



International Day
of
Persons
With Disabilities

(3rd December 2025)



LOYOLA COLLEGE (AUTONOMOUS) CHENNAI-600 034

DEPARTMENT OF SOCIOLOGY

IN COLLABORATION WITH

GERMAN LEPROSY & TB RELIEF ASSOCIATION
(GLRA) INDIA

Human Chain Campaign & One-Day Seminar on
“Empowering Change : Health Equity and Social Justice”

Speakers

17th December, 2025

9.30 a.m. to 1:00 p.m.

Lawrence Sundaram Hall

Loyola College, Chennai

Contact : 011- 45037138

communication@glraindia.org

www.glraindia.org



DR. M.SHIVAKUMAR
Secretary
Damien Foundation India Trust



MR.SHIBU GEORGE
Chief Executive Officer
GLRA India



DR. S.FRANKLIN, PH.D
Consultant
GLRA India



PROF.S.BROWNI AMUTHA
Assistant Professor - Sociology
Loyola College, Chennai



PROGRAM SCHEDULE

PATRONS

REV. DR. ANTONY ROBINSON SJ

Rector, Loyola College, Chennai

REV. DR. D. THOMAS ALEXANDER SJ

Secretary, Loyola College, Chennai

REV. DR. A. LOUIS AROCKIARAJ SJ

Principal, Loyola College, Chennai

Mr.M.L.JOSEPH AROCKIASAMY

Deputy Principal, Loyola College, Chennai

ORGANIZING SECRETARY

REV. DR. A. LOUIE ALBERT SJ

CONVENER

PROF. THEBORAL .P

HEAD OF THE DEPARTMENT

DR. J. VANITHA

CO-ORDINATOR

DR. R. DHIYANESH

ORGANISING COMMITTEE

DR.M.GAUTAMAN

PROF.S.BROWNI AMUTHA

DR.S.SIVA PRIYA

PROF.JUDITH.J

PROF.SUDERMATHI KANNAN.R

PROF.SHERLINE JOSHNA.J

8:30 a.m to 9:00 a.m

Human Chain Campaign

Special Address

Rev.Dr.A.Louis Arockiaraj SJ

Felicitation Address

Rev.Dr.D.Thomas Alexander SJ

9:30 a.m to 10:00 a.m

Inauguration Ceremony

10:00 a.m to 10:10 a.m

Pre-Assessment Quiz

10:10 a.m to 10:40 a.m

Session I

Dr.M.Shivakumar

10:40 a.m to 11:10 a.m

Tea Break

11:10 a.m to 11:40 a.m

Session II

Dr.S.Franklin, Ph.D

11:40 a.m to 12:10 p.m

Session III

Prof. S.Browni Amutha

12:10 p.m to 12:40 p.m

Session IV

Mr.Shibu George

12:40 p.m to 12:50 p.m

Post-Assessment Quiz

Vote of Thanks

"Equity Grows Where Inclusion Leads"

**Report on the seminar “Empowering Change: Health Equity and Social Justice”
organized by the Department of Sociology, Loyola College (Autonomous), Chennai
in collaboration with
German Leprosy and TB Relief Association (GLRA) India.**

HUMAN CHAIN CAMPAIGN:

The Department of Sociology, Loyola College, Chennai, with the participation of students from other departments and various colleges, organized a ‘Human Chain Campaign’ in front of the college main gate from 8.30 a.m. to 9.00 a.m. on 17 December 2025, on the theme “Empowering Change: Health Equity and Social Justice.” This collective activity symbolized unity, inclusiveness and a shared commitment toward social justice and human empowerment.



During the programme, students held placards highlighting the empowering strength within themselves, conveying messages of self-belief, social responsibility and positive transformation. The ‘Human Chain Campaign’ reinforced the idea that meaningful change begins with individual awareness and collective action. The event successfully nurtured empathy, encouraged critical reflection on social realities and strengthened the institution’s commitment to fostering socially responsible and empowered individuals.



INAUGURATION CEREMONY:

DATE: 17/12/2025

Time: 9:30 a.m.

Venue: Lawrence Sundaram Hall

The Department of Sociology, Loyola College, Chennai, successfully organized a one-day seminar titled “Empowering Change: Health Equity and Social Justice” in collaboration with the German Leprosy and TB Relief Association (GLRA) India. The seminar aimed to promote critical awareness on health equity, social justice and inclusive development by bringing together academicians, development professionals and students.

The inaugural session commenced with the Tamil Thaa Vazhthu and a prayer song by the Department Choir. Following this, the Welcome Address was delivered by Dr. J. Vanitha, Head of the Department, who emphasized the relevance of sociology in addressing structural inequalities, health disparities and social justice issues, thereby setting a strong academic foundation for the seminar.

The programme was held under the esteemed patronage of the college management and was graced by distinguished chief guests and speakers, including Mr. Shibu George, CEO, GLRA India; Dr. M. Shiva Kumar; Dr. S. Franklin and Prof. Browni Amutha.

Mr. Shibu George was felicitated by Rev. Dr. Thomas Alexander SJ, Secretary of Loyola College, who also delivered a meaningful felicitation address highlighting empathy, human dignity and collective responsibility in creating an inclusive society. He inspired the audience by invoking Barack Obama's message, "Yes, We Can!"



The inaugural session concluded with a pre-assessment quiz, engaging participants in critical reflection and effectively setting the tone for a day of learning, dialogue and collective reflection on advancing health equity and social justice.

SESSION 1

Resource person: Dr. M. Shiva Kumar, Secretary and Member of the Damien Foundation India Trust.

The first session of the one-day seminar commenced with Prof. Judith formally introducing the distinguished resource person, Dr. M. Shiva Kumar, Secretary and Member of the Damien Foundation India Trust. Dr. Vanitha felicitated the speaker by presenting a memento. Dr. M. Shiva Kumar inaugurated the first session by sharing his extensive expertise on the social and economic issues related to tuberculosis and leprosy.



The primary objective of the programme was to create awareness among students about tuberculosis (TB) and leprosy as a major public health concern in India. The seminar aimed to help students understand TB and leprosy not merely as a biomedical condition, but as issues deeply rooted in health equity and social justice. It sought to sensitize participants to the risk factors, vulnerable populations and social determinants that influence the spread and persistence of TB and leprosy.

Leprosy – Disease Overview and Social Impact

The session provided an overview of leprosy, an ancient infectious disease caused by *Mycobacterium leprae*, which affects the skin, peripheral nerves and mucous membranes. Transmission occurs through prolonged close contact and the long incubation period often leads to delayed diagnosis and continued spread. While multidrug therapy (MDT) is effective in curing the disease and preventing transmission, delayed treatment can result in irreversible nerve damage, deformities and disabilities largely preventable through early detection and regular screening.

Beyond its medical dimension, leprosy was highlighted as a major social issue. Persons affected often face stigma, discrimination, social exclusion and loss of livelihood due to fear and misconceptions. The speaker emphasized that stigma, more than the disease itself, remains the greatest barrier to rehabilitation and social reintegration.

The discussion also addressed the global and national burden of leprosy, noting that India accounts for nearly 60% of reported cases worldwide. This underscores the need for sustained public health interventions, community awareness, early diagnosis and rights-based approaches to eliminate both leprosy and the stigma associated with it.

Tuberculosis and its implications:

The seminar analyzed India's TB situation using state-wise 2024 notification data, highlighting wide regional variations linked to socio-economic inequality. TB was presented as closely associated with poverty, overcrowding, marginalization and limited healthcare access. India, accounting for about 26% of the global TB burden, was identified as the highest TB-burden country, underscoring the need for sustained public health action.

The discussion covered key medical risk factors such as malnutrition, diabetes, HIV, low body weight, chronic kidney disease, lung diseases and substance abuse, alongside social and environmental factors including overcrowding, poor ventilation and occupational exposure. Vulnerable groups urban poor, migrant workers, people living with HIV, malnourished and diabetic individuals and high-risk occupational groups were highlighted, stressing the need for targeted and inclusive interventions.

National TB control services, including free diagnosis and treatment, rapid diagnostics, drug-resistance and HIV testing, treatment adherence support and nutritional assistance, were outlined. The session also detailed the TB Mukht Bharat Abhiyan, emphasizing active case finding, community participation, public-private collaboration, TB-free workplaces and focused support for women and children, including nutritional aid through the Nikshay Poshan Yojana.

Overall, the programme enabled students to understand TB through an integrated medical and social lens, enhancing awareness of health equity, social justice and community-level interventions. The session concluded with an interactive Q&A on TB and leprosy.

SESSION 2

Resource person: Dr. S. Franklin, Consultant, GLRA, India.

The second session of the day started with Prof. Sherline Joshna introducing the distinguished speaker and Dr. Sudermathi Kannan R felicitated the speaker with memento and the speaker Dr. S. Franklin, Consultant, GLRA, India. The session highlighted the importance of translating academic knowledge into meaningful community action.



Dr. Franklin began his address by sharing his personal and professional journey, which started during his Master of Social Work programme at the same institution in the late 1980s. He reflected on how classroom learning, value-based education and early field exposure shaped his lifelong commitment to social justice. He expressed his joy in returning to his alma mater and engaging with the next generation of students.

The speaker elaborated on his early work with Sri Lankan repatriates who migrated to India following the ethnic violence of 1983. He explained the historical background of their displacement and the severe social, economic and health challenges they faced after arriving in India. He described community-based interventions such as preventive healthcare programmes, training of village health guides, formation of health committees, child-centered health education, housing initiatives, savings schemes and community mobilization, all of which helped restore dignity and collective strength among the repatriate communities.

Dr. Franklin then reflected on his nearly 34 years of service with the Indian Leprosy Foundation, during which he was involved in large-scale awareness campaigns across South India. These initiatives aimed at dispelling myths surrounding leprosy, promoting early detection and encouraging community participation. Highlighting the work of GLRA India, he presented an overview of its contributions in the areas of leprosy treatment, reconstructive surgery, rehabilitation and socio-economic reintegration of affected persons.

Dr. Franklin emphasized that social justice is not charity but fairness, ensuring dignity, access and equal opportunity for marginalized populations. He encouraged students, particularly those from sociology and social work backgrounds, to become advocates for health equity by challenging misinformation, engaging with government schemes and supporting inclusive policies.

In his concluding remarks, Dr. Franklin urged students to become change agents through compassion, consistency and commitment. He highlighted that even small actions, when carried out with empathy and dedication, can bring about meaningful social change. The session formally concluded with an interactive questions and answers session, during which participants actively engaged with the resource person, seeking clarifications and sharing perspectives on the theme discussed.

SESSION 3

Resource person: Prof. S. Browni Amutha, Assistant Professor, Department of Sociology, Loyola College, Chennai.

The third session focused on the theme of Inclusive Public Health, beginning with a video released on December 3rd in observance of World Disability Day. Prof. Browni Amutha highlighted the prevalence of disability worldwide, noting that approximately 16% of the global population lives with some form of disability. She reflected on how disability continues to persist across generations, emphasizing that the concern is not new.

The speaker discussed physical and mental disabilities, pointing out misconceptions related to diseases such as leprosy, explaining that more than 200 types exist and not all are dangerously contagious. Shifting from medical to social perspectives, she identified key social challenges faced by persons with disabilities, including stigma, poverty, discrimination and exclusion from education and employment.



Prof. Browni Amutha cited World Health Organization findings that people with disabilities, on average, have a life expectancy 20 years shorter than others. Despite these challenges, she shared examples of individuals who overcame barriers and succeeded. The discussion also touched on the importance of respectful language, suggesting the use of “differently-abled” rather than “disabled,” and emphasized that individuals seek equity rather than charity. The session concluded with further elaboration on the importance of inclusive public health systems that recognize and respond to the needs of differently-abled individuals.

SESSION 4

Resource person: Mr. Shibu George, the Chief Executive Officer (CEO) of GLRA, India.

Professor Sudermathi Kannan R introduced the speaker for the session Mr. Shibu George, who is the Chief Executive Officer of GLRA, India. He has been with GLRA, India for the past three and half decades and has worked in various roles as an expert in monitoring and evaluating social inclusion initiatives. He has significantly impacted numerous initiatives aimed at empowering underprivileged communities and extensive experience in project management and community outreach. He has published almost 22 research papers in various international conferences related to leprosy and health care.



Mr. George's session started with a question to the students on "why have you chosen sociology", for which students replied they want to be civil servants. Thus, he insisted that students should understand the ground realities to become effective administrators. He insisted on "Nothing about us, without us" meaning that the differently abled individuals should be included in the decision-making bodies.

He said that the words and terms that we use for the individuals who are differently abled should not be addressed with prejudiced words. He discouraged the use of words like disability instead he encouraged the use of the words 'Social needs person and differently abled person'. He also said that 3rd December is the annual observance of International Day for Persons with Disabilities by the United Nations. He enlightened the audience about the total population of differently abled persons in India, which is 26.8 million. Thus India should think about inclusive development towards achieving the sustainable development goals. The SDG Pledges "Leaving No one behind" he said. Inclusive health is based on two fundamental principles: "Equitable access" and "full participation". He also raised a question on whether the event invites that we make are accessible to everyone for which he said this is how we should think about making changes from the surroundings in which we are present. He also said that it's costly, but still it's necessary, because every individual requires and has the right to live in a dignified and inclusive way.

He also informed participants about the safety net schemes present in India. He insisted on the importance of awareness that the decision makers should possess in order to understand the necessities of differently abled persons and to frame effective policies for them. The session ended with the question from Ms. Uma Maheshwari, student of M.A Sociology, 1st Year, Loyola College. She raised a question on "Is the eradication of this disease and the other form of disability getting more difficult due to more privatization of medical care." For which he answered that there are also Public policies aimed at Medical care but still more awareness and effectiveness among decision makers is necessary. And then he also gave some insights about the German Leprosy and TB Relief Association. And he welcomed the students to be part of the GLRA.

At the end, a post-assessment quiz was conducted and prize money was given to the three highest-scoring participants as a token of appreciation.

This report was prepared by Harini M (25-PSO-017), Vennila P (25-PSO-016), Merine (25-PSO-012), Uma Maheswari (25-PSO-006), Joohi Jahan (25-PSO-001)

