RISE AND SWASTHYA PAHAL REPORT

17/02/2020

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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: 17th February 2020

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Date: 17th February 2020

Venue: Police station, Begumpur, New Delhi

Start time: 2.00 PM

End time: 5.00 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: 50, 6

Total participants in RISE, female participants in RISE: 30, 5

Team Members: Ashok, Akansha, Deepak, Radha, Shruti Bahl



Agenda of the camp

Components of the camp	Details	Material and methods used		
1. Registration	• Collection of information from the participants such as name, age, phone number and address.	Receipt booklet		
2. Measurement of height and weight	• Height and weight was measured using standard procedures and protocols.	Digital weighing machine, Stadiometer		
3. Measurement of blood pressure and sugar	• 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	 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 Soften of the sof	 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	 Introduction to RISE initiative, its purpose and objectives Showcasing of rise products 	Rise products		
7. Photographs	Clicking pictures of the event	Camera		
Health Technology assessing				

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Observations during the camp

Condition	Number of participants with the condition n (%)	Females with the condition n ^a	Males with the condition n ^b (%)
Hypertension	37 (74)	2	35 (79.5)
Diabetes	16 (32)	3	13 (29.5)
Overweight /obese	32 (64)	3	29 (65.9)
Regular physical activity	27 (54)	1	26 (59.0)
Alcohol consumption	15 (30)	0	15 (34.0)
Smoking cigarette or bidhi	13 (26)	0	13 (29.5)

Table 1: Health card of the beneficiaries (n=50)

a - total females -= 6; b- total males = 44

Conclusion

A total of 50 beneficiaries (6 females) attended the Swasthya Pahal camp organised on 17th February 2020 at Bengumpur, Police Station, New Delhi. More than three fourths of the beneficiaries (74%) had hypertension (i.e. blood pressure >120mm/Hg) while more than one third of the beneficiaries (32%) had high random blood sugar (> 140mg/dL). Nearly two third beneficiaries (64%) were overweight/obese (i.e. Body Mass Index > 24.9 kg/m²) and around half of the beneficiaries (54%) were engaged in regular physical activity i.e. at least 4 times in a week. Some of the beneficiaries reported lack of time as the main barrier for not being able to exercise regularly.

One third of the beneficiaries (30%) consumed alcohol and one fourth of the beneficiaries (26%) smoked *bidhi* or cigarette, though the quantity and frequency of smoking and drinking alcohol varied widely among the beneficiaries. All the beneficiaries found the Swasthya Pahal initiative useful and very helpful.

Additional observations / Comments

- Most of beneficiaries were hypertensive. They were managing high blood pressure through medication but not through diet.
- Most of the diabetic beneficiaries were managing diabetes through Ayurvedic medicines and home remedies. They were not regulating intake of sweets.
- Most of the beneficiaries were heavy smokers and were not willing to quit. One of the beneficiary said "*yeh aadat to marne ke baad hi chutegi*". They were not willing to accept the problem.



- Most of beneficiaries were involved in regular physical exercise (mostly walking).
- One of the beneficiary was not satisfied with the Swasthya Pahal camp. He was seeking for treatment with medicines and was not interested in lifestyle counselling.
- Most of the beneficiaries were in the pre-contemplative stage. They were not concerned about their health.

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

Product	Description of the product (Size)	No. of units sold
Earring	Medium	1
Earring	Small	14.
Pouch	Small	3
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Table 2: Details of the RISE products sold during the camp