

AHI Alumni Reunion Seminar - 2016

Tamilnadu Health Vision

“Health Empowerment of Rural Poor in Tamilnadu, India”

Issues and Challenges

Multi-Sectoral collaboration among GO, NGO and PO

VENUE: DMI Centre, St.Thomas Mount, Chennai || DATE: 6th – 8th APRIL 2016



AHI Alumni Reunion Seminar - 2016

A Report

Genesis:

Asian Health Institute (AHI) was founded in 1980 by Dr. Hiromi Kawahara. The idea of formation of this institution was bloomed, after Dr. Kawahara was in Nepal as part of his mission to implement medical cooperation. Since its establishment, AHI has been instrumental in providing capacity development training for the community based health and development workers in Asia.

In India, AHI India Chapter was initiated in association with Asian Network for Innovative Training, Research and Action (ANITRA) Trust in Tamil Nadu and expanded to several other states and as of now, more than 100 individuals have been participated the training programs. AHI alumni in India have been gathering for the last several years to share their experiences in their respective regions after the training and the issues. The reunion seminar plays a vital role in learning and sharing experiences gained so far.

The 4th AHI Alumni Reunion Seminar was planned and organized by the committee (*Mr. Nachimuthu Shethulinkhan Arokiada (ILDC1983), Mr. Murugan Kalirathnam (ILDC1994), Mr. R.T.John Suresh (ILDC2004), Mr. Srinivasan Natchathiram (ILDC2010) and Mr. Alexander Jayaraj (ILDC2011)*), in Chennai from 6 to 8 April 2016. 18 of the AHI Alumni's from Tamil Nadu, Andra Pradesh, Odisha and Kerala participated in the meet and shared their concern for future cooperation.

Theme: Health Empowerment of Rural Poor in Tamilnadu, India, Issues and Challenges

Multi-Sectoral collaboration among GO, NGO and PO

Objective of the Seminar:

- To study the Health Empowerment process of the rural poor in Tamil Nadu
- To learn the Community Based Rehabilitation (CBR) programme
- To understand the importance of biodiversity and community traditional health practices
- To share and learn the experience of the AHI Alumni's community health activities
- To form and strengthen the network among the AHI alumni members for future activities and resource mobilization

Venue: DMI Center, St. Thomas Mount, Chennai

Date: from 6 April to 8 April, 2016

Schedule:

Day	Time	Activity	Venue
Apr. 6	10:00	Opening ceremony	DMI Center, St. Thomas Mount, Chennai
	11:00	Tea break	
	11:30	Sharing Session I , CBR program in Thiruvallur district 1) Presentation by Mr. Kali, TTA----- (ILDC1994) 2) Presentation by Mr. Srini, CBR Forum ---- (ILDC2010) 3) Presentation by Mr. Stephen, IRCDS	
	13:00	Lunch	
		Session by external resource persons	
	14:00	1) Community Health by TVHA	
	15:30	2) CBR/CBID by NIEPMD	
	16:30	Tea break	
	16:45	3) Health and Bio-diversity by NBA	
	18:00	Close	
Apr. 7	8:30	Field Exposure Travel to Thiruvallur	Thiruvallur
	11:30	1) L.N. Kandigai, Thiruthani block	
	13:30	Lunch	
	14:40	Travel to Vellore	Vellore
	16:30	2) Sri. Puttru Maharishi Sidha Hospital	
	19:00	Dinner and socialization	
	21:00	Travel to Chennai	
Apr. 8	9:00	Yoga	DMI Center, St. Thomas Mount, Chennai
	9:30	Recap and reviewing the exposure programme	
	11:00	Tea break	
	11:15	Sharing Session II 1) Sr. Rose, I.H.M. Hospital --- (ILDC/OMC2002) 2) Sr. Eliza, AYUSHA ----- (OMC1992) 3) Mr. Raju, CCD ----- (ILDC1986) 4) Mr. Arokiadas, TNTDS ---- (ILDC1983) 5) Sr. Jayaaseli, FMM ----- (ILDC1982) 6) Ms. Flo, ANITRA Trust ---- (ILDC2009)	
	13:45	Consolidation	
	14:30	Open discussion on networking	
	15:00	Closing ceremony	

Participants:

No.	Name (Nick name)	Batch	Organization	Place
1	Sr. Jeyaseeli Dhanaswamy (Sr. Jeyaseeli)	ILDC 1982	Franciscan Missionaries of Mary Stella Maris Convent (FMM)	Tamil Nadu
2	Mr. Arokiadas Chinnappan (Arokiadas)	ILDC 1983	Tamil Nadu Tribal Development Society (TNTDS)	
3	Mr. Nachimuthu Shethulinkhan (Shethu)	ILDC 1986	Social Institute For Development And Rehabilitation (SIDAR)	
4	Mr. Murugan Kalirathnam (Kali)	ILDC 1994	Thiruppani Trust Association (TTA)	
	Mr. Magendiran Narayanasamy [Programme support member]	-		
5	Mr. R.T.John Suresh (John Suresh)	ILDC 2004	Participatory Learning Action Network & Training (PLANT)	
	Mr. Anto Asirvatham, [Programme support member]	-		
6	Ms. Florence Vijaya Vani Utla (Flo)	ILDC 2009	Asian Network for Innovative Training, Research and Action (ANITRA) Trust	
7	Mr. Babu Venkatesh (Bob)	ILDC 2015		
8	Mr. Srinivasan Natchathiram (Srini)	ILDC 2010	Community Based Rehabilitation Forum (CBR Forum)	
9	Mr. Alexander Jayaraj (Alex)	ILDC 2011	Revival Church Fellowship (RCFI)	
10	Mr. Paddana Balaram Naidu (Naidu)	ILDC 1982	Comprehensive Social Service Society (CSSS)	Andra Pradesh
11	Ms. Sarojinamma Paddana (Sarojini)	ILDC 1991	Sanghatitha	
12	Mr. Addala Jagannadha Raju (Raju)	ILDC 1986	Center for Community Development (CCD)	Odisha
13	Ms. Padma Raj Addala (Padma)	ILDC 2014	Gajapati Women Cooperative Society Ltd.	
14	Sr. Innocent (Sr. Innocent)	ILDC 1986	Janasaukhya	Kerala
15	Ms. Rossamma Philip (Sr. Celine)	ILDC 2015		
	Sr. Regina [Observer]	-		
16	Sr. Eliza Kuppозhackerel (Sr. Eliza)	OMC 1992	AYUSHYA - Centre for Healing and Integration	
17	Mr. Augustine (Augustine)	ILDC 1995	Total Literacy Programme (TLP)	
18	Ms. Rosamma V.J. Jacob Vypana (Sr. Rose)	ILDC/OMC 2002	Immaculate Heart of Mary (I.H.M.) Hospital	

DAY1 (Apr. 6, 2016)

Inaugural Session:

Dr. Hiromi Kawahara's vision was to promote community health rather than only confined to clinical practices, converted his dream in to reality by establishing AHI. AHI has provided opportunities of training to more than 6000 of community health and development workers across Asia since its establishment in 1980. Dr. Kawahara was passed away in May 2015. It has been very hard to believe that he is no more with us but his vision and mission is strongly rooted amongst his disciples and they were committed to carry out his vision as AHI Alumni at different places at different levels. While recalling Dr. Kawahara's achievements, a one minute silence was observed in order to pay homage to demised soul of Dr. Kawahara prior to opening of reunion seminar at Chennai, Tamil Nadu, India. As on the Indian tradition a lamp was lightened by few representatives of reunion seminar. Lightening is symbolical representation in India, which means that the primary focus of every initiative is to bring brightness in life. AHI reunion seminar is one of those initiatives, which aims at enlightening health consciousness among the community at large.

Mr. Murugan Kalirathnam, [ILDC1994, Thiruppani Trust Association (TTA)], welcomed the delegates and resource faculties for the programme.

Ms. Yayoi Takada [Asian Health Institute (AHI)] extended her greetings to the AHI Alumni and also appreciated their effort in strengthening Alumni activities and the effort of the committee members.

Thematic Area of the Seminar:

Mr. R.T. John Suresh, [ILDC2004, Participatory Learning Action Network & Training (PLANT)] briefed about the thematic area of this particular seminar and also recollected ANITRA Trust's effort in the promotion and functioning of AHI India Chapter, which was instrumental in participatory planning. He also emphasized the need to protect traditional health system in order to empower health in rural areas and the collective role of AHI alumni in



securing health for all in the fast growing commercialized system of medicine in India. He as a member of the Federation of Indian Chambers of Commerce and Industry (FICCI) had an opportunity to attend the recently held global investors meet in Chennai found that the Multinational Companies (MNCs) were less interested to

invest in health sector. Only 10 percent of investors have shown some interest in health sector, which shows that their motive was only business. So, it is very important for us to inculcate health consciousness among the communities, mobilize collective resources to promote alternative medicine, nature medicine, community health practices and most importantly preserve the Bio-resources for eco-friendly energies.

Sharing Session I: ---

Mr. Murugan Kalirathnam, [ILDC1994, Thiruppani Trust Association (TTA)], a renowned social worker shared his experience working with different NGOs at different capacity and his present role in TTA. **Mr. Srinivasan Natchathiram** [ILDC2010, Community Based Rehabilitation Forum (CBR Forum)] briefly presented CBR Forum. **Mr. P. Stephen** [Integrated Rural Community Development Society (IRCDS)] in association with TTA respectively, presented the networking among 8 NGOs and Disabled Person's Organizations (DPOs) in Thiruvallur district and its activities, accomplishments, lesson learnt and challenges.

This joint presentation clearly projected the planning process from grassroots level to policy level and transparent process between local Civil Society Organizations (CSOs), district level networking and donor partner to achieve the goal. Main concept of this presentation was to address, how effectively TTA involved in promoting the rights of Persons with Disability (PWD) in Kanchipuram and Thiruvallur districts and adopting applicable strategies in field level interventions towards the welfare of PWDs.



Mr. Stephen (left) and Mr. Srinivasan (right)

1) Presentation by Mr. Kali, TTA

TTA registered in 1973 at Thiruvallur has been actively involved in empowering marginalized communities in 29 panchayats in Thiruthani block. TTA at present involved in empowering PWDs in Thiruvallur district with support from CBR Forum. PWD Act 1995 and National Trust Act 1999 recognized ten kinds of disability as disability but on the whole various kinds of disabilities are yet to be recognized, so that all the PWDs can avail the privileges under PWD Act. 2.21 percent of Indian population suffers from various kinds of disability as on 2011 census but in actual disability ratio is higher than the survey report.

Poverty, malnutrition and genetic disorders are the major cause for disability and PWDs are prone to poverty, it is because of the system, ignorance, negligence and lack of education amongst the family members

and community. Immediate need to address disability related issues are mainly, behavioral changes towards disabled, providing charity, social and medical facilities and respecting the PWD with dignity as fellow human.

TTA in association with CBR Forum, Bangalore works with PWD for about five years gradually brings changes in the life style of PWD and their families.

2) Presentation by Mr. Srini, CBR Forum

CBR Forum is one of the leading organizations solely dedicated to empower PWD. Mr. Srini narrated CBR Forum and its association with CSOs like TTA and IRCDS. In 2004, WHO, UNESCO and ILO defined CBR as “a strategy within general community development for rehabilitation, equalization of opportunities and social inclusion of all PWDs.” CBR is implemented through the combined efforts of PWD themselves, their families, communities and organizations for the welfare of PWD. The primary objective of CBR is to ensure PWD to maximize their physical and mental ability, access regular services and opportunities and to become contributor to society at large and to protect and promote the rights of PWD to lead dignified life. Besides PWD act, there were several other acts enacted by Indian government to give equal opportunity for the disabled to empower themselves. These are:

- The Mental Health Act 1987
- National Trust Act for the welfare of persons with Autism, Cerebral Palsy, Mental retardation and Multiple disabilities act 1999
- The Rehabilitation Council of India act 1992

India is one the signatory of United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) is still working out at policy level as a result, in 2010, Ministry of Social Justice and Empowerment constituted an expert committee under Dr. Sudha Kaul. This committee drafted a new bill in 2011, in which 19 more disabilities are identified and included in the draft bill and proposed to replace PWD Act. The rights of PWDs bill 2014 was introduced in Rajya Sabha and yet to be amended. A ray of hope among the disabled will be brightening if this bill is passed in the parliament. Mr. Srini further added that CBR Forum is willing to extend its support to NGOs, Community Based Organizations (CBOs) if they are in line with CBR matrix towards the welfare of disabled. CBR Forum encourages their partner NGO to have strong linkage with several other organizations to mobilize collective effort in uplifting PWD.

3) Presentation by Mr. Stephen, IRCDS

Eight NGOs in Thiruvallur district have been involved in empowering PWDs. Mr. Stephen described the strategies adopted in formulation of district level DPO federation. Disability is a human rights issue, a charity alone cannot address disability, it needs Rights Based Approach (RBA), constant intervention, advocacy and

campaign. It was not an easy job, need lot of patients in the identification of people with disability, counseling family members, convincing sector wise officers to give equal opportunity for PWD in education, employment and participation in good governance. Through network, 6,000 plus PWDs were identified in Thiruvallur district in about 5,700 families with PWD and given care and counseling as first step. Then moved in to creating awareness on disability to various sections of people and made them to understand practical difficulties of PWDs and ensured to get disability ID card, government privileges to PWDs, enrolled in national employment guarantee scheme, ensured equal wages etc., Besides the federation made advocacy campaign to make policy level changes at the district level.

4) Comments and suggestions from Mr. Reni, WVI

Mr. Reni Jacob, [Non-medical course 1982, World Vision of India (WVI)] briefly shared his experience working for WVI and its role in empowering PWD. WVI concentrates in urban and rural communities irrespective of caste, creed etc., One of its programme components along with community development is to empower PWD. WVI strategies was to strengthen community based organization, institutional development etc., the Family Forum, a community based initiative in Khandamall in Orissa was one of the successful formula that reduced communal tension and protected the community as a whole, because in the Family Forum, people realizes and understand the value of community living and neighborhood relationship. WVI plans to execute this family forum to the other states also. Mr. Reni insisted the AHI Alumni's to think of initiating the Family Forum at their working areas

Sessions by external resource persons: ---

I) Community Health:

Ms. Maria Paul, Consultant, Tamil Nadu Voluntary Health Association (TNVHA) presented a basic information on Community Health, holistic approach in empowering community health. "Health is a state of complete physical, mental and social well bring and not merely absence of any disease or infirmity". Community Health primarily focus on geographical coverage or group of people settled in one particular area such as hamlets, villages, etc., Physical, social and cultural difference may affect community health, the major responsibility of the community organization is to empower the community to solve the problem by themselves. She also expressed her concern in improving primary health care system in India along with briefing TNVHA's role and responsibility in the health care sector.

II) CBR/CBID:

Mr. Amarnath Ambrose from National Institute for Empowerment of Persons with Multiple Disabilities

(NIEPMD) under Ministry of Social Justice and Empowerment gave an outline about programmes for empowering PWDs and promoting CBR/CBID (Community-based Inclusive Development). As on 2011 census, 1.8 percent of people are living with various kinds of disability in India and WHO data indicates that there are about 10 percent of population in India are living with disability. It was presumed that only one third of PWDs were registered in 2011 survey and the percentage of disability could be more than recorded. Further he added that so far 35 different combination of disabilities were identified and registered through NIEPMD, which is working out at the policy level to redefine disability because in India a person with 40 percent and above physical and mental disabilities were considered as disability that is constitutionally recognized as the primary indicator. The disability indicator varies from country to country e.g. in UK, a cardiac patient was considered as disabled, but not in India.

NIEPMD offers services like assessing problems, clinical pathology, hearing and communication, special education, therapeutics, social work, adult independent living, information and communication, trainings, research and documentation and technical support to NGOs. While briefing about CBR programme, Mr. Amarnath insisted that genetic care and counseling is a must for parents with disabled child to avoid further disability in their family. Prevention, individual care, positive attitudes, functional rehabilitation, empowerment, income generation and monitoring were the major components of NIEPMD's CBR programmes. Mr. Amarnath also gave orientation about NIEPMD and its association with NGOs.

III) Health and Bio-diversity:

Health and Biodiversity is one of the major concerns in the globalized corporate world. Corporate companies were dominating and controlling the globe today and exploiting the natural resources, as a result Nagoya protocol strongly recommended conserving natural resources for sustainable use. Mr. Ishwor Poojar from the National Biodiversity Authority (NBA) described several factor causing serious damages to environment. Air pollution in New Delhi caused serious breathing problem among children, industrial pollution and dumping of waste in river Yamuna caused contamination in water and water-borne diseases and encroachment of lakes, ponds and rivers caused heavy flood in Chennai. Manmade disasters destructed ecological system in general and the other form of destruction and exploitation of natural resources were commodification of natural resources. Thirty years back in India, no one knew about bottled water, today packaging and bottling drinking water becomes a billion dollar business. Multinational Company's (MNC) convert everything in to commodity, product and makes huge profit without providing any share to farmers, those who really care and conserve bio-resources. e.g. the cola companies produces more than 200 products from sea weed and a French cosmetic company produces lipsticks and cosmetics from red chilly imported from Karnataka, India, but the farmers gets nothing. Mr. Poojar further added that oceans produce huge quantity of oxygen than forests. Oceans and forests are gifted assets to the survival of living being, if natural resources being destructed and contaminated, certainly production of oxygen level will be decreased and the

consequences are unimaginable. Conservation of natural resources becomes mandatory now.

Government of India enacted Biological Diversity Act 2002 and constituted NBA in 2003 to implement the act, which is primarily amended to conserve bio-resource, sustainable use of it and ensure fair and equitable sharing of profits. This act will be implemented at national, state and local level, so that the community participation in preserving and protecting resources will be increased. Further, Mr. Poojar explained the functional relationship between NBA, Biology and Bioinformatics and Biodiversity Management Committee (SBB and BMC). BMC at local level plays significant role in conserving natural resources.



After programme of DAY1

DAY2 (Apr. 7, 2016)

Field Exposure: ---

An exposure trip was made on second day to visit Thiruthani and Vellore to understand the field reality and the effort put by NGOs to uplift the underprivileged people and to document the traditional knowledge.

1) Visit to L.N. Kandigai, Thiruthani

In L.N. Kandigai, Thiruthani, the participants were able to connect theory session with field experience how TTA has established and mobilized PWDs and empowered them to lead their life with their own capacity. Mr. Kali, who has been working for 3 decades in Thiruvallur district narrated that he has started his social work at L.N.Kandigai working with Iruals and Joya tribal community. The main source of income for Irula is rearing white rat, rabbit and working as labourers and joya tribes are mainly snake hunters and they also guards farming lands besides hunting snakes. In the recent Chennai floods, TTA mobilized 45 lakhs from Tata Group

of companies and rescued and rehabilitated the flood victims at L.N.Kandigai. Apart from various development activities, TTA now concentrates on empowering PWDs with the technical and financial support received from CBR Forum.

Mr. Murugan and Mr. Livingston President and Secretary of Vasantham DPO Federation in Thiruvallur district explained about their past and present life style, formation of federation and achievement etc., Mr. Livingston further explained that PWDs were ill-treated in the past and now things are changing, people started respecting disabled and family members recognize the value of PWD at home and at society. After formation of federation, they have achieved in getting free bus pass, train pass, disability ID cards. Lobbied government sector employees to install disable friendly infrastructure at railway station, bus station like wheel chair, separate toilets, installation of ramp etc., and also getting easy access to public sector offices. So far 10,000 members are registered in the federation at thiruvallur alone.

As part of the visit, a health and environment rally was organized and cultural performance was arranged to build rapport with local school and community.



2) Visit to Sri. Puttru Maharishi Sidha Hospital in Vellore

Sri Puttru Maharishi Tradition dates back to the year 1516 when the Saint was found under an anthill inside the fort of Vellore. He was a saint and to escape from the heavy rain he took shelter in the anthill. He started to practice austerity even under the anthill. People discovered him and placed him under a tree, a day later he woke up from his austerity and blessed the devotees. People worshipped him and used to call him as Puttru Maharishi. He created the traditional educational institution called Gurukulam and taught traditional siddha medicine, astrology, spirituality and incantation. This Gurukulam tradition continued with efficient teachers and the present Guru Dr.K.P.Arjunan is 47th Guru of Sri PuttuMaharishi Tradition. (<http://puttrumaharishi.com/aboutus.php>)

The hospital staff gave warm welcome to the delegates in a traditional way and all the delegates were honored with crowning. Dr. Archunan and his team explained how effectively they are working to document

the traditional knowledge of medicine and make it available to common people to know the traditional methods of healing to younger generation. Dr. Archunan so far has given training to 30,000 traditional healers and practitioners and documented 1,490 herbs and spices processing methods. The All India Council of Indian Medicine acknowledged his documentation and made it available to several Sidha and Ayurveda colleges in India as syllabus. The Tamil Nadu Sidha University, which has 8 colleges in Tamil Nadu regularly place their students at Dr. Archunan's hospital for practical classes.

AHI alumni have had interaction with the students and health practitioners of Dr. Archunan, a visiting doctor at the Christian Medical College (CMC) Hospital, Vellore. His role at CMC is to check the pulse of patients in coma stage when the modern and advanced equipment failed to monitor pulse and heart beat than he recommend the CMC doctors whether to proceed for surgery or not. CMC greatly acknowledged his accuracy in checking pulse and heartbeat of patients.

There was a demonstration session to prepare herbal oil and drugs in front of the delegates. Dr. Archunan and his team offered a grant fellowship dinner to delegates and the day was completed.



Mr. John Suresh (left)



DAY3 (Apr. 8, 2016)

On the final day programme was started by yoga session led by **Mr. Nachimuthu Shethulinkhan** [ILDC1986, Social Institute for Development and Rehabilitation (SIDAR)]

Feedback on Field Exposure: _____

Ms. Florence Vijaya Vani Uthla [ILDC2009, Asian Network for Innovative Training, Research and Action (ANITRA) Trust] facilitated a feedback session on the previous day programmes.

- Field exposure to TTA and DPO was impressive and it has been module for others to follow
- TTA should be little more conscious on time management and should give space for community interaction.
- Public private partnership in the development process was very much reflective when Mr. Livingston was sharing their achievements. Good to see that PWDs gained much confidence and helping others as people's organization. Children rally in the noon was irrelevant.
- Puttrumaharishi center exposure was new experience, unexpected to receive such a grand welcome
- Multiple participation at the sidha hospital was appreciated
- Well documentation of medicinal plants and its processing methods useful for younger generation, and they have done it very well
- Herbal preparation demo was good that every one keen to know the process.
- Learnt to use the herbs available within our reach
- Understood the use of Bio-resource from the field exposure and the importance to protect it.

Sharing session II: ---

The participants shared their respective NGOs contribution to the society. This type of sharing gives an idea for other to learn and adopt new ways and techniques for the wellbeing of people.

1) **Sr. Rosamma V. J. Jacob Vypana [ILDC/OMC 2002, Immaculate Heart of Mary (IHM) Hospital]**

Sr. Rose briefed about Community Health Department of IHM Hospital. Saving rivers and protecting the surrounding environment is one of the core activities of IHM Hospital. Emphasizing people's participation, training youth, women and community, networking and creation of awareness through street play were organized regularly.

2) **Sr. Eliza Kuppuzhacker [OMC1992, AYUSHYA - Centre for Healing and Integration]**

Main purpose of **AYUSHA** is to promote alternative system of medicines by giving year-long training to several groups of people. Collaboration with likeminded organization, and empower health system at large.

3) **Mr. Addala Jagannadha Raju [ILDC1986, Center for Community Development (CCD)]**

Mr. Raju explained about CCD activities. Sustainable livelihood, mainstreaming PWD, creating competitive market for forest products and empowering tribal community make use of forest products for livelihood were the present activities.

4) Mr. Arokiadas Chinnappan [ILDC1983, Tamil Nadu Tribal Development Society (TNTDS)]

TNTDS given training to 300 health workers, organized bridge schools, campaign to protect land rights of tribes and organized forest rights movement at javadhu hills.

5) Sr. Jeyaseeli Dhanaswamy, [ILDC1982, Franciscan Missionaries of Mary Stella Maris Convent (FMM)]

Sr. Jeyaseeli shared her many years' experience in providing health care services in marginalized communities.

6) Ms. Florence Vijaya Vani Utla [ILDC2009, Asian Network for Innovative Training, Research and Action (ANITRA) Trust]

ANITRA is known for its movement and development for over 40 years. From 2000 onward created direct linkages with community and adopted rights based approach in development, translating needs into rights and building livelihood forum etc.,

Group Deliberation:

Ms. Yayoi coordinated the group deliberation by dividing the participants in to three groups to discuss on roles of NGOs, POs and GOs. First group discussed and described about the functional linkages between NGOs, POs, second group between local government, POs and third group between Local government and NGOs. This deliberation critically analyzed the role and responsibilities of each stakeholders and recommended transparent communication network among the stakeholders.

**Open discussions on networking:****1) Future reunion seminar**

- Mr. Sethu explained about the history of AHI Alumni initiatives and networking process from the beginning of 1990 to till date and also expressed his desire to strengthen the network.
- The next reunion seminar will be organized either at Orissa or north eastern state. Concerned alumni's residing at Orissa should finalise the programme. Its theme will be decided later and informed to all alumni.

- AHI alumni's contribution to AHI was discussed and it was decided to contribute in accordance with the capabilities of NGOs or alumni's personal will.
- Inviting non-alumni for AHI alumni meet was discussed and the decision is withheld for time being.

2) Dr. Kawahara award

- The participants unanimously appeal to AHI decision makers to think of constituting an award in the name of Dr. Kawahara to be given to deserving persons in the field of community health sector in Asia every year. This could be one way of honoring Dr. Kawahara and spreading his vision and mission to the forthcoming generation in Asia.
- Ms. Yayoi replied that she will talk it over with her coworkers at AHI and get back to the participants.

Constructive Appraisal: ---

The participants attending this reunion seminar appraised the programme planning and execution. First of all they appreciated the effort taken by Mr. John Suresh and his team in hosting, making logistical arrangement and timely communication and the other arrangements for the programme. Overall the programme appraisal is as follows:

- Topic chosen for the programme reflects the emerging need to address the issues concern.
- Interlinking of health and environment was much appreciated
- Resource faculties are good in leading their session. There should be some clarity on community health session.
- Lots of information shared on biodiversity act. Need to implement at grassroots level to national level.
- Food, accommodation and training facilities were good, well organized and good place for international trainings. Wi-Fi connectivity could be useful, if it is available at this center.
- Mr. John Suresh's effort as a main coordinator of this seminar was much appreciated; he and Mr. Anto Asirvatham, a staff of PLANT are well versed in managing overall programme.

Key learnings:

- Health is a basic human rights and it should be given equally to all irrespective of social, cultural and economic barriers. CBOs and NGOs need to lobby the government mechanism to effectively implement health related services to people and ensure health for all.
- Promote alternative system of medicines and properly document traditional system of medicines and make sure that in every PHC, qualified persons should be appointed in all available system of medicines, so that the people can avail medical facilities within their reach.
- Coordinate and organize massive signature campaign to lobby the government to amend disability bill

2014.

- Ensure that in all private and government sector departments, a disability friendly infrastructure should be installed and make sure that all the government officers should be aware of disability act.
- Insist public and private sectors to install disability helpline at public places.
- Protecting and promoting bio-resources becoming mandatory. NGOs should take lead role in monitoring to save the environment and create mass awareness among the community on biodiversity act.
- Lobby the government to study environmental consequences and follow environmental norms before implementing any development proposal. Environmental rights are human rights. Hence, people have every right to protect the environment, the government and private sectors should implement any development plans as per the norms and conditions set by the Ministry of Environment and Forest.
- Ensure **BMC** formation in all the villages, so that people's participation in conserving environment could be increased.
- Health and environment is interrelated, if the environment is polluted, people will suffer from various kinds of health problem. So, it is very important to protect the natural resources such as hills, mountains, forest, ocean, land etc., for the wellbeing of people.

Mr. Kali extended vote of thanks to AHI and AHI alumni participated in the programme and extended his gratitude to Mr. John Suresh and team for hosting and organizing this reunion seminar. The seminar comes to an end with a fine note to ensure health for all.



After programme of DAY3



Report by **PLANT**