



Adivasi
Munnetra
Sangam



Visva Bharati Vidyodaya Trust



ASHWINI



just change india



COVID RELIEF

JUNE 2021



VACCINATION EFFORTS

The government of Tamil Nadu initiated one of the largest vaccination drives for the adivasis in the Nilgiris that aimed to vaccinate all the eligible adults above 18 years of age. The initial efforts from the primary health center (PHC) lead movement for vaccinations didn't find much success as less than 10% of the adivasis turned up. The district administration of the Nilgiris then sought help from the grassroot organizations like ours along with NAWA (Nilgiris Adivasi Welfare Association) and NWTWS (Nilgiris Wayanad Tribal Welfare Society).

With the coordinated efforts from the animators, leaders of AMS (Adivasi Munnetra Sangam), and ASHWINI community health team, the turnout for vaccination was tremendous. This was a real testimony for the trust that the community had in our team and was well acknowledged by the government. Soon, the vaccination drive was scheduled based on our suggestions that effectively helped in covering all the adivasi hamlets.

11,336 out of eligible 12,752 adivasis received at least one dose of COVID-19 vaccine in less than two months and this is a proud moment for us!

HEAR FROM OUR TEAM



Meet Bindhu, health animator

“When we go for screening visits in a few villages, they are skeptical in letting us in since we go to many places and they fear we might be carriers of covid-19. Since many villages are affected with covid, they are aware of the precautions that need to be taken. There is a fear that if they tested positive, they might be taken away by the government; but they also call us when they face symptoms to prevent spreading it to others. In Mudirakolly village, we went to vaccinate three times in batches. In the first batch, I remember one old grandmother who shut her door and refused to take the vaccine. In the second batch, we vaccinated about 42 people or so. On the third drive, we were able to vaccinate everyone including the grandmother who came by herself and requested to get her dose. Seeing the rest of the village get vaccines gave her the confidence as well”



Meet Karunakaran, community animator

"Few people are scared about getting vaccines, mainly because of the number of fake messages that are doing rounds on Whatsapp. These include rumors from their relatives in Kerala and Karnataka who attribute deaths due to other causes to covid vaccines. It takes explaining the importance and need of vaccines and debunking the myths. I found a few adivasis from Bettakurumba tribe afraid to take vaccines, but when I showed them videos of Bettakurumbas from other villages talking about their experience in receiving vaccine, it worked. Sometimes the number of people who turn up for vaccination despite our efforts might be less. But if not for our team, even that small number would have never turned up.”





SCREENING DRIVES

In the beginning of May, there were two adivasis from the same village who acquired severe COVID-19 infection who had to be referred to a tertiary center, but eventually succumbed. Diagnosing patients in their early stages of infection was crucial both to prevent complications and spread of COVID-19. Our area teams that are well connected with the village level health volunteers played a prominent role in identifying villages with probable COVID infection. The COVID Command Centre made regular phone calls to various villages to assess the situation and informed the COVID Coordination Team.

We keep it as our priority to screen the villages where there are people reporting symptoms, but as a rule of thumb, we cover all the villages we work with. The community also directly reached out to the health animators in many instances if they are showing symptoms and they require assistance.

Ever since the initiation of screening visits, there has been just one mortality in over two months and a recovery rate of 99%

The screening visits are conducted on a daily basis. The team consists of the health animators, village health guides, area leaders, the staff, and a doctor. Every individual in the village is seen by the team to assess for symptoms of COVID and gets the oxygen saturation checked. The patients with suspicion of COVID infection get their throat and nasal swabs done. We have also started using Rapid Antigen Tests which give us results in 15-20 minutes. With such screening drives, we have been successfully detecting patients in their early stages of covid infections thus reducing the complications and spread.

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HEAR FROM OUR TEAM



Meet Dr. Alisha. She shares her experience of screening and testing in villages

It was 6:30 pm. After a long tiring day of screening for COVID, we were almost ready to leave the last village. The animator said, “there’s one more lady to screen”. “Okay, no big deal.” I thought. Will just check her saturation and then we can leave.

In the distance, a little old lady was walking up the rolling hill. For about 10 minutes we silently and patiently watched her walk up to us. The birds chirped and the trees ruffled in the background.

Finally, she reached us and lent out her finger. Her saturation was normal. But she said she had a cough.

Now we needed to test her.

We walked back down the hill to her house to get her Aadhar card.

The next day the COVID test report came: positive.

COVID really has spread to the last mile.



We met another man in the village during one of our screening drives. He was sitting amongst ten playful children, comfortable, not a care in the world. We almost walked right by him. When he stretched out his finger for us to check his saturation, it showed 90%. As we observed him for a while longer, he started to cough.

We tested him for covid, it came positive that evening, the animators arranged for him to come to the hospital the next day. He was on oxygen for 3 days, got better and now he’s back at home with the ten playful children.”

Dr.Mrudula shares a story about her screening visit to Yellamalai village



(L-R) Dr. Mrudula during one of her screening drives; Sunu collecting sickle cell sample

"We left early that day to a very beautiful tribal village- Yellamalai to see a few antenatal patients and COVID screening. Our health animators had warned us regarding the hesitancy of the people there. It was raining when we reached there. As soon as we reached the village, most of the residents of the village locked themselves in.

We went from door to door. In one house we heard some voices of some young men who would not come out. We spoke to them from outside regarding the need for covid screening. Finally, one young man came out, handed over an umbrella to us and said "Come doctor, I will take you around the village" and he encouraged all the tribals in that village to get COVID screening done. Small gestures like this have kept us going. Meanwhile Sunu our sickle cell staff who had accompanied us took sample for a newborn child for sickle cell screening."

AT GUDALUR ADIVASI HOSPITAL

With two doctors going for screening visits on most days, the rest are having to take care of the hospital. These include managing the covid wards, general and emergency admissions, outpatient clinics, antenatal checkups, labor and emergency surgeries. We have ensured that COVID-related work hasn't affected patients with chronic diseases who need regular checkups and blood tests.

Emergency procedures, biopsies, endoscopies, and all investigative procedures are done. Apart from the 25 beds for COVID and the 7 rooms in the Isolation unit, the construction of the hall above the disability centre has been completed with all the necessary equipment for admitting COVID patients.



MEET DR. ROYSON

"COVID has resulted in cancellations and delays in most surgical procedures. These include emergencies that can be life-threatening and cancers which can spread and become inoperable. Just at the beginning of the second wave, we received a 45-year-old tribal man who came with severe abdominal pain for 2 days. He was given some medications for pain but found no improvement. When he came to us, we diagnosed him to have a hole in his stomach due to ulcer-causing peritonitis (sepsis of the abdomen). Without emergency surgery, his chances of survival would be slim. Within an hour, we were able to get him to the operating room and perform the surgery. Mr Mani is a happy man now and is doing well (picture). This was possible only because we have such a dedicated team who put patient care before their safety. It is such an inspiration to work here!"



HERE ARE A FEW NUMBERS TO PUT THE LAST FEW MONTHS OF COVID RELIEF IN PERSPECTIVE (UPTO JUNE 2021)

300

Positive cases in community

235

Recovered patients

65

Active cases currently in the community

3

Mortalities we have faced from the community

99 %

Recovery rate

174

Admissions in Gudalur Adivasi Hospital

139

Villages screened

5116

People screened

497

Swabs collected by our team

11,336

No. of people vaccinated till date out of 12,752 eligible people

PROCUREMENT

We received 10 Oxygen concentrators, 8 Oxygen Cylinders and one non-invasive ventilator in kind and have been supported for 6 Oxygen concentrators,

Apart from this, we have been supported by various donors in procuring the following - oxygen pipeline for wards, 2 multi-para monitors, 4 Non-invasive Blood pressure monitoring machine, 2 suction apparatus, 1 Non-invasive ventilator, 8 cots and beds, wheelchairs, trolley, beds for the newly constructed hall to be used as COVID care centre, testing kits, personal protection equipments, medicines/consumables and food for patients in the hospital.



From top (clockwise) - Cooked meals for COVID patients, Isolation unit for positive patients, hall above disability centre in GAH temporarily used as a COVID ward

We are extremely thankful to all our supporters who stayed with us during times of distress. We are grateful for your support and we look forward for your support in our work going forward!

To know how you can support us, write to us at ashwinigudalur@gmail.com