

**PROCEEDINGS OF
THE KARNATAKA STATE CONVENTION ON GREEN HEALTH,
ARANYA BHAVAN, BANGALORE,
10TH NOVEMBER, 95**

Organised by

Karnataka Forest Department

**Foundation for Revitalisation of Local Health Traditions (FRLHT)
and**

Voluntary Health Association of Karnataka (VHAK)

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**GREEN HEALTH CAMPAIGN : HEALING PLANTS
IN EVERY BACKYARD AND PRIMARY HEALTH CARE
IN EVERY HOME**



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(4/11)

16/2/96

1. GREEN HEALTH: AN INTRODUCTION

Background: A Programme to conserve medicinal plants in public interest.

Under a GOI/DANIDA supported medicinal plants conservation programme that the Foundation for Revitalisation of Local health Traditions (FRLHT), Bangalore, is coordinating in the states of Karnataka, Kerala and Tamil Nadu and implementing in collaboration with the Forest Departments and a number of leading research institutes and NGOs, a network of 30 in-situ conservation sites called Medicinal Plants Conservation Areas (MPCA) and a chain of 10 botanical gardens called Medicinal Plants Conservation Parks (MPCP) have been set up all over these three states. These MPCPs will also be the centres for documentation of traditional health systems.

This is essentially a public interest and community linked project and steps are now planned to be taken to ensure that the conservation of medicinal plants serves its end users. Some of the largest users of medicinal plants are rural households who have traditionally been using plants in the context of their Primary Health Care needs. To encourage and enable the use of medicinal plants by this vulnerable section of our people, FRLHT is seeking the support of various Government departments and NGOs to promote a strategy symbolised by the term "**Green Health**".

Relevance of Green Health

The social and scientific relevance of the Green Health programme can be appreciated in the light of two contemporary facts:

Firstly, the existing health infrastructure in the country is unable to provide health care to all. The present coverage of state-supported rural health care, for instance, is reported to have achieved a maximum of 30% coverage of the population, with wide gaps between the actual health needs and the type of health services available.

The other scientific fact is that worldwide it is being increasingly seen that herbal medicines are generally safer than chemical drugs and thus the alternative medicine movement has gained ground with a serious search for applications based on the traditional systems of medicine, particularly of countries like India and China. WHO has strongly recommended the use of traditional health systems particularly in primary health care.

Implementation Strategy

Essentially the strategy to promote Green Health in South India will involve setting up of a network of nurseries, which would raise a package of medicinal plants useful in primary health care. The total number of species (to be grown) in this package is 17. FRLHT has brought out a "Nursery Manual" and a "User's Manual" in English, Tamil, Kannada and Malayalam, which would be handbooks on the growing and use of these primary health care plant packages. A 'Directory of Medicinal Plants Sources of South India' is also available which gives details of sources for procurement of planting materials and raw drugs required for Green Health.

Need for organisational synergy.

For the Green Health programme to cover a substantial segment of the rural population, as many organisations as possible need to take up raising of these 17 species in Green Health nurseries. Although the Social Forestry wings of Karnataka and Tamil Nadu Forest Departments have already been involved in this work, efforts need to be made on a much larger scale by involving a number of other agencies to give the programme a broader base.

The agencies/departments that could act as "prime movers" for this purpose are:

- Directorates of Agriculture, Horticulture and Watershed Development.
- Forest Department
- Directorate of Health Services
- Directorate of Traditional Health Systems
- State Government Secretariat in the above Depts.
- District Administration
- Zilla Parishads
- Leading environment and health NGOs
- Media

Steps for building consensus.

FRLHT, in collaboration with leading NGOs and Government departments, has organised one day State level conventions of heads of these organisations exclusively with Green Health as its agenda and theme. The Tamilnadu Convention was held on the 8th June, 95, at the MS Swaminathan Research Foundation at Madras, and the Karnataka Convention was held at Aranya Bhavan, Bangalore, on the 10th Nov, 95 in collaboration with the State Forest Department and Voluntary Health Association of Karnataka.

The Kerala convention will be organised by the Tropical Botanic Gardens and Research Institute, Palode. The date is to be finalised shortly.

Objectives of the State conventions.

The main purpose of inviting the above organisational leadership to the State Convention is to appraise them of the perspectives on Green Health and to urge them to initiate action plans for Green Health through their concerned departments, organisations and networks, both government and non-governmental.

Expected outcome.

The expected outcomes of the State Convention are

1. An appreciation will be created about the perspective on Green Health at the decision making levels in Government as well as leading NGOs.
2. Motivation & Commitment from Government Departments and non-government organisations to establish Green Health nurseries in specific locations and to support them within their existing programmes and budgets.
3. Formation of Coordination Committees with Government and NGO representatives at State and District levels to prepare Action Plans to promote Green Health.

These outcomes will be State Government and NGO initiatives on Green Health and are expected to be launched and sustained by them through appropriate mechanisms which the concerned organisations and departments may decide.

Women and Green Health.

Women are considered as a special target group for the Green Health Campaign, because of their role in upholding the family values and traditions, and their nurturing role in health care of the family. Besides, they already have the knowledge of using medicinal plants for treating common ailments. Housewives, beside encouraging their families to rise the green health plants in the backyard and use them as medicines, can also organise themselves into **Green Health Clubs**. These Green Health Clubs can raise the medicinal plants in a nursery for supply to households and also work as enterprises to prepare and sell simple herbal medicines like triphala and other products, thereby achieving economic self-sustenance. FRLHT has brought out a 'flip chart, to be used by health workers and motivators to inform and encourage women about Green Health and Green Health Clubs.

2. PROCEEDINGS OF THE CONVENTION

The convention was inaugurated and presided over by Dr. H.C. Mahadevappa, Hon. Minister for Health and Family Welfare, Karnataka. The welcome address was delivered by Shri N.V. Ramachandra Chetty, Principal Chief Conservator of Forests, Karnataka. Shri S.K. Ghosal, Additional Chief Secretary-cum-Development Commissioner-cum-Agricultural Pricing Commissioner, was the Chief Guest.

Shri Ramachandra Chetty, in his welcome address, outlined the basic and simple concept of Green Health- the raising of 17 commonly found medicinal plants in nurseries and their distribution to the general public for use in primary healthcare. He expressed his appreciation about the 'common sense approach' of the Green Health campaign to healthcare through caring for plants and added that the strength of the campaign lies in our strong bio-cultural traditions of concern for plants and healthcare. He also cautioned that some of the Green Health plants may be getting endangered in the wild unless action to conserve them is taken along with a programme of creating mass public awareness and education about their critical role in healthcare is initiated immediately. He felt that the Green Health campaign was the most appropriate vehicle for creating such awareness.

Shri Chetty mentioned about programmes initiated by the Karnataka Forest Department for conserving useful plants in general, and medicinal plants in particular. These include setting up of 'Dhanwantry Vanas' and 'Nakshatra Vanas' and popular radio programmes like 'Sasya Samala' and 'Sasya Surabhi.' He also referred to the chain of in situ Medicinal Plants Conservation Areas which the Department has set up as a part of the GOI/DANIDA project for conservation of medicinal plants in South India which is coordinated by FRLHT.

Dr. Mahadevappa in his inaugural-cum-presidential speech said that traditional medicines are effective and inexpensive, and they do not have any side effects. He regretted that not much is being done to revitalise the health traditions, though the fact is that it is the best choice we have to provide basic health coverage to the rural poor, specially those below the poverty line, who do not get even two square meals in a day. Calling for a green revolution in medicinal plants, he assured the participants that the State Government will provide training in the use of herbal medicines and encourage farmers to cultivate medicinal herbs. He called upon the voluntary agencies to play a lead role in promoting the Green Health campaign.

Shri Darshan Shankar, Director, FRLHT, made an illustrated presentation on the perspectives of Green Health, including a slide show on the 17 'Green Health' medicinal plants of South India. He explained the basic strategy of Green Health and its

relevance in bridging the substantial gaps in the present PHC services which cover at best only 30% of the total population. These gaps can be filled up by creating self reliance at the household level by promoting the growing and use of medicinal plants. The other advantages of using plants are that they are environment friendly, easily affordable, the knowledge of their use is already with us, and they can be safely used for primary healthcare.

Shri Darshan Shankar said that the traditional health practices have evolved in different regions based on the locally available ecosystem specific plant resources. Ideally, therefore, the Green Health package should contain a mixture of locally found herbs, shrubs and a few trees, he suggested. He underlined the fact that Green Health is not a newfangled slogan- it is question of rediscovering our medical and conservation heritage and putting it to creative use.

Shri Darshan Shankar summarised his presentation by emphasising that the Green Health campaign can succeed only if different Government agencies like Horticulture, Forests, Agriculture, Watershed and Health, along with NGOs and private nurseries, can work in a coordinated and missionary spirit to bring into action the three key elements of Green Health:

- * A network of nurseries in rural and urban areas which will raise and supply the GH plants.
- * A network of agencies, including mass media, which will create public awareness about growing and using medicinal plants, and
- * Availability of educational materials to guide nursery managers and the public about propagation and use of these plants.

He concluded his presentation with a brief account of the in situ and ex situ conservation works being done in Karnataka, Tamilnadu and Kerala as a part of the FRLHT's medicinal plants conservation project in these three State.

Shri S.K. Ghosal in his presentation mentioned about a few key issues in the background of which the Green Health campaign seemed to be the most appropriate and timely step in ushering in a low cost and self reliant alternative system of primary healthcare. Firstly, as a result of the recent GATT agreement involving international application of patent rights held by the leading allopathic bulk drug suppliers, these drugs would be too costly for the general public to afford. This was a serious matter when one considered the fact that a little more than 40% of the population lived below the poverty line. Secondly, increasing environmental regulations, particularly for chemical

industries, precluded any increase in the capacities of the drug factories. Thirdly, there was an urgent need to reverse the trend of blind reliance on the use of western drugs promoted by the industries, whose only guiding factors of production were the profit motive and giving the consumer what he felt was convenient to him.

Shri Ghosal said that there was a whole gamut of Plan schemes centred on watershed development, soil conservation, horticulture, agro-forestry and afforestation, and targeted at the small and marginal farmers, in which Green Health can be easily integrated, and therefore, funds for Green Health was not at all a constraint. He urged the Heads of these Departments to fully utilise these opportunities to help effectively operationalise Green Health.

Shri Ghosal however cautioned that the critical issue of motivating the farmers to plant the medicinal plants and use them should not be lost sight of, specially when there may not be any possibility of immediate economic gains out of these plants. He appealed to the NGOs to take a lead role in reaching out to the farmers and convince them about the benefits of Green Health in real terms, even in the short run. He also stressed the importance of strong coordination among the different Departments and NGOs for Green Health to be sustainable.

Dr. Gautam Basu, Principal Secretary (Health), reiterated the importance of Green Health in filling in the enormous gap in the PHC coverage and for revitalising our traditional health practices. He felt that the creation of a separate Department of ISM by Government of India is a very encouraging sign of increasing recognition of our medical heritage. He assured that Green Health will have the full support of the State Government.

Dr. S.M. Angadi, Director, ISM, in his presentation briefly described the uses of the Green Health plants and their relevance to bringing in self reliance in primary healthcare.

Dr. H. Sudarshan, Director, Vivekananda Girijana Kalyana Kendra, said that there were two extremes of healthcare services in India- while on one hand we had state- of- the-art facilities to handle the most of the highly complicated medical conditions, the scenario of availability of even elementary facilities in most general hospitals, specially PHCs, was pathetic, with 50% of them not having even a simple facility like that of a microscope. The availability of basic medicines in these hospitals is also very limited. Under these circumstances, he felt, Green Health is the only workable alternative available to us, even for the urban areas.

He submitted some of his suggestions to make Green Health workable and sustainable:

- * The Department of ISM should make its presence felt more at the PHC level, and encourage the PHCs to use herbal medicines. Perhaps the Deptt. could take one PHC as a pilot project, to begin with.
- * There should be large scale decentralisation of facilities for propagation and processing of medicinal plants and herbal products by taking them to the district level and with the active involvement of different Departments participating in the GH campaign. Vacant lands available with the Revenue Deptt., for example, can be utilised for setting up of herbal gardens.
- * The media, particularly mass media, should be closely involved in creating public awareness about herbal medicines in general, and Green Health in particular, since it is mass involvement alone which could give an impetus to the campaign.

Dr. Sudarshan also said that a large number of committed and active individuals was necessary to sustain Green Health as it involved close linkages between different Govtt organisations and NGOs.

Dr. Upendra Shenoy, Vice President, VHAK, said that the Green Health Campaign can gain momentum only if there is a strong determination in promoting it, particularly since there was an increasing trend towards commercialisation of herbal medicines. The important consideration, he said, was that Green Health is not 'low cost' medicine but 'no cost' medicine, based as it is, on the motto of selfless community service. Along with creating community awareness about Green Health, specially among women, Dr. Shenoy suggested, there should also be a campaign against commercial exploitation of our traditional health systems. Dr. Shenoy also said that VHAK was fully committed to provide support to Green Health through its various community health programmes.

Ms. Sasikala V. Shetty, Asstt. Director, Department of Women and Child Development, made a presentation in which she highlighted the important role of women in Green Health. She expressed her deep interest in the concept of women's Green health clubs, and mentioned about schemes like ICDS, DWCRA and Indira Mahilla Yojana which can support these clubs. Under DWRCA, for example, Rs. 15,000.00 can be provided to such groups for purchase of raw materials, their processing and marketing, she said.

Dr. Gerry Pais, Regional representative, OXFAM (India) Trust, said that the present trend of rapid loss of our respect for traditional medicine might prove catastrophic and these traditions are likely to disappear along with their carriers- the Nattu Vaidyas, as it is happening in a number of communities like the Coorgis. He also said that one of the major causes of disappearance of this knowledge was the rapid loss of forest cover and denial of access of the traditional communities to the existing forests. The challenge, according to Dr. Pais, laid in making optimum community use of the common property resources like land and water, which are increasingly getting depleted due to their monopolisation by vested parties. He endorsed Dr. Sudarshan's suggestion of using such common lands for raising medicinal plants, but he warned that the lessons learnt from acute degradation of these common property resources had taught us that such ventures must necessarily have the local people's participation if they were to be sustainable.

Dr. D. Daniel, Coordinator (Health), Actionaid, listed the problems of delivering effective healthcare services at the PHCs- under-utilised facilities and manpower, and poor accessibility and poor control on the resources. he said that more than 70% of the morbidity in the community can be managed with medicines from plants, which are widely and easily available and these medicines are also extremely cost effective. There was however an urgent need to counter over-dependency on western drugs and also over-exploitation of the plants resources by a few private interests and right holders.

Dr. Daniel expressed his confidence that the NGOs would play a lead role in motivating the community about Green Health, through the institution of traditional healers and by encouraging the setting up of herbal gardens and conducting research into the traditional knowledge about plants.

Dr. Daniel also summarised the work being done at ACTIONAID to promote herbal medicines, which included training of health workers and PRA exercises on community healthcare, and research and documentation related to traditional medicines, for example, to identify a vector repellent for malaria and also herbal treatment of kala ajar.

Shri V. Umesh, Director of Horticulture, referred to two horticulture development schemes under which public participation in the cultivation of medicinal plants can be encouraged. These were the scheme for development of nutritional gardens sponsored by the National Horticultural Board, and the Centrally sponsored 'medicinal and herbal plants development scheme.' He invited the NGOs to take advantages of these schemes to promote Green Health.

Shri Umesh expressed his appreciation of holding the State level convention on Green Health and suggested that similar

conventions needed to be held at the district level where the campaign is to be operationalised. These district conventions should result into concrete action plans, he said.

Shri G.N. Srikantaiah, Deputy Conservator of Forests, Shimoga, gave an account of the initiative he has taken to popularise medicinal plants and their uses in the Shimoga district. He mentioned about the NGO 'Sasya Sanjeevini' formed by him. Sasya Sanjeevini is basically an association of interested individuals committed to preservation of local health traditions and it has identified 10 ha of land near Gajanur in Shimoga taluq where a herbal nursery and herbarium were being planned. Shri Srikantaiah also expressed his strong belief in the full involvement of NGOs in making Green Health a success, and assured his full support to the campaign through his Forest Division as well as through Sasya Sanjeevini, of which he is the ex-officio president.

Smt. K. Gangamma of Mahilla Samakhya gave a brief account of her experience in promoting the cultivation of medicinal plants in the backyards and preparation of herbal medicines through women's groups in five districts of Karnataka. He expressed her strong belief in making the Green Health a success through such women's groups in the rural areas.

Group Discussions:

There were group discussions among the participants to suggest how best to operationalise the campaign, including a public awareness programme for Green Health, specially among women. The following questions were posed to the groups for focusing attention of the discussions

1. How to identify nurseries which will raise and distribute the GH package of plants in the rural and urban areas
2. How to identify agencies who can promote an educational and communication campaign for creating an awareness, with a special focus on women about
 - importance of growing GH plants in home-gardens
 - importance of using GH plants for self-help and self reliance in primary health care
3. What are the key issues for achieving sustainability in Green Health, e.g.,
 - pricing of plants
 - pricing of educational materials
 - other issues

The participants were divided into three broad groups: One group to deliberate on the Government agencies' view point, one to focus on the role of women, and the third to examine the issues involve from the NGO perspective, both urban and rural.

The 'Government' group was led by Dr. S.M. Angadi and Shri V. Umesh, with Dr. Satyanarayana Bhatt as the rapporteur. The 'women's group was led by Ms Neela Patel and Smt. Sasikala Shetty, with Ms. Thara as the rapporteur, and the 'NGO' group was chaired by Dr. Gerry Pais. Dr. T.N. Manjunath was its rapporteur.

The deliberation of these working groups can be summarised in the following recommendations and suggestions that came out.

1. Selection of nurseries.

i) Vacant spaces within anganwadis, school and college campuses where watering facilities are available. Raising of nurseries can be part of NSS/NCC activities.

ii) Panchayat lands, sangha lands, land around water tanks and irrigation channels, JFPM lands and watershed areas.

iii) Land belonging to temples, mosques and churchyards.

The Women's group felt that massive public awareness about the GH campaign needs to be created before nurseries start producing the plants as otherwise there would not be sufficient demand to encourage this activity.

2. Agencies that can promote the GH campaign.

i) Forest, Horticulture, Diary and Sericulture Departments, municipalities, ayurvedic colleges and voluntary organisations

ii) Yuvak and Mahilla Sanghas, health clubs, school and colleges, associations of Ayurved and local traditional healers.

In addition, village religious festivals and fairs could be important occasions to promote the campaign.

3. Sustaining the GH campaign.

The major requirement of sustaining the campaign is to have dedicated and strongly committed individuals and organisations who can,

i) Influence the local communities, by bringing in the required attitudinal changes in a phased manner.

ii) Train, as a part of health extension programmes or otherwise, local people, specially women and local healers, in the cultivation and use of medicinal plants.

The private farms can be encouraged to raise and sell medicinal plants for which the initial planting (mother) stock can be provided by Government to set the ball rolling.

Private and corporate organisations can sponsor herbal parks, gardens etc. with GH as the central theme.

It was also suggested that the educational materials for the GH campaign should be low priced so that it could be made easily available to a large section of the public.

The Women's Group recommended that no material, including plants, should be supplied free, so that its producers and users have a stake in the campaign. The Group also suggested that in the dispensaries where shortage of ayurvedic drugs was felt frequently, the health workers could be encouraged to recommend use of medicines from home grown plants as substitutes.

On the issue of sustaining the Green Health campaign, Shri Darshan Shankar made several suggestions:

1. The key issues involved in sustaining the campaign are how to operationalise it at the grass root level through general and wide awareness and self help training programmes aimed at creating self reliance in the use of herbal medicines, along with creating a strong network of nurseries, Government, NGO and privately run, to make the GH plants available locally. A directory of all organisations actively participating in the campaign, particularly the nurseries, should be prepared and brought out immediately.

2. To make these practicable, there is a strong need for a State level secretariat which can not only play a central coordinating role, but also identify funding sources to support the campaign, including tapping of sources like DWCRA and Indira Mahila Yojana.

3. CONVENTION RESOLUTIONS

The participants of the State Convention to launch the Green Health Campaign in Karnataka, held on the 10th November, 95, at Aranya Bhavan, Bangalore, HAVING RECOGNISED the facts :

- that there are still wide gaps in the coverage of the wider public, specially the rural poor, by primary healthcare services, and that there still exist local plant resource based rich traditional health cultures in the community, which are presently under threat of destruction due to habitat loss and social neglect,
- and furthermore that worldwide there is increasing recognition of the effectiveness and safety in using herbal drugs vis-a-vis chemical drugs and the alternative medicine movement has gained ground with WHO strongly recommending the use of traditional medical systems, particularly in primary health care, and

HAVING BEEN CONVINCED

- that the Primary Healthcare system can be effectively strengthened by encouraging the community, particularly women, to grow selected medicinal plants in their backyards, to be made available through a network of nurseries under the GREEN HEALTH campaign, and that these plants can be used to treat common ailments, and

BEING AWARE,

- that the Social Forestry wing of the Karnataka Forest Department has already initiated the work of growing the medicinal plants package in its nurseries, and
- that other departments and agencies like Watershed Directorate, Agriculture, Horticulture, PWD, Health, Education and Zilla Parishat and local/autonomous bodies like municipalities and agricultural colleges as well as NGOs need to be directly involved with the GREEN HEALTH programme to give it a wider base, and
- that GREEN HEALTH can be initiated and sustained by the above Departments and NGOs as part of their ongoing development schemes,

NOW, HEREBY RESOLVE THAT :

- i) A network of nurseries, to be called GREEN HEALTH nurseries, will be established in all taluqs by the Forest, Watershed, PWD, Agriculture and Horticulture Departments, Zilla Parishads and autonomous bodies like the Municipality, Agricultural colleges and NGOs, in which the 17 specified medicinal plants under the GREEN HEALTH package, will be raised for distribution to the public and
- ii) These GREEN HEALTH plants will be raised and distributed among the public, and
- iii) The participating Departments and organisations, including NGOs, will take up a programme of wide publicity and educational campaign for Green Health, and
- iv) State and district level co-ordination committees will be formed to prepare action plans for promoting GREEN HEALTH and to monitor the programme:
 - a) At **DISTRICT LEVEL** the co-ordination committee will comprise the following:
 1. Deputy Commissioner : Chairman
 2. Chief Executive of Zilla Parishat : V. Chairman
 3. District Forest Officer : Member and Joint Secy.
 4. NGO : Joint Secy and Convener
 5. District-level Heads of Departments of
 - Health
 - Agriculture
 - Horticulture
 - Watershed
 - Indian System of Med.
 - Education : Members
 6. Chief Executive of Municipality Corpn. : Member
 7. Any other person co-opted by Chairman/Member Secretary : Member

b) At **STATE LEVEL** the co-ordination committee will consist of the following:

1. Develop. Commissioner : Chairman
2. Principal CCF : V. Chairman
3. Secretary, VHAK : M. Secretary and Convener
4. Secretary in the Deptt of
 - Health
 - Planning
 - Agriculture: Members
5. Heads of NGOs : Members
6. Director of
 - Agriculture
 - Health
 - Horticulture
 - Ind. Syst. of Med
 - Watershed Dev.: Members
6. Director, FRLHT : Member

- iv. An '**Executive Committee**' comprising not more than 7 members will be set up and it will function under the guidance of the Coordination Committee to facilitate the planning and implementation of the Green Health campaign.
- v. The Voluntary Health Association of Karnataka will be the **Secretariat** for all coordinating and networking activities related to Green Health.
- vi. FRLHT will make available posters, brochures etc. and moderately priced illustrated manuals- '**How to Grow Medicinal Plants for Primary Healthcare**, and '**An Users' Guide to Medicinal Plants**' in the vernacular and also '**A Directory of Medicinal Plants Resources in South India**,' for use by the Green Health nurseries and for distribution to the public.
- v) The leading environment and health NGOs like OXFAM (INDIA) and ACTIONAID will be actively involved in promoting GREEN HEALTH through actual participation in the programme by raising and distributing the medicinal plant package and in educating and motivating the community about GREEN HEALTH, in close collaboration with the Government agencies and local bodies.
- vi) Women, particularly, rural women, will be a special target of the Green Health campaign, because of their knowledge of folk medicine and their role as the caretaker of the family's health. The campaign will be mainly directed at encouraging women to raise the medicinal plants in the backyard for use in healthcare and enabling them to form Green Health Clubs.

APPENDIX I

LIST OF PARTICIPANTS

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36. Ambady Madhav
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DFO Kudremukh
37. G.N. Sreekanraiah I.F.S
D.C.F., KFD
Shimoga -577 201
38. Sanjai Mohan
D.C.F., KFD
Shimoga -577 201
39. Guruji Joe Mary Lobo
Director
Sri Christa Sharan
Birur -577 116
40. K.S.Shamanna
Social Worker
Samanvaya
No.200, 4th Main
Mnajunatha Nagar
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41. J.Gnanashaker
Samnvaya
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42. Dr. K.N.Baidya
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Joint Director (MCF)
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51. Dr. T.N. Manjunath
Project Co-ordinator
Karuna Trust
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Mysore Dist.
52. Prabhuswamy
BCM Dept.
53. P.N.Anjanppa
Investigator
54. G.Satish
DCF Honnavara
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No.49, Temple Street
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Bangalore - 560 003
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Hunsur Taluk
Mysore Dist.
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Samanvaya
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II Phase, Manjunathanagar
Bangalore -10
59. Andrews
President
Jyothi Rural Devt. Society
Shimsha, Netkal, B.G.Pura Hubli
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61. Dr. D. Daniel
Co-ordinator-Health Unit
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62. Gunsan Chaturuvedi
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Transport Staff
Samanvaya
200, 4th Main II Phase
Manjunathanagar
Bangalore -10
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65. N.C.Nanaiah
Managing Trustee
People's Trust
102, I Main, Lower Palace Orchards
Bangalore-3
66. B.S.Adappa
10, R.V. Layout
Kumara Park West
Bangalore-20
67. K.H.Gopala Krishna Gowda
Deputy Commissioner
Mandya - 571 401
68. Sadashivaiah
Chief Executive Officer
Zilla Panchayat
Bangalore Dist.
Krishik Bhavan, Hudson Circle
Bangalore
69. S.Viswanath
People's Trust
Sriramanahalli
Bangalore North - 561 203
70. Krishnappa
Kadathana Malle
Arakere Post
Bangalore North - 561 203
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73. Shantha Prakash
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74. G.Pushpa
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76. D.Ramanaik
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Forest Department
Vanavikasa
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77. C.Krishna
Conservative Officer
Aranya Bhavan
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78. K.R.Basavaraju Pandith
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79. D.M. Madappa
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82. Ms. Madhu Sharma,
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83. Mr. Dashrath Davdi
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Tq. & Dist. Bidar
84. Kanwerpal
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Karnataka Forest Department
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85. Dr. S.Srinivasa
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86. R.K.Torvi
CF SF Dharwad
87. A.Gopal
Dy.C.F.
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Vana Vikas
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88. G.N.Simha
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89. N.Srinivasa
Deputy Conservator of Forests
Forest Department
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Vana Vikas, Malleshwaram
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State Govt.
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91. Prof. D.S. Lucas
Chief Superintendent
Dte of ISM, Bangalore
92. Nissar
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Bellary
98. Jacob Thomas
Gen- Secretary
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Kottayam Dist.
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99. Yusuf Perodi
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Bangalore - 8
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Hassan

102. S.Muniyappa
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103. S. Gangadharaiah
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109. G.S.Sathyanarayana
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Milind Institute of Pharmacy
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117. P.Panchalinge Gowda
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B E L
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120. K.Dasaratha Rao
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R.T.Nagar P.O.
Bangalore - 32
121. Somashekar K.H.
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122. G.R.Balonge
CEO, ZP
123. Sudhakar B.Basatkar
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P H C
128. Dr. Bhavani Belvady, President
VHAK
129. B.V.Byra Reddy
Range Forest Officer
K F D
Hassan
130. Suma Krishnaswamy
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131. V.Aravind
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134. D.H.Kulkarni
Chief Manager
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Bangalore- 47
135. Sarojamma
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136. K.C.Lakshmi
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139. Basewanegowda
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140. Mir Arifulla
Asst. Principal
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141. N.B. Manjunath
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142. Premakumari
Aranya Bhavan
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143. Dr. Mahesh
Snehakunja Trust
Kasarkod
144. Y.G Muralidhar
CREAT
Bangalore - 40
145. Lakshmi Narayan
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147. Mellikarjun
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148. Dr. P.J. Dilip Kumar
Joint Director
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Malleswaram, Bangalore

APPENDIX II

LIST OF FRLHT PUBLICATIONS AND EDUCATIONAL MATERIALS ON GREEN HEALTH

1. * An User's guide to Medicinal Plants for Primary Healthcare
2. * How to Grow Medicinal Plants for Primary Healthcare
3. A Directory of Medicinal Plant Sources in South India
4. Neem: Free No More

* Kannada, Tamil and Malayalam versions of these publications will be available shortly.

All these publications are moderately priced and are available for sale with

Medplan Conservatory Society,
No. 8, 1st Floor, IV Main, II Stage,
Ananda Nagar, Bangalore 560 024.

Other publicity materials in English, Kannada, Tamil and Malayalam available with FRLHT which can be supplied to agencies participating in the Green Health campaign:

1. Brochure on the Green Health Campaign
2. The Way Mother Used To: A brochure on women and Green Health.
3. Posters and stickers on Green Health.