



Developing Indigenous Resources - India

AUGUST 2021



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CEO'S REPORT FOR AUGUST

Team DIR-India has been working non-stop throughout the challenging period of the COVID-19 pandemic. Working out the health program on the basis of our agenda point, we have in the previous months begun to ensure that we achieve our mission of improving the health of both the mother as well as the child for better living.

Dividing our medical team into three groups, we have ensured that each and every corner of our adopted communities is taken great care of. Each team is headed by a public health medical specialist along with two health promoters who work on their respective zones for assessment and monitoring.



This way each Health Promoter and senior staff gets to know the medical, socioeconomic status and the environmental issues of the entire Basti -- comprising of 14,780 people of Janta Colony and Safeda Colony.

We would like to thank **Dr. Shalini Sahai**, for visiting our DIR-India's office along with her son, Soham Sahai. The interaction was a great morale booster for our Health Promoters as Dr. Shalini accompanied them for a field visit around the area. As a pediatrician, she recommended that the children who were in the red zone category, that are to be crucially overseen, should be put on supplements syrups such as iron and calcium. This project, thereby, is on our agenda for September 2021. In the past, this practice of supplying such supplements had been tried in the year 2018-2019 as some visitors had donated the supplements to DIR-INDIA itself. However, despite helping improve the health of the children, due to the scarcity of funds we could not continue to implement this further.

DIR-India also plans on performing a research study on the 25 malnourished children of Janta Colony and Safeda Colony, who are in our feeding program under Project Nutrition Improvement Priority Programme (NIPP). These 25 children have been categorized in the red zone, as they weigh 3-4 kg lesser than the desired weight designated for their age; socioeconomically as well, these children are from the laborer community who earn their livelihood on a day-to-day basis with acute uncertainty. Thereby, the research aims to know the medical background of these children and understand the circumstances that have led to such consequences.



We would also like to express our gratitude towards MA Foundation, who financed groceries for 44 families through the month. Our Health Promoters undertook its distribution on the given dates: 9th August, 11th August and 26th August 2021.

Our special thanks to Dr. Arun Bansal, from Social Substance, for donating Air Purifiers, which enriches oxygen in the environment, for the welfare of the DIR Team.

MEDICAL TRAINING

Waterborne diseases have always been the main concern in public health, especially in developing countries such as India. Between 400,000 to 500,000 children aged less than five years die each year from diarrhea due to failure of improving personal and home hygiene. Poor water quality along with the lack of adequate disposal of human, animal, and household wastes are major contributing factors to waterborne diseases, states the [National Center for Biotechnology Information](#).



Keeping these factors in mind, medical classes were taken by Dr. Sakshi Sharma, a public health doctor at our organization, on the topics of typhoid, diarrhea and cholera (water-borne diseases) to make our health promoters aware of the ongoing troubles that the residents may face. Along with this, other foundational topics such as basic body parts and their functioning, dehydration and use of Oral Rehydration Solution (ORS) were also covered in these organized classes. In order to ensure that our health promoters retain such crucial information they undergo a monthly medical test conducted on the last Thursday at the centre.



NUTRITION TRAINING

The prevalence of Irritable Bowel Syndrome (IBS) in the Indian community according to studies in the [Journal of Datta Meghe Institute of Medical Sciences University](#), varies from 10 to 20 percent. Only 20 percent seek medical care which is just the tip of the iceberg. Early detection is needed as it affects the quality of life markedly. Magnitude is not known in urban slums due to the scarcity of studies.

This month dietitians took a lecture on Irritable Bowel Syndrome and its nutritional management, “Low FODMAP”, in order to get a little more information regarding Indian foods and their chemical reaction in the body. We also conducted a revision class on the topic of ‘Carbohydrates’, as types of carbohydrates play an important role in the nutritional management of IBS and other various diseases.

[A study of prevalence and determinants of irritable bowel syndrome in an urban slum community in Mumbai](#)
Nagaonkar SN, Singh VS, Kangule DT, Sadhanala S - J Datta Meghe Inst Med Sci Univ



NUTRITIONAL DEMONSTRATION (LOW COST HIGH CALORIE HIGH PROTEIN RECIPES)

The Dietitians took nutritional demonstrations on *Suji Farra*, which is a high protein and high-calorie dish made using semolina, green gram split, peanuts, curry leaves and served alongside coconut-lemon chutney, garnished with rye.

The dish is rich in B vitamins such as thiamine and folate. Apart from this, suji is a good source of iron and magnesium, which helps support red blood cell production, heart health while also contributing to blood sugar control. Green gram split and peanuts added to the dish serve good amounts of protein; while on the flip side, coconut, lemon and curry leaves serve as great sources of vitamin C, vitamin E, manganese, selenium and zinc.

Collective use of all these ingredients in one single dish makes this recipe a highly nutritious meal and has the potential to cure micronutrient deficiencies.



Date of the Nutritional Demonstration: 2021

Name of the Dish: *Suji Farra*,

Nutritional Servings:

- Calories – 270 kcal
- Protein -8gm



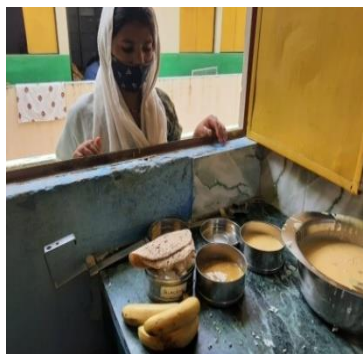
NUTRITION IMPROVEMENT PRIORITY **AND MA KA AHAR PROGRAM**

- ‘MA KA AHAR’ sponsored by the MA foundation and the NIPP program funded by donors are running together.
- We have a total strength of 85 to 90 children and mothers.
- NIPP is based on feeding malnourished pregnant, lactating women and children less than 5 years of age.
- ‘MA KA AAHAR’ focuses on feeding all women who are malnourished and needy. MA Foundation has sponsored this program for 50 hungry mothers for one year.

STATISTICS OF CHILDREN UNDER THE NIPP PROGRAM

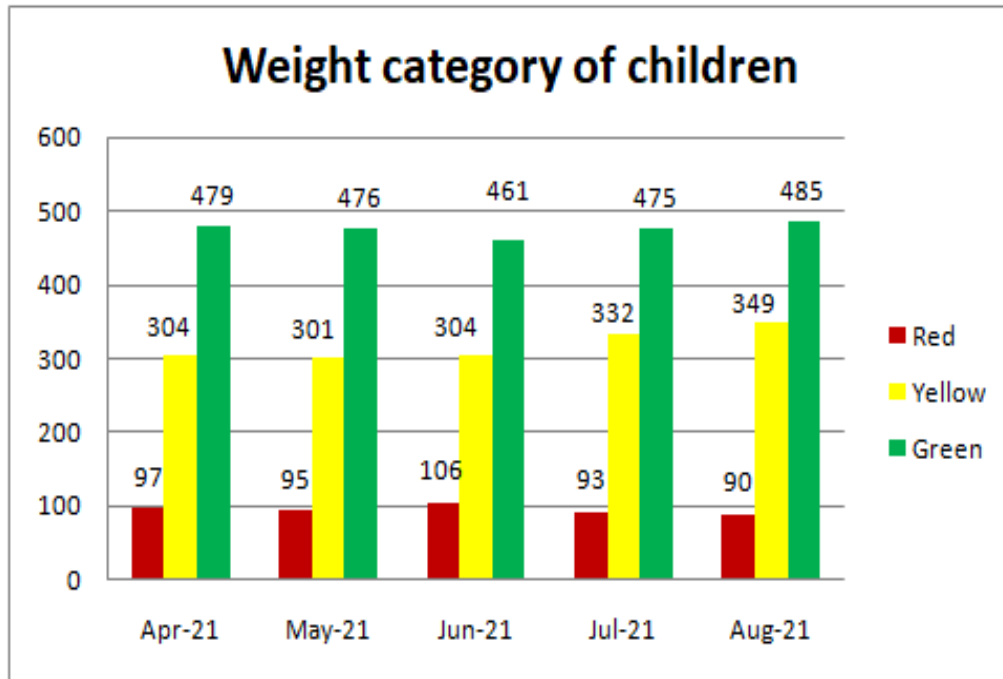
<i>TOTAL</i>	<i>RED ZONE</i>	<i>YELLOW ZONE</i>	<i>GREEN ZONE</i>
<i>20</i>	<i>14</i>	<i>4</i>	<i>2</i>

- The weight of 20 children sponsored in our NIPP Program has been recorded to keep up the child’s progress report to Donors.
- Out of 20 children, 8 children gained weight in the month of August.
- 01 child has lost weight due to Diarrhea caused by contaminated drinking water due to monsoon season.
- 11 children have the same weight in comparison to their weight in the last month due to monsoon season causing contamination in drinking water leading to rise in Diarrhea cases.



DEATH DETAILS

NAME OF THE DECEASED	AGE OF DECEASED (YEARS)	GENDER	CAUSE OF DEATH	HEALTH PROMOTER
RITIKA	32 MONTHS	FEMALE	UNKNOWN	APARNA
JAI SINGH	66 YEARS	MALE	CHRONIC ALCOHOLISM	BANITA



STATISTICS OF MEDICAL PROJECT

Total Number of Population	14504
Total no. Males	7488
Total no. Females	7016
Total no. of children	1015
Total Red zone children	102
Red zone children Weighed	90
Currently gone to the village	12
Total Yellow zone children	381
Yellow zone children weighed	349
Currently gone to the village	32
Total Green Zone children	532
Green zone children Weighed	485
Currently gone to the village	47

H.P'S NAME	TOTAL CHILDREN	RED ZONE	WEIGHED	GONE TO VILLAGE	WEIGHT GAIN	WEIGHT LOSS	SAME WEIGHT	RIGID FAMILIES	WORKING MOTHERS	FLOATING POPULATION	UNDER 6 MONTH
BANITA	102	17	15	2	4	9	1	3	2	4	0
DIMPLE	94	9	9	0	2	1	4	3	1	3	1
LATA	97	7	7	0	5	0	1	0	1	3	2
MEENAKSHI	104	9	8	1	4	0	4	3	0	1	1
MUSKAN	69	8	7	1	5	0	0	1	2	1	0
SANGEETA	69	11	5	6	1	1	3	0	2	5	0
APARNA	58	10	10	0	2	5	3	4	0	2	0
SUSHMA	96	9	9	0	2	0	6	1	1	4	1
SUNITA	111	7	7	0	3	0	4	0	0	3	0

Total number of children last month = 996

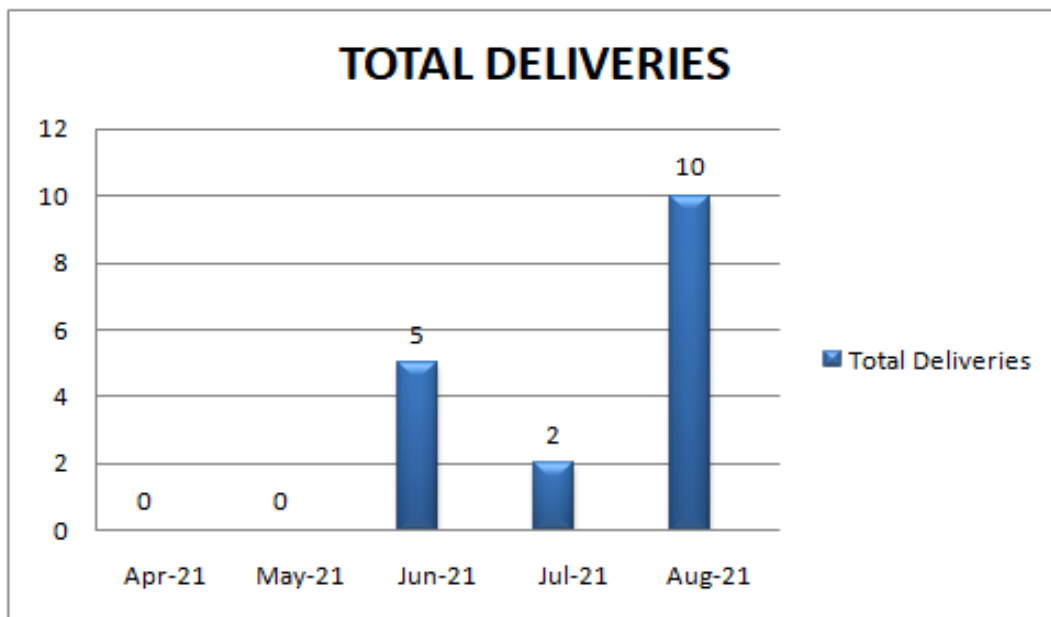
Children permanently left Janta colony slum = 46

Deliveries = 10

Children reached 5 years of age (out of DIR medical program) = 22

New children migrated to the Janta colony = 77

Total number of children this month = 1015

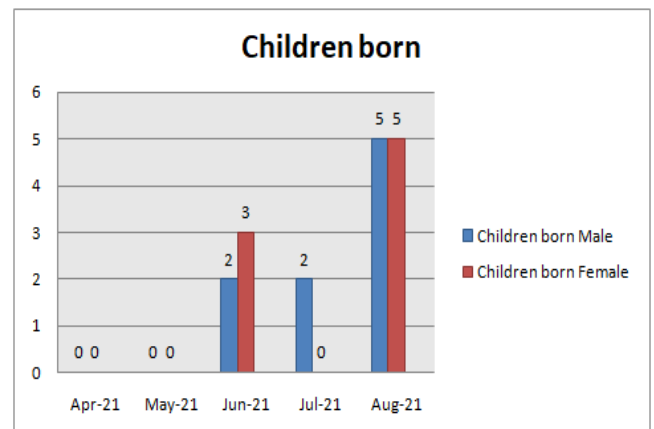
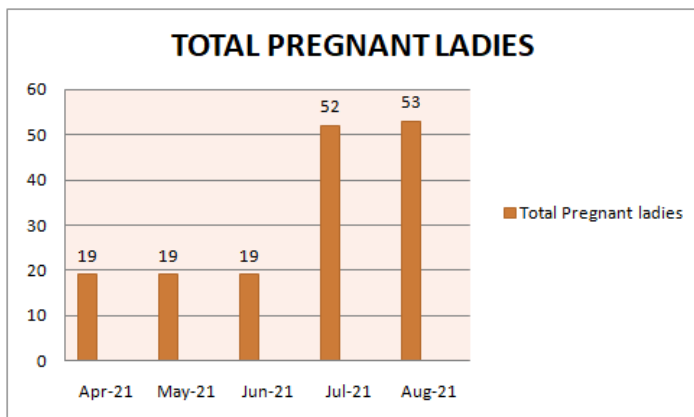


STATISTICS OF RED ZONE CHILDREN

Age (Months)	Number of Children	Total Percentage
0-12	12	1.2
13-24	10	1.0
25-36	14	1.4
37-48	26	2.6
49-60	28	2.7
Total children in area	1015	
Red zone children	90	8.9%
Red zone children gone to the village	12	1.1%

STATISTICS OF PREGNANT MOTHERS AND NEWBORN

Number of women pregnant last month	52
Number of deliveries	10
Births	Male: 05 Female: 05
Mothers who left Janta Colony	02
Infant death	Nil
Miscarriages	Nil
Abortions	Nil
Newly Pregnant	13
Trimester	1st trimester: 03 2nd trimester: 16 3rd trimester: 34
Number of women pregnant this month	53



INCOME GENERATION PROGRAM

Our Tailoring team of HPs stitched:

- **Cloth Sanitary Pads - 120**
- **Sale of Masks - 13**
- **Masks Made - 46**



NAME AND DESIGNATION	FIELD COORDINATOR AND TEAM	STATISTICS OF THE TEAM											TOTAL PREGNANT	ACHEIVEMENTS
		TOTAL POPULATION	TOTAL HOUSEHOLDS	MALE	FEMALE	TOTAL KIDS	TOTAL RED ZONE	RED ZONE BREAK UP						
								UNDER SIX MONTHS	WORKING MOTHERS	IGNORANT MOTHERS	FLAOTING	PERMANENT RESIDENTS		
SWATI (CLINICAL DIETITIAN)	MEENAKSHI – FIELD COORDINATOR LATA,UMA, APARNA – H.P	5293	1102	2723	2569	374	36	3	4	10	7	12	16	RED TO YELLOW = 12
DR.SAKSHI (PUBLIC HEALTH DOCTOR)	BANITA – FIELD COORDINATOR SANGEETA, SUNITA, DIMPLE – H.P	4935	1154	2631	2304	376	44	1	5	6	15	17	19	RED TO YELLOW = 10 YELLOW TO GREEN = 12
PRATIKSHA (THERAPEUTIC DIETITIAN)	VEENA – FIELD COORDINATOR SUSHMA, MUSKAN, LATA – H.P	4278	1014	2115	2163	265	22	1	4	2	6	9	18	RED TO YELLOW = 4 YELLOW TO GREEN = 15

DIR-INDIA AUGUST HIGHLIGHTS

- Distribution of grocery stores amongst 44 underprivileged families sponsored by MA Foundation.



- On 2nd August, Dr Shalini, one of the Board members from DIR California, paid a visit to our organization and accompanied health promoters in their field work



- On 11th August, the medical team and SWAD school of DIR India celebrated the Teej Festival.
- On 13th August, DIR India medical team and SWAD School celebrated 75th Independence Day.





- **Mr. Sanjeev along with Dr Arun Bansal from Panjab University paid a visit to our organization and donated a Portable Air Purifier.**



AGENDA POINTS FOR THE MONTH OF SEPTEMBER

- **Iron and Calcium supplementation for Red Zone children in the NIPP feeding program with a controlled group of the same number from basti who are not in the NIPP program.**
- **Counseling sessions of pregnant women as per their Trimester.**
- **Adding more needy families to our Feeding Program.**
- **Identifying new underprivileged families for monthly grocery help.**

DIR TEAM



CONTACT INFORMATION

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INSTAGRAM	https://www.instagram.com/DIR
FACEBOOK	https://www.facebook.com/dir
TWITTER	twitter.com/@dirdotngo
YOU TUBE	https://www.youtube.com/channel/UCvjksGNLMLNLR6ji-7_kQPg
GIVE INDIA	https://fundraisers.giveindia.org/nonprofits/developing-indigenous-resources-india
INSTAMOJO LINK	Instamojo.com/dir

DIR INDIA BANK DETAILS

IN FAVOUR OF	DEVELOPING INDIGENOUS RESOURCES INDIA
BANK	STATE BANK OF INDIA
BRANCH	SECTOR-9, MADHYA MARG, CHANDIGARH - 160009
ACCOUNT NO.	37375923235
RTGS/NEFT/IFSC CODE	SBIN0018249
MICR CODE	160002091