



EMPOWERING LIVES



IMHO 2017 ANNUAL SOUVENIR PROGRAM

14TH ANNUAL IMHO CONVENTION
SATURDAY, JUNE 17TH, 2017 ATLANTA, GEORGIA

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RENUKA DEVACAANTHAN
VICE PRESIDENT

It is an honor for us to be members of IMHO and to support a generous organization who truly enjoys coordinating, managing and investing in projects that make a long term difference in the underdeveloped communities for over 15 countries. Congratulations and THANK YOU to the dedicated members for all the happiness and wellness given to over 2million+ lives that have been improved over the last 11+ years.

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14th Annual IMHO Convention

Lanier High School, Sugar Hill, GA

Venue: Lanier High School
908 Buford Highway, Sugar Hill, GA 30518

Date: Saturday, June 17th, 2017
Time: 4:30 -10:00pm

No	Event	Participants	Event details	Time ET (PM)
0	Registration	All attendees	Registration of guests.	4:30-4:45
1	Welcome Speech	Dr. Kana Devacaanthan	Welcome speech by the current president of the IMHO	4:45-5:00
2	Violin Concert	Mrs. Jasso Balasumbaramaniam/Students	Karnatic string ensemble by <i>Karnatic strings of violin studio</i>	5:00- 5:15
3	Dance	Mrs.Subathra Sudharsan/Students.	Classical dance performed by <i>Bharatha Kala Dance academy.</i>	5:15-5:25
4	Keynote speech	Dr Velautham Sarveswaran	Keynote speech on Sampoor resettlement project sponsored by the IMHO	5:25-6:05
5	Dance	Mrs Uma Palam Pulendran/Students	Classical fusion dance by <i>Natya Dhaara Center for Performing Arts</i>	6:05-6:15
INTERMISSION ***				6:15-6:30
6	Dance	Mrs Dilan Sathees/Students	Fusion Dance Hari-Hara by <i>Shristi School of Dance</i>	6:30-6:40
7	Speech	Dr Raguraj Sinnarajah	IMHO Projects	6:40-7:30
8	Saree Auction	Dr Nanda Nanthakumar & Kandiah Mathavan	Japanese saree auction	7:30-8:15
9	Music	GATS super singers	Musical event	8:15-9:00
10	Dinner	Aachi Restaurant	Dinner buffet	9:00-10:00

Adjourn





International Medical Health Organization (IMHO)

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Dear Friends,

On behalf of our entire IMHO family, we thank you for your continued support of our mission, which has enabled us to serve thousands through development & relief projects across several countries over the past year. And for those joining us for our 14th Annual IMHO Convention this year, we welcome you to Georgia and look forward to sharing with you updates on our work, insights from the field, and ideas for moving forward. We also invite you to join in the discussion, network, ask questions, and get involved! Only with your enthusiasm, generosity, commitment, and support are we able to do this work on behalf of so many.

As we do each year, this souvenir program is both a commemoration of all that we have accomplished together over the past one year, as well as a look forward to the ways in which we can (and hope to) make a positive impact on the communities we serve.

Over the past 14 years, IMHO has invested more than \$4.8M in financial and material support to several local partner organizations and institutions, the vast majority of which has benefited communities deeply affected by chronic poverty, war, natural disaster, and other hardship across Sri Lanka. IMHO continues to support a number of several important initiatives seeking to tackle the growing problems of poor nutrition, under-developed education systems & support, livelihoods challenges, diabetes, autism, alcoholism, heart disease, hospice care, and a health infrastructure still trying to recover after years of conflict and hardship. With a vast network of local partners on whom we can rely, we can be sure that aid and assistance is getting through efficiently and effectively.

The past year has been a great one for implementing our projects. Three major projects – Neuro-developmental Disorder Center in Batticaloa, Empowerment of the Up Country, and Sampoor Resettlement; have been initiated during the year with satisfying results.

We believe in providing a holistic set of services and support to help pull marginalized and struggling communities out of poverty to ensure that all people have the ability to lead a healthy and productive life.

The power to positively impact the life of another and perhaps even save a life, lies with you. As we love to the year ahead, please consider making a donation to IMHO today to help create a new beginning for others in need. Together we are making a difference.

Warm Regards,

The IMHO Family of Organization

IMHO USA is a registered tax-exempt, 501(c)3 non-profit, charitable organization in the United States (Federal Tax ID #: 59-3779465).

IMHO is a registered Private Voluntary Organization (PVO) with the United States Agency for International Development (USAID) and a proud member of InterAction. IMHO Canada is a registered charitable organization in Canada (Registration #844191494RR0001).

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STATE OF GEORGIA

OFFICE OF THE GOVERNOR

ATLANTA 30334-0900

Nathan Deal
GOVERNOR

May 26, 2017

To: The Attendees of the 14th Annual Convention for the International Medical Health Organization

GREETINGS:

On behalf of the State of Georgia, allow me to extend my warmest regards to The International Medical Health Organization (IMHO) as you host and otherwise participate in your event.

Please allow me also to welcome your distinguished guests, tonight's honorees, their families, and other attendees. Your contributions through the IMHO helps fill the critical gaps that exist in health care delivery systems in developing countries. The efforts of organizations like this underscore the grassroots value of community service.

I send my best wishes for a productive event.

Sincerely,

A handwritten signature in black ink that reads "Nathan Deal".

Nathan Deal

ND:dw

Resettlement in Sampoor

Dr. Velautham Sarveswaran

People from Sampoor in Trincomalee district were displaced in 2006 following the war and were languishing in four welfare centres (or refugee camps around Sampoor). Nearly 1,250 families were displaced and around 900 families were living in the welfare centres.

IDP families could not return to their lands and resettle because the previous government had given the land to BOI, which gave it to a company for development. However, the current government withdrew the land from BOI and the land belonging to Government was released to IDP families. Resettlement off these families commenced in July 2015. There were 309 families considered for 1st phase of resettlement in a 925-Acre land recovered by the Government. Following a request from the GA for assistance towards the first phase of resettlement, Assist RR built 55 shelters and toilets.



2nd Phase of Sampoor Resettlement



On 25 March 2016, another 546 IDP families were allowed to return to their land following the withdrawal of the Navy that was occupying Sampoor Maha Vidyalayam and the surrounding areas with an extent of 216 acres. All these 546 families have returned without any support or assistance from the government or the INGOs.

The GA approached Assist RR and asked whether Assist RR could provide some temporary shelters and toilets, as Assist RR did in the 1st phase. The GA also asked whether Assist RR could provide toilets as a matter of urgency, as there are nearly 1000 women and girls in this latest resettlement, who have no access to toilets.

Assist RR made an appeal amongst Diaspora Tamils to build 20 temporary toilets. Following this appeal IMHO USA came forward and provided Rs 2 Million to build 50 permanent toilets. This enabled Assist RR to raise more funds and build 100 toilets in total. Assist RR was the first organization to assist these people during the 2nd phase with the support of IMHO USA. Assist RR were informed by Mr Yusuff, DS of Muthur, that they have now secured support to build toilets to the remaining families.



The temporary huts, in which the families are living, have no concrete floors but made up of the earth surface. This means that if there is rain, the shelters are flooded with rainwater and it would make the shelters uninhabitable. Hence, there was a need for at least semi-permanent shelters to 546 families. Assist RR made an appeal amongst Diaspora towards this project in May 2016 and already built 115 shelters. IMHO USA provided around Rs 7 Million to build 59 shelters and other Diaspora

from the UK, Singapore, and USA funded the remaining 56 shelters.

However, they are still looking for support to construct more shelters. Assist RR are therefore still appealing for funds to construct shelters, as the need is around 441 shelters. As the needs are huge (resettlement of 546 families), IMHO USA and Assist RR believe that Diaspora Tamils should provide as much assistance as possible towards building semi-permanent shelters. The photos above show the condition in which these families are currently living. Families also require livelihood support to start their lives. Any contribution towards improving their living condition and earning capacity would be much welcome. Please kindly consider assisting these unfortunate families. IMHO USA has so far contributed over \$100,000 towards the resettlement of Sampoor IDPs. Assist RR would like to express its gratitude to IMHO USA for their kind assistance to Sampoor IDPs.



Current Living Condition



Empowering the Life of the Upcountry Community

By E4D Staff



Established in 2013, E4D is a civil society organization of committed youth in the tea plantations in Sri Lanka working for the empowerment of children, youth and adults so that they can break the cycle of poverty and marginalization.

Confined to the socio-economic, cultural and political backwardness of the last two centuries, the Sri Lankan tea plantation community consists of the most disadvantaged and marginalized fractions of the population from the time they were brought from South India to cultivate the tea estates during the colonization period.

International Medical Health Organization (IMHO)

Founded by a group of dedicated physicians in United States of America in 2004 to support their native country folk in Sri Lanka recover lives after Tsunami, IMHO has ever increasingly established its presence to uplift the people subjected to conflict and poverty.

Today, with its presence in 14 countries, IMHO funds E4D and number of other local civil society organizations to carry out their grass-root development interventions.



Project Activities of E4D

Village Saving and Loan Associations (VSLAs)

E4D facilitates the formation of VSLAs in tea plantations so that women and men can be mobilized in small groups, encourage self-help, saving and lending, educate communities of health, nutrition, sanitation and education of their children.

Up to date:

23 VSLAs formed
299 women and 42 men reached
Rs 190,000 total saving done
2 trainings conducted



Promoting literacy and reading habits among children

Through its unique approach to promoting child literacy, called Reading Group, E4D mobilize children of the VSLA group members to form groups, assess their functional literacy, provide reading books, train reader leaders, and assist parents monitor various development activities of children within these groups.

Reading groups have been a successful approach to reach children and mobilize them to break the cycle of poverty through education and skill development.

Up to date:

29 Reading groups are formed
287 girls and 163 boys reached
350 books distributed



Caring Hands



Through IMHO funding, E4D supports 60 orphan children and their care-givers who live in most vulnerable situations. With nutritional and educational assistances, provision of psychosocial support, and regular home visit monitoring, the wellbeing of these children are maintained and supervised.

Up to date:

60 children provided with monthly nutrition rations
16 children enrolled to schools with supplements
59 children schooling monitored
23 care givers reached through counseling

Conducting advance level classes

E4D organized extra classes for student facing advanced level examinations to support them achieve better results in the two most decisive examinations of their career. Students in plantation communities record lowest results in these examinations due to lack of qualified teachers in schools, poor quality of teaching and absence of extra classes to attend.

Up to date:

33 girls and 20 boys in regular classes
Education performance of these students monitored



Monitoring preschool education

E4D monitors the functioning of preschools and provide training for teachers and parents on early child care and development. Awareness raised among parents to provide preschool education to all children of the ages three to five and support the functioning of preschools with a dedicated monthly payment to the teachers.



Up to date:

8 preschools monitored
123 children reached
8 teachers trained

Other Activities

Children's talent show at village and divisional level to help children uplift and demonstrate their dancing, writing, singing and drama skills

Publication of a monthly newspaper to promote children writing and reading

Youth leadership training to help young girls and boys develop their life-skills and leadership skills.



Witnessed at the Base Hospital Tellippalai

By Dr. Y Thivakar, Medical Director

Base Hospital Tellippalai, the second largest hospital in the Jaffna peninsula of Northern Sri Lanka, which is also home to the massive tertiary care cancer hospital, belongs to the entire northeastern population. The hospital has another distinguished role because of its location at the center of the war ravaged Valikamam, north region of Jaffna, where resettlements are going on in a slow pace. The hospital, completely destroyed by war and depleted of physical and human resources, fortunately rose from the ashes as a 'phoenix' bird, because of massive developments in the assistance provided by the government and NGOs like IMHO.

IMHO has been playing the central role in the development process of the hospital by leading forward with some extraordinary examples in humanitarian aid works and health financing on projects which demonstrate long term positive impacts in alleviating the sufferings of affected people. They are the long-standing ally of the prestigious psychiatric unit of our hospital, which is the best tertiary care psychiatric service provider of entire northeastern part of Sri Lanka and the only psychiatric teaching unit of the region. If anybody interprets those amazing developments and achievements of our psychiatric unit as the direct impact and yield of IMHO's visionary health financing on people's real demands, it is not exaggerated.



The medical equipment donated by IMHO, worth of nearly four million rupees, was the only reason, without doubts, that set the current standard in the coverage and quality of services

offered by each and every clinical center of the hospital, mainly the operation theater. Whenever we pass through the doors of the operation theater, our minds spontaneously pay gratitude to IMHO for their unbelievable and timely contribution for the revival of a fully functional operation theater with all needful advanced facilities.

IMHO was behind the success story of Dr. Saravanabava (VOG) in establishing a sub-fertility center at GH/Killinochchi, once again setting an example in humanitarian services with a donation of more than 1.2 million rupees worth of medical equipment to the andrology laboratory and their agreement for a monthly payment of sixty thousand rupees to pre-intern doctors to manage the sub fertility center with laboratory.



Apart from clinical services, IMHO's contribution in social responsibility programs for patients like parking facilities and cafeteria services are also highly commendable. The vehicle park constructed by IMHO in 2013 with the expenditure of more than one million rupees has been utilized by thousands of patients and their relatives with gratitude.

The cafeteria, constructed with an expenditure of more than 3.6 million rupees, has been providing excellent services to needful patients and staff, and cannot be compared with any hospital of Northern Province.

We are always thinking of 'how privileged we are' to get IMHO as the lifetime partner in our long journey to develop the health standards of Northern people. My heartiest appreciations always belong to IMHO for their incomparable services for the sake of war affected community.

Report from Spinal Cord Injury Association

By Uyirilai



சர்வதேச மருத்துவ சுகாதார நிறுவனம் IMHO கடந்த 2012ம் ஆண்டு முதல் எமது உயிரிழை அமைப்புடன் Dr. ஞானசேகரம் அவர்களினுடாக இணைந்து கொண்டது. இந்தக்காலப்பகுதியில் எமது பயனாளிகளின் மிகவும் அடிப்படைத் தேவைகளான வாழ்வாதார உதவித்திட்டத்தை வழங்குவதற்காக எமது அமைப்பின் பயனாளிகளுக்கு கட்டம் கட்டமாக மொத்தம் 30 முச்சக்கர வண்டிகளை Rottery club கொழும்பு ஊடாக வழங்கியிருந்தனர். பின்னர் அதே காலப்பகுதியில் அனுகூலம் வசதிகளைக்கொண்ட 10 மலசல கூடங்களையும் எமது பயனாளிகளுக்கு வழங்கியிருந்தனர். அத்தோடு எமது சல முகாமைத்துவப் பொருட்கள் SIC Chathether களை எமக்கு இரண்டு தடவைகள் பெற்று வழங்கியிருந்தனர். பின்னர் தற்போது மீண்டும் எம்மோடு இணைந்து எமது பயனாளிகளுக்கான 20 அனுகூலம் வசதிகளைக் கொண்ட புதிய மலசல கூடங்களையும் 15 திருத்த வேலைகள் செய்யவேண்டிய மலசல கூடங்களையும் செய்து தருவதாக ஒப்புக்கொண்டனர். அதில் முதல் கட்டமாக 20 பேருக்கான புதிய மலசல கூடங்களை அமைக்கும் பணிகள் ஆரம்பிக்கப்பட்டுள்ளன. இப்படி மிகவும் பயன் உள்ள பல வேலைத் திட்டங்களை IMHO ஊடாக நாம் நடைமுறைப்படுத்துகின்றோம்.



Emergency Ambulance Services

By Dr. D C Ambalavanar, Coordinator & Advisor

The week beginning 17th April was a significant one in the continued development of the nascent emergency ambulance services of the Northern Province Health Ministry. The service was inaugurated in January 2016 thanks to the efforts of the Minister, Dr. Sathiyalingam, and the Provincial Director of Health Service, Dr. Ketheeswaran. It was the first such free service in the country.

The main problem has been that ambulances were not properly equipped and ambulance crews were not trained. To address the problem of training for the drivers and attendants who crew the ambulances, Paramedic Instructors from the London Ambulance services were arranged to help with the training. They came in August 2016 and trained twelve doctors as instructors who then trained the crews. Will Broughton, one of the paramedics returned on 18th April to continue with training and to review what has been achieved.

Achievements so far include 19 instructors being trained and by the 21st April 176 ambulance drivers and attendants had undergone a five-day training to be Emergency First Responders. The call centre staff also received training during this week. An administrative structure has been decided on. The province will soon be receiving new ambulances which will need to be equipped. Once that has been done, it will be possible to provide a dedicated emergency ambulance service which can, with its trained staff, provide some quality pre-hospital care for medical and accident emergencies.



Much of this would not have been possible without the sustained support of IMHO USA. They provided the funding to enable the paramedics from the UK to come and stay here for training both in 2016 and now. In addition, they provided funds for the purchase of an airway trainer manikin and two automated defibrillators for training purposes. One Automated External Defibrillator (AED) is now located in the Provincial Department of Health Services' office while awaiting an ambulance to house it, thus becoming the first AED to be located in a public place in northern Sri Lanka!



The continued support provided by IMHO and all who support that organisation has been crucial in developing the first home grown emergency ambulance service in Sri Lanka. It is hoped that IMHO will continue to support this program for the years to come.

Neurological Projects in Northern Sri Lanka

Dr. A Arasalingam, Consultant Neurologist

I would first like to introduce the organizing team for the Northern Province – Dr. A. Arasalingam, Dr. J. Sanjeayan, Mr. P. Gowrithran, Dr. K. Abiramy and Dr. P. Thineshkaran without whom none of these would have been achieved. We as a team began our preparations as early as August.

Project 1 – Awareness posters in Tamil and English.

Dr. Sanjeayan's award winning poster at the World Stroke Day Poster Competition 2015 was used as the awareness poster for our campaign this year.

Project 2 - Course manual - Update on Stroke and Stroke Rehabilitation for the participants of the workshops held in the Northern Province. The contributors to this manual

Dr. A. Arasalingam (Consultant Neurologist –Teaching Hospital Jaffna)

Dr. N. Aravindan (Consultant Rheumatologist - Teaching Hospital Jaffna)

Dr. Srini Godavithanage(Consultant Neurologist – District General Hospital Vavuniya)

Mr. P. Gowritharan (volunteer Speech and Language Pathologist – Teaching Hospital Jaffna)

Mr. T. Sajeivan (Physiotherapist – Teaching Hospital Jaffna)

Dr. J. Sanjeayan (Research Assistant – Sri Lanka Stroke Clinical Registry, Teaching Hospital Jaffna)

Dr. P. Thineshkaran (Medical Officer – Neurology, Teaching Hospital Jaffna)

Dr. K. Abiramy (Medical Officer – Neurology, Teaching Hospital Jaffna)

The above were also the resource persons for the workshop.

Project 3 – A series of Eight Workshops were Held in the Northern Province covering all 5 districts of the Northern Province of Sri Lanka – which I would be very happy to say was the first program ever that covered an entire province, involving 8 hospitals.

Project 3.1 – Workshop at DGH Killinochchi on 2016/08/01

Project 3.2 – Workshop at DGH Mannar on 2016/08/05

Project 3.3 - Workshop at DGH Mullaitivu 2016/08/29

Project 3.4 – Workshop at BH Point Pedro 2016/10/06

Project 3.5 – Workshop at BH Chavakachcheri 2016/10/12

Project 3.6 – Workshop at BH Tellippalai 2016/10/20

Project 3.7 – Workshop at DGH Vavuniya 2016/10/26

Project 3.8 – Final Workshop at Teaching Hospital Jaffna 2016/10/28

Project 4: Opening of Rehabilitation Units

Project 4: 1 – Opening of a 10-bedded stroke rehabilitation bay at the Base Hospital Point Pedro (6 bedded male bay and 4 bedded female bay – bed dedicated for rehabilitation of stroke patients). This is the first official stroke rehabilitation facility which was open by Dr. MTM Riffsy

(President National Stroke Association) and Dr. Gamini Pathirana (Secretary NSASL) on 19/October/2016. A physiotherapy department was also opened at BH Point Pedro and the NSASL has pledged their support to fund the equipment and refurbishment of the unit via the ministry of health. The beds were donated by philanthropist.

Project 4:2 – Opening of a 10 bedded stroke rehabilitation unit at Base Hospital Chavakachcheri on 18/10/2016. There is very minimal facility but an extremely determined team at Chavakachcheri.

Project 5: Telemedicine – Acute Stroke and Stroke rehabilitation. It is indeed the first of its kind in Sri Lanka. We hope to make use of this model to promote stroke care in other parts of the country. My sincere thanks to Dr. J. Sanjeyan and Dr. P. Thineshkaran when I just mentioned to them that I had such a vision. They made it come true in days and now our unit in Teaching Hospital Jaffna will pilot this. With improvements to our primitive form of telemedicine, I am sure that soon we would be able to give expert advice on stroke care even to the most remote area in the country.

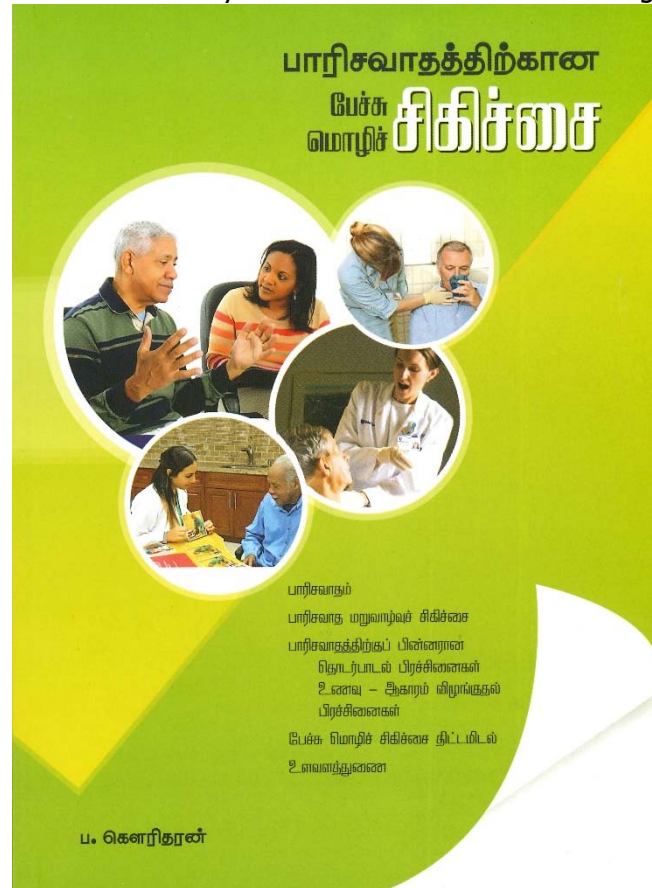
Stroke education: Launching of 3 books for the stroke survivor and their carers and health care professionals. These books were distributed free of charge amongst the public and health care professionals not only in the Northern Province but also in the other parts of the country. Thanks to the philanthropist who sponsored the books.

Stroke: Face the facts (Author – Dr. A. Arasalingam)

Parisavatham: Unnmaikalai ethirkolvom (Tamil translation of the first book – Authors: Dr. J. Sanjeyan & Dr. A. Arasalinagm)

Parisavaththithkana peechchu mattum moli sikichchai (Tamil: Speech therapy intervention in Stroke. Author: Mr. P. Gowritharan).

All books will soon be available in all three languages in the country – English, Tamil and Sinhala in due course



All these projects would not have been possible without the prompt financial and moral support from IMHO. They have always been there and have lent us a helping hand countless times which gives us the confidence to take up any project in mind. We thank IMHO and hope continue the relationship in the forthcoming years.

Cardiac Services in Batticaloa

Dr. K Arulnithi, Consultant Cardiologist



Handheld Arterial Doppler

Once again, we are delighted to write a message to the souvenir of IMHO this year too. It is our duty to thank and wish IMHO for their tireless effort towards the betterment of our society. We have been receiving assistance from IMHO for last six years. Currently, a major part of our primary prevention work is assisted by IMHO. Our research assistant is being paid by IMHO and, also supplied medical instruments. It is a unique program initiated in our unit. So far more than a thousand healthy individuals screened and being followed by us. We are expecting long term support for this program.

In future, we as people of Batticaloa expect assistance to provide health care in peripheral sectors and, we further request IMHO to assist in the nutrition of preschool and primary children. We still do see lot of stunted and malnourished children. Government sponsored nutrition plan was is very limited.

We also like to remember the contribution of IMHO for the education. We received assistant for science exhibition conducted by Science Navigators. Out of health, scientist from IMHO helped to formulate the seasonal rain prediction chart for the eastern province once again for the Science Navigators. In future, we expect IMHO and its valuable members extend their support and assistant beyond health to all the sectors.



Immunoanalyzer for HsCRP

Home Based Comfort Care

By Dr. N Sivarajah, Director of CANE

CANE UK had been assisting Cancer patients since the early 90s. In 2006, CANE UK established a Hospice in Uduvil located at No. 5, Sabapathipillai Road, Uduvil, Chunnakam. The need for Palliative Care for Cancer Patients was initiated and discussed at a meeting held at the RDHS office Jaffna on September 5th, 2014 under the Chairmanship of the then RDHS Dr. A Kethesewaran. It was decided that the CANE Hospice should undertake field based Palliative Care of Cancer Patients and extend to other chronic patients who need palliative care at a later date.



Consequently 3 MOH areas – Tellippalai, Uduvil & Nallur were selected for intensive work in Home Based care. A count of Cancer patients receiving financial assistance from the division Secretaries in the respective areas was collected. During this data collection process the following list of cases were obtained; DS division, Tellippalai, Uduvil & Nallur. With the financial support of International Medical Health Organization (IMHO), USA, and CANE UK, we were able to accomplish our vision.

Staff training and Awareness

Dr. Rajendra Surenthirakumaran was sent for a 6 weeks palliative care training to the Pain and Palliative Care Society, Medical College P.O. Calicut, Kerala, India in December 2014 to February 2015. The experience received is helping the palliative care program at CANE Hospice. He is providing valuable advice and guidance to the staff.

A Palliative Care workshop was held on March 13th, 2015 at general hospital Vavuniya. The staff from the CANE Hospice attended the workshop. A meeting of staff from Base Hospital Tellippalai and Jaffna Teaching Hospital was held at Tellippalai on December 11th, 2015 to plan the conducting of Community Based, Palliative care with 25 participants.

Staff situation

Since April 2017, we have a team consisting of a nurse, two health care workers and a driver. They use a three-wheeler to visit homes of patients. Whenever there is a need to transport patients to hospital, the CANE vehicle is also utilized. The matron at CANE hospice and the health care assistants visit the cancer patients on and off, when there are sufficient staffs and less patient care is needed in the Hospice.

Activities

Visits to homes of cancer patients and registering all cancer patients was started in January 2016 Up to the end of April 2017, (one year and 3 months after commencement of the program). We have registered and visited 142 cancer patients, and in addition, 43 repeat visits were made. The registration is done by home visits based on Particulars Received from, obtaining addresses of severely ill cancer patients from the Trail Cancer hospital, Tellippalai. From the list of cancer patients receiving financial assistance from the Divisional Secretaries of Tellippalai, Uduvil and Nallur divisions.

From the Medical Officers of Health in Tellippalai, Uduvil & Nallur, collected by their Public Health Midwives

27 of these patients have died during the period, and the team has visited these patients frequently and provided assistance and care during their terminal stages. The services included:

- Providing counseling
- Educating the care givers regarding personal hygiene, prevention of bed sores etc.
- Providing Drugs such as pain killers, patches etc.
- Wound care, oral care etc.
- Provision of mobility equipment such as walking frames to those who cannot afford
- Provision of Air mattresses to prevent bed sore where needed
- Referring patients and sometimes providing transport to attend palliative care clinics or radiotherapy

Awareness programs

CANE has posters on cancer prevention. These are used to educate patients cancer awareness programs are held frequently in the Hospice, for those who provide care at home. Patients and by-standers at the CANE hospice also attend these awareness programs

Future Plans

With the appointment of the new Nurse in charge of Palliative care, it is possible that the Home Based Palliative Care program will receive a boost. Our plans include:

- more regular visits to the field and registration of patients
- providing more assistance and care for terminally ill patients in their homes
- organizing more awareness programs for care givers at home. An awareness program on breast cancer has been planned for home care givers. It is planned to hold such programs every fortnight for different groups such as families with oral cancer, esophageal cancer etc.
- cancer prevention programs are also planned in schools for GCE O/L and GCE A/L students
- developing more educational material for public education on Cancer prevention
- using the electronic media for education on cancer prevention

We thank IMHO for their ongoing financial support and hope their support will continue for the years to come. Without their help we would not have been able to provide the comfort and care needed for these patients.

Autism Center of Batticaloa

By Dr. P Judy Jeyakumar, Psychiatrist

Services for the children with Autism Spectrum Disorder (ASD) is a growing need in the Eastern part of Sri Lanka as in the rest of the world. In 2015, a group of medical professionals from International Medical Health Organization (IMHO-USA) visited Batticaloa and conducted a work shop to raise public awareness about ASD.



They met with various medical educators, medical professionals and social services workers during their stay in Batticaloa. Brothers of Charity and Rev. Fr. Rene Stockman have agreed to start the services for the children with ASD in Batticaloa by providing space and staff to operate an ASD centre.



The ASD centre will operate in a facility/building provided by Brothers of Charity. IMHO provided funds to renovate the building. Moreover, they will pay the wages of a chief therapist and assistant therapists for two years. The Serendib Children Home, based in UK extend the part of the grant for the staffs training in India. Rev, Br. Wilfred Mariyathas The Principal of Theeraniyam and Mr.E.Neelamparan Speech Pathologist went to India in February 2107 for one month residential training in "Sankalp" an open school and learning centre for Autism. Mr. Bimal Balasingham an Accountant in Singapore supported part of the grant for their training.



The Sri Lankan Air Force in Batticaloa lead by Wink Commander Buddika Pathirana and his twenty members did the landscaping for the premises as a part of their community welfare program.

The renovation, landscaping, purchasing the needed class room items, installing the audio, visual items and cartoon works ended in March 2017.





The centre was opened on the 8th of April 2017. Dr. J. M. W. Jayasundara Bandara the Director General of Health Services, Ministry of Health and Nutrition, Colombo. Rev.Br.Godfried Bekeart Regional Superior and Provincial Superior of Asia, Prof. Daya Somasundaram Professor of Psychiatry, University of Jaffna, Dr,Anjala Arulpragasam Consultant Paediatrician, Dr. Swarna Wijetunghe Consultant Child Psychiatrist, Leady Ridgway Hospital, Colombo, Dr. Ibra Labbai Director Teaching Hospital, Batticaloa and several others took part and addressed the audience.



Kuruntham Alcohol Rehabilitation Center

By Kurutham Staff

குடிநோய் ஒருவருடைய நடத்தையில் மாற்றங்களை ஏற்படுத்தி அவருக்கும், அவரது குடும்பம் மற்றும் சமூகம் ஆகியவற்றிற்கும் பலவகைப்பட்ட பிரச்சினைகளைத் தோற்றுவிக்கின்றது. மதுவுக்கு அடிமையான ஒருவர் அந்நிலைமையில் இருந்து மீள்வதற்கு தன்னம்பிக்கையோடும், அர்ப்பணிப்போடும் கணிசமானதொரு காலம் ஒரு புனர்வாழ்வு நிலையத்தில் தங்கி நின்று சிகிச்சை பெறுதல் அவசியம். இதன் மூலம் அவர் தனது அடிமை நிலையை மீள் பரிசீலனை செய்து புதிய பாதையை நோக்கிப் பயணிப்பதோடு, தான் இதுவரை இழந்த உறவுகளையும், திறன்களையும் மீளவும் பெற்று, ஓர் இயல்பான வாழ்க்கையை வாழ முடியும்.

இந்த இலக்கை எய்து முகமாகவே மது அடிமை நிலையிலிருந்து விடுபடுவதற்கான புனர்வாழ்வு நிலையங்கள் உருவாகின. யாழ்ப்பாணத்தில் சாவகச்சேரி ஆதார வைத்தியசாலையில் 10.10.2013 அன்று அது **குருந்தம்** ஆகப் பரிணமித்தது.

குருந்தம் என்பது குடிப்பழக்கத்தினால் அவதியுறுகிறவர்கள் அதிலிருந்து விடுபட விரும்பும் போது அவர்கள் சில காலம் தங்கி நின்று தம்நிலை உணர்ந்து, சிறப்பான சிகிச்சைகள் பெற்று, சீரிய நடத்தை மாற்றங்களை ஏற்படுத்து முகமாக வடிவமைக்கப்பட்ட வீடு போன்றதொரு இடமாகும்.

இவ்விடத்தில் தங்கி நின்று சிகிச்சை பெறுபவர்களுக்கு உரிய சிகிச்சையையும் ஏனைய உதவிகளையும் ஆலோசனைகளையும் வழங்குவதற்கு இங்குள்ள பணியாளர்களுக்கு இது தொடர்பான அறிவும், அனுபவமும் போதுமானதாக ஆரம்பத்தில் இருக்கவில்லை. இவ்வாறு செயற்படு வரும் நேரத்தில், உளநல வைத்திய நிபுணரின் ஊக்கத்தினாலும், IMHO வின் ஆதரவினாலும் 14.07.2014 - 19.07.2014ம் திகதி முதல் ஆறு நாள் பயிற்சியினை யாழ்ப்பாணத்திலிருந்து நான்கு பேர் சென்னையிலுள்ள TT ரங்கநாதன் மருத்துவ ஆராய்ச்சி நிறுவனம் மற்றும் TTK மருத்துவமனையில் பெற்றுக் கொண்டார்கள். இந்தப் பயிற்சியானது சர்வதேச தரத்தில் குடிநோயாளர்களை சிறந்த நிலையில் கொண்டுவர, அல்லது குடியிலிருந்து விடுபட்டு அவர்களைச் சமூகமயப்படுத்துவதற்கான முழுமையான சிகிச்சை முறைகளை மூன்று பிரிவுகளாகக் கொண்டிருந்தது. அவையாவன

01. நோயாளியைக் கண்டறிதல், சிகிச்சைக்குச் செல்வதற்கு ஊக்குவித்தல்
02. மருத்துவ உதவி
03. புதிய வாழ்க்கையை அமைத்துக்கொள்வதற்கான உளவியல் உதவி

இந்த விடயங்கள் அனைத்தையும் உள்ளடக்கி அவர்களது சிகிச்சை, விரிவுரைகள் அமைந்து காணப்பட்டன. இதனை விட குழுமுறைச்சிகிச்சை, உளவளத்துணை, அறிவூட்டும் விரிவுரைகள், மறுகலிப்பைக் கையாளுதல் பற்றியும், AA, Al Anon போன்றவை பற்றியும், குடிநோயாளர்களுடைய மனைவி, பிள்ளைகளுக்கான தனியான மற்றும் குடும்ப உளவளத்துணை என்பவற்றை விரிவுரைகள் மூலமாகவும், குழு ரிதியாக செய்து காட்டியும் விளக்கங்களை உரிய முறையில் தந்துதவினார்கள். இதனைவிட, சில நூல்கள், கையேடுகள் என்பற்றையும் தந்துதவினார்கள். இவ்வாறு பெற்ற பயிற்சிகள் ஏனைய பணியாளர்களோடும் பகிர்ந்து கொள்ளப்பட்டன.

குருந்தம் ஆரம்பித்ததிலிருந்து இன்றுவரை மொத்தம் 421 நபர்கள் இங்கு தங்கி நின்று உதவி பெற்றுச் சென்றிருக்கிறார்கள்

ஆண்டு	பயன் பெற்றோர்
2013(27.10.2013 இலிருந்து)	19
2014	112
2015	123
2016	132
2017(ஏப்ரல் வரை)	35
மொத்தம்	421

குருந்தத்திலிருந்து வெளியேறிய பின்பு அவர்களது நிலை எவ்வாறு இருக்கின்றது? எனப் பார்க்கலாம்.

தற்போதைய நிலை	2013	2014	2015	2016	மொத்தம்
மதுவில்லாத வாழ்வு	08	57	54	60	179
மறுகலிப்பு ஏற்பட்டு, மீள்சிகிச்சை பெற்று, தற்போதும் தொடர்பில் இருப்பவர்கள்.	02	09	11	14	36
குறைந்தளவு மதுபாவனை அல்லது பிரச்சினையற்ற மதுபாவனை	03	15	22	18	58
மதுவடிமை நிலைக்கு மீளத் திரும்பியமை	04	19	20	25	68
தொடர்பை நிறுத்தியவர்கள்	02	12	13	15	42
இறப்பு	-	-	03	-	03
மொத்தம்	19	112	123	132	386

குருந்தத்திற்கு அனுமதி பெறுபவர்கள் சாதாரண கூலித்தொழிலாளர்கள், வங்கி ஊழியர்கள், ஆசிரியர்கள், அதிபர்கள், தொழில்நுட்பவியலாளர்கள் என பல தரப்பட்ட பின்னணிகளையுடையவர்களாக இருக்கின்றார்கள். இதனைவிட, வெளிநாடுகளிலிருப்பவர்களும், குறிப்பாக, இளைய வயதினரும் குருந்தத்தில் சிகிச்சைக்காக வந்து சென்றுள்ளனர்.

இவ்வாறாக பல தரப்பட்டவர்களை இந்நோய் ஆட்கொண்டுள்ளது. மதுவானது தனிநபர்களை மட்டுமல்லாது, அவர்களது குடும்பங்களையும், சமூகத்தையும் பாதிப்பதால் தற்பொழுது மது பற்றிய

ஒரு சமூகப் பயம் ஏற்பட்டுள்ளது போலத் தெரிகின்றது. இந்த நிலைமையினாலும், எம்மிடம் சிகிச்சை பெற்று பலர் நல்ல நிலையில் வாழ்வதைப் பார்ப்பதனாலும் எமது பயனாளிகளின் எண்ணிக்கை தொடர்ச்சியாக அதிகரித்தது வருகின்ற ஒரு நிலை இப்போது உருவாகியுள்ளது.



குருந்தத்தில் அனுமதி பெறுபவர்களது குடும்பங்களுடன் இணைந்து தைப்பொங்கல், வருடப்பிறப்பு, சரஸ்வதி பூசை, நத்தார் போன்ற பண்டிகைகளையும், வருட நிறைவு விழாக்களும் கொண்டாடப்பட்டு வருகின்றன. மேலும், ஒவ்வொரு போயா தினங்களிலும் அனுபவப்பகிர்வு ஒன்றுகூடல்களும், தொடர்ச்சியான மருத்துவக் கண்காணிப்பு மற்றும் சிகிச்சைகளும் நடைபெறுகின்றன.

குருந்தத்தைத் தொடர்ந்து, கடந்த சில ஆண்டுகளாக, கிளிநொச்சியிலுள்ள தர்மபுரம் எனும் இடத்தில் இது போன்ற ஒரு புனர்வாழ்வு நிலையம் இயங்கத் தொடங்கியுள்ளது. ஆரம்பத்தில் குருந்தம் புனர்வாழ்வு நிறுவனம் அங்கு பணியாற்றுகின்ற பணியாளர்களுக்கு பத்து நாள் பயிற்சி வகுப்புக்களை வழங்கியது. இதனைவிட, மருத்துவ பீட மாணவர்களும், உளசமூக மாணவர்களும் குருந்தத்திற்கு வருகை தந்து அவர்களுக்குரிய விதத்தில் பயிற்சி பெறுகின்றார்கள். இவ்வாறு குருந்தமானது ஒரு பயிற்சி நிறுவனமாகவும் திகழ்கின்றது.

குருந்தம் விடுதியின் சிறப்பான வளர்ச்சிக்கு சுகாதார திணைக்களத்தின் செயலாளர், மாகாண சுகாதார சேவைகள் பணிப்பாளர், பிராந்திய சுகாதார சேவைகள் பணிப்பாளர், உளநல வைத்திய நிபுணர், வைத்திய அத்தியட்சகர், விடுதிக்குப் பொறுப்பான வைத்தியர், வைத்தியசாலை அபிவிருத்திச் சங்கம், உளநலச்சங்கத்தினர் எனப் பலர் தமது உதவிகளையும், ஆலோசனைகளையும் வழங்கி வருகின்றனர்.

உள மருத்துவ நிபுணர் மாதத்தில் ஒவ்வொரு புதன் கிழமைகளிலும் பணியாளர்களை மேற்பார்வை செய்து அறிவுறுத்தல்களையும், தேவையான விளக்கங்களையும் தந்து கொண்டிருப்பதால் குருந்தம் தனது பணியைச் சிறப்பாக செய்ய முடிகின்றது. குருந்தத்தில் பணிபுரியும் பணியாளர்களுக்கு ஒழுங்கான முறையிலும், தேவைப்படும் வேளைகளிலும் அறிவூட்டல்கள், மற்றும் ஏனைய திறன்கள் தொடர்பான பணிற்சிகள் வழங்கப்பட்டு வருகின்றன.

குருந்தத்தின் பௌதிக அமைப்பானது பல பகுதிகளை ஒன்றாகக் கொண்டு அழகாக வடிவமைக்கப்பட்டுள்ளது.

01. கதைக்கும் கூடம்
02. விருந்தினர் சந்திக்கும் பகுதி
03. சமையலறைப்பகுதி
04. சாப்பிடும் பகுதி
05. நூலகம்
06. உள்ளக விளையாட்டுப்பகுதி
07. வழிபாட்டிடம்
08. மலசல கூடம்
09. குளியலறை
10. களஞ்சிய அறை
11. உடை மாற்றும் பகுதி
12. உளவளத்துணை அறை
13. தனி நபருக்கான வதியும் பிரதேசம்
14. உள்ளக தொலைபேசி இணைப்பு மற்றும் செல்லிடத் தொலைபேசி வசதிகள்
15. உடல் ஆரோக்கியத்தைப் பேணும் சாதனங்களுக்கான பகுதி



இதனை விட சிறிய தோட்டம், பூ மரங்கள்,மற்றும் பயனுள்ள மரங்களை பராமரித்தல், விளையாட்டு முற்றம் என்பனவற்றையும் கொண்டு குருந்தமானது, அழகான, அமைதியான சூழலில் காணப்படுகின்றது.

குருந்தத்தில் அனுமதி பெற்று, சிகிச்சை முடிவுற்று, வீடுசெல்லும் பொழுதில் பயனாளிகள் சத்தியப்பிரமாணம் செய்து, மரம் ஒன்றைக் குடும்பமாக நாட்டி, தமக்குள் ஒரு நம்பிக்கையை ஏற்படுத்தி சந்தோசமாக விடைபெற்றுச் செல்கின்றனர்.

குருந்தமானது, மிகவும் குறைந்தளவு பணியாளர்களைக் கொண்டு சிறப்பாக இயங்குகின்ற ஒரு நிலையமாக அமைந்திருக்கின்றது. இங்கு வைத்தியர் முதல் அனைத்துப் பணியாளர்களும் சிறப்பான முறையில் ஒன்றிணைந்து பயனாளிகளின் தேவைக்கு ஏற்ப, சேவை செய்து வருகிறார்கள். குருந்தத்தின் சேவை வழங்கலிற்கு தமது ஆதரவினை தொடர்ச்சியாக வழங்கி வரும் IMHO நிறுவனத்திற்கு எமது மனமார்ந்த நன்றிகளினைத் தெரிவிப்பதுடன், மேலும் வளர்வதற்குத் தங்களது தொடர்ச்சியான ஆசிகளையும், ஆதரவையும் எதிர்பார்க்கின்றோம்.



Neuro-developmental Center in Jaffna

By Mathavam Staff

Mathavam, Centre for Neuro-developmental disorders was started in April 2014 with the support of IMHO – USA and successfully on the trot. And it has been in cooperated with Regional Director of Health Services, Jaffna and functioning as semi-government institute since 2015. Ever since the opening, more than 100 children came for assessment and 79 being diagnosed with Autism.



Among which 35 children have finished their 3 months compulsory therapy and 10 are currently following the therapy classes. Among these 79 children with autism, there are more than 45 of them attending schools in special unit classes.

It is a remarkable step that, it has been started to in co-operate children with other special needs such as ADHD, behavioral issues, dyslexia and other Learning difficulties and now there are 9 such children following training in this Centre in the evening sessions. One of the staff of Mathavam has been trained in India-Sankalp- on teaching children with special needs which make the training sessions more effective.



Committee meetings are also being conducted periodically. Also conduct classes and discussions for parents as well. Speech therapy sessions are also being held in the Centre every Thursday through which most of our kids are getting benefited.

In addition to these, a suitable house for Centre has been identified in Thirunelveli area which will be taken over by Mathavam at the end of May 2017. After that, the Centre will be equipped in better way with sensory room and other needed equipment.



Our special thanks to IMHO for their generous support to function smoothly.

Karunya Stroke Rehabilitation Center

By Dr. T Thivakaran, Consultant Neurologist

“நமசிவாயத்திற்கு 52 வயது. அரசு உத்தியோகத்தரான அவர் தனது அலுவலக வேலைகளுடன் குடும்பத்தேவைகளையும் சிறிய அளவில் வீட்டு வேலைகளையும் செய்து வந்தார். பயனுடைய பொழுது போக்குகள், சீரான உடற் பயிற்சி, உணவுக்கட்டுப்பாடு, வருடத்தில் ஒரு தடவையாவது மருத்துவப்பரிசோதனைகள் போன்ற எவற்றையும் செய்யவில்லை. கடந்த இரண்டு வருடங்களாக தலைச்சுற்று, கண்இருட்டுமாப்போல் இருத்தல், தலைவலி, அதிக களைப்பு, என்பன இருந்தன. ஆனாலும் அவர் அது குறித்து மருத்துவ ஆலோசனை அல்லது பரிசோதனைகளிற்குச் செல்லவில்லை. ஆறு மாதங்களுக்கு முன் வலது பக்க உடலில், கை, கால், முகம் என்பன திடீரென வலுவற்று. மட்டக்களப்பு போதனா வைத்தியசாலையில் அனுமதிக்கப்பட்டு ஆரம்ப சிகிச்சைகளின் பின் ஐந்து மாதங்களிற்கு முன் வாழைச்சேனை ஆதார வைத்தியசாலையின் “காருண்யா” பரிசுவாத புனர்வாழ்வு பிரிவில் புனர் வாழ்வு அளிக்கப்பட்டார். தற்போது எழுந்து நடக்க, தனது நாளாந்த கடமைகளை செய்வதற்கும் இயலுமான நிலையை அடைந்துள்ளார். நமசிவாயத்திற்கு என்ன நடந்தது?



STRIKE THE STROKE BEFORE CLOCK STRIKES THREE

“KARUNYA” - STROKE REHABILITATION CENTRE - BH-VALAICHCHENAI

பரிசுவாதம்/பக்கவாதம் என்றால் என்ன?

மூளைக்கு குருதி விநியோகம் செய்கின்ற குருதிக்குழாய்களில், ஏதாவது ஒரு பகுதியில் சடுதியாக ஏற்படுகின்ற அடைப்பால் குருதி விநியோகத்தைப் பெறுகின்ற குறித்த மூளையின் பகுதிகள் பாதிக்கப்படுகின்றன அல்லது இறந்துவிடுகின்றன. இதனால் வெவ்வேறு வகையான பாதிப்புகள் ஒருவரில் ஏற்படலாம். அப்பாதிப்புகளால் ஒருவரது உடலின் அவையவங்கள் பாதிக்கப்பட்டு அவைகளின் அசைவுகள் மட்டுப்படுத்தப்படலாம். பேச்சு மற்றும் விழுங்குதல் பாதிக்கப்படலாம். சிந்தனை செயல்கள், உணர்வுகளை வெளிக்காட்டுவது பாதிக்கப்படலாம். இதனுடன் இணைந்த ஏனைய உடல் நலக் கோளாறுகளும், உளநலக் கோளாறுகளும் ஒருவரில் ஏற்படலாம்.

மாற்றுத்திறனாளிகளை உருவாக்குவதில் பக்கவாதத்திற்கு பிரதான இடமுண்டு. அத்துடன் வருடாந்தம் 6.5 மில்லியன் மக்கள் உலக அளவில் உயிரிழக்க 17 மில்லியன் மக்கள் வருடாந்தம்

பாதிக்கப்பட அத்துடன் இப்பாதிப்புகளுடன் ஏறத்தாள 26 மில்லியன் மக்கள் உலகம் முழுவதும் வாழவும் பாரிசுவாதம் காரணமாகிறது. வயதானவர்களில் பக்கவாதத்தால் ஏற்படும் உயிரிழப்புகள் உலகளவில் இரண்டாவதாகவுள்ளது. பக்கவாதம் யாருக்கும், எப்போதும் எவ்வயதிலும் ஏற்படலாம் என மனதில் கொள்வதே மிகச்சிறந்தது. பக்கவாதம் வந்தபின் அதனை கையாள்வதை விட வரமுன் காப்பதே மிகப்பயனுடையது. பொதுமக்கள் மத்தியில் இதுகுறித்த விழிப்புணர்வு மிகக்கூடியளவில் தேவைப்படுகிறது. கீழ்வரும் ஆறு விடயங்கள் பக்கவாத தவிர்ப்பு, சிகிச்சையில் மிகப்பயனுடையவை. பக்கவாதம் ஏற்படுத்தும் அறிகுறிகளை தெரிந்து கொண்டு உடனடியாக சிகிச்சைக்கு உட்படுத்துவதே மிகப்பயனுடைய இடையீடாகும். “FAST” என்ற சொல்லின் ஒவ்வொரு எழுத்துக்களும் இதற்கு உதவியாக உள்ளன. Face “முகம்” ஒரு பகுதி வலுவழிக்கிறதா? Arms “கைகள்” இரண்டையும் உயர்த்தும் போது ஒன்று/ஒரு பக்கம் முடியவில்லையா? Speech:- பேச முடிகிறதா? பேச்சு தெளிவாக ஒழுங்காக விளங்க கூடிய விதமாக உள்ளதா? Time: - காலதாமதமில்லாமல் மட்டக்களப்பு போதனா வைத்தியசாலை உட்பட பிரதான வைத்தியசாலைகளின் அவசர சிகிச்சை பிரிவிற்கு முன்னு மணி நேரத்திற்குள் விரையவும். இவ்வாறாக விரைந்து செயற்படும் போது பாதிக்கப்பட்டவரை நல்ல முறையில் சிகிச்சைக்கு உட்படுத்தி பாரியளவில் உடல் இயக்க செயற்பாடுகள் முடக்கப்படாத வகையில் அவரை முழுமையாக மீளெழுப்ப முடியும். இதற்காக பயன்படுத்தப்படுகின்ற மூளையின் குருதி விநியோக குழாய்களின் கட்டிகளை கரைப்பதற்கான மருந்துகள் (tPA அல்லது Alteplase) தற்போது மட்டக்களப்பு போதனா வைத்தியசாலை உட்பட பிரதான வைத்தியசாலைகளில் உள்ளன என்பதை மகிழ்ச்சியுடன் அறியத்தருகிறோம். கடந்த முன்று மாதங்களில் அறுவர் மட்டக்களப்பு போதனா வைத்தியசாலையில் பக்கவாதத்துடன் அனுமதிக்கப்பட்டு அவர்கள் எவ்வித உடல்/ அவயவ பாதிப்புமின்றி மீளெழக்கூடிய நிலைமை உருவாக்கப்பட்டது.



கடிகாரம் ஓடும் முன் ஓடு – உன் பாரிசுவாதம் உன்னை விட்டு ஓடும்



காளுண்யா – பாரிசுவாத புனர்வாழ்வு பிரிவு, ஆதாரவைத்தியசாலை வாழைச்சேனை

“காளுண்யா” பாரிசுவாத புனர்வாழ்வு பிரிவு ஆதார வைத்தியசாலை வாழைச்சேனை.

பாரிசுவாத நோயாளிகளின் ஆரம்ப தீவிர சிகிச்சைகளை தொடர்ந்து உடனடியாக புனர்வாழ்வு செயற்பாடுகள் ஆரம்பிக்கப்பட வேண்டும். இங்கு ஆரம்ப சிகிச்சைகளும், புனர்வாழ்வு செயற்பாடுகளும் நாணயத்தின் இரு பக்கம் போல் ஒன்றிலிருந்து மற்றையதை வேறு பிரிக்க முடியாதவாறு பின்னி பிணைந்துள்ளது. பாதிக்கப்பட்டுள்ள பேச்சு, விழுங்குதல், உணவு

உட்கொள்ளுதல், உடல் இயக்கச் செயற்பாடுகள், அசைவுகள், மனப்பாதிப்புகள் என்பன சரியான இடையீடு மூலம் மீள ஒழுங்கமைக்கப்பட வேண்டும். பக்கவாத புனர்வாழ்வு செயற்பாடுகள் யாவும் நரம்பியல் வைத்திய நிபுணரின் வழிகாட்டலில் தாதியர்கள், இயன்மருத்துவர், தொழில்வழிசிகிச்சையாளர் பேச்சு சிகிச்சையாளர் உளவள ஆலோசகர், உளநல மருத்துவர் உள்ளடங்கலான ஒரு பன்முக ஆளுமை அணியால் குறிப்பிட்டளவு முன்னேற்றம் கண்டு சுயமாக இயங்கும் திறனை பெறும் வரை, விடுதியில் தங்கியிருந்து இவற்றை பெற்றுக் கொள்ளலாம். கிழக்கிலங்கையில் முதன்முதலாக வாழைச்சேனை ஆதார வைத்தியசாலையில் 2015 ஆனி மாதம் 27ஆம் திகதி இல் “காருண்யா” பாரிசுவாத புனர்வாழ்வு பிரிவு ஆரம்பித்து வைக்கப்பட்டது. இன்றுவரை எழுபது பாரிசுவாதம் வந்து உயிர்பிழைத்தோர் புனர்வாழ்வுபெற்று சுயமாக இயங்கக் கூடிய தங்களது நாளாந்த செயற்பாடுகள், தொழில் என்பவற்றை செய்யக்கூடிய அளவிற்கு மீள திரும்பியுள்ளார்கள். இப்புனர்வாழ்வுப் பிரிவில் பெரும்பாலான உபகாரங்களை கொண்ட இயன்மருத்துவப் பிரிவும் தனியொரு இயன் மருத்துவரும் உள்ளார். ஆனால் இப்பணி முழுமையடைய பயிற்றுவிக்கப்பட்ட நரம்பியல் சார்ந்த மருத்துவர்கள், தாதியர்கள், மேலுமொரு இயன் மருத்துவர், பேச்சு சிகிச்சையாளர், தொழில்வழி சிகிச்சையாளர், சத்துணவு சிகிச்சையாளர், உளவள ஆலோசகர் உள்ளடங்கலான பல்திறன் ஆளுமையணி ஒன்று தேவைப்படுகின்றது.





தேசிய பாரிசுவாத நடைப்பயணம்

வருடாந்தம் பொதுமக்கள் மத்தியில் பாரிசுவாத/பக்கவாத விழிப்புணர்வை ஏற்படுத்தும் நோக்கில் இலங்கை தேசிய பாரிசுவாத சங்கம் மிகப் பெரியளவில் பாரிசுவாத உயிர்பிழைத்தோர், குடும்ப உறுப்பினர்கள், பொதுமக்கள், நலன்விரும்பிகள், நரம்பியல் வைத்திய நிபுணர்கள், ஏனைய வைத்தியர்கள், தாதியர்கள், சிகிச்சையாளர், அமைச்சர்கள், திணைக்கள உயர் அதிகாரிகள், மதத்தலைவர்கள், அரசு மற்றும் அரசு சாரா உத்தியோகஸ்தர்கள் என பலதரப்பட்டவர்கள் பங்கெடுக்கும் மிகப் பிரமாண்டமான வீதி ஊர்வலத்தை நடாத்துவதுண்டு. இவ்வருடம் மர்சி மாதம் 26ஆம் திகதி ஞாயிற்றுக்கிழமை காலை 7.00 மணியளவில் இவ்நடைப்பயணம் இலங்கை ஜனநாயக குடியரசின் ஜனாதிபதி மேன்மை தங்கிய மைத்திரிபால சிறிசேன தலைமையில் கொழும்பு விகாரமகாதேவி சுற்றுவட்டாரத்தில் நடைபெறுவதற்கு இலங்கை தேசிய பாரிசுவாத சங்கம் சகல ஏற்பாடுகளையும் மேற்கொண்டுள்ளது. அத்துடன் மேற்படி சங்கத்தின் அழைப்பின் பேரில் “காருண்யா” பாரிசுவாத புனர்வாழ்வு பிரிவில் புனர்வாழ்வுபெற்ற உயிர்பிழைத்தோர், குடும்ப உறுப்பினர்கள், மருத்துவர்கள், தாதியர்கள் உள்ளடங்கலான 50 பேர் கொண்ட எமது அமைப்பினர் முதன்முதலாக இவ்நடைப்பயணத்தில் பங்கெடுக்கவுள்ளனர்.

நேரிய பாத நடை! பாரிசுவாதத் தடை!



IMHO Contributions to Jaipur Center in Jaffna

By Dr J. Ganeshamoorthy, Chairperson of JJCDR

It is a matter of great happiness and joy that the IMHO, one of the major contributor of financial support to JJCDR is celebrating its 14th anniversary. The contribution over the past years in the field of physical rehabilitation of the disabled is praiseworthy.



The "Repair of Prosthesis" project began in Dec 2015 and due to end in December 2016 but was extended for a 3month period until March 2017. An amount of Rs 1,100,000.00 was approved in support of activities. The project design was flexible enough to accommodate all types of repair of prosthesis and 657 persons with disability have been directly benefitted. PWD's appreciated IMHO's assistance to their mobility and hoped, for continuation of project activities because of their poor economic conditions. "Provision of mobility devices and educational grant to the patients identified as economically vulnerable in the Jaffna District" project began in Jan 2015.

Under this project JJCDR is providing monthly educational grant of LKR 1000/- to physically rehabilitated children to encourage them to attend school till their Advanced Level and LKR 1500/- for further studies. Also, locally designed mobility devices were issued to assist walking and improving the mobility of people with mobility impairment.

At present, we face difficulties in sustaining our services. Therefore, we appeal to our friends and well-wishers both in Srilanka / Abroad for financial support. To strengthen our appeal IMHO sponsored a Documentary Film for fundraising.

Thank you for the timely help rendered to us by IMHO and I extend my warm greetings and felicitations to all those associated with the IMHO and wish the 14th anniversary celebration a success.



Inauguration of Diabetic Clinic in Batticaloa

By Dr. Dharshini Karuppiah, Consultant Endocrinologist

Diabetes Centre	Teaching Hospital Batticaloa
Consultant Endocrinologist	Dr. Karuppiah Dharshini
Medical officer	Dr. M Pravinson
DENO	Mr. Sahayaraja, Mr. P Ravi, Mr. Kalanidi
Health Assistant	Mrs. Thavamalar

Activities for year 2016, 2017

Meetings

- Meeting to establish Batticaloa Diabetes Association and separate diabetes clinic on 12th October 2016
- Meeting to establish a separate bank account and diabetes foot screening program on 20th March 2017

Educational Activities

- Teaching sessions for Nursing officers – February 2016
- Education on anti-diabetes medication for Pharmacists – March 2016
- Teaching session for medical officers – AMH Kalmunai – 20th June 2016
- Teaching sessions for Medical officers – Base Hospital Akkaraipathu – 25th March 2017

World Diabetes Day program - 16th November 2016

Awareness speech

Venue: Main Auditorium,
Teaching Hospital Batticaloa



Chief Guest: Mrs P.S.M Charles, Government Agent,
Batticaloa District

- Diabetes Day Walk from Teaching Hospital Batticaloa to DS office



- Educational street dramas and speeches at the divisional secretariat office, Batticaloa



Clinics

Tuesday – Endocrine clinic (average patients per month - 120)



Wednesday – Young Diabetes Clinic (average patients per month – 20)



Wednesday – GDM clinic (average patients per month – 30)



Thursday - Type 2 diabetes clinic (average patients per month – 80)



Pending Activities - 2017

- Gestational diabetes workshop for Medical officers – 12th June 2017
- Diabetes education programme for children with T1DM– 19th June 2017
- Diabetic foot screening from 1st June 2017 – (target average patients per month – 200)
- Diabetes education and foot work shop with AUSLMAT (Medical Aid Team) for Nursing, orthotic and medical officers- 3rd July 2017
- CME programme for medical officers – 25th July 2017
- Diabetes and Obesity screening programme at school children – September 2017
- World Diabetes Day programme - 14th November 2017

IMHO Support

- Fund for the internet facilities to the unit, necessary stationaries, Glucometer strips (100) – given
- Fund for recruiting one pre-intern doctor for research assistance and assisting foot care, GDM service – agreed (from 1st June 2017)

Future Needs

- Fund for recruiting another research assistant next year
- Fund for purchasing necessary equipment – Glucometer and strips, insulin pens, BP apparatus, Doppler, weighing scale with body fat analyser
- Fund for patient education leaflets, insulin diaries etc.

IMHO Support to Vanni Region

By Dr. T Sathiyamoorthy, Medical Director of Jaffna Teaching Hospital

Kilinochchi Education Development Trust (KEDT) was incorporated on 24th October 2011 under Voluntary Social Services Organization act No 31 of 1980 as amended by act No. 8 of 1998. KEDT is based in Kilinochchi Town, Kilinochchi District, Sri Lanka. Following the civil war, that crippled Sri Lanka in the years preceding 2009, it was recognized a need to help those affected by the war. International Medical Health Organization (IMHO) had contributed vastly before the war to the conflict affected areas by many ways. In 2011 the Kilinochchi District Educational Development Trust Fund was created linking generous financial donors with those left disadvantaged by the war. IMHO is the main donor to contribute to welfare of affected people.

The aim of KEDT is to help lift the people of North and East Sri Lanka. KEDT achieves this predominantly through education and providing family supports. For primary and secondary students KEDT has seven centers providing outside of school tuition to help further the education of children in the Kilinochchi District. One of the main centers at Viswamadu Education Center is fully funded by IMHO for the infrastructure development and supporting monthly student assistance program. The center was built with Rs. 3.5 million. Further, Rs. 20,000 is paid monthly for 40 students. The center has more than 300 students and the area developing around the center. Before starting the center, students went to Jaffna for classes and they faced lot of difficulties by travelling more than 90 kilometers. But now no student goes to Jaffna and all are studying in the center and their parents are very happy.

Science, Math and English teachers' shortage is a common problem among many Schools in Vanni. Therefore, IMHO supports 20 teachers' payment on teaching above subject at remote Schools.

Furthermore, KEDT provides microloans to help disadvantaged start their own business and provided family support to families unable to earn income. IMHO regularly supports to very poor family for their income generation. Each family receives around Rs. 75,000 for their income generation program. In few months' time, the family is able to get regular few thousand as their income.





IMHO sponsors yearly to conduct oral health program at Kilinochchi district. All grade 1 students of Kilinochchi district receive brush and paste at school at the beginning of the school and these students regularly brush at schools with help of the teachers.



This program is funded by the IMHO for the last 4 years. It has very strong impact in students' attendance and performances. IMHO spends nearly Rs. 600,000 per year.



Further, IMHO supports students at Mallavi hostel by providing assistance for their meals. More than thirty students are benefited for the last 3 years. IMHO also supports Mankulam hostel students where more than 60 students get support.

IMHO supports to conduct medical camp at rural areas where people have very poor access to a health center. IMHO also supports disabled people by providing wheelchairs, beds and medicines.

I thank all the donors who have always thought and support our people. On behalf of people of Vanni I wish all the IMHO members for their continuous commitment.

Renovation of Emergency Unit at Point Pedro Hospital

By Patient Welfare Society

Emergency Unit, Base Hospital, Point Pedro had only two beds for management of critically ill patients in this hospital. All medical, surgical & pediatric emergencies were managed in this unit. As there is no Intensive Care Unit in BH Point Pedro, whenever more than two critically ill patients were admitted, they were compelled to transfer to Teaching Hospital, Jaffna or to the normal wards. As a result, we lost lot of lives in the past. So-that there was an urgent need to expand the Emergency Unit in this hospital.



The IMHO, USA came forward to support this project with the financial support of Mrs. Navamalar Prakashpalan (USA) in memory of her late husband Mr. Prakashpalan (USA). The extension of the Emergency Unit was constructed at a cost of SLR 3.2 million. And it was ceremonially declared open by Mrs. Navamalar Prakashpalan on 8th January 2017.

Now this Emergency Unit functions with 5 beds and the transfers of critically ill patients to Teaching Hospital, Jaffna have been reduced significantly. The people of this region, hospital authorities, Patient Welfare Society and Health Department express our sincere gratitude to IMHO, USA and Mrs. Navamalar Prakashpalan for their timely extended valuable great support.

Support for Diabetic Services in Jaffna

By Dr. M Aravinthan, Consultant Endocrinologist

The Diabetes center of Teaching hospital, Jaffna has completed eighth successful year and continuing its excellent service to the public of Northern province of Sri Lanka. We have been doing a wonderful service to the public since 2009 because of the generous and continuous support of the IMHO.



As of May 2017, the total number of registered diabetic patients is around 11,000 and out of this 2081 patients were registered newly in year 2016. The financial donation of IMHO in year 2016 and 2017 (as of May) is Rs. 5,391,699.29 and this amount has been used for the maintenance of the diabetes center including salaries of demonstrators, public awareness programs and research activities.



I would like to mention some of the important activities of our center in year 2016 and 2017 (as of May).

Eg: **Medical camps**

Mannar	Aug 2016
Kilinochchi	Aug 2016
Delft	Jan 2017
Karainagar	Feb 2017
Analaitivu	Apr 2017

- We have been doing school health awareness project for the grade 10 students of Jaffna district. We have completed this project in 64 schools and educated 3062 children up to now.
- We have celebrated the World Diabetes day with "Diabetes walk", Diabetes awareness meeting and prize giving for school children (Essay and Art competition).
- We have organized several CME programs for the Medical officers and Nurses in Diabetes management with the help of Jaffna Medical Association (JMA) and SLCE (Sri Lanka College of Endocrinologists).
- We have been publishing health related articles in the local newspaper "Uthayan" for the last 4 years.
- We have started to conduct special diabetic clinics (pregnancy, Type 1 and Type 2 diabetes) in our center. The total registered number of patients in these clinics is 364.
- We have Endocrine clinics in our center since November 2015. The total registered number of patients in these clinics is 1345.
- We have started to do DEXA scan services to detect osteoporosis and completed 172 scans up to now.



Finally, I would like to express my sincere gratitude to the IMHO for their continuous and enormous support. We, the people of Northern Province, expect and hope to get the generous support from the IMHO in future years as well.

Reestablished Primary Care Services



IMHO was established with the intention of building the primary care sector which is the back bone of any health care in the world. We built three full-fledged primary centers – two in the East (Panchennai and Koolavadi) and one in the North (Iyankankulam). These centers were originally built in 2005 and served people very well until 2009 and after the conflict was over the buildings were found to be intact. The Koolavadi center was subsequently declared open in 2017 by Regional Director of Health Services of Batticaloa and will serve roughly 100 families.





Currently, Iyankankulam has started functioning as well developed main primary care center in that area and turned the village as an IMHO planned and built model village with getting all the basic amenities. Two other centers in the east are functioning as mobile clinics now and soon will be fully developed primary care centers. It must be mentioned that the Koolavadi Medical center was Fully funded by the funds raised by the community in Oneida, NY.

Selected Projects in North-East

By Dr. P Judy Jeyakumar, Psychiatrist

The projects were started following the war of the resettled places in Thottiyaddy Multivu and Kilinochchi district. The benefactors are focusing small scale business, poultry, animal husbandry, agriculture, making craft activity and making traditional foods.

The recovery of Thottiyaddy is around 400,000 per month and they reshuffle among their members, their grants varies from 10,000 - 100,000, which depend on their activities and the resettlement of the previous grants, the recovery almost 100%.



The livelihood activities also same as in Mullitivu and their monthly recovery around 200,000, which reshuffling among the new clients.



Livelihood activities at St.Benedict Minne Mental Health Rehabilitation center, Brothers Charity in Kalmunai. There are 20 chronic long stay mentally ill clients are living in the center, the cattle farm is look after by the clients, the fresh milk helps them get the two milk tea a day, the cow dung used in their agriculture activities, 4 clients daily activities based with cattle rearing and milk chilling.



Three of the well educate clients look after the sales outlet in their premises



World Health Day Activites 2017

The World Health Organization held annually April 8 around the world. This year the theame Depression Lets Talk. The WHO invite the Arokiya Illam Rehabilitation center for exhibition held at Indepentant Square in Colombo. Four of our members participated in the exhibition.



Part of the world health day activities we start a yoga center at Arokia Illam, Mental Health Rehabilitation center, Mavaddivembu, the clients and staffs practicing yoga daily in "Shanthikam".



WORLD HEALTH DAY - 2017

Depression Let's talk



LetsTalk

www.who.int/depression/en

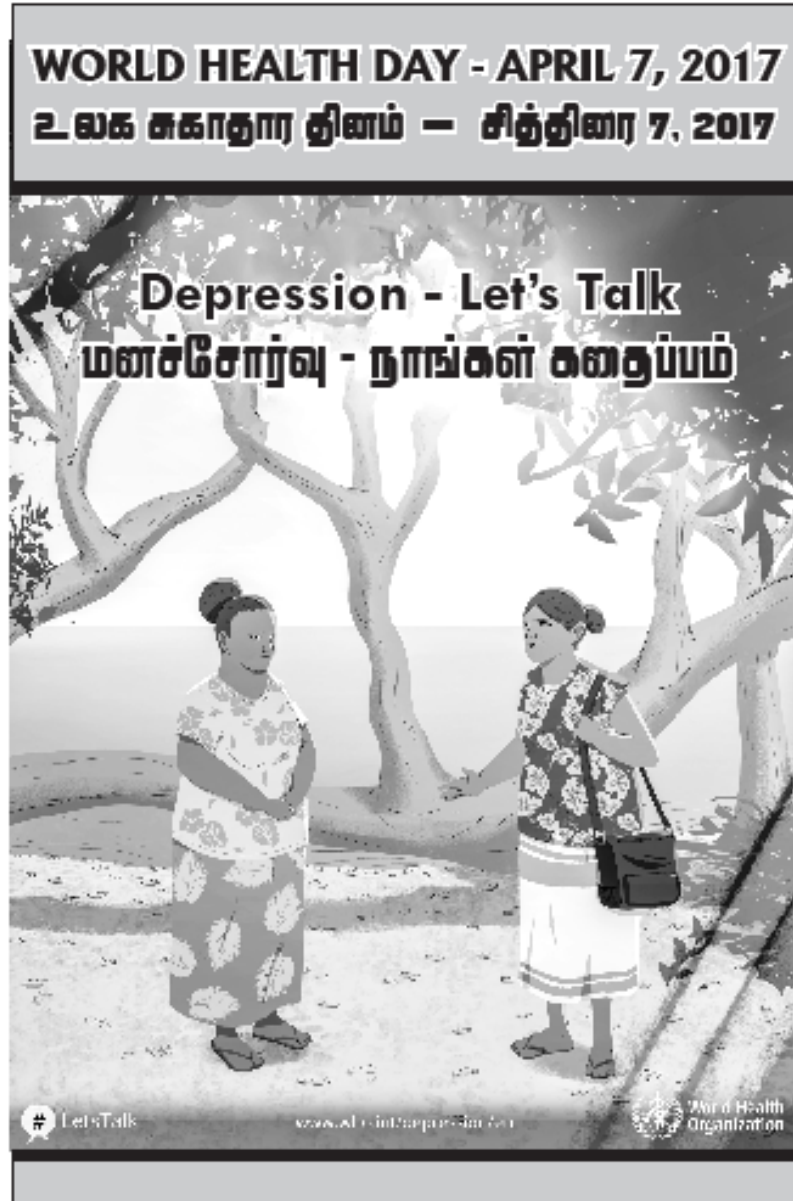


**Uttu, Mental Health Unit Base Hospital
Valaichchenai.**



IMHO PROJECT

We had printed 2000 booklets about Depression 1500 in Tamil and 500 in English for the education and awareness raising purposes.



The World health day/ Autism awareness day activities were held on 8th April 2017, with street march, cultural programs, guest speaks and launching the publication at Auditorium TH-Batticoloa



Kilinochchi Maternity Unit

By Dr. B Bhabu, Consultant Obstetrician

Kilinochchi Maternity unit - Thanking for the continuous support by IMHO in 2017

District General Hospital Kilinochchi is one of the hospitals in Northern Province providing continuous service to people who are mostly affected by war. Easy accessibility of the hospital has helped it serving the public extensively in the Kilinochchi district and Mullaitivu district as well as a significant number of people from Mannar, Vavuniya and Jaffna districts. IMHO gives us its continuous support in various aspects which help us to improve our quality of service.

Subfertility unit in this hospital plays a big role in reducing the burden of the infertility in northern province. People from other part of the countries such as Batticalo, Trincomale, Galle and Colombo are recently started to come all the way to get this service. We provide the basic investigation and treatment facilities and the number of couple benefiting by this unit is steadily increasing. Now about 200 new couples have been seen monthly. The medical students awaiting internship play crucial role in helping us conducting these clinics and they are supported by IMHO.

In Kilinochchi district people still have problems with transport due to poor roads, inadequate transport

Mobile scan machine is ready to go



IMHO are helping in these clinics.

Pre-intern medical students are working in Andrology Lab



facilities and money. Especially pregnant mothers who are far away from this hospital face many problems in accessing our services in the main hospital. To minimize this outreach clinic services are continuing in divisional and base hospitals namely Poonakary, Akkarayan, Tharmapuram, Palai, Mulankavil, Mallavi (Mullaitivu district). In this outreach clinics health education, consultations and ultrasound scanning facilities are provided free of charge. The mobile ultrasound scanner given by IMHO is the key to this clinic. The pre-intern medical students supported by

IMHO has also supported our special care baby unit by providing phototherapy machine. It was one of the urgent needs expressed by the pediatrician to treat the babies with neonatal jaundice.

Nowadays, due to the extensive screening of pregnant mothers, the detection of gestational diabetes is increasing. In some patients, it is very difficult to control the blood sugar level and need frequent blood sugar monitoring. IMHO has provided glucometers which help us to monitor



Phototherapy to SCBU



patient's blood glucose level immediately. Overall, IMHO is supporting us in many aspects to give quality health care to the people in Kilinochchi. And we need this help and support of the IMHO to continue in future as well. We pray for all the members and donors of IMHO to live long and continue their services without interruption.

Establishing Subfertility Services in Thellippalai

By Dr. N Saravanabhava, Consultant Obstetrician

Inability of married couple to have a baby (subfertility) is a burden in our community with its serious physical, psychological and social implications. It causes stress, marital disharmony, which sometimes leads to divorce even. Unfortunately, the basic investigations and treatment facilities are mainly available in the private sector and the cost is not bearable by many ordinary families. This results in poor compliance, frustration and depression.

The Base Hospital Tellipalai is one of the hospitals in Jaffna district, Northern Province. This hospital is steadily growing up to give its extended services to people in Jaffna especially those who are re-settling after 30 years of displacement.

The IMHO has recognized the needs of the obstetrics and gynecology unit and given its support in establishing basic subfertility treatment facilities. This will reduce the cost of the treatment and make it affordable to the lower, middle income people. This will greatly relief the stress on the community.

In addition, the people living in difficult access areas especially islands of Jaffna experience difficulties in getting proper antenatal care facilities. It is due to inadequate transport facilities and poverty. Soon, we are planning to do outreach clinics to those areas in a regular way and hoping that IMHO will help to fill the gaps in our health system.

We wish and pray for all the members and donors of the IMHO to live long healthy life as well as to the continue their supports to the needy people.

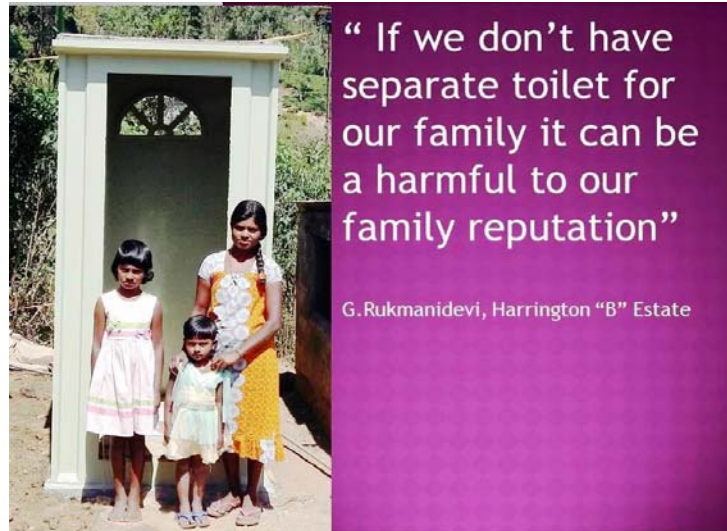


Andrology Laboratory for basic subfertility treatment facilities



Sanitation Facilities in Harrington Estate

By Mr. Alex Ruban, World Vision



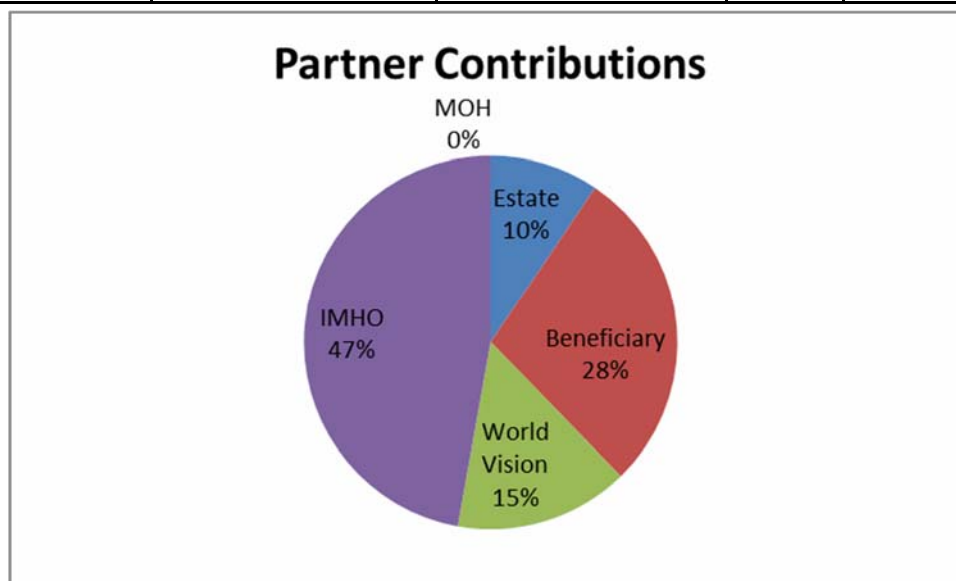
World Vision Lanka Nuwareliya Area program (Pathana ADP) started a sanitation project in Harrington “B” Estate to improve the sanitation facilities of the area.

In this project forty families have received access to improved sanitation facilities with the completion of constructing 40 toilets in Harrington “B” estate, which is a private Estate in Kotagala.



The Estate management and International Medical and Health Organization (IMHO) agreed to have the partnership with World vision and the community. So four partners are involved in this sanitation project, and their contributions are in below table and chart.

Name of the Partner	Cash contribution for each toilet	Financial contribution	%	Other contributions
Estate	5000	200000	9.43	Land
Beneficiary	15000	600000	28.3	
World Vision	8000	320000	15.1	Monitoring & Implementation
IMHO	25000	1000000	47.17	
MOH	0	0	0	Technical supports & Monitoring
Total	53000	2120000	100	







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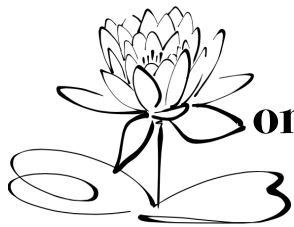
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IMHO wishes to thank ALL of our event & program sponsors and every donor who has made a contribution over the years for their thoughtful generosity and compassion in making our ongoing work and this 14th Annual Convention a great success!

And to all the volunteers, organizers, conference attendees, and friends who have supported the work of IMHO in order to help uplift the lives of others across the globe – thank you!

~The IMHO Board of Directors & Team



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1. IMHO believes that Health is defined as mental, physical and social well-being and access to basic health care is fundamental to all communities.
2. IMHO Supports:
 - A. Health related projects: Hospital development, Sanitation, Nutrition, Mental health & Psycho social rehabilitation, Primary health care and Rehabilitation of Amputees as well as patients with paralysis
 - B. Women empowerment (and maternal health)
 - C. Livelihood projects
 - D. Children's education and welfare
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4. Anybody with volunteering spirit can join the mission of IMHO, contribute to help those in need and be invited to join the advisory council and subsequently to the board. ***Bring your passion and expertise to IMHO!***
5. IMHO is a registered charity in the USA (www.TheIMHO.org) and Canada (www.IMHOCanada.org) and all the contributions are tax deductible. IMHO is registered in Sri Lanka (www.IMHOLanka.org) as well.
6. The overhead is less than 5% (overhead includes mainly the registration fees, web site expenses, accounting/auditing fees and bank charges). As an organization, we take pride in accountability and transparency.
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8. Success of IMHO is due to the prompt response to the requests after thorough evaluation by board members through conference calls and developing a system to coordinate different teams and follow up of the projects and working with local reliable, responsible time-tested partners.

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