

INSTITUTIONAL DISTINCTIVENESS

TO REACH THE UNREACHED, TO SERVE THE UNDERSERVED: A RURAL FOCUS AND THRUST





ST. JOHN'S MEDICAL COLLEGE BANGALORE

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Approved by the Executive Committee
St. John's National Academy of Health Sciences

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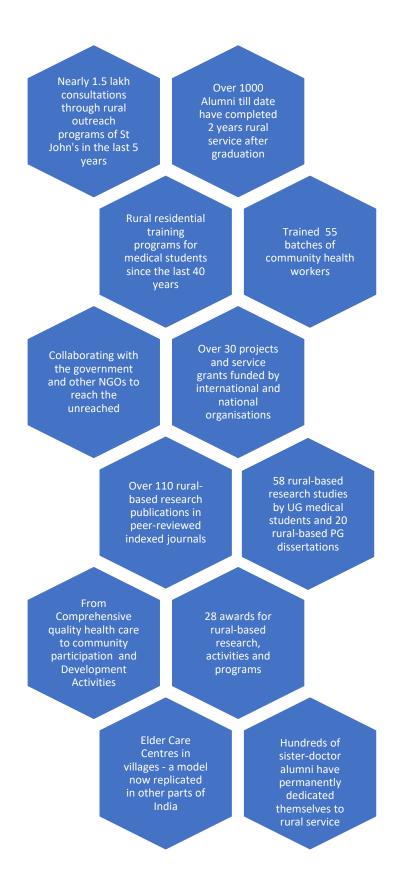
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OVERVIEW



Vision and Mission of St. John's National Academy of Health Sciences

St. John's mission is to reach the unreached and serve the unserved. This focused vision is outlined clearly and disseminated to prospective students in writing via the prospectus prior to admission.

1. ST. JOHN'S NATIONAL ACADEMY OF HEALTH SCIENCES - OVERVIEW

1.1 INTRODUCTION, AIMS AND OBJECTIVES

INTRODUCTION

The Catholic Bishops' Conference of India (CBCI) established St. John's Medical College in Bengaluru in 1963 with the aim of training healthcare personnel committed to serving the poor and the marginalised. It was dedicated as a memorial of the XXXVIII International Eucharistic Congress held in Bombay in 1964 and named after St. John the Baptist, the Patron of Pope John XXIII, who was an ardent supporter of this initiative of the Catholic Church in India. Admission to this unaided, non-capitation fee, Christian minority, educational Institution is on all India merit basis.

AIMS

While the Institution is intended primarily for training Catholics and especially dedicated personnel like Religious Sisters, who operate a large number of hospitals and dispensaries mainly in medically underserved and rural areas of our country, it is open, to all persons irrespective of religion, caste or community. The Institution seeks to make a qualitative contribution to health care, medical education and research through the training of medical, paramedical, nursing, health management, community health workers and other personnel who are dedicated to the Healing Ministry in the Spirit of Christ. The Medical College Hospital is intended to assist in training and to render service in health care to all people irrespective of religion, caste or community, particularly the underprivileged and disadvantaged.

OBJECTIVES

Under the overall policy of the CBCI Society for Medical Education, the objectives of the Institution are grouped as follows:

- 1. Excellence in all fields of health care education.
- 2. Impart value education.
- 3. Upholding respect for life, from the moment of conception to its natural end.
- 4. A genuine feeling of compassion for the patients and their families as persons.
- 5. A special thrust to Community Health, fostering the dimensions of participatory team work.
- 6. Serving the health needs of medically underprivileged brethren.
- Acquiring the ability to do research, and apply the advances in scientific knowledge to the relevant fields of work.
- 8. Striving towards promoting holistic health.
- Acquiring an exemplary steadfastness to principles and moral values so as to be a witness to a life of honesty and integrity.

Excerpt from the St. John's Medical College Prospectus, 2021-22

Inception of St. John's: A brief history

The role of the Catholic Church in healthcare in India developed during the 19th century, with the entry of several orders of nuns who combined their spirituality with a commitment to healthcare most notably for the women, children and social outcasts like 'lepers'. Dr Agnes McLaren, from Scotland was moved by stories of the plight of Indian women who on account of the purdah system died in large numbers during childbirth and due to other medical conditions since they would not be seen or examined by male doctors. She moved to India and set up the St Catherine's Hospital in Rawalpindi in 1909. After arriving in India, she realized that she, in her own capacity would not be able to do much. Therefore, she embarked on a global effort to encourage women doctors to work in the sub-continent. She died in 1917, but her efforts were to be rewarded, when in distant Melbourne, Dr. Mary Glowery read a pamphlet called "Dr. Agnes McLaren" that urged medical women to aid the women of India. After arriving in India in 1920, now a religious sister in the congregation of Jesus, Mary and Joseph, Dr. Sr. Mary Glowery, inspired by Agnes McLaren, started a small clinic in Guntur, in present day Andhra Pradesh, whereby by the seventh year, she was treating around 44,000 outpatients in a single year. However, like Agnes, even she realized that the problem of lack of doctors in India could not be tackled by a single person or even a small group of committed individuals. Thus, in 1943, twenty-three years after coming to India on 29th July in association with 16 other religious sisters, she founded the Catholic Hospital Association of India (CHAI), aimed at improving the standard of health education and the promotion of Catholic values and health care for the poor. Less than a year later on 21st April 1944, in Bangalore, CHAI passed a resolution- "The Association aims at the establishment of a Catholic Medical College". In putting forward this resolution, the first steps towards the establishment of St. John's were taken, to help fulfil the mission of bringing healthcare to the poor, the disadvantaged and the under-served.





St. Catherine's Hospital, Rawalpindi, est 1909

Dr. Sr. Mary Glowery, Guntur

The translation of this idea into reality required the concerted efforts of many people. In 1946, the Bishops of India took decisive steps to see the project of the Catholic Medical college through. It was pursued by the Catholic Bishops Conference in India (CBCI), notably Archbishop Thomas Pothacamury and Cardinal Gracias, over the next 14 years. In 1960, the Conference took the decision to establish the college, with an attached hospital at Bangalore. His Holiness Pope John the XXIII agreed to the college being called "St John's" as a mark of his personal interest in the project and his approvals of its aims and ideals that was intended primarily for Catholics and especially for religious sisters who were consulting the poor of all communities especially the rural areas. The college was accordingly named "St John's Medical College" and opened its temporary premises at Bangalore in 1963.



Blessing of the corner stone of the Medical College Project at the Eucharistic Congress in Mumbai, 3 December 1964



Dedication of the College by his Excellency Dr. Zakir Hussain, former President of India, 1968

Admission policy

St. John's Medical College seeks to serve those most in need, with a preferential option for the poor and the disadvantaged, especially focusing on rural areas. This is manifested in the policies of the College which reserve 20 medical seats for Catholic religious sisters who serve often in remote locations for the rest of their lives and is expressed in the 20 seats that St. John's currently reserves for tribal and non-tribal Catholic students coming from health-poor areas of north and north-east India.

21.3 ST. JOHN'S MEDICAL COLLEGE: MBBS SEAT MATRIX Number of Category seats All India General Open Merit 10 1. 10 Institutional Staff Quota (Karnataka) 2. 20 Roman Catholic Christian Religious Sisters (Nuns) 3. Roman Catholic Christian Tribals 10 4. 10 5. Roman Catholic Christians of Scheduled Caste Origin Native (Local) North Indian Roman Catholic Christians 10 6.

Excerpt from the St. John's Medical College Prospectus, 2021-22

Total

10

60

10

150

Roman Catholic Christians of Karnataka State

Karnataka State Open Merit

8.

9.

Roman Catholic Christians All India Open Merit

St. John's has ensured that rural service is given weightage during admission to postgraduate medical courses, with 37 out of 131 MD/MS seats being ear-marked for students who have completed two years of rural service.

3.1.2. SEAT MATRIX FOR MEDICAL POSTGRADUATE (MD/MS) ADMISSION TO ST. JOHN'S MEDICAL COLLEGE FOR THE ACADEMIC YEAR 2020-2021

DEGREE COURSES	CATEGORY1	CATEGORY2	CATEGORY3		Total
(3 YEARS)	SJMC Alumni	SJMC Alumni	Roman	General	No of
	Roman Catholic	with SJMC	Catholic	Open Merit	Seats
	Religious Nuns	approved	Christian		
	with SJMC	Rural Service	Open Merit		
	Approved Rural Service				
	Rurai Service				
M.D. Anaesthesia	-	4	5	5	14
M.D. Anatomy	-	-	-	4	4
M.D. Biochemistry	-	-	1	3	4
M.D. Community Health	-	2	2	4	8
M.D. Dermatology	-	2	2	1	5
M.D. Emergency Medicine	-	1	1	1	3
M.S. ENT	-	1	1	1	3
M.D. Family Medicine	1	1	-	1	3
M.D. Forensic Medicine	-	-	-	1	1
M.D. General Medicine	2	5	5	3	15
M.S. General Surgery	1	2	1	1	5
M.D. Microbiology	-	-	1	3	4
M.S. Obstetrics & Gynaecology	2	2	2	2	8
M.S. Ophthalmology	-	1	1	1	3
M.S. Orthopaedics	-	3	2	1	6
M.D. Paediatrics	2	3	3	1	9
M.D. Pathology	-	2	3	3	8
M.D. Pharmacology	_	-	1	3	4
M.D. Physical Medicine					
and Rehabilitation	_	1	_	1	2
M.D. Physiology	-	-	-	4	4
M.D. Psychiatry	1	2	1	1	5
M.D. Radiodiagnosis	-	4	4	2	10
M.D. Radiation Oncology	-	1	-	1	2
M.D. Transfusion Medicine &					
Immuno Haematology	-	-	-	1	1

Excerpt from the St. John's Medical College Prospectus, 2021-22

TRAINING

Rural Community Health Training Centre, Mugalur

The St. John's Rural Community Health Training Centre (CHTC) is situated in Mugalur village, 30 km from the city of Bangalore and 5 kms beyond Sarjapur town. The CHTC is run by the Department of Community Health (DoCH), St Johns Medical College. St John's aims to impart value based medical education to its students and equip them to serve in medically underserved areas. While this is a thread running through all the instruction which students at St John's receive, the DoCH makes a special effort in imparting the principles of public health to students, who train at Mugalur. The CHTC serves three important functions:

- 1) As a *residential training facility* for medical and other students: The one-week residential rural orientation programme (ROP) for first year medical students, and the one-week rural Community Health Action Programme (CHAP) for third year medical students is conducted at CHTC, Mugalur. The students are housed in separate dormitories for male and female students. Faculty from the DoCH, including medico-social workers also take turns to reside in the centre during the course of these programs. In addition to medical students, the centre is utilized in the residential training of community health workers.
- 2) **Primary care hospital serving the rural community**: The CHTC functions as a primary care hospital, seeing about 30-40 outpatients every day. In addition, there are special clinics organized on fixed days of the month, both at the centre and on an outreach basis in villages, aimed at different vulnerable groups like pregnant women, children under five, elderly, visually impaired, hearing impaired, physically disabled and the mentally ill. The centre is staffed by a resident doctor who is assisted by medical interns posted to the centre as part of their rotating internship program. They are supervised by the faculty of the DoCH.
- 3) As a field base for community outreach service activities: While screening for mental illness and disability (physical, mental, visual, auditory) is conducted in villages in the field practice area, Maternal and Child health clinics are held in the villages of Gundur, Siddnapura and Marangere, clinics for the elderly are held in the villages of Kugur, Doddatimasandra, Muthanalur and Handenahalli and a general health clinic at Neriga.



Rural Community Health Training Centre, Mugalur

Rural residential training programmes for medical students

The seeds for reaching the unreached are sown through special training that students receive as part of their medical education. St. John's initiated a rural orientation programme (ROP) for first year medical students, forty years ago and later developed other rural residential training programmes such as the Community Health Action Programme (CHAP) for third year medical students. The aim of these programs is to sensitize undergraduate medical students to life in rural settings and to equip them with essential public health skills so that they become doctors who are sensitive to needs of persons in rural areas. Faculty from the Department of Community Health along with community members are actively engaged in providing educational experiences that are relevant to community needs, thereby providing the students with a more holistic approach to learning.

ROP is a rural residential program for students conducted annually at the St. John's Community Health Training Centre, Mugalur. The program has been held since January 1979, from even before the Medical Council of India (MCI)'s Graduate Medical Education regulations came into force. During the one week of ROP, family and community study experiences enable students to interact with village folk and learn rural economics, education, occupation, housing, food, family life, local governance, child rearing and healthcare systems using topic guides. A daily review and presentation of their activities in the field helps students to improve communication skills. "Monsoons" – a simulation exercise puts students in the homes of village farmers and in their social situations. In the session on nutrition demonstration, students procure raw food items from the local village market and cook commonly prepared nutritious foods. The "child-to-child" programme trains students to teach school children common health issues. The community programs, including street play, provides students with a platform to impart health education to the community. A module for step-by-step implementation of the ROP has been prepared to ensure quality and standardization of instruction.

The CHAP program sees medical students reside at the RHTC for a second time in their 7th term. This time, during the one week rural CHAP, the students plan and implement a health needs assessment survey and analyze data in groups. They participate in qualitative participatory rapid appraisal techniques including transect walks, social mapping, focus group discussions and in-depth interviews. The students conduct a school health check-up in the government school, analyze data, identify common health issues and conduct a health education program in school. They visit the local primary health centre and have clinico-social case discussions on problems of public health importance in the homes of patients.

Through ROP and CHAP the institution aims to impart value based medical education to undergraduate medical students to equip them to serve in medically under-served areas. This is believed to equip them to become better doctor who are sensitive to the needs of the communities that they work with. The programs aim at making medical undergraduate students, who are the doctors of tomorrow, see the realities of rural India and get a feel of conditions that people living in these areas are exposed to, thus making them sensitive to the health needs of persons in rural areas. We studied the short-term, medium-term and long-term impact of ROP in a research mode using mixed methods. Short term impact was studied immediately before and after the program using a 30-item questionnaire administered to 142 students. We found a significant (p<0.001) improvement in the mean post-test score (21.11 \pm 2.88) compared to the mean pre-test score (13.09 \pm 3.91). Medium

term impact was studied both quantitatively and qualitatively among 23 students 6 months after the program. The quantitative component consisted of OSPE scores from 4 stations (village life, child-to-child program, community program and nutrition demonstration). The mean OSPE score was 19.34 ± 3.19 (max score 25) with 54.55% obtaining a score ≥ 20 . The qualitative component documented reflections by students. Thematic analysis of the reflections depicted that through ROP, students gained insights on factors influencing health and social organizations in rural areas. ROP helped students become empathetic towards patients and helped to develop a holistic approach towards health. Long-term impact was studied by surveying 250 alumni from the batches of 1979 onwards to explore the role of ROP in their career. A large majority (83%) reported that ROP influenced their decision to undertake 2 years of rural service post MBBS.

Currently rural residential training programs are being implemented only in a few colleges across India. Vast experience over four decades at St John's shows that rural residential training program plays a role in improving the quality of medical education. This is backed by our data that shows that rural residential training programs not only increase subject knowledge but also play a role in moulding that attitudes of students towards care of people in rural areas and also in improving communication skills.





Students from the Batch of 2015 cooking nutritious food as a part of nutrition demonstration exercise (ROP 2016)





Infotainment program organized by the students in Field study and interaction with village people the village on the topic of harmful effects of alcohol (ROP 2016) addiction (ROP 2016)



Community Health Education Program (ROP 2019)



Community Health Education Program (ROP 2019)



Child to child program at school (ROP 2016)



Child to child program at school (ROP 2016)



Child to child program at school (ROP 2019)



Presentation of ROP learnings to faculty at Mugalur CHTC (ROP 2019)



Community Health Education Program (ROP 2019) | Village study (ROP 2019)





School health check-up (Rural CHAP 2018)

Presentation of learning by students to department faculty by role play (Rural CHAP 2018)





Program in the Community for Breastfeeding Participatory Rapid Appraisal Techniques to Awareness (Rural CHAP 2016)

assess health seeking behaviour -Venn Diagram (Rural CHAP 2016)





Participatory Rapid Appraisal Techniques -Transect | Health Needs Assessment in the community walk to identify vector breeding sites (Rural CHAP (Rural CHAP 2019) 2019)



Health Needs Assessment in the community (Rural Students interact with Panchayath members CHAP 2019)



(Rural CHAP 2019)





School Health Appraisal and Education session

Long-term follow-up of medical students has found that ROP is perceived as a unique opportunity for interaction of students with rural communities, a first-hand experience towards understanding rural ways of life, sensitization to the needs of rural people and effective understanding of the basic concepts of community medicine. ROP is reported to have had an impact in terms of enhanced professional skills, basic research skills and soft skills like improved communication abilities and

teamwork. It was perceived that ROP helped develop empathy for the underprivileged and was a strong influencer in the decision to commit to two years of rural service. The ROP has had a positive impact on those who participated in it as undergraduate medical students. The success of ROP as a pedagogic strategy in terms of its impact, iterates and emphasizes the need for such immersive and experiential learning through residential rural training programs in medical colleges.

Original Article

Impact of a Residential Rural Community-Based Training Program for Medical Students on Cognitive and Affective Domains of Learning in Community Medicine: A Mixed Methods Study

Farah Naaz Fathima, Avita Rose Johnson, Pretesh Rohan Kiran, S. Ratnakumari, Bobby Joseph Department of Community Health, St. John's Medical College, Bengaluru, Karnataka, India

Abstract

Introduction: As part of undergraduate training in community medicine, students of 1st-year MBBS at our medical college in South India undergo rural residential community-based training called Rural Orientation Program (ROP). Objective: The objective was to study the impact of ROP at a medical college in South India. Methodology: Short-term impact was studied immediately before and after ROP using a 30-item questionnaire administered to 142 students. Medium-term impact was studied among 23 students in 2st-year MBBS. Quantitative component consisted of objective structured practical examination scores and qualitative component documented reflections on learnings. Long-term impact was studied by surveying 287 alumni (batches of 1979 onward) to explore the impact of ROP on their career. Results: We found a significant (P < 0.001) improvement in the median posttest score (21, interquartile range [IQR]: 20–23) when compared to pretest (12, IQR: 10–16). The mean OSPE score was 19.34 ± 3.19 (maximum score = 25) with 54.55% obtaining a score ≥ 20 . Thematic analysis of reflections depicted that students gained insights on factors influencing health and social organizations in rural areas. ROP helped develop empathy toward patients and a holistic approach toward health, in understanding rural dynamics and improved communication skills. Conclusion: ROP increases subject knowledge and plays a role in molding attitudes of students toward the care of people in rural areas and improves communication skills. This time-tested model can be replicated in other medical colleges across the country.

Keywords: Community based, impact, medical students, mixed methods, rural residential training

INTRODUCTION

Community-oriented medical education is the delivery of medical education in a specific social context where the community is the learning environment. Students, teachers, and community members are actively engaged in educational experiences that are relevant to community needs.^[1,2]

According to the World Health Organization and World Federation for Medical Education, medical education which is focused on health needs of the community is effective in an understanding of medico-social determinants of health. In contrast to predominant hospital-based training, community settings provide holistic learning. [3]

About two-thirds of the total population of India reside in rural areas and constitute majority of patients visiting hospitals. It

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is imperative that medical students know ways of life in rural areas.^[4]

Our institution is a medical college in South India that has been providing community-oriented rural residential training to its undergraduate students. Rural Orientation Program (ROP) is a rural residential program of 1-week duration for 1st-year medical students which has been held for over 40 years, from

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Residential rural training program in undergraduate medical education: A qualitative evaluation of the impact on doctors and medical students

Johnson, A.R., Rathnakumari, S., Fathima, F. N. & Joseph, B.

Abstract

Background: Since the last 40 years, first year medical students at St. John's Medical College, Bangalore, India have undergone a residential Rural Orientation Program (ROP). This study aimed to evaluate the impact of ROP on medical students and practicing doctors who have attended this program during undergraduate training.

Methods: A qualitative study was conducted among alumni and medical students of St. John's Medical College, using an open-ended questionnaire sent electronically to assess their perspective of ROP, as well as reflective narratives on their ROP experience. Thematic data analysis was done using inductive coding.

Results: From 287 responses, the main themes identified under Impact of ROP were 'better learning/understanding of Community Medicine', 'benefits in medical career' and 'soft skills development'. We found that ROP is perceived as a unique opportunity for interaction of students with rural communities, a first-hand experience towards understanding rural ways of life, sensitization to the needs of rural people and effective understanding of the basic concepts of community medicine. ROP is reported to have had an impact in terms of enhanced professional skills, basic research skills and soft skills like improved communication abilities and teamwork. It was perceived that ROP helped develop empathy for the underprivileged and was a strong influencer in the decision to commit to two years of rural service.

Conclusion: The ROP has had a highly positive impact on those who participated in it as undergraduate medical students. The success of ROP as a pedagogic strategy in terms of its impact, iterates and emphasises the need for such immersive and experiential learning through residential rural training programs in medical colleges.

Key Words: Community-based training, Residential rural training, Medical education, Qualitative evaluation

Introduction

With two-thirds of the Indian population hailing from rural areas (World Bank, 2018), it is inevitable that a significant proportion of patients, even in city hospitals, come from rural backgrounds. In this context, community-based, residential rural training programs provide medical students with a unique opportunity to learn first-hand while exploring

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socio-cultural determinants of health in agrarian settings, experiencing rural ways of life and approaching health care holistically.

Ever since 1979, students at St. John's Medical College, Bangalore (SJMC) undergo a Rural Orientation Program (ROP) organized by the Department of Community Health. In its current form, this is a week-long residential program for first year medical students at the Community Health Training Centre (CHTC) Mugalur, located 35 kms from Bangalore City. As part of the ROP curriculum, students use self-developed topic guides to conduct a family and community study, observe and interact with village residents, familiarize themselves with village structure and organizations, rural economics, education, occupations, housing,



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Exposure visits to remote rural health-care centres for MBBS students

Students after their second, third or fourth year MBBS exams are given the opportunity to visit remote rural hospitals in India, where alumni of St. John's are serving. The visits are conducted with the objective to sensitize medical students to the need for serving in the rural areas and to expose them to alumni who have dedicated themselves to the service of the rural underserved, in the hope that our MBBS students are inspired to emulate these alumni, and also fuel in them a zeal to serve the rural masses through their two-years rural service post-MBBS.

Thus far, in the last 5 years, groups of students along with faculty members and postgraduate students, have visited Emmanuel Mission (EHA) Hospitals in Chattarpur (M.P), Herbertpur and Landour (Uttarakhand) and Swasthya Swaraj in Odisha.

The exposure visits to remote rural health-care centres for MBBS students is currently coordinated by Dr. Bobby Joseph, Professor of Community Health and Vice-Dean Outreach and Distance Education.

The following are reflective narratives by the students after their visit:

We would like to call this venture - 'Mission Chattarpur'. For a bunch of young medicos who were in their transitional period from students to becoming interns this experience proved to be an eye-opener about the real world of medical practice and a kick-starter to our internship.

As a person, it made me feel and experience the real health care needs and problems in our country at its grass root level. I also realised that there are few institutions and persons that render selfless dedication and service for the betterment of the health status in the country. It helped me to acquire people skills, interact with them, learn about their culture, tradition, food habits, religious beliefs and its implication in their understanding of medicine and its practice.

We had just finished our final year exams when we went on this mission and though we had regular and really good clinics, practical medicine was something new and all together different. This exercise helped us to fill in this gap. We were finally 'Doctors'. We got to assist the doctors who worked there and we learnt the art of conversing with patients and the importance of rapport building. We also picked up practical skills and had hands-on experience of wound dressing, suturing, IV cannulation and catherisation. We had firsthand experience in the Labour Room conducting deliveries and suturing episiotomies. This made us very familiar with the labour room atmosphere and comfortable in handling neonates which helped us in internship. Daily rounds were educative and informative, and helped us to pick up signs and complications and plan treatment without the use of expensive tests and procedures. We learned the importance of considering patients economical background, tradition, cultural values in making treatment plans. As the famous saying goes 'experience teaches more than the best teacher' this experience taught us a great deal. We are proud that we were a part of this mission and will truly cherish it forever.





Students on exposure visit to Community Hospital, Landour, Uttarakhand

It was an excellent learning experience to revise our basic understanding and enhance our knowledge of the ailments at the primary level in this brief time. It was a rich mixture of clinical diseases, chronic diseases, surgical conditions, obstetric and gynaecology patients and the paediatric age group patients. It aroused a feeling of responsibility and commitment towards the patients when we would follow up our patients each morning. I could sense the feeling of unity and oneness in the atmosphere among the staff of the hospital and the doctors. This was an outstanding example of how a team works in coordination and harmony with each other for the betterment of patient. We also took classes for the nursing students on various topics and discussed first aid with them. It made us feel that we have a role to not only to serve but also to teach. This has left a strong impression on me to give back something to the society. Something that St. John's has always told us in its anthem and Chattarpur has portrayed. I am grateful to all of you for this opportunity and life enriching experiences.

Report on Visit of Undergraduate medical students to Swasthya Swaraj, Odisha: A Tribal Health Exposure Program

Swasthya Swaraj is a secular, not for profit, organization working towards making health a reality for the poorest of the poor in rural Kalahandi district near Bhavanipatna, Odisha, focusing on the "Kutia Kondh" tribals. As a part of this exposure visit, the medical students learn about primary healthcare and public health approach involving the community. The students also observe how medical, surgical and obstetric emergencies are managed in low resource setting and are able to appreciate all the challenges faced in remote tribal aareas and how these challenges can be overcome.

A group of 13 students from MBBS 2018 batch visited and spent time with Swasthya Swaraj from 22nd to 30th March 2022 under the guidance of Dr. Sr. Aquinas who works with the organisation.





Students with tribals at Swasthya Swaraj, Kalahandi District, Odisha





Visit to Silet to interact with 'Swastya Saathis" - trained community health workers



Health camp at Kerpai village, Odisha



Health Animators Training session for tribal youth





School Health Camp at Podapai village





School Health Camp at Taramundi Village





ANC Outreach Clinic at Taramundi village



Our students helped to conduct a TB awareness program at Kaniguma village, Odisha

Post=graduate Students' Training with government and non-government agencies

Training of Community Medicine postgraduates at Government Primary Health Centre, Sarjapur

Sarjapur Primary health centre (PHC) is one of the 13 Primary health centres under Anekal taluk. It is located 25 km from St. John's Medical College. It covers 18 villages and one town and a total population of 40,000. It is a 24x7 PHC with maternity services.

Every postgraduate student in the Department of Community Health is posted at the Sarjapur PHC centre for a period of one month. In that period, they are expected to participate in the activities of the PHC as well as in the field activities with PHC staff. The postgraduate students assist in Out-patient services practicing primary health care, Maternal and Child health services, routine immunization, COVID-19 vaccination and COVID-19 testing services. Postgraduate students also get first-hand experiential learning of the various national health programmes and learn to work as part of the PHC team comprising of Medical Officer, staff nurse, Junior Health Assistants (female), pharmacist, lab technician and ASHA workers.



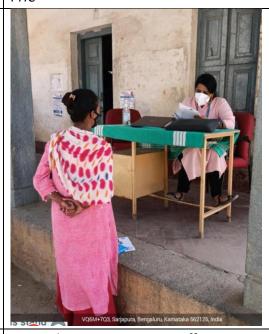
Sarjapura PHC



Maternal and child health services at Sarjapur PHC



PG student with Medical Officer, Sarjapur PHC



PG student assisting PHC staff in patient triage during Covid-19 pandemic

Training of Community Medicine postgraduate students at Jan Swasthya Sahyog, Ganiyari, Bilaspur, Chhattisgarh - 495112

Jan Swasthya Sahyog (JSS) or the Ganiyari Hospital as the locals are more familiar with, was started in 1999 at Ganiyari, Bilaspur in Chhattisgarh. This hospital caters to the various healthcare and social developmental needs of the unreached populations living in rural areas. During the academic period, every postgraduate student in the Department of Community Health at St. John's is expected to mandatorily undergo a training program at Jan Swasthya Sahyog, Ganiyari, Bilaspur for 15 days.





Jan Swasthya Sahyog, Ganiyari, Bilaspur, Chhattisgarh

For a regular out-patient day, JSS sees a minimum of 120 patients, the poorest of the poor from areas where there is no doctor. Many arrive to JSS after traveling for days bringing with them food supplies, bedding and other essentials. Even though surgeries and speciality clinics are conducted with qualified personnel, in their own lingo these specialists have "de-specialized" themselves; all doctors see all patients, for they believe in "all for health and health for all". Though situated in interior rural parts of central India, there is no dearth in the use of technology ranging from wi-fi connectivity to telemedicine with remote expert consultants.

Our postgraduate students are given the opportunity to participate in their primary health care delivery and outreach activities. For the management of scabies in the community, our postgraduate's role is not restricted to prescribing drugs, but ranges from demonstration of putting beds and linen under sun, washing clothes in hot water and demonstrating application of Lindane.

Our postgraduate students are also exposed to community participation initiatives through JSS Dai Training program. In an area where most of the deliveries happen at home, instead of fighting against the tradition, they started training the local birth attendants in safe management of deliveries and knowing when to refer the mother.





In-patients at JSS Hospital Bilaspur

Out-patients at JSS Hospital Bilaspur

Our postgraduate students are also involved in the health appraisal of children at the 90 *Phulwaris or creches run by JSS*, in over 55 villages. With their own recipe of *sathu powder* for nutrition prepared by women in the community and strict maintenance of 1 worker to 10 children, these phulwaris are another example of community participation in health.

Our postgraduate students also join the JSS teams in their community-based NCD camps, where they screen villagers for diabetes and hypertension.

This two-week posting at JSS Bilaspur is a unique opportunity for our postgraduate students to learn the principles of primary health care at the grass-root level in remote hard-to-reach rural areas.

Training of postgraduate students at Emmaus Referral Hospital and Leprosy Centre, Palamaner, Andhra Pradesh

Every postgraduate student in the Department of Community Health at St. John's Medical College undergoes a one week of mandatory resident posting at Emmaus Referral Hospital and Leprosy Centre, a rural hospital located at Palamaner in Chithoor district of Andhra Pradesh. It was founded and is administered by Dr. Auburn Jacob, an alumni of St. John's Medical College. The hospital serves as a primary level hospital in the underserved area, mainly focused on Dermatology. The main objective of the hospital is to provide diagnostic, management and rehabilitative services for leprosy patients. In fact the hospital is called as "Leprosy hospital" by the locals. The rehabilitative services for leprosy patients include reconstructive surgeries at the hospital, with specialist consultants visiting the centre from time to time. The hospital also has a footwear manufacturing unit and an ointment production unit. The postgraduate students are trained in diagnosis and management of common dermatological ailments and are familiarized with the specially designed treatment protocols for various locally prevalent dermatological conditions. This training later holds the postgraduate student in good stead for primary health care practice in the rural field practice areas of St. Johns.





Dr. Auburn Jacob and team at Emmaus Referral Hospital and Leprosy Centre

PG students from the Department of Plastic Surgery are posted to Emmaus Swiss Referral Hospital and Leprosy Project, Palamaner, Andhra Pradesj during final year of MCh Plastic Surgery, for a duration of one day once or twice a year to perform corrective surgery on patients having leprosy deformity of hand.

Training of Doctors who are currently serving in rural areas

Fellowship in Family Medicine Course for doctors serving in rural areas

St. John's National Academy of Health Sciences has been running a one-year distance learning program called Fellowship in Family Medicine [FFM] since 2018. The primary objective of this course is to provide support to graduates from St. John's Medical College who doing their two years of rural service. Over the years, the scope of the program was expanded to include Indian allopathic medical graduates who are practicing or wanting to start a family medicine practice. The course completion certificate is awarded by St John's and the course is endorsed by the Academy of Family Physicians of India [AFPI].

The course consists of

- 1. 40 online clinical case vignettes
- 2. 12 online conference calls
- 3. One contact session of one week duration at St John's Medical College

Currently there are two batches of this program every year with a total intake of 60 (30 per batch). One batch is exclusively for St. John's alumni serving in the rural areas, and the second batch is open for candidates from all over India. A total of 74 participants have completed the course and another 60 are currently pursuing the course.

The FFM course is coordinated by Dr. Farah Fathima, Associate Professor, Department of Community Health.





Students learning how to perform otoscopy in the Skills Lab on a mannequin





Students performing CPR as part of basic life support skills training

Students practicing application of cast



Course Completion Day August 2021 – FFM course completed by doctors serving in rural areas across the country

Alumni Association Workshops and CMEs for St. John's Alumni serving in rural areas

The Rural Service Support Committee of SJMC co-hosted by the St. John's Medical College Alumni Association hold CMEs as well as training programs in the form of webinars for all Johnite graduates who are currently doing their rural service.



A rural service CME was held on 10Th Nov 2017 at St. John's Medical College, and was attended by 35 alumni doctors in rural service.



The SDFI and SJMCAA jointly organized the 24th Annual SDFI CME titled "Recent Advances in Diagnostics & Therapeutics, attended by over 230 Sister Doctors from all over India,

mainly serving in hard-to-reach rural areas of the country



St John's Medical College Alumni Association

ROW (Rural Outreach Webinar)

WHEN, WHICH, HOW: INSULIN IN TYPE 2 DIABETES. Speaker

Dr Chaitanya Harita Department Of Medicine, St John's Medical College Hospital, Bangalore

26 February 8 PM onwards

Webinar Link Will Be Shared soon



St John's Medical College Alumni Association



EVALUATION OF BLEEDING PER RECTUM

Dr Royson Dsouza
Gudalur Adivasi Hospital , The Nilgiris , Tamil Nadu

26 March 8 PM onwards

Webinar Link Will Be Shared soon



St John's Medical College Alumni Association

COVID 19 VERSION 2.0 - HOW TO MANAGE?

Dr Oliver Rodrigues, Family Medicine Consultant - Home Care for Covid patients Dr Benzeeta Pinto , Asst Prof , Dept Of Clinical Immunology & Rheumatology, SJMCH- Mild & Moderate COVID management

Dr Dasari Prudhvi , Dept Of Critical Care , SJMCH - Non Invasive Ventilation in Covid patients

2 May 8 PM onwards

Webinar Link Will Be Shared soon



St John's Medical College Alumni Association

ROW (Rural Outreach Webinar)

COUID CARE IN PREGNANCY AND NEONATES

Dr Pravin Singarayar Dept Of Obstetrics & Gynecology Dr Chandrakala BS

Prof &Head, Dept Of Neonatology, St John's Medical College Hospital, Bangalore

Webinar Link Will Be Shared soon





"An Approach To Arthralgias"

Dr Benzeeta Pinto, Asst Prof, Dept Of Immunology

Save The Date & Time

25 September 2020 from 8.30 pm onwards





Community Health Workers Course

The Basic Course for Community Health Workers (CHW) is an annual course organised and conducted by the Department of Community Health, St. John's Medical College. Since its inception in 1978, more than 1100 candidates have been successfully trained. India being such a vast and populous country, health and related activities especially in remote and rural areas has always been a challenge. The ratio of doctor/nurse to patient availability is way below the recommended standards. One of the ways of addressing this issue is by training grass root workers who have a basic education and inclination to work in and with communities to promote their health.

The CHW course has been attended by religious sisters and brothers or candidates sponsored by non-government organisations. These candidates have come from various corners of India, sometimes even from across the border from countries like Sri Lanka, South Africa and Bangladesh and even from from the villages in the field practice area of St. Johns. The basic qualification required to register for the course is 10th standard pass. Those who are already engaged in social, developmental and health related activities, in peripheral or remote areas are given preference. We have on occasion had to conduct two courses in the same year due to a large number of registrations for the course.

The CHW course is held at St. John's Rural Community Health Training Centre, Mugalur, a residential 5-9 week course, depending on the requirements of each group, with the objective to train and expose the participants to both the theoretical and practical aspects of community-based health care and health promotion. Teaching-learning methods include lectures, demonstration and interactive sessions on topics related to health, nutrition, environment, first aid, alternate systems of medicine, common diseases and their diagnosis and primary treatment. A number of field activities in the form of village visits for interaction with various groups of people, learning participatory rapid appraisal techniques, understanding the routine and challenges of rural life are a part of their curriculum. They are also oriented to the various health-related activities at the CHTC, interacting with patients and their caregivers and get hands-on training to measure blood pressure and learn simple dressings.

Exposure visits to a few institutions doing pathbreaking work in the care of different groups of patients like special-needs children, differently abled persons, persons requiring chronic end-of-life care, enable the participants to understand the working of these types of institutions. In addition to the usual primary health care training, basic nursing training is also available on request of the participants some of whom work in various institutions taking care of different patients and hence require nursing skill enhancement to help care for these patients. A CHW manual has been especially designed and written by the faculty of the department for the course incorporating all the relevant topics and extra reading material for the participants. This manual is part of the course material handed over to the participants at the beginning of the course, which they carry back with them for reference later.

Overall, the participants grasp the contents of the course well, but occasional language barriers are experienced especially for some of the participants coming from small towns or villages with little or no knowledge of English. This barrier is overcome by the course faculty discussing the core points in multiple languages and separate out-of classroom interactions with such participants. Evaluation before, during and at the end of the course is conducted both formally and informally using oral, written and practical methods of evaluation. This evaluation is a useful guide in formulating the

following years training program. A certificate of successful completion is provided on candidates passing the written exam at the end of the course.

The Community Health Workers course is currently coordinated by Dr. Twinkle Agrawal, Associate Professor, Community Health.



Training of Government health care workers

St. John's faculty have been involved in the training of various cadre of government health care workers who serve in rural areas. Dr. Cecil Ross, Professor, General Medicine was a resource person for the Hemophilia workshop for Resident medical officers from National Health Mission, at Dodaballapura, Karnataka, 26th Nov 2017. Dr. Anasuya DS, Associate Professor, General Medicine trained Obstetricians on management of DIC in the periphery, at SNMC, Bagalkot on 6th Oct 2018. Dr. Jonita Fernandes, Assistant Professor, General Medicine conducted a Sensitization program in geriatric care for medical officers of Bangalore Rural District in Nov 2019.

The Department of Neonatology at St. John's Medical College, led by Dr. Suman Rao, Professor of Neonatology along with colleagues at the St. John's Research Institute, conducted several training programs for nurses, nurse mentors and district program specialists working in rural areas of Koppal district in North Karnataka, in 2016 -2018. These included care of low birth weight babies, Kangaroo Mother Care and Neonatal resuscitation. Training of 38 nurse mentors and program specialists from Koppal was conducted in St. John's Research Institute. A team from Department of Neonatology and St. John's Research Institute travelled to Koppal district to train a total of 265 staff nurses and 15 Community coordinators, ASHA Facilitators and ASHAs. They also organized a CME for 63 doctors and specialists in Koppal.



Team from St. John's Research Institute at Koppal district for training of SNCU nurses



Team from Dept of Neonatology, SJMCH at Koppal district for training of SNCU nurses

The Senior Citizens Health Service of the Department of Community Health on request by the State Government of Karnataka has trained different levels of staff including PHC Medical Officers, District Surveillance Officers and District Program Officers on the National Program for Healthcare of the Elderly (NPHCE) in pilot districts of Karnataka, Telangana and Maharashtra, between 2017-19. These efforts were coordinated by Dr. Arvind Kasthuri, Professor and Dr. Pretesh Kiran, Associate Professor, Department of Community Health.



District Surveillance Officers and District Program Officers on the National Program for Healthcare of the Elderly (NPHCE) in pilot districts of Karnataka, May 2019

Dr. Anil Vasudevan, Professor & Head, Dr. Priya Pais and Dr. Nivedita Kamath, Associate Professor and team from Department of Paediatric Nephrology, conducted training program on Common Kidney problems in Children at RDT Hospital, Bathalapalli, on 22nd March 2019 and 30th August 2019.



SERVICE Rural Outreach activities

The rural Community Health and Training Centre (CHTC) of St John's Medical College is located at Mugulur village, about 30 kms from the campus. The outreach services of the CHTC cover a field practice area mainly comprising the three sub-centre areas of Sarjapura primary health centre and some villages form adjoining primary health centre areas of Lakkur, Dommasandra and Anugondonahalli. The services provided at the CHTC include a 24 X 7 hospital providing primary level health care and various outreach services.

While rural outreach was part of Department of Community Health activities since the inception of St. Johns Medical College in 1963, the setting up of the Rural CHTC at Mugalur village in 1993, escalated rural outreach efforts to include focused attention on maternal and child health, community-based rehabilitation, care of the elderly, mental and non-communicable disease care. These include collaborative rural outreach clinics and camps with various department of St. John's Medical College Hospital: ENT, Ophthalmology, Psychiatry, Gynae-Oncology, Surgical-Oncology, Orthopaedics, Chest Medicine, Dermatology, Physiotherapy and "Unit of Hope" a multidisciplinary initiative for children with disabilities. This brings quality health care closer to communities who have little or no access to specialty care.



The outreach clinical services provided by the Department of Community Health, through CHTC, Mugalur typically follow a fixed day, fixed clinic approach for the convenience of the community.

- 1. **Outpatient services** are open to patients 24×7 wherein treatment is with generic and subsidized drugs. On an average around 30-35 patients are seen on a daily basis. The clinic has been procuring generic drugs for more than 10 years and this has nit just reduced the cost of medications on the patient but also improved adherence to medications especially for chronic diseases like Diabetes, Hypertension requiring long term treatment. With COVID pandemic the OPD services never stopped but has been modified to give the optimum benefit to the rural population with adequate precautions of social distancing, hand hygiene and appropriate screening.
- 2. **Reproductive, Maternal, and Child Health Services**: The Department of Community Health provides Maternal and Child Health (MCH) and Women's Health outreach services in the rural field practice area of St. John's Medical College, following a fixed day of the month approach. These activities also include school health appraisals for both government and private schools,

Anganwadi health appraisals and supporting government health programs like Pulse polio program, Mission Indradhanush and Measles Rubella Campaign. From Rural Community Health Training Centre, Mugalur, we have the following outreach clinics for women, mothers and children:

1st Thursday of the month – MCH clinic and Well woman clinic at CHTC, Mugalur (serving villages under Mugalur and Kuthganahalli subcentres)

2nd Thursday of the month – MCH clinic at Gundur, Sidnapura, Marangere villages

MCH clinic provides antenatal and postnatal care services for women with a focus on essential obstetric care, screening for high risk, referral and health education. Baseline investigations like haemoglobin, blood group, blood sugar, HIV, HBsAg and VDRL are provided. High risk pregnancies are referred to St. John's Hospital for further management. Health education for women is provided at every MCH clinic on topics ranging from diet in pregnancy, care in pregnancy, breastfeeding, immunisation and care of the newborn. Immunisation and growth monitoring comprise the core of health services for children under the age of five, with treatment of common childhood ailments and management of malnutrition, including follow-up at home by trained community health workers. Around 450 mothers and children are seen each year at these MCH clinics.

Well-woman clinic is conducted along with the Department of Gynaecological-Oncology. This clinic provides comprehensive care for women. Women attending this clinic receive screening and treatment of anaemia, diabetes, hypertension, obesity, high blood cholesterol, thyroid disorders, depression and anxiety, reproductive tract infections, urinary tract infections, menstrual disorders and any current acute illness. We also provide general cancer screening, oral, breast and cervical cancer screening. Around 100 women are beneficiaries of this clinic each year.

The Maternal and Child Health Services in the rural areas are coordinated by Dr. Avita Rose Johnson, Associate Professor, Department of Community Health. The immunization clinics are coordinated by Dr. Naveen Ramesh, Associate Professor, Department of Community Health.

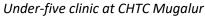




Antenatal care at CHTC, Mugalur

Antenatal care at CHTC, Mugalur







Well-woman clinic at CHTC Mugalur



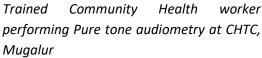
Antenatal care at Gundur village



Antenatal care at Siddnapura village

3. Asha Dhwani – Community -based Ear Care Services are provided at the weekly ENT clinic at CHTC, Mugalur as well as Dommasandra Primary Health Centre. This project services was started in 1999 and has been supported by cbm, a German based International funding agency Community Based Health Assistants (CBHAs), have been trained in basic ear care and audiometry. Besides diagnostic, curative and referral services, hearing aids and speech therapy are also provided as part of rehabilitation. Community-based activities include house visits and follow-up of patients and health education via street plays, school health education and group discussions with the community members. Community-based Ear Care Services are coordinated by Dr. Deepthi N Shanbhag, Associate Professor, Department of Community Health.







Trained Community Health worker performing ear wax removal at CHTC, Mugalur

4. **Drishti – Community-based Eye Care Services** provide preventive, promotive and curative eye care to more than 120 villages around 4 Primary Health Centres in Bangalore Urban district, Bangalore Rural and Kolar district of Karnataka. This project services were started in 2004 and is also supported by cbm. The cataract surgical services at CHTC, Mugalur has state of the art surgical equipment and skilled ophthalmic surgeons who operate twice a week. Community Based Health Assistants for this program are community women trained to provide basic eye care. Community awareness activities for the prevention of blindness through school health education, group discussions and one-to-one counseling sessions are some of the community-based activities undertaken. School eye screening services that encompass diagnosis of refractive errors, referral and health education are also provided to schools in the area. Low vision aids are also provided, to those in need at nominal charge or free if needed. Retinal Screening for patients with Diabetes and Hypertension is also done regularly. On an average around 80 to 90 patients are seen at the weekly eye clinic held at Mugalur CHTC and around 400 cataract surgeries are performed every year. Community-based Eye Care Services are coordinated by Dr. Deepthi N Shanbhag, Associate Professor, Department of Community Health



Trained "Community Refractionist" performing vision test at CHTC, Mugalur



Ophthalmologist using slit lamp at CHTC, Muqalur



Ophthalmologist performing cataract surgeries at CHTC, Mugalur

5. Maanasi- Community-based Mental Health Services with the main objective of providing preventive, promotive and curative mental health services supported by Rotary Club, Bangalore which include a weekly clinic at CHTC, Mugalur, services of a psychiatrist, provision of medications either free or at a concession, counselling services by medical social workers, and follow-up at home with a team of trained female community health workers to ensure adherence to treatment, health education sessions for care-givers of patients, organisation of community groups, empowerment initiatives for rehabilitating women treated for mental illness, with skills based training (tailoring) and material assistance (sewing machines). Recently the Maanasi has adopted technology for improving medical information system with eMaanasi database development. Community-based Mental Health Services are coordinated by Dr. B. Ramakrishna Goud, Professor, Department of Community Health.



Mental Health Clinic at CHTC, Mugalur



Screening for mental health in villages by trained community health workers

3. Senior Citizens Health Services for the rural elderly were introduced in 2005 with the objective to promote, preserve and maintain the health of older persons in rural Bangalore. The SCHS brings together two disciplines – Geriatrics and Community Medicine – to form a true Community Geriatric program. Faculty, postgraduate students and interns from the Department of Community Health at St. John's, along with community health workers and the staff at the Rural Health Training Centre, Mugalur form a team which delivers the service. There is a close link with the Division of Geriatric Medicine, Department of Medicine in St John's Hospital, as a referral base for the program. Rural Geriatric clinics are conducted once a month on a fixed day in each of 8

villages in the Sarjapur and Domassandra PHC areas. Baseline investigations and quality low cost generic drugs are provided at subsidized rates. A total of around 2000 elderly are registered in these ten clinics Elders with acute as well as chronic diseases are screened, diagnosed and managed by the medical team and followed-up at home by trained Community Health workers between monthly clinics. Home Visits are made in between clinics by trained community health workers, who assess compliance to medications, identify new problems and refer seniors as required to CHTC, Mugalur. Health education sessions for seniors on issues pertinent to their health are also undertaken. Senior Citizens Health Services are coordinated by Dr. Arvind Kasthuri, Professor and Dr. Pretesh R Kiran, Associate Professor, Department of Community Health.







Senior Citizens clinic at Muthanalur



Dispensing medication at highly subsidized cost



4. Community-based Rehabilitation services are promotive and rehabilitative services for differently-abled children and adults The needs assessment surveys began twelve years ago, conducted every week by a team comprising of community health physicians and community health workers trained in rehabilitation, with the objective of identifying and rehabilitating people with disability, with the main focus on children. The children thus identified with disability, are referred to the "Unit of Hope outreach clinic" held once a month at CHTC, Mugalur. Unit of Hope is a multi-speciality disability clinic comprising of paediatrician, orthopaedic surgeon, oto-rhino-laryngologist, psychiatrist, physical and medical rehabilitation specialist, physiotherapist/occupational therapist, speech therapist, psychologist, special educator, and medico-social worker. Each beneficiary is comprehensively assessed by the different team members and an intervention rehabilitation plan tailored for the individual is prepared. The trained community health workers then follow up these beneficiaries at their homes to ensure that the rehabilitation plan is progressing as per goals. Community-based Rehabilitation Services are coordinated by Dr. Deepthi N Shanbhag, Associate Professor, Department of Community Health.



Multi-specialty disability clinic at CHTC Mugalur



Physiotherapy for special needs children at CHTC, Mugalur

5. Non-Communicable Disease clinics with a focus on diabetes and hypertension, are conducted at CHTC, Mugalur. The services offered include consultation, anthropometry, basic investigations, counselling on diabetic foot, lifestyle changes and adherence to medications. Electronic patient records are maintained at the clinic and the patient is given a comprehensive NCD file with colour coded diabetes monitoring charts. Control rates for diabetes and hypertension are monitored regularly as outcome indicators. Patients are followed up at home by community health workers to reinforce lifestyle changes, identify barriers to these lifestyle changes, screen family members of patients for hypertension and diabetes and remind the patients to keep clinic appointments. Non-communicable disease clinics are coordinated by Dr. Farah Fathima and Dr. Twinkle Agrawal, Associate Professors in the Department of Community Health.



6. **Tobacco cessation clinic** for persons using chewable and smoking forms of tobacco is conducted once a month at CHTC, Mugalur by a specially trained medical social worker. Patients using tobacco products are referred to this clinic by health workers and by cross referrals from other clinics. After assessment, health education is provided using flashcards followed by tobacco cessation advice. Those requiring treatment are started on Nicotine gum. Health workers follow up progress of the patients at their homes. Tobacco cessation clinics are coordinated by Mr. Dilip Davis, Medico-social worker in the Department of Community Health.



7. **Multi-Specialty Clinics** are held once a month at CHTC, Mugalur which include Gynae-oncology, Dermatology, Cardio Thoracic Surgery, Chest Medicine, Surgery and Orthopaedics. Those requiring follow up care are referred to St John's Medical College Hospital.



- 8. **Counselling Services** are provided by a senior social scientist at CHTC, Mugalur to address social issues in the community, providing support, advocacy and practical assistance. Counselling sessions are for individuals, couples, and families experiencing loss, separation, relationship concerns, parent-children conflicts, self-esteem issues, physical and verbal abuse, self-harm and suicidal ideation, issues with sexuality and substance abuse among others. People in need of counselling are referred from the community by the community health workers, or cross-referred from other clinics. Counselling services are coordinated by Dr. Rathnakumari, Social Scientist, Department of Community Health.
- 9. Laboratory Services: The CHTC has an understanding with a local laboratory facility who sends a lab technician to the centre for collecting the blood samples. The cost packages have worked out in such a way that the cost on the the patients are lower as compared to the other labs and the report will also available the next day. The blood investigations include most of the biochemical and microbiological investigations along with other packages like Maternal Health Package, Well Women Package, Non-communicable disease package, Geriatric package, etc

The last 5 years' statistics for Rural Outreach services is as follows:

Services	Details	2016-17	2017-18	2018-19	2019-20	2020-21
Total	Beneficiaries for the Year	30,801	28,565	37,580	24,618	24,163
	No. of General OPD patients seen	10558	10866	11,884	11568	11748
Community Health Training Centre,	No. of children examined during Anganwadi Health Appraisals	20	161	256	326	0
Mugalur (CHTC)	No. of children examined during School Health Appraisal	22	699	708	0	0
Senior Citizen	No. of Rural Clinics conducted	123	109	120	100	108
Health Services	No. of Patients seen	6299	3598	10620	3608	4461
Community Mental Health	No. of Community Psychiatric Clinic conducted at CHTC Mugalur	46	52	45	49	53
Services – Maanasi	No. of Patients seen	967	1095	1073	1176	1459
	No of ENT clinics conducted at Mugalur CHTC	51	44	44	36	29
Community Board	No. of patients seen at Mugalur CHTC	766	1071	961	666	335
Community Based	No. of Outreach ENT clinics	51	41	43	34	31
Ear Care – AshaDhwani	No. of patients seen at Outreach ENT clinics	386	361	365	487	130
	No. of Audiometry done	88	70	83	79	50
	No. of Hearing Aids dispensed	40	53	62	49	65

Services	Details	2016-17	2017-18	2018-19	2019-20	2020-21
	No. of Ophthalmology clinics conducted at Mugalur CHTC	50	46	42	31	31
	No. of Ophthalmology patients seen at Mugalur CHTC	3975	3826	3424	2750	1067
	No. of Retina specialty clinics at Mugalur CHTC	inics at 10 10		1	1	0
Community Based Eye Care – Dhrishti	No. of Retina patients seen at Mugalur CHTC	299	283	38	75	0
	No. of Cataract surgeries performed at Mugalur CHTC	317 318		159	206	52
	Other eye surgeries performed at Mugalur CHTC	23	26	39	26	4
	No. of Spectacles distributed	309	428	231	199	150
	No of national account CUTC March	240	220	1 47	157	105
Maternal Child Health Services	No. of patients seen at CHTC, Mugalur No. of patients seen at outreach clinics at Gundur / Marengere / Siddnapura	240	228	247	157 199	185 271
NCD services	No of clinics held	26	33	30	12	12
	No. of patients seen at NCD Clinics	654	912	915	566	553
	Surgery	88	64	84	39	0
Specialist services			44	74	53	0
at CHTC, Mugalur	Dermatology	287	217	134	128	24
	Physiotherapy	0	498	172	201	44
	Consultations at Unit of Hope Multispecialty clinic	98	50	45	24	83
Community Posed	Consultations at Outreach clinic (Mathru Foundation)	150	160	88	19	0
Community Based Rehabilitation	No. of Disabled-SHG group members	50	100	112	180	240
Renabilitation	No. of Parent Support Groups	45	45	20	40	40
	Community Based Resource Centres	15	25	30	20	20
	No. of Physioptherapy Camps/ Assistive Devices Camps	0	47	9	19	18
No. of people	Maternal and Child Health	876	573	40	90	0
covered by Health	Senior Citizens (Rural)	2221	1454	2160	653	2032
Education	School	1008	192	2200	187	0
Programmes	Women's' groups (MahilaMandals)	227	37	378	140	0
- J	ENT, Eye Care and CBR	75	331	240	161	530

	FAMILY	2016-17	2017-18	2018-19	2019-20	2020-21
	Mental Health	Net	12	19	12	2
	Geriatric	Not — docum — ented —	4	8	2	16
	Marital/Social issues		6	3	10	27
No. of	General	in	11	0	0	0
beneficiaries who	Disability	annual	6	12	4	4
have received	Ophthalmology	report	2	0	0	1
Counselling	Home visits	Тероп	0	0	0	42
services at	INDIVIDUAL					
Mugalur CHTC, at	Mental Health	Net	26	42	47	98
outreach clinics or	Geriatric	Not	14	26	12	28
during home visits	Marital/Social issues	docum ented	22	14	82	93
	General	in	28	19	28	0
	Disability	annual report	13	21	12	12
	Ophthalmology		7	18	8	3
	Tobacco cessation		-	75	47	12

Other Rural Outreach Services

Covid-19 Vaccination in villages of Sarjapur PHC area during the Covid-19 pandemic

The Department of Community Health has coordinated with Sarjapur PHC to conduct several vaccination camps across the villages of Sarjapur PHC with a team consisting of faculty, postgraduate students, community health workers, medical interns and nursing interns from St. Johns, along with the ASHAs and local community. A total of 1055 doses have been given during the six vaccination camps held in villages under Sarjapur PHC



The Department of Plastic Surgery performs 'outreach' reconstructive surgeries at Emmaus Swiss Referral Leprosy Hospital, Palamaner. Dr. Naren, Associate Professor, Department of Plastic Surgery has performed 20 surgeries between 2016 and 2021.

Establishing a Community based Early Interventions and Rehabilitation Program for Deaf Children in a Medically Underserved Community in Gudalur, Nilgiris, Tamilnadu



ENT camps for tribals dwelling in Gudalur taluk, Nilgris, Tamil Nadu

Dr Ramesh.A, Professor of Otolaryngology Head & Neck Surgery has conducted 9 outreach camps for ear, nose, throat consultation for tribal patients (prior screened by health animators) during August 2016 to August 2019 for 142 Tribal patients of Gudalur taluk, Nilgris, Tamil Nadu. Rural outreach camps at Gudalur Adivasi Hospital. The Objective of the program was to establish a community based sustainable early intervention and rehabilitation program for Deaf children belonging to the medically underserved tribal community of Gudalur taluk, Nilgris, Tamilnadu.

Success: Over a period of 3 years all the seven subcentres have community based personnel to screen for hearing impairment and also provide auditory, speech and language rehabilitation to the medically underserved deaf children belonging to the tribal community of Gudalur Taluk in Nilgiris, Tamilnadu



Community Based Workers trained to perform screening audiometry



Community Based Workers trained to create ear moulds



Community Based Workers trained to fit hearing aids and trouble shoot simple issues



Training teachers to include Deaf children in schools

Paediatric Nephrology Outreach Camps

Dr. Anil Vasudevan, Professor & Head, Dr. Priya Pais and Dr. Nivedita Kamath, Associate Professor and team from Department of Paediatric Nephrology, conducted Children's Kidney Camps at RDT Hospital, Bathalapalli, examining a total of 56 patients across two camps on 22nd March 2019 and 30th August 2019



Adolescent Health Education among High School Girls of Anekal Taluk.

Department of Community Health & Department of OBG, St. John's Medical College Hospital in association with BSOG (Bangalore Society of Obstetrics and Gynecology) and Biocon Foundation conducted health education sessions in 14 High schools of Anekal Taluk, in the months of December 2017 and January 2018, one day per school. The objectives of these sessions were to create awareness about sexual and reproductive health and to increase knowledge about healthy eating practices and nutritious diet. Total number of adolescent high school girls who received health education were 931.



Sl.No	Location	School Name	Headmaster's Name	Total girls
1	Anekal Town	Govt Girls HS Anekal	Saroja Nayak	156
2	Anekal Town	Asb Govt PU College	Pramila	26
3	Byagadadena Halli	Govt HS Marasur	Yasho Lakshmi	64
4	Chandapura	Govt High School	Ragu Rama Raja Aras	45
5	Chikka Hosa Halli	Govt HS Indlawadi	Shiva Murthy	98
6	Haragadde	Govt HS Haragadde	Shiva Kumar	120
7	Hebbagodi	Govt HS Hebbagodi	C Narayana Swamy	232
8	Hennagra	Govt HS Hennagara	Yarappa	99
9	Huskur	Govt HS Huskur	Muni Raju	97
10	Mugalur	Govt HS Kugur	Vijaya Lakshmi	53
11	Sabmangala	G HS Sabmangala	Herald	33
12	Sarjapura	Govt HS Sarjapura	Kusuma	101
13	Attibele	Govt Upgraded HS	Vijaya Lakshmi M	80
14	Mayasandra	Govt Upgraded HS	Chikkagangappa 52	

Health Education Programs in Villages of Sarjapura, Lakkur and Domassandra PHC in the year 2021

Village	Date	Target Group	arget Group Topic	
Sollepura	07/01/21	Mahila Mandal	COVID -19	15
Mugalur	22/01/21	Ophthal OPD	Eye	25
P.Agrahara	22/01/21	Mahila Mandal	Cervical cancer	15
Pura	23/01/21	CBR	COVID -19	15
D.T sandra	24/01/21	CBR	COVID -19	19
Pura	13/02/21	CBR	Hygiene	14
Lakkur	18/02/21	CBR	Federation	12
S.medihalli	05/03/21	Mahila Mandal	Tobacco	27
Ganagalur	04/03/21	CBR	COVID -19	8
Neriga	04/03/21	CBR	Group activities	8
P.Agrahara	23/02/21	Mahila Mandal	COVID -19	15
Pura	10/03/21	CBR	vaccine and Bank	13
Mugalur	16/03/21	Ophthal OPD	COVID -19	25
Thindlu	17/03/21	CBR	Group activities	11
Kugur	22/03/21	CBR	Group activities	8
Mugalur	25/03/21	Ophthal OPD	COVID -19	25
Neriga	01/04/21	CBR	Vaccine	8
Lakkur	07/04/21	CBR	Pension	11
Mugalur	09/04/21	CBR	EYE	10
Thathnur	19/04/21	CBR	COVID -19	7
Marangere	12/04/21	CBR	Government schemes	14
Thyavakanahalli	12/04/21	CBR	Ear care	15
Pura	15/04/21	CBR	COVID -19	17
Ganagalur	07/07/21	CBR	Group activities ,Covid-19	10
Mugalur	08/07/21	CBR	Covid Vaccine	9
Mugalur	08/07/21	CBR	COVID -19	8
Thyavakanahalli	12/07/21	CBR	Group activities	10
Pura	14/07/21	CBR	COVID -19	19
D.T sandra	15/07/21	CBR	COVID -19	13
Thathnur	19/07/21	CBR	Covid Vaccine	16
Mugalur	20/07/21	Ophthal OPD	COVID -19	25
P.Agrahara	22/07/21	Mahila Mandal	vaccine	11
Thindlu	23/07/21	CBR	COVID -19	15
Kugur	26/07/21	CBR	Covid Vaccine	12
Mugalur	27/07/21	Ophthal OPD	COVID -19	11
Billapura	27/07/21	CBR	Covid Vaccine	12
Neriga	05/08/21	CBR	Breastfeeding	8
P.Agrahara	05/08/21	Mahila Mandal	Breastfeeding	25
Thyavakanahalli	09/08/21	CBR	Breastfeeding	12
Mugalur	10/08/21	Ophthal OPD	Covid Vaccine	50

Chikknahalli	10/08/21	Mahila mandal	Covid Vaccine	8
Kuthganahalli	10/08/21	Mahila mandal	Gynaecological problems	12
Pura	11/08/21	CBR	Breast feeding	15
Kallikere	13/08/21	Mahila mandal	Breast feeding	25
Mattanahalli	18/08/21	Mahila mandal	Breast feeding	10
Thiruvaranga	21/08/21	Mahila mandal	Breast feeding	22
P.Agrahara	23/08/21	Mahila mandal	Covid -19	12
M.C.Halli	24/08/21	Mahila mandal	Covid Vaccine	25
Mugalur	24/08/21	Ophthal OPD	Covid -19	35
Dommasandra	26/08/21	ANC,PNC	Breast feeding	30
Billapura	27/08/21	CBR	Dengue	12
Thindlu	01/09/21	Mahila mandal	Headache	15
R.G.Nagara	01/09/21	CBR	Dengue	11
Medahalli	01/09/21	Mahila mandal	Dengue	15
Gollahali	02/09/21	School(1 to 5th)	Dengue and Hygiene	20
Mugalur	07/09/21	Ophthal OPD	Dengue	20
Pura	08/09/21	CBR	Dengue	13
M.C.Halli	13/09/21	Mahila mandal	Gyne	20
Jagadhenahalli	17/09/21	School(1 to 5th)	Dengue	33
Mattanahalli	18/09/21	Mahila mandal	Dengue	15
Thiruvaranga	21/09/21	Mahila mandal	Gyne	12
A.K.Halli	21/09/21	School(1 to 7th)	Covid 19	50
Thindlu	22/09/21	CBR	Covid 19	10
P.Agrahara	22/09/21	Mahila mandal	Gynaecological problems	12
Thindlu	22/09/21	School(5th to 7th)	Covid 19	60
Gundur	29/09/21	Mahila mandal	Hypertension	27
Bagur	29/09/21	Mahila mandal	Hypertension	22
A.K.Halli	01/10/21	Men and women	Hypertension	53
Mugalur	04/10/21	School(1 to 7th)	Covid	48
R.G Nagara	04/10/21	Womens	Covid	16
Bagur	04/10/21	School (4th 7th)	Covid	26
S.medhalli	05/10/21	Mahila mandal	Dengue	40
Mugalur	05/10/21	Opthal opd	Covid 19	15
Mugalur	08/10/21	CBR	Breast cancer	12
Lkallikere	08/10/21	School(4th to 8th)	Dengue	19
Mugalur	12/10/21	Opthal opd	Covid	20
M.C.Halli	12/10/21	Mahila mandal	Dengue	27
Gundur	13/10/21	CBR	Covid	14
Pura	13/10/21	CBR	Hygiene	10
Dommasandra	21/10/21	ANC,PNC	Breastfeeding	25
Thiruvaranga	21/10/21	Mahila mandal	Clinic activities	14
Sollepura	22/10/21	CBR	Clinic activities	8
P.Agrahara	22/10/21	Mahila mandal	Breast cancer	16

Bagur	26/10/21	Mahila mandal	Breast cancer	17
Mugalur	02/11/21	Ophthal OPD	Dengue	20
Chikkanahalli	10/11/21	Mahila mandal	Dengue	10
R.G.Nagara	10/11/21	CBR	Breast cancer	8
Mugalur	11/11/21	MCH	Weaning food	15
M.C.Halli	12/11/21	Mahila mandal	Breast cancer	15
Mugalur	09/11/21	Ophthal OPD	Dengue	15
S.medahalli	12/11/21	Mahila mandal	Breast cancer	35
Gundur	15/11/21	CBR	Dengue	12
Mugalur	16/11/21	Ohthal opd	ENT	30
Dommasandra	17/11/21	CBR	Dengue	10
Mugalur	17/11/21	Vaccination camp	Covid -19	40

Unique initiatives in rural areas

St. John's has unique ways of reaching the unreached through its responses to every major national disaster through the Disaster Response Unit; the initiation of care of the elderly through "grama hiriyara kendras" – village centres for the elderly and health services for plantation workers, among others.

Grama Hiriyara Kendra (GHK) A model of support for Senior Citizens in Rural areas

The Department of Community Health at St. John's Medical College, Bangalore initiated the Senior Citizen Health Service (SCHS) in 2005 in the rural areas around Sarjapura and Dommasandra Primary Health Centres in Bangalore Urban district, aimed at improving the all-round health status of the elderly. Geriatric clinics are conducted on a monthly basis in village sites and healthcare is provided to the elderly in and around these villages. Senior citizen self-help groups and women's groups have been formed to promote social cohesiveness and empowerment of the elderly, since they are a vulnerable group.

In working with the elderly, we realized that the problems of the elderly are not just medical, but are also social and psychological, including loneliness and insecurity. A program to support the overall holistic wellbeing of the elderly is therefore both necessary and beneficial. Having worked in the rural area for many years, the Anganwadi kendra model was very familiar to us. The question was: Can we have a centre for elders in the village just like the Anganwadi kendras? Thus was born the idea of the Grama Hiriyara Kendra (GHK) or Village Senior centre.

We initiated a pilot project and established GHKS in two villages of Anekal Taluk (Mugalur and Handenahalli), Bangalore Urban district, in the area covered by the Sarjapura Primary Health centre. The two centres were initially established by St Johns Medical College with the support of Tata Trusts, and are currently being run by locally registered charitable trusts. Two more villages have opted to organize and run GHKs (Kugur and V.Kalahalli). A total of 95 elders currently attend the GHKs daily in the four villages in which they are established.

The GHK is a centre, located in a village, intended for elders to visit and spend the day. The target group for a GHK is an elderly person who is residing in the village and is willing to spend time with others of his/her group. They might be lonely and have other problems or may be well-adjusted elderly persons with a desire to spend time in the company of others.

A volunteer from the village, who is willing to spend 5 hours of time daily is identified in the village. This person mobilizes the elderly, gets the centre ready for functioning from Monday to Saturday, and helps with the daily activities at the centre. Activities could range from a prayer in the morning, yoga/ exercise, some meaningful activity such as paper-bag making, sharing of thoughts and feelings among the elderly and joint cooking to make a snack or a meal.

Based on an external evaluation after 2 years of functioning, the overall goal of improving the wellbeing of the elderly has been achieved, thus moving towards 'Positive Health' for the elderly. Tata

Trusts have facilitated the establishment of this model in the states of Maharashtra, Telangana and in Yadgir, Karnataka. The reports regarding their utilization and utility have been quite encouraging.





Elderly at one of the centres

Interaction with the Panchayat Secretary





Exercises at the Centre





Monthly Clinic at one of the centres

GHK- Mugalur

Disaster Response Unit

The Disaster Relief Unit (DRU) aims at providing medical relief to those affected by disasters across the country especially to marginalized, underprivileged and hard-to-reach communities, in line with the mission and vision of the Institution. DRU was set up based on frequent requests for disaster relief, which required a single channel to streamline our response to the situation. St John's Medical College is one of the few institutions across the country to have such a unit committed to providing disaster relief services.

In the eventuality of any major disaster, the DRU invites volunteers from amongst the staff and the students for the relief mission. The local health authority/ relief agency is contacted to assess the ground situation in the affected area. Contact is also established, if needed, with donors to fund travel, medical supplies and equipment. The teams constituted are briefed by the DRU regarding standard protocols for primary health care, food hygiene, water disinfection, environmental hygiene including temporary shelter and waste disposal, and psychosocial care for the disaster victims. On arrival at the disaster site, the teams report to the local Disaster Mitigation Office/ organization and provide basic primary health care on the field, in addition to public health activities and collaborating with other agencies, both governmental and non-governmental to ensure that relief is provided to the affected communities. The teams that have responded submit reports of the activities done on the field, both to the state governments and the institution.

St John's has facilitated the provision of relief in over 20 major disasters, both national and international. Most of the natural disasters have been in remote rural areas and hard-to reach areas. Some of the major disasters where the DRU has provided relief:

- Cholera in Post War Refugee Camps, 1972
- Andhra Pradesh Cyclone, 1977
- Bhopal Gas Tragedy, 1984
- Bangladesh Cyclone, 1991
- Lathur Khillari Earthquake, 1993
- Orissa Super Cyclone, 1999
- Gujarat Earthquake, 2001
- South Asia Tsunami, 2004
- Floods Bihar, Orissa, 2006, 07, 08, 11
- Riots in Kandhamal, Orissa, 2008
- Floods Karnataka and Andhra Pradesh, 2009
- Earthquake Sikkim, 2011
- Floods Assam, 2012
- Floods Uttarakhand, 2013
- Floods Kashmir, 2014
- Earthquake Nepal, 2015
- Floods Tamil Nadu, 2015
- Floods Kerala and Karnataka, 2017, 2018

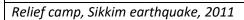




Travelling to affected areas, Uttarakhand floods, 2013

Transport of logistics, Assam floods, 2012







Relief Camp, Orissa floods, 2011

Health and Welfare Audits of tea and coffee plantations in South India

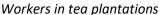
Since 1997, the Department of Community Health has been working with major tea and coffee plantation estates in association with the United Planters Association of South India (UPASI), conducting annual health and welfare audits, while guiding companies in improving the health and welfare of their employees. The team from the Department of Community Health, St. John's Medical College visits the plantation on an annual basis to check on the health and welfare activities in the plantation over the past year including progress made and compliance based on the previous audit recommendations. The health and welfare audit format has evolved over the years; developed based on the discussion and inputs from senior managers with vast experience of working in plantations, from experience and observations during the visit to plantations and keeping in mind national and international standards.

The audit team visits all the lines/residential areas of the plantation employees and interact with employees after examining the macro and micro-environment of the residential units, educational facilities (creches and schools), water facilities (from source to point of consumption) including onspot checking of water for its potability, medical facilities (clinic/first aid centre and garden hospital), chemical storeroom and the factory. Postgraduate students are also included as a part of the audit team, offering a unique learning opportunity. At the end of the day, the estate management and the health team are briefed about the findings and recommendations for improvement are discussed. The report of audit findings are shared with the Head and Senior Managers of the plantations.

The audit recommendations have resulted in several important changes in the plantations:

The condition of the residential quarters has greatly improved with regards to ventilation, lighting, piped water supply and sanitation. Management of both solid and liquid waste are in sync with existing guidelines. The quality and quantity of the water supplied to the housing units has improved and incidence of acute diarrhoeal diseases has decreased. The prevalence of anaemia among pregnant women has decreased and the birth weight of most babies are more than 2.5 kg. More than 90% of the children under five years are within the normal range for height and weight. Systems are in place for screening and follow-up of employees for hypertension, diabetes and other chronic diseases.







Health and welfare audit

Compulsory two-years Rural Social Obligation Service for MBBS graduates

St. John's was one of the few institutes which mandated rural service for its MBBS graduates, long before it became a government policy. Understanding that previous batches of students did not necessarily fulfil one of the main objectives of the Medical College – which was to serve the health needs of medical underserved areas of our country, the Governing Board enlisted the 30 medical graduates from the Batch of 1973 to be the first to sign up for the Rural Service Scheme. From that year onwards students were required to sign a bond committing to serve in rural parts of the country and hence the common categorization of these students as "rural bonders" came into vogue. Since the last 40 years, hundreds of St. John's medical graduates have served their two-year Rural Social Obligation Service. Of these, over 600 alumni belonging to the Sister-Doctor Forum of India have each continued to serve for decades in remote rural areas of the country.

Every year approximately 75% of the medical graduate start the Social Obligation Service in one of the 350 rural hospitals approved by St. John's; 60% of the graduates complete at least 2 years of rural service. Over the years we have approximately 20% of our medical graduates permanently serving in these underprivileged areas.

Dr. Bobby Joseph, Professor of Community Health and Vice Dean Outreach and Distance Education has been conducting site visits to all the rural bond centres which are recognized by St. John's.



Dr. Jessica John, MBBS batch of 2015, serving her two years of rural service at Emmaus Swiss Referral Hospital, Palamaner, A.P. Visit by Vice-Dean for Outreach and Distance Education, Dr. Bobby Joseph



Dr. Andrea D. Johnson, MBBS batch of 2015, serving her two years of rural service at Snehalaya Hospital, Solur, Ramnagara District, Karnataka. Visit by Vice-Dean for Outreach and Distance Education, Dr. Bobby Joseph



Dr. Sr. Gina, MBBS batch of 2013, serving her two years of rural service at St. Mary's Community Health Centre, HD Kote, Mysore. Visit by Vice-Dean for Outreach and Distance Education, Dr. Bobby Joseph







Dr. Sr. Anila John, MBBS batch of 2014, serving her two years of rural service atSacred Heart Hospital, Siddapura. Visit by Vice-Dean for Outreach and Distance Education, Dr. Bobby Joseph

St. John's Medical College Alumni Support to Rural Service

The St. John's Medical College Alumni Association (SJMCAA) continues to support the basic equipment needs of alumni belonging to the SDFI and working in the Northern, Central and North-Eastern regions of India. In 2018-19, new labour and OT tables, a diathermy machine and vacuum extractor were donated. Six sister-doctors were financially supported by the SJMCAA to attend the 14th World Congress of Bioethics held at St. John's Medical College in December 2018.

SJMCAA funded the solar lighting project at Snehalaya Hospital, in Solur village of Ramnagara District which caters to 200 outpatients a day , and a bed strength of 50 inpatients .As a part of this solar project installed in 2017-18, over 50 lights in the hospital now have an uninterrupted power supply .

Alumni permanently dedicated to rural service

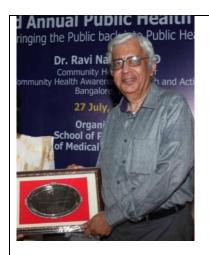
The following alumni are sister-doctors who have dedicated themselves to reaching the unreached and serving the underserved and have been shortlisted for the Mary Glowery Award 2021.



Sr Dr Antony Mary Bellamgonda (Tresa), (Batch of 1964), has served in Chhattisgarh since the last 37 years. An Obstetrician -gynaecologist, she is the Medical Superintendent of the Morning Star Hospital in Raigarh, Chhattisgarh, with 300 deliveries a month, including Caesarean sections catering to the needs of thousands of people from the surrounding rural areas. She has worked to overcome challenges of lack of human resources, lack of facilities and technology, and her personal health problems, to deliver the best standards of care not only to the patients in her hospital, but to those attending her outreach clinics in ten villages.



Kavery Nambisan (Batch of 1965) trained in Surgery from the University of Liverpool, worked in the UK and returned to India in 1977 to work at Nazareth Hospital, Mokama, Bihar. She stayed on in the rural area, serving at Ramakrishna Mission Hospital in Vrindaban, UP, where she helped set up a nursing school. Dr. Kavery also worked at the Rural India Health Project Hospital in Kodagu Karnataka and at Tata Tea Hospital in Annamalais, Tamil Nadu. In between she made brief forays back to UK to update her surgical skills that would benefit those with little or no access to specialised surgery. She retired in 2015 and since then, runs her own clinic in rural Kodagu, Karnataka. She is also a writer, with several published adult novels and a few children's books. Her recent work, A Luxury Called Health is her first non-fiction book.





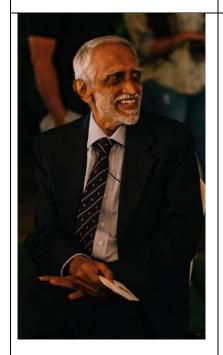
Dr. Ravi Narayan (Batch of 1965) and Dr. Thelma Narayan (Batch of 1971) founded the Community Health Cell (CHC) in 1984 to explore critical issues in community health in India, including promoting and facilitating the enabling dimension in health care and well-being; socio epidemiological approach; and participatory ethos in management and action. In June 1990 CHC was registered as Society for Community Health Awareness, Research and Action (SOCHARA). SOCHARA's participation in the Global Peoples' Health Movement (PHM, Jan Swasthya Abhiyan and the National Rural Health Mission (NRHM), to name a few, are aimed at strengthening the public health system based on the principles of comprehensive primary health care, ensuring equitable access to good quality care, addressing health determinants and reducing health disparities, especially in rural areas. The Centre for Public Health and Equity (CPHE) is an additional functional unit of SOCHAR for public health education and policy advocacy. It promotes a new public health paradigm focused on health equity; social justice; and social determinants of health. SOCHARA has also initiated a School of Public Health, Equity and Action (SOPHEA) dedicated to the education of diverse groups of researchers, health activists and public health professionals with community health fellowships in Bengaluru and Bhopal.



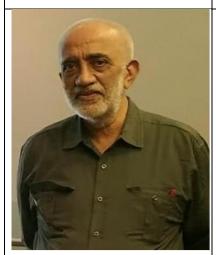
Dr Auburn Jacob (Batch of 1965) is the Medical Director of Emmaus Swiss Referral Hospital & Leprosy project an NGO working in the rural area of Palamaner, Kuppam, Andhra Pradesh. When he joined in 1981, he was moved by the plight of people in urgent need for health care in the rural villages. He trained several paramedical workers, conducted house to house surveys and weekly clinics with free treatment. With the help of doctors doing their rural service, Dr Auburn enhanced patient care using the limited available resources. In 1986 the need for educating the village children was fulfilled by his wife, Kathleen Jacob and the first English medium school in Palamaner was born. The St.John's Institute of Research in 1992 incorporated the PURE study and later the AERAS-TB BCG vaccine trials in the field practice area of the Emmaus Swiss Hospital. Dr. Auburn has worked specifically in the field of leprosy and has collaborated with the Plastic Surgery department of St. Johns Medical College to bring superspecialist surgeons to Emmaus Swiss Hospital to manage complicated surgeries for correction of deformities.



Dr. Charles Kujur (Batch of 1969) began serving the rural areas at Holy Family Hospital, Mandar near Ranchi in Jharkhand as a Junior Medical Doctor for 4 years. After specialist training in General Surgery, he returned to work at the same hospital in Mandar, rural Jharkhand, continuing to take care of all patients irrespective of the nature of their ailments. In 1986, Dr. Charles moved down south to Marygiri Hospital, at Bharananganam panchayat, a rural part of Kottayam district. He has been working there as a general surgeon serving the rural masses unfailingly for over 35 years.



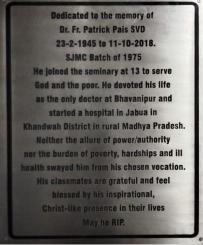
Dr. Mani Kalliath (Batch of 1969) has focussed on preventive and promotive health of the marginalized communities for 35 years of his professional life, at grassroot level for training and field supervision of health workers and providing primary health care, to playing a senior role at the national level at 'Catholic Health Association of India' -CHAI, supporting integration of community health into clinical services of over 3000 member health care centres throughout India, many who work in remote rural and tribal areas. Dr. Mani played an active leadership role in 'Basic Needs India' (BNI), reaching out to roughly 25,000 mentally ill persons and their families in 8 states of India, many from rural and marginalised communities. He instituted 'Fellowship in Community Leadership in Mental Health' which trained over 100 young people in mental health leadership for vulnerable and marginalised groups. Dr. Mani continues exploring and promoting 'alternative approaches to mental health' through building safe social / emotional group spaces.



Late Dr. Shirdi Prasad Tekur (Batch of 1971), worked in the Indian Armed Forces Medical care, retiring as a Captain from the Indian Army. While being a Bengaluru-based paediatrician, he was an advocate of public health and rural health and helped found the Community Health Cell (now SOCHARA). Dr. Tekur was a proponent of herbal medicine who generously gave his time to train others in this field, notably those undergoing Community health workers course at St. John's Medical College, whom he believed would be able to use these skills in remote rural and tribal areas of the country. He plunged himself into disaster relief efforts whenever the occasion arose including the villages of Latur during the 1993 earthquake. He succumbed to Covid in May 2021 and has been honoured with a memorial in a tribal village in Odisha where he had worked along with NGOs for the health and welfare of women and children. https://www.deccanherald.com/city/topbengaluru-stories/remote-odisha-village-honours-b-lurudoctor-with-memorial-1000373.html



Late Dr. Fr. Patrick Pais (Batch of 1975) tirelessly served the marginalized and poor in Bhavanipur and Jabua, rural Madhya Pradesh during his life as a doctor. The alumni from the MBBS batch of 1975 installed a memorial plaque, outside the bone marrow transplant unit at St. John's Medical College Hospital to honour their batchmate Dr. Fr. Patrick Pais.





Sr. Dr. Lyla Jose (Batch of 1978) has worked for 21 years in Maqsudan, Jalandhar, Punjab. A qualified paediatrician, she has also earlier worked in Namibia in areas ravaged by war and active conflict zones, where her bravery and stoicism has helped her overcome challenges of treating patients with little or no support other than her clinical acumen. Despite her personal health challenges, Sr Dr Lyla continues her tireless efforts for the poor and underserved communities of rural Punjab.



Sr. Dr. Mary Martis (Batch of 1982), has served for 32 years in rural areas of Karnataka State. She has been working as an Obstetrician and Gynaecologist among the tribal communities like Gaulis, Gollas, Siddis and Lambanis. Currently serving at Jyothi Health Centre, Mundgod in Uttara Kannada, a 24x7, 20-bedded hospital with 80 – 90 deliveries every month of which most are complicated cases, as well as treating all emergency and routine cases in surrounding villages with an average outpatients load per day 90-100. Now at 65 years of age, Sr. Dr. Mary Martis shows no sign of slowing down and continues her rural service with zeal.



Sr. Dr. Gladys Menezes (Batch of 1982) has dedicated herself to serving the rural unreached communities over the last 30 years. Snehalaya Hosptal Solur, where Dr. Sr. Gladys has been based since 2004, provides services to around 600 outpatients per week, conducts around 150-200 deliveries per month including caesarean sections, village outreach programs, health camps, and health awareness programs. She personally oversees the training of medical interns, nursing interns and postgraduate medical students and nurses who are sent by her alma-mater for peripheral training postings to Snehalaya Hospital. Her untiring efforts in rural health has been recognised through several prestigious awards like the 2014 Karnataka Rathna award by Ahind Association on Social Justice Day, the C.V. Raman Award on Doctor's Day, 2015 and the Samaja Seva Rathna by the Farmers' Association of the District, 2021



Dr. Maya Mascarenhas (Batch of 1980) a specialist in both Pediatrics and Community has served rural communities since the past 25 years. She works at Myrada, an NGO, heading their health programs which she has successfully integrated into their rural development programs. She has led a nine-district program in HIV-AIDS prevention over 11 years, an anemia program across three districts and a 'track and treat' model to address childhood malnutrition. Dr. Maya has led projects to improve the quality of primary health care in 12 PHCs in North Karnataka, introduced community-led programs to identify and manage tuberculosis and non-communicbale diseases in several districts of Karnataka. Since 2010, Dr. Maya is External Consultant for NHSRC, technical support wing for Ministry of Health and Family Welfare, GOI. She has been the task force member for ASHA and CHO program and lead master trainer for all trainings under Ayushman Bharat for all cadres of health care personnel.



Dr. Christopher Lasrado (Batch of 1984) began his journey into rural health care 25 years ago, at Christian Fellowship Hospital, Oddanchathram, in rural Tamil Nadu where his discovery of simple cost effective ways of managing complex diseases inspired him to move to Uttarakand where a vast spectrum of diseases that plagued the poor confronted him. He managed patients who needed intensive care, even ambu-bagging of intubated patients, side by side with routine patients. For the next several years, Dr. Christopher worked tirelessly in rural Bundelkhand, 120 kms from Jhansi, MP as the chief of the Christian Hospital in Chattarpur for 15 years. A surgeon by training, he also functioned there as the physician / pediatrician / surgeon/sonologist in addition to being the Medical

Administrator. Currently he serves the poor and marginalised tribals in rural Mirzapur district, UP.



Sr. Dr. Vijaya Sharma (PG Batch of 1987) has served for 42 years in the rural hinterland of Rajibpur, Dakshin Dinajpur district, West Bengal since the last 23 years. A surgeon by training, she serves the poorest of the poor, mainly tribal communities & Bangladesh refugee settlers through her work at Holy Cross Hospital. She has collaborated with government and nongovernment organisations on several community development projects as well as National health programs like Community Health Animation & T.B. Eradication and HIV/AIDs for School Health Programme. She has spearheaded a project on community based Health & Development through Self Help Groups, building leadership, Grass Root workers Training and Training in Indigenous Medicine.



Dr. Jerry Joseph OFS (Batch of 1987) has been working for the past 12 years in rural Thrissur district of Kerala. He founded the Home of Hope Educational and Charitable Trust, to cater to the needs of the elderly, both ambulatory and bed-ridden and those with advanced progressive diseases, including cancer. Nearly 1400 of these vulnerable people have been provided care by Dr. Jerry and his team. Dr. Jerry's work in the rural areas extends beyond clinical medicine. He has organised awareness programs in schools and other institutions. The Home of Hope is also a training and research centre for doctors and various health care personnel, provides counselling for bereaved families and support for care-givers, financial support, food and clothing and assistive devices, all services being free of cost, making care of the aged and terminally ill accessible and available to the rural poor.



Dr. George Clarence (Batch of 1990), an Orthopaedic surgeon, has been working since the past seven years at the Landour Community Hospital, located outside the town of Mussoorie in Uttarakhand. This hospital through its medical and community health teams provides high quality and cost-effective health care to people of over 200 underserved villages in the Garhwal Himalayas in the 150 km radius of Mussoorie. Dr George performs trauma surgeries across all age groups and manages all orthopedic, rheumatologic and neurologic issues including developmental and acquired disorders. Though trained in Orthopedics, the challenges of limited manpower have required Dr. George to manage illnesses across every specialty of medicine. He is also engaged with several community health and development projects for assessment and management and rehabilitation of children with disabilities in over 70 villages.

COMMUNITY PARTICIPATION

Community Participation: Initiatives include recognizing the rural people as important stakeholders in health, and therefore the Health Committee of CHTC, Mugalur comprises mainly of the residents of Mugalur village and surrounding villages, panchayath members, ASHAs, Women's group representative including local leaders, along with a few representatives from St. John's Medical College. Monthly meetings are held to update the health committee about health service statistics of the CHTC as well as getting feedback about the quality of health care and discuss regarding any improvisation, any new initiatives introduced and finally involve the committee in any future decision making. This involvement in administrating the Centre, has given the people of the surrounding villages a sense of ownership.



Gram Panchayat Meeting – Lakkur

Community Health workers

Community Health Workers: The CHTC has a good community rapport. This has been made possible by the Community Health workers who have been selected from the local villages. The selection criteria of these health workers were that they are permanent residents, married, preferably competed their family, studied atleast 10th std and are active members in community groups. The roles and responsibilities of the health workers include screening in the community for morbidities, referrals, follow-ups and conducting health awareness programmes. They also assist in conducting all the clinic based activities of the CHTC as well as helping in dispensing drugs, checking blood pressure and blood sugars. Some of them are also trained to do highly skilled activities like doing audiometry, dispensing hearing aids, refraction, assisting in cataract surgeries, data entry and analysis. They are all trained to use digital platform on electronic tabs for surveys. These women have been empowered in their communities and are the important link to the villages around CHTC. This is especially true with the training of village women as community health workers to not only be a link between CHTC, Mugalur and the community, but to provide basic health care. They are trained by the department of Community Health to assess refractive errors, screen for cataract, screen for diabetes using glucometer and for hypertension by measuring blood pressure and screen for mental health disorders. The CHTC, Mugalur has started digitalizing the socio-demographic, environmental and health related issues in the villages it is serving. Each community health worker has been given a tablet for entering the household details which will serve as the electronic health records with an unique identity. This

has reduced the storage of paper based data, improved the efficiency of the health workers and better data analyzability.



Community Health workers at CHTC Mugalur



Monthly Education session for Community Health Workers

Community development activities

Women's Development efforts in 18 villages under Sarjapur Primary Health Centre

On 22nd March 2018 the rural Community Health and Training Centre (CHTC), Mugalur celebrated 25 years of women's health and development services in the Sarjapur PHC area. Women's health has always been a priority at CHTC, Mugalur with reproductive, maternal, and child health services at the CHTC as well as outreach clinics at various villages. Services include health education for women and counselling services to address health and social issues in the community, providing support, advocacy, practical assistance and rehabilitation for women in distress. The department of Community Health has a dedicated team for this, comprising of a social scientist, social workers, doctors and public health professionals who are focussed on women's health. Over the past decades we have experienced that Community Development and Community Participation are the key to sustainability of health programs in the rural community.

Community development initiatives thus far have included:

- identifying women volunteers at the village level as change agents for women's empowerment
- organising and managing the Women's Federation, Mahila Mandals (women's association) and Women's Self-help Groups (micro finance) with a total of 431 members.
- training and employing 15 village women as community health workers at CHTC, Mugalur
- income-generation activities, including running a tailoring training centre for rural women, where a total of 1,986 women have completed their six months tailoring course.



Members of Women's Federation





Monthly meeting of the women's federation





Monthly meeting of Mahila Mandals





Monthly meeting of a women's self-help group

Knowledge and skills transfer to the community is made possible through health education programs, peer educators and demonstrations. This is especially true with the training of village women as

community health workers to not only be a link between CHTC and the community, but to provide basic health care, screen and refer cases for further evaluation and management, and follow-up in the community.





Health education programs for women's groups

Our women's groups enable women in the rural area to improve their health and socio- economic status through various women's empowerment programs and activities, including training in tailoring, self-financing via microfinance schemes and supporting rural women in need. Success stories thus far include:

- women's groups providing financial support for a woman with psycho-social health challenges to start a tailoring unit as a rehabilitation service
- funds for economically deprived women to purchase sewing machines or cattle
- funds for single mothers/widows to start a petty shop or sari business in the village.
- identification and referral of girls in the community suffering from psycho-social and economic distress for counselling and interventions to CHTC.
- financial assistance for the education of girls.
- organising group counselling for adolescent girls and adolescent life-skills



Tailoring training program organized and administered by the women's groups





Certificate distribution and valedictory of the Tailoring training programme





Certificate distribution and valedictory of the Tailoring training programme

Women's Self Help Groups: These include organising and managing Mahila Mandals, and Women's Federation. There are 431 women in 27 groups in various villages around Mugalur. These women's groups enable women in the rural area to improve their health and socio- economic status through training, self- financing and working through a network of village level women volunteers. The members of these groups actively participate in various women's empowerment programs and activities, including training training centres and microfinance schemes funded through contributions from the group members. This money is used to support women in times of their need. They also support women and girl children in the community suffering from psycho-social and economic distress.

The women's groups also organise annual events like Women's Day, Picnic and Sports meet as a way of bonding together and having a respite from their regular work









Sports Meet for Women's Groups

Women's Developmental Activities Mugalur (CHTC)	2017	2018	2019	2020
No. of Women SHG members	212	488	807	456
No. of Mahila Mandal members	219	431	807	445
No. of Women's Federation members	34	45	53	54
No. of Women trained in tailoring	24	0	12	16
No. of Trainings conducted for Women's groups	63	168	101	84

Community Based Rehabilitation

is a strategy for equalization of the opportunities and social inclusion of all persons with disability. Empowerment in terms of community mobilization and formation of self-help groups and organizations for persons with disabilities is one of the crucial components of CBR. Self help group (SHG) of Persons with disability (PWD) were started in Mugalur and surrounding rural areas from 2013. The main objective of these groups is self-empowerment and advocacy for PWDs to avail the benefit of the government schemes. The project also runs SHG of adults with disabilities in 12 villages and 2 Parent support groups. There is a registered Federation of Persons with Disabilities.

Participatory Methods of Planning and Evaluation: are preferred alongside formal surveys, relying on qualitative methods to plan and evaluate services in the villages around CHTC, Mugalur. The participation of the community is ensured through participatory methods like social mapping, key informant interviews, focus group discussions and transect walks.

Knowledge and skills transfer: to the community is made possible through child-to-child health education programs, peer educators and demonstration.





Disabled and Care-givers Self-Help groups





Special stimulation Equipment given to School

Assistive devices provided to beneficiaries

RESEARCH

Rural-based service and research grants

St. John's Medical College has been the recipient of several prestigious grants for rural-based service and research, from National Institute of Health (USA) to CBM Germany to TATA Trusts.

No.	Title of Project	Investigators, Dept	Funding Agency	Project
				Duration
1.	Ashadhwani –Hearing	Dr.Dominic Misquith	Christian Blind Mission	1998 till
	Impairment	Dr. Deepthi Shanbhag	(cbm)	date
		Dept of Community		
		Health		
2.	PURE Study: Prospective	Dr. Prem Mony	Population Health Research	2001 till
	Urban-Rural Epidemiological	SJRI	Institute	date
	study & Pure Re-surveys:		MC/Master University/	
	Follow up of Urban- rural		Hamilton Health Science	
	differences in risk factors			
	and cardio -vascular disease		2	2000
3.	Maanasi – Community	Dr. B. Ramakrishna	Rotary Bangalore Midtown	2002 till
	Mental Health	Goud, Dept of	and Rotary Club of Howard,	date
	DI : :: 5 0	Community Health	USA	2004 ::!!
4.	Dhristi – Eye Care	Dr.Dominic Misquith	Christian Blind Mission	2004 till
		Dr. Deepthi Shanbhag	(cbm)	date
		Dept of Community Health		
5.	Senior Citizens Health	Dr. Arvind Kasthuri	North American Chanter of	2005 till
5.	Service	Dr. Pretesh Kiran	North American Chapter of St. John's Alumni	date
	Service	Dept of Community	St. John S Alumin	uate
		Health		
6.	Community based	Dr.Dominic Misquith	Christian Blind Mission	2006 till
0.	Rehabilitation-	Dr. Deepthi Shanbhag	(cbm)	date
	Sustainable inclusive health	Dept of Community	(00)	
	services for persons with	Health		
	disability			
7.	Telemental Health Project:	Dr. Johnson Pradeep	Yale Global Mental Health	2014 -16
	To improve access of	Dr. B. R.Goud	Program 2014, Department	
	services to clients and reach	Dr. Rajeev	of Psychiatry, Yale School	
	of services to the unreached	Radhakrishnan	of Medicine, USA	
	using telehealth technology.	Dept of Psychiatry		
		and Community		
		Health		
8.	HOPE study – Interventions	Dr. Prem Mony	NIH, USA	2014 -19
	to improve adherence to	Dr. Twinkle Agrawal		
	medications for NCDs	Dr. Farah N Fathima		

		SJRI and Dept of		
		Community Health		
9.	Improving Mental Health through Integration with Primary Care in Rural Karnataka (HOPE project)	Dr. K Srinivasan, Professor and Head, Division of Mental Health and Neurosciences, St. John's Research Institute	National Institute of Mental Health, USA	2014-2022
10.	Grama Hiriyara Kendra project	Dr. Arvind Kasthuri, Dr. Pretesh Kiran Dept of Community	TATA Trust, Mumbai	2015-18
		Health		
11.	Health Promotion for school youth by nurses and support groups using adolescent education programme (AEP+) in Jawahar Navodaya Vidyalaya schools	Mrs. Maryann Washington, SJRI	United Nations Population Fund (UNFPA)	2015-17
12.	Economic evaluation of models for integration of mental health with primary care in rural Karnataka	Dr. Farah N Fathima Dept of Community Health	NIH Forgarty International Centre and Global Health Institute University of California	2016-17
13.	Development of KMC Sensor for Position and Temperature: clinical evaluation-	Dr. Prem Mony SJRI	Bill & Melinda Gates Foundation (BMGF)	2016-18
14.	Implementation Research in India (Karnataka state) towards Accelerating scale- up of Kangaroo Mother Care (KMC)	Dr. Prem Mony SJRI	World Health Organisation	2016-19
15.	Social Capital and Maternal and child health outcomes	Dr. Avita Johnson Dept of Community Health	Sub-grant from University of Iowa, USA	2016-18
16.	Assessment of attitudinal barriers of government school teachers to inclusive education in Anekal taluk, Bangalore Urban District	Dr Deepthi Shanbhag Dr Rathna Kumari Dr Ishaani Hanspal Dept of Community Health	Christian Blind Mission (cbm) – Unit of Hope Research Grants	2017-19
17.	Implementation of the National program for the health care of the elderly – A pilot in Karnataka,	Dr. Arvind Kasthuri Dr. Pretesh R Kiran Dr. B. R. Goud	TATA Trust, Mumbai	2018-20

	Telangana and Maharashtra	Dept of Community		
	state	Health		
18.	Managing depression in diabetes: A multi-centre randomized controlled efficacy trial comparing Fluoxetine and Mindfulness in primary care setting	Dr. Johnson R Pradeep Dr .B. R. Goud Dr.Dhanya R Dept of Psychiatry and Community Health	ICMR	2018-20
19.	Data interoperability for improved disability care and rehabilitation services: design and implementation of clinic and community-based Electronic Health Records at Mugalur, Karnataka	Dr Tony Raj Dr Deepthi N S Dr Abijit Waghmare SJRI and Dept of Community Health	Christian Blind Mission (cbm) and St. John's Unit of Hope Research Grants	2018-20
20.	Awareness Regarding Stroke amongst Elderly Hypertensives in a Rural Area of Bangalore District	Dr Arvind Kasthuri Ms Thanmayee G S Mr Vivek Bhat Dept of Community Health	ICMR -Short term Studentship	2019-2021
21.	Long term (2 years) efficacy of indigenously developed micronutrient fortified rice (fortified with iron, vitamin B12 and folic acid) in improving iron stores in school children in Koppal district, North Karnataka	Dr. Prashanth Thankachan, Associate Professor, Division of Nutrition, St. John's Research Institute	Department of Biotechnology (DBT, New Delhi)	2019-2021
22.	Psychosocial factors and self-determination for accessing employment, education, and health services in the rehabilitation of women with disability in Karnataka	Dr RatnaKumari Dr Deepthi Shanbhag Mr Dilip Davis Mrs Sandhya Dept of Community Health	Christian Blind Mission (cbm) and St. John's Unit of Hope Research Grants	2019 till date
23.	Gender roles, masculinity, social capital and violence against women	Dr. Avita Johnson Dr. Nancy Angeline Dr. Rathna Kumari Dept of Community Health	NIH, USA and University of Iowa, USA	2019 till date
24.	The impact of the Covid-19 pandemic on intimate partner violence	Dr. Avita Johnson Dr. Nancy Angeline Dr. Rathna Kumari	NIH, USA and University of Iowa, USA	2020 till date

		Dept of Community Health		
25.	Improving access of children with disabilities to services using Tele- rehabilitation Services	Dr Deepthi Shanbhag Dept of Community Health	Christian Blind Mission (cbm), India	2020 till date
26.	Nutrition and neurodevelopment milestones of 18-36 moths low-birth-weight children born in Koppal District of northern Karnataka India	Dr. Prem Mony Division of Epidemiology St. John's Research Institute	Indian Council of Medical Research	2021 till date
27.	Developing and testing the feasibility of an interactive voice response mobile health application (MITHRA project) for screening, tracking symptom severity and supporting stepped treatment of depression among women in rural India	Dr. K Srinivasan, Professor and Head, Division of Mental Health and Neurosciences, St. John's Research Institute	National Institute of Mental Health, USA	2021 till date
28.	National Task force project on prevalence and etiology of hearing impairment in Bengaluru rural district	Dr Ramesh.A Professor Otolaryngology Head & Neck Surgery	Indian Council of Medical Research	2015 to 2019
29.	Prevalence and etiology of hearing impairment in pre- primary and primary school children and exploring the perceptions about hearing impairment among staff in these settings — A mixed methods study in Bengaluru urban district	Dr Ramesh.A Professor Otolaryngology Head & Neck Surgery	Indian Council of Medical Research	2019 to 2022
30.	Capacity building of Anganwadi workers in management of malnutrition	Dr. Avita Johnson Dr. Nancy G Angeline Dept of Community Health	Biocon Foundation	2022-2024

Students' Research conducted in rural areas

The following are the research studies conducted by interns under the guidance of faculty and postgraduate students from the Department of Community Health:

	Names of students	Faculty and PG Guide	Research Study
			2017
1.	Dr. Sr. Rosa Dangmei Dr. Sr Jisha M.K	Dr. Avita Johnson	Motivators and Barriers to Performance by the Accredited Social Health Activist (Asha's) in Solur PHC area, Ramanagara District, Karnataka
2.	Dr. Priyanka Thomas Dr. Jessica D'souza Dr. Merina Mathew Dr. Bhavapriya Mani Dr. Agnus Jose	Dr. Avita Johnson	Prenatal exposure to indoor air pollution and its association with low birth weight: a case conrol study in a maternity hospital In Ramanagara district, Karnataka
3.	Dr. Sr. Sunita Lakra Dr. Sr. A.Sophia Dr. Jain Ashmika Dr. Sr. Priya Pinto	Dr. Avita Johnson	Use of mobile phones for essential obstetric care among women availing maternal and child health care evices at Snehalaya Hoptal , solur, Ramanagara District.
4.	Dr. Sr. Nidhi James Dr. Sr. Victoria Dr. Sr. Priya Pinto	Dr. Deepthi N Shanbhag	Perceptions and Participation in Birth Preparedness among Husbands of women availing obstetric care services at Snehalaya Hospital, Solur
5.	Dr. Nitya Raghu Dr. Maria Vasnaik Dr. Tom Mishael Dr. Rahul William	Dr. Deepthi N Shanbhag	Nutritional Status, hygiene level, morbidity profile and their effect on scholastic performance among school children in 2 subcenter areas of a PHC in Anekal Taluk
6.	Dr. Swarajyam Dr. Sonu Antony Dr. Amal Antony Dr Dilip K Bata	Dr. Deepthi N Shanbhag	Adequacy of Iodisation of salt at the household level and its associated factors in Mugalur subcenter of Sarjapur PHC Area: A cross sectional study
7.	Dr. Abdul Kader Dr. Stallon Sebastian Dr. Kiryana Mirza Dr. George Jacob	Dr. Deepthi N Shanbhag	No child's play: under five child feces management practices in Sarjapur PHC area, Bengaluru Urban District, Karnataka
8.	Dr. Christopher M Dr. Kriti S Dr. Vivek Peter Dr. Vincy Janet	Dr. Deepthi N Shanbhag	Quality of Life, Disability and productivity loss associated with headache disorders among the adult population in Mugalur and Kuthganahalli subcenters karnataka
9.	Dr. John Lobo Dr. Shawn Serrao	Dr. Pretesh Kiran	Screening for asymptomatic urinary abnormalities as a Biomarker of undetected kidney disease among school going children in rural Bangalore south India.
10.	Dr. Nihal Pinto Dr. Michael Chirayanth	Dr. Pretesh Kiran	Empowerment status of school going adolescents in Anekal taluk of Bangalore district
		L	2018

11.	Dr. Tanvi Ramesh	Dr. Farah Fathima	Awareness, Perceptions, drug adherence and control
	Dr. Abraham George	Dr. Twinkle Agrawal	of blood pressure among known hypertensives in
	Dr. Akhil Xavier	Dr. Deepa Srinivasan	villages of Sarjapur PHC, Bangalore urban district
	Dr. Nikhita Prabhakar		
12.	Dr. Aman Andrews	Dr. Farah Fathima	Mobile phone usage pattern among adult patients
	Dr. Prenal Varghese	Dr. Twinkle Agrawal	with type 2 diabetes mellitus in a sub center of
	Dr. Terence Martin	Dr. Sr. Reni Philip	Sarjapur PHC– a cross sectional study
	Dr. Zubin Jain		
13.	Dr. Avono Kulnu	Dr. Farah Fathima	Work related physiological exertion and psychological
	Dr. Jackson Thomas	Dr. Twinkle Agrawal	stress among flower farm workers of Sarjapur PHC
	Dr. Geoffrey Nongjop	Dr. Madonne Dishani	area of Bangalore urban district.
14.	Dr. Vishak S Rao	Dr. Farah Fathima	Feasibility of Stratification of households based on
	Dr. Stephen H	Dr. Twinkle Agrawal	health needs in Mugalur village, Anekal taluk an
	Dr. Chandan R	Dr. Teny Attokaran	exploratory study
	Dr. Bhoomi Kumari C		
15.	Dr. Helena Makri	Dr. Farah Fathima	Solid waste management: Prevalent practices,
	Dr. Sitarah Mathias	Dr. Twinkle Agrawal	perceptions and health impact in rural south India (A
	Dr. Hemanth D R	Dr. Chandralekha K	mixed methods study)
16.	Dr. Kevin G Mathew	Dr. Pretesh R Kiran	Healthy heart, Healthy you, Ten-year cardiovascular
	Dr. Jewel C Johnson	Dr. Nancy Angeline	disease (CVD) risk among adults in Anekal taluk
		Dr. Radhika Kannan	hospital, Bangalore urban district, Karnataka.
17.	Dr. Celestine Siby	Dr. Pretesh R Kiran	Parenting styles of parents with 1-5 year children in
	Dr. Jerry John	Dr. Nancy Angeline	Government Taluk Hospital, Anekal, Karnataka.
	Dr. Peter T Joseph	Dr. Teny Attokaran	
	Dr. Rahoul Gonsalves		
18.	Dr. Joseph T Noony	Dr. Pretesh R Kiran	Awareness, perceptions and practices of
	Dr. Vivian C Inbarasan	Dr. Nancy Angeline	complementary and alternative medicine among
		Dr. Deepa Srinivasan	patients availing services at Anekal taluk hospital
19.	Dr. Jenson Jose	Dr. Naveen Ramesh	Knowledge, attitude and practice regarding diarrheal
	Dr. Mourice Aashin	Dr. Nancy Angeline	illness and its management among mothers of under
		Dr. Chandralekha K	5 children in Anekal taluk, Bangalore urban district
20.	Dr. Aksha R Mary	Dr. Avita Johnson	Awareness of Cervical cancer and practice of Pap
	Dr. Anju Joseph	Dr. Merlyn Joseph	smears among adult women availing health services
	Dr. Sr. Riyamol Jose	Dr. Chandralekha K	or visiting a rural maternity hospital, Ramnagara
	Dr. Jilshy Varghese		District, Karnataka.
21.	Dr. Caroline P Dsouza	Dr. Merlyn Joseph	Perceptions about caesarean section among women
	Dr. Mariya M Mathew	Dr. Avita Johnson	and health care providers: A qualitative study in a
	Dr. Ramya B	Dr. Radhika Kannan	rural maternity hospital, Ramnagara district,
	Dr. Sr. Sowmya Jose		Karnataka
22.	Dr. Sr. Geena Dias	Dr. Avita Johnson	Determining the quantity and quality of sleep among
	Dr. Sr. Lincymol A	Dr. Merlyn Joseph	antenatal women at a rural maternity hospital, Solur
	Dr. Nikita Sunny	Dr. Deepa Srinivasan	and its associated factors – A cross-sectional survey
	Dr. Shruthi		,
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34.	Dr. Rachna Gohil	Dr. Avita Johnson	Awareness of early childhood development among
	Dr. Sandra Mary	Dr. Merlyn Joseph	young mothers availing health services at snehalaya
	Dr. Presty Lukose	Dr. Suman Varghese	hospital Solur.
	Dr. Sanjana Thomas.		
35.	Dr. Tia Thomas	Dr. Merlyn Joseph	Awareness and appropriateness of complementary
	Dr. Shreya Rasquina	Dr. Avita Johnson	feeding among mothers of children aged 6-24 months
	Dr. Sr. Simy	Dr. Thomson Davis	A Mixed methods study in a rural maternity hospital
			Karnataka.
36.	Dr. Jessica	Dr. Avita Johnson	Screen time use screen- addiction and their
	Dr. Bhoomika B	Dr. Merlyn Joseph	association with depression and other risk factor
	Dr. Deign Maria	Dr. Pooja R Sridhar	among rural school going adolescents in Ramanagara
	Dr. Sr. Christina		district.
37.	Dr. Marciya Umman	Dr. Avita Johnson	Perception of rural women regarding menopause and
	Dr. Divya Devraj	Dr. Naveen Ramesh	their experience of menopausal symptoms -A cross
	Dr. Sr. Anila	Dr. Deepika Nagaraj	sectional study among women visiting snehalaya
			hospital solur.
38.	Dr. Priya Mary Prince	Dr. Avita Johnson	Prevalence of postpartum anxiety and its associated
	Dr. Sr. Anjana	Dr. Naveen Ramesh	factors among women availing obstetric services at
	Dr. Aleena Vincent	Dr. Christy Manuel	snehalaya hospital solur.
	Dr. Anulekha.		
39.	Dr. Kimberley D'Souza	Dr. Merlyn Joseph	Prevalence and awareness of Hypothyroidism among
	Dr. Sahiti Nori	Dr. Avita Johnson	antenatal women at a Rural Maternity Hospital,
	Dr. Verna Mauren	Dr. Sr. Reni Philip	Ramnagara District, Karnataka
	Dr. Sr. Mary Devasiya		
			2020
40.	Dr. Ashna Jose	Dr. Naveen Ramesh	Knowledge, attitude, and practices regarding COVID –
	Dr. Jethin Joseph	Dr. Deepthi NS	19 among adults with chronic diseases in villages
	Dr. Vipin V	Dr. Mia George K	under Sarjapur PHC area, Bangalore Urban district
41.	Dr. Ronel Joseph	Dr. Deepthi Shanbhag	Visual outcomes following cataract surgery at a Rural
	Dr. Senneil Gomes	Dr. Naveen Ramesh	Eye Health Centre in Karnataka – A Retrospective
	Dr. Thara Pinheriro	Dr. Kadambari N	Record Review — CHTC Mugalur
42.	Dr. Eshita Adhikary	Dr. Naveen Ramesh	Occupational health problems and risk attitudes
	Dr. Aidan Barros	Dr. Deepthi NS	among dairy farmers residing in Mugalur gram
	Dr. Darren D Kuttikkat	Dr. Pooja RS	panchayat, Karnataka – a mixed method study
	Dr. Kabibalan Victor N		
43.	Dr. Genesis G Koodaly	Dr. Deepthi Shanbhag	A cross sectional study to assess the lifestyle and
	Dr. Amal T Reddy	Dr. Naveen Ramesh	eating disorders among late adolescents in Mugalur
	Dr. Joseph Kakkassery	Dr.Sr. Cicy Varghese	subcenter, Anekal taluk , Karnataka
44.	Dr.ChristopherD'Souza	Dr. Pretesh R Kiran	Health status of workers and their families in selected
	Dr. Arkadeep Dhali	Dr. Nancy Angeline	brick kilns of in rural south India: A descriptive study
		Dr. Mia George	
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45.	Dr. Athul Kurian	Dr. Pretesh R Kiran	Perceived stress and glycemic changes in patients
٦٥.	Dr. Nathaniel F	Dr. Nancy Angeline	with type 2 Diabetes Mellitus : A cross sectional study
	Dr. Reu Joshine	, ,	1
1.0	Dr. Vilas M Tellis	Dr. Cicy Varghese Dr. Pretesh R Kiran	in Anekal taluk Hospital.
46.			Perceptions and practices regarding COVID – 19 in the
	Dr. Ryan Soares	Dr. Nancy Angeline	elderly attending the Outpatient Department of
		Dr. Philomena Z	Anekal Taluk Hospital
47.	Dr. Daniel Raja C	Dr. Pretesh R Kiran	Convenience food habits and screen time usage
	Dr. B Rathna Roger	Dr. Nancy Angeline	patterns in children 5 years and under in Anekal,
		Dr. Philomena Z	Karnataka
48.	Dr. Suraj S Thota	Dr. Pretesh R Kiran	Depression, anxiety and resilience among the elderly
	Dr. Sanjoe Sajan	Dr. Nancy Angeline	during the COVID – 19 related lockdown in Anekal
	Dr. Akilesh Wodeyar	Dr. Minitta Regy	taluk, Karnataka
49.	Dr. Anna R Menezes	Dr. Merlyn Joseph	Influence of Media (Internet and smart phone
	Dr. C. Srilekha	Dr. Avita Johnson	applications) on Infant and young child feeding
	Dr. Sr. Priya	Dr. Joeberate Vinshula	Practices among mothers of children under five years
			in a rural hospital in Ramnagara District
50.	Dr. Andrea Johnson	Dr. Avita Johnson	Awareness and experience of Kangaroo Mother Care
	Dr. Ashel D'Souza	Dr. Merlyn Joseph	among newly delivered mothers at a rural maternity
	Dr. Sr Rosemary V	Dr. Sr. Cicy Varghese	hospital, Ramnagara district, Karnataka
	Dr. Sr Vimala		
51.	Dr. Ann Jacob	Dr. Avita Johnson	Barriers to antenatal care during the COVID - 19
	Dr. Sr. Mary Viji	Dr. Merlyn Joseph	pandemic: A hospital based retrospective cross
	Dr. Nitisha Ann Josy	Dr. Philomena Z	sectional study in rural south Karnataka- Solur
	Dr. Shulia Lydia		
52.	Dr. Sr. Anju Mathew	Dr. Avita Johnson	Adherence to iron and Folic Acid (IFA) and Calcium
	Dr. Rhea James	Dr. Merlyn Joseph	Supplementation among pregnant women availing
	Dr. Malavika Nadig	Dr. Kadambari N	antenatal services at a rural maternity hospital,
			Ramnagara District Karnataka- Solur
53.	Dr. Sr. Bridget Maria.	Dr. Merlyn Joseph	Attitudes and practices regarding postnatal care
	Dr. Rani Thomas Olasa	Dr. Avita Johnson	during the COVID – 19 pandemic among mothers
	Dr. Esha Kujur	Dr. Minita Regy	availing services at a rural – maternity hospital in Solur
	,	<i>.</i>	– Karnataka
54.	Dr. Sr. Archana Doss	Dr. Merlyn Joseph	Awareness of HIV during pregnancy and prevention of
	Dr. Riya Bijoy	Dr. Avita Johnson	parent to child transmission among antenatal
	Dr. Mekha George	Dr. Mia George	mothers, Solur, Magadi taluk Ramnagara District,
	Dr. Ogul Yao		Karnataka
	_	I	I

Research in rural areas mentored by other departments:

Ī	1.	Dr Sharan	Dr Ramesh.A	Quantification of Hearing Impairment by a
		Subramaniam	Professor	Health Worker using Audiometry in a resource
			Otolaryngology Head & Neck	limited setting
			Surgery	

2.	Dr Royson	Dr Ramesh.A	Efficacy of trained health worker in
	D'Souza	Professor	customizing an ear mould in resource limited
		Otolaryngology Head & Neck	setting: A cost effectiveness study
		Surgery	
3.	Dr Shruthi	Dr Ramesh.A	A Grounded Theory of Perceptions of Normal
	Sashidaran	Professor	children about those wearing Hearing Aids in a
		Otolaryngology Head & Neck	Marginalized community - A Qualitative Study
		Surgery	
4.	Dr Divya	Dr Uma Devaraj	Prevalence of Restless Leg Syndrome in
	Devaraj	Dr. Priya R	pregnancy (PEARLS) -A follow up study
	Mark Bothello	Dr. George D'Souza	
		Professor Department of	
		Respiratory Medicine	

The following are the postgraduate thesis conducted in rural areas by PG students from the Department of Community Health:

- 1. Postpartum Depression A Longitudinal Study of Antenatal Mothers in Villages of Sarjapur Primary Health Center, Bangalore by Dr Meera George under the guidance of Dr T.Sulekha and Dr Avita Johnson
- 2. Adherence to Treatment and Stigma Among Persons Enrolled in a Rural Community Mental Health Programme in Southern Karnataka by Dr Neethu George under the guidance of Dr B.R Goud
- 3. Immunization Status Among the Elderly in Rural Areas of Bangalore Rural district a Study of Knowledge Attitude and Practices by Dr Rakesh J. under the guidance of Dr Arvind, Dr Pretesh and Dr Naveen
- 4. Health Needs Assessment among adolescents residing in Sarjapur PHC area of Bangalore Urban District by Dr.Cency B. under the guidance of Dr.Sulekha T and co-guidance of Dr.Avita Johnson
- 5. Intimate partner violence among women treated for depression at a rural health centre in Bangalore Urban District by Dr Savan Sara Mathew under the guidance of Dr B. Ramakrishna Goud
- 6. Assessment of nutritional status of community dwelling elderly and the factors associated in a rural area of Bangalore Urban District by Dr Minu Rose Mani under the guidance of Dr Arvind Kasthuri and co-guidance of Dr Rebecca Raj and Dr Pretesh R K
- 7. Prevalence of Malnutrition among children with disability in Sarjapur PHC area of Bangalore Urban District. By Dr Apoorva Dore under the guidance of Dr Dominic Misquith and co-guidance of Dr Deepthi N S
- 8. Assessment of Maternal Nutrition and Physical activity and their relationship with neonatal birth weight in rural areas under Primary Health Centre, Sarjapur, Bengaluru, Karnataka A Cohort Study by Dr. Maria Jessy Jose under the guidance of Dr. Naveen Ramesh
- 9. Prevalence of Tobacco Use and Oral Precancerous lesions and their associated factors among adult females in rural areas of a Primary Health Centre in Bangalore Urban District by Dr Jacob Davies Kalliath under the guidance of Dr Twinkle Agrawal
- 10. Effectiveness of a Community Health Worker driven intervention in improving the Quality of Life of Caregivers of Children with Disability registered in a Community Based Rehabilitation Service in rural Karnataka by Dr Sakthi Arasu under the guidance of Dr Deepthi N Shanbhag and Co-guidance of Dr Mrs Rathna Kumari

- 11. Occupational health hazards among faecal sludge operators in a rural area of Bengaluru urban district, southern Karnataka by Dr Anissa Mary Thomas under the guidance of Dr B Ramakrishna Goud
- 12. Morbidity profile and cholinesterase levels among pesticide sprayers of selected tea plantations in South India by Dr Radhika Kannan under the guidance of Dr Naveen R
- 13. Knowledge and practice of foot care among diabetes and prevalence of foot ulcer related conditions in Sarjapur PHC area by Dr Sr. Roselet Francis under the guidance of Dr Pretesh R Kiran and Co-guidance of Dr Nancy A
- 14. Cost of care and quality of life among persons with mental illness enrolled in a community mental health programme of Sarjapur PHC area, Southern Karnataka by Dr Madonne Rufina Dishani under the guidance of Dr B R Goud and Co-guidance of Dr Rashmi R
- 15. Assessment of environmental risk factors for CVD in villages of Sarjapur PHC, Bengaluru Urban district using GIS by Dr Deepa Srinivasan under the guidance of Dr Twinkle A
- 16. Prevalence of probable depression in adolescents attending government High schools in Anekal taluk Bangalore urban district in Karnataka by Dr Teny Attokaran under the guidance of Dr Rashmi Rodrigues
- 17. Comorbidities, secondary conditions and barriers to access, healthcare services among adults with disability aged 18-59 years in the area of Sarjapur primary health centre A cross-sectional study by Dr. Deepika Nagaraj under the guidance of Dr Deepthi N. Shanbhag
- 18. High risk pregnancy and its association with maternal and perinatal outcomes in Sarjapur primary health centre area, Anekal taluk Bengaluru urban area: A cross sectional study by Dr. Christy Maria Manuel under the guidance of Dr Sulekha. T
- 19. Patterns of physical activity and associated factors among adults 18-59 years in a subcentre under Sarjapur primary health centre, Bengaluru, Karnataka by Dr. Joeberate Vinshula under the guidance of Dr Farah Naaz Fathima
- 20. Prevalence of alcohol use and effectiveness of a physician delivered brief intervention in harmful users of alcohol among adult males in a rural community setting in Karnataka, South India by Dr. Pooja RS under the guidance of Dr B Ramkrishna Goud

Publications on rural-based research

Research studies and research projects conducted in rural areas have resulted in many research papers being published in peer-reviewed, indexed journals.

- 1. Kasthuri A, Krishnamurthy A, Kiran PR, Mohammad A, Shanbhag DN. Knowledge and practice regarding hypertension and diabetes among the rural elderly following an educational program: A comparative study. J Soc Health Diabetes. 2016; 4(1): 30-5.
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AWARDS

Awards for rural -based activities and programs

 Dr. Arvind Kasthuri and Dr. Pretesh Kiran received the Vayo Shrestha Samman Award by Ministry of Social Justice and Empowerment, Government of India, on behalf of St. John's Medical College, for Best Institute in Research in the Field of Aging, mainly based on various outreach programs and services for the elderly in rural and urban areas around Bangalore, on 1st Oct 2021.









Vaya Shrestha Samman Award for Best Institute in Research in the Field of Aging, mainly based on various outreach programs and services for the elderly in rural areas. Conferred by Ministry of Social Justice and Empowerment, Government of India, Oct 2021.

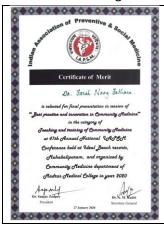
2. The State Government has awarded a "Certificate of Appreciation" signed by the Hon'ble Chief Minister and the Minister for Health & Family Welfare services, in appreciation of the Senior Citizen Health Service and Grama Hiriyara Kendras of St. John's Medical College, on the occasion of World Elders Day – October 1st, 2020.



3. In recognition of the Senior Citizens Health Service of the Department of Community Health, St. John's Medical College, Dr. Arvind Kasturi was awarded the "Best Community Medicine practice" award by the Indian Association of Preventive and Social Medicine (IAPSM) at their annual conference held in January 2020.



4. The residential Rural Orientation Program for medical students by the Department of Community Health was presented at the 47th Annual Conference of the Indian Association of Preventive and Social Medicine at Mahabalipuram in 2020 by Dr. Farah Naaz Fathima and was awarded the Best Practice and Innovation in Community Medicine in the category of Teaching and training of Community Medicine.





5. Dr. Prem Mony was the runner-up for the BMJ South Asia Maternal and Child Health Team-of-the-Year for District-wide Implementation of Kangaroo Mother Care using a systems approach for scale-up in a district in Karnataka, 1st Dec 2018



6. Dr. Suman Rao won the prestigious FNNF award, 2021. Much of her work in mentoring of SNCU nurses in newborn care focussed on hard-to-reach areas of North Karnataka in the poor performing areas of Koppal district.



Awards for Rural-based Research

The following are the awards and prizes for rural-based research:

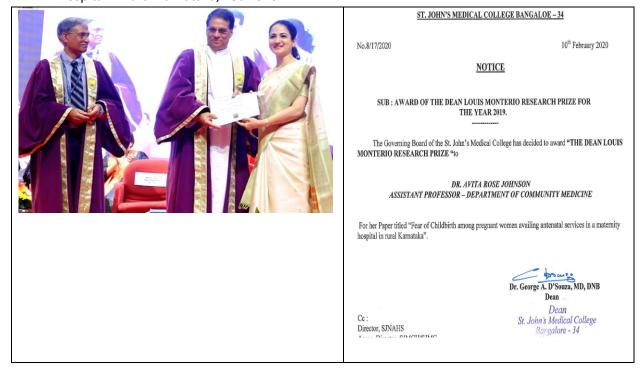
1. Dr. Farah Fathima from Dept of Community Health received the Dr. BK Mahajan Award 2019 by Indian Association of Preventive and Social Medicine for her paper titled "Effectiveness of colour coded Diabetic control monitoring charts among elderly diabetics attending outreach geriatric clinics in rural Karnataka-an open labelled randomized control trial".



2. Dr Divya Devaraj has received the Fr. Thomas Kalam Prize for her research involving rural subjects. Prevalence of Restless Leg Syndrome in pregnancy (PEARLS) -A follow up study, Feb 2020



3. Dr. Avita Rose Johnson, Assistant Professor, won the Dean Louis Monteiro award for her study on Fear of childbirth among pregnant women availing antenatal services in a maternity hospital in rural Karnataka, Feb 2020



- 4. Dr Cency B., postgraduate student in Department of Community Health won the best paper in the NCD category at KUHS National Conference on Postgraduates' Medical Research, Thrissur (THRICON 16), for the paper titled "Awareness regarding breast cancer and knowledge, attitude and practice regarding self-breast examination among women in Solur, Bangalore rural district"
- 5. Dr. Minu Rose Mani, postgraduate student in Department of Community Health won the KACH Millennium Award for Best Poster at the 29th Annual Conference of the Karnataka Association of Community Health, held at SDM Medical College, Dharwad, on 28 Oct 2017 for her poster titled "Knowledge regarding pregnancy and childbirth care among mothers in possession of Mother and Child Protection Card in a rural maternity hospital in Karnataka"
- 6. Dr. Anissa Thomas, postgraduate student in Department of Community Health was awarded Best Paper at the KUHS National Conference for Postgraduate Medical Research, Thrissur at THRICON'17 for her paper titled "Barriers and Motivators to Work Performance by ASHA workers- a mixed methods study", Oct 2017.
- 7. Dr. Meera George, postgraduate student in Department of Community Health was awarded St. John's Research Society award for best paper 2017, for her paper titled "Cultural Beliefs and Practices regarding postpartum care of the mother and newborn among women visiting a rural hospital in South Karnataka"
- 8. Dr Sakthi Arasu, postgraduate student in Department of Community Health was awarded the Best Full Paper in PG category (themed) KACH Millennium Award at the KACHCON 2017 for his paper "Nutritional status, hygiene level, morbidity profile and their effect on school performance among school children in 2 subcentre areas of a PHC in Anekal Taluk"
- 9. Dr. Chandralekha Kona, postgraduate student in Department of Community Health, won Best Paper at the International Public Health Conference, at Amrita Institute of Medical Sciences,

- Kochi, for her paper titled "Awareness of cervical cancer and practice of Pap smears among adult women at a rural maternity hospital, Ramnagara District". 2-3 Nov 2018
- 10. Dr Ishaani Hanspal, postgraduate student in Department of Community Health, was awarded Merit Certificate by St. John's Medical College Research Society for her study titled "Screening for asymptomatic urinary abnormalities as a biomarker of probable undetected kidney disease among school-going children of Anekal Taluk, Bangalore", Feb 2018.
- 11. Dr. Sobin Sunny, postgraduate student in Department of Community Health, was awarded C.K Ramaswamy Award for Best Paper by a PG student at OCCUCON 2019 for "Occupational risk assessment and selected morbidities among cement brick unit workers in a rural area of Bangalore district", at Rajkot, Gujarat, 9-12 Jan 2019
- 12. Dr. Ishani Hanspal, postgraduate student in Department of Community Health, was awarded Merit Certificate by St. John's Medical College Research Society for her paper titled "How prevalent is depression among rural school going adolescents? A cross sectional study in South Karnataka", 7 Mar 2019.
- 13. Dr Radhika Kannan, postgraduate student in Department of Community Health, was awarded with Most promising poster of the session at International Public Health Conference Amrita Institute of Medical Sciences, Kochi, for her paper titled "Healthy heart, healthy you Tenyear Cardiovascular disease risk assessment among adults attending Anekal taluk hospital, Karnataka". 25-26 Nov 2019.
- 14. Dr Christy Maria Manuel, postgraduate student in Department of Community Health, was awarded with Best oral paper presentation at IAPSM conference, in the 'Health system strengthening' category, for her paper titled "Health care seeking behaviours and barriers in accessing health care among interstate migrants of rural Karnataka", Mahabalipuram, 28-30 Jan 2020.
- 15. Dr. V Joeberate Vinshula, postgraduate student in Department of Community Health, received the C.K Ramaswamy Award for the Best Paper by a PG student at the OCCUCON 2020, for her paper titled "Awareness and use of personal protective equipment among power loom workers residing in Sarjapur PHC area", 1 Feb 2020
- 16. Dr. Deepa Srinivasan was awarded the Best postgraduate research award by St. John's Medical College Research Society for the year 2019, for her paper titled "Determinants of duration and quality of sleep among pregnant women in rural South Karnataka A hospital based cross-sectional study", 4 Feb 2020.
- 17. Dr. Deepa Srinivasan was awarded Second prize for oral presentation at the 2nd Annual Research Day, St John's Research Institute for the paper titled "Awareness regarding hypertension and adherence to treatment among hypertensives in rural south Karnataka, India A community based cross-sectional study." Bangalore, April 2020.
- 18. Dr. Pooja Sridhar was awarded Second prize for oral presentation at the 3rd Annual Research Day, St John's Research Institute, for her paper titled "Occupational health problems and perceived health hazards among dairy farmers residing in Mugalur gram panchayat, Karnataka: A mixed methods study," Bangalore, April 2020.
- 19. Dr. Deepika Nagaraj was awarded Merit Certificate by St. John's Medical College Research Society for her study titled "Experience and perceptions regarding menopause among rural women: A cross-sectional study", Jan 2021.

- 20. Dr. Christy Maria Manuel was awarded Merit Certificate by St. John's Medical College Research Society for her study titled "Prevalence and determinants of postpartum anxiety among women availing health services at a rural maternity hospital in South India", Jan 2021.
- 21. Dr. Philomena Zacharias was awarded Merit Certificate by St. John's Medical College Research Society for her study titled "Barriers to antenatal care during COVID-19 pandemic among pregnant women availing routine services: A cross-sectional study in a rural maternity hospital, Karnataka", Jan 2021.
- 22. Dr Pradeep Johnson, Associate Professor, Dept of Psychiatry won second prize for best published paper in community psychiatry for his paper titled 'Risk factor for severity of depression with chronic medical conditions in rural primary health care settings in India' Community Psychiatry Speciality Section of the Indian Psychiatric Society, 13 Oct 2021.

Dr. Sr. Mary Glowery Lifetime Award for Rural Service

Special awards to students and alumni are given on Graduation Day which go beyond the medical curriculum, awards for participation in disaster relief efforts, in social consciousness, in reflective medical writing and a lifetime award for service to the rural marginalized. The Dr. Sr. Mary Glowery Lifetime Award for Rural Service is the highest award of the St. John's Medical College Alumni Association, awarded to St John's alumni for their lifetime achievement of rural service aligned to the vision and mission of St John's, of serving the underserved and reaching the unreached.



The Sr Dr Mary Glowery award, 2021 was conferred upon Sr. Dr. Emmanuel Castelino SAP (Batch of 1968). For the past 43 years and even now, she has served the rural poor of Uttar Pradesh. She was the first Sister Doctor to work in St. Martin De Porres Hospital, Isanagar, Uttar Pradesh in 1978, where she began her mission of bringing health and wholeness to the sick and suffering of that region. At that time this was the only hospital catering to many villages of the surrounding region. Hence, along with Obstetrics and Gynaecology, she also had to manage single handed, cases of multiple specialties like medicine, paediatrics and dermatology. Every day she saw around 80 to 100 patients in the OPD, managed high risk pregnancy cases and those complicated by the handling of local dais. Today, at the age of 79 years, she is still active in the field.



The Sr Dr Mary Glowery award, 2020 was conferred upon Sr. Dr. Beatrice Madukayil SCSC, (Batch of 1964), who has served for over 40 years in Surguja, rural Chattisgarh. She was trained in Surgery in Benaras Hindu University, UP and later in Laroscopic Surgery in Melbourne. She has practised not only all areas of general surgery, but also obstetrics and gynaecological surgeries, completing over 68,000 surgeries till date. The people who have experienced healing at her hands affectionately call her "Devi". She has reached out to people in the far-flung villages through her community health service teams.



The Sr Dr Mary Glowery award, 2019 was conferred upon Sr. Dr. Maristella SCCG (Batch of 1966) who served for 40 years as an obstetrician-gynaecologist in rural Karnataka. She worked tirelessly to build up Snehalaya Hospital, Solur in rural Ramnagaram district, from a 10 bed to a 50 bed hospital. As the only doctor there she successfully conducted caesarean sections with minimal resources, providing much needed emergency obstetric care and high-risk pregnancy care to the rural poor of Magadi Taluk. She has trained nurses, ANMs and medical interns who are posted to Snehalaya Hospital. In 2002, she was presented with an award by the Indian Medical Association, Karnataka State for her dedicated rural service.



The Sr Dr Mary Glowery award, 2018 was conferred upon Sr. Dr. Elizabeth Mani CCV (Aley Kutty), Batch of 1971 for dedicating her life to the service of tribals and Adhivasis of south Gujarat. She truly fulfilled the mission of St Johns of reaching the unreached, by venturing into the forests and serving the communities who had no access to health care. She trained tribal women to become community workers to manage simple health problems. As they were illiterate all the training was done through drawings, pictures, charts, song & stories. After years of serving the tribals Sr. Dr Elizabeth moved to North Gujarat and started working with slum dwellers focussing on HIV AIDS.



The Sr Dr Mary Glowery award, 2017 was jointly conferred upon - Sr. Dr. Lucian SCC and Sr. Dr. Annette Cruz Fernandez FC Sr. Dr. Lucian SCC (Batch of 1965) is a trained obstetrician with a fellowship in paediatrics from London. She has undertaken anemia control program in 49 schools across India, and has been a champion for the Nationwide Campaign on "Save the Girl Child" for gender equity, rights and preciousness of girl children, condemning selective abortions, foeticide, infanticide, through documentary film and CDS. She has organised Ultra Sound training for Sister-Doctors serving in rural areas. From Bangaldeshi refugee camps in 1971 to serving in rural Tamil Nadu to bringing up a 50 bed hospital in Malur, rural Karnataka, Sr. Dr. Lucian has devoted her life in service of the rural communities.



Sr. Dr. Annette Cruz Fernandez FC (Batch of 1978), has to her credit more than 30 years of service in a deprived rural area of Zankhvav, in South Gujarat, working with the most meagre resources and treating tribals. She is the only qualified doctor over a very large area. She has a strong commitment to community health programs. Her Centre has been consistently awarded the best healthcare organisation in the NGO sector in the last few years. One of the outstanding contributions of Sr Annette has been in the field of sickle cell anaemia. She systematically screened 100 villages with health workers and established a comprehensive sickle cell registry of all the inhabitants in the area. Sr. Annette has also volunteered in times of crises like the Orissa super cyclone and the Gujarat communal riots.



The Sr Dr Mary Glowery award, 2016 was jointly conferred upon Sr. Dr. Shobhana SCJM (Batch of 1972) and Sr. Dr. Innamma Mekala CSA

Sr. Dr. Shobhana SCJM Has been working in the rural and remote areas of north India for 35 years. Worked mostly in the state of Jharkhand also in Madhya Pradesh Himachal Pradesh. Continued to be the sole doctor at her health center, a physician, surgeon, obstetrician & gynecologist, paediatrician and orthopaedician.

Her work has been achieved with little or no infrastructure and manpower support

Poverty, illiteracy and Superstitions of the people she meets . Lack of infrastructure and insufficient staff.



Sr. Dr. Innamma Mekala CSA (Batch of 1974)

Has served as Obstetrician and Gynaecologist at Arogyamatha Udumala Hospital, Jangaon, in rural Warangal, Andhra Pradesh for over 30 years and prior to that as a general physician in Kammagudem Village, Rangareddy District, Andhra Pradesh. She faced several challenges over the years especially with lack of manpower and resources, lack of awareness in the villages and sheer poverty of the people. With the help of the social service programme (run by the Sisters in the Arogyamatha Hospital campus, over 3000 women have been empowered. Sr Dr Innamma also collaborated with her classmates to start the Nelson Curryn Eye clinic at her hospital which has completed over 10,500 free cataract surgeries.

Orations by doctors and alumni serving in rural India



The 35th Dr Jayashree Thomas Memorial Oration was organized by the SJMCAA Executive Committee on January 27th, 2018. It was delivered by Sr. Dr. Lizza Ignatius, FSLG (Batch of 1983). Titled "Saga from Sardhana: Bringing the healing mission of St John's to rural India. One Woman & child at a time" This was the first time in its history that a Jayashree Memorial Oration has been delivered by a Sister Doctor.



The 36th Dr Jayashree Thomas Memorial Oration was conducted on 10th December 2018. The oration was delivered by Dr John Cherian Oommen, an alumnus of CMC Vellore, who is now the Team Lead of the MITRA Project – Bissam Cuttack, Orissa that aims to bring health, education, economic security and dignity for all the 13500 people living in 53 tribal villages. His oration was titled "Why not?": Stories and reflections from the frontline. Around 160 people attended the oration. Dr Oomen received a thundering applause and a standing ovation at the oration for his awe-inspiring work.

Celebrations

Celebrating 25 years of Women's Health and Development Services in the Sarjapur PHC area

On 22nd March 2018 the rural Community Health and Training Centre (CHTC), Mugalur celebrated 25 years of women's health and development services in the Sarjapur PHC area. Women's health has always been a priority at CHTC, Mugalur with reproductive, maternal, and child health services at the CHTC as well as outreach clinics at various villages. Services include health education for women and counselling services to address health and social issues in the community, providing support, advocacy, practical assistance and rehabilitation for women in distress. The department of Community Health has a dedicated team for this, comprising of a social scientist, social workers, doctors and public health professionals who are focussed on women's health. Over the past decades we have experienced that Community Development and Community Participation are the key to sustainability of health programs in the rural community.

Community development initiatives thus far have included:

- identifying women volunteers at the village level as change agents for women's empowerment
- organising and managing the Women's Federation, Mahila Mandals (women's association) and Women's Self-help Groups (micro finance) with a total of 431 members.
- training and employing 15 village women as community health workers at CHTC, Mugalur
- income-generation activities, including running a tailoring training centre for rural women, where a total of 1,986 women have completed their six months tailoring course.

Knowledge and skills transfer to the community is made possible through health education programs, peer educators and demonstrations. This is especially true with the training of village women as community health workers to not only be a link between CHTC and the community, but to provide basic health care, screen and refer cases for further evaluation and management, and follow-up in the community.

Our women's groups enable women in the rural area to improve their health and socio- economic status through various women's empowerment programs and activities, including training in tailoring, self-financing via microfinance schemes and supporting rural women in need. Success stories thus far include:

- women's groups providing financial support for a woman with psycho-social health challenges to start a tailoring unit as a rehabilitation service
- funds for economically deprived women to purchase sewing machines or cattle
- funds for single mothers/widows to start a petty shop or sari business in the village.
- identification and referral of girls in the community suffering from psycho-social and economic distress for counselling and interventions to CHTC.
- financial assistance for the education of girls.
- organising group counselling for adolescent girls and adolescent life-skills



Lighting of the lamp



Program was well attended by the rural community



Donation by Women's Federation members for needy women



Skit by Women Federation Members



Prize distribution for competitons



Women's Federation Members

International Day of Persons with Disability (IDPWD)

International Day of Persons with Disability (IDPWD) is celebrated every year on Dec 3rd globally. The observance of the Day aims to promote an understanding of disability issues and mobilize support for the dignity, rights and well-being of persons with disabilities. It also seeks to increase awareness of gains to be derived from the integration of persons with disabilities in every aspect of political, social, economic and cultural life.

The IDPWD was celebrated in Mugalur villagr this year on Dec 15th, 2021. The Associate Director, SJMC Rev Dr J Charles Davies, Head of Dept of Community Health- Dr Bobby Joseph, Panchayat President of Mugalur Gram panchayat Mr. Narayanswamy, Multipurpose Rehabilitation Worker (Disability Commiserate) Mr. Kumar and BIERT, Dept of Education, Anekal Taluk, Mrs Vasantha were the guests for the event.

The program was attended by around 100 persons with disability, their care givers, ASHAs, Community elders, Women's group representatives, members of Disability Federation, Self help groups, staff of CHTC, members of health committee. The formal function started with customary prayer, lighting of the lamp, prize distribution, songs on disability and message from all the invited guests. Several games were conducted for persons with disability coordinated by community health workers, for which prizes were distributed. The program finally concluded with vote of thanks and lunch. The program was coordinated by the Dept of Community Health and the staff of Community Health Training Centre, Mugalur



World Breastfeeding Week

World breastfeeding week (1st to 7th August) is celebrated with much enthusiasm and fanfare at CHTC Mugalur and the surrounding villages, every year. This year too (2021), a variety of programs was conducted as a part of World Breastfeeding Week celebrations. There was a quiz for antenatal mothers, a poster competition at Mugalur Higher Primary School, a well-baby show and a health education program for pregnant and lactating mothers. The week culminated with a formal function at the CHTC, Mugalur attended by faculty, postgraduate students and interns from the Departments of Community Health, OBGYN and Paediatrics, staff and MSc students from College of Nursing.

There was awareness sessions by the visiting faculty, skit and song by the college of Nursing, skit by the medical interns and prize distribution ceremony for all the events held during the World Breastfeeding Week.







Prize distribution



Address by Health Committee Member of CHTC, Mugalur, Mr. Sreenivasaiah



Skit to promote awareness on breastfeeding by interns of SJMC

Women's Day Celebrations, 2022

Women's day was celebrated on 15 March 2022 by the by the Sneha Saanthwana Women Federation, a women's group in the Sarjapur PHC area organized and mentored by the Department of Community Health and CHTC, Mugalur





Invocation song

Lighting of the lamp





Audience





Message from Chief guests





Federation donation for the needy women to start income generation activity

 ${\it Kolata\ by\ the\ members\ of\ the\ federation}$





Folk dance by young women of the community

Certificate distribution for the tailoring trainees





Distribution of the prizes of Sports and games competition

This book has been compiled and edited by Dr. Avita Rose Johnson,
Associate Professor, Department of Community Health,
St. John's Medical College, Bangalore