

The Vidiyal Trust

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Leaving England in deep snow was a novelty! Fortunately I decided to go to the airport a day early, thank goodness I did! I arrived here exactly 28 years on from my first arrival, which hardly seems possible. It's a very much changed India that I come to now, still with myriads of problems, compounded these days by drought - severe drought at that, but of course there have been changes. Most of this changes are in the infrastructure, massive improvements on the roads with much more chaotic traffic, buildings improving, many more people. Kerala in particular has improved considerably. Not so much change in Madurai where I am now, with the exception of the absence now of street children. The government has excellent projects running to stop that. However, for children living in the many slums life is still very difficult, of which more later.

The journey started in Trivandrum and included a meeting with a Care Plus of the Regional Cancer Centre about the 2 ambulances we continue to run which take palliative care to those suffering from terminal cancer. These will be people from the poorest

communities, I will not use the caste word. All will live in shacks or huts, often with no facilities. This work is mainly about pain relief, the majority of those our ambulances visit are too ill to reach hospital, there is literally no other care or pain relief available for them, and many cannot even afford to get to hospital. Having a doctor on the ambulances has made a big difference as morphine therapy is now possible. In an increasingly affluent city you may wonder if this service is necessary, the answer is yes, absolutely. My regular trips on the ambulance to see the relief given - which includes family support, confirm that this is really important with regard to our work here. Well over half a million visits have been made now and it is essential that we continue.

The other thing to discuss with Care Plus was the switching of the administrative details of children with cancer we care for from Kerala to Madurai. This consolidates the work into Madurai and we will now start home visits to those children as we already do with the Tamil children.

Again these are the poorest children, the government provides free treatment, but medication has to be paid for., more of that later. We are covering a 200 mile radius of the hospital. It's a repeat story, but for example you hear of a father hiring a bicycle for £2 for 24 hours, then cycling with wife and 2 year old child a 30/40 km round trip, all in a day because he can't afford a second days rental for the bike. The child

would have had chemotherapy. It is estimated that over 4000 children a year are diagnosed and do not return for treatment. So for each child we pay for transport costs and medications. To do this we deposit £8 monthly in a bank account and monitor carefully. We can't estimate the overall cost per child because treatments vary so much, so we are really grateful to those who sponsor the work generally, accepting that we utilise funds as needed.

A good example is a 2 year old we have been caring for for several months, she lived in a very poor rural village. Sadly she did not respond to treatment. Her last few days, just a week ago, would have been very painful and difficult, but we were able to arrange for a doctor to go daily to administer pain relief injections - at £15 per day, the families income is less than £30 per month. Of course we are at the tip of an iceberg- but we are caring for over 60 children, and our staff offer emotional as well as practical support.

When I think back to my own granddaughter and the wonderful care she, and we received, I thank a God that we can at least do something to help some.

So this coming Saturday many of the children are coming to Trivandrum for a fun day. Everything is booked, meals arranged, a magician ready, 2 hours at the beach planned, and a chance for families to support each other. More later!

Today,(Wednesday) it has been very hot, we have spent a large part of the day on our small farm. This farm is our future as we continue to strive for self



sufficiency. On the last report I explained that we had 30+ goats, over 200 chickens and 2 cows. Now we don't have any goats! The reason is simple, the costs of buying grass and transporting it to the farm became prohibitive. The drought throughout are area is really serious and we could not sustain the costs. So instead The goats were sold, we purchased 2 more cows, one with a calf, and a further 200 baby chicks. These are a special breed from this area. The idea is to rear them for egg laying. Their eggs will be sold for about Rs10 (8p) each, normal eggs sell for half that. Also we are fully organic, so may be able to get even more. Our other chickens are mainly for meat. All are free range. We have space in the goat sheds to double the number. We also built another chick shed.

The now 4 cows, one of them is pregnant, eat the

grass we grow via a hydroponic system, fully organic and we have enough water for them now that the goats have gone. Their feed is supplemented at a cost of about £130pa.



One of our 2 new vehicles at the farm

So we have big hopes for a productive future, of course a lot of what is produced will go to our children, elders and leprosy patients, but it should still leave us with a surplus income within a few months when the chickens have grown and are laying and the next batch will by then also be growing. There is massive interest here in organic food, which is the way we always planned to be, with excellent animal care.

Going back a day I made an all too brief visit to our shelter home - I go back there later, and then visited our slum lunch centre. One of the elders has had a serious accident, being run over by a bus 3 days ago, it has resulted in amputation of the lower part of one leg - and she is already home, to a slum shack. A day later on another visit we found her lying in a lean to affair on the side of the shack, in intense heat, with an open sewer just a few feet away. A wheelchair has been purchased for her, and I checked her medication, but the risk of infection is extremely high in those conditions. Her family are doing their best, and again we offered to take her to our shelter home where she can have a proper bed and nursing care - the family are considering this. I am very concerned.

The slum improvement scheme which involves putting toilets in the slums continues. Several are there, but they have no outlet! There is no water to flush them even if the outlet were to be there, but it has been

agreed that toilets will be placed in the slums! So they are! I won't comment!

During 2 of the evenings I went to both tuition centres to meet our 140 excited kids! They are a handful but so enthusiastic and hopeful. It is a privilege to be able to support them.

As many of you know 2 of our staff members, Kartik and Ranjith started out like these children when aged 5 and 8. They both now have Masters Degrees and are part of our staff team. I remember them as little boys, lots of memories! Both (now around 30 years old) are coming to England in June this year, this is thanks to sponsorship. They will be staying in Brundall, with opportunities to meet sponsors and well wishers. Details at the end of this report, I will also be taking them to my special place, Exmoor, for a few days. We are still planning, so more later. Needless to say they are very excited!

This evening has been important as I made a visit to the leprosy colony we support. Those who have been part of this journey will know that this is particularly important for me, as it was a missionary from the then Mission to Lepers who inspired me as a child. It was to be 20 years in to this story before the right opportunity came to do something really positive, I had seen the disease in various ways, but only 6 years ago were we able to set up our own project. The families



we support in a small colony are all suffering in different ways, and it has been an honour to love and support them. The change in their health and well-being is almost overwhelming. They have become dear and very special friends. Sadly, since I was here 5 months ago 2 have died, but the regular help we are giving has had a tremendous effect. This is in food and medications, but also in acceptance of them and concern for them. They have lived lives of isolation, of being shunned, but now it is different. I know that the hugs and handholding matter as much as the practical care. I just love being with them. We are having a special lunch tomorrow .

Nearby is the main leprosy home, behind security doors, I managed to get in once(!). There are 300 patients here, and we are, thanks to sponsorship from

a Norwich church, able to take a nourishing meal to them all at least once a month - prepared in our own kitchens. WE also provide an ambulance service. We certainly need all of our chickens! This situation is not so easy, we know all about the community behind the gates, but local politics want it this way and I am constrained about what I can write in a document that will be in the public domain, enough to say we are aware and reactive. We care and have real contact.

The next visit is to Unamalaiammal, where we work with, and helped to instigate an eye unit, making a lump sum payment in advance to enable more of our elders and other street elders to have cataract surgery. Most of our elders will need cataract operations, and in this restarted programme 6 have taken place with another 3 planned for this week. We also take food bags to a very poor Dahlit village. The situation in the rural areas, very isolated and difficult to reach, continues to be really bad, but at least there have been no more “unexplained” deaths among the elders. The drought affects hundreds of villages like this and when people speak to me about a developing nation that ought to be able to cope I just wish that they could travel to one such community to see what it is REALLY like. I am not sure how this problem can be solved, it takes half an hour on unmade up roads to reach this particular community, so suggestions that water (what water?) could be piped to them are impossible. On a

later visit to our farm we drove behind a vehicle taking water to some isolated areas, that is all they have



The lunch for the leprosy colony was a low key event but really important in that it puts the people in to a community setting. They tend to be a bit isolated, even though they live in the same village. The most important thing was to see the continued improvement in the people we serve. Their general health is so much better, in one case an artificial leg has been fitted, the whole atmosphere has improved, the monthly food and antiseptics and cleaning agents are really valuable and help to stop infection.

Children with cancer

This work is now entering a third year, and again, progress can be seen in its most tangible form. We had arranged, as mentioned earlier, to have a “fun” day with the children and their families. Not all of the children were well enough to travel but we had over 50 plus their families, making well over 100 people for the day. How to explain it? It ranks as one of the most special days I have experienced!

The families arrived around 10am, we repaid all travel expenses, and each child received a gift parcel. After

tea and biscuits (and photographs), a magician arrived. To say his material was antiquated is an understatement, but he made up for it with a vibrant personality and very loud music. At the end of the



show, which had the children screaming with delight, he got several of the children on to the stage to dance, the whole atmosphere was wonderful! After the show there was an excellent lunch provided by the hotel, then after a rest period coaches arrived and we took them all to the beach! For some it was their first time at the beach area, and we all got very wet and very hot! It was a short period there because the temperature that day was in the late 30s, but it was so enjoyed.

Then it was back to the hotel for more drinks and snacks, then farewell to some very happy children!

It was really good to be able to talk to the families, to explain what we are doing, how and why, and all without exception are showing considerable

improvement in their general health. It is almost certain as well that the majority of these children would not have been treated without our intervention. Our link with Care Plus, the charity wing of the Regional Cancer Centre has once again proved invaluable, and several members came along and joined in with the activities.

I did share with them the story of my granddaughter, explaining how difficult the whole episode of her cancer was for her obviously, but also for the whole family. They really understood this and it was great to be able to show them before and after pictures of her treatment. A lot of bonding and friendships happened that day, what a privilege to be part of it. **Thank you so much** to all of our supporters who have taken this vision on board, through sponsorship and special events.

As this report will reach a wider audience can I just explain again that the families we support are from Dahlit communities, most living in isolated rural villages. Treatment is provided free by the main Cancer Centre, but not the cost of medications (including chemotherapy drugs) and there is certainly no help with travel expenses. Children will need to travel up to 100 miles to reach the hospital, many villages do not have regular buses, and the fares for many are prohibitive. It is a generalisation but most will be coping without water and sanitation on an

income of less than £30 monthly. The £8 we put in to bank accounts helps with a lot of their needs, but of course we need to top up too. (as with the child mentioned at the beginning of this report). Several children will not get through their illness, a few of those we have been supporting have died, but at least we have given them a chance. The other thing mentioned by many of the families was that our team visiting on a regular basis gives real support in an emotional sense, as one mother said “we no longer feel alone”. I can understand that. So we plan to continue, 60+ children are with us now, and hopefully we can increase that number in the months ahead. At the back of my mind always is the figure of 4000 plus children who are diagnosed at the Cancer Centre each year but never return for treatment.

Charities

As I left the UK the newspapers were full of charity misuse which of course has a danger of generalisation.

I mentioned at the beginning that it is 28 years since my first trip to India, and of course there have been ups and downs and one or two really difficult times. We don't of course work on the scale of the multi million pound charities, but we have been firm in our commitment throughout to only help the poorest by using **all** of our donated funds for them. Our very limited overheads (we have to be audited, postage,

printing) are met by a small proportion of the gift aid we are able to claim, the rest going in to the projects. We try to ensure that you know exactly where your money is going. I do not type thank you letters to keep me out of the financial loop. My trip costs are met personally with help from family and friends.

We have a strict Child Protection Policy, we do not allow visits to our projects without CRB checks, and visitors being accompanied by a UK trustee. We could make quite a lot of money if we charged people for a period of time “working” on our projects - others do it, but we do not take the risk. CRB checks are not infallible. Our IndiaTrust is registered, staff are well monitored, accounts are scrutinised and audited and we are very careful with the work we undertake. We do not work with other charities here with the exception of the Regional Cancer Centre. Our projects are innovative and started by us. In an article in the Hindu national newspaper whilst I was there it was stated that 500,000 children in India disappear every year, the figure is probably higher as many are not reported, so we are and will continue to be very aware and careful..

Sadly I do see corruption and serious misuse of funds in other parts of our city. I am not sure how charities can properly monitor without a hands on person. We do our utmost to ensure that those we help really are the poorest. Of course we have made mistakes, but

events like the cancer children day make me even more determined that we are vigilant and secure.

So it was a wonderful visit! Very hot! Self sufficiency is more and more to the front of our minds, we are unlikely to start any more projects (why do people laugh when I say that?!), and we just thank God the we can do what we do, thanks to your generosity.

Every blessing and sincere thanks to you all.

NB If you would like to meet Muthukumar, Kartil and Ranjith they will be in the **Virgin Lounge in White Lion Street, Norwich from 3-5 pm on 11th June.** There is to be a cream tea and later curry evening at Postwick church (attended by Muthukumar) on 22nd June (tickets in advance) and all 3 will be visiting churches in Yare Valley benefice on Sunday 10th June, please check the website (ours and the Yare Valley churches site) for further in formation, or email / phone me., We really want to thank all of our supporters. None of what you have been reading about today could have happened without your support and understanding



