



Mukul Madhav
Foundation
Established 1999



Project: Eliminate Disability caused by Clubfoot among Children in India Comprehensive Project Report





Mukul Madhav
Foundation
Established 1999



Background

It is second year of our great partnership in the process of making differences at community level, working as changing agent supporting vulnerable section of societies, empowering families by securing their child beautiful footstep after the birth moreover it is happening with the novel intention and unwavering support of Mukul Madhav Foundation, in FY 2022 to 2023 our partnership transferred the lives of 50 children born with Clubfoot directly and counselled more than 100 parents, we organized capacity building program, community awareness program and impacted a large section of population in specific location. Simultaneously in the second year, Cure International India Trust (Cure India) and Mukul Madhav Foundation enter into a memorandum of Understanding to Treat 60 Children who born with Clubfoot in Deesa and Bhawnagar districts (Gujrat) and Bangalore (Karnataka) in this MoU Cure International India Trust will work as implementing Partner for Clubfoot treatment with Mukul Madhav Foundation and the Foundation will provide monetary assistance to implement this project from 1st June 2023 onwards. Implementing organization will apply "Ponseti method" to treat children born with Clubfoot, in order to implement the program, Cure International India Trust will train ASHAs, Anganwadi workers and RBSKs to identify and refer children born with Clubfoot to the nearest clinics. Furthermore, community mobilization program and sensitization programs at school level, DEIC, RBSK and ASHA centres is part of this project.

This noble endeavour, backed by the Mukul Madhav Foundation is a testament to a vision where every child afflicted with this disability receives comprehensive and free treatment.

At the heart of this project lies a dedicated team of Cure India Counsellors, who seamlessly wear multiple hats. They serve as District Project Coordinators, ensuring the smooth orchestration of operations at the grassroots level. Their role extends further as they step into clinics, donning the mantle of protocol officers, while simultaneously providing invaluable counselling to parents. This multi-faceted approach doesn't end there; these compassionate souls also take on the role of educators, imparting knowledge about Clubfoot to the younger generation and engaging with community pillars like ASHA, Anganwadi, and DEIC to spread awareness.

The impact of their tireless efforts is palpable. Already, new children in all identifies districts of Gujrat (Deesa and Bhawnagar) and Indira Gandhi Institute of Child Health, Bangalore (Karnataka) have been enrolled in this life-altering protocol. However, CURE India's vision stretches far beyond mere enrolment numbers. Their ultimate aim is to ensure that every child afflicted with Clubfoot not only receives complete treatment but is also seamlessly integrated into the mainstream education system.

CURE India extends its heartfelt gratitude to the Mukul Madhav Foundation, whose unwavering support has been the cornerstone of this noble endeavour. Thanks to this support, CURE India can continue to offer these children not just treatment but hope, empowerment, and a pathway to a brighter future.



Mukul Madhav
Foundation
Established 1999



About Clubfoot:

Clubfoot is a congenital deformity that severely twists the foot downward and inward, making walking difficult or impossible. Two out of every 1000 children are born in every country in the world regardless of race or geographic region suffer from clubfoot. Over 2,20,000 children, in the developing world are born each year with clubfoot and India alone accounts for almost 1/4th of these children with a population of over 52,000 children born with clubfeet. Though completely eradicated from western developed countries through early identification and right treatment. CURE International India Trust (CURE India) has been working for over 14 years providing affordable and effective nonsurgical interventions to permanently correct the clubfoot. Using the Ponseti Technique it has effectively treated over 1 Lakh children and is currently working with an additional 6,000 children offering free, world class treatment through 374 designated weekly clubfoot clinics across India in partnership with all the 29 State Governments. Moreover, CURE International India Trust (CURE India) trained more 8600 Doctors in Ponseti method.

Cure International India is working relentlessly to eliminate disability from Clubfoot since 2009 so far we treated more than 1 lakh children and Cure India is the largest Clubfoot program in the world today. At present more than 1200 children born with Clubfoot get enrolled every month undergoing free treatment through 374 clinics across the country.

Key Mile Stone :

- **Deesa (Gujarat): 08 Children Treatment**
- **Bhavnagar (Gujarat): 08 Children Treatment**
- **Indira Gandhi Institute of Child Health, Bangalore: 44 Children Treatment**
- **Distribution of Foot Abduction Braces**
- **Parents Counselling and Follow-up**
- **Health Professional Training**
- **Counsellor State Program Coordinator and Volunteer training**
- **ASHAs, Anganwadi, RBSKs and District Early Intervention Centre**
- **Community Mobilization**

Progress made against each of objective:

The impact of their tireless efforts is palpable. Already, 08 Children beneficiaries from Deesa Civil Hospital and 08 from Bhavnagar Sir Takhtasinhji General Hospital (Gujarat) and 44 children from Indira Gandhi Institute of Child Health Hospital, Bangalore (Karnataka) children have been enrolled in this life-altering treatment. However, CURE India's vision stretches far beyond mere enrolment numbers. Their ultimate aim is to ensure that every child afflicted with Clubfoot not only receives complete treatment, our resolute mission is to treat clubfoot and eliminate disability resulting from it. We have set specific objectives and are diligently working to achieve them within a defined time frame:

- Our primary objective was to treat 08 children born with clubfoot at Deesa Civil Hospital (Gujarat). This milestone has been accomplished through the tireless efforts of our counsellor and volunteers.
- Our program objective is to treat 08 children born with clubfoot at Bhavnagar Sir Takhtasinhji General Hospital (Gujarat). However, we have completed this target with enrolment of 08 children and their follow-up, foot abduction braces and counselling of parents is going on.
- In Bangalore (Karnataka), Indira Gandhi Institute of Child Health have enrolled 44 children who born with Clubfoot and their treatment is going on.
- We are closely monitoring all children from this year's project, providing braces and counselling to parents to prevent relapses.
- Our sensitization program is extensive and intensive, spanning across districts. Our counsellor and volunteers are diligently working at the grassroots level, visiting homes, schools, ASHA and Anganwadi centers, as well as DIEC, to ensure no child is left without clubfoot treatment.
- An integral part of our objective is efficient documentation, both in soft and hard copies. We capture photos of beneficiaries, share success stories, and utilize them as role models to further our mission's goals.



Community Awareness Program

We have organized ASHA Training – Asha meetings were conducted and training on the identification of children with Clubfoot was provided. Simultaneously we have organized Anganwadi workers Training – Anganwadi workers were trained on the identification of children with clubfoot and they can refer the children at Clubfoot clinic, rehabilitation care and importance of inclusive education for disable children. Our resolute mission is to treat clubfoot and eliminate disability resulting from it. We

have set specific objectives and are diligently working to achieve them within a defined time frame.



Challenged Encountered

- In many cases we witness that many families have very less progress in the field of education, employment both men and women, their social and political development meagre.
- People from marginal section are not aware specially women participation in awareness program is not optimum.
- Migration is biggest issues so the parents always migrate from one district to another, one state to another in the search of employments and opportunities. So, treatment of children hampers and cases of relapse may occur.
- There isn't any Hindi name for Clubfoot; its name is derived from the golf stick because the baby's feet turn inward like that. Coincidentally, golf is a very costly game, so people are unaware of it, making it a struggle for our counsellor to convince the masses.
- In our societies, there are numerous misconceptions based on regional differences regarding this disability. People call it by different names and attribute various reasons to it.



- When a baby is born with clubfoot, patriarchal societies often blame women directly, though the actual cause remains unknown. This discourages them from seeking timely clinic visits.
- Resources play a crucial and dominant role in overcoming the aforementioned difficulties, thus highlighting the pressing need for them.
- Festive seasons also significantly impact the number of visitors.
- Most important is appropriate fund so we face financial constrain in order to implementing the program, it curtails our outreach activities as well as documentation.

Activities Planned for the Last Quarter:

Clubfoot, being a congenital condition, presents significant challenges not only in its initial correction but also in its maintenance to prevent relapse. The individuals benefitting from corrective measures often come from marginalized sections of society, encountering numerous obstacles in adhering to follow-up appointments. Factors such as frequent migration for work, parental negligence—especially from fathers—and the distance of remote villages from clinics contribute to these difficulties. However, we will track them coordinate with them and follow up to those beneficiaries

However, taking these challenges into account, we have devised a comprehensive plan and putting some valuable insight for the next year:

- We will raise the number of beneficiaries as we all are aware that Two out of every 1000 children are born in country but we covered only 8 beneficiaries in two districts of Gujarat and Bangalore as it is not matching the birth rate of that district so we are not able to censor the children.
- **Parental List Segmentation:** We will categorize parents based on their circumstances, allowing us to tailor our support and follow-up strategies more effectively.
- **Continued Target Achievement:** Having already met our targets in at designated clinics in both states, we aim to sustain our progress through consistent follow-ups, parental counselling, distribution of Foot Abduction Braces (FAB), Community Awareness programs, and regular visits by health workers like ASHA and Anganwadi workers. Our aim is to ensure an active and engaged transformation movement within the communities we serve.
- **Health Professional Training:** We are committed to concluding the remaining training sessions for health professionals, ensuring a skilled and knowledgeable workforce capable of managing and addressing clubfoot cases adeptly.
- **Specialized Training Sessions:** We will organize dedicated training programs for counsellors, ASHA workers, and Anganwadi workers. These sessions will empower them with the necessary skills to provide informed guidance and support to parents and caregivers.
- **Thorough Documentation and Diligence:** We emphasize the importance of meticulous documentation, including case studies, photographs, and maintaining due diligence in

our efforts. This approach ensures a comprehensive understanding of cases and aids in tracking progress accurately.

- Community Mobilization their participation to eliminate the Clubfoot
- Enhance the Monitoring mechanism of ongoing programme

In implementing these initiatives, we aim to not only correct clubfoot but also establish a sustainable framework that considers and mitigates the challenges faced by families in underserved areas. Our commitment to meticulous planning and execution underscores our dedication to improving the lives of those affected by clubfoot, ensuring a brighter and more promising future for these individuals and their families.

Glimpses









Mukul Madhav
Foundation
Established 1999

