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SECRETARY'S NOTE

Dear Friends;

he year 2014 has been most crucial since the idea of 'block adoption' by the Tata trust is an initiative to see that various activities that which would create a support system within the community would surpass the challenges of climate change. The basic premise of this approach is to layer various activities for a reasonable time period within the identified blocks and in the process converge with both the governmental and the constituencies in the community. The benefits I perceive are manifold. Firstly, one would see a concerted and comprehensive work on the ground, thereby providing support to the individual in the given set-up. Secondly, as a social organisation, one is often handicapped since with limited resources, the conventional approach has been to cater to one issue at a time and addressing just one issue can be disheartening. The problems are often related and because we cannot address all issues in a comprehensive manner, the problem appear to linger. The myriad of problems are often inter-linked and so talking about them and taking care of at least few interventions if not all of the issues would to some reasonable level ease the discord which is so apparent in communities who are overwhelmed by the fast changing world. Thirdly, the layering of activities would instil confidence since the primary objective is to re-define sustainable livelihood through various activities and this would provide a road map not only for the community but even for the government.

Last year we had Hakchang village achieve 100% hospital delivery, this year we plan to see few medical sub-centres achieve 100% hospital delivery and increase the immunization rate in at least 30 villages. We even have an ambitious plan to provide Rs 500 to the Village Health Committee for every delivery and another Rs 500 to every mother's club in the village. This money will be to create a small fund to encourage more mothers to join the clubs. Currently the Church and the Village council in the Changsang Range provide Rs 700 in addition to the JSY and this in itself has encouraged many to access services. Nagaland has the lowest rates in immunization and hospital delivery and we hope this small initiative will help the organisation in achieving tangible results. Access continues to be a major challenge and even this year we dug a 4 km road without any government support to shorten the journey by 16 kms. This means 40 mts less to reach the health centre.

The other ambitious plan this year is to adopt 6000 families under piggery with the support of the Trust and NEIDA. This will be challenging and yet a dream to build livelihood through pig rearing in a scientific way.

As the financial year draws to a close, I sincerely thank the Tata Trust, Nabard, Action Aid for continued support, NEIDA, CISHR, UNICEF, World Bank, NRHM, Department of Planning, Department of Labor, District innovation Fund and a host of all supporters for the sustained support. We do hope the team at ECS will bring you many more great stories to tell, and in this, your prayers and ardent support will mean even more this current year.

Regards **Chingmak**Secretary, ECS

HEALTH CAMP

Funded by NABARD & NRHM TSG

in collaboration with District Health Society (DPMU) conducted Health Camps in three villages namely Litem, Longra, and Yangpi villages under Noksen Block. The actual targeted villages were Litem and Noksen under the TDF-2 project area but Noksen village had to be left out since a Health Camp was conducted shortly before our intervention. The resources reserved for Noksen were therefore channelled to the other two villages.

Medical services were provided by Dr Changsangba, MO, Noksen PHC and a couple of nurses. Logistical support for travel and daily allowances was borne by ECS. Some free medicines were allotted from the CMO store and Noksen PHC. Assistance was also provided by the NRHM, District Programme Manager, Tuensang and ECS field Officers towards the conduct of the camp.

On 4 September 2014 the team visited Litem

village where 72 patients (32 Male and 40 Female) were provided clinical services on various ailments. 11 children below the age of 10 were tested for Hb and given Iron Folic and albentozale. On 5 September 2014, the team visited Longra village, an undeserved village where 104 (48 male and 56 Female) patients were provided free treatment and medicines. 39 children below the age of 10 were given iron folic and albentozale. On 6 September 2014 the team visited Yangpi village where 102 (49 Male and 53 Female) were treated and given clinical services and free medicine. 22 children were tested for Hb and given iron folic and albendozale.

Pregnant mothers were treated and given ANC services during the health visit in all the three villages. Distribution of IEC materials and health talk were other features of the program. Patients with complicated case histories were also referred to other facilities for further treatment.







Sponsored by the TATA Trust

he surgery camps continue to be a game changer for the rural populace of Tuensang district. During the year, two surgery camps were conducted in which 1850 patients were screened in 11 screening sites set up in various locations. Surgeries were eventually performed on 201 patients, which included a number of major surgical cases.

Dr Laji Varghese, a doctor from Manali was the lead surgeon in both the camps. He was assisted by staff of Civil hospital, Tuensang and Longpang PHC. The first camp was managed exclusively with staff from Longpang.

INDICATORS	APRIL 6-25, 2014 VENUE: LONGPANG	NOV 24-30, 2014 VENUE: LONGPANG	TOTAL
SCREENING SITES	6	5	11
PATIENTS SCREENED	850	1000	1850
SURGERIES CONDUCTED	104	97	201









1: 2: 3:
4&5: 8 year old with intestinal obstruction due to roundworm infestation undergoing surgery. Roundworms extracted after the operation.
6: Surgery in progress







THE PHC AT LONGPANG

he Longpang PHC now functions as a full-fledged PHC and can now even match up to most district hospitals in terms of infrastructure and services. The PHC is funded under NHM and Tata Trust supports the outreach component besides several infrastructure improvements. During the last year, the construction of the building meant to host the 'mother and child' care centre and an 'operation theatre' has been completed and integrated as a wing of the facility.

List of facilities at the PHC

- X-ray machine
- Ultrasound machine of decent quality often patients are referred from the civil hospital
- Portable ECG machine that can be operated through a smartphone.
 The ECG generated can be emailed to a specialist for interpretation.
- Well equipped labour room with maternal and neonatal resuscitation
- Operation theatre
- Full time pharmacy which has all the essential drugs
- Mini Lab malaria, HIV, Hep b, VDRL, haemoglobin, blood group, ESR, RBS, Sputum AFB, urine dip stick examination.
- ILR ice lined refrigerator and deep freezer for vaccine storage and carriage
- 24 hours generator services In the event of power failure, it is powered by a 15 KV generator

The PHC also has 2 ambulances at its disposal. Ambulance services are provided free of cost to pregnant mothers and charges a nominal fee for general patients. In addition, an amount of Rs 650 is provided to mothers delivering at the PHC through the JSY scheme.

The functioning of the facility is different in many ways. Unlike other conventional centres, it sees the most number of patients during the weekends, particularly on Sundays. Most village folks are able to make time only on Sundays because of their engagement in the fields during the week days.

On Sundays the PHC compound would be swarming with patients and one could easily notice the heightened activities of both patients and staff. In addition, the staff are always in an emergency mode and are ready to jump to the call at any given time. It has almost become a routine where they are woken up from their sleep in the night by an incoming delivery case. In terms of its outputs, the center has the highest referral report in the district, and initiatives such as immunization, family planning etc has been extended to most villages within its coverage. Within a span of few years, the center's services have scaled up to achieve 80% ANC registration and 100 % Institutional delivery in 4 villages.





















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t was late in the evening, the vehicle approached the entrance to Longpang and as we were passing through I could see the old signboard that read "House of Hope'. It looked like the same one from the late nineties. The picture I had of Longpang was of the old days and what I was about to learn was way beyond what I expected.

Longpang has changed completely and in the next two days, I got to see the extent of change that has taken place in the last 15 or so years. What was once a small one-building set up for rehabilitating drug and alcohol users has now been transformed into a massive facility that boasts of multiple wards

Longpang Revisited

(for patients), mother and child unit, operation theatre, Lab, Pharmacy, X-ray room, Ultrasound room, conference hall, lodging facilities for visitors, offices, multiple staff quarters and on the hill top a gigantic hall constructed with traditional materials and design. Overlooking the compound was the vast stretch of orange plantation measuring over 700 acres which occupied almost one side of the hill. I also had the chance to go down and see the bridge on the base of the hill that connects the area with Noksen area and all the way into Mokokchung district. The communities of the area were said to

have contributed most of the materials and manpower for its construction. Then there was this bulldozer stationed on the side of the facility, which was at that time cutting out a 2 kilometre stretch that would shorten the route by 40 minutes. This in itself presents the people of the area with endless possibilities.

'House of Hope', as I recall, was a humble place where people with problems of drug and alcohol use would be housed and helped to overcome their habits through a mixed therapy programme with spirituality as the base. There was hardly any money and everything in the house was managed very sparingly starting from food. The Secretary and his wife (Chingmak and Phutoli) struggled to provide the boys even the basic rations and for long spells, the house would survive on credit. I can still picture Sister Phutoli telling us that she was writing a proposal pointing to a stack of hand written notes waiting to be put to the typewriter. The house was in desperate need of money to continue. These were the difficult beginnings of what has now evolved into a programme of enormous scale and scope. But it has been a very long long journey.

I had the opportunity to be in a sitting with the staff based in Longpang and I shared with them some thoughts on what this house used to be about and the impact it had on me. It was here that I laid the frame upon which I went on to patch up the broken bits my life. Though circumstances have changed and the goals has evolved, the essence of House of Hope remains the same; that is to provide healing to the sick, refuge to the needy and hope for the lost and the disadvantaged. My deep admiration to the staff for the sacrifices they are making - leaving their homes, friends and families to respond to the call. My challenge to them was to stick to what they were doing, drawing joy from them and continue to carry on touching lives.

Ex Longpanghite 1997

It was here that I laid the frame upon which I went on to patch up the broken bits my life.

The Contributions of a Simple Housewife

It is a known fact that the women plays an important role in the development of the family and society in which she lives. Though they might have not earned enough to own material properties but still it's amazing to see the contentment in their face when they share us their stories.

- 1. Haak Village Mrs. Monyu & Mrs. Nyimang are paying for their daughters to study Theology.
- 2. Longdang village Mrs Atola paid the boarding fees for her son to enable him to appear his matriculation exams in a comfortable place.
- 3. Sangsangyu Mrs. Nati pays for the rented house her children are occupying in order to pursue of education.
- 4. Tuesang Village- Mrs Lepla does vegetables retailing business in Tuensang and pays for her children's education. Her eldest daughter has completed B.Sc from Kohima Science College, Jotsoma.
- 5. Tuensang Town-Mrs Ason sold piglets and paid for her Husband's surgery cost.

It is a joy to see that women in these villages now don't rely on their spouses to run their kitchen. The stories above give us a sense of the accomplishments of those women who were once penniless and struggled financially for more than half of their lives.

FOCUS ON

SHG's of Longdang Village.

ongdang village is situated 27 kms away from Tuensang with total household **I** numbering to a total of 75. There are five ECS SHG's functioning within the village. Although each household practice subsistence cultivation of rice and different crops, they don't see it as a source of their income. Their primary source of income is from livestock rearing such as Piggery and Goatery. When asked how they were going to repay the loans, majority of the SHG's stated that they will repay the loans by selling of piglets. However, they face major hindrances such as deplorable road condition and lack of market access to sell their agricultural products. The road condition needs to improve and connect them to a reliable market which will enable them to sell their produce and enhance their economy.



TRANSITION OF ECONOMY AND SOCIETY







icro finance mainly focuses on women from rural areas and their economic empowerment.

Formation and development of SHGs has been an important focus of the organization since its inception in 2003.

For more than two decades, the womenfolk, both young and old, have been working hard to improve the economic situations of their families, and for most, the benefits have been life-changing. The time, human effort and resources mobilised have empowered women to take their once deplorable condition to a wholly new level. The credit for its success goes to those women whose determination, sincerity and hard-work has yielded this result.

In the rural areas, until the early 1990's, men were the sole bread earners and took active role in all the activities of the community and village life while womenfolk were restricted mostly to the confines of their home. In the last 10-15 years, with the emergence of SHGs, there has been a major transition of economy and society as well. Women now play a major contributing role apart from being a good homemaker. Once the process of economic activity was initiated, it took only a few years for the womenfolk to become economically independent. Now they don't rely on their husbands or male family members to meet their ends and most of them are in a

position to contribute to their family's basic fiscal needs.

The financial contribution of women is not confined within their families alone. Many of the women believe that 65% of the economy that revolves within the village belongs to SHG's. They act like local money lenders offering the lowest rate of interest charged from the borrowers – individuals and different local bodies within the village. It is also learned that some SHG's lends money within the group free of interest. In some of the villages, the SHG's pays the salaries of church workers, wardens, provides donations to poor and needy, provide food for guests, and contributes financially along with men for the development of the Village.

Benefits of being a member of SHG's does not end in financial matters alone. It has now become a platform for them to play crucial roles in their society. Their ideas and views are taken into consideration when decisions are made by the local bodies within their respective village, churches, homes etc. They have come out from their comfort zones and provide leadership in the churches, organize programmes, speak in public meetings etc. Their participation in

these spheres has helped build their confidence and self-esteem.

If we look at the villages where SHGs function well, the changes it has brought in is mirrored in the physical appearance of their village. Since the SHG's are provided opportunities to attend trainings, seminars and go for exposure tours, they return back to their villages and incorporate the learning to bring changes in areas where they are lack behind others- be it housekeeping, cleanliness, sanitation, manners, discipline etc.

The income generating activities undertaking by the SHG's are inter-lending among group members, retailing business, livestock rearing, handlooms, handicrafts, group farming etc. The SHG's accentuated that the highest income generating activity is rearing of livestock such as piggery, goat rearing and retailing business.

Today we can proudly say that there are more than women 750 SHG's including 50 male SHG's and 84 Joint Liability Group's (JLG) functioning across 5 blocks of the Tuensang district and 30 SHG's under Zunheboto and Mokokchung district with the total savings having crossed Rs 3 crore in corpus.

EVENTS

2nd Phase Loan for female JLG's

During the 2nd phase, the Nagaland State Cooperative Bank granted an loan amount of Rs. 35,36,000/- to 30 JLG's comprising of old and first time recipients from Tuensang Town and Tuensang Village SHG Federation. This loan is granted for a period of three years. The total number of beneficiaries was 151 and the activities undertaken by the beneficiaries are piggery, rabbit, goat rearing, poultry and small scale businesses.

Micro-finance loan from NSCB LTD

The Nagaland State Co-Operative Bank LTD granted Micro Finance loan of Rs. 2,00,00,000/- on Nov 2014. The launching programme was attended by the Vice President of the NSCB LTD Shri. Taku Longkumer who handed the cheque to ECS Board Chairman Rev. Yanger Sangtam. This loan will serve as an opportunity for Male JLG's (Joint Liability Groups) who patiently waited for more than three years without receiving loan from any institution. The 1st phase loan was disbursed to 8 JLG's of Konya Village on Dec 2014.





Water, Sanitation and Hygiene (Wash)

SUPPORTED BY THE TATA TRUST





ater and sanitation project is an ongoing project initiated in the year 2012 starting with the pre feasibility study. Out of 8 villages, 4 villages i.e. Noksen, Letim, Longra and Yangpi got approved for implementation as a pilot project. The remaining 4 villages will be covered in the 2nd phase of the project. The whole idea of the project is to enhance sanitation in the village and declare open defecation free and to provide quality drinking water to the participating villages.

Visits from North East initiative Development Agency NEIDA and another funding agency known as AGRAHAM has provided the fundamental grounds for the project to take off as envisaged. Agreements were drawn up with the Village councils and the PMC on project implementation and monitoring. In addition, a 3-day training was provided on kinds of materials that would be purchased and utilized for the project.

As per the Trust criteria, the community has to raise and contribute 10% for Roof rain water harvesting tanks and 60 % for sanitation units. 3% community contribution for water and a consent amount of Rs.500 each per house hold for sanitation has already been raised. The Figures are shown in the table below

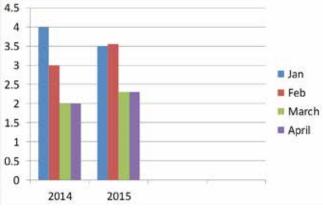
VILLAGE	AMOUNT OF 3% FOR RRWH	COMMUNITY CONTRIBUTION
YANGPI	504000/-	120000/-
LONGRA	176060/-	75500/-
NOKSEN	445200/-	103500/-
LETIM	246750/-	48500/-



evelopment of catchment area treatment is an essential component of the project. ECS utilized the expertise of an external agency called Advance Centre for water resources development and Management (ACWADAM) for development of catchment area in Noksen village. Most springs in Nagaland are gradually drying and this is an effort to revive and re-juvinate the source so as to increase water discharge.

As part of the pilot study, Noksen village was identified for the experiment point because the discharge was barely 9 LPM for a village of around 230 households. The geologist helped us identify the catchment and water recharge point at the top of the main source of the village. As advised by them, 52 trenches were dug, led by the council from the NREGA fund. The concept was to increase the water discharge at the source by increasing the inlet of water into the water table through the trenches build at the re-charge point so as to increase discharge during lean period. Water discharge Measurement was done since from 2012 and a comparative study was done to understand the discharge after the trenches had been dug. In just one year there was an increase of 18% discharge. The villagers were so encouraged that this year (May 2015) every family as part of their participation has built two trenches each. A total of 240 trenches plus the 52 dug in 2012 is now around 300 trenches build in just two years.







rip irrigation-also known as lowflow, micro irrigation, trickle irrigation is an irrigation method that saves water and fertilizers by allowing water to drip slowly to the roots of plants through a network of pipes called emitters. Drip irrigation was invented in the early 1960's as an efficient way to water agricultural crops. Now, a wide variety of quality products has been developed to make drip irrigation reliable and easy to use for almost any landscape situation.

Drip irrigation saves water because little is lost to runoff or evaporation. This watering method also promotes healthy plant growth, controls weed growth, and reduces pest problems. Drip systems are particularly well suited for desert landscapes, places where runoff can be a problem, and small, narrow areas such as entryways. Drip is also a great way to water garden vegetables and potted plants. There is a wide assortment of equipment to suit most budgets and watering needs.

A team of 9 members, 5 field staffs and 4 LSPs of Lead Crop villages had the opportunity to make an exposure trip to Jalgaon, Mumbai, Maharashtra for a week. The team was introduced to various works and branches of Jain system - Jain Energy, Jain Tissue Culture Cultivation, Jain Plastics, Jain Food Processing Park, Jain Bio-gas, Jain Bio-fertilizer and Jain Agricultural School. Besides the income generating projects, they are also involved in various social work like sponsoring poor students, opening up schools which is based on human development like the Jain Clinic.

The exposure also included a visit to Jain

Agri Farm. This farm is situated at Wakod village, the native village of the founder of Jain Irrigation, Dr Bhavarlal Hirarlal Jain. The Agriculture campus covers an area of 42 acres of land with Teak Wood plantation, Bamboo, Gooseberry, Custard Apple, Pomegranate, Guava and trial farm on vegetables, all applying the drip irrigation system.

The team was also taken to the Jain valley project on mango and pomegranate plantation. The teams were exposed to tissue culture cultivation of banana and pomegranate at the Culture Lab itself. There was an ongoing research of drip irrigation on rice and wheat which was been being successfully implemented recently.

Moreover, the tour also included exposure to Jain Plastic Park where various high tech drip sets were manufactured using only plastics. In addition, they also produce PVC pipes for irrigation and domestic purposes. A practical session was also given to the team member on how to prepare and install drip set.

Amongst others, some key learning was that Drip irrigation comprised of two major components, i.e, online irrigation and inline irrigation. And that water is not the only need of the plant but to uptake water efficiently, it requires proper air-water balance within the root zone. With drip irrigation water can be provided at frequent intervals which helps maintain required soil moisture level within the vicinity of the plant roots. With drip irrigation technologies the impossible becomes possible for dry regions which suffer from water insecurity as a result of topography, high altitude farming or various other hindrances such as natural calamities and drought.

LIVELIHOOD

LEAD CROP

evelopment of human society depends on economic wellbeing of the people. When people find difficulty to manage a day's meal, the prospect of leading a normal life in today's world is remote. Under such circumstances, the rights and interest of the marginalized and down trodden people are left to themselves. Addressing this issue is a priority area for the organization – and to play the crucial role of a facilitator/service provider in order to improve the living conditions of marginalized farmers through a concerted effort with support from **Tata Trust.**

In an endeavour to uplift the rural community, a sustainable livelihood development initiative through augmenting lead crop production and orange orchard was rolled out.

In 2014, the organization has disseminated seeds and provided technological trainings to enhance the output of farmers through modern farming system. The total income in QPM was Rs 258700/-. The Total income of Cabbage is Rs 45040/-. The total production of potato from the lead crop villages accounts to 7972 kilos with the total earnings of Rs 239160/-.

Under the livelihood project of the Trust, 12 Local Service Providers (LSPs) are trained as village level extension workers. Their performance was assessed on September at ECS office by the Project Technical Consultant, Mr.Tokiho Achumi KVK Tuensang and Mr. Nagato, Project Associate (Agriculture) from NEIDA office Kohima. The test consisted of written, oral and practical sessions. The practical assessment consisted of preparation of various chemical/insecticidal solutions (Bordeaux paste, mixture, 1% Monocrotophos solution etc.). In the viva voce, their commitment and knowledge

levels were tested. Besides the calendar activities, farmers groups from various villages of Manipur state and farmers of Pungro villages under Kiphire District of Nagaland as well individuals had visited the organization for exposure to the livelihood project villages.

In addition, implementing staff along with the Local Service Provider (LSP) went for an exposure to Jalgaon, Mumbai, Maharashtra to understand Drip Irrigation System where the team was provided three days practical training classes for installation of drip irrigation system. The trip was supported by NRTT. Another exposure for Post harvest management for field staff and progressive farmers was organized and the team visited National Research Centre for Citrus (NRCC) Nagpur, Maharashtra, this event was sponsored by NABARD and SDTT. The Director and the team of the NRCC have also expressed their willingness to visit the project area undertaken by ECS in the future.

The year 2014-2015 saw farmers of the project villages were progressive who adopted scientific and modern technologies into their system of farming. Micro Drip Irrigation System was introduced to selected farmers in the first phase for three lead crop villages and farmers have planted rabi crop (Cabbage). The performance and outcomes have been tremendous as drip irrigated cabbage crop yielded well.

The enthusiasm remains high and farmers have approached the organization also to support the remaining farmers in the 2nd phase. The continuous involvement of KVK in disseminating technologies remains our greatest asset in achieving a successful outcome while working with the farmers in the project area.

Remembering Sir Abdul Kalam

he visit by the President sparked greater involvement by (NACO) National Aids Control organisation. A CD 4 machined worth Rs 37 lakhs was provided at the civil Hospital Tuesang, ART unit was set up and an extension facility was established in Noklak as well. Bringing these services to the people played crucial in shaping the trends in the years to follow.

The figures of the ICTC will not fully show the trend of the epidemic but the prevalence in itself is a great indication that there is decrease in the incidence in Tuensang. The ICTC figures

of NSACS here is for the past one year between June 14 to March 2015 and the positive cases of Nagaland shows that Tuensang is in third place, which for many years was highest in Nagaland. To diffuse any doubt in the figures, a study was conducted to see if people from Tuensang undergone had testing in Kohima and Dimapur, thankfully of a small number figured in the ICTC registers of Dimapur and Kohima.

ICTC DATA FOR THE YEAR JUNE 2014 TO MARCH 2015									
SL	DISTRICT	TOTAL NO OF TESTED FOR HIV		NO OF POSITIVE TESTED					
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL		
1	Dimapur	8604	5082	13686	737	550	1287		
2	Kohima	5456	3322	8778	119	152	271		
3	Mokokchung	7174	3236	10410	45	34	79		
4	Tuensang	4030	2627	6657	50	47	97		
5	Mon	3542	2816	6358	8	5	13		
6	Wokha	6661	4984	11645	17	10	27		
7	Kiphire	1249	762	2011	27	16	43		
8	Longleng	846	667	1513	3	1	4		
9	Peren	2199	1009	3208	14	10	24		
10	Phek	2428	1280	3708	13	2	15		
11	Zunheboto	2324	1347	3671	12	6	18		

25 MINUTES WITH SIR ABDUL KALAM

Chingmak Kejong

he phone rings and the person on the other side says "Mr Chingmak, his excellency the President of India wishes to meet you" and I respond, "hello! can you please repeat that again". The thought

of the President coming to a small non-descript town like Tuensang filled my mind with awe; and of the so many thoughts that went through my mind in those few seconds of the phone call, was just thinking of "how ECS" "how did he get to us".

Besides Jesus, I feel Nagas can't be underrated to perform miracles. Within just two

weeks of the official announcement, the road from the helipad to the ECS office was black-topped and metaled. Five kilometres black-topped in just one week's time; this is nothing short of a miracle. The President unfortunately could not me make to the office since we were on the 3rd floor and so the venue had to be shifted. We are grateful to the President though, we had nice road for a year, the rains came next monsoon, the chicks along the road picked on the stone chips and the road is gone now.

The President's protocol officer calls me and cautions me about the 'green book'. Apparently the green says that I should keep six feet distance from

the President. However Sir Kalam comes straight to me and holds me by the shoulder, he says "Chingmak I have read a lot about you, I thought you were older and I like your jeans" And I am by now sweating and starring at the protocol officer, as if to tell the officer,

"look it's not my fault, he only came and held me by my shoulder". I wish the younger Ministers and MLAs take few lessons from him, his humility preceded his persona as the President. And his personality surpassed his relationship with all as equal human beings created in the image of God.

But what really amaze me is his simplicity and the passion with which he does his work. He then looks to my wife

Phutoli, pointing at the posters showing figures of HIV in Tuensang, he turns to her and says, "where did we go wrong". I presume that as a leader we can foresee change happen only when we ask the right questions. To him we owe the nation's attention to the grave situation that Tuensang was grappling with HIV/AIDS. As we remember him, to me I presume he remains to be the only leader after post-independence era to have left a vacuum in everyone. The Government can never produce good leaders; it is only when our homes and our schools are attuned to, and when all of us agree to 'character building' as the 'primary' mandate of the nation.

