child Pediatrician	1
Gynecologist (female most possibly)	1
General Physician	5
Nurse	7
Volunteers	30

Budget:

Medicine:	Rs. 150000.00
Transportation:	Rs. 60000.00
Food:	Rs. 60000.00
Handouts:	Rs. 25000.00 (this will to inform about the health camp and awareness materials for healthy life)
Total:	Rs.295000.00