Health in action 2010
Having a hospital is not enough! We need to help people help themselves.......  

This year we have reduced hospital work by limiting surgery to the tribal patients who really need us, in order to concentrate more on the community projects. Non-tribals from outside the valley like the good atmosphere and treatment at the Tribal Hospital but they do have access to alternative government and private institutions. Our thrice weekly Out patient days however are busier than ever.

Contagious health!!
This year in an exciting new step forward we are sharing our health knowledge with our neighbours in the Vellimalai area over the Kalrayan Hills to the South of Sittilingi. We have noticed for some time an influx of brave tribals from “over the hill” walking many miles, then taking several buses to reach our Base Hospital. They come for maternity care or with basic diseases which have almost disappeared from Sittilingi area in the last 17 years - such as serious diarrhoea and malnutrition.

So for the past year we have been surveying the area “over the hill” where 300 villages have very difficult access to health care, and 22 villages have no public transport. Our team interviewed hundreds of villagers, identified 28 most needy villages and worked with them to set up the new project.

After 6 months running weekly OP clinics in Vellimalai, the team is implementing a new training programme for Kalrayan Hills Village Health Auxiliaries. Regi and Lalitha are there, as they were in 1999 when they began training the Sittilingi HAs. But this time two of those experienced Health Auxiliaries are travelling “up the hill” with our Health workers to share their skills, ideas, their experiences - and their songs - with the new trainees. Vellachi and Dhanalaxmi still can’t read, but they can show, explain, teach......and inspire.

Home grown experts
About 2500 farming families work the land in Sittilingi valley. 200 of these have now gone back to traditional organic methods, supplemented by the latest organic pestcontrol and soil enrichment techniques learned from other experienced organic farmers and the Green Foundation. 68 farmers registered this year as fully organic agriculturalists. . Each year more farmers join the co operatives and go organic, as they see that the system really works. Outgoings are less while crop production is much the same or even greater than before: in the end total income can be even higher than with the usual non-organic methods. Each year THI advice and input reduce as the farmers now can manage all their own money and marketing.

5 women’s groups run machines to clean pound and package the grains They sell organic millets, pulses and turmeric in nearby cities - and at Sittilingi crossroads! Even locals buy organic. They are happy to see and eat once again foxtail and

Bajra taller than the farmer
finger millet, traditional local staple foods rich in minerals and vitamins. Ready cleaned and pounded pulses now make life easier for busy cooks.

**Stitching successes and struggles**

Porrai co-operative products have benefited from the expert advice of trained designers Nishy and Anita this year. We have even been invited to a fashion show in Delhi. Our garments, bags, wallets and cushion covers have sold well in exhibitions and craft fairs all over India, bringing in 2,50,000 rupees. Unlike many “fair trade” outlets we give 70% of the income back to the artisan. Unfortunately this makes it difficult to sell to retailers who prefer to keep most of the profit for themselves.

**Catching up with Granna and Granpa**

Up to now we have always concentrated first on small children and pregnant mothers. Now things are going better, and mothers don’t have to be told to come for check ups or go for their immunisations, we have a moment to look out for the older generation.

After a year of discussion and planning with the Health Auxiliaries about the problems faced by the older villagers, we have just started a scheme for free health care for over 60s. We do not have full funding for this yet, although we are seeking it from several sources: Friends of Sittilingi as usual are fielding in the gap.

The team is visiting 5 or 6 villages each week in March and April. Elders pay 30 rupees for the year, and receive a registration card. They then come down to the hospital for a baseline health check-up.

Surprisingly we are seeing a whole bunch of sprightly individuals we have never met before. They make a good advert for a healthy active life and a childhood raised on traditional millets: so far very few of the newly registered Tribal elderly have heart disease or obesity. Survive to 5 years here, you have a good chance of a long and healthy life. But most live alone: money is short and we are very happy to provide them with proper health care when they need it.

**Good intentions going wrong**

A well-intentioned scheme to promote hospital delivery offers 1st and second time mothers 6000 rupees (100 working days’ wages) if they deliver the baby in a government health establishment. Again the problem is that few local health posts have adequate trained staff or equipment and we have seen a marked increase in post natal infections and perineal injuries. Some women with labour complications come on to THI themselves but officially the government health post should send labour problems to Dharmapuri. We expect to see increasing numbers of children with mental disability because of untrained birth attendants and lack of oxygen. We already see an upward trend in our neonatal death and still birth statistics.

Even more worrying is the de-skilling of all the local village birth attendants, making future generations wholly dependent on the hospitals. Traditional knowledge will be lost for ever, and hospital staff will have a monopoly. Back to square One - for 17 years we have been fighting to give local people the capacity to look after themselves, working for autonomy, not health service dependency.

**Technology Training**

The building for the Technology Center is fast reaching its finishing stages and training is expected to start soon.

**Sittilingi on line**

This year we are rebuilding and updating the website. Dr Lalit (who worked in THI for two years) has also managed to upload to You Tube the 20 minute film “the Sittilingi Experiment” made by English film maker Rick Murray in 2006. With fast broad band internet you can now see us all in action!

Thank you.