



# SWASTHYA SWARAJ

A people's Movement for Swaraj in Health

NEWSLETTER

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*Of all the forms of inequalities, inequality in healthcare is the most  
shocking and inhumane.  
-Martin Luther King Jr*

## EDITOR'S NOTE

### REFLECTIONS ON OUR JOURNEYS



As we began gathering articles for this issue, the only brief given to the authors were to reflect on their short stints at Swasthya Swaraj. All the authors are young individuals who have spent time doing their internship at the organisation. The themes that emerged are on pathways, encounters of new cultures and their traditions and the gratitude for people that they met along the way. While we read through the pieces in this issue of the newsletter, let us all spend sometime to reflect upon our own journeys.

Ann Mary Jimmy  
India Fellow



# THE NON-ROADS OF KERPAI : A REFLECTION ON PLACE

**Written by Meenakshi Viswanadha**

Meenakshi is a 10th grade student from New Jersey, USA. She had done her school internship with Swasthya Swaraj in July 2023.



**“Two roads diverged in a wood, and I— I took the one less traveled by, And that has made all the difference” (Frost). - Robert Frost**

Except, for me, the road less traveled by was a) not a road and b) not less traveled by. It was a dirt path(ish) upon which traffic was, in fact, relentless. Sometimes (fine, I concede, many times), it's not the traffic part that is so bothersome as it is the human part. Still, it has made all the difference.

The village of Kerpai, located in the Thuamul Rampur Block of the Kalahandi district in Odisha, India...is otherwise oblivious to any such classifications save for its own name. And why indeed should it contextualize itself with imposed labels of where it is when it can contextualize itself with what it is? It's like Mary Oliver's musing: “If I had no address, as many people do not, I could nevertheless say that I lived in the same town as the lilies... [and] Still Waters” (Oliver 80).

Kerpai doesn't need an address any more than you need another name. What other place do you know of with beautiful log houses that have no locks? Where else have you witnessed village women wake up in the early hours of dawn, lined by the water pump, pumping fresh water until it overflows the rims of their earthen vessels? Have you seen crevices like this one, dripping with the artistry of simplicity?



Rolling hills overlapping in precisely that generic way from every kid's elementary school depiction of "landscape" in art class.

Or expanses like this that question not only the usefulness of boundaries but the existence of them?

Kerpai has this ability to blur to the point of irrelevance, until all anyone can see on that walk are the tricks of distance and light rendering language useless for what's ahead: Mountains Beyond Mountains . To cut through what has thus far been an incomplete romanticization, I will quote from the book whose title claimed this description of the scene before I could: "among a coward's weapons, cynicism is the nastiest of all" (Kidder) – so, too, I would like to add to Tracy Kidder's brilliant observation, is willful ignorance.

Which reminds me: how much can you separate the breathtaking view from the breathtaking malaria? Can you separate a walk in Kerpai amongst its beautiful green hills from the same hills that men, women, and children toil? You cannot , decided the 15-year-old intern at Swasthya Swaraj, the nonprofit operating the village's health care center. She decided this the day she understood the weight of the question: the first time she witnessed childbirth. The room was lined with anticipation, sterilizing agent, and a steely, absolute sort of hope.

I remember the intern thinking: how can the nurses lay out a cloth for something – someone – that hadn't happened yet? Turns out medicine is a faith more than anything else. Place has this way of understanding what you cannot: yourself. While the intern didn't know it that day, when the garbled cry of a beautiful healthy baby boy pierced through the clinical air, the trees and the mountains and the dirt somehow understood that the intern was convinced of a future in medicine.

A writer changes through writing alone, and it is only now as I'm writing this, about a week since I returned from India, that I am struck by a realization: that intern was me.

I realize that the baby will grow older, and that at 10 or 11 he will start going to the dongar — the mountains on which the crops are grown — first to look after his younger siblings and then to pick up a scythe himself. That when he turns 15 or so — the age of that intern and this writer — he will likely be married. It only occurs to me now that he will likely never write his own name or read a book or even understand a movie — he will likely never walk through a grocery store or mall, likely never own a phone; he will likely never experience beyond the mountains that nourish him.

But as I write this, I recollect the lesson I learned that day — the day he was born — that medicine is a hope — a faith of sorts. The greatest hope the future has to offer is that it is irreconcilably dependent on the present.

And we get to choose the present.

The child mortality in the areas Swasthya Swaraj works with — as per a 2022 blog post — was 116 deaths in every 1000 live births (Swasthya Swaraj). In India overall that year it was about 27 (*"India Infant Mortality Rate 1950-2023 | MacroTrends"*) and in the US, just 5 (*"U.S. Infant Mortality Rate 1950-2023 | MacroTrends"*).



Myself (blue shirt, mask, chick in hand), a mentor, and a few friends.

It would be a mistake to separate deprivation from Kerpai but it is also impossible to separate it from the rest of India, the US, or anywhere else in the world. Health inequity is human inequity.

But the thing about place is that it often doesn't hold grudges. Maybe Kerpai will forgive us — excuse our disgusting indifference — if we start to notice and care. What is the solution? I don't know. I have only questions. But maybe that is the solution.

For now, at least, my choice is to listen — it is to stand back and observe the roads (of which, for the record, there are many) and, since I'm there anyway, the wood, and the other travelers, and myself.



## SHAKTI AWARD 2023

Dr Aquinas Edassery, executive director, Swasthya Swaraj Society was honored under the Medical Frontline Worker category of the Shakti Award 2023, by select Rotary clubs of Mumbai.



## 1ST OPD DAY

The first OPD day of the hospital was marked by a tree plantation ceremony lead by our founder Dr Aquinas Edassery.



## AMBULANCE AS LIFELINE



As part of their CSR initiative, LIC Housing Finance Limited sponsored a new ambulance, that has been deployed into our healthcare services along with a urine analyzer and WBC analyzer.



## FIRE DRILL

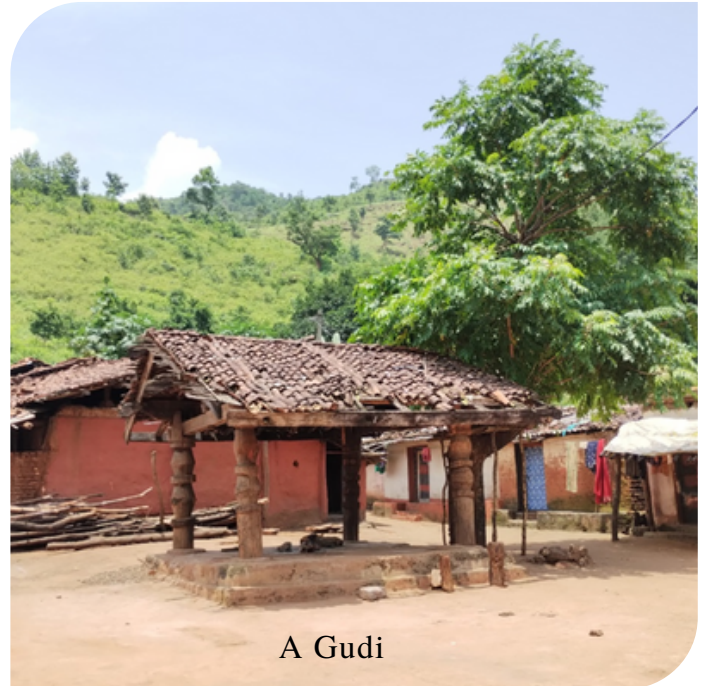
A mock fire drill was conducted at our newly opened hospital in Kaniguma where the fire force department of the Govt. of Odisha demonstrated the use of safety equipments to the staff.



# HIGH TIME TO CHANGE OUR LINE OF QUESTIONING

**Written by Ruchika Wayal**

Ruchika is a MSW(Public Health) student at TISS, Mumbai. She did her internship with Swasthya Swaraj in September, 2023



A Gudi

Set on a journey to explore the intricacies of the tribal health care landscape, I travelled to Kalahandi District, Orissa. With a blank canvas and some vague ideas about tribal culture me and my two bags set on a journey to the remotest villages and tribal pockets of this district. Buses, rickshaws, bikes, long walks leading to hospitals, clinics, subcentres and camps took me to the tribal communities of not less than 10 villages. Every day of this 28-day long journey, we cut through mountains, valleys, crossed rivers and streams to reach the unreachable. Honestly, some days were good some were better. Me and my notes recorded several tribal communities and their realities.

One such sub-section of my activities is what I try to pen down here.

On a mission to meet the diverse “health-care providers” of a village in Rampur I happened to meet a 75+ year old Grandmother, Guru Gunia renamed Amma. Amma lived with her tribal community that she served and provided traditional health solutions across “three generations” or to put in numbers four decades.

She worshiped the Gudi (place of worship of the tribals). Villagers would often call Amma for health issues ranging from fever, measles to reproductive health issues. Her solutions would involve everything from neem leaves to prayers, bali’s (sacrifice), traditional folk songs and dance for the deities as a form of request to heal the sick. The community believed and entrusted her, for health issues and activities that villagers themselves called as ‘andhvishwas’ or blind faith. Interesting and ironic how the villagers would say andhvishwas yet believe and practice it.



The reason for their trust simply lies in the fact that generations of these tribes have been accustomed to such a practice which is very easily available and accessible to them. Modern medicines and practices are relatively recent. While we must appreciate and acknowledge that government through several programs have tried to reach the last mile. The real execution of these on the ground level remains abysmal. Compounding this even further is the reluctance of the medical community to serve in these remote areas and complex terrain. No before we assume, we are not here to question, criticise or judge any of these communities or professionals.

Let's start from the beginning, we all a part and parcel of the phenomenon of evolution. Indian medical history finds its roots in ayurveda and traditional healing, while the western world transitioned through the germ theory, experiments that were based on trial-and-error method. Here, all continents practiced what was accessible and available to them. So did the tribals around the world. None would be tagged foul then, because what worked was basically what the masses demanded and adopted. Countries across the globe have witnessed large scale modernisation and development, field of health and medicine have grown at an exponential rate. Could we then perhaps say that the tribals have fallen behind in this race? The simple and short answer according to me is No.

While my journey across Kalahandi led me to Amma and her community, it also led me to another interesting place. A hostel for tribal girls, who came from several tribal pockets to pursue their course, Diploma in Community Health Practice. These young girls receive formal education, training and exposure through the community hospital located in this region. Their objective is to become community nurse and aspiration, serve the tribal community endlessly through the current healthcare practices. Upon discussions with these young aspirants, one might easily notice that their fluency in both the regional language, practices, belief systems, norms and traditions is extraordinarily high. They also are well aware and sound in the knowledge of modern medicine and it's practices. Ultimately resulting into higher acceptance into the community. Development that we see above is thus, subjective. Communities develop as per the resources available to them. Change is not binary concept rapid or slow, it is rather contextual. The context here is interesting. Indian or western, urban or rural, communities across the globe have providers & professionals that come from within their community. Thus, Guru Gunia or DCHP the acceptance depends on relatability, confidence and shared beliefs. Instead of questioning and labelling communities and practices ancient, primitive or dubious.

Let's try and understand the communities we so easily label. Where do they come from? What do they believe in? What are the resources available to them? Are we the society being just towards them? Let's revisit, review and revise our own narratives. Unlearning and relearning is the way forward. Change in perspective is the need of the hour.

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## ANNUAL GENERAL BODY MEETING



The Annual General Body Meeting conveyed on the 22nd of July, 2023 at the Centre for Youth and Social Development, Bhubaneswar

### EXPOSURE VISIT BY EKJUT



Members of the Ekjut NGO had a exposure visit at Swasthya Swaraj Society. During their time here, the team visited and observed the Ante Natal Care camps held in the villages.



### WORKSHOP ON NEWBORN CARE



As part of the delivery care and related trainings given to the clinical staff, we had Dr. Aleena Rodrigues conduct a workshop on newborn care. This is relevant to upskill the staff in the minimization of infection risks and enhancement of a newborn's early developments.

## INDEPENDANCE DAY CELEBRATION

The community health students lead the celebration at the Kanniguma hospital. The local government schools also saw our field staff participate in their flag hoisting ceremonies.



# THE KERPAI EXPERIENCE

'Don't you worry, you will get an Airtel 2G network', my senior said. Only Airtel 2G network, I said to myself. I packed my bags sluggishly to stay in a place with minimal network, limited transport, no fast food and more power cuts. But I experienced a beautiful village flourishing with streams, great soil, clean air, and hardworking families. A village untouched by development. In the village lives a small family catering to the health needs of the village. They are not related by blood but connected through their work and companionship. The clinic at the Kerpai hosts DCHP nurses, coordinators and field animators. Together, they guard the health of the citizens of Kerpai and the surrounding villages 24/7.

**Written by Rukmani Krishnamurthy**

Rukmani is a MSW(Public Health) student at TISS, Mumbai. She did her internship with Swasthya Swaraj in September, 2023

'They have fostered a warm and educative relationship. This also extends to the villagers. Walking with the interns through the streets, you hear 'ke kuruchu?' or 'kithe jauche?' and other such friendly exchanges. The nurse didis are always vigilant. Their days are filled with diagnosis, prescribing, lab work, sterilizing, suturing and registering. A call/ contact can occur any time of the day. The field animator has to go pick up the patient in an emergency. Day/ night, Light/ no light, nothing matters. There are places where a person can reach only by foot. The field animator dada proudly shared an incident of carrying a pregnant woman due delivery in a makeshift cot down the hill and across the stream to reach their jeep. 'Dada aapko nadi paar karne mein dar nahi lagta hai kya?' I asked. 'Pehle dar lagta tha. Abh karte karte darn nahi lag raha.. yahan ke bachche bi bade bade nadi paar kar lete hei..' they said.

The team is very dedicated to delivering care. During one of the Comprehensive Community Health Care camps, it started to rain as we descended the jeep to set up the place. The ground to be set was wet, and there was no other place to go. The team did not give up. They waited for more than an hour. As the rain reduced, the camp was set up on the veranda of a tusli saathi's house, and the pharmacy was set up in the jeep. The villagers were called; this rain would not stop the team's grit and determination! As time passed, the rain subsided (it accepted its defeat, yes), and many more villagers attended the camp. We were welcomed with a warm 'good morning' every day. We got to learn a lot from their experience in the field. The 'oh didi' and 'khaana khaao didi' are treasures buried in my heart.

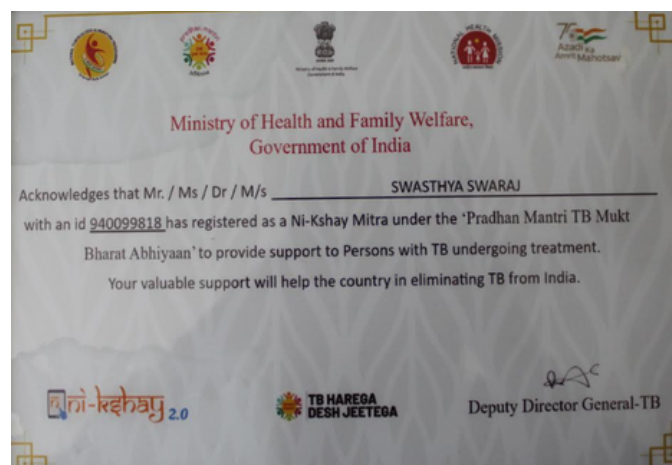
*Dedicated to Anjulatha didi, Naomi didi, Anju didi, Basanthi didi, Sushmi didi, Sanjoktha didi, Jasmine didi, Jayasankar dada, Ghasiram dada, Ruksingh dada and Jaisingh dada.*



# NEW AVENUES

## PRADHAN MANTRI TB MUKT BHARAT ABHIYAN

Swasthya Swaraj Society is now registered as a Ni-Kshay Mitra under the Pradhan Mantri TB Mukta Bharat Abhiyan, to support TB patients.



## THE CRECHE PROGRAMME



In tribal areas where child undernutrition levels are high, with financial support from Azim Premji Foundation, Swasthya Swaraj is starting creches for children of 7 months to 3 years of age. Starting with 10 creches now, 60 creches will be run by Swasthya Swaraj in the next one year.

## UPCOMING

## SCREENING CAMP BY SPINE FOUNDATION

The Spine Foundation of India, Mumbai in collaboration with Swasthya Swaraj Society will be conducting a spinal screening camp on 6th and 7th October, 2023.



### SPINE SCREENING CAMP

By Dr. Shekhar Bhojraj & Team  
(THE SPINE FOUNDATION, Mumbai)



Date: 6th to 7th October 2023  
Time: 10:00 AM to 3:00 PM  
Venue: Swasthya Swaraj Hospital,  
Kaniguma, Thummul Rampur Block,  
Kalahandi District



Did you suffer from any of these problem?

- Chronic back pain
- Chronic neck pain
- Back pain radiating to legs
- Neck pain radiating to arms
- Neurogenic claudication: Back or leg pain on walking- Cannot walk much
- Imbalance while walking
- Hand and /leg weakness
- Paresthesia / tingling sensation
- Paraplegia/ Quadriplegia: Paralysis or weakness of both legs or all four limbs

**Free Consultation by:**  
Spine Surgeons, Physiotherapist,  
Orthopedicians, Pain therapist.  
Minimal Laboratory Investigation

For more details contact:  
7751992700, 8457943884, 06670 295476  
(Monday to Saturday 10:00 am - 5:00 pm)  
Visit website:  
[www.swasthyaswaraj.org](http://www.swasthyaswaraj.org)  
[www.spinefoundation.org.in](http://www.spinefoundation.org.in)

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