TRIBAL HEALTH INITIATIVE
helping tribals heal themselves

When we referred Kariya to a Salem city hospital for advanced care she asked, "Why do you send me off? Can't you treat me here?". She could not understand why the Tribal Hospital did not have the equipment needed to care for her. For Kariya it was not the money alone that mattered (bills could be astronomical from the tribal context); city hospitals themselves are culturally intimidating for a tribal. This year the Government of Japan came forward to fill this gap. A significant grant from them made it possible to upgrade the Tribal Hospital to give better medical care for the tribals.

The operation theatre is now much better equipped and the laboratory has a semi auto-analyser, which makes blood tests faster and more precise. A new Tata Sumo ambulance makes shifting patients more comfortable. Solar power lights up the campus as well as pumps up the water, improving the basic facilities at the hospital while saving energy. A new high power generator provides the much needed backup power – where power outages are so common. An Ultrasound scanner will soon arrive, lack of which was forcing us to send at least 5 patients a week to Salem. The Kariyas who come in future will perhaps need much less referrals.
Health

This year, new roads to the Kalvarayan hills and more buses along the hospital route extend access to about 50 more tribal villages to the Base Hospital. These tribals have fared worse than their counterparts nearer to the hospital, since access to surgical and emergency facilities were only available in Salem, more than 100 kms for most of them. The Base Hospital is now crowded with tribals from these hills and work is as busy as ever. The Field health work has been taken over by the Health Workers and most of them now have driving licenses. They now reach even the most remote villages in mopeds to deliver health care to mothers and newborns at their doorstep. The 5th batch of Health Worker trainees finished their training and 5 of them have joined as Staff to help us deal with the workload.

Continuing on to its 13th year, the Tribal Health Initiative, Sittilingi, remains the primary source of healthcare for the approximately 80,000 Malayali(hill dwelling) tribals of the Sittilingi valley, Sitheri hills and Kalvarayan hills. The Community Health component caters to the 21 villages nestled in the Sittilingi valley. Transportation is difficult and inaccessibility to resources is the main constraint.

Prior to the inception of the Tribal Health Initiative in 1993, there were no doctors in Sittilingi, and access to basic hospital facilities required a minimum 50 km journey. Serious illnesses and other complex medical procedures, including surgery, required patients to travel to Salem, located about 100 km from here. The inability of most tribal families to afford the costs of transportation and treatment made modern medicine almost inaccessible to the tribals of this area. Recognising a degenerating health situation and an infant death rate of 150 babies out of every 1000, the Tribal Health Initiative began its work from a mud and thatch hut.

Farming

Another tangible change was the Tribal Farming Initiative's silent transformation of the tribal farmers in the valley. From 4 farmers last year, this year we have 30, doing small patches of organic grains, vegetables, turmeric, cotton and sugarcane. We have also been able to find some markets for them in the cities, which fetches them fair prices for
The Bhoopathi Women Farmer Group of AK Thanda village, in Sittilingi valley has started a Seed Bank. This initiative is to conserve and make available all varieties of traditional seeds to the increasing number of organic farmers. A barter system is used, where the borrower pledges to grow organically and then return double the amount of borrowed seeds. The seed bank will have a ledger and other records like any other bank. We plan to create such seed banks in other villages too.

email : tribalfarmers@gmail.com

Education
Thulir, the Education Initiative has been breaking new ground. The Resource Center is packed with children and activity. Resource persons in clay modeling, music and drama have kept the children fascinated, while camps and contests sharpen their skills. This brings in children from nearby villages too, to share the fun of learning. A new Basic Technology Training Course for one year will give 7 school dropouts multiple skills to help them choose a vocation.

We are planning to set up a Tribal Technology Initiative for advanced vocational training

e-mail: thulir@gmail.com
website: www.thulir.org

Craft
The Lambadi community in 2 of the villages have a tradition of exquisitely embroidering their traditional dress. Current fashions force the younger women to shift to the sari, and this art here is almost extinct. We have been able to persuade the older women to train one group in each village to revive this art as part of their heritage. Training is going on amongst the enthusiastic younger women and the Tribal Craft Initiative is also looking out for a market for their work.

email : tribalfarmers@gmail.com

their labour and eliminates the middle men. Meanwhile 12 farmers from different villages have gone for training in organic methods, while we had 2 experts come here to share their knowledge and give advice on site.

Sorting and storing in the Seed Bank

enjoying the drama workshop
plans for next year

- Reduce referral of patients from Base Hospital by effective use of new facilities.
- Field health work to be managed fully by Health Workers and Health Auxiliaries.
- Focus on tribal farmers groups and find stable markets for their produce.
- Support and sell handicraft products created by the Lambadi women.
- Complete and evaluate the Basic Vocational Training course for tribal youth.
- Initiate work for a Tribal Technology Park for advanced vocational training of tribal youth.

Donors

This year the Japanese Government gave us a large infrastructural grant. FOS [Friends of Sittilingi] has been our largest supporter, and continue to be so. For friends in United Kingdom, there is an FOS registered in the UK. The BCF* has helped with salaries and the MMKCT* has promised to help us meet the bills of patients referred for advanced care and for the OPD extension.

India Cements provided us with free cement for construction of our Staff Quarters.

India Cements

Tsunami Relief

We have been continuing to help ARWEL with the rehabilitation of fishermen after the Tsunami. In the 6 villages considerable rehabilitation has been done and life is back to normal. ARWEL helped in buying boats and nets as well as income generation activities like a rice bank, leather work, stitching and working capital for groups of widows to buy and sell fish. Most of this came from FOS funds and the EHA. “The sea is still our mother but we have learnt that we should have other sources of income too in an emergency,” says Jayanti, a key worker for ARWEL.

Thank you for being with us in our work. We look forward to meeting all of you here at some point in time. There is no better appreciation than a visit to us. Please do come.

THE THI TEAM

For more information contact

TRIBAL HEALTH INITIATIVE
Sittilingi, Dharmapuri dist.
Tamil Nadu 636 906
phone/fax: 04346-258611
email: sittilingi@sancharnet.in
website: www.tribalhealth.org

*Emmanuel Hospital Association

*Business & Community Foundation
#Manmohani Kaul C’tble Trust
## Learning about beekeeping in the new training course

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<th>Receipts</th>
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* Rupees in lakhs

Detailed audited accounts available on request

Auditor: Mr. K. Shivakumar, Gandhigram
Bankers: SBI, Kotapatty, Canara Bank, Theerthamala, ICICI Bank Salem

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### Board of Trustees

- Dr Regi M George
- Dr Lalitha Regi
- Prof M Ravindran
- Dr Sara Bhattacharji
- Dr Indru Tupulur
- Prof N Kamalamma
- Dr Sukanya Rangamoni
- Mr A. Arun

### THI Staff

- 2 Doctors
- 5 Admin staff
- 4 Education staff
- 3 Community Workers
- 15 Health Workers
- 24 Health auxiliaries
- 3 Para-medical staff
- 4 Support Staff

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Registered Public Charitable Trust No. 147/92, Dindigul,
Registered under Sections 12A and 80G of the IT Act, Registered under FCRA to accept Foreign Donations

Our thanks to ADS Fine Offsets, Salem for helping us print this report.
Friends of Sittilingi (FOS) activities continue to be especially enthusiastic and supportive this year. We are grateful to the numerous people who help us to work for the tribal community here and look forward to their continuing support.

**Are you a member of the FOS?** If not join the FOS, who are scattered all across the globe, or write to us if you would like to start an FOS group in your area. Friends in UK can contact Dr. Carolyn Lomas [email: carolomas@gmail.com] and friends in US can contact Hari Prabhakar [email: tribalhealth@jhu.edu]

What we can use your donation for:

- **Health:** For the ‘Distant Healer Fund’ which is used to subsidise patients bills.
- **Education:** For purchase of training materials
- **Farming:** For creating a revolving fund for advance purchase of farmers produce
- **Craft:** For giving training to the Lambadi women.
- **Corpus:** For creating a reserve fund.

Please use the following form to indicate your preference:

**YES, I want to be part of the change in Sittilingi, and I would like to help:**

(please tick)

- Rs. ............... to improve **Health** for tribal families
- Rs. ............... for better **Education** for tribal children
- Rs. ............... for promoting sustainable **Farming** in Sittilingi
- Rs. ............... for training of Lambadi women in **Craft**
- Rs. ............... for the **Corpus Fund**.
- Rs. ............... for any other purpose you see fit

I am enclosing cheque/DDno. ....................... for Rs................ drawn ....................

My address is

email 
Signed
Phone

Cheques/DD may be made in the head ‘TRIBAL HEALTH INITIATIVE’, payable at SBI, Kotapatty (6244) or Canara Bank (1128), Theerthamala or ICICI Bank, Salem

All contributions will benefit exemptions under Section 80G of the Income Tax Act (1961). Registered under FCRA to accept Foreign donations. You will be updated on our work twice a year.