



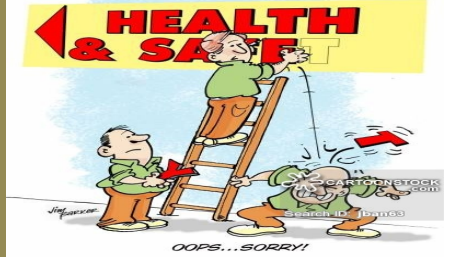
FOUNDATION *for* RESTORATION of NATIONAL VALUES

ॐ सर्वे भवन्तु सुखिनः। सर्वे सन्तु निरामयाः॥
सर्वे भद्राणि पश्यन्तु। मा कश्चिद्दुःखभाग्भवेत्॥

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NEWSLETTER

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Message from the CEO

The modern life throws up many challenges. Malnutrition, neurological and bronchial diseases, stress related issues have become commonplace. Rising population, escalating health care cost, migration, rural urban divide causes other health related problems.

Indian tradition harped on simple living, as close to the nature as possible. However, in the mad race for modern life, simplicity was relegated to the background. This gave rise to many diseases, as trees were cut and water bodies polluted.

However in the last few decades there has been growing interest in alternative forms of therapy globally. In addition, attempts by devotees of New Age culture to ascribe new layers of meaning to the concepts of Ayurveda have propagated a simplified and modified version of Ayurvedic culture and practice. There are attempts by biomedical and Ayurvedic researchers to correlate Ayurvedic understanding of the nature of disease with modern biomedical concepts.

The hereditary Ashtavaidya Ayurveda physicians of Kerala are among the small group of traditional medical practitioners who have endeavored to retain the scholarly study and practices of their ancestors. With changing social structure and the norms imposed by the government regulations, Ashtavaidyas too are striving to adapt their practice to contemporary standards.

Hopefully, a balanced combination of modern medicine and Indian traditional system of Ayurveda will bring succor to people.

Anupama Jha
CEO

PLIGHT OF INDIA'S HEALTH SECTOR ***Citizenry's Entitlements and State's Preparedness*** - Khushboo Srivastava, Programme Associate, FRNV

The "right to the highest attainable standard of health" is often espoused in various public discussions in India, however, a new index developed to assess each country's achievement on a range of health indicators ranks India at 143 in a list of 188 countries, six places ahead of Pakistan and way behind countries like Sri Lanka (79), China (92), even war-torn Syria (117) and Iraq (128). If one goes by the tenet articulated by WHO, the Right to Health is a fundamental part of our human rights and of our understanding of a life with dignity. Unfortunately, a large majority of Indians have been denied this Right.

Time and again, outbreak of diseases such as Dengue and Chikungunya in epidemic proportion in several states in India, is a grim reminder of the unhealthy living condition of a vast majority as also the poor healthcare infrastructure.

Medical experts have opined that there is a direct link between increase in the population and human health deterioration. High density of population causes people to live in close proximity to one another. This results in the rapid spread of diseases. Aside from this, slums around urban areas are extremely vulnerable to infectious diseases due to poor sanitation, high population density and high levels of poverty, all of which increase disease incidence.

According to the World Health Organization, one of the major consequences of climate change is the rise in the number of vector born diseases, besides heat strokes and skin diseases. The recent spate of Dengue and Chikungunya cases are a manifestation of this. This is indeed a pity, since ancient Indian traditions established the principles of ecological harmony centuries ago; not because of any immediate utilitarian exigency, but through its quest for spiritual and physical symbiosis, synthesized in a system of ethical awareness and moral responsibility.

The Vedic Hymn to the Earth, the Prithvi Sukta in Atharva Veda, is unquestionably the oldest and the most evocative environmental invocation. Mother Earth is celebrated for all her natural bounties and particularly for her gifts of herbs and vegetation. Her blessings are sought for prosperity in all endeavours and fulfillment of all righteous aspirations.

Regulatory failure is another reason for the dismal state of medical infrastructure and health preparedness in India. This is most starkly reflected

by regional disparities and income inequalities. Unlike much of the developed world, India holds no concept of medical or health insurance. The lack of healthcare insurance is, tantamount to being a chronic phenomenon in a country where the lives of multitudes is characterized by hand to mouth living and the presence of 'out- of- pocket' health-related expenses. While the topmost strata holds the ability to spend a large proportion of their earnings on healthcare schemes, the lower rungs of the society are arrested in fighting for the bare minimum and thus their resources are reserved for these basic necessities.

Migration and urbanization also affects the spread of disease. The probability of encountering new diseases increases as humans move into previously uninhabited lands because of population growth, or as humans migrate into areas where they do not have resistance to certain diseases. Migrants may be particularly vulnerable to malarial infection because of the fatigue and malnutrition that accompany relocation.

The rural-urban divide adds another dimension to the issue of healthcare system. A staggering 70% of the population still lives in rural areas and has no or limited access to hospitals and clinics. As a result, there is dependence on government programs like the National Urban Health Mission. The implementation failures of these too, make the rural population highly susceptible to diseases. On the other end of the spectrum, the lives of urban population are characterized by privatized medical care like private hospitals and clinics which are much better equipped.

Further, the access of these essential needs is worse for the vulnerable and marginalized sections of our society namely women, dalits, tribals and poor. These groups are most susceptible to ill-health and face significant obstacles to accessing quality and affordable healthcare. This population has substantially higher mortality and morbidity rates, due to non-communicable diseases such as cancer, cardiovascular and chronic respiratory diseases, than the general public.



Another issue being faced by India is insufficient nutrition intake. Considering the large number of deaths caused by hunger and malnutrition, its eradication is not just a moral duty or a policy choice but rather ought to be a legally binding human rights obligation. The Universal Declaration of Human Rights 1948 recognizes this right regardless of religio-ethnic biases. This unfortunately is conspicuous by its absence in India. The high infant mortality rate coupled with stunted growth amongst children is explicit substantiations.

With this dismal picture on the one hand is juxtaposed the equally pathetic condition on the supply side. Newspaper

reports and parliament discussions are full of stories of deaths caused by the deplorable state of public health infrastructure. While the emergence of private players in the sector has aided the rich, it has also meant a systematic exclusion of the bulk of our citizenry who find it costly and subsequently non-accessible. The government hospitals on the other end are crippled with problems like lack of resources and infrastructure; inadequate number of beds, rooms, and medicines. On the part of government there is lack of monitoring of the funds and resources, which are devoted towards the improvement of healthcare sector.

The murky state of the healthcare sector is also exacerbated by the government's failure to allocate sufficient funds. India's total expenditure on healthcare was four percent of its GDP in 2013 which fell further in 2015 to a mere 1.2 percent of the GDP, one of the stingiest in the world. With one of the fastest growing population in the world, this allocation is way less than the world median at 5.4 percent.

The right to health is a fundamental part of our human rights and of our understanding of a life with dignity. First articulated by WHO, the right to the enjoyment of the highest attainable standard of physical and mental health, to give it its full name, is a holistically novel idea. The preamble further states that "the enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition."

In order to meet these challenges, India will have to take some major steps towards creating greater awareness in the first instance, followed by efforts to extend the reach of medical services across all social strata. One way to solve this problem is to address the infrastructure issue by standardizing diagnostic procedures, building rural clinics, and developing streamlined health IT systems, and improving efficiency. The need for skilled medical graduates continues to grow, especially in rural areas which fail to attract new graduates because of financial reasons.

Many NGOs have responded to food security and health issues by taking increasingly rights based and participatory approaches. Aside from interventions to protect small farmers from eviction, they are developing the concept of nutritional rights, and put pressure on governments to take responsibility for supplying funds for nutrition in national budgets. Working with migrant labourers, dealing with their sanitation and health problems by educating them and pro-actively working with them, they have set examples of how through conscious efforts diseases can be prevented.

NEWS AND EVENTS

□ New members of FRNV fraternity

Dr. Seema Pawar, Nimisha Agnihotri and Mohammad Asim Khan have joined FRNV to carry forward the vision of FRNV. All of them will work closely with the

CEO, to advance the programs of the organisation and to fulfill the vision of FRNV. Seema is the Project Director for Values Based Education program while Nimisha has been entrusted with resource mobilisation of FRNV. Mohammad Asim will work on Administrative and Electoral Reforms.

□ **Workshop on Corporate Integrity**

A workshop on Corporate Integrity and Responsibility will be organised by FRNV on October 21 at India Habitat Centre. The workshop is focused primarily at senior Business Executives of both private and public sector companies and is designed to enable the participating leaders to share and acquire fresh perspectives on how – as business leaders – they can play an active role in creating systems that uphold ethical behavior and integrity in their enterprises.

SILVER LINING AMIDST DARK CLOUD OF STARVATION

– Anupama Jha, CEO, FRNV

India is home to one third of the world's hungry. Over twenty crore Indians sleep hungry every night. Malnutrition is rampant. Before you start feeling sorry for the poor, please wait a minute. Believe it or not, in this otherwise very bleak and dark scenario, there is a silver lining.

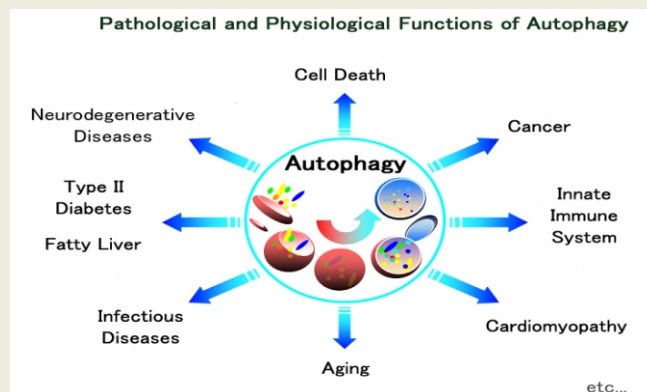


Starvation can actually lead to cellular cleansing, so essential to destroy old and sub-standard cells that are no longer useful to the body. Non destruction of cells and accumulating old junky proteins lead to dreaded diseases such as Alzheimer and Cancer. But there is a natural process by which the human body eats its own damaged cells and unused protein. This process is called 'Autophagy' or 'self eat'. This year's Nobel Prize for medicine was awarded to Dr Yoshinori Ohsumi for his research on autophagy.

Autophagy was first described in 1962 when researchers noted an increase in the number of lysosomes (the part of the cell that destroys stuff) in rat liver cells after infusing glucagon. Damaged sub cellular parts and unused proteins become marked for destruction and then sent to the lysosomes to finish the job. Nutrient deprivation is the key activator of autophagy.

Glucagon is kind of the opposite hormone to insulin. If insulin goes up, glucagon goes down. If insulin goes down, glucagon goes up. As we eat insulin goes up and glucagon goes down. When we don't eat (fast) insulin goes down and

glucagon goes up. This increase in glucagon stimulates the process of autophagy. In fact, fasting (raises glucagon) provides the greatest known boost to autophagy. This is in essence a form of cellular cleansing. The body identifies old and substandard cellular equipment and marks it for destruction. It is the accumulation of all this junk that may be responsible for many of the effects of aging.



One of the many ancient Indian practices that has been recommended and followed is the practice of Fasting, one day in a fortnight. Fasting as a culture is practiced by almost every religion in India.

Many follow these practices to appease God or for spiritual progress. But few know the biological and therapeutic benefits of this practice. Truth is, this process of fasting induces autophagy, which helps in repairing the damaged and degenerated cells, or use the proteins of the damaged cells, for its survival. Holistic healing of body and mind along with spiritual progress has always been part of traditional Indian wisdom.

In any case, this does not mean that we should not work towards ensuring food security. Ensuring availability, accessibility and affordability of food for every Indian is part of the Government's policy.

Dear readers,

FRNV invites stories from its readers on deep-rooted values that have helped us in our everyday lives. Some of these stories will be featured in the next issue of our newsletter. So put your thinking caps on, recall the values integral to your life which you cherish and write to us at shilpi@valuefoundation.in.