Greetings once again from ‘Jan Chetna Manch, Bokaro’!

The last 6 months have been much calmer than the previous couple of years. We seem to have overcome the pandemic, and we are slowly recovering from the economic impact of the lockdown. The need for the services and activities undertaken by JCMB however continues. Though the schools and villages crèches (anganwadis) have restarted, nutritional support is weak and malnutrition remains a problem. Though the government and private health care facilities have bounced back into action there is still a demand for quality, low cost, rational health care – especially for women during pregnancy and childbirth. Though there are village level health care workers appointed by the local government, the demand and need for the home based visits by JCMB’s Community Health Workers continues. As for mental health care, there isn’t really any alternative to the care being provided by our partnership with the Central Institute of Psychiatry in Ranchi.

On the financial front JCMB, though, is less calm! Though friends from overseas are keen to support some of our much needed activities, we cannot accept their support. This has adversely affected our programmes in the sphere of mental health, safe drinking water, and malnutrition. Our Indian friends, though, have rallied, and continue to support us. Details of this support are found at the end of this newsletter. A glimpse of some of our activities can be found in the pages below. As always we welcome suggestions and feedback from you all.

Eking out a living in the villages of Chandankiari, Bokaro, Jharkhand:
Catching fish, grazing cattle, watching over hens and chicks and supplying coal ......
About JCMB’s health related programmes......

Providing health care for women and babies during pregnancy and childbirth continues to be the mainstay of JCMB’s health related activities. The following table indicates the numbers of women, babies, and mental health patients helped during the last 6 months. There has been a small increase in the numbers, especially in the sphere of mental health.

*Women’s Health Centre data at a glance: July to December 2022*

<table>
<thead>
<tr>
<th>Total number of consultations in the outdoor clinic</th>
<th>Women: For antenatal care, gynecological problems, etc.</th>
<th>Children: for illnesses and immunisation</th>
<th>Ultrasonography</th>
<th>Mental health patients</th>
</tr>
</thead>
<tbody>
<tr>
<td>4545</td>
<td>3088</td>
<td>398</td>
<td>528</td>
<td>460</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Total number of indoor admissions</th>
<th>Deliveries (Normal &amp; cesarean)</th>
<th>Other surgeries and minor operations</th>
<th>Other illnesses</th>
<th>Preterm / small babies / neonates with problems</th>
</tr>
</thead>
<tbody>
<tr>
<td>621</td>
<td>408</td>
<td>50</td>
<td>212</td>
<td>26</td>
</tr>
</tbody>
</table>

**Small babies: Big cost!**

One thing we have learnt in JCMB is that the smaller the baby the bigger the cost! These wee babies need minute and constant monitoring, highly accurately titrated medications, dedicated nursing care and lots of hard work!

The equipment to care for these babies is prohibitively high. Since our health centre is dealing with more and more small babies with problems that necessitate close monitoring we need more specialised equipment which is difficult to access locally, and extremely expensive to acquire from afar. We have been fortunate to receive a much needed donation of a neonatal pulse oxymeter (thanks to Dr Satya Kumar and helped by Dr Ravi Chamria) – a machine which monitors a small baby’s heart rate and their lungs’ capacity to function. This small – but costly – piece of equipment has enabled our health centre team to successfully treat our extremely small newborns – some as small as 900gms.

Not only equipment to monitor, but small preterm babies need to be kept warm. And small woollies are – like the neonatal pulse oxymeter – expensive and not locally available! Thanks to our team of knitters – Rupa Sahay, Namita Guha Roy and the Nool Koota women – none of our babies felt the chill of winter.
Little Manichka finally went ‘home’. Her journey has been long – and painful. Painful for herself, her sister who didn’t make it, her mother Namita, who lived only for her, her aunt who rallied the whole family, and even for her largely absent father.

Namita had been married for nine years and still did not have a child till recently. She had already experienced two pregnancy losses: one was a miscarriage at 3 months, and the second was a preterm baby, born at 7 months. She delivered in a private hospital in Dhanbad, and though the baby was admitted into the Neonatal Intensive Care Unit, it died after 3 days.

Fortunately her elder sister is one of JCMB’s *swasthya sakhis* (health friends) – Rekha, so she had been coming for antenatal care from the beginning of her pregnancy. Rekha is one of our most active health workers. She is also the daughter of a traditional midwife, and knows all about birth complications. And Namita’s birth turned out to be extremely complicated! An early scan showed a twin pregnancy – so increasing the risk even more.

Much too early in the pregnancy Namita came with Rekha with strong contractions, and she soon delivered her babies – at just 27 weeks gestational age – more than 2 months early. Both weighed around one kilo: 1.1 and 1.15 kg – even less than her last baby that had died.

The babies, both girls, struggled to survive. They had problems of breathing, accepting oral fluids, suffered from jaundice, and were anaemic. They both needed to be resuscitated several times. It was so touch-and-go that Rekha joined Namita in the baby room for a week to give moral and practical support. Unfortunately one of them died after a long 33 days. In spite of this Namita became even more ruggedly determined to save Manichka.

Outside of the baby room the family was in chaos. Namita’s mother-in-law ordered her son, Suprit Bouri, to get the babies discharged soon after their birth arguing that they had no money to afford long term care. He was in a dilemma – to listen to his wife or his mother? He was more inclined to listen to his wife, for he too wanted his babies to survive. But he couldn’t oppose his mother either... so he ran away. This left only Namita’s sister Rekha to act as a guardian. JCMB ensured that none of the family’s financial problems reached the ears of Namita. Finally Suprit did manage some contribution (a large amount for him), Rekha gave even more, friends pitched in with donations, and JCMB wrote off the rest. The final bill was way more than the family could ever afford.

Till now Manichka is staying with her mother and aunt and when her stomach is full, sleeps happily. Hopefully blissfully unaware of the turmoil brought about by her birth.
The two sisters spent 8 months together – 7 in the womb, and one in the baby room. Namita had no opportunity to grieve after one daughter passed away, for another one had to be fed and cared for.

At last Namita and Rekha have some respite. Weighing around 2 kgs Manichka is on the road to survival.

Children still falling through the net: The problem of malnutrition

Though the lockdown is over and the village ‘anganwadis’ (crèches) have opened JCMB’s Community Health Workers and swasthya sakhis are still finding children who have ‘fallen through the net’ – suffering from malnutrition, and still not successfully availing the nutrition programmes of the government. Around 60 such small children were identified and provided nutritional supplements by JCMB.

Children of women who are separated from their husbands are particularly vulnerable. Sujata Devi is such a mother. Reasonably ‘well educated’ by village standards – she passed her intermediate examination – she was abandoned by her husband and her in-laws soon after becoming pregnant. She lives with her elderly parents, who look after her son, Manish, whilst she goes out to work here and there to earn a livelihood. She was so busy working to support herself and her family that she didn’t have the time to feed her son. When he was one year old he weighed less than 7 kgs and couldn’t stand up. He was enrolled in JCMB’s nutrition programme, and after one year now weighs nearly 10.5kgs.
Videos for public awareness

One activity that is most enthusiastically embraced by JCMB’s health team is the production of videos. Since there is a paucity of such material available in the local language – ‘Kortha’ – the team decided to produce them. In the last few months we have made several videos: demonstrating exercises for backache in pregnancy; how to help a breech baby turn inside the uterus; how to bathe a small newborn; foods to help address anaemia and finally diet suggestions for people – both pregnant and non-pregnant – with diabetes. These videos are used both in the health centre and by the Community Health Workers in the villages. Whilst making the diet videos all the health workers brought food items from home. After completing the filming they threw all the items into a huge cooking pot and ate it all!

Developing JCMB as a Training Centre

The plan to develop the old health centre in Chamrabad as a resource-cum-training centre is finally materialising. During the pandemic it was difficult to implement, but now it is easier to accept groups of trainees, and to provide a safe training environment.

After a long time a group of women from BIRSA’s group ‘Omon Mahila Sangathan’ in Noamundi, West Singhbhum district of Jharkhand came for refresher training. They were keen to understand the changes in the maternal and child health programmes of the government, and how they could help improve women’s access to health care.

This time the training included inputs from all members of JCMB’s health team, helping both theoretical and practical aspects of their programme.
Rekha – Drawing her own line in life

Rekha – which means ‘line’ in Sanskrit – is one of JCMB’s most dedicated, competent, hard working and sincere health workers. She joined us in 2013, and during these last ten years she has become one of the senior most and essential member of the health team, and expertly manages small and preterm newborns, assists in the operation theatre, helps women during childbirth and sympathetically and patiently counsels women and their families.

At the time of her marriage, in 2012, she expected to become a housewife in a household which was supposed to be financially secure, to a husband who was educated and working in a call centre in Kolkata. She was only 17 years old and barely out of school. However, life did not turn out as she had thought: her in-laws were not economically well off since her father-in-law had lost his job in the mines, and her husband was unemployed, had never worked – and drank whenever he got the opportunity.

She soon became pregnant and returned back home to Chamrabad – and the Women’s Health Centre – for the birth in 2013. Afterwards she refused to return to her in-laws’ house, and came to ask JCMB to join the next group of health worker training. She was a quick learner and soon became an important member of the women’s health centre team

Fortunately she is supported in her determination to work by her family. Her father, Subhash Mahato, tells us with some pride: “See, I educated all my daughters well, but only Rekha is reaping the benefits.” Subhash is the village headman, and though nowadays the position has much less value than in the past, he is still called upon to sort out disputes amongst villagers. Women of his household were traditionally not expected to work outside.

Her husband though is less supportive of her determination to work. He still drinks and abuses her – mostly verbally but sometimes physically too – probably out of frustration. Rekha says, “He tells me I am his husband, since I earn the money in our family ...” As she lives with her parents, she is protected and he cannot mistreat her too much. She is the breadwinner and he is still unemployed. He lives part time in Chamrabad and part time in his own house in the coalmines 20 kms away. She now has two children, a daughter and a son, and has got them both admitted in the best school in Chandankiari, even though the fees takes away much of her salary.

Rekha’s mother laments: “If my son-in-law wants her to stop working, then he should work and earn enough to support her....” To which Rekha immediately intervenes and adds, “No, I will never leave my job in the hospital – for as long as it exists I will be working there.”
Local support for local women

Last year the Rotarians from Kolkata came to JCMB to donate materials needed during the pandemic. This year the Rotary Club Chas came to provide health kits & sweets packets – to our swasthya sakhis in recognition for their dedication and services.

A word about our financial situation

Since JCMB is no longer allowed to accept donations from overseas we are more than ever in need of financial support from Indian friends and well wishers. We have been fortunate to have the support of the Impact Foundation (DASRA) which allows us to subsidise quality care during pregnancy and childbirth, and continue to provide nutritional support to malnourished children of vulnerable families. A timely grant from the Edelgive Foundation’s GROW Fund has enabled JCMB to improve and strengthen organisationally. We have also received a timely and generous donation from Pardos Real Estate Pvt Ltd which has enabled us to upgrade the health services we are providing.

However we still rely on the support of individuals for subsidising mental health care, community health activities, as well as providing indoor care particularly to women and babies of poor families. In particular, care for preterm neonates is always much, much more than families here can afford. Almost everyone accessing the health care facilities of JCMB are poor – rich villagers are more likely to seek care from bigger hospitals in the nearby cities of Bokaro and Dhanbad. So we request all our Indian friends and well wishers to spread the word – we need your support more than ever. Not only in cash, but in kind too. We particularly welcome volunteers to come and help us, and we are always on the lookout for a full time doctor to come and stay.

HOW TO GET IN TOUCH?

You can get in touch via email on: janchetnamanch@rediffmail.com
Or by phone: +919431128221 or +918084791472

It’s better to send an email though, since the phones do not work too well here! Details of ways to donate to help us are available on our website www.janchetnamanch.org

THANKS AGAIN TO ALL OUR SUPPORTERS!

Thanks again to all our friends and well wishers, without their support JCMB could not continue to provide the quality of care and range of activities. During the last 6 months (July to December 2022) we have been helped in various way by the following institutions:

EdelGive Foundation (GROW Fund); Impact Foundation (DASRA); Pardos Real Estate Pvt Ltd; Sakshara Trust; Central Institute of Psychiatry, Ranchi; Department of Health & Family Welfare, Government of Jharkhand; Rotary Club (Chas).

We have also been supported in various ways by the following individuals (alphabetically listed sans honorific titles):


An important note: We request all our friends and well wishers to contact us by phone or email before making any financial donation.