

# DEVELOPING INDIGENOUS RESOURCES-INDIA

## Summary of Activities

For

MARCH 2016

### THOUGHT FOR THE MONTH

"The test of our progress is not whether we add more to the abundance of those who have much; it is whether we provide enough for those who have too little."  
(Franklin Delano Roosevelt. Second inaugural address.1937)

### Table of Contents

1.	<b>CHIEF EXECUTIVE OFFICER'S REPORT.....</b>	<b>Page 2</b>
2.	<b>DIRECTOR'S REPORT.....</b>	<b>3</b>
3.	<b>MY STORY .....</b>	<b>4</b>
4.	<b>NUTRITION.....</b>	<b>5</b>
5.	<b>NUTRITION IMPROVEMENT PRIORITY PROJECT.....</b>	<b>5</b>
6.	<b>MOTHER'S HEALTH REPORT.....</b>	<b>6</b>
7.	<b>IMMUNIZATION.....</b>	<b>6</b>
8.	<b>INCOME GENERATION REPORT.....</b>	<b>7</b>
9.	<b>CHILD ACTIVIST PROGRAMME.....</b>	<b>8</b>
10.	<b>D.O.T.S REPORT.....</b>	<b>8</b>
11.	<b>SCHOOL WITH A DIFFERENCE.....</b>	<b>9</b>
12.	<b>EVENTS.....</b>	<b>9</b>
13.	<b>VISITORS.....</b>	<b>9</b>
	<b>END NOTES.....</b>	<b>10</b>



THE STAFF, AT DIR'S CENTRE, STARTS EVERY WORKDAY WITH A 30-MINUTE YOGA SESSION.

## 1. CEO'S REPORT

W. Frederick Shaw DrPH MPH

My flight back to India from California was distinctly different for two reasons. The first was that I enjoyed the cheapest air fare in twenty years, costing me half as much as my last December fare. Why the fare should have dropped, to me, is a mystery, but if contemplating an India trip, I would urge you not to question it. Come to see us ASAP!<sup>1</sup> The second thing different about my trip was that I left the US on 29 February, and arrived in Delhi on 2nd March. This does not bear thinking about; it is one of those freak inexplicable things involving the International Date Line . . . . . It is a pleasure to be back, and it was a pleasure to return to a programme which had been very ably managed by Dr. Asha Katoch in my absence.

March is a month of many festivals in this part of India, culminating this year in Easter and Holi almost overlapping. All that is behind us, and we are buckling-up for a busy month of catching up on lost holiday time. In addition to enjoying this holiday month, we also enjoyed the visits of "foreigners". We were happy to see Bradley Randles again. He attended medical school concurrent with my daughter, and very kindly donated four full days of knowledge and skills to help enrich our activities. The visit of a group of Scotsmen was arranged at the last moment. These athletes were in town with the Scottish Cricket Team which was competing in a world tournament, and were able to see a slice of Indian life seldom visible to the foreign tourist.

For me the most impressive event of the month occurred when Dr. Asha and I went to visit a six-year-old child who was dangerously ill. Our Senior Health Promoter<sup>r</sup> Meenakshi, who had seen the child several times in the past few days, was seriously worried because a "magic man" was exercising a harmful influence in persuading the family not to seek medical care, and not to feed the child, etc., The child was in obviously very bad medical condition when Dr. Asha examined him, but the family were as though under the spell of their "magic man" and resisted our efforts to have the boy taken to hospital immediately. After prolonged discussion during which our Dr. Asha gave an outstanding

<sup>1</sup> (J. Aurthur Proofrock might remark "Oh do not ask Why is it? Let us go and make our visit.")

performance of exhibiting patience and respect for the folk opinions of the child's relatives, and eventually being successful in having the child's mother agree to our taking the child to the nearest pediatric emergency room. In her report below, Dr. Asha gives compliments to the emergency room in PGI (The Post-Graduate Institute of Medical Education and Research) for their prompt, and literally **life-saving**, action. And yes, she should give them credit, but it was Dr. Asha who got the child to the hospital, and if this had not been done in a matter of hours, this story could have had a very different end. DIR is blessed with one of the better staffs I have ever worked alongside. They work tirelessly with enthusiasm and patience, dedication, understanding and sensitivity and are a credit to their chief trainer and role model, Dr. Asha. DIR is fortunate to have such an outstanding individual head our medical team.



IN SIDE THE DIR CENTRE (STRANGELY INFLUENCED BY UC BERKELEY COLOURS) THE LOWER LEVEL HOUSES OUR PRE-PRIMARY SCHOOL, AND THE UPPER LEVEL HAS OUR DEMONSTRATION KITCHEN, TRAINING ROOMS, AND PLANNING ROOMS.

## 2. DIRECTOR'S REPORT

**Dr. Asha Katoch** Director

March is a month of excitement and activities in India, with the announcement of new national budget the entire country is engrossed in reading the newspaper or listening to the critics.

DIR - I team was happy with the return of CEO Dr. Frederick Shaw and Roberta. Their presence enlightened the environments.

The school was busy with the annual exams followed by report cards and finally preparing for new admission.

We had a Scottish cricket team along with their coach accompanied by Dr. Frederick visiting the DIR-I Basti office on a weekend. Few HP's attended to them and briefed them about our organization. The Cricket team was impressed and donated Rs 25,000 for the organization. Later Bradley Randles, an American physician spent four days visiting DIR in Chandigarh. Each day attending and visiting the entire slum area to observe and study the medical issues the community was facing. His observation and suggestion are extremely valuable

to the entire team of DIR-I running the medical programme. He gave a class on his last day in which he suggested some ways we can further improve our medical activities.

As a medical professional we are satisfied with our HP's academic and field performance. The graph of red zone children is dropping and parents of high risk kids are personally counseled by Nutritionist and Physician.

31st March 2016 was a day of great challenge in the history of DIR-I. A recently moved family from a village was living in our Baste. The child was unwell since 21st March 2016. History of fever with rash all over body. As per the belief of the family the female goddess has prevailed on a child, so no bathing, no cooking of food except for boiled rice and potatoes to be eaten by entire family. Nothing to be fed to a child as goddess will get angry. Child is only fed with food which he demands. The black magic man visits the family every evening reinforcing the faith of keeping away from doctors and hospital medicine. On the morning of 31st March during the academic class the SHP Meenakshi in charge of that area narrated this incident in frustration. Dr Frederick and me visited the family to see the child. The child was in delirium. Pulse rate was more than 160/mt, Respiratory rate was 35 to 40 per minute with high temperature. Our constant effort of counseling for two hours motivated the family. We personally evacuated the child to PGI Referral and Research Institute and Hospital Chandigarh. The child was immediately put on Oxygen, and all monitors were connected and corrective measures were taken. Our compliments to the entire team of emergency doctors and paramedical staff to save the child from death door. The child is recovering and is stable. This incident has caused beneficial changes in the attitude of simple people in this community who tend to believe in "goddesses" and "godmen" when families are faced with serious illnesses. Our timely intervention has resulted in increased faith and confidence in DIR, and new respect for our HP's advice and suggestions. The black magic man disappeared from the site as the community went against him. This is India, lots more need to be done.

### 3. MY STORY

#### MS. SUSHMA BISHT HEALTH PROMOTER<sup>ii</sup>



Hello Everyone !

My name is Sushma Bisht. I am 34 years old. I am a married woman. I was born in the state of Uttaranchal where I had my primary schooling. Then I came to Chandigarh with my family. I have done my secondary studies from Govt. Model. Senior. Secondary School, Sector 10. After few months, I got married to Mr. Gautam Bisht. My husband does Private Job. I have two children. My elder daughter Priyanka is studying in Class 8 at St. Stephens. She is 13 years old. Younger son is Amit who is studying in 6<sup>th</sup> class at Himalayan Public School.

I have been working in DIR since 2007 as a Health Promoter. I was very excited when I joined here. The salary was not enough but I like the environment and the staff. I have learnt so many things from Medical & Nutrition classes and from the field visits that I do. I had lot of experiences from my work. In addition to this, I also look after the Nutritional Improvement Priority Project (NIPP) and Meal Planning programme. I am feeling very happy to be a part of DIR. I

feel very satisfied when I help the people. I am very emotional person, so I fully involved myself in happiness and sad times of bustee people. All above I am fully dedicated to my work whatever it is, from my house or from DIR.

## 4. NUTRITION

MRS. NATASHA SHARMA  
NUTRITIONIST

In my last month's report I mentioned that we had identified a malnourished boy in our H.P Sangeeta's area. He is Saksham , who is 28 months old and is of 8 kg weight. He is 4kg less than his ideal weight. This family belongs to Uttrakhand. His mother is staying along with her in-laws and his father is working out of our city and visits them monthly and sometimes after two or three months. His Mother is illiterate and ignorant and hardly bothers about her child's health. So, we personally look after that child. This month there is half kg gain in his weight and we told mother to give him home made food instead of giving wafers, chocolates and sweets. We told mother that she can try to make food little attractive so that child loves to eat just like instead of making plain rice better add seasonal vegetables in it, instead of giving plain curd every day better to add grated cucumber, boiled potato, chopped tomatoes etc., and better to spend some time when child is eating.



Page  
5

This month, Health Promoters were taught functions and deficiencies of Vitamin D, and Benefits of breast feeding to child and advantages of weaning food for growing child. At the end of this month an exam was given to test the nutrition knowledge of HPs. Banita scored highest marks but everyone scored more than 90%.

## 5. NUTRITIONAL IMPROVEMENT PRIORITY PROJECT (NIPP)

MS. SARITA  
HEALTH PROMOTER

### Age of children in the NIPP

0-12 month	0%
13-24 month	3%
25-36 month	33%
37-48 month	31%
49-60 month	33%

We are happy to say that this month we have six kids in yellow zone.<sup>iii</sup> One child changed his category from Red to Yellow in HP Sushma Kumari's area. This month 34% kids gain weight. On the other hand, unfortunately, 3 kids lost weight as the weather is changing. Most of the three children are suffering from cold, cough and fever.

Our nutritionist Natasha is working on a child "Saksham" who is still in a same condition. She counsels his parents. And now he is coming for food in NIPP programme. I hope he will gain weight in next month.

Presently, we are feeding 15 kids under NIPP. All these families are financially weak. We give them 1 cup of milk, a boiled egg and seasonal fruit. We have Dr. Asha with us who is helping us a lot in medical checkups of patients. We are very thankful to her.

Meal Plan Kids	42%
Dewormed this month	94%

Children who gained weight	34%
Children whose weight remained constant	50%
Children who lost weight	8%
Children temporarily absent	8%

## 6. MOTHER'S HEALTH REPORT

**MS. SANGEETA**  
**HEALTH PROMOTER**

In the month of March 2016, we had 14 babies delivered; 7 boys and 7 girls were born. All deliveries took place in hospitals. All women who gave birth had two or more antenatal checkups and appropriate postpartum examinations within two days of delivery.

One of the ladies from HP Sushma's area who was in her first trimester, felt some bleeding and pain. When she went to the doctor for checkup she was provided with medicine. When she returned home, she suffered from more severe bleeding which resulted in miscarriage. Now she is recovering.

We are planning to arrange pregnancy classes again for the pregnant women along with their mother in laws under the supervision of Dr. Asha Katoch. So that we can provide more education and awareness for their health.

STATISTICAL SUMMARY:						
No. of pregnant women on the 1st March	Women arrived	Conceived this month	No. of deliveries this month	Temporarily left this area	Permanently left this area	Pregnant at the end of the month
80	30	7	14	5	3	99

## 7. IMMUNIZATION REPORT

**MRS. VEENA**  
**SENIOR HEALTH PROMOTER**

SHOTS	1 <sup>ST</sup> Dose	2 <sup>nd</sup> Dose	3 <sup>rd</sup> Dose
BCG	-	-	-
DPT Booster	21	-	-
DPT 5 yrs.	13	-	-
Measles	20	21	-
Hepatitis B	-	-	-
Pentavalent	13	14	18
TT 1yr.	19	-	-
TT 10 yrs.	11	-	-
TT2 +Booster	19	16	-
Total	116	51	18

This month we had 4 immunization Wednesday mornings in which Health Department representatives gave immunization "shots". Everything is going well. Pregnant women and children come monthly for their antenatal checkups. We are providing iron tablets and folic acid supplements and take weight and blood pressure also. This month DIR is giving Vitamin-A doses and Albendazole tablets to bustee children for good health. On immunization day, Dr. Asha checks all pregnant women and small children. She always gives good advice and prescribes medicines if appropriate.

## 8. INCOME GENERATION ACTIVITIES

MRS. MAYA  
SENIOR HEALTH PROMOTER

We would be very grateful to our readers if they will buy our products that are available on sale. We have been so successful in teaching (earlier) unemployed women to make products from discarded fabric scraps, that we now have a large store of products for sale. If you wish to help by buying our products, and you don't know an outlet, please contact [dirshaw@gmail.com](mailto:dirshaw@gmail.com) Your support will allow our women to get to work to support their families.

Page  
7



### STITCHING CENTRE REPORT

This month women are very happy because they got some order of the products from Dr. Shaw. We had an exhibition at Sukhna Lake on 15 March 2016. The Consulate General of Canada, Chandigarh organized a photo exhibit of Girls' Voices: Speaking out against Child Marriage. We sold some products there. It was attended by, Administrator Mr. Bikram, SHP Ms. Maya and Administrative Assistant Ms. Priyanka. Dr. Shaw, Mrs. Shaw and Dr. Asha accompanied them.

This month we have 14 women who are learning to sew. This increase in students is caused by the fact that so many young women have completed 10th and 12th standards, and will not know results for 2-3 months All are keen to learn, and so are studying tailoring in the meantime.

## 9. CHILD ACTIVIST PROGRAMME REPORT

**MRS. BANITA  
HEALTH PROMOTER**

This CAP (Child Activist Programme) was started in April 2009.

Timing: 03:30-04:30 pm

The motive of this programme is:

- 1) Educate the children and their families.
- 2) Develop socially.
- 3) Increase sportsmanship. Learn about team effort, practice team participation, develop an appreciation of team effort results.
- 4) Create leaders for sports and community outreach.

In month of March 2016, Our CAP programme was interrupted, as it always is at this time of the year, by students' intense study period prior to annual academic exams. The exams will be over by the end of this month, and CAP programmes will resume.

## 10. D.O.T.S

**MRS. MEENAKSHI  
SENIOR HEALTH PROMOTER**

Last month we had 16 tuberculosis patients. Two of them are considered cured completely. This month we got one new patient. At present we have 15 tuberculosis patients. Out of which, Category I comprises of 11 patients (7 Pulmonary & 4 Extra pulmonary) and Category II has 4 patients of pulmonary tuberculosis. One patient of Category II Raj Bahadur, Age 62 years from HP Sushma's area come regularly for medicines. He followed my suggestions properly. He has eaten healthy food and avoided smoking and alcohol. Now he is very happy as he cured this disease. He is very thankful to DIR for helping him out from tuberculosis. DIR is working very hard generating tuberculosis awareness.



DIR-I's DOTS Centre: Photograph by Haiou Liu

## 11. SWAD (The SCHOOL WITH A DIFFERENCE)

MRS. MANJIT KAUR  
SCHOOL TEACHER



It was the month of final exams of children. We announced their result on 25 March 2016.

Page  
9

Khushi and Lavish won First Place in Play Class.  
Namish Was First in our Pre Nursery Class.  
Divyansh and Om were First in Nursery Class and Maarsha topped in Kindergarten. All of our pupils scored good marks. Enrollment for the new academic year is going on currently.

## 12. EVENTS

Sanjeev, Field Co-ordinator

March 5, 2016:

We are very happy to say that we are in the first stages of planning, in conjunction with Infosys, to start a new project in slums of Manimajra. This community is located a few miles from our project site. Next month we hope to have some positive progress to report.

## 13. VISITORS

Sanjeev, Field Co-ordinator

5 March, 2016:

Normally we don't work on Saturday and Sunday, but Dr. Shaw had some visitors from Scotland's visiting Cricket Team on 5<sup>th</sup> March. He brought them from his home to our project site and then phoned a group of us to come to work, meet his guests and show them the homes we visit and the work we do. We were very excited to see them, and collected some autographs. They came to see our programme and also went on home visits with our Health Promoters. They said complimentary things about our work, said they felt so good to see reality of life in our community, and to see our neighbours and how they live their lives. They very generously gave us a donation of Rs.24,000.





### 8 March 2016:

Dr. Bradley Randles visited DIR. He spent four busy days with us. In these days, he went to the field with HPs. He examined patients suffering from a range of diseases. And he advised residents on how to deal with health problems. He shared his suggestions and experiences with these people. He also gave a few medical education classes to our staff members and suggested how can we improve our activities, especially those which address child malnutrition.

## ENDNOTES

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<sup>i</sup> The jobtitle, "Health Promoter", is given to a special, full-time employee of DIR. To be hired, s/he must be a resident of our project area. There are no educational requirements but s/he must be literate in Hindi, and be able to prove (by passing monthly exams) that s/he is learning adequately in our daily (Medical and Nutrition) classes. Each HP is assigned to a "Unit" which is a group of 230 contiguous households. The HP visits each family in his/her Unit monthly, where appropriate checking and monitoring blood pressure, checking and monitoring the weight of each child under the age of 60 months, examining for hygienic conditions and procedures, advising and counseling as necessary, and promoting living a healthy life however possible. A minimum of 80% of all DIR employees must be women. Through demonstrating that s/he is learning well in our academic classes, for exhibiting skill in educating the public, and showing leadership potential, a Health Promoter may be promoted to become a Senior Health Promoter.

<sup>ii</sup> See Endnote Number I, above

<sup>iii</sup> For ease of classifying children's nutritional status, we have accepted the common World Health Organization use of weight "Zones". These are weight areas plotted on a graph showing weight for age. Children in the "Green zone" are said to be of appropriate weight. Children in the "Yellow zone" are said to be Underweight, and those in the "Red zone" are judged to be "seriously underweight."