RENEWING HOPE

Compassionate care for underprivileged communities

Prem Jyoti Hopes to Stabilize and Rebuild

In 1996, Prem Jyoti Community Hospital (PJCH) was founded under the Emmanuel Hospital Association (EHA) to serve the Malto tribal community living in the hills around Barharwa, Jharkhand. When the hospital began, the Malto population was diminishing rapidly due to malaria, kala-azar (a parasitic disease), and tuberculosis. One of the first things the new doctors did was introduce mosquito nets and raise awareness of these diseases and their transmission. Over the last thirty years, **PJCH has become an important source of healthcare for many marginalized families** and is the only significant medical facility within a thirty-mile radius.

However, the COVID-19 pandemic and its aftereffects placed the hospital under severe financial strain and created a serious shortage of medical manpower. Like many mission hospitals serving remote and vulnerable communities, **PJCH found it increasingly difficult to sustain services** due to rising operational costs, reduced numbers of patients, and challenges in recruiting and retaining qualified healthcare professionals.

PJCH nursing team

Drs. Elizabeth, Blessy, Bethany, and Ruhel

Currently, EHA's Madhipura Christian Hospital (MCH) in Bihar is supporting PJCH through management guidance, administrative strengthening, and regular loaning of doctors and other medical personnel. **This partnership has been helping PJCH stabilize services, rebuild community trust, and gradually improve patient traffic.**

The medical team at PJCH includes an ophthalmologist (Dr. Ruhel), Dr. Bethany, an OB/GYN who delivers over 200 babies each year, a family physician (Dr. Blessy), a junior doctor (Dr. Elizabeth), and 25 nurses.

The laboratory technicians are also quite busy, running over 25,000 tests annually. The palliative care team sees about 100 patients a year, conducting about 75 home visits each month, while the community health team runs 75 health camps at remote villages scattered throughout the surrounding area.

Scan the QR code to learn more about Renewing Hope!

If you have not made a donation to EHA for more than two years (or ever) your gift will be doubled if you give between now and December 31!

The leadership's strategy is to strengthen PJCH into a sustainable, mission-driven healthcare institution while continuing to provide high quality, affordable, and compassionate care to the poor and marginalized. Some of their key goals include:

- Expanding surgical and diagnostic services
- Providing eye care and surgery
- Improving radiology and critical care infrastructure
- Building staff housing to help retain committed medical staff

Restoring Dignity, Hope, and Support

Palliative Care Team Provides Medical Treatment, Food, and School Assistance

Deegen Malto and his family

Deegen Malto was only twenty-seven years old when he fell from a tree and injured his spinal cord. **Finding himself bedridden, he despaired of providing for his wife and four young children.**

When the staff at PJCH heard about his difficult situation, the palliative care team immediately jumped in to help. During their home visits, the nurses delivered supportive care and made sure Deegan's wife knew how best to care for him. Deegan later developed kidney-related complications and was referred to Madhipura for further treatment and structured rehabilitation. By God's grace, Deegen's condition improved, and he was able to return home.

At follow-up visits, the palliative care team learned that Deegen's oldest son had discontinued school due to their financial difficulties. **In addition to food staples and other basic needs, the team's support made a way for this boy to return to school.**

> *Healing goes beyond medical treatment—it includes renewing self-confidence, dreams, and encouragement.*

PREM JYOTI | *BY THE NUMBERS*

- **Medical Staff: 3 doctors, 1 junior doctor, 25 nurses**
- **Specialties: Ophthalmology, OB/GYN, Family Medicine**
- **Outpatients: 9,600**
- **Inpatients: 1,500**
- **Eye Surgeries: 195**
- **Deliveries: 220**
- **Palliative patients: 40/mo.**

Starving for Help

Malnourished Toddler Comes to PJCH

Before

After

Many families in rural North India don't have enough to eat on a daily basis—a heartbreaking reality. And many parents simply don't know what nutrients their children need to keep them healthy.

Vivek was only four years old when he was brought to PJCH. **The medical staff was alarmed to see how malnourished he was.** His family was unable to afford proper medical treatment or nutrition for him. As is so often the case with EHA, the hospital provided free care for him.

With continued treatment and nutritional support, Vivek gradually improved. Even after his discharge, the hospital continues to support the family with follow-up nutritional care and basic food supplies to reduce the risk of relapse.

Today, Vivek is active, playful, and developing normally. The entire PJCH team is thrilled with his recovery.

Branded With a Hot Iron

Barbaric Traditional Practice Harms Boy

Sanju was completely healed at Prem Jyoti. His scars are too unsettling to show.

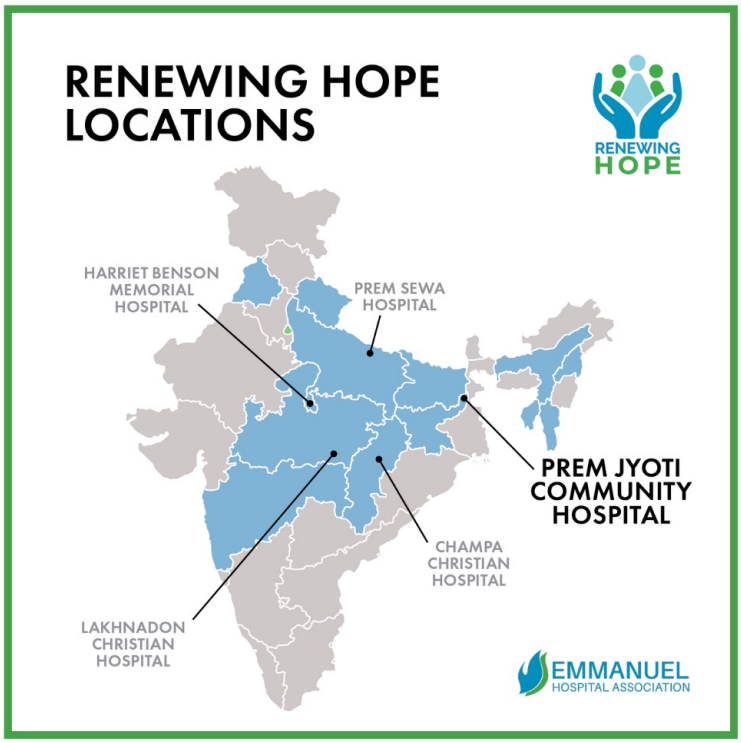
Ten-year-old Sanju had been suffering from abdominal pain and vomiting for six long days when he was brought to PJCH. During the examination **they lifted his shirt and found numerous burns from a branding iron,** a barbaric practice rooted in the traditional belief that poking a person repeatedly with a hot iron will cure disease.

After careful diagnostics, Sanju was found to have an intestinal obstruction, a condition that requires surgery without delay.

The family refused to go anywhere else, even though PJCH does not have a surgeon. So, a surgical team made the five-hour trip from Madhipura Christian Hospital to PJCH and operated on the boy. **Sanju completely recovered, and his relatives experienced the love and commitment of the hospital staff throughout this journey.**

Areas of Focus to Renew Hope

- Wisdom, strength, and protection for their leadership and staff
- Provision for surgical, diagnostic, and radiology equipment, infrastructure for eye surgery, and operational needs
- Recruitment and retention of committed doctors, nurses, and support staff
- Financial provision to pay overdue bills with vendors and to bring staff salaries up to date



NEEDS AT A GLANCE

- Staff housing for retaining medical team members
- Patient monitoring and critical care support equipment
- Surgical instrument upgrades
- Diagnostic and ultrasound equipment
- Medical manpower and specialist support
- Infrastructure strengthening and facility improvements

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