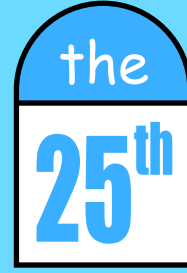


Towards



Milestone



1984-2008

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COMMUNITY HEALTH CELL

Society for Community Health Awareness, Research and Action (SOCHARA)

No. 359, 'Srinivasa Nilaya, 1st Main, 1st Block, Koramangala, Bangalore - 560 034

Tel.: +91 80 2553 15 18 Telefax : +91 80 2552 53 72 Email: chc@sochara.org www.sochara.org



In a broad sweep of history, we cannot but joyfully point out and celebrate the historically conditioned human mission of giving birth to that which is genuinely new. We are an integral part of that process. Our lives will have deep significance in so far as we relate ourselves to such a process whose ebb and flow are determined by the people.

The important thing is within our brief lifetime, we consciously locate ourselves fully, resolutely and creatively in the cutting edge of this historical process.

- Cesar Taguba, Poems & letters from Philippine Prisons

Towards the 25th Milestone 1984-2008

"HEALTH as a Fundamental Human Right"

Activity Report : 2006-07



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**We are already
Health Activists....**



towards the



milestone.....

1984 - 2008

Community Health Cell (CHC) is the functional unit of the Society for Community Health Awareness, Research and Action (SOCHARA) and is a national resource center in the field of Community Health/Public Health for various civil social organisations, health and non-health groups, state and central Government institutions, international agencies and movements. Initiated in 1984 as an experiment in making a paradigm shift from bio-medical model to social model of health by a small core group of professionals, CHC has traveled a long way in being a catalyst at the local – national and international level for the promotion of “Health for All”. Hence the year 2006-07 has been a very reflective year for CHC as it approaches the 25th year of its inception in the year ahead (2008).

The year 2006-07 has been a year of transition with new team members taking a lead role in the organisation and the senior members like Dr. Thelma Narayan and Dr. Ravi Narayan, who shouldered the organisational responsibilities so far, taking up mentoring and advisory role. The team members embarked on different tasks keeping in mind the objectives of SOCHARA and engaged with the present social context with CHC's perspectives. The team members – Dr. Rakhal Gaitonde, Mr. Ameer Khan, Ms. Asha Thotta, Mr. S.J. Chander, Mr. Naveen Thomas facilitated by the new coordinator, Mr. E. Premdas spent time in regular reflection sessions (referred to as Staff Development Workshops) trying to understand the history of CHC and reflected on the way forward. Looking back, the team realized that CHC has been striving in all its efforts towards realizing health as a fundamental right of every human being. It also understood that most of its present work is building on the past efforts towards creating, strengthening and supporting human resources and building perspectives towards collective action for realization of this right. This report gives an idea of how these various processes continued during the last year building on the linkages and initiatives from the last twenty five years and beyond.

Towards creating collective action, CHC has been involved in community health fellowship program and building community health cadre in the Tsunami affected areas of Tamil Nadu. Towards supporting collective action CHC has carried out various training programmes of community workers through different civil society groups and towards strengthening, it has carried out various advocacy and policy research work. CHC has also been a part of major campaigns on right to health and health care and the second National Health Assembly. All the processes that preceded and followed it both at the national level as well as at Karnataka and Tamil Nadu state levels is an indicator of this process. The library and documentation work of CHC has added to further strengthening of this collective action.

The team of CHC has had regular reflective sessions during the year in order to understand the current scenario, perspectives and initiatives for next phase of CHC's development. Learning from the past, understanding the present and moving towards the future while building on the past

A celebration of collectivity and commitment CHC 1984-2008

The Society for Community Health Awareness, Research and Action (SOCHARA) in Bangalore, also known to most of its contacts and associates as just CHC-Bangalore is beginning the fifth and significant phase of its ongoing evolution on. With less than a few weeks to go to reach its Silver Jubilee year 2008-2009 (inception January 1984), CHC while continuing its open-ended catalyst support for community health action at many levels is also beginning a process towards perhaps a Centre for Health and Equity a learning center for the new social paradigm with a focus on health equity, social determinants, the right to health movement and public health and primary health care oriented health system development.

This note captures the significant thrusts and themes of these five phases and also celebrates the collectivity and commitment of so many who have made possible the CHC experiment. Some of them continue to be associated with it as it moves into another exciting and challenging phase. The note also highlights CHC's most significant contribution of bringing and keeping together nearly five generations of health activists from the sixties to the post 2000 AD generation.

Phase I : 1984-1989

CHC was started as a study-reflection-action experiment in Karnataka, when Ravi and Thelma Narayan and K. Gopinathan moved beyond the Department of Community Medicine of St. John's Medical College to co-initiate this small center and to work with NGOs and networks in community health beyond the bio-medical framework. They were soon joined by others over the first few months and years.

This phase was a five year experimental phase when the CHC experiment was linked to the Centre for Non Formal and Continuing Education at Ashirvad, an NGO and had a small team of three 'wise men' – Dr. C.M. Francis (Retired Dean of St. John's Medical College), late Prof. George Joseph (Retired Professor & Head of Centre for Community Medicine, AIIMS) and Fr. Claude D'Souza (Social Educator and activist) who advised it informally.

The highlight of this phase was the deep involvement with the medico friend circle (mfc) (convenor, editor/publisher of mfc bulletin and national office); the Bhopal disaster; and the increasing involvement as community health resource group for members of networks, such as The Catholic Health Association of India (CHAI), Voluntary Health Association of India (VHAI) and its state VHAs, Christian Medical Association of India (CMAI), Asian Community Health Action Network (ACHAN), The All India Drug Action Network (AIDAN) and other networks. During the middle of this six year phase the 4 member team of CHC took a year's break (1986-87) for higher studies. The 'Red Book' with the overview and axioms of community health in India; the precursor concept of a 'People's health movement for India'; and the concept of People's participation in the development planning (note to Planning Commission) emerged during this phase.

**CHC team in the
early years of CHC / SOCHARA**



A review of the first five years was undertaken and the most important recommendation at this review was to register as an independent autonomous society with six objectives building on the work of CHC (1984-89). The Society for Community Health Awareness, Research and Action (SOCHARA) was then registered.

Phase II : 1989 – 1993

This phase was the first four years of SOCHARA, the registered society with CHC as its functional unit. It was a phase of intense growth and development in activities around the six objectives of the society:

- to create awareness in community health among all sectors
- to support community health action through voluntary as well as government initiative
- to undertake research in community health policy issues
- to evolve educational strategies in community health and development
- to dialogue with health planners and implementers to enable the formulation and implementation of community oriented health policies
- to establish a library and documentation unit.

CHC's work with the health networks evolved and in addition involvement with non health networks like AIPSN, women's networks, environmental groups and others also began. CHC facilitated broader networking by bringing together the community health trainers in these networks to evolve common perspectives and action.

Research studies included the CHAI Golden Jubilee Evaluation Study including the Delphi prediction of emerging health trends in India and the medical education studies on community orientation and social relevance including the graduate feedback study. This was followed by suitable policy, advocacy and action.

The team was expanded with the concept of CHC associates and the greater involvement of CHC society members. The library and documentation center became public and occasionally CHC newsletters were produced.

**Training of trainers for
Women's Health Empowerment**



Phase III : 1994 – 1997

As CHC reached the 10th year after the start of the experiment (1984-1993) a third phase was evolved as the founding leadership took a break from CHC to allow space for alternative leadership. During this phase, coordinated by Dr. Shirdi Prasad Tekur, the main thrust was expanding on community health training programme to non-health groups and to field based workers in four languages – Kannada, Tamil, Telugu and Malayalam. It was a phase to test out the relevance of our training strategies to more grass roots processes and to support trainees closer to the communities. CHC team members also got

linked to community health initiatives facilitated by NGOs – on a more continuous basis as resource persons.

A comprehensive review of 14 years of CHC to take stock of its strengths, weaknesses, opportunities and threats was undertaken in 1998. This review included CHC team facilitating a 14 year report on training, research and management dimensions and a SWOT analysis. A set of 15 external reviewers who represented senior peers (above 50), equal peers (35-50) and younger activists (25-30) in equal numbers reviewed the reports and made recommendations to CHC mainly to explore two options:

- a) community health national coalition for collective action and advocacy
- b) centre for community health to promote policy and research on health

Phase IV (1998-2005)

This phase coordinated by Dr. Thelma Narayan operationalized the two mandates of the review. CHC supported the evolution of International Poverty and Health Network and later got very deeply involved in mobilizing for the national and global People's Health Assemblies in December 2000, which led to the evolution of People's Health Movement and Charters at national and global level.

CHC has been deeply involved with PHM India (JSA) at national and regional levels all these years. CHC had the unique experience of being invited to host the global secretariat of the PHM from 2003 -2006 with Ravi Narayan as the coordinator of the global People's Health Movement secretariat.

Simultaneously, CHC was involved with policy, action and advocacy in Karnataka state with intense involvement and follow up on all these processes.

PHM Global Steering Group meeting at CHC which hosted the Secretariat from 2002-2006

- Karnataka State Health Task Force
- Karnataka Integrated Health Policy
- Karnataka Health Nutrition and Population Project



Later CHC was involved with the Orissa State Health Policy and policy studies of the Jan Swasthya Rakshak (JSR) Scheme in Madhya Pradesh and Mitnin as well as the State Health Resource Centre (SHRC) in Chhattisgarh. Apart from this, CHC team members were involved in various national commissions and task forces including Population Commission, National Rural Health Mission, Planning Commission, Women's Commission and ICMR related initiatives.

CHC strengthened the public health dimension of its work by encouraging team members to be involved in community health action in the areas of Malaria, Dengue, Tuberculosis, Women's Health, Urban Health, Substance Abuse including Alcohol and Tobacco, and Life Skill Education. The women's health empowerment training was one of the most significant initiatives of this phase.

In 2003, CHC initiated the Community Health Fellowship Scheme supported by Sir Ratan Tata Trust – Mumbai, which has provided 23 young medical and social science graduates with field experiences and perspectives before getting involved in public health / community health as career options. An additional 17 young graduates underwent the learning process on a voluntary basis, while several others did placements at CHC as part of their post-graduate training. An important feature of this phase was the expansion of the CHC – SOCHARA membership with a larger number of newer and younger health professionals. There was increasing involvement of SOCHARA members in day-to-day activities of CHC as well as in governance. End of this phase was marked by a comprehensive interactive participatory review of CHC objectives, experience and organisational challenges with recommendations for various options in the next phase of evolution.

Phase V (2006 onwards)

This new phase which has begun from January 2006 has followed the review and consists of some changes with key evolving initiatives. A new coordinator / secretary took over and is leading the CHC team into the next phase from 15th July 2006. Premdas brings his experience with social movements and dalit and women empowerment to add a fresh dimension to CHC and continue all its ongoing initiatives. The team will now consist of many young health and social activists.

The Society has requested one of the senior member to work on the feasibility of a 'Centre for Health and Equity (CHE)' as a new functional unit of SOCHARA – which will provide learning experiences of various kinds through an organised and accredited process, supported by a core faculty team and visiting faculty. This will not replace CHC but be additional to it. Further, other senior members will work on learning modules for the Centre and facilitating staff development sessions for the CHC team and support the new coordinator / secretary. Some policy processes and involvement in Task Forces and Commissions will continue. The significance of this transition is that co-initiators would have become advisors and a new process of sustainability of CHC being initiated.

By the time, CHC reaches its silver jubilee year (2008-2009), new initiatives as an expression of a new phase would have evolved. By then we hope a

Staff Development workshop at CHC



comprehensive documentation of these 25 years is completed into a relevant publication (Community Health: The Search for an Alternative Paradigm) and perhaps a beginning is made towards a concise text book of community health in the alternative paradigm (a sort of alternative “Park”) - primarily for public health courses. This would be a symbolic end of the study-reflection-action-experiment that began in January 1984 in the quest of an alternative paradigm and a people's health movement.

During this process the continuous support and encouragement, inspiration and solidarity that CHC has experienced from all Society members and CHC associates and part time members all these years (too many to enumerate!), has been very significant. While thanking all of them, we hope that they all will continue to support CHC as it moves forward with new directions and with a new team towards the next milestone.

Creating human resources for collective action

Community Health Fellowship

Community Health Fellowship Programme (CHFP), launched in 2003, completed its fourth year and its phase one, with a total of 40 fellows being trained during the period 2003-2006. It was initiated at the twentieth milestone of CHC with the support from Sir Ratan Tata Trust for three years (2003 – 2006) as Phase I. The objectives of the project were:

- To promote life options in community health by offering a semi-structured placement opportunity in CHC in part time membership with selected community health projects.
- To strengthen the motivation, interest and commitment of persons for community health.
- To sharpen analytical skills and to deepen the understanding of societal paradigm of community health.

From the year 2003 onwards, over forty young professionals were oriented and trained in community health, of whom 23 interns/ fellows were provided with scholarships and the remaining 17 interns participated on a voluntary basis.

CHC Fellows' meet at Navaspoorthi Kendra,
Bangalore, 2006



Batch	Time Period (No. of fellows)	Fellows (Female / Male)	Interns (Female / Male)	South India	North India	Medical background	Social Science
1	Apr 2003 – Mar 2004 (7)	2 (0 / 2)	5 (2 / 3)	5	2	3	4
2	Apr 2004 – Mar 2005 (5)	2 (2 / 0)	3 (1 / 2)	3	2	4	1
3	Apr 2005 – Mar 2006 (8)	3 (1 / 2)	5 (4 / 1)	4	4	1	7
4	Apr 2006 – Mar 2007 (3)	0 (0 / 0)	3 (0 / 3)	0	3	1	2
Total	23 Fellows and / Interns	7 (3 / 4)	16 (7 / 9)	12	11	9	14

Demographic profile

Of the 23, seven were taken in as fellows, while 16 were interns; 10 were women while 13 were men; 11 were from North India and 12 were from the South India; 9 were doctors and 14 were from the social sciences and other background. (See Table)

Because of economical use of the funds and support received from many field part time members, a final fourth batch was taken up at a no-cost extension during 2006-07. Mr. Rakesh Chandore (MSW from Madhya Pradesh), Dr. Harish Zagade (Ayurved from Maharashtra) and Mr. Juned Kamal (Business Administration, MSW and D.Ed. from Madhya Pradesh) were the full time interns. Three international students too participated in the programme for shorter periods.

Placements

The community health interns in 2006-07 were placed with different organisations based on their learning objectives. They included Community Based Rehabilitation (CBR) Forum, Bangalore; FRLHT, Bangalore; SATHI CEHAT, Pune and Jan Swasthya Sahyog (JSS) in Bilaspur.

Highlights of CHFP in 2006-07

- Participation in the Second World Ayurveda Congress with the overall theme of 'Ayurveda for the Future' and the South Asia Regional Conference on Traditional Medicine held in Bangalore.
- Study on malnutrition in children between the age group of 6-36 months in 30 villages of Kota and Lormi block of Bilaspur district;
- Learning about disability and community based rehabilitation and the UN Convention on the Rights of Persons with Disabilities.
- Conducting a community based survey on the prevalence of scabies in the villages covered by JSS in Chhattisgarh.
- Involvement in the issues concerning the health of the urban poor in Indore, including work on water availability, safe drinking water and health profiling in the slums of Indore.
- After the completion of the fellowship programme, the three interns were involved in the Second National Health Assembly in Bhopal.

The end term evaluation of CHFP

The evaluation of the community health fellowship programme was conducted by a team consisting of Dr. M.K. Vasundhara, Professor Emeritus of Community Medicine and Dr. Narendra Gupta of Prayas (Chittorgarh, Rajasthan).

"Paradigm Shift" - The focus of the Community Health Fellowship Programme

PARADIGM SHIFT

Medical Model	-	Social Model
Individual	-	Community
Patient	-	People
Disease	-	Health
Providing	-	Enabling
Drug technology	-	Knowledge / social
Professional control	-	Demystification



The reviewers were very positive about the fellowship programme in community health and pointed out that the principles of self-learning, group learning, learning by doing, open discussions, placement with the grass roots level organisations, continuous mentoring by the seniors and experienced faculty were unique features of the training programme.

Few quotes from the executive summary of the external evaluation report of CHFP:

"The innovative learning process was valued by the candidates. The one-month orientation period, provided time and space for self-realization. The unique mentorship, informal environment, the flexibility to choose the field placements according to one's aptitude and ability strengthened their motivation to choose community health as their life option."

The success and the sustainability of the Community Health Fellowship Scheme are reflected in the end result. The fellowship has contributed 20 committed community health professionals of whom 95% are currently working in projects conducting community health related activities.”

The review team also gave recommendations for up scaling of the programme and some suggestions for improvements. A proposal for Phase II of this project is being prepared to take the programme forward from 2007 onwards.

A national level workshop on the theme “*Community Health and Public Health Education: Towards a New Social Paradigm*” was organised by CHC on July 10, 2006 at Nava Spoorthi Kendra. The participants came from across the country included teachers, facilitators, trainers and professionals in community health and public health were from different backgrounds including medical colleges, teaching institutions, public sector, NGOs, and the *Jan Swasthya Abhiyan*. The findings of the term end review of CHC's experience with the Community Health Fellowship Programme were presented by the reviewers and discussed at the workshop. There was an overwhelming endorsement to the semi-structured, open ended learning space in the Fellowship Programme.

Community Health Intervention in Tsunami Affected Areas

A community affected by any disaster takes about 7 to 10 years to bounce back to normalcy. This as a guiding principle and being involved in the immediate post-disaster phase of Tsunami affected areas in Tamil Nadu, CHC got involved in Community Health Action for reconstructing and rebuilding the lives of the affected communities. Last year CHC focused its work mainly on the communities around the back water lake of Pazhaverkadu of Thiruvallur district. The three main dimensions of our work included:

Facilitation of the Pazhaverkadu Action Network, a network of all the NGOs working in that area, meant to facilitate cooperation, avoid duplication and strengthen the collective action and to bring about a community health perspective in all their activities.

Training of deputed NGO staff as health activists, who will initiate / facilitate the hub of community health action in the communities they work with, and develop leadership among youth who will be the future

leaders and decision makers in the community. These initiatives were undertaken with the active involvement of the team members placed in Tamilnadu (Dr.Rakhal Gaitonde, Ameer Khan, Asha Thotta)

Mr. Ameer Khan of CHC team was the convener of the Pazhaverkadu Action Network (PAN). During this period PAN obtained funding for a large project titled, “Community Based Disaster Preparedness (CBDP)”. This project was coordinated by PAN and saw that each of its constituents took charge of one component of the project. In addition PAN also partnered with Loyola College, one of the premier educational institutions in Chennai, who was looking at the rejuvenation of the eco-system of the area as part of this project. A district resource centre was also facilitated there. CHC has been supporting the Network in the implementation of the project as well as in the smooth functioning and strengthening of the Network.

Facilitation meeting of the Pazhaverkadu Action Network (PAN), Tamil Nadu



Leadership development among Youth of Pazhaverkadu

CHC had initiated a program for the youth of Pazhaverkadu in 2005-06 which got intensified during the year 2006-07. The goal was to develop a group of leaders who will be the agents for critical change. This program had three main components:

- Building perspective of the students.
- Educational support to the youth.
- Training of health activists

Some of the issues around which discussions held were the history of the various social reform movements and student movements in the State of Tamil Nadu, Gandhian and other alternative economic thoughts and the concept of secularism, social analysis and other social issues. Emphasis was also laid on developing a questioning spirit, appreciating the concept of religious tolerance and plurality. Various skills like Critical analysis, Communication skills and information gathering were taught.

Some of the issues addressed by the youth were *Campaign against Water privatization, addressing local transportation issues* etc. All these activities increased their confidence as well as taught them important skills in time management, human power and finance. The above two campaigns shows very clearly that the students club and its activities have certainly increased their confidence, and have begun inculcating leadership qualities in the youth.

Training of Health Activists

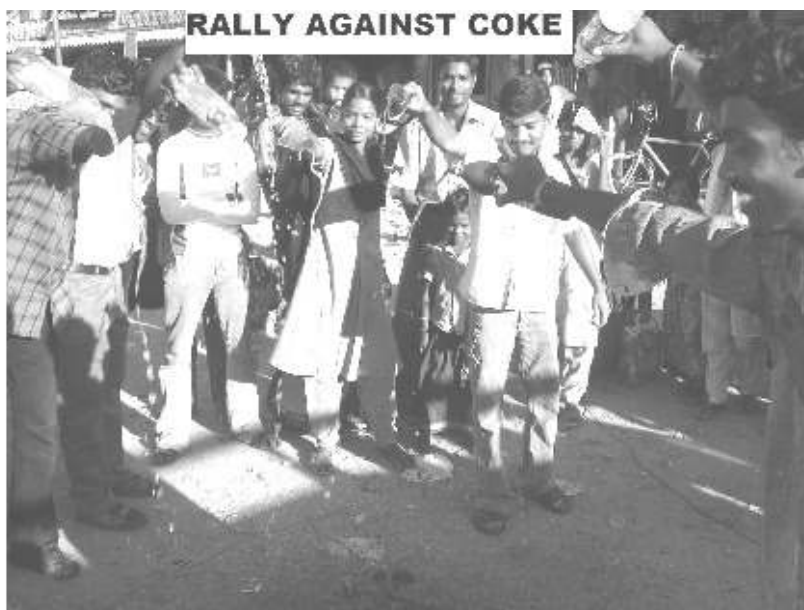
Based on the interest expressed and need from the various NGOs, CHC initiated a series of sessions that provided community health inputs for a few selected NGO staff who were from the local disaster affected communities. A more formal and modularized training was planned out as part of the community health inputs into the region. The overall objectives of the training programme were as follows:

- To train a group of health activists who would be nodal persons for health in their communities
- To facilitate the development of community level workers as volunteers
- To network among the various NGOs active in Pazhaverkadu and to facilitate the inclusion of health components into their respective agendas.

Based on the following learning objectives, a training curriculum was developed to build the knowledge and understanding of Community Health. To build perspective on the determinants of health and critical issues, and to impart various skills like communication, decision making, motivation etc to address community health.

Weekly sessions were held for these 25 community health workers. The topics included child health, adolescent health, community health, and diseases like fever, diabetes, chikungunya, hypertension, stomach related illnesses, water borne diseases, diarrhea, tuberculosis, jaundice, cholera, cancers social determinants of health, parenting skills training, etc.

Youth of Pazhaverkadu initiated an anti coco-cola and anti water privatization campaign, Tamil Nadu



Some of the results of these trainings were very encouraging as seen from the following examples:

- Many of the health activists reported that they were more confident in giving health related advice / counseling. There were also many instances where their appropriate advice had led to proper diagnosis and cures.
- Most of the health activists reported using the messages learnt, amongst families and their close friends.
- When there was a large outbreak of chikungunya, all the health activists took a keen part in the work of their NGOs during vector control campaigns and to spread the main messages of prevention. They all took part actively in the campaigns.
- They had come up with a demand for more inputs on planning community level work and interventions for the prevention of common diseases.
- As part of the training CHC developed detailed lesson plans, handouts and reading lists.
- Building linkages to People's Health Movement: CHC team linked the health activists and their NGOs to district and state level People's Health Movement. Some of the health activists got involved in the pre-state health assembly and district level activities and most of them attended the 2nd State Health Assembly in Chennai.

**Training of health activists
in Pazhaverkadu, Tamil Nadu**



*Go in search of your people,
Live with them,
Learn from them,
Begin with what they have,
Build on what they know.*

- Chinese Proverb

Advocacy Towards Strengthening Health policy Action

CHC team continued its efforts at the local, state, national and international level to bring about people oriented policies and to implement the existing policies. As part of the ongoing transition and reorganisation in CHC since April 2006, all the research and policy oriented initiatives were being brought under a new unit. This unit will focus on Public Health Policy, Advocacy and Research and may metamorphose into a Centre for Health and Equity after the Silver Jubilee year in 2008. Dr. Thelma Narayan, (TN) the Public Health Consultant of CHC, and Dr. Ravi Narayan, (RN) the Community Health Advisor were the primary resource persons of this unit and involved other SOCHARA members and contacts along with CHC team when required. The work of this unit focused on both National and International initiatives in a process of engagement with Civil Society (PHM and others); Governmental initiatives (State and Central); and initiatives of WHO and other relevant international organisations. The activity of this unit during the year strengthened particularly two objectives of SOCHARA which included: a) To dialogue and participate with health planners, decision makers and implementers to enable the formulation and implementation of community oriented health policies. b) To undertake / facilitate research in community health policies issues.

National Public Health Policy, Advocacy & Research

The National Public Health Policy, Advocacy and Research activities focused on the engagement and dialogue with the State to strengthen the community health paradigm and increase the focus on Social Determinants of Health; promote Health Systems approaches; and increase policy responsiveness to equity, social exclusion and marginalization. The main activities in this area can be understood broadly in terms of the following themes:

1. Promoting Public Health Education
2. Strengthening the Peoples Health Movement and other initiatives in India.
3. Engaging with the State and National Governments on Public Health and Primary Health Care oriented policy initiatives.

The primary involvement of senior members of CHC included the following:

National Rural Health Mission (NRHM):

Participation as advisors and members of various NRHM Task Forces, namely the ASHA (Accredited Social Health Activist) Mentoring Group; the task force on Medical Education and Support Manpower; Advisory Group on Community Action (AGCA) for the NRHM.

Planning Commission Task Forces in Health:

Member of the Planning Commission steering group on Primary Health Care and involvement in the steering group for Integration of Alternative Medical System (AYUSH); membership in the subgroup on AYUSH and Public Health which im report to the planning commission during the year.

**A workshop on taking
the PHM forward, Bangalore**



National Knowledge Commission:

CHC was invited to be part of a sub-group on *Community Health Orientation of Medical Education and Human Resource Development in Health*, to help the Medical Education group of the National Knowledge Commission.

Public Health Foundation of India (PHFI) :

Supporting the Public Health Foundation of India (PHFI) in its preliminary planning processes and in evolving an MPH curriculum relevant to India. Being a member of the Governing Board Dr. Ravi Narayan attended the board meeting regularly in Delhi. Various issues related to PHFI were discussed during these meetings. CHC was also invited along with others to evolve a draft ethical guidelines and a policy strategy framework for the foundation, to be considered by the PHFI board later in the year.

Medico Friends Circle (mfc) :

The CHC team members were involved in organizing the 33rd annual meeting of the Medico Friends Circle at Bangalore from 28th to 30th Dec 2006, where the discussion was on the main theme 'Public Health Education'. The CHC policy unit presented three short background papers on the above theme which was published in the mfc bulletin. The meeting was attended by a large group of mfc members from all over India including many CHC team members and fellows.

Special Lectures

A session on “**Public Health Movements' responses to Health and Globalization**” for students of US Universities who were attending a special course in Bangalore hosted by the Environment Support Group.

Participation in the Dorabji Tata Symposium on Arboviruses. RN presented a special paper entitled '**Health, Development, Agriculture, Environment: New linkages and new paradigms**' in the final panel discussion which was very well received.

International Public Health Policy, Advocacy and Research

Annual Meeting of mfc, Bangalore, 2006



To the credit of CHC, senior and experienced team members of CHC were able to contribute to the international policy related works in promoting health and human rights through the following main activities:

Strengthening the People's Health Movement

Along with strengthening the peoples Health Movement other initiatives were taken up globally while engaging with the civil society. Some of the highlights are:

People's Health Movement (Global):

PHM mini assembly was attended on 23rd May 2006 which was held during the World Health Assembly in Geneva in May 2006. PHM activists discussed many issues which were being considered at the WHA. At this occasion in a special session PHM Global Secretariat was handed over formally by the CHC, Bangalore team to the new AHED, Cairo team.

The first meeting of the Global Steering Council in Cairo was attended. RN as the outgoing global secretariat coordinator is a member of the same and will be focusing primarily on capacity building and guidelines for organisational initiatives.

Attended PHM Steering council meeting in Bhopal as a special invitee and addressed the participants of International People's Health University (IPHU) leadership course organised along with the National Health Assembly in Bhopal. Ameer Khan attended the IPHU Course on behalf of PHM Tamilnadu.

Global Policy Dialogue:

TN was invited as resource person to the Medico International Meeting on **“Critical Campaign work in the era of globalization”** representing PHM. She reflected on the work of the Jan Swasthya Abhiyan India.

TN Participated in the international workshop on **'Multi stakeholder partnerships and the future of global policy'** at the Friedrich- Ebert Stiftung Foundation, Bonn (Germany) and reflected on **“Global Public Private partnerships in Health from a PHM and public health perspective”**.

Scholar in Residence Linkage:

RN was invited as a Scholar in Residence, at the Dag Hammarskjöld Foundation at the Uppsala University, Sweden, for a period of 6 weeks during the academic year 2006-2007. He completed the first phase of this linkage in Sept 2006 spending time at the foundation from 17th to 27th Sept 2006.

During the visit to Sweden he attended the “What Next Forum” at Uppsala from 17th to 19th Sept 2006 organised by Dag Hammarskjöld Foundation which focused on inspiring, disturbing and encouraging challenges in global health and development. He spoke in the health session on 'Globalisation of Health from Below' sharing the emerging perspectives of the people health movement. The meeting was attended by 200 participants from all over the world.

During his visit he also participated in the SIDA seminar on **“Globalisation and Health”** organised at Stockholm.

South Asian Traditional Medicine Conference:

CHC attended the South East Asian conference on the Role of Traditional Medicine for Health for All' being organised by Italian Association Amici di Raoul Follereau (AIFO) as a resource group. Dr. Rakhil Gaitonde was the key rapporteur of the meeting.

**A Public Health Education Policy meeting
in Bangalore**



Engaging with World Health Organisation & its various initiatives

World Health Assembly 2006:

CHC participated in the 59th World Health Assembly, at Geneva from 21st to 27th May, where a delegation of People's Health Movement's activists came together to support and propose global frame work on the essential health, research and development and other important agenda items.

IDEA Health meeting in Khon Kaen, Thailand:

It is a process facilitated by WHO trying to accelerate the process of increasing the use of an evidence base for making health policy, with a focus on developing countries. It is a follow-up of the Mexico Inter Ministerial Conference on Health Research in 2004 after which an EVIP net grouping was formed with participation of selected countries from Asia to Africa. TN was a member of the International Advisory Group for this meeting.

TN attended the Meeting of the **WHO Commission on Social Determinants of Health (CSDH)** which included knowledge Networks and Civil society members in Geneva in May 2006. She also attended the meeting of the Measurement and Evidence Knowledge Network of the Commission in London in March 2007 of which she is a member.

RN participated in the Global Survey of 'Expert Opinions' on barriers and facilitating factors for the implementation of existing mental health knowledge in mental health services organised by the **WHO Mental Health Division**.

Global Forum for Health Research (GFHR): Forum 10 at Cairo (Egypt) from 29th Oct to 2nd Nov 2006. RN co-chaired the special plenary session entitled **"The Social Vaccine- Challenges and Opportunities"**. He also facilitated a special session on **'Research priorities for Schools of Public Health with a focus on the Global South'** and attended the Foundation Council meeting of the GFHR.

Dr. Thelma Narayan at the NHA II Workshop on 'Public Health Act', Bhopal



Other policy related engagements:

Global Public Health Conference:

TN represented CHC-PHM at the World Federation of Public Health Associations (WFPHA) to participate in a 'great debate' on **'Poverty, Health & Development'** and also in a panel on the **'People's Health Movement'** at Rio, Brazil. The conference had 10,000 participants and both sessions had large audiences.

British Medical Journal:

In the year 2006 RN was appointed as a member of the BMJ editorial advisory board and attended the annual meeting of the editorial board at BMA house in London from June 15 to 16 2006. He participated in an interactive dialogue with the members on

various issues related to BMJ. Later part of the year he was invited to be specialty advisor in Public Health for the British Medical Journal (BMJ) and had been participating in the dialogue assessing this aspect of the current editions of BMJ and suggesting to focus on new issues and priorities.

Health Policy Related Initiatives

Tobacco: Engaging with the state to implement effectively the law on prohibition of smoking in public spaces

In Karnataka, CHC team members took the lead in organizing the World No Tobacco Day on May 31, 2006 along with Consortium for Tobacco Free Karnataka (CFTFK). The issue focused on the implementation of the Act to ban tobacco smoking in public places. In the symposium held at the NIMHANS Convention Centre, Bangalore. 146 participants from voluntary organisations, students of medicine, dentistry, and nursing attended it.

The technical sessions on health, environment, socio and economic implication of tobacco consumption focused on the effects of tobacco, patterns of tobacco consumption, impact on the people engaged in tobacco cultivation and industry, and effects on oral health causing the death of millions of people. The issue was followed up with Dr. Prakash the Joint Director Medical Health and Family Welfare, Government of Karnataka and held meetings with the Anti-Tobacco Cell under the chairpersonship of Smt. Usha Ganesh, Principal Secretary, Health and Family Welfare, Government of Karnataka. The effective implementation of "The Cigarettes and other Tobacco Products (Prohibition of Advertisement and Regulation of Trade and Commerce, Production, Supply and Distribution) Act, 2003" was pressed for, which included:

1. Ban on smoking in public places,
2. Ban on sale of tobacco products to minors,
3. Ban tobacco advertisements including surrogate advertisements
4. Ban on sale of tobacco products around educational institutions.

Consultation on the Health Impacts of the Greater Bangalore Project:

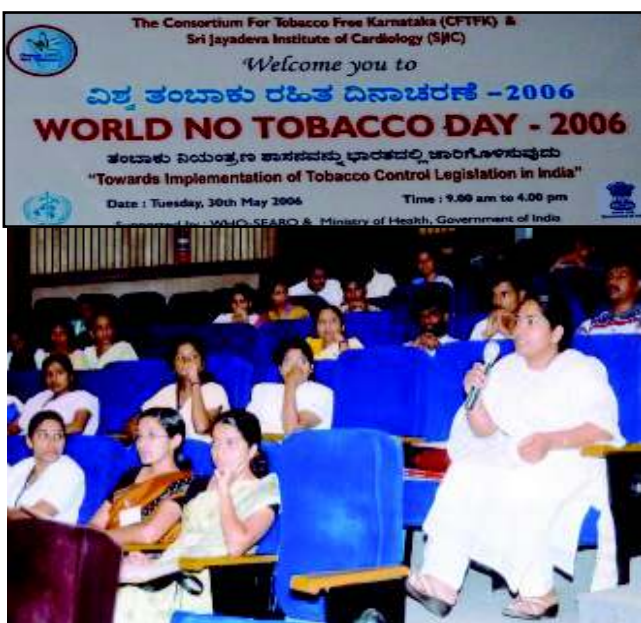
On February 13, 2007 a consultation was organised in CHC regarding the health impacts of Greater Bangalore. Representatives from 6 organisations attended the consultation. Mr. Madhusudhan of KKNSS made a presentation on the Greater Bangalore Project, which was followed by a discussion on its impacts. The participants suggested a submission on the health concerns of the Greater Bangalore Project be given to the commission headed by Shri. Kasturirangan, former chief of ISRO were preparing recommendations for Greater Bangalore.

National Human Rights Commission (NHRC):

National Human Rights Commission (NHRC) held a review on Health Care scenario in New Delhi on March 6, 2007. Dr. Rakhal Gaitonde made a presentation on the status of health care system in Tamil Nadu and Mr. S.J. Chander made presentation on the Health scenario of Karnataka.

CHC's contribution to issues on Patents, Trade and Drugs

As the issues of patents and trade related intellectual property rights (TRIPS) were having adverse impacts on the lives of the poor affecting the affordability of the drugs, CHC took active lead in supporting the public action and in providing back up support to JSA and AIDAN on the following issues:



Opposition to Amendments to Drugs and Cosmetics Act (data exclusivity):

CHC participated in opposing the move of government to bring amendment to the Drugs and Cosmetics Act that included '**data exclusivity**' by making it mandatory for generic companies in India to conduct their own clinical trials before marketing a drug during the period of the data exclusivity. This move had serious adverse implications affecting people's access to medicines and right to health.

Essential Drugs to be under 'Drug Pricing':

CHC participated in mobilizing opinion of other groups on the back tracking of the ministry of Chemicals from bringing essential drugs under price control order and writing to the ministry.

Campaign against Novartis patenting "Gleevec" - a life saving drug for cancer patients:

In the background of Indian Patents Office in Chennai rejecting patents to Novartis company for 'Imatinib Myselate' (gleevec), a life saving drug to patients suffering from blood cancer. Novartis, in May 2006 filed two cases against the Government of India and the Cancer Patient's Aid Association (CPAA) challenging the rejection of its patent application and questioning the validity of section 3(d) of the Indian Patents Act.

Mr. Naveen Thomas representing CHC took active lead in the campaign against Novartis to withdraw its petition in the High Court challenging 3(e) of the IPA. This included mobilizing organisations working on the issues of human rights, legal rights, HIV/AIDS and health. A public protest was held in front of Mahatma Gandhi statue on MG Road on September 12, 2006.

Pre-grant opposition to Moxifloxacin:

A multi-national company has applied for a patent for the antibiotic drug Moxifloxacin, which will be used for treatment of TB. CHC was involved in providing technical support for preparing a draft petition and to write up the Frequently Asked Questions (FAQ) on the issue to help in advocacy.

Action on Mashelkar Committee Report:

The Report of the Technical Expert Group on Patent Law Issues headed by Dr. R. A. Mashelkar on the legal position of Section 3d of Indian Patents Act with respect to TRIPS was known to be full of flaws, involved plagiarism and was against the interest of the poor. A press statement was drafted and released to the press asking Dr. Mashelkar to withdraw the report, which he did eventually and subsequently resigned from the panel.

'No' to Free Trade and Wheat Trade:

Indian Government's move to import wheat under international pressure, CHC wrote an article titled "No Free Trade in Wheat Trade" and sent it to many publications and to the Government asking it to keep its people's health interests in focus. The article was circulated to JSA, IPHU and letter was sent to the Indian Prime Minister, President and concerned ministries asking them to withstand the pressure.

CHC's inputs were streamlined to **strengthen and support** various community based organisations and the unorganised sector. CHC actively extended support to various campaigns by solidarity and participation. Through these processes health and right to health have emerged as the agenda in the respective groups and organisations.

**Campaign against Novartis patenting "Gleevec"
demonstration in Bangalore (Sep. 2006)**



Building Capacities & Supporting Solidarity

CHC team conducting a session on Training women leaders of various grass roots level organisations of Karnataka, organized by Hengasara Hakina Sangha (HHS), Bangalore



Capacity Building of Communities

Community Health Workers of Jagrutha Mahila Sanghatan, Raichur

Jagrutha Mahila Sanghatan is a Dalit Women's Collective of agricultural laborers in Raichur district, which has organised itself for social, political and economic rights. Premdas along with Dr. Sandhya Panch, a former fellow of CHC, held residential training for the women health workers from June 6-9, 2006. The sessions included understanding health and primary health care, understanding human anatomy and diseases, reproductive health issues, home remedies and prevention and sharing of experiences by the group on local health traditions.

Training on Right to Health:

On March 14 and 18, 2007 CHC facilitated training for the coordinators and staff of Samara, Suraksha, Sanchayanele and Sangama. These organisations are working on the issues of sexuality minority community, dalit women and PLHAs. Half a day training of three and a half hours was conducted for four batches of 30 community leaders. The training focused on the perspective building and included sessions on understanding rights and entitlements, understanding comprehensive health and social determinants and Health as a Right and as a Human Right.

Training on Right to Primary Health Care:

As part of the capacity building of the members of JAAK, a perspective building session on the right to health for the district of Raichur was held at Prerana training centre on 18th June, 2006. 25 participants from 8 organisations attended the training. The main issues dealt were People's Health Movement, Right to Health and Health Care, National Health Assembly 2, discussion about the situation of PHCs in various districts of the State of Karnataka and planning strategies for future action. Dr. Gopal Dabade of Jagruthi, Mr. Prasanna of AID-India and Premdas from CHC were the resource persons.

Training on RTI:

On February 23, 2007 Premdas facilitated sessions with Sakshi Trust on Right to Information in Kannada for youths residing around Devanahalli airport, who were affected as their lands were taken over by different groups in view of the airport which was coming up in that area. The training was organised by Samvada.

Training on RTI for Right to Health:

Training on 'Using Right to Information (RTI) in the Right to Health Care Campaign' was organised by CHC for JAAK members on July 25, 2006 at Christian Medical Association of India (CMAI). It was attended by 30 people from various organisations. Mr. Cyriac Anand from Sakshi trust conducted the training on using the Right to Information Act. The sessions

concentrated on using RTI for getting critical information on the functioning of the health care system and to use it as a tool for advocacy.

Trainings on the public health hazards of tobacco consumption:

CHC facilitated sessions for various groups on the issue of tobacco. The presentation included history of tobacco use, substances that tobacco contains, role of tobacco industry in promoting tobacco consumption, role of WHO and Government of India in tobacco control and the need for social change. The trainings were given to:

- street children organised by YMCA, Bangalore.
- students of Kumaran Public School, Bangalore.
- street children and adolescents mobilized by Saathi, Bangalore
- staff of Saathi, Bangalore.

Professional support to the nutrition intervention programme in Hosur:

CHC offered professional consultancy support to the nutrition programme organised by TVS company in Hosur. The support included facilitating the planning, and issues of growth monitoring, water and sanitation, diarrhea management, antenatal care, immunization and supplementary feeding. The support was aimed at helping the community to gain more by this programme. Ms. Padmasini Asuri, SOCHARA member, supported CHC in this venture.

Placement for B.S.W. students:

CHC offered a fieldwork placement for three students doing their Bachelors in Social Work (BSW) from St. Joseph's College, Bangalore. The students Deepika, Daniel and Sonam were given regular inputs in community health issues by CHC resource persons. They were sent for visits to CHC's associates and organisations like MILANA, REDS and SAMVAADA to learn about their work and to interact with the communities.

Training and Orientation on Urban Health:

Orientation on health issues in urban areas were conducted for many organisations that included:

- twenty animators of AVAS working in Chittoor district, Andhra Pradesh on 18 May, 2006.

- staff of Fedina on 23 June, 2006.
- 6 Community Health Workers (CHWs) of the Association of People with Disability (APD)
- consultation organised by APD on Impact of Globalization on Health and Education Sector on 19-20 May, 2006.
- workshop on Primary Health Care for Janaarogya Andolana Bangalore Urban (JABU) on 27 July, 2006.

Orienting journalists to health and drug issues:

During this year discussions were held with different journalists on issues related to health, development, trade and drug issues. These included Inter-Press-Service (IPS) on drugs related issues, issues on Mashelkar report and the Novartis case, drug pricing and data

**Consultation on urban health issues
held at CHC**



exclusivity; and journalists from the Hindu and Vijay Times were oriented on issues on the right to health. The news papers later carried articles and reports on these issues.

Participation and Solidarity with Campaigns

The CHC team actively participated and helped to organize public events in solidarity with the campaigns and people's movements in Karnataka State.

Seminar on communalism: Team members from CHC participated in the study seminar organised at ISI along with the Community Health interns. CHC also supported other initiatives in the state to promote dialogue and communal harmony.

Solidarity with the outstees of Sardar Sarovar dam in the Narmada valley:

CHC participated in the candle light vigil at town hall in July 2006 against the unjust submergence of tribal villages by raising the Sardar Sarovar Dam, organised by NAPM. It was followed by one day symbolic fast at Mahatma Gandhi statue by various organisations.

Seminar on Evicting Farmers for Special Economic Zones (SEZs) NAPM called for a consultation of farmers on the situation of special Economic Zones in Karnataka on February 1, 2007. CHC attended the meeting where many farmers shared their experiences. It was reported that out of 241 SEZs planned in India, 42 were in Karnataka and about 35 were in and around Bangalore, which was to cause enormous displacement, loss of livelihood and consequently denial to health and well being.

Jawaharlal National Urban Renewal Mission (JNNURM) and Greater Bangalore:

CHC participated in the discussion on the National Urban Renewal Mission (JNNURM). The entire programme, including its funding and modalities of functioning were discussed. Concerns were raised about the mission formulation and related actions including the involvement of agencies such as the World Bank and USAID which had vested interest and long history of promoting neo-liberal developmental policies.

Solidarity with Domestic workers' demand for a weekly holiday and Garment Workers' demand for justice:

On March 8, 2007 Premdas attended the demonstration of the garment workers demanding better working conditions and the *domestic workers* demanding a weekly holiday. These protests were held on the occasion of Women's day. Nearly 200 women supporting the domestic workers gathered at the MG Statue from 3 pm to 5 pm demanding the right for weekly day off. *The Garment Worker's Candle Light Vigil* was held at Town Hall from 6 to 7.30 pm. The issue of garment workers was highlighted including demanding justice for 'Ammu', who was allegedly murdered within the factory premises.

Solidarity with All India Drug Action Network (AIDAN):

Naveen from CHC participated in the All India Drug Action Network's Annual Meet held in Bangalore on

Karnataka JAAK delegation in the
National Health Assembly in
Bhopal, March 21-25, 2007



27th December 2006, as well as the follow-up meeting held on 10th February 2007 in Mumbai. Meeting focused on the pre-grants opposition on Moxifloxacin, Novartis issue and the Mashelkar committee report, cabinet note on drug policy, AIDAN manifesto and AIDAN's participation in NHA-2. CHC prepared an information-cum-training Module on section 3d of Indian Patents Act and Article 27 of TRIPS and circulated to NGOs and groups working on drug related issues.

Involvement in Tamil Nadu environment and occupational health movements:

CHC team in Tamilnadu was involved in networking and supporting the environment and occupational health movements in the state of Tamil Nadu. They were involved in supporting the former workers of a Thermometer factory in a court case demanding adequate compensation from their former employers. One of the members was a panelist in a public hearing on the impacts of industrial pollution on the villages situated near the SIPCOT industrial estate near Cuddalore in Cuddalore district on 29th July 2006. He has initiated a process of action-research with a group of former workers of a PVC factory in Mettur, Salem district.

Support to People with Disability Network:

Karnataka level Convention of people with disability for equal rights and equal opportunities was held on March 30, 2007 at Christian Worker's Centre in Bangalore. It was the state level convention of the People with Disability in Karnataka. Nearly 200 people from various organisations and from disability network attended the convention. Premdas from CHC was invited to inaugurate the function and to give the key note address on mainstreaming disability movement. The keynote address stressed on the following issues: the key positions of PHM, health as a comprehensive issue needing comprehensive approach, people with disability facing problems regarding food, water, housing, land, social exclusion and so on, which has a bearing on their health and the need to mainstream disability movement with other movements themselves.

Solidarity with Women in the Unorganised Sector:

CHC joined a group of people to bring together women from various unorganised sectors and professions to one platform to share with each other the issues they are addressing. It was called Mahila Okkoota. Women from 14 different sectors came together with their issues on March 15, 2007 and gave testimonies of their problems and struggles faced by them. The theme was: 'Life with Dignity for Women'. CHC was one of the organizing members of the programme. Right to health, alcoholism, housing, globalization, privatisation, liberalization and communalism was the cross cutting issues that everyone addressed. Testimonies included denial to healthcare for garment workers, sanitation workers, women living with HIV/AIDS, sex workers, hijras, domestic workers and dalit women.

**JAAK rally in Chamarajanagar district
demanding Right to Health on Feb 1, 2007**



Participation in People's Health Movement-India

The year 2006-07 was significant for the People's Health Movement in India in its '**Right to Health**' and other campaigns for "**Health for All! Now**' and CHC played an important role in the states of Karnataka, Tamil Nadu and at the national level. The following are the highlights of the CHC's involvement during the year.

- CHC is the secretariat of the Jana Arogya Andolana Karnataka (JAA-K), the Karnataka state chapter of PHM
- The Chennai project office of CHC played a critical role in rebuilding the PHM momentum in the state of Tamilnadu, which is named as Makkal Nalvazhvu Iyakkam (MNI)
- Dr. Thelma Narayan continued as a joint convener of the National Coordination Committee of JSA and took charge of JSA mobilization in the 4 southern states of India viz. Kerala, Tamil Nadu, Karnataka and Andhra Pradesh.
- CHC played a critical role in organizing the Second National Health Assembly (21-25 March, 2007) and a large number of processes that preceded the assembly.

Jana Arogya Andolana Karnataka (JAA-K) Karnataka Chapter of People's Health Movement

Dialogue with the state on Peoples Partnership in Primary Health Care:

On the eve of the World Health Day i.e. on April 6, 2006 JAA-K organised a dialogue with the government on 'Peoples Participation in Primary Health Care' (PPP).

Nearly 100 delegates representing various organisations from Raichur, Kolar, Kanakapura (Bangalore Rural), Tumkur and Bangalore Urban districts presented their study findings on the state of Primary Health Care conducted in sample PHCs. The Deputy Director and the Chief Health Officer of BMP were present. The main issues raised were that of corruption, non availability of medicines and non availability of personnel.

Public action in Mysore demanding revitalization of PHCs (Feb. 2007)



Dialogue with the Karnataka Health Minister:

At the state level convention of women organised by Grameena Mahila Okoota (GMO) a constituent of JAA-K on January 11-12, 2007 the issue of right to health was raised by women from all the 27 districts of Karnataka state. They invited JAA-K to facilitate a session on the problems with the public health care delivery system and the possible solutions. Women then placed the issues before the State Health Minister Shri R Ashok and demanded an increase in the state health budget, filling up of vacancies, strengthening of primary health care and regulation of private sector.

Right to Primary Health Care Campaign:

Under the banner of JAA-K CHC along with others, facilitated a Right to Primary Health Care Campaign (RPHC) and the specific focus was on revitalization of primary health centres, to address crucial issue of state withdrawal from health services and the situation of Primary Health Centres (PHCs) which are malfunctioning across the state. There are about 1600 primary health centres in the state spread across 27 districts. The process included district level meetings in 12 districts, various state level meetings, formation of district collectives to address the issue, district and state level trainings, survey of 93 PHCs in 10 districts and district level health action.

State-wide Public Action on Right to Primary Health Care Campaign (RPHC) in 11 districts: On February 1, 2007, action took place across 11 districts in Karnataka during which memorandums were submitted to the District Health Officers (DHO) and the Chief Executive Officers (CEO) of Zilla Panchayats regarding the state of health systems in their districts. People in large numbers gathered and held a dialogue with the CEOs and DHOs of their districts. Press Conferences, rallies and submission of memorandum were the common factors across all these districts. The action was well covered and reported in all major vernacular newspapers and local televisions. (See table)

State Level workshop:

A two day state level workshop was held for the health cadre of various civil society organisations, networks and activists of different movements and campaigns. It was organised at the Ambedkar Resource centre, Tumkur on 17th and 18th December, 2006.

About 80 participants from 18 districts attended it. Workshop focused on the broader determinants of health and the impact of globalization on health of various communities. Conveners of JAAK took active part in organizing the workshop.

**Karnataka State level training workshop
held at Tumkur, December 2006**



*The poverty of the poor,
is not an appeal,
for generous action to relieve it,
but, the demand for the construction,
of a different social order.*

**- Gustavo Gutierrez
(A Theology of Liberation)**

District	Demanding Right to Health - Action taken on 1st February 2007 across the State
Chamaraj-nagar	JAA -K members had a dialogue with the District Health Officer (DHO) for 3 hours and various people presented testimonies to the DHO.
Kolar	Series of meetings with the Chief Executive Officer (CEO) of the Zilla Panchayat (ZP) for evolving series of actions to improve the services. There was some visible changes noticed in few of the PHCs.
Gadag	About 50 women of various SHGs in the district took out a rally and presented memorandums to the district administration.
Koppal	JAA-K members conducted a press conference on 31 st January, 2007 and all the newspapers highlighted the plight of the PHCs in the district. On Feb 1, 2007 they held a mass demonstration.
Raichur	JAA-K members in the district had collected data from 50% of the PHCs and presented the consolidated data to the district authorities. As a follow up of this, the Chief Executive Officer (CEO) of the Zilla Panchayat (ZP) agreed to tackle the infrastructure related issues of the PHCs in the current year's action plan.
Belgaum	A series of actions by Jagruti and other JAA-K related organisations in the district resulted in some visible changes at the PHC level.
Mysore	Over 170 people from 4 taluks – H.D.Kote, Nanjangud, Hunsur and Mysore participated in the action and more than 100 participants were women. The issues covered were related to access to drugs, functioning of the primary health centre and social determinants.
Chitradurga	110 people participated in the action from HRFDL, Dalit World, SPIN network, Sadhana Samasthe, and other organisations. The issues covered in Chitradurga related to availability of health personnel, availability and access to drugs and with regard to functioning of the primary health centres.
Tumkur	118 people participated in the public action and organisations participated included Matanga Women's Association, MMO, REDS, Jeevika, DJS etc. As a result of the rally and meeting, a health action committee was formed in the district.
Bangalore	Members of various urban organisations held a demonstration in front of the Town Hall followed by giving a memorandum to the Chief Health Officer of the BMP and Director General of Health Services (Govt. of Karnataka)
Bangalore Rural	In Doddaballapur taluka of Bangalore Rural District a mass demonstration was held under the leadership of BGVS, a constituent of JAAK and memorandum was submitted to the District officials.

Karnataka State Health Assembly:

Karnataka State Health Assembly was held at Urban Health Research and Training Centre, Bangalore on 21st March, 2007. A total of 148 people from 12 districts including Koppal, Chamarajanagar, Bangalore Urban, Bangalore Rural, Raichur, Gadag, Tumkur, Shimoga, Kolar, Bidar, Mandya and Davangere attended the state health assembly. More than half of the participants were women. Assembly was held keeping the broader theme of the NHA 'defending the health rights of people in the era of globalization' in focus.

People actively participated in the group discussions on various issues and prepared a people's health plan. The issues focussed were HIV& AIDS, public health care including human resource for health, child health including sex selective abortion, micronutrients, pulse polio and children's right to food, urban health, women's health, mental health, disability, health rights of dalit and adivasis and other marginalized group, alternative health practices and sustainable development, panchayati raj institutions and local self governance. Issues such as patents, trade, social determinants of health and need to strengthen the primary health care system in the light of needs of people not having access to basic health care was discussed.

The assembly came up with a concrete action plan to work on issues such as access to treatment, drugs and basic services, focus on social determinants in the context of issues affecting people's health, including HIV / AIDS. It was decided to work towards improving health services at all levels in the State. About 125 participants travelled to Bhopal to participate in the Second National Health Assembly.

Makkal Nalavazhvu Iyakkam (Tamil Nadu chapter of the People's Health Movement)

State Level Workshop:

On 17th and 18th September, 2006 the state level workshop was held at Tiruchirapalli. There were nearly 85 participants from various districts of

Tamil Nadu. During the workshop different ideas were discussed for the campaign in Tamil Nadu. The CHC team facilitated the linkage between the health activists trained by CHC and the local and district level Makkal Nalavazhvu Iyakkam activists involving Pazhaverkadu Action Network (PAN).

Tamil Nadu State Health Assembly:

MNI organised the Second State level People's Health Assembly in Chennai on 21st March 2007. The one day event functioned as a forum which brought together nearly 250 people from all over the state. The thematic sessions helped to discuss problems experienced by marginalized communities with the existing system, policy and governance.

Karnataka delegation at the 2nd National Health Assembly at Bhopal - March 23-25, 2007



Jana Swasthya Abhiyan (India Chapter of the People's Health Movement)

Second National Health Assembly (NHA-2): The Second National Health Assembly (NHA2) held in Bhopal from March 23-25, 2007 was the first assembly after the formation of JSA. More than 3000 participants from different states of India and some from other countries participated in NHA-2.

Preparatory Phase:

The NHA was preceded by 8 months of preparatory and mobilization period in which CHC was active. The contribution of CHC to this phase included:

- Organizing workshop to prepare Campaign Materials for NHA 2 was held in Bangalore from February 24- 25, 2006. CHC members took responsibilities to prepare materials on some of the campaign issues.
- Participated in the preparatory workshop held on July 14th and 15th 2006 at Hyderabad and made presentations of the materials prepared.
- CHC prepared booklets on "Social Exclusion and Marginalisation", "Urban Poor and Health", Communicable Diseases, "Health System in India: Crisis and Alternatives", "Alcoholism and Substance Abuse", "Mental Health and marginalized communities" and "Health for Dalit communities"
- CHC was particularly involved in fund raising for specific workshops/ plenaries as well as organizing the workshop on Social Exclusion, HIV-AIDS, Disability, Mental Health and Environment.
- CHC helped evolve the programme of tri-continental dialogue and helped to facilitate links of the Global PHM initiatives which included the International People's Health University (IPHU) leadership sessions and the PHM steering council meetings linked to second Indian National Health Assembly.

National Health Assembly II held at Bhopal (March 2007)



Highlights of NHA-2:

Twenty workshops were held on various topics: Tri-continental dialogue moderated by TN on the theme - experiences on globalization and subversion of public health from Africa, Asia and Latin America and the emerging response. Session titled "Alliances of Health" organised in view to bring together various campaigns and planned to involve JSA in those campaigns. Dialogue with policy makers- Shri Amarjeet Sinha, Joint Secretary in the Ministry of Health and Family Welfare made a presentation and responded to some of the issues of concern raised by JSA. On all the three days of the assembly cultural presentations by different state groups were held at various times.

CHC set up a stall to disseminate information, sell herbal products, and other health related books and posters.

CHC Library & Information Centre (CLIC)

In the last 24 years CHC Library and Information Centre (CLIC) has grown into a rich resource centre for researchers, activists, academicians and voluntary organisations. The resource materials in CLIC include books, journals, newsletters, audio-visual resources, health education materials, posters on various issues and news paper clippings. Currently there are over 10000 books and over 300 videos along with other materials. Users of the library include medical colleges, nursing colleges and other institutions, non government organisations, civil society groups and individuals in Bangalore and outside. Some significant highlights are detailed here.

Computerization of records:

To facilitate the search for titles, authors and articles and resource materials are now being computerized by using a software called 'e-granthalaya' to manage library systems.

Reorganizing the system of classification of books: In the past year revision of the subject code list, creating relevant library sections (eg. health and human rights), identifying sections in the library etc., which needed to be updated were taken up.

Dissemination of health education and health policy materials: CLIC provided support to the CHC team and Jana Arogya Andolan-Karnataka by organizing and setting-up a stall at the Second National Health Assembly (NHA-2). CHC publications and global PHM booklets were displayed and distributed in the stall that was visited by more than 2000 participants of the NHA-2

Health Round Up: Health Roundup is an attempt taken to reach out to institutions and individuals by providing updated information on health related articles. CHC receives many publications on a daily basis including periodicals, journals, reports, policy documents, magazines and newspapers. References and bibliographies of all healthrelated news, views, policies and latest statistics from various publications are compiled and are sent to various medical colleges, organisations and individuals. Many people have sent in their compliments to CHC for this work.

**Librarian H.R. Mahadevaswamy
at CLIC**



CHC Website:

The website is now updated with news on CHC and PHM activities. Now the process is on to upload all the training and learning materials onto the website to make it a 'Community Health Learning Resource' page. This is done in preparation for CHC's Silver Jubilee in 2008.

Media materials & Publications:

The media materials in CHC include Slides (54 sets), Video Cassettes (304) and Posters (850). CHC is in the process of creating an annotated bibliography of the Health Education Materials available in CHC. Some subjects of media material are awareness materials on substance abuse, common ailments, health and human rights etc. More than 35 articles, reports and publications were brought out by CHC in the last two years.

Organisational Matters

CHC TEAM

Each CHC team member played an important role in achieving all that has been done. As we promote community health and support the health movement, we work towards increasing a sense of community, equality, democracy and of challenge to each other as professionals working within a team.

Dr. Thelma Narayan, Dr. Ravi Narayan, Mr. Victor Fernandes, Mr. Ameer Khan, Ms. Asha, Mr. S.J. Chander, Mr. Naveen I. Thomas, Ms. Maria D. Stella, Mr. S. B. Anil Kumar, Mr. C. James, Mr. H.R. Mahadeva Swamy, Mr. Joseph Anthoniappa, Mr. V. N. Nagaraja Rao, Smt. Kamalamma and Sri. Hari Prasad continued working with CHC. The new staff who joined in the course of 2006-07 are Mr. D. G. Srinidhi and Mr. Mathew Alex. Dr. Rakhal Gaitonde joined CHC in July 15, 2006 and is working with the CHC Tsunami team at Chennai and also at Bangalore office as and when required

E. Premdas, SOCHARA member, relieved Dr. Thelma Narayan from her administrative responsibilities as Coordinator / Secretary and took charge as the Coordinator of CHC and Secretary of SOCHARA, on July 11 2006. After having a placement with CHC on a senior fellowship in the year 2005-06, Premdas opted to join CHC in April 2006. In the General Body Meeting of SOCHARA on 10th July 2006, he was entrusted with the new responsibilities by the General Body, the highest decision making body for CHC.

Apart from the above, CHC had fellows, interns, volunteers and students on placements during the year. Last batch of three fellows completed their fellowship on February 7, 2007.

Organisational Management

Regular Team Meetings: Team meetings were held on every Wednesday to discuss organisational issues, to share about the work done in the previous week and to plan for the coming week. The staff development workshops were held regularly every month, where team members would make presentations on different topics which they had prepared. Dr. Ravi and Dr. Thelma were also present during these sessions.

Regular Executive Committee (EC) meetings were conducted during the year. The EC met four times to deliberate on the administrative matters of CHC. (7th & 11th July, 2006, August 31, 2006 and December 23, 2006). The SOCHARA Annual General Body meeting was held at Navaspoorthi Kendra, Benson town on July 11, 2006. Dr. Thelma Narayan and Mr. E. Premdas were in regular communication with the SOCHARA members and other CHC associates.

Organisational strengthening

Staff Development Workshops (SDWs)

With CHC almost reaching its silver jubilee and with a younger team taking over with Dr. Ravi and Dr. Thelma taking on an advisor / consultant role, it was felt that it was very important for the new team to understand one

CHC team members taking care of herbal garden at CHC.



another, as well as the vision of CHC more deeply, and at the same time evolve a common vision that would guide the team's actions over the next phase. Thus it was felt that the whole team needs to study and re-look at the original vision in the light of:

- The natural evolution of CHC over the past 23 years.
- The changing context within which the struggle for Health for All was conducted.
- The individual and collective inspiration, commitment and ideologies, and
- The changing capacity set of the new team.

This process also enabled the team to spend quite a bit of time together discussing the future plans and also to evolve the action plan for the next year. The SDWs were held on 3 days every month. During the year 2006-2007, the team met on the following dates: September - 11th to 14th, October - 16th to 18th, November - 27th - 29th, January - 17th to 19th and February - 14th to 16th.

The main outcomes of the workshops were:

1. The team developed a better rapport within itself.
2. Evolution of a draft vision statement.
3. Evolution of the action plan for the year 2007-2008.
4. In depth discussions on the various aspects of CHC's work including training, networking, advocacy and research.
5. Planning various aspects of organisational development that needed to take place over the next year.
6. Initiation of discussions on possible ways to celebrate / commemorate 25 years of CHC in 2008.

It was decided that during the future SDWs, the focus would be on sharing various activities among the two teams (Bangalore and Chennai) and to have in-depth thematic discussions based on the work being done.

CHC is extremely grateful to :

CHC Team 2006-2007



● **Mr. S. J. Chander:** Chander has worked in CHC in two terms 1 April 1993 -1998 and then again from 1 June, 2000- 30 May, 2007. He has contributed to CHC in community health trainings, in building up Jana Arogya Andolana Karnataka (JAAK) and in his work on the issue of anti-tobacco campaign.

● **Mr. Naveen Thomas:** Mr. Naveen was introduced to CHC as a Community Health Fellow in the first batch (2002-03) and he joined CHC as staff in 2003. He contributed to the community health fellowship programme by supporting number of his processes required for this programme. During his stay with CHC he developed his expertise on the issues of trade and drugs and was involved with All India Drug Action Network. He has also produced small information manuals on the subject.

- **Ms. Asha Thotta:** She joined the community health fellowship programme from September 2005 March 2006. From April 2006 to June 2007 she was part of the CHC Tsunami Project Team in Chennai. She is now a faculty in Stella Maris College, Chennai in the department of social work and also is pursuing an M.Phil degree.

- **Mr. Nagaraja Rao:** Mr. Nagaraja Rao is a long associate and friend of CHC and has given his services as staff and otherwise. Formally he has contributed number of years of service to CHC. He worked with CHC earlier from 1989 to March 2000 and then again from January 2001, upto 30th April 2007 he worked with CHC as documentation assistant.

- **Mr. D. G. Srinidhi:** Mr. D. G. Srinidhi had worked in the PHM secretariat from 8th July 2002 to June 2005. After a gap of one year, again he rejoined CHC to work for a year from 1st April 2006 to 18th April 2007. He worked in CHC as the secretarial assistant.

- **Mr. S. B. Anil Kumar:** He joined as the accounts assistant on 29th December 2000 and worked till 1st April 2007.

CHC appreciates the services and contributions of all our ex-staff who moved on with their lives with various other responsibilities.

FOOT PRINTS ON THE SANDS OF TIME



- **Dr. Ravi Kapoor:** Dr. R. L. Kapur, a SOCHARA member passed away on 24th Nov 2006. SOCHARA remembers Dr. Kapoor as a philosopher, guide and great supporter to CHC's work. He was also a distinguished psychiatrist and one of the first Indian PhDs in psychiatry and Epidemiology.

- **Mr. Anthoniappa,** father of Mr. A. Joseph who has been working with CHC for a number of years. He passed away on 22nd November 2006 at the age of 63 years.

- **Dr. Uma :** Uma, as she was called, was a distinguished community trainer. She is remembered for her 'joyful learning' training manuals on health and other related topics. She was a close associate of CHC for long years. She passed away on 20th June 2006 after suffering from aplasmic anaemia.

*"The lives of all great people
tell us
that we can make our lives sublime
and departing,
leave behind us,
foot-prints on the sands of time"
(H. W. Longfellow)*

Society Members (SOCHARA - 2008)

Executive Committee :

Dr. Mohan K. Isaac (President)
Fr. Claude D'Souza (Vice President)
Dr. H. Sudarshan (Treasurer)
Mr. E. Premdas (Secretary)
Dr. Thelma Narayan (Member)
Dr. Sr. Aquinas (Member)
Dr. M.K. Vasundhara (Member)
Dr. Ravi D'Souza (Member)

Ordinary Members

Dr. D.K. Srinivasa
Mr. A. Arumugham
Dr. Madhukar Pai, M.D.
Dr. Mani Kalliath
Dr. Ravi Narayan
Dr. Shirdi Prasad Tekur
Dr. C.M. Francis
Ms. Padmasini Asuri
Dr. B. S. Paresh Kumar
Mr. As Mohammed
Mr. K. Gopinathan
Dr. Sunil Kaul
Dr. Denis Xavier
Dr. N. Devadasan
Dr. K. Ravi Kumar
Ms. Valli Seshan
Dr. Neela Patel
Dr. Pankaj Mehta

Honorary Member

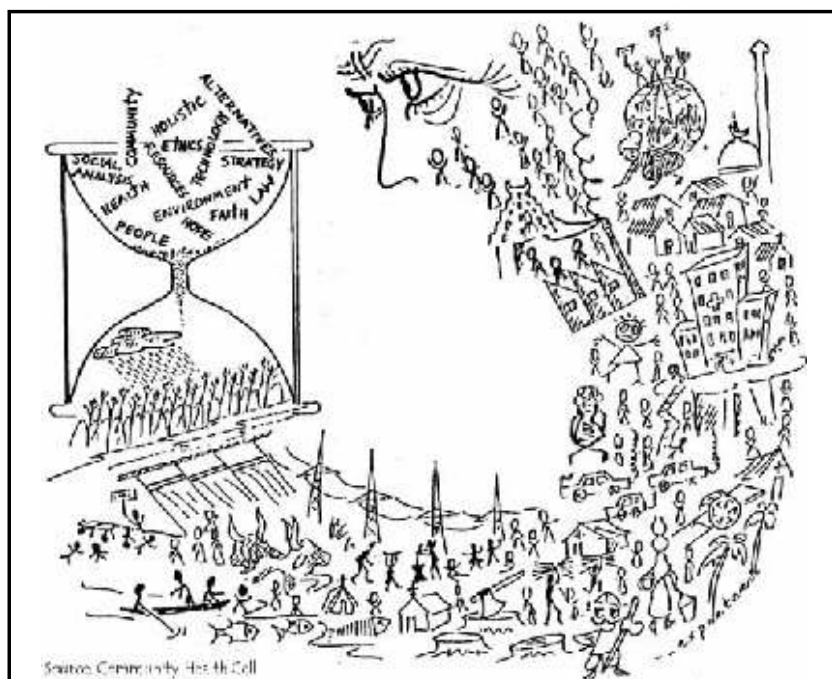
Fr. John Vattamatton, svd

Associates

Dr. A.V. Ramani
Dr. Vatsala Nagarajan
Dr. Roopa Devadasan
Prof. S.V. Rama Rao
Dr. M.J. Thomas

CHC Team (2008)

Mr. E. Premdas - Coordinator CHC / Secretary SOCHARA
Dr. Rakhal Gaitonde - Training & Research Associate
Dr. R. Sukanya - Research & Training Associate
Ms. Sudhamani. N - Field Training Coordinator
Mr. Ameer Khan - Training & Networking officer
Dr. Thelma Narayan - Public Health Consultant
Dr. Ravi Narayan - Community Health Advisor
Dr. Vinay Viswanatha - Research and Training Officer
Mr. Victor Fernandes - Administrative Officer
Mr. H. R. Mahadeva Swamy - Library & Information Assistant
Ms. Maria Dorothy Stella - Secretarial cum Admin Assistant
Mr. Mathew Alex - Secretarial Assistant
Mr. C. James - Office cum Media Assistant
Mr. Joseph Anthoniappa - Office cum Maintenance Assistant
Ms. B. Pushpalatha - Secretarial Assistant
Mr. Amarnath Sindhia - Assistant Accountant
Mr. Hariprasad Ojha - Office Assistant
Ms. Kamalamma - Office helper



SOCIETY FOR COMMUNITY HEALTH AWARENESS RESEARCH AND ACTION, BANGALORE

No. 326, V Main, I Block Koramangala, Bangalore - 560 034.
STATEMENT OF AFFAIRS AS AT 31ST MARCH 2007
CONSOLIDATION

LIABILITIES	SCHEDULE	AMOUNT	AMOUNT	ASSETS	SCHEDULE	AMOUNT	AMOUNT
CORPUS FUND		Rs.	Rs.	FIXED ASSETS		Rs.	Rs.
FUNDS CARRIED OVER	I	323,255.30	As per Schedule	IV		424,552.16	
PROJECTS CARRY OVER				SUNDY DEBTORS			
Mitani Evaluation / SHRC		99,635.00	Loans and Advances	V		63,051.59	
Tsunami - Misereor	II	54,486.60	State Health Assembly - CMAI			11,000.00	74,051.59
PROVISIONS				INTEREST ACCRUED			22,871.26
Provision for Gratuity	III		154,121.60	DEPOSITS			
SUNDY CREDITORS				CHC - Rental Deposit		155,000.00	
Audit Fees				Electricity Deposit		880.00	
				Telephone Deposit		2,280.00	158,160.00
				CASH AND BANK BALANCES			
				Cash on Hand		5,079.80	
				Cash at Bank		211,838.02	
				Fixed Deposits - Funds		594,530.30	
				Fixed Deposits - Others		325,000.00	1,136,448.12
TOTALS			1,816,083.13	TOTALS			1,816,083.13

for Society for Community Health
Awareness, Research and Action

EXAMINED AND FOUND CORRECT
for M. MARULASIDDIAH & CO.

31 MAY 2007

Place : Bangalore
Date :

R.D. Sengupta
Vina President

H.S.H.
Treasurer

Secretary



SOCIETY FOR COMMUNITY HEALTH AWARENESS RESEARCH AND ACTION, BANGALORE
No. 322, 1st Floor, Main Road, Bangalore - 560 027

INCOME AND EXPENDITURE ACCOUNT FOR THE YEAR ENDED 31ST MARCH 2007
CONSOLIDATION

EXPENDITURE	AMOUNT	INCOME	AMOUNT	AMOUNT
	Rs.		Rs.	Rs.
By Health Education Materials	8,373.00	To Bank Interest on SB A/c's	19,842.00	
Communication / Media Materials (Non-Stationery)	2,445.40	Bank Interest on Fixed Deposits	82,815.89	
Rent	400,430.00	Interest Accrued	19,842.00	82,835.89
Electricity & Water	38,435.00	* Core Contribution - Funding Partners		
Telephone, Fax, Email	172,215.00	Condit	2,385,675.00	
Postage	22,327.00	Miscor	1,235,425.00	3,621,100.00
Printing & Stationery	35,738.08	* Contribution - Projects		
Software Supplies	19,157.00	CH Fellowship Scheme Salaries (SRTT)		302,604.50
Photocopying Charges	24,250.40	* Contribution - Programmes		
Travel & Conveyance (Condit)	53,305.05	National Health Assembly-2 - A.F.C	85,614.00	
Bank Charges	5,708.00	National Health Assembly - Miscor	56,180.74	
Insurance - Staff	53,025.00	National Health Assembly-2 - Others	61,000.00	202,794.74
Insurance - Equipment	2,400.00	* Contribution - Others		
Staff Development	23,622.35	Membership Fee	1,650.00	
Staff Welfare Fund	2,975.00	Contribution - CHC	15,815.00	
Miscellaneous	41,388.80	Contribution - Professional Services	10,757.00	
Papers, Periodicals & Journals	29,062.50	Contribution - Education Materials	15,450.00	
Postal Document Service	1,516.00	Contribution - Others	24,189.00	69,373.00
Equipment Maintenance & LAN	34,515.00	* Contribution - Professional / Administrative Services		
Policy Action Research & Advocacy Initiation Support	47,658.75	CH Fellowship Scheme (SRTT)		125,250.00
Disaster Responses	14,818.30	* CHC - Travel (Meetings / Conferences)		
Staff Salaries & Allowances	3,304,335.35	WHO - CSOH Meeting	58,595.00	
Stipend / Honoraria & Professional fee	41,500.00	NHA Meeting - World Council of Churches	70,571.00	
Wages	80,750.00	GPP Meeting - BMJ	78,385.00	
CHC Reports / Pamphlets / Newsletter	18,888.30	What Next Forum meeting - Bag Hammarskjold	81,853.00	
Community Health Action Initiatives	68,822.55	Social Vaccine Forum to meeting - GFHR	39,850.00	
JSA / JVA / JABU	240,497.90	Medico International	44,276.00	
Travel (Meetings / Conferences)	480,681.50	FRCH Meeting - Pune	8,425.00	
Audit Fee Paid	15,539.00	Department of Health & Family Welfare - Bangalore	23,271.00	
Registration - Statutory - Federation	5,490.00	DHF Meeting - Delhi	12,300.00	
Dissemination Workshop	67,944.00	JSA - National Workshop - Hyderabad	5,000.00	
Gratuity	55,758.00	NRHM meeting - Delhi	37,511.00	
Depreciation	144,945.93	Public Health Foundation India - Delhi	15,000.00	
PEOPLES HEALTH MOVEMENT - SECRETARIAT		Panning Commission Meeting - Delhi	22,655.00	
* PHM Secretariat (JVA)	226,157.45	JSA Meeting - Delhi	19,000.00	488,454.00
* PHM2 Health Assembly (JVA)	688,155.73			
		* P-H Secretariat - Miscor		2,351.94
		* Excess of Expenditure over income		1,437,713.17
Total	6,268,300.66	Total	6,268,300.66	

Date: **31 MAY 2007**

for Society for Community Health
Awareness, Research and Action

EXAMINED AND FOUND CORRECT

for M. MARULASIDDIAN & CO.,

CHARTERED ACCOUNTANTS

1st Floor, Main Road, Bangalore - 560 027

PROPRIETOR

Ch. S. Sanyal
Vice President

H.S.H.
Treasurer

Dr. S. Sanyal
Secretary

SOCIETY FOR COMMUNITY HEALTH AWARENESS RESEARCH AND ACTION, BANGALORE

RECEIPTS AND PAYMENTS ACCOUNT FOR THE YEAR ENDED 31ST MARCH 2007

CONSOLIDATION

RECEIPTS	AMOUNT	AMOUNT	PAYMENTS	AMOUNT	AMOUNT
	Rs.	Rs.		Rs.	Rs.
To Opening Balance			By Bank	26,242.00	
Cash in Hand	2,710.50		* Computer & Accessories	18,000.00	
Govt. Bank	496,925.35		* Furniture & Fixtures	36,222.00	
Fixed Deposits - Miscor	51,403.30		* Office Supplies	3,757.75	
Fixed Deposits - Others	701,075.70	627,506.10	* Health Education Materials	9,873.00	
Bank Interest on SB A/c's	19,842.00		* Communication / Media Materials (Non-Stationery)	2,445.40	
Bank Interest on Fixed Deposits	78,425.89	91,268.00	Rent	400,430.00	
Core Contribution - Funding Partners			Electricity & Water	38,435.00	
Condit	2,385,675.00	3,574,025.00	Telephone, Fax, Email	172,215.00	
Miscor	1,235,425.00		Postage	22,327.00	
* Contribution - Projects			Printing & Stationery	35,738.08	
CH Fellowship Scheme Salaries (SRTT)	302,604.50		Software Supplies	19,157.00	
CH Fellowship Scheme Salaries (SRTT)	302,604.50	502,070.00	Photocopying Charges	24,250.40	
Travel - Miscor	607,155.00		Travel & Conveyance (Condit)	53,305.05	
* Contribution - Programmes			Bank Charges	5,708.00	
National Health Assembly - A.F.C	85,614.00		Insurance - Staff	53,025.00	
National Health Assembly - Miscor	56,180.74		Insurance - Equipment	2,400.00	
National Health Assembly - Others	61,000.00	202,794.74	Staff Development	23,622.35	
* Contribution - Others			Staff Welfare Fund	2,975.00	
Membership Fee	1,650.00		Staff Welfare Fund	2,975.00	
Contribution - CHC	15,815.00		Miscellaneous	41,388.80	
Contribution - Professional Services	10,757.00		Papers, Periodicals & Journals	29,062.50	
Contribution - Education Materials	15,450.00		Postal Document Service	1,516.00	
Contribution - Others	24,189.00	69,373.00	Equipment Maintenance & LAN	34,515.00	
* Contribution - Professional / Administrative Services			Policy Action Research & Advocacy Initiation Support	47,658.75	
CH Fellowship Scheme (SRTT)		125,250.00	Disaster Responses	14,818.30	
* CHC - Travel (Meetings / Conferences)			Staff Salaries & Allowances	3,304,335.35	
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NHA Meeting - World Council of Churches	70,571.00		Wages	80,750.00	
GPP Meeting - BMJ	78,385.00		CHC Reports / Pamphlets / Newsletter	18,888.30	
What Next Forum meeting - Bag Hammarskjold	81,853.00		Community Health Action Initiatives	68,822.55	
Social Vaccine Forum to meeting - GFHR	39,850.00		JSA / JVA / JABU	240,497.90	
Medico International	44,276.00		Travel (Meetings / Conferences)	480,681.50	
FRCH Meeting - Pune	8,425.00		Audit Fee Paid	15,539.00	
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JSA - National Workshop - Hyderabad	5,000.00		Gratuity	55,758.00	
NRHM meeting - Delhi	37,511.00		Depreciation	144,945.93	
Public Health Foundation India - Delhi	15,000.00		PEOPLES HEALTH MOVEMENT - SECRETARIAT		
Panning Commission Meeting - Delhi	22,655.00		* PHM Secretariat (JVA)	226,157.45	
JSA Meeting - Delhi	19,000.00	488,454.00	* PHM2 Health Assembly (JVA)	688,155.73	
Closing Balance					
Cash in Hand	2,710.50				
Govt. Bank	496,925.35				
Fixed Deposits - Miscor	51,403.30				
Fixed Deposits - Others	701,075.70	1,37,146.15			
Total	6,268,300.66	Total	6,268,300.66		

Date: **31 MAY 2007**

for Society for Community Health
Awareness, Research and Action

EXAMINED AND FOUND CORRECT

for M. MARULASIDDIAN & CO.,

CHARTERED ACCOUNTANTS

1st Floor, Main Road, Bangalore - 560 027

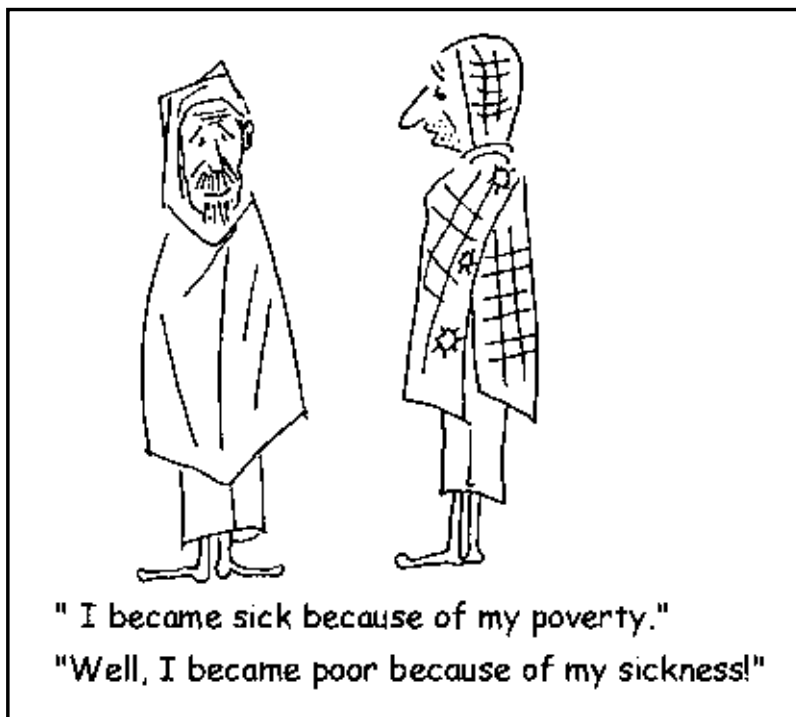
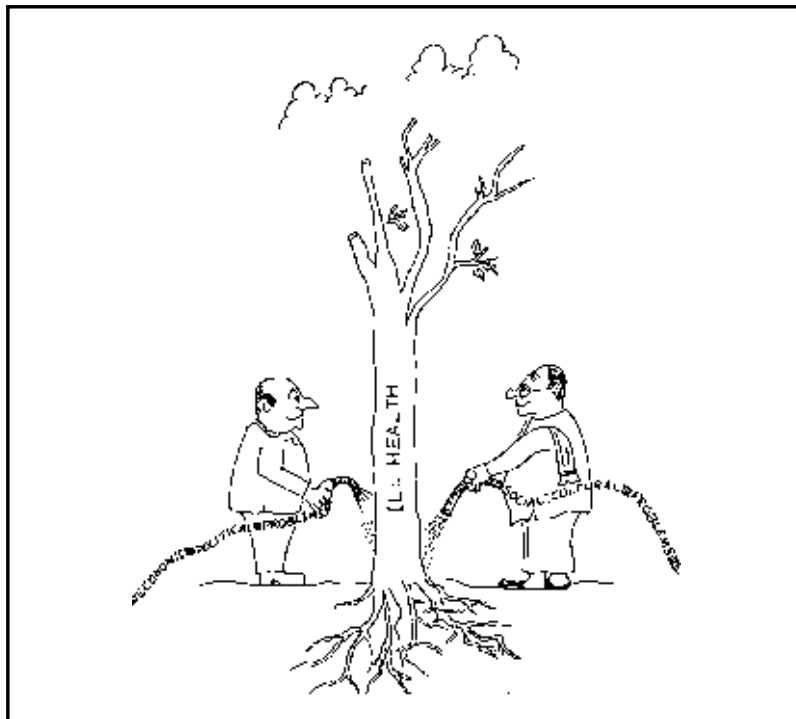
PROPRIETOR

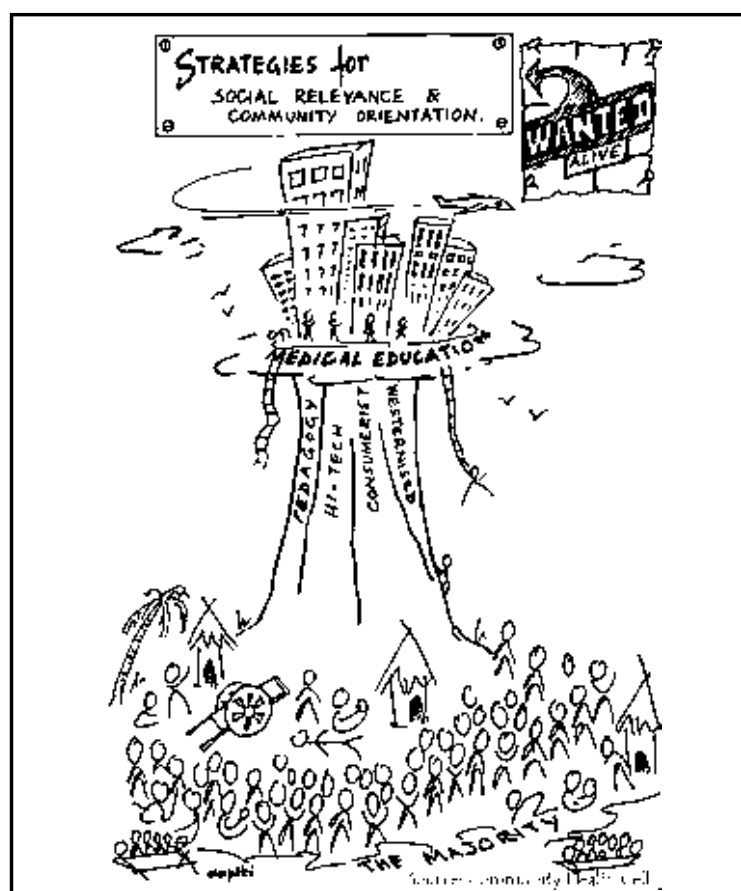
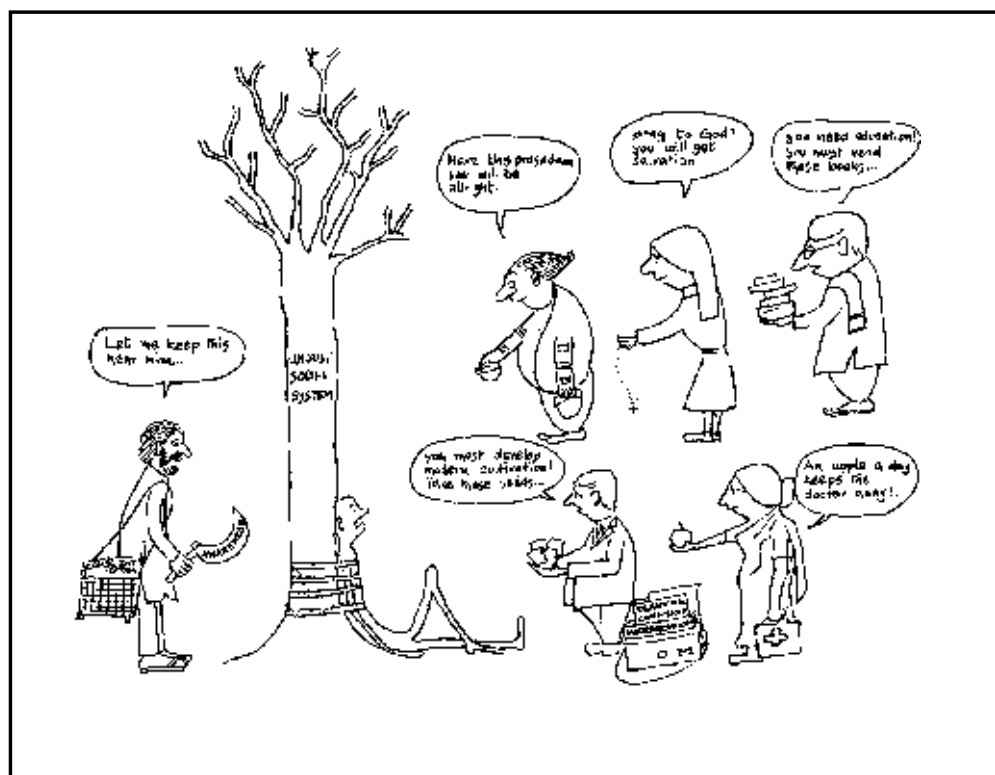
Ch. S. Sanyal
Vice President

H.S.H.
Treasurer

Dr. S. Sanyal
Secretary

CHC Cartoon Gallery





Thanks.....

We are very grateful to all the members of SOCHARA and of the Executive Committee who have contributed to the development and functioning of CHC, especially for their active participation in the governance of CHC.

We thank our donor partners Misereor, (Germany), Cordaid, (Netherlands), Sir Ratan Tata Trust, (Mumbai) and Medico International, (Germany) for their continued support for all our activities.

We deeply appreciate the support of friends, peers and associates of CHC, members of PHM-JSA - JAAK - MNI and other organisations, social movements and networks, who have been companions in CHC's journey

*I have the audacity to believe,
that people everywhere can have,
three meals a day for their bodies,
education and culture for their minds and
dignity, equality and freedom for their spirits.*

*I believe that,
what self-centred persons have torn down,
other-centered can build up...
I still believe we shall overcome.*

*- Martin Luther King, Jr.,
Nobel Peace Prize acceptance speech*

*“Washing one's hands off the conflict
between the powerful and the powerless means
to side with the powerful, not to be neutral”.*

-Paulo Freire

