Summary

Project SOWA aims to improve healthcare access in rural Pemagatshel, Bhutan, by implementing a pilot program utilizing a healthcare delivery vehicle and community engagement. Through collaboration with local stakeholders, the project started a model for enhancing healthcare access in remote communities, promoting equitable, timely, and efficient healthcare access.

The Project

The issue of healthcare access in rural Bhutan, particularly in Pemagatshel, was identified based on extensive on-site needs assessment and in-depth qualitative interviews with the leadership team at Pemagatshel District Hospital in December 2022. We identified the ongoing challenges of limited access to healthcare services in this region, primarily caused by geographical and economic barriers. Implementation of a pilot program utilizing a healthcare delivery vehicle to enhance access was chosen as an immediate approach to address these challenges. The proposed strategies of the pilot program were to use the utility vehicle as an affordable transportation for non-critical patients with affordable to and from the main hospital; to bring mobile healthcare services and screenings to treat and prevent diseases; and to conduct outreach and health education to promote patient self-efficacy.

Pemagatshel was chosen as the host site due to its ongoing healthcare access challenges and limited resource allocation, and notably, my personal connection and intimate understanding of the region as a native. Being from this area, I possess a profound understanding of the culture and strong ties to the people living there, which enables me to truly connect with the community at a grassroots level. Furthermore, I have a deep emotional attachment to returning there in the long-term, where projects like this can be sustained. Thus, I couldn't imagine a more fitting place than my hometown, where I have an in-depth understanding of the challenges, needs, culture, language, and people, to serve as the starting point for realizing a larger dream and goal of making healthcare accessible to all. It's also noteworthy that local relationships, particularly those with Pemagatshel District Hospital, Dr. Gautam Rana, and health assistant Ms. Mon Maya, played pivotal roles in supporting and contributing to the project. They offered invaluable insights, collaborated on data gathering, and facilitated community engagement. I owe the success of this project to these local participation and relationships.

The project initially proposed a phased approach for implementation; however, several adjustments had to be made in response to evolving needs and circumstances. One significant factor was the delay in fund release, which impacted the project's timeline. Additionally, navigating through the Bhutanese government's permissions and regulations added unforeseen complexities to the procurement process.

Originally, the plan aimed to procure the vehicle around April/May, have it operational by June, and hand over the project completely to the hospital by July, where I would no longer be on-site but participate virtually from the U.S. However, since the fiscal year budget from the government that was going to cover part of the expense for the vehicle was not released until July, we could not have the vehicle on time as planned. We then rearranged some of the proposed phases, carrying out the later phases like gathering baseline data and informing the community members, which was possible without the utility vehicle. The vehicle was procured and delivered in mid-August, now fully functional and on track as planned. The only adaptation that had to be made now is that it is carried out independently by the Pemagatshel district hospital and the district health office with constant updates and reports. Additionally, discussions have been held to expand the scope of this project with the addition of more utility vehicles and addressing other infrastructure needs to make healthcare access even more feasible. Local leaders and national representatives from the region have also taken interest and shown support for this initiative.
A substantial amount of funding was required for the procurement of the vehicle. The Davis Fund of $10,000 was initially going to afford a used vehicle. However, the partnership with the district health department guaranteed the additional funds required to purchase a new vehicle, which, although it required multiple layers of approval and authorization, worked out completely well. Moving forward, the project is working on starting a seed fund through external fundraising and community participation to expand and sustain the project.

The project’s success in Pemagatshel will serve as a model for similar communities in Bhutan facing healthcare access challenges. Establishing funds and a committed long-term team to run the project and registering this project as a civil society organization would be the next steps towards keeping the initiative sustainable. Collaboration with the Ministry of Health of Bhutan and other relevant organizations within Bhutan and abroad can help implement these strategies to improve access to healthcare not only in Pemagatshel but beyond.

Reflection

I believe that peace is an ease of mind that comes from within. Such peace of mind is hard to attain especially with the knowledge and awareness of inequalities and distress people around me endure. Similarly, it is difficult to attain peace of mind when faced with constant challenges and burdens of fulfilling basic needs like healthcare service. This project is a pursuit of both personal and external peace for myself and people in my circle of impact.

The project, aimed at improving healthcare access in Pemagatshel, contributes to peace in several ways. In the short-term, it immediately addresses a pressing issue by providing equitable healthcare access through the utility vehicle, enabling the healthcare workers to bring care to the communities, ultimately reducing the physical and financial burdens on rural residents. This leads to an immediate reduction in health-related stress and conflicts arising from the challenges of accessing healthcare services, improving the quality of their life.

In the long run, the project holds the potential to create a ripple effect of positive change. By optimizing healthcare delivery and promoting community engagement, it strengthens the social fabric and cohesion within Pemagatshel. People who receive timely and effective healthcare are more likely to lead healthier lives, reducing family tensions and conflicts arising from chronic illnesses. Moreover, the project's emphasis on community involvement fosters a sense of unity and shared purpose, contributing to social harmony.

Throughout the project, we encountered several hurdles that underlie the targeted issues and approaches. The delay in fund release and the complexities of navigating government regulations presented significant challenges. These challenges amplified my understanding of the broader issue of bureaucratic inefficiencies and the need for streamlined processes to facilitate essential projects like this. Additionally, the project brought to light the broader challenge of healthcare disparities in rural areas. The dilemma of equitable access to healthcare services is not unique to Pemagatshel and is a global issue. It highlighted the need for broader systemic changes to address healthcare disparities in a bigger picture. While navigating the complexities of the regulations and requirements, it helped to partner with individuals in position to be able the speed up the process and network with people who can see the value in such initiative and direct me towards the right resources and entities. It was indeed insightful to read and learn about the regulations and procedures in place.

This journey has showed me the power of community-driven initiatives and the profound impact of community-specific interventions. Observing and being part of the resilience and determination of the people of Pemagatshel has ignited a lasting inspiration to persist in my endeavors to tackle other underlying challenges in Pemagatshel and in other like communities. It has made me realize that, given
the necessary resources and support, communities are always prepared to embrace changes that enhance the overall well-being of their members. Access to healthcare, a fundamental human right, stands as a testament to this truth. This experience has truly deepened my commitment to working towards a more equitable and just world, where essential services like healthcare are within reach for everyone, regardless of their geographical location. Notably, this project has not only streamlined the flow of healthcare delivery and accessibility within Pemagatshel but has also left a strong mark on my perspective and approach to change-making strategies and processes. It has reinforced my belief in the potential of community-driven transformation to making a world a little better and peaceful than we know.

Personal Statement

If I were to share an epiphany I gained from this experience, it is that sometimes, we simply need to take a step back, listen, and let the people immersed in the experience to do their magic. Our grand ideas, plans, and timelines are irrelevant if we don't. The true leaders are those who live the experience and who we aim to benefit. Simply follow their lead is my new mantra in change-making attempts.
– Karma Choki