CHAPTER V

HEALTH AND HYGIENE

Health is essential for happy living and yet the availability of proper health care is a crucial question in the present context. General health situation and health standard in Tamil Nadu are still extremely low and the great majority of our population is very vulnerable. Communicable and preventable diseases contribute a major health problem in Tamil Nadu\(^1\).

**Health Conditions:** Tirunelveli District in the State of Tamil Nadu is one of the high HIV prevalent districts in the State. The key factor that causes the vulnerability of the people to HIV/AIDS is the high level of migration. According to the census of 2001 Report Tirunelveli had a population of 28,01,194 of which 12\% are living below the poverty line. Every year nearly 6000 people migrate to Mumbai, Chennai, Kovai and other places in search of better employment opportunities. The failure of monsoon, lack of

\(^1\) TSSS Handout.op.cit, P.29.
industries and caste discriminations from the early nineties forced many men folk to migrate. Such migration and the intermingling of the rural people of Tirunelveli with the people of the cosmopolitan cities like Bombay has led to the spreading of the HIV diseases amidst the people of Tirunelveli.

Likewise, diseases arising from poverty, ignorance, malnutrition, poor sanitation, lack of safe water supply, inadequate housing and low level of immunity are still very common. Children and women in particular remain seriously underprivileged with regard to health. Rural poor and oppressed in the remote villages are the worst sufferers and silent tolerators of ill health conditions\(^2\). To get medical service they have to walk for miles and wait for long hours in the hospitals situated in the bigger towns. The bread winners are not in the situation to approach the hospitals often because of monetary grounds.

Shortage of pure water also leads to diseases like typhoid and dyarrhoea. In many rural based areas supply of pure water is scarce

\(^2\) SCAD, Silver Jubilee Souvenir, op.cit, P.25.
and hence the poor people have no other way but to drink the available impure water which causes water prone diseases in the villages in Tirunelveli District. Water becomes stagnant at low level areas which causes the breeding of mosquitoes. Many diseases like dengue, malaria and elephantiasis are spread by these mosquitoes. Malnutrition is another reason for the spreading of diseases associated with anemia. The drainage system has also become worst in rural areas which also has become another reason for the spread of diseases to different parts of the rural areas. Government also has been trying to bring in cleanliness in each and every corner of the villages and town areas. Still the cooperation of the people is not upto the expectation. Hence the steps taken by the Government in enhancing the environmental conditions has not borne fruits upto our expectations.

Therefore, the Tiruneveli Social Service Society, one of the prominent Non-Governmental Organizations accords top priority to health issues in general and prevention of HIV and AIDS in particular.
Measures implemented by TSSS (Tiruneveli Social Service Society)

The Government of Tamil Nadu spends Rs.100 crores every year to fight AIDS\(^3\). But the number of infections is still going up. Stigma towards people infected with HIV and AIDS is widespread. Ostracism by family and community drives the epidemics underground and decreases the reach and effectiveness of preventive efforts. Faith Based Organisations (FBOS) are playing a vital role in the global fight against the devastating disease.

The TSSS along with its District level other Non-Governmental Organisations responds to the epidemic which is not only a health problem but also a crisis having a profound impact on the spiritual, social and human responsibilities. HIV and AIDS are threats to family life, spiritual well being, growth of the community, fighting poverty and human dignity. With the support of Manos Unidas Spain, TSSS has been implementing HIV and AIDS prevention, care and support initiatives since September 2008. The

\(^{3}\) TSSS Handout op.cit, P.21.
TSSS has established a "Care and Hope" centre for women and children infected with HIV and AIDS at V.M.Chathiram in Palayamkottai\(^4\). In this Care and Hope Centre those who are affected of HIV and AIDS are admitted. Special trained volunteers are appointed to take care of those who are affected by the disease. The TSSS provides treatment to the positive women and children.

Capacity building is a key strategy for the promotion of health programmes. Capacity building generally refers to the skills, infrastructure and resources of organisations and communities that are necessary to effect and maintain behavior change, thus reducing the level of risk for disease. The TSSS organized capacity programmes for the major stakeholders. More than 450 people have been benefited from this programme conducted at different villages\(^5\).

Joining hands with District level Non-Governmental Organisations, coordination network and positive people's network,

\(^4\) TSSS 'Hand out', op.cit, P.27.
\(^5\) TSSS Hand out, op.cit, P.21.
The TSSS advocated for the rights and entitlements of women and children infected with and affected by HIV and AIDS. The epidemic continues to shift towards women and young people. If has been estimated that 38% of the adults are living with HIV/AIDS in India. The majority of the reported AIDS cases have occurred in the sexually active and economically productive 15 to 44 age group. One of the major causes of the spread of HIV/AIDS is lack of awareness. The TSSS has organized awareness education to adolescent girls who are non-school goers and drop outs. Nearly 200 youngsters have been educated through this awareness programme.

In view of generating mass awareness of the epidemic, the TSSS organizes mass rallies in each of the 200 targeted villages. In addition to mass awareness programmes, the TSSS provides effective treatment to new and effective treatments people with HIV and AIDS are now a days living longer. Positive living is a lifestyle

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6 TSSS Hand out op.cit., P.22.
7 ibid, P.23.
adopted by a person with HIV in order to live life as fully as possible while slowing progression of the disease.

**Blood screening camps**

Blood screening camp is one of most significant programmes organized by the Tirunelveli Social Service Society (TSSS). This process curtails the spread of HIV infection. It enables the high risk groups to have early access to diagnosis and treatment services. It is a costly affair and hence the TSSS has organized it with the support of voluntary medical personnel and government health care Institutions. Due to stigma and the high level of discrimination among rural population the TSSS has been organizing general medical camps where blood screening is done. Youths are also motivated to undergo blood screening.

**Siddha Medical Hospital**

General health situation and health standard in Tamil Nadu is still extremely low. Even though science and technology have done wonders in the field of medicines and medical treatments, they are
accessible and available to the affluent people. Unfortunately, poor people do not have easy access to proper and timely health care. They cannot avail of the modern existing health care services. Children and women in particular remain seriously underprivileged with regard to health.

In response to the critical situation the TSSS has promoted Siddha medicine as an alternative health care system. The TSSS has opened an exclusive treatment cum production centre for Siddha medicines at Sankarankoil. There is also an outlet for sale of Siddha medicines at Palayamkottai. A clinic is also opened at Palayamkottai. The TSSS is licensed by the Government\textsuperscript{8} to manufacture Siddha medicines.

The TSSS has also facilitated the operation of dispensaries at remote villages where, nuns attend to basic ailments. These nuns do engage themselves in providing health educations. There are 19 dispensaries through out Tirunelveli area\textsuperscript{9}. A special clinic for

\textsuperscript{8} TSSS Hand out, op.cit, P.26. 
\textsuperscript{9} TSSS Hand out op.cit, P.26.
Acupuncture treatment has been established at TSSS premise in Palayamkottai. All India Acupuncturist Association supports it. In Sankarankovil, Siddha Medical Hospital and Research Centre have been functioning under the auspices of the TSSS\textsuperscript{10}. Likewise, a free Acupuncture clinic also has been functioning in Sankarankoil under the direct control of the TSSS.

**Hygienic Conditions**

The rural people are living in villages with unhygienic conditions. The Non-Governmental Organisation particularly the SCAD (Social Change and Development), gives training to the villagers how to keep their area clean. If only the living area is kept clean diseases caused by micro-organisms could be prevented. The SCAD's attempt to impart training in cleanliness has brought in remarkable changes in village areas\textsuperscript{11}.

The villagers are taught about the importance of cleanliness such as regular bath, brushing the teeth, drinking boiled water,

\begin{itemize}
  \item \textsuperscript{10} TSSS Handout, op.cit. P.26 .
  \item \textsuperscript{11} SCAD, Silver Jubilee Souvenir, Op.cit, P.19.
\end{itemize}
usage of toilets and thereby avoiding open defecation, using footwear while going to toilets, cleaning hands with medicated soaps and awareness about various diseases caused due to water and food contamination. SCAD has imparted nursing training to 3,425 girls in rural areas\textsuperscript{12}. These girls, in turn train their siblings and parents on the above said aspects.

In order to maintain a clean and hygienic campus, SCAD constructed new toilets in village schools. Earlier children especially the girls found it very difficult to go out for an open defecation because of want of toilets in school campus. During rainy seasons water stagnation was common in school areas and children were under the risk of getting severe form of waterborne communicable diseases. Hence as a preventive measure SCAD has constructed toilets in the schools where there is no toilet facilities. This scheme has now been introduced by the present administration in the centre. Now the children are using the toilets regularly and eventually, the school areas look clean and tidy.

\textsuperscript{12} TSSS Handout, op.cit. P.119.
Hemophilia and Cancer Care

Hemophilia: Hemophilia, a dreaded disease has encroached into the bounds of the countries and continents across the entire globe. Tamil Nadu, especially Tirunelveli is no exception. Taking into account the distress and the agony undergone by the hemophiliacs patients the Hemophila Foundation of India was founded in Delhi to ameliorate the suffering of the patients. A branch office of the 'Hemophilia Foundation of India, known as 'Tiruneveli Hemophilia Society was founded in Tirunelveli in 1997. Since then it has been catering psychosocial and medical care to hemophiliac patients. 186 patients have registered their names in this society. The SCAD Trust has been making all the steps to cure the patients of their diseases. Often doctors are invited from Vellore Medical College to impart treatment to affected persons. Thus the SCAD Non-Governmental Organisaiton has been exercising meritorious services in redressing the grievances of the patients of Tirunevlei District.

Cancer Care

India has one of the highest cancer rates in the world. Data from population based cancer registries in India show that the most frequently reported cancer sites among males are the lung, oesophagus, stomach and larynx. Among females, cancers of the cervix, breast, ovary and oesophagus are the most commonly affected sites. Cervical cancer ranks as the first most frequent cancer among women in India and the first most frequent cancer among women between 15 and 44 years of age. Besides the incidence of breast cancer has been increasing with an estimated 80,000 new cases diagnosed annually. Peace Trust has been actively involved in sensitization programmes against breast cancer.

The number of oral cancer cases is on the rise in India. But what is mainly driving the numbers up is more people getting addicted to chewing tobacco. India accounts for 86% of the world's oral cancer cases. Ninety percent of these cases are due to

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15 Peace Trust, Annual Report, op.cit, P.15.
16 Peace Trust, Annual Report, op.cit, P.15.
chewing tobacco. Cheek cancer is the most common form in India due to excessive use of pan masala and gutka.

The era of individualized cancer diagnosis and treatment has been brought into vogue. A camp was organized within the premises of the Peace Trust Health Centre where in oncologists from the Apollo Hospitals, Chennai did treat patients who had arrived across the far and wide of South Tamil Nadu\textsuperscript{17}. Peace Trust has been on organizing medical camps in the remote areas in the outskirts of not only Tirunveli but also adjoining districts as well. Quality medical service is being provided free of cost during these camps where all the attendees irrespective of their caste, colour or creed are screened camps are being conducted on every Fridays\textsuperscript{18}. In total 114 medical camps have been organized. 9,876 people had so far received free medical aid\textsuperscript{19}.

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  \item\textsuperscript{17} Peace Trust Anual Report op.cet, P.15.
  \item\textsuperscript{18} Peace Trust, op.cit, P.17.
  \item\textsuperscript{19} Ibid, P.17.
\end{itemize}
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Working with Leprosy

SCAD Non-Governmental Organisation started working with the leprosy affected from 1987 onwards. The leprosy patients often are considered untouchables and they are isolated by the general public due to their complexity of illness and their deformed appearance. They are prevented from leading a normal life. So they beg near the railway stations, bus stations and temples.

These people need continuous treatment and care as most of the cases have incurable sores and due to climatic change often they face difficult problems due to chronic nature of illness. But the available facilities are very minimal that does not help these people to meet their health needs. After seeing the pitiable condition of these leprosy patients the SCAD Director, Cletus Babu started a community base in Sathyanagar near Pettai in Tirunelvelly in 199020.

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20 SCAD Silver Jubilee Souvenir op.cit, P.19.
SCAD organization thought that it was very important to provide housing facilities to these neglected people because all of them are homeless and they sleep only in public places. So 35 small thatched houses were put up in the beginning and these houses were later on built into roofed houses\textsuperscript{21}. At present Sathyanagar has 54 permanent houses and 16 thatched houses\textsuperscript{22}.

Their overall health conditions and housing facilities have highly improved. Their children are studying in SCAD school at Pettai. Now 3 women Self Help Groups are functioning in Pettai. A health centre and a community hall were constructed at Pettai to provide continuous medical support and the community hall is being utilized by these leprosy affected people. Thus the Non Governmental organisations are doing a lot to enhance the hygienic conditions and relieve the sufferers from their diseases.

\textsuperscript{21} SCAD – Souvenir op.cit, P.18.  
\textsuperscript{22} ibid, P.19.
Future medical vision of the Non-Governmental Organisations

The Non-Governmental Organisations in Tirunelveli collectively have the sole aim of starting Geriatric medical out patient wards in all the medical colleges in Tamil Nadu, especially in the Medical College at Tiruneveli. In addition to this the Non-Governmental Organisations especially the Tiruneveli social service society, the Arumbugal Society, the SCAD and the Siva Trust have been taking all the steps to provide support services such as surgery and insurance coverage. They have the plan of adopting old age homes in hospitals in Tiruneveli District.

Control of Blindness

Tamil Nadu has been a pioneer in the area of blindness control since 1972 when the free eye camp scheme for cataract surgery was first introduced. The National programme for the control of blindness introduced in 1976 was included in the World Bank Assisted cataract Blindness control project which ended in
2002. Currently the programme is functioning as a hundred percent
centrally sponsored scheme.

The state has reduced the prevalence of total blindness in the
state, 78 per 10000 in 2002 against the target of 30 per 10000 set by
the Government of India. The corresponding figures for total and
cataract related blindness at the All India level are 110 and 70
respectively per 10000. Thus Tamil Nadu's performance continues
to be among the best in the country. The State has consistently
achieved more than one hundred percent achievement of target in
carrying out cataract operation with insertion of Intra Ocular Lens
(IOL). It is significant that 112 percent of this achievement is
carried out through Non-Governmental Organisations. The
Government of India also helps the Non-Governmental
Organisations.

Control of Tuberculosis

The revised National TB Control programme (RNTCP) using
the Directly observed Treatment Short Course (DOTS) strategy has
been launched by the Government in the State since 26th March 1997. It has been implemented throughout the state through 140 TB units (one for every 5 lakh population), 776 microscopy centres (one for every one lakh population) and about 11,000 DOTS centres. The RNTCP programme also envisages partnership with Non Governmental Organisations and private practitioners to win the war against Tuberculosis. A look at the average performance shows that the targets set by the Government have been achieved.

Tamil Nadu Health Systems Project (TNHSP) includes provision of civil works and equipments for upgrading the secondary hospitals, supporting NGO based activities for improving tribal health, expanding the projects for bio-medical waste management and control of cervical cancer and cardiac disease.

In order to accelerate the reduction in material and infant mortality the Government has pioneered Comprehensive Emergency care. The Comprehensive Emergency care is on for twenty four hours. 187 well equipped van services are being operated through the Non Governmental Organisations in 15
Districts in Tamil Nadu to facilitate transport of emergency cases to the hospitals. In due course, the Government has the proposal to introduce an additional 198 ambulances in the remaining Districts in Tamil Nadu. This will in due course significantly contribute to the reduction of maternal and infant mortality and morbidity.

Thus the Non-Governmental Organisations in Tirunelveli have been trying their level best to educate the people of the down trodden community to keep the surrounding clean. When the surrounding areas are kept clear the problem of edidemics could be controlled to a considerable extent.

In case people are affected of the diseases, immediate care is taken by the nurses and doctors who are serving the society on voluntary basis. In case those who are in need of immediate and high level treatment the NGO sends such people to the specialized hospitals. Tuberculosis patients, lepers and AIDS patients are treated very patiently and in no way these neglected persons are neglected by the volunteers of the Non Governmental Organisations. Actually these diseased persons, old age people, infants and desolated children and women find the NGO asylum as a solace in their lives.