



TRIBAL HEALTH INITIATIVE

Sittilingi, Dharmapuri Dist.; TN - 636906

ANNUAL REPORT - 2014 - 2015

The crest of the wave....

- ☞ School Health Program starts bearing fruits
- ☞ Exploring traditional medicine - uncharted terrain in health care
- ☞ National recognition for the Sittilingi tribal farmers
- ☞ Porgai artisans make good profits
- ☞ Health Auxiliaries take over hypertension care in villages



Saroja and Chandramathi from Mundiur village were pleased when they went to school on a Tuesday to attend class. This week they could tell their 'akkas' [elder sister], who came to take health classes, that they had convinced their parents to build toilets in their houses. The germ of this idea came from the School Health program started in the Kalrayan Hills last year. Being thick friends and neighbours, they were worried about the health problems with open air defecation, that was taught in these classes; and being first generation learners, their opinion meant a lot to their doting parents. In a sense, they have now become ambassadors in what

could become a major change in these remote tribal villages.

The School Health program started in December 2013 when we shifted our focus from maternal and child care, to the next phase of intervention. We decided to invest time and resources into a new school health programme, where we can educate children about basic health and sanitation issues. We now cover **6 of the most remote schools** every week, so that we get back to the same school at least twice a month. Education is made fun with flash cards, stories, role plays and live demonstrations. Children are the building blocks for the next generation and if we can manage to make even small changes in their thinking, it will make a difference in the health scenario here.



Tribal Health Initiative started working in Sittilingi valley of Dharmapuri Dist of Tamil Nadu since 1993. We now have a Base Hospital which caters to more than 1 lakh people, most of whom are tribals. We also run a comprehensive development program for about 18,000 tribals who dwell in 33 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**.

Meanwhile in the Kalrayan villages, the **OP has shifted to Aruna village** from Vellimalai due to the lack of bigger buildings. In Aruna we also support the OPD with lab facilities and see about **50 – 60 patients** on all Wednesdays. The Health Auxiliary program too was temporarily stopped in February 2015 after an internal evaluation, but the HA does collect free medicines, and updates statistics of the villages.



Community Health care in the Sittilingi Valley is

mainly centered around chronic disease care. We are looking at hypertension afresh – taking hypertension care to the doorstep. A team from UCSF came for training the doctors in making standard protocols for hospital based intervention and for the Health Auxiliaries. The HA now knows to record BP, enter in the requisite cards as well as the dispensing of medication without making any changes. This is supplemented by the nurses who visit each village once in 6 weeks, recheck everything, clear doubts and do a more detailed examination. Any problems

noticed are immediately referred to the hospital. They also carry electronic tablets, where they enter the details and this synced to the hospital server and uploaded onto the net so that it is available for analysis in 'real time' to the doctors. We have completed checking of all tribals above 60 years and have 237 patients on treatment and another 42 on active surveillance. This year we are including those above 40 years and we expect a large amount of people to benefit.

The **Old Age care** is going on as before – the numbers hover around 500 every year. The **Mental Health project** continues with support from friends, and we have **42 patients with acute mental illness on treatment** who are still provided free medicines. In **maternal health**, we found that, on stopping active intervention in the field, we seem to have lost touch with the young mothers, who get very little advise and emotional support from the Government system. So the **Health workers each adopted a village** and visits are made once a fortnight to check out the new antenatal's for a chat up and also the newly delivered, to impart postnatal advise and care.



The high point this year in community health was a **survey on the forest medicinal plants** used in common practise by the tribals here with the help of scientists from **FRLHT, Bangalore**. They have identified **420 different medicinal plants** here of which **307 are already authenticated by Ayurveda**. We are all excited that we can **introduce a 4th tier of health care**, that which starts in every home and helps in further decentralising health care for the people.



At the **Base Hospital** the TNHSP Government scheme for free treatment of tribal patients was suddenly stopped without prior notice, putting a lot of difficulty for the tribal patients. But it has bounced back to better than previous years, proving that quality care at rock bottom charges is the best option of the tribals. With the new Operation Theatre kicking in, we have had the number of **surgeries going up by 15% [total number 655]**. In the OPD we provided service to **more than 30,000 patients** and **admitted 1370 patients in our wards**. This now necessitates a **new 20 bed ward** and we are also **building a new ICU** as a force multiplier.

It was a proud moment for Manjunathan and his team to be invited to the **National Organic Farmers meet** at Chandigarh to present the "Sittilingi model". There was a huge gathering of farmers from all over India, reflecting the growing trend of going organic, and attended by several Central Ministers. To be asked to showcase our model of getting tribal farmers to organise and run a profitable enterprise without much external inputs in resources was a boost for our farmers here. The turnover of the SOFA touched **Rs 39 lakhs** this year and we are sure it will be an upward trend this year too. So we are in the process of forming a **Tribal Farmers Producer Company**. This will help the farmers buy shares into their own enterprise and also share the profits. SOFA also opened a new shop at Sittilingi junction and in 4 months is already able to balance their books.



For the artisans at Porgai, this year had several firsts. **Titan Watch Company** came forward to gift them a **Craft Centre** they can call their own. This has office space as well as spaces for design, training and also work, if they chose to do so here rather than home. The association with **NIFT, Chennai** has been a wholesome experience, with many students coming here for design workshops and for project work. A large order was completed from **FabIndia**, and convinced our artisans that they could take up sizeable work at one go. The turnover was **more than Rs.30 lakhs** of which **Rs.12 lakhs went to the artisans** and the village economy. We firmly believe that economic equity is a far more important component of health than the control of germs.

The Health Training component is

keeping a steady pace. We are still with the BSS issued certification process and have students in nursing, lab technology and pharmacy. They have all cleared their exams with good marks. Another facet of training is having **medical elective** students from abroad who stay 6 to 8 weeks to learn about a different way of practising medicine – low cost but effective high quality care. We had students from **Germany, the UK and Italy** last year and this year too



there are many who opt to come to THI for a wholesome experience. Many other groups too come to see how we have blended our health with economic and agricultural activities.

Plans for next year

- Start the New Ward & ICU
- Formation of Tribal Farmers Producer Company
- Seed Bank for conserving and propagating traditional seeds
- New Training Centre for the Craft Initiative
- Start fresh work in the Neyyamalai hills

This years work would not have been so well done but for the support of **FOS, BCF, AID, Aasha, NABARD** and numerous others who are partners in our progress. We thank all of them for their continuing encouragement.

Thank you everyone

Team THI

Last Chance for 100% Tax exemption:

The new Ward and new ICU is still under construction; The 35AC exemption for Income Tax [100% exemption] is valid only till 31st March 2016. Donate now !!
Online donations in India can be made 'TRIBAL HEALTH INITIATIVE' through...
ICICI Bank Salem [a/c no. 611901076914 IFS code ICIC0006119];
State Bank of India [a/c no 11689302723 IFS code SBIN0006244]

INSIDE INFO

Our organisation is Credibility Alliance Accredited for financial transparency and work culture

Patient Details

Out Patients			
	Paying	Free	Total
Patients	25491	4619	30110
Amount	4769663	772466	5542129
In Patients			
	Paying	Free	Total
Patients	693	675	1368
Amount	1851636	3521026	5372662
Total Patients			
	Paying	Free	Total
Patients	26184	5294	31478
Amount	6621299	4293492	10914791

Hospital Statistics

	OP	IP	Surgery	Delivery
2012-'13	27373	1099	472	233
2013-'14	30285	1526	569	352
2014-'15	30110	1368	655	323

Highest salary - Rs. 42050/- [senior doctor]
Lowest salary - Rs. 4500/- [fresh appointee]
Salaries of Rs. 5.36 lakhs each were paid to Trustees
Dr. Regi & Dr.Lalitha for professional services rendered

International Travel : Nil

Domestic Air Travel : Rs 17163/-

SALARY BREAKUP

	Gents	Ladies	Total
4000 - 7000	3	8	11
7000-12000	4	13	17
12000-20000	3	4	7
20000-45000	3	2	5
Total	13	27	40

Team THI

4 Doctors 21 Nursing Staff
7 Admin staff 3 Community Workers
5 Para-medical staff 33 Health auxiliaries



Board of Trustees

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

Board of Trustees meets twice yearly to discuss policies.
Executive Committee meets every 3 months for review.
Full Staff meetings every month to routine activities

INCOME and EXPENDITURE				
Income	2014-'15		2013-'14	
Hospital Income	11453819	67%	5339942	42%
Interest	324559	2%	461582	4%
Indian Sources	2415396	14%	1796753	14%
Others	15400	0%	726015	6%
International Sources	2849033	17%	4256337	34%
Total	17058207	100%	12580629	100%

Expenditure	2014-'15		2013-'14	
Programme Expenses	3722266	22%	4706225	37%
Meetings & Travel	117182	1%	48438	0%
Admin Expenses	328487	2%	82682	1%
Hospital Expenses	10064200	59%	4039573	32%
Depreciation	2142085	13%	1149541	9%
Excess of Income over Expenditure	683987	4%	2554170	20%
Total	17058207	100%	12580629	100%

detailed audited accounts available on request

Main Auditor:
 Mr.K.Shivakumar,
 Gandhigram, TN 624302
Internal Auditor: Mr
 Rajnikanth, Salem, TN
 636007

Bankers:
 SBI, Kotapatty, ICICI Salem

BALANCE SHEET				
	2014-'15		2013-'14	
Assets				
Fixed Assets	1,89,14,768	63%	1,55,77,791	66%
Capital Fund (-)	37,652	0%	37,652	0%
Deposits & Advance	45,80,633	15%	51,10,113	21%
Cash & Bank Balance	64,96,999	22%	30,46,142	13%
Total	3,00,30,052	100%	2,37,71,699	100%
Liabilities				
Capital Grant for Assets	1,76,76,304	59%	1,55,77,791	66%
Corpus Fund	27,14,310	9%	26,79,310	11%
Capital Fund	39,02,137	13%	50,09,814	21%
Others	57,37,301	19%	5,04,783	2%
Total	3,00,30,052	100%	2,37,71,699	100%

To visit or contact us

TRIBAL HEALTH INITIATIVE
 Sittilingi, Dharmapuri dist., Tamil Nadu 636 906
 phone:: +91 9585799061
 email: office@tribalhealth.org; website: www.tribalhealth.org

Registered Public Charitable Trust No. 147/92, Dindigul,
 Regd u/s 12A , 80G , 35 AC of the IT Act, Regd under FCRA to accept Foreign Donations