

Name of the organization: Tapobhoomi Trust, Bhubaneswar, Orissa.						
Name and Address and Contact no of the contact person:- Mr. Chittaranjan Sarangi, (Managing Trustee). Address :- 552 B, Beherasahi, Nayapalli, Bhubaneswar – 12, Orissa E –mail – tapobhoomi@gmail.com Telephone Number: - 0674 – 2421033,						
Title of the proposal: - Integrated AYUSH model by control Malaria & malnutrition by (AYUSH - 64) in Malkangiri District of Orissa.						
Area of operation :- Name of district – Malkangiri ; Blocks :- 4 Blocks in, Malkangiri, District. Number of beneficiaries: - 25,000 patients directly and 3,00,000 population indirectly.						
Objectives	Details of Project Launched	Deliverables expected from the proposal	Fund released	UC position	Major points of field visits	Remarks
<p>1.work with community to increase their capacity to asses the key health problems they face, and services available so that they are enable to partner in planning and monitoring of health service provision, leading to change in their health seeking behavior and in the quality of services rendered to them in an equitable and accountable manner.</p> <p>2. Work with the health system to undertake initiatives such as advocacy on community involvement, alternate financing mechanism, which are equitable, comprehensive system improvement, technical capacity building, attitudinal change for client orientation etc.</p> <p>3. Undertake consorted effort in 2 Blocks say one costal and one tribal blocks for control of Malaria, and Filariasis in three years time. Strengthen and empower community efforts to make it sustainable and self-supportive in the same time.</p> <p>4. Develop Ayurvedic approach in community health care and promote use of indigenous drugs for its early availability & low cost & safely in anti malaria drive for eradications prevention & cure.</p> <p>5. Conduct collaborative study on prophylactic treatment to control</p>	<p>The proposal has been considered in the meeting of the Project Approval Committee on 18.2.2011, chaired by the Secretary (AYUSH).</p> <p>In the said meeting the following decisions has been taken by the Committee.</p> <p>“The Committee has recommended the proposal amounting to Rs 248 lakhs subject to the following conditions:-</p> <p>1. Strict monitoring will be done by the Committee consisting the following members:-</p> <p>a) One Doctor from</p>	<p>Strategy :-</p> <p>1. Advocacy for a shared vision for change in ideas / attitudes at various levels & structures.</p> <p>2. Building Partnerships & Stakeholderships among Government Departments, Institutions, Organizations.</p> <p>3. Comprehensive Capacity Development of communities, C.A.s, LHPs, CBOs, ASHAs, AWWs.</p> <p>4. Decentralized planning, execution & Management for community convergent actions.</p> <p>5. Effective Communication for change in Health seeking behavior of rural community.</p> <p>6. Fostering an Healthy Environment free from communicable diseases.</p> <p>7. Growth as human persons sensitive to Nature ensuring rise in Health Development Index.</p> <p>8. Holistic and integrated package of health programmes at Block and Panchayat level.</p> <p>Intersectoral coordination & convergence for effective implementation of Health programmes.</p>	<p>Rs. 32.604 lakhs has been released as 1st installment in 2010-11.</p> <p>2nd installment amounting Rs 11.50 lakhs has been released in 2011-12.</p>	<p>UC of 1st installment issued.</p>	<p>Field visit has been done by the incharge of NRIADD, Bhubaneswar, an Unit under CCRAS and one State Government representative.</p>	

<p>chronic malarial fever with technical support of National Institute for Research and drug Development (Ayurveda), Bhubaneswar and District Hospital, Malkangiri</p>	<p>State Government.</p> <p>b) Director In-charge of NRIADD, Bhubaneswar, Orissa, which is the local unit under CCRAS.</p> <p>c) Local Public Representatives.</p> <p>2. The Financial Requirement / Budget of the proposal need to be examined and rationalized by the technical expert of the Department.</p> <p>3. State Authorities should be informed about rolling out of the scheme, as it will be implemented in the area under their jurisdiction. This will help in not only monitoring but also effective implementing the project.</p> <p>But due to unavailability of the funds at that time only Rs 32.604 lakhs had been released as 1st installment in 2010-11.</p>	<p>Deliverable sand expected outcome s:-</p> <ol style="list-style-type: none"> 1. Malaria controlled and institutionalized in 200 villages through intersectoral coordination. 2. 20,000 Malaria patients will be treated in indoor, outdoor & mobile health units. 3. Establish use of Ayurvedic drugs among rural community with technical guidance of NIRDD. 4. Healthy environment with enhanced health seeking behavior of rural folk. 5. Establish a clinical data on creation compound indigenous formation / drugs. 6. Disease Surveillance & Monitoring system institutionalized in 200 villages. 7. Effective functioning of health service system at the grass root level. 8. Proper implementation of health and livelihood programmes of Government. 9. Conservation & cultivation of useful indigenous herbs and Herbal kitchen garden promoted in 5000 families. 				
--	--	--	--	--	--	--