

Developing Indigenous Resources India

February 2024



DEVELOPING INDIGENOUS RESOURCES INDIA

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CEO'S REPORT FOR FEBRUARY

The health of the underprivileged community is a major concern in urban slums. The residents have limited resources of earning, so the cost of living in big cities is much higher in comparison to small towns and villages.

The major project of DIR INDIA in urban slums is on Mother and Child Health, Pregnant Mothers, and Lactating mothers. In addition, we also cover, both seasonal and communicable diseases.

Our monthly reports have detailed information of all statistics on health including residents suffering chronic illnesses like Diabetes Mellitus, IHD, Hypertension and Thyroid diseases. Our monthly report has statistics of deaths and the cause of death.

It is mandatory for each Health Promoter to report the number of cases in her adopted area, who are suffering from chronic illnesses in the heart, kidney and lungs. Monitoring and guidance are constantly given to the patients. Our Health Promoters are respected and they are good advisers for the residents of these areas.

In the Medical Project, each member of the field staff has to hold one committee meeting in a week on seasonal diseases in her area of responsibilities. This helps greatly in generating awareness and educates the local resident how to prevent it. The audience are majority women. This helps the masses in spreading awareness accross the slum . During COVID-19 Pandemic in Janta Colony

and Safeda Colony we did not have a single case of COVID in a population of 15,000 as DIR



started classes on CoronaVirus in January 2020 and committee meetings on prevention of the disease through charts and posters from February 20

In this month the agenda of the medical program was to collect data on the number of cases both male and female suffering from chronic diseases like IHD, Blood Pressure, Thyroid and Diabetes Mellitus. The Excel sheet below will explain the statistics of Chronic Diseases in our adopted area.

SURVEY OF CHRONIC DISEASES IN JANTA COLONY 2024

| NAME OF H.P | TOTAL CHILDREN | SCHOOL GOING CHILDREN (2.5 years of age and above) | CHILDREN NOT GOING TO SCHOOL (below the age of 2.5 years) | | DIABETIC CASES | THYROID CASES | ISCHEMIC HEART DISEASE CASES | NON IMMUNIZED CASES |
|----------------------|-------------------|---|--|----|-------------------|------------------|---------------------------------------|---------------------------|
| BANITA RAWAT | 49 | 19 | 30 | 6 | 5 | 3 | 0 | 0 |
| DIMPLE BARUA | 51 | 20 | 31 | 9 | 7 | 10 | 2 | 0 |
| LATA GOSAIN | 42 | 25 | 17 | 4 | 5 | 8 | 0 | 1 |
| MEENAKSHI NEGI | 43 | 22 | 21 | 2 | 7 | 1 | 0 | 0 |
| LATA CHAUHAN | 55 | 30 | 25 | 6 | 13 | 8 | 3 | 0 |
| POOJA VIDYARTHI | 49 | 29 | 20 | 4 | 8 | 8 | 2 | 0 |
| LATA CHANDEL | 37 | 25 | 12 | 9 | 5 | 8 | 0 | 0 |
| SUSHMA BISHT | 45 | 25 | 20 | 9 | 13 | 5 | 0 | 0 |
| SUNITA MUKHIA | 60 | 16 | 44 | 10 | 12 | 9 | 1 | 1 |
| VEENA RANI | 48 | 10 | 38 | 3 | 4 | 2 | 0 | 0 |
| SANJANA PRAJAPATI | 42 | 25 | 17 | 12 | 12 | 9 | 3 | 0 |
| MEENA | 37 | 17 | 20 | 5 | 9 | 6 | 0 | 0 |
| POONAM | 29 | 10 | 19 | 7 | 10 | 5 | 0 | 0 |
| TOTAL | 587 | 273 | 314 | 86 | 110 | 82 | 11 | 2 |

Each year in the month of February there is a Rose festival. Panjab University Enactus Team shared a stall with DIR India where some of our products from Tailoring Unit got sold.



Mr Harshvardhan Jain donated stationary for SWAD School children. We are extremely grateful to Harshvardhan and his Parents who have helped the organization whenever any request is made.





MEDICAL TRAINING

February being the shortest month of the year with a fluctuation of days is an important period that observes many national and international days. Regarding the medical training in February, our C.E.O. Dr. Asha Katoch taught about the primary respiratory organ Lungs including its role in gas exchange together with different lung capacities.

In addition to this, a class was taken on pneumonia as it is counted as the



prominent cause of suffering and death with great clinical impact across the globe.Globally, around 16% of under five children die due to pneumonia. It is the single largest cause of death in children.<u>https://www.isglobal.org/en/-/un-nino-muere-de-neumonia-cada-42-segundos-en-el-mundo</u> Childhood pneumonia, if identified early, is readily treatable through low cost antibiotics. Access to timely and appropriate care is a key action to control pneumonia.



NUTRITION TRAINING

Requirement of nutrition starts just after birth. The first food of a child is **colostrum**, which is very important for the rest of the life of the baby. So, nutritional management in newborn and infants is very important. Early nutritional deficits are also linked to long-term impairment in growth and health. Malnutrition during the first 2 years of life causes stunting, leading to the adult being several centimetres shorter than his or her potential height. There is a lot of evidence in Janta Cony that adults who were malnourished in early childhood have impaired intellectual performance. If women were malnourished as children, their reproductive capacity is affected, their infants may have lower birth weight, and they have more complicated deliveries. When many children in a population are malnourished, it has implications for national development. The overall functional consequences of malnutrition are thus immense.

The first two years of life provide a critical window of opportunity for ensuring children's appropriate growth and development through optimal feeding.

https://www.ncbi.nlm.nih.gov/books/NBK148967/#:~:text=Early%20nutritional%20deficits%20are%20also,her%20potential%20height%20(3).

Keeping in mind the above facts, in the month of February the nutrition training was focused on the following topics:

- Nutritional management in newborn and infants.
- Nutritional assessment
- Basic components of nutrition



NUTRITIONAL DEMONSTRATION

Nutritional Demonstration on 20th February 2024

Name of the Recipe - Low cost chana Chaat

Nutritional value per serving - 100g Energy - 56 Kcal Protein - 6.5g

Low cost, high protein and energy rich *chaat* was prepared by using roasted black *chana*, carrot, beetroot, ground nut, boiled potato, finely chopped tomato, onion and coriander leaves.

lemon juice was added to enhance the flavor as well as for the proper absorption of iron.







ATTENDANCE REPORT OF CHILDREN UNDER THE NIPP PROGRAM ADOPTED BY DONORS

| TOTAL | <u>RED ZONE</u> | YELLOW ZONE | GREEN ZONE |
|-----------|-----------------|-------------|------------|
| <u>13</u> | <u>6</u> | <u>4</u> | <u>3</u> |

- The progress report of the sponsored children is sent to each donor every month on the health status of the adopted child.
- 16 children of the project Alambana (children of rag pickers) are sponsored. They are also part of the NIPP program. DETAILED PROGRESS REPORT OF NIPP:
- Total attendance for the month of February was 33
- In this, 13 were below 5 years of age, 2 were needy Lactating mothers and and 2 were malnourished needy women.

PROGRESS REPORT UNDER NIPP PROGRAM:

- 6 children gained weight.
- 7 children showed no change in weight due to seasonal illness like cough and cold.







DEATH DETAILS IN JANTA COLONY

| NAME OF THE DECEASED | AGE OF DECEASED (YEARS) | GENDER | CAUSE OF DEATH | NAME OF THE HEALTH PROMOTER |
|----------------------------|-------------------------------|--------|-------------------|--------------------------------------|
| KARTARI DEVI | 85 | FEMALE | NATURAL DEATH | DIMPLE |

DETAILS IN DHANAS

| NAME OF THE DECEASED | AGE OF DECEASED (YEARS) | GENDER | CAUSE OF DEATH | NAME OF THE HEALTH PROMOTER |
|----------------------------|-------------------------------|--------|---|--------------------------------------|
| RAM DEV | 62 | MALE | CARDIAC ARREST | SUNITA |
| BABY | 3 | FEMALE | CONGENITAL ABNORMALITY OF THE HEART | LATA GOSAIN |
| MOHAN | 70 | MALE | ROAD ACCIDENT | BANITA |
| ANGURI | 62 | FEMALE | DIABETES WITH ASTHMATIC BRONCHITIS | BANITA |

STATISTICS OF MEDICAL PROJECT

| | JANTA COLONY | DHANAS VILLAGE | SINGHA DEVI |
|---|--------------|----------------|----------------------|
| | SLUM | | SLUM |
| Total Population | 9519 | 4668 | 65 |
| Total Males | 4891 | 2530 | 30 |
| Total Females | 4628 | 2138 | 35 |
| Total no. of children | 587 | 294 | 08(< 5 yrs.) |
| Total Red zone children | 72 | 24 | - |
| Red zone children Weighed | 66 | 21 | - |
| Children not weighed (gone to the village) | 6 | 3 | |
| Total Yellow zone children | 226 | 122 | - |
| Yellow zone children weighed | 202 | 105 | - |
| Children not weighed (gone to the village) | 24 | 17 | |
| Total Green Zone children | 289 | 148 | - |
| Green zone children Weighed | 267 | 121 | |
| Children not weighed (gone to the village) | 22 | 27 | |

| | IANTA COLONY SLUM | DHANAS VILLAGE |
|---|-------------------|----------------|
| Total No. of children last month | 598 | 300 |
| Children permanently left | 86 | 6 |
| Total Deliveries | 5 | 3 |
| Children reached 5 years of age | 14 | 6 |
| New families moved in area on rent with children under five | 84 | 3 |







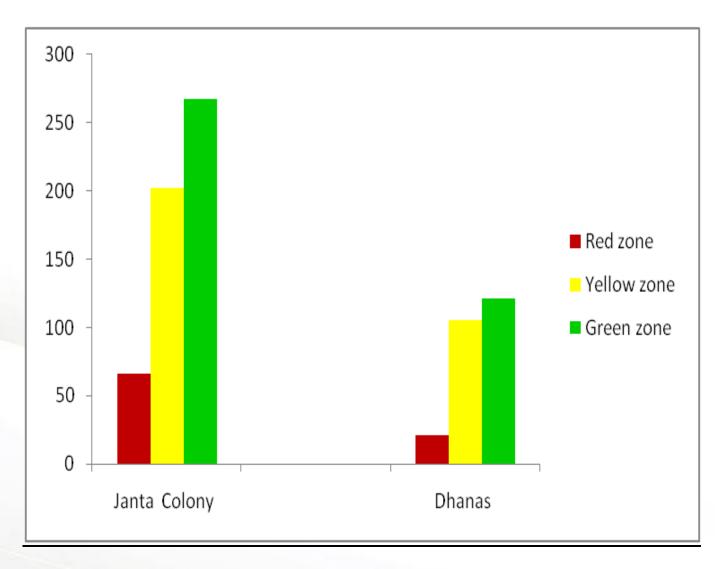
STATISTICS OF RED ZONE CHILDREN IN JANTA COLONY AND DHANAS

| | Janta | Colony | C | hanas |
|--|----------|--------|----------|-------|
| Age (Months) | Children | %Age | Children | %Age |
| 0-12 | 17 | 2.8 | 5 | 1.7 |
| 13-24 | 7 | 1.2 | 2 | 0.7 |
| 25-35 | 8 | 1.4 | 4 | 1.4 |
| 36-48 | 18 | 3.1 | 6 | 2.0 |
| 49-60 | 16 | 2.7 | 4 | 1.4 |
| Total Red Zone children | 72 | 12.2 | 24 | 8.2 |
| Red zone children (weighed) | 66 | 11.2 | 21 | 7.2 |
| Children not weighed (gone to the village) | 6 | 1.0 | 3 | 1.0 |

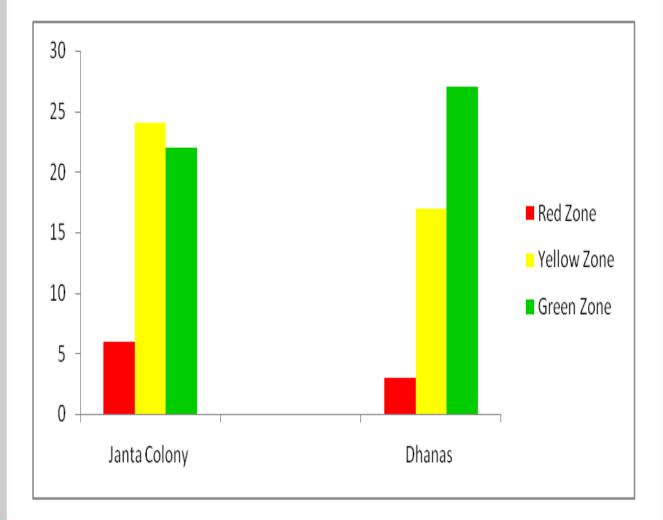
DETAILED STATISTICS OF RED ZONE CHILDREN IN JANTA COLONY

| H.P'S NAME | TOTAL CHILDREN | RED ZONE | WEIGHED | GONE TO VILLA GE | WEIGH T GAIN | WEIGHT LOSS | SAME WEIGHT | RIGID FAMILIES | WORKING MOTHERS | FLOATING POPULATION | UNDER 6 MONTH |
|-----------------|-------------------|-------------|---------|---------------------------|-----------------|----------------|----------------|-------------------|--------------------|------------------------|------------------|
| BANITA | 49 | 11 | 10 | 1 | 6 | 3 | 1 | 0 | 0 | 7 | 0 |
| DIMPLE | 51 | 8 | 7 | 1 | 1 | 1 | 4 | 1 | 0 | 0 | 2 |
| LATA | 42 | 5 | 5 | 0 | 1 | 1 | 2 | 0 | 0 | 1 | 3 |
| MEENAKS HI | 43 | 4 | 3 | 1 | 1 | 1 | 1 | 1 | 0 | 2 | 1 |
| LATA CHAUHAN | 55 | 7 | 7 | 0 | 2 | 1 | 3 | 0 | 0 | 7 | 0 |
| POOJA | 49 | 7 | 7 | 0 | 5 | 0 | 2 | 0 | 0 | 4 | 0 |
| LATA CHANDEL | 37 | 1 | 1 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 |
| SUSHMA | 45 | 6 | 6 | 0 | 3 | 0 | 3 | | 1 | 2 | 0 |
| SUNITA | 60 | 2 | 1 | 1 | 0 | 1 | 0 | 0 | 0 | 1 | 0 |
| VEENA | 48 | 5 | 5 | 0 | 1 | 2 | 1 | 0 | 0 | 1 | 2 |
| SANJANA | 42 | 3 | 1 | 2 | 1 | 0 | 0 | 0 | 0 | 1 | 1 |
| MEENA | 37 | 7 | 7 | 0 | 0 | 0 | 0 | 0 | 0 | 3 | 0 |
| POONAM | 29 | 6 | 6 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 |

Total Number of children weighed in Red, Yellow and Green Zone in Janta Colony and Dhanas



Total number of children not weighed in Red, Yellow and Green zone in Janta colony and Dhanas

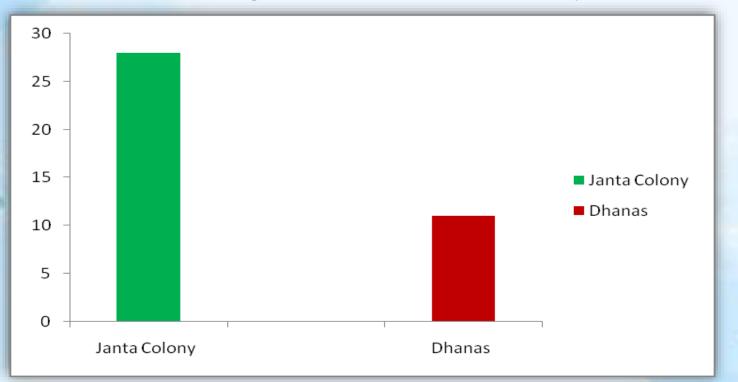


DETAILED STATISTICS OF RED ZONE CHILDREN IN DHANAS

| H.P'S NAME | | RED ZONE | | GONE TO VILLAGE | WEIGHT GAIN | WEIGHT LOSS | SAME WEIGHT | RIGID FAMILIES | WORKING MOTHERS | | UNDER 6 MONTH |
|-----------------|----|-------------|---|-----------------------|----------------|----------------|----------------|-------------------|--------------------|---|------------------|
| BANITA | 32 | 1 | 1 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 |
| DIMPLE | 30 | 5 | 4 | 1 | 2 | 0 | 2 | 0 | 0 | 0 | 2 |
| LATA | 30 | 1 | 1 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 1 |
| MEENAKS HI | 27 | 3 | 1 | 2 | 0 | 0 | 1 | 0 | 0 | 0 | 0 |
| LATA CHAUHAN | 24 | 4 | 4 | 0 | 0 | 1 | 3 | 0 | 0 | 0 | 0 |
| POOJA | 20 | 2 | 2 | 0 | 2 | 0 | 0 | 0 | 0 | 0 | 0 |
| LATA CHANDEL | 24 | 4 | 1 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 |
| SUSHMA | 33 | 2 | 2 | 0 | 2 | 0 | 0 | 0 | 0 | 0 | 0 |
| SUNITA | 26 | 2 | 2 | 0 | 1 | 0 | 1 | 0 | 0 | 0 | 0 |
| VEENA | 28 | 1 | 1 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 |
| SANJANA | 20 | 2 | 2 | 0 | 0 | 0 | 2 | 0 | 0 | 0 | 0 |

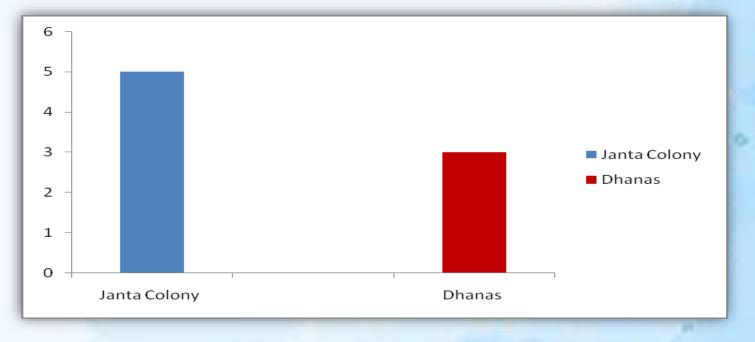
STATISTICS OF PREGNANT MOTHERS AND NEWBORN

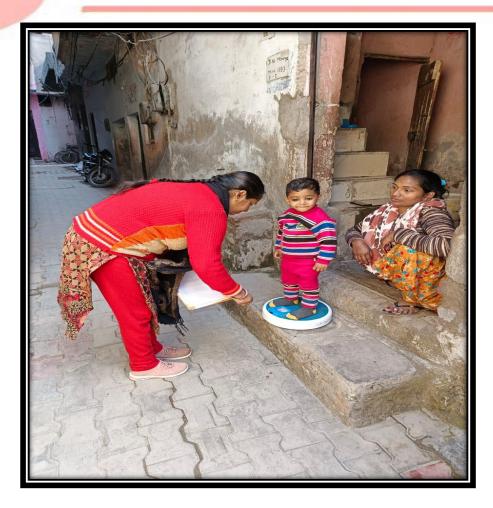
| | JANTA COLONY | DHANAS VILLAGE |
|--|--|---|
| Number of women pregnant last month | 24 | 11 |
| Number of deliveries | 5 | 3 |
| Births | Male:1 Female:4 | Male:1 Female:2 |
| Mothers who left Colony | 0 | 1 |
| Infant death | 0 | 0 |
| Miscarriages | 0 | 0 |
| Abortions | 0 | 0 |
| Newly Pregnant | 9 | 4 |
| Trimester | 1 st trimester:1 2 nd trimester: 9 3 rd trimester: 18 | 1 st trimester:1 2 nd trimester: 4 3 rd trimester: 6 |
| Number of Pregnant women this month | 28 | 11 |



Total number of pregnant women in Janta Colony and Dhanas

Total number of Deliveries in Janta Colony and Dhanas









EDUCATIONAL PROGRAMS:

SWAD SCHOOL PROGRESS REPORT:

- Pre Nursery class Class Teacher Mrs. Preeti
- ★ Kartik was a mischievous child in the beginning and never paid attention in the class. It is due to the efforts of the class teacher that he showed improvement and became attentive with the course of time.
- Nursery class Class Teacher Mrs. Geeta
- ★ Abhiraj from class Nursery was weak in studies and never used to sit properly in the class but because of sincere efforts by class teacher and regular monitoring of his class work and homework, he has improved a lot and behaves like a good student. His morale has improved to such an extent that he now recites poems and rhymes in Assembly.
- L.K.G class Class Teacher Mrs. Lata
- ★ Jitisha from L.K.G class was not so sincere in submitting her homeworks on time and her homework used to be incomplete most of the time. She has now improved a lot in overall performance. She finishes and submits her homework on time and her confidence has also increased in the class. She has improved her handwriting and oral work also.

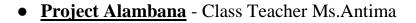






• U.K.G class - Class Teacher Mrs. Saroj

★ The best performer of this class was **Somya**. She is a very dynamic and charming student. She has a zeal of learning new things and is very passionate towards her academics. Only weakness was her homework which was always incomplete and untidy. She required regular counselling and motivation to improve her writing skills. It was due to the continuous efforts and monitoring of the class teacher that her writing skills improved and now she has started submitting her homework on time.



In this Project, children are from humble families. Parents are labourers on daily wages. This time a large number of kids are from Janta Colony and Safeda Colony. We enroll children who are poor as parents cannot afford two square meals. The SWAD School provides

- Education,
- School Uniform
- Stationary
- Meals.

These children need extra care and close monitoring to ensure that the child is enjoying studies.

These kids pick up fast and one can see the overall development and growth in their skills which builds up their self confidence.

All the teachers in rotation take Alambana class for 45 minutes everyday.

- ★ A brief history of Priyanshi Her parents are on daily wages as labourers. In the beginning the school ambience was strange for Priyanshi, she was a slow learner and shy by nature. She required encouragement and frequent counselling.
- ★ Today she is an active child and confident to perform in the morning assembly.





HIGHLIGHTS OF SWAD SCHOOL FOR THIS MONTH:





• This month's activities were thumb painting on kites on the occasion of Basant Panchami and colouring of different pictures.









| CLASS | BEST DRESSED | PUNCTUAL | BEST STUDENT | DISCIPLINE |
|-------------|---|--|---|---|
| PRE-NUR ERY | SATNAM SATNAM | ERIKA | HARSHIT | NAKSH |
| NURSERY | NITYA | MISHTHI | LUCKY | SOURAB |
| L.K.G | VANSH | PRIYANSHU | KUNAL Image: State of the state | AKSHITA |
| U.K.G | ISHANI ISHANI | ARADHYA RAWAT | SAANVI View of the second seco | KAVANEET KAUR Image: Construction of the second s |
| ALAMBANA | RAGHAV Image: Constraint of the second sec | PRIYANSHI Image: Constraint of the second | VIRAJ Image: Constraint of the second seco | RUHI Image: Constraint of the second secon |

HOMOEOPATHIC CAMP:

Homoeopathy camp organised by Homoeopathic Medical College and Hospital of Sector 26, Chandigarh.Team of 2 Doctors and Paramedical staff comes twice a month to serve the community with free consultation and free medication.



TUITION CLASSES:

Tuition classes are held from 3PM to 5PM every day for Basti children who are studying in Public School in Chandigarh. DIR ensures every child is given extra coaching to cope up with the standard of education of Public Schools in which they are studying. In tuition classes, frequent Tests are taken to ensure the child understands and performs outstandingly well in their respective class.



DIR INDIA HIGHLIGHTS OF THE MONTH

• DIR India in collaboration with Enactus, Punjab University held an exhibition sale of tailoring goods in Rose Fest held in PU.





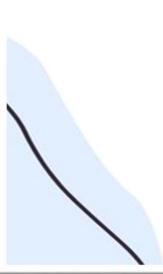
Mr. Harshvardhan Jain donated stationary for SWAD school and medical team.



• DIR India held surveys on Chronic diseases in Janta colony and Safeda colony, Adarsh Nagar.

OUR TEAM







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