

## Alumni Corner

**Dr. Vishal Ghanghar, PGDPHM Alumni IIPH-Gandhinagar**

### Paper under review for publication

Effect of oral hygiene training to Anganwadi workers on improving oral hygiene of preschool children

### Author detail

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### Abstract

#### Introduction

Globally, Dental Caries is categorized in the list of public health problem in the children. Aged Dental Caries in young children frequently leads to pain and infection necessitating hospitalization for dental extraction. Early Childhood Caries (ECC) is a topic of concern not only due to its association with toothache, infection, early loss of tooth and interruption in permanent teeth eruption but also with the reduced height and weight of child.

#### Aim

To assess prevalence of ECC among 3-6 year children attending Anganwadi Centres in Gandhinagar district of Gujarat and to assess effect of oral hygiene training to Anganwadi workers on improving oral hygiene of preschool children.

#### Result

In this study, total 226 children were examined. 96 children were found to be having ECC. Overall prevalence of ECC was found to be 42.62 %.

Initially at the time of pre training it was found that, in around 55% of children OHIS was poor and in 45% of children it was found to be fair. After intervention 42% decrease was found in poor OHIS and a fair increase was of about 31%.

#### Conclusion

Future health promotion and education programs in Anganwadis should include oral health issues and the risk factors for ECC, and its consequences should be addressed. Effective strategies should be developed to promote the use of brush and paste for cleaning teeth. Provision of other services such as hand washing should be included. Once in a year this type of OHT program should be conducted.



## Students' Corner

### 'What else can we expect from Mrs. X' - A story untold

**Abhijeet Saxena, MPH 2nd year student, IIPH-Gandhinagar**

Women in Indian society are expected to efficiently strike a balance of all her responsibilities as a mother, wife, daughter-in-law, sister, so on and so forth. Adding to all this, many women, be it in urban or rural areas work at par with men to earn bread / livelihood for their families

Similar is the story of Mrs. X, a very hardworking woman, who is occupied with household chores all through the day. Every single day, from 4am early in the morning up to late night, she is loaded with expectations she has to meet at home or in the fields. A mother of three; a 3 year old boy and two girls each 6 and 10 years of age respectively, Mrs. X also works in the fields as a daily wage laborer from 8am to 6pm. Her husband works as a helper in a town shop where he is required to provide service from 8 in the morning till 6 in the evening. Also, they own two goats, which further helps in adding to the resources of the family. Coming from a very poor household, they do not have toilet facilities in the house and hence as is the case with many other women in the remote rural parts of the country, she having left with no choice, go for open defecation with other women either early in the morning before sunrise or late after sunset. Waking up at 4 in the morning, cooking meals, dropping her boy to the Aanganwadi Centre, walking to the field which is around 3 miles away for work, taking care of the grazing goats and then way back to home, this forms all of her routine till 8 in the evening. The arrival of monsoon has further added to her range of activities. Monsoons are seen as a boon especially for those working in the agriculture sector, whether they are farm owner or just workers in the farm.

Thus, seeing it as an opportunity to generate some more income for the family, she puts in extra effort in clearing the fields of previously grown crops to concoct the fields for the following monsoon. With both parents being at work, the eldest daughter of Mrs. X, looks after both her younger siblings. Attributing to the poor financial condition of the family, the food prepared suffices for none. The youngest of the three siblings is fed at the AWC but that still doesn't meet the needs of the child. Nevertheless, goes on the life of this family. An ideal wife and mother, she ensures they eat first without ever worrying about the food remaining for her meal. There have been times, when she sleeps with just water as her meal. With so many tasks to be accomplished each day, she has to wake up early in the morning without fail. And this does not end. It goes on and on for Mrs. X.

How can a woman working so hard through the day, with less than minimal food and a sleep of 3-4 hours be healthy enough to take care of her family?! As rightly said, "a healthy woman means a healthy family", amongst all this, they need to also take care of themselves. Then how is it that we as public health professionals expect her to take care of her malnourished son and stunted & anemic daughters by feeding them properly, adequately and regularly. As an outsider, unaware of the actual realities, we feel that a woman juggling with so many activities will be able to best prioritize what is good for her family. But...the situation is not so! There exist various social determinants of health that revolve around in the lives of people with such stories that overshadow the choices they make. With many similar stories in a country like ours, it is therefore of the need of the hour to understand the gravity of the situation having an insider's view.



# Reflecting on my Internship Experience

Anjana Aggarwal, MSc CR 2nd year student, IIPH-Delhi

Now that I am two month old intern at FeSPAW project, I figured that it's time to reflect upon my whole internship thus far: how this experience has influenced my future and how my clinical research program prior to my internship has helped me here.

First and foremost this experience has affected me in ways I did not foresee. As with most experiences in life things do not usually go as planned, but always end up leaving you with something good and worth-while (and often better than what you had anticipated). At first I was slightly frustrated and disappointed that the mandate and working conditions would not be that of what I had expected (of which I thought I had signed up for), but over the past two months I can see that in many ways this discrepancy has turned into a wonderful and unique experience.

An internship in two hospitals (GTB hospital and Safdurjang hospital), which are well recognized and known for their excellent team of doctors and facility, was a brilliant source of knowledge for me. Firstly, I was able to physically see and experience the concepts that I had learnt throughout my master's program. This provided me a chance to reflect upon what I had learnt in the past. On the other hand, I was able to gain some very important insights of working with seniors officials in reality. I was able to utilize their experience as a guide to correct my mistakes and discovered more skills that might be of use in other real time projects where I will be working full time.

Other than the skills that I developed during my internship, I felt like sharing some beneficial lessons that I learnt from this:

1. How to behave with the staff and patients: This being my first time in hospital environment, I didn't know exactly what to expect. The environment was quite relaxed, yet it taught me how to behave in the workplace. Just observing the everyday events has taught me more about teamwork, and how people can come together to get things done.



2. Speak Up: Many times, I was too afraid to walk around or bother anyone. But eventually, I realized that if you need help then just ask because it's a learning phase and no one is going to judge you.
3. Work hard: This is an obvious one, but don't waste time. You're there to work, and they didn't have to give you this opportunity. Make the most of your time and theirs.
4. Mimic your co-workers: Watch how they interact, how they talk, how they dress, and their repeated habits. For example, if you notice that everyone is always on time and takes punctuality seriously, you should better be there at 9:00 a.m. sharp, or earlier. You can learn a lot about office etiquette procedures from the ones who have been there for twenty years.
5. Talk with your co-workers: Co-workers have a lot of experience and they have obviously made it in that particular field. Ask them how they got this far and what advice they have for you. You could learn a lot and get some great ideas.

In conclusion, I would say that other than being cherry on top of resume, a person can gain a lot from participating in internship.



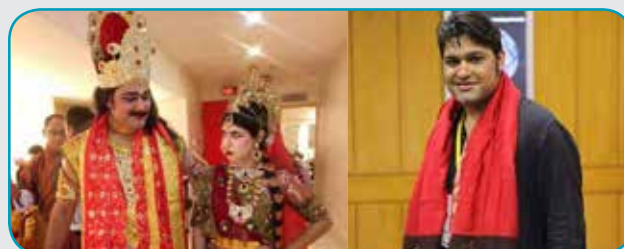
## Participation in Second International Ramayana Festival

**Dr. Kartavya Tiwari, MPH 1st Year student, IIPH-Delhi**

Dr. Kartavya Kumar Tiwari, Student MPH 1st year at IIPH-Delhi under the guidance of his Guru Padam Bhushan Dr. Saroja Vaidyanathan participated and represented India in the country's troupe for the 2nd International Ramayana Festival organized by Indian Council of Cultural Relations (ICCR). The festival showcased a glimpse of the magical alchemy of the various versions of Ramayana from 5 different countries of the world (Bhutan, Thailand, Sri Lanka, Singapore and India). The show took place at Kamani Auditorium, New Delhi on 10th October 2016. Under the guidance of his Guru he was also a part of the Choreographer's (Dr. Saroja Vaidyanathan) Core Team for the 14th Pravasi Bharatiya Convention, 8th January 2017, Bengaluru.

The cultural programme had a medley of the rich and diverse folk and classical dance and music forms covering length and breadth of India.

Dr. Kartavya Tiwari was also a part of the organizing team for the TEDx Tughlaq Rd event held on 4th December 2016, New Delhi. He was actively engaged as a team volunteer in the event.



## Life of Migrants in A Resettlement Colony in Hyderabad

**Tejaswini J, Anusha Puppala, Sandhya Rani, MDK Kiran, MPH 2nd year Students, IIPH-Hyderabad**

As a part of curriculum a field visit was organized by IIPH Hyderabad and the 2015 batch of MPH students to visit a Resettlement Colony named (Chinnagangaiah Nagar) located at Gachibowli on 8th and 14th of March 2015 for interviewing some of the families of that area. Students were divided into 12 teams, each team had two members, who interviewed 2 families with a structured questionnaire. On the first day students were asked to collect data and make interpretations about social, economic and physical environment and on the next day about health and health care aspects.

Data was collected from 16 households on various attributes like Demography, Income, Housing, Nutrition, Health (access, expenditure, use of services) and others. The data was later analyzed using excel. Based on analysis of data following recommendations were provided by students, which would help in improving the quality of life of the people living in urban slums.

1. Government should recognize migrants living for more than 5 years in a particular area and give them basic coverage for Health and Public Distribution System.
2. The residents need to be made aware of the nearest UPHC and Area Hospital. They should be counselled about the pre-conceptions they have about the public health system.

3. People need to be made aware about the benefits and beneficiary cards they are entitled to through awareness drives.
4. Local and religious leaders should be involved to promote health and healthy practices in the Resettlement colonies.
5. They should be made aware of proper storage of water in vessels for drinking & other purposes.
6. They should be made aware about proper waste disposal & importance of cleanliness and sanitation.
7. Majority of the households have bank accounts, it can be an opportunity for the Government to deposit the health care incentives or subsidies by linking their Aadhar and ration cards with the bank accounts which would help in reducing the out of pocket expenditures.

### Conclusion

If these recommendations are put into action the quality of life of the migrants would be improved. More than these recommendations, Government should develop villages in terms of roads, education, health care facilities, irrigation and employment opportunities which will reduce rural to urban migration.

## Sharing Experiences

**Sandeep Soni, MPH 1st Year student, IIPH-Delhi**

I am Sandeep Soni from MPH 2016-18 and I would like to share with you some of my experience in the field of public health in my previous work i.e National Mental Health Survey in All India Institute of Medical Sciences, Bhopal, supervised by NIMHANS Bangalore under Ministry of Family and Health Welfares, Government of India. I have learnt a lot from that work. I had worked at grass root level in the community in rural areas. Working on this initiative is a matter of great pride for me as for the first time in the history of medicine in India this Government took this initiative to know the prevalence of the mental disease in the country and also understand the financial burden and Human Resources availability throughout the country. This survey was carried out in twelve states in the country.

My job profile involved meeting various stakeholders at district level like Collector, Superintendent of Police, Chief Medical and Health Officer and also Village Sarpanch. I was involved in mapping of the village and thereby conducting interviews of eligible candidates in selected households.

We were provided a tablet to record responses and our tool was Mini International Neuro-Psychiatric Inventory 6.0 (MINI) which contains the questions about:

- ◆ Depression
- ◆ Bi polar mood disorder
- ◆ Generalized Anxiety Disorder
- ◆ Schizophrenia
- ◆ Eating Disorder (Anorexia Nervosa, Bulimia)
- ◆ Obsessive Compulsive Disorder
- ◆ Post Traumatic Stress Disorder
- ◆ Substance Abuse Disorder
- ◆ Intellectual Disability Survey
- ◆ Autism Spectrum Disorder



- ◆ Tobacco questionnaire
- ◆ Epilepsy questionnaire
- ◆ Health treatment and Care
- ◆ Sheehan Disability Scale
- ◆ Socio-economic impact of illness

I was surprised to know that most of the patients who had some kind of mental illness were unaware of it. Moreover those who know about the disease were hiding it because the social stigma about mental illness in our society. The community had a disgrace or public disapproval towards the mental patient which has devastating consequences not only for the individuals with mental illness and their families but also for the community. People with mental health problems often experience discrimination in all aspects of their lives (like work, education, marriage, etc.) and there is a strong social stigma attached to mental ill health. The problems are made worse by the stigma and discrimination experience – from society, but also from families, friends and employers. Stigma and discrimination worsen mental health problems and delays or impedes help-seeking, treatment and recovery. Social isolation, poor housing, unemployment and poverty are all linked to mental ill health. Hence, stigma and discrimination traps people in the vicious cycle of illness and constitutes a significant barrier not only to help-seeking but also for successful treatment leading to poor outcomes of mental illness.

## Sanjeevani Health Mela

**Priya Bhavsar, MPH, 1st year student, IIPH-Gandhinagar**

A two day health camp (Sanjeevani health mela) was organized by NYASA-IIT Gandhinagar with the support of The Desai foundation on 28th and 29th January, 2017 at IIT Gandhinagar campus. Timing of the camp is 9:00AM to 1:00PM. NYASA is completely a student initiative, all the activity is organized by students only. Five students from MPH 2016-18 batch participated in the event but other students also helped in formulation of questionnaire. As the name suggests, the camp was about health issues and was organized by the engineering students with the help of health professionals.

The main aim of the camp was to assess the health status of people residing in near by villages and to create awareness regarding general healthy practices. The management of camp was meticulously planned by the volunteers of IIT. The whole camp was comprised of general OPD services, eye check up, dental check up, screening of hypertension and diabetes and interactive activities for the children related to healthy behavior. The General physicians, surgeons, dentist, orthopedic, ophthalmologist, staff nurse, ASHA, FHW and volunteers from the other institutions were also the part of the camp.

Around 940 people came to the camp from the nearby villages. IIPHG students were engaged in data collection (biographic information, anthropometry measurements, health status, hygiene and sanitation related information). Students collected biographic information, anthropometry measurement and

health status for the each person and also took a hygiene and sanitation related information of around 180 people. Children activities were also organized along with games so as to provide awareness regarding health, healthy practices and its importance at a same time. Children also enjoyed a lot this interactive session.

The names of IIPHG students who participated in Sanjeevani Health Mela are as follows:

1. Deepak Vishwakarma
2. Ameer Trivedi
3. Bhoomi Vyas
4. Ritu Patel
5. Priya Bhavsar





## Institutional events

### Book Exhibition on 13-14 October at IIPH-Delhi Library

IIPH Delhi has a good library with the collection of more than 4000 books and around 400 audio visual resources. IIPH Delhi library is automated library and also have access to digital repository on D-space.

Every year IIPH Delhi library organizes book exhibition for its users such that they can select and recommend books of their choice to enrich the library collection and fulfil their requirement as well.

In 2016, Book exhibition was organized at IIPH-D Library on 13th and 14th October for in-house users.

Books from different publishers were displayed at the library. Mainly books published by Jones and Bartlet and Viva books were displayed for users review.

All PHFI users, IIPH-D faculty, students and operation staff were invited for the exhibition. Books recommendation forms were provided to users to select and recommend the books of their choice to procure for the library.

Most of the students from MPH, PGDPHM and MSc CR participated in the exhibition and showed their interest towards the books related to their respective fields.

Staff members and Faculty members also participated in this exhibition.



# Kalrav

## Annual cultural event of IIPH-Gandhinagar

A time when the entire campus gets vibrant and live as the name KALRAV itself tells there is chirping throughout the week and a final shout out at the event-the cultural night.

Kalrav is a legacy from seniors and faculty members, and thus the IIPH-Gandhinagar team was ready to sweat and shine to make it a success. The cultural week started with theme days:

- ◆ "Angels and Demons"
- ◆ "Traditional Days"
- ◆ "Hippies and Taporì"
- ◆ "Mismatch"

This was really fun and beautiful.

Kalrav had different competitions as well, like Essay writing, Poetry recitation, Rangoli, Art gallery, Antaskshari, extempore etc. After a colorful week came the finale night, with the guidance of experienced faculties and support from entire batch, week long effort of the committees and the participants students were able to put on a great show.

Once it was announced "Lights.. Camera.. Action" then there was no looking back, The beautiful auditorium at IIPHG was dazzling with lights and packed with audiences who had smiles on their faces and spark in their eyes. The event witnessed singing, dancing, drama, performances from teachers senior students, the government sponsored candidates, live music and the most elegant fashion show showing the traditional taste of India and the flying waves of western culture with the music vibes that played to the rhythm.

Beautiful performances dazzled the stage amused the people and lingered in hearts

