

Medical Camps Bring Health Care Services to Children in an Early Intervention Program in Rural South India

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Introduction: Medical services for children with developmental disabilities living in rural communities of India presents many access barriers and limitations for families. Distance from medical centres, transportation costs and time requirements often prohibit access to much needed specialty medical services for children with disabilities.

Objectives: The objectives of this program are to: (1) identify the medical needs of children with developmental disabilities for referral to medical specialists, (2) establish a free multidisciplinary medical camp for rural children with developmental disabilities, and (3) monitor referrals for further medical investigations, surgery, prescriptions for medication, supportive and assistive devices.

Participants/Setting: This program was developed by Amar Seva Sangam (ASSA), an Indian non-government organization in the District of Tirunelveli, State of Tamil Nadu in South India. Children aged 0-6 years with developmental difficulties followed through the Early Intervention (EI) program were eligible to receive free services from a multidisciplinary team of medical professionals through a yearly medical camp program.

Methods: Children are first assessed by rehabilitation specialist of the EI program through a Medical and Surgical Needs Assessment Referral System identifying the type of medical specialty required. A medical consultation list is established one week before the free medical camp by the EI specialists, children scheduled to attend, and families contacted. Every medical specialist in the camp is accompanied by an EI program specialist when seeing the children. Medical specialists assess and prescribe medication, provide referrals for further investigations and surgical consult at 2 regional hospitals, and refer to local orthotic unit for dispense of supportive and assistive devices.

Results: A total of 1048 patient visits were made in the period from September 2017 to December 2019, during the course of 3 annual medical camps. Number of children seen by each specialist include: pediatrician (210), orthopedic surgeon (166), general medicine (128), neurologist (123), psychologist (96), dentist (91), gynecologist (74), ENT (66), Speech & Hearing (46), ophthalmologist (42) and urologist (6). A total of 512 children were provided with

prescriptions for medication, 102 children were referred for further investigation, 98 children were referred for surgery and 79 children were referred for supportive & assistive devices.

Conclusions:Enabling access to free specialty medical services is essential for the well-being of children with developmental disabilities. Bringing medical professionals under one roof to the children and families living in poor rural areas of India is essential in a village-based early intervention program.