

1. Doctors at government medical colleges in Kerala begin outpatient boycott

In Kerala, teaching doctors affiliated with government medical colleges have initiated a boycott of outpatient (OP) duties once a week across the month.

- The protest is organised by the state's medical college teachers' association, citing unresolved pay-revision anomalies and unsystematic transfers to newly established colleges.
 - Essential services like ICUs and operation theatres are being exempted, but academic classes are also being suspended.
 - The association has warned of escalating action (including possible wider-service withdrawal) if demands remain unaddressed.
Why this matters: Demonstrates increasing tensions in public-health human resources, and may impact patient access in government hospitals if the protest spreads.
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2. Maharashtra to set up a “war room” for integrating health schemes

In Maharashtra, the state government is creating a centralised “war room” to coordinate and integrate various health-care schemes.

- The idea is to streamline multiple public health programmes (e.g., state relief funds, insurance/aid programmes) under one roof to avoid duplication and ensure better targeting.
- A toll-free helpline has been launched to handle public grievances and inquiries across schemes.
- A high-level committee will oversee implementation and ensure transparency and accountability.
Why this matters: Better coordination of health schemes could improve efficiency, reduce leakages, and enhance beneficiary access — especially

for vulnerable populations.

3. Death of a woman with rare disease raises questions about healthcare responsiveness in Karnataka

In Karnataka, the death of a dance-teacher afflicted by a constellation of rare medical conditions has sparked political and public scrutiny of the state's health-department responsiveness.

- The woman suffered from multiple, complex disorders (including Hyper IgE Syndrome, Mast Cell Activation Syndrome, a certain genetic mutation) which remained undiagnosed/untreated for long.
 - She had appealed to the government for financial assistance but faced delays; the local youth federation demanded investigation and compensation for the family.
Why this matters: Highlights gaps in rare-disease diagnosis/treatment access, especially for less-common conditions; raises concerns about equity in health-care support.
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4. “Doctor Parrots” — hospital clowning initiative in Bengaluru to ease patient stress

In Bengaluru, a novel programme involving “health-care clowns” (dubbed the “Doctor Parrots”) is making waves in hospitals by bringing humour and light-hearted interaction to patients and their families.

- The performers engage with children and adults in hospital settings, aiming to reduce emotional stress and improve the hospital-visit experience.
- Hospital staff report improved morale and better patient-staff interactions thanks to these supportive activities.
Why this matters: While not a core clinical intervention, this reflects growing recognition of the role of emotional/psychosocial support in

health-care settings, and potential for innovative approaches to patient-centred care.

5. National nutrition case-competition launched by IIM Nagpur and UNICEF

A collaborative initiative between IIM Nagpur, UNICEF, the state Public Health Department, and the Nutrition Bureau has launched a national case competition titled “Yukti – Nutrition Nirmaan” to engage students in devising solutions to malnutrition in India.

- The competition invites proposals for community-based awareness campaigns, sustainable nutrition models, and innovative strategies targeting children and young adults.
- It aligns with global goals like Zero Hunger (SDG 2) and Good Health & Well-Being (SDG 3).
Why this matters: Nutritional status is foundational to health outcomes; engaging future leaders in strategic-thinking around nutrition may yield long-term benefits for monitoring and intervention design.