

By Airmail
Bookpost



கூயில்

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KUYIL

NEWSLETTER OF THE AUROVILLE HEALTH CENTRE

Focus on children

Recently someone asked me; 'Does the Health Centre do anything for village children?' A simple question. But it got me thinking.

I can hardly remember when we started! Looking at the files I found out that at the end of 95 we started the Child-to-Child program, followed by the polio program which commenced the following year. Since 1995 we have had a small program in the Health Centre for children with certain physical and emotional impairments and we hope to develop this fully during this year. I cannot remember how long we have been doing pregnancy check ups, which of course tries to give children the best possible start in life by improving the health of their mothers and teaching them how to improve the health of their families.

What do we have planned for the future?

In a matter of months we are going to start a post natal program which will follow up and support the mothers of new born babies for the first year of their lives. In three months or less we will start a nutritional program for children below the age of five.

We do many things and have many programs specifically for children. But we must not forget the more general public health work which also affects children. This includes building toilets close to schools as well as making and showing our videos on health education which we show weekly in the local schools.

In this issue of Kuyil, devoted to our work with children, we will tell you a few stories about some of the children we have been able to help.

Dr Assumpta Casanovas



Ante natal checkups



*A child is given help on the Polio program.
More about this on page 4*



A child to child gathering with teachers and Dr. Shano.

Unbelievable... But true



Tony

About one and a half years ago, Tony, a boy without functional limbs, was found in a dustbin in a street in Pondicherry. In the Health Centre we did a medical checkup and were then able to admit him in the well

known Mother Theresa's home. Since then we have kept in touch and Tony has grown into a very happy boy with an open face and a lot of willpower.

In Mother Theresa's home, however, physiotherapy was not available.

With the help from Dutch sponsors we have been able to employ a full-time physiotherapist. From now on, Tony and the other children will get the right physiotherapeutic help. Tony, and others like him in the home, need to start physiotherapy as early as possible to activate their muscles and to teach them how to move properly.

The Health Centre team keep in touch with Tony and his companions at least once a week and give help wherever it is possible.

Mr Albert

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Finding and treating a case of vitamin 'A' deficiency

During one of the Child to Child sessions that I attended at one of the local schools, Loganarayan, one of our Village Health Workers from Acharampet alerted me to one of the boys she thought had a health problem.

During the session I asked whether any of them experienced problems seeing in the night - one of the symptoms of vitamin 'A' deficiency. One little boy told me that he often fell down, but only at nights, and never during the day.

The next day I saw the little boy in my clinic. Not only was he suffering from vitamin A deficiency but also TB. The Child to Child program had enabled his problems to be identified and treated so that he is now on the way to getting better.



Children check each other's eyes, under the guidance of an adult Child to Child teacher, to identify possible problems that might need treatment.

A new life for Tamarasi

Last March I took up the responsibility of attending patients in the villages who for various reasons were unable to travel to a clinic or hospital. Sangani, one of our Village Health Workers who lives and works in one of the coastal villages called Periyamudialar-chavady, brought to my attention the case of an 18 year old emotionally disturbed young woman called Tamarasi. She had been abandoned by all her relatives except her disabled grandfather with whom she lived.

When I first visited her it seemed that she could not speak or care for herself. I found out that she had not had a bath for over a year. She simply sat in a dark corner of her grandfather's tiny hut which was close to the sea. With the help of Hari, our Health Centre driver and some of the local village women we took her behind the hut and gave her a long bath, with the neighbours providing buckets of water and soap. Her grandfather went and got her a new night gown which Tamarasi was very excited to put on.

Discussing this case with Dr Assumpta,

we saw that Tamarasi needed to be in a different and more stimulating environment. One where she could receive better care and where she would have more companionship. So, with Hari, we started to look for other places where she could stay.

With the grandfather we visited Tamarasi's distant relatives several miles away. Being very poor they were unable to look after her. So I went to see Saraswati Devi, a local social worker who has been running a shelter for women since 1983 in a village close to Auroville. She was willing to admit Tamarasi in her shelter for a probationary period to see if it was suitable for her and if she would fit in with the other women.

In May, with Hari's help, Tamarasi was moved to the shelter. She has adjusted there very smoothly. Very quickly she learnt to bath by herself and her speech has improved considerably. Recognising her difficulties, the other women in the shelter have taken her to their hearts and care for her lovingly.

Dr Shano



Tamarasi in her new home

After a long search ... finally we found it



Sumitra recovering from an operation designed to give her more use of her legs.



Sudha, at first unable to walk because of the physical problems caused by polio can now walk with the help of crutches.

Girls and young women with physical incapacities have little or no future in India.

By contrast, boys and young men afflicted by the same problems will find employment somewhere. For them there is usually in some kind of training, however simple, that will enable them to find work to earn a living. They can be sure of having some kind of job although often in a position and on a level which is considered very low on the social scale.

For women this is out of the question, especially in the lowest strata of society. There is no way for them to be prepared for being a part of society. It is as if they do not exist and are therefore denied one of the basic rights of every human being on this planet.

The Health Centre team was frequently confronted with the poverty of girls and young women such as these. The lack of sanitation in their homes, the lack of stimulation in their environment and lack of preparation for adult life.

Then a good friend of mine introduced me to Mrs. Kavita, herself handicapped from polio, who started the Rajivgandhi Handicapped Rehabilitation Centre in Pondicherry. It is a residential home as daily travelling was too time consuming and inconvenient for these young women, some of whom lived some distance away. There is a school here attended by all the younger girls and some of the adults. It is part self

supporting with some of the residents making the most fantastic embroidery. They also have sponsorship from people in Holland, which will hopefully keep this very necessary project running.

It has turned out to be just the right place for two girls Sudha and Sumitra (*see photo*), who, after recovering from many operations in the Health Centre needed to go somewhere for further education and training to enable them to eventually support themselves.

When I last saw them they told me that they feel very happy now and are wondering: can there be a future for us??

Mr Albert

This issue of Kuyil

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The Polio program

The Polio Program started in 1996. Its aim was to prevent future occurrence of the disease and providing help for the large number of children in the villages who were suffering from disabilities as a result of contracting polio. Although their disabilities could not necessarily be completely eradicated there was much that could be done to help the children become less confined by their problems and thus able to integrate better into society.

Children who might be able to benefit from the program are identified by Village Health Workers and taken to the Health Centre. Here they are assessed by a doctor who sometimes has to treat them for other illnesses before they can be referred for specialist help.

If necessary they are seen by an orthopedician for corrective surgery after which they will receive post operative care with us as well as physiotherapy. They will also be provided with any aids such as crutches which they require to make them as mobile as possible. Reintegration with the family and community will be carried out at the earliest possible time to avoid institutional dependency. It is very important also to provide these children, depending on their age and capability, with appropriate skills and education so that eventually they may obtain suitable employment.

The preventive program has been very successful. In the 22 villages where we work there have been no new cases of polio since

the last 5 years! Our Village Health Workers, as a part of the Mother and Child Health Program know all the children born in their communities and ensure that no child misses out on immunisation against polio. Our health education program, through staged dramas and videos produced by the AVHC, spread messages on how the disease spreads and how it can be prevented. In 11 village schools children use toilets built and maintained by the AVHC. As well as getting them used to using toilets it also helps in reducing the risk of catching polio.

We will carry on with this program until there are no new cases of polio reported in the India for ten years.

Dr Devashish

And finally... More about some of our staff

PROMOTING OUR BEST STAFF

In many of our previous *KUYIL* issues you may remember reading about our drama project which has been running since 1994. In the beginning we contacted a drama group in Kulapalayam, one of our nearest villages, and suggested that they stage plays on various health subjects every fortnight in different places in the area. Excited with the success of that program, one year later we raised funds to make videos. We found that Srinivasan, the director of the Drama Group appeared to have a natural talent for shooting, scriptwriting and all the other tasks that need to be done to make a successful video. There was much praise for his work, both from us and the many drama associations in Pondicherry who gave him awards.

Although it was good that he received such awards we realised that this was not enough and that such talent – which came with such commitment, and dedication – deserved something more. We felt that his ability should be developed; that he should be able to obtain some proper education in this subject which would be rewarded with an appropriate certificate as a tangible measure of his capabilities.

Srinivasan found a suitable college in Chennai called “Manerr Institute of Video and Film Technology”. A sponsor from abroad took care of the main expenses of the course while the Health Centre paid his accommodation and travel expenses and gave the necessary leave of absence from his regular job. Srinivasan, already a Bachelor on Arts, now also has a Diploma in Film Technology and in Film Direction for which he received the highest marks in his class.

Maybe one day we will lose him as a member of our staff, possibly to go to one of the big film studios in Mumbai or some other big city in India. Whatever happens we are very glad to have helped somebody who deserves it. We hope that he will make more videos for us and of course he has our blessings and our best wishes for whatever the future brings.

Dr. Assumpta Casanovas

Glimpses into the history of the Auroville Health Centre

Dr Lucas Dengal worked at the Auroville Health Centre as assistant to Dr S.B. Sen from 1977 -79 after which he left for formal medical studies in Germany. In 1988 he came back to Auroville to join the Health Centre as a qualified doctor. In an interview he told us something about what the Health Centre was like in the early days, the people involved and the inspiration behind the first programs.

There will be more about this in the next Kuyil.