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AN E-UPDATE BY BRANDCARE

Med-ad Update

Health Care in Rural India- A challenge

More than 70% of India live in rural areas where health care access is limited. Over three-fifths of rural India have to travel beyond five kilometers to reach a health care center.

Rural India , which constitutes more than 70% of the total population, health care reach is a huge challenge. Hospital infrastructure in Rural India has limited facilities. Trained physicians are not ready to relocate to remote areas from urban areas even after many years of medical education and empowerment.

However, today's digital age is bringing better health care facilities to rural areas. A pilot project headed by National Rural Health Mission is targeting 270 million children living in rural areas. Screening and testing would begin at preschool level itself, fortifying early adoption. A plan to consequently collect life time data has been put in place. A four-person medical team visits schools and screens children for diseases and disorders regularly. If required, they are referred to hospitals where

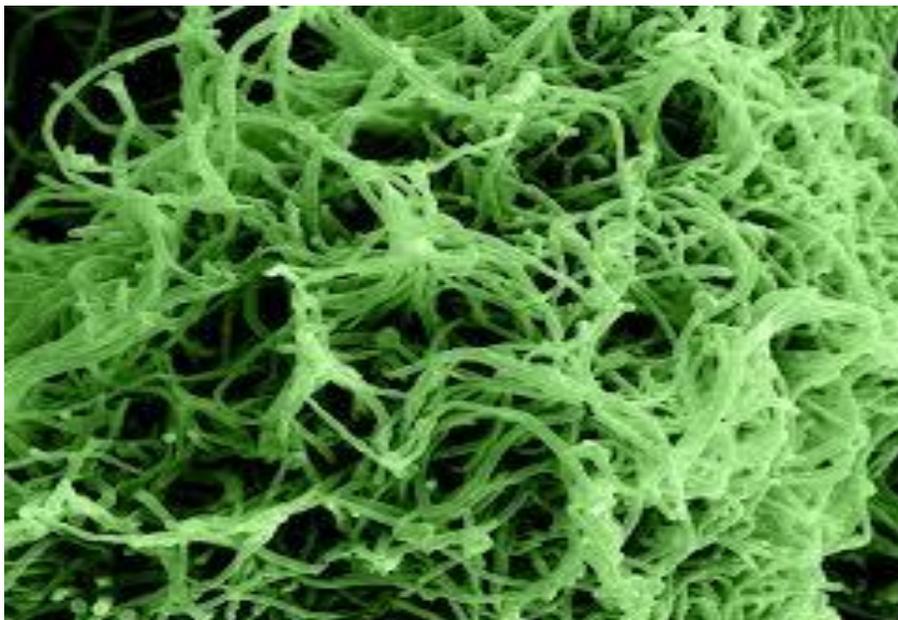
government bears their treatment expenses. All the test results are fed into a central database through tablets eliminating time consuming paper work. Aggregated data is collected, analyzed and fore-casted to estimate healthcare facilities to be setup in such regions. So far, 60,000 children in Uttarakhand have been screened in the five-month window. Eye problems, skins diseases and iron deficiencies are on top of the health issue list. The medical records are stored on the cloud and can be accessed by authorized stakeholders which includes the medical team, hospitals and children's families. This program would give a structure to an organized tracking of diseases and strategizing plans to curb them systematically.



Mid day Meal Scheme

This program supplies free lunches on working days to primary and upper primary classes in Government aided education institutions supported by Sarva Shiksha Abhiyan and National Child Labor Project. Central government issues guidelines to be followed by State government while executing the scheme. HRD ministry is responsible for sanctioning funds and supplying food grains.

Is India ready for Ebola?



With more than a million people affected by Ebola virus in West Africa, the outbreak of this contagious virus has taken a toll, forcing WHO to declare it as a public health emergency of International Concern. To make things worse, this disease does not have any known fully tested vaccine or treatment.

The first strain of Ebola emerged in Sudan and Zaire in 1976, near a river called Ebola, hence the name. There are five known strands of this virus till now, four of them effecting the human species. This disease is often severe, followed by fatal illness, with a mortality rate up to 80%. Fruit bats are considered the most likely carriers of this virus. The introduction of this virus into the humans was through close contact with the infected animal. Once in contact with the virus, it can spread within the community through direct contact with the blood, or other bodily fluids and secretions of infected person. Health workers are the most frequently exposed people, and inadequate resources and improper training makes them more susceptible to the virus.

In Africa, it all started with handling of infected chimpanzees, gorillas, monkeys and fruit bats. Being easily communicable, this virus spreads like forest fire. Once inside the body, it works by liquefying the internal organs, causing some victims to bleed even from their pores.



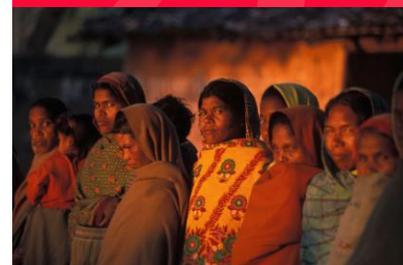
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Outbreak persists in countries with poor sanitation and shortage of resources to contain the virus in isolation. As far as India is concerned, apart from constant monitoring, India's health machinery has to be strong enough and the health officials be given proper training in case this virus strikes. Africa is now facing difficulty in isolating the patients and treating them, for lack of infrastructure and resources. Having a huge population, India would face similar problems when dealing with an epidemic of such magnitude. The government has already swung into action taking precautionary measures like obtaining data of passengers traveling from effected countries and tracking them.

However, unlike the United Kingdom and the United States, no treatment facilities with right equipments have been set up to deal with sudden outburst of patients. Though circulars have been issued from the government to health departments, there has been no impartment of training at the ground level to deal with an outbreak. This could have serious economic consequences too, with other countries preventing flights to and from India, as is being one with Africa right now. Also, with Africa's growing population pushing into tropical environment: farming, forestry, grazing cattle humans become more prone to carrying the infection to their communities. Medical research teams are on the run to make drugs that could bring the situation under control. It is being debated if untested drugs like 'Zmapp' from Mapp Bio-pharmaceutical could be rolled out in the market or if it is unethical to introduce untested drugs inside a human body.

PREVALENT HEALTHCARE PROBLEMS IN RURAL INDIA



Majority people die due to preventable diseases like diarrhea, measles and typhoid.

66% of rural population do not have access to critical medical care.

92% of health care visits are to private providers of which 70% is urban population.