

*Medical Institute
of
Tamils*

*Inaugural Souvenir
8th January 1989*

*Thamil House
720 Romford Road, Manor Park,
London, E.12 6 BJ*

Thus far...

In March 1988, a group of Tamil Doctors met in East London to consider the concept of a Medical Institute for Tamils.

The process of consultation continued at various venues around the Country, leading to a well represented Steering Committee under the direction of Dr Pasupathyrajah.

The Committee embarked on the process of defining the Prime objectives and laying foundations of the Institute

The Tasks were divided into four main areas-

- 1) Medical Education and resources
- 2) Medical advice and Research
- 3) Health Projects for Tamils
- 4) Finance and Social Activities

A resource centre has been located at the Thamil House, 720 Romford Road, Manor Park, London E12. Educational activities are pursued at the same venue on a regular basis. Wellwishers are continuing to donate equipment and Texts as well as journals to consolidate the growing library.

The increasing Health needs of the Tamil Community, especially the refugees, are being evaluated for appropriate action by the Medical advice and research unit.

The ever spiralling health requirements in the Tamil homelands of Sri Lanka are being assessed through Medical personnel serving in the North and East of Sri Lanka. Projects are awaited for study and implementation.

The six months of groundwork has now brought the Institute to the stage of formalisation...



Our role is challenging...

Dr. S. Pasupathyrajah
Chairman, Steering Committee

It gives me great pleasure to send this message for the inaugural meeting of the Medical Institute Of Tamils. The Institute is being Established at a time when there are many challenging tasks ahead.

The recent history of Tamils has been one of trauma and sadness.

There is no necessity for me to recount in detail the untold hardship of our people, particularly in the North and East of Sri Lanka. The medical fraternity, both undergraduates and graduates, an integral part of our community, has been disorganised and demoralised. Even in this country the Tamil medical profession does not fall into a uniform category. There are those doctors who came many years ago, managed to secure good jobs and are very well settled. There are others, mostly recent arrivals, who have been less fortunate in their desired progress of their careers. This is no fault of theirs but due to the numerous regulations and changes in their entry requirements and examination regulations.

Difficulties faced by this group are:

- a) Living in a hostile environment for which they are unprepared
- b) Problems in communication in a foreign language
- c) Lack of organisation here to help them with their smooth initiation and orientation, followed by continuing guidance in their respective pursuits.

The need for support and guidance of these colleagues should be of great concern to us.

We pay homage to our colleagues who have lost their lives in the course of their duties in the Homeland. To those brave men and women who had the courage to remain and work among our people we pledge our unflinching support. The health needs of our people and undergraduate and post graduate medical education are in a pathetic state. We should do whatever we can to improve this situation in our Homeland.

We should also not forget the needs of our community here. Their health problems need study by those who understand our culture and way of life. It is my prayer that the Institute would address itself to their health needs and other related problems and serve our people wherever they may be.

The Need for a separate Association

Dr. R. Jayaratnam.

It is estimated that there are at present more than 1000 Tamil doctors and dentists in this country. In spite of this large presence there is little or no representation of Tamils in national medical bodies such as the British Medical Association, General Medical Council, and the Overseas Doctors' association. If we are to help our doctors with registration problems, PLAB examination, Overseas Doctors Training Scheme, Career problems etc., our voice should be heard within the higher echelons of medical power in this country. The only way to achieve this is to form our own association which will become recognised and could even become affiliated to these national bodies.

We need a formal constitution for the proposed Institute to ensure democratic procedures, holding of annual general meetings etc. In the interim a Steering Committee has been guiding the affairs of the Institute which is to be formally launched on the 8th of January 1989. Membership of the Institute will ensure that you not only contribute to the objectives and affairs of the Institute but also receive regular communication about all activities by way of letters, newsletters etc. An Annual General Meeting will be held each year to conduct the business of the Institute and to consider any resolution relating to the activities of the Institute. Notwithstanding the AGM local action and liaison are very important. Establishment of regional committees and representation of Regions in the National Committee is the best method of ensuring fair representation throughout the country. Those who are present here today and those who could not be here today for whatever reason are earnestly requested to take action on this.

The cornerstone of Tamil success is hard work, dedication and adaptability. Medical professionals among Tamils are well placed to prove this. Let us unite and support our Institute and its objectives

Medical Education And Resources

Dr. S. Mahendran

LEARNING IS EXCELLENCE OF WEALTH THAT NONE DESTROY;
TO MAN NOUGHT ELSE AFFORDS REALITY OF JOY.
Thirukkural:400.

**செயல் விழுந்தால் வந்த செல்வம்
நாடகம் நந்திய படை.**

In the arid sands of Tamil Nation, where mere existence has remained more than a struggle, professional learning has proved over the last century as the certain avenue to progress.

Education became the foremost priority in every home. Tamil sons and daughters, equipped with professional knowledge, went to the far corners of the world proving their worth, even in the face of obvious impediments.

Medical education stood out as the most successful. Our doctors who were of such high calibre, met with ease even the most stringent requirements of the western hemisphere.

This complacent atmosphere was brought to a rude end by the upwardly spiralling violence in the Tamil lands of Sri Lanka. As the prospects to an early end to this bloodshed receded, uncertainty of the future of our education began to loom large. In such a hopeless situation, as educated Tamils, do we let our long fostered standards of learning slip?

As a product of our agony came the concept of a MEDICAL EDUCATION AND RESOURCE CENTRE: a unit of the MEDICAL INSTITUTE OF TAMILS.

ORIGIN

The task is no doubt enormous and it needs total dedication and long term commitment from the Tamil Medical fraternity. However, the want is so overwhelming, and failure to undertake it now spells such disastrous consequences in the future, that we saw no alternative but to go ahead with it. Being mindful of the early setbacks such a venture would face, a committee of dedicated men sat to analyse the various facets of the exercise.

Objectives were defined and targets for the initial years were clearly marked in order to match the work with availability of resources.

The first hurdle that needed urgent attention was identified as the high casualty figures at PLAB examinations

ACTION

Help was afforded in the form of:

1) ORIENTATION AND SUPPORT

- a) Tutorial groups-To reinforce appropriate knowledge and emphasise areas relating to current Medical practise and Western culture
- b) Improve Communication Skills and Clarity of Thought-To facilitate logical presentation of answers at both written and oral examinations.
- c) Clinical Attachments-To introduce Candidates to Hospital practise and bedside manners, giving form to theoretical concepts.
- d) Mock Examinations-To improve performance under pressure.

2) BASIC LIBRARY FACILITIES

A collection of the following items were made available in the premises of the Medical Institute of Tamils. Further donations from wellwishers are continuously encouraged.
RELEVANT MEDICAL TEXTS. CURRENT AND PAST JOURNALS. PAST QUESTION PAPERS AND MCQ'S. AUDIO VISUAL AIDS.

3) GUIDANCE AND ASSISTANCE

To locate and secure positions in the NHS.

The initial batch of students enrolled on the 14th April 1988. Hall and Room facilities at THAMIL HOUSE were utilised for the activities. Tutorial groups met regularly at least twice a week. All related Medical specialities were discussed by Tutors specialised in the respective fields.

RESULTS

The first batch of students appeared for the PLAB examinations in July/August 1988. Thereafter batches have been sent up monthly.

PERIOD	No. Appeared	No. of Passes
July/Aug '88	8	6
September '88	3	1
October '88	3	3
November '88	4	2
December '88	9	6
	<hr/>	<hr/>
	27	18

Fourty four students have enrolled since April '88 with Twenty seven of them appearing for the examination. Eighteen secured passes and all except the last few were assisted in to appropriate positions. In the wake of the current national average of 23% pass rate, the 66% achieved by our doctors is the most heartening and encouraging for the Institute.

The benefits that accrue, as we have learnt in the process, are not only the statistics of success but also the bridges of goodwill trust built between the generations of Tamil Doctors from the length and breadth of the Tamil nation.

FUTURE

The mounting demand on the centre is overwhelming. It is with the greatest difficulty we are resisting the pressure to be drawn in to areas we cannot handle successfully at present. However, we feel that the Centre has to concentrate on developing the following areas in the next few years.

- 1) Career advice and postgraduate guidance on a central and regional basis.
- 2) Development of peer groups for Academic and Social interactions.
- 3) Intensive courses for basic and Speciality examinations.
- 4) Expansion of facilities in the Resource centre-
Text books and Appropriate Journals.
Slides, X'rays and Pathological specimens.
Visual aids and Projection equipment for use and loan.
Accomodation facilities for new Arrivals.
- 5) Methods of funding and recruitment of Man power.

The expenses to run the activities so far were met by the Tutors with no financial commitment from the users. However, further growth will be critically linked to the availability of finance and Manpower to teach at all levels in the various specialities.

I fervently hope that these key issues will be fully addressed at the Inaugral meeting.

My sincere thanks are due to the undermentioned colleagues who relentlessly gave their valuable time and knowledge to nurture the work so far:

Dr. Ranjadayalan MRCP

Dr. Nagendra MRCP

Mr Soosainathan FRCS

Dr Maheswaran FRCS

Mr W T Maheswaran MRCCOG

Mr. N Sivananathan MRCCOG

Dr A Selvaratnam MRCPH

Dr V Nerminathan MRCP DCH

Dr Shanmugathasan LRCP/MRCS

STEERING COMMITTEE

CHAIRMAN:- S. Pasupathyrajah MBBS DCH DFM

S. Arunachalam MB, MRCP.
P. C. Gunasagaram MBBS.
K. Indrakumar MBBS.
R. Jayaratnam MB MS& DPH MFCM
S. Mahendran MB FRCS
A. Mahendrarajah MB MRCOG
W. T. Maheswaran MB MRCOG
Ms P. Moodley MB C&B
K. Nagendran MB MRCP
V. Nerminathan MB MRCP DCH
S. Panchadcharam MB MRCOG
K. Ranjadayalan MB MRCP
R. A. Rooban MBBS DRCOG
Mrs. T. Sathiyamoorthy MB MRCP
A. Selvaratnam MB MRCP
S. Shanmugathan MBBS LRCP MRCS
N. Sivananthan MB MRCOG
M. Theivendra MBBS LRCP MRCS

With self denial take the well selected meal;
So shall thy frame no sudden sickness feel

சுயநலிவு இல்லாத உணவு, நறுத்துண்டுகள்
உடம்பை நலிவு உண்டாக்கும்.

AGENDA

8th (Sunday) January 1989. Trinity Hall, 1, East Avenue, East Ham, London E6

10.30 AM: Registration and coffee

11.00 AM Welcome- Dr S. Pasupathyrajah MBBS DCH BPM
General Practitioner Gravesend

11.15 AM Adoption of Constitution- Dr. R. Jayaratnam MSc DPH MFCM
Consultant Community Physician, Newham, London.

11.30 AM Medical Education & Resource Centre-Dr. S. Mahendran MBBS FRCS
General Practitioner Manor Park, London

11.45 AM Medical Advice & Research- Dr. N. Sivananthan MBBS MRCCOG
General Practitioner, Ilford, Essex

12.00 PM Projects for Tamil Homelands- Dr V. Nerminathan MBBS MRCP DCH
Consultant Community Paediatrician, Southend, Essex

12.15 PM Administration & Regional Coordination-Dr S. Shanmugathan MBBS LRCP
MRCS
General Practitioner, Enfield, London

12.30 PM Financing the Institute- Dr A. Selvaratnam MRCPsyc DPM
Psychiatrist, Kent

12.45 PM Election of Office Bearers

1.00 PM Way Forward- Dr S. Arunachalam MB MRCP
Consultant Physician, Edgware General Hospital

1.15 PM Concluding Remarks- Dr. S Pasupathyrajah

1.20 onwards-Lunch

3.00 onwards-Tea will be available at THAMIL HOUSE

Medical Advice and Research Centre

Dr. N. Sivananthan

Tamils are living all over the world in anguish and confusion at present and remain uncertain of the future. But let us not despair. Tamils also have enormous wealth-
EDUCATION. We have a professional resource that is largely untapped. This should be harnessed and made to work for the good of Tamils.

The Medical Institute of Tamils is a body that is being created to define and direct the role of the medical profession in enhancing Tamil welfare. The Institute has identified among others, medical advice and research as areas where action is needed.

THE NEED

Ours is an uprooted population with uncertain existence, languishing in a land with language and cultural barriers. The young are increasingly vulnerable to the pressures of a free society, as opposed to a traditional Tamil society which imposes a restraining influence on the abuse of the body. The case for medical advice is overwhelming.

The risk of conditions like diabetes, hypertension and heart disease among Asians is in excess of that of the caucasian population.

The need for studying the prevalence of many such diseases in our community is urgent. Stress related disorders among Tamils need evaluation. The call for a comprehensive medical research programme for Tamils is compelling.

THE METHOD

1. Creation of a centre which provides an informal environment where Tamils could seek advice in all aspects of health and disease.
2. Launching a health data documentation programme to evaluate and effect appropriate action in prevention and cure.

THE RESOURCE

1. The 'Tamilness' in us make most of us strive to reach out to our fellow Tamils. This desire for fulfillment among the Tamil medical fraternity is the most vital resource.
2. Ethnic minorities are being targeted by the state for appropriate health care. The special needs of the Tamil community should be highlighted to the authorities for necessary action. The role of the Institute is to facilitate this process.
3. There is a need and demand for Health Education materials in Tamil. The Institute could provide this service for Agencies providing promotion of good health in the community.
4. Many Pharmaceutical companies are producing materials to help patients understand their illness and take remedial measures as instituted by medical practitioners. These documents could be produced for the Tamils by the Institute.
5. Although our service to the population would be without monetary obligation on the part of the users, donations from them and well wishers would be welcome.
6. International funding agencies could be approached to support a community programme of this nature.

THE BENEFITS

Improvement in the co-ordination of health care for the Tamil community will be the result. If the wider community too could be helped by our professional skills, the standing of Tamils in the society would be immensely enhanced.

Projects for Tamil Homelands

Dr. V. Nerminathan

One of the major objectives of the Medical Institute of Tamils is to undertake activities relating to the health care of our fellow Tamils in the Homelands. The projects that could be undertaken would fall into 3 main categories:

1. MATERIAL SUPPORT: There is an enormous task ahead of us to rebuild and restructure the delivery of healthcare. A great opportunity exists to restore the provision of health care that has been destroyed. As an Institute we should assist in revitalising hospitals and other medical facilities. This assistance can take the form of medicines, equipment and other accessories.

2. STAFF TRAINING IN HOSPITALS: We cannot afford to deprive our fellow Tamils of the advanced medical technology and treatment available here. The only way to do this is to provide training to doctors, nurses and others in recognised and appropriate institutions. Our institute may provide the financial resources for the necessary training in suitable countries such as India, Singapore and Malaysia. These opportunities will not only provide chances for further training but will boost the morale of the staff who are working in difficult conditions.

3. STAFFING AND STAFF TRAINING IN THE MEDICAL SCHOOLS:

(a) Short term: We learn that the medical school in Jaffna has been closed for the past six months because of lack of staff. We have received numerous requests to help in providing necessary staff even on a short term basis. Most of us would very much enjoy sharing our experiences and knowledge with our colleagues. However at present, we are not that well organised to provide a near continuous service in the different fields. It may not be easy but with good co-operation it is possible to co-ordinate the activities here to provide continuous staffing to most departments.

(b) Long term: Those of us who are in an advantageous position in the U.K. should take the initiative in training doctors from the Homelands in order to maintain satisfactory staffing levels in the medical schools on a long term basis.

The Medical Institute of Tamils is very much aware of other institutions who may undertake to carry out similar activities especially in providing material help. Duplication must be avoided at all costs. We should not hesitate to work with other organisations with similar objectives.

FINANCING THE INSTITUTE

Dr A Selvaratnam

Our Institute is in its infancy and its growth depends on its ability to raise funds. There are the conventional methods any small organisation would resort to, such as flag days and appeals, social events, raffles etc. However our objectives are such that these methods would fall short of achieving the financial requirements. If this organisation is to reach financial stability, its financial management should be on a professional footing. The Institute should set the target at realistic levels and will have to be a lot more innovative in fund raising ideas. One could consider the Following methods of raising money for the Institute:

MEMBERSHIP FEES-set at an affordable level

DONATIONS by individuals, businesses such as pharmaceutical firms.

SPONSORSHIP by businesses or individuals. This could be for running specific projects,

REVENUE from Medical publications.

VARIOUS COMMERCIAL ACTIVITIES eg. Financial services. If necessary, set up a separate trading company.

RAISING FUNDS FROM OTHER ORGANISATIONS to provide service to the public.
Our organisation can do well in fund raising activities provided we have a committed force of volunteers.

'Works of charity negligently performed are of no worth'
Miguel de Cervantes Saavedra-Spanish novelist.

We thank...

* The ladies who amidst all difficulties prepared all the dishes for the occasion.

** Our sponsors without whose unstinted support this event could never have been possible.

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Kirby Warrick Ltd.,
Norwich Eaton Ltd.,
Duncan chemists Ltd.,
Thomas Morson Pharmaceuticals, and
Parke Davis Ltd

*** TAMIL HOUSE management for their unlimited generosity.

**** Mr Ramsamy and Mr Chelyan for videoing this memorable occasion.

***** And all wellwishers and participants who made this event possible...

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