PREScriptions: Slum children need better care

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Ask anyone where the worst health conditions in the country exist, and they will say rural India. But this isn’t true. Urban slum dwelling communities are probably worse off.

Even though city slum dwellers account for one fourth of the country’s poor population, less than 4 per cent of the government’s budget has been allotted for urban healthcare.

This group of people live in an environment where infections fester and malnutrition among kids is rampant. Lack of clean drinking water, nutritious food and poor uptake of nutrients caused by stomach parasites lead to all kinds of deficiencies and diseases.
Most kids don’t even have an adult care provider with proper knowledge of hygiene or nutrition.

Health camps and programmes run by NGOs and others have improved matters in some slum pockets. But it's the private, non-profit schools in the city that play the biggest role in improving the health status of slum dwelling kids.

Set up by well-meaning individuals, NGOs and charities, these schools are run under the trees and in temporary premises, providing a haven for kids whose lives need uplifting. They give students a comprehensive health education, mid-day meals, and offer preventive and curative health services.

Though government schools have routine health check-ups and de-worming regimes, they lack the resources and manpower to go beyond the basics. Sadly, however, thousands of such private, non-profit schools have been affected adversely by the Right to Education (RTE) act since April 2014.

More than 4 million children have dropped out of these schools, which are now deemed “illegal”. One such school is Deepalaya School in Sanjay Colony, Okhla, which has catered to the slum dwelling children in the area since 1992. Today this school is threatened with closure, on the basis that it doesn’t meet some provisions of the RTE, such as owning the land it operates on.

Infrastructure requirements that focus disproportionately on matters such as boundary walls and outdoor playgrounds rather than human resources have forced many similar schools to close down.

"Many small schools can’t afford to meet the requirements of the RTE,” says Shikha Pal, Manager of Deepalaya Education Programme and former principal of the Sanjay Colony branch.

Ironically, the Deepalaya School has better infrastructure and equipment than the neighbouring government school: There is a special emphasis on girls’ education and special-needs children, one classroom for every 25 children with smart audio-visual aids, ramps for differently-abled children, separate toilets for girls and boys, clean drinking water, and a library full of books.

Health and hygiene education is a vital part of the curriculum. A daily check-up of the nails and hair, a hand-washing programme, and a partnership with Saket city hospital for health monitoring, check-ups and treatment for children, are all measures that made this school a model for others.

“The girls benefited from having separate toilets, that enabled them safety and privacy," says Shikha.

Interactions with parents to guide them on the nutritional requirements of children were crucial to the healthy living programme at the school.

Shutting down an educational institution of this kind, which is a boon for underprivileged children, is a short-sighted move and highlights the lack of provision for private, charitable schools in the RTE.

Closer examination and modification of the RTE is essential to prevent this from happening, and The India Institute, a non-profit think tank is running a “Save Deepalaya School” campaign to this end.

The intention is to salvage the school and persuade the government to issue an ordinance to exempt schools in slums and villages from some clauses of the RTE.

“The recognition criteria in the Delhi School Education Act and rules must be made reasonable to enable quality low cost private schools such as Deepalaya to operate in Delhi. Till this happens, policies and reality will not meet,” declares Baladevan Rangaraju, Director and co-founder, Indian Institute.

Boosting precision medicine

It's the era of personalised medicine and treatments that cater to individual needs. Personalised cancer care, for example, individualises treatment based on certain biological characteristics of a patient and is fast gaining widespread acceptability in top hospitals across the country.

Such advances in medicine require enormous research investment. The good news is that President Barack Obama recently announced his decision to invest $215 million into “precision medicine research,” ensuring this branch of medicine has a bright future.

Curing heart disease in kids
The Vaswanis’ ordeal began at the time of their baby daughter Janaya’s birth, when the pediatrician told them that she was born with a single ventricle instead of two.

Single Ventricle is a congenital heart disease that affects the ability of the heart to pump pure blood and leads to cyanosis, a blueness of the body apparent in the lips, tongue and fingertips.

“Without a series of surgeries, her chances of survival were slim, as the condition results in a progressive lack of oxygen supply to the body and brain,” says Dr Krishna S Iyer, Executive Director, Pediatric & Congenital Heart Surgery, Fortis Escorts Heart Institute.

Janaya was 14 months old when she underwent the first stage of the surgery, called the ‘bi-directional Glenn procedure.’ The second stage, ‘Fontan completion’ was done last month. Today this five-year-old can lead a normal, active life for the first time.

“Cardiac surgery can improve the quality of life in children with complex heart conditions like Janaya’s,” says Dr Iyer.

Every year about 250,000 children in India are born with Congenital Heart Disease (CHD). One-third do not survive beyond the first year unless they are diagnosed and treated in time.

“Technological advancements have provided hope for children diagnosed with CHD, who can expect to have better health through timely surgical procedures,” says Dr Iyer.

Beyond the weighing scale

Here’s a gadget that will thrill fitness freaks and scare the rest of us. Health Appliance Company Tanita has launched a new set of home scales to measure more than your weight.

The Tanita BC- 731 will divulge all sorts of information about your body composition: your BMI, your bone mass, your level of visceral fat, your body fat percentage and your metabolic age.