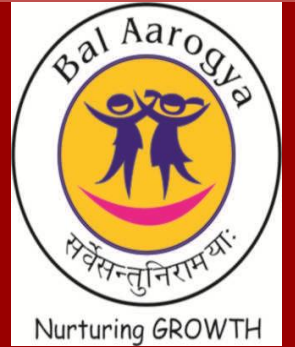


# NURTURING LIVES THROUGH PROJECT UTTHAN AND FACILITATING SKILL DEVELOPMENT



WWW.BAL AAROGYA.ORG

*Welfare, Care and  
Compassion*

2011

2017



**BAL AAROGYA**

## **A. ABOUT BAL AROGYA**

- i) Bal Aarogya is Registered under the Society's Registration Act of XXI of 1860 vide No. Society/09/2010 Dated 20<sup>th</sup> July 2010.
- ii) Bal Aarogya is Exempted under section 80G (VI) of the Income Tax Act 1961 vide order No. DIT (E) 2011-12/13-1423/2788 Dated 23.3.2011
- iii) Bal Aarogya is Registered under section 12A of the Income Tax Act 1961 vide order No.DIT (E) 12A/2011-12/dated 23.3.2011

## **B. AIMS AND OBJECTIVES OF BAL AROGYA**

- i) Respect for human rights is measured in the way society treats its women and children. Girls and boys have the same right to quality education but gender gap reveals that more girls than boys are out of school. Child vulnerability arises from many causes like low family income, lack of access to resources, migration of families, need for children to work and many more. This has an immediate impact on the issue of education and children in vulnerable circumstances are likely to disrupt their education. Girl children are at a higher risk as they face all of these problems and also the added disadvantage of gender discrimination.
- ii) Lack of education keeps girl children at a disadvantage throughout their lives. They are discriminated against and exploited. Education not only makes them more productive human beings but also increases their self confidence, competent and capable of standing up for their rights.
- iii) The right of children to free and compulsory education Act 2009 inter-alia provided that every child of the age of six to fourteen years shall have a right to free and compulsory education in a neighborhoods school till completion of elementary education. Unfortunately the implementations of these provisions are far from reality.

iv) Aims and Objectives of Bal Aarogya includes working for the cause and welfare for the children from the stage of infancy to adulthood with a view to providing them adequate facilities ,environment and opportunities for growth, development, health care and to avail of privileges under “Right to Education “and right to proper nourishment, nurturing and prevention from exploitation. Special attention has to be given to children with disability and those from rural and slum areas, and those belonging to poor, neglected strata of society such as SC/ST/OBC and girl child. Bal Aarogya will focus attention on children health, education including skill development and their overall development. It will also endeavor to open schools, hostels, coaching centers for the purpose of higher education and employability. It aims to deal with the issues and problems of adolescents and provide them right guidance and direction to grow.

### C. EXECUTIVE COMMITTEE OF BAL AAROGYA

The Executive Committee of Bal Aarogya includes 3 Medical Doctors out of 7 Members; 2 are Lady Doctors and one Male Doctor .This was with an intention to understand the health issues of children. Remaining 4 Members work in the field of social welfare with a view to making difference in the lives of neglected and marginalized persons in the society.

**D. WHY SCHOOL HEALTH CHECK- UP PROGRAM** :- Children are future of any society and any investment in their physical, mental and social well-being will not only enable them to realize their full potential but facilitate their holistic contribution to the social and economic growth of the nation in due course of time. It is the duty and responsibility of the family, society, school and the Govt. to provide **adequate facilities and congenial environment** for their growth and development. Health is the most important aspect for physical and mental development of a child including those living in the **rural, backward and slum areas**. Despite best efforts, there is much more expected to be done in the field of health care especially for children. It is very unfortunate that the mortality rate in India is one of the highest in the world. About 9 lakhs new born die in India every year i.e. one child dyeing every minute.

- i) Developing the human capital of nations especially the intellectual, social, mental and physical abilities of children and adolescence is fundamental to the improvement of the quality of life of the citizen's .Developing human capital is also critical for nations to enjoy political stability and economic growth. Nations that have invested in health and education of children have experienced corresponding economic development and growth.
- ii) Further more, education and health are inseparable. Student's health affects not only their cognitive performance in school but also their ability to attend and stay in school over the years. Those young people who attend primary schools have better chances of survival .To ensure attendance of children and to enhance their ability to learn, their health issues need to be addressed continuously. It is in this context regard that the public health system of a nation has an important role to play. Health agencies working with educational systems have the potential to reach billions of young people worldwide.
- iii) The tender formative years at school could well be the launching pad for addressing these concerns in the years to come. India is developing country; unfortunately due importance is not given to health care of children as required because of poverty and socio cultural milieu. A substantial number of school children from pediatric age to adolescent suffer from various diseases which can be prevented if diagnosed and treated early and preventive measures taken in time.
- iv) Availability of qualified Doctors in such areas and affordability are main constraints. In such a situation, children suffer physically and mentally in the absence of medical care affecting their studies adversely. Despite government concerns and guidelines, there is no compulsory system for the periodical medical checkup of school children including vaccination. Thus their families and school remain unaware of their physical and mental health problems unless these become serious.
- v) Govt. of India had launched a **School Health check- up Programme** but impact is negligible. The teaching about health is done while treating other subjects of the curriculum -such as physiology, hygiene and biology. The approach to these subjects is so academic that they are considered to be important from the 'examination point of view' and have very little effect on actual health practices and attitudes.

## E. OBJECTIVES OF SCHOOL HEALTH PROGRAMME:

- a) The promotion of positive health;
- b) The prevention of diseases;
- c) Early diagnosis, treatment and follow up of defects;
- d) Awakenning health consciousness in children:
- e) Health appraisal of school children and school personnel;
- f) Co-ordination with the home ,school on physical and mental health of children ;
- g) Creating healthy school environment;
- h) Prevention of communicable diseases;
- i) Awareness of First aid and emergency care
- j) Supporting school to create school health records.

## F. METHODOLOGY

Our team identified the schools located in the rural and backward areas for medical check-up of students in the age group of 6 years to 16 years by a Child Specialist and other paramedical staff.

The following individual Examination was carried out:

- Full body screening
- Medical history
- Physical examination
- Height & Weight measurement
- Blood Pressure
- Vision test
- Hearing test
- Blood Group



- Pelvic examination (in females only)
- On the basis of Medical examination and Investigations, Preventive Health Care measures are suggested
- Provide Health Card to each student containing report of check-up, advice on preventive measures, if any
- Provide medical treatment on need basis
- Create awareness about health & hygiene concept including HIV/AIDS
- Provide knowledge of human body parts and function
- Create awareness about possible adolescent's health problems & changes
- School authorities are associated and involved in the entire exercise of Medical Examination and health care measures programs

## **G.HEALTH CHECK-UP PROGRAMME BY BAL AAROGYA**

Bal Aarogya had been organizing health check up camps with the support of ONGC since last 4 years and had been serving the school children of Government schools in **Gujarat, Andhara Pradesh, Assam and Utrakhand**, We had medically examined and provided Health Check-up cards, medicine etc. to about **40,000** school children .

## **BRIEF REPORT OF 4 PROJECTS WITH FINDINGS ARE GIVEN BELOW:-**

- i) Health Check-up at Jorhat, Baorholla, Assam  
Financial year (2010-2011)  
Sponsored by  
Oil and Natural Gas Corporation Ltd

Medical checkup was carried out by a team comprising of one male and one female qualified Doctor having around 15-20 yrs of professional experience and one female

Health worker:

- |                     |               |          |
|---------------------|---------------|----------|
| 1. Dr Darpan Gogai  | Doctor        | M.B.B.S  |
| 2. Dr.Ranjit Chetia | Doctor        | M.B.B.S  |
| 3. Ms Krishna Mech  | Health worker | Graduate |

**Total No. of School Children Examined: - 2513**

**Total No. of School covered: 11**

No. of Students Screened	2513
No. of Male	1447
No. of Female	1066
No. of Students Provided with the Medicine	1763
No. of cases suffering from Mal-nutrition	1016
No. of cases having skin problem	117
No. of cases found to be anaemic	671
No. of cases suffering from low vision	84
No. of cases suffering from dental problem	213
No. of cases having hearing problem	23
No. of cases having respiratory problem	47
No. of students suffering from fever, cold & cough	192
No. of cases of stomotis	23

## OBSERVATIONS AND FINDINGS

Various other diseases were found in following numbers:

- 1- Neurological diseases- 2 cases suffering from nystagmus.
- 2- Dirty nails, long and dirty hair, wax in ears were found in many students.

3- Marks of BCG vaccination were present in all the students and history (as per child and school information) of having received DPT /Oral-Polio vaccination was present.

## TREATMENT

The following on the spot treatment was given to the students although not considered adequate in all cases.

1. All the students found Anemic were given anti-worm treatment (Single Dose) along with Iron tablets for 10 days.
2. Students found weak and underweight were given anti-worm treatment (Single Dose) along with B-Complex and Calcium tablets for 10 days.
3. Students found with enlarged lymph glands, throat infections, skin and chest infections were given oral - antibiotics, antibiotic skin creams, cough syrups and anti-inflammatory tablets.
4. Each school was given 15 nail cutters (good quality) to be given to class teacher.

## RECOMMENDATIONS

The findings warranted interventions for improved health behaviors and implied the need for the integration of healthy lifestyle programs into the school curriculum to meet the escalating demands of the students' role in health promotion and disease prevention. A set of specific recommendations can be discussed as under:

1. As most of the students were found to be underweight having short height, these students should be given de-worming treatment at least once in 6 months. In order to ensure healthy and clean behavior, hair and nail trimming should be properly monitored. It is suggested that one-period per week should be dedicated for the same. To ensure compliance by student's nail-cutters can also be made available in the schools.



2. Before and after mid-day meals, students should be made to wash their hands properly with soap and water to promote personal hygiene.
3. To ensure nutritious diet with added proteins, boiled soybean nuggets, groundnuts, boiled chana should be added at least once in a week in mid-day meals and parents should be encouraged by the schools to participate and monitor the diet being provided to the students.
4. Health education, proper eating habits, civic sense (like not-spitting, proper garbage disposal etc), respect of fellow-students and elders should be inculcated amongst the students through general awareness lectures at least once in 6 months to promote healthy living.
5. Extra-Curricular activities and sports should be encouraged amongst the Students to promote the concept of healthy body and mind.

#### **IMPRESSION:-**

From the statistics derived from the medical checkup programme, it can be concluded that large number of the primary school students of municipal schools/ Govt. schools/ Govt. aided schools in Baorholla, as per ICMR Standards and BMI are under-weight and have less height. Cases of obesity and overweight students were not seen which is a common trend now-a-days in our society

More number of girls students are anemic as compared to the boy students which is a cause of concern for the girl child.

#### **II) MEDICAL CHECKUP OF SCHOOL STUDENTS OF ANKLESHWAR, GUJRAT**

Financial year-2010-2011

Sponsored by

Oil and Natural Gas Corporation Ltd. Ankleshwar, District Bharuch, Gujrat

Medical checkup was carried out by a team comprising of one male and one female qualified doctor having around 15-20 years of professional experience and one female attendant:

- |                           |           |                 |
|---------------------------|-----------|-----------------|
| 1. Dr P.K. Maheshwari     | Doctor    | M.B.B.S , C.I.S |
| 2. Dr. (Ms ) Shashi Patel | Doctor    | M.B.B.S (D.G.O) |
| 3. Ms Hema-Patel          | Assistant | Graduate        |

**Total No. of School Children Examined: - 5059**

**Total No. of School covered: 19**

No. of Students Screened	5059
No. of Male	2968
No. of Female	2091
No. of Students Provided with the Medicine	3683
No. of cases suffering from Mal-nutrition	2751
No. of cases having skin problem disease	347
No. of cases found to be anaemic	1556
No. of cases suffering from low vision	139
No. of cases suffering from dental problem	289
No. of cases having hearing problem	47
No. of cases having respiratory problem	62
No. of students suffering from fever, cold & cough	657
No. of cases of stomotitis	120

## TREATMENT

The following on the spot treatment was given to the students although not considered adequate in all cases.

1. All the students found Anemic were given anti-worm treatment (Single Dose) along with Iron tablets for 7- 10 days.
2. Students found weak and underweight were given anti-worm treatment (Single Dose) along with B-Complex and Calcium tablets for 15 days.
3. Students found with enlarged lymph glands, throat infections, skin and chest infections were given oral - antibiotics, antibiotic skin creams, cough syrups and anti-inflammatory tablets.
4. Each school was give 40 nail cutters (good quality) to be given to class Teachers.

## RECOMMENDATIONS

The findings warranted interventions for improved health behaviors and implied the need for the integration of healthy lifestyle programs into the school curriculum to meet the escalating demands of the students' role in health promotion and disease prevention.

## III) MEDICAL CHECKUP OF SCHOOL STUDENTS OF KAKINADA ANDHRA PRADESH

Financial year (2012-2013)

Sponsored by

Oil and Natural Gas Corporation Ltd.Kakinada, Andhra Pradesh

Medical checkup was carried out by a team comprising of one male and one female qualified Doctor having around 15-20 yrs of professional experience and one female attendant:

Dr (M.S) Sarita Kishore	Doctor	M.B.B.S, C.I.S
1. Dr. Neil Kishore	Doctor	M.B.B.S (D.G.O)

**Total No. of School Children Examined: - 5015**

**Total No. of School covered: 18**

No. of Students Screened	5015
No. of Male	2379
No. of Female	2636
No. of Students Provided with the Medicine	3935
No. of cases suffering from Mal-nutrition	2158
No. of cases having skin problem	219
No. of cases found to be anaemic	1827
No. of cases suffering from low vision	152
No. of cases suffering from dental problem	213
No. of cases having hearing problem	53
No. of cases having respiratory problem	67
No. of students suffering from fever, cold & cough	579
No. of cases of stomotitis	139

## OBSERVATION AND FINDINGS

Various other diseases were found in following numbers:

- 1- Neurological diseases- 2 cases suffering from nystagmus.
- 2- Dirty nails, long and dirty hair, wax in ears were found in many students.
- 3- Marks of BCG vaccination were present in all the students and history (as per child and school information) of having received DPT /Oral-Polio vaccination was present.

## TREATMENT

The following on the spot treatment was given to the students although not considered adequate in all cases.

1. All the students found Anemic were given anti-worm treatment (Single Dose) along with Iron tablets for 10 days.
2. Students found weak and underweight were given anti-worm treatment (Single Dose) along with B-Complex and Calcium tablets for 10 days.
3. Students found with enlarged lymph glands, throat infections, skin and chest infections were given oral - antibiotics, antibiotic skin creams, cough syrups and anti-inflammatory tablets.
4. Each school was give 15 nail cutters (good quality) to be given to class Teachers.

## RECOMMENDATIONS

The findings warranted interventions for improved health behaviors and implied the need for the integration of healthy lifestyle programs into the school curriculum to meet the escalating demands of the students' role in health promotion and disease prevention. A set of specific recommendations can be discussed as under:

1. As most of the students were found to be underweight having short height, these students should be given de-worming treatment at least once in 6 months. In order to ensure healthy and clean behaviour, hair and nail trimming should be properly monitored. It is suggested that one-period per week should be dedicated for the same. To ensure compliance by student's nail-cutters can also be made available in the schools.
2. Before and after mid-day meals, students should be made to wash their hands properly with soap and water to promote personal hygiene.
3. To ensure nutritious diet with added proteins, boiled soybean nuggets, groundnuts, boiled chana should be added at least once in a week in mid-day

meals and parents should be encouraged by the schools to participate and monitor the diet being provided to the students.

4. Health education, proper eating habits, civic sense (like not-spitting, proper garbage disposal etc), respect of fellow-students and elders should be inculcated amongst the students through general awareness lectures at least once in 6 months to promote healthy living.
5. Extra-Curricular activities and sports should be encouraged amongst the Students to promote the concept of healthy body and mind.

### **IMPRESSION:-**

From the statistics derived from the medical checkup programme, it can be concluded that large number of the primary school students of municipal schools/ Govt. schools/ Govt. aided schools in Kakinada, as per ICMR Standards and BMI are under-weight and have less height. Cases of obesity and overweight students were not seen which is a common trend now-a-days in our society

More number of girl students are anemic as compared to the boy students which is a cause of concern for the girl child.

### **FOLLOW UP**

Medical report card has been given to each student through their class teacher to be seen and signed by their parents. One session will be held in each school to sensitize about cleanliness, good health discipline and inculcating good habit. A copy of this report will be given to each school, district officer, education officer, health officer and ONGC.

### **IV) MEDICAL CHECKUP OF SCHOOL STUDENTS AT HAZIRA, GUJARAT**

Financial year (2013-2014)

Sponsored by



## Oil and Natural Gas Corporation Ltd.

Medical checkup was carried out by a team comprising of one male and one female qualified doctor having around 10 -20 yrs of professional experience and one female

Social worker:

- |                             |               |                     |
|-----------------------------|---------------|---------------------|
| 1. Dr Pranav Parmar         | Doctor        | M.B.B.S Physician   |
| 2. Dr. (Ms ) Sumaiya Sheikh | Doctor        | M.B.B.S (Physician) |
| 3. Ms Rakhi Ben             | Social Worker | M.S.W               |

**Total No. of School Children Examined: 4064**

**Total No. of Schools Covered : 18**

No. of Students Screened	4064
No. of Male	2245
No. of Female	1819
No. of Students Provided with the Medicine	2683
No. of cases suffering from Mal-nutrition	1048
No. of cases having skin problem	148
No. of cases found to be anaemic	871
No. of cases suffering from low vision	97
No. of cases suffering from dental problem	186
No. of cases having hearing problem	45
No. of cases having respiratory problem	57
No. of students suffering from fever, cold & cough	457
No. of cases of stomotitis	62

The main objectives of 'Bal Aarogya project' undertaken on behalf of ONGC Hazira Plant were as follows:-

- i) Creating Health Awareness in the minds of children, school authorities and parents.
- ii) To find out the details of vaccinations taken by each students
- iii) Systemic examination by way of height, weight, chest, pulse, body mass index and obesity.
- iv) To check up the general health condition of the child.
- v) Specific examination and checkup with reference to Anemia, Jaundice, Lymph Glands, Skin Infection, Tonsils Enlarged, Dental Caries, Gum Infection Eye Vision, Ear-Ear Drum and Hearing.
- vi) Diagnosis of disease of each child.
- vii) Recommendation of treatment
- viii) Medicine/treatment of each child suffering from any disease. For this purpose, a health check up card was designed, a copy of which is enclosed.

## OBSEVATIONS AND FINDINGS

The following were the main problems found in the children:-

- Anaemia
- Skin Disease
- Suffering from fever
- Worm infestation
- Diarrhea and dysentery
- Cough and cold
- Distant vision problem
- Stomatitis

## CONCLUSION

1. Children were also sensitized towards moral values and discipline such as cleanliness awareness, honesty, respect to parents, seriousness about study, participation in extracurricular activities, helping attitude, environment protection, sensitive towards those suffering, courage and commitment to achieving success and expressing gratitude to Almighty.

2. The project has been completed with the examination of 4064 students, 1726 students were identified with different diseases and symptoms and were either referred as well as provided with the medicine.

## H. UTTHAN PROJECT

Bal Aarogya has also launched project “UTTHAN” which is designed to develop youth mentally, psychologically and emotionally with a view to increase employability and make them better citizens of tomorrow.

It believes that educate a man you educate a person .Educate a woman you educate a family. Men make road, but it is the women who teach children to walk on them”.

### ITS AIMS AND OBJECTIVES

- a- To support girls emotionally, mentally and financially to overcome hurdles to focus on their studies.
- b- To function as mentor to listen to the individual problems at home and in their studies and help them out.
- c- To develop them mentally physically, emotionally and educationally to become bold, face the adverse situation and become self supporting and confident to empower themselves.
- d- To organize their coaching subject wise to help them to overcome their problems in studies.
- e- Depending upon their individual needs to provide books, copies, stationary, bag uniform, clothes, shoes etc.
- f- Mentors to meet students periodically i.e. twice in a week to assess their progress and sort out their problems if any and also meeting with their parents and parents in school and get feedback.

- g- To organize aptitude test to assess and identify their interest and talent and provide opportunities for growth.
- h- To overall objective is to support girls in their studies to overcome hassles of family environment and develop them to be self confident, bold and self reliant by developing their personality, attitude and perception.

## **H. COMPUTER EDUCATION PROGRAMME FOR NEEDY AND POOR BOYS & GIRLS**

Computer now has become a development partner of every individual. Computer technology is shaping the life of youths in global scenario. Thus keeping in mind the importance and necessity of computers in day to day life .Bal Aarogya has started project 'Utthan' to deliver the knowledge of computer to the most deprived and under privileged section of the society i.e.: SC/ST, Backward, under privileged, minorities etc. the reason is to provide computer education free of cost for their development and for the development of the whole society.

Bal Aarogya has established a computer centre in slum areas of North East Delhi of Sunder Nagari which shares its boundaries with Uttar Pradesh. The focus is to reach out to the maximum number of youths and provide them skills for their future development. The focus is on girls as they will be the backbone of their families in future. If they are skilled the coming generation more likely to be educated and skilled. Centre has 20 computers and the basic knowledge of computer is being provided to boys and girls. This entire area shares its boundaries with other backward areas like Nand Nagari, Tahirpur, Harsh Vihar, it falls within the reach of youths. Computer education and life skill training is almost free with a token fee of Rs.100 per month to sustain their interest.

## I. TRACK RECORD OF BAL AROGYA

### DETAILS OF STATEWISE PROJECT DONE BY BAL AROGYA (NGO)

YEAR	AREA/DISTRICT	STATE	BENEFICIARIES
2010-11	Jorhat and Golaghat- Health Check up for School Children	Assam	5000
2010-11	Ankleshwar and Bharuch- Health Check up for School Children	Gujarat	5000
2010-11	Rajahmundry, East Godavari- Health Check up for School Children	Andra Pradesh	5000
2010-11	Uran, Raigarh- Health Check up for School Children	Maharashtra	1000
2011-12	Hazira, Surat- Health Check up for School Children (Also given woolens)	Gujarat	2000
2011-12	Shahjahapur- Health Check up for School Children	U.P	500
2011-12	Ahmedabad- Health Check up for School Children	Gujarat	5000
2012-13	Sivasagar- Health Check up for School Children	Assam	5000
2012-13	Hazaribagh / Bokaro- Health Check up for School Children (Also given woolens)	Jharkhand	500
2012-13	Dehradun- Health Check up for School Children	Uttrakhand	2000
2012-13	Kakinada - Health Check up for School Children	A.P	5000
2013-14	Hazira - Health Check up for School Children	Gujarat	4000
2015-16	East Delhi, Sundar Nagri – Skill development Computer Education Program	Delhi	300
2015-16	Rajahmundry- Health Check up for School Children	A.P	5000
2015-16 & 16-17	Dehradun- Health Check up for School Children	Uttrakhand	5034
2016-17	Rajahmundry- Health Check up for School Children	A.P	5557
2016-17	Ankleshwar- Health Check up for School Children	Gujarat	5003
2016-17	International Day of Yoga at Indra Gandhi Stadium 21 <sup>st</sup> June,2016	, New Delhi	500
2016-17	IOC- Eye Screening Camp, Barauni	Bihar	411
		Total	61,805



# Photo Gallery













