The Road Less Travelled

Story of a young doctor who touched the lives of tribal people in Gadchiroli (Maharashtra) through his medical service and how living in the primary health center in a remote village changed his life.
According to the report of ‘National Commission on Macroeconomics and Health’ by Government of India, 78% of the total OPD consultations in the country today are done in private sector and only 22% are provided by the public sector. Every year, over 40 million Indians are pushed below poverty line because they could not afford the expenditure on healthcare. This just provides a glimpse of the inadequate coverage of the Government health system and the catastrophic effects that it has on poor people, most of them living in the rural and tribal parts of the country.

Maharashtra every year produces more than 2200 MBBS doctors from the Government and Municipal Medical Colleges in the state. As per the GR passed by the Government, all of these graduates are legally required to serve for one year in the Government health system else pay up a bond of INR 10 lakh. Unfortunately, as per the performance audit report for Maharashtra State by the Comptroller and Auditor General of India (CAG), “90% students who graduated from GMCs did not render service to the Government”. The report also states that for the state of Maharashtra the doctor to patient ratio was 1:1,191, while the WHO recommends it to be at least 1:250. The ratio is worse in tribal districts – for e.g. in Gadchiroli, it is 1:11,000.

Then where do these all young doctors go? Most of them find their way to either study rooms or tuition classes for the preparation of entrance exams for post-graduation, with the eventual aim of getting a cushy job in a corporate hospital or setting up one’s private practice in a metro city. This is the norm.

The story of Dr. Prathamesh Hemnani, however, is different. Born and raised in a Sindhi family from Ulhasnagar, Mumbai, Prathamesh is the elder son of doctor couple who have their own private practice in Ulhasnagar. Coming from a well to do family background, Prathamesh however took a different career path from the conventional one. After completing his MBBS from GMC Solapur, young Prathamesh opted for serving in the district of Gadchiroli. His journey from the West coast to the East coast of Maharashtra is an interesting and inspiring one:-

“Being born and brought up in a middle class family in Ulhasnagar, near Mumbai, the only idea about rural India was through TV or newspaper and the
idea of social work was ‘charity’. Being in a secured environment, I did not have even slightest idea about social problems residing in various parts of the country. Life was easy, so much fun. As a medical student, my goal was very clear - pursue PG after MBBS and if I am lucky, do super specialty and start my private practice or join a corporate hospital.”

“I was studying in Government Medical College, Solapur when I came across NIRMAN. I still had an inner feeling that I want a change in the society. That time I did not know how to go about it. When I came to NIRMAN, it gave me a platform to explore various social problems and injustice in the society. I got to meet so many like-minded people who want to be or are social change makers. NIRMAN posed a crucial question in front of me which then changed my further life choices, ‘where am I needed as a doctor?’ Am I really needed in a big city where there is over saturation of doctors or am I needed in rural/tribal parts of the country, where people are still dying of malaria and pneumonia?”

Young Dr. Prathamesh took it up as a challenge, and chose the remote area of Gadchiroli to offer his one year of bonded service. Gadchiroli is known for its vast forest, rich tribal culture and endemic malaria. 70 years after independence, health infrastructure is still in its infancy, people die of malaria and pneumonia. Transport facilities are so poor that it causes utmost delay in referrals of complicated cases to tertiary centers. Knowing his decision, Prathamesh’s friends were not readily supportive at the first, as it was unusual, they felt, for anyone to do their bond and then crack PG entrance. And according to them, he had made a wrong decision by opting for such a 'stunt'. Prathamesh was posted as a medical officer in the Primary Health Center at Pendhari - a village 60 km from Gadchiroli town, deep into the dense forest.

He reflects on his experience:

“The fear of handling patients that every MBBS graduate faces before entering the real world had just vanished. That was the biggest breakthrough for me. I realized my syllabus and college had taught me enough to deal with patients at the primary care level. It was just the fear or uncertainty whether I could do it or not. I started seeing patients as fellow human beings and not just as my clients. I
learned a great deal about how to ‘talk to patients’, ‘listen to their problems’ and ‘understand them’. The problems were not only from health point of view but their health seeking patterns, their health economics, their lifestyle and their awareness on various health issues. Over time, Sundays also became OPD days. As people came to know that a school going kid like doctor is available 24*7, villagers turned up to PHC. Institutional deliveries increased by 67% to 80 from last year’s record of 48 in a whole year. They started offering me kombda (local name for cock) if patients were satisfied.” Laughs Prathamesh.

“Managing the already demotivated staff of the government system was a real challenge in itself. As an In-charge Medical Officer, I got the opportunity of knowing the financial and administrative work of a PHC like allocation of funds, working of various National Programs and Schemes. I must mention that working in a government healthcare system was also a big shock. I have seen planned policies getting ruined by corrupt officers in the chain from policy making to implementation. There are sharks everywhere in the sea, waiting to pounce on the public’s money. The system is rusted so much, that some of my seniors gave me tips and suggestions for withdrawing money and getting involved in the chain, so that I could pay these people for getting my work done smoothly.”

But beyond the life at the PHC as a Medical Officer, there is much more that happened with Dr. Prathamesh which he reveals in further conversation:

“10 months of living away, far from the hustle bustle of city and in the heart of nature was altogether a different experience. There was only 1 hotel in the village and that too only cooked rice. It helped me to learn how to cook my own food. I realized that you will never die starving, only if you know how to cook. During the initial 4 months, there was a lot of connectivity issue and electricity problem. Calling home after searching for cellphone network for half an hour on the terrace and letting them know that I was still alive was a great fun! Calling senior doctors at SEARCH for managing difficult cases was also an adventure altogether. This made me realize that staying in a well-connected area with full time electricity connection is truly a LUXURY!”
His father tells a hilarious story of his brave son; when Prathamesh was once back home for a short leave and he had totally forgotten ‘how does the bathroom geyser work?’

When Prathamesh recollects his memories of when he decided to go to Gadchiroli, he says, “Convincing my parents for this was a tough job. After lot of arguments, they finally gave in and I headed to Gadchiroli. But after they visited me at my place of work, during Diwali, they realized that I really belonged there. When I used to discuss with them, as both of them are doctors, the phenomenal cases I faced, they used to wonder and felt so proud of me.”

After about a year of medical service in the tribal village of Pendhari, Dr. Prathamesh has now taken an educational break. He wishes to pursue MD in either Psychiatry or Medicine. But unlike most other medical graduates, he has already decided to return post his PG and provide medical services to the tribal people of India. This clarity and conviction about his values and mission, that he derived from NIRMAN and his subsequent time at Pendhari is what sets Prathamesh apart. The thought and experience behind his life decisions is a matter for all young doctors to ponder upon.

“When a mother gives birth to a child without trained health personnel, uses scissors to cut the umbilical cord and her strand of hair to tie it, you know health facilities have not reached the last citizen. When a baby gets ‘dabba’ (pneumonia) and still goes to a traditional healer of the village since he has more trust in him than the local PHC, you know health programs have not reached the last citizen of this country. As a doctor, it’s my prime responsibility to serve the needy and do not let anyone die just because he has no access to healthcare or can’t afford it!”

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Annexure

Prathamesh in NIRMAN camps

Fun on the roads of Gadchiroli

Opening the PHC at night

PH explaining his work to new medical graduates from NIRMAN
Prathamesh with Locals

PH & his sister Hasri are both part of NIRMAN

NIRMAN medical participants visiting PHC Pendhari

Appreciation by CEO

Dr. Prathamesh Hemnani in PHC