



New Roots, Newer Generation

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“Nature does nothing uselessly.”

Aristotle (384 - 322 BC), Politics, Book 1.

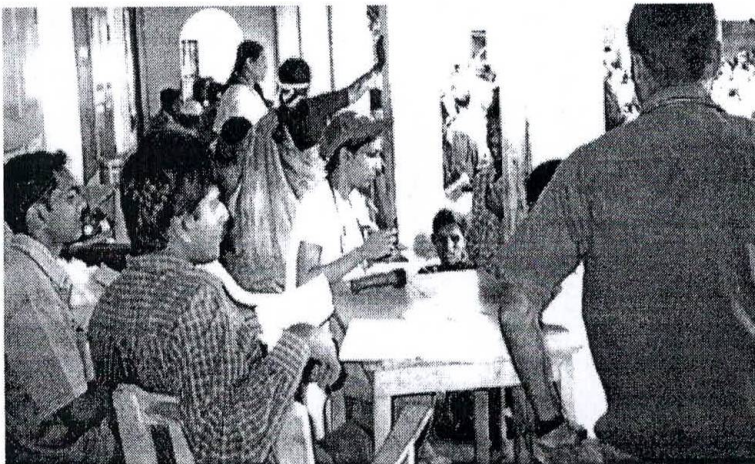
Nature has been recognized as an ageless teacher from time immemorial. And the wise among us heed the lessons of nature. In nature, we find that propagation and nurture of young ones take on a special meaning. All species of animals and plants have their own unique ways of propagating their species and helping them to survive. Human beings too have devised their own methods to ensure that the young ones survive and thrive, even in the harshest of environmental and external conditions.

The People's Health Movement (PHM) globally, and Community Health Practitioners in India are two such groups that heed the lessons of nature and give importance to propagation and nurture of a younger generation of health activists and community health practitioners respectively. The PHM formed the International People's Health University (IPHU) to achieve this end. The Community Health Fellowship Scheme (CHFS), later called the Community Health Learning Programme or (CHLP) was one such initiative that has been playing this role in India, and continues to do so even today.

Community Health Fellowship Scheme

The year was 2003. Three idealistic youngsters who were keen to explore community health work were selected to undergo the newly launched Community Health Fellowship Scheme by Community Health Cell (CHC), Bangalore. One of them was a dentist, another a doctor who had completed his postgraduation in Community Medicine and the third was a social worker. All three underwent a series of orientation sessions in community health which led them to explore their own motivations, aspirations and skills in community health. They were mentored in this process of reflection and skill-building. They were also given opportunities to share their experiences and learn from each other. People who had chosen the community health approach in different contexts were invited to share their experiences with the three young people. They also visited many community health projects across the country. Specific resources from the CHC Library and Information Centre were given as reading materials. All three of them were encouraged to present what they had read, following which there were discussions and debates in which the entire CHC team participated. After all these exercises, they were helped to choose their own paths in community health. One of them chose to work with a community health programme in Andhra Pradesh; the second person wanted to live in an urban slum in Bangalore, living, experiencing and learning from the people he wished to work with; while the third person chose research and action to support community health. They were mentored by senior members of CHC, and the partner organizations where they had been placed.

This was just the beginning. Over the next three years, forty young professionals were oriented and trained in community health by undergoing a similar rigorous experience. Around forty per cent of them were not provided any scholarships, leaving them to find



Fellows holding a medical camp during Tsunami relief in Tamil Nadu

their own means of support during the training period. Twenty-three participants were provided fellowships, 44% of them were women. The fellows came from all over India, nearly half of them were from North India. The fellowship also attracted young professionals from different disciplines-about 60% were from the social science background, while the remaining were from the science and medical profession.

The fellowship offered different things to different people. It opened up a whole new world of community health, very different from the community medicine that some of them had studied in their medical courses. Dr. Vinay, a doctor from Bangalore, wrote at the end of his fellowship: "The team at CHC provided me with one of the best learning opportunities in life. If not for the fellowship, I can imagine myself working my brains out there in the rat race for a seat in postgraduate medical education".

The fellowship helped some other participants to find their areas of interest within community health. The open-ended, participative, and person-centric approach adopted in the fellowship was designed to do just that. For some others the approach followed in the fellowship helped them to grow as individuals and professionals. Dr. Sandhya, a dentist from Karnataka, summed up her learning as follows: "The fellowship experience allowed me to grow individually as a person especially in matters of creative thinking, positive thinking, the art of listening, reflecting, team work, and in becoming a good team member. Now since I know about the wider aspects of the world I live in, it just motivates me to continue learning more about

life by being more with the people and working with them to build up a better community."

Genesis of the Scheme

Community Health Cell (CHC), since its inception in 1984, had been providing short-term placements for young professionals who were in the process of reflecting about their personal interest in community health. When CHC conducted a review in 1998, it was found that over 95% of those supported through short-term placements continued to work in community health. The reviewers suggested that CHC "should consider the evolution of a more structured training programme in community health, which explored and focused on Indian experience and stimulated participants to the 'social / community' paradigm". After a series of preparations and discussions with other community health organisations working in various parts of the country, the Community Health Fellowship Scheme was formally launched in April 2003.

The objective of the scheme was to promote life options in community health by offering a semi-structured, placement opportunity in CHC, in partnership with select community health projects by:

- Strengthening motivation, interest and commitment of persons for community health,
- Sharpening analytical skills, and
- Deepening the understanding of the societal paradigm of community health.

Revamped Programme

In 2006, the Community Health Fellowship

The first Fellow reminisces...

In the early 1980s, Medico Friends Circle (mfc) bulletin was edited by Kamala Jayarao and we found it on the shelves at the college library. A trip to Bangalore brought me face to face with a member, Dr Ravi Narayan. I was referred to him by Babu Beckers, my Chemistry teacher. A later trip to Bangalore with Dr Robin Mendanha from Physiology Department took me to a meeting of Dr. Zafarullah (Gono Swasthya, Bangladesh) on *Medical Education*. The meetings were organized by Ravi at St Johns and at IISc in Bangalore. In the third year, I decided to leave medical college and explore slums and villages in India.

My Principal was happy to hear that I was in touch with Ravi Narayan. Two others whom I met before my journey were Dr V Benjamin (who had taken classes for us before his retirement) and Dr CM Francis (who was in the Continuing Medical Education Cell at Vellore by then). I also met Dr Abel among others at RUHSA. Dr Benjamin and Dr CM

Francis are remembered as the wise-old men of CHC.

My first stop in 1984 was at the Koramangala home of the Narayans. Ravi and Thelma were joint editors of MFC Bulletin and Ravi Narayan promised me a free subscription if I wrote about my travels. I went every day to Fr Claude for classes in Sociology. After about two weeks, I decided to move on. The next place I visited was CINI where I met Dr Samir Chowdhury. Ravi and Thelma also invited me to a CHAI Conference in Bangalore while I was in Nemur, studying Siddha medicine. The conference theme was *Traditional Remedies*, I guess. The year 1984 ended eventfully with a trip to Bhopal after the gas tragedy. In January 1985 I was also able to attend a nMFC meet (on TB) at ISI Bangalore.

This trip of mine to explore, leaving the medical college, is what CHC has evolved as the "internship" programme. ■

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Programme was evaluated by two external evaluators. The main drift of their recommendation was to “consolidate the gains, strengthen the infrastructure and grow”. Keeping in view the recommendations and changing needs of the health movement, a revamped learning programme called the Community Health Learning Programme (CHLP) was launched in 2008. Currently, there are eight young professionals in the full-term 9 month programme and six young professionals who have completed flexible fellowships. As in the earlier programme, they include young men and women pursuing various vocations such as public health, nursing, medicine, engineering, social work and social sciences. Their backgrounds and experiences are also widely varied which greatly enhances the community health learning and thinking process.

New Roots, Newer Generation

The Community Health Fellowship Scheme was seen as the twentieth-year milestone project of the Community Health Cell (CHC), when it started in 2003. As CHC

celebrates its silver jubilee in 2008, it can look back with satisfaction at the learning programme it had initiated. As the external reviewers of the scheme noted, an overwhelming majority of the participants of the programme are working in various community-health-oriented programmes across the country. It has also inspired a whole new generation of medical graduates to look at community health as a career option which fulfils their idealistic notions and visions of “Health for All”.

A new generation of young professionals are rediscovering the meaning of Rudolf Virchow’s statement made in 1849 “For if medicine is really to accomplish its great task, it must intervene in political and social life. It must point out the hindrances that impede the normal social functioning of vital processes, and effect their removal.” (quoted in Pathologies of Power, Paul Farmer, p. 323). ■

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declared their workplace as ‘no smoking’ and conducted “No Tobacco Day” programmes to encourage their workers to quit tobacco use. The team members of CHC have addressed the issue through news print, television and radio on many occasions. Awareness programmes conducted in railway stations, bus stations and many public places have covered thousands of people across all backgrounds. The students of an eminent city college had produced over 100 masterpieces of art through an awareness programme conducted for them. These posters are being used in awareness programmes. Celebrities from sports, film, social and environmental sectors supported the campaign.

Community Health Cell is part of a network that organizes the World No Tobacco Day (WNTD) every year in Bangalore. A reflection after a public awareness campaign led to the formation of a state level network known as ‘the Consortium For Tobacco Free Karnataka (CFTFK)’. Considering the growing pandemic, many of the network members felt the need to engage both in advocacy and awareness programmes. CHC along with the CFTFK members have sent memorandum to the Members of Parliament as well as to central ministers for the passing of the National Tobacco Control Act in the Parliament.

While it easier for the individuals and organization to create awareness, it is easier for the networks to address advocacy issues. The Advocacy Forum For Tobacco Control (AFTC) is an example of a national-level network that has actively contributed towards development of many innovative programmes and policies.

Tobacco is a social problem! Therefore the solution has to be social. The Government of India is already making efforts to make desirable change through the recently launched National Tobacco Control Programme (NTCP). Every district is going to have a District Anti-Tobacco Cell. Let us strengthen the efforts of the government. It is community participation that will make a big difference. Community Participation is one of the four pillars of Comprehensive Primary Health Care — a potential approach to achieve ‘Health For All’. The need for drastic social change is absolutely essential considering the huge loss of lives and economy due to tobacco consumption and cultivation. It is time that each one of us educates others and ourselves. Little drops make the mighty ocean! ■

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