# Society for Community Health Awareness, Research and Action

## ACTIVITY REPORT (CHC, CPHE, CLIC, CHC-TN PROJECT EXTENSION UNIT) 2008-2009

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## ANNUAL ACTIVITY REPORT

## 1<sup>st</sup> April 2008 - 31<sup>st</sup> March 2009

## Introduction

Community Health Cell is the functional unit of Society for Community Health Awareness, Research and Action (SOCHARA) and is a national resource centre for various organisations working on health and non-health issues. Promoting community health, based on the social paradigm, through policy action, training, mainstreaming, networking and the people's health movement continued to be our core thrust areas. We recognize that people's health is influenced by determinants that are deeply embedded in the social, political, economic, cultural and ecological fabric of life. Synergies of global and local action are necessary to influence these in a positive direction. This understanding led us to a substantial involvement in the People's Health Movement from local to global level during the past years.

## **Objectives**

The objectives of the Society provide a framework for CHC activities. They are

- To create awareness regarding the principles and practice of community health among all people involved and interested in health and related sectors.
- To promote and support community health action through voluntary as well as governmental initiatives.
- To undertake research in community health policy issues, particularly in
  - community health care strategies
  - health personnel training strategies
  - integration of medical and health systems
- To evolve educational strategies that will enhance the knowledge, skill and attitudes of persons involved in community health and development.
- To dialogue and participate with health planners, decision-makers and implementers to enable the formulation and implementation of community oriented health policies.
- To establish a library, documentation and interactive information centre in community health.

The activities for the reporting period 1<sup>st</sup> April, 2008 to 31<sup>st</sup> March, 2009 are presented under the following major heads:

- COMMUNITY HEALTH and PUBLIC HEALTH TRAINING
- COMMUNITY HEALTH PUBLIC HEALTH ACTION AND ADVOCACY
- COMMUNITY HEALTH NETWORKING
- COMMUNITY HEALTH LIBRARY, INFORMATION AND DOCUMENTATION (CLIC)
- PUBLIC HEALTH POLICY, ADVOCACY & RESEARCH (CPHE- Centre for Public Health and Equity)

## Silver Jubilee celebration of CHC

The year 2008-09 was the 25<sup>th</sup> year of CHC, which began as a Study-Reflection-Action experiment in 1984 with a small team of 4 people-Dr.Ravi Nrayan, Dr.Thelma Narayan, Gopinathan and Krishna.

A three day event was planned to commemorate the 25 years of CHC's journey in community health was celebrated from 4<sup>th</sup> December to 6<sup>th</sup> December 2008.

December 4<sup>th</sup> and 5<sup>th</sup> was alumni workshop organized at Navaspoorthi Kendra, Bangalore, which brought together alumni from various batches of the Fellowship Programme along with the associates of CHC to share their 'Community Health Journeys' on the occasion of silver jubilee. December 6, 2008 was the Silver Jubilee day which was organised at the Dr.Rajendra Prasad Auditorium of Bangalore Medical College, Bangalore.

## Silver Jubilee Day

December 2008 was a very important mile stone for CHC since it was completing 25 years after its inception in January 1984 and the first week of December saw a series of jubilee celebrations reported in the earlier session.

- RN and TN were facilitated as part of the co-initiating team along with various senior SOCHARA members and ex staff members on the silver jubilee celebration on 6<sup>th</sup> Dec 2009.
- The CPHE was formally inaugurated by Dr. Prem Chandran John- Co Chair of the Global Steering Committee and founder director of the Asian Community Health Action Network.
- CPHE team members participated in the jubilee workshop for CHC fellows that preceded the jubilee event
- The CD-rom for the Silver Jubilee of CHC, which included the compilation of CHC work over last 25 Years was prepared primarily by Deepak Kumaraswamy and released by Dr. Mala Rao, Director, Indian Institute of Public Health, Hyderabad. (See box)
- The silver jubilee celebrations were attended by Dr. Prem Chandran John (PHM/ ACHAN; Andrew Chetley, Director of Health Link/ Exchange, UK; Kumanan of PHM, New Zealand/ WHO representing the international partners of CHC during the last two decade.
- CPHE hosted a two day reflection on Organizational structure and challenges for the Global PHM as a preliminary step towards an organizational review being conducted by Andrew Chetley for Global PHM. This review was attended by Hani Serag, the current coordinator of the PHM Global secretariat in Cairo,( 2006-2008) Ravi, the earlier coordinator ( 2003-2006) and Prem John, the Co chair of the PHM Global Steering Committee and Kumanan Rasanathan representing the IPHU network and Brenden Donagan a PhD student from School of Oriental and African Studies, ( SOAS) London who is reviewing PHM India as a theme for a doctoral thesis.

#### The CHC Jubilee CD Rom

This CD Rom released at the silver jubilee celebrations of CHC/SOCHARA includes an introduction to CHC – by Thelma Narayan; two early foundational documents stressing the back ground study reflection and action experimentation by the co-initiators in the early years; a set of 7 CHC pamphlets over the years; 2 Newsletters and 14 Annual reports; 14 Key Publications of CHC; 67 Technical papers, articles, and reports and 49 power point presentations. The technical papers and PPT's are broadly classified into the sections:

i) Health Policy and Health Systems Development; ii) Health Human resource development; iii) Socio epidemiological aspects of communicable and non communicable diseases iv) Health research; v) Health as a social movement; and vi) Miscellaneous. This CD Rom put together for the jubilee is the first step towards a more interactive public health / community health learning tool that is being evolved for uploading on the SOCHARA website in the next year.

On the occasion of the Silver Jubilee of the Community Health Cell, a meaningful way to



celebrate it by bringing together different communities with diversified culture and expressed it through their medium of art. A special focus on 'Celebrating communities and community health' through expressions of art was organised on December 6, 2008 at the Dr. Rajendra Prasad Auditorium, Bangalore Medical College and Research Institute.

Exhibition on Health: The day began with an exhibition of posters on health a collection of

CHC over the years. Objectives of the exhibition were to depict community health action, to establish the link between socio-economic-political and cultural factors relevance to health, to demystify the concept of health and role of health movements. Posters on the following 20

themes were displayed - Violence Against Women, Disability, Human Rights, Consumer Rights, Genetically Modified (GM) Foods, Mental health, Drug Policy in India, Smoking and Tobacco Use. Globalization, Environmental Health, National Rural Health Mission, Maternal and Child Health, Corruption and Brain Drain in the Indian Healthcare System, Nuclear Race India, Nature's in Fury-Disastrous effects of natural Community calamities. Health,



Occupational Health, Bhopal Gas Tragedy, People's Health Movement (PHM), Jan Swasthya Abhiyan (JSA) and Jana Aarogya Aandolana, Karnataka (JAAK). More than 300 participants inclusive of students from medical, nursing, social sciences, humanities and law attended the programme.

**Cultural Programme** depicting health using art forms from Tamil Nadu and Karnataka were presented by various cultural groups, mostly from the progressive associations and linked to various social change processes by working with Dalits and women, who are partner organizations of the People's Health Movement of Karnataka and Tamil Nadu.

Students from Government Vellore Medical College performed a mime on



cultural integration depicting how religious extremism is dividing people and the need to affirm secularism and community integration.

The focus of the performances was to affirm cultural plurality and use various art forms as a medium of expression to portray and reach out to the communities with health messages and at the same time, enable community mobilization.



The post lunch session began with the release of publications brought out by CHC to commemorate the silver jubilee. They are – Defending the health of the marginalized, Beyond the waves, Kannada versions of The political economy of the assault on health, Equity and Inequity today- some contributing social factors and 25 Questions on Health and Human Rights. JAAK Newsletter, Building Blocks – an annual newsletter by the interns of the CHLP and a

brochure on CHLP.

## **Publications**

**I. Annual Newsletter** of the interns called **'Building Blocks'** was collated with inputs from the interns and printed. A hard copy has been enclosed in the Annexures.

**II. The CHLP pamphlet** was prepared as a tool of dissemination for advocacy of the Community Health Learning Programme. A copy has been enclosed in the Annexures.

**III**. **Modules in Kannada** were prepared and printed as reference materials for the CHLP. The following were printed:

- a) The rights approach to health and health care- A compiled review
- b) The political economy of the assault on health
- c) Equity and Inequity today- some contributing social factors
- d) 25 Questions on Health and Human Rights

All of the above have been translated into Kannada.

**IV. Defending the Health of the Marginalised** is a compilation of 4 papers prepared by CHC staff during the 2<sup>nd</sup> National Health Assembly, 2007. The chapters are-

1. Health for Dalit Communities

- 2. Health of the Urban Poor
- 3. Mental Health in India-An overview
- 4. Communicable diseases control programme

**V. The December 2008 Health Action** issue is a compilation of case-studies, personal journeys, stories from grassroots and policy responses at local and national levels in areas of women's health empowerment, antitobacco activism, health as a human right, community monitoring, environmental and occupational health challenges, and challenge of governance of the CHC team and CHC Associates. This documentation is useful to understand the concept of health as a social movement.

## **Saluting Fellow Travellers**

Rakhal presented the journey of CHC and its association with innumerable friends, associates, professional colleagues; the work of CHC guided by the objectives of the SOCHARA; and the various kinds of engagement of CHC in health action. The three wise men Dr.C.M.Francis, Fr.Claude and late Dr.George Joseph who helped CHC in its beginning and formative years were remembered and felicitated.

SOCHARA members, senior associates of SOCHARA- CHC, partners of CHC from the People's health movement and the various professional organizations were felicitated to express our gratitude and appreciation and in the spirit of celebration as CHC steps into the



25<sup>th</sup> year.

Prof. L.C. Jain, a long time associate of CHC delivered the key note address to commemorate the  $25^{th}$  year of CHC's contribution to the community health movement.

CHC ex staff members and staff members who were associated for a long time period were also felicitated. The alumni of the Community Health Fellowship Scheme

(2003-2007) were also felicitated with a certificate of participation.

**Launching of CPHE for Public Health and Equity:** CPHE is new sub unit established by SOCHARA was formally launched on Silver Jubilee Day.

Short Film Festival: By the end of the day short films focusing on the diversity, plurality, vibrancy and hope towards 'well-being' were screened. Films were 'Between the

lines'- lives of migrants and atrocities faced by them, 'Random voices from Kashmir' - the aspirations of peace of the common man in Kashmir, 'Flight 208' is a satirical take on globalization and the politics of economies and power directed by Dr. Parvez Imam, a psychiatrist and a short film maker. 'Puttajji' – misconception about breast feeding the first milk to the new born infants was made by Mr. Krishna, co-initiator of Community Health Cell. 'Knowledge Systems and Relevance - A



Documentary of Live Treatment of Snake bite' was filmed by Dr. Magimai Pragasam an associate of CHC, who is a development communication consultant and documentary film

maker. America-America' is a satirical music video severely indicting America's role in escalating world conflict and another musical video showing the struggles of tribal and rural communities in India filmed by noted film-maker and activist K.P. Sasi.

## COMMUNITY HEALTH and PUBLIC HEALTH TRAINING

## ← Community Health Learning Programme (CHLP)

The second phase of CHLP full-time fellowship programme had commenced in January 2008. The first Advisory Committee meeting took place on 8<sup>th</sup> April, 2008 at CHC. The advisory committee met in April 2008 and March 2009 every year to discuss on aspects of selection of interns, field mentoring process, training components and innovative methods of learning.

A two day (April 8 and 9, 2008) National workshop on "Learning Programmes in Community Health and Public Health" was organized to share about the current Community Health Learning Programme, and the newer significant initiative in Madhya Pradesh, with key resource persons in community health in India. There were discussions to evolve the objectives, principles, key components of the of the two year fellowship in M.P. The workshop ended with sharing of ideas on networking and collaboration of alternative efforts such as the CHLP or the MP initiative and also efforts to mainstream alternative sector inputs into public health training and education.

A report of the proceedings of the national workshop was compiled and shared during the Silver Jubilee Celebrations in December 2008.

#### **Internship Programme**

The  $2^{nd}$  phase of the Community Health Fellowship Programme started in January 2008 and the first batch of interns for the full time programme of 9 months were selected in April-May 08. Seven interns completed the full time internship (June '08 – Feb '09) and three as flexible interns. The orientation programme was held at CHC in June '08, covering a wide range of issues pertaining to community health. The



interns visited various organisations working on issues related to community health and health rights. They were placed with various organizations based on their learning objectives between June '08 to Nov '08 and were guided by the field mentors and the CHC team members.



Communication' by Dr. Mohan Deshpande was organised to explore various methods of art, role plays, debates, songs etc to communicate on health. At the end of six months of internship, the interns collective feed back highlighted the flexibility to pursue their learning objectives and the reflective learning processes as being unique to the CHLP.

Each intern was involved in activities of advocacy campaigns on community monitoring, training on health rights, research on health issues of the marginalized pourakarmikas and exploration of communities health needs during the months of Dec '08 – Feb'09.

The second batch of interns were selected through a formal interview process in March 2009.

The preparatory work of review of curriculum and the training programme was in progress.

#### PROFILE OF INTERNS – COMMUNITY HEALTH LEARNING PROGRAMME April 2008 - March 2009

**Varsha H Gaikwad** is the President of the Positive Women's Network, Maharashtra. She is currently working in the Government Hospital Nagpur as a Social worker in the Community care centre for people living with HIV-AIDS.

**Sr. Ria**, a nurse–administrator is currently in the Holy Cross Hospital, Chikamagalur exploring ways of strengthening the community health programmes.

**Sudha Nagavarpu** is supporting community based development initiatives of Sangtin Kisan Mazdoor Sangathan (SKMS) in Sitapur, UP. She is involved with Association for India's Development in the US.

**Sabyasachi** is presently working with Rural Innovations Network, Chennai and is pursuing his interest in working on relevant and appropriate models of technology in rural health care systems.

**Savitri** has been associated with the Vimukti Social Cell and Jagrutha Mahila Sangatan, Potnal in raichur district. She is interested in expanding her knowledge on health issues and work on women's health issues.

**Lakshmi** is working with the Corporate Accountability Desk Chennai. She is involved in providing support to a grass roots organization in Mettur (Gonur West Agriculturists Development Association) to address the concerns of communities affected by industrial pollution.

Aditya is exploring the various dimensions and linkages of environment, development and health and is presently Research Assistant in the Regional Occupational Health Centre, Bangalore.

**Jeyapaul** is passionate about improving the lives of under privileged children, specifically children living with and orphaned by HIV and AIDS. He is started work in Nammakal district, TamilNadu to work among children living with HIV-AIDS.

**Karibasappa** is establishing community based work on issues of Right to Food, Right to education and Right to Work and Right to Health among marginalized communities in Haveri district. He is also a resource person for the Jana Arogya Andolana, Karnataka.

**Sapna** is involved in research and documentation work on issues of mental health in the Basic Needs, India at Bangalore.

#### Alumni Workshop

The two day workshop was attended by alumni from current batch of interns, SOCHARA members and other resource persons. The first day was devoted to understanding the 'social paradigm' in health from experiences of SOCHARA members. In the afternoon, Professor Abdul Aziz, retired from Institute for Social and Economic Change (ISEC) explained the macro reality of 'What is happening to community health in today's globalized world?' Naveen Thomas, Alumnus and ex–staff CHC narrated the challenges of Drug Policy in India in the context of globalization and the trade policies using the example of campaign against Novartis. Ameer Khan spoke on the issues of the recent



closure of government vaccine production units in India and its implications on health care access.

There were four presentations in the session on 'Community health in today's identity politics'. Ms. Jennifer Liang from the ANT, Assam shared about the challenges of health care access and the health status of communities in ethnic conflict situations or other situations of forced displacement. The issues of Gender and caste in community health work were shared by Ms. Maheswari, a Dalit woman activist from Rural Unit for Women (RUWSEC) in Tamil Nadu and Ms. Manjusha, alumnus and presently working as an Animator in Development Programmes in Ahmednagar, Maharashtra. Lastly, Ms. Sathyasree, alumnus and Advisory Committee Member shared about the issues relating to the Right to health of sexual minorities based on her work with SANGAMA, a Bangalore based organization advocating for the rights of sexual minorities.

In the session on the challenges of community health work and the role of civil society, Dr. Thelma traced the history of the health system in India and the role of the alternative sector (like the NGOs and the health movements) and explained the potential of the NRHM in strengthening the public health system and the role of the communitisation components of the NRHM.

Dr. Regi and Dr. Lalitha from Tribal Health Initiative, Sittilingi, Tamil Nadu shared the community health and development initiatives (tribal craft and farming initiatives) among the tribals. They explained the role of community health workers to increase awareness among tribal communities about health, improving maternal and child nutrition and decreasing maternal mortality. Dr. Lalitha shared the development initiatives – the farming and craft programmes that supported people's livelihoods and also helped revive traditional tribal practices.

Dr. Chandra, a retired Professor of Pediatrics shared the learnings from the Community Monitoring of NRHM in Tamil Nadu. Similarly Mr. Juned, alumnus and team member at Madhya Pradesh explained the challenges of community monitoring in the tribal villages in Madhya Pradesh. Ms. Jennifer Liang shared the role of ASHA's in NRHM in Lower Assam. Ms. Varsha, CHLP intern shared her learning about people's increased level of awareness and greater visibility of the health systems strengthening among State officials following the Public Hearings ( as part of Community Monitoring) in Maharashtra.

The Alumni workshop enabled a better understanding of the communities' struggles of resistance and resilience for their right to health through these practical examples.

## "2<sup>nd</sup> State Level Training on Health and Human Rights" in Kannada



A three-day training was held from 19<sup>th</sup> to 21<sup>st</sup> August, 2008 at Indian Social Institute (ISI) for the health activists of Karnataka . Twenty nine participants from various NGOs from 13 districts attended it. Based on a three day module the following topics were covered - to understand rights, health rights, primary health care, health systems, globalization, liberalization and privatization and its impact on health, patents and drugs, and role of various health movements in the country and at the global level were discussed. NRHM and

community monitoring and planning and the role of NGOs and CBOs were stressed to the participants.

Resource Persons were Sharadha Dabade from Jagruti- an NGO working on health rights in Belgaum, Prasanna (AID-India), Prof. Abdul Aziz (Economist, Retd Professor & Head of the Dept. of Economics, Institute for Social and Economic Change, Bangalore), Akila Vasan (FRHLS), Dr. Janardhan (Psychiatrist, Basic Needs India – working on mental health, Bangalore), Obalesh (JAAK) and CHC team members (Premdas, Vinay and Sudhamani).

## + Trainings to strengthen capacities of JAAK members at the districts

On 15<sup>th</sup> & 16<sup>th</sup> December, 2008 the two day capacity building for the activists of Koppal district was held at Hemmagudda of Gangavathi taluk. Twenty three participants from three organisations attended it. An action plan was drawn by the participants to be carried out in the following months. That is to carry out a survey of the status of the PHCs in their work areas, to share the information gained through the training to other members of their organisation, to record instances of denial of health care and to write letters to officials of the Department of Health and the Lokayukta. A district core committee was formed to take forward the JAAK activities in the district.

On behalf of 10 local grass root level CBOs, 52 members, 30 female and 22 male members participated in the training programme held on 26-27<sup>th</sup> November 2008 at Bidar. They were from the unorganized sector like domestic workers union, APMC Amati Sangha and others.

They were introduced to concepts of health, right to health, social determinants of health, primary health care, entitlements under the



NRHM, role and function of Subcentre and Primary Health Centre. The group also discussed action points to be implemented. Akhila and Obalesh were resource persons for the training.

In Bellary district, the training for the cadres was held on  $22-23^{rd}$  December, 2008 at Sakhi office, Hospet. Forty five individuals from various organisations (including students, women SHG members, media persons etc) in Hospet and Bellary had participated. Premdas of CHC, Obalesh of JAAK, Karibasappa CHLP intern and Bhagya Lakshmi of Sakhi were some of the resource persons. At the end of the two day workshop participants came up with an action plan – to carry out a situation analysis of the PHCs, to train the local activists on health and health rights, to record the denial cases, letter campaign & to collect information regarding the Village Health and Sanitation Committees (VHSCs).

Training on health and public health to the staff of MAYA

MAYA (Movement for Alternatives and Youth Awareness) is an organisation working on the issue of early childhood care and education in Karnataka. They had requested CHC to give a day's training for 25 coordinators on health, health rights and regarding the services of primary health centres and schemes available from the government. Premdas and Sudhamani from CHC rendered a day's training on 11<sup>th</sup> August at Labournet office of MAYA at K.R. Puram, Bangalore.

## COMMUNITY HEALTH NETWORKING

• Organising the Unorganised Sector: Challenges and Shared Experiences

The workshop was organised by the Garment and Textile Worker's Union (GATWU) and the Garment Workers Women's Front - Munnade on 23<sup>rd</sup> and 24<sup>th</sup> April, 2008 at SCM House, Bangalore. The main aim of the workshop was to share experiences and identify challenges of the different unorganised worker's groups and also to identify common themes where there could be some collective collaboration and strategies. Dr. Sukanya from CHC participated in it and shared about health issues and said that it could be an important point for all groups to collectively work on an existing platform – JAAK (Jana Arogya Andolan- Karnataka).

The participants were from GATWU, Munnade, Stree Jagruthi Samiti, Domestic Worker's Union, Distric labour Union from Bidar, Hospital Worker's union representatives, Anganwadi workers union, Vimochana, Sangama, Hengasira Hakkina Sangha, Alternative Law Forum, Cividep, Saadhana Mahila Sangha, Karnataka Sex worker's union , Saamana Vedike and Community Health Cell.

## ← Community Health Workers Dialogue



CHC organised and facilitated a two day workshop for Community Health Workers of Karnataka on 10<sup>th</sup> and 11<sup>th</sup> September 2008 at Navaspoorthi Kendra, Bangalore to commemorate the 30<sup>th</sup> Anniversary of the Alma Ata Declaration in a meaningful way. Twenty seven community health workers and health activists came together to share their experiences, challenges and hurdles faced by them in Primary Health Care.

Districts	Organisations	
Raichur	<ul><li>Jagrutha Mahila Sanghatan (JMS)</li><li>Navajeevan Mahila Okoota (NJMO)</li></ul>	
Chamarajanagar	Holy Cross Comprehensive Rural Health Project (HCCRHP)	
Kolar	<ul> <li>Grameena Mahila Okoota (GMO) Association for Physically Disabled (APD)</li> </ul>	
Chikamagalur	Aikya	
Belgaum	Jagruti	
Davangere	Nirman	
Chitradurga	Karuna Trust	
Mysore	Karuna Trust	

## Organizations of the participants

Following resource persons from CHC and other organisations gave relevant inputs to the participants. Dr. Suparna an Ayurvedic Physician working with FRLHT, Fr. J. Chittoor of Jeevadaru, Dr. Janardhan of Basic Needs, E. Premdas, Sudhamani and Dr. Deepak Kumaraswamy of CHC.

Participants were of the opinion that for the first time they received inputs regarding mental health and disabilities. They requested to conduct some more sessions on these areas so that they could identify and help the persons suffering from mental illness and disabilities in the communities that they are working with.

The two day workshop concluded by felicitating the CHWs and health activists. They were given posters, books, herbal plants and seeds to be used in their area of work.

## STRENGTHENING PEOPLE'S MOVEMENT FOR HEALTH ADVOCACY

## ✤ State level meetings of JAAK

State level JAAK meeting was held on 17<sup>th</sup> April, 2008 at Centre for Youth and Cultural Development, Okalipuram, Bangalore to focus on the forth coming State election. The objective was to plan out for political lobby on health rights. JAAK core group had prepared Karnataka Health Policy Brief, which was discussed in detailed and disseminated to all organisations and sanghatans in the respective districts. To have dialogues with the contestants regarding the health policy brief and to create awareness among the community/voters to demand for their health rights. Discussed regarding NHRC's public hearing to be held in the five districts of Karnataka. All the organisations were called to play an active role in public distribution system and NREGA and its importance in linking it to health. JAAK would be involved in Community Monitoring and Planning of NRHM in four districts (Chamarajanagar, Gadag, Raichur and Tumkur) was informed to the participants.

## $\bullet \qquad 2^{nd} State level meeting of JAAK$

On 21<sup>st</sup> July, 2008 JAAK State level meeting was held and partners from 13 districts participated in it by sharing the district level activities and a plan of



activities for the coming months was prepared. At 3.00 pm all the members met the Director of Lokayukta for a dialogue on the corruption in the public health system.

## $\bullet \qquad 3^{rd} State level meeting of JAAK$

State level meeting was held on 16<sup>th</sup> February, 2009 at the CMAI, Bangalore to discuss and finalise the Public Hearing to pressurize the government to look into the health needs of the people. This would provide a platform for the people from the grassroots to voice out their problems. The video documentation of denial of health care facilities is in process would be screened on the day. March 31<sup>st</sup>, 2009 has been planned for this event to be held in Bangalore at the Town Hall. The meeting was attended by JAAK partners from 13 districts and has agreed to mobilise the community for the event and to record the denial cases.

## • Representing health movement at the public hearing of Campaign and Struggle against Acid Attacks on Women (CSAAAW)

CSAAAW organised a public hearing on the issue of increasing acid attacks on women and to bring to light the lethargy and inaction of the State on 24<sup>th</sup> July 2008 at the Senate Hall of Central College Campus. Premdas of CHC was a jury member on the panel consisting of human and women's rights activists.

## COMMUNITY HEALTH / PUBLIC HEALTH ACTION AND ADVOCACY

Capacity Building for People's Participation in Public Health System

#### Community Monitoring and Planning (CMP) under NRHM in Karnataka- CHC as the nodal organisation for Raichur District

The pilot phase of community monitoring and planning started in Karnataka State as Karnataka who added as the 9<sup>th</sup> State for the Pilot Phase of Community Monitoring Programme. CHC took responsibility for Raichur district as nodal organisation.

Two day preparatory was held on 30<sup>th</sup> April and 1<sup>st</sup> May in VGKK, Mysore to discuss budget and action plan of the CMP in the four districts. Facilitating organisations along with their partnering organisations in the districts participated in it.

CHC facilitated meeting on 9<sup>th</sup> May, 2008 at Samuha, Deodurga in Raichur district to finalise the CMP project in the district and how it would be taken forward by the partnering NGOs namely, JMS, NJMO and Samuha. Each of them had identified three primary health centres and five villages under each PHC in their respective taluks – Manavi, Raichur and Deodurga.



Five day TOT was organized at DIET (District Institute for Education and Training) at Raichur for taluk level resource persons involved in Community Monitoring and Planning project of NRHM from  $15^{th} - 19^{th}$  July, 2008. The five day sessions were conducted by the following resource persons – N. Prabha (BGVS, the state coordinator for CMP), N. Sudhamani (CHC) and Karibasappa (JAAK,

Davanagere, CHC fellow). A total of forty participants were trained during the five day session.

The taluk level resource persons started training the members of village health and sanitation committee (VHSC) in those villages identified to carry out the community monitoring and planning of NRHM. By the end of September the training of VHSC members, formation of PHC committees and public hearing at the PHC level came to a close.

## ✤ VHSC Capacity Building:

The trained personnel of respective organisations took charge of the villages under chosen PHCs to train and build the capacities of Village Health and Sanitation members.

## + Preparation of Report cards on Health Services:

The field co-ordinator having trained the communities in 135 villages, prepared report cards on the availability and quality of health services in PHCs.

#### ✦ Public hearings:

CHC being the nodal organisation for Community Monitoring and Planning in Raichur district facilitated the public hearings in Raichur district in the nine PHCs. Three PHCs per taluk i.e., Raichur, Deodurga and Manvi saw people turning up in huge numbers to participate in the public hearings. These public hearings were conducted at the end of five month long process of interacting with the public health system, the local PHC, local communities and the VHSC members. In the public hearing which was designed as a dialogue with the public health system, the purpose of NRHM, the objectives of Community Monitoring and the importance of community participation in the process of strengthening public health system was emphasized. The CMP team presented the findings on the status of the functioning of PHCs, the availability of services, the implementation of

various schemes such as Janani Suraksha Yojane, Bhagyada Laxmi Baramma, Madilu etc. While the dedication of some of the Medical Officers, ANMs was acknowledged publicly, the deficiencies and areas of improvement were also pointed out. The women, representatives of Dalit communities, Self-Help Group Members shared their experiences on the kind of



treatment received, the approach and attitude of the staff. Some of them had to share the most bitter experiences of their lives of being denied health care, the services not being available, the medicines being prescribed to the medical stores constantly etc.

Many concerned citizens pointed out the unhygienic and poor quality of infrastructure in the PHCs and the crumbling staff quarters. A dialogue was facilitated between the staff, the Panchayat members and the community on how to improve the health system. In the end, a PHC monitoring Committee was formed which will have the responsibility of bringing community issues on health for the discussion.

## • District level Public Hearing of CMP under NRHM

Raichur district level public hearing of the Community Monitoring and Planning Project of NRHM was held on 29<sup>th</sup> January 2009 at the premises of the Office of the District Health Officer. Around 300 members from the community along with their elected representatives of the panchayats from the three taluks participated in it. Following officials were present for the public hearing - District Health Officer, RCH Officer, Taluk Health Officers of Raichur and Manavi, Medical Officers, ANMs, AWWs of the respective PHCs where monitoring was carried out, CDPO and other officials from the allied departments. NGOs of the concerned taluks played a vital role in organizing the event.

The official representative informed the participants about the various schemes under NRHM and who are entitled to it, the lack of infrastructure to be rectified at the earliest especially the vacant positions of ANMs to be filled, the number of PHCs that are made  $24 \times 7$  were specified.

Community members who were denied of their entitlements and access to medical care spoke about it and demanded to take action against the concerned personnel. There were heated arguments between the concerned health workers and the higher officials.

The lack of facilities in the PHCs were brought to the notice and the District Health Officer asked the concerned Medical Officers to utilize the untied funds for providing drinking water and toilet facilities at the health centre.

Community members demanded the District Health Officer to check out the reasons for the absence of the Deodurga Taluk Health Officer at the public hearing as he had not participated even at the Taluk level hearing and to take stringent action against him. People brought to the notice of the officials that five infants had died immediately after delivery at the Yeragunta village during the period 15 December to 15 of January and to conduct an enquiry into it.

The public hearing provided an opportunity for the community members to come together and have a dialogue with the officials and get their commitments to the problems faced by them in accessing health care.

## ★ State level Janasamvada by JAAK- Demanding the enactment of National Health Act

Two years of continuous work at the district levels on revitalising primary health care had brought to light the denial of health care. Hence the members of JAAK decided to hold a public hearing at the state level to bring to the notice of the government the health denials that is happening on a large scale in the public health system. This event was organised on 31<sup>st</sup> March, 2009 at the Sir Puttanna Chetty Town Hall, Bangalore. More than 1500 participants from 17 districts came together to raise their voice against public health system's irresponsiveness to access primary health care.

Janasamvad or Public hearing was inaugurated by the Swamiji from Nidumamidi Math and delivered the key note address by emphasizing on Education, Health and Employment as basic human necessities and explained the roles of corruption and communalization being responsible for current scenario. He expressed that leaders of political parties talk pro-people and practice anti-people things, the current scenario is due to lack of comprehensive policies on Education, Health and Employment and there is a need to work towards it.

the inauguration personal After and video testimonies of denial cases were presented to the panelists, government officials and the public. The panelists were Dr. Prakash Halagi, Dr. Meenakshi Bali, Dr. Thelma Narayan, Mr. Srinivasachar, Mr. Madanagopal (Health Secretary –GOK), Dr. and Jayashree Hon. Justice. Gopalagowda (Karnataka High Court). Denial cases presented were as follows: Snake bite death. T.B. death. maternal deaths, death due to mal-nourishment, denials and discrimination among the vulnerable communities such as disability- physical and mental, sexual minorities and HIV positive.



Some preliminary findings of the study on the

"Quality of Care in Pregnancy and Delivery Care" by Belaku Trust were shared to the audience. The other issues raised were about the ESI entitlements to the garment workers, availability of life saving and essential drugs and urban health issues.

Some of the recommendations from the panelists were as follows:

- To set up grievance redressal mechanism
- Disability compensation
- Legal Action and Staff regulation mechanism for corruption
- Expressed the need to transfer information to the people
- Need to work on the issues in medical education
- Stressed on improving the facilities at public health sector especially at PHC
- Having physical infrastructure and manpower alone is not important but there has to be quality in the services
- Karnataka State Legal Services Authority is looking into the need of initiating medico-legal clinics in government hospitals across the state

Secretary of Health Services, GOK, said that the emergency health care services will be expanded and he does understand the shortage of health programmes and schemes. There is a need for people's participation and their capacities to be built by the NGOs.

A memorandum was submitted to the Government demanding for the Enactment of National Health Bill, to appointment managers/ administrators in public health systems as done in the states of Gujarat and Tamilnadu, to stop privatization of health care in all forms including



outsourcing, public private partnerships, to list out essential medicines and consumable drugs and to procure drugs and vaccines from government/ public sector companies, to fill up the vacancies in the state government with immediate effect, a compulsory five year service in rural areas from doctors and nurses trained at the government institutes while fulfilling the basic infrastructural needs of health care staff and to address the nutritional needs of the children by universalizing ICDS services with two worker model. At the end of the day a human chain was formed in front of the Town Hall by the people demanding for the actualization of the memorandum.

## Addressing the concerns on issues

## ← Community Health and Environmental Skill Share (CHESS) Workshop

The CHESS workshops have been held previously in 2001,2002 and 2004 to ...... The focus of the fourth edition of CHESS workshop was in Resource Sharing and Strategy Building on 'Prioritizing worker's health'.The CHESS workshop was facilitated by CHC and Corporate Accountability Desk (CAD) and was held in Bangalore between 28<sup>th</sup> and 31<sup>st</sup> August 2008 at Vishranthi Nilaya. Over 80 participants representing environmental and occupational health activists, trade union leaders, lawyers, workers, professionals from health and allied fields from all over India – including Jharkhand, Madhya Pradesh, Gujarat, Delhi, Orissa, Punjab and the Southern states attended it. The groups represented different types of work – garment industry, plantation workers, construction workers, sculptors, pourakarmikas, mining and quarrying, agricultural workers. Most of them were unorganized workers with no social security access and lack of health care.

List of organizations UNIONS- New Trade Union Initiative (NTUI); Indian National Rural Labour Federation, Subhiksham Union, Chennai Metro Construction Workers Union; AITUC; Dist Labour Union, Bidar; Garment and Textile Workers Union; Peermedu Thotta Thozhili Union; Unorganised Workers Federation: Karnataka Domestic Worker's Union PEOPLE"S GROUPS: Beedi Karmikara Sangha; Patthar Khadan Mazdoor Sangh; Bandhkaam Sangathan; JOHAR.Jharkhand: SRED.Arakonam: Mazdoor JEEWA, Chitradurga; JSA, India VOLUNTARY ORGANIZATIONS: Kheti Virasat; Living Farms; MLPC; ANROAV; OHSA, Gujarat; OHSC, Mumbai; Shilki Kendra; Sakhi, Hospet; KSSF, Wyanad; Samatha Foundation; QWARIDS, Bangalore; Hazard Centre; Greenpeace; Cividep; Alternative Law Forum; CAD, Chennai; CHC; AMRC, Hongkong

The resource persons included the staff of CHC- Dr.Rakhal and Dr.Sukanya, and staff of CAD, Dr.Jagdish Patel, Dr.Parikh and a team from Asia Monitor Resource Center (AMRC),



Increase in casualisation of labor;

Hongkong.

The first two days involved mapping of the changes in the occupational sector, identifying concerns in each sector and sharing of resources. With the changing situation in occupational health the participants identified the following major changes:

The government was becoming openly pro-corporate sector, by eroding democracy and weakening governance and statutory institutions;

Old diseases continued, newer industries brought in more complicated problems;

- Increase in toxic trade dumping;
- Perception of increased risk of cancer,
- Loss of agricultural livelihoods increasing rural desperation and migration.

Major strategies identified for working together as a group were: a concerted campaign on ESI, revitalizing the campaign on dust related occupational diseases, to come up with a People's Report on Occupational Health, to begin pilot testing surveillance systems and organizing the unorganized sector as well as to address rural distress.

The next two days the focus was to train the participants on Occupational health - concepts of hazards at chemical workplace, toxics at workplace and their health effects through participatory methodologies. The groups did mapping of their workplace (to identify hazards. They also understood the effect of toxins on the body through the 'Toxic T Shirt' exercise. The emphasis was to impart a set of skills important for occupational health to the trainers from each organisation. This training



was facilitated by the Asia Monitor Resource Center (AMRC), Hongkong.

#### Supporting health initiatives for Garment women workers

The Garment women workers front called Munnade wanted to understand the types of health problems faced by the women workers and their families, to understand the access to health care for workers in the ESI medical services system and to initiate community health activities through their participation. They had sought the support of CHC in facilitating community health activities in one area where women workers resided and the Munnade had started field activities.

A regular monthly medical clinic in Nayandahalli was initiated in solidarity to the 'Free Binayak Sen' Campaign on May 18,2008. Dr.Sukanya, Dr.Adithya, Dr.Shilpa and Dr.Lakshminarayana examined 200 women workers and their family members.

In the following months, the clinic was run by Dr.Sukanya to document the types of health problems of the community and also to provide appropriate medicines free of cost and to ensure proper referral. The Association for India's Development (AID) and CHC supported the initial purchase of drugs. Dr.Shanthi Raman, pediatrician from Australia and member of PHM, Australia attended the clinic for few months and supported the activities. Follow up in the community was done by Ms.Yasodha of Cividep,an organization that was working in capacity building of the Munnade. The clinic took place in the following months: May, June, July, September, October, November and December 2008, January and February 2009.

Totally, 20-30 women workers with their family members (children and elderly) visited the clinic. Some of the common problems identified among the women included easy fatigability, mild to moderate anemia ( clinical),back ache and specific musculoskeletal problems due to work practices. Most children were malnourished and women complained that they didn't have enough time to take care of the children and children often were in the habit of eating food products from shops.

The clinic served the purpose of building rapport among the women workers, understanding the social and economic constraints in accessing nutritious food for their family; stress at workplace; and also how and why they accessed private care than the ESI.

One of the important requests was to continue the medical clinic so as to build awareness on community health issues and further explore their capacities in understanding the health concerns, the health care system and how to address these concerns.

#### Identifying health concerns of Pourakarmikas with JEEWA, Chitradurga

Following the CHESS workshop, JEEWA- an organization in Chitradurga working for the upliftment of Dalit communities working as pourakarmikas sought CHC's support in mapping out the health problems of the workers so as to build a larger campaign on right to dignity at work, safe working conditions and access to medical benefits. Dr. Adithya as CHLP intern and Mr.Obalesh visited Chitradurga and interacted with the workers to understand the types of problems faced by them through group discussions. This information was used to follow up with capacity building on health for the activists of JEEWA.

#### Agenda – issue on Occupational safety and health

Dr. Rakhal and Dr. Sukanya from CHC and Mr.Nityanand and Ms. Madhumita Dutta of CAD supported as editors and authors, the compilation of several articles for the special bulletin on Occupational safety and health titled 'Collateral damage' released by the Infochange India in their magazine called 'AGENDA'. The issue was released on widely appreciated. The articles on the plight of the Garment women workers and their health concerns and the roadblocks in accessing the ESI system were facilitated by Sukanya. The article on neutrality of science was written by Rakhal.

#### Solidarity and participation

- Dr.Rakhal and Dr.Sukanya participated in the discussion on the methodology of the study on the 'Status of children's health in villages of SIPCOT industrial area, Cuddalore' with the Community Environment Monitoring team –Ms.Shwetha, Mr.Arul and Ms. Maria on October 22<sup>nd</sup>, 2008. This was followed by further discussions over skype.
- Dr.Sukanya was a resource person in the training on 'Community environment monitoring' on Sept. 17<sup>th</sup>, 2008 at Cuddalore for the communities affected by dust (Dalmia- a cement factory) and Nagapattinam ( oil leaks of the Oil and Natural Gas Commission). She spoke on concept of health and disease, body mapping of health effects and why communities should do health monitoring. The training was organized by the Sipcot Area Community Environment Monitoring group (SACEM).
- Dr.Sukanya attended a workshop on 'Occupational Health in the IT Industry' organized by the Regional Occupational Health Centre, Bangalore on 11<sup>th</sup> March, 2008. Dr.Ravi Narayan was a resource person in this workshop.

#### Solidarity and Participation in Community Health Action, Training, Networking

 Talk on health rights and primary health care was delivered by Vinay and Sudhamani to the 35 participants of the course on "Health and Human Rights" organized by Indian Social Institute, Bangalore on 25<sup>th</sup> April 2008.

- Vinay and Sudhamani were invited to give lecture on 'Drawbacks in health development and Political economy of health' by the Women's Unit of Indian Social Institute, Bangalore on 7<sup>th</sup> August, 2008. They organised a workshop on 'Health Rights for Women' for the staff of NGOs working on women's issues, about 50 participants were present.
- Mr. A.T. Babu the State Convenor of National Alliance for Peoples Movement (NAPM) was assassinated by liquor mafia on 22<sup>nd</sup> July, 2008. Mr. A. T. Babu, who was actively involved in protesting against the opening of liquor shops and bars in the residential and educational areas, was murdered.
- CHC team supported the campaign to bring justice to Mr. A.T Babu on July 24<sup>th</sup> and participated in the protest organised by NAPM on M G Road, Bangalore.
- CHC was involved in the documentation of Nandagudi Special Economic Zone (SEZ), which is displacing 33 villages.
- Dr.Sukanya was a resource person in the training programme on 'improving access to quality health care for the Urban poor' organized by the Institute of Public Health on Sept. 23<sup>rd</sup>,2008 held at CMAI for organizations in Bangalore urban. A checklist for assessment of health services and facilities was made for the participants to understand the status of urban health care systems. Follow up sessions was held to understand the learnings of each group.
- Mr.Premdas spoke to the BSW students of BIRDS college, Belgaum on concepts of Right to health on October 19<sup>th</sup>, 2008.
- Mr.Premdas facilitated inputs on concept of right to health for the partners of of Norwegian Human Rights Organisation on December 19<sup>th</sup>, 2008 in Bangalore.
- Students of Master of Social Work from Dharmamurthi Rao Bahadur Calavala Cunnan Chetty's Hindu College, Chennai visited CHC on 20<sup>th</sup> January, 2009 as part of their study tour. A team of 13 students along with their teacher spent half a day at CHC. They were oriented towards health and social determinants of health by Dr. Ravi Narayan, other team members briefed them about CHC's vision



and mission and the various activities carried out in the State of Karnataka and Tamil Nadu.

- Half a day training session on Health and Health Rights and Jana Arogya Andolan was conducted by Sudhamani for 25 CHAI members at Dodda Bommasandra on 9<sup>th</sup> January, 09.
- UGC sponsored one day workshop on 'Women's Rights are Human Rights' was organised by the Department of sociology, human rights & legal awareness cell of Mount Carmel College, Bangalore on 17<sup>th</sup> January 2009. The aim of the workshop

was to create awareness on the Violation of the Rights of Women and the Laws to protect them from various social evils. More than 200 students and academicians from ten colleges along with NGO representatives participated in it. Sudhamani from CHC made a presentation on "Women's Health Rights".

- On 3<sup>rd</sup> March 09, Mount Carmel College invited Sudhamani of CHC to talk about the People's Health Movement in Karnataka to the final year students of the department of Sociology.
- Ramachandra and Shajeeda First year MSW students from Bangalore University were field placed with CHC for three months as part of their course work.

## Campaign for the Release of Dr. Binayak Sen.

## ✤ FREE Binayak Sen Campaign!

Dr. Binayak Sen, a public health doctor and human rights activist in Chattisgarh was detained on 14<sup>th</sup> May 2007, under the oppressive laws of Chattisgarh Special Public Security Act 2005 (CSPSA) and the Unlawful Activities Prevention Act.

As a part of countrywide efforts in solidarity to free Binayak Sen a campaign was organised by CHC in Bangalore and Chennai. Given below are activities carried out at Bangalore and Chennai.

Bangalore	Chennai
29/4/08 – Planning meeting was held at old ALF	24/04/08 -Press Conference at Press Club, Chennai.
office. Representatives from various NGOs and	Topic-Dr. Binayak Sen receives top international
interested individuals attended it, to chalk out the	human rights award while still in prison. Press
programmes for 14 <sup>th</sup> May.	conference was addressed by Dr. Rakhal of CHC.
14/5/08 – Candle light vigil at Town Hall,	14/5/08 – Demonstration to demand unconditional
Bangalore was held. More than 150 human rights	release of Dr. Binayak Sen and to protect the rights
activists and media persons gathered. Petitions to	of human rights defenders was held at Memorial
the President, Prime Minister and Chief Minister of	Hall, Chennai
Chattisgarh were signed by the participants. Prof.	
Hasan Mansur and noted actor and playwright Mr.	
Girish Karnad released the book on Dr. Binayak Sen	
in English and Kannada. Event was covered by both	
Kannada and English news and television media.	
18/5/08 – The women garment workers front –	29/5/08 – Human rights artists performed 'Attam,
MUNNADE organized 'Free Binayak Sen Medical	Pattam and Kuthu' to celebrate the conferring of
Camp' for garment workers at Nayandahalli. CHC	prestigious Johnathan Mann award for Dr. Binayak
and AID India supported and conducted the medical	Sen and to voice against the violation of human
camp. Dr. Sukanya of CHC along with other doctors	rights by the STATE. Demand the immediate release
examined 200 patients especially women and	of Dr. Binayak Sen and other Human rights activist
children. The longstanding need of this community	who are unjustly incarcerated. It was held at
to be met through a series of medical clinics.	Chandralekha Centre, Besant Nagar, Chennai.
26/5/08–"The other side of democracy: The	
implications of continuous detention of Dr. Binayak	
Sen" - Talk by well-known human rights lawyer K.	
Balagopal of Human Rights Forum, Hyderabad was	
organized at Ashirwad, Bangalore.	

For more details log on to - www.savebinayak.org and www.binayaksen.net



coordinating these efforts in the state.

Dr. Binayak Sen a physician and human rights activist / defender in Chattisgarh was arrested by the Chattisgarh police in May 2007. There has been an ongoing campaign for his release and CHC has been



On 24<sup>th</sup> April 2008, we organized a press **conference** announcing the award of the Jonathan Mann award to Dr. Binayak Sen, during this conference we also highlighted the continued illegal detention of Dr. Sen and this

this conference we also highlighted the continued illegal detention of Dr. Sen and this received quite a bit of press coverage in the english language press.

On 14<sup>th</sup> of May 2008, CHC as part of the Committee for the release of Dr. Binayak Sen staged a protest

demonstration on the continued illegal detention of Dr. Binayak Sen.



On 29<sup>th</sup> of May 2008, CHC along with the Youth for Social Change arranged the Binayak Sen Concert an evening of music and dance celebrating the spirit of resistance and protest.

During the rest of the year we facilitated various meetings, and press coverage of the problem.

Protest in chennai against the detention of Dr.Binayak sen

## **Community Health Cell-Chennai** The Project Extension Unit of CHC in Tamil Nadu

The main activities during the year can be broadly classified into the following categories:

- Community Monitoring and Planning Pilot Project in 5 districts of Tamil Nadu.
- MNI Campaigns Vaccine institute closure campaign; Vaccination policy campaign.
- Support to Environment and Occupational Health Campaigns.
- Support / networking to the broader health movement in Tamil Nadu.
- Campaign for the release of Dr. Binayak Sen

#### Community Monitoring and Planning Pilot Project in Tamil Nadu

Tamil Nadu is one of the 9 states in which the Pilot phase of the Community Monitoring and Planning project under the National Rural Health Mission is being implemented. While one of the partners in the Makkal Nalavazhvu Iyakkam (the Tamil Nadu chapter of the People's Health Movement), the Tamil Nadu Science Forum (TNSF) was the state nodal NGO for the implementation, the CHC team provided the overall technical inputs and support for the project. This project was implemented in 225 villages spread over 5 districts. Thiruvallur district, in which the Tamil Nadu Project extension unit had worked for the past 4 years post – tsunami and was instrumental in facilitating the formation of the Pazahverkadu Action Netwerk, was one of the 5 districts and members of the PAN took part in the initial planning for the district and in the end one of the 3 blocks in the district in which the project was implemented.

Briefly the CMP project involved the formation of monitoring committees at the village, Primary Health Center, block, district and state level. The Village committee known as the Village Health and Sanitation Committee, undertook monitoring of guarantees vis-a-vis the public health system. The results of the monitoring were compiled into a Village health report card. These report cards were fed back at the village level as well as consolidated by



the committees at a higher level. The results were also fed back to the public health system officials at different levels.

In 14 & 15<sup>th</sup> April 2008 there was a state level Training of Trainers workshop held in Villupuram. This was after the monitoring tools were adapted and finalized for usage in the field. Following this state level workshop each district arranged a district level workshop to familiarise the district, block and village level staff with the tools. These workshops were also held in April 2008.

## CHC Team member facilitating the consolidation workshop in Yelagiri

Once the tools were well understood by the district training teams and were piloted a state level workshop on the methodology of consolidation of the tools to prepare the Village health report card was held in Yelagiri in 28 & 29<sup>th</sup> May 2008. This state level workshop was followed by workshops at the block level in each district on the same topic to familiarize the block and village level staff on the preparation of the village health report card.

During the months of June and July 2008, there were a series of training workshops for the newly created village health and sanitation committees. There were a series of 4 trainings each followed by a week of facilitated monitoring. This led to the filling up of the monitoring tools for 30 of the 45 villages initially planned in Thiruvallur district. This was followed by the formation of village level Village Health Report Cards during the months of July to August 2008.In all 210 Village Health Report Cards were produced in the process. This was followed during September – October 2008 by public hearings at the PHC level.

During this whole process one of the significant innovations by Jeevajothi, the NGO trained by us in the earlier phase and now in charge of one block during the monitoring project was the identification and the training of one youth from each of the 15 villages in which the project was implemented. Thus apart from the NGO facilitators there were individuals at the village level who were keyed into the whole process and could anchor the process even in the absence of the NGO facilitators.

With most of the field level work as part of the pilot project over by October 2008, the remaining part of the project was spent in a more detailed analysis of the report cards, the production of block level report cards, the analysis of disaggregated data and the collection of case studies.

The team also took part in the external evaluation of the CMP project, field visits for this took place on 18<sup>th</sup>, 19<sup>th</sup> and 20<sup>th</sup> of November 2008. One of the team members was part of the evaluation team.

## District Level Public Hearing in Permbalur district



As part of the culmination of the project, a series of presentations were made this included presentations to the Project director of the State Rural Health Mission, Tamil Nadu as well as to the Director of Public Health, Tamil Nadu. In these we summarized the learnings, challenges and possible future directions of the project. One presentation was made to the Project director on November 3<sup>rd</sup> 2008. Subsequent meetings with the nodal officer were held on January 2<sup>nd</sup> and 3<sup>rd</sup>.2009, to plan out the activities of

the future as well as including the project in the State Plan for the year 2009 - 2010. The presentation to the Director of Public health was done on December  $11^{\text{th}} 2008$ .

As a follow up of these discussions the section on Community Monitoring and Planning in the State Project Implementation Plan (PIP) was written by the core team that implemented the Pilot Project (anchored by the CHC team). This section was included in toto in the final draft of the PIP submitted to the central government. Also as part of this process a state level culmination workshop was held in Chingleput on the  $4^{th}$  and  $5^{th}$  of February, 2009. This was attended by nearly 40 individuals from the 5 districts and a step by step documentation and feedback of the whole process was facilitated. There was very valuable feedback on the various aspects of the implementation of the project, various aspects on the adequacy of capacity building and training, the role of confrontation and handling it etc. were discussed and debated in detail.

Throughout this process the CHC team had a first hand experience of actually implementing a project that aimed at organizing people to monitor and demand their rights. The intensive discussions of the state level core team, the discussions and feedback from the various district level teams and the actual experience of participating at the district level activities gave us very valuable experience and learnings. We were struck by the tremendous enthusiasm of the people and the energy and innovativeness they displayed during the project, at the same time we were struck by the apathy of the government, especially the district level staff and below towards the whole idea of increased accountability, we also noted that while the Tamil Nadu government had indeed invested a lot on infrastructure, by not involving the people and taking them into confidence, the gains are going to be only short term and non-sustained.

#### Campaign against the closure of vaccine production units in the public sector:

In 2008 the government of India suddenly withdrew the production licenses of the 3 premier vaccine production units in the public sector which were the back bone of the Universal Immunization program of the government. While this was allegedly due to their non-compliance with GMP standards laid down by the WHO, the government failed to explain why it was not taking steps to upgrade these institutions (which were anyway under the control of the government) and were instead hastily closing them down. The CHC team is part of a national campaign demanding their reopening.

At the state level (in Tamil Nadu) as a first step the different groups who were protesting against the closure came together under an umbrella network called "Save Children



Movement". It had for its broad objectives both the reversal of the order closing the public sector vaccine units as well as the reversal of the policy of institutional based immunization.

On 3<sup>rd</sup> July Communist Party of India (Marxist) organized a public seminar on this issue in which one of the team members participated and spoke on the issue from the public health point of view. Over the period of six months One of the team members along with the Dharmapuri Voluntary Association Human Chain

organised to protest the closure of public vaccine units

Network Initiative (DHVANI) organized and addressed a series of one day workshops / seminars in 7 districts on the issue of the vaccine institute closure as well as the institutional

vaccination campaign. On October  $2^{nd}$  there was a public meeting at Marina Beach in Chennai along with a signature campaign.

On the 14<sup>th</sup> of November there was a human chain in which about 2000 members took part raising the issue. On the 17<sup>th</sup> of November, one of the CHC team members was part of a delegation that met the Governor of Tamil Nadu Dr. Surjeet Singh Barnala and appraised him of the issue. On the 14<sup>th</sup> of March the Tamil Nadu Health Development Forum held a seminar titled, "Protect Universal Immunization Program." This was attended by academics, activists and politicians.

Overall this was one of the first campaigns that the team was actively spearheading. One of the major learnings from this experience was the importance of having the support of a political party (in this instance the CPI(M)) in addition to the traditional activists and academics. As it worked out pressure by various demonstrations etc. by the people was supported by questions raised within parliament and finally it was combination of these various forces that brought us to where we are.

#### Vaccination Campaign:

Following the death of 4 infants following measles immunization in Thiruvallur district, the state government unilaterally decided to stop vaccination at the village and village sub-center level and provide vaccination services only at the Primary Health Center Level. Thus to access vaccination services people had to travel on an average 5 to 10 kms spending their own money. Civil society groups all over Tamil Nadu feared that this would result in decreasing coverage with the marginalized communities sufferring the most. CHC was one of the groups that are facilitating a campaign that is demanding the reversal of this policy. This campaign includes the use of press releases, post – cards and telegram campaigns as well as series of awareness building workshops on the issue all over the state.

Members of MNI writing the demand of revoke the changes in vaccine strategy in postcard to Tamilnadu chief minister



On May 2<sup>nd</sup> there was a joint press statement condemning the sudden change by the MNI and the TN-FORCES networks. During the month the CHC team members went on field visits to study the

situation. On the 30<sup>th</sup> of May the CHC team addressed and were part of a protest demonstration organized by the Tamil Nadu Village Health Nurses Association. Similarly on the 20<sup>th</sup> of June there was a meeting called by the MNI to plan out a strategy for the campaign. As part of spreading awareness of the issue and the campaign CHC team members addressed

meetings in Madurai on the 20<sup>th</sup> and 21<sup>st</sup> of July and in Pondicherry on the 2<sup>nd</sup> of August. On October 19<sup>th</sup> 2008 one of the team members addressed and was part of a public meeting on "Meeting on Social impact of Vaccine policies" in Perambulur town, in Perambulur district. Similarly on the 29<sup>th</sup> of October 2008 one of the team members addressed and was part of a seminar on vaccine policy in Dindigul, Dindigul district.

On November 14<sup>th</sup> 2008, on the day children's day is celebrated in India, there was a human chain organized in Chennai against the closure of the vaccine institutes closure by the central

government, the CHC team was part of the organizing committee. On the 17<sup>th</sup> of November 2008, CHC team member was part of the team that met the Governor of the State of Tamil Nadu.

In this campaign we learnt the importance of first building up grass roots awareness of the issue and getting the academics involved. While for various reasons the political parties have not taken a strong stand unlike the institute closure issue, the academic institutions seem to be backing us and hopefully over the next year their support will bring a fillip to the campaign.

#### Support to Environment and Occupational Health Groups

The CHC team is supporting a community based initiative located in a group of 21 villages affected by industrial pollution, in the SIPCOT area of Cuddalore. This initiative called SACEM (SIPCOT Area Community Environmental Monitoring) consists of a group of volunteers who monitor both the pollution levels as well as more recently the health impacts of pollution.

CHC facilitated a workshop under the title CHESS (Community Health Environmental Survey Skillshare). In this workshop there was a brainstorming and a setting of an agenda for future work in the Environment and Occupational Health Movement. The group from SACEM Cuddalore participated and benefited greatly from interaction with similar initiatives from all over the country. This workshop was held in August 2008.

One of the areas identified by the group in Cuddalore for more intensive work was the Primary school in Eechangadu. In this school, earlier meetings and interactions with the teachers, had revealed fears that the children were showing signs of a range of toxic effects of chemicals from the near by factories. It was decided to perform a systematic study to document this. The CHC team was involved in detailed planning of this study during the period September and October 2008. Towards this a meeting of local activists, CHC team members and a research coordinator working with Corporate Accountability Desk met at Bangalore on the 22<sup>nd</sup> of October 2008. Subsequent meetings over skype were held on January 20<sup>th</sup> 2009 and February 2<sup>nd</sup> 2009. The study is planned to take place during the months of February and March 2008.

The CHC team is also supporting a Trade Union of unorganized workers that is working along the coastal urban and semi-urban areas of Chennai. The CHC team facilitated the attendance of this team at the CHESS workshop and is supporting them with work on occupational health and environmental health. During the period of the report the team held numerous discussions with the association on assessment of the risk to workers who are involved in stone cutting – during sculpting work. This work in ongoing. Work on a baseline health survey and a pilot surveillance project on acute injuries to stone sculptors were discussed and finalized. The first meeting was held on January 9<sup>th</sup> 2009 and a subsequent meeting was held on January 23<sup>rd</sup> 2009.

Given that the nature of the support given by the CHC team to the Environment and Occupational Health struggles is of technical nature the involvement has been patchy given the expediencies of the field situations in each of the ongoing campaigns. CHC needs to come to terms with this reality and evolve a method of working with / supporting these groups on an on going basis.

## Other activities

✤ The CHC team facilitated a group of students from the Indian Institute of Technology –

Chennai (IIT-Chennai), who did a short internship with CHC, to study the health needs of the urban unorganized sector. This was done through interviews and visits to numerous people working in the area. They submitted a report to CHC at the end of their period of internship. This was during the month of May 2008.

- One of the team members attended the annual state level planning workshop of the Tamil Nadu Dalit Womens Forum on 24<sup>th</sup> May. He talked about the CMP pilot project as well as the scope it provided in the future, he also spoke about the vaccination issue. This led to the addition of awareness building activities as well as planned campaigns around this issues all over Tamil Nadu.
- Members of the team attended a meeting of womens groups from all over Tamil Nadu that discussed the response to the vaccine issue. This was held on 27<sup>th</sup> of May 2008.
- One of the team members was invited to be a consultant for the state of Tamil Nadu for the IDRC sponsored People's Report on Health project being coordinated by the Council for Social Development, New Delhi. As part of this he facilitated a two training in October 2008, as well as for one day on November 14<sup>th</sup> 2008 for the local research team. The consultancy extends up to December 2008, up to when the field work will take place.
- One of the team members is part of a team that is performing a Cochrane Review of interventions to reduce corruption in the health sector. As part of this he went to Oslo for two weeks in the month of November 2008 for a protocol development workshop. The work continues and will probably be completed by the end of 2009.
- ✤ Both team members contributed as resource persons to a series of meetings arranged by the Catholic Health Association of Tamil Nadu (CHAT) on achieving the Right to Health. This included a series of workshops for their various members and a state level culmination workshop. Team members did the training for workshops in Chingleput district on 20<sup>th</sup> of December 2008, in Kodaikanal on the 23<sup>rd</sup> and 24<sup>th</sup> of January 2009 and the state level meeting at Trichirapally on the 17<sup>th</sup> of February 2009.
- One of the team members had a meeting with a social activist in Kancheepuram district on issues of Dalit discrimination and health on 11<sup>th</sup> of November 2009.
- One of the members was being consulted on organizational issues and restructuring of the Positive Women's Network and had telecons on the issue with the senior PWN+ members on 5<sup>th</sup> of November 2008, and during the months of January and February of 2009.
- One of the team members was invited by a local self government president of a Panchayat in Kancheepuram, Ozhalur for help in an ongoing campaign against a local brewery that was polluting the area. This meeting took place on the 18<sup>th</sup> of December 2009.
- One of the team members attended the medico friend circle annual meeting in Bongaigaon, Assam on the 16<sup>th</sup> and 17<sup>th</sup> of January 2009.
- One of the team members gave a training on Accountability in the health sector for Dalit women activists belonging to the organization Rural Women's Social Education Center (RUWSEC).
- The team members have also been invited to attend and be resource persons at a campaign for larger political accountability called *Wada Na Thodo Abhiyan* (Don't break your promise campaign) on the 18<sup>th</sup> and 19<sup>th</sup> of February 2009.
- One of the team members is also attending the National Coordination Committee meeting of the People's Health Movement in India. This is in New Delhi on the 21<sup>st</sup> and 22<sup>nd</sup> of March 2009. He will also participate in the dialogue with the political parties in the build up to the up coming general elections in the country.

## CHC Library and Information Centre (CLIC)

CHC Library and Information Centre has colleted 540 books, introduced few international journals to the journals section namely American Journal of Industrial Medicine, Monthly Review, Journal of Epidemiology and Community Health. It receives regularly newsletter, reports and newspaper. CLIC collected lots of posters and films. CLIC brings out every month a newsletter called "Health Round-up" that gives information about arrival of books and journals (important articles) to the users. It helps the user to identify and choose their information in short time. We send this newsletter through email as well as made available on our website. We produced from April 2008 – January 2009. February and March issue of 2009 will produce with the issues of April 2009.

HRM attended the Conference "International Conference on "Knowledge for All: Role of Libraries and Information Centres" held on 12-15the November 2008 at Convention Center, TISS in Mumbai. And also it was a platinum jubilee of the Indian Library Association. 110 papers were presented during the conference. There were 15 technical sessions viz. National Knowledge Commission; Open archives and access issues; Digital Libraries Part 1 & 2; Web resources; Role of library associations and web resources; knowledge management; IPR in the digital age; Public, school, corporate library and information systems; Networking and resource sharing; Librarianship in the internet age; Information Literacy; Library management in the knowledge society. It was a good conference for Library Professional. We came to know the new development and systems in the library Science field.

CLIC helped in developing the reading list for CHLP programme.

We have started the stock verification of books in the library from 18<sup>th</sup> March 2009. Report will submit by 22<sup>nd</sup> April 2009.

Health Education Materials was used by Medical Colleges, Nursing Colleges, Social Sciences colleges during their programs and events and also CHC used in its events.

CLIC has started another library unit in CPHE on particular issues like Health Policy; Tuberculosis; Malaria; State Health Resources (Madhya Pradesh; Jharkhand; Gujarat; Rajasthan) and some rare collection on Community Health and Public Health etc.,

We received rare books from Dr. A K Chakraborthy and Mr. Padmanabhan

CLIC has received demo version of Library Software from Easylib software Company to see the structural database programme of the software.

CLIC has subscribed few journals for CHC Tamilnadu Office and gives duplicate copies of the books and the journals to CHC Tamilnadu Office to develop its own resource centre.

HRM and CJ attended the Health Communication Training Programme which was facilitated by Dr. Mohan Deshpande at CHC for CHLP – Batch IV.

Volunteers (Kum. Vasthi and Mr. Rahul Chacko) helped in developing the annotated bibliography of the Video cassettes. Ramachandra and Shahida who are MSW students from Bangalore University, Department of Social Work. They were also helped in writing of Kannada CD's summary

We exhibited the book stall during the CHC meetings in St. John's Medical College and CPHE.

## List of CHC Publication 2008-2009

- Janarogya Andolana Karnataka: Arogya Hakku Manava Hakku (Kannada), Quaterly newsletter, Vol. 1, No. 6, December 2008. Published by Community Health Cell. P8
- 2. Arogya mattu Manava Hakkugalu (Kannada). Translated and Published by Community Health Cell. December 2008. P39
- 3. Arogya Vyavastheya mele Rajakeeya Prerita Arthika Hodeta (Kannada). Translated and Published by Community Health Cell. December 2008. P17
- Arogyada Hakku Hakkugalaadhaarita Arogya mattu Arogya Palaneya Drustikoona – ondu sankalita paramarshe (Kannada). Translated and Published by Community Health Cell. December 2008. P62
- Samathe mattu Asamathe Arogyada Saamaajika Nirdharakagala kuritu Vishleshane mattu Tippani (Kannada). Translated and Published by Community Health Cell. December 2008. P12
- 6. Learning Programmes for Community Health and Public Health Report from a National Workshop April 2008. Published by Community Health Cell and Centre for Public Health and Equity. December 2008. p42
- 7. Defending the Health of the Marginalised. Published by Community Health Cell. December 2008. p60
- 8. Building blocks, December 2008 (a newsletter of Community Health Learning Programme). December 2008. p8
- 9. Right to Health and Health Care by E Premdas. Published in Integral Liberation, April 2008. p3-15
- HIV/AIDS and Law: A study on the Constitutional Framework Relating to the Evolution of Judicial Trends and Legal propositions on the Issues of Persons Living with HIV/AIDS. Dissertation submitted by E Premdas for his doctrinal Research in LLM
- 11. Right to Primary Health Care A study on the status and Quality of Health Care in the Primary Health Centres in Karnataka
- 12. Tribal Social Movements A study on tribal movements in the frame-work of social movements with regard to their evolution and their role in social transformation by E Premdas. P19
- 13. The Virus of Communalism: What will be our response? INDIA 2008: The reality once again! (Revised) By Dr. Ravi Narayan. P5
- 14. Angavikalateya Savalugalu mattu Arogyada Hakkina Chaluvali (Kannada) by E Premdas. P2

## The Centre for Public Health and Equity - (CPHE)

The Centre for Public Health and Equity (CPHE) is a new sub-unit established by SOCHARA. It has evolved from the public health, health policy research, action and advocacy work of CHC over several years at state, national and global levels. A social paradigm commissioned with learning from the previous phase formed the framework of its work during the year 2008-09. CPHE continued its involvement to make the current efforts in public health education and health policy more relevant to the new public health paradigm focused on health equity; social justice; underlying social determinants of health including gender; inclusive and responsive health systems; and health policy development.

The ground work to launch such a unit began in July 2006 which was the fifteenth year of the registered Society for Community Health Awareness Research and Action (SOCHARA), which is the legal parent body. This was when a younger team of health professionals and social activists was selected to take over the baton of leadership of CHC and its Tamil Nadu extension unit. The CPHE was formally inaugurated in December 2008, when CHC and SOCHARA along with friends and partner organisations celebrated the silver jubilee of CHC.

The main **thematic areas of work of CPHE** during the period April 2008 to March 2009 are as follows:

- 1. Strengthening global and national policy commitment to Health for All with comprehensive primary health care as an approach.
- 2. Strengthening the social and community dimensions in public health education, with capacity building for the same.
- 3. Promoting a community paradigm in public health research, including engagement with civil society.
- 4. Supporting the global and national Peoples Health Movement (PHM) and simultaneously catalyzing a newer Public Health Alliance of public health professionals from multi-disciplinary backgrounds that can be supportive of the PHM.
- 5. Finally as a Jubilee commitment, to review, bring together, creatively adapt and evolve learning materials from CHC's experiences from 1984-2008. This includes both publications and e-learning material towards building an 'alternative learning centre' ethos facilitated by CPHE.

## WORKING TOWARDS HEALTH FOR ALL

#### **1. STRENGTHENING COMPREHENSIVE PRIMARY HEALTH CARE**

CPHE team members were actively engaged with strengthening comprehensive primary health care nationally and internationally.

#### National Level

**1.1 NRHM-AGCA** CPHE team members are involved with the National Rural Health Mission (NRHM) in several capacities. As a member of the **Advisory Group for Community Action, a Standing Committee of the NRHM,** Thelma participated in several meetings of the AGCA during the year. The AGCA has been enhancing community partnerships and the 'communitization' components of the NRHM by being a civil society

linked advisory group to the Mission. An AGCA Technical Advisory Group meeting in Pune in June 2008 reviewed the pilot program for Community Monitoring of the health system in nine states. Community monitoring is part of the communitarian governance and accountability component of community action for health. At the AGCA meeting in August 2008 in Delhi the framework of the external cum internal review of the community monitoring pilot phase was discussed. The draft report was discussed at an AGCA meeting in December 2008. The group also met with the national NRHM Mission Director. Thelma wrote a detailed note on 'Community Action for Nutrition' for discussion at subsequent meetings of the AGCA. The AGCA supported a national meeting on the 'Role of Dai's in maternal health in India'.

1.2 Thelma continued as a member of the national ASHA mentoring group of the NRHM attending meetings in May 2008 and 11<sup>th</sup> February 2009 in Delhi which discussed the statewise progress of the ASHA program, the need to strengthen the ASHA support systems in the states, and to set up state ASHA mentoring groups. A secretariat for the group was established at the National Health Systems Resource Centre (NHSRC) in Delhi, which has facilitated support through full time staff members to states for the ASHA program. A technical sub-group was established and met to discuss issues of accreditation, quality of training, need for in depth reviews etc. During this year Thelma also attended the first meeting of the Madhya Pradesh State ASHA Mentoring Group on 8<sup>th</sup> February 2009 which made important decisions, an increase in the number of ASHAs, to be equivalent to the number of Anganwadi centres in the state. This increase of about 20,000 ASHAs to the existing 42000 ASHA's will enable majla/tola's or hamlets to have an ASHA which will be a help particularly to women and children living in remote areas. The increase however poses a challenge in ensuring good quality training and a support system to the ASHA's. The MP state AMG has brought together a small group of individuals and organizations from different parts of the state many of whom are associated with the Jan Swasthya Abhiyan. Strengthening a critical mass of committed persons from civil society in MP for community health is an important step to address the major health challenges among people.

**1.3 AYUSH and Public Health (Planning Commission):** Ravi is a member of the national advisory group on AYUSH and Public Health of the AYUSH Department in the Ministry of Health, and also a member of the Appraisal and Approval Committees of the AYUSH and Public Health grant–in–aid scheme. Several project proposals to strengthen the links between AYUSH systems were reviewed during this period, with a few approved for support and further action.

## 1.4 Community Health Fellowship Program (CHFP) in Madhya Pradesh:

The preparatory phase to develop the MP-CHFP started in this period. CPHE with CHC facilitated a National Workshop in Bangalore on April 9<sup>th</sup> and 10<sup>th,</sup> 2008 to explore and evolve a community health fellowship program for health related professionals cum activists in Madhya Pradesh. This national workshop was supported by the Sir Ratan Tata Trust for dissemination of the CHFS/CHLP programs of CHC. The meeting was attended by representatives from Jan Swasthya Sahyog, Bilaspur; SATHI- CEHAT, Pune; PRAYAS, Chittorgarh, Rajasthan; CMC- Vellore; SAHAJ, Baroda; National Health System Resource Centre, New Delhi; Child in Need Institute, Jharkhand; SEARCH, Gadchiroli, Maharashtra; State Health Resource Centre, Chhattisgarh; SANGATH,Goa; Madras Institute of Development Studies, Chennai; Foundation for Research in Community Health, Mumbai; Jan Swasthya Abhiyan national secretariat, Bhopal; and the Sir Ratan Tata Trust, Mumbai.

The meeting explored the vision, mission, objectives, perspectives, principles, components, and contents, structure, mentoring, networking and collaboration for the new MP initiative of CPHE (see CHC Silver Jubilee publication: *'Learning Programs for Community Health and Public Health'* for further details – www.sochara.org)

Thelma went to Bhopal, Raisen district, and Tamia Block in Chindwara district in July 2008 visiting NGOs, PHCs, CHCs and Gandhi medical college to meet resource persons and assess projects and field mentors for the MP Community Health Fellowship Program. She also saw the training programs for the community monitoring and planning (CMP) of health services in the field. She visited a remote forest based PHC which got its first PHC medical officer after 27 years as a result of the Community Monitoring process. She discussed the possibility of undertaking 'Appreciative Enquiries' as part of the CMP. In August 2008 she visited Indore, Barwani district, Alirajpur and Jhabua districts in western MP for the same purpose holding discussions with a variety of individuals and organisations. A wide variety of stakeholders have evinced a keen interest in the proposed CHFP. There is also clearly a capacity to support such a program.

A "Dialogue on MP-CHFP" was organised by CPHE on the 4<sup>th</sup> and 5<sup>th</sup> November 2008 in Bhopal. It was attended by participants from academic institutions, health NGOs from various districts and donor partners. Constructive suggestions were given to develop the MP-CHFP. A detailed report of the dialogue is available. Thelma made a presentation on the second Gobal Health Watch at its formal Indian release in Gandhi medical college, Bhopal on 6<sup>th</sup> of November 2008. This was attended by staff, students, ngo's and other academics.

Suggestions from both workshops and findings from the field visits besides the desk review helped in developing a proposal which was put up to the Sir Dorabji Tata Trust for funding An advisory committee was established for the Community Health Fellowship Program. A further meeting was held with the senior program manager from the Trust in February 2009 in Bhopal along with some partners and locally based advisory committee members.

Mr. Juned Kamal, joined CPHE as a new team member in Bhopal on 1<sup>st</sup> October 2008. He was an intern with the Community Health Fellowship Scheme at CHC in 2006 after which he actively supported the second national health assembly of the JSA in Bhopal in March 2007. He was the district coordinator in Barwani district of western MP in 2007-8 for the community monitoring of health services.

Deepak Kumaraswamy an Ayurvedic physician also joined the CPHE in October 2009. He was part of the Community Health Fellowship - Learning Program in 2007-8. He provided research assistance in developing a background paper on the situation of health and health care in MP. This will be used in the training of fellows.

Juned visited many health and social development organizations in order to assess the interest and suitability of organizations for the placement of Community Health Fellows programme. In November 2008, he visited organizations in the districts of the eastern region of MP, including Christian Mission Hospital (Chattarpur), Gram Sudhar Samiti (Sidhi), Lakhnadon Mission Hospital (Seoni). From December onwards he visited Sambhav (Gwalior), Center for Integrated Development (CID) (Gwalior), Bharat Gyan Vigyan Samiti (Bhind), Dharti (Morena), and field programmes of CID in Kolaras Block of Shivpuri district. In Guna he met staff from an organization 'Hareet' a member of the MP Voluntary Health Association to see the Community Monitoring of Health Services programme.

Meetings were held with staff members from academic institutions including the government medical colleges in Jabalpur and Gwalior, and the Departments of Sociology and Social Work in Jiwaji University, Gwalior and Barkatullah University, Bhopal. The Gwalior government mental health hospital was visited for discussions with staff.

Deepak and Juned together visited health related NGOs in other districts in MP. These included the Christian Hospital, Shahdol, Anupama Education Society, Satna, Samaritan Social Service Society, Satna.

During all the visits to field NGOs by CPHE team members throughout the year there was a two way information exchange with discussions about the activities of the organization since inception, followed by field visits and perspective gathering about the work through the team members of the organization and discussions with members of local communities in some instances. Ground work for networking and collaborative efforts for health have thus been laid by building relationships through the visits, and through the workshops and meetings.

Juned assisted Dr. Ajay Khare, Coordinator of the National JSA secretariat in organizing a meeting of the MP Jan Swasthya Abhiyan in Bhopal on 19<sup>th</sup> March 2009, where Deepak was also present. The following points were discussed with MPJSA member organizations: 1) Community Monitoring, 2) Organization of *Jan Sunwai's* with the National Human Rights Commission, 3) Coordination of the National Secretariat, 4) Status of *Dai's* and our role, 5)Anti Rabies Vaccine, 6) Coordination with the state ASHA Mentoring Group, 7) Organizational Issues. Support is provided to the JSA national secretariat and to MP-JSA within the constraints of time and travel.

Other meetings in which Deepak and Juned participated were:

a) *Dai* Workshop – on 18<sup>th</sup> march 2009 a state workshop on the role of *Dai's* (traditional birth attendants) in the NRHM was organized in Bhopal. This workshop was a held as a follow up to the National Consultation organised by the Advisory Group on Community Action for the NRHM, Gujarat *Dai Sanghatan*, Population Foundation of India and the Centre for Health and Social Justice in Delhi in May 2008. The objectives of the consultation were "to share experience and evidence on the role and functions performed by *Dais* (Traditional Birth Attendants) in different parts of the country in the current context of NRHM" The state workshop was attended by 42



participants of whom 5 were Dai's.

b) Workshop on Urban Health: Context, Challenges and Way Forward, 20-21<sup>st</sup> March 2009, New Delhi. This day and a half discussion was organized by JSA/ PHM-India. The workshop discussed the policy environment for the health of the urban poor under the Jawaharlal Nehru Urban Renewal Mission (JNURM); experiences and issues with regard to health care of the urban poor,

displaced communities and vulnerable groups; followed by laws governing the private sector; and an analysis of the National Urban Health Mission (NUHM) which will be operationalised during the period 2008-2012. The key strategies of NUHM include: Strengthening existing primary public health systems; public private partnerships; communitised risk pooling / insurance mechanism with IT enablement; monthly health and nutrition day; capacity building of key stakeholders; special

provision to include the most vulnerable; monitoring of quality of services; community participation in planning and management; identification of target groups, through distribution of Family/Individual Health *Suraksha* Cards. A critical analysis, potential problem areas as well as the opportunities were discussed.

- c) JSA-NCC meeting The JSA National Coordination Committee meeting was held on 22<sup>nd</sup> to 23<sup>rd</sup> March 2009 at the CMAI office, New Delhi. The objectives of the meeting agenda included the review of the Community Monitoring process, public dialogues with the support of the National Human Right Commission, review of JSA activities from states, discussion with political parties to incorporate health in their manifesto prior to the national elections, launch of peoples health manifesto, vaccine issues, drug issues and the proposed IPHU course in Bangalore.
- d) CHC CHLP/CHFS alumni workshop in December 2008 in Bangalore.
- e) Right to Food meeting in Bhopal (Juned).
- f) Child Rights Convention (CRC) organized by Action Aid and UNICEF from 29<sup>th</sup> to 30<sup>th</sup> January 09 in Bhopal (Juned).
- g) Indian Traditional Knowledge History, Influences and New Directions for Natural Science, February 22-23, 2009, NCBS, Bangalore. (Deepak on behalf of Ravi) This was a conference at the National Center for Biological Sciences, bringing together scholars from diverse fields - scientists, historians, healthcare and biotech professionals - to examine the contributions of Indian traditional knowledge in the natural sciences to broader aspects of science, social history and health care

Meetings were held with a number of other individuals and groups in Bhopal/MP to discuss the new initiative. Some of these include- Dr. K.F. Qasmi (Pediatrician) Parwarish, Bhopal; Ms. Pallavi and the Sanket team, Bhopal; Ms. Sarika and the Action Aid team, Bhopal; Dr. Nirmala Buch (former Secretary Govt. of MP) Mahila Chetna Manch, Bhopal; Ms. Seema Prakash, Spandana, Khandwa; Mr. Joseph, FPAI, Bhopal; Mr. Asif Sheikh, Jan Sahas, Dewas; Mr. Devendra Bhadoriya, PARHIT, Shivpuri/Datiya; members from the DFID Technical Assistance Support Team; and others

## International

**1.5 RHFA** –**CPHC** research study (supported by a Teasdale Corti grant): CPHE continued to be the Asian hub for an international multi-centric research study titled '**Revitalizing Health for All** – Learning from Comprehensive Primary Health Care' (RHFA- CPHC) facilitated by the University of Ottawa and the University of Western Cape. This is a collaborative project of the Research Circle and the International People's Health University of the global PHM. A global literature review was undertaken in the first year of the four year research project. Dr. Vinay Viswanath, research officer completed a literature review, including grey literature, of the Asian CPHC projects during this year.

f) Dr. M.K. Vasundhra (SOCHARA member) and Dr. Dominic Misquith –Professor and Head Department of Community Health, St. John's Medical College, Bangalore were invited to review research proposals received in response to the Call for Expressions of Interest received for the study and make a selection based on criteria. Six teams of researchers from India (2), Iran (1) Pakistan (1) and Bangladesh (2) were selected. Each team consists of a triad with a young researcher, a research mentor and a research user.

g) The first Asian Research Training Workshop was hosted by CPHE in Bangalore from October 13<sup>th</sup> to 24<sup>th</sup>, 2008. There were 3 participants each from the six selected teams. Through a participatory process of inputs and small group sessions participants developed

their research proposals from their earlier brief statements. Two additional teams from India were also invited for the training workshop. Additional funding received from the WHO based Alliance for Health Policy and Systems Research through the University of Western Cape made this possible. Discussion with participants were held on a publication "Sound Choices – Enhancing Capacity for Evidence Informed Health Policy", copies of which were distributed to participants. A special public lecture by Dr. Parvez Nayani, AGHA khan University, Pakistan, Dr. Anwar Islam from BRAC Bangladesh and Dr. Heidari from the Ministry of Health, Iran organized by CPHE at St. John's Medical College was well attended. The Third Global Health Watch Report published by PHM, GEGA and MEDACT was released by Dr. Ron Labonte, who holds the Research chair at the University of Ottawa.

**1.6 World Health Report WHR– 2008:** Further to Thelma being a member of the initial brain storming team covered by WHO for the framework and contents – planning of the World Health Report 2008 on the theme of Primary Health Care in September 2007 at Bellagio, Italy. Ravi was invited as one of the six external reviewers of the draft report of the WHR 2008 in May 2008 entitled Primary Health Care in the  $21^{st}$  Century. The meeting held in Montereux Switzerland from  $7^{th}$  to  $9^{th}$  May reviewed the six chapters. These include primary health care in a changing world; the values that drive PHC; building health equity through universal coverage; local health services that put people first; securing healthy communities and leadership for health.

## 1.7 LSHTM-Lancet Symposium titled 'The Future of Primary Care: Alma Ata 30 years on'

Ravi was an invited speaker on the 'Role of Community Participation in Primary Health Care: A Perspective from the People's Health Movement in the South' at the thirtieth anniversary Primary Health Care symposium on 11<sup>th</sup>-12<sup>th</sup> September 2008 in London organized by the London School of Hygiene and Tropical Medicine (LSHTM),Lancet and the UK Department for International Development (DFID). He presented an overview of the evolving framework of community participation as a key policy imperative in primary health care policy and made a plea for a paradigm shift in the concept of community participation from a bio-medically defined and techno-managerial model as a means, to a participatory social/community model as an end. The presentation was well received and there has been a lot of interactive dialogue since the symposium with many participants. An interview with Ravi was also recorded on the theme which is available at the <u>www.lshtm.ac.uk</u> home page or at <u>www.audiomedica.com</u>

## 1.8 Almaty International Conference – 30<sup>th</sup> Anniversary of Alma Ata Declaration, Kazhakistan, Oct 2008.

Ravi as past coordinator of the global secretariat of the People's Health Movement was invited along with Dr.Hani Serag, the present coordinator, to participate and speak at the International Conference on the 30<sup>th</sup> anniversary of Primary Health Care in Kazhakistan, Almaty in October 2008. The conference was organized by the Government of Kazhakistan, WHO and UNICEF. The World Health Report (WHR) 2008 on Primary Health Care was released. Ravi spoke on 'People Centred Primary Health Care' in the session on 'Empowering communities, enhancing participation and advocacy for, and stewarding intersectoral action' to make PHC a reality.

## 1.9 Geneva Health Forum and other meetings

Thelma was an invited speaker at the **Geneva Health Forum in May 2008** that followed the World Health Assembly and made the following presentations: '*Why an Equitable Health* 

System is Essential to Improve the Health of the Poor or Otherwise Marginalised' and 'Community participation in PHC - Key Players in Realizing the Right to Health'. She was the resource person for a session with health journalists on 'Indigenous and Alternative Systems of medicine'. Thelma participated in the World Health Assembly, May 2008 as a member of the PHM- WHA advocacy team and also participated in the evolution of the draft call for action on primary health care. She attended the special meeting organized by the WHO health system cluster on a dialogue with civil society for the evolving IHP + initiative. She made inputs in the WHA session on 'Comprehensive Primary Health Care as an approach to Health of Migrants'.

She also participated in the meeting on Health System Research organized by the WHO Alliance for Health Policy and Health Systems Research held in Nyon, France in May 2008.

## 2. CAPACITY BUILDING FOR NEW PUBLIC HEALTH EDUCATION

**2.1 Interactions with the Public Health Foundation of India (PHFI)**: CPHE members attended the international conference on '*New Directions for Public Health Education in Low and Middle Income Countries*' organized by PHFI and the Rockefeller Foundation in Hyderabad in August 2008. Ravi participated in the consultation on Public Health and Law (mapping best practices) that preceded the conference. He presented one of the eight keynote papers of the conference entitled '*Extending the Frontiers - integrating public health consciousness into other academic programs*'. Thelma chaired the workshop session on '*Health and Society*' which was a follow-up to an earlier meeting organized by PHFI on the same theme. She also presented the report of the discussion at the plenary session.

#### 2.2 FICCI Knowledge Paper on the Health Care Policy.

Ravi and Thelma along with the late Dr.C.M.Francis and Dr.D.K.Srinivasa of SOCHARA participated in tele-conference discussions with the Federation of Indian Chambers of Commerce and Industry (FICCI) group (ERY) that evolved a knowledge paper on fostering quality Health Care for All. The discussion with them focused on medical education policy, public health system development and the need for primary health care and public health oriented policies. A FICCI publication is available from their office.

#### 2.3 Karnataka Association for Community Health Annual Conference

Ravi was invited to be on the planning committee along with Dr. Girish, Secretary KACH and Dr. Riaz Basha, Editor KACH Journal and other colleagues for the Annual Conference of the Karnataka Association for Community Health (KACH) which celebrated its twentieth jubilee this year. A compiled set of articles and reports were prepared by CPHE with the assistance of Deepak for The Karnataka Association for Community Health (KACHhttp://karnatakacommunityhealth.com/) E journal. A CD was prepared for all participants. A presentation on "Capacity Building for Public Health in the new millennium- Challenges in Karnataka, India and the Asian region was made by Thelma on 8<sup>th</sup> November 2008 at the opening plenary. Ravi facilitated a panel on "Primary Health Care –Towards a People centred Health System".

#### 2.4 Discussion on Drug Policy, Access and Rational Use

As part of continuing education the CPHE hosted an interactive discussion with Dr. Kathleen Holloway of the Department of Medicine Policy and Standards of WHO- Geneva, during her visit to Bangalore in April 2008. She made a presentation followed by a discussion on WHO's efforts in this area.

## 2.5 International Consultation- CMC, Vellore.

Ravi was invited to be one of the key resource person in an international consultation by CMC- Vellore in Feburary 2009 on the theme of Community based education for health professionals – the challenges for CMC-V and possible directions.

## 2.6 Medical and Public Health Ethics seminar

CPHE together with the Department of Community Health SJMC organized a session on the teaching of Medical and Public Health Ethics by Dr. John Porter, Professor International Health in December 2008 at St. John's Medical College. A talk by Dr. J. Porter on TB Research was organized at the CPHE office followed by discussion.

## 2.7 Review of Public Health in India

Ravi participated in a brainstorming organized by the Sir Dorabji Tata Trust on '*Public Health in practice – identifying gaps and new niches of work*'. This was hosted by the Foundation of Medical Researchers, Mumbai on 19<sup>th</sup> Feb 2009.

## 2.8 Global Public Health Seminar

Ravi spoke on Emerging trends in Global Public Health and Emerging challenges at the monthly staff seminar of the Karnataka Health Promotion Trust, Bangalore on 20<sup>th</sup> Feb 2009

## 3) Enhancing Civil Society involvement globally in Research for Health

## a) The Bamako Forum:

The Global Inter-Ministerial Forum on Research for Health, Development and Equity was held in November 2008 in Bamako, capital of Mali in West Africa. Thelma was invited as a member of the Program Committee representing civil society researchers. The Forum was co-organized by the Global Forum for Health Research (GFHR), the Council for Health Research and Development (COHRED), WHO, UNESCO, the Government of Mali and the World Bank. She attended the Asia Pacific preparatory meeting for Bamako in Bangkok in June 2008 where a decision was made to focus on involvement of civil society in research for health. She participated in an Elluminate planning discussion of the Program committee for Bamako in July 2008. She participated in a meeting organized by COHRED along with DBL, Denmak in Copenhagen in October 2008. A draft statement on Civil Society involvement in Research for Health was developed at this meeting which was refined, endorsed and subsequently presented at a largely attended closing plenary during the Forum. She was also asked to be an external reviewer of the background document prepared for the Bamako forum. She and others facilitated the participation of many civil society researchers, including several PHM resource persons in the plenary and parallel sessions for the Forum.

## b) Global Forum for Health Research, Geneva.

Ravi continued on the strategy committee and the Foundation Council of the Global Forum for Health Research, Geneva. He attended the STRATEC meeting in April 2008 in Geneva, which was followed by the Foundation Council meeting. He also attended the STRATEC and Foundation Council Meeting in Montevideo, Uruguay on 30<sup>th</sup> and 31<sup>st</sup> March 2009.

## c) British Medical Journal (BMJ):

Ravi continued to be a member of the International Advisory Committee of the British Medical Journal and its specialty advisor on Public Health. He attended the annual retreat and meeting of BMJ Editorial Board in London in April-May 2008.

## 4. Supporting the PHM at Global and National Level.

CPHE continued to provide policy and strategy resource support to PHM at national and global levels and also in some countries/regions of the world.

- a) **PHM Global Secretariat Assignment**: RN visited Cairo in September 2008 to facilitate the smooth transition of the PHM Global secretariat from the current host Egypt in the Middle Eastern region to its next host in the Southern Africa region and related organizational challenges.
- b) **PHM seminars at Misereor, Germany**: RN facilitated a seminar on the Global People's Health Movement at the Misereor Head Office in Aachen, Germany during his visit in Sept 2008. Misereor has supported the PHM consistently for several years.
- c) **PHM UK meeting Sept 2008**: RN along with Prof. David Sanders attended a PHM –UK planning meeting in September 2008 in London where PHM UK decided to host a special London based International Peoples Health University session in the Easter break in 2009. This idea had evolved as a special request from a group of students at a seminar in the London School of Hygiene and Tropical Medicine. The seminar facilitated by RN in April 2008 was on the theme 'PHM Globalisation of Health Solidarity from Below', at which a detailed researcher list for public health students on Health and Social Movement was also distributed.
- d) PHM Germany meeting in Frankfurt Sept 2008: Medico International a CPHE partner in Frankfurt, Germany hosted a seminar on the Challenges of Primary Health Care in Urban Areas, bringing together PHM Germany contacts during RN's visit to Frankfurt in Sept 2008. RN interacted with a group of German medical students belonging to a group GANDHI working on Globalisation and Health issues and planning to organize a summer school in Berlin in Roug.
- e) **Doctoral Thesis on PHM India**: CPHE hosted the visit of a doctoral student Mr. Brendan Donegan of the School of oriental and African studies, London who is focusing on PHM India as the subject of his doctoral thesis. He spent time between July to Sept 2008 reviewing documents and handling interactive discussions with key respondents.

## 6. Solidarity and Support to other Community Health / Public Health initiatives.a) Community Health Learning Program (CHLP) of CHC

CPHE team continued to actively support the CHLP of CHC- the other functional unit of SOCHARA. Thelma was part of a committee for the selection of interns for the first two batches and also a member of the advisory committee. Both RN and TN facilitated sessions during the orientation in June 2008, the mid-course sessions in September 2008 and the final sessions in February 2009. This year's sessions included: i) *Monsoons*- This is an interactive 'simulation game' about farming families that helped the interns to understand and experience the social-economic-political-cultural determinants that affect people's decision making and lives in rural communities. ii) *Group Lab*: to help interns interact and explore with their own internal values, feelings and their affective dimensions. Reflections were held with the CHC team after each of the teaching-learning components of the CHLP. This is part of a process wherein the CHC team has taken most of the responsibility for the conduct of the CHLP.

## b) Gujarat Public Health Act

CPHE has been involved with a core group working on the Gujarat Public Health Act, which is being developed by the Department of Health and Family Welfare, Govt. of Gujarat, in collaboration with NGOs and academics. A sub-group with Dr. Joga Rao, Dr. Amar Jesani and Dr. Thelma met in Bangalore met in Bangalore from October 9<sup>th</sup>-11<sup>th</sup> to re-look at the earlier draft. A shift was made to include both health care and public health including health

determinants. After due process the draft Act will be tabled in the Gujarat Legislative Assembly. It is a comprehensive Act which has evolved through a series of stake holder's meeting, including a strong dialogue with civil society partners, both in Gujarat and the rest of the country. It has influenced the National Health Bill which is currently also under development.

- c) TN was an external examiner for pre-doctoral viva-voce at the Tata Institute of Social Sciences in Mumbai in July 2008.
- d) TN is a member of the advisory group for the special India series of the LANCET scheduled for 2009 and attended a planning meeting in April 2008 at Delhi. She responded to paper drafts particularly to the paper on health policy.
- e) TN is on the advisory committee of a doctoral student at Achutha Menon Centre for Health Sciences Studies.
- f) **Dialogue with the Core Donor partner for CPHE**: RN and TN had a detailed dialogue in May 2008 in Chennai with the Director of the Sarathy Foundation, Mrs Prema Bose who agreed to support the CHPE for the first three years 2008-2011.
- g) **IPH- Bangalore**: Thelma participated in the advisory board meeting of the Institute of Public Health, Bangalore in August 2008
- h) **IHMR Bangalore**: Ravi participated in the Governing Board meeting and Academic Council meeting of the Institute for Health Management Research-Bangalore during this period.
- i) **Basic Needs India, Bangalore**: Thelma attended the Trustees meetings and the BNI annual retreat during this period.
- j) Community Monitoring of NRHM in Karnataka /Tamilnadu: Thelma supported the ongoing community monitoring of NRHM in Karnataka and Tamilnadu in which CHC team members are involved through informal discussions and occasionally attending the planning dialogues being held from time to time.
- k) Human Rights Watch: Thelma is on the Advisory Committee of a study on the reporting of maternal deaths and maternal death audits in India by Aruna Kashyap a lawyer working with the global Human Rights Watch. The field work was done in Uttar Pradesh and Tamil Nadu. It is part of an effort to draw urgent attention and action to reduce maternal deaths.
- **I)** NTI Research Ethics Committee Thelma attends meetings as a member of this committee
- **m**) **ROHC Scientific Advisory Committee** Ravi is an active member of this committee. He also participated as a resource person in the ROHC seminar on occupational health in the IT industry on 11<sup>th</sup> March 2009
- n) Ravi helped to facilitate the wrap up session of a Indian study tour by the Health Sector Management students of the Boston University School of Management who visited centres and projects in Delhi, Mumbai and Bangalore and presented reports on i) Role of Government Central state on Health Systems management. ii) Role of bio- pharma iii) The challenges of culture and society to health system management and iv) Cross learning's and comparisons between US and India situations. The sessions were hosted in the St. John's Population research institute.
- o) Ravi was a resource person at the WHO SEARO meeting on strengthening applications on Epidemiological principles for Public health activities in the

region and contributed to a spell of socio epidemiology and the partnership with the alternative /civil society sector of public health in the region.

- p) Ravi and Deepak also attended the National conference of the Indian Public Health Association held in Bangalore from 8<sup>th</sup> to 11<sup>th</sup> of January 2009.
- q) International fellows: CPHE hosted two fellows this year as part of the continuing solidarity initiative. i) Brendan Donegan, spent a few months with CPHE, during the year after an earlier linkage with CEHAT SATHI, Pune, ii) Kristine Dandanell Gran an MPH student from the Institute of Public Health Science, University of Copenhagen, Denmark was linked to CPHE from February for a internship project on Community monitoring of NRHM in Tamilnadu. iii) Shanti Raman was associated informally with CPHE especially with the RHFA CPHC project during her break in Bangalore (She is a medical director child protection in the public health system of Sydney South West Area health services).

#### r) Mentorship

Finally senior team members of CPHE continued the close e-group interaction and the informal mentorship with large number of CHC fellows, PHFI fellows, IPHU fellows, and many other younger fellow travelers in community health/ public health – seeking greater relevance and community orientation in their efforts. This is part of a special commitment of CPHE to support the next generation of public health and community health professionals and activists to sustain the various networks and initiatives. This takes a substantial amount of time and energy but has been very encouraging and appreciated as well.

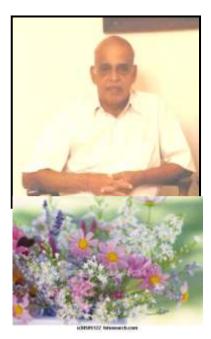
#### FOOT PRINTS ON SANDS OF TIME .....

#### **REMEMBERING LATE Dr. C.M. FRANCIS**

The late Dr. CM Francis was a towering personality in the fields of medical and health care, ethics and medical education. He provided leadership and was a source of support and guidance to many institutions and individuals over more than five decades of active professional life. His consistent commitment to community health was such that he was often called Community Medicine Francis. His contribution to CHAI and Health Action will for long be remembered by many people across the country.

Dr. C.M. Francis graduated in Medicine from Madras Medical College and completed his Ph.D in Physiology from Cambridge University with a deep interest in Endocrinology. He returned to Kerala after his studies and worked in various government medical colleges in Kerala – Calicut, Kottayam and others and also became Principal of two of these colleges before he was appointed as Founder Director of Sree Chitra Tirunal Medical Centre for Advanced Studies in Specialities, Thiruvananthapuram. He was also a visiting Professor in the faculty of Medicine, University of Toronto, Canada.

In 1974 the Catholic Bishop's Conference of India, invited him as the Dean of St. John's Medical College. He provided leadership to this premier institution till 1982 expanding and developing further its work in Community Health and strengthened its academic and administrative foundations. He was a member of the syndicate, senate and academic council of several universities and also member of the governing bodies of a number of hospitals and ethics committees. He was the Founder President of the Indian Society of Health Administrators (ISHA) Bangalore.



After completing his tenure with St. John's he was involved with several institutions of which three were particularly significant. He was the coordinator of the Continuing Medical Education unit of Christian Medical College, Vellore; the Director of St. Martha's Hospital, Bangalore, and later President of the Society for Community Health Awareness, Research and Action, Bangalore and senior consultant in its functional unit, the Community Health Cell (CHC). During his post retirement innings particularly with CHC he played many important roles and was involved in several significant initiatives. He was founder & editor of Health Action, the popular health magazine of the Health for All Trust of the Catholic Health Association of India (CHAI) and a policy consultant to CHAI. He was the Founder Convenor of the Community Based Rehabilitation Forum (CBR Forum) based in Bangalore, which is supporting CBR projects all over the country.

He was invited regularly as a consultant to the Rajiv Gandhi University of Health Sciences in Karnataka to advise on Health Human Power Development and Medical Ethics. One of the most important roles he also undertook was as a key member of the Karnataka Government Task Force on Health and Family Welfare and provided the frame work for strengthening of Primary and Secondary Health Care and Health System Development in the state. The chapter on Vision 2020 was his special contribution apart from substantial inputs and editorial support to the whole document.

Dr. Francis brought together his rich experience in hospital and health management in a special publication entitled Hospital Administration (Jaypee Brother Medical Publishers, 1991,) which has seen many editions, the latest being co-authored with Dr. Mario D'Souza, a Johnite alumnus. He himself was a reliable and accessible 'ready reckoner' on managerial, administrative issues in health care to whom many harried professionals turned to for advice.

His long term interest in medical ethics resulted in a short text book on Medical Ethics (Jaypee Brothers Medical Publishers, 1993). This is a prescribed reference text book for the ethics curriculum for undergraduate medical students in the Rajiv Gandhi University of Health Sciences in Karnataka. Dr. Francis was very involved in the introduction of Ethics into the undergraduate medical curriculum by this university. Dr. C.M. Francis was felicitated at the Second National Bio-Ethics Conference held in late 2007 in recognition of his long standing commitment and contribution to the field of medical ethics and to the realization of health as a human right.

All of us who worked closely with him in all these various institutions especially St. John's Medical College - Bangalore, Catholic Health Association of India – Secunderabad, Christian Medical College, Vellore, St. Martha's Hospital - Bangalore, CHC of the Society for Community Health Awareness, Research and Action - Bangalore, and CBR Forum, Bangalore will remember him as a serious and committed administrator, an inspiring and conscientious advisor, an ethical and socially sensitive humanist and above all a wonderful friend, philosopher and guide.

We have known him as students and young faculty members and subsequently worked closely with him in CHC since 1994. This latter period was one during which he had great patience and calm spending time with students, community health interns and fellows, team members and many visitors who sought his advice. This was a shift from the earlier days when he was known and feared by some as a strict disciplinarian! He reminded us that the Latin root of the word doctor, meant to be a teacher. Over time he had honed his skills in teaching and in listening as an art. He always suggested and promoted the inclusion and involvement of students and young professionals in all initiatives, recognizing the fresh ideas and energy that they brought, and also providing them the opportunity to learn and grow. He seemed to have an inexhaustible source of energy and was always willing to put his shoulder to the wheel working long hours developing essential drug lists, developing teaching material and manuals etc. Along with a keen intellect his was a pool of wisdom from which many people drew ideas and strength. Even during his busiest days he found the time to read at least for a couple of hours! He was therefore very well informed on a wide range of subjects. The word 'discipline' he also reminded us came from discipleship to a higher being and purpose. He was an optimist who felt that there was no task that was not possible.

He was accompanied and supported in life by a most wonderful wife and family who were generous in sharing him with so many others. They have our deep gratitude, as well as our sympathy and prayers on his passing on from this life.

May his soul rest in peace!

Dr's. Ravi and Thelma Narayan

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

#### Abbreviations used:

CHE – Centre for Health and Equity CHLP - Community Health Learning Programme SRTT – Sir Ratan Tata Trust PHM – People's Health Movement JSA – Jan Swasthya Abhiyan (PHM India) JAAK- Jana Arogya Andolan (PHM Karnataka state chapter) MNI \_- Makkal Nalavazhvu Iyakkam (PHM Tamilnadu)

## CHC Team

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 Assistant

Mr. Victor Fernandes - Administrative Officer

Mr. H. R. Mahadeva Swamy - Library & Information Assistant

Ms. Maria Dorothy Stella - Secretarial cum Admin Assistant

Mr. Mathew Alex - Accounts cum 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 MEMBERS (SOCHARA) 2008

## **Executive Committee Members**

Dr. Mohan K. Isaac (President) Fr. Claude D'Souza (Vice-President) Dr. Ravi D'Souza

Dr. Thelma Narayan

Dr. Sr. Aquinas Dr. H. Sudarshan (Treasurer) Mr. E. Premdas (Secretary) Dr. M. K. Vasundhra

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## **Honorary Members**

Dr. D. K. Srinivasa

Fr. John Vattamattom Mr. A. Arumugham

#### Thanks.....

We are very grateful to all the SOCHARA members and members of 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 organizations, social movements and networks who have been companions in CHC's journey.