DEVELOPING INDIGENOUS RESOURCES

Thought of the Month

"Concentrate all your thoughts upon the work at hand. The sun's rays do not burn until brought to a focus."

-Alexander Graham Bell

DIR –INDIA)

705-C Adarsh Nagar

(Punjab

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CEO'S Message

As per Roman history, February is a month of purification. This is the shortest month of 28 days in Julian and Gregorian calendar but for Developing Indigenous Resources India, less working days did not matter. DIR-India achieved greater heights on all fronts both in education and health program.

The most heartening news is that the number of red zone children has dropped down to 191 out of 1601(11.9%) in a population of 17,990. This was possible due to close monitoring, motivation and intervention of senior staff's personal involvement in the field work by counseling. The outlook of the mothers of these children has changed. These mothers are now more responsive and caring towards their young ones

The most appreciative part of DIR-I program is the constant vigilance by our Health Promoters in their respective area and a good public relation that the HP's are helped, informed and assisted when any family moves in the Janta Colony.

To our surprise, HP Meena identified a Muslim family which has recently moved into Janta colony in a rented room. This family has two females and one male child. Mother has not given any immunization shots to an eldest daughter who is 4.6 years old and irregular vaccination to the second daughter of 2.6years of age. The third child is a two-month-old baby boy whose immunization schedule is religiously followed by both the parents. Sex discrimination is still a big concern amongst the Indian society. Our compliments to HP Meena who

motivated the parents and personally brought the second daughter for vaccination.

DIR-I ensures, repeated counselling is given in all committee meeting to eliminate the sex discrimination from the minds of people.

The school with the difference is progressing and growing towards greater heights. Teachers are working hard by making good lesson plans and implementing them sincerely.

This is a month in which the syllabus is completed, and revision classes start. Children of Kinder Garden class are given special attention as they are getting ready for admission in new school after the final exams.

The self-confidence of every child has improved. They are smart and bold to communicate with any visitor and make us proud.

Registration in St. Stephen School for admission in Kinder Garden class gets over in the month of September. Unfortunately, The School with the difference lost this opportunity this year. We met the Senior Government officials to help us in getting admission for our KG class kids in Government Model School. We are waiting for their positive response.

On 7th February 2018, Mr. Shergill brought his south Indian friend Dr. Libni Eapen who lives in Ottawa. He was highly impressed by the field work of our Health Promoters and the standard of medical knowledge the HP's projected.

Amongst other visitor's Marat was a very special guest for DIR-India who visited Janta Colony on 8/2/2018. It was a pleasant surprise to all HP's as I had not disclosed this secret to anyone as advised by Marat.

Marat was one of the team members who assisted and helped DIR-INDIA grow when it was in its formative age in the year 2006-2007.

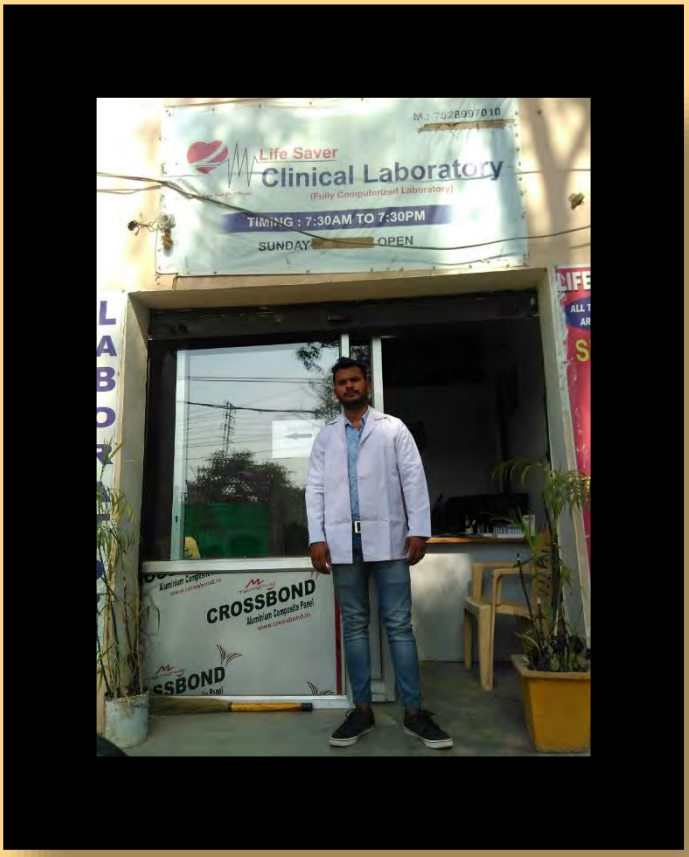
Marat is working for Business for Social responsibility (BSR). It's an International organization in which you select countries where you would like to work. We are pleased to know that Marat has chosen India as one of the countries so that he is in close contact with DIR-India and assist us at the hour of need.

Marat and I enjoyed working together in building DIR-I that even today during his visit we were most of the time discussing the future of DIR-I. We all are extremely grateful to Marat for sparing his valuable time from his busy schedule and spent two days with us.

In today's world, mental stress and strain are common amongst all age group. In Janta colony with a population of 17,990 different type of pressures are faced in day to day life. We are extremely grateful to Brigadier Narinder Singh Orthodontist, Deputy Commandant of Army Dental Centre came to our Basti to give lessons on mental relaxation followed by meditation. Brigadier Narinder has subscribed a magazine on Heartfulness for DIR-India employees to help and guide them to overcome pressures in the day to day life and mature into a balanced personality. Our special thanks to Brig.Narinder.

AN INSPIRATION-From slums

I am Rahul, 20 years old and living in # 549 Block-A Janta Colony. My father Mr. Ganga Ram works as a salesman and my mother Mrs. Kalavati is a housewife. My brother who is 8 years younger to me studies in 7th class. My family lives here with my maternal uncle. Our financial status was weak and there were many challenges to face in urban life with limited resources. I was 11 years old when I was exposed to DIR's CAP program. I found this activity very interesting which motivated me to study laboratory technology. In CAP program I used to participate in all activities and attend regular classes on health promotion.



Once DIR needed a support from all children who were active in CAP program. The organization wanted our help and assistance in a project to uplift the body weight of red zone children of Nayagaon. It was a 4-month project in which CAP volunteers had to help DIR to improve the health of malnourished children. All young volunteers who succeeded in improving the health of a malnourished child were rewarded with bicycles. I worked wholeheartedly to achieve my goal of generating health awareness and improved the health status of all children in my area of responsibility by personally monitoring the food intake of each child in red zone category. The health status of children improved and they gained weight and I was gifted with a bicycle. This was the most expensive gift I have ever received in my life.

I continued my schooling till 10th from Government model school sector -12, then I took admission for a course in Medical Laboratory Technician at Guru

Gobind Singh college sector-26. After that, I did B.Sc in laboratory technician from DAV college in sector 10 Chandigarh. It was hard for my parents to pay my course fees as my father was the only earning member of the family. I did not want to be a burden on them so my friend and I decided to work together and we opened a laboratory in Kansal. After few weeks my friend could not cope up with the work pressure as he was in college and had less time to attend the lab. The entire Lab burden came on my shoulders with no contribution. I was disappointed and thought that I will not be able to continue my work. What had made me sadder that I promised myself that I would not be a burden on my parents for any financial help. Sometime I would feel that I had failed in my own expectations. I am lucky and blessed that my parents stood by me like a rock and kept encouraging me to move on. I reopened the lab alone so it was difficult to move with two challenges, one to earn livelihood and second is my education. For few months it was tough but with my willpower and determination, I managed to overcome this tough period. After few months I hired a helper for laboratory and now it has become easy for me to attend the classes in morning and I attend the laboratory work in the evening. I am happy and satisfied that I earn money for my family and now I am no longer a dependent. I am grateful to DIR, who had helped me to develop my mind and knowledge and made me believe in myself that I am capable of doing anything. One thing I like about DIR is, it always encourages the people to be independent and raise your resources of livelihood independently. My compliments to DIR for changing the life of so many youngsters in Janta colony.

IMMUNIZATION PROGRAMME

Every Wednesday is designated as immunization day in collaboration with Punjab Government Health Services.

Homeopathic Medical college of Chandigarh did three medical camps in Janta colony in the month of February. 115 Patients got free consultation and treatment with medication.

The Following Inoculations were given during February 2018

Shots	1st dose	2nd dose	3rd dose
BCG	-	-	-
DPT 5 YEARS	13	-	-
DPT-B	25	-	-
MEASLES	20	25	-
PENTAVALENT + IPV	25+25=50	17	17+17=34
T.T BOOSTER	2	-	-
TT1 INJECTION.	18	-	-
TT2 INJECTION	15	-	-
TT 10 YEARS	7	-	-
TT 16 YEARS	-	-	-
TOTAL	150	42	34

In a population of 17990, DIR was able to identify one family, where immunization is not the criteria for the girl child. It is a Muslim family from Uttar Pradesh, who recently moved to a rental Room No 953 Adarsh Nagar. Sama, the mother and her husband Sakir have two daughters and one son. Sakir has his own barber shop in Nayagaon Village. It is shocking to know that the family has sex discrimination and unequal attitudes among their children. The first child aged 4.7 years, is a daughter not immunized since birth. The second child also a girl aged 2.7 years has got B.C.G, D.P.T-I and D.P.T-II on interrogation. They have 2 months old third child, a son. Both Sama and Sakir (parents) are particular and are regular in following the immunization schedule for a baby boy.

Whenever HP Meena visits their house, the mother is more concerned about her son's immunization schedule and insensitive towards daughters vaccination. The mother had all normal deliveries during her pregnancy and her elder daughter named Sunaila stands in green zone category but her second daughter stands in red zone category. When HP Meena Kumari asked the reason for not immunizing her daughters, she replied,

"**In my time we didn't have any immunization, still we are alive and living healthy. So I don't think that there is any requirement of immunization for my daughters**."

As both the parents are illiterate and the society where they are brought up looks down upon female child. Her belief is that the only male is a "Bread-earner" and he is the only one who performs last ritual rites so looking after his health is important.

Even though we are in the 21st century, people in certain parts of India have reservation towards the girl child. After repeated counselling and convincing Meena succeeded. HP Meena personally went and brought the baby girl to DIR-I office and got her vaccinated under direct supervision.

INCOME GENERATION ACTIVITY

We have 16 ladies in tailoring class in the morning session and 5 ladies in evening session. Five new women have come for admission.

The syllabus for the month of February was Bags and Padded saree blouse. All the students were excited to learn this as demand for these two items is more in the market. They have learnt two types of bags and padded blouse.

All students were excited and satisfied with the skill to learn and earn a livelihood at home by stitching clothes. Among these 21 ladies, 5 ladies are very good in stitching, as their uptake is fast and give quick results with minimum effort.

MY STORY

I am Sammi Sood s/o Ranjeet Sood. I live in #305 Janta Colony, Nayagaon Village. We originally belong to Saharanpur, U.P. but I was born and brought up in Chandigarh. We are seven members in our family. My father is a sweeper in Health Department. I completed my studies till 10th class. I was fond of studies but I could not continue due to the financial condition and ill health of my mother. I got sunk with responsibilities on my shoulders at a tender age that I had to financially support my siblings and look after my ailing mother. I quit my studies and started working.

Once financial situation got stabilized I got married and now I have two children. I am extremely grateful to Almighty who comes to my rescue every time I am in the difficult situation. Currently, I am working at two places. I work in PGIMER (Postgraduate Institute) Chandigarh on the night shift as a helper and as a Driver for Developing Indigenous Resources India.

It's a great honour and privilege to work for DIR as it's a beautiful organization where we all respect each other. Developing Indigenous Resources India is doing a wonderful job in generating health awareness in Janta Colony. I too live in Janta Colony. I was a small child when DIR-India initially started working in our slum. Our society is much wiser now on health issues, thanks to DIR. It is an excellent institution which is helping the masses in training skill development on stitching and raising the health standard of women and children. All employees of DIR are treated equally and we all work as one big family. I am happy to be a part of it.

CHILD ACTIVIST PROGRAMME

Senior Health Promoter

Timing: 3:30 pm to 4:40 pm

Age group: 7 yrs.-13 yrs.

In the month of February, we held a class on Puberty, changes which occur in the body, menstrual cycle and Hygiene management. In January health promoter Meenakshi and I visited Suhana to attend the seminar on Menstrual Hygiene Management (MHM) as it was organized by WSSCC (Water Supply and Sanitation Collaborative Council). Miss Komal and MR. Krishna was the trainer and this training session was held for five days (8/1/18--12/1/18) in which they had provided flip books and wheel cycle on puberty changes and menstruation. With the proper training and materials, we decided to hold a class to educate our basti children because both girls and boys should have full knowledge of the adolescent. These are the changes that take place due to hormones in the body. In DIR, we have 14 units and every day 25 to 30 children come to DIR to participate in activities in which we give them medical knowledge. This helps them to grow maturely in building their mind and behaviour in society. Games like kho-kho, football, skipping and other outdoor games attract them to come regularly which are there to break the monotony of education classes. In the first week of February, we educated the children about adolescent and changes which occur in their body during puberty. Through the flip book which was provided by MHM, they were taught about male and female body. These changes in the body during adolescent are due to hormones which are chemicals released from the brain influencing the reproductive system. This is a

normal process and is part of life cycle both in Males and Females. Girls and boys both experience different changes in their body during the cycle of puberty and adolescent.

In young girls, menarche is an important issue when female experiences her first mensuration. It is sad but true that in Northern India it is not well taken by parents of a girl. The girl, in general, is not guided by the mother but she gets some information from the school which holds special classes and are given sanitary towels once to show what sanitary pads look like.

DIR-INDIA held special classes for girls in the Basti in the second week of February on mensuration. Menstruation is a stigma in a girl's life. Since the environments were personnel young girls could clarify their doubts without hesitation. We gave them the information of phases of the menstruation cycle through wheel cycle. The photographic images of wheel cycle the young girls learnt why menstruation is important in life. They were wise to tell the age when it first starts. The behaviour and mood swings which a girl goes through this menstrual cycle due to hormonal changes are normal. It has nothing to do with any myth or belief which is commonly seen in the slum and villages amongst illiterate. This is purely biological reason.

During the classes on mensuration young girls were taught the importance of maintaining hygiene during this period. There is pH imbalance and woman is more susceptible to Bacterial infection. It is important to maintain hygiene, regular Baths, personnel hygiene and changing sanitary towels every 4-6 hours and wear clean clothes every day. Due to poor financial conditions, ignorance in rural areas or non-availability of sanitary towels are common, some girls and mothers use cloth during their menstruation. It is a regular practice among the women in the slum. We suggested them to use cotton cloth as a sanitary towel and also to maintain

the hygiene of the cloth. We also guided them how to reuse the used cotton cloth for the next mensuration. They were also given some tips on diet and advised them how to get rid of pain or cramps, mood swings during periods. In the last week of February, they were told the importance of a proper menstrual waste disposal system. The material used to make plastic napkins is non-biodegradable and used sanitary napkins that have not been disposed off properly sometimes block the drainage system. We questioned the girls as to how they disposed the used sanitary napkins. Some of them gave a good method of disposal but few revealed that they throw the used napkin in open without wrapping thus polluting the environments. Women from lower socioeconomic status who cannot afford to buy plastic sanitary napkins use cloth napkins. Their method of disposal or reuse of napkin was unhealthy. It is important to wrap the used napkins with newspaper and put in a garbage bin so that the bacteria do not multiply in numbers and pollute the environment. Some burn the used napkin to get rid of it. It pollutes the environment and some harmful toxins are released through the burning of the used napkins. So it is necessary to dispose the used menstrual napkins with the right method. This month, 122 boys and 146 girls attended the C.A.P program. The children have got the knowledge of the above-mentioned subject in detail. We have satisfied all the youth with all the answers to their queries. We are very sure that the knowledge and information we shared will spread in the society.

NUTRITION TRAINING

This month the Health Promoters were taught about the importance of proteins, its functions and deficiencies, Protein Energy Malnutrition includes disorders like Kwashiorkor and Marasmus, Vitamin A, its functions and deficiencies. Apart from this, Nutrition exam was taken in which Health Promoters Meenakshi, Meena and Payal scored the highest marks. I am pleased to report that on the whole the result was good and all HP's performed well.

A nutritional demonstration on Dhokla (Gujarati Snack made with gram flour) was given to our Health Promoters. This snack is made out of seasonal and locally available low cost and high-value nutritious ingredients, which basti people can afford easily. This recipe is made by using Gram Flour, Semolina, curd, mustard seeds, lemon and curry leaves. This recipe is rich in calories, protein, Vitamin C and calcium. This snack is healthy for growing children, pregnant and lactating mothers. Fortunately, it is tasty and children enjoy eating it.

Mrs. Natasha during her demo

Apart from that a new case of pregnant lady Jyoti, age 26 years suffering from Gestational diabetes is identified from our HP Sushma Devi's area. Jyoti belongs to Uttar Pradesh. Her husband is a part-time worker in a hotel and is staying in a rented room in Hawara line, Naya Gaon. Last year her three and half year old son died of Dengue. She is undergoing treatment at General hospital, sector 16, Chandigarh. She got diet chart for diabetes from the hospital but she is illiterate. On taking a detailed history of her ailment she was confused as she did not know the food products she has to avoid and the food she can eat freely. Our dietician Swati Ma'am counseled her about diet and educated her on foods which are sweet, like sugar, jaggery, banana, grapes, dates, Chiko and vegetables like potato, deep fried jackfruit, Stuffed capsicum, stuffed lady finger, deep-fried food products she must avoid. Foods such as seasonal fruits and vegetables, porridge, legumes, missa atta (whole wheat flour, soya flour, and gram flour) she can consume freely. Apart from that, we told her to take small frequent meals and do some walk. Now she is following the same diet, which we advised her. Apart from that, we told her in case of any health problem she will go to the hospital instead of consulting local quack, which will be risky for her. By God's grace, her health has improved and she is following HP's instruction sincerely.

NUTRITION IMPROVEMENT PRIORITY PROGRAMME

Age of children in NIPP	
0-12 month	0
13-24 month	10
25-36 month	15
37-48 month	13
49-60 month	16
Above 5 Years Needy	04
Needy/ Lactating Mother	02
Pregnant ladies	02

NIPP stands for Nutritional Improvement Priority Programme to improve the health status of those children who are in high priority red zone category. Every week our nutritionists make the nutritional menu and monitor the program. These children are fed in DIR under the direct supervision.

I have a pregnant lady named Anju 22 years of age who lives in 2078/D. Her husband Bhola works in a sweet shop. Her daughter is 17 months old and within one year she conceived a second child. During her 1st anti-natal checkup, it was confirmed that she has a thyroid. Earlier she used to take thyroid medicine with tea. She was under the care of Sushma Bisht for 6 months. She was still breastfeeding her child in spite of pregnancy as she was not sure of her conception. This family moved into a new accommodation which was in HP Dimple's area so the responsibility went into the hands of Dimple.

RED ZONE CHILDREN

STATISTICS OF TOTAL RED ZONE KIDS IN OUR PROJECT AREA		
Age in Months	Number of Children	Percentage
0-12	42	2.62%
13-24	18	1.12%
25-36	49	3.06%
37-48	40	2.49%
49-60	42	2.62%
TOTAL	191	

MOTHER's HEALTH

In the beginning of the month of February, we had 112 pregnant ladies in our project area. Out of the total of 112, 24 pregnant women gave birth to 13 male and 11 female babies. The place of delivery of 18 babies was in GMSH, Sector 16, Chandigarh, 5 babies were delivered in Sector 22 hospital and 1 baby was delivered in P.G.I. All babies were born healthy. To our good luck, all babies weighed more than 2 kgs. All pregnant mothers had regular Anti-Natal and Post-Natal checkup before and after delivery.

The statistics of pregnant women in the month of February is, 27 new cases of pregnancy, out of which 24 are residents of Janta colony and 3 are new arrivals in the project area. In addition, four pregnant mothers left on vacation to their village and three left the project area permanently to a new location.

The hard work of Health Promoter's in field work is showing as there is no case of miscarriage or abortion, stillbirth, infant death or death of any women during or after delivery.

Out of 112 pregnant ladies, 61 ladies had normal haemoglobin Levels, 30 had mild anaemia, 19 had moderate and 2 had severe anaemia. We included these two women with severe anaemia in our

NIPP Programme of DIR-India and also gave supplements provided by Vitamin-A Angel in the form of Multivitamin and iron-folic acid.

From the total of 112 ladies. 8 ladies are in the first trimester, 52 are in the second trimester and rest 52 in the third trimester. All of them are receiving special care from DIR-India.

Dr. Asha Katoch is giving us lessons on pregnancy, Reproductive system along with general education and awareness on special care of pregnant women. Our relationship with all pregnant mothers is intimate All the ladies have no inhibition in sharing their personal issues on health.

Pregnant Mothers Last Month	**No of Delivery**	**Births**		**Mothers who Moved**		**Still Born**	**Miss-carriage**	**Abor t-ion**	**Newly-Pregnant**		**Total Pregnant This Month**
		M	F	Temporarily	Permanently				Arrived	Conceived	
112	24	13	11	4	3	0	0	0	3	24	112

SAD STORY

SENIOR HEALTH PROMOTER

I had a 26 years old pregnant lady named Rekha w/o Partap Singh in my area. She has been living in my service area since 2016. Her husband works as a security guard in PGIMER Chandigarh. They have a 6.5 years old son and the mother had a normal delivery in her village's primary hospital. She has a problem of Hypomenorrhea and Menorrhagia. She has an unpleasant obstetric history, one abortion, MTP and third in eight-month pregna

ncy lost the fetus due to fall in the bathroom. When her baby was 7 months old she conceived for second time and fetus in the womb was three months old. She terminated her pregnancy by taking a pill. The third miscarriage happened due to slipping on the floor as she was 8 months pregnant in 2014. After the accident, she felt pain and had a problem of emesis. When she had her ultrasound in PGIMER, lamentably it was confirmed that her fetal was dead. They aborted the foetus. When I visited her, she was pregnant and completed her 4 months of pregnancy and she had made the OPD card of PGIMER. After all the examination I gave her a diet plan and gave information about Anti-natal. On 24th January she visited PGIMER for an ultrasound and sadly the fetal had intrauterine growth restriction and congenital abnormality and asked her

to terminate the child. She didn't believe it at first and on 25th January she visited DIR to take consult from Dr. Asha Katoch along with her sister-in-law. During the investigation, Rekha told her that her husband is an alcoholic. Dr. Asha made her understand that due to a congenital abnormality, there could be less chance to survive of that fetal and asked her to visit the hospital to terminate the fetal. The medical team took some blood tests of her as they didn't want to take any risk because she already had a surgery before. On 22 February she was admitted in PGIMER and she was given a pill for bleeding. When she didn't bleed that next on 24 February the fetal came out normally after putting vaginal gel in the sheath. She is recovering but she's been advised not to conceive again. On 27 February I visited her house to give her diet plan and asked her to take proper treatment from the hospital. She is asked to visit the hospital to collect reports, hope she will recover soon with the proper care and treatment.

SUCCESSFUL STORY

Nidhu, who lives in HL-1 was expecting her first child. She was just 15 years old when she got married to Rakesh Kumar who 18 years Sushma Devi old was. Due to extreme poverty, her parents got her married at a tender age. Within two months of her marriage, she got pregnant. Her husband is a labourer, who works on daily wages. There are 13 members in the family and they all live in one rented room in Janta colony. The financial condition and standard of living is much below the affordable level. No one is educated in the family. Livelihood runs on daily wages. The family is ignorant about legislation and labour laws for child protection Act.

Urban expenditure is much more for any family to sustain. Sushma Devi in her regular routine checkups of pregnant mothers discovered Nidhu. Her health status was weak and malnourished. Nidhu was six months pregnant with no Antenatal checkups and not a single TT shots.

HP Sushma Devi started paying special attention to Nidhi by visiting her frequently. The HP informed the nutritionist Natasha about the grave situation. Natasha in her field visit personally attended to Nidhu to assess her health status and counselled her. On persuasion, she went for her Antenatal checkup and took regular TT shots on our immunization day at DIR-India office. Her body weight was low and Hemoglobin level showed severe anaemia. We introduced her to our NIPP program. Within one month, her health status improved and she gained weight. Her weight at the beginning was 38Kg and at full term, she weighed 45 Kg. With the help and guidance of HP's and senior staff, we are able to advise, guide and help all pregnant women in our area. On 30 January Nidhu delivered a baby girl weighing 3 Kg. It was a normal delivery in Hospital with Apgore score 5. Both mother and child are in good health.

SCHOOL WITH A DIFFERENCE

In this month our SWAD children learnt about the importance of fruits and vegetables in our body for growth and energy. Different type of nutrition present in various vegetables and fruits helps the body grow healthy and keeps the disease away. It is important for a child to take vegetables and fruits in their daily diet. As fruits and vegetables are power packed foods-they are full of valuable nutrients which have many benefits. We made salads in which we used banana, tomatoes, oranges, grapes, carrots and apples. Children, in general, avoid salads and this was the best way to motivate them to eat vegetables and fruits. All the children participated with great excitement.

They were given instructions before taking

vegetables and fruits.

Apart from this, the little children participated in onion painting, Tearing paper into small pieces was fun and exciting. The act of tearing encouraged them to use their little fingers and co-ordination skills.

TUITION CLASSES

In total, we have 13 children who require special attention in academics as they all are going to Public schools. Amongst these kids, 3 children are smart and motivated. They require minimum guidance as their pick up is fast. Three children are slow learners and they require constant monitoring. It is challenging for me but I feel satisfied with their progress even though it is slow. The balance seven children are average in studies.

We have a sad news to share. Aditya, 7 years of age, a tuition boy lost his father who was working in a hotel in Shimla as a helper. The accident occurred due to cylinder blast. Aditya resides with his mother and a younger brother who is 4 years old. His mother works as a domestic helper in Nayagaon. It's a tragic story the family is poor, with the death of his father, the mother is left alone to earn a livelihood. We pray for the soul of Aditya's father may rest in peace and support the family in a small way.

GUESTS REMARKS FROM BENEFICIARIES

My name is Shanti and I live in a house no 1377. I have been living in Janta Colony since 2011. I have one daughter who is 4 years 11 months old. Health Promoter Banita ma'am visits our house regularly. She teaches us on different issues related to health. She comes to weigh my daughter every month and guides me that the weight of child reflects the health status of the child according to her age. She guides me on a different type of food we must give to a child to maintain a healthy body. She conducts a meeting and teaches every one of us about a disease that prevail during different seasons and how to take preventive steps to avoid the disease. She has taught the benefits of ORS and how it is made.

I am extremely grateful to DIR-India for all this information. In addition, our regular BP checkup is done every month. We have been educated by DIR community meeting on health and nutritious food. I share this knowledge amongst all my relatives and friends. This kind of services has helped us to improve our eating habits and also take care of our health. We are very grateful to this organization who is providing door to door services and making sincere efforts in changing the minds of masses towards growth and well-being.

DETAILED INFORMATION OF PROJECT AREA(Mr. Sanjeev)

Total number of Population	17,990
Male	**Female**
9,398	8,592
Total no. of People Attended Meeting	630
***No. of Committee Meeting (4 in each HP's area)**	
Total No. of Children	1601

Red Zone	Yellow Zone	Green Zone
191	442	916

Death Details

HP Name	Age	Gender	Cause
Meena	80 Years	Female	Cancer
Banita	58 Years	Male	Chronic fever
Vandana	50 Years	Male	Heart attack
Lata	62 Years	Male	Diabetes Mellitis
Lata	80 Years	Male	Natural Death
Lata	38 Days Infant	Female	Premature and respiratory infection
Sunita	68 Years	Male	Heart Attack
Sushma Bisht	95 Years	Female	Natural death
Sushma bisht	85 Years	Female	T.B with liver infection

Number of Pregnant mothers	112
Total No. Of Deliveries	24

Male	Female	Total no. of Births
13	11	24

Visitors

In the 1St Week of February, Mr. Pritpal Shergill has been helping DIR India in critical situations. He brought his friend Dr. Libni Eapin Oncologist, who

lives in Ottava to show the health program of DIR India. The Health Promoters impressed him with their skills of fieldwork and the Medical knowledge they have. He complimented them all.

Marat Yu, former volunteer of DIR visited basis for two days. Marat leads BSR's HER project programs in India, Bangladesh, Myanmar, and Pakistan, working with companies, civil society, and academics to empower women workers in global supply chains. He also oversees HER respect, the gender-based violence pillar of HER project. It was a great pleasure to meet him after many years. He is currently working for BSR (Business for Social Responsibilities). During his visit, he shared his work experience, outcomes, the condition of women in Bangladesh where he is working currently. Main aim is to raise the health standard of women and introduce them to their rights in society. Later he discussed the strength and weakness of DIR. In basti because of DIR the knowledge on health issues have grown up, nutritional standards have become better but according to

him it is necessary to make DIR self-independent, the standard of teaching should be improved and make income generation program more recognized among basti people. He further stated that the trust of people towards DIR has become stronger and to maintain the standard DIR needs to make good relation with Public and media. To be self-independent, DIR has to maintain one single vision statement and Upgrade the benchmarks, identify the material in which they need to promote their work. Marat Yu has assured us to help DIR-India in fundraising in India so that it becomes financially independent.

On 26th February, Brigadier Narendra Singh, an orthodontist, Deputy commander in dental Centre, Western Command, Chandimandir visited DIR Basti office to give mental relaxation and meditation classes. It was an honour to have him amongst us . He was good at meditation. 40 people including staff attended the class in which he gave tips to stay calm and patient during harsh conditions. In the one hour session, he discussed about the difference between inner and outer happiness, how to keep your mind calm in the hectic lifestyle and stay positive. Further, he asked the health promoters about DIR program and he was amazed and pleased to know the hardships of DIR staff and challenging program which DIR has been running for so many years. He made a promise to issue books on meditation both in English and Hindi for DIR library every month. He has registered our organization which will send us books every month to give mental peace and solace and face life with internal bliss.

TOPPERS OF DIR-India

NUTRITION TOPPERS: - Meenakshi and Meena achieved the first position in Nutrition Test by scoring 49.5, Payal and Lata got 49 marks and secured their second position.

Meenakshi

Meena

Payal

Lata

MEDICAL TOPPERS:-Meenakshi, Banita, Sangeeta, Meena, Lata, Maya, Sushma Bisht and Sunita grabbed the first position by scoring 50 out of 50 marks. This is true that empowered women empower women.

DEPARTURE

In this month Ms. Priyanka, who worked as an Assistant Accountant left DIR-INDIA on 28th February. She had served this organization for three months with dedication and hard-work. She helped DIR-INDIA to file the online form for prior permission. We are grateful to her and wish her good luck for her future.

NEW FACES

This month three people have joined our organization.
Jaya Sharma has joined as secretary
Swati has joined as a nutritionist.

We wish them a meaningful and purposeful stay in DIR-I to help in performing their respective duties faithfully.

CONTACT INFORMATION

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OUR TEAM

A TEAM WHICH MAKES POSSIBLE FROM IMPOSSIBLE.