

# TRIBAL HEALTH INITIATIVE

Sittilingi, Dharmapuri Dist; Tamil Nadu 636 906

*Annual Report 2011- '12*



*Helping tribals  
heal themselves*



From 4 to 40, the THI team grows

## *Highlights*

- ★ Sittilingi's organic farmers make headlines
- ★ Porgai's silver lining – more artisans and sales
- ★ More doctors ease patient rush in hospital
- ★ Kalrayan HAs move from training to working

## Making the cover story

Theerthan and Selvaraj were ecstatic and proud. When they started organic farming with much doubt in their heart, they never imagined that one day they would make the cover story of 'Karshakashree' a well read farmers magazine in Kerala. They read about jargon like 'supply chain', which they were routinely doing but never thought of. For the over 100 farmers too it was a proud moment. Many remember the nights they sat around in the village common where Tha and Gee spent patient hours explaining and trying to convince them about the benefits of organic farming, its link to health and the economics of it. What started with 4 farmers in 2007 grew exponentially to 15, then 45 and now over a 100. In the meantime, they formed a society, bought and sold as a group and hence had better bargaining power. They joined the organic certification process of the TN Govt and have

*Women group members prepare grain for markets*



*SOFA was paid Rs 75/kg of turmeric by PDS [Peermade Development Society] when the market price was Rs.40. Cotton too was sold for Rs 60/kg when the market price was Rs.46/kg. This premium price and accurate weighing with an electronic scale is what draws more farmers towards sustainable farming.*

already been certified, thus increasing the value at which they can now sell. And now, instead of searching for buyers, 'SVAD' products are much in demand. All this was achieved not without a struggle, but the tribal farmers showed the world what perseverance and belief in what you do can achieve. And that is why the outside world is now hearing about them through the press and TV. This year 55 new farmers joined and we had sales of about Rs 20 lakhs. AASHA – UK helped farmers with vermicompost tanks and cowshed floors to improve inputs into organic farming. Four more trainings and an exposure visit also helped to hone their skills.

## Silver lining for artisans

Though the year started out with a slow note reflecting the depressed economy, by the year end sales pepped up to [over Rs 12 lakhs]. We now know which exhibitions to go and which product sells better where. This learning curve is needed for all enterprises. About 40 artisans makes an average Rs.2000/ month for 4 months. This money is solely in control with the 60 women, all farmers, empowering them to use it for what is most needed in the house. It is usually spent on childrens' education and good food, a precondition for good health. That is why keeping **Porgai** going is important . We still have a long way to go to have enough markets so that all artisans have at least 8 months of work and leave the next 4 months for agriculture. The silver lining though is that AIACA [All India artisans and

craft workers assn] has agreed to help us with designer inputs, management and finding markets for the next 3 years and



*Traditional Lambadi frontpiece collected from remote villages*

this should help the artisans to stand on their own feet. We also scoured the interior Lambadi villages and collected old pieces which is part of their heritage and from which the new generation can learn.

**Tribal Health Initiative** started working in Sittilingi valley of Dharmapuri Dist of Tamil Nadu 19 years ago. We now have a Base Hospital which caters to more than 1 lakh, most of whom are tribals. We also run a comprehensive development program for about 18,000 tribals who dwell in 35 settlements.

**Our vision** is that the people of Sittilingi valley and Kalrayan Hills lead a **better quality of life**

- To attain the **highest possible level of holistic health.**
- To enhance their socio-economic status while retaining their **pride, self-respect and self-reliance** and ensuring their **active participation** in programs meant for their welfare.
- To create an atmosphere highly conducive for the growth and **development of local cultures and customs.**



Field clinics in the Kalrayans include health education sessions

### More docs ease hospital work:

As with previous years there is a steady increase in tribal patients. We have been joined by 3 more doctors including a surgeon, so the scope of curative care especially surgery is better. With increasing patient load we have a paucity of space. The Govt. supported **TNHSP** project is the best thing that has happened in tribal health care and we hope that it will continue for more years. The hospital also benefitted from a new ultrasound Doppler scan machine and batteries for the solar lighting donated by the The Lodge Montford. A new Pharmacy as well as a room for HIV screening made it more convenient to the

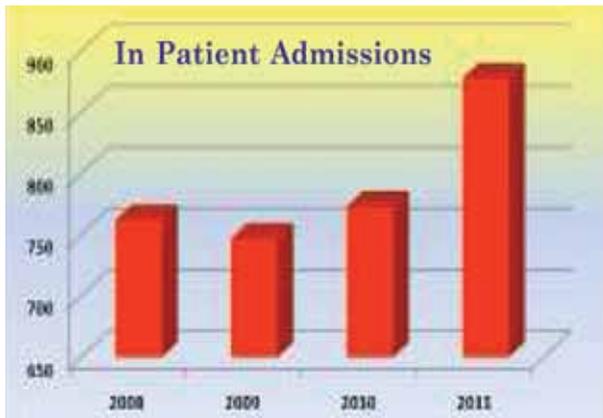
patients. We tested 1313 patients for HIV of which only 3 were positive, all from outside the valley.

Community health care in the Sittilingi valley took a new face with the starting of the mental health project which will be guided by doctors from CMC vellore. We have

taken a new batch of HAs [Health Auxiliary] in the valley while still keeping a few of the old batch to get the right combination of experience and youth. The Old Age Health Scheme is still well utilised and we will be soon restarting the field clinics which will ensure that routine medicines will be available at their doorstep.

### From learning to doing.

Anxiety and a bit of fear was the feeling in the training hall when the 14 HAs of the Kalrayan Hills were informed



that much of the training was over and that field clinics and work in the villages would start. But one year down the line, it is all smiles and a sense of confidence that is floating around. We have done 54 field clinics and done 155 antenatal checks. Mothers and under 5 children too have a high attendance [767 under 5 child check ups]. Though it is too early to see the changes, the general mood is on the upswing. But it was not easy to come by. Of the 23 that joined the training, 9 of them dropped out - some due to difficulty in learning, some due to migration because of poverty and some due to the roads to their villages were washed off and the jeep couldn't reach them to pick them up for training. The OP in Vellimalai too is well utilised and with more doctors we are thinking of increasing our curative care in the Kalrayan Hills



Antenatal checks include a Doppler exam in the village itself

### Technology

Though not much training was done due to the lack of funds, the Staff have stabilised and are busy as we are gradually building up local trust in the quality of work done. Much of the hospital new construction was done by ourselves, saving us money.

### Medical Elective

This program has taken a boost with the partnership of Skillshare International and there is a steady inflow of medical students from the UK and Germany. New rooms have been built to accommodate them.

To visit or contact us

**TRIBAL HEALTH INITIATIVE**

**Sittilingi, Dharmapuri dist., Tamil Nadu 636 906**

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

**Some more credits...**

Our work got good recognition this past year. CNN-IBN selected us for their 'Real Heroes' award while Gandhigram selected us for the Dr. Tharian award for community development. Tribal Health Initiative also featured for the Swami Vivekanada centenary award.



THI receives the Swami Vivekanada centenary award from Shri Ajay Maken, Central Minister for Youth Affairs

**INTENTIONS FOR NEXT YEAR**

- ✓ Build a new ward and increase facilities
- ✓ Initiate mental health care
- ✓ Restart field clinics in Sittilingi valley
- ✓ Improve marketing for SVAD products
- ✓ Revive traditional cattle rearing in the valley
- ✓ More curative work in the Kalrayan Hills
- ✓ Quality improvement for Porgai artisans

Would you like to be part of the change in Sittilingi ? The next page is a tear off donation form. Please go ahead and use it.

**Thank you**

Grateful is too small a word to **BCF, SKI, TNHSP, AID, ASHA, Aasha, HelpageIndia, MMKCT, ATMA and FOS** (India and UK) who have been supporting our work, with money, equipment or sage advise. The tribals of Sittilingi valley and the Kalrayan Hills join us in giving you a huge thank you.

Thank you everyone

Team **THI**

BCF [Business and Community Foundation ], SKI [Skillshare International], TNHSP [Tamil Nadu Health Systems Project], AID [Association for India Development], FOS [Friends of Sittilingi], MMKCT [Manmohini Kaul Charitable Trust], ATMA [American Tamil Medical Assn]

Would you like to make a difference for the tribals of Sittilingi and the Kalrayans. You can show it by giving a donation or spreading the word about our work. **FOS** remains our largest supporter and represents support from the people for the people – a Gandhian axiom.



**YES, I want to be a part of the change in Sittilingi**  
I would like to donate (please tick)

- Rs ..... **for Health:** For supplying free medicines during the field clinics
- Rs. .... **for Farming:** for revolving loans to buy traditional cattle to improve organic farming
- Rs. .... **for Livelihood:** for ensuring employment of women in the Porgai program
- Rs..... **for any other purpose** you see fit.

tear here

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

.....

Signed

Address

email

Phone

Cheques/DD may be made in the head '**TRIBAL HEALTH INITIATIVE**', payable at SBI, Kotapatty or ICICI Bank, Salem

**Online donations from India are convenient for us..**  
ICICI Bank Salem [ a/c no. 611901076914 IFS code ICIC0006119]; State Bank of India [a/c no 11689302723 IFS code SBIN0006244]  
*[Do send an email after transferring the donation]*

**All donations benefit from Income tax exemption u/s 80G**

## SOME PRIMARY INFORMATION

We follow transparency in our work and accounts as part of Credibility Alliance

INCOME & EXPENDITURE				
INCOME	2011-2012		2010-2011	
Hospital Income	4131650	40%	2295212	29%
Interest	210186	2%	254014	3%
Indian sources [grants & donations]	3286977	32%	3804826	48%
International sources	1927963	18%	1546262	19%
Other sources [awards etc]	876475	8%	0	
Shortage of Income over Expenses	0	0%	75664	1%
<b>Total</b>	<b>10433251</b>	<b>100%</b>	<b>7975978</b>	<b>100%</b>
EXPENDITURE				
Programme expenses	3342547	32%	3507236	44%
Meetings & Travel	63065	1%	63118	1%
Admin expenses	184781	2%	180533	2%
Hospital expenses	4891146	47%	3379316	42%
Depriciation	800648	8%	845776	11%
Excess of income over expenses	1151063	11%	0	0%
<b>Total</b>	<b>10433251</b>	<b>100%</b>	<b>7975978</b>	<b>100%</b>

**Auditor:**  
Mr.K.Shivakumar,  
Gandhigram,  
TN 624 302  
**Bankers:**  
SBI, Kotapatty,  
ICICI Salem

detailed audited accounts available on request

### Board of Trustees

Dr Regi M George  
Dr Lalitha Regi  
Prof M Ravindran  
Dr Sara Bhattacharji  
Dr Indru Tupulur  
Prof N Kamalamma  
Dr Sukanya Rangamani  
Dr Guru Nagarajan

BALANCE SHEET				
	2011-2012	2011-2012	2010-2011	
<b>ASSETS</b>				
Fixed assets	7222978	46%	6599535	47%
Capital Fund (-)	3497554	22%	3089736	22%
Deposits & Advance	2880642	18%	2588990	18%
Cash & Bank balance	2206313	14%	1839294	13%
<b>Total</b>	<b>15807487</b>	<b>100%</b>	<b>14117555</b>	<b>100%</b>
<b>LIABILITIES</b>				
Capital grant for assets	7117441	45%	7117442	50%
Corpus fund	2651810	17%	2551810	18%
Capital fund	6037337	38%	4448303	32%
<b>Total</b>	<b>15806588</b>	<b>100%</b>	<b>14117555</b>	<b>100%</b>

We regret the sad demise of Mr. A Arun, one of our very active trustees. He is the person who first brought us to Sittilingi and was always by our side since the beginning. Our heartfelt condolences to his family.

Highest salary - Rs. 28000 [senior doctor]  
Lowest salary - Rs. 3000 [fresh appointee]

Dr. Regi & Dr. Lalitha draw salaries as hospital doctors

Salaries break up			
	Gents	Ladies	Total
3000 - 5000	4	11	15
5000 - 10000	5	9	14
10000 - 15000	2	0	2
above 15000	3	1	4
	<b>14</b>	<b>21</b>	<b>35</b>

### Team THI

3 Doctors  
15 Nursing Staff  
5 Admin staff  
5 Community Workers  
7 Para-medical staff  
13 Health auxiliaries

International Travel : No international travel was done by anyone during this period.

Photos credit to Sheila Menezes