We’re all helping build the new clinic

Work on the new Sambhavna Clinic in Bhopal has begun, aided by a gift from the Pro Victimis Foundation, Geneva and supported by the Bhopal Medical Appeal, which means all of us. This is a real achievement for a group of ordinary people, mainly in the UK, who have been unable to stand by and allow the Bhopal gas-survivors to be abandoned to their suffering. A huge thank you to everyone. Now with the 20th anniversary of the disaster only months away, we’re going all out to guarantee our clinic a secure future. This special issue is full of news from Bhopal and of ideas for things that we can all do to help.
NEHA HOLDS OUT HER HANDS. They are covered with oozing sores that will not heal. Neha is 6 and lives in Atal Ayub Nagar, one of the savagely poor Bhopali communities whose water is poisoned by chemicals leaking from Union Carbide’s factory. *Try to imagine yourself there*. You are standing, in heat and brilliant sunshine, in a lane about eight feet wide, bordered on either side by ramshackle shanties, built of whatever materials came to hand. Some have no doors, just pieces of sack cloth hung across openings through which you must duck to enter. The interiors are dark and smoky. In one of these houses you meet Hasina Bi. She is perhaps 35 years old (she does not know herself) but looks 60. She tells you that people in her family, like so many others in the neighbourhood, suffer from mysterious illnesses that began after they moved here and have never left them since. Hasina has abdominal pain that feels like cramps, a headache that never seems to lift. From time to time her skin erupts into boils and festering sores. Children in the neighbourhood hardly seem to grow.

It’s the same in other nearby communities. Look at the picture on the opposite page. The boy on the left, his name is Shakeel. How old would you say he is? (There’s a bigger picture of him, and his mother talks about his birth, on pages 8 and 9 of this newsletter. He was 15 when the picture on page 8 was taken and 17 when the shot opposite was taken in 2002 by Raghu Rai. Shakeel talks about his own life in a moving interview which you can find on [http://www.bhopal.org/appeals/shakeel.pdf](http://www.bhopal.org/appeals/shakeel.pdf))

Shakeel comes from Jayprakash Nagar, where twenty years ago Carbide’s gases worked their greatest slaughter. Today the wells stink from chemicals, leaching from the same dead factory across the road.

Let us walk a little way along this road staying beside the factory wall until it turns and runs north beside a railway line. We cross the tracks and pick our way through rough ground to a collection of makeshift dwellings perched on the very edge of the railway. This is Annu Nagar.

Here we meet Zarina, who is 12. Her face is twisted and one of her legs is crooked. Her house backs onto the tracks across which is the wall of the factory. Just on the other side of that wall, Carbide dug test pits to test the soil and water. The people of India Carbide make the soil and water just for the factory. Fish placed in the water died immediately, ‘100% instant toxicity,’ says the company’s own report. But Carbide kept quiet.

Savitri Bai appears. She is eager to speak to you, to tell the horrifying story of this community. She leads you to the hand pump next to her house and urges you to taste the water. Not a good idea. French writer Dominique
Lapiere (a good friend, read his book *Five Minutes to Midnight in Bhopal*) drank a glass of it and reported:

I recently wanted to test the aggressiveness of this pollution by drinking half a glass of the water of one of those wells. My mouth, my throat, my tongue instantly caught fire, while my arms and legs suffered an immediate skin rash. This was the simple manifestation of what men, women and children have to endure daily. (Mercy for the Martyrs of Bhopal, *Le Monde*, July 2002)

Savitri says her husband has been sick for the past two years and is unable to work. In a neighbour’s house, you meet Rashid who is 13, and mentally handicapped. His fingers are curled into his palm. He can’t open his hand and he moves like a marionette, yanked by invisible wires.

In Blue Moon Colony, which stands next to what’s left of Carbide’s chemical dumping grounds, you meet Aqeela Bee, 35 years old who has periods 2 or 3 times a month and 33 year old Shahajahan who hasn’t had one for 8 years. You learn that such problems are legion among local women.

You meet Qamar Sultana and Munni Bee who have cancers and 30 year-old Fazilat who can’t have children after one malformed delivery was followed by a string of miscarriages. A woman, Jameela, confides that ‘too many children’ are being born with birth defects.

In a tiny house, spotlessly clean, you meet the parents of Iqbal and Zarina, both of whom are in their teens and have congenital malformations. Says their mother, ‘Union Carbide will live forever, but we will not.’

Union Carbide must be forced to clean up its poisons. These people must be helped. What we can do is of course what this newsletter is all about.

and waits for us to die’

Saat saat saat in Hindi means together together together, but can also mean 777. The Bhopal Medical Appeal began in 1994, when a man from Bhopal came to Britain to tell people about the continuing plight of the Union Carbide gas victims. The survivors realised they must help themselves and wanted to open their own free clinic. They were joined in the UK by a few individuals who were in turn joined by you and others. Together together together – survivors, clinic staff and those in this country, together we are the Bhopal Medical Appeal.
TO SUPPORT THE CLINIC people have done marathons and fun-runs, sung carols, held quiz nights, left legacies, hosted poetry and performance nights, asked for donations instead of birthday presents. Each gift, be it never so small is precious. A gift is more than money. It brings hope, it helps people in a poisoned world hold onto a belief in human goodness. Thank you all.

Here are just a few stories. Please send us your own and don’t forget a picture.

Ella, 9, wrote, ‘Dear Bhopal Medical Appeal, I saw your article in the paper. I wanted to send some money to help the children.’ Thank you, Ella.

A poetry night at the Hen and Chicks pub in Abergavenny raised £115.

Fiona Case and friends in Pilton held a jumble sale. (pictured below, front l to r, Tony, Miranda, Fiona, Catherine, Paula and Polly, back, l to r, Margaret & Ruth). Fiona helps organise the Glastonbury Festival and said that if we raise a team of litterpickers the Festival will donate £100 for each person taking part, so we have put together a large team.

Carys, her brother Jack and mum Denise (pictured above) ran a 10 km Christmas Pudding Race in Bridgend and raised £150. Denise is a reflexologist and is impressed by the use of yoga and herbal therapies at the clinic).

A friend has given £1,000 towards an ultra-sonograph machine, which will go straight into the new clinic.

Durham Quaker group collected £58.40 after their meeting for worship.

Last year’s Class 5/6 at Kellands Primary School, Aberdeenshire, raised £300 by holding a ‘bring and buy’ sale as part of their project on India.

The Students Association One World Society in St Andrews raised £93.20 for Bhopal at their Fairtrade Café.

Andrew and Melanie Eve Hay celebrate their 1st wedding anniversary in April. At their wedding they asked people instead of giving wedding presents to donate to two favourite charities and thus raised £250 for Bhopal.

Thank you to the Paget Trust.

Thanks to our friends at Greenpeace in Germany, whose members have given to the Medical Appeal over the years.

3 Survivors write:

I HAVE BEEN treated at Sambhavna for four years. I got very sick after the disaster. My main problem was and is that I get breathless with the slightest exertion, a little walk, a few steps to climb, even talking. Some attacks leave me gasping for air. After the disaster I continued going to our family doctor until I had no money left to pay him. I had given up all hope of living and had accepted that I would die for want of treatment. Then I found out about Sambhavna. Here I found the possibility and the will to live and I’ve had much relief. All treatments, even expensive inhalers are given to me free and Kamal-bhai always checks that I am using it properly. I’ve started making dhoklas (a chickpea flour snack) and my son sells them to restaurants who buy them wholesale. Life is easier now. I thank Sambhavna and the donors without whom there would be no Sambhavna. To so many people like me they have given a new life.

Kamlesh Varma
Rashida Bi and Champa Devi Shukla win the Goldman Prize

Meet them and Sathyu Sarangi, Managing Trustee of Sambhavna, in May in Brighton

Before there was Sambhavna, the only place you could go for treatment was the government hospitals, but in these places people are treated like animals. The doctors do not check the pulse, measure blood pressure or do the most simple examinations. The medicines are of poor quality and often people are asked to buy drugs which they can’t afford. Sambhavna shows how medical care ought to be given. Because of the donations sent in response to the appeals made by our friends, more than 12,000 people have been able to get free and compassionate treatment at Sambhavna. I thank the donors for their concern for us Bhopalis and hope their support will continue.

Rashida Bi

Many of us live in communities where the soil and water are poisoned. We have constant stomach aches, burning in the chest, abdominal pain, dizziness and other problems. It is good that Sambhavna takes care of sick people from these communities. Many people came to Bhopal after the disaster and the government hospitals meant for gas-survivors refuse to treat them. Tens of thousands have nothing left from the tiny compensation and no job they can do. They can’t afford to buy medicines prescribed by government doctors. It is good that all medicines prescribed at Sambhavna are given free to the people. As survivors we’re touched and honoured by the feelings that donors who support Sambhavna have for the ordinary people of Bhopal.

Champa Devi Shukla

The Goldman Environmental Prize is awarded each year to six ‘heroes of the environment’, one each from Africa, Asia, Europe, Island Nations, North America and Central/South America. The largest and most highly regarded award of its kind, it has been called ‘the Nobel Prize of the environmental movement’.

The 2004 prize for Asia has been won by two women from Bhopal and we are proud to report that they are old friends who both receive medical care at our Sambhavna Clinic.

The Goldman Prize is awarded ‘for sustained and important efforts’ to protect the environment, including striving for environmental justice. Rashida and Champa Devi have won it in recognition of their long struggle to gain justice for the victims of Union Carbide’s Bhopal gas disaster and to compel the company to clean up the contamination at its derelict factory.

In 1989, Rashida and Champa led a group of 80 women, 12 men and 40 children on a walk from Bhopal to Delhi, through 400 miles of jungles and bandit-controlled mountains, to see the Prime Minister.

Their organisation of women survivors has spearheaded efforts to bring Union Carbide to court in Bhopal and in the US.

Champa is a granny who once famously chased Dow’s European CEO with a broom.

Rashida and Champa are visiting the UK in mid-May, with Sathyu, who runs our Clinic. We are organising an event so you can meet them all. Please email 777@bhopal.org for details.
Sambhavna at work

photos and collage: maude dorr
THIS COLLAGE (left) was made at a recent women’s yoga camp run by Nivritta Durgvanshi, yoga therapist at Sambhavna. The Hindi banner on the wall of the tent reads, Sambhavna Trust Clinic Welcomes You. Everything about that day, including the gay colours of the tent, was meant to inspire a sense of joy and freedom from care.

Nivritta has recently carried out some important research into using yoga to treat diabetes.

We do not yet know why, but many survivors of Union Carbide’s gases have developed diabetes, treatment for which is expensive and frequently unavailable at Bhopal’s government hospitals.

The research, which took place between December 2000 and mid-September 2002, involved two groups of 25 persons: a control group who took conventional modern medicines for diabetes, and a test group who took the same medicines, but in addition did yoga.

Results were based on fasting- and after-meal blood sugar levels and medicine doses, smaller doses indicating an improvement in the condition. People were tested every 15 days for four months.

At the start only two people in the yoga group had normal (70 - 110 mg/dl) fasting blood sugar. After 15 days of yoga twelve persons had normal fasting blood sugar. At the end of four months ten people consistently had normal fasting blood sugar.

In the non-yoga group, at the start five persons had normal fasting blood sugar. After 15 days eight people showed normal levels and at the end of the four months seven persons consistently had normal fasting blood sugar.

<table>
<thead>
<tr>
<th>Number of people with consistently normal levels of fasting blood sugar</th>
<th>At the start</th>
<th>After 15 days</th>
<th>After 4 months</th>
</tr>
</thead>
<tbody>
<tr>
<td>yoga group</td>
<td>2</td>
<td>12</td>
<td>10</td>
</tr>
<tr>
<td>control group</td>
<td>5</td>
<td>8</td>
<td>7</td>
</tr>
</tbody>
</table>

The number of people with abnormal levels of fasting blood sugar (> 150 mg/dl) dropped from 18 to 7 in the yoga group with no such decrease in the control group.

After-meal blood sugar values gave similar results.

In the yoga group we were able to reduce drug usage for 19 out of 25 people. Two people no longer needed any drugs. None in the control group were able to lower their dosage and 19 people had to have their doses increased.

YOGA ASANAS FOR DIABETES

Describing yoga asanas, or postures, in words is rather like trying to describe the extraordinary asanas of the Kama Sutra, indeed, the asanas often share the same names.

Gomukhasana involves folding both legs in and placing left knee over right then taking left hand behind the back and the right band behind the shoulder, clasping both hands at the back and touching forehead to left knee.

Instead of attempting the impossible, here are some pictures (lifted from a typical Indian yoga manual) of a few of the relevant postures.

We are thinking of producing a slim booklet in which Nivritta demonstrates and talks about the asanas she teaches at Sambhavna to treat a variety of conditions including breathlessness and asthma. If you think this is a good idea please email us at editor@bhopal.org and it shall be done.

All asanas, pranayama and shodhanakriya used at Sambhavna follow the practise of the Bihar School of Yoga, an internationally recognized institution.
Canadian researchers to study hidden effects of exposure to poison gases

A VITAL AREA OF RESEARCH abandoned by the Indian government in 1994, only ten years after Union Carbide’s gases wreaked their havoc on the population of Bhopal, will be re-opened by a group of doctors from Canada and the United States.

In their proposal the doctors make scathing criticisms of the obfuscatory tactics of the company, which continued to assert, in the face of all the evidence, that exposure to MIC (methyl-isocyanate) would have at most a minor and temporary impact on survivors’ health.

Says the proposal, ‘As MIC is one of the most reactive of the isocyanate family, a number of American medical experts sent by Union Carbide to Bhopal predicted that the chemical would be quickly destroyed on contact with water and body fluids and would not produce any systemic or long-term effects except minor damage to the eyes and skin . . . Yet numerous studies have proved the predictions of Union Carbide’s experts to be wrong.’

Immediately after the disaster Carbide began claiming that MIC was no more harmful than tear-gas. It was merely an irritant and relief could easily be had by bathing the eyes. In fact, as they knew well, MIC is deadliest of the iso-cyanates. On a molar basis, it is more toxic than cyanates and cyanides like potassium cyanide and hydrogen cyanide, which was suspected to be one of the killer gases involved in the catastrophe.

Commenting on Carbide’s refusal at first to say what had leaked, the doctors write, ‘MIC is devoid of smell; hence the accident was detected by its effects on the eyes and throat; the identity of the chemical was not known for two days. Indian doctors quickly responded with the best treatment possible, which comprised of atropine, glucocorticoids and eye drops. However, had the identity of chemical (which must have been known to the Plant manager) been announced and had people been warned by loudspeakers to lie on the ground and cover their faces with wet cloths, rather than try to run away from the poisonous cloud, there would have been far fewer deaths.’

Despite frantic assertions by Union Carbide’s medical experts that only eyes and lungs would be affected, and that temporarily, a considerable body of medical opinion held from the outset that a disaster of such magnitude was bound to have unpredictable long term effects.

The new study will identify and analyse those hidden impacts.

Principal researcher Dr Daya Verma has been investigating the effects of MIC since soon after the disaster, a contribution which, to his delight, was recognised in a recent play ‘Bhopal’ staged in Montreal.

The doctors have obtained funding of $100,000 to begin their survey and
will be working closely with Sambhavna staff. An earlier collaboration between the team and Sambhavna led to the first direct proof that a second generation, unborn at the time of the disaster, had been harmed by Carbide’s gases.

‘During the course of a recent general survey of the population, we identified an unusual effect on the growth pattern of male adolescents; these data constitute the subject of a paper “Methyl isocyanate exposure and growth patterns of adolescents in Bhopal” recently (Oct 8, 2003) published in JAMA (the Journal of the American Medical Association).’

They found that boys exposed in utero were shorter, with significantly impaired growth. Shakeel (opposite) looks 10, but was 15 when photographed. His mother relates:

When Shakeel was born he had a boil on his forehead. At 3–4 months his whole head was covered with boils. His hair used to be sticky with pus. His head was slimy with pus. When he was a year old we had his hair shaved. When he was born there were blue patches all over his body. At three months be used to blink his eyes and tears flowed often. I was worried he would go blind or something. He still blinks a lot and his eyes water. When he was 2–3 months old he had a boil on his upper lip, and his upper lip split. He could not suckle. Anyway I didn’t have enough milk. His grandfather used to soak cotton in weak tea and drip it into his mouth. Grandpa used to hover around the kid worried that I’d get fed up with his sickliness. He survived mostly on weak tea because we had no money to buy milk.

The same survey showed that girls suffer from other maladies including menstrual disorders, and found evidence of pulmonary, endocrine, gastrointestinal and mental and psychological problems in the affected population.

The new research, includes workshops to determine gender-specific problems among girls and boys who were in the womb or infants at the time of the disaster, and a six-month long survey. It will be carried out with the help of Sambhavna staff, who are already known to and trusted by the local people.

‘The most important aspect in such a study is to be able to develop rapport with the people and win their confidence such that they neither feel like guinea pigs nor expect that the study carries monetary reward for them or for us; these considerations assume even greater significance because hundreds of lawyers from the US went to Bhopal within days of the accident trying to recruit as many as they could by assuring huge compensation . . . ’

The findings will have a wide relevance for any future accidents involving chemical dispersal. Intrauterine growth retardation in areas near the World Trade Center after September 11, 2001 was never predicted. Nor were the grave psychological traumas of soldiers returning from the 1991 Gulf war or of people living in zones of violent civil conflict.

RAMESH ‘BHAII’, or ‘brother Ramesh’ as he is known to everyone at Sambhavna and the world beyond, is a mild-mannered man with immense natural charm and a fondness for the word lekin, ‘but’. This ‘but’, however, is never uttered in denial or contradiction but always in the spirit of opening further discussion, considering onward possibilities.

Perhaps it is that has made him a popular figure in the bastis (poor neighbourhoods) that cluster around the defunct Union Carbide plant. Here it was that the gases worked their greatest destruction on that night nearly twenty years ago, and here is the great concentration of people with TB, a proportion of the population several times higher than in wards that were not smothered in gas.

Into these bastis goes Ramesh, his mission to persuade the locals not only to submit themselves to testing for TB (which they are happy enough to do) but to take on the responsibility of understanding their illness. He teaches them how to live with it, treat and defeat it, and above all, how not to infect other people.

In this he has been stunningly successful.

Sambhavna sent Ramesh to the Sunderbans to study ‘community involvement in TB Control’ at the Southern Health Improvement Samiti. On his return he would refer infected people to the government’s TB doctors at Jawaharlal Nehru Hospital, but supplies of anti-TB drugs there were erratic and the standard of care left much to be desired.

In some cases, people were told to buy expensive drugs they could not afford. Others were refused prescriptions because, although X-ray positive for TB they were unable to produce infected sputum. If people stopped going there was no follow up procedure.

Ramesh plans to expand his work in the community to a fully-fledged anti-TB programme, able to do sputum tests in the field, X-rays for sputum-negative cases, a fiercer health education drive and a thorough follow-up service. He already combines Sambhavna’s modern TB treatments with ayurvedic herbal remedies, which are extremely useful in eradicating the side effects of modern anti-TB drugs. As ever, you make this work possible. Ramesh asks us to thank you on behalf of the people for whom he cares. ‘But’, he adds, ‘tell them there’s a lot more still to do.’
AN IMPOSSIBLE DREAM is about to come true. A clinic started by survivors was a tin shed in the ground in the months after the disaster. Volunteer doctors brought relief from the agony of the gas. The present one, with which we are all involved, has treated 12,000 people, but it is only a start. As for the new clinic, why do people weep? Because a dream is becoming real. The earth is laid. The building that is rising stands in terror. One spreads poison, fear and death. Our new clinic...
come to life in Bhopal. The very first clinic
rounds of Union Carbide’s factory where in
ors gave injections of sodium thiosulphate to
police tore it down. The second clinic is the
ed. It owes its existence to your generosity.
this city, there are 120,000 seriously ill.
ep when they see the architects’ drawings?
h has been broken, the first stones have been
tal opposition to Carbide’s rotting factory.
w clinic will spread hope, health, joy & life.
The design of the new clinic evolved from a large central courtyard open on one side facing the medicinal garden. As you enter there is a waiting lounge & reception desk where you can pick up your medical folder and go on towards the consulting rooms for allopathy, mental health, gynaecology and ayurveda, and the room for visiting doctors.

Furthest away is *panchakarma* where people are likely to spend more time. The pathology lab is situated centrally to make it easily accessible to all departments. The drug dispensary is handily placed on the way out as one leaves the medical care section.

Administrative offices and the accounts section are separate from the medical care wing. Further along you find the kitchen and the organic food canteen can feed 50 people.

The yoga centre & community health workers’ hall stand as separate structures linking the different sections to complete the courtyard.

The upper floor is much smaller. It houses the library & documentation unit, a staff room, a room for research workers, dormitories for male and female volunteers and two guest rooms. It can be accessed by a ramp for wheelchairs or by a staircase. This design evolved after a series of discussions with the survivors themselves and the Sambhavna staff.

The basic philosophy of the architecture was to be simple, use local materials, techniques and incorporate local traditions and culture. We hope that by following this path we will be able to create an environmentally friendly building. (For info on building traditions of Bhopal please check [http://www.ieindia.org/publish/ar/ar.htm](http://www.ieindia.org/publish/ar/ar.htm) and look for articles by Dr Anupama Sharma.)

**The new clinic will enable us to treat four times as many people as at present**

**SOME SPECIAL FEATURES:**

a) Natural light and ventilation so rooms won’t require artificial light during the day.
b) Use as little concrete and steel as possible
c) Geothermal cooling for the pathology lab, colposcopy, investigation and computer rooms. It means running cold water pipes through the ceiling down into an underground tank. The heat exchange is reliable because of the constant temperature at a depth of 25 feet below ground, which remains a uniform 20 degrees Celsius.
d) Rain collected on roofs during the monsoon and stored in underground tanks will provide enough water for the 3 summer months.
e) Termites will be kept at bay not by pesticides but by a herbal oil made from *neem* leaves and cashew nut shells.
f) Solid waste turned into compost via a two pit system.
g) Solar treatment of medical waste
h) Solar energy will supply hot water and back-up power.
i) Roof top gardens for cooling and growing medical herbs
j) Landscape integrated with the medicinal garden including use of grey water from the clinic in the garden pond and irrigation.

**To guarantee the Clinic a secure future**
Sambhavna’s new clinic will be a place where:

- Survivors from surrounding communities coming for care experience a sense of space, tranquility and can enjoy natural surroundings.
- Survivors have a choice of different systems of therapy, including modern allopathy, ayurveda, yoga and massage.
- People are trained in the growing of medicinal plants and how to produce medicines from them.
- People receive health education and training which they will take back into their communities and pass on.
- Research and monitoring can be carried out with the consent and co-operation of the community.

**LOCATION:**
- As near as possible to the Union Carbide factory.
- Ground water free from toxic contamination.
- Easy access for people coming from different bastis.
- Close to bus routes.
- A little distanced from communities.

**THE LAND:**
- Area: 2 - 4 acres.
- Sloping [or else made undulating].
- Trees [non-fruiting shady] and medicinal vegetation.
- Medicinal plant garden in large part of the area.
- Tall thick fast growing trees on the borders.
- Protected from cattle, goats and camels.
- One small pond.

**BUILDINGS:**
- Low on cost.
- High strength (enough to weather 50 years if not more).
- Beautiful to look at and out of the ordinary.
- Functional.
- Make maximum use of local material and traditions.
- Single storied, non-imposing on the landscape.
- Well lighted and ventilated, insulated from external heat.
- Open and inviting to the visitor.
- Avoidance of toxic building and other materials.
- Be capable of being made to run on solar energy.
- Provide a venue for up to 100 people to meet.

**Forever we need to raise £1.1 million.**
March 2004 From the shade of the tamarind tree at the top of the garden you can look out over our garden fanning out below. A raging red amaranth welcomes you to paths curving off to different corners. Your eye is drawn to the bright orange of nasturtiums in the distance, beckoning you to the cool blue realm of oats in the back. There are lush patches of clover, alfalfa, indigo, and flax with lovely sky blue flowers floating like stars among its mass of vertical stems. The smooth, broad, bright green blades of our young banana trees poke up out of this carpet, along with the less noticeable saplings of other medicinal trees and shrubs. In the opposite corner is the lemongrass patch with guggul, bamboo and putranjiv. Through the sunflowers you see the large patch of *chandrasur* turning golden as the seeds ripen. In other parts of the main growing area, *ashwaganda, tulsi, plantago, nigella*, coriander, dill and calendula are interplanted with alfalfa and fenugreek for nitrogen fixing, biomass and soil improvement. Unfortunately, our big plantings of *tulsi* never came up. But the small plantings of six distinct types of basil and *tulsi* are doing well. We are growing them for seed, so that next time we will get better results.

It’s hard to recall that only just back in October & November, our gardeners Ratna Soni, Amar Singh, Sunil Lodi and I were making the beds for the first time. While the plants have been happily growing along with the weeds we have been busy making lots of compost, and spreading it around. It is beautiful, rich and earthy – sounds like a personal ad: ‘seeks nourishing relationship with well rooted individual of any species…’ Mohan, the security guard who helps in the garden in his spare time, went to the scrap market and found an old refrigerator body and wheel to make a wheelbarrow, which has become the favourite vehicle of the kids. We installed a basic irrigation system with a couple of taps and hoses that make it a lot easier to water the different parts of the garden. The cuttings we planted around the fence lines grew quite well during the cool winter season. And we adopted a puppy, named ‘Tiger’ who is our mascot and is always on the lookout for treats and biscuits.

We have been harvesting various things, and have recently finished cutting our biggest crop, *chandrasur* (Lepidium sativum), or garden cress. We are interested in the seeds, which are used in Ayurvedic medicines. They are very high in easily-assimilated iron. Rinsed and briefly soaked in water, they can be eaten to help combat anaemia, which is a common problem with gas-affected women.

So it seems that we have become seed growers and savers! Not only are we saving seed for our next crops, but the seeds themselves are medicine. Other medicinal seeds we are growing include flax, *tulsi*, psyllium, fenugreek, and nigella. Threshing the seeds is best done by inviting a lot of kids over for a dance party. We all had so much fun jumping, tumbling and dancing on
top of the dry plant material, the seeds were separated with pure laughter. After threshing, Ratna, Kanta, and Puja are experts at winnowing away the chaff. Learning to winnow is also like dancing - with the basket, the seed, and the wind.

Several people have come to volunteer at the garden including Anjali Deshpande, Daya Shankar, Kanta, Asima and Vikas (from Bhopal), Vinita (Bangalore), David Francis (Canada), Susan Allan and Maude Dorr (USA), Sam Tilley and Nick and Kelly Tarbuck (UK). They have helped with sowing seeds, weeding, and harvesting. We have been harvesting and drying lots of *tulsi* leaves, *nirgundi* leaves (*Vitex negundo*), calendula flowers, curly dock roots, and Mexican poppy roots. One of our big *Arjun* (*Terminalia arjuna*) trees died, so we harvested several kilos of the bark, which is used in infusion to treat heart disease.

We are also starting to get a lot of visitors. One day a group of gas-affected women from Oriya *bustee* came over for a tour and we all shared our knowledge about the medicinal plants growing in the garden. Once a month the clinic staff and interested community health volunteers come to the garden for a class led by Dr. Deshpande about the use of specific plants in Ayurveda. When the new clinic opens we will have many such tours and classes. Other visitors have included researchers, activists, journalists, and film-makers from different parts of the world. Please write to us if you want to visit on your next trip to Bhopal.

Outside the walls of our peaceful garden the 20-year-long struggle for justice continues. 150 Bhopalis went to Mumbai in January to attend the World Social Forum and demonstrate in front of the Dow Chemical Company India headquarters. And on March 8th, International Women’s Day, more than 100 women survivors and Sambhavna staff demonstrated in front of the Indira Gandhi government hospital, demanding medical care, research, jobs and justice. The government does not officially recognise women’s health issues as related to the gas disaster, so many women continue to suffer without proper care.

The heat is coming now. We will bring in our harvests and start getting ready for the monsoons in mid June. We have to be totally ready including having all of the compost spread and soil prepared before the first rain. Then run out and plant all of the seeds really fast before the monsoons make working the soil nearly impossible. But that will be another story… Keep checking our website for more updates on our work. We are happy with the amount that we have been able to achieve so far, but we have a long way to go and little money to do it with. Please be generous, Your money goes a long way here. Just £60 would cover the salaries of our two gardeners for a month. Much love to all from Terry.
A French pathologist and against cervical

FRANÇOISE BAYLET-VINCENT
MONTAUBAN, FRANCE, MARS 2004

Françoise and Angéla must blend in with local teams who are curious and eager to learn. They plunge themselves into local culture, ayurvedic medicine, yoga, vegetarian food, they become accustomed to a hasty toilette, snatching showers in the few hours when water and electricity are working. They learn to juggle with generator and water tank to wash their hands, work the colposcope and read smears.

Time in Bhopal has a value altogether different from the time of Montauban or Geneva. So too life.

Little by little things fall into place: they learn new gestures and new words to express themselves in Hindi, English and French. Their teams learn to read the images in the colposcope and identify cells, benign and rogues, to recognise not only cancer but the causes of early menopause and of sterility, a terrible affliction for a woman who, if useless for child bearing, may be rejected. Then there’s AIDS and sexually transmitted diseases, nurtured by ignorance, poor hygiene, poverty & malnutrition. Plus repeated miscarriages, birth defects and growth retardation caused by an environment polluted for 20 years by wastes from the factory. In between work at the clinic, there is eating, sleeping and fun: picnics with chapatis, dal, fruit laid out on a banana leaves that serve as plates. There are motorcycle rides in countryside greened by the rains.

Then there is Bhopal itself, a magnificent city with its lakes, mosques, its bazaar and its amazing colourful human bustle. But also disfigured by the sore of a factory devastated by a terrible explosion, which continues to leak poisons.

At last the time comes for the doctors to return to their spotless offices in Europe. How fast the time has passed. But they will return, Bhopal has so enriched their lives.

Alas, the cost of travel, linked to problems caused by their absence and the difficulty of finding stand-ins, put an end to these hopes. Contact continues via the Internet, and consignments of PAP-tests arrive in Montauban to be read.

At Sambhavna meanwhile, there is difficulty finding a local gynaecologist and the colposcope sleeps under its cover.
Then a new, highly motivated Indian gynaecologist arrives at the Clinic and training is once more needed.

In May 2003, Françoise treats herself to a third stay in Bhopal. Her mission, lasting a month, is to consolidate cytology practice at Sambhavna and to train resident gynaecologist Devinder Kaur, a devoted doctor who fully deserves the double title of gynaecologist and cytologist, to function effectively in the service of the city’s women.

On her return Françoise pesters GSF to help her find gynaecologists interested in giving colposcopy training.

Dr Régine Coudane of Montpellier leaves in October 2003, Dr Sylvie Jung-Faerber of Strasbourg in November and Dr Hélène le Menestrel from Paris in December.

They continue the training of Devinder to perform colposcopies and excise lesions found by cytology. In June 2004, Devinder comes to Paris for further training.

In three years much has been done and much remains to do. We must improve the quality of PAP testing, train female cytotechnicians to do screenings, find doctors fired with passion to carry on work of the quality to which the women of Bhopal are entitled. We must support the work of Sambhavna clinic and continue training its people.

Extracts from the diary of Doctor Hélène le Menestral

20 NOV 2003: First day. The entire team seems united and enthusiastic about the work they do. They are at most 15 or 20. It’s poor, but remarkably well organised. The files are updated better than in certain French hospitals. At noon we had lunch sitting on the terrace, mess tins for everyone! It was very good, but one eats with one’s fingers, it’s a knack! I didn’t eat much! We drink filtered water.

21 NOV: Woken by explosions nearby. I’m a bit afraid but no one else stirs. It’s 5am. At 7 the muezzin calls & soon another day has begun. Hindu women don’t always want to be examined. They’re at the same time demanding and utterly naughty. Devinder (left) has the patience of an angel. At noon, it’s off with Aziza (middle) to buy cloth, thence to the tailor. She wants me to wear nothing but Indian clothes.

20 NOV: Not many patients today. It’s a Hindu festival and the Muslims are still observing Ramadan. This gave me the time to get acquainted, thanks to Sylvie (right). It will be hard when she leaves. She is much appreciated and very warm. At 3, Sylvie and I had arabesques drawn on our hands in henna by a charming young woman, Pinky (centre), who is married to the Clinic’s information officer.

20 NOV 2003: Today, the entire team seems united and enthusiastic about the work they do. They are at most 15 or 20. It’s poor, but remarkably well organised. The files are updated better than in certain French hospitals. At noon we had lunch sitting on the terrace, mess tins for everyone! It was very good, but one eats with one’s fingers, it’s a knack! I didn’t eat much! We drink filtered water.

21 NOV: A 30 ft high effigy of Anderson (ex-Chairman of Union Carbide) was ready to leave. We were about 1,000 marchers. A tractor pulled a factory of cardboard, which was smoking. People from the clinic played the parts of the dead. Me, I was handing out Hindi pamphlets which were well received by the populace, many of whom joined the procession. Then we burned Anderson.
One hundred at very least: raffles, bazaars, egg and spoon races, karaoke evenings, bring and buy sales, auctions of promises, sweepstakes, spelling competitions, dog and cat shows, pony rides, hoopla, cake stall, sell home made jams, ditto fruit wines, second hand book sale, run a marathon or a minithon, car boot sale, sponsored walk, scalextric racing, garage sale, tug-of-war, worst tie fine, swearing jar, donate a service, collecting tin in pub, celebrity auctions (ask them to donate a personal item or give an autograph), put on a play, singing contest, musical evening, archery contest, make Christmas cards, organise a Bhopal Day (see Susanna’s piece opposite), publish your own poetry mag, have an art exhibition, vintage car rides, sponsored swim, face painting, fashion show, summer barbecue, trivia quiz, wishing well, chess tournament, stage a football match, meet-a-celebrity dinner (if you can persuade a celebrity, and if you happen to be a celebrity you could have a quick whip round among your mates), have an open day in your garden, plant sale, home-made lemonade stall, guess the weight of the cake (or vegetable marrow), animal bingo (mark out a field in numbered squares, sell correspondingly numbered tickets, let loose a cow, if she dungs in your square you win), barn dance, make and sell paper flowers, hire a band and organise a local gig, write and publish your own cook book, design a 2005 calendar, organise teams to wash cars, mow lawns, trim hedges, walk dogs and offer sundry other useful services, stage a talent show, hold a gurning championship (can’t resist sticking in a pic for this one), have a sponsored haircut, shave off that beard for Bhopal, heck shave off your eyebrows, give a foot massage, polish shoes, pub crawl, fancy dress disco, manicure, lunchtime concert in the park, school play or concert, walk round Wales with a fridge (someone is actually doing this!). Don’t forget to send in pics, email 777@bhopal.org. Here are a couple of websites with ideas: http://community.gospelcom.net/Brix?pageID=5276 ‘Kidnap the senior pastor’ and ‘Kiss the cow’! http://www.home.gil.com.au/~dnash/html/frameSet.htm An Aussie site with some offbeat thoughts

**BHOPAL.** 20,000 dead, and for the living 20 years of suffering. After two decades it remains the world’s worst industrial disaster, but never has there been a public memorial to its victims. No presidents have come to stand with bowed head before these gates, nor pledged to fight for ‘freedom’ and ‘justice’ for these people. Bhopal’s dead are gone, with less noise than wind in the grass. Every day more slip away. An average one per day. Children are being born, poor creatures, who carry in their bodies and genes the legacy of that night.

December 3rd 2004 will be the twentieth anniversary and we want to mark it with a performance to honour the dead and benefit the living.

We need experienced people to help make this real. Can you help? Have you got time to do some organising? Do you know Radiohead or Luciano Pavarotti or other great performers? The Clinic has many great friends among Bhopali musicians. Do you know your way around TV or the music business? Are you just dead keen to get involved? If so, come on, let’s get on with it. If we managed to start a clinic from scratch, with no money at all, surely we can put on a concert. To get involved, email 777@bhopal.org.
Bhopol Day

Susanna Rees writes:
When I read the survivor’s poem, Torture Me, I felt huge sadness that we could do this to ourselves, that people could live like this without being heard. I thought that by creating a Bhopol Day for the area where we live, creating a little wave of energy around us, we will also be passing on to others the message that we can and do make a difference to others’ lives, that it’s worthwhile having a go. What is a BHOPAL DAY? Whatever we make it. Let’s join with others from the places where we work or relax, to put on events and raise funds for the Clinic. Our imagination sets the limits.

LIVERPOOL BHOPAL DAY will be on Friday 12 November, which is also Diwali, the festival of light. If you live in the area and would like to join me, please contact sue@bhopal.org. If you would like to organise a BHOPAL DAY with others in your area, please email 777@bhopal.org. You can use the Forums section of www.bhopal.org to make contact and organise.

www.bhopal.org will soon have an online shop with secure ordering. We hope to sell useful and beautiful things made by gas survivors in Bhopol. For example, a range of carved wood massage rollers, some inlaid with brass, that people use to ease their aches and pains.

Other plans include a book of recipes, for once not using rich, expensive ingredients, but simple meals from the homes of the poor. We’ll offer children’s toys of the sort that don’t need electricity, batteries or plastics factories.

If there is interest we also could offer the gold ‘zari’ embroidery work for which Bhopol is famous. Let us know.

BRIGHTON FESTIVAL

FUNDRAISING PERFORMANCE FOR BHOPAL MEDICAL APPEAL

DATE: SATURDAY MAY 15TH 2004
VENUE: UNITARIAN CHURCH, BRIGHTON
TIME: 7.30 PM – 10.00 PM
PRICE: £8.00/£6.00 (CONC.)
TICKETS: DOME BOX OFFICE, BRIGHTON 01273 709709

For the last two years First Nature has had a performance in the Brighton Festival and raised money for causes close to our hearts. Founding Director, Corinne Shirman-Sarti was very moved by the tragedy that affected the people of Bhopol who, in the simple act of breathing, lost or blighted their lives due to the toxic gas released by the Union Carbide disaster and who inspired her by the courage with which they are reconstructing their lives, despite the continuing pollution. How fortunate we are to be able to bring our healthy breath for their cause.

As an organisation we wish to offer our sound this year for the benefit of the people of Bhopol and those who are helping here and in India. First Nature is an association which promotes self-understanding and transformation through the enjoyable means of liberating body, breath, voice and hearing in the context of developing a compassionate approach to ourselves and the world we move in.

TICKET INCLUDES FREE 1/2 HOUR SESSION WITH OUR VOICE COACH!

info: www.firstnature.org
email: breathe@firstnature.org
tel: 01403-700237
‘$500 is plenty good for an Indian’

YOUR DONATION vs CARBIDE’S ‘COMPENSATION’

‘$500 IS PLENTY GOOD . . . ’ This was the famous, or infamous, line uttered by an official of the Dow Chemical Company, which owns the Union Carbide Corporation. $500 is the average amount received by Bhopal survivors as ‘compensation’ for what is now nearly 20 years of illness, pain and loss of income.

It works out at about 4p a day. To find out exactly what 4p buys, we went to Bhopal’s Arif Nagar shopping area and got the latest prices (30 March 2004) of some medicines.

MEDICINES

1 1/2 drops of ABCDE vitamin complex by Parke Davis
or
1 tablet of Gliclazide (by Alembic, you may need up to 4 a day for diabetes)
or
1/5 of a tablet of conjugated œstrogen (Premarin by Wyeth Lederle) for delayed puberty, painful periods and other problems
or
1 capsule of Amoxycillin (Bigmo 250 mg from Astra-IDL)
an antibiotic commonly used for infections of the lung and lung and urinary tract
or
3 tablets of Ibuprofen (Ibugesic 600 mg produced by Cipla)
you may need to take all three in a day

Many survivors in Bhopal have acute respiratory problems and need inhalers. The cheapest inhaler costs 35 times what Carbide’s ‘compensation’ amounts to per day.

How much food will 4p buy?

30 g of tea
or
less than 200 g of sugar
or
4.2 g of cardamom
or
200 g of poha (flattened rice)
or
300 g of the cheapest rice
or
136 g of the cheapest daal (urad daal, if you prefer tuwar you can only afford 111 g)
or
a little over 9 g of garam masala
or
50 g of turmeric or chilli or coriander powder
or
25 g of cumin seeds.

It doesn’t take a mathematical genius to see that the Bhopali survivors have had to spend far more on medicines than they have had in compensation. There is no justice in the world, but there are good people. Thank you for your support.

Carbide’s pittance is worth virtually nothing to the survivors.

Thanks to you, everything provided at Sambhavna, from equipment and treatment to medicines, is ABSOLUTELY FREE.