SOCIAL WORK DELEGATION TO
DELHI, JAIPUR
& AGRA
INDIA
February 13 – 21, 2012

DELEGATION LEADERS
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Jeane W. Anastas, PhD, LMSW, President, NASW
MONDAY FEBRUARY 13, 2012

ARRIVAL IN DELHI

Our US departure city for our trip was Chicago. Delegates kept arriving at the gate area and it was nice to see so many familiar faces. About a third of our delegation had made their own flight arrangements. The rest of us boarded our American Airlines flight for a 3:40pm take-off. The 15 hour flight to India was uneventful, but very long.

We arrived at Indira Gandhi International Airport, a beautiful new structure located on Nelson Mandela Avenue in New Delhi. We were a bit surprised by the strict security. All of our luggage was screened and we had to walk through metal detectors and have our bodies scanned.

We were greeted with a traditional welcome including the arti ceremony where a woman in a beautiful sari presented each of our forehead with a tika which is supposed to be lucky.

Room keys were ready and our luggage was sent to our rooms. A few small groups of delegates met for a quick dinner in the hotel restaurant, but everyone seemed quite exhausted and ready for bed. We were told the program would begin early the next morning and we wanted to be ready.

We were met by our People to People guides who were easily identifiable by their signage. The bus was out front waiting for us and it was a relatively smooth transfer.

Our flight arrived around 6pm. That put us right in the middle of rush hour traffic. That was our introduction to the traffic congestion that would be a constant during our entire trip. It took about an hour to reach our hotel, the Grand Hotel is a beautiful, modern structure located on Nelson Mandela Avenue in New Delhi. We were a bit surprised by the strict security. All of our luggage was screened and we had to walk through metal detectors and be scanned.

TUESDAY FEBRUARY 14

CULTURAL PROGRAM

We began our first full day with a breakfast buffet at the hotel restaurant. We started early as our orientation session was at 7:45am.

Bala Menon, the owner of Worldwide Adventures India (email: Bala@worldwideadventuresindia.com), gave the cultural overview and orientation to the program. He company arranges tours in India, Cambodia, and Vietnam. They have managed 170 People to People delegations.

India is a complex country and a land of many different stories. It is an ancient civilization, but it only gained its independence from the British in 1947. It is the fourth largest economy in the world.

There are over a billion people which includes 315 million middle class families. However, there is much rural poverty and urban homelessness. There are many “tent cities” or slums, and most people do not rent. There is little separation of residential and commercial areas, and there is a severe shortage of water.

Over 1,000 languages are spoken and 20 are considered official languages. English is the language of work. To get most jobs, a person needs to speak English.

Immigration is becoming more of a problem. Children do not go to school. They are trying to remedy that. There are two kinds of schools: public schools (which are actually private) which teach in English only; and government schools which use local language first and then English. Children are supposed to go to school until age 14. If girls stay in school until standard 10, 5000 rupees in a family bank account. If they stay in school until standard 10, 10,000 rupees are put in the account. The number of Indian school children equals the whole population of Europe.

Delhi is a combination of eight separate historical cities, but only two are still functioning. The others are in ruins. Old Delhi is the northern part of the city.

Traffic is a major problem in India. It is congested all day long. Over two million people use the underground metro in Delhi. It costs only eight rupees to ride, and it covers over 200 kilometers (124 miles). The metro has seven stations.

Animals are a part of everyday life in India. They share the land and the roads. You see cows, elephants, camels, monkeys, goats, sheep, water buffalo, horses, and dogs. There are few cats, but many birds — especially pigeons. At tourist attractions you can find snake charmers that actually have defanged cobra snakes in baskets.

Bala concluded by saying that people either love or dislike India, if they dislike it, it is usually because it is too much to take in during a visit. The morning schedule was changed to include our first professional meeting with the staff and children of the Deepalaya School. As we left the hotel for the first thing we noted was a large cluster of small dwellings made of plastic, scavenged bricks, and other found materials. This densely settled “village” was built on the highway median across from a traffic roundabout on one side and a large new shopping mall on the other. Perhaps it started with the workers who built the mall or the highway, but it looked to be quite permanent. While...
ON FEBRUARY 12, 2012

NASW MEMBERS GET A CLOSE-UP VIEW OF INDIA

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Bala introduced us to our national guide, Ashish Khurana, and our local guides for Delhi, Sandeep Singh, and a woman named Priti (which means “love” in Sanskrit). He then went over the week’s schedule and taught us the word of greeting – namaste – which has a variety of meanings. It is usually said with hands put together as though praying.

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Traffic is a major problem in India. It is congested all day long. Over two million people use the underground metro in Delhi. It costs only eight rupees to ride, and it covers over 200 kilometers (124 miles). The metro has security similar to airports. This has helped traffic. The idea that the metro is for the lower classes is changing. The younger generation is using it and changing the image.

Animals are a part of everyday life in India. They share the land and the roads. You see cows, elephants, camels, monkeys, goats, sheep, water buffalo, horses, and dogs. There are few cats, but many birds — especially pigeons.

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Social Work Delegation – India

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tends and modern airports were common sights for us from the USA, this improvised neighborhood was a taste of what seemed different about cities in India as compared to those back home.

PROFESSIONAL PROGRAM

MORNING – DEEPALAYA SCHOOL

Our first professional meeting was a visit to the Deepalaya School. It is a non-governmental organization (NGO) started in 1979 for marginalized children. They began working with immigrants and now there are seven schools and a national NGO working in four different states of India. To date, they have educated 16,000 students and currently have 800 students enrolled. They also have hostels for children who are HIV positive or who are sex workers. They offer both health care and preventive services.

The specific school we visited works with the poor. It gives preference to girls, but they will admit their brothers. There are 500 students there. The school is surrounded by slums with a population of about 10,000.

We were welcomed at the door by a group of beautiful little girls wearing white dresses. They were the choral group. The other children wore blue uniforms.

Once settled, we heard a presentation by Shikh Pal, the Assistant Manager. She explained that children may begin school starting at age three. Their classes go from eight to two. Class size is 30-40 students to one teacher. Books and notebooks are purchased by the children. Other supplies are provided. They take no money from government, but rely solely on private donations.

After the presentation and a tour of the facility, we were seated at an outdoor stage where the children performed for us. The choral group sang, “When the Saints Come Marching In,” and a few of the older girls did a dance for us. Our delegation presented them with a plaque and a donation. We then were served coffee, tea and cookies. It was an uplifting and enjoyable experience.

CULTURAL PROGRAM

AFTERNOON – CITY TOUR

After the Deepalaya School, we began a city tour with Priti, the local guide, explaining the various sights. Since it had been dark the night before when we arrived at the hotel, this was our first actual glimpse of India. The city seemed very alive. Cars and motorbikes, as well as people, were in motion. Due to the volume of traffic, horns were heard constantly. There were mainly men on the streets, but many of the women we did see were wearing colorful sari. Our guide provided colorful commentary as well.

We spent most of our time in Old Delhi seeing sites such as the Red Fort and the Raj Ghat memorial to Mahatma Gandhi. Gandhi was shot by a fanatic in 1948. His body was cremated on the banks of the Yamuna River, and the cremation site is a national shrine. Women sold red, gold and white flowers by the shrine. The Red Fort was a main residence of the royal family many years past.

Probably the highlight of our tour was a visit to the micaule market or square which is part of Chandni Chowk, a famous strip of shops and frenetic activity. Our guides had arranged for us to have Rickshaw cycle rides and they had reserved an adequate number so they were waiting for us when we got off the bus. Each Rickshaw held two people and the ride through the market took about 45 minutes.

It is difficult to describe the chaos of the market. People were everywhere, Rickshaws were everywhere, and progress through the maze was slow. We saw the area where saints and ruins of every sort was for sale. We also passed the area that sold books and the area that sold automotive parts. It was fascinating. At the same time, we were happy to get back to the bus area safely. Next was lunch.

Lunch was at the Hotel Broadway in a restaurant called Chor Bazaar. The word “chor” means thieves. Art deco in design, it is Delhi’s best known Kashmiri restaurant. We had a fixed lunch, and service was quite good.

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As part of our cultural tour, we stopped at Cottage Industries at a store called Heritage where we had a fascinating and useful rug making demonstration. Rug-making is an important industry in India. The silk rugs we saw came from the state of Kashmir. The state, which is mountainous, has few towns and the people speak different languages. Rug making there is simple and different from other countries such as China. Patte (silk threads) are identifiable because of the flower patterns. About 75% of all carpets in the area are hand-knotted. 15% of rugs are made in machine made factories.

They use their hands to knot (hand weave) the silk thread as they go. This do not use a shuttle or weaving. It is very tedious work so they only work three to four hours each morning. Contrary to popular myth, they never put a purposeful mistake in a carpet. They do their own dying (and use as much as they can do). They let the dye set out in the sun for months so colors will not fade at a later time. They make their own dye with natural elements such as red from poppies, blue from indigo, and white from rubber. They may also use vegetable dyes.

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Probably the highlight of our tour was a visit to the moonlit market or square which is part of Chandni Chowk, a famous strip of shops and food vendors. Our guides had arranged for us to have rickshaw cycle rides and they had reserved an adequate number so we were waiting for us when we got off the bus. Each rickshaw held two people and the ride through the market took about 45 minutes.

It is difficult to describe the chaos of the market. People were everywhere, rickshaws were everywhere, and progress through the maze was slow. We saw the area where saris and trim of every sort was for sale. We also passed the area that sold books and the area that sold automotive parts. It was fascinating. At the same time, we were happy to get back to the bus area safely. Next was lunch.

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They do their own dying (and use salt to do so). They let the dyes sit in the sun for months so colors will not fade at a later time. They make oriental hand rewoven carpet.

Once it is done, they wash the carpet and put it out in the sun for 10 days. Then they shear it. Shearing makes it stronger because it is denser. If sheared correctly, furniture won’t leave a mark. Walking enhances the beauty of the carpet.

After the demonstration, the delegation had an opportunity to look at the showroom. Several people purchased rugs and had them sent home.
Meeting with IGNOU Faculty.

Muslim Prayer Temple.

The Qutb Minar is the tallest tower in India and an example of Indo-Islamic architecture. It stands 242 feet high. While we could not go inside, we were told that it had 376 steps.

Construction began in 1193 under the direction of Qutb-ud-din Aibak. His son added the top four stories. It originally was used as a “call tower” which is a building for a call to prayers. At the base of the tower is the first mosque built in India. It was erected by Muslims in the 12th century. It was built on the site of a Hindu temple.

The grounds were lovely and it was a beautiful morning. Everything looked green and lush. Birds were singing, and we saw several gray parrots. We had some free time to wander and take pictures before we needed to reboard the bus for the university.

ThePROGRAM

WEDNESDAY FEBRUARY 15
CULTURAL PROGRAM

We enjoyed a leisurely buffet breakfast and were on the bus at 8:45 am. We needed to be at the Indira Gandhi National Open University (IGNOU) before 11 am when we would be addressed by a high-ranking official. Since we had time, our guides wanted us to see the Qutb Minar.

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PROGRAM

MORNING – INDIRA GANDHI
NATIONAL OPEN UNIVERSITY

The social work education program we visited in New Delhi is housed at the Indira Gandhi National Open University, which is called “the people’s university” and offers hundreds of degree programs on-line and at sites throughout the country (and overseas). The School of Social Work at IGNOU was established in 2007 and became fully operational in 2009. There were two areas of focus for the delegates’ meeting with the social work faculty at IGNOU: social work education in general and the importance of an effective national professional association of social work for the development of the profession in India.

At IGNOU, delegates were first welcomed by Dr. M. Aslam, the new Acting Chancellor, who provided an overview of the impressive scope of IGNOU’s on-line and other educational programs within India and abroad. Having a PhD in sociology, Dr. Aslam also touched upon some of the social problems facing India and how higher education, in general, and social work, in particular, had important roles in addressing them. As described by Dr. Aslam, the University takes a student-centered approach to learning and serves multiple student markets: teenagers forced into the labor market early (similar perhaps to community colleges in the United States), adults already employed who enroll to advance their careers with additional skills and credentials, and “digital natives,” those, including members of India’s armed forces, who already “live on-line” and naturally seek their education there as well.

Delegates next heard from the Director of the Social Work Program, Dr. Gargiour Thomas. He talked more about the content of the social work program, emphasizing that the department placed great importance on the “practical” aspect of the education as well as the classroom content that could be delivered on-line. The supervision of student practice occurs not just on-line but also at IGNOU’s many regional centers where students receive personalized “coaching” in all aspects of their educational development, including their practice.

Program brochures show courses of study at BSW and MSW levels that did not seem unfamiliar to us as US–educated social workers. The School of Social Work also hosts an annual lecture in memory of Mother Teresa and an annual “national seminar” on the social work response to HIV/AIDS which had just been held in January.

One problem mentioned by Dr. Thomas and other faculty members was the need to “indigenize” the curriculum and to develop materials based in the Indian experience rather than relying dominantly on publications from the West. Dr. Thomas himself has published a book entitled Origin and Development of Social Work in India (2010), which offers chapters from a variety of authors on the history of social work in India through initiatives by the state, individuals, social movements, and NGOs.

After some discussion among the assembled faculty members and delegates, we were all taken to IGNOU’s impressive television broadcast studios for a panel discussion on professional social work associations. Dr. Thomas and Dr. Mahesh, an Assistant Professor of Social Work, hosted a panel with Dr. Clark and Dr. Anurag that was broadcast live on their educational television system; the rest of the delegates formed the live studio audience for the event. In a brief meeting the previous evening, Dr. Mahesh had crafted a list of basic questions regarding NASWUSA: what is needed for an NASW, describe the profile of the organization and its membership, social work legislation being pursued in the USA, and current challenges to the association.

Dr. Mahesh concluded with an overview past and present national social work associations in India, arguing that a stronger national organization of social workers for professional social work was needed. The whole production process was extremely well-organized and efficient, and delegates enjoyed asking questions.
visited the Qutub Minar, a building for a call to prayers. The Minar is the tallest tower in India and an example of Indo-Islamic architecture. It stands 234 feet high.

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We next went to a temporary shelter that is open 24 hours per day. It was built to shelter 50 people on pallets, but sometimes they have up to 80. There are three caretakers per shift. They use washable mattresses and a cleaning crew goes around the city from shelter to shelter. (There are 84 temporary shelters in the city.) On a regular basis they iron the mattresses to get rid of bacteria. There are no lights because three shelters caught fire and people died because there was only one door. Now the shelters have two doors each, plus smoke detectors and fire extinguishers. The shelter seemed very “bare bones” to us. In looking at the pictures taken there, we all look a bit uncomfortable.

One of the social workers accompanied us on our visits. Our final stop for the day was St. Stephens Hospital to meet with the director of community health. LATE AFTERNOON – ST. STEPHENS HOSPITAL

By the time we arrived at St. Stephens Hospital, it was early evening. Trafic had been quite difficult. The director, Dr. Arnold Kumar, met with us in a small conference room and gave us an overview of the community health program. The hospital is 126 years old. The day we were visiting was St. Stephens Day. It was started by a 15 year-old woman whose brother had died. When it opened, the hospital was exclusively for men and children. It now has 700 beds. The Community Health Department is housed there. The department has 100 staff to care for 8000 persons, many living in unsanitary conditions. They also manage the Homeless Project of Delhi which is operated out of St. Stephens. Dr. Ku compared the situation of their homelessness problem to the Great Depression in our country.

Homelessness is divided into zones. There are now 145 shelters in Delhi. Their goal is to make the shelters like workers’ homes. There is a shelter for pregnant women. There are only four shelters in all of Calcutta, one in Mumbai. The services are not sufficiently funded.

He also explained that there are 145 food drops in Delhi, and their help generates 20,000-25,000 calls per year. They make transportation arrangements for about 35,000 people annually. Interestingly they have a website for the homeless. They use many volunteers, and they referred to as care leaders.

We were all tired and had had a long day. We had visited both a permanent structure shelter and a temporary homeless structure and had seen the dedication of staff and volunteers. The magnitude of the homelessness problem seemed daunting and unsolvable. We were admiring of the efforts of St. Stephens despite such problems, and we marveled at what they were able to accomplish with a small staff of only 100.
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Homelessness is divided into zones. There are now 145 shelters in Delhi. Their goal is to make the shelters like workers’ hostels. There is a special shelter for pregnant women. There are only four shelters in all of Calcutta, and none in Mumbai. The services are not sufficiently funded.

He also explained that there are 145 food drops in Delhi, and their helpline gets 20,000-25,000 calls per year. They make transit arrangements for about 35,000 people annually. Interestingly, they have a website for the homeless. They use many volunteers, and they are referred to as care leaders.

We were all tired and had had a long day. We had visited both a permanent structure shelter and a temporary homeless structure and had seen the dedication of staff and volunteers. Still, the magnitude of the homelessness problem seemed daunting and unsolvable. We were admiring of the efforts of St. Stephens despite such great odds, and we marveled at what they were able to accomplish with a small staff of only 100.
Lunch with IHBAS Staff.

Discussion with IHBAS Social Work Staff.

IHBAS Tour.

Institute of Human Behavior and Allied Sciences (IHBAS).

The accreditation program has 100 standards and over 500 objectives. Only 15 government hospitals in all India have the accreditation, and IHBAS is the first hospital that deals with neurosciences and mental health to achieve one.

General psychiatry started in India before they gained independence in 1947. In 1966 mental hospitals were set up in prisons. In the 60s and 70s, they were building custodial facilities when other countries were moving away from that approach. In 1983, public interest legislation around human rights passed. Just the previous week, a Right to Information Act passed in their high courts. Dr. Desai mentioned that they have some reservations about that law. He would like to see information compartmentalized so the patients cannot see the records of family members and vice versa.

They do have a health system like the United States, both a private and a public sector. Dr. Desai noted that there are “seven star” midihotels near the airport for medical tourism, but that only the rich use the private sector. They deal with both brain and “mind problems.” They do 800 health psychology consultations every day six days per week. About two percent of these patients are hospitalized. The average length of stay is three weeks. They also have a psychiatric ICU for medical co-morbidities. Patients with medical problems can be seen at the neighboring medical hospital.

Prevention of institutionalization is their goal. The reasons for hospitalizations are court orders, potential danger to self or others, family Burnett, dual diagnosis, and social admissions.

They have a 96-98 percent success rate of placing people back in the community, mainly with their families. Dr. Desai contributed this success directly to the efforts of the social workers there. There is no separate department of social work, but there is a specialization of psychiatric social work, and in addition to Dr. Jahanara, we met three other social workers.

We saw several different units on our tours. One was a mother and child care unit that houses pregnant women or young mothers referred by law. The women stay one to four months on average, and they resist separating the mother and their children. We asked a question about child safety, but Dr. Desai did not see that as a major issue.

Delegates were a bit taken aback by the tour, where we entered areas with patients, some of whom were in the middle of a therapy session. Since client confidentiality is such an important concern for social workers in the USA, delegates felt uncomfortable at times. Dr. Desai did note that they have zero tolerance for any human rights violations, including any abuse.

After the tour, we reconvened in the conference room where we were served lunch and a lively discussion ensued.

Flight to Jaipur

We got to the airport in the usual traffic. Check-in was a bit confusing but everything worked out and we are boarding a prop jet for a short flight to Jaipur. When we landed, one of our guests needed a wheelchair. They had one available, but there was no way to get the wheelchair in the bus that took us to the terminal. Instead, an attendant pushed the delegate a long distance on the tarmac down the runway. It is hard to imagine that happening in our country.

It was mid-evening when we arrived. The bus trip to our hotel, the Putana Sheraton, was not too grueling. The hotel, as usual, was lovely, and we were all glad to call it a night.
FRIDAY FEBRUARY 17

CULTURAL PROGRAM

Jaipur is the capital of the state of Rajasthan, the largest state in India. It is located 162 miles southwest of Delhi, and the state’s most western part borders Pakistan. Given the traffic congestion, we were pleased to fly, rather than drive, to this destination. The bus with our luggage had arrived before us and met us at the Jaipur Airport.

Jaipur was founded in 1727 and named after Maharaja Sawai Jai Singh II who was both an architect and an astronomer. It is considered one of the first planned cities of the world. Part of the city is still contained in 20 foot high walls.

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It is known as the “pink city.” It was painted pink (more of a salmon color) when Prince Albert, a British dignitary, visited in the middle of the 19th century and rose was his favorite color. By law, buildings in the old part of the city must still be painted pink.

The city was built for 200,000, but the greater Jaipur area has over 6 million inhabitants. Traffic congestion is the norm, and cars, trucks and buses are combined with rickshaw touts, elephants, a few camels and thousands of motorbikes. Cows wandering loose are also a frequent sight. They are building the Jaipur Metro which should be operational in 2013.

Jaipur is an especially colorful place, with many cultures and styles blending together. It is the hub of the state’s tourism market and it is known for textiles and gemstones.

Today was devoted to cultural activities, a nice break from the professional meetings in Delhi. After a buffet breakfast, we began our day with a fascinating visit to an open air observatory called Jantar Mantar. Built in 1726-28 by the same man who founded Jaipur, it is well preserved and contains dozens of solar instruments called yantras which measure celestial data such as positions of the stars and the prediction of eclipses. Our local guide was quite knowledgeable about the observatory and we were able to tell time by the huge sundial. We could also have our pictures taken by the instrument which identified our astrological signs. It was a particularly beautiful morning, and we spent a good amount of time exploring the grounds.

We next visited the City Palace, a complex of buildings, small museums of items such as textiles, costumes, robes and armor, and a large café. It was wedding season, and we watched one of the halls being colorfully decorated for a wedding that was to take place later. Several times during our stay in India we heard about arranged marriages which are determined by astrologers. Also, the most propitious days for marriage are determined and many marriages take place on the same ideal days. The legal age of marriage is 21 for men and 18 for women, but they still have childhood marriages in some rural areas.

Frequently, the prospective bride and groom do not meet until they are engaged. Several of our guides and others we met had arranged marriages. The phrase we kept hearing was, “Love comes after marriage.” The groom rides a horse or an elephant to the bridal ceremony, and we were fortunate to see several processions during our visit.

Since the delegation was enjoying the visit, our guides secured some tables in the open air café and we had lunch there. It was a pleasant experience. The afternoon consisted of exposure to gemstone cutting and polishing. Numerous natural gemstones, such as rubies and star sapphires, are mined in India. Perhaps more significant is that many of the world’s gemstones are cut and polished by Indian artisans after they are mined in their respective countries.

We visited the Jewels Emporium where we saw the gem cutters and polishers at work. It is more of an art than a science. The gem cutter used a hand turned copper wheel to create facets and to polish the stones. He was working on a ruby while we were there. Other employees were doing jewelry design, gem setting, and classifying and rating the completed stones. They work long hours, six days a week. After the demonstration, we were invited to visit the showroom where finished jewelry and unset gem stones could be purchased.

SITUDAY FEBRUARY 18

CULTURAL PROGRAM

We left the hotel at 7:30am to try and beat some of the traffic congestion. It was our morning for an elephant ride. When we arrived at the Amber Fort, there was already a long line of tourist groups waiting their turn for an elephant ride up the long hill to the entrance of the fort. The elephants carried two people at a time and the elephant driver sat on the neck. The process for boarding was quite efficient, and the line moved quickly. One downside was the aggressive hawkers who were trying to sell souvenirs and take pictures as the elephants carried the tourists up the hill. For many of us, the elephant ride was a once in a lifetime experience.

At the conclusion of the ride we disembarked from the elephant and walked through the Amber Fort (Amer Fort). Amber means sky in Hindi. The Amber Fort is so named because it is built on a mountaintop and there is nothing between it and the sky. Like most forts, it was built on mountains for safety. The builders of the fort used ingenuity. For example, on long corridor had a reflecting surface so that they only had to use one oil lamp to light it at night.

The architecture was beautiful and there were stained glass windows. As usual, our local guide was knowledgeable, and he intertwined some stories with the history. At the top of the tour, we went to a chaotic area filled with capes. Our guides were there to guide us, and directed us to the jewelry store reserved to take us back down the hill to our bus.

We did not spend a great deal of time in the fort because we had a profession meeting scheduled at noon. We made a quick trip back to the hotel to change into more professional clothes and to meet at the Bhagwan Mahaveer Cancer Hospital and Research Centre. We were due there at noon, and we were actually a few minutes early.
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Bhagwan Mahaveer Cancer Hospital and Research Centre

Social Work Delegation – India

WELCOME – BHAGWAN MAHA VEER VIKLANG SAHA YATA CENTRE – MORNING

The Bhagwan Mahaveer Cancer Hospital and Research Centre was opened in 1997. It is managed by the K.G. Kothari Memorial Trust. It is a 270 bed teaching hospital. Since opening, they have treated over 5000 patients and they have a 75% occupancy rate. It also has a nursing school of 200 students. Last year they saw 200 patients. They use the motto of “affordable care with human touch,” and care is free if patients cannot pay. They treat patients with both solid tumors and blood cancers. They have a small home care program, a mobile unit for check-ups, mammography and blood donations. They also have an eight bed unit (in one room) for palliative care. Families are welcome in the palliative care unit at all times.

They participate in clinical trials, and have completed 40 phase one to phase four trials since they opened. They have an Institutional Review Board that includes both a social worker and a psychiatrist. Their future plans include building a 75-bed extension (which was already underway), opening a bone marrow and stem cell transplant unit, and opening a genetic and molecular biology lab.

While the term “social worker” was mentioned several times, there was no presentation by a social worker. They did mention that 30 patients received psychosocial oncology care last year, which seemed like a very low number.

At the conclusion of the presentations, the Director invited us to lunch out on the patio. Again, we were surprised that they had literally rolled out a red carpet to the patio. At the lunchroom, there were several individuals who indicated they were social workers and we had our picture taken with them. They had prepared a traditional Indian lunch and we had some time for social interaction before taking our leave.

AFTEERNOON – BHAGWAN MAHA VEER VIKLANG SAHA YATA CENTRE – – MORNING

The director pointed out that their prostheses are basic and functional, not electronic. Their goal is to return the person with the amputation to a functional life and thereby restore their dignity. They do hold the patent (at Stanford University) on a specialized four bar linkage knee joint. In 2009 Time Magazine listed the knee joint as one of the top 50 inventions in the world (www.time.com/time/specials/package/serial/98854_1934027_1934003_1933963_00.html).

In addition to prostheses, they also manufacture braces for people whose muscles have atrophied. These are frequently needed by persons who had polio. Their third product is a crossette that can be maneuvered by a fairly simple hand wheel. These are used by people with congenital defects. They are like a type of three wheel tricycle and are painted a bright yellow. One of their clients demonstrated the unit.

He usually maneuvered by sliding on his hands and knees. In the cart he could sit upright and get around eas
Afternoon – Bhagwan Mahaveer Viklang Sahayata Samiti (BMVSS) – A.K.A. Jaipur Foot

The Cancer Centre, we went to visit an amazing program called Bhagwan Mahaveer Viklang Sahayata Samiti (BMVSS) or, as commonly known, Jaipur Foot. It is an example of what a few dedicated and creative people can accomplish when they see a need and decide to fill it. It was established in 1975 and is called the “World’s Largest Organization for the Disabled.”

Jaipur Foot is run by two brothers. Both had held previous professional and prestigious jobs – one (Shri D.R. Mehta) in government and one in banking. It is formally a charitable NGO established to provide low cost prostheses to people with leg amputations, congenital deformities, polio, and even leprosy. There is a staff of craftsmen and volunteers drawn from the community, other countries, and former clients.

The facility is like a campus. There are several buildings and a park area where students can eat outdoors and study. The main building is a combination clinic and manufacturing plant. It seemed almost like a manufacturing plant. Their goal is to return the person with the amputation to a functional life and thereby restore their dignity. They do hold the patent (with Stanford University) on a specialized four bar linkage knee joint. In 2009, Time Magazine listed the knee joint as one of the top 50 inventions in the world (www.time.com/time/specials/packages/article/0,28804,1934027-1934003_1933861,00.html).

In addition to prostheses, they also manufacture braces for people whose muscles have atrophied. These are frequently needed by persons who have had polio. Their third product is a cart that can be maneuvered by a fairly simple hand wheel. These are all made of inexpensive materials, and the leg portion is made of PVC pipe that is heated and molded to the necessary specifications. In terms of flexion and function, it is close to the human foot. The cost of the completed limb is around $40 (as compared to $10,000 - $40,000 for prostheses in our country). In addition, the prostheses often can be fitted in one day. They last on average of 3.4 years and then they will need replaced.

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The majority of the clients are young men. Farm accidents and motor accidents account for most of the amputations. They learn of the center by word of mouth, and the only requirement is that they get themselves to the clinic. After that, everything is free including paying transportation home from the clinic. In about ten percent of the cases, the organization also provides them with a means to a livelihood – such as a sewing machine or some other needed equipment. To date, the program has benefited over 1.2 million people with disabilities.

When we arrived, we were introduced to a young man who had lost both lower extremities in a tractor accident. His brother was with him, and he seemed quite shy. They were in the process of manufacturing his prosthesis. At the conclusion of our visit, he was walking for the first time in over a year. It was a transformation that easily emphasized the importance of the work being done.

There was another moving incident when Director Mehta was explaining why their service had to be totally free. He asked one young man to give him all of the money he had. The young man looked surprised but reached in his shirt pocket and handed over his cash – three ten rupee notes (about 60 cents). The Director added another 30 from his own pocket and said, "You gave me 30 so I give you 30."

This humanitarian program has spread to over 24 countries and has fitted limbs for almost 21,000 individuals. This is done through what are called "limb fitment camps" where the staff take their equipment to the country and fit and produce the limbs while there. Some of the countries have land mines, are war torn, or simply have high rates of poverty and need. They are shortly going to begin some services in the Congo.

We were all glad to have the opportunity to visit the Jaipur Foot project. It is, once again, an inspirational testimony to what a few caring and dedicated people can do.

**EVENING – DINNER WITH LOCAL FAMILY IN JAIPUR**

On most People to People trips, they try to arrange dinner with a local family. That allows for a better understanding of the culture. For our delegation, dinner had been arranged with Mrs. Singh, a local activist, and her family. They had just celebrated her nephew’s wedding and she still had some relatives present as house guests.

It was a beautiful mild evening and they had set dinner at small tables outdoors. We began with drinks and hors d’oeuvres indoors. Mrs. Singh’s grandfather had been a hunter and many of his trophies, including a leopard, were displayed. As a treat, our hosts had hired two young artists to do hand paintings in henna. That is a tradition at many weddings, and several of the women in our delegation participated in the ritual.

Some of our conversation centered around marriage customs including the custom of arranged marriages. Both our hostess and her guests had arranged marriages, and they talked about their acceptance of such.

We also spent time talking about the volunteer work that our hostess did with children with HIV and AIDS. Her program is called Faith Asalining Home. She had purchased a house where 24 children live with round-the-clock caretakers. She is a compassionate woman who cares highly about social issues. One of our delegates was planning to spend a few extra days in the area and asked if she could volunteer at Mrs. Singh’s program. Her assistance was gladly accepted.

Mrs. Singh and her assistants had prepared a traditional Indian meal for us. At the conclusion of the meal, we took our leave. It had been another long day.

**SUNDAY FEBRUARY 19**

**TRAVEL TO AGRA**

Agra is located 124 miles southeast of Delhi in what is known as the Northern Plain. It is a city of about 1.5 million people. Most tourists might skip visiting Agra if it were not for the Taj Mahal.

We were all looking forward to the trip, but not to the terrible traffic. The countryside was mainly agricultural with fields of mustard, sugar cane, and wheat. There were also many places that manufacture statuary made of sandstone which was much in popular demand. Our national guide entertained the delegates with some of the history of India as we traveled.

We stopped for lunch in Bharatpur at a beautiful restaurant called Gulmohar. The place served all organic food. We ate at an outdoor patio. The grounds were lovely and included a hotel and a spa. There were peacocks in the gardens. It was a lovely break.

Next we stopped at Fatehpur Sikri, a deserted red sandstone city built in the 16th century as a fortress city. It is a massive structure with a circumference of seven miles. Its name means "City Victory," and it is an excellent example of Mughal architecture (the Taj Mahal is the best example). The greatest of Mughal emperors named Akbar (1542-1605) built it for a wife who was his son. It has a six sided pointed morf and the architecture synthesizes both Muslim and Hindu beliefs. The two identical palaces facing each other. The empress lived at one during the summer (one that got breezes) and the other side in winter. There was a sized pachisi game board made of marble in the courtyard. Legend claims that at the evening, the emperor played pachisi using girls as game pieces. The last girl standing got to spend the night with the emperor.

Akbar ruled in the palace for only 1 years (1571-1585) before moving his capital for either political reasons or to the need for water. It was abandoned and never restored, and therefore its architecture was not modified.

From there we had an hour ride to Agra. We stopped at the marble factory before going on to hotel. Agra is known for marble. It is a special type of mar...
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lovely break.
We had some free time to explore the grounds including the reflecting pool – called the Lotus Pool – and we had a group picture taken there. It was a peaceful and beautiful place.

We left the Taj Mahal around 8:30am. At that time, the lines for entrance seemed endless, and we were glad we had come early. We returned to our hotel for breakfast and to get our luggage.

We had one more stop before returning to Delhi. That was the Agra Fort. Several of us were wondering if we would find another fort interesting and we were pleasantly surprised. Built on top of a mountain, the fort is massive and looks like a movie set complete with drawbridge, a moat which used to hold alligators, a ramp that echoed so that the sound of any approaching horses’ hooves would be detected, and a place where attack elephants were kept. The word “fort” is misleading, as the complex is actually a fortified palace.

A succession of Mughal emperors lived and governed there, including Emperor Shah Jahan who resided there while the Taj Mahal was being built. A portion of it was a prison where his son Aurangzeb held him captive during the last seven years of his life when the son forced his father out of power.

We stopped at a restaurant complex for lunch and had a little time to do some shopping. We arrived in Delhi just in time for rush hour traffic.

On the way into the city, we passed major industrial complex of high rise buildings and most other parts of Delhi was striking. Our guide explained that the complex keeps growing, but it does not have infrastructure to support such growth. The contrast between the industrial and most other parts of Delhi was striking.

We arrived at the Grand Hotel about 7pm. The delegates going on the extension checked in for the night. Those returning home were to leave for the airport at 8:30pm. A hospital room had been secured for each of us to prepare for the flight home. We arrived at the airport in plenty of time and said our farewells to the guide and the other staff. Our flight to the USA left about 1am.
most people went directly to their hotel. At 6:45am, they began security procedures. Both your person and your luggage.

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Our guide explained that the complex was as magnificent as the pictures and travel books promise, and it was easily evident why it is one of the “Seven Wonders.” As the sun rose higher, we were able to take photos with the structure visible in the reflecting pool.

TRAVEL BACK TO DELHI AND RETURN FLIGHT TO THE UNITED STATES

At the conclusion of our tour at the Fort, we began our drive back to Delhi. Traffic was extremely heavy. Today was the festival of Mahashivratri and every little village was celebrating. Last evening on our trip to Agra, we saw young men dressed in white carrying decorated water jars containing water from the Ganges River to certain temples. Many walked long distances, and had to arrive before sundown today.

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The rich cultural program in which we had participated taught us much about the antiquity of Indian society and its rich and varied cultural heritages, from maharajas to moghuls to “the Raj” to independence. We were coming full circle back to the Indira Gandhi International Airport, where you reach the boarding gates only by passing through a sprawling duty-free shop and below a mall-style food court, complete with a McDonald’s, of course without the beef. On the other hand, the very high security at the airport was a reminder that India has reasons to fear for its national security. While having separate security “gaits” for males and females amused us, the fact that our hotels had required security screening of people and bags on entry had not been lost on us. The airport screenings themselves were of higher quality and efficiency than many of our own in the USA.

For many of us, the very visible poverty of so many Indians had been difficult to witness. The poverty in the United States is often quite invisible to middle class people as they go about their daily lives. For example, while we see people living on the streets in US cities, their numbers are far fewer than they appear to be in cities like Delhi. On the other hand, we had met many – citizens, social workers, and other professionals – who were working with great dedication and success to meet the pressing needs of the people, whether for high-quality schooling for slum children, for a prosthetic that would allow for earning a living and increased self-respect, for humane mental health care, for state-of-the art cancer care, and for shelter for homeless people. We also met academics who were making social work education available throughout the country and, in partnership with other open universities, around the developing world. Their inspiring work will be the most indelible memory that we carry with us from this journey.

My overarching impression of India is the activity level. People, cars, motorbikes, and other vehicles are in constant motion. This is partly a function of sheer numbers, but it is also a function of a work ethic. The people of India appear industrious. Much work is still done by hand, and in Jaipur, we saw metro construction workers at work after nightfall. Most people work six days per week, and they put in long hours.

My second lasting impression is that the caste system is still a major factor, and the difference between the wealthy and the poor is pronounced. This certainly applies to living conditions. It was not unusual to see expensive homes that had the hired help living in make-shift tents on the front lawn. The numbers of persons who were without permanent homes was a bit overwhelming for us.

The third impression was that the people of India are a strong and resilient people. In fact, many of them seemed happy despite their life circumstance.

Another memory is the friendliness of the people. I was surprised by how many people smiled and waved at our bus as we drove by. It made us feel very welcome. We were also welcomed warmly at all of our professional meetings. As noted earlier, the staff at the cancer centre met us at the door and gave us all roses.

Finally, a lasting memory will be the colors of India. The markets, the flower-sellers, the beautiful saris, the vegetable carts, and the painted elephants all combined into a riot of color that seemed to offset some of the poverty and deprivation that is faced by many in India. The colors as a backdrop seemed to indicate a hopeful tone as India struggles with its social problems.

This People to People trip gave us a glimpse of an exciting country with a long history that is rapidly moving forward.
FINAL IMPRESSIONS – DR. BETSY CLARK

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