

**THOUGHT FOR THE MONTH:**

**“ What love we've given, we'll have forever. What love we fail to give, will be lost for all eternity. ”— Leo Buscaglia**

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**1. CHIEF EXECUTIVE OFFICER's MESSAGE**

Dr. Frederick Shaw

In some selected countries there might seem (especially to visitors) to be inordinate preoccupation with the weather. Even in these countries, the first question, upon individuals meeting, usually concerns “how you are doing”, but the second remark is about the weather, and on location, there is no disguising where sincere concern lies. Only in unusual cases is there more than passing interest in “how *you* are doing”, but the weather? Now how *it* is doing; there is an issue of considerable concern!

Superficial inspection suggests that in the countries where weather is of concern, the concern emerges from weather having the power to influence life events detrimentally. It is there hovering over us with the power close to that of Damocles and his sword. In a land I know so well, the soft, gentle rain that makes our island so beautifully green is the same accursed torrents that make a mockery of our best-laid plans to have a picnic on our lovely, green (almost unused) lawn. Some of us who believe in an Almighty God, believe She sets up these scenarios, not just for her amusement but to inspire us to greater heights of linguistic description while ensuring adequate numbers of us will swell Hell's population for voicing heart-felt foul language directed at the weather.

In India, a county where weather can capture universal attention if not concern, or even worry, we are sitting-up and paying attention these days. The more astute newspaper reporters have discovered we are having a “heat wave” and the lack of letters to the editor disputing this suggests there are very few of us who would suspect we are not. Two days ago (might I pause here to exaggerate by saying it was the last time I was able to summonsed-up enough energy to read a newspaper!) we read that 2,031 deaths had been caused by the current heat wave. News commentaries tell us the temperature is reaching 45C too often. This is 115 F, which is too much. Did someone say “This too will pass”? We feel sure it will, but when? WHEN?.

In the meantime, we are concerned with the weather. Anyone surprised?

While the rest of us were concentrating our creative efforts on avoiding direct sunlight, our Chief Operations Officer, Harsharan, had the good sense and ambition and *energy* to plan and run an “Eye Camp”. This was a one-day event in which local people were invited to come to our Centre for free eye examination by a team of eye specialists from PGI (The Post Graduate Institute of Education and Research). This happened on the last day of the month, and Harsharan, whom I congratulate for this much-needed exercise, authored the fine article on the subject which immediately follows.



## 2. BETTER SIGHT - Harsharan Kaur, COO

We organized an eye camp with the help of Professor Dr. Amit Gupta, PGI for the residents of our area at our office. The heat wave that Dr. Shaw mentioned was prevalent that Saturday morning and the electricity board also did not feel it necessary to give us respite with moving fans. So on a warm day with no electricity 3 brave, perspiring, doctors, led by Dr. Lomi, and a technician set up one of our larger rooms to their liking. They had an efficient system and the waiting line was no longer than 3 minutes. Our HPs registered the patients as they came in downstairs while filling out the patient card and handing them a token. Crowd management was effective as the HPs had previously assigned duties. Most of the patients that came in were pre-screened by the HPs and knew the problems they were having. A total of a 118 patients were seen by the doctors. They also gave out samples and some required medicines at no cost. The doctors were given a tour of our centre and said they appreciated the work we did. They offered to see the referred patients on a special day set up for them and even help some of the economically weak patients get operations without cost. We look forward to working with these doctors and helping the residents of our area gain better sight.





### 3. NUTRITIONAL IMPROVEMENT PRIORITY PROJECT (NIPP)

Ms. Sarita- Health Promoter

This program has a targeted approach whereby, each Health Promoter (HP) has selected the three most malnourished children in his/her area to receive special attention. The criterion for this special selection is that a child is 3 or more months continuously “in the Red” (seriously underweight) category of the growth chart.) Each HP is making a concerted effort to have his/her 3 children gain adequate weight to be classified as in the Green category (which means “appropriate weight”. Typically, we think of children who start “in the Red” improving and entering the “Yellow” (the underweight) Zone, before being classified as “Green”.

Age group (months)	% of NIPP children
0-12	0
13-24	18
25-36	28
37-48	44
49-60	10

In our NIPP, once one child has gained adequate weight to be “Green”, then another will take her/his place in the NIPP. By this means, we expect that the 39 children in greatest need of nutritional improvement will always be identified and will always be given special attention. One of the most difficult problems in international development is rectifying nutritional deficiencies, but until they are rectified, national development is a myth. Too often the signs of malnutrition are not readily recognized, and our newest visitors are likely to tell us happily, while they point, “That seven-year old looks healthy and happy,” and we would be likely to agree if we did not know the child was twelve. Stunting is all too common, and the national estimate is that 61 million Indian children are stunted.

Beneath is summarized the NIPP progress being made.

	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY
% CHILDREN GAINED WT	36	47	39	31	46	54	31	26	46
% WT UNCHANGED	50	40	46	62	41	26	59	61	51
% LOST WT	15	7	10	5	10	13	10	13	0
% CHILDREN ABSENT	0	5	5	2.5	3	5	0	0	3

We have seen an improvement in the children coming into the centre regularly, but, sadly for the children, the most ignorant parents have not recognized the value of food, and bring their children to be fed on an irregular basis. I have stepped-up the pressure on parents to improve attendance, and have got the assistance of two work colleagues, Senior Health Promoter Maya, and Health Promoter Sushma. The three of us have visited every parent involved to educate them and get their co-operation. We are seeing some improvement in attendance but feel we shall have to consistently apply pressure, for the sake of the children.

A special meeting was held just for the parents of NIPP children, on 3<sup>rd</sup> of May, and that time we made another attempt to have parents understand how their action at this stage in their children's lives can determine how well their children can **think** for the rest of their lives. Between 40 and 50 parents attended, and seemed to pay attention, but we suspect that the parents of these parents did not pay enough attention to childhood malnutrition, and that is why we are facing problems educating these present parents, to-day.

#### 4. The Success Story Line-

Mr. Sanjeev, Field Coordinator

This story is based on the improvement and success of a common man's life. DIR is running a programme called NIPP, in which we select 3 children per unit who are **severely** underweight and offer additional services to improve the nutrition of these malnourished children. For the 39 children currently in this programme, both counseling and meal plan services are offered to combat this issue. One child in the programme is a girl named Ananya who is 38 months old and in the "Priority" Category. Her body weight was varying over the months, rising and falling regularly. She was often sick, and this has heavily affected her growth.

On April 3<sup>rd</sup>, DIR arranged a meeting to raise awareness for these very children. About 40-50 people attended the meeting, one of whom was Amit, the father of Ananya. While explaining the programme and the issue of malnutrition, he was listening very carefully and was curious to know more about what could be done to improve his daughter's health. Thereafter our staff advised him about proper care and nutrition for Ananya.

A couple of days later, the Health Promoter responsible for Ananya's unit and Mrs. Natasha, our Nutritionist, visited Amit. Mrs. Natasha counselled Amit about nutritious foods that he may feed to his daughter, and both staff members requested Amit to accompany Ananya for her meal plan provided by NIPP at DIR's centre.

By the next day, he came. Amit now feeds his daughter every day at both the DIR centre and at home, offering her a variety of foods. In such a short time, with the incredible effort of both Amit and the DIR team, Ananya has moved from the "Priority" Category to the "Yellow" Zone.

Amit is but one example of a parent who has proactively addressed the issues of his child to improve her life, and hopefully for generations to come.

#### 5. MOTHERS' HEALTH

Ms. Sangeeta- Health Promoter

In the month of May 2015, 12 pregnancies ended in our project area: 3 boys and 8 girls were born, and there was one stillborn because of toxemia. All deliveries took place in a hospital. All women who gave birth had two or more antenatal checkups before delivery and appropriate post-partum examinations within two days of delivery.

While we have made considerable progress since we started and this is reflected in the reduction of baby deaths to one-quarter the number of deaths when we started, we feel that providing training for pregnant women may pave the way for still greater accomplishments. Accordingly, we have made a curriculum for “Preparing Pregnant Women” and have started classes on 29<sup>th</sup> May.



### Statistical Summary

NO. WOMEN PREGNANT AT FIRST OF MONTH.	NEW PREGNANCIES		NUMBER DELIVERIES THIS MONTH	MOVED AWAY		NO. WOMEN PREGNANT AT END OF MONTH
	Women arrived	New concept		TEMP	PERM	
92	6	16	11	11	6	96



## 6. THE SCHOOL WITH A DIFFERENCE

### Remarks from TEACHERS

The picture that we painted last month of our new school year in which returning pupils were happy to re-join their classes and classmates, and in which new pupils wanted most was to be returned to their mothers, is changing as everyone “fits in”. The necessary adjustments are being made and teachers are happy to be able to turn the major part of their attention away from individual pupil adjustment and focusing on academic subject matter.



Mrs. Meenachi Chauhan, our Nursery teacher, informs us that in May, her pupils collected fallen leaves from trees, counted them and pasted the “best” ones on sheets of paper.

Mrs. Manjeet Kaur, our Lower Kindergarten Teacher, also had her class collect and paste fallen leaves. In addition they made sketches of individual family members, and made their first attempts at telling a story. An exercise they enjoyed was the making and “flying” of their own paper aeroplanes.

Mrs. Ushu, our Kindergarten teacher, had her pupils replicate the activities of Mrs. Manjeet's class but on a more advanced level. As well as drawing family members, they talked about the importance of each one. In addition to making their own paper aeroplanes, each made a "boat" and a fan.

In all of our classes, we are vitally concerned with the children enjoying school, and enjoying their interaction with so many other children of their own age. We are keenly appreciative of the fact that the attitudes which they form now can affect their school experiences for the rest of their lives. While we want the children to succeed academically, we are concerned with their attitudes towards, school, towards work, towards learning, and (of utmost importance to us) towards each other.

## **7. INCOME GENERATING ACTIVITY**

Ms. Maya – Senior Health Promoter

### **Stitching and Products**

Hello Everyone,

In the past few month we have received donations of new types of fabrics, and so this month we experimented with making some new products from this novel material. For the first time, we made "Pencil Pouches" which are cloth (or thick plastic) bagswith a zipper which we expect will sell well to students. Another new style of product is a see-through, zipper purse. And still another product is an improved version of our cloth shopping bag. In this, we are incorporating the use of a highly-decorated, hand woven ornamental strip to cover the sides and the shoulder strap. We hope that this will attract new interest in buyers.

For the benefit of new readers, I should point out that the woman who are stitching the bags which we sell, are mostly students of our tailoring class. They are obliged to practice using sewing machines for all kinds of functions, and we have suggested that they practice by making bags which we design. We pay them for every bag which passes our "quality control" and they thereby earn a living. The fabric they use, is scraps left over from upholstery jobs, or parts of sample swatches of last year's fabrics. The fabrics, some of which are very beautiful, are all donated to DIR.

On behalf of DIR and the ladies employed through this program I would like to thank the different furnishing shops like Jain Furnishings and Furnishing Studios etc. who are donating the waste cloth to help the ladies stitch different kinds of bags. This month the ladies earned a lot of money and were very happy.

### **Beautician Training Center**

Our Instructor, Ms. Loveleen, continues to improve the skills of her class of trainees while closely monitoring their daily progress alongside a pre-designed monthly syllabus. This past month, 2 more women have joined the class, totaling to 7 trainees currently. The timing of the class is 11am-1:30pm Monday to Friday.

## **8. IMMUNIZATION PROGRAMME**

Ms. Veena –Senior Health Promoter

This month we offered 4 immunization camps held by the Punjab Health Services (PHS). We faced a shortage of immunization cards, but we made sure to resolve this issue. In addition, we made special cards in red specifically for high risk individuals, including pregnant women. In the following month, PHS will be starting a program for the Basti children living far from any access to immunizations. This program will hold five camps per month and it will be run for 4 months near the edge of the colony. As per usual, we provided food, such as dalia, for the children after their immunizations. During the month of May, 174 individuals received immunizations, of which 140 were children and 34 were pregnant mothers. Although not mentioned in the table below, 32 individuals received vitamin A doses.



<i>SHOTS</i>	<i>1<sup>st</sup> Dose</i>	<i>2<sup>nd</sup> Dose</i>	<i>3<sup>rd</sup> Dose</i>	<i>Total</i>
<b><i>Hepatitis B</i></b>	<i>0</i>	<i>3</i>	<i>9</i>	<i>12</i>
<b><i>DPT</i></b>	<i>0</i>	<i>3</i>	<i>9</i>	<i>12</i>
<b><i>DPT-B</i></b>	<i>15</i>	<i>10</i>	<i>-</i>	<i>25</i>
<b><i>TT</i></b>	<i>20</i>	<i>14</i>	<i>-</i>	<i>34</i>
<b><i>TT 10 yrs.</i></b>	<i>0</i>	<i>-</i>	<i>-</i>	<i>0</i>
<b><i>Measles</i></b>	<i>17</i>	<i>15</i>	<i>-</i>	<i>32</i>
<b><i>BCG</i></b>	<i>2</i>	<i>-</i>	<i>-</i>	<i>2</i>
<b><i>Pentavalent</i></b>	<i>21</i>	<i>20</i>	<i>16</i>	<i>57</i>
<b><i>Total</i></b>	<i>-</i>	<i>-</i>	<i>-</i>	<b><i>174</i></b>

### **9. D.O.T.S.**

Mrs. Meenakshi –Senior Health Promoter

Last month we had 25 patients suffering from Tuberculosis. However, the number has been reduced to 23 during the month of May. We are pleased that this number has not increased. Of the 25 patients from last month, 7 had completed their courses and have been cured; however, 5 new cases have been identified. Furthermore, of the 23 patients this month, 18 are in Category I and 5 in Category II. Most of the current patients have extra-pulmonary TB which cannot spread from person to person, and luckily all of these cases are receiving treatment through DIR's D.O.T.S. centre. We are working hard to make sure all patients are adhering to their medication courses.

## 10. PERSONNEL ACTION, VISITORS, EVENTS

Mr. Sanjeev – Field Coordinator

### Visitors:

Dr. Anju, the psychiatrist from London, paid another visit to DIR at the beginning of the month. She wanted to know how the organization functioned, and she was happy to know about the work we were doing at the centre.

### Volunteers:

On the 4<sup>th</sup> of May, Mrs. Seemakindly came to DIR to help with the school's children. We also had the pleasure of having Mrs. MokshiAnandteach the staff members yoga and techniques in the art of living.

### Events:

**Community Meeting** – DIR held a community meeting on May 3<sup>rd</sup> with families in which the children are severely malnourished. This get-together was held in the hopes of reaching out to the parents of NIPP children and to convey information aimed at improving their children's health. NIPP is a programme run by DIR for the most severely underweight children who fall under the "priority" category. Approximately 40-50 parents attended, as well as Dr. Anju, a visiting psychiatrist. We provided useful advice to parents about how to properly care for their children so that they may lead healthy lives in the years to come.

**Eye Camp** – DIR organized and held an eye camp with the assistance of Dr. Amit Gupta, and Dr.Lomi and his team had successfully completed 118 eye check-ups. We hope we can continue our work and collaborate with these doctors to improve the vision of those living in the Basti.

**English Classes** – DIR is always continuing its efforts in expanding the knowledge of its Health Promoters. This month, Mr. Anurag hadvolunteered to teach English classes for the DIR staff members. While many of our Health Promoters have an adequate grasp of the English language, this class has allowed for much improvement even in one month's time. We are very appreciative of Mr. Anurag's time, and we hope he continues teaching.

**Pregnancy Classes** – Starting on Friday, May 29<sup>th</sup>, DIR started new health education classes for pregnant women to better these women's awareness of topics relating to reproductive health.