

# Report on PGDDHM Contact Programme-3<sup>rd</sup> Spell

## Batch Second (2010-11)

(16<sup>th</sup> to 22<sup>nd</sup> May 2011)

We feel glad to present this report on the Contact Programme-3rd Spell which was organized successfully for the students of Second Batch (2010-11) of Post Graduate Diploma in District Health Management (PGDDHM) from 16<sup>th</sup> to 22<sup>nd</sup> May 2011 at NHSRC, New Delhi. We have given below a day wise account of the sessions held during the contact programme.

### Day First

The first two sessions out four were facilitated by Dr. Vandana Prasad, National Convener PHRN and Academic Counselor PGDDHM Programme. During her first session which was on '**Epidemic Management**' she defined epidemiology and called it the basic science of public health. Dr. Vandana also gave a historical account of epidemics and talked about the epidemics and their importance in public health. The speaker discussed about the disease surveillance programme at various level and its importance in the management of epidemics.

Dr. Vandana facilitated her second session on '**Issues of Governance, Health Sector Reform**' and Managing Change'. During her session she emphasized on defining the subject of change, deciding on the directions of change and building confidence.

The third and fourth sessions were based on a **group activity on Epidemic Management** was facilitated by Dr. Ganapathy and Dr. Saroj Kant Choudhary in which the participants were given a hypothetical situation of diarrhea outbreak in three adjoining villages supported by data, tables and scatter diagram. The participants were divided into four groups and asked to work on the probable causes of the diarrhea outbreak and suggest remedial measures to contain the outbreak. The exercise was a brainstorming session to find the probable cause of the outbreak for the participants followed by the presentation of their findings..

### Day Second

The first session of the day was facilitated by Ms. Ifat Hamid on '**MTP and PCPNDT Acts.**' Ms. Ifat in her session first gave a state wise detail of child ratio in India. She also talked about various reasons affecting the girl child ratio in the country. Then she explained the PC & PNDT Act. She also drew the difference between MTP and PCPNDT Act.

Session second and third were facilitated by Mr. Venkatesh Nayak. In his first session Mr. Nayak spoke on the '**Right to Health: Concept and Linkages with Human Right and Legal Recognition of Health Rights.**' Mr. Nayak first defined the rights then, discussed the directive principal given in the constitution of India. He also spoke on the

International Declaration of Human Rights and National Human Rights Commission of India. Then, he specifically explained various health rights given under human rights.

In his second session which was on '**Right to Information (RTI)** Mr. Nayak explained the various provisions given under RTI Act. He called it a tool to end the corruption prevailing specially in the governments departments. He also shared various experiences with the students regarding the RTI filed to various departments. He also guided the students that how to seek information under the RTI Act.

The last and the fourth session were based on quarries and discussion on the topic were discussed during second and third sessions.

### Day Third

The day started with the session on "**Issues of Tribal Development, Hunger, Nutrition and Food security**". The resource person for the session was Dr. Saroj Kant Choudhary who described the nature and characteristics of tribe; classification of tribe; difference between growth and development; Poverty and indicators to measure poverty; how vulnerability and failure of entitlement exchange leads to a vicious cycle of poverty, food insecurity and malnutrition which is so prevalent in tribal population.

The second session was based on "**tribal health and communicable diseases**" which was also taken by Dr. Saroj Kant Choudhary. The session started with the definition of health and disease and how the tribal populations are vulnerable to diseases in particular. During the session, the definition and types of communicable diseases were discussed with the participant students and the impact of the communicable diseases on tribal population were shared with the participants with special focus on malaria, tuberculosis, leprosy and other vector borne diseases. In addition to this, the issues related to tribal population were highlighted and how the issues can be addressed in more efficient manner. At the conclusion, Log Frame Approach and Making District Health Action Plan were discussed with the students.

This was followed by session third and fourth which was based on a group activity **making District Health Action Plan** with focus on tribal population. All the participants were divided into four groups and each group selected a topic of their interest and presented their District Health Action Plan with focus on Infrastructure, Human Resources, Logistics and Service delivery as per IPHS norms.

### Day Four

On the day fourth the first two session were facilitated by Dr. Rajib Dasgupta Associate Professor, Centre for Social and Community Medicine JNU, New Delhi. Dr. Dasgupta facilitated his first session on '**Issues of Urban Health and Special Vulnerability**'. During his session he spoke on Urban area, cities, slums and determinants of urban health. He spoke on the various vulnerable groups among the urban population and unique problems of urban poor.

Dr. Dasgupta facilitated his next session on **'Urban Health in Policies, Model Initiatives and Urban Health in District Plan'** Dr. Dasgupta started his session with a definition of an urban area and the classification of cities on the basis of population. He shared about the trend in migration. He also discussed various policies and programmes in urban health with participants.

During session third and fourth Dr. Saroj Kant Choudhary conducted a **group activity on formulating annual project proposal** on District Health Care System, Human Resources Requirement, Urban Health Planning and IEC Activity for HIV/AIDS Awareness Programme. All the students were divided in four different groups. Each group formulated a project proposal on one of the topics/themes given above which followed the presentation from these four groups.

#### Day Five

On the fifth day of the Contact Programme a **field visit** was conducted to the **Institute of Human Behaviour and Allied Sciences (IHBAS)** in order to give a field exposure to the participants. First the students were taken to the various units of the IHBAS by Dr. Amit Khanna, a senior resident there. Then Prof. Nimsesh G. Desai, Director IHBAS organized a **session on Mental health** for the participants.

During his session Prof. Desai gave a historical background of the IHBAS. He also told about the various services and programmes were being provided at the Institute. Prof. Desai told that approach has changed to treat the patients from the one existing previously. He told that earlier more and more patients were admitted and family members of the patients did not have any role in the treatment or recovery of the patient. But now a days only 1% from those who come in the OPD are admitted. The family member also have also developed a sense of responsibility towards the patient.

#### Day Six

In the first session the participants made **presentation about various unit of IHBAS and various activities** the students had observed during the field visit. The four groups of participants presented on different topics. Dr. Saroj also made a small presentation on mental illnesses and mental disorders. During his presentation he also told about the sign and symptoms of mental disorders and how the family members and others can play a role in early intervention.

In the second session Prof. S.B. Arora, Coordinator, PGDDHM, IGNOU had **interaction** with the participants regarding the **Term-end Theory and Practical Examination**. He told that there will be three papers in the Term-end Theory Examination. Each paper will have two courses out of six (given in the syllabus). The question will comprise long answer type, short answer type and short note.

About Term-end Practical Examination Prof. Arora told that the Practical Exam will be of one day which will comprise a written exam and viva-voce. These students will be also assessed on the assignments they have done in their logbooks because the logbooks also carries marks.

Session third and fourth of the day were facilitated by Dr. Kaushal Kumar Sharma on **'Disaster Management.'** He first defined the disaster, types of disaster. He spoke on the disaster response and preparedness. He also describe the institutional setup in the country who play significant role in disaster management and mitigation. Dr. Sharma also spoke on the National Disaster Management Policy. Then he talked about the health and sanitation in relation to the disaster management. He also shared with students his experience working at district level for disaster management and also discussed the District Disaster Management Plan.

### Day Seven

It was the seventh and the last day of the contact programme. The first session of the day was facilitated by Dr. Abhilash Malik on **'Approach to Non-communicable Diseases from Public Health Perspective.'** Dr. Malik during his session defined the non-communicable diseases, described various types of non-communicable diseases their sign and symptoms and management.

The second and third session were facilitated by Mr. Arun Nair. Mr. Arun Nair Facilitated his first session on **'Health Care Financing: Community Risk Pooling and Health Insurance.'** During his session Mr. Nair told about the various components of health insurance. He talked about the premium role of the providers. He also discussed a case study on RSBY with the participants.

Mr. Nair facilitated his second session on **'Models of Partnership in Health (PPP).'** He started his session with the role of private sector in health. He talked about engaging private sector in the health. He told that if the public-private partnership goes into right direction than the unmet needs of the thousands can be addressed. Mr. Nair told the marginalized/poor people should be benefited from this partnership. Mechanism should be devised to make the public-private partnership successful and there should be a good monitoring system to monitor the schemes and programmes. Mr. Nair also talked about the challenges related to public-private partnership.

The last and fourth session of the day was taken by Mr. Ajay Kumar Chawariya. During his session Mr. Chawariya had **discussion on the logbook** with the participants and also evaluated the field work assignments.