



# TIBETAN HEALTH

## July to December 2015

### About Us

Tibetan Health is the official Newsletter of the Central Tibetan Administration's Department of Health (Tibetan Voluntary Health Association). DOH (TVHA) is responsible for overall public health promotion and medical care service of over 120,000 Tibetan refugees in India, Nepal and Bhutan.

The health department manages and finances 50 health centers in India and Nepal including Ngoenga School for Tibetan refugee children with special needs ([www.ngoengaschool.org](http://www.ngoengaschool.org)) apart from different health programs, projects, and activities.

Tibetan Health Newsletter is published two to four times a year to inform and update about our health promoting initiatives to our friends, donors and supporters. This newsletter also gives you an overview of health programs, projects, activities and needs of the department. Most importantly, it covers success stories and outstanding contributions of all our field health staffs including hospital administrators, doctors, nurses and community health workers etc. This newsletter is dedicated to them, for their selfless dedication and hardwork, which are the backbone of this successful and unique refugee healthcare system.

Tibetan Health is distributed free to all who are interested in the works of the Tibetan Department of Health.

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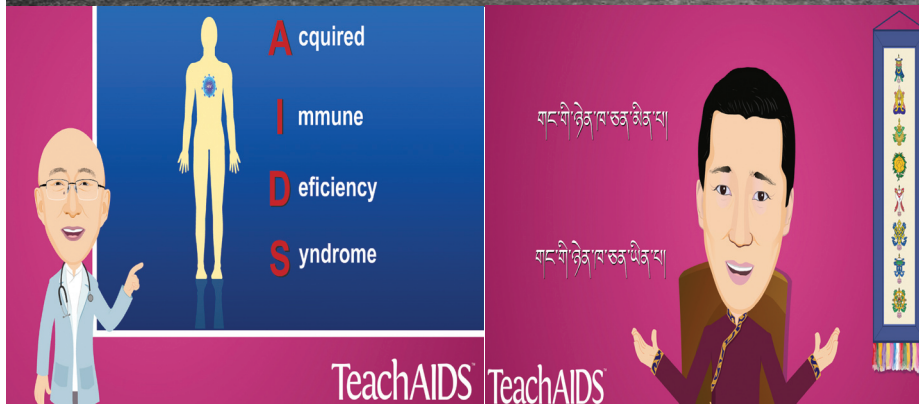
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*The launch of TeachAIDS prevention software in Tibetan language as a result of collaboration between TeachAIDS and Department of Health, CTA*



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A collaboration between TeachAIDS and the Central Tibetan Administration has resulted in the production of culturally and linguistically appropriate HIV education materials for Tibetans around the world. Released in time for the Tibetan New Year (Losar), these materials were carefully designed to address the sharp increase in new reports of HIV in recent years and the “serious lack of localized HIV education materials available to educate the population,” identified by Health Kalon Dr. Tsering Wangchuk. The materials are available online for free and will be distributed to Tibetan schools, universities and health care facilities as early as this month.

The materials feature the universally respected Dr. Tsetan Dorji Sadutshang, who is the personal physician to His Holiness the Dalai Lama, and beloved singer and songwriter Mr. Phurbu T. Namgyal, who plays an inquisitive student with many concerns about HIV transmission. During the research and testing phases, both cultural icons were identified as highly influential and deeply respected within the Tibetan community. Despite their intense work and travel schedules, both Dr. Sadutshang and Mr. Namgyal devoted significant time over several months towards the development and high quality production of these animations.

Dr. Tsetan cited His Holiness the Dalai Lama’s globally renowned kindness as his inspiration for becoming involved with TeachAIDS. He noted, “It’s about a universal responsibility that His Holiness the Dalai Lama has always been talking about and that’s just not about taking care of only yourself, but taking care of everyone else around you, including all living beings, your environment and the entire universe. Be kind to others and help anyone you can.”

Mr. Phurbu T. Namgyal echoed these sentiments, reflecting that there has been a “need for social leaders to propel efforts to protect Tibetans from HIV”. Mr. Namgyal went on to say that “these education materials will be extremely beneficial for my people, especially those inside Tibet”, and added, “I am so happy to be a part of it!”

Sikyong Lobsang Sangay offered an impassioned Message of Hope to accompany these materials, reflecting on the lessons learned in the 34 years since HIV was identified and reminding Tibetans that “there is no cure for HIV and AIDS but it is preventable. We have learned that the single best way to stop the spread of HIV is through education.” Health Kalon Dr. Tsering Wangchuk complemented this message with an inspiring Call to Action that urged Tibetans to learn to protect themselves and their loved ones and to treat people living with HIV with kindness, respect and dignity. The TeachAIDS materials have also been endorsed by His Holiness the Dalai Lama and commended on the compassion that guides the development of the HIV education software.

Noting the importance of culturally appropriate, medically accurate, and pedagogically grounded health education materials, Dr. Piya Sorcar, CEO and Founder of TeachAIDS, welcomed the opportunity to collaborate on this initiative. “It is critical to stop the spread of HIV before any region becomes a hotspot for this condition. Research shows that our materials are highly effective in empowering people to protect themselves and their loved ones from HIV, and we are delighted to provide these tools to Tibetans around the world”. Dr. Sorcar added

that TeachAIDS was overwhelmed by the tremendous support extended by the Tibetan community. “Along with respected politicians, renowned medical personnel and cultural icons, we have received generous assistance from teachers, students, monastery staff and many experts from the Health Department at the Central Tibetan Administration. The development of these materials has truly been a remarkable demonstration of the strength and unity of the Tibetan people”.

The award-winning educational materials are produced by TeachAIDS (<http://www.teach aids.org>), a nonprofit organization founded at Stanford University. Based on more than five years of research and development at Stanford, the software has been scientifically demonstrated to have the greatest learning effects of any approach to HIV prevention education. TeachAIDS has been recognized as an organization that will “change the world” by MIT Technology Review and its materials are used over 80 countries globally. Despite heavy investment in research and development, TeachAIDS makes all its materials available at no cost to its users.

## HEALTH PROGRAMS

*Tibetan Medicare System (TMS) announces 70% subsidy to the most vulnerable sections of the Tibetan population in India*

Department of Health, Central Tibetan Administration (CTA) announced a subsidy of 70% (Rs.2500 out of Rs.3565) in Tibetan Medicare System (TMS), which is a community based health insurance scheme. Now subsidy benefits have been extended to more groups of Tibetans living in India.

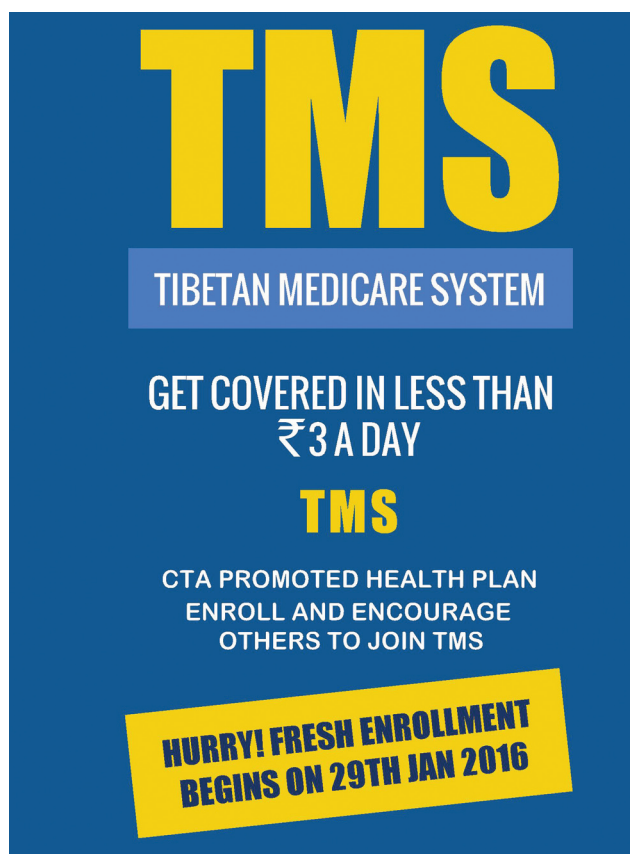
The scheme aims to reduce the burden of “out of the pocket” expenditure, which accounts to approximately 88% of health expenditures, which is higher than many developing countries such as India and Nepal.

In 2009 CTA survey, it was found that over 45% of the Tibetan exile community suffers from diseases such as cancer, tuberculosis, liver cirrhosis, diabetes and heart diseases, which requires a high degree of secondary and tertiary care. Lack of adequate healthcare coverage has

been a major cause of high mortality as well as a primary cause of poverty and financial insecurity amongst the community.

Under the leadership of the Kashag of Honorable Sikyong Dr.Lobsang Sangay, the Department of Health launched its first ever TMS Health Plan on 1st April, 2012. For close to four years now, TMS has been implemented successfully and has provided an equitable and comprehensive healthcare coverage to the Tibetans living in India. During the last four years, 49,000 Tibetans have been enrolled under the scheme and more than 2000 have availed benefits till date. However, more participation from the Tibetan public is crucial to make TMS stronger and self-reliant, and to pre-empt financial constraints faced by the Tibetans during medical emergencies.

The revised TMS Health Plan was operational from 1st April 2015 and further aims to strengthen health care mechanism by providing sustainability to the existing TMS Health Plan. With this, the revised TMS Health Plan proposes to cover all the exile Tibetan population in India. TMS Health Plan is essentially a non-profit, community based health plan designed to serve the healthcare needs of the entire Tibetan exile com-



munity in India. While providing full coverage to the most disadvantaged sections of the society, it also provides real benefits to those covered under the scheme who volunteer to pay their annual contribution to TVHA.

TMS works on the principle of community based health plan by spreading the risk of healthcare expenses over a number of people so that the financial burden of unfortunate few who require medical attention is shared by the many fortunate ones who remain healthy. The TMS Health Plan seeks to reimburse in-patient medical and surgical expenses incurred by its members in both public and private health care facilities, including hospitalization expenses at Tibetan Sorig facilities.

While addressing the deficiencies in the current Tibetan healthcare system and providing accessibility to comprehensive services, TMS also contributes to the effectiveness of its ongoing prevention programmes. Through this approach to healthcare, the TMS aims to help reduce financial insecurity in the short term and improve public health and well-being of all exiled Tibetans in India in the long run.

Health Department would like to announce that USAID sponsored Subsidy of 70% (Rs.2500 out of Rs.3565) towards TMS contribution will be given for the following households and individuals amongst Exile Tibetan population in India.

1. Economically weak individuals and families living in India including families of Nyamthak B and D
2. Monks and Nuns
3. New arrivals from Tibet since 1994
4. Families with three or more children (third, fourth and so on children up to 18 years of age)
5. Old People Homes
6. Families of people living with HIV/AIDS (excluding HIV/AIDS patients)
7. Families of people with disabilities (excluding the individuals who are disabled )
8. Widows / widowers and their families
9. Families of people with mental disorders (excluding patients with mental disorders)
10. Inhabitants of remote settlements in Ladakh Jangthang nomad areas and Arunachal Pradesh
11. Construction laborers and their families

The Department has also decided to give one time Subsidy of 50% (Rs.1783 out of Rs. 3565) of TMS contribution to Families of Tibetan staff employed by CTA and Non CTA Tibetan Institutions in India.

The next TMS enrolment period will start from 20th January and ends on 26th March 2016.

The Health Department strongly advises and encourages all Tibetans living in India to enroll in TMS and protect their families from unexpected financial loss due to expensive surgical and medical treatments.





*Meetings to Discuss Hepatitis B Study Held in Dharamsala*

Dr. Timothy Dye, Professor at the University of Rochester in New York, met with the Health Kalon Dr. Tsering Wangchuk, Health Secretary Tsegyal Dranyi, and staff to discuss the recent report documenting Tibetan refugee perspectives on Hepatitis B. The work was undertaken last year in Sonamling Tibetan settlements in Ladakh and Jhangthang, and included group interviews with almost 300 people, 27 of whom are living with Hepatitis B. The Health Kalon met with Dr. Dye and the team for a private briefing on their main findings and the implications of the work, and to discuss further steps. Additionally, Dr. Dye presented the report before the Health Secretary, Health Department, and Men-Tsee-Khang staff and leadership.

#### *TMS Enrollment Strategy and Planning Meeting*

Post TMS workshop, a meeting was held at the Department of Health to assess the proposed communication materials for the upcoming TMS enrollment campaign 2016-17 and to adopt online



media promotion for the enrolment campaign. A discussion was also held, suggesting overall strategy for TMS. The meeting emphasized finalizing the communication materials (i.e., banners, posters, flipbooks, flyers) and promoting TMS through social media such as Facebook, Whatsapp, We Chat, and bulk SMS services.

#### *Cervical Cancer Screening and Vaccination Program*



In Mundgod, around 300 women received free Pap smear screening tests, which resulted in 7 women being identified as having abnormal cervical cells. About 103 teenager girls received HPV vaccinations for which 75% of the cost was covered under the cervical cancer prevention program funded by PRM. A similar program was organized in Kollegal in March-April of 2015 during which 78 young girls and then another 11 girls, totaling 89, received free HPV vaccinations.

#### *Nunnery Health Education*

Through our hospital in Mundgod, health edu-



cation was carried out in Mundgod nunnery in July 2015. About 220 nuns attended the health education session where our medical officer gave a health talk on breast cancer, Hepatitis B and menstrual hygiene. This program was funded by PRM.

### *Free Monthly Gynaecology Camp*



Under the monthly Gynaecological camp funded by NCA, a free medical camp was conducted at Rabgyaling Tibetan Settlement in Hunsur on 17th September 2015. Visiting doctor Dr. Hilda Lobo with 5 medical teams from St. Mary's hospital, K.D. Kote conducted the camp. Supported by NCA, similar programs are being carried out in 10 other settlements in India where a visiting gynecologist consults, counsels, and screens pregnant women and others in the settlements for any complications or health issues.

### *Free Eye Check-up and Eye Surgery Camps*

Department of Health organizes regular free eye camps in various Tibetan settlements to improve and restore the vision of those who require surgery and also to identify refractive errors at early stage. On 18th July 2015, a free eye camp was organized at Dhondenling Tibetan Settlement,



Kollegal. On 25th September 2015 and on 6th October 2015, free eye camps were organized at Choepheling Tibetan settlement, Miao and Dhar-gyaling Tibetan settlement, Tezu, respectively.

Eye specialists from the nearby Indian cities were invited. Tibetans attending the free eye camp were evaluated for vision (refractive error) and eye problems, and those requiring surgery, especially those with cataracts, were advised surgery. A total of 115 individuals was screened for eye diseases at Kollegal Tibetan settlement on 11th July 2015, out of which, 32 patients were identified with vision impairment, i.e., Cataract-27, Pterygium-5, Cataract & Pterygium-1. Fifteen willing patients with cataract received cataract surgery (12 Female: 3 Male) and 5 patients received Pterygium surgery (3 Female: 2 Male). One patient with a combined case of cataract and Pterygium underwent surgery. Patients with minor problems were given specific ophthalmic treatments accordingly.

A total of 159 patients were screened for eye diseases at Miao by a team of ophthalmologists from civil hospital, Tinsukia. Thirty-eight individuals were advised for cataract surgery out of which 11 patients underwent surgery with successful restoration of vision. Forty-three individuals were identified with refractive errors and



advised spectacles. Seventy-eight patients were given eye drops as per doctor's advice.

At Tezu Tibetan settlement, 18 patients were screened for eye diseases and 2 people were advised for surgery.

We are now trying to reach-out to the remote populations of Tuting and Tenzingang Settlements in the North-East. However, the remote location of these places and unavailability of eye specialist make it very challenging to organize such camps.

Helping regain the vision of marginalized and aged Tibetans would not have been possible without the support of The Tibet Fund and Eye Surgery Fund, USA, Yeshe Norbu Apello per onlus Tibet, Italy and German Aid to Tibetans, Germany. We are immensely thankful to our donors for their continual support, which helped us restore the eye sight of individuals who are in the later stage of their lives and many of whom lack a support system.

## TRAINING NEWS

### *Health Information System Workshop Training for Health Workers*

The Department of Health organized a Health Information System workshop training for the healthcare workers and nurses of 12 settlements of Nepal, including the remote Tibetan settlements of Nepal, from 14th-17th July 2015 in Dharamsala.

The objective of the training was to build efficient capacity of health care workers and staff of the health clinics of Tibetan settlements in Nepal to build a robust, reliable and efficient health information system for health data collection.



Workshop participants were taught how to collect health information on paper forms as well as on the health information system software developed by the department. The topics covered included introduction to the principles of data collection and health information system, making basic disease diagnoses by the health care workers, understanding and reporting notifiable diseases, data collection on paper registers as well as computer software, the process of sending collected data for analysis, and dissemination of information to the stakeholders.

The expected outcome of the training is that the staff will be efficient in collecting reliable health data by making accurate basic diagnoses. This would support the Department of Health in conducting efficient health surveillance and manage infectious as well as non-communicable diseases of particular interests to the Tibetans efficiently, which in turn would help in the understanding of the health status of the Tibetan population as a whole.

The opening and the closing ceremony was graced by the presence of honorable Health Kalon and the Health Secretary who emphasized in detail the importance of health data collection and analysis for formulation of important health policies at the administrative level. The training was given by the department's Health Information System and Public Health Program Coordinator Tenzin Tseyang and Dr. Lobsang Tsering. The workshop was funded by the USAID through the Tibet Fund.

### *Dental Training for Dental Therapist*

Department of Health, in collaboration with Taiwan-Health Co-Op Organization, Cathy's General Hospital, and Taiwan Dental Association or-



ganized a dental training for Dental Therapists at Tibetan Primary Health Center at Bir from 20th-31st July, 2015. The training was attended by 9 dental therapists from various health centers and schools. This is in continuation of earlier theoretical and practical dental training with Taiwan dental groups with a common goal to improve the dental status of exile Tibetans by improving dental knowledge and skills of existing health staffs through health education programs.

The program is in accordance with the memorandum signed between Department of Health and the Training teams for a duration of 3 years (April 2013-August 2016). Through this project, the department aims to improve the overall capacity of the dental care providers, so that they can meet the oral health needs of the general population and the students. Similar workshops were provided to school nurses, health workers and dental therapists during the months of March 2015, December 2014, and July 2014.

#### *Dental Screening Program.*

Around 766 Students in CST Kalimpong, CST



Sonada, CST Rawangla and STS Pokhriabong School were covered under the free dental camp program organized by DOH in collaboration with dentists and nurses from Tibetan Self-Help Center in Darjeeling. This program was funded by PRM.

Ninety-eight children in Bir and Chauntra were screened and educated about dental hygiene by Dentist Dr. Pema Youdon and Dental Therapist Kalsang Choekey in a camp organized by Bir Tibetan health center.

#### *Department of Health and Taiwanese Dentists Render Free Dental Care*



A team of doctors from Taiwan Dental Association, Taiwan Health Co-op, and Cathy's General Hospital held free screening and treatment in Dehradun Tibetan Settlement. The team consisting of 4 dentists, a neurologist, and 5 dental therapists and assistants visited Ngoenga School for special children in Dehradun on 18th November, and conducted a free screening and treatment for the students.

Out of 47 students who underwent screening, 24 received tooth filling, 8 tooth extractions,



and 20 students and caregivers received scaling treatments. During the course of the medical camp, the doctors also provided dental health education on brushing and flossing.

On 20th November, they also organized a similar camp at Tibetan primary health center in Delhi. Around 99 people registered for dental camp; 55 received free dental scaling, extraction and tooth filling. Out of 77 people who registered for Neurology camp, 38 people received Neurological screening and advice.

Earlier, the organization had conducted several workshops for Tibetan dental therapists and nurses working in various settlements and schools.

### *Mental Health Workshop*



The Department of Health organized a mental health workshop at Vidyasagar Institute of Mental Health & Neurosciences (VIMHANS), in Delhi for 27 health staffs, i.e. 14 staff nurses from various Tibetan settlements in India and 14 Tibetan community health workers and nurses from Nepal. This program funded by European Union aims to improve the capacity of mental health workforce within the Tibetan community. The nurses and health workers are the primary care providers in most settlements, especially in remote and smaller settlements; such workshops



will enable them to identify individuals or families with mental health problems and in need for care and referrals.

During the five day workshop from 20th July to 24th July, psychologists from VIMHANS covered various mental health topics such as mood disorders to anxiety disorders, posttraumatic stress disorders, Non pharmacological therapy, the role of family in substance abuse and relapse's prevention, basic counseling skills, childhood mental health disorders, and adolescent mental health.

### *TMS Post Enrolment Workshop*

A post-enrollment, post-assessment TMS workshop was organized on 27th July 2015 at Dharamsala. The goal was to review the enrollment experience, scheme operational issues, and claims handling and experience. Mr. Alope Gupta, health specialist, and Mr. Deepak Mendiratta (director of HIBS) preceded the workshop highlighting the overview of workshop and the new software. The team also formulated an action plan for the next 9 months for the TMS implementation during the workshop.

### *TMS Management Training*

A training was held at Norbu House, Dharamshala on 26th-27th September 2015 to understand the concept and principals of health insurance in India and to review the current methodology for claims processing. Mr. Deepak Mendiratta spoke about claims management and identifying key elements for successful claims administration. A standard procedure (SIPOC) suppliers, inputs, process, outputs, and customers for claims management was drawn at the end of the training.

### *Health Department Holds Training on HIV Care at Vellore*

The Department of Health, CTA in collaboration with Christian Medical College, Vellore organized a four-day HIV counseling training from 9th-12th November 2015 in the city. It was the third such trainings conducted by the department with the generous funding from NCA via SARD.



A total of 21 participants took part in the training including doctors, nurses, and social workers. There were two health staff members from the department's branch health clinics, four doctors from Men-Tsee-Khang, one each from Lha Charitable Trust, Old aged home Mundgod, Nor-bu-lingka Institution, Upper TCV School, and Tibetan transit school.

The participants were provided training on how to work with people with HIV/AIDS and update information on HIV. Some of the important topics covered and discussed during the training are: Orientation to HIV counseling, Clinical features-an update, Pretest counseling and risk



assessment, Post- test counseling, Counseling children and adolescents living with HIV, Mental Health aspects of People living with HIV, Legal and ethical issues in HIV and Universal precautions and Home care management.

### *The 9th International Short Course in Clinical Tropical Medicine, CMC Vellore*

Dr. Tenzin Wangdak, our doctor from Dekyilling hospital, attended the Ninth International Short Course in Clinical Tropical Medicine, which was held in CMC Vellore from 16th-28th November



2015. About 30 doctors from different countries attended this combined clinical, laboratory and lecture based course and well-known professors like Dr. Michael from Canada, Dr. Kristine from Norway, Dr. Princilla (HOD of Infectious Med, CMC) took lecture classes on various endemic diseases through presentations.

Laboratory classes with daily 25 to 30s specimens, samples, disease related pictures and several slides for microscopic examination were demonstrated during morning seminars where several pathologists and microbiologist accompanied the trainees to guide them.

Trainees also visited patients in the ward with professors with whom discussion on chief complaints, physical examinations, laboratory finding and differential diagnosis were carried out daily. They were also given the opportunity to visit DOT center and leprosy center in the villages.

Our doctor found the training very educational and the faculty members very supportive, and believes that the training helped him gain many new skills and knowledge, which he can use to help his patients back home.

### *TMS Review Meeting Cum Workshop*





The Department conducted a two day workshop on Tibetan Medicare System at Tibetan Reception Centre on 7th-9th December 2015. The workshop was inaugurated by Honourable Sikyong Dr. Lobsang Sangay.

Over 50 participants from different settlements across India including Executive Secretaries, nurses and health workers took part in the workshop. The workshop focused on creating awareness of the scheme in the community and to develop a communication strategy for TMS. A communication consultant, a health insurance expert, and a health specialist were the key resource people during the workshop.

The workshop also aimed to build an enrollment planning for the upcoming enrolment year 2016-17. A group work was done in understanding possible modes of communication and to comprehend community perspective. A tentative plan of action was built at the end of the workshop.

#### *Clinical Training for Doctors at Taiwan*

Dr. Tenzin Tsewang and Dr. Tenzin Wangdak attended a month long clinical training held in Tai-



wan from 1st December 2015. They were trained in four departments, including family medicine and obstetrics, where faculty members expertly explained various kinds of cases that are prevalent in their region.

In the Obstetrics department, they learned how to deliver various cases of pregnancy, and diagnose diseases prevalent in females through ultrasound. In the surgical department, they got to view surgical procedures in the operation theatre, where the majority of the surgery cases were typical, non-emergency cases. In family medicine, Hepatitis and many other diseases like diabetes, hypertension, high cholesterol, were taught, which they found very helpful. They conveyed their gratitude for this learning opportunity and expressed their eagerness to put their learning into practice in their respective health centers.

#### *Basic Life support and Advance Cardiac Life support Training*

Three doctors from settlement hospitals attended Basic Life Support and Advanced Cardiovascular Life Support workshop at BGS global hospital, Bangalore from 11th-13th December 2015. The course refreshed their skills and knowledge of basic life support, which is very relevant to their daily clinical practices. As doctors, they faced serious problems in handling and managing unconscious cardiac arrest patient but now they are more confident in dealing with such cases. They were given on-screen demos on BLS and ACLS cases. Different emergency cardiac cases (e.g., acute MI, Ventricular tachycardia, fibrilla-



tion, etc.) to management were discussed. They also practiced on a dummy and were assessed by the facilitator at the end of training. Overall, they found the training very effective and meaningful because it further enhanced their skills in BLS and ACLS.

### *Revised National Tuberculosis Control Program (RNTCP) Training*



Dr. Tenzin Wangdak and Dr. Tenzin Tsewang attended RNTCP training for two weeks in Bangalore. Both the doctors felt fortunate that they were able to attend this training, and became more knowledgeable about tuberculosis (TB). TB holds the highest mortality rate in India and only 8% of people suffering from TB are following RNTCP. Many private practitioners are not following the best practices in TB treatment and should be encouraged to follow RNTCP.

TB is also a very common disease in our Tibetan community. Through this workshop, Drs. Tenzin Wangdak and Tenzin Tsewang learned about antibiotics in relation to TB, which included when to prescribe antibiotics and the uses of antibiotics for TB patients based on the different categories of TB patients (i.e., whether they are sputum negative or not, etc.). They also expressed their joy for having the opportunity to share ideas with other trainees from different parts of India.

### **News from Field Health Centers**

#### *World Hand Washing Day*

On 14th October 2015, the health centers in dif-



ferent Tibetan settlements celebrated World Hand Washing Day to increase awareness and understanding about the importance of hand washing with soap as an effective and affordable way to prevent diseases and save lives. Hospital and health center nurses' demonstrated hand washing



technique to school children and distributed sanitary materials like handkerchief, soap, and hand sanitizer to the children.

#### *World Hepatitis day 28th July 2015*

Tso Jhe Khangsar Hospital, Bylakuppe: On 28th





and 29th July, World Hepatitis Day, screening and deworming program was organized at CST and CVP School, and Drikung Kargyue monastery. Resource person Dr. Tashi Namgyal promoted awareness on what is Hepatitis B, mode of transmission, prevention and treatment through a Powerpoint presentation. A short clip about the importance of children getting all 3 shots of the Hepatitis B vaccine was also shown. Hepatitis B screening test was done on 430 school children, out of which 6 tested positive. The children who tested negative were advised to become vaccinated and those who tested positive were advised to consult a doctor. Health education pamphlets were also distributed. About 1,040 monks and children attended the programme.

*Phende Hospita, Hunsur:* The World Hepatitis Day was celebrated at Rabgyaling Tibetan Settlement, Hunsur on 28th July 2015 with the general public in the settlement community hall. The Executive Secretary gave a talk on prevention of Hepatitis. Doctor Lobsang Dhargyal from Men-Tsee-Khang branch clinic raised awareness on



Hepatitis B on basis of Tibetan traditional medicine. About 80 participants attended this talk and the program ended with loud cheers from a delighted crowd.

*Tibetan Primary Health Center, Bir:* Dr. Tenzin Dechen gave a talk at Nyingma Buddhist monastery and Dzongsar monastery on 28th and 31st July 2015, respectively, to promote awareness of Viral Hepatitis, with an emphasis on Hepatitis B. About 759 monks attended the talk.



#### *World Aids Day Observed at Various Tibetan Schools and Settlements*

World AIDS Day was observed in more than 20 schools and 15 Tibetan settlements in India. The day was observed through different awareness activities such as health talks, drama, essay and drawing competitions, and different sports activities like basketball matches, football matches, cycling and marathon race. On behalf of everyone, we would like to thank NCA (Norwegian Church Aid) for their kind funding and continued support for the program.

The sweater selling business is usually in full swing during the observation of World AIDS and as many as half of the Tibetans in India take part in the sweater selling business. The sweater selling businesses are usually in larger Indian cities. Therefore, these Tibetans are at a higher risk of HIV exposure. Under the Health Department's initiative, HIV awareness talks at sweater selling places were held. In this budget year, we were able to cover more than 25 sweater selling places from December 2015 to January 2016.

## Schools:



## Settlements and Sweater Selling Places:





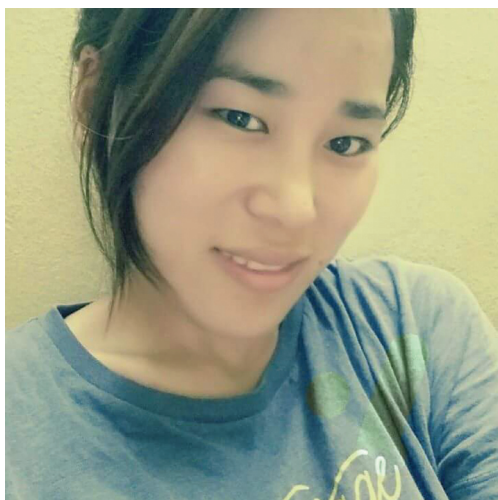
## SOLAR STREET LIGHT

DTR Hospital, Mundgod received donation of Rs 354,000/- from Mr Lingg, Member of Rotary Club, Gramisch, Germany through Sakya monastery on 18th July 2015. The donation was used to construct 18 Solar Street Lights at DTR Hospital, Mundgod. The hospital, which is located in a rural area with poor and irregular electricity supply, serves people in the Mundgod settlement and needs electricity around the clock. The irregular electricity supply proves difficult, especially during emergency cases at night. This project has been appreciated by both patients and staff.. We sincerely thank our kind donor for funding this project which has helped us ensure a safe and environmentally friendly environment in our hospital premises.



## Volunteer Experience

*My experience at CTA Health Department (10.9.15-10.03.16)*



*Tenzin Dhanzey:* It all began with a brief encounter over a notice from Tibet Corps seeking a volunteer for CTA Health Department in early September. Without much hesitation I applied for the post as it has been amongst my agenda, moreover I was confident that my nursing background would be of great help towards the project and indeed it was.

Preventive health is considered a wise trend amidst the growing burden of diseases globally, it is cheap and outweigh any treatment that costs us when we fall sick. Similarly HIV/AIDS can be controlled effectively with proper education. The disease is widely clouded by fear, guilt, misconceptions, and shame, which further adds to the secrecy and many unfortunate ones refrain from seeking help thus suffers quietly. I am therefore very fortunate that I was able

to work for the successful Collaborative initiation of CTA Health department and Teach Aids in making the Tibetan version HIV/AIDS prevention video possible.

The animation features well known Dr. Tsetan Dorji Shadutshang la and singer, song writer Mr Phurbu.T.Namgyal la which is a pleasure to watch in their animated avatar yet provides informative facts colloquially.

The successful launch and completion of the animation was very rewarding after all the hard work from many dedicated volunteers resulted fruitful. Efficient use of this animation along with clear knowledge can take us a step closer towards a community free from HIV/AIDS.

Apart from Teach Aids I was engaged in various projects of the Health department, which was again a good learning experience. I have done my best to serve the department to the best of my capacity and knowledge. I deeply thank Health Kalon Dr. Tsering Wangchuk la, and his staff for their kind support and guidance throughout my stay in the office and Tibet Corps for giving me the platform to contribute a fraction of my gratitude.

### **Health Kalon's Statement on World Hepatitis Day**

Around the world, one in twelve people are living with viral hepatitis. Many Tibetans are infected with this life-threatening disease. Yet many are unaware that they are infected and most importantly, many still don't know about this disease and ways to prevent it.

28 July, 2015 is an important day, marked throughout the world in honor of the birthday of Nobel Laureate Professor Baruch Blumberg who discovered the Hepatitis B virus. As we mark World Hepatitis Day, we strengthen our resolve to defeat this silent epidemic. From today onwards till the end of July, 2015, CTA Department of Health is urging all the Tibetan settlement offices, health centers, NGOs, monasteries and schools to organize innovative awareness and education events in the various Tibetan communities throughout India and Nepal.

Viral hepatitis is a group of infectious diseases known as Hepatitis A, B, C, D and E which cause both acute and chronic liver conditions, killing a total of about 1.4 million people annually. However, until now, Hepatitis has been largely ignored or unknown particularly in developing countries and in the underprivileged communities.

Therefore, the World Health Organization has designated this year's theme as "Prevent Hepatitis: Act Now". According to WHO, approximately 780,000 persons die each year from hepatitis B

infection. The key message conveyed by this official theme centered on the following four main issues surrounding prevention of hepatitis: know the risks, demand safe injections, vaccinate children, get tested and seek treatment. This year's theme resonates the pressing need to firstly know the risks that can result in hepatitis infection which include unsafe blood, unsafe injections, and sharing injection equipment. Secondly, the message stresses the importance of using safe injections. About 2 million people a year contract hepatitis from unsafe injections. Therefore, using sterile and single-use syringes can prevent these infections. Thirdly, this year's theme emphasizes the importance and need for safe and effective vaccination to protect oneself from Hepatitis B infection for life. Most importantly, getting testing and seeking effective treatment can help to treat Hepatitis mainly Hepatitis B and C.

Hepatitis means inflammation of the liver and also refers to a group of viral infections that affect the liver. The most common types are Hepatitis A, B and C. Viral hepatitis is also the leading cause of liver cancer. Hepatitis is caused by a group of viruses known as hepatitis viruses. Hepatitis A is usually spread by eating or drinking food or water contaminated with its virus. Whereas hepatitis B is also a sexually transmitted disease, spread only from infected mother to child, direct contact with infected blood, semen and other body fluids. Hepatitis C is spread most commonly through direct contact with the blood of a person who is infected.

All forms of viral hepatitis pose serious health threats, but building public awareness can help prevent new cases and more effectively treat this disease. A safe and effective vaccine protects against hepatitis A and B. While there is no vaccine for hepatitis C, early detection and therapy can prevent liver damage, cirrhosis, and liver cancer; reduce the risk of death; and potentially cure the infection.

In the context of the Tibetan population inside and outside Tibet, CTA Department of Health recognizes Hepatitis B as a major public health problem. High cost of the Hepatitis B diagnostics along with expensive treatment lead to loss of lives, associated disabilities and poor quality of life; and huge economic burden to the infected individuals and their families.

Lack of accurate prevalence data about Hepatitis B was a significant hurdle for the Health Department to further plan appropriate initiatives to control Hepatitis B among the Tibetan community. Therefore, Health Department in collaboration with John Hopkins University conducted a prevalence study of Hepatitis B in 2013 among a sample of 2769 people in a Tibetan settlement in South India. As per the findings, the prevalence of Hepatitis B has been reported as 8.9% among the Tibetan population in India. The prevalence of Hepatitis B is highest in the age group of 35-50 and it is slightly more among males than in females. The study also concluded that prevalence of hepatitis B is lower among those who had previously vaccinated and whose family members are not currently infected.

To reduce the burden of Hepatitis B, Department of Health is actively engaged in planning and implementing hepatitis B control initiatives. Under the Mother and Child program, all children under five years of age are being provided free hepatitis B vaccination and Hepatitis B immunoglobulin is provided free of cost to the newborns of the infected mother. However, it is important to screen and provide vaccination to children above 5 who might have not been previously vaccinated since the risk of chronic Hepatitis B and liver cancer is greater among those who have been infected with Hepatitis B at a younger age. Therefore, through the generous funding of Leis Amis through SARD, we have been implementing a "Hepatitis B prevention project" among the Tibetan school children to screen, vaccinate and treat a total of 2000 school children between the ages of 6 and above. This project started in August of 2014 in 11 Tibetan schools in India namely STS Chauntra, STS Poanta, STS Dekyiling, Ngoenga School for children with special needs, CST Kalimpong, CST Darjeeling, CST Mungod, CST Dalhousie, CST Mussoorie, CST Shimla and STS Puruwalla. As of now, a total of about 2526 children have been screened for Hepatitis B. And, a total of about 1817 students are currently being vaccinated for the three doses of Hepatitis B with the first two doses of vaccination already completed. In addition, a first phase of training titled Clinical Management of Hepatitis B training was held on 14 March, 2015 in which a group of about 45 health personals participated.

Resource persons from PGI, Delek Hospital and Tanda coordinated this workshop. This training was funded graciously by the Tibet Relief Fund.

In early 2015, we had provided Hepatitis B viral load testing free of cost to 175 hepatitis B positive patients residing in 11 settlements in India namely Sataun, Kamrao, Dekyiling, Herpertpur, Poanta, Bir, Ladakh, Kullu, Miao, Tezu, Ravangla, Bandara, Orrisa and Mainpat with funding support of PRM, USA.

Furthermore, we implemented a Hepatitis B needs assessment among the Sonamling Tibetan settlements in Ladakh and Jhangthang region in May, 2014 in collaboration primarily with University of Rochester and secondarily with University of Hawaii. It was aimed to understand the perceptions and level of awareness about Hepatitis B among the local Tibetan population in Ladakh. The project has been successfully completed and the findings will be released very soon. We hope that the findings would give important qualitative understanding about the problems faced by the general public with regard to Hepatitis B which would in turn assist us in evidence based planning of future hepatitis B control program for the Tibetan community particularly in providing assistance for screening and treatment support among the needy people.

In addition to these abovementioned efforts, the most important way to control Hepatitis B among our community is through prevention and better awareness about Hepatitis B. Since last year's world Hepatitis B, we have launched an awareness campaign titled "Get Three Hepatitis B Vaccines" through posters and an educational video, which proved beneficial in motivating the community members to get the three complete doses of Hepatitis B to prevent this illness. CTA Department of Health continues to work towards greater awareness about Hepatitis B through mobile health education, health education sessions by field health workers and publication of educational brochures in both Tibetan and English. Therefore, I would like to request everyone to:

1. Get tested for hepatitis B and to seek clinical guidance at your respective health centers in case you need treatment.
2. Get the three complete doses of Hepatitis B vaccination at your health center, which is the best way to prevent Hepatitis B and liver cancer.
3. Take precautions like avoid sharing of needles and tooth brushes and to always have protected sex with your partner.
4. If you are pregnant and are Hepatitis B positive, your newborn must receive Hepatitis B immunoglobulin just after birth to prevent Hepatitis B.
5. If someone in your family is hepatitis B infected, it is important for other family members to get screened and vaccinated appropriately.
6. I urge all institutions and people not to discriminate against people living with Hepatitis B at both the individual and community level.
7. Lastly, protect yourself, your family and, most importantly, your children from Hepatitis B by getting vaccinated or get effectively guided and treated if you are infected.

I therefore, encourage every Tibetan to commit him/herself to knowing more about this disease and ways to prevent it. I am positive that through collective efforts of the health department, general public, monastic communities and school administration; we would be able to strengthen and mobilize the Hepatitis prevention and awareness with the larger goal of total elimination of this deadly Hepatitis B from the Tibetan community.

I seek your genuine support and motivation in fulfillment of a Hepatitis B free Tibetan community on this World Hepatitis Day. I would like to thank all the supporters and well wishers of the health department who have financially supported the Hepatitis B prevention projects within the Tibetan community so far and we are hopeful about continuing support and collaboration.

I request all the Tibetans to actively participate in Hepatitis awareness events and take responsible steps to prevent the spread of Hepatitis, particularly Hepatitis B, both at the individual and the community level.

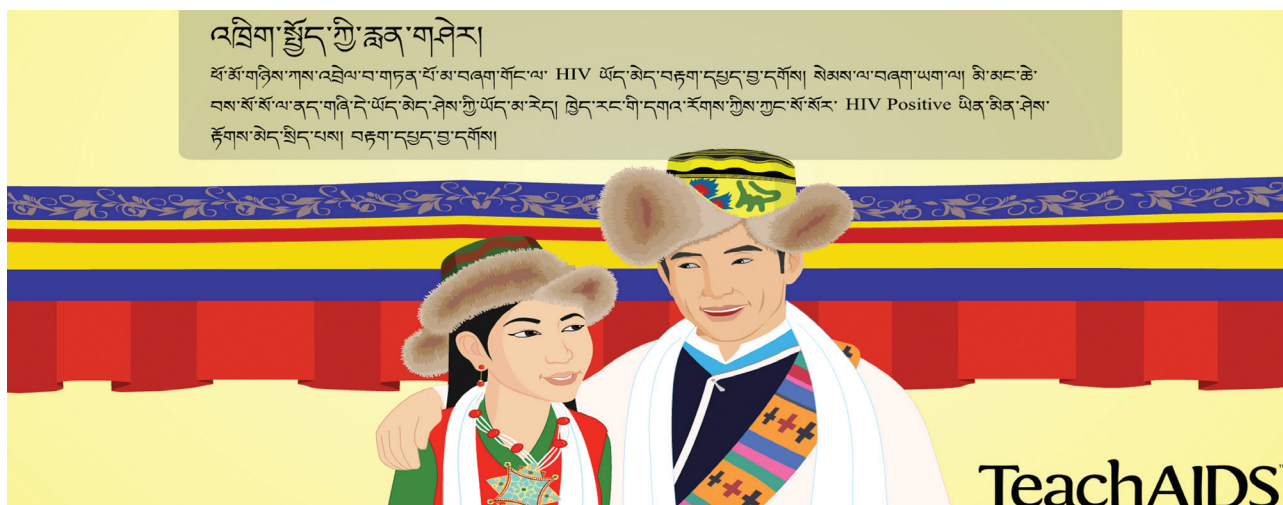
## Health Kalon's World AIDS Day 2015 Message

Today on 1st December 2015, we commemorate yet another World AIDS Day to act against the deadly disease HIV/AIDS. We choose this particular day in order to highlight the global and local plight caused by this disease, and to remind ourselves to renew our sincere governmental and personal efforts to combat the spread and burden of this disease. According to WHO statistics in 2014, there were a total of 36.9 million people living with HIV, of which 2.6 million are children less than 15 years of age. In the year 2014 itself, a total of 2 million people were newly infected with the virus and 1.2 million people had died of AIDS. The statistics clearly show that the disease still continue to endanger our lives and that even after varied efforts, we still need to put more efforts in getting to 'zero infections', as per the theme highlighted by the Global Steering Committee of the World AIDS Campaign (WAC). The multi-year theme chosen from year 2011 to 2015 is "Getting to Zero: Zero new HIV infections. Zero death from AIDS-related illness. Zero discrimination." The HIV and AIDS disease have become a global crisis that affect every corner of the world. We know that there is no cure for HIV, but it is very much preventable. Therefore, the single best way to stop the advance of HIV and AIDS is through education.

Within our Tibetan society itself, there are varied focuses of the population that can be considered vulnerable to this deadly disease. The Tibetan community, like many other conservative cultures around the world, faces difficulties around openly discussing this condition due to cultural stigmas and sensitivities as well as a serious lack of comprehensive education on the subject. The Department of Health of the Central Tibetan Administration has an ongoing HIV/AIDS Control Program funded by the Norwegian Church Aid (NCA) that looks after the welfare of HIV positive Tibetans in its Indian diaspora. The goal of the program is two-fold; prevention of new infection, and supporting those living with HIV both in terms of medical treatment in order to live a long healthy life, and social empowerment in order to live a productive life without discrimination. The program has an extensive preventative aspect that focus on prevention for the general population, including a special focus every year on youngsters and school-aged children. Today is commemorated everywhere in the Tibetan settlements across India through the department's health centers, and in the various schools run by the CTA as the World AIDS Day. We commemorate this day to educate each other about the disease and to remind ourselves of our efforts to prevent new infections and treat those already infected in order to create an AIDS-free community and an AIDS-free world in the future.

I have recently invited the TeachAIDS team led by its CEO, Piya Sorcar, to Dharamsala to discuss the unique challenges of providing HIV education to Tibetan communities around the world. My relationship with TeachAIDS go way back to when I used TeachAIDS materials to educate Tibetan school children about HIV and AIDS in the Tibetan settlements in Bylakuppe and Odisha. TeachAIDS is an award-winning non-profit social enterprise launched by the prestigious Stanford University in the





US. They develop health education materials that are culturally sensitive and medically precise, while being simple enough to be understood by all segments of society. The TeachAIDS movement, being used in more than 70 different countries of the world, has been a global success in imparting culturally appropriate education on HIV and AIDS through the use of a breakthrough software animation video.

Today, I have a very special announcement to share with you all. I am honored to inform you all that the Department of Health of the Central Tibetan Administration has formalized a partnership with TeachAIDS to develop a special animated HIV education material in our own Tibetan language that is respectful of our Tibetan culture and custom. I have admired their materials and leadership for years and I am immensely pleased to inform that this special TeachAIDS educational animation will be made available free of cost in Tibetan language to everyone. The Department of Health would like to thank TeachAIDS and the many volunteers we had for their significant contribution in developing this creative venture that is bound to help Tibetan communities everywhere in the world. I would also like to thank Dr. Tsetan Dorji Sadutshang and Phurbu T Namgyal for their contribution and cooperation in donating their time and voices for creation of this animation video.

The whole month of December has been dedicated for HIV/AIDS awareness campaigns targeted at educating Tibetan people at various settlements, schools and sweater-selling places across India and Nepal. Currently, the department has over 30 people living with HIV program beneficiaries who regularly seek support and over 60 people living with HIV registered. We encourage more people with HIV to come forward and seek support in order to live a long healthy life.

The future of our community rests with all of us. Together, we can stop the spread of HIV and AIDS.



### List of Donor from 1 July to 31 December 2015

TVHA, Department of Health expresses our deep appreciation and thanks to all the Donors and Volunteers. We would like to request your continued support to achieve our goals.

S.No	Donor	Country	Amount (Rs)	Purpose of Donation	Received On
1	Tsamchoe Dolma	USA	6,000.00	H.H Dalai Lama Birthday gift to Leprosy patient	01.07.15
2	Yeshe Norbu	Italy	638,808.00	Eye camp at Miao, Tuting, Tezu & Tenzingang	07.07.15
3	Association Trentino for Tibet	Italy	729,139.00	Hepatitis B Prevention program	08.07.15
4	Tibet House Trust	London	974,618.00	Recurring expenses of Health clinic	08.07.15
5	SOIR-IM Via SARD, CTA	Sweden	300,000.00	SOIR-IM Project	13.07.15
6	Africa Tremila	Italy	34,309.00	Central Heating System (Sundry Transit) of Sonamling health center, Ladakh	13.07.15
			43,013.00	Dental Clinic Project at Sonamling	13.07.15
7	Tibet Relief Fund	London	1,333,728.00	7 Doctors Salary	17.07.15
8	USAID Via USA Embassy	New Delhi	49,705.00	Torture Victims Final Report Book	28.07.15
9	AET Via CTRC, CTA	France	273,480.00	Ngoenga School grant	28.07.15
10	PRM Via SARD, CTA	USA	725,773.00	Dispensary Recurring Expenses	30.07.15
			664,687.00	Dispensary	
			625,223.00	Health Education & Training	
			677,406.00	MCH	
			949,644.00	US TB Control	
			1,613,321.00	EMRF	
			1,375,509.00	Handicapped & Disables	
			379,956.00	Torture Survivors Program	
			176,612.00	Substance Abuse Control	
			1,366,799.00	Water & Sanitation	
			113,194.00	HIS	
11	Yeshe Norbu	Italy	437,470.00	Dispensary Recurring Expenses	05.08.15
12	Vimala Association Via Debbie Carrani	Italy	2,066,135.00	Ngoenga school Renovation	05.08.15
13	The Tibet Fund	USA	602,517.00	Eye Camp in Doon Valley, Sirmour & Ravangla	07.08.15

14	Health Co-Op Organiza- tion	Taiwan	40,000.00	Dental material at TPHC Miao	11.08.15
15	Sunday School for Ti- betan Language	London	7,000.00	Ngoenga school general dona- tion	13.08.15
16	PRM via SARD, CTA	USA	1,382,694.00	EMRF	17.08.15
17	Tibet House Trust	England	805,878.32	Torture Victims Project	27.08.15
18	SOIR-IM via SARD, CTA	Sweden	406,000.00	Health Education	29.09.15
19	Mr. Lhakpa Sigrist	Switzerland	30,000.00	Sponsorship of Ngoenga school	15.10.15
20	NCA via SARD, CTA	Norway	713,432.00	HIV & Substance Abuse Campaign & Medical Support	26.10.15
			371,424.00	Gynecology Health care & Training of Health worker	
21	Shenpen Tibet Aid	Norway	143,520.00	Health Project at Sonada	28.10.15
22	PRM via SARD,CTA	USA	14,341,318.00	Basic Health Care	16.11.15
23	Tibet House Trust	England	231,601.00	Torture Survivors Program	17.11.15
			997,699.00	Recurring Expenses for Health clinics in North East India	
24	German Aid to Tibetans	Germany	915,511.00	Purchase of Ambulance at Menlha hospital, Odisha	17.11.15
			69,183.00		02.12.15
25	The Tibet Fund	USA	11,027,210.00	USAID-TVHA Field Advance	01.12.15
			34,913.00	TTF Office Cleaning service	01.12.15
			420,496.00	Sponsorship of Ngoenga school	01.12.15
26	Art Tibet Cham Sem	France	128,885.00	Renovation work at TPHC Bir	09.12.15
27	German Aid to Tibetans	Germany	265,546.00	Eye Camp Fund	09.12.15
28	The American Himalayan Foundation	New York	801,278.00	Ngoenga school Nutritional diet	09.12.15
29	SOIR-IM via SARD, CTA	Sweden	280,000.00	Health Education	22.12.15
30	Passeport Tibetain	France	399,372.00	Purchased of Generator at DVT Kollegal	23.12.15
31	Vimala Association	Switzerland	722,009.00	Tso Jhe Maternity Ward	29.12.15
			71,840.00	Tso Jhe TB Ward food	
Total			50,763,855.32		

**TVHA staff update from July to December 2015***New Appointment:*

S.No	Name	Designation	Place	Dated	Remarks
1	Rinchen Norbu	Accountant	TPHC Ladakh	15.07.15	
2	Nyima Bhuti	Physiotherapist	DVT Hospital, Kollegal	01.08.15	Contract
3	Tenzin Lhamo	Lab/X-ray Technician	TPHC Odisha	10.08.15	
4	Pema Dolma	Ophthalmic Technician	Tso Jhe Khangsar, Bylakuppe	01.09.15	
5	Tsering Bhuti	Staff Nurse	Tso Pema/Pondoh clinic	07.09.15	
6	Tenzin Loden	Staff Nurse	Delhi clinic	07.09.15	
7	Namgyal Dolma	Accountant	DTR Hospital, Mundgod	01.10.15	
8	Tenzin Paldon	Staff Nurse	Tenzingang clinic	05.10.15	

*Resignation:*

S.No	Name	Designation	Place	Dated	Remarks
1	Kelsang Choezom	Ophthalmic Assistance	DVT Hospital, Kollegal	01.07.15	
2	Choney Dolma	Registered Nurse	Tenzingang clinic	01.07.15	
3	Dr. Tenzin Dechen	Medical Officer	TPHC Bir	28.08.15	
4	Sonam Tsering	Lab/X-ray Technician	DTR Hospital, Mundgod	25.09.15	
5	Passang Dolma	CHW	Sataun clinic	30.09.15	
6	Tenzin Tsephel	Accountant	PHC Bandara	01.10.15	
7	Tsering Wangmo	Sweeper	DTR Hospital, Mundgod	04.12.15	
8	Chungdak	Accountant	TPHC Mainpat	25.12.15	

*Transferred:*

S.No	Name	Designation	From	To	Dated
1	Namgyal Lhayang	Pharmacist	Phende Hospital, Hunsur	DTR Hospital, Mundgod	03.07.15
2	Ngawang Lobsang	Pharmacist	DTR Hospital, Mundgod	Tso Jhe Khangsar Hospital, Bylakuppe	14.07.15
3	Yeshe Lhanzom	Pharmacist	Tso Jhe Khangsar Hoapital, Bylakuppe	Phende Hospital, Hunsur	20.07.15
4	Rinzin Dorjee	CHW	Tenzingang clinic	Tuting clinic	14.12.15
5	Tenzin Phuntsok	CHW	DVT Hospital, Kollegal	Tso Jhe Khangsar Hospital, Bylakuppe	30.12.15
6	Migmar Tashi	Executive Secretary	Tso Jhe Khangsar Hoapital, Bylakuppe	Dept. of Health, CTA	03.03.16

*Retirement Extension:*

S.No	Name	Designation	Place	From	To
1	Dickyi Kari	ANM	PHC Dekyiling	27.04.15	26.04.2016

## Department staff update from July to December 2015

### *New Appointment:*

S.No	Name	Designation	Place	Dated	Remarks
1	Tsewang Yangtso	Office Assistant	Dept. of Health	05.09.15	
2	Dhondup Tashi	Junior Clerk	Dept. of Health	05.09.15	

### *Transferred:*

S.No	Name	Designation	From	To	Dated
1	Tenzin Sangmo	Junior Clerk	Dept. of Health	DIIR	05.09.15

### *Resignation:*

S.No	Name	Designation	Place	Dated	Remarks
1	Trinley Palmo	Deputy Secretary	Dept. of Health	23.07.15	
2	Tenzin Tseyang	Under Secretary	Dept. of Health	15.12.15	

## Ngoenga School

### *New Appointment:*

S.No	Name	Designation	Place	Dated	Remarks
1	Karma Dolma	Foster Mother	Ngoenga school	01.07.15	
2	Tenzin Igyen	Teacher	Ngoenga school	01.07.15	
3	Tsamchoe	Teacher	Ngoenga school	02.11.15	

### *Resignation:*

S.No	Name	Designation	Place	Dated	Remarks
1	Yeshe	Foster Father	Ngoenga school	01.07.15	
2	Phurbu Lhamo	Foster Mother	Ngoenga school	01.07.15	
3	Tenzin Namdol	Physiotherapist	Ngoenga school	01.07.15	
4	Tenzin Phuntsok	Teacher	Ngoenga school	01.07.15	
5	Tsering Chokyi	Foster Mother	Ngoenga school	01.08.15	
6	Delek Wangmo	Headmistress	Ngoenga school	01.11.15	

### *Tibet Corps, Volunteer*

S.No	Name	Designation	Place	Duration
1	Tenzin Choenyi	Dentist	Tso Jhe Khangsar, Bylakuppe	01.05.15 01.10.15
2	Tenzin Dhanzey	Assistant to Project	Department of Health, CTA	10.09.15 10.03.16

## **Volunteer Information Corner**

### **Ways to Give, Volunteer Opportunities**

The department runs 7 hospitals and 4 primary health centers and 38 clinics spread across India and Nepal and 1 Special School, the first ever CTA run school for Tibetan children with special needs for India, Nepal, Bhutan and Tibet. More information: ([www.ngoengaschool.org](http://www.ngoengaschool.org)).

The hospitals offer opportunities for everyone to share their time, talents, and interests to support our mission in the community. Doctors, nurses and other medical volunteers are most welcome to serve our hospital and health centers to provide medical care, health education, and humanitarian assistance to Tibetan refugees in need. We will do our best to help you in whatever way we can during your stay.

### **Information for the Medical Students and Interns**

The hospitals will give you information that may be of interest to you as a medical student. The more you know and understand about our hospitals before you decide to come, the better it will be for all.

As a medical student you are allowed to observe patients only under supervision of doctors. You are expected to be present during normal working hours each day. Board and lodging are to be arranged by you.

You are required to send your CV and a reference letter from your present University. You are also required to send a monthly fee of US \$50 by cheque or via Western Union in the name of any CTA DOH's hospital. The cheque, or wire, should be in Indian Rupees as our bank here does not accept foreign currency cheques in small amounts. Cancellation of your visit should be notified to the hospital's elective co-ordinator at least two months in advance. However, the monthly fee is non-refundable.

NB: The above information gives priority to registered medical students already on courses. Pre-registration medical students will only be allowed if space permits. Tibetan pre-medical or medical students living in India, Nepal and Bhutan will be offered placements without making an advance booking, but the student will be subject to completion of hospital formalities by sending us his/her CV and reference before their arrival. They are exempted to pay elective fee. Failing to meet these requirements may hamper their placement with us.

### **Do you want more information?**

If you are genuinely interested in working at CTA DOH hospitals as a medical student, you can send an e-mail: [health@tibet.net](mailto:health@tibet.net) and we will send you additional information.

# HOW YOU CAN HELP

## YOU CAN SPONSOR A FREE MEDICARE FOR A POOR FAMILY OF FIVE AT \$ 55 A YEAR

For details, Please contact Tibetan Medicare Division of CTA, Department of Health @ [tms@tibet.net](mailto:tms@tibet.net) and [health@tibet.net](mailto:health@tibet.net)

### HOW YOU CAN HELP MOST IMPORTANT PROJECTS IN 2015-2016

Central Tibetan Administration's Department of Health (Tibetan Voluntary Health Association) works to improve the health of Tibetan refugees in India, Nepal and Bhutan. Following are the Health Programs and Projects run by Department of Health or Tibetan Voluntary Health Association that urgently need your help.

1. Kalachakra 2017 Medical Camp
2. Support Ngoenga Home School
3. Kollegal Hospital Staff Quarter construction
4. Support for Hepatitis B Awareness, Training, Testing, Vaccination and Treatment
5. Mobile Health Clinic for Tibetan refugee nomads at Ladakh Jangthang
6. Extensive renovation of DTR hospital of Tibetan settlement at Mundgod
7. 100 Toilets for Tuting Tibetan settlement
8. Resident Doctors' Quarters Construction for Miao Primary Health center
9. 200 Composite toilets for Ladakh Settlement and Jangthang
10. Dental Chair and equipments for Hospitals and Health centers at Hunsur, Mainpat and Poanta
11. Free Eye surgery camps
12. Ambulance for Hospitals and Health centers at Kollegal, Ravangla and Mundgod.

*Please make donation by Cheque/bank draft/IMO payable to Tibetan Voluntary Health Association towards any of the Projects and programs mentioned above.*

#### Bank Detail

A/c Holder - TVHA  
A/c Number - 11510100000519  
UCO Bank, CTS  
Gangchen Kyishong  
Dharamsala-176215  
Distt. Kangra (H.P), INDIA

SWIFT CODE - UCBAINBB238  
PAN - AAATT1509K  
TAN - PTLT10935B  
IFSC - UCBA0002059  
[www.tibetanhealth.org](http://www.tibetanhealth.org)  
[www.tibet.net/health](http://www.tibet.net/health)  
Email: [health@tibet.net](mailto:health@tibet.net)