

DEVELOPING INDIGENOUS RESOURCES - INDIA

Summary of Activities

October 2014

THOUGHT FOR THE MONTH: *“Nobody grows old merely by living a number of years. We grow old by deserting our ideals. Years may wrinkle the skin, but to give up enthusiasm wrinkles the soul.” (Samuel Ullman)*

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1. CEO's MESSAGE

Frederick Shaw

October's weather surprised us by giving us many unseasonably hot days, but towards the end of the month the long-awaited coolness was upon us! Soon, we will be delving deep into cupboards to find long-unnecessary blankets, and then be praying for a little heat.

Our plans for the new Personal Safety program (principally for women and children) are going ahead and a short report of our first activities is included in this report. Our other new program, NIPP (Nutrition Improvement Priority Project) has been launched and early progress is also reported below.



SUSI, DORIS AND HEIDI, OUR SWISS VISITORS, POSE WITH SOME DIR STAFF MEMBERS.

One of the most pleasant experiences we had this month was welcoming three visitors from Switzerland. Doris Hoby, Susi Gruenenfelder, and their colleague, and our new friend, Heidi, spent the day of the 22 October with us. Doris and Susi visited us first three years ago, and since then have become two of our most valuable fund-raisers. They generously spent a complete day with us, and went on home visits with our Health Promoters. They placed us deeper in their debt by delivering another wonderful financial contribution – a combination of their own donations and those resultant from persuading their friends to support DIR.

Sadly for us, but happily for Meena, a Senior Health Promoter has given us notice of her leaving DIR. She has been with us for seven years and during this time learned a lot and taught what she had learned to junior staff, and was an important supervisor of our income-generating program in which women made products at home, for which we paid them piece-meal, and then were marketed overseas. Meena is getting married and moving to Nepal.

We shall also miss our dentist with an MPH, Dr. Tavleen who has been with DIR since 1 October 2013. This able, talented young woman was a valuable member of our team, training and supervising our Health Promoters, developing a curriculum for giving instruction in Dental Health Hygiene, and even helping with maintaining our financial books. She is leaving us to fill a position with a greater amount of her time involved only with Dentistry.

Our new Prime Minister, Mr Modi, has been urging his compatriots to “clean-up India” under his “Swacch Bharat Abiyan,” and suddenly we are beginning to see results. Many of our streets, which have been decorated by borders of indestructible plastic bags and trash of every description, and which have had that appearance since I arrived here ten years ago, are being denuded. It is almost with disbelief that one sees this extremely welcome change taking place. Because of the ban on the use of plastic bags by retailers that has been recently imposed, it might well be that the trash-in-the-street conditions that were all too common here will never be as severe again.

Mr. Modi’s efforts are sure to have a direct beneficial impact on health in a variety of ways. First and foremost will be a reduction in malaria, microfilaria, dengue and other mosquito-borne diseases as the breeding pools of static water provided by millions of discarded plastic bags disappear. Additionally, the reduction of heaps of trash can be expected to result in a reduction of disease-carrying rodents in built-up areas, and that reduction should result in the number of poisonous snakes that are attracted to cities where they could enjoy devouring their favourite diet item – rodents. Other beneficial chains of events may be envisioned, and we raise our hats to Mr. Modi.

We look back on an event-filled and festival-filled October. We had many days off, and many special seasonal activities, especially in SWAD (our pre-primary School With A Difference) where our young pupils are leading healthier lives and are learning about their country’s history and traditions.

2. NUTRITIONAL IMPROVEMENT PRIORITY PROJECT (NIPP)

Intern Halisia Hubbard, with Health Promoter Sunil, and CEO Frederick Shaw

In this program we have tackled one of the most difficult problems there is where the improvement of young children’s health is concerned. This is the problem of improving the nutritional status of children whose parents have been un-cooperative. The parents’ lack of response to our efforts to motivate them to take positive action stems from a variety of different single factors as well as combinations of factors. Mental dullness which has probably resulted from lack of good nutrition while the parents were infants seems to be a leading influence, and this causes us to strive harder to interrupt a cycle which threatens to repeat itself endlessly. To focus and concentrate our efforts on the most serious cases, we have had each Health Promoter select the three most malnourished children in his/her area to receive special attention.

We set about getting every Priority child de-wormed during September, and managed to complete this task during October. We expect that this has contributed somewhat to the gains illustrated in the table which follows.



	SEPTEMBER	OCTOBER
% of Priority children who made a weight GAIN	36	47
% of Priority children whose weight status remained UNCHANGED	50	40
% of Priority children who had a weight LOSS	15	7
% of Priority children who WERE ABSENT from area	0	5

Because improving nutritional status depends upon behavioural change more than any other factor, we had expected that improvements would not result so early. Our Health Promoters are to be complimented on their achievements.



WASHING DAY ON ONE OF OUR STREETS.

3. MOTHERS' HEALTH

Ms. Sangeeta - Health Promoter

In October 2014, we had 12 births; 7 were girls and 5 were boys. There were no miscarriages. Two women who were pregnant last month were absent when we made this report and we do not yet have any information about them. At the beginning of October we had 101 pregnant women and at the end, 97 (and possibly 99, because 2 could not be reached).

All 12 deliveries this month occurred in hospitals or clinics. We are happy to report 11 babies are alive and healthy, but unfortunately, one baby died one week after her birth because of a “cord infection”.

All 12 mothers who gave birth had two or more appropriate antenatal exams and all 12 had two or more appropriate postpartum examination within two days of delivery.

The fact that the number of baby girls born again exceeded the number of baby boys born happily suggests that female feticide is not being practiced in our project area.

4. PERSONAL SAFETY

Mr. Arun Gupta, Administrative Officer

In last month's report, it was mentioned that we were planning a new program on Personal Safety which would address problems of women and child abuse. In October we introduced the program to the public by holding a meeting on 12th of the month. Our neighbours at the Baba Balak Nath Temple very kindly allowed us to use their hall since we lack a space sufficiently large for a public meeting.

Many local leaders and the Officer in Charge of the local police station, were invited to attend and participate and kindly did so. Our motives for holding this first gathering was to draw attention to abuse problems, to bring them out in the open, and make victims aware that “I am not alone” and there is reason to strive to solve such problems because “something can be done to improve matters”.

The event commenced with a prayer recited by the pre-school pupils of our School With A Difference and a dramatic educational skit presented by our Health Promoters. Dr Shaw then led an interactive session, and we saw a documentary film on two methods that women successfully employed to thwart men who attempted to molest them. The top police officer then addressed the gathering and assured us of the presence from-time-to-time of police officers after the hours of darkness in our slum, which we feel sure will act as a deterrent. Tea, biscuits and informal conversations rounded off this introduction to our new program.

Optimistically, some of our objectives were reached and some participants are more aware of the scope of abuse problems, and we have awakened hope that improvements can be achieved.



PUPILS CELEBRATING DIWALI AT OUR SCHOOL WITH A DIFFERENCE

THE SCHOOL WITH A DIFFERENCE

Mrs Reena Paul – Teacher

As we come to the end of each month and look back we have many sweet memories to share. As is often said, “October is the month packed with festivals.” We celebrated Dussehra, one of India’s most important festivals, on 1st October, and our schoolchildren participated in a special drawing competition. Children were given small gifts from the school.

Then on 12th October, DIR conducted a seminar "Personal Safety; Crime Against Women and Children". Our children recited an opening prayer and sang a patriotic song.

Then came Diwali on 22nd October. Children also participated in Diya – a candle and card making competition among each class. Diwali (the “Festival of Light”) was celebrated in our school premises. Rangoli was made, diya's candles were lit. A message was given to all "Say no to crackers" "Keep your environment clean and green." (Note: “Crackers” in this part of India is the name given to minor explosives and rockets, which are called in other areas “fire crackers”, or “fireworks”. Typically, Diwali is celebrated with great public

and private displays of crackers, and every year some children are blinded and/or hospitalized because of cracker accidents. Hence the movement to discourage private use of crackers.) Children burnt Phuljharis (sparklers), danced, sang songs for Diwali and everyone enjoyed sweets and biscuits which were served as we bid Adieu to October and welcomed November.

6. INCOME GENERATING ACTIVITY

SEWING

One of our popular classes to equip learners with income-earning skills is our Tailoring Training class which meets five days a week from 10am to noon. Currently 25 young women are attending. Some, upon completing training, will start their own small business, others will find paid employment, and a very small minority want to become proficient in order to provide tailor-made garments for their family.

STITCHED PRODUCTS

Several of the women who have taken the tailoring class, now make products at home using fabric we provide, and are getting paid, per item, when their products pass our quality-control inspection. They make cloth purses, re-usable gift wrapping for a bottle of wine, cloth cases for i-Pads, salwars, etc. For the most part we send the products overseas where they are marketed in US, France, and Switzerland.



7. IMMUNIZATION PROGRAMME

Ms. Sarita – Health Promoter

In the month of October, DIR-I collaborated with the government-run immunization programme on every Wednesday morning (in the DIR Centre) to provide free immunizations. A total of 89 shots were administered to children, details of which are as follows:

(a) Measles – 4 (b) Measles Booster -5 (c) BCG -0 (D) DPT-B -5 (e) DPT.10 -3

SHOTS	1 st Dose	2 nd Dose	3 rd Dose
Hepatitis B	8	10	5
DPT	8	10	5
TT	5	16	-

In addition to these, 3 children of age 10 years were given TT shots.

8. D.O.T.S.

Mrs. Meenakshi- Health Promoter

Last month, **thirteen** tuberculosis patients were being served medicines at our basti office through the government DOTS program run by DIR. Our basti office is an authorized DOTS centre, and patients from the vicinity get their supply of medicine from our office on a regular basis. During this month, **three** patients completed the treatment and were declared free from this disease. **Four** new patients have been diagnosed with TB this month, and we have started medication to them. Unhappily, we have had one case of relapsing.

Following is the distribution of these patients in different categories and what each means:

Category I – All those new patients whose pulmonary smear is positive for Tuberculosis Bacilli or those whose pulmonary smear is negative but are seriously ill, plus patients with extra-pulmonary Tuberculosis are included in Category I. This month, we have **nine** patients in this category.

Category II – These are old Tuberculosis patients who had either defaulted from the treatment at an earlier stage and have re-started the treatment or those who have again contracted the disease after being cured, plus those who had not been cured even after completing a full prescribed course. They are included in Category II. This month we have **four** patients in this category.

9. Personnel Action, Visitors, Events

Mr. Arun Gupta

Resignations:

- (1) Senior Health Promoter Meena Kumari, after seven years of good service.
- (2) Trainer/Administrator Dr Tavleen, after one year.

Addition:

Mr. Vishal Anand joined us as an Intern on 15.10.2014.

Visitors:

- (1) Mr. Gurjasjit Singh, a merchant navy officer, visited us on 21.10.2014 and kindly donated 20 bags with which our Health Promoters can carry their equipment while on home visits. He plans upon being a volunteer upon his return to India.
- (2) Three friends of DIR from Switzerland, Susi, Doris and Heidi, visited us on 22.10.2014 and joined us in the Pre-Diwali celebrations with the pre-school pupils of our SWAD. They presented us with a very welcome cash donation that they and their friends, the DIR supporters of Switzerland, had raised.

Events:

- (1) "Personal Safety" Public Meeting;
- (2) "Operation Clean Sweep" The Health Promoters paraded through our community to draw attention to the Prime Minister's campaign to clean-up all trash from private and public places;
- (3) Dussehra in-house Festivities;
- (4) Diwali in-house Festivities;
- (5) In keeping with the prime minister's initiative of making India clean - the HPs went around the basti educating the locals on hygiene and how important cleanliness is.