

RISE and Swasthya Pahal

Activity Report

04/12/2019

Foundation of Healthcare Technologies Society (FHTS)

Dr. Ashish Joshi

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: 4th December 2019

Date: 4th December 2019

Venue: Police Lines, Pushpanjali Enclave, Harsh Vihar, Pitampura

Start time: 10:45 AM

End time: 3:30 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: 72, 1

Total participants and female participants in RISE: 22, 0

Team Members: Ashok, Harpreet, Kamalpreet, Mahima, Srishti

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= 72)

Condition	Number of participants with the condition n (%)	Females with the condition n ^a	Males with the condition n ^b (%)
Hypertension	41 (56.9)	0	41 (57.7)
Diabetes	5 (6.9)	0	5 (7.0)
Overweight /obese	37 (51.3)	0	37 (52.1)
Regular physical activity	48 (66.6)	0	48 (67.6)
Alcohol consumption	33 (45.8)	0	33 (46.4)
Smoking cigarette or <i>bidhi</i>	33 (45.8)	0	33 (46.4)

a - total females = 1; b- total males = 71

Conclusion

A total of 72 beneficiaries (1 female) attended the Swasthya Pahal camp organised on 4th December 2019 at Police Lines, Pushpanjali. More than half of the beneficiaries (56.9%) had hypertension (i.e. blood pressure >120mm/Hg) while less than one tenth of the beneficiaries (6.9%) had high random blood sugar (> 140mg/dL). Half of the beneficiaries (51.3%) were overweight/obese (i.e. Body Mass Index > 24.9 kg/m²) and three fourths of the beneficiaries (66.6%) were engaged in regular physical activity (i.e. at least 4 times in a week). A few beneficiaries reported lack of time as the main barrier for not being able to exercise regularly.

Slightly less than half of the beneficiaries (45.8%) consumed alcohol and equal number of beneficiaries smoked *bidhi* or cigarette though the quantity and frequency of smoking and drinking alcohol varied widely among the beneficiaries.

Other observations during the camp: Most of the beneficiaries at the camp were engaged at regular physical exercise during most of the week which included yoga (twice a day) and parade (twice a day) as part of their work protocol. The beneficiaries were receptive to the nutrition counselling and lifestyle modification advice that we suggested during PHIK.

Details of RISE products sold during the camp: Twenty two participants (0 females) viewed RISE products on the camp day. They mostly viewed pouches, earrings and t-shirts. Details of RISE products sold during the camp day are mentioned in the table below.

Table 2: Details of the RISE products sold during the camp

Product	Description of the product (Size)	No. of units sold
Earrings	Small	1
Earrings	Medium	1
Earrings	Large	1
Round pouch	Small	4
Round pouch	Medium	1
T-shirt	Large	2
T-shirt	Extra large	1

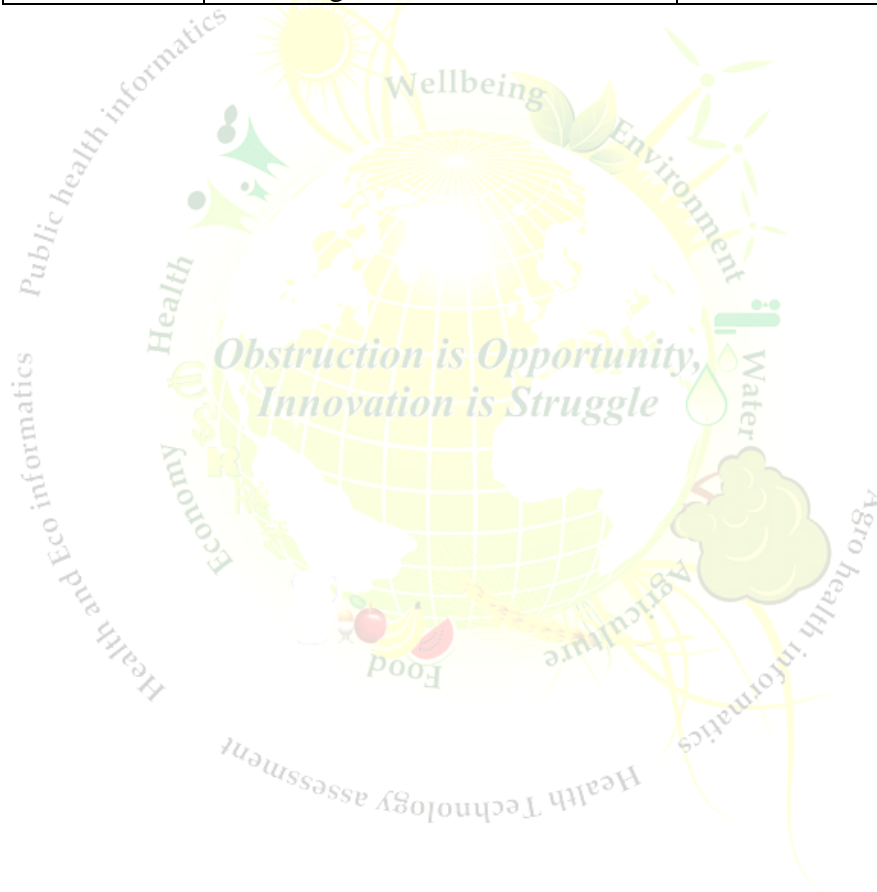


Photo gallery



Registration of the beneficiaries at the camp site



Measurement of height of the beneficiary



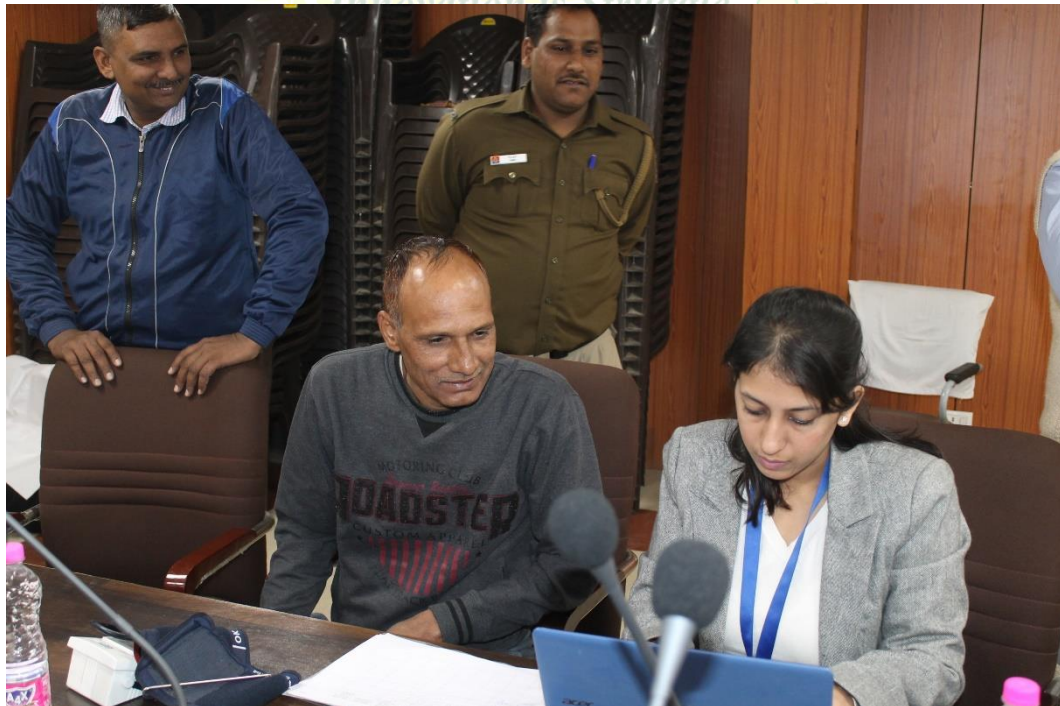
Measurement of blood pressure of the beneficiary



Measurement of blood sugar of the beneficiary



PHIK and nutrition counselling of the beneficiary



PHIK and nutrition counselling of the beneficiary



Overview of the activities at the camp



Location of the camp



Distribution of certificate of participation to the beneficiary



Overview of the activities at the camp