



## Kasi Tribals: On top of the world

The entire country is going to the polls, but for a small group of tribals in a remote area of Assam. The Kasi tribals residing in several villages including the Kasinathpur village find no mention in government records leave alone the polling list. They are not



counted in the census and have no basic facilities either, thanks to the fact that they live on remote mountain tops.

This is where AIFO has stepped in. These people who have found no succour in the government have now formed Self Help Groups thanks to the intervention of Seva Kendra Silchar,

supported by AIFO.

The situation is however better in Dhostahava, a village also supported by SKS in co ordination with AIFO. Here, SKS's efforts have helped set up a school as a people's initiative. Besides, a village health worker is already in place and awareness is also being created there.

The tribe itself is a peculiar matriarchal society with the economy of the village is controlled by the women. Their main occupation is pan leaf cultivation. The men go into the forests to plant the crop, collect the leaves and the women undertake the work of selling the leaves.

Though they get a good crop, they make very little money out of this since, the people who buy it from them, pay them very little. In fact, all these business transactions take place at their doorsteps and there is no proper marketing.

Since the villages are located in such remote forest areas, they have no facilities, whether health or education. And for water, small girls have to walk down steep inclines down to the valley to collect water from the streams.

For all practical purposes, they are cut off from the rest of the world.

Surprisingly, children of the Kasi tribals who can afford boarding school in nearby towns, speak English well. Even small children are able to speak this language.

AIFO in association with SSK aims to ensure that every child in these villages covered by the project goes to school.

Meanwhile, the clinic in Manikbond is doing exceptionally well under Dr Reemy, according to AIFO representative Mr M V Jose who visited Assam in the last week of March.

On an average at least 60 patients visit the clinic every day here. Many complicated cases have been attended to and timely intervention has saved lives. Another major aspect is the training in health care for voluntary health workers (VHWs).

Already, voluntary health workers have been chosen in 50 villages and by the villagers themselves. These VHWs

have already undergone two weeks training in health care.

Meanwhile, the selection process for VHWs is on in other villages.



### In the news...

Mr Javed Abidi, executive director of National Centre for Promotion of Employment for Disabled People was in the news recently. He was recently quoted in the Deccan Herald (April 3 issue). Mr Abidi had criticised the major political parties for failing to mention the problems of the physically and mentally challenged people in their manifestos.

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## Assisi Leprosy Centre

*(Amici News will feature one organisation per month, among its project partners. The featured organisation this month is Assisi leprosy centre, Hagaribommanahalli, Bellary-The news desk)*

Established in 1995, the Assisi Leprosy Centre at Hagar Bomanahalli is a voluntary organisation working for the development of National Leprosy Eradication Programme. Its main focus areas are persons with disabilities and persons affected by leprosy.

The CBR project was initiated in 1997 with a view to provide comprehensive rehabilitation service to the persons with disability through women empowerment. A remote village in Bellary, 40 per cent of the people here are below the poverty line and nearly 60 per cent illiterate.

In February 2003, the CBR work was extended to Huvina Hadagalli.



The project covers 229 villages in both the taluks. It now covers 109 villages in Hagaribommanahalli and 120 in Huvina Hadagalli.

In the beginning, the prevalence rate of leprosy was high at 23 per 1000. However, after regular field visits, MDT, awareness programmes, street plays, and other activities, prevalence rate, deformity rate and child case rate has come down to seven per 1000, reports the centre.

Apart from regular medical and technical support, the team at ALC address themselves to larger issues like combating the Devadasi system.

The team here keeps track of all Government aid and schemes for the disabled and ensures that the eligible make optimum use of it.



### Nagappa: Standing tall

H Nagappa of Ankasamudra village had a normal childhood and would have naturally continued so. But, a small fall from the bicycle was all that was needed to change the entire course of his life.

He was only 10 years old, when the fall from his bicycle dislocated his knee joint. Unable to walk, he was taken to a doctor who suggested surgery. Operated at a hospital in nearby Davangere later, Nagappa would have regained his normal movements, if only adequate care had been taken by his parents after the operation.

Illiterate and steeped in ignorance, his parents had no idea of physiotherapy or good post operative care. Slowly, his leg became stiff and Nagappa became one more figure in the list of the disabled.

Admitted to the Renuka School for disabled, Nagappa studied up to the 7<sup>th</sup> standard and life was a hard struggle for the disabled boy until the ALC CBR team found him.

Trying to motivate the disabled people in the village to form a group, the CBR team met with little responsive from the villagers.

It was only later, that the CBR team seized a chance to make them form a group when one of the PWDs approached them for help to obtain loan.

The project staff gathered information on CDPO loan and informed the PWDs about it. Two members including Nagappa applied for the loan. They guided them through all the formalities in getting the loan.

Nagappa who is now 29 years old, has received Rs 25,000 as loan and has bought two cows. He gets a steady income from them and is a happy person. Today, Nagappa is regular in attending meetings convened by the PWDs and is actively involved in the CBR team's efforts to get houses, ration cards and other facilities to the PWDs in the project area.

The project has made a difference to the identified persons, increasing their awareness about different government benefits, causes and prevention of disability, personal hygiene and health.

**Upcoming events:** ILEP representative members meeting will be held at Bangalore on May 14 and 15.

## MDT Drug Logistics

*It is often the case that anything available freely has little value. However, when the free item happens to be a life changing drug that can make a difference to lives of individuals, then, it is time to change this attitude.*

**Dr N Mani Mozi** brings you an interesting formula to ensure that MDT is put to optimum use...read on...

We are all aware that Multi Drug Therapy (MDT) Blister Calendar Packs (BCPs) are gifts for our patients. Though very expensive, they are made freely available for sufferers all over the world!

Novartis is the donor. It's our responsibility to make sure that that they do not go waste.

A simple mathematical formula is

Patient month BCPs = will not be more than four and also not less than two!!!(Stumped??wondering what formula I have worked this out on??? Wait, and I shall let you know in the next issue)

For now, keep these three important points in mind.

- Keep a check on the expiry date of the drugs
- Ensure first come first served policy
- Make sure you do not over or under stock MDT

**Contd...next issue!**

## Not so dumb after all!...

Let me share a very interesting incident that took place at the AMICI office at Bangalore with you all.

Recently, a girl around 12 years walked into our office. Handing over a certificate which proclaimed that she was speech impaired, she stood expectantly.

AIFO medical coordinator Dr N Mani Mozhi, a medical doctor that he is, decided to call her bluff. What ensued was a battle of wits with the good Doctor bent on making the dumb girl speak and the girl insisting with gestures that she was indeed dumb.

After about half an hour, things came to such a head that some of the staff actually started harbouring the doubt that it could be a genuine case. And then the phone rang. Imagine everyone's surprise when the girl obviously realising that the Doctor would not give up, suddenly said, "the phone is ringing"!!!

Needless to say, many children are used by unscrupulous persons who try to make a living misusing them like this...So, next time take care...

## WORDS OF WISDOM

The best and most beautiful things in the world cannot be seen or even touched. They must be felt within the heart.

**Helen Keller**

### AMMA –A road to self discovery!

The staff of MOB, Mandya had an enriching, encouraging experience at the three day workshop on AMMA by Dr Shirdi Prasad Tekur. So named to mean A-Appropriate M-Mind M-Management A-Application, the workshop threw fresh light on several aspects of their life, say the MOB staff.

Seemingly ordinary things like the act of seeing and hearing were brought into perspective, when Dr Tekur explained how the senses influence our way of thinking.

The workshop also helped understand the richness of life and showed the participants how to become useful and of service to others.

Of particular interest is the Triple disassociation exercise taught by Dr Tekur to get rid of negative thinking associated with painful incidents in our life.

It is so simple, you can try it too!

Picture yourself sitting in a theatre and watching the movie on the painful incident. Slowly imagine yourself walking into the projector room and seeing how the movie is being projected on to the screen. Then walk out of the theatre with the complete knowledge that the event is exactly like the moving pictures in the movie and you are no longer identified with it. That's it! You're free...!!

### MAJOR MOVES....

Amici bids adieu to Dr Ashok Kumar, deputy director general, Leprosy who is now Director, central bureau of health intelligence. While thanking him for all his support and cooperation, we extend a hearty welcome Dr GPS Dhillon Deputy director general of health services (leprosy) and project director, NLEP, India, who has taken over charge from him.

## Disability-Another excuse for the Devadasi system?

{The obnoxious practice of the Devadasi system where young girls 'married to God', are pushed into prostitution has not spared even disabled women. AIFO CBR coordinator, Mr Jayanth Kumar has collected not less than three such case studies in just one project area. AMICI News will feature a three part series on these cases}

Poverty is often the prime reason cited for pushing young girls into the Devadasi system in rural areas. That disability can become an added excuse for this practise was discovered by our integrated CBR project at Hagaribommanahalli taluk in Bellary, the Assisi Leprosy centre.

The case of eighteen year old Gangamma, afflicted by polio and pushed into the system by none other than her own family, came to light when CBR workers approached Gangamma to motivate her into joining a Self Help Group.

Astonished at the resentment shown by other members of Hombelaku, the SHG to her joining the group, the CBR team enquired the cause for this.

They were appalled to find that Gangamma was a victim of the Devadasi system.

Confronting her family, the team were first misled by her parents Nagamma and Nagappa. After much counselling they admitted that they had introduced her into the practice.

"She is disabled. Who will marry her? She cannot do any work. Who will give her food if she simply sits at home?", was the justification they gave for their action.

"Her brother will look after till he is married, we will look after her till we die, then only God has to take care of her," they said.

Gangamma who has studied up to fifth standard had been living with a married man owing a petty shop till then. To complicate matters further, the man Veeresh happened to be a son of one Chandramma, also a member of the SHG.

Initially, Gangamma who refused to join the SHG, later agreed, but this time, Chandramma put her foot down. She would not come for the

SHG meetings, if Gangamma joined the group. It was only when Veeresh stopped visiting her and after much counselling by the CBR team did Gangamma join the group. By then, she had started living with another man.

After much counselling, Gangamma joined the SHG on August 15, 2002 with an initial saving of Rs 10, despite opposition from her family.

The CBR group has however taken this matter seriously and have decided to create more and more awareness in the village so that an end can be put to such practises.

### Meetings/Events

\*AIFO representative Mr M V Jose delivered a special lecture on project management, for 46 senior members of NGOs like administrators and project managers. This was part of the advanced education course organised by We Care at Bangalore in March mid week.

\*ILEP sub committee meeting was held at Chennai on March 19. AIFO Medical coordinator Dr Mani Mozhi attended the meeting.

\*Annual state leprosy officers meeting and quarterly review meeting of NLEP consultants coordinators was held at Raipur, Chattisgarh from March 10 to March 12. Dr Mani Mozhi attended as DTST coordinator Karnataka/ Medical coordinator AIFO.

\*AIFO in association with SRMAB and Sumanahalli, held a three week training programme in CBR and leprosy for a team of five members from Women Acting Together for Change (WATCH), Nepal. AIFO representative M V Jose and CBR co ordinator Mr Jayanth Kumar coordinated the workshop.

\*Mr Stephen Anjum, representative of Tamir Welfare Organisation, Pakistan supported by Leonard Cheshire International visited AIFO office at Bangalore on April 1.

\*Mr Enzo Martinelli, resource development manager of Leonrad Cheshire International-London visited the AIFO office in March.

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