The Proceedings of the Two Day Consultative Workshop On

Developing a Comprehensive Relief and Remediation System for the Endosulfan affected community

Organised by

District Panchayath, Kasaragod, Kerala

Venue

District Panchayath Conference Hall

Aug 5th & 6th 2005

Background

- Endosulfan, a Highly Toxic Organochlorine pesticide sprayed in the cashew plantations of Kasaragod District (in Kerala State) since 1976 for 25 years three times each year.
- Ill effects noticed in animals since 1980's and in human beings since 1990's.
- After much public struggle and legal battles endosulfan is banned in the Kerala State through a High Court order and a State Government order.
- Ill effects of endosulfan noticed in 12 panchayaths in the district.

…Background

- All medical studies – Indian Council for Medical Research-National Institute of Occupational Health, Kerala Government, Indian Medical Association, PANAP-Thanal-CHC have all established the causal factor for the health impacts as the long and continuous exposure to endosulfan
- The District Panchayath and the State Medical Department conduct camps and initiate treatment.
- Local groups start remediation work with minimal support raised locally and through friends.
- The District Panchayath, the District Collector, local groups submit various proposals to State Government to start relief and rehabilitation work.

…Background

- These measures address the concerns of the community but is highly inadequate to provide relief and remediation especially in the long term.
- These are based on inadequate information and knowledge about the impact in its geographical area, its intensity and variedness.
- Discussions held among the District Panchayath (DP), Thanal, ESPAC, Punchiri, KSSP, Endosulfan Virudha Samithi and other groups brings forth the need to address the issue comprehensively with the help of medical and social experts in the field. DP declares its plan for the workshop in the Study Congress 2005.

The Workshop

- The Two Day Consultative workshop was organised by the District Panchayath with the support of the following organisations

  - Thanal, ESPAC, KSSP, Punchiri Arts and Sports Club, Endosulfan Virudha Samithi, Kasasaragod Paristhithi Samrakshana Samithi.
  - And was attended by the Grama Panchayath Presidents, Members, Doctors from the PHC's, Health Inspectors, Activists from all over Kasaragod.

The District Collector Sri Minhaj Alam and the District Panchayath President Smt Padmavathi presides and involves in the workshop

… The Workshop

- Agenda

  5th August 2005 - First Day

  – Inaugural Session – Chaired by DP President, Smt. Padmavathi

  – Status of Remediation –
    - DR Y S Mohankumar (Local Doctor and ESPAC member)
    - Dr Abdullah (District Medical Officer-DMO)
    - Dr Padhmanabhan (Asst. DMO)

  – Expert Presentations –
    - Dr Rajmohan (ICMR-ROHC-NIOH) – presented a frame work for the plan
    - Dr Suresh kumar (Calicut Medical College) – presented the Neighbourhood based Palliative Care (NNPC) system
    - Dr U V Shenoy (Kathurbha Medical College) – presented the impacts on children

… The Workshop

- Dr Ravindranath Shanubhog (KMC) – presented the toxicology and also various possibilities of care and relief
- Dr Abdul Sharief (Retd, Principal, Calicut Homeo College) – presented the possibility of Homeo treatment
- DR N D Jose (District Ayurveda Hospital) – presented the scope of Ayurveda in treatment of such diseases

– Discussion presided over by District Collector

6th August 2005 - Second Day

– Presentation of the Draft Plan and Discussions

– The "Comprehensive Remediation and Relief Plan"

– Valedictory function presided by DP President and members and the District Collector.

– Press Conference

The Draft Plan

The Following frame work was agreed upon and deliberated

- Policy
- Health
- Social
- Environmental
- Structural/Implementation
- Financial

Policy

The following policy decisions have to be made and adhered to for the effective planning and smooth implementation of the Plan. Proposals have to be build based on the plan and short and long term activities done.

- **Full implementation of the ban of Endosulfan.**
- **Phase out of Pesticides in the District in five years.**
- **All LSGI's to resolve to move to Declare Kasaragod as Organic district.**
- **Develop and Implement Community based Organic certification and Local standards**

… Policy

- Special Purpose Cell for Implementing rehabilitation and relief - acting as interface between victims and all relief measures.

- Long term commitment to the remedial and relief system by all governments -- future as well - Special LSGO and GO to be issued.

- Harmonise the various remediation plans and bring it under the special purpose cell.

Health

- Conduct a Comprehensive Family and Individual data generation by door-to-door survey in each Panchayath and establishing database.
- Analysis to identify the diseased and healthy for initiating welfare measures.
- Identifying and categorising diseases and treatment options - different system of medicine - through consultation and integrating.
- Establishing a Continuing medical assistance system.
- Establishing a Disease surveillance system – with both short and long term screening.

… Health

- Establishing a Community based monitoring , Long-term and Palliative care and redressal system with the support of the NNPC of the Calicut Medical College.

- Deputing medical officers and nurses for NNPC and setting up of nodal centers to support community based monitoring and redressal system.

- Establish Special schools / Special Educators.

- Special remediation systems in School/Anganwadi's to take care of the endosulfan affected children through Kudumbasree health volunteers /neighbourhood facilities/ICDS.

… Health

- Day-care centres to be established with trained volunteers at the Ward/Cluster levels.

- Supply of Medical Aids for differently abled affected people - like spectacles, wheelchairs, hearing aid, walking aid etc.

- Drug supply stock to be maintained and provided to identified specific cases and continuous monitoring established.

- Medical care credit card or health card to cover the treatment.

- Establish Care givers relief programmes in the locality.

- Special assistance - for mothers with seriously affected children.

… Health

- Special measures for rehabilitation of orphaned survivors.
- Financial Compensation for deaths and serious illnesses.
- Special assessments of ailments and problems affecting women - sensitively carried out and establishment of remedial measures.
- Conduct Health assessment and establish relief measures to PCK workers.
- Supplementing nutritional deficiencies through time bound relief measure - locally made food with involvement of SHG's.
- Assessment of training needs local and district level.

Social

- Assessment of social conditions and needs, and providing.
- Interventions in the affected population to change their depressed state of mind - change makers and confidence building.
- Vocational training and Livelihood Rehabilitation - for differently abled children and youth.
- Monthly financial support scheme for the affected and their dependents.
- Livelihood Rehabilitation and empowerment through Skill training, management training, enterprise development and planning and marketing support.
- Create action plan for converting existing farm land to organic farms.

Environmental

- Periodical Monitoring and assessment - water, soil, food, flora and fauna – to document change and levels of toxicity.
- Research in remediation systems – and developing community based monitoring of public health and environment indicators.
- Awareness building leading towards pesticide free district - a programme like mass literacy programme to be established.
- Revival of mid land hills and eco-systems of the Kasaragod District.
- Watershed based revival of biodiversity in PCK land and Common lands.

Structural / Implementation

- How will these be done - who will take the lead - who will do what ?

- A District level special purpose cell to be setup under the district panchayath-as an independent multi-stake holder, transparent and quick redressal system to plan and coordinate the district level work

- The Endosulfan Relief and Remediation Cell
  - Chairperson – President, District Panchayath
  - Convener – District Collector
  - Special Officer – Social Welfare Officer
  - Members – Grama panchayath, Medical department, Concerned line departments, Community organisations, Environmental organisations etc

… Structure/Implementation

- Local Implementation Cells at the Grama Panchayath level for immediate monitoring and interventions.
- Decentralized ward level coordination at the cluster level.
- Periodical review meetings to be held at district level to assess progress.
- Social auditing quarterly in the initial phase.
- Transparent, Accountable management of the system.
- A Website to be developed to share the issue, make appeals, fund raising and to update regarding activities.

Financial

- Assessments of financial needs
- Identifying and getting support from Govt. agencies, Govt. , PSUs, Banks, Trusts, NGOS private individuals and institutions and NRIs.
- Fund raising - events, stamps etc
- Endosulfan Survivors Relief Fund - A Special fund to be started and operated under the Special Cell.
- A global appeal to support and help the disaster affected - through major media and websites etc
- Monitoring and Social Auditing for ensuring dispersal at the required time and required place
- Establishment of a separate agency guided by expert group to monitor.

Thank You