



## Annual Report 2017

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## **The Friends of H.O.P.E Charity directory**

**REGISTERED COMPANY NUMBER** 3647389  
(incorporated: 9 October 1998)

**REGISTERED CHARITY NUMBER** 1083028  
(registered: 25 October 2000)

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## Executive Summary

The Friends of H.O.P.E (FoH) has inspired many villages and rural communities of the Nilgiris to apply traditional self-help practical and sustainable knowledge that embraces traditional local foods, medicinal plants and their uses, organic and biodynamic methods of agriculture, animal husbandry, water conservation and environmental protection.

FoH was formed in 1999 to support Vanya Orr's holistic vision for sustainable communities and which in economic parlance can be called the economics of permanence in restoring and protecting local traditions and cultures. FoH provides financial support, strategic guidance and practical advice where needed to our implementing partner agencies. All of our Trustees have Indian connections and experience in dealing with both tribal and non-tribal communities. - Mrs Rosaleen Mulji, David Pople and Prof Sheila Hillier are also trustees of The Nilgiris Adivasi Trust (NAT). Nicholas Grey (with his wife Mary) were the founder trustees of Wells for India which works in Rajasthan, Dr Mahesh Mathpati is a well-known and highly respected Ayurvedic doctor, and Michael Moore worked, and lived in India for some years. All money raised by FoH, except for a very small amount needed to cover its administrative expenses, is remitted to the partnering NGO's. **The Trustees of both FoH and NAT give their time and services entirely on a voluntary basis.**

FoH and NAT are now working ever more closely together – joint meetings are held, and joint consideration is given to funding the education and community based programmes described in the following pages.

The Nilgiri Hills are approximately 7000-8000 feet above sea level. Stunningly beautiful, with abundant wildlife, dramatic waterfalls and mountainside covered with shola forest. This important biosphere is at the very heart of our work. The region is principally agricultural. In the Nilgiris, however, the landscape is populated by degraded and polluted watersheds and farms. Soil erosion is very

noticeable. In looking at the rural economy of the region we see that most of the land holdings are very small and this makes it very difficult for Growers and Farmers to eke out a sustainable living. Statistically in rural areas such as the Nilgiris over 31% of the scheduled castes and c20% of the backward classes come into the poverty category (source: socialjustice.nic.in). But we actually think these statistics are on the low side of reality. The rural poor in the Nilgiris include an indigenous tribal population of almost 30,000 – The Irullas, The Kotas, The Todas, The Paniya's (ex-bonded labourers) and The Kurumba's (forest dwellers) are the principal groups. The Badagas are also often referred to as indigenous peoples, and the Badagas population is c150,000 (agriculturalists).

We have established 15 organic awareness centres and currently support over 60 growers and farmers. Around 1,000 growers are expected to benefit from training at our model organic smallholdings during 2018.

Below is a typical home of the rural poor in the area



Our community based traditional health programmes help to deliver sustainable health to tribal villages, and around 3000 people are helped each year by our health organisers and who in turn are supported by a traditional healer. Education support is provided to tribal schools and students. Bursaries and sponsorship is available for students shifting to higher education. We also help single parent families and a young lad with Duchene who comes from a poor family.



## Highlights and achievements during the past 12 months

- Tradition healthcare project – Rejuvenation of traditional Tribal medical Practices project (RTTMP). 250 -300 individuals are now treated each month and that equates to around 3000 village people being helped over a year. The project covers 60 villages with a total population of 7300.
- 25 traditional healers now have agreed that their knowledge can be documented. This is a first.
- Links forged with FRLHT and the Trans disciplinary University, both in Bangalore.
- 15 organic awareness centres have been created and some 60 farmer/growers are receiving regular hand-holding advice and technical support related to biodynamic organic systems of production
- Farmers and Growers being supported through organic certification process, with support from local joint director of Horticulture and his staff and the Local Collector.
- Some 1000 growers, farmers including tribal women's groups expected to receive training via our model nurseries in 2018.
- The HIV support programme with ASHWINI in Gudalur valley has screened 1800 people for HIV and TB in the past year. A specific intervention programme providing nutritional supplements to malnourished PLWHIV to begin in 2018, involving initially 80 severely malnourished PLWHIV. Preparatory workshops at government centre in Ooty have been organised by ASHWINI's counselling manager for Q1 2018.
- Emima has been found a place to study for her BAMS in Ayurvedic medicine at The Atreya Ayurvedic College, Bangalore. Emima is the youngest daughter from a poor single parent family and is 'our first student' to commence her studies to be a doctor.
- Sanjay, who has Duchene Muscular Dystrophy has had his first Ayurvedic hot essential oil treatment. His family are very excited that for the first

time in over 2 years he was able to stand, albeit with callipers and ankle supports. His next in-stay is scheduled for March 2018.

## Relationship between The Friends of H.O.P.E and its partners

The relationship between FoH and the partnering agencies is governed by Memoranda of Understanding (MoU's) or Project Agreement (the governing documents). These documents define the parameters as to how the charities work together, with FoH providing funding, advisory and practical help on an as-needed basis and with the Indian agencies being the implementing partners. The MoU's allow for FoH to be provided with reports on a regular basis, and also stipulate that each NGO will be fully accountable to FoH for the way in which funding from FoH is used. With written reports and other information supplied regularly those who give money can be assured that donations are used for the intended purpose and not wasted.

## Poverty in the region

From what we have seen in tribal villages over the years we feel that the poverty line amongst tribal communities is c50% or even higher. These indigenous peoples rely on agriculture and the forest for their livelihoods and farming as we know, is in crisis. Local traditional healers are also telling us that climate change has reduced the number of plant species available and which have a medicinal use. The base poverty line is assessed at Rs24,000 - 30,000 a year in the area, that's about Rs500 a week, which just about £1.20 a day for a 6 day working week. But if family support is required for a family of 4 children or more and who need further education (college or university) the poverty line can be re-drawn quite easily on income equating to Rs6,000 per month (£720 a year).



## One Health – the 4<sup>th</sup> Tier

During the year The Friends of H.O.P.E and FRLHT -TDU ([www.frlht.org](http://www.frlht.org) and [www.tdu.edu.in](http://www.tdu.edu.in)) in Bangalore agreed to be the initial co-sponsors of a PhD action research fellowship to inspire the design and delivery of new, multi-dimensional, integrative and sustainable community health models for rural areas in India and other parts of the world. The PhD study will look at these practices, review international literature on policy and governance frameworks and come up with a compelling case for a recommended framework that incorporates local ecosystem specific traditions in healthcare, agriculture, animal husbandry, forestry, water management and sanitation, that is for a 4<sup>th</sup> tier to the health system in India.

It has been agreed that the programme will commence on 1<sup>st</sup> April, 2018 subject to funding. Dr Prashanth has accepted the role of supervisor for Mr Shivanand Savatagi, the appointed PhD fellow. An advisory board has been established and the PhD programme will be guided by Dr P. M. Unnikrishnan, from United Nations University Delhi, as an expert in this field. The London School of Hygiene and Tropical Medicine have also expressed an interest in providing guidance and Prof John Porter will also be part of the Board as will Darshan Shankar, Founder of FRLHT.

Below: meeting of the proposed advisory board for the PhD programme to discuss the way forward



The Shristi College in Bangalore has agreed to do the visuals and PR material and a water conservation body, ARGYAM, together with KEYSTONE have agreed to make themselves available as technical advisory members.

We are very excited about this as we think the recommendations will help us strengthen and promote our community based models.



## Sustainable Village Project

Our pilot sustainable community project commenced during the year in 3 villages around Coimbatore and where there has been 4 successive years of drought. Over 7,000 inhabitants will ultimately benefit. Baseline studies were completed during the year. The project is embraced by the local panchayat and assists the community to instigate water conservation, sustainable farming, green cover, waste management, energy generation models at the micro level, community health and locally 'owned' micro credit groups under the umbrella of a foundation that has already 10,000 members all of whom who have been helped overcome poverty.

But, because of the continuing drought farmers and growers find themselves very much in survival mode, facing the reality of having to get by with just 25 litres of water per family per week, and having no water for irrigation. Our project plan was to make a start on planting trees for shade but because of the drought we had not been able to plant the number of trees we had wanted to. During the autumn we had been encouraged by a little rainfall and so planting began of the first 2000 trees viz harnessing local groups including the local green brigade. Planting halted when the weather forecasts suggested the rains would not amount to much. The planting groups have been unable to water the saplings and so we fear that most that were planted will wither and die.

We have had to completely refocus our project priorities and emphasis is now on finding the right solutions for water conservation in the project area. Discussions are on-going with ARGYHAM and WASSAM and the local sub collector (rural) has also met with GoHT's locally based trustee, Manisundar to come up with a solution that will work and to achieve that and with the aid of our technical partners. ARGYHAM advised that a water security plan needs to be developed. The Sub Collector, Rural, for the area has Government money available (for check dams) but this idea needs to be reviewed and perhaps redirected into alternative water harvesting schemes, and which are part of an overall conservation strategy. The water 'project' needs to assess data related to the number of and depth of borewells; levels of extraction; an assessment of the current water table; the mapping of the paths of ancient water channels and streams from the hills, for example (the plains relies on the Nilgiris for its water supplies). We hope that the

water security plan will be sufficiently advanced by the end of Q3 2018, so that implementation can begin asap.

Once the water solution(s) have been found then we can assess the rain water hardware and irrigation needed, continue to liaise with ARGYAM, WASSAM and Keystone on technical matters, training of the villagers in water conservation and so on, including making application for government grants. Then we can move forward with the other elements of this important sustainable project, organic farming, traditional health and so on.

We look forward to GoHT sending us their resource plan for the next 12-18 months so that we can help raise more funding. Watch this space!!

## Farming

Farming in India, despite accounting for 14% of India's GDP, is in crisis. Helping farmers and growers is mission critical for us. Many farmers and growers commit suicide each year and many widows do not receive compensation (often as high as 60% of widows in some states) and the surviving spouse is pressurised into repaying mountains of debt. It has been reported that in 2014 over 5600 farmers committed suicide, in 2015 suicides had passed the 8,000 mark (Source Indian Express article). In Tamil Nadu, between October 2016 and the end of 2017 it has been reported that 250 suicides were attributed to failed harvest and debt caused by drought conditions. Reportedly, more than 20,000 housewives annually take their lives, and the rate – more than 20 per 100,000 people average – is higher in Tamil Nadu where the cause of suicide is often farming related. De-monetisation was introduced last year to try and reduce the black economy but reportedly it actually made matters worse because in farming areas most transactions are for cash, not cheque.



## **Our food – our environment, our future: a 3 year farming outreach initiative to help small and marginalised growers and farmers.**

Slowly (and we like to think we have influenced the farming community over the years), growers are changing to organic production and now the Indian government is providing incentives to growers to accelerate this change. The majority of farmers and growers in the Nilgiris try to make a living on less than half an acre of land and so it is important that we continuously show them how to improve both quality and yield and to demonstrate and teach them the various techniques of mulching, BD composting, vermicomposting and the value of BD inputs to improve soil conditions, reduce pests etc.. Our team follows the BD calendar which shows growers when to sow and plant, how and when to apply biodynamic inputs. By restoring goodness to the land moisture is retained for much longer, so necessary in drought situations.

### **Progress**

60 growers are now receiving technical and practical guidance and 15 organic awareness centres have been established in different villages - these smallholdings encourage growers in each locality to effect change.

GoHT is actively helping a group of 30 growers and supporting others to achieve organic certification, which will take 3 years. To encourage other growers to make the change to organics a proposal has been submitted to the SADP (special area development programme) regarding help for growers farming up to 5 hectares of land – in principle this would cover costs of up to Rs14 lakhs, sufficient to cover seeds, seedlings, training, other inputs such as irrigation, polythene, construction of Vermicomposting units, soil and water testing, pest control measures, Intercultural operations and residual analysis testing for organic certification.

We hope to see reports that this proposal really does have legs as it will be further evidence of the valuable support role provided to organic producers in the

region. Rumour has it that the government intend to support the call for the whole of the Nilgiris to ban the sale of chemicals, pesticides and fertilizers for use by farmers and growers, but we have not seen any formal reporting on this. Could it be possible that all of Vanya's endeavours and that of our own, is about to pay off?? This is clearly important as we read accounts of farmers and farm workers dying from the consequence of spraying pesticide – in Maharashtra in October, 2017 it was reported that 30 farm workers died. Many farm workers are illiterate and no-one tells them in what quantities to apply – health and safety as we know it, does not exist!



Kollimalai training nursery

Recently, GoHT has also met with The Agricultural Production Commissioner (APC) with a view to discuss/ explore ways in which government support for strawberry growers may be forthcoming. The APC is responsible for agricultural production throughout the Nilgiris. There was a useful exchange and the APC was very supportive. GoHT were asked to submit a proposal for subsidy support to the Horticulture Dept. to cover trickle irrigation, mulching and plant materials.

During the last few months we have completed (subject to fitting out with visual display boards, tables and chairs etc.) the construction of a training hall at our



Thambatty nursery and which can accommodate c30 people at any one time. Following meetings with the JD Horticulture some 22 training programmes will be held at our resource nurseries and over the course of the next twelve months we think as many as 1000 people – growers, farmers, and women’s groups will come for training including technical help. Training includes slope management, raised bed techniques, mulching and composting, how to prepare BD inputs and how and what to apply and when, alternative waste management, recycling, soil restoration and community based alternative income streams such as growing medicinal herbs.

GoH/NAWA also exhibited at the Kothagiri show during the , displaying over 35 varieties of organic producer vegetables, fruits, and herbs. Visitors to the show over the 2 days included the Collector, the Tourism Minister and officers from the department of horticulture.



Training at Thambatty: Ms Pushpa demonstrating how to make Jeevamritham to a group of 23 Kurumba tribal women from Manjoor –‘organic farming for beginners’.



Above: BD compost making at the Thambatty resource nursery. Cow dung slurry is added together with BD507, Valerian



Below: Mr Sasi's crop of ginger at Kayunni



Mr Sasi wants to extend his smallholding and there is opportunities for him to do this as NAWA have an area of neglected land which could be made available.

Below: demonstrating how to make CPP (cow pat pit manure) at Kayunni, a Panniya tribal village



## Farmer Producer Company

Last year the team were discussing a supply chain, but now the current thinking, because of Government match funding, is for growers and farmers to form their own farmer producer company. GoHT's trustees will be investigating this during the coming year. Such a company would have to be established on an arms-length basis, the principle being that an initial group of growers with registered land would be the founder member/shareholders for a nominated shareholding and a further number – say 100 growers would be invited to take up a similar shareholding, so that the total value invested equated to say Rs5-10 lakhs, which would then be matched by the government's scheme. Obviously a carefully thought through business plan would need to be prepared but individuals experienced in such ventures are available to offer their help. .

## Health and hope

This programme is very much now a jointly supported initiative between FoH and NAT

### HIV/Aids

We know that approximately 400 PLWHIV in the Nilgiris area do not attend government hospitals and don't take ART. There are also 20 identified children and young people who have been affected by HIV up to the age of 19: these young people have either been orphaned or, they are from single parent family situations which are desperate and where little or no income support is provided by government. FoH/NAT would consider a proposal to provide bursary support based on cases of need.

Our programme of HIV awareness, screening and counselling support, is being co-ordinated by ASHWINI who run the tribal hospital in the town of Gudalor. ASHWINI also have an outreach team involving some 200 health volunteers. This supported programme screens 1800 people a year for both HIV and TB. During the year a new intervention programme was discussed related to severe malnutrition amongst PLWHIV. Various meetings and workshops were held in conjunction with the Government ART centre in Ooty and it was jointly agreed



with Sathiya from ASHWINI that a pilot scheme will be introduced in 2018 to try and tackle this problem. Initially 80 severely malnourished will be selected to participate. FoH/NAT has agreed to support this important intervention, subject to funding. Our current HIV supported interventions also provide counselling support.

NAT also supports ASHWINI's long term chronic illness programme. Training for voluntary health organisers and outreach workers particularly from within tribal communities takes place at the ASHWINI, Gudalor hospital on a regular basis.



Above, Mother and child health education at Koomamoola village  
Below, meeting with village elders Erumad area



## Traditional Healthcare

Locally, Ayurveda and Siddha (in The Nilgiri Hills of Tamil Nadu), have guided Indian communities in their healthcare practices. The meaning of Swasthya: swa – self +sthya – rooted within form the foundation for the self-help health projects that FoH have funded over the years. The term means being in equilibrium with oneself and can be achieved at several levels viz physiological, tissues, metabolism, excretion, sensory, mental and spiritual, and influenced by relationships with biological rhythms of nature, the sun, moon, seasons, quality of water, air food, stress, social relationship, work environment and so on.

Ayurveda's and Yoga's approach to health, together with Siddha can thus guide homes to live a life that is in tune with nature.

## Rejuvenation of Traditional Tribal Medical Practices project (RTTMP)

The RTTMP (rejuvenation of traditional tribal medical practices) project is delivering front line healthcare to tribal villages. Organised in two village clusters it covers 60 tribal villages (1400 families and over 7200 very poor people). As a joint initiative with NAWA, it serves as a very important base for establishing a traditional Tribal medicinal practices with that of Ayurvedic and Siddha – together these are recognised as being part of the Indian medical system. During the past year saw a 50% increase in the number of people seen by the health organisers (VHO's) and Priyanka and Rajalakshmi (Interns), up from just over 2,000 patients to nearly 3,000 patients. Ailments treated ranged from colds, coughs, throat infections, fever, joint pain, rheumatism, muscle tear, ulcerated leg conditions, sickle cell anaemia, anaemia, anorexia, to diabetes – amazing! When progress was reviewed last year NAWA, our implementing agency, felt that the work of the VHO's should be integrated with the traditional healers in the region and so strengthen the creation a sustainable community health system for these communities (the 4<sup>th</sup> Tier). This is actually beginning to happen and so far there are 7 healers working with 'the team'. Knowledge sharing and capacity building between healer and VHO has begun and there are a further 18 healers



(out of a total of 64 healers, so 25/64 in total) who have come forward to allow their knowledge to be documented. The project seeks to work with these practitioners so that not only is their knowledge documented but available to hand down to future generations. It is essential that traditional knowledge is not lost. Health education meetings in the villages are held regularly; they are run by the VHO's and Interns. Knowledgeable parents are also informing children attending the Garikyur School about the medicinal plants found in the forest surrounding their village and the children attending Pudur and Kesalada schools have established school medicinal and vegetable gardens and proudly identify plants and their medicinal uses.

During the year one of the Karnataka healers travelled up to Nilgiris to spend a day visiting and meeting our local healers. This was very informative and led exchanges of information and treatments on the day. This seemed an excellent way to link the healers in the Nilgiris with those in Karnataka and so we must attempt to set up twice yearly or at the very least, annual workshops /conference between the two groups. We feel sure that FRLHT is well positioned to effect this idea, which will be followed up during 2018



Plans for making sure the RTTMP project sustainable will also be introduced in 2018. Priyanka and Rajalakshmi will take on more responsibility, and help the VHO's empower 2 women in each of the 60 villages to become mobilisers. Bala, our project administrator will also assume more responsibility. Empowering women will necessitate frequent village health awareness programmes, and the need to build upon the existing VHO's knowledge. Importantly it will help establish this traditional health programme long term.

The group of women from villages around Kollikarai have now formalised their herbal medicine production, by establishing the Mullai Group (previously known as the Thulasi Group) which is now a registered SME.

Whenever we can we encourage village women to plant their own nutrition gardens. One such garden was taken up in Kurukundah village. This garden was provided with not only medicinal herb seedlings but also with vegetable seeds and greens along with fruit trees and lemon. This has enabled the village members to not only have medicinal herbs on hand to deal with simple ailments but also allows them to earn a steady income for the sales of the fruits.

We have also met with FRLHT in Bangalore to ask if they would kindly host a 3 day training programme which will focus on extending the VHO's knowledge of medicinal plants, and their uses. This should take place in 2018.

We hope also that subject to funding FRLHT/TDU will carry out a full botanical survey in and around each of the 60 villages in the RTTMP project, as neither we nor NAWA, have the relevant expertise to effectively complete an extensive study. The idea proposed is that over a 12 month period the FRLHT team would meet both healers and VHO's, photograph, identify and document plants that are currently used for medicinal purposes, creating audio visual records, a herbarium, and a reference book. From what we are told by trekking to some of these villages we know there has been a reduction in the quantity and availability of traditional used plants, and which the healers say is down to the effect of climate



change. Some of the plants are endangered. Subject to funding FoH and NAT hope the full botanical survey can be started in the autumn of 2018.

Below: Kadasholai RTTMP visit – meeting traditional healers



Above: Dr Balasubramani and VHO providing herbal medicines to anaemia patients

Anaemia is prevalent in the villages. Here Kalliammal is on hand with a NAWA colleague to take bloods in a tribal village near Kothagiri. In Kunjapanni village 50 village people had their bloods taken and all 50 were found to have anaemia!



Above: Our VHO's are showing these women in Sundapatty how to prepare traditional essential oils



## Kitchen gardens

33 village nutritional gardens have been established under the RTTMP programme.

## Kollikarai nursery for medicinal plants

The Kollikarai unit acts as a resource centre for medicinal herbs. 52 different medicinal herbs are cultivated here. A self-help group of women, The Mullai Group, have established their own medicinal herb and essential oil enterprise. Plants propagated at Kollikarai are transplanted into the village nutritional gardens such as the one at Kurukundah village mentioned on page 12.



Aloe Vera (Indian Aloe) being grown at Kollikarai and is used for a variety of skin conditions from acne and eczema to psoriasis. Burns are also treated effectively with the pulp from the leaf. A number of oils, such as Helicrysum oil, Rue oil, Neem oil and Peacock feather oil are made by the group.

## Sanjay

Sanjay has Duchene Muscular Dystrophy disease (DMD). This is an incurable, muscle wasting disease. Average life expectancy is 21 years. We received a letter from a friend in 2016 asking if we could help with treatment for Sanjay. Following a visit to meet him and his family in 2017 you could not imaging the difficulties of trying to cope with Sanjay's condition. The hilltop town of Ooty is probably geographically the worst place in which to have DMD, getting around in a wheelchair would be almost impossible. Access to and from Sanjay's home is difficult via steep pathway/steps. Sanjay's home is small, with little room for mobility equipment. Ravi, Sanjay's father earns Rs8,000 a month. On this wage, he has no hope of providing for the medicines, change of diet and mobility needs. Sanjay has been unable to walk or stand on his own for over 2 years now, and is no longer receiving any schooling. He had become obese.



In August 2017 we arranged for Sanjay to have specialist Ayurvedic hot essential oil treatment for 2 weeks at the AVP hospital in Coimbatore. When we met Sanjay's father (post hospital in-stay), he was over the moon about the help that had been given. But when we met Sanjay about 5 months later he was still obese, and any advances made appeared to have been lost, and he seemed not to have lost weight. The GoHT team suggested that Sanjay should go to The SMYRNA Home in Ooty. We



visited them and talked through Sanjay's case and SMYRNA's team willingly agreed to take Sanjay on a day basis, collecting him in the morning from his home and returning him mid-afternoon. Merina at SMYRNA is brilliant. She is a physio and works daily with Sanjay and is liaising with Dr. Keshavan at the AVP. Sanjay's next programmed hospital in stay is in March 2018, and on his return he will continue at SMYRNA.



Above: A team of up to 4 physiotherapists from AVP work on Sanjay at any one time

An important additional benefit is that the parents also have much needed respite from Sanjay's daily demands. Sanjay's mother accompanies Sanjay to SMYRNA each day and enjoys assisting the staff there, interacting with other parents – her life is now suddenly filled with hope. At night, whereas Sanjay was awake all night often in pain and demanding of his parents, he now is sleeping well and his parents too are able to get a good night's rest.

Sanjay will continue with the Ayurvedic regime - prescription, change of diet and every 6 months will go into hospital for 2 weeks where he would be put on a special diet, have intensive physiotherapy with hot essential oil treatment. In between

Sanjay will continue to attend the day centre at SMYRNA, receiving not only physiotherapy but mental stimulation as well. The doctors at the AVP and the staff at SMYRNA are challenged here but they do feel that maybe within the next 12 months and with continued treatment he will be able to walk with the aid of a frame. Full details of the Sanjay appeal can be found on our website.

### Eco-Clubs

Educators have long recognized that outdoor experiences encourage a child's social, physical, emotional as well as intellectual development. Gardening is an inspiring subject in the learning process because it is effortless, and requires involuntary attention from the children. By learning the techniques of food production and how to grow organic vegetables they learn life skills that are particular to their communities – the vegetables grown and harvested and either sold for the benefit of the students or the school, or as is usually the case, are included in their school meals thus helping to provide a balanced diet. Last year we began introducing community medicinal plant nurseries to a few of the tribal village schools.

Below: students at Pudur tribal village school



In this way we can bring studies to life as they can more readily relate to the value of their immediate environment. It also helps ensure existing knowledge is handed down to future generations. In Pudur, which is a small tribal school, the



head teacher and his staff have established a newly planted vegetable garden and when we visited the kids were irrigating a newly sown vegetable patch, having great fun with buckets of water!



Above: students at Gariyur village school telling us about the medicinal plants to be found around their village.

The school garden acts as a realistic laboratory of learning for biology and environmental studies, where facts learned in the classroom can be applied practically. Gardening also enhances cooperation among peer groups and the students acquire social skills. Not only do the children learn the names of plants, but they also learn about pests and predators in the ecosystem, thus gaining a holistic sense of biological thinking. In today's educational system at village level parental involvement is of utmost importance.

At the Kesalada School clearly both the school and the students benefit from a supportive and committed parent association and subjects that come under the eco club umbrella can be successfully integrated into the school syllabus as an optional subject. The school is a great example of community engagement and the primary school children have been learning about medicinal herbs and the head teacher plans to extend the garden so that it is maintained for the benefit of the entire village community.



Above: the classroom environment at Kesalada school.

## Our Education Fund

FoH together with NAT are supporting young people from tribal community and/or backward class family backgrounds. Students currently attending the Victoria Armstrong School in Kothagiri, the Tribal school and drop-out school in Gudalor receive grants from NAT. Based on information provided by NAWA's director of education, bursaries are also provided to students progressing to



higher secondary and college education. The FoH fund is providing support to Emima, Kowsalya, Nisha and her sister, Harish, Meena and Elsheeba.

Emima completed an Internship at FRLHT/TDU in Bangalore during 2017 and a place has been found for her at the Atreya Ayurvedic College in Bangalore. Starting in November 2017 she will study for her BAMS for 5 years. Nisha and her sister are still at Glenmorgan Toda village school. Kowsalya lives with her aunt in Thenali village: her dad died some years ago and her mum has severe mental health issues. Kowsalya is doing well at the higher sec school in Ooty and is only 6 marks away from being top of her class. Meena is attending The Government Arts College in Ooty to study tourism, Harish is nearing the end of his time at college and Elsheeba is in her final year at a Coimbatore college studying for her B.Com. All students being supported are from orphaned and very poor single parent backgrounds.

## **Fundraising**

Fundraising events continue to be held contributing net of costs £1,130. We hope to arrange more events in 2018; details will be available on our website.

## **Income and finance report**

The FoH accounts are published separately and available upon request. They are also found via our web site or on the Charity Commission's web site. Grants and donations over £500 were received from the following organizations and individuals:- The Hadley Trust; The Onaway Trust; The Paget Trust; Nilgiris Adivasi Trust; The Bryan Guinness Charitable Trust;; Tony Mortlock; Terence Ryan; The Souter Charitable Trust; The N. Smith Charitable Settlement; The Oakdale Trust, Mercury Phoenix Trust, The CB and HH Taylor Charitable Trust and The Church of Ireland's Bishop's Appeal Committee.

We are also grateful to other charities and individuals who have contributed to our income by way of grants, donations and gift aid. Your support is so very much appreciated. We are also grateful to British Airways for baggage waiver and their past support. We are also indebted to our local Barclays bank staff who generously match funded our events.

### **Financial review**

Income in the year received and committed, including grants processed on behalf of NAT, amounted to £66,314 (*previous year £28,697*). *The Trustees policy is that all funds (except for nominal administrative costs) should be sent to India, and particularly at times when we can take advantage of preferential exchange rates.* In this way we can optimize our funding to the project. Funds expended on project support amounted to £73,930.



