



**Jan Swasthya Sahyog  
People's Health Support Group**

# **Acting, thinking and contributing to improve public health in rural central India**

**Bilaspur, Chhattisgarh**



## Jan Swasthya Sahyog (JSS)

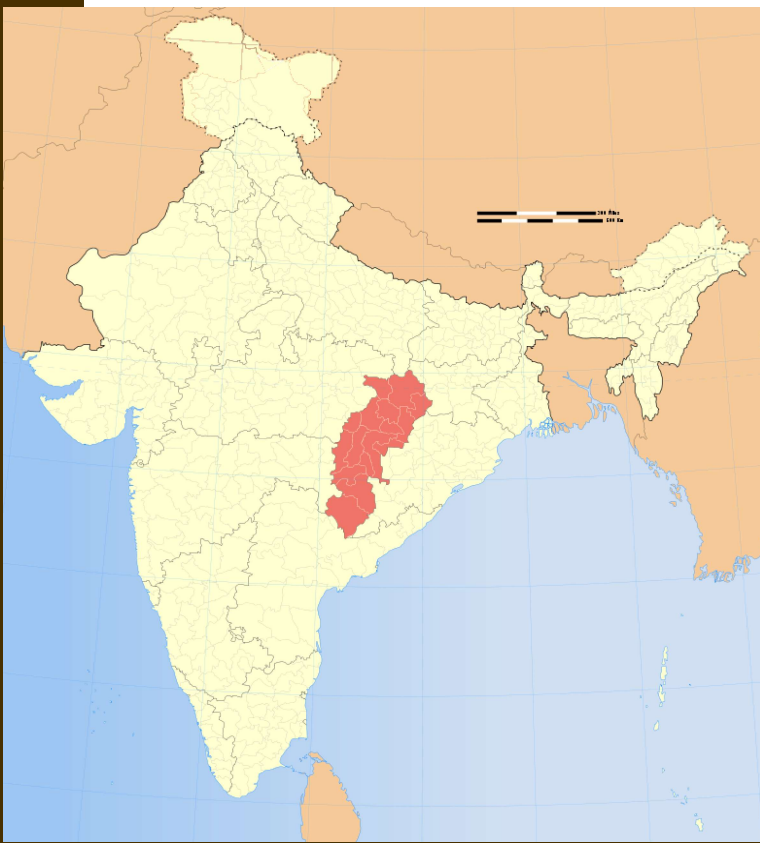
was established in 2000 by a group of socially conscious health and allied professionals, many of whom underwent training together at the All India Institute of Medical Sciences, New Delhi. Not satisfied with a techno-centric, hospital-based vision of tertiary healthcare, the group decided to base itself in a rural area and evolve a people-centric, community-based model of primary healthcare. The empowerment of village communities to prevent and treat illness has been central to the work of JSS.

**Working in rural India in collaboration with the poor as well as with governments and voluntary organizations, Jan Swasthya Sahyog strives to be part of the solution to the vast unaddressed problems of Rural Health.**

### Where we work

Bilaspur district, located in the central state of Chhattisgarh, is home to rich natural resources such as India's major coalfields and reserve forests and yet is considered 'backward' in developmental parlance. Dwindling

forest cover, small land holdings and predominantly unirrigated agriculture that is subject to the vagaries of the monsoons allow, at best, a subsistence level economy for the majority. Seasonal migration to other parts of India for work is an increasingly visible phenomenon of rural life. More than 60% of the people are either adivasis or dalits, often the poorest of the poor. Unsubsidised health care is not possible for most in the district.



## Our Mission

While providing complex care to patients of all ages with a broad diversity of medical and surgical problems, we at JSS strive to situate each patient in the broader social context of the marginalized tribal region of Chhattisgarh we serve. Through our innovative clinical care model, research, and advocacy work, we hope to show that low-cost, high quality community-based health care systems are possible even in the most resource-poor settings.

Fifteen years after the founding of JSS, we can say with humility that with the cooperation of village communities and hard work by the team, our vision is well on its way to becoming a reality.

## Our Activities

### Village Health Programme

Along with the main Referral Centre at Ganiyari, JSS has also been running a Village Health Programme, which provides preventive and curative services with the help of 110 village health workers (VHWs) in 54 tribal and forest-related villages of Kota and Lormi blocks of Bilaspur district. Selected by their respective villages, the VHWs are regularly trained at JSS in preventative and curative services for conditions including diarrhea, upper respiratory tract and ear infections, pneumonia, skin infections, and malaria. In addition, VHWs are involved in community-based initiatives targeting undernutrition, malaria, and tuberculosis. They are the key to the urgent surveillance and control of such diseases.



## Ganiyari Referral Health Centre and Hospital



Created from an abandoned irrigation colony, the Ganiyari hospital and health centre serves as the only affordable hospital for more than 2,500 villages, neighboring towns and even patients from the city of Bilaspur. The centre provides over 55,000 consultations and performs around 1,500 surgical procedures per year.

The centre runs an outpatient (OPD) clinic three days a week, where we see up to 400 patients per day. The focus of our activities is to provide rational care at the lowest possible cost without compromising on quality. Diseases commonly seen range from malaria, leprosy and tuberculosis to rheumatic heart disease and HIV, complex surgical problems, cancers and obstetric emergencies. Undernutrition is a common underlying factor in all our patients.

We have shown that dramatic reduction in costs of care can be achieved through rational choice of investigations and prescriptions, utilization of government services, procurement of generic drugs, and the passing on benefits of trade margins of other drugs to the patients.

### The JSS hospital at Ganiyari includes:

- 7 OPDs
- A 70 bed inpatient unit with an ICU
- Radiology services with computerized x-ray, ultrasound, and colored doppler
- 3 major and one minor operation theatres
- Labor room
- A low cost pharmacy
- A fully equipped laboratory





## Outreach Clinics

Every week, we run three outreach clinics with a full team of doctors, laboratory and pharmacy staff in three different subcentres located up to 60 km away from Ganiyari. Catering to isolated forest and forest-fringe villages, our clinics serve many people belonging to the Baiga tribe, a marginalized group often left out of modern services.

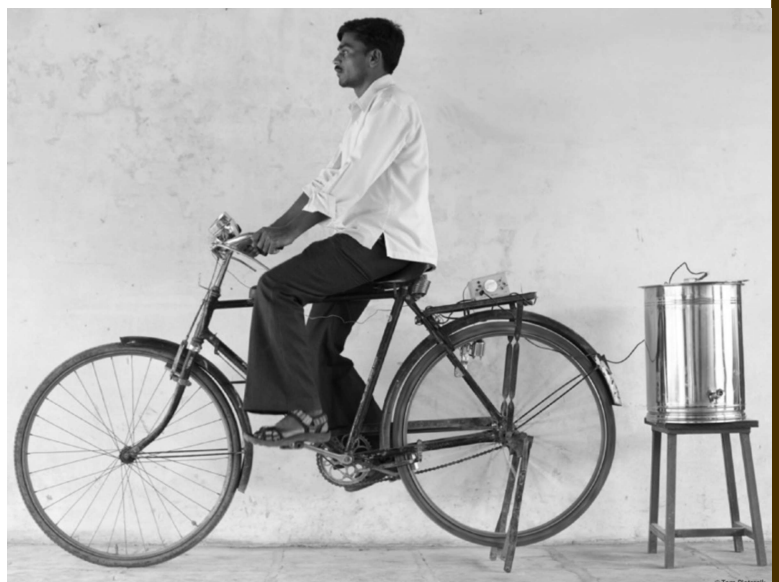
Our subcentre clinics retain many of the laboratory testing capabilities and medications available through the referral hospital. At the subcentres, individuals can access both acute and chronic care for a number of conditions and, if necessary, be referred to the hospital at Ganiyari for a higher level of medical care.

## Appropriate Technology

At Jan Swasthya Sahyog, we have been working for years on developing technologies for the health needs of people living in remote areas with limited resources. We strive to ensure that these technologies are as accurate, if not more, as the prevailing ones at the same time that we keep them simple, cheap, and highly functional in low-resource rural communities.

*Examples of original products developed at JSS:*

- Low cost hemoglobin electrophoresis system to detect sickle cell disease
- Capillary centrifuge for detection of anemia
- Water quality testing & UV-based water disinfection system
- Modular safe delivery kits
- Newborn sleeping bags to prevent hypothermia in pre-term babies
- Breath counter to help detect respiratory tract infections in infants & children



## Training

JSS believes strongly in the power of training to create ripples of change that transform lives. We conduct training programmes for a variety of health workers serving the rural communities of Chhattisgarh, including:

- Village Health Workers
- Senior Health Workers
- Traditional Birth Attendants (Dais)

In addition, JSS runs a nationally recognized Nursing School that trains girls from India's marginalized castes and tribes to become Auxiliary Nurse Midwives (ANM) and General Nurse Midwives (GNM). To date, 75 nurses have completed training successfully, and another 150 are currently in training.

Since 2012, Jan Swasthya Sahyog also offers a three-year postgraduate DNB course in Family Medicine course recognized by the National Board of Examinations (NBE) for post graduate doctors with an interest in working in rural India.



## Phulwari Crèches

Under nutrition is one of the leading causes of morbidity and mortality among our patient population. The cycle of under nutrition often starts young, with consequences that can last generations.



In order to address the problem of undernutrition in children, we have started a “Phulwari” programme, which aims to provide a crèche facility to all children 6 months to 3 years living in any of the 54 programme villages JSS serves. The programme supplies supplementary nutritional food and conducts activities to boost cognitive development among the children. JSS currently operates 83 phulwari programmes, serving over 1000 children.

## Research

Since its beginning, Jan Swasthya Sahyog has mandated the establishment of a strong research base to better understand the burden of various illnesses affecting the rural poor and advance public health goals in prioritized areas. Currently, there are more than 15 faculty and staff working on multiple projects of public health concern.

We combine epidemiological methods with an emphasis on understanding the social context behind our findings of incidence and prevalence. Our ultimate aim is to use the findings of our research to effect best practices and to bring awareness and change at the policy level.

### Research topics include:

- Tuberculosis and hunger: choice of drug regimes and the need for supplementary food
- Under 3 child nutrition
- Falciparum malaria control
- Need for blood in rural areas
- Burden of illnesses among rural poor
- Sickle cell disease management
- Diabetes among undernourished

## Advocacy through Action

We are dedicated to promoting and ensuring the health and rights of the people of rural Chhattisgarh. Too often the rural poor are caught in a web of structural violence that includes extreme poverty, poor education, and exasperated illness. JSS has been on various State Advisory Committees and the Planning Commission for secondary and tertiary level health care. Our work, participation in policy making and campaigning have led to better:

- Drug pricing and procurement
- Diagnostic and treatment for tuberculosis patients
- Antiretroviral therapy availability for HIV patients
- Food availability through Public Distribution System (PDS)
- Diagnosis, treatment and control of malaria
- Early childhood nutrition
- Radiotherapy and cancer treatment
- Universal health care

## And Miles to Go...

Our 15 years of work in these rural communities have allowed us to improve the quality of lives of people in the area, and we have made significant gains in terms of increasing survival and in preventing crushing debt from health care costs. However, we consider our successes a work in progress, as we continue to work toward the following goals:

- Sustainable expansion of the intensive care services to a higher level facility, with improved care for Tuberculosis, Leprosy, Diabetes, & Cancer
- Greater mobilisation of village communities around health issues, more advanced roles of nurses (ANM & GNM) in the community, and enhancement of the social and technical capabilities of VHWs
- Scaling up of initiatives in promising agricultural practices
- Decreasing rates of childhood malnutrition through integrated strategies
- Serving as a resource centre for building capacity of other non-governmental and Government staff in health related issues
- Sharing of key experiences and insights and analysis of public health problems in biomedical and social science journals, academic forums and with policy makers



## What our Visitors are Saying about JSS

“What lessons did I learn from Ganiyari? I learned about a set of dedicated professionals who work directly with people. **They see patients as partners, not as ‘beneficiaries’ who are a burden.** They develop lowcost technologies, use schoolgoing children as couriers to drop and pick up malaria slides to expedite treatment. As planners, we must ask ourselves whether we have the courage to replicate good practices like Ganiyari all over rural India.”

- *Syeda Hameed*

*Planning Commission Member, Government of India*

~

“What you four couples are doing is something remarkable and should act as an example for others to emulate.”

- *Lt Gen K.M. Seth*

*Governor of  
Chhattisgarh (Retd)*

~

“JSS is the definition of scholarship and action. They fight to address what

will cure people of their ailments today while never forgetting that the role of a health professional is to change the conditions and systems that lead to such preventable, needless human suffering.

As faculty at one of the leading medical institutions in the world, **I wish every aspiring health professional anywhere in the world would be exposed to the work at JSS.”**

- *Sriram Shamasunder MD, DTM&H*

*Associate Professor, University of California San Francisco*



© Tom Pietrasik

## How you can contribute

Life and death; chronic hunger; pain and disease. With no means to access medical attention outside of JSS, the beneficiaries of our work need your committed support, as an individual or as an organization.

Support can come in many forms. From contributing your time and skills to offering financial donations, you can choose to contribute toward subsidizing patient health care, supporting our infrastructural needs, training local staff, or increasing our research and technology.



*“ In thought faith, in deed courage,  
in life service. ”*

Personal donations are highly valued. All donations made in India are eligible for Income Tax benefits under the provisions of Section 80(G). We also accept contributions from overseas. U.S. donations can be made through AID or Friends of JSS (FOJSS) and are tax-deductible under section 501(c)(3) of the IRS code.

Donations can be made through our website at [www.jssbilaspur.org](http://www.jssbilaspur.org)

## Opportunities to Give

**Rs. 3200**  
**\$50**

will support a village health worker for 1 month

**Rs. 6400**  
**\$100**

will provide comprehensive care for one woman for the entire course of her pregnancy

**Rs. 16000**  
**\$250**

will cover a patient's 9-month tuberculosis treatment

**Rs. 32000**  
**\$500**

will support a multi-stage surgery for a poor patient

**Rs. 71000**  
**\$1100**

will support the primary health care of a village through the work of VHWs for an entire year

**Rs.320000**  
**\$5000**

will support the care of 10 patients with juvenile diabetes for 5 years

