Annual Report For
Bella Health Care Charitable Trust

2012

Bella Health Care Charitable Trust

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“Health is wealth,” is an old saying.

This is especially true of the poor among us, because when the poor get sick, not only do they go bankrupt trying to get healthcare but they stop earning, which compounds their financial burden. Often, the poor allow themselves to remain sick which leads to chronic morbidity and early mortality. Health should not be a right of the rich and access to healthcare should not be a rationed commodity.

The vision of Bella Healthcare is shared by all of us at our NGO: We believe that healthy women and children are the keys to a stable family and prosperous society. There should be only ONE standard of care for all human beings and through Bella Healthcare, we are striving to provide good healthcare to our fellow citizens through education, preventive measures and acute care at their doorstep, at minimal or no cost.

Under the leadership of Ms. Smith, we provide basic education, basic diagnostic tests and primary care to our neighbors in surrounding villages and slums through mobile clinics. We are establishing a network to enable our patients to get specialty care in D'dun at discounted prices. All our patient records are maintained in the form of EHR which can be made available to them or their providers at the click of a button anywhere, anytime.

We want women to feel empowered so that they can demand and seek equal healthcare for themselves and their children, without fear of their fathers, husbands, in-laws or of society. We hope to establish a world-class healthcare system in and around Dehradun with a focus on preventive and early-intervention care for women and children. Bella Healthcare is our way of giving back to our society. Equal, accessible and affordable healthcare is our goal for all Indians.
MESSAGE
From Our Chief Operating Officer

I am truly blessed to have had the opportunity to be a part of the programs at Bella Health. It is amazing to see our program in full swing and see the difference it has made in our patients' lives. Our team has seen nearly 15,000 patients in one year! When I set that goal eighteen months ago, it was a shot in the dark, an estimate. I had no idea that one year later our program would successfully meet its goals! Since its founding, Bella Health has been able to attract and retain patients, and keep women coming for follow up care.

I hear success stories every day! I met one lady who has been trying to conceive for 7 years. Bella health treated her for pelvic inflammatory disease and within 3 months she was pregnant! The joy on her face, her desire for motherhood fulfilled, this is why we are here. And the foundation we have established here, I am confident can be replicated elsewhere.

There are so many determinants that lead to poor health: dirty water, poor sanitation, inadequate housing, lack of education, poor access to health care, gender discrimination and extreme poverty. It is impossible to change all of the underlying determinants, and at times it is heart breaking. But we know that if we strive to empower our communities—if we educate children, endorse family planning and promote healthy behaviors—we can make a difference that will impact future generations. Here is to Bella Health’s next year being amazing and a success!

Colette Smith

Our team has seen nearly 15,000 patients in one year! When I set that goal eighteen months ago, it was a shot in the dark, an estimate. I had no idea that one year later our program would successfully meet its goals!

- Colette Nicole Smith
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Bella Health has been supported for the first year though the generous donations of Dr. Vijay P. Agarwal. Dr. Agarwal, a native from Bombay has dedicated his life to medicine and helping people indiscriminately to achieve health and well-being. He is a dedicated physician and admired by all of his patients and colleagues. Dr. Agarwal has supported Bella Health with his firm belief in our mission and vision to improve the lives of women in India.
INTRODUCTION

Bella Health launched its program in January 2012 after 6 months of laying the infrastructure, collecting baseline data, conducting focus groups, mapping the villages and planning for a sustainable program. Bella Healthcare is an NGO dedicated to providing best health care services and education to women and child and empowering women with health, education and quality health care.

It was not an easy process and Bella Health struggled in light of the negative stereotypes that surround NGO’s in India. We created a program that was new and needed. Our programs eliminated concrete barriers to care and improved the quality of life for women while working to empower them. We were driven by our vision and we never flinched when faced with adversity. We have been blessed to find skilled professionals dedicated to servicing their communities.

It was challenging to create a program from scratch. There was a lot of trial and error in the beginning, but our committed efforts made our programs better. Through a community-based approach, we were able to engage the people in our target areas and convince them to use our services.

**After the first year, we saw nearly 15,000 patients and distributed more than 167,019**

After the first year, we saw nearly 15,000 patients and distributed more than 167,019 medicines. 27% of our patients were children aged 0-16 year old. 73% of the patients are women between 17 and 100.

Women aged 16-21 represent 9% of the patients we saw in 2012, women age 22-35 represent 30%, women age 36-54 represent 22% and women over the age of 55 comprise of 12% of the population of patients we served.

We gave over 20,000 medicines per month. We provide patients with latest, most cost effective medicines available. We have medicines for pain, flu, allergy, heart, and lungs. We have specific medicines to treat vaginal infections whether it is yeast, bacteria or viral. We have 25 different antibiotics that are used on the specific microorganism. We provide syrups for coughs, colds and more. We provide ointments for burns, rashes, and other skin problems. We provide gels to ease musculoskeletal pain. We have a whole range of medicines for children from cough syrups, antibiotics and vitamin supplements. We provide the patients with enough medicines to last for 7-14 days, depending on when our team will return to that village. In some villages that we visit only twice a months, we will give them enough medicines for 14 days and then the next time, they would follow up with our team to reevaluate and re-prescribe if needed. For women and men we provide all options of birth control including IUD (with insertion) Birth control pills or condoms.
Bela Health aims to improve access to and the quality of reproductive health services available to fertile-aged men and women in rural and urban communities in Uttarakhand.

Our goals are to decrease fertility rates, decrease the number of unwanted pregnancies, increase the rates of contraceptive use and decrease the rates of complications due to early child birth and poorly spaced pregnancies.

We can accomplish this by providing access to safe and effective family planning and other reproductive and general health services. Through these activities, we will empower women with the knowledge to make informed decisions about their reproductive health and we will empower men to support women in making these decisions.

Bela Health strives to improve the mental, physical, psychological health of our patients. We hope that people will be both healthier and more empowered to make informed family planning and reproductive health choices as a result of our work. In the coming years we have a number of objectives we hope to accomplish:

1. Double the number of women who have access to quality reproductive health and family planning services in our target areas by 2015.
2. Double the number of women by who have access to quality reproductive health education classes and effective family planning counselling in our target areas by 2015
3. Identify women in the urban/rural slums where we operate that have unmet needs for contraception and family planning and introduce them to our services by end of 2013.
4. Empower 200 women in our target areas to decide when to have a child and avoid unintended pregnancies and abortions in 2013.
5. Reduce pregnancy- and childbirth-related mortality and morbidity by 50% among women and children in our target areas by 2015.
6. Decrease the prevalence of STI's and RTI's by 50% in our target areas by 2015.
7. Decrease the amount of unsafe abortions by 50% in our target areas by 2015.

The third column provides the numbers for follow up patients. Follow up patients are patients who return to Bella Health for services. They are not counted as new patients. As you can see 75% of our patients follow up. This is very exciting and provides evidence that patients are satisfied with our services.
Bella Healthcare provides reproductive health care services that will enhance the health and quality of life of the women, girls and adolescents in our target areas. Our programs address maternal, child, reproductive health and new-born health, as well as gaps in family planning and acute care needs.

- **Gynecological Services**: we provide care for menstruation related abnormalities, reproductive tract infections, sexually transmitted infections, pelvic inflammatory disease and polycystic ovary disease

- **Maternal and Infant Health**: pregnancy testing, antenatal care including tetanus toxoid injections and vitamin supplementation, counseling, post-natal care visits and counseling (including post-natal home visits, general clinic for mothers and children and family planning,

- **Contraceptive Services**: Oral Pills, Emergency pills, IUD, condoms, referral for sterilization, counseling and education services.

- **Services for Men**: treatment and counseling for sexually transmitted infections, reproductive tract infections, family planning and infertility

- **Lab services**: pap smears, hemoglobin, blood sugar, urine tests, HIV, gonorrhea, chlamydia, HBV, HCV, blood group, malaria, pregnancy.

- **Medications**: Up to four medicines are provided at each visit. We have a stock of over 50,000 medicines used to treat an array of problems.

- **Reproductive Cancer Services**: pap smear test, counseling and referrals, breast cancer screening.

- **HIV related services**: HIV testing, pre and posttest counseling, prevention counseling, referral for treatment.

- **Health Education**: Classes for all women, men, children and adolescents. Bella Health offers new education classes that are interesting and beneficial for the whole family. After completion of 6 classes, receive a certificate and gift.

  - **Women**: reproductive health classes on menstrual cycle, menstrual hygiene, birth control, signs and symptoms of STIs, how to prevent unsafe abortions, and many more.

  - **Men**: classes on birth control, preventing injury, nutrition.

  - **Children**: classes on hand washing, nutrition, first aid, staying healthy and many more.

  - **Adolescent**: Classes on adolescent reproductive health so youth know what happens to their bodies and how they can stay healthy.
Nurse Rozalia, with a new baby and her mother

Medication dispensing. We have a stock of over 20,000 medicines
GEOGRAPHIC SCOPE

Country — India, State — Uttarakhand, City — Dehradun, Tehsil- Dehradun, Villages as follows:

North of Dehradun:
- Kempty Falls
- Sainjee- Bhatoli
- Chakrata

West of Dehradun:
- Dharmpur
- Harawalla
- Garhniwas
- Santosh Nagar
- Tunnwala
- Ballawalla
- KuwanWala
- Lacchiwala:
  - Lacchiwala Range
  - MokhampurKhurd
  - Dhoiwal
  - Bhaniyawala
  - Jollygrant
Villages in Tehri Garwhal:
- Kot
- Kotigad

Slums in and around Dehradun:
- Resindapul slum
- KathBangla
- ISBT- Dharawali
- Selaqui
- Nanda kiChowki
- Adhhoiwala
- ChunaBhati
- Newad
- MandakhiniVihar

Rozalia, listing to the heart rate of newborn
Importance of the Project:

After a thorough needs assessment — including focus groups with rural women and village leaders and key informant interviews with government officials and female villagers — it was apparent that many local women lacked access to necessary health services. We tailored a program to address and eliminate barriers to health care access: namely lack of transportation and ability to pay. Our innovation is to bring health care to these underserved villages using our state of the art diagnostic mobile health van. We recognize the relative economic disadvantage of women in these contexts, so we are only charging nominal fees to ensure their access. Our program targets women only because they are, relative to men, disadvantaged in India, and their health care needs are not seen as a priority in the communities where we operate. Our program recognizes that women have unique health needs and emphasizes the importance for women to seek care and break through the barriers of personal suffering.

This proposed project is relevant in the areas where we are working because there is an apparent need made obvious by the present activities in these communities. Many rural women from these communities are personally disempowered in a male-dominated environment where leaving the home with permission can be a feat. Simultaneously, structural barriers, such as unaffordability and inaccessibility of the services prevents the healthy and effective use of area health resources.

Study after study has shown, women are disadvantaged in all aspects of this society, and women are disempowered in this patriarchal society. This is evidenced by the striking different gender ratios. Men control all economic resources in the house. Gender discrimination is pervasive, as seen by female seclusion, gaps in literacy rates, preference for male children, neglect of girl children and large restrictions on woman’s property rights. Since women and children are often neglected, the rates of malnourishment and anemia are higher. Women are often denied health care or health care is not seen as a priority.

Study after study has shown, women are disadvantaged in all aspects of this society, and women are disempowered in this patriarchal society. The silent suffering has to end.

The proposed project has a cultural relevance because the need of the rural women has been already analyzed through the present activities of Bella Health including focus groups, key informant interviews and in-depth literature review. According to the NFHS-3, only 41% of women in Uttarkhand use any modern contraception method. The contraceptive prevalence rate is considerably higher in urban than in rural areas. More than 25% of women marry before reaching the legal age of 18. Women in rural areas tend to marry earlier. Anemia is yet another concern. 46% of women have some form of anemia, 13% have moderate/severe anemia. Anaemia is higher for women from rural parts (48.8%) than in urban (44.3%). One-fifth of the women in UK have an unmet need for family planning. 42% of births in UK fall in the high risk category. Only 44% of women in UK receive at least one pre-natal visit compared to the average of 65% in India. Only 16% of rural deliveries are institutional and over 80% of the deliveries take place at home. In urban areas 42% of deliveries are in institutions. Only 26.2% women
consumed iron and folic acid (IFA) supplements for 90 days or more when they were pregnant with their last child (NFHS-3, 2005-06).

**Baseline Data**

Bella Health collects baseline data on all of the villages and slum areas before any interventions are done. We collect data from a sample of the population to measure the following:

1. Costs of health crises- including the death or hospitalization of a family member and the subsequent financial effects on the household either direct or indirect.
2. The quality of maternal and child health care including access to family planning, antenatal care, delivery and post partum care.
3. Measure the perception of the quality of care of the government and private health care providers.
4. Ask questions to measure satisfaction with the government services.
5. Measure their awareness of health topics
6. Measure how they perceive the importance of woman’s health care
7. Finally check the records to determine the immunization status of the children in the household.

For each household we document, the date of birth, education level, occupation, education and occupation of spouse, if the spouse works out of station. To measure the specific economic status we determine the following:

- Type of house, kacha, semi-pucca or pucca house.
- What fuel is used to cook.
- Do they have a bicycle, scooter, tractor or car
- Do they have a cot or bed
- Do they own a tv or radio.

We also measure the pregnancy history, number of previous pregnancies, number of previous preterm births, number of previous abortions, number of previous tubal pregnancies, number of previous miscarriages, number of neonatal deaths, number of infant death, number of previous stillbirth death and the number of number of living children. The type of delivery and pregnancy complications are documented.
BELLA HEALTH ACTIVITIES

Mobile Health Van:

Bella Healthcare provides health services via a mobile health van in our outreach areas. The van is staffed with 2 doctors, 3 nurses, 3 educators and 8 ASHA (Accredited Social Health Activists). The organization provides acute/chronic and reproductive health care: pre-natal care/post-natal home visits, family planning, STI/RTI, treatment of patients with acute illness such as fever and cough. About 80% of our daily patients are seen for reproductive health issues. We adhere to a strict schedule of visits: we go to each village on a regular schedule, 2 times a month on alternating weeks.

Our state-of-the-art diagnostic mobile health van visits 16 pre-selected villages twice monthly. This leads to consistent and high quality health care, as well as follow up care in the villages where we operate. We have registered over 14,000 women for our services within the first year.

Five days a week our ambulance leaves from our clinic headquarters in Dehradun and goes to the preselected village. We have a monthly schedule and visit each village alternate weeks which lets us visit each village two times per month. We leave at 9am and return by 5pm. We see patients from 10:00 until 4pm.

The patients know that we are visiting their village because we have a consistent schedule and also utilize ASHA workers to convey the message of our arrival.
Once the ambulance is parked, patients arrive. We see approximately 40 to 80 patients in one day. As we register the patients we take a complete health, pregnancy and family history. Then the doctors and nurses see the patients. We have the latest diagnostic equipment including fetal heart monitor, rapid tests for pregnancy, blood glucose, hemoglobin, UA, blood types, syphilis, HIV, malaria, Hepatitis B and Hepatitis C. These rapid tests allow our doctors to diagnose and subsequently treat on the spot.

We distribute medicines to patients at the time of visit and give enough medicine to last 2 weeks, or until we return. We have a stock of over 50,000 medicines and typically distribute 20,000 medications a month.

We are able to conduct pelvic exams inside the ambulance as the ambulance was specifically fabricated to accommodate OB/GYN patients. Since we do not have rapid tests for everything, if needed, we can draw additional lab tests on the spot and transport them to a laboratory facility in Dehradun. Lab testing is usually for pap smears and diagnosing chlamydia and gonorrhea. The results are provided the next day and scanned into the medical record.

We refer for any diagnostic radiology, surgical procedures we cannot perform and for specialist care. We have compiled a list of doctors that we refer to for any patients that need specialty care. The specialists provide Bella Health patients a 35-40% discount.

Our daily patients have acute illness such as fever, cough, cold, weakness, arthritic pain, abdominal pain, and abnormal vaginal discharge. Approximately 75% of patients on a daily basis are seen for reproductive health needs including pre-natal visits, post-natal visits, family planning, STI’s, etc.

Bella Health is actively expanding services to slums in poor urban areas.
We have the latest diagnostic equipment including fetal heart monitor, rapid tests for pregnancy, blood glucose, hemoglobin, UA, blood type, Rh, syphilis, HIV, malaria, Hepatitis B and Hepatitis C.

Examing a new born in the first post natal visit
Reproductive health is defined as the ability of a woman to live through the reproductive years and beyond with reproductive choice, dignity and successful childbearing, and to be free of gynecological disease and risk. Reproductive choice is a concept that allows a woman to exert control of her reproductive process and dignity refers to the social and psychological wellbeing a woman derives from the process of reproduction.

A woman’s health is not only a state of physical being, but it is an expression of the many roles she performs as a wife, mother, care-giver and wage earner, as well as her interaction with the social, cultural and economic world which influences her daily life.

- **Gynecological Health**: care for menstruation related abnormalities, reproductive tract infections, sexually transmitted infections, pelvic inflammatory disease and polycystic ovary disease.
- **Maternal and Infant Health**: pregnancy testing, antenatal care including TT injections and supplementation, counseling, post-natal care visits and counseling (including post-natal home visits, general clinic for mothers and children and family planning).
- **Contraceptive Services**: oral pills, emergency pills, IUD, condoms, referral for sterilization, counseling and education services.
- **Reproductive Cancer Services**: pap smear test, counseling and referrals and breast cancer screening.
- **HIV related services**: HIV testing, pre- and post-test counseling, prevention counseling, and referral for treatment.

The Table below shows the number of patients seen in each quarter for reproductive health issues, which is approximately 75% of all our patients.

<table>
<thead>
<tr>
<th>Quarter</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q1</td>
<td>1,205</td>
<td>1,360</td>
<td>1,334</td>
<td>1,404</td>
<td>5,303</td>
</tr>
</tbody>
</table>

The table below shows the break up of services within the reproductive health category.

<table>
<thead>
<tr>
<th>Reproductive Health issues</th>
<th>Patient complaints</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abnormal vaginal discharge</td>
<td>41%</td>
</tr>
<tr>
<td>Birth Control/ Family Planning</td>
<td>30%</td>
</tr>
<tr>
<td>Pre-/Post- Natal Visits</td>
<td>24%</td>
</tr>
<tr>
<td>STIs</td>
<td>4%</td>
</tr>
</tbody>
</table>
Pre-Natal Book

Bella Health’s staff created a 100 page prenatal guide to give our pregnant women comprehensive and quality information for mothers during and after pregnancy. This guide discusses warning signs for the mom and the baby in the first, second and third trimester, and discusses what is women should expect in pregnancy. The guide describes labor and the complications that may necessitate a C-section, as well as advocating exclusive breastfeeding, explaining its benefits for the child and mother.

In the post-natal period, which is a very dangerous time, we talk about danger/warning signs for the mother and baby. This book is available as a PDF in English and in Hindi. To request a copy, e-mail info@bellahealth.org. We distributed over 200 copies of this prenatal guide in the first year.

We distributed over 200 copies of this prenatal guide in the first year.

Pregnant women who have received the prenatal book
Krishna Clinic

Bella Health Care has established a clinic in Nehru Colony, Dehradun, Utarkhand, India, which provides high quality acute care to patients in the rural and urban areas by appointment or walk in basis. This stationary location allows patients receiving care from the mobile clinics to pursue follow-up. The clinic also enables procedures that cannot be completed in the van such as IUD insertion, etc. This results in quality care that is continuous and sustainable.

The clinic is fully equipped to perform exams, labs, screening, dispense medicines and provide health education/health promotion classes. Patients typically visit the clinic on Friday from 9am to 6pm. We see follow-up patients from the field as well as patients in the neighborhoods near our clinic.

The clinic also enables procedures that cannot be completed in the van such as IUD insertion, etc. This results in quality care that is continuous and sustainable.
Health Education

Bella Healthcare provides education to women in their target areas on: oral rehydration salts (ORS), female reproductive anatomy, normal and abnormal vaginal discharge, birth control, anemia, back pain, menstrual cycle, menstrual hygiene, menopause, antibiotic abuse, STI’s, HIV, first aid and nutrition. Our trained education specialists also sensitize women about infant and young child feeding (IYFC), safe delivery with JSY (Janani Suraksha Yojana) program under the NRHM (National Rural Health Mission) and domestic violence awareness under the Protection of Women from Domestic Violence Act of 2005. We also provide our beneficiaries with IEC (Information Education Communication) materials through videos and handouts which improve retention of knowledge from health education classes.

We have a health promotion manual that all of the educators use as a reference to teach the classes. To measure the effectiveness of the education we ask the participants pre-/post-test questions. We ask the participants the “pre” questions before the class to measure their baseline information and then ask the “post” questions after the class to ensure that the objectives of the class were met. This allows our team to evaluate the effectiveness of the education and endorse a more participatory learning environment.

We also track the number of classes the participants attend. After the participants attend 6 classes they receive a certificate and present from Bella Health. Since August, over 60 women completed their required 6 education classes. We had a small ceremony for these women. They received a Bella Health Education Achievement Certificate and a gift. Their gift was a digital thermometer that will come in handy in the villages.

To measure the effectiveness of the education we ask the participants pre-/post-test questions.

After the completion of the 6 education classes, we administer a survey to see what healthy behaviors have been adopted. These healthy behaviors can range from washing hands, adhering to medication schedules, and correct personal and menstrual hygiene. We evaluate the impact of the education classes by conducting focus groups and exit surveys.
8,000 people attended health education classes in 2012.

The feedback from the community has been very positive. Many women have learned a lot and have said that they feel empowered.

<table>
<thead>
<tr>
<th>Month</th>
<th>Class 1</th>
<th>Class 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>January</td>
<td>ORS</td>
<td>Reproductive Anatomy</td>
</tr>
<tr>
<td>February</td>
<td>First Aid</td>
<td>Vaginal Discharge</td>
</tr>
<tr>
<td>March</td>
<td>Nutrition</td>
<td>How to Prevent Back Pain</td>
</tr>
<tr>
<td>April</td>
<td>Birth Control</td>
<td>Vaginal Discharge</td>
</tr>
<tr>
<td>May</td>
<td>Antibiotic Abuse</td>
<td>Menstrual Cycle/ Menstrual Hygiene</td>
</tr>
<tr>
<td>June</td>
<td>Pregnancy</td>
<td>Vaginal Discharge</td>
</tr>
<tr>
<td>July</td>
<td>HIV/AIDS</td>
<td>Abortion</td>
</tr>
<tr>
<td>August</td>
<td>Immunization</td>
<td>Nutrition</td>
</tr>
<tr>
<td>September</td>
<td>Menstrual cycle and hygiene</td>
<td>Medical Terminology and Disease Prevention</td>
</tr>
<tr>
<td>October</td>
<td>Cancer</td>
<td>Vaginal Discharge/ Birth Control</td>
</tr>
<tr>
<td>November</td>
<td>Anemia</td>
<td>First Aid</td>
</tr>
<tr>
<td>December</td>
<td>Abortions</td>
<td>ORS</td>
</tr>
</tbody>
</table>

Patients attending an education class in Tehri Garhwal

A new Baby

Health Education on Pregnancy
Health Camps

Bella Healthcare conducts ‘Monthly Health Camps’ in various villages to provide health promotion and education. In 2012, Bella Health provided over 16 Health Camps among the target population. Through these activities, we reached over 5,000 people.

Health camps are tailored to educate families, but with special emphasis on reaching head of the households, men. Men are often responsible for allocating family resources, whether on healthcare, food, medicines and hygienic supplies. Because of their role in the family unit, there is a great need to educate men on the importance of investing in health protective practices. We hold classes in the evening when men are not working to increase their participation. We give men health education classes on the following topics:

- Nutrition
- HIV/AIDS
- Condom use
- How to prevent back pain
- Family Planning

Our outreach also targets children. We utilize multimedia learning such as DVDs, songs and activities to engage them on the issues listed below:

- Handwashing
- Nutrition
- Preventing eye infections
- Personal hygiene.
- Disease prevention
- First aid
- Preventing dog bites.
- Brushing Teeth
Bella Health conducted 16 Health Camps in 2012 and reached over 5,000 people.

- Health Camp Selaqui
- An education class with ladies
- Handwashing class with children
- Women who completed 6 education classes
Bella Healthcare provides health care and health education to 3 private primary schools in Dehradun. Bella Health is piloting this program in:

2. BalVihar School 2nd-8th classes G block Nehru colony, 295 students
3. Ranjeet English Medium School 1st-8th classes. Jhabrawala, Grant-Markham, 384 students

The total number of children enrolled in the school age project is 590. Bella Health staff visit the schools and check the height, weight, near and far vision, color blindness, check for carries and any other health problems the children may have. The height and weight of the children are computed as a body mass index (BMI) and plotted on the growth chart. This is done to monitor each child’s growth over years and detect any abnormalities, stunting or wasting. When the children are screened, any children who have acute illnesses are sent to the mobile health van or clinic for additional care. Any children who are found to have problems with their vision or teeth are referred to specialist and a letter is sent home to the parents.

Bella Health staff also provide age specific education to the students. So far the students have attended classes on nutrition, the importance of handwashing and brushing teeth.

The total number of children enrolled in the school age project is 590.
**Inauguration**

On 2 January, 2012, Bella Healthcare’s Krishna Clinic launched its Mobile Health Van stocked and ready to go to the villages. That day we invited area residents to acquaint them with Bella Healthcare. We invited the CM of UK, the Mayor of Dehradun, and people in the local health sector so that they could meet our providers and take a tour of our mobile health van and clinic.

Dr. R.K. Pant (Chief Medical Officer of Dehradun), Mr. Piyush Singh (Mission Director Family Health and Welfare) and S.S. Sandhu (Secretary of Health) were invited as guests of honor. We sent letters for approval to our chief guests and guests of honor and three of them, Mr. Vinod Chamouli, Mrs. Lori McFadyen and Mrs. Usha Devi accepted the invitation. We hand distributed hundreds of invitation cards and sent e-invitations to the local media.

We went to the houses of Pradhans (Village Chiefs) and Auxillary Socal Health Activists workers to personally invite them and their family members on the inauguration of Krishna Clinic Mobile Van.

The inauguration ceremony was held at Krishna Clinic at 11 am, with over 75 guests attending. Mayor of Dehradun, Mr. Vinod Chomauli, attended as chief guest. The ceremony commenced with the ribbon cutting by Mayor of Dehradun and Mrs. Usha Devi. This was followed by the inauguration address from Dr. Vijay. P. Agarwal, CEO and Colette Smith, COO of Bella Healthcare Charitable Trust.

Colette Smith took this opportunity to thank the attendees for their support. All guests of honor, were invited to officiate the inauguration ceremony. The ceremony closed at around 1:15 pm with very positive feedback from attendees.

**Run for a Beautiful Doon**

On 29 April, Bella Health Care along with People for Animals (PFA) organized its first fundraising event ‘Run for a Beautiful Doon (R4BD, a first Biannual Run)’ at Mahindra Grounds, Ghari Cantonment Area.
The event was to support healthy women and animals and, with the objective of raising awareness about the environment and animals.

The Guest of Honor for this fundraising event was Chief Guest Dr. S. Farooq. The event began with a keynote speech by Dr. Farooq. Also in attendance was Poonam Singh Sobati, Honoray Member of Animal Welfare Board India, Dr. Avinash Anand, Joint Director Animal Husbandry, Manvi Bhatt from PFA, participants from organizations that sponsored this event (ONGC, EQUINOX) and more than 250 students from different schools. Karishma Chaturvedi, Field Coordinator of Bella Healthcare, introduced Bella Healthcare and the event.

The event featured three different races: a competitive 10km run, a 5km run for Juniors and a 3km fun run, superbly organized by Bella Healthcare & PFA which steered the runners through the length of the beautiful traffic-free path which stretched around the Mahindra Grounds. More than 250 runners took part in the race and there were large number of spectators and representatives from the sponsors’, as well as a wonderful bunch of volunteers.

After the event, the Chief Guest Dr. Farooq distributed prizes and certificates of merit to the winners and the participants. He thanked all participants for making Doon a beautiful city by keeping it clean, peaceful and united. He ended his speech with a beautiful poem:

“Allah ne baksha hai Jannat sa chaman humko, Hoshiyar watanwalo dojakh na bana dena”

The rest of the afternoon following the races was filled with entertainment and fun. The funds generated from this event were partially used to support Bella Healthcare program.

The day would have never happened had it not been for the Army Cantonment which let us use their facilities, the runners who took part in the event and the countless people who gave their time to marshal the event. The event was supported and sponsored by ONGC, Cloud 9, Gayandeep (Soft skills Training Institute), Hi Jinks, Muse (The art of Gourmet), SBSPGI, NGO Funds India, Equinox, and Vidya (Art Press).
Health Education Classes at Norell, a Factory in Selqui.

Bella Health was approached by a factory in Selaqui that manufactures electronic equipment to provide health education to their female workers. We divided the production factory workers into groups of 25. We conducted 48 classes for 2,000 female factory workers and checked haemoglobin with our hemocue in 100 symptomatic ladies. Each group came to the conference room and we conducted 4 classes with them on the following topics:

1. Nutrition and Proper Diet and nutrition activity
2. Anemia with option to check hemoglobin in symptomatic individuals.
3. Menstrual Cycle and Menstrual Hygiene
4. Understanding normal and abnormal vaginal discharge

Ms. Vandana the HR representative at Norell stated the following:

“Thank you for giving us a wonderful training programme on health awareness by all of your team members. There is a lot more to learn about the same and our people are participating actively in the same. This programme empowers women to achieve their health goals and make sound, informed healthcare decisions and choices in their lives.”

Bella Health looks forward to expanding this program and working with more factory workers.

Female workers at a factory in Selaqui attending an education class
World Aids Day-Getting to Zero

The 1st of December is commemorated annually as World AIDS Day. People from different communities across the world come together to raise awareness about HIV/AIDS and show support for people living with the disease and demonstrate international solidarity in the face of the pandemic.

Bella Healthcare organized awareness programs on HIV/AIDS for the people of Dehradun to mark World Aids Day. The event was held at Gandhi Park and the entire Bella Health team was present. The theme of the program was ‘Getting to zero: zero new HIV infections. Zero discrimination. Zero AIDS-related deaths.’

The program started at 9am til 5pm. A table was set up to display HIV/AIDS exhibits, posters and flyers. Red ribbons were distributed among people as a symbol of hope. Rozalia George, Head Nurse of Bella Health educated people about HIV, stating in a public address ‘Awareness and education are still drastically needed, especially given that youth and young adults continue to become infected with HIV’. The Bella Health staff counseled many young men belonging to lower SES communities.

Individuals who saw the banners approached us to learn more about HIV/AIDS and how it could be prevented and treated. More than 200 participants attended this event, and around 50 people signed up for Bella Health’s monthly newsletter. Reporters from area media covered the program. There was warm support and good input from participants. The day was a success and helped locals think more about AIDS.
3 Day Sporting event in Bhatoli

Bella Healthcare provided health care at the annual sporting events in Bhatoli, Tehri Garwal. Bhatoli is 2 hours north of Dehradun. All of the villagers of the surrounding villages compete in the three-day sporting event.

Bella Healthcare provided health care services and health education for men, women and children for any acute, chronic or reproductive health issues over the 3 days. Bella Health also provided first aid to any injured participants.

During the festivities, we conducted health education classes with men, women and children. The women were educated on menstrual hygiene and birth control. Men were educated on birth control and prevention of STI’s and AIDS. Children were educated on the importance of hand washing.

Health information brochures were developed by Bella Health and distributed to men. This brochure describes why women’s health is important and what men can do to protect women’s health. The response was very positive, and most men admitted that they needed to be more concerned with the health of women.
The mBillionth Award South Asia 2012, international congress

Bella Healthcare Charitable Trust was one of the nominees for the 3rd mBillionth Award South Asia 2012. This was organized by Digital Empowerment Foundation & Vodafone India Foundation (VIF) as a part of 3rd International Mobile & Telecom congress on 21 July, 2012 at Hotel Intercontinental EROS in New Delhi, India. The occasion celebrated & felicitated the 2012 winners which were an amazing array of pioneers with out of the box innovations in areas of Mobile & Telecom across South Asia.

Bella Healthcare Charitable Trust was one of the entrepreneurs to showcase their innovations at the Mobile Expo. The stall by the Bella Health was set up at 8:30 am after which the organization also witness the inauguration ceremony of the mBillionth Award South Asia 2012 International congress which had some eminent panelist like J. Satyanarayan, Secretary, Deputy, Ministry of C&IT, Govt. of India, R. Sukumar, Editor of Mint, Peter A. Bruck, Chairman of the World Summit Award, Austria, Tomi T. Ahonen, Author, Consultant & Motivational Speaker, Hong Kong, Jonathan Bill, SVP- Innovation Vodafone India Limited, Vijay Shekhar Sharma, Founder, One 97 Communications, Dr. Amir Ullah Khan, Deputy Director, Bill & Melinda Gates Foundation, Osama Manzar, Founder & Director, Digital Empowerment Foundation.

Bella Healthcare Charitable Trust publicized it year one accomplishments and expansion goals to attendees at the mobile expo. Many people visited the Bella Health stall and shared their appreciation for the work that the organization is doing in Uttarakhand. The majority of our visitors were curious about our project implementation strategies and were extremely impressed by the vision, work and approach to providing care in the remotest areas like Chakrata.

The staff of Bella Health with COO Colette Smith also visited other stalls and observed how other organization’s are using technology in the development sector to bring change. As they say “You Learn with every step” the organization represented itself in such a big forum with participants and visitors coming from almost 13 countries and learned that technology is a medium for social empowerment.
Bella Healthcare Charitable Trust also performs research on the health of the communities we work with. The aim of this research is to improve the quality of care that we provide to those needing our services. Some of our research topics include baseline surveys, a survey on quality of life, patient’s satisfaction, focused group discussions with both men and women to get more specific information on health importance and health hazards etc. All the data that is collected is evaluated pre-programme implementation, mid-programme implementation and during exit phase of the programme to calculate the impact and change brought by the activities of the organization.

Our Research:

1. Socioeconomic status analysis of 422 households
2. Patient Enablement study
3. Exit study of 30 patients who have completed the BH educational program
4. Focus groups to measure gaps and unmet needs for health care services (pre-program implementation)
5. Patient satisfaction survey N=262.
7. Result of financial savings survey. N=207; asked:
   □ When was the last time you sought medical care and where?
   □ How did you get there?
   □ How long did you wait to see the health care provider?
   □ How much did you pay for medicines?
   □ How much did you pay for lab tests?
   □ Did you get an ultrasound or x-ray? If yes, what is the total amount spent on this?
   □ Who went with you?
   □ What is your job and who did your work when you were not there?
   □ Who watched your children while you were away?
   □ What is the total amount you spent for transportation?
At Bella Health how much did you spend for treatment and what services did you receive? Labs, meds, education, etc?

How long did the patient spend with Bella Healthcare?

Did you pay for transport to come here?

Bella Health has launched a new study to measure the determinants and outcomes of unsafe abortions in Uttarkhand. It is a mixed-method study using quantitative and qualitative data. The objectives of this study are as follows:

**Objective 1:** Understand the determinants and outcomes of unsafe abortions:

**Objective 2:** Review and analyze the prescribing patterns of those who conduct abortions

**Objective 3:** Review the characteristics of those who seek abortion

**Objective 4:** Analyze the determinants of what makes it an unsafe abortion

**Objective 5:** Outcomes of unsafe abortions

Data will be collected from existing and new patients who have undergone an abortion. It will take more than 6 months to collect the data. The results will be ready by May 2013 and the results will be submitted to concerned government agencies and articles will be prepared for publication in health journals.
Comprehensive Strategies, Goals and Objectives for Bella Health

<table>
<thead>
<tr>
<th>Strategy</th>
<th>Description</th>
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<tbody>
<tr>
<td>Strategy 1:</td>
<td>Provide effective, affordable family planning services to our target population in rural areas and slums.</td>
</tr>
<tr>
<td>Strategy 2:</td>
<td>Increase the availability, quality and access to reproductive health services in our target population to improve the health and quality of life of women.</td>
</tr>
<tr>
<td>Strategy 3:</td>
<td>Improve maternal, new-born and Child Health and reduce the maternal mortality rates and infant mortality rates in our project area.</td>
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<table>
<thead>
<tr>
<th>Goal</th>
<th>Description</th>
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<tbody>
<tr>
<td>Goal 1:</td>
<td>Improve the health of women and their families by increasing the number of women who utilize family planning services in our target areas.</td>
</tr>
<tr>
<td>Goal 2:</td>
<td>Improve the quality of life for low-income women and children in rural and urban Uttarakhand (UK), India by establishing sustainable, affordable, accessible, and quality maternal, child and reproductive health services and health education activities.</td>
</tr>
<tr>
<td>Goal 3:</td>
<td>The women and children in our target areas will adopt and practice improved health practices and have the knowledge to prevent health conditions that can cause death during pregnancy.</td>
</tr>
</tbody>
</table>

Improve the quality of life for low-income women and children in rural and urban Uttarakhand (UK), India by establishing sustainable, affordable, accessible, and quality maternal, child and reproductive health services and health education activities.

Objectives:

1. Identify women in the urban/rural slums, where we operate that have unmet needs for contraception and family planning and introduce them to our services by end of 2013.
2. Double the number of women who have access to quality reproductive health and family planning services in our target areas by mid-2013.
3. Provide daily reproductive health education classes in our target areas by end-2012.
4. Bring at least 5000 fertile age women and men from our target urban/rural areas to attend the reproductive health classes offered by Bella Health by 2013.
5. Decrease the rates of unsafe abortions by 50% in our target areas by 2014.
6. Empower women, in our program areas to decide when to have a child and how to avoid unintended pregnancies and abortions by 2013.
7. Increase the number of women who have access to quality RH and FP services in our target areas.
8. Increase the number of women who have access to quality reproductive health education classes and effective family planning counselling.
9. Reduce the mortality and morbidity from conditions related to pregnancy and childbirth.
10. Decrease the prevalence of STI's and RTI's.
11. Decrease the amount of unsafe abortions.
Impact of Bella Health Services:

Bella Health will improve the access and quality of reproductive health services available to our target population. We will improve the number of women who are using the appropriate family planning method effectively. We will decrease fertility rates, decrease the number of unwanted pregnancies, increase the rates of contraceptive use and decrease the rates of complications due to early child birth and inappropriately spaced pregnancies. We plan to decrease the number of unsafe abortions by providing access to safe and effective family planning. We will increase the number of women who are empowered to choose the acceptable family planning method. We will educate the population we serve and increase their knowledge on contraception, HIV/STI’s, abnormal vaginal discharge and other reproductive health focused topics.

Bella Health will decrease the mortality of mothers and their babies. Bella Health will identify and address barriers to accessing improved health practices.

Bella Health will improve the access and quality of maternal and child health care services available to our target population. We will ensure that all women in our target population have 6 or more prenatal checks, and a minimum of 4 postnatal visits, with adequate supplementation. We will increase the number of women who receive institutionalized delivery and IYCF, by providing quality, affordable health care and health education. We will improve the number of women who will adopt good health practices from time of conception until the child is 5 years old. Through education, we will improve the awareness of danger signs for both the mother and baby. We will educate the population we serve on the continuum of care.

We strive to improve the mental, physical, psychological health of our patients. We do not define health, merely as the absence of disease but adopt a more holistic, multidimensional approach with focus on education, environment, social well-being and happiness. The impact will be to have a target population that is healthier, empowered and have a higher quality of life.
IN THE COMING FUTURE:

Year 2013:

- Bella Health is delighted to announce that Bella Health Care, has expanded to open a new clinic: Rekha Clinic in Selaqui Dehradun. The premises are located at: House No. 843, Near Old Post Office, Selaqui, Dehradun. It is our pleasure to be able to serve the needy populations in Selaqui with the same quality services that our patients expect.
- Launch of Bella Health Plan a unique, affordable health insurance plan.
- Invest in a second mobile health van
- Provide Adolescent Reproductive health classes for both males and females
- Research geriatric woman's health needs with emphasis on mental health.
- Design a program to increase awareness about domestic violence and its sequel and the rights of women under the Domestic Violence Act.
- Provide interventions to increase male awareness of the importance of woman's health.
- Research the determinants and outcomes of unsafe abortions in the target areas where we work.
- Create support groups for women who suffer from chronic diseases and psychological disorders.
- Create self-health groups so women can improve their livelihood and practice thrift.
- Invite international interns in the fields of medicine and public health.

Year 2014:

- Educate Front Line Functionaries on techniques to improve the quality of service delivery.
- Expand school age program to cover public and private schools.
- Educate sex workers on the prevention of STI's and condom use and also increase the negotiating power of sex-workers.
- Expand our services to more villages and rural slums after the purchase of another mobile health van.
Bela Health aims to improve access to and the quality of reproductive health services available to fertile-aged men and women in rural and urban communities in Uttarakhand.

Our goals are to decrease fertility rates, decrease the number of unwanted pregnancies, increase the rates of contraceptive use and decrease the rates of complications due to early child birth and poorly spaced pregnancies.

We can accomplish this by providing access to safe and effective family planning and other reproductive and general health services. Through these activities, we will empower women with the knowledge to make informed decisions about their reproductive health and we will empower men to support women in making these decisions.

Bella Health strives to improve the mental, physical, psychological health of our patients. We hope that people will be both healthier and more empowered to make informed family planning and reproductive health choices as a result of our work. In the coming years we have a number of objectives we hope to accomplish:

- Double the number of women who have access to quality reproductive health and family planning services in our target areas by 2015.
- Double the number of women by who have access to quality reproductive health education classes and effective family planning counselling in our target areas by 2015.
- Identify women in the urban/rural slums where we operate that have unmet needs for contraception and family planning and introduce them to our services by end of 2013.
- Empower 200 women in our target areas to decide when to have a child and avoid unintended pregnancies and abortions in 2013.
- Reduce pregnancy- and childbirth-related mortality and morbidity by 50% among women and children in our target areas by 2015.
- Decrease the prevalence of STI's and RTI's by 50% in our target areas by 2015.
- Decrease the amount of unsafe abortions by 50% in our target areas by 2015.

We know that these objectives are more than possible if we continue on the course that we have taken. If we maintain our commitment to our communities and receive additional support from donors and our other supporters, anything is possible. Thank you for your continued support of Bella Health. And before we forget...
The Team That Makes It All Happen!

Our amazing team of nurses

Bella Health is so blessed to have such dedicated, passionate, hardworking and talented team members. Our team is the reason why we have met such great success!

Operations Manager : Mandeep Kaur.
Field Coordinator : Karishma Chaturvedi
Physicians : Dr. S.P. Mehta and Dr. Talwar.
Nurse/Midwife : Rozalia
Staff Educators : Rashid Ahmed, Ruchi Uniyal and Uma Gusain
Receptionist : Gurpreet Kaur
Clinical support : Rohit Kumar and Ashok Negi
The nurses : Geeta, Babita, Lila and Rekha
**Numbers**

This section serves as an appendix containing data on the work of Bella Healthcare as well as information we’ve collected and analyzed about of patients.

<table>
<thead>
<tr>
<th></th>
<th>Total Patients</th>
<th>New Patients</th>
<th>Follow Up</th>
<th>Education</th>
<th>Labs</th>
<th>Medications</th>
<th>Pre/Post Natal</th>
<th>All Reproductive Health</th>
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<td><strong>3997</strong></td>
<td><strong>2967</strong></td>
<td><strong>7912</strong></td>
<td><strong>3553</strong></td>
<td><strong>167019</strong></td>
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<th>Labs</th>
<th>Medications</th>
<th>Pre/Post Natal</th>
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<table>
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<th>Month</th>
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<td>5November</td>
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<tr>
<td>1December</td>
<td></td>
</tr>
<tr>
<td>71Total</td>
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</table>

34
Primary data on our patients:

The graph below shows the range in the age of patients seen by Bella Heath.

**AGE RANGE OF OUR PATIENTS (IN YEARS)**

- Over 55 years old: 12%
- 0-16 years old: 27%
- 16-21 years old: 9%
- 22-35 years old: 30%
- 36-54 years old: 22%

The graph below shows the education level of the patients being seen.

**PERCENTAGE OF EDUCATION LEVELS ACROSS ALL AGES**

- Illiterate: 49%
- 2nd to 7th grade: 17%
- 8th to 12th grade: 28%
- Above 12th grade: 6%
The graph below shows the diagnosis in patients 16 years and older.

![Patient Diagnosis All Patients Above 16 years old.]

The graph below shows the diagnosis in patients between the ages 16-21.

![Patient Diagnosis Ages 16-21]
The graph below shows the diagnosis in patients between the ages 21-35.

![Patient Diagnosis Ages 21-35](image)

The graph below shows the diagnosis in patients between the ages 35-39.

![Patient Diagnosis Ages 35-59](image)
The graph below shows the diagnosis in patients over the age of 60.

![Pie chart showing diagnosis ages +60]

The graph below shows the diagnosis in patients under the age of one.

![Pie chart showing most common diagnosis among children <1 year]
The graph below shows the diagnosis in patients between the ages 0-5.

![Graph showing common diagnosis among patients within age range of 0-5.](image)

The graph below shows the chief complaints of the patients between the ages 0-17.

![Graph showing chief complaints among patients within age range of 0-17.](image)
Socioeconomic Status of our patients:

The graph below compares the illiteracy rate according to age range of our patients.

The graph below compares the patient age groups with highest level of education as primary school.
The graph below compares the patient age groups with up to senior high school as their highest level of education.

**PERCENTAGE OF OUR PATIENTS WITH EDUCATION TILL SENIOR HIGH SCHOOL**

- 18-29 age group: 62%
- 30-49 age group: 33%
- 50 or above: 5%

The graph below shows the occupations of the patients treated.

**OCCUPATION OF THE PATIENT**
The graph below shows the occupation of the patients’ spouse.
The graph below shows the house types of the patients.

The graph below shows the type of fuel used for cooking by the patients.
The graph below shows the type of bed used by the patient.
Pregnancy History:

The graph below shows the patients' number of previous pregnancies.

The graph below shows the patients' number of preterm births.
The graph below shows the patients’ number of previous miscarriages.

The graph below shows the patients’ number of previous tubal pregnancies.
The graph below shows the patients' number of previous abortions.

The graph below shows the patients' number of previous infant deaths.
The graph below shows the patients’ number of previous stillbirth deaths.

NUMBER OF PREVIOUS STILLBIRTH DEATHS

The graph below shows the patients number of previous neo-natal deaths.

NUMBER OF PREVIOUS NEO-NATAL DEATHS

(48)
The graph below shows the type of delivery had by the patients.
Birth Control:

The graph below shows likelihood in the use of birth control among the patients.

**DO YOU USE BIRTH CONTROL?**

- Yes: 51%
- No: 45%
- Menopause: 4%

The graph below shows the types of birth control being used by the patients.

**TYPE OF BIRTH CONTROL BEING USED**

- Condom: 62%
- Pills: 29%
- Copper T: 2%
- Hysterectomy: 1%
- Vasectomy: 0.3%
- Withdrawal: 0.1%
- Tubal Ligation: 0.1%
- Other: 0.1%