

WIN brings hope and a smile to Urmilla



57 year old Urmilla's life has been tough. Originally from Balaghat in Madhya Pradesh, she married at 14 and settled in Nagpur. Unable to have children the couple's relationship deteriorated, leading to years of domestic violence, which only ended when Urmilla's husband died in an accident.

Though widowed and lacking family support, Urmilla's work as a labourer gave her independence. After being trapped in an abusive marriage, she was finally free to live life on her own terms.

The ensuing years passed without much turmoil until a recent diagnosis of breast cancer. Like countless Indian women in similar circumstance, Urmilla found herself jobless and with no savings to fall back on, unable to meet the costs of food, transport to appointments, electricity bills and symptomatic treatment.

Referred to WIN for help and now with all her needs being met, Urmilla has a fighting chance of beating cancer.

And it's your donations that make the difference.

Above: Usha visits Urmilla to discuss how the charity will support her.

Leprosy – WIN comes full circle from its origins in leprosy to address the rise in new cases.



Savita started leprosy treatment 4 months ago but has had the disease for over 3 years. Ignorance and neglect have resulted in permanent nerve damage to her hands and feet rendering them insensitive to pain. As a hospital cleaner she must take extra care to avoid further injury which could lead to infection, deformity, and potential loss of employment. As the only breadwinner in the family Savita is responsible for her bed-ridden husband and their two young sons. **She is one of the many new cases approaching WIN for support as India experiences the biggest increase in leprosy prevalence since 2005.**

In 1991 75% of global leprosy cases were in India leading to the introduction of the National Leprosy Elimination Programme (NLEP).

By 2005 leprosy, also known as Hansen's Disease, was no longer treated as a separate health concern. A few years later leprosy was eliminated; meaning the prevalence was 1 case per 10,000. It was also at this time that HIV/AIDS took centre stage.

The NLEP's success was largely due to the PMW's (leprosy paramedics) responsible for detecting cases, educating the masses, and supervising treatment. This Survey Education and Treatment (SET) regime was effective due to PMW's conducting house to house survey in often remote and dangerous areas.

As trained PMW's Leah and Usha initially worked in Basti near the border of Nepal. They cycled long distances reaching isolated villages where most of the cases of leprosy were MB (multi bacillary) lepromatous infectious cases.

In 2000 they established the charity's leprosy work in Nagpur under the guidance of eminent leprologist Dr K V Desikan. They were the only female PMW's in the city. After 2005 WIN's focus was directed to the plight of abandoned women with HIV/AIDS. During the following 19 years the charity supported women with all medical / socio-economic need, including leprosy.

Nearly two decades on and leprosy has once again become a national concern with Maharashtra amongst the States experiencing the highest prevalence. In Nagpur WIN is drawing on experience from the past to meet this new challenge as more women are detected with the disease.

Leprosy drug resistance and relapse cases poses an additional concern.



Left: Lalita contracted leprosy years ago, but repeated discontinuation of treatment has led to drug resistance. She is currently on a new regime of MDT (Multi drug therapy). Unmarried Lalita lives with her brother in a small temporary shack. Neglected foot ulcers on her right leg led to partial amputation. Lalita has ulcers on her left foot requiring continuous care. WIN's team visits twice a week providing ulcer management, food, and counselling.



Right: 47 year old Sukashna was diagnosed with Borderline Lepromatous leprosy in 2018. Following 12 months MDT she was released from treatment (RFT). Unfortunately, she has relapsed and is currently being Borderline Tuberculoid leprosy with Type 1 leprosy reaction. WIN is helping Sukashana with transport, additional medical care and through counselling.

Types/Classification of leprosy

Based on histological and immunological features, leprosy is classified by the following types:

- Indeterminate Type (IT)
- Tuberculoid Leprosy (TT)
- Borderline Tuberculoid (BT)
 - Mid Borderline (BB)
- Borderline Lepromatous (BL)
- Lepromatous Leprosy (LL)
 - Pure Neuritic (PN)

INTERNATIONAL WOMEN'S DAY MARCH 8, 2024

Let's #InspireInclusion to help forge a better, more inclusive world for women



Marking IWD with free health care for new underprivileged communities

The relentless expansion and development of Nagpur attracts migrant workers from all over India. Thousands of labourers have settled on the outskirts of the city creating new shanty towns where poor sanitation and a lack of health care is leading to a rise in diseases such as TB, leprosy, malaria, and typhoid. WIN is meeting the expansion of need by taking the charity's health care programmes further afield. On IWD we began this expansion in Wathoda where 103 women and their children received a free health check and in many cases treatment.



Thanks to Kajal and her colleagues at Kansas University for raising fund and awareness for WIN on IWD



Having beaten cancer and scoring one of the highest 10th standard results in Nagpur, Arya has set her sights set on becoming an Oncologist.



Arya has battled soft tissue sarcoma since she was 8, enduring operations, chemo, and radio therapy. Now aged 17 and in remission, she continues to be monitored.

Living in Chindwada, Madhya Pradesh, Arya's parents struggle to afford the travel expenses to Nagpur's oncology department. As farm labourers they earn a small income. Currently they're both too ill to work as Arya's father has TB and her mother is recovering from a hysterectomy.

Taking on her parent's farm work as well as keeping up with her academic commitments Arya shows great strength of character.

Recently she achieved an incredible 96% in her 10th standard exams scoring one of the highest results in Nagpur. With aspirations to become an oncologist WIN would love to help Arya achieve her goal.

We welcome any interested sponsors to become a stakeholder in Arya's future.

Having overcome cancer this young woman has a winning combination of ability and determination to reach the top.

Our wonderful team of MSW volunteers share their knowledge on issues relating to LGBTQ, neurodiversity and human rights.



MSW students from Nagpur University continue to gain knowledge and experience spending 1,200 hours of their internship in the care of WIN's team. In return the charity benefits from their participation in our community surveys, health education programmes and counselling service. It is also refreshing to debate topics such as LGBTQ issues which are now part of the MSW curriculum yet seldom discussed in mainstream society. Neurodiversity is another neglected subject the students have knowledge of. The many round the table discussions with our team are lively, informative and demonstrate the positive change in attitudes towards these neglected issues.

A BIG thank you to our MSW's for their time, skills, and enthusiasm!

Helping Gayatri come to terms with being HIV+

16 year old Gayatri lives with her grandmother and elder brother Nitesh in a small rented house in Sangrish Nagar, Nagpur. Their father died 14 years ago, and their mother died of tuberculosis during the covid pandemic. Both parents had HIV.

Nitesh now 18, left school at 13 to work as a refuse collector so he could support his sister and grandmother. Gayatri is an 11th standard college student but discontinued her education due to poor health. Tests later confirmed that she has HIV.

With this recent diagnosis WIN is helping Gayatri come to terms with being HIV+. Her only perspective on the disease has been marred by watching her parents suffer through ignorance and neglect. Connecting with other HIV+ teenagers supported by the charity has proved informative and encouraging for Gayatri. She's made new friends and feels more positive about the future.

With many HIV+ adolescents discontinuing antiretroviral treatment, poor adherence is leading to drug resistance. Teenagers face overwhelming challenges relating to emerging sexuality and concerns about relationships, future childbearing, and marriage.

WIN's continued support for Gayatri and her family is improving everyone's health and outlook. Gayatri's next step is getting back to college.



Is it time to stop using the word AIDS?

AIDS, which stands for acquired immunodeficiency syndrome, was coined in 1982 by the US Center for Disease Control and Prevention (CDC) to name a disease with an unknown cause that affected people with weakened cell-mediated immunity. When HIV was found to be the cause of the disease (labelled HIV in 1986), the term AIDS, strictly speaking, became unnecessary.

AIDS was originally intended as a case definition for surveillance purposes, and treatment decisions were based on whether patients met the case definition for AIDS. Without the label AIDS, clinicians can focus on whether and for how long people have been on treatment, whether they recently switched treatment, and other factors that will help determine appropriate care.

The acronym AIDS has "outlived its usefulness and we should transition toward a more descriptive language that aligns with contemporary challenges in HIV," according to Isaac Núñez, MD, from the Department of Medical Education, Instituto Nacional de Ciencias Médicas y Nutrición Salvador.

Sometimes a problem shared is a problem solved



17 year old Sakshi's basic knowledge of breast cancer saved her mother Nimma's life. Despite finding a lump Nimma was reluctant to have it checked. It was the persistence of Sakshi that led to an early diagnosis. She accompanied Nimma to every consultation and treatment session and today her mother is in remission. Nimma is a cleaner, but Sakshi took on her mother's work during treatment. It was also at this time that Sakshi's bed ridden father died and mother and daughter lost the contract on their rented home. Moving in with an abusive uncle and grandmother, Sakshi and Nimma have struggled to contend with bereavement and the loss of the life they once had.

Nimma was referred to WIN for help with ongoing medical needs. But when Usha paid them a visit, she could see that despite Nimma's positive prognosis Sakshi was still troubled. A bit of gentle persuasion led to mother and daughter sharing their issues at home. Usha reassured them that WIN would regain the contract on their previous property and support any additional needs until Nimma can to return to work.

A 20 minute conversation and the problem was solved.



Thanks to your continued support our women and girls continue to flourish



Two months ago, Sunita was seriously ill. Today she is thriving



Sunita is from Nepal but following her husband's death, moved 600 miles to Nagpur with her parents and daughter to find work.

Unfortunately, Sunita developed Nephrotic Syndrome (NS) and transient Hypothyroidism leading to a deterioration in her health. As her parents were unable to meet Sunita's medical costs, WIN stepped in.

Today Sunita and her family are doing well.



Available on Netflix this compelling film is well worth watching.

Indian farmer Ranjit takes on the fight of his life when he demands justice for his 13 yr old daughter, the victim of a brutal gang rape. His decision to support his daughter is virtually unheard of, and his journey unprecedented.

Women in Need's team and members remain extremely grateful for the continued support and generosity of all our supporters. Your donations improve and save lives and give hope to women and girls contending with illness, poverty, and discrimination.

Thank you for believing in our mission and helping WIN make a positive impact.

