



## **FUTURE VISION:**

**TO BUILD AND DEVELOP A MEDICAL CLINIC THAT WILL PROVIDE BASIC HEALTH CARE, REGARDLESS OF ECONOMIC, RELIGIOUS OR SOCIAL STATUS**

# **TRIBAL HEALTH CARE PROJECT**

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# Why a Health Service Project ?

Although progress is being made, the lack of health care for Indians is still **a cause for grave concern**, especially in rural areas. This concern is reflected in statistics such as life expectancy (63 years), the infant mortality rate (80/1000 live births), and the maternal mortality rate (438/100,000 live births).

Providing necessary health care in rural areas must be addressed at both the macro (national and state) and micro (district and regional) levels, with a strong fiscal commitment to provide care for the poorest of the population.

It is at the smaller district and regional levels that partnerships with non-profits such as GPMO can be most effective.



# HEALTH CARE IN THE RURAL DISTRICT OF KANDHAMAL

In the Kandhamal, there are very few options for people to receive health care, in spite of great need.

It is too expensive for the poor to go to urban health centers, which is the choice of those who can afford it.

Local government-run hospitals tend to struggle with a shortage supplies. Clinics are short-handed and the staff often lack needed training.

The poor who cannot afford private or government services end up suffering, and often dying, at home.



# Common Diseases that can be Prevented or Treated

## A. Diseases that are carried in the Gastrointestinal Tract:

Diarrhea, Amoeba-Related Diseases, Typhoid Fever, Infectious Hepatitis, Worms and Poliomyelitis. About 100 million suffer from diarrhea and cholera every year.

## B. Diseases that are Air-Borne:

Measles, Tuberculosis (TB), Whooping Cough and pneumonia. Today there are 12 million TB cases, and more than 1.2 million cases are added every year.



37,000 cases of measles are reported every year.

## C. Other Diseases That Are Still Prevalent in Developing Countries

Malaria, Leprosy, and parasitic diseases such as Filariasis and Kala-azar:

As the country develops, irrigation systems, cattle ranches, and the ditches, gutters and culverts dug during the construction of roads, are breeding places for snails and mosquitoes. Pesticide use has produced a resistant strain of malaria. About 2.3 million cases of Malaria occur in India every year, with over 1000 deaths.

An estimated 45 million people are carriers of Microfilaria.

There are nearly 1.2 million cases of leprosy, with 500,000 cases being added to this figure every year.



**Malnutrition** is one of the most serious health-related problems in rural areas. Protein energy malnutrition (PEM), Anemia, Vitamin A Deficiency and Iodine Deficiency are widespread and have life-long health consequences.

Nearly 100 million children do not get two meals a day.

More than 85% of rural children are undernourished;  
150,000 die every year.

The extreme practices of witch doctors also threaten the survival of malnourished children.



# Why Grace and Peace Mission (GPMO)?

GPMO is an integral and respected part of the local community.

Our vision and services are well received and supported.

GPMO cares for the people holistically.

There is currently no other organization in the region that is able to fulfill this vision.



We have the potential for providing the space, facilities and workforce to help develop this vision.

We have the support of people like you.

GPMO currently owns 7 acres of land, some of which is still undeveloped.

There is room to build a health center or expand/restructure the existing facilities, without discontinuing any of the current ministries.



# WHAT IS OUR HOPE?

The health center will establish Nanda (GPMO) as a center of hope in the region.

The health and well-being of the tribal community in that area will be significantly improved.

The grace of God will be demonstrated in tangible ways.

Children will be rescued from the horror and disease and death, and from the frightening practices of witch doctors.



# WHAT IS OUR HOPE?

The community will have access to good and affordable health care.

Infant and Maternal mortality rates will decrease.

The local people will increasingly trust our leadership, and this clinic will offer one more way for us to impact the overall well-being of the community.

We will provide employment opportunities to medical professionals and support staff.



U.S. health care professionals and students will volunteer in the community.

Dated medical equipment can be brought over from the USA.

Perhaps one day we will be able to expand our ministry, even to other neighboring nations such as Nepal.

# Estimated Cost of Implementation

New Health Facility: \$55,000

Beds and accessories: \$30,000

Investments:      Radiology      \$30,000  
                          Ultrasound      \$20,000  
                          Pathology      \$20,000  
                          Pharmacy      \$30,000

\$100,000

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**Total Est. Cost:      \$185,000**



Would you be willing to help fulfill this vision to care for the tribal people in Kandhamal?

Your donation can make a difference !

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