

Care with compassion and commitment

The Ananda Hospital at Sirsia village of Kushinagar, eastern Uttar Pradesh, has successfully raised awareness on public health and hygiene among the people. Supported by the Japan International Cooperation Agency, the charitable hospital provides efficient primary health care services to the rural poor.

“Actions speak louder than words... To say something, it is not necessary to ‘say’ it... What you do, more often than not, conveys the message for you.”

A real life example for this adage is proffered by Mr. Koichi Otake, Coordinator, India Welfare Village Society (IWVS), who comes from Japan every year to India, to help the work of the Ananda Hospital located in Sirsia Village in Kushinagar, east Uttar Pradesh.

Mr. Otake is a pharmacist; he speaks only Japanese and some broken English, and understands a few Hindi words. Yet one amazes at how successfully he interacts with the stream of local villagers who come to Ananda Hospital for treatment.



Ananda Hospital in Sirsia Village, Kushinagar, UP/ Photo credit: OWSA

The Ananda Hospital is a charity institution built and operated by India Welfare Village Society, a Japanese NGO based in Aichi, Japan and Ananda Mission Charitable Trust (AMCT), with help of Japanese contributions. It was built in 1998 to provide affordable medical services to the rural poor in India, and promote health and hygiene to prevent infectious diseases among them.

Koichi Otake has been associated with the hospital since its first brick was laid.



Koichi Otake interacts with villagers on one of his rounds around the village/ Photo credit: OWSA

Over the past 12 years, Otake has been coming to Ananda Hospital every year, at least twice. Each time he is here, he makes it a point to visit every household in the village to meet the people and enquire about their well being in his unique language of Japanese, English, and Hindi words and hand signs. The villagers also communicate with him and endearingly refer to him as ‘*Taake Baba*’.

Otake proves that if the intent is sincere, then language can never be a barrier. His efforts form the pillar that gives strength to the Ananda Hospital initiative.

Another pillar of strength for the institution is Dr. P.N. Gupta, Medical Superintendent at the Ananda Hospital who sets an example in altruistic service. He is among the few doctors we see today, who have consciously chosen to go for a hardships-laden rural service than enjoying the comforts of city life.



Dr. P.N. Gupta,
Medical Suptd, Ananda
Hospital/ Photo credit: OWSA

Dr. Gupta has been with the Ananda Hospital since it started from 2nd November, 1998. That time he started practice with nothing, but a table and two chairs. Today the hospital has a pathology lab, X-ray machine, facilities for ECG and Ultrasonography and a 7-bedded ward. As he took us around the hospital, we could sense the feeling of pride and contentment he exuded, while he showed us how the hospital grew equipment by equipment, and facility by facility.

Started in 1997, the hospital was built in a record time of one year, under personal supervision of Koichi Otake. As per Japanese ethos, the date of completion of any project is decided even prior to initiation of work on the project. Ananda Hospital was decided for service from 1998 November, and accordingly as well as incredibly, it was readied for service precisely by the stated date! Otake stayed in India for 200 days, that is more than half a year, working with the construction workers and laying brick and cement with his own hands, to ensure that the hospital was ready on time. Living in India, one can only marvel at Japanese discipline, hard work and punctuality!

Till date Ananda Hospital has serviced more than 200,000 patients who come here not only from the neighbouring villages but also from as far as the UP-Bihar border, a couple of kilometers away. Most disease symptoms are of tropical diseases like amoebic dysentery, Malaria, virus infections, tuberculosis, asthma and parasitic worm infections.

Such infections prevalent in the area can be prevented to a significant extent by proper hygiene and sanitation alone. Ananda Hospital, has now therefore been conducting "*The hygiene education to farm villages, and nurturing of talented people*" programme with support from Japan International Cooperation Agency (JICA). The programme lays much stress on educating the villagers on basic public health and cleanliness.



A lady hospital assistant with women in the maternal health class at Ananda/
Photo credit: OWSA

More than half the patients who visit Ananda Hospital are women and a substantial percentage among them are expectant mothers. Under the JICA supported programme, the hospital arranges for a special class for expectant mothers every week which is conducted by lady hospital assistants Suman and Urmila.

The village women find it easier to open up to women instructors to ask queries and discuss their problems; moreover the communication is facilitated in the local dialect so that all women can follow what is being taught in the class.

Nearly 20-30 women attend this class every Friday, where they are provided basic health and hygiene education, including on maternal health, safe pregnancy, delivery, health-care and nutrition, and child care.

Around 80-130 patients come to Ananda Hospital every day; many among them from the poorest economic backgrounds and the lowest social classes. We spoke to a few villagers, who had come for treatment, and they were unanimous that the hospital is a big advantage. It could be inferred that the ones who benefited the most from the Hospital were the most marginalised members of neighbouring villages – the Dalit and backward caste population – who are, even today, far worse off than the upper caste people of their villages.



Around 80-130 patients come to Ananda Hospital every day/ Photo credit: OWSA

“It is good that we have a hospital here in the village, else patients would have to run to Gorakhpur town or other big cities for treatment. People are poor here, and it is not easy to afford such costly treatment.” says Uma Shankar, a patient from Kurmauta Village.

The first time patients visiting the Hospital mentioned that they came to Ananda Hospital after they learnt about other people benefiting from the treatment here. Not only this, it also comes to be cheaper for them, as the hospital charges only nominal fees for registration, lab tests and medicines.

Ananda hospital also conducts pre-screening for patients who show symptoms of possible HIV infection. It has a full-fledged facility for HIV screening and conducts the ELISA test at one third of the normal cost. Till date, near 100 HIV cases have been screened here, which reflects significant contribution by a primary health centre towards prevention of HIV/AIDS pandemic.

The medicines especially are a main highlight of the Hospital. Ananda Hospital is known in the area as having a good stock of high quality medicines, which are provided to the patients at fairly subsidised rates. This is acknowledged not only by patients, but also by doctors in neighbouring hospitals. While interacting with a specialist at the Community Health Centre in Kasia, we were pleasantly surprised when she commended about the availability of good quality medicines in Ananda.

“I had been to the CHC for treatment earlier, and now I have come to Ananda Hospital after I came to know that the medicines given here are very good, and people have recovered very well,” says Meherunissa, a first time visitor whom we met at the waiting hall.

“We get first class medicines here,” says Bhikku who has come to the hospital around 3-4 times before. “It is logical that only when medicines work, will the patients come. Since the medicines give benefits, and they are also cheaper, therefore people come here,” he adds.



The hospital dispensary provides medicines at a subsidised cost to patients/ Photo credit: OWSA

Ananda Hospital is today a success story scripted by the efforts of an Indo-Japanese team. It can be cited as an example of an efficient primary health care service provider in rural India. More such similar initiatives should be replicated in other parts of the country as well, so we in essence can have a strong infrastructure set up for rural health care in India.