

RISE and Swasthya Pahal

Activity Report

13/11/2019

Foundation of Healthcare Technologies Society (FHTS)

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SWASTHYA PAHAL (Health for all)

Swasthya Pahal (Health for all) is an interactive, innovative, technology enabled, Sustainable, Multi-Sectoral, Accessible, Affordable, Reimbursable and Tailored (SMAART) initiative. It utilizes touch screen, computer enabled, SMAART Portable Health Information Kiosks (PHIK) to enhance self-management of non-communicable diseases among individuals at risk of metabolic syndrome (including diabetes, hypertension, high cholesterol and obesity). SMAART PHIK is implemented through a series of health care camps held across urban slums and rural/tribal settings in India.

Objectives

- To integrate clinical and non-clinical data sources by combining principles of ICTs to enhance population health outcomes across diverse geographic settings.
- To utilise the PHIK as a tool to assess the burden of chronic disease and associated risk factors in diverse settings such as urban slums and rural/tribal settings in India.

Camp Day: 13th November 2019

Date: 13th November 2019

Venue: Police Station, Krishna Nagar

Start time: 10:30 AM

End time: 1:30 PM

Objective: To impart health and nutrition education to the participants and measure their height, weight, blood pressure and blood sugar besides seeking other health related information.

Total beneficiaries and female beneficiaries in Swasthya Pahal: 20, 1

Total participants and female participants in RISE: 3,0

Team Members: Alka, Bhawani, Mahima, Patte, Sanathoui, Hegan

Agenda of the camp

Components of the camp	Details	Material and methods used
1. Registration	<ul style="list-style-type: none"> Collection of information from the participants such as name, age, phone number and address. 	Receipt booklet
2. Measurement of height and weight	<ul style="list-style-type: none"> Height and weight was measured using standard procedures and protocols. 	Digital weighing machine, Stadiometer
3. Measurement of blood pressure and sugar	<ul style="list-style-type: none"> Blood pressure and blood sugar was measured using standard procedures and protocols. 	Digital machines for measuring blood pressure and blood sugar, lancet, strips, cotton swabs, spirit
4. PHIK	<ul style="list-style-type: none"> Collection of data from the participants pertaining to their socio-demographic profile, medical history, physical activity and alcohol and smoking consumption pattern Assessment of risk factors based on the information collected 	Laptop (touchscreen)
5. Nutrition counselling	<ul style="list-style-type: none"> Based on the assessment report generated by PHIK, participants were provided individualized diet and nutrition counselling to prevent and manage non-communicable diseases including hypertension, diabetes and overweight and obesity. They were counselled about healthy dietary habits, healthy snacking options, good dietary behaviours, meal patterns and importance of physical activity. 	Verbal counselling
6. Rise	<ul style="list-style-type: none"> Introduction to RISE initiative, its purpose and objectives Showcasing of rise products 	Rise products
7. Photographs	<ul style="list-style-type: none"> Clicking pictures of the event 	Camera

Observations during the camp

Table 1: Health card of the beneficiaries (n= 20)

Condition	Number of participants with the condition n (%)	Females with the condition n (%) ^a	Males with the condition n (%) ^b
Hypertension	13 (65)	1 (100)	12 (63.1)
Diabetes	1 (5)	0 (0)	1 (5.2)
Overweight /obese	10 (50)	0 (0)	10 (52.6)
Regular physical activity	1 (5)	0 (0)	1 (5.2)
Alcohol consumption	9 (45)	0 (0)	9 (47.3)
Smoking cigarette or <i>bidhi</i>	3 (15)	0 (0)	3 (15.7)

a - total females = 1; b- total males = 19

Conclusion

A total of 20 beneficiaries (1 female) attended the Swasthya Pahal camp organised on 13th November 2019 at Krishna Nagar Police Station. Nearly three fourth of the beneficiaries (65%) had hypertension (i.e. blood pressure >120mm/Hg) while only one beneficiary had random high blood sugar (> 140mg/dL). Half of the beneficiaries (50%) were overweight/obese (i.e. Body Mass Index > 24.9 kg/m²) and only one beneficiary was engaged in regular physical activity (i.e. at least 4 times in a week). Overall, high prevalence of overweight and obesity, diabetes and hypertension could be due to faulty dietary habits and lack of physical activity. Nearly half of the beneficiaries consumed alcohol (45%) and/or more than one tenth of the beneficiaries smoked *bidhi* or cigarette (15%).

Details of RISE products sold during the camp: Three participants (0 female) viewed RISE products on the camp day. Participants mostly viewed pouches and t-shirts. None of the RISE products were sold during the camp day.

Photo gallery



Blood sugar measurement of the beneficiary



PHIK and nutrition counselling of the beneficiary



Distribution of certificate of participation to the beneficiary

