AFTER SHOCKS (S

Disability and Rehabilitation of the victims of
Japanese Encephalitis in
Eastern Uttar Pradesh
Part -I

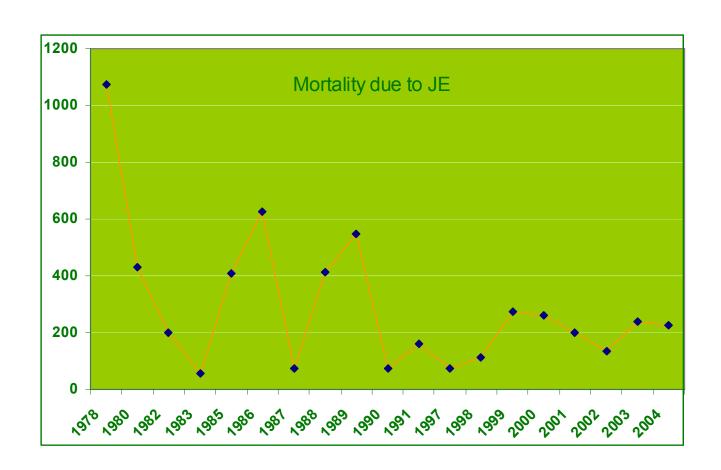




J.E.: A threat to existence

- J.E. a killer disease
- more than 10000 dead since 1978
- more than 100thousands affected
- 20% of the affected face disability

Death due to J.E. in Uttar Pradesh

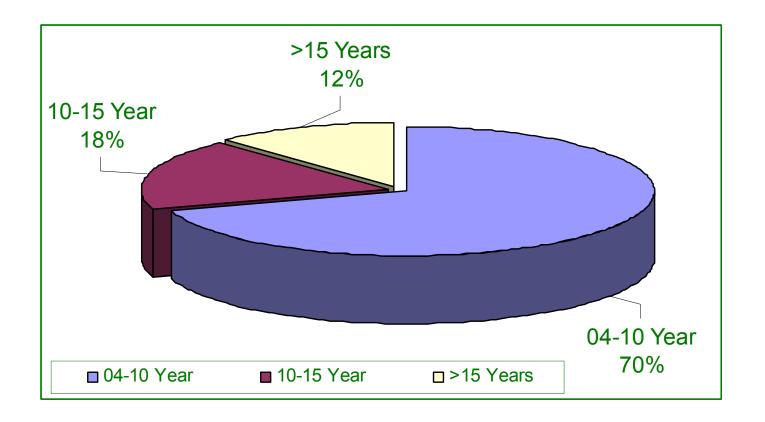


About study

- Methodology
 - Sample survey of randomly selected 40 cases
 - Three districts; Kushi Nagar, Maharaj ganj and Gorakhpur
 - Use of questionnaire
 - Semi structured interviews

Findings (1)

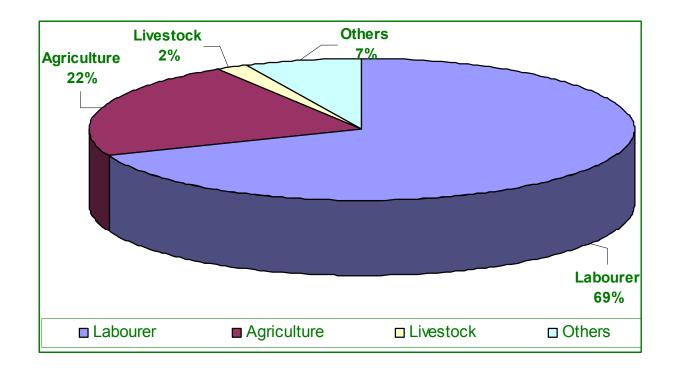
Age Group Age Profile of Disabled



Findings (2)

Economic Profile

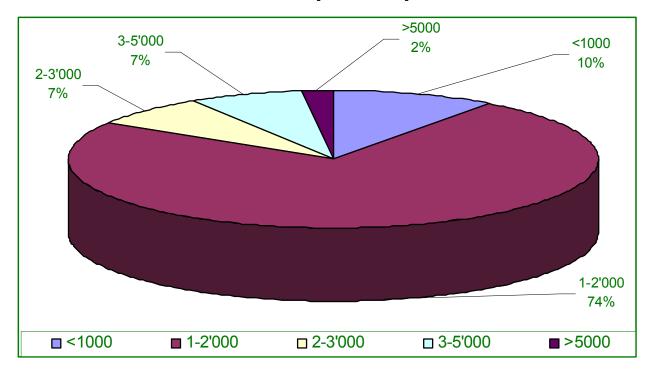
Family Occupation



Findings (3)

Income Group

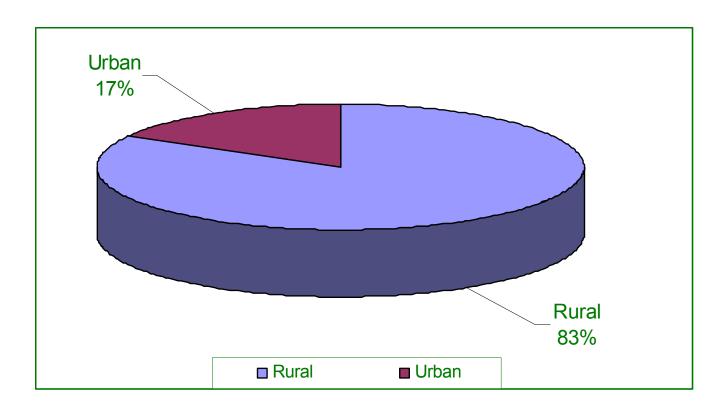
Income Group, in Rupees



Findings (4a)

Habitation

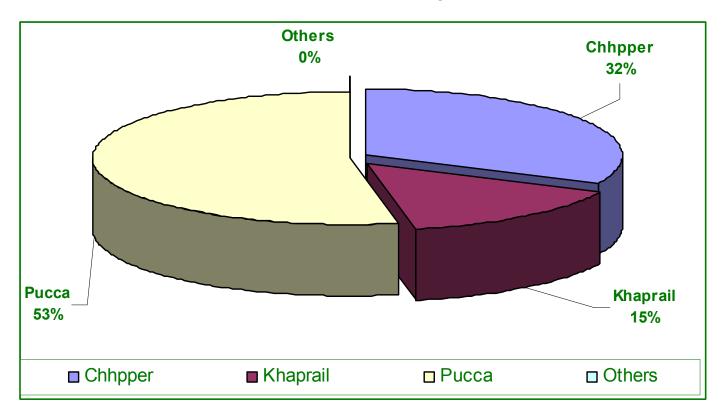
Location of the House Hold



Findings (4b)

Habitation

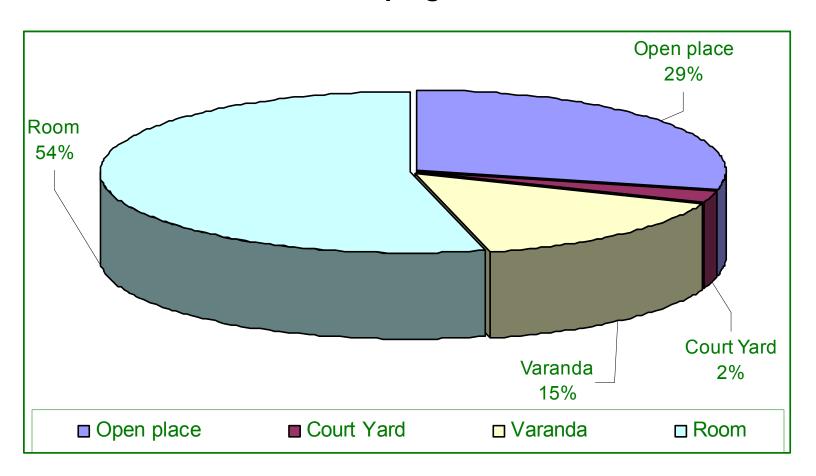
Residence type



Findings (4c)

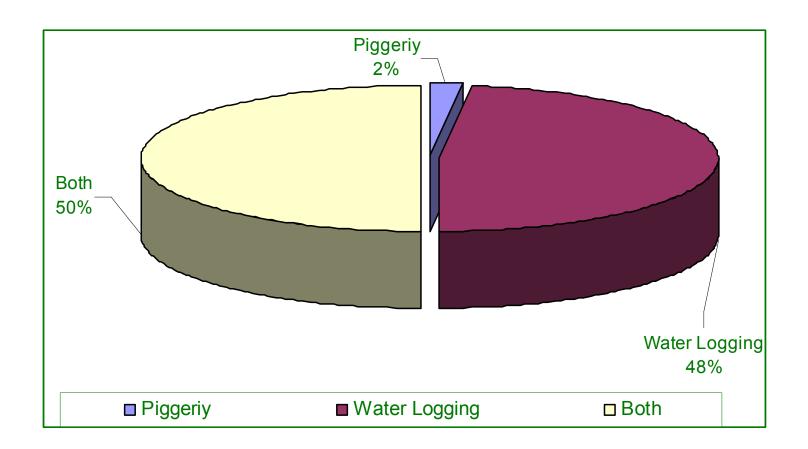
Habitation

Sleeping Place



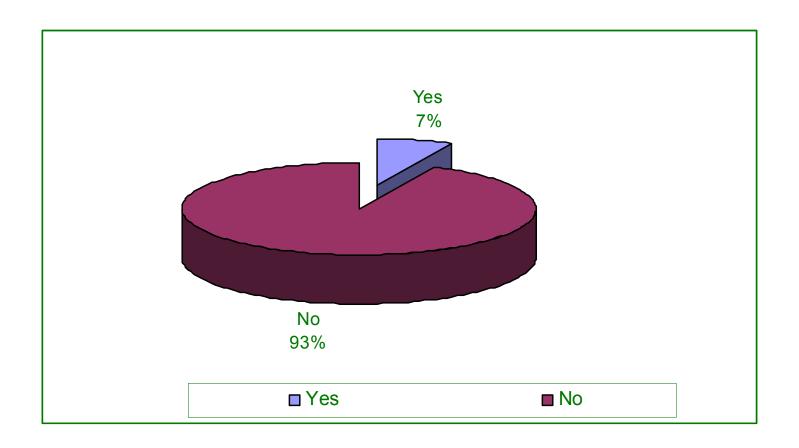
Findings (5)

Surroundings



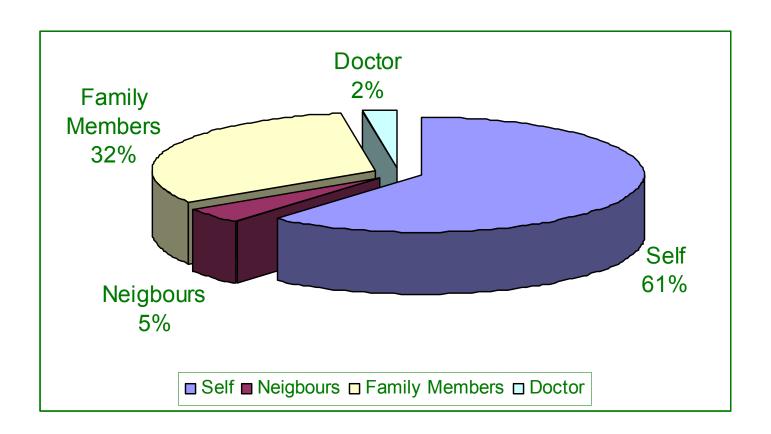
Findings (6)

Awareness (Before being infected)



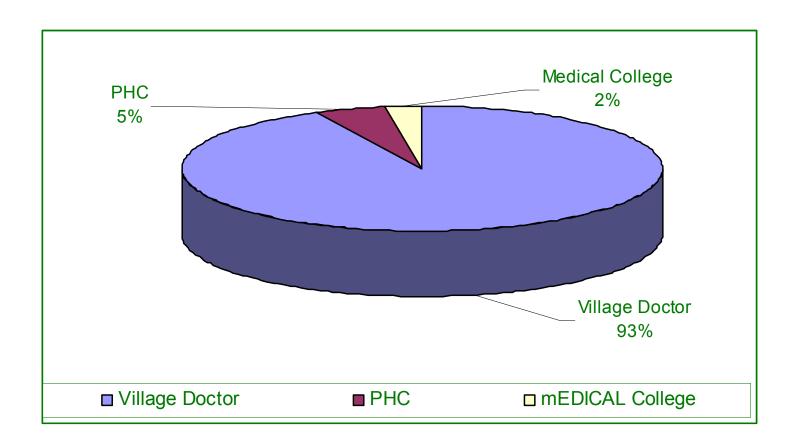
Findings (7)

Decision makers



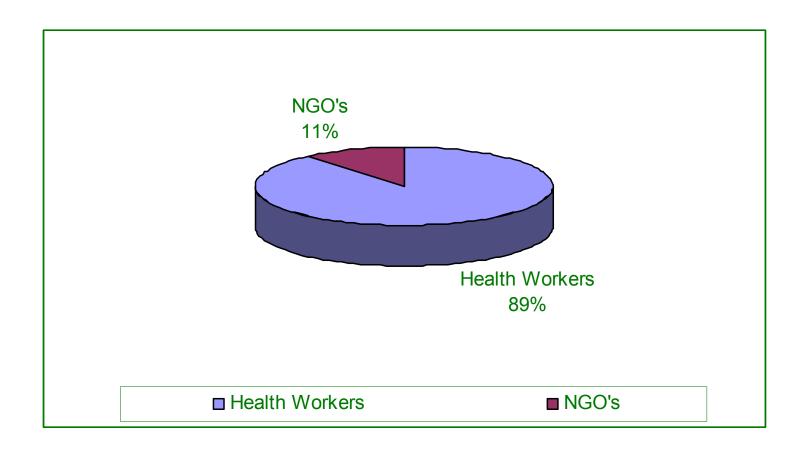
Findings (8)

Contact persons(After being affected)



Findings (9)

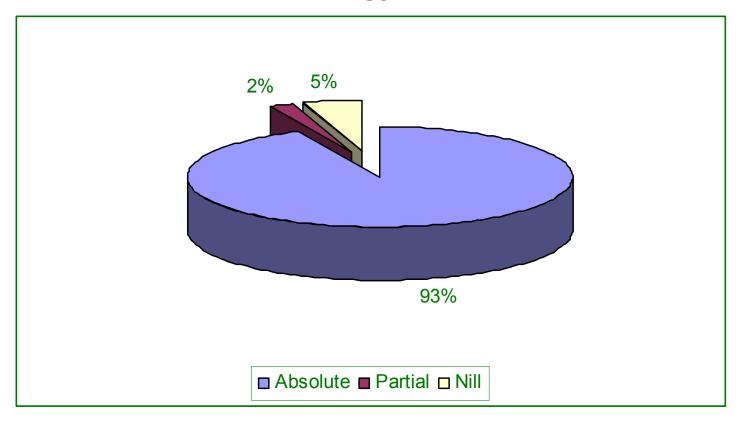
Means of awareness



Findings (10a)

During the illness

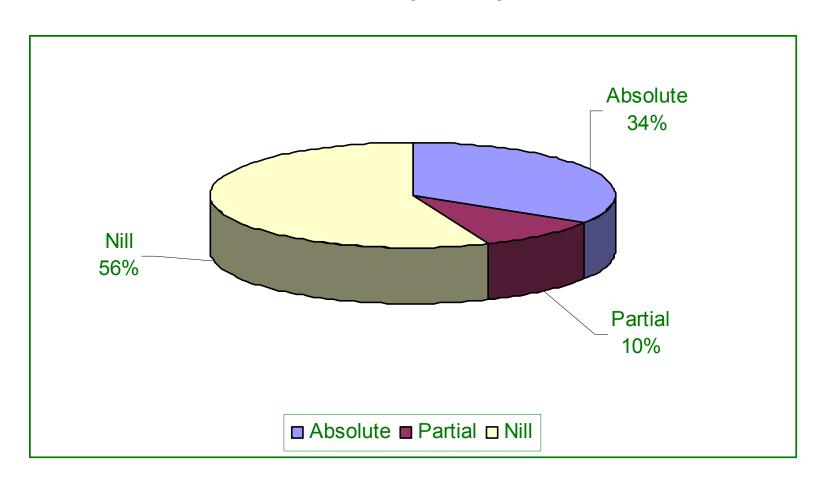
Pathology Service



Findings (10b)

During the illness

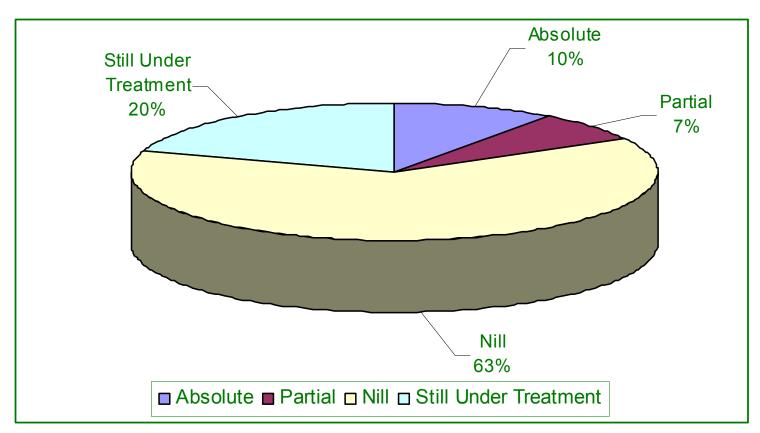
Counseling During the Illness



Findings (11a)

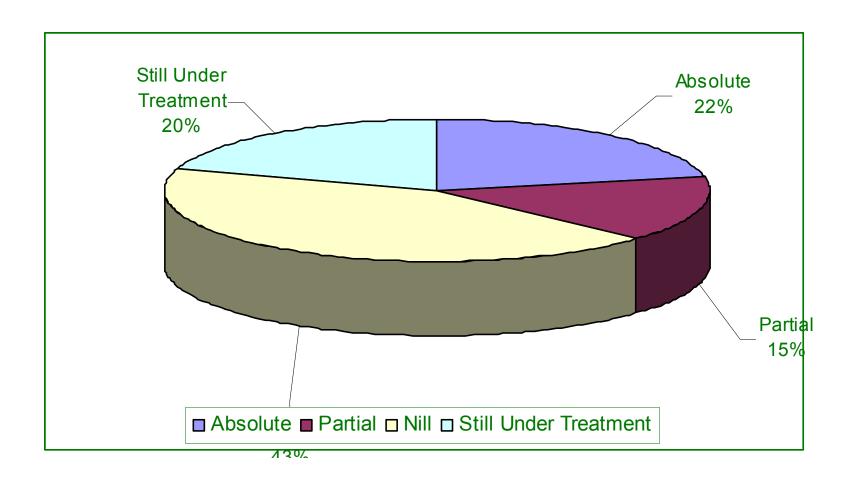
After the illness

Medicine provided after the illness



Findings (11b)

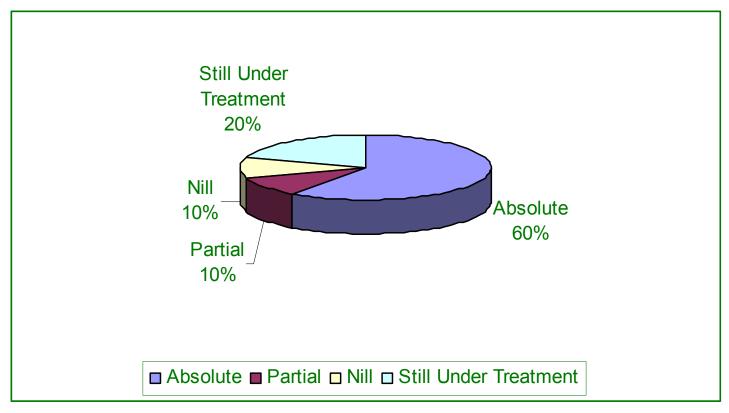
After the illness



Findings (11c)

After the illness

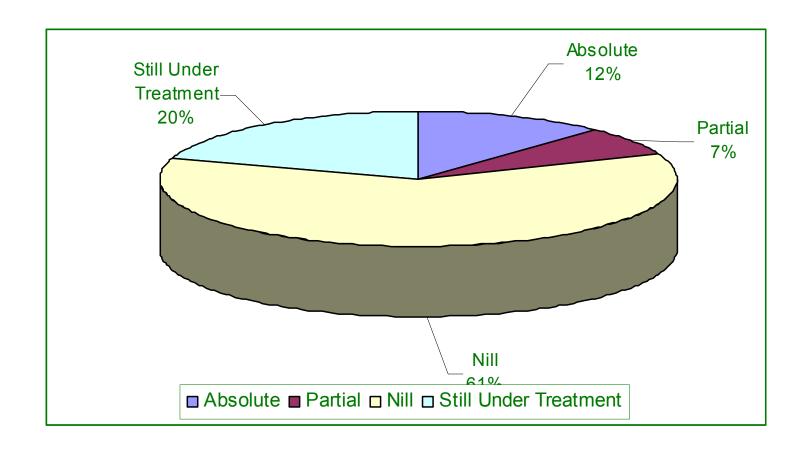
Follow-up Services Provided



Findings (11d)

After the illness

Physiotherapy After Illness



Findings (12)

- Commodity facilitation
- 41% of the affected never got the mosquito nets.
- 39% said that they received.
- There were no other commodity like kerosin oil, larvecidal, lime; their use & indication

FINDINGS 13(A)

- 54%OF THE DISABLED RECEIVED THE AMMOUNT (REHABILITATION)
- 46% OF THEM DID NOT RECIEVE

FINDINGS 13(B)

- NATURE OF SPENDING THE REHABILITATION AMOUNT
- 47% OF THEM SPEND IT ON PAYING THE DUES
- 39% OF THEM SPEND IT ON THEIR MEDICENES
- REST OF THEM SPEND ON OTHER THINGS

THE PRESENT STUDY SHOWS THAT93.6% OF THE PEOPLE PREFERRED TO GO TO THE NEARBY LOCAL DOCTORS OR QUACKS FOR **INITIAL CONSULTATIONS**

LOCAL DOCTORS AS A POLICY, SHOULD BE EDUCATED & EQUIPPED TO WORK AS "SWASTHYA MITRA"ON THE LINES OF "SIKSHA MITRA"... AS A BOTTOM LINE COUNCELLAR.

- 56%OF THE AFFECTED SAY THAT THEY WERE PARTIALLY PROVIDED WITH SOME COUNCELLING AND 10% SAY THAT THEY WERE NOT PROVIDED ANY COUNCELLING DURING THE ILLNESS
- THE COUNCELLING PART NEEDS TO BE IMPROVED AND LOOKED UPON

41% OF THE AFFECTED SAID THAT THEY DID NOT GET THE MOSQUITO NETS & OTHER COMMODITY

THE SYSTEM OF DISTRIBUTION OF COMMODITY SHOULD BE RE-EXAMINED AND RE-DESIGNED

- 63% OF THE DISABLED SAY THEY DID NOT GET THE MEDICENES FROM THE GOVT. CENTRES
- 61%OE THE DISABLED SAY THAT THEY WERE NOT PROVIDED PHYSIOTHERAPY
- QUALITY OF SERVICES RENDERED
 AFTER THE ILLNESS AND DISABILITY
 SHOULD BE LOOKED UPON

- ACCORDING TO THE CRITERIA OF THE GOVT.ONLY 40% AND ABOVE DISABILITY WERE CONSIDERED TO BE ELIGIBLE FOR THE REHABILITATION AMOUNT.
- IN SOME CASES (60-100%DISABILITY)(THE AMOUNT WAS NOT ENOUGH
- THE REHABILITATION-PACKAGE-POLICY SHOULD BE REVIEWED AND REDESIGNED.

- 50% OF THE AFFECTED DO NOT EVEN KNOW THE RELATIONSHIP OF J.E. WITH THE PIGS, WATER LOGGING AND THE PADDY FIELDS
- EFFECTIVE TOOLS FOR AWARENESS
 SHOULD BE DESIGNED AND EXECUTED
 IN THE AFFECTED AREAS

- MOST EFFECTIVE SEGMENT TO PROVIDE INFORMATION AND CREATE AWARENESS WERE THE GOVT. OFFICIALS AND STAFF
- THE REACH OF MEDIA AND N.G.O's IS VERY LIMITED
- FURTHER CAPACITY BUILDING AND AUGMENTATION OF THIS SEGMENT SHOULD BE DONE WITH EFFECTIVE AND NEW TOOLS

RESEARCHES SHOULD BE MADE TO FIND OUT WHETHER THE LOCAL STRAINS OF J.E.VIRUS INFECTS DOMESTIC ANIMALS OTHER THAN PIGS AS THESE ARE NOT AVILABLE, WITH REFERENCE TO THE FINDINGS OF THE STUDIES IN JAPAN

VACCINATION PROGRAMME FOR HUMANS AND ANIMALS SHOULD BE PLANNED AND EXECUTED SIMULTANEOUSLY

- PERIPHERY AREA SHOULD BE DECIDED AND WORKED OUT AND THE VACCINATION SHOULD BE DONE STARTING FROM THE PERIPHERY TO THE CENTRE
- VACCINATION PROCESS SHOULD BE RE-DESIGNED

AFTER SHOCK-2

IN THE SECOND PHASE A.P.P.L. PLANS TO ADOPT SOME OF THE WORST AFFECTED CASES AND SUPPORT THEM FOR THEIR TOTAL REVIVAL

Thanks.....





proper person.11- search rural representative.