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# Life for All

A Quarterly Newsletter of Christian Medical Association of India





**A LETTER  
FROM THE**



**GENERAL  
SECRETARY**

The hall was still carrying the echoes of encouragement as we wrapped up the 48th Biennial Conference in Kochi Kerala. Standing before the stalwarts and the delegates who had travelled from every region, I felt humbled to take the role of the General Secretary.

This homecoming experienced at the conference was not merely a procedural gathering. It was a reaffirmation of who we are, what we stand for, and where we are determined to go.

The healing ministry theme “Inspire to Aspire: Empowered to Heal” (Proverbs 16:9). There is joy and connection in uniting for a purpose greater than ourselves or our organizations. How can we nurture daily inspiration for ourselves? And together, what can we strive for to create brighter, more meaningful tomorrows? The Conference brought together more

than 600 healthcare professionals from 25 states, representing doctors, nurses, allied health professionals, administrators, chaplains, students, institutional leaders, and church representatives. I was especially moved by the awards ceremony honouring long-serving members. Their decades of commitment remind us that institutions endure because individuals choose, day after day, to invest their time and trust. Reminding us that leadership is not about authority. It is about stewardship.

In accepting this role, I pledge to lead with openness, to listen with sincerity, and to act with integrity. The next chapter begins now, and I am honoured to write it with all of you.

Regards  
Dr Ronald Lalthanmawia  
General Secretary & CEO of CMAI

# WAKE UP CALL...AI'S TRANSFORMATIVE ROLE IN ALLIED HEALTH

~ Mr Lyric Abraham | Allied Health Professionals' Section ~



AI is ushering in a new era for healthcare in India, addressing shortages of professionals—particularly in rural areas—and enhancing efficiency amid a growing demand for allied services, projected to rise at a 20% CAGR from 2023. In allied health, AI applications include predictive analytics for patient outcomes, AI-assisted imaging for radiographers, remote monitoring for physiotherapists, and personalized nutrition plans for dietitians. For instance, AI tools can detect tumors or fractures faster than traditional methods, freeing professionals for patient-centered care.

Surveys indicate high optimism: 76% of Indian healthcare professionals believe AI can improve patient outcomes, and 75% see it as beneficial for training less-experienced staff in underserved regions. The National Digital Health Mission further supports this by creating unified health IDs and data-sharing platforms, generating datasets for AI innovation. Yet, allied health often receives less AI focus compared to medical fields, despite comprising a significant workforce portion. Challenges include biases in datasets, ethical concerns like data privacy under the Information Technology Act, and the need for digital literacy.

Key insights from that CMAI AHP viewpoint include:

- Advent and experimentation: "With the advent of artificial intelligence and machine learning, allied health professionals have begun to experiment with how AI can be used to..." – highlighting the emerging integration and practical trials in allied health fields.
- Transformative enhancements: Overall, AI enables allied health professionals (across ~60 disciplines like lab tech, physiotherapy, radiology assistance, OT, etc.) to improve training and clinical practice in multiple ways. This includes better data interpretation, diagnostic support, personalized interventions, workflow efficiency, and outcome prediction—aligning with CMAI's focus on high-quality, ethical, affordable training and care in Christian healthcare settings.
- Broader implications: While AI can augment decision-making (e.g., in diagnostics or rehab planning), CMAI perspectives emphasize that it complements rather than replaces human elements—especially the compassionate, mission-driven care central to CMAI's ethos ("Building a Just and Healthy Society").

This serves as a wake-up call for the AHP community: AI is no longer futuristic—it's actively reshaping education, skill development, and service delivery.

#### Transformative roles of AI in Allied Health

- **Training & Education:** AI-powered simulations, adaptive learning platforms, and virtual labs enhance the ~30 CMAI-affiliated courses and 600+ annual trainees.
- **Clinical Practice:** Tools for image analysis (e.g., in radiography/physio), predictive monitoring, automated documentation, and personalized therapy plans reduce errors and workload.
- **Efficiency & Access:** In resource-limited mission hospitals (CMAI's core network), AI supports telemedicine, triage, and resource allocation for underserved populations.
- **Ethical & Professional Growth:** CMAI advocates for upskilling via workshops/seminars, registration updates, and advocacy to integrate AI while preserving holistic, value-based care.

The AHP Section views this as an opportunity for strategic growth—urging professionals to

embrace AI for better outcomes, not fear displacement. It's a call to proactively incorporate AI literacy into CMAI's capacity-building efforts. enhance the ~30 CMAI-affiliated courses and 600+ annual trainees.

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## HEALTHCARE MANAGEMENT ASSOCIATE PROFESSIONALS (ADMINISTRATORS)

~ Ms Elsy John | Administrators' Section ~

I extend heartfelt wishes to all the individual members of the HMAP Section, CMAI. We thank God Almighty for His unfailing guidance, wisdom, and grace that enabled us to walk together through the past year. Every achievement, progress, and milestone has been possible only by His divine leading and the committed support of our members. "Unless the Lord builds the house, the builders labour in vain" (Psalm 127:1).

We are pleased to formally announce that the Administrators Section of CMAI has been renamed as the HMAP Section, CMAI. This change was unanimously approved by the indi-

vidual members of the section, endorsed by the Executive Committee (EC) and General Body (GB) of the Section, and finally ratified by the General Body of CMAI during the 48th Biennial Conference. We praise God for the unity, clarity, and shared vision granted through this process.

We joyfully congratulate Mr Jagdish Chandra Solanki, the Mategonakar Awardee, and pray that God continues to bless him with wisdom, strength, and greater success in his service and leadership.

With deep gratitude, we thank the outgoing Chairperson, Mr Sunny Kuruvilla, and Vice

Chairperson, Mr Peniel Malakar, for their dedicated leadership and valuable support over two successive terms. Their commitment has significantly strengthened the section. We warmly welcome Ms Sonia Valas as the Chairperson and Mr Johnson Singson as the Vice Chairperson and assure them of our prayers and cooperation.

Looking ahead, the HMAP Section is organising a one-day workshop titled "Decoding Labour Compliance: Present Laws vs. New Four Labour Codes - Simplified" on 14th February 2026 in Bangalore. We encourage members to participate and benefit from this important learning opportunity.

Admissions are now open for the LHA Course 2026-27, and interested members are invited to apply.

We humbly request your continued prayers for the HMAP Section and its ministries.

Plans are also underway to bring all individual members together for a Zoom fellowship meeting, to reconnect, refresh, and renew our shared vision.

"Commit your work to the Lord, and your plans will be established" (Proverbs 16:3).

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## KERALA CHRISTIAN HEALTHCARE ORGANISATION NETWORK

The Kerala Christian Healthcare Organisation Network (KCHON - City Forum) meeting was held on 11th December 2025 at Believers Church Medical College, Thiruvalla, marking a significant milestone as the third central zone meeting and the first KCHON gathering hosted by Believers Medical College.

The forum witnessed active participation from 15 institutions, comprising 10 CMAI member institutions and 5 non-member institutions. The meeting reflected a marked change in the level of engagement and fellowship, with meaningful interactions, open sharing, and strengthened relationships among Christian healthcare institutions. A key outcome of the discussion was the collective decision to institutionalize this fellowship by conducting KCHON City Forum meetings once every two months, aiming to enhance collaboration, unity, and coordinated efforts in Christian healthcare ministry.

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## TN CHRISTIAN HEALTHCARE ORGANISATION NETWORK

The TN-CHON City Forums in Trichy and Chennai were conducted successfully, fostering collaboration and quality improvement among Christian healthcare institutions.

The Trichy City Forum met on 21st November 2025 at Joseph Eye Hospital, with 24 participants from eight institutions. The theme, "Accreditation from the Assessor's Perspective," was led by Dr. Prathipa and Dr. Akilan. Dr. Akilan shared the inspiring 90-year journey of Joseph Eye Hospital and its commitment to quality and accreditation. Dr. Prathipa offered valuable insights from her experience as an NABH Assessor, emphasizing patient safety, documentation, and continuous improvement.

The Chennai City Forum was held on 29th November at St. Isabel's Hospital, with 42 participants from 24 organizations. Sessions highlighted the hospital's growth journey and specialized healthcare services, followed by interactive discussions. Both meetings strengthened networking, shared learning, and commitment to excellence in mission healthcare.

## BURDEN OF DEMENTIA IN INDIA

~ Ms Shimy Mathew | Nurses League Section ~



We would like to express our heartfelt thanks to all those who took their time and effort to attend the 48th CMAI biennial conference at Kochi. It was a blessed time of fellowship, learning and sharing.

One of the follow up initiative of the Biennial Conference that Nurses League intends to take forward is 'Training of Trainers on Dementia Care' in collaboration with Dementia India Alliance.

As India experiences a rapid demographic shift toward an aging population, dementia has emerged as a significant public health crisis. Currently, India has the second-highest number of people living with dementia globally. Despite this, the healthcare system remains primarily focused on acute care, leaving a massive gap in chronic, person-centered management.

### The Burden of Dementia in India (2026)

The scale of dementia in the Indian population is substantial and continues to grow:

- **Current Prevalence:** As of 2026, it is estimated that approximately 8.8 to 9 million Indians aged 60 and older are living with dementia.
- **Rapid Growth:** This number is projected to

nearly double to 17 million by 2036 and reach over 11.4 million by some estimates, or even higher as the population of seniors is expected to hit 340 million by 2050.

- **The "Treatment Gap":** One of the most alarming statistics is that 9 out of 10 cases in India remain undiagnosed. Many families still view cognitive decline as a "normal part of aging" or "senility," leading to delayed medical intervention.
- **Socio-Economic Impact:** The burden is unevenly distributed; prevalence is higher in rural areas and among women. The financial strain is immense, as the majority of care is informal (provided by family) and out-of-pocket, with limited government-subsidized social care.

### The Need for Specialized Training for Nurses

Nurses are the frontline of the healthcare system, yet most enter the workforce with minimal exposure to geriatric psychiatry. The need for training is critical for several reasons:

1. **Shift from "Medical Model" to "Social Model"**  
Traditional nursing training in India focuses on curing ailments. Dementia, however, is a progressive, irreversible condition. Nurses need training in Person-Centered Care, which prioritizes the individual's dignity, comfort, and remaining abili-

ties rather than just managing clinical symptoms.

## 2. Managing Behavioural and Psychological Symptoms (BPSD)

Dementia often manifests as agitation, aggression, wandering, or "sundowning." Without specific training, nurses may resort to physical or chemical restraints. Training equips them with non-pharmacological interventions, such as:

- Validation therapy and sensory stimulation.
- Environmental modification to reduce triggers.
- Communication techniques to de-escalate distress.

## 3. Support for Family Caregivers

In India, the family is the primary unit of care. Nurses must be trained to act as educators and counsellors for family members. They need the skills to identify "caregiver burnout"—which is linked to higher rates of depression among Indian families—and provide guidance on home safety and nutrition.

## 4. Early Detection and Screening

Nurses can play a pivotal role in early screening. Specialized training enables them to use locally adapted cognitive tools to distinguish between reversible conditions (like Vitamin B12 deficiency or depression) and true dementia.

## 5. Ethical and Palliative Care

As the disease progresses, nurses are essential in navigating end-of-life care. Training helps them handle complex ethical issues like feeding difficulties and advanced care planning, ensuring that patients live their final stages with dignity and without unnecessary pain.

Without a workforce of "Dementia-Ready" nurses, India risks a healthcare crisis where patients are neglected in overcrowded wards or mismanaged at home. Formalizing dementia care in the nursing curriculum is no longer an option but a moral and public health necessity.

We hope our initiative although is like a small drop in the huge ocean considering the population of our country will surely create an impact in future as awareness increase and trainers continue to educate students and other nurses in dementia care and our patients with dementia will receive their due care with dignity.

Announcements:

1. We have started an online bible study on Biblical Perspectives on Leadership. Leaders at any level can participate. It is usually the first Saturdays from 7 to 8 pm.. It is the same link every month. Please join and be blessed.

ZOOM Link to join the Bible study-  
<https://us06web.zoom.us/j/89198459046?pwd=bVECQENF3XX7MARU2XB-bKzWnxmPXbz.1>  
 Meeting ID: 891 9845 9046  
 Passcode: 748764

2. The next batch of the Fellowship in Nursing Management will commence in April. Three batches of nurse leaders have completed this course and are highly appreciative of this course. It is a blended learning model with online modules and live sessions by experts. Interested candidates please mail us and book your slots.

References:

- Alzheimer's and Related Disorders Society of India (ARDSI). (2020). Dementia in India report 2020: This is our story, this is our future. <https://ardsi.org/dementia-in-india-report-2020/>
- International Institute for Population Sciences (IIPS). (2020). Longitudinal Ageing Study in India (LASI) Wave 1, 2017-18: India Report. Ministry of Health and Family Welfare, Government of India. [https://main.mohfw.gov.in/sites/default/files/LASI\\_India\\_Report\\_2020\\_compressed.pdf](https://main.mohfw.gov.in/sites/default/files/LASI_India_Report_2020_compressed.pdf)
- Ministry of Health and Family Welfare (MoHFW). (2011). Operational guidelines: National Programme for Health Care of the Elderly (NPHCE). Government of India.
- Rani, M., & Shaji, K. S. (2017). Dementia care in India: The role of nurses. *Journal of Geriatric Care and Research*, 4(1), 12-15

## LOST CERTIFICATE

I, **Aditya Leeya Mothey** GNM staff nurse batch 2015-2018 school of nursing Duncan Hospital Raxaul, Bihar lost; 1st year Result (Roll No:816101), 2nd year Result (Roll No:817201), 3rd year Result (Roll No:818301), Diploma in General Nursing and Midwifery and MIBE 3rd year Rank certificate. Kindly contact: New Colony, Matigara Bazar, Siliguri, Darjeeling. Mobile: 9434887012. Email: [almothey17@gmail.com](mailto:almothey17@gmail.com)

## HEALING MINISTRY 2026: RETHINK TO REACH OUT

~ Rev David Ebenezer | Chaplains' Section ~



Healing Ministry continues to be a vital expression of the Church's calling to embody Christ's compassion, restoration, and hope in a world marked by pain and brokenness. In response to changing health realities and emerging pastoral challenges, the CMAI Chaplain Section remains committed to discerning themes that speak meaningfully to contemporary contexts while remaining deeply rooted in Scripture.

With this vision, an online consultation was held on 20th June 2025 to prayerfully reflect on the Healing Ministry Theme for 2026. The consultation brought together ecumenical leaders and stakeholders, including Rev Dr Asir Ebenezer (NCCI), Sr Dr Helen (CHAI), Dr Priya (CMAI), along with representatives of the Chaplain Section. Through reflective dialogue and theological engagement, the theme "Rethink" emerged as a guiding framework, inviting churches and healthcare institutions to re-examine existing approaches to healing and to embrace a more holistic understanding of care in addressing phys-

ical, emotional, spiritual, and social dimensions. Following deliberations and approval by the General Body, the Healing Ministry Theme for 2026 was formally confirmed on 25th July 2025 as "Rethink to Reach Out," based on Mark 8:22-26.

This rare two-stage healing of the blind man offers a profound theological insight: healing is often gradual, and partial vision is not failure but part of God's redemptive process. The Scripture verse, "Again He laid His hands..." (v.25), affirms God's continuing work in human lives and calls the faith community to patience, trust, and renewed engagement in ministry.

The Bible studies developed under this theme reflect rich theological reflection and pastoral sensitivity. Contributions include the Order of Worship by Rev Fr V William Edward, the Homily by Rev David Ebenezer, and subtheme reflections by distinguished resource persons: Rethink the Touch, Rethink Healing, Rethink Our Wholeness, Rethink Timeliness, Rethink

Setbacks, and Rethink Surrender. Each reflection invites deeper discernment on how healing ministry can be lived out authentically in today's complex contexts.

Preparations for Healing Ministry 2026 began well in advance. Posters and Bible study materials were distributed during the 48th Biennial Conference, Kochi, and shared with churches, institutions, and CMAI members across regions. To ensure wider accessibility, the Order of Worship was made available in nine Indian regional languages through the CMAI website, while the Bible study materials were released in English as a common reference.

The CMAI Communication Department further strengthened outreach by developing a dedicated

Healing Ministry webpage and circulating it across all regional zones.

Observed from 8th–14th February 2026, the Healing Ministry Week resonated deeply with congregations and institutions alike. The theme “Rethink to Reach Out” encouraged the faithful to move beyond limitations, to embrace healing as a journey, and to extend Christ-like compassion to those in need.

This initiative reaffirms CMAI's enduring commitment to holistic healing in biblically grounded, contextually relevant, and pastorally responsive in guiding the Church towards renewed vision, unity, and faithful service.

## UNION BUDGET 2026–27: WHAT IT MEANS FOR HEALTHCARE AND THE NON-PROFIT SECTOR

~ Dr Abhijeet Sangma | Doctors Section ~

The Union Budget 2026–27 signals that healthcare is moving closer to the centre of national priorities. With an allocation of ₹1 lakh crore to the Ministry of Health and Family Welfare, an increase of nearly 9%, the message is clear: health is no longer seen only as welfare, but as a foundation for the nation's future.

For doctors serving in mission and non-profit hospitals, this raises important questions. How do this budget promises touch our daily work? Where do we fit in? And how can we respond wisely?

### Bigger Budgets, Familiar Realities

Major programmes like PM-JAY and the National Health Mission have received higher allocations. On paper, this is encouraging. PM-JAY now has ₹9,500 crore, and NHM continues to support primary care, maternal health, and disease control.

Yet we must pause and ask:

Do higher allocations always mean better care on the ground?

Why do patients still pay almost half of their healthcare costs from their own pockets?

What explains the repeated underuse of NHM funds year after year?

As doctors, we see the gap between policy intent and patient experience every day, especially in rural and semi-urban settings.

### Infrastructure Growth: Who Benefits?

The sharp increase in funding under Ayushman Bharat Health Infrastructure Mission focuses on critical care units, labs, and district hospitals. Super-specialty services, advanced technology, and AI-supported care are also receiving attention.

This invites reflection:

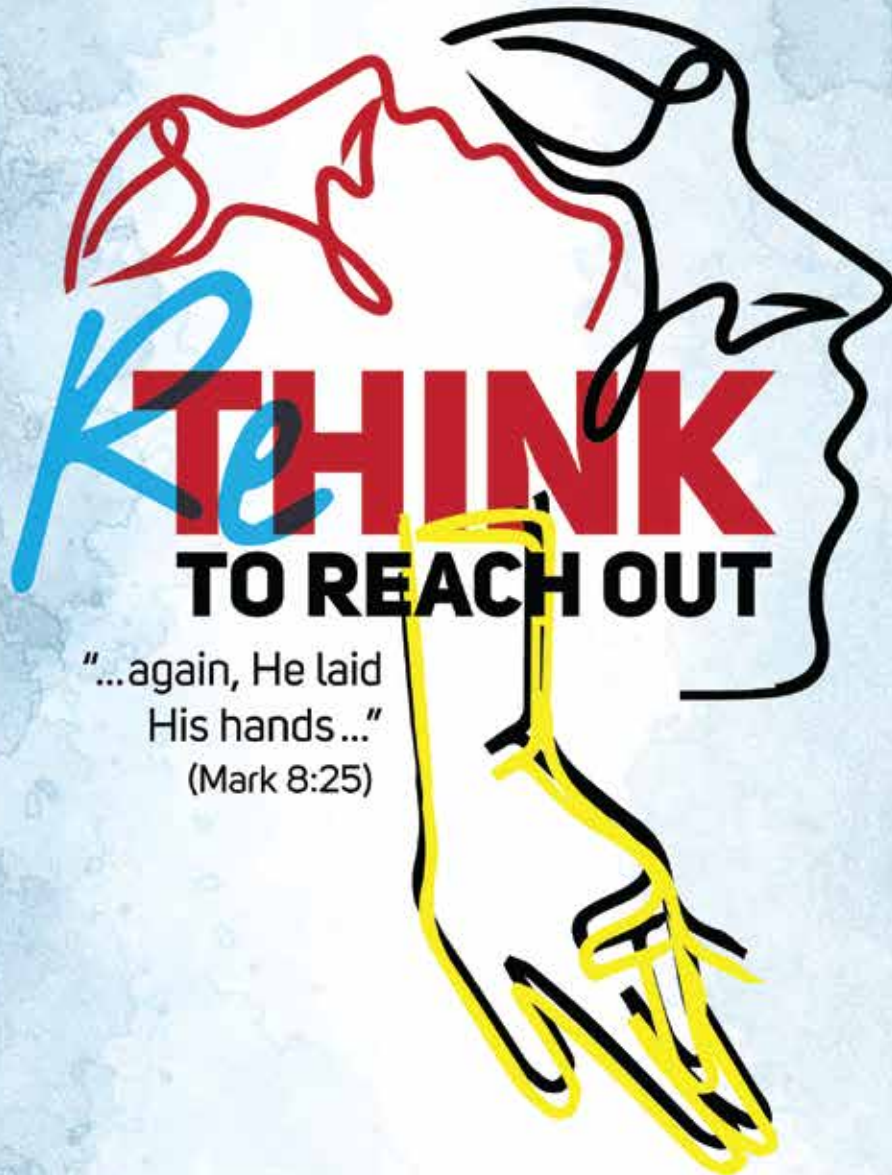
Will these investments truly reach district hospitals and mission facilities?

Can technology-driven care remain compassionate and accessible to the poor?

**20  
26** CMAI Healing  
Ministry Week

**HEALING MINISTRY WEEK** 8th-14th February 2026  
**HEALING MINISTRY SUNDAY** 8th February 2026  
**CMAI Day of Prayer** 11th February 2026

*www.CMAI.org*



"...again, He laid  
His hands..."  
(Mark 8:25)

**CMAI COMMS**

 **Christian  
Medical  
Association of  
India**  
Christian Medical Association of India  
cmai@cmai.org | www.cmai.org

 **National Council of Churches in India**  
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How do we ensure that quality does not become a privilege of urban centres alone? Mission hospitals, many of which already serve as first referral centres, can play a key role if included as partners and not just as service providers.

### Workforce: A Hopeful Signal

The plan to train one lakh allied health professionals and 1.5 lakh caregivers is one of the most promising parts of this budget. Shortage of trained staff affects every doctor's work long hours, fatigue, and burnout are familiar struggles.

This raises important questions:

Can mission hospitals become training spaces for the next generation of health workers?

Are we ready to mentor, guide, and shape them with values as well as skills?

How do we retain trained staff in underserved areas?

Mental Health and Emergency Care: Still on the Margins?

The announcement of new mental health institutions and expanded trauma care is welcome. But the absence of clear, separate funding for mental health reminds us of a long-standing issue.

We must ask ourselves:

Is mental health still seen as secondary to physical illness?

Are our hospitals prepared to respond to emotional and psychological distress with the same seriousness as physical emergencies?

What Does This Mean for Us as Doctors?

This budget opens doors, but it also places

responsibility on us. Insurance schemes, public-private partnerships, and medical tourism will grow. Yet our calling in mission healthcare remains rooted in service, dignity, and justice.

So, we ask:

How do we engage with government schemes without losing our mission identity?

Can we speak up when policies fail the poorest?

Are we willing to move beyond clinical roles into advocacy, training, and leadership?

A Call to Reflect and Act

The Union Budget 2026-27 is not just a financial document. It is an invitation to engage, to question, and to shape the future of healthcare in India.

As doctors in the CMAI fellowship, will we remain observers or become thoughtful partners in change?

How can our hospitals translate policy into healing for the most vulnerable?

The answers may not be simple. But the questions are worth asking together.

### Sharing Your Ground-Level Insights

As we reflect on the challenges and opportunities presented by the Union Budget 2026-27, your experiences and perspectives from the field are invaluable. If you have insights or stories from your work that can help us better understand the realities on the ground, we warmly invite you to share them with us. Your contributions can inform ongoing conversations and shape future healthcare initiatives. Please write to us at [A.Sangma@cmai.org](mailto:A.Sangma@cmai.org).

## LOST CERTIFICATE

I, Rinci Philip completed my Diploma in General Nursing and Midwifery from The College of Nursing, Christian Medical College (CMC), Vellore during the period 1998 to 2001, under The Board of Nursing Education, South India Branch of The Nurses League of The CMAI. Unfortunately, my original course certificate has been lost. Kindly contact: Email: [rinciphilip@gmail.com](mailto:rinciphilip@gmail.com) and Phone: +353 399 763597

**COLLEGE OF NURSING**  
**CHRISTIAN MEDICAL COLLEGE, VELLORE – 632 004, TAMILNADU, INDIA**  
**Website: <http://admissions.cmcvellore.ac.in/>**

Applications are invited for the following Postgraduate, Post Basic B.Sc, Post Basic Diploma and Fellowship in Nursing Programmes for the academic year 2026 – 2027.

1. **M.Sc. Nursing** – specialties include Medical Surgical, Pediatrics, Obstetrics & Gynaecology, Community Health, and Psychiatric Nursing
2. **Post Basic B.Sc. Nursing**
3. **Post Basic Diploma Residency Programmes in Nursing** – Cardiothoracic, Critical Care, Emergency & Disaster, Neurology, Operation Room, Psychiatry, Geriatric, Neonatal, Oncology, Orthopedic & Rehabilitation, Burns & Reconstructive Surgery, Haematology including Stem Cell Transplant, and Renal Nursing.
4. **Fellowship in Nursing** – Family Nurse Practice, Respiratory, and Pediatrics Critical Care Nursing

<b>Dates:</b> Access of online applications	= 23 <sup>rd</sup> February 2026
Last date for submission of online application with payment	= 30 <sup>th</sup> March 2026
Entrance examination (Step-1; Computer Based Test)	= 21 <sup>st</sup> May 2026
Final selection for the programmes	= 15 <sup>th</sup> September 2026
Registration for the programmes	= 16 <sup>th</sup> September 2026

*Dates mentioned above are subject to change. Kindly check the CMC website for updates.*

**Prof. Shandrila Gnanatheebam**  
 Dean, College of Nursing  
 CMC Vellore

Dear Members and Readers,

Life for All (LFA), as a quarterly newsletter of CMAI is a great opportunity to connect directly with our membership. We put together news, highlights of events, reports from the field, a notice board of future activities, important announcements and regular columns by the Secretaries of 5 Sections of CMAI.

**Being the Voice of CMAI:** I encourage you to come forward and give feedback, ideas and views, in order to further share CMAI's vision and mission in action.

We have uploaded the e-versions of LFA along with Christian Medical Journal of India and TearFund's magazine Footsteps. Kindly visit our website ([www.cmai.org/publications.html](http://www.cmai.org/publications.html)) to view and download these publications of CMAI.

**Write to us:** As we continue to disseminate information on behalf of CMAI, connect with us via email ([communication@cmai.org](mailto:communication@cmai.org)) to help our commitment to promote holistic healing to all.

~ Christopher N Peter, Lead - Communication Department

