

DEVELOPING INDIGENOUS RESOURCES – INDIA

Summary of Activities

For

September 2017

THOUGHT FOR THE MONTH

Don't be pushed around by the fears in your mind. Be led by the dreams in your heart.

- (Roy T. Bennett)

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1. ACTING DIRECTOR'S MESSAGE

Mrs. Natasha
NUTRITIONIST

September's weather surprised us by giving us many unseasonably hot days, but towards the end of the month the long-awaited coolness in night was upon us. Now air conditioners didn't run whole night. Soon, we will be delving deep into cupboards to find long-unnecessary blankets, and then be praying for a little heat. This year September is filled with all major cultural and social festivals like **Durga puja and Dusshera**. **Durga Puja** is one of the religious festivals of India which is celebrated throughout the country with great zeal and fervor. Durga Puja festival marks the battle of goddess **Durga** with the shape-shifting, deceptive and powerful buffalo demon **Mahishasura**, and her emerging victorious. Thus, the festival epitomizes the victory of Good over Evil, but it also is in part a harvest festival that marks the goddess as the motherly power behind all of life and creation. The tenth day of Navratri celebrations is known as **Vijayadashami or Dusshera**. In the northern and southern states, the festival signifies the victory of Lord Ram over Ravana, who had abducted Sita. We celebrated Dusshera on 29th September with SWAD Kids and DIR Staff. Effigy of demon king Ravana decorated with bright colored papers and glitters by school teachers. Mr. Vasudev Passi, Municipal Counselor of Naya Gaon invited as chief guest for the occasion. He lit the effigy of Ravana and distributed sweets to all children and staff. We got press coverage in local Hindi newspaper "Dainik Bhaskar".

Academics are equally important to the HP's. They all performed well both in Medical and Nutrition exams. It is heartening to see the zeal and motivation with which every member of DIR works. DIR-I is always a happening place.



Celebrating Dusshera in DIR

2. IMMUNIZATION PROGRAMME

Mrs. Veena

SENIOR HEALTH PROMOTER



This month we had four Immunization camp days. Everything is going well. On one Immunization day there was shortage of medicines, so many children had to go back home without injections. But on next immunization camp when they came, all got their pending injections.

All children and pregnant women are coming every month for anti-natal check-ups. Women who work at the government's local health care give shots and update immunization records.

We are providing iron and folic acid tablets and calcium supplements to pregnant women. Pregnant women also have TT Shots & had weight and blood pressure checked.

As usual Auxiliary Nurses, Midwives, Asha Workers and Health Promoters work together to make this camp successful.

We give nutritious food to children and pregnant women who come for Immunization.

THE FOLLOWING INOCULATIONS WERE GIVEN DURING SEPTEMBER 2017

SHOTS	1 ST Dose	2 nd Dose	3 rd Dose
DPT 5 yrs.	11	-	-
DPT-B	16	-	-
Measles	26	16	-
Pentavalent + IPV	13+13=26	18	21+21=42
TT 1 Injection.	15	-	-
TT 2 Injection.	15	-	-
TT 10 yrs.	07	-	-
TT 16 yrs.	02	-	-
TOTAL	118	34	42

3. INCOME GENERATING ACTIVITY

Mrs. Maya

SENIOR HEALTH PROMOTER

STITCHING PROGRAMME

In this month again there is no work from our side to the ladies, and we are sad about it that we are not able to give them work at this point of time. But the best part is there are getting many things to do from outside.

This month we planned to sell pencil pouches only as we have got some order for that. But we do not have enough material to make it.

TAILORING

There are 18 ladies attending Tailoring Classes this month. They are learning salwar suit, frocks, blouses, etc. in stitching classes. It is good to see that some of them are doing very good job.

4. MY STORY

Capt. Bikram Singh ADMINISTRATOR

My name is Capt. Bikram Singh. I belongs to Vajdoh village, District Hamirpur, Himachal Pradesh. My DOB is 14 April 1967. My parents are landlord in Himachal and my father was also in Army. I have studied till Matriculation from my village school. When I was in 10+1st my elder brother Capt. Ajmer Singh joined Indian Army. My school was very far from my home, so I started my training to join Indian Army. Before my final examination of 10+1st I got selected in Indian Army on 27 Sept 1986, I was only 18 years old at that time. After one year of training there I joined Dogra Regiment. My 1st posting was in Siachen Glacier and that was my 1st step in my life when I started learning and dealing with the obstacles in my life. After that I got married and 1 year later I had my 1st child, my daughter and 3 years later my son was born. They both studied in Himachal Pradesh. After the 10 year service in India Army I got my 1st promotion. Later on completing 23 years in Indian Army I got the Rank of Junior Commissioner Officer. My father was ill at that time and he passes away in 2008. I was in Srinagar at that time and it took 2 days to reach me at my home and mean while all the funeral ceremony and cremation ceremony was already done.

Sorrows and happiness they all are the part of our life. During this time my daughter completed her B-Tech (Bachelor of Technology), and she appears in an exam of banking and cracked that and get recruited in a Bank. After one year she got married. My son is doing his M-Tech (Master of Technology). Serving 28 years of my life in Indian Army I was promoted to the Rank of Captain on 15 August 2014 and after 3 months of that I took my retirement from Indian Army.

On 14 February 2016 I get recruited by Welfare Association in DIR. Dr. Asha Katoch and Brigadier Katoch did my selection for DIR. From that time till now I am serving in DIR.

Dr. Shaw is doing such a great job for the poor and needy people by many different ways like he is running stitching and parlor project so that the ladies can generate income sources for themselves. He is running school for needy people so that their children can get education and our health project in bustee which is also helping bustee people in many ways. He is not from India, but still he think a lot for us. He lit up the life of bustee people. I am very grateful to him that he gave me the chance to work in his organization.



5. CAP: CHILD ACTIVIST PROGRAMME

Mrs. Banita

SENIOR HEALTH PROMOTER

This activity, which is provided for children aged 7 through 13 years, meets between 3:30pm and 4:30pm daily. The goals of the CAP Programme are: -

- (1) To educate children and their families.
- (2) To help children develop socially.
- (3) To promote sportsmanship.
- (4) To Increase team spirit.
- (5) To create leaders for sports and community outreach.

In this month September in the Child Activist Programme we educated children about Chikungunya and ORS. This month many people of bustee were suffering from fever, so we educated children about the preventions and precautions to be taken from mosquitoes borne diseases and homemade ORS.

Games

This month the children learned how to throw and catch a Frizz bee, and also (1) what the common disease CHIKUNGUN is and (2) how it may be prevented. They also taught how to give a clear, simple, yet comprehensive description of how to make ORS, and how to administer it. The possession of this knowledge by every family cannot be exaggerated in our slum where dehydration can kill in a matter of hours, and where gastro-enteric with violent vomiting and diarrhea is so common.

Our health Promoters made games in which Frizz bee skills and disease knowledge were both improved in a happy “good fun” environment.



Kids playing Frizz bee



CAP kid giving Demo on ORS

6. NUTRITION TRAINING

Mrs. NATASHA

NUTRITIONIST

National Nutrition Week is celebrated from September 1 to 7 every year. Nutrition is the focal point of health and well-being. In other words, it allows you to be strong, provides you with the energy to do the things you want to do, and makes you look and feel your best. Today, there is a wealth of nutrition information at our fingertips — from diet books to newspaper articles; everyone seems to have an opinion about what we should be eating.

This month a case came to my attention from our HP Banita's area. Tanveer, male child, 20 months old suffering from iron and calcium deficiency. Parents of this child belongs to Uttar Pradesh and are living in rented room under very pitiful condition. This child has two elder siblings, 5 year old brother and 3.5 year old sister. His father is working as a sweeper in a private firm and mother is house maker. Though the child is 20 month old but he did not start crawl and even not sit properly. Moreover he looked pale and inactive. We told family to show him in Government hospital.

Parents went to hospital and showed him in pediatric OPD. Doctors told them child is suffering from nutritional deficiencies includes protein, iron calcium deficiencies etc. and told them for improving his diet. Though the family is poor and can't afford protein rich diet so allowed this to our DIR center and provide him with supplemental food. Now, daily he is getting milk, egg, porridge and fruit, and daily we are monitoring their vitals.

Though festival season starts from this month and prices of marketed sweets are very high and more over they are not prepared hygienically so we gave nutritional demonstration to keep this in mind. Nutritional demonstration of Rasgullas (sweet balls made with paneer) was given to our Health Promoters. This snack is made of locally available, cheap ingredients, which bustee people can afford easily. Milk, curd, peanut powder, sugar and are good sources of calories, protein, vitamin A and calcium and hence good for the overall development of people.



Tanveer with his Mother



Giving Rasgulla Demo

7. NIPP -Nutrition Improvement Priority Programme

Ms. Sarita

HEALTH PROMOTER

Age of children in the NIPP	
0-12 month	0 (0%)
13-24 month	2 (5%)
25-36 month	6 (17%)
37-48 month	16(44%)
49-60 month	12(34%)

In this programme we select three most severely malnourished kids from each health promoter's area respectively. When one child gain his weight (comes in Green Zone) then another severely malnourished child take his/her place. In this programme those children who cannot afford proper meal at their homes, we call them to DIR and provide them egg, milk and other nutritious food along with seasonal fruits. This month 23% kids gained their weight and 19% kids loss their weight because of fever (dengue, typhoid) cold and cough. This month mostly kids were down with fever and for that all the Health Promoters were counselled the parents regarding hygiene and preventions and precautions taken in dengue and typhoid fever. All the health promoters trying their level best to improve the health of children. I hope next month those who have lost their weight will gain their weight again.

Children who gained Weight	08	23%
Children whose weight remained constant	21	58%
Children who lost weight	07	19%
G.T.V (Gone To Village)	00	00.0%

8. MOTHER'S HEALTH

Ms. Sangeeta

HEALTH PROMOTER

In the beginning of the month we had 119 pregnant women in our project area from which 20 pregnant women delivered their babies this month. 12 are male and 8 are female child. 17 women had normal delivery and 3 women had caesarian delivery. One of them had a pre-mature delivery. All the 20 deliveries took place in hospital. All the women had 2 or more than 2 appropriate anti-natal check-ups and post-natal examination before and within two days of delivery. All 19 new born had 2.5kg and more than 2.5 kg weight at birth. All the 19 infants are having proper immunization and breast feeding. They all are healthy and live.

Unfortunately, one lady from our HP Dimple's area had a pre-mature delivery. She gave birth to male child and his weight is 1 kg. He had respiratory infection. Doctors kept him under observation but he died after 14 days of infection. That lady is getting all the medication and treatment from the hospital. We hope that she will recover from this trauma as soon as possible.

We found 5 new cases of new arrivals and 14 new cases of conceiving in our project area. 3 pregnant women left our project area permanently and 3 went to their native places.

This month luckily we had 2 visitation of gynecologist Dr. Ridhi from Sector-16 Hospital. She helped the pregnant women in giving guidance and counselling and also helps to sort out their issues.

Success Story of the Month: -

Shivani W/O Vikram, 19 Years, #154 from our HP Dimple’s Area. She is in her third trimester and she dropped the anti-natal check-up. She was not more concerned with her and her baby’s health. Our HP visited her place twice and thrice in every 15 days and counsel her properly regarding her health and her baby’s health. After so many visitations our HP was successful in convincing her and make up her mind to go to hospital for her check-up. In the 7th month of her pregnancy she had all the tests and examinations those which were prescribed by the doctor. Now she also had ultra-sound and took her medicines regularly on time. She is following all the things properly as her routine check-ups and having her proper diet.

We always try to give our proper attention and knowledge to the bustee women to take care of their health as well as

Pregnant Mothers this month	Delivery	(Births)	Total Birth	Mothers who Moved		Abortion	Miscarriage	Newly Pregnant		Total Pregnant This Month
	M	F		Temporarily	Permanently			Arrived	Conceived	
9	12	08	20	03	03	00	00	05	14	115

their fetus growth and development.

9. SCHOOL WITH A DIFFERENCE

Mrs. Manjeet Kaur

SWAD TEACHER

We had conducted sessional examination for SWAD kids then at the end of this month we held Parent Teacher Meeting (P.T.M) were we discussed about the children performance with their parents and told them to more efforts in their children study and activities.

This month we celebrated Dusshera festival with SWAD kids were teachers and kids together made the pictures of Ravna and effigy of Ravna. In addition we educate them about the importance of this day and win of Good over evil. Mr. Vasudev Passi lit the effigy of Ravna on this occasion. After that we distributed sweets and snacks among SWAD kids and staff. Everybody enjoyed a lot.



DIR staff celebrated Dusshera with SWAD kids.

10. GUEST REMARKS FROM A BENEFICIARY

My name is Renu. I am 30 years old and I live in #1587, Janta Colony, Naya Gaon. I am familiar with the DIR staff for so many years. As I do not know about ORS before, but they educate us about ORS and its importance in our day-to-day life. Through the committee meetings we learned about the different kinds of diseases, their symptoms and precautions. With the help of this now we are aware enough to not to go to any quack doctors. We directly go to the hospital instead of going to such local quacks. DIR staff check weight of the children regularly and through which we came to know about the variation in weight of our child. They also do counselling on balanced diet. We are very happy with their efforts which they put to make us aware and to increase our knowledge about our health. So that we can stay healthy and fit.

Thank You.



Renu with our Senior Health Promoter Banita

11. EVENTS

Captain Bikram

Administrator

VISITORS

7 Sept 2017: Mr. Rachit Bansal along with our President Mr. S.M. Sharma visited DIR.

13 Sept 2017: Dr. Jaspreet, Dentist visited DIR to see our project and also visited field with our Health Promoters.

28 Sept 2017: Ms. Mandeep Johal Visited DIR to see our project.

EVENTS

29 Sept 2017: We celebrated Dusshera festival with SWAD kids and DIR staff with great enthusiasm. Mr. Vasudev Passi, Municipal Councilor of Naya Gaon ward came to DIR as a chief Guest on this occasion. He lit the effigy of Ravna, which symbolize the win of Good over Evil. After that we distributed sweets among kids and staff. We missed Dr. Shaw a lot on this occasion.

12. ENDNOTES

HEALTH PROMOTER (HP)

This job title 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, and other) 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 (at least) monthly, where appropriate checking and monitoring blood pressure, checking and monitoring the weight of each child under the age of 60 months, promoting for hygienic conditions and procedures, advising and counseling as necessary, and promoting living a healthy life, however possible. 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.

GENDER BIAS

Because the traditional roles of women in developing countries exert heavier influence on family health than the roles of their male counterparts, it is strict policy that DIR staff will never have less than 80% of positions (in developing countries) staffed by women. Preference in Board positions is to have 50/50.

NUTRITION ZONES

For ease of classifying children's nutritional status, we have accepted the common concept World Health Organization has popularized of using weight "Zones". These are weight areas plotted on a graph showing weight for age. Children in the "Green Zone" are said to be appropriate weight. Children in the "Yellow Zone" are said to be Underweight, and those in the "Red Zone" are judged to be "Seriously Underweight".

NIPP

This is the name of one of our high priority programs. The initials stand for Nutrition Improvement Priority Project. Each of our 13 Health Promoters have identified the three most chronically malnourished children under the

age of 60 months in each of their Units. This group of children are normally the exclusive members of the NIPP, but the CEO may assign a limited number of emergency cases when such is seen to be essential.

UNIT

This is number of contiguous households being served by one Health Promoter. The typical number of homes in a Unit is 230, but this may be increased or decreased if the number of children or pregnant women abnormally influence the HP's workload.

PGI

These are the frequently used initials for the government's Post Graduate Institute of Medical Education and Research. This large Chandigarh medical complex serves the North – East quarter of India. In recent years it has started a rare addition in India – a School of Public Health. PGI borders on the slum called Janta Colony, where DIR has been active since 2005.

NGO: - Non-Government Organization.

Typically, but not excusably, an NGO is an organization which strives to improve the quality of life within a given community. For example, CARE is an NGO, as is HOPE, PLANNED PARENTHOOD, DIR, AARP, etc. Some, but not all, NGOs, are non-profit.

DONATIONS to DIR

DIR is a non-profit NGO which is funded entirely by voluntary donations. In the US and in India donations to DIR are made deductible, for income tax purposes, by both governments.

In India, donations in Rupees, may be addressed to: The Director, DIR-I, House 105, Sector 10, Chandigarh 160009.

Donations in other currencies, should be sent to: The CEO, DIR, 8321 Terrace Drive, El Cerrito, CA94530.