



June, 2012
No 42

BODHI TIMES

Benevolent Organisation for Development, Health & Insight
Founding Patron: His Holiness XIV Dalai Lama
Founded 1989

Guiding principle: Skillful, compassionate action

Goal: Improve health, education and the environment in developing countries by providing a hook, not a fish

BODHI provides a framework for altruistic people worldwide who are not comfortable working with traditional religious or secular organisations. We ask only for a kind heart.

What do we do?

We work in low-income settings with local partners on innovative projects that too often fall through the cracks of traditional aid, in the areas of health, education, the environment, micro-credit and human rights

Mobile medical clinics & gender equity



Male patient, Mizoram

BODHI was the first and still is the only Western NGO working for Chakma health in remote villages in Mizoram, Northeast India, as far as we know. Among the many difficulties are continuity of care and availability of trained personnel, but this is a first step.

Chakma Mahila Samity (CMS) women's group has been conducting mobile medical clinics off and on for four years through BODHI. We are working through the obstacles and are not giving up. A \$1000 donation in 2011 from Mr Kulottam Chakma funded several more camps.

Malaria, tuberculosis and jaundice are about twice as prevalent in Mizoram as in the rest of India. Tobacco and alcohol-related problems, respiratory illness and HIV are also prevalent. Diarrhoea and respiratory illness are major killers of children.

The efforts of our South Asia Program Coordinator, Mr Krishan Chakma, have been invaluable. He recently accompanied CMS staff to its mobile medical clinics in the Mizoram villages of Udaltana, Bajeisora and Montola. Until now, it has been difficult to obtain verifiable information about these clinics. He writes: 'Assistance provided took the form of free health check-ups and medicines, health awareness and dissemination of knowledge & information about preventive measures. For example, increased use was noted of safe (boiled) drinking water, especially important during the rainy season. Also notable was improved linkages between villages and local leaders.'

See website for report.



Girl with suspected malaria, Mizoram

The hearth that nourishes & kills



Typical CHT hearth. The floors and walls of houses in the Chittagong Hill Tracts of Bangladesh are made of bamboo, while the roof is sun grass. Cooking areas like the one pictured are usually ventilated through the many gaps in the walls and floors. There are no chimneys.

Indoor air pollution poses a bigger problem globally than its outdoor counterpart. Around 3 billion people worldwide burn biomass (wood, animal dung and crop waste) in open areas and leaky stoves to cook and heat their homes, according to the World Health Organisation (*WHO Fact Sheet No 292*, September, 2011 <http://www.who.int/mediacentre/factsheets/fs292/en/>).

Health impacts are massive. Small particulate matter and other indoor smoke pollutants are known to cause premature death (about 2 million people annually), pneumonia and chronic obstructive pulmonary disease. They impair immune systems and have been linked to low birth weight, tuberculosis, ischaemic heart disease and some cancers.

See the work of Prof Kirk Smith at <http://ehs.sph.berkeley.edu/krsmith/>

Gender equity, Chittagong Hill Tracts (CHT), Bangladesh

BODHI hopes to increase capacity and nurture gender equality in the villages in which our Mobile Medical Clinics operate. Volunteers Bina D'Costa and Kabita Chakma (see p 4) have offered to conduct workshops for villagers, including young and other women.

Photo courtesy Phillip Gorry

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Current Projects



Sex education
Northern Thailand
For underprivileged & migrant youth in Chiang Mai & Lamphun



Traditional healers
Kathmandu Valley, Nepal
Training in maternal/child care & refresher courses



SNEHA School
Arunachal Pradesh, India
Education & health for refugee & remote children

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Self-immolation & eco-social distress

Recent years have seen a horrific outbreak of self-immolation, especially in North Africa and central Asia. Self-immolation as protest came to the attention of many Westerners during the conflict in SE Asia that some Vietnamese still call the 'American War'. In 1963, the 67 year-old Buddhist monk Thích Quảng Đức, surrounded by his students, set fire to himself on a busy Saigon street corner. Đức was protesting the persecution of Buddhists by the South Vietnamese government, at that time led by the Roman Catholic Ngô Đình Diệm. Đức's burning was captured on film by Malcolm Browne, a photographer awarded the Pulitzer Prize. Đức's immolation was followed by several others in Vietnam. Within six months Diệm's government had fallen to an army coup despite being vigorously supported by the US. Since 1975, 22 monks, nuns and lay Buddhists have self-immolated to appeal for religious freedom in Vietnam, according to Thích Quang Do. He is the leader of the Unified Buddhist Church of Vietnam, which is banned in Vietnam.

To be burned at the stake is an ancient punishment for witches. Almost two millennia ago, the Roman historian Tacitus wrote how, following the accidental burning of Rome in CE64, the young Emperor Nero tortured many Christians; some were torn by dogs while others were 'burned as a nightly illumination' in Nero's garden. Stephen Dando-Collins claims that Nero's persecution was directed more towards the priests of Isis — those early practitioners of black magic — than towards Christians.

SELF-IMMOLATION AROUND THE WORLD

Details of atrocities from so long ago cannot be verified, but abundant documentation exists of recent self-immolation. In January 1968, twenty-year-old Czech student Jan Palach set fire to himself in Wenceslas Square to protest the Soviet-led invasion of his country. This crushed the 'Prague Spring' and preceded full Soviet liberation by over two decades. Palach's sacrifice is still commemorated on each anniversary.

The 2011 death of Tunisian street vendor Mohamed Bouazizi is widely regarded as a catalyst for the Arab Spring, eventually triggering the overthrow not only of the Tunisian but also the Egyptian and Libyan governments. His action triggered the Werther effect, 100-plus copy-cat self-immolations protesting social and economic conditions in other parts of the Middle East, including Algeria and Saudi Arabia.

In India, however, suicide by self-immolation appears scarcely remarkable. Lakshmi Vijaykumar,

'Deposition', 19th century, Palekh, central Russia. During the time of the Russian Orthodox Church's Great Schism in the 17th century, entire villages of Old Believers self-immolated in 'baptisms by fire'. Old Believers considered the element of fire to be cleansing, not destructive.



a leading expert on suicide in India, reported in 2007 that self-immolation is the third most common method of suicide in that country. It follows poisoning — often with pesticides — and hanging. She estimates both that it is used in about 8% of cases and that at least half a million people in India die by suicide every year. This figure is far higher than that reported by official Indian statistics, and about five times the rate of Australia and the US. If she is right about these two figures, then a staggering 40,000 people set fire to themselves every year in India. Vijaykumar does not speculate on how many of these events in India are public, not private, tragedies.

Outside India, self-immolation retains its capacity to horrify and shock. Most recently, at least 30 Tibetans have self-immolated, mostly in Sichuan, the part of Tibet once called Kham. Some Tibetans living in exile in India have self-immolated in sympathy. This has generated considerable publicity in countries with free speech, but little if any publicity in China, where false information is deliberately scattered throughout the Internet. Elsewhere, in Africa, Ethiopian schoolteacher Yenesew Gebre self-immolated in 2011 to protest human rights violations in his country.

Such extreme human events may be viewed as desperate acts by individuals who sacrifice their own lives to exert an influence otherwise beyond their financial or social capacity. Self-immolation for social purposes differs from conventional suicide because it seems to reflect a wish to raise awareness of the plight of others as well as oneself, as shown by the examples above.

Eco-social SUICIDE

Suicide bombing involves violence to one's enemies in addition to oneself. It has some similarities to self-immolation. Most cases arise where there is perceived extreme power disparity. The bomber or his or her manipulator chooses this action when conventional forms of violence, such as drone attacks, are impossible due to lack of funds. Both are more likely to arise within and reflect situations of extreme 'eco-social' distress, especially when other factors such as cultural tolerance are involved.

I use the term 'eco-social' — sometimes called 'socio-ecological' — to stress that the cause is neither fully environmental (or ecological) nor fully social. There is often an interaction, though in some cases such as Thích Quảng Đức's the cause seems almost fully social. In the case of Tibetan self-immolation it is clearly both. The occupied country of Tibet is immensely valuable to China, for its water, space, minerals and border with India. The well-documented systemic oppression of Tibetan culture exerts an immense social cost to millions of Tibetans, but the Chinese are not doing this simply because they are inherently cruel: they are striving to guarantee control of the physical and ecological resources of Tibet.

SOCIAL & ECOLOGICAL INTERACTION

This interaction of the social and ecological applies to at least some other cases of self-immolation. The family of Libyan President Gaddafi, for example, was opulent and corrupt; the wealth of that country was clearly shared in ways that were very unfair. The repression of so many ordinary people in Libya was not just social, it was eco-social.

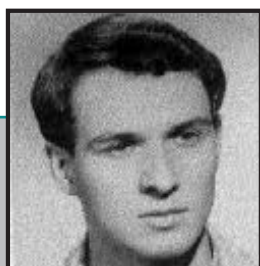
In other places like Darfur, Somalia and Yemen, the eco-social stress is likely to be even worse, yet there is no known self-immolation. There are at least four possible explanations:

1. They do exist but are not reported;
2. There is no cultural tolerance of the practice;
3. Perhaps there is so little effective communication that no-one has heard of them; and
4. Oppression is so severe that people sense that action would be pointless. The opposition would simply be glad of one fewer opponent.

In contrast, the desperate act of Mohamed Bouazizi has provoked widespread sympathetic emotions within parts of the Arab world. The self-immolation of Tibetans has received considerable publicity in the West despite China's veil of secrecy. Public self-immolations are unlikely to occur without at least some chance of a sympathetic reaction. It would be far better to have a world with both ample resources for all and fairer distribution. Unfortunately, as the century unfolds, increased universal abundance appears less likely. Many more self-immolations seem inevitable.



Yenesew Gebre, schoolteacher, Ethiopia, aged 29, died 11.11.11



Jan Palach, student, Czechoslovakia, aged 20, died 1969



Tenzin Wangmo, nun, Tibet, aged 18, died October 2011



Sonam Dargye, farmer, Tibet, aged 44, died March 2012



Mohamed Bouazizi, street vendor, Tunisia, aged 16, died January 2011

FACES BEHIND THE FIRES

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Underway in Thailand Sex education, neglected & migrant youth

In January 2012, BODHI donated USD10,000 for the project called Comprehensive Sexual and Reproductive Health Program for Underprivileged Young People in Northern Thailand. In a 3-month update, local project partner Dr Arunrat Tangmunkongvorakul says, 'We have visited about 100 out-of-school young people so far, in two different locations: Chiang Mai and Lamphun. Some of the youth are migrants from Burma. Most are Shan, from South Burma, who come to Thailand to work as labourers in the construction sites, housekeepers, cleaners and small shop assistants. Their native languages are Shan. Some study at informal education centres.'



Young people aged 15-24 years old have become one of the major risk groups for HIV and other STIs. About 7% of Thai women aged 15-19 years old already have children, and rates of teenage pregnancy and unplanned pregnancy are seriously elevated. Consequently, rates of abortion and post-abortion complications have increased; the real magnitude of this problem is underestimated as abortion in Thailand is illegal.

Most of the programs that the Thai Government has initiated to address these problems target in-school adolescents. BODHI's project targets youth who are beyond the reach of traditional education.

Other youth that the project reaches are ethnic minorities, street children and the very poor. Estimates put the number affected at around 1,000 disadvantaged youths. The team hopes to reach about 150 young people in the first year.

Sustainability is a key component of this project. It aims to become self-sufficient after one year of BODHI's support by approaching the Thai Government for continuing funding.

Scholarships



Left to right: Nusrat Zahan, Riniki Chakma, Shillika Chakma, Mini Marma

2nd Denis Wright Memorial Scholarships awarded in Bangladesh in January, 2012

Dhaka. Brig Gen Aftab Uddin Ahmad of Underprivileged Children's Educational Program (UCEP) says of Nusrat Zahan, this year's recipient of the Denis Wright Memorial Scholarship for Underprivileged Working Girl Children, 'Nusrat is working as a shop assistant while in her first semester of study to be a nurses' aide in UCEP Mirpur Technical School. She gets very little wages from her work and the scholarship will be of great help for her to continue her education and training at UCEP.' Accepting the award above, Nusrat thanks UCEP and all at BODHI for giving her the opportunity to get more education in order to lead a better life for her and her family.

Chittagong Hill Tracts. Riniki Chakma, Class V, won the award for the Denis Wright Award for Academic Excellence. Riniki would like to be a doctor and says, 'I worked hard for a good result. This award will be very helpful for my future life. My parents are very happy.'

Shillika Chakma, Class III, won the Denis Wright Memorial Scholarship for Academic Improvement. Shillika's father died last year and her mother is raising seven children alone. Her mother can afford to send only Shillika and one of her brothers to school. The award will purchase clothes and school materials for her.

Mini Marma, Class III, won the Denis Wright Memorial Scholarship for Academic Inspiration. Mini comes from one of the remotest places in Bandarban. The award has helped her to purchase schoolbooks and inspired her to strive for excellent results in the future.

Moanoghar Mountain Home, CHT, Bangladesh

Mobile Medical Clinics, CHT, Bangladesh. We are funding regular mobile medical clinics and health education in three isolated villages in the Chittagong Hill Tracts. We are providing additional funds this year for the nurse/educator's motorcycle and salaries for three community mobilisers, as well as associated costs for capacity-building workshops.

BODHI South Asia Program Coordinator Mr Krishan Chakma's report of his visit to the mobile medical clinics is available on the website.

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Thank you

Prof Ken & Susan Cassman, California, USA
Dr William Castleden, WA, Australia
Dr Elise De Vido, New York, USA
Prof Bob Douglas, AO, ACT, Australia
Dr Pam Fenerty, Tasmania, Australia
Fred Groenier, Tasmania, Australia
A/Prof Gillan Hall & Chris Kenna, ACT, Australia
Prof John & Alison Hamilton, NSW, Australia
Dr Pierre Horwitz, Victoria, Australia
Kaye Jacob, NSW, Australia
Drs David King & Gillian Eastgate, QLD, Australia
Prof Claudia Kuehni & Dr Andre Witschi, Switzerland
Dr Judith Lipton, California, USA
Victoria Scott & Tony Misch, California, USA
Prof Colin Siskolne, Alberta, Canada
Wanda Trimmingham, California, USA
Jeffrey Whitman, California, USA

and

* Ric and Jo Easton of Bio-Distributors, Sheffield, Tasmania, Australia for loyal, much-valued support

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Founding Patron His Holiness XIV Dalai Lama 1989 Nobel Laureate for Peace

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Kabita Chakma and Kulottam Chakma
Editor Susan Woldenberg Butler

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Email: csbutler@sctelco.net.au, www.bodhi.net.au

BODHI U.S.
2743 Portobello Drive
Torrance, CA 90505-7309 U.S.A.
Tel: +1 (310) 539-2224

Directors: Colin Butler, Martin Rubin, M.D., Scott Trimmingham, Susan Woldenberg Butler

BODHI AUSTRALIA, Inc.
UG01/86 Northbourne Avenue
Braddon ACT Australia 2612
Tel: +61-2-6247-1227
Directors: Colin Butler, Susan W. Butler, Denis Wright

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Family giving, part 2

In our last newsletter we met Chris Gribble and his family. Long-time supporters will remember Dr Bryan West and his family. Bryan writes:

I can distinctly remember the moment when I learned of BODHI. I was sitting under a tree, reading *The Weekend Australian* and there, in one of the sidebars, was perhaps 4 or 5 lines about a Sheep Bank. That was perhaps a decade or more ago.

At the time, my interest was more academic than anything else, based on my twin interests in travel and geography. I was teaching high school geography, including a number of topics related to development and aid. Time and again we would in class dissect this project or that venture, only to discover that the intended benefits were not matched by the actual effects, and time and again I found us reaching the conclusion that BODHI represented good value in terms of its impacts.

With time, more thought, and the means to do so, my family started to put our money where our thoughts were, and have been regularly supporting the work of BODHI for some years. As our children have grown, they have learned of the world and, while still young, they are becoming increasingly aware of issues of equity and justice. We talk with them openly about such things, and when they ask what we can do about it, we invariably talk of bicycles for school children, banks of sheep for nomadic Tibetans, schools and health clinics and other projects initiated by BODHI. Through these conversations, I cannot help but believe that they are learning one of the most important lessons for a child, and that is that there is hope.

And, from that basis of hope, when I started Fortress Learning with my friend, Chris Gribble,

we made a conscious decision to redirect a portion of our gross income to address issues of global inequality. While what we do is no doubt only a small part of a small drop in a very large ocean of need, it represents the hope that we collectively possess in the world and its humanity, and the confidence we have in BODHI to translate that hope into a tangible betterment of the lives of people who will never know we exist.

The Gribble-West Family Trust contributes generously to BODHI, both through direct banking donations and project support. Thanks to two consecutive annual donations of US\$10,000, we've begun reproductive and HIV/AIDS education and counselling for underprivileged young people aged 16-24 in Chiang Mai, northern Thailand.

Many thanks to the Wests and the Gribbles.



Above: 7-year-old Charlotte with mother Amy Weeks; below left: 6-year-old Tom; below right: Charlotte and Bryan



Sarnath Village Schools

By providing kindergarten and primary school materials, BODHI is supporting the work of the Sarnath Village Development Society, which has been operating in the Uttar Pradesh town of Sarnath in India since 2003 and works to alleviate poverty through education and health care.

Kindergartens have been set up in 14 villages surrounding Sarnath, as well as two primary schools. A high school is in the planning stages. There is also a Rural Child Health Care Program.

'Holistic learning and well-being for life' is the maxim of the Australian support group, Sarnath Village Schools, Inc, which helps raise funds for school construction, teachers' salaries, material resources, medicines and basic family necessities. More than 1200 rural village children are involved in the initiative.

Please contact Bhiksuni Tenzin Yeshe at xiangyun_5@yahoo.com for information.



Volunteers

Kabita Chakma & Bina D'Costa: capacity building in the CHT

Kabita Chakma and Dr Bina D'Costa have generously volunteered to teach capacity-building to young and other women as well as others in Chittagong Hill Tract (CHT) villages, Bangladesh, in which BODHI

does mobile medical clinics. More as this develops.

Many of you will know Kabita Chakma as a long-time adviser to BODHI. She trained as an architect and is the coordinator of the CHT Jumma Peoples Network of the Asia Pacific and the Human Rights Coordinator of the CHT Indigenous Jumma Association Australia. Dr Bina D'Costa (pictured above) has worked on the nexus between development, human rights and security in South Asia. Her expertise includes the areas of war crimes and justice, human security and borders and children and war. She has contributed to various CSO (civil society organisations)-led projects in Thailand, Sri Lanka, Nepal, Bangladesh, Pakistan and India and worked as a consultant for the UNRISD (United Nations Research in Social Development), and DfID (Department for International Development, UK).

From the medical director: Child sponsorship

In April I met a newly appointed lobbyist for World Vision Australia (WVA) — by far the largest aid organisation in Australia — who was refreshingly honest concerning child sponsorship, something I criticised in *BODHI Times* in 1994. He said that WV has abandoned this policy as it does not solve poverty, but instead creates resentment.

However, child sponsorship remains a major form of WV's fundraising. This is highly misleading. WV is continuing to promote a strategy that it knows not only does **work but also does not actually perform any more!** This is a dreadful way to treat donors and will surely backfire. BODHI does support a few individuals, but only in the form of one-off scholarships. We prefer to support local groups, such as schools and health clinics.

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