

Short Communication

Holistic Health Care Delivery: A Community Perspective

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Abstract: In the scenario of resource limitation posed as a genuine constraint in holistic health care delivery there is a way of approaching and delivering health to the community. A dedicated team, mobile medical van, yoga and games integrated together have made a great impact on the health scenario of the villages where it was implemented.

Keywords: Health care delivery, Rural rejuvenation, Yoga, India

INTRODUCTION

Presently the way we look at health has undergone a phenomenal transformation from how it was seen in the last century. The 'world health organization' definition of health as "A state of complete physical, mental and social wellbeing & not merely an absence of disease or infirmity where an individual is able to lead a socially and economically productive life" [1] makes it a very idealistic state to attain, where the health system is constantly striving to reach as near as is possible to that utopian idea of health. We now view health as a balance between multiple dimensions, the major ones being physical, mental and social. This idea of health being a state of balance is not a new one. Nearly twenty five centuries back 'Hippocrates' who is revered as the father of medicine came up with his philosophy of the four humors (blood, black bile, yellow bile and phlegm) the balance of which he postulated was necessary for good health. Similarly the role of the environment was also stressed in his ideas of the theory of 'airs, waters and places' in maintenance of health.

The understanding that everything that man is exposed to, in his micro as well as the macro environment are essential to be considered when planning the health needs of the individual and thence to the community and society of which he/she is a part has opened out the field of healing to multiple new disciplines that have found a place in the health care delivery systems of different countries. Yet that state of health still remains a dream to be fulfilled in a majority of developing country set ups.

The reasons we put forth for this inability to attain health is, lack of funds or literary backwardness. Considering these reasons to be truly relevant, yet, is it possible to make a significant difference in the lives of

people living under such conditions? To answer this question it would be most appropriate to consider some initiative that has worked at this point in time rather than build our arguments on speculations.

SHORT COMMUNICATION

A project called aptly "action for rural rejuvenation" in, South India has taken significant steps in health care delivery. At this point we have to remember that majority of people's health problems do not require a tertiary care and that the psychological component in the feeling of wellbeing and hence health is a factor of paramount importance in the way people perceive and live their lives. When an individual is psychologically down, for which there is no dearth of reasons in any society, it directly has an impact on his physical health too by increasing his susceptibility to a variety of health aberrations, the mental dimension of health. In the twenty-first century it has been hypothesized that lifestyle-related disease will account for more than 70% of all disease; thus, the prevention and treatment of lifestyle-related disease will be of primary importance [2].

In our routine health care delivery settings, either due to ignorance, lack of initiative or lack of time the patient is treated as a faulty machine that needs a quick fix! This is brought about by the allopathic way of looking at the human body and its functioning, which in the clutches of severe scientific principles of 'believing only what can be measured' is constrained, as emotions and feelings which form important aspects for individual health are subjective phenomena that defy measurement (though now there are grading tools to measure them it is only a faint reflection of the actual state within the person). So no or only very minimal

care is given for the emotional, mental and other subjective dimensions of the patient's health.

A deeper understanding of these principles forms the hall mark of the project "action for rural rejuvenation". The modus operandi bases its process on three major tenets (a) The trust of the people in the intention of the health provider makes a big difference in the outcome, (b) The ancient system of some simple yogic practices can do wonders to the way the body and mind function in an individual, (c) Unless there is harmony among the people living in the same community there is no possibility of any lasting health for them as a group.

So the process starts with fortnightly visits to villages in a medical mobile vehicle with a team consisting of a doctor, nurse and pharmacist to deliver primary health care free of cost. Revisits every two weeks serves to follow up the patients as well as to win the trust of the people in the village. This takes six to eight months. This is followed by visit to the village by a team of trained yoga instructors who conduct a simple yoga training for the villagers of all age and both genders in a very flexible scheduling pattern based on the needs and free time of the village community.

Research reveals that some of the most consistent and reproducible effects of yoga practice include stress reduction, emotion regulation, improved mood and well-being, improved cognitive functioning, enhanced respiratory function, improved physical flexibility, muscular strength and neuromuscular performance [3].

As people start doing their yoga practices we have found that over a period of couple of months the number of people visiting the mobile medical vans drastically drops down. People overall get and feel healthier. The strongest contribution to people's mental health would be the preventive application of yoga in society in general, given what we know about the excellent benefits of yoga practice on risk factors for psychiatric conditions.

It is clearly more cost-effective and efficacious to prevent mental health diseases, than to treat them once they have manifested as clinically significant conditions [4].

The next step is introduction of games in the community, volleyball for men and throw ball for women. Trainers come down to the village at a time convenient for the villagers. The making of the courts, purchase of the nets and balls is all done by a willing contribution from the villagers. They are trained by the coaches in the respective games. As days pass the momentum picks up and more and more people make it a point to come for the games and in a couple of months this becomes a part of the village routine. The advantages of introducing games lies in the fact that there is a kind of kinsman spirit built up among the

villagers and due to the fun part in the games it aids as a method of mental relaxation too. What is most interesting is that people from all casts are seen to participate enthusiastically and this serves to break the ice that is created out of our communal allegiances thus harboring for an overall atmosphere of harmony.

A substantial body of epidemiological evidence has linked social networks and social support to positive physical and mental health outcomes throughout the life course [5]. Social connectedness is believed to confer generalized host resistance to a broad range of health outcomes, ranging from morbidity and mortality to functional outcomes [6]. Prospective epidemiological studies in adult populations have revealed that social networks predict the risk of all-cause and cause-specific mortality [7]. It is of interest to note that 'rural olympics' have been conducted over the years by the foundation and it was heartening to see the spirit and participation from more than a thousand villages all of which were part of the project.

This successful model of delivery of health in its truest sense requires a strong motivation and commitment on the part of the health delivery team that initiates and sustains the process. But all said and done, the end result of a healthy people in a harmonious community is a goal towards which any amount of effort spent is not wasteful for the administrators interested in real human well being.



Fig. 1: Mobile medical van



Fig. 2: Community clinic



Fig. 3: Community Yoga



Fig. 4: Village Game

CONCLUSION

The points of interest to be seen here are that majority of people do not have health conditions requiring any specialist care and their problems are predominantly an outcome of the way they have maintained their body and mind. The introduction of yoga to balance the body and mind followed by opening out through their participation in the entertaining arena of games creates a certain self confidence that seems to augur well for their overall state of health and well being. This serves to have a very positive impact on both the psychosomatic health aspects of the individual as well as enhances the social support and cohesion mechanisms contributing to overall well being and harmony.

This is proof for the fact that in spite of the shortcomings we so blankly state as causes for a poor health care delivery in our country, there is a definite possibility of overcoming these and cater to more than just the physical dimension of health for the rural and backward societies which are very much the blood and life of the stream of any country. This model serves as an, inspiration and practical solution which can be taken up and integrated by any government or non-governmental agency to enhance efficiency in the process of health care delivery to the people.

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