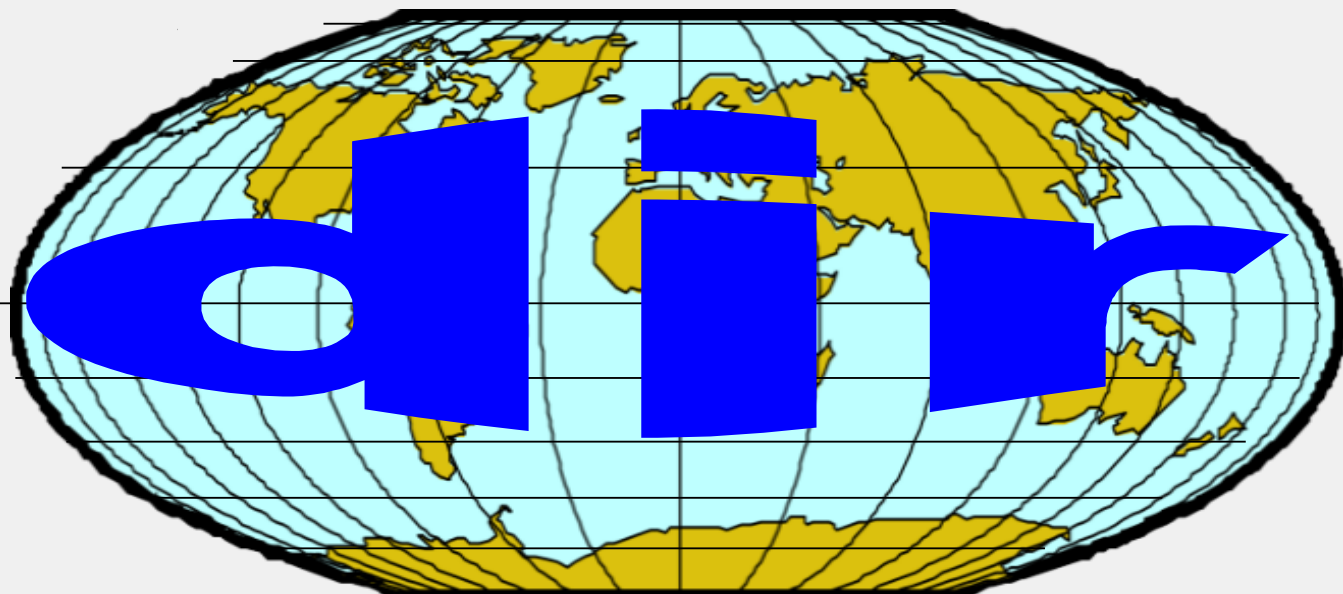


DEVELOPING INDIGENOUS RESOURCES - INDIA

ANNUAL REPORT 2018-2019



Success is the result of perfection, hard work, learning from failure, loyalty and persistence.



CEO REPORT

Developing Indigenous Resources India has come a long way despite the turbulent journey, similar to a voyage in the sea experiencing both stormy and calm days.



The metamorphosis of this organization began when it entered Janta Colony Nayagaon at a time when there

Dr. ASHA KATOCH

was no other organization including Government who had never known the existence of this slum because on maps it was a forest land but in actual it was a slum with Panchayat governance (elected body) like it is in a village. People residing had declared Janta Colony a village and Mr. Gurbaksh Singh was the elected Sarpanch. DIR-INDIA was the first organization which generated faith and trust among the residents of Janta Colony with the objective to improve their health conditions. I have been associated with DIR- INDIA since its inception and thus understand the roots on which the organization was built.

When I took over DIR-India as a CEO on **1/11/2017**, one was not apprehensive as I was well aware of the program but it was an organization which was unattended by any leader for two years and hence demanded a lot of attention. In addition, not having the conventional process of being handed over the project by an existing leader who would have been able to explain the financial and administrative position of the organization, due to unavoidable circumstances, I started on a bumpy ride as a CEO.

Developing Indigenous Resources India has shown consistent growth in all fields of activities whether it is Health Program, Education, Women empowerment or Nutrition improvement Priority Program.

- Dir medical team worked hard in bringing down the percentage of Red zone category. At last this goal was achieved to some extent.
- The Red zone category of 16.4% in October 2018 came down to 9.5% in March 2019. (This does not include children who have gone to village)
- Detailed monitoring and evaluation were done to study why Dir India team was unable to achieve its target of bringing down red zone category of children to 1% -2% in last 13 years.
- **There are two reasons:**
 1. Janta Colony has 4% to 5% floating population of families with children under 5 years of age.
 2. Each HP reports the number of new families with children under five years of age in his/her area in their monthly report. Most of these children of new families are in red zone category. It is a labor community who come from the villages to city to earn their livelihood. These children are malnourished and worm infestation is common amongst them.
 3. Rigid mothers who are not making any effort on feeding or cooking nutritious food. These children will continue to suffer and remain in Red zone category.

DIR-INDIA Senior staff will address this issue personally with rigid mothers by bringing them to DIR Basti office from April 2019. We will ensure that we change the outlook of rigid mothers by introducing them to women whose kids were once in red zone. In addition to this close monitoring of each red zone child on day to day basis will also be done.

Floating population is inevitable but personal counseling of rigid mothers in office and constant monitoring of red zone children on daily basis should help us.

If this works it will help us in bringing down the percentage of Red zone children by 3% to 4%.

MEDICAL PROJECT

The first step was to make the medical programs more effective by generating enthusiasm and motivation amongst Health Promoters.

The following steps were added in running the program more effectively:

- 1.** A bonus of Rs.500/- was introduced to each HP for field work. This incentive brought progress in the program and the health status of children under five started improving.
- 2.** HP's are sent in pairs to monitor and cross verify each other's work. This process improved the accuracy and ensured correct calculation of the incentive for each HP. Due to close monitoring, the field work improved and the total number of children examined in one day by each HP went up to 10 to 12 children/day.
- 3.** Introduced additional responsibility to each HP of maintaining and updating the statistics of their respective project area like:
 - Total population in adopted area.
 - Total number of male and females in project area.
 - Total number of deaths in their respective area and also explaining the cause of death.

Total number of children under five and the total number of pregnant mothers in his /her area was already being recorded.

These statistics are updated every month and this gives us the exact picture of floating population as well. These statistics are reflected in monthly report for information and records.





NUTRITION EXAM

4. In academics a bonus of two hundred was introduced. Rs 100/- for Nutrition Test and Rs 100/- for Medical Test.

This improved the standard of academics and attendance became 100% for the exams.

5. Graphic display of each project in monthly records gives the exact status of the running program so that corrective measures can be taken.

6. Introduced Vitamin A immunization for all children along with de-worming medicine twice a year. Date of immunization is entered in the growth chart by each HP for records and the dose is repeated every six months.

7. All pregnant mothers are issued supplements (given to us by **Vitamin A Angels**) every six months to improve the health of the mother and child. This has helped us in improving the birth weight of the child.



8. A team of Doctors and Pharmacist with medicine comes from **Government Homeopathic Medical College, Sector-26 Chandigarh** to give free consultation and medication every Wednesday.

IMMUNIZATION PROGRAMME

Every Wednesday of the month is the Immunization Day. A team of lady health workers from Punjab Government comes with the vaccination kit. Senior Health Promoter Veena is In charge of this program. DIR serves wheat porridge to all the children and pregnant mothers who come for immunization.

A team of Doctors and Pharmacists comes from Government Homeopathic College Chandigarh. They give free consultation and free medication for those who take consultation.

Dr. Veena Parmar, a pediatrician occasionally offers her social services on Wednesday if she's in town.

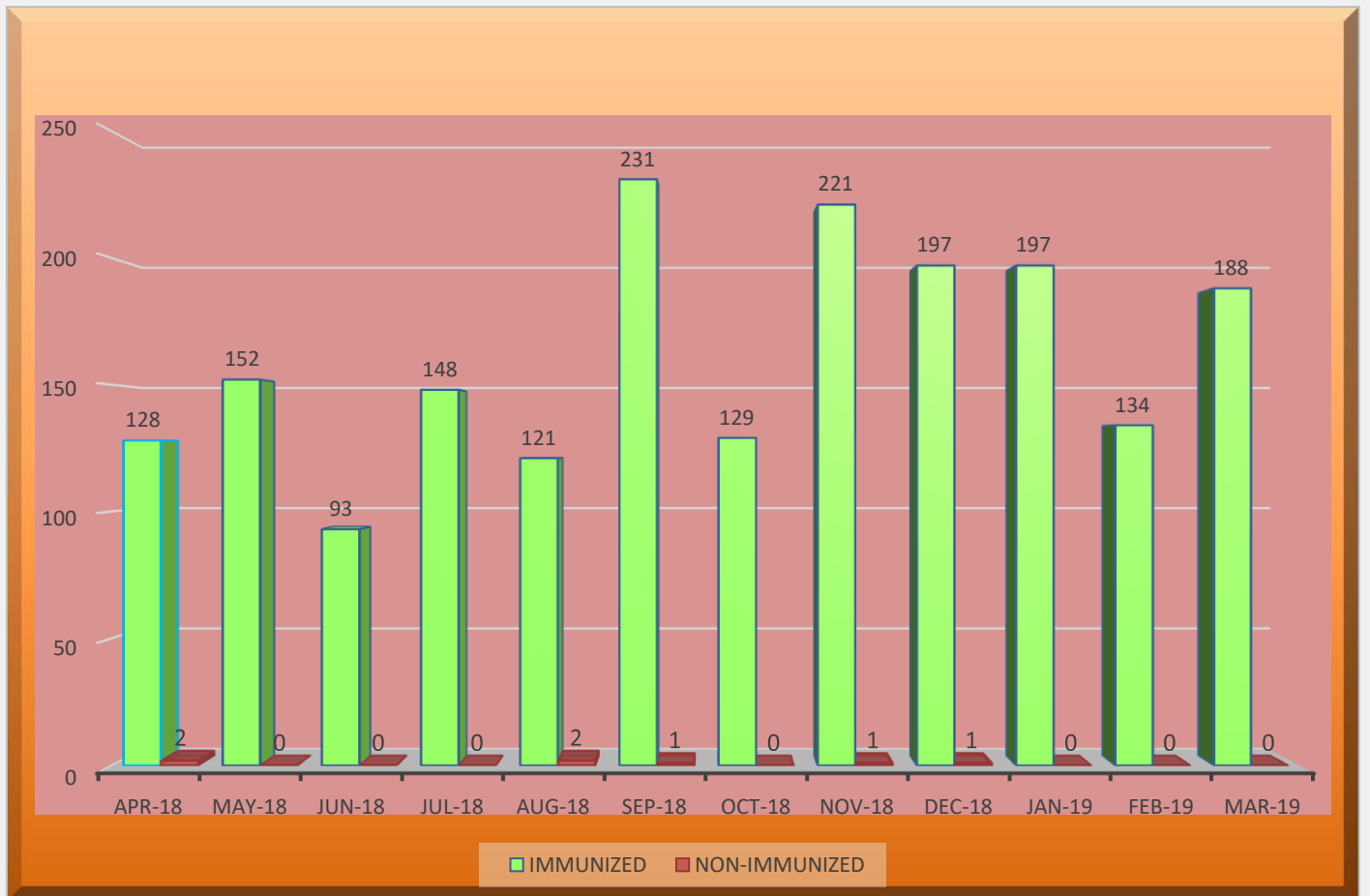




YEARLY IMMUNIZATION STATISTICS

VACCINATION FOR CHILDREN		VACCINATION FOR PREGNANT	
SHOT	DOSE	SHOT	DOSE
BCG	2	T.T 1	123
PENTA 1+IPV	168+	T.T 2	74
	115		
PENTA 2	178	T.T BOOSTER	46
PENTA 3+IPV	179+		
	152		
MEASLES 1	69		
MEASLES 2	44		
MR	391		
DPT BOOSTER	134		
DPT 5 year	145		
DPT 10 year	62		
DPT 16 year	58		

<i>Months</i>	<i>IMMUNIZED</i>	<i>NON-IMMUNIZED</i>
Apr-18	128	2
May-18	152	0
Jun-18	93	0
Jul-18	148	0
Aug-18	121	2
Sep-18	231	1
Oct-18	129	0
Nov-18	221	1
Dec-18	197	1
Jan-19	197	0
Feb-19	134	0
Mar-19	188	0



- *In the month of **April** and **August**, 2 children missed the scheduled shot which was given on subsequent immunization day.*
- *In **September** due to illness one child missed the scheduled vaccination which was given later.*
- *In **November** one child missed the dose due to **Pneumonia** but was vaccinated on recovery.*
- *In **December** a premature underweight baby was born. He is being treated and immunized under the care of Pediatrician in **PGIMER Chandigarh**.*

NUTRITION IMPROVEMENT PRIORITY PROGRAMME (NIPP)

NIPP stands for Nutritional Improvement Priority Programme. We have started this programme for improving the health status of those kids who are in high priority red zone category. These children are fed in DIR-I office under direct supervision.

A high protein diet comprising of cup of milk, boiled egg, soybean nutria (soya chunk), one banana, rice and dhal (pulses) Porridge, cracked wheat grains, black channa, vegetable peanut poha on respective days. A weekly menu is planned by the nutritionist.



"NUTRITIONAL DEMONSTRATION"

- Every third Tuesday DIR Nutritionists conduct a demonstration class for Health promoters and Slum community on Low cost High Calorie High Protein Diet.

DEMONSTRATION SYLLABUS		
S.NO.	MONTH	TOPIC
1.	MARCH '18	DHOKLA
2.	APRIL '18	VEG BESAN CHILLA
3.	MAY '18	DAHI BHALLE
4.	JUNE '18	PUMPKIN GULGULE
5.	JULY '18	SWEET CORN VEG CHAAT
6.	AUGUST '18	RAVA IDLI
7.	SEPTEMBER '18	SOOJI ALOO CUTLETS
8.	OCTOBER '18	BREAD PAKORA
9.	NOVEMBER '18	HIGH PROTEIN CAKE
10.	DECEMBER '18	IDLI SAMBHAR
11.	JANUARY '19	DHOKLA
12.	FEBRUARY '19	VEG UPMA
13.	MARCH '19	SOOJI CAKE

✚ **From December 2018 Cooking Demonstration test was introduced for Health Promoters.**



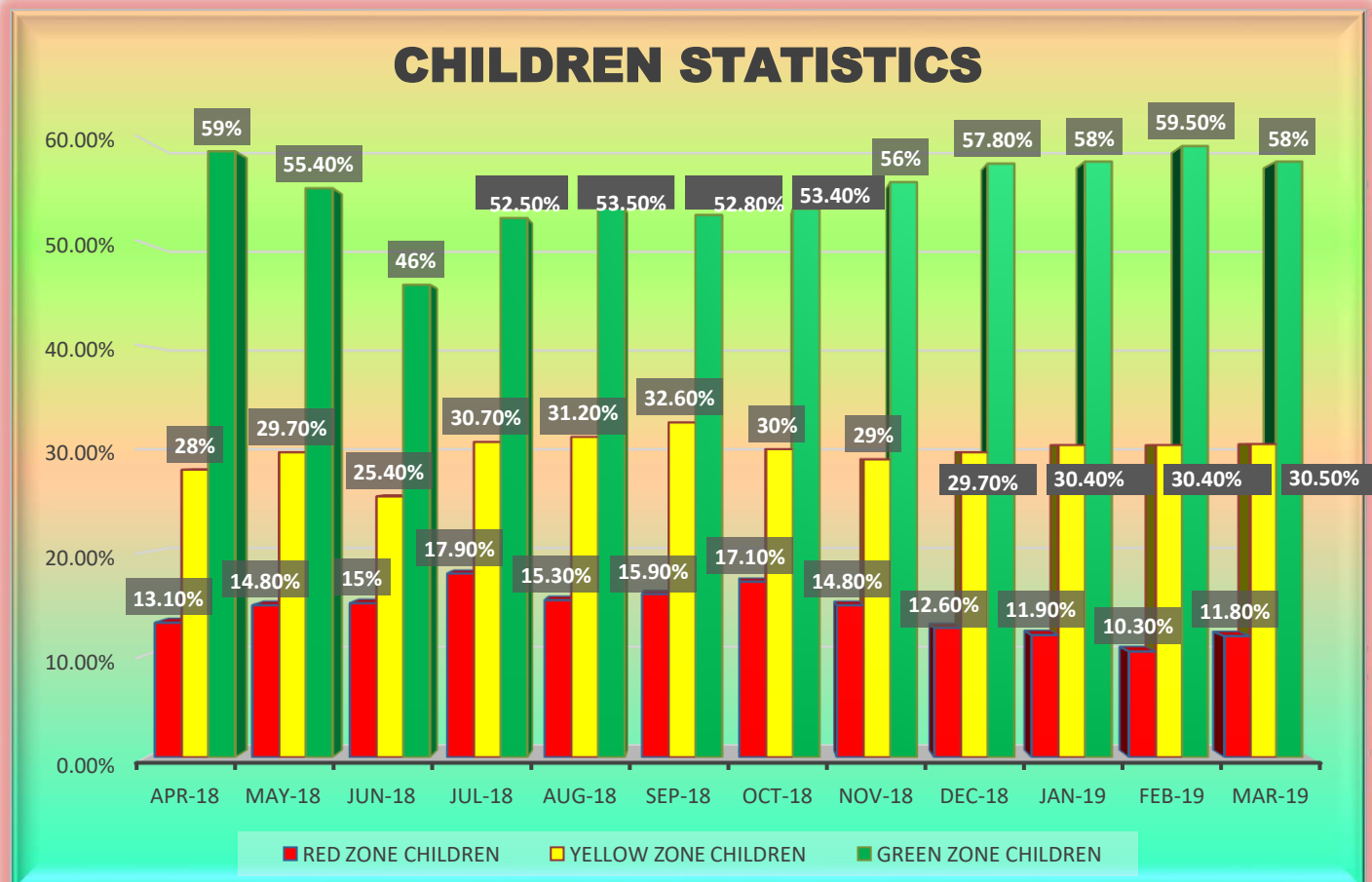
LOW COST HIGH PROTEIN HIGH CALORIE RECIPE

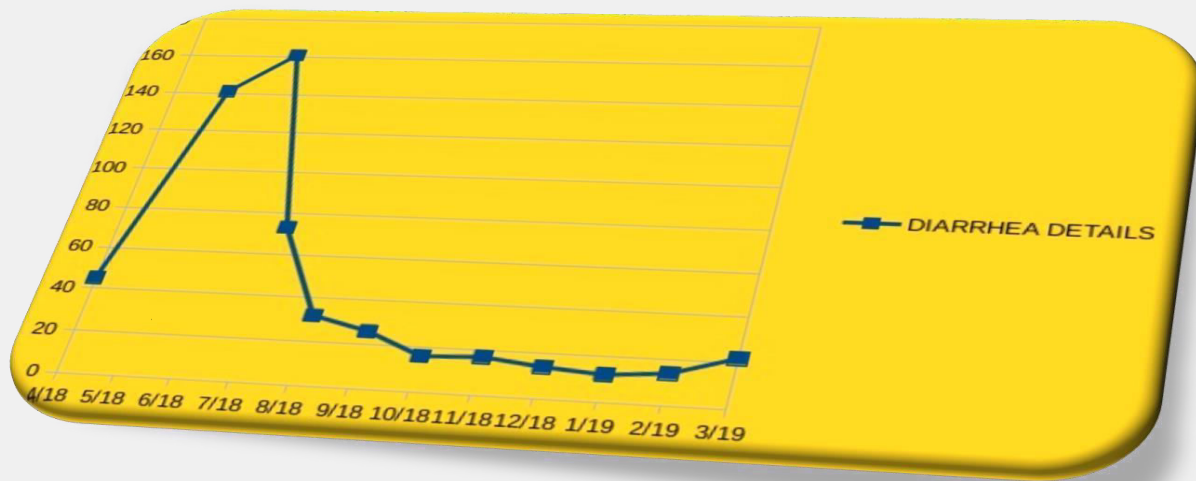
“STATISTICS OF RED ZONE CHILDREN”

- ❖ **RED ZONE CHILDREN**: Red zone children are those children who are 3kg or more than 3kg under weight than their ideal body weight.
- ❖ **YELLOW ZONE CHILDREN**: Yellow zone children are those children who are 1kg to 2.9kg underweight than their ideal body weight.
- ❖ **GREEN ZONE CHILDREN**: Green Zone children are healthy. Their height and body weight corresponds to their respective age on growth chart.



Months	RED ZONE CHILDREN	YELLOW ZONE CHILDREN	GREEN ZONE CHILDREN
Apr-18	13.10%	28%	59%
May-18	14.80%	29.70%	55.40%
Jun-18	15%	25.40%	46%
Jul-18	17.90%	30.70%	52.50%
Aug-18	15.30%	31.20%	53.50%
Sep-18	15.90%	32.60%	52.80%
Oct-18	17.10%	30%	53.40%
Nov-18	14.80%	29%	56%
Dec-18	12.60%	29.70%	57.80%
Jan-19	11.90%	30.40%	58%
Feb-19	10.30%	30.40%	59.50%
Mar-19	11.80%	30.50%	58%





DIARRHOEA DETAILS

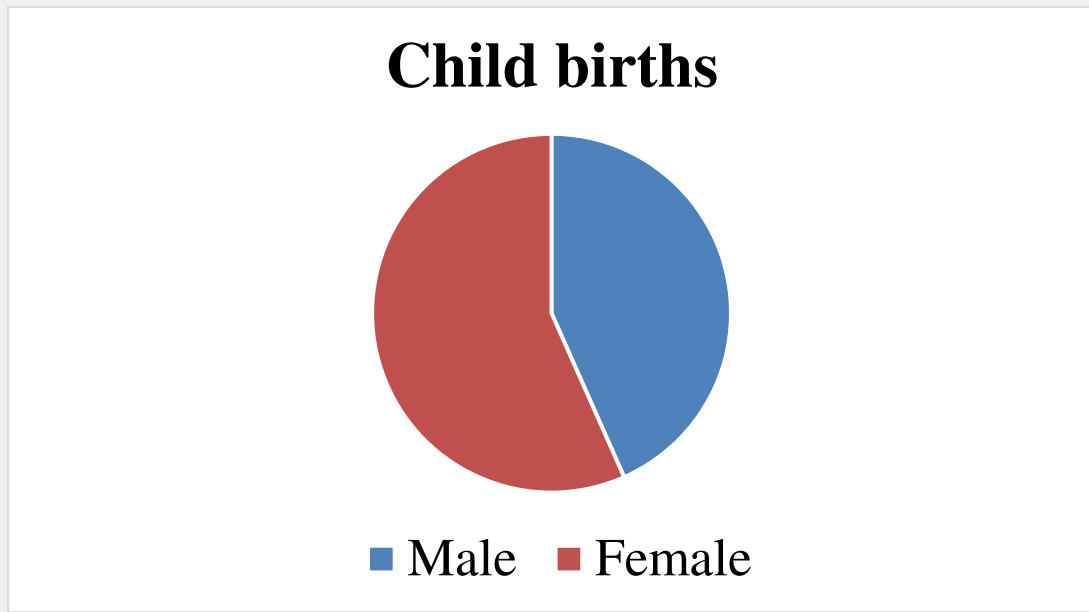
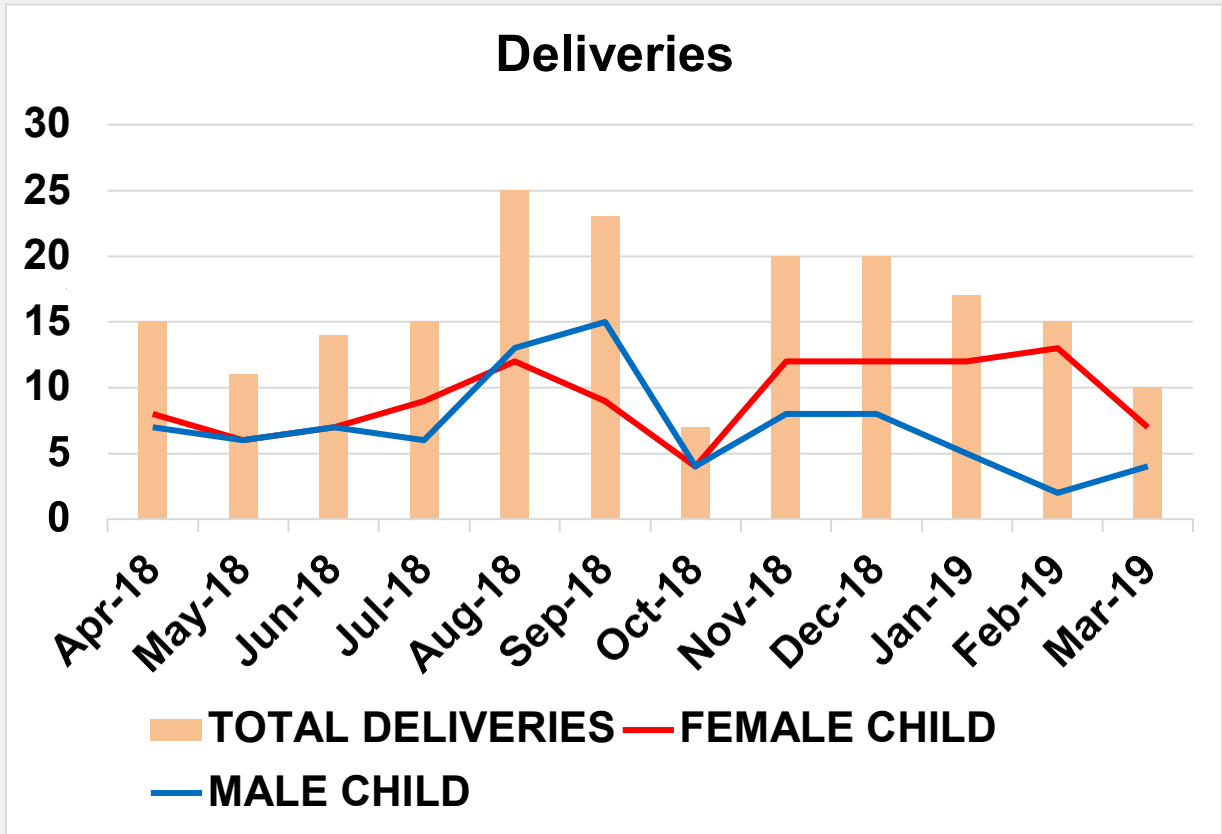
In May there was water pollution in drinking water supply in Nayagaon. Hence, we had **161 cases** of acute diarrhea and dysentery. The number of red zone category of children increased both in June and July.

- Unfortunately, in August also, the number of red zone category did not come down because of heavy monsoon rains. Adarsh Nagar and Janta Colony get flooded with rain water due to poor drainage system. Children are frequently unwell during monsoon and summer months. Intense heat adds to the unhygienic conditions.
- The battle of the red zone continues. The entire Adarsh Nagar and Janta Colony gets flooded with water. Most of the houses are immersed in water. This further adds illness to malnourished children hence increases the percentage of red zone category.



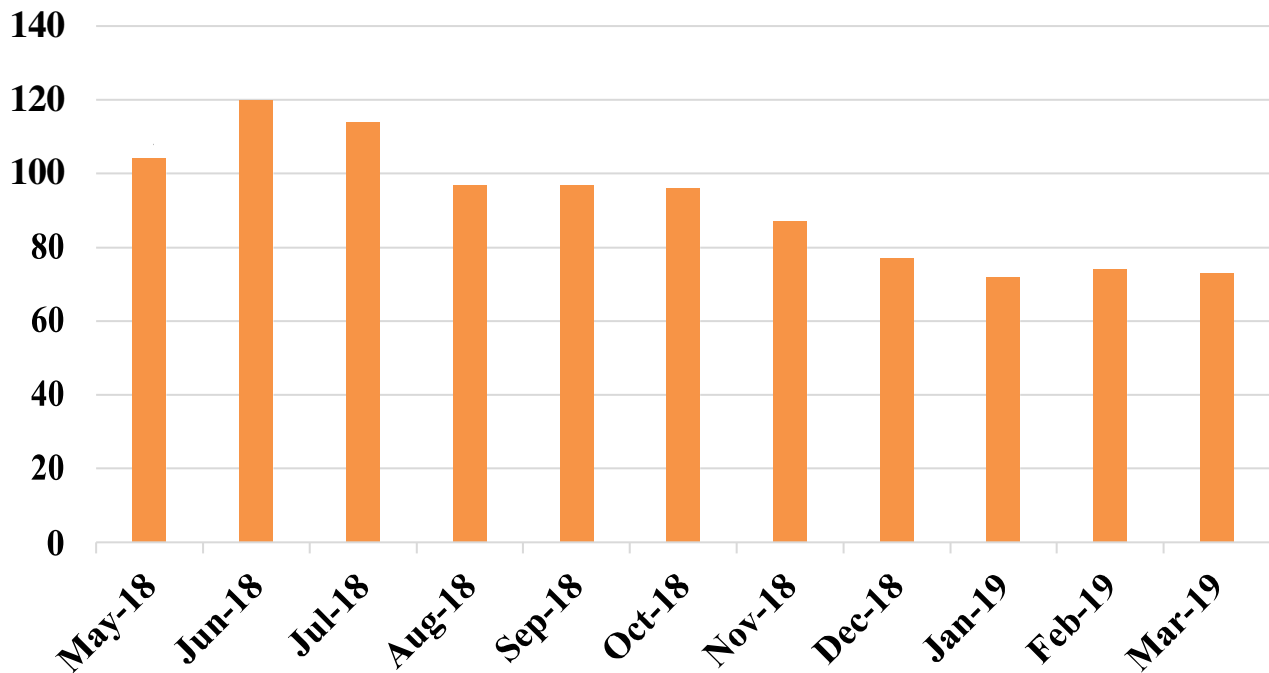
STATISTICS OF PREGNANT AND NEW BORN DELIVERIES

Month	TWINS	HOME DELIVERY	FEMALE CHILD	MALE CHILD	TOTAL DELIVERIES	NO.OF PREGNANT
Apr-18	0	0	8	7	15	111
May-18	0	1	6	6	12	104
Jun-18	0	0	7	7	14	120
Jul-18	0	0	9	6	15	114
Aug-18	0	0	12	13	25	97
Sep-18	0	0	9	15	24	97
Oct-18	1	0	4	4	8	96
Nov-18	0	0	12	8	20	87
Dec-18	0	0	12	8	20	77
Jan-19	0	0	12	5	17	72
Feb-19	0	0	13	2	15	74
Mar-19	1	0	7	4	11	73



Sex	No. of Child Birth
Male	85
Female	111

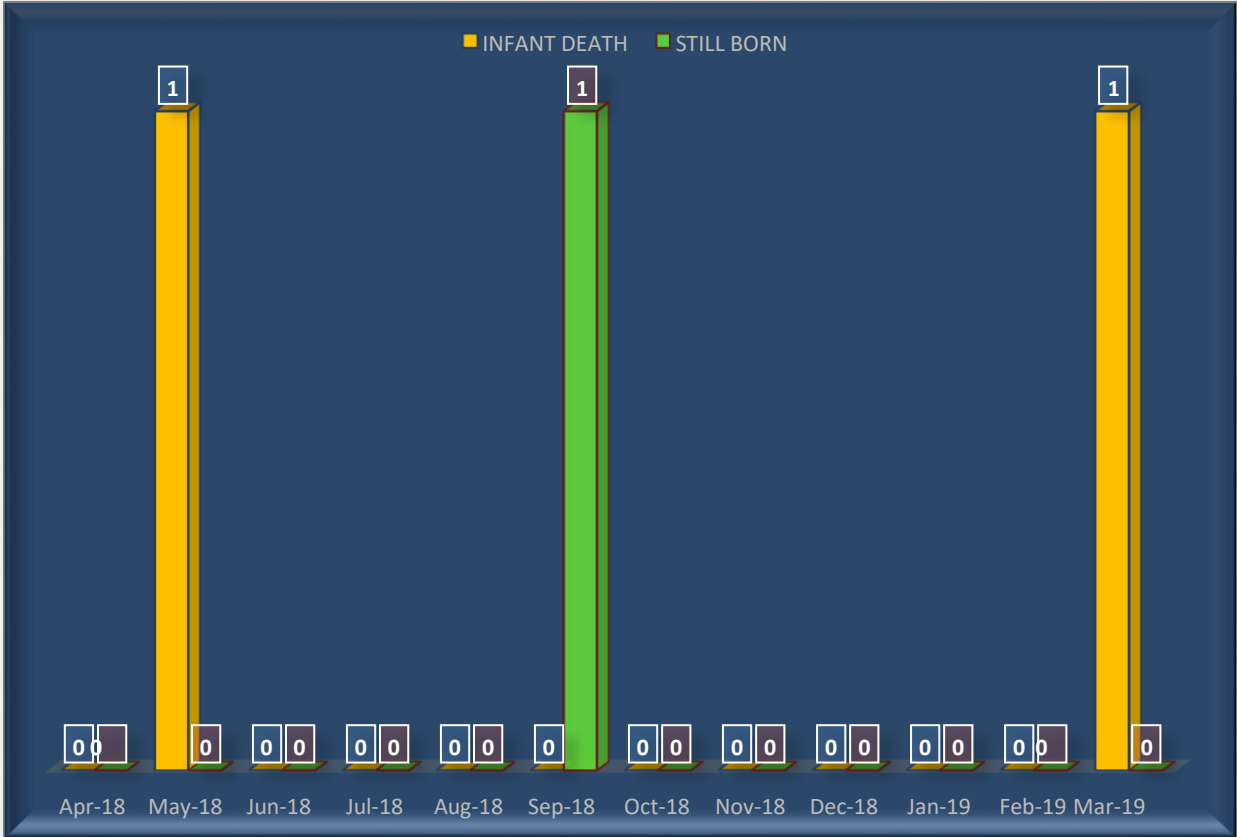
Pregnant Mothers



- ❖ One home delivery in the month of May 2018 conducted by a qualified midwife. It was emergency case due to delay and irresponsible attitude of the husband. Fortunately, baby is healthy and was taken to Government Hospital in Sector 22 Chandigarh on the following day. Both child and mother are fine. **Birth weight of the baby was 3KG.**



Month	INFANT DEATH	STILL BORN
Apr-18	0	0
May-18	1	0
Jun-18	0	0
Jul-18	0	0
Aug-18	0	0
Sep-18	0	1
Oct-18	0	0
Nov-18	0	0
Dec-18	0	0
Jan-19	0	0
Feb-19	0	0
Mar-19	1	0



- ❖ *In the month of May, one baby boy, seven months old died of congenital heart disease.*
- ❖ *In the month of September, one neonate, 7 days old died due to respiratory disease.*
- ❖ *In March 2019, a full-term pregnancy started bleeding at night. The mother reported late to hospital and fetus died in womb, a still birth.*

“CHILD ACTIVIST PROGRAMME”

This activity is provided for children between the age group of 7 years to 13 years. The schedule timings are between 3:30 pm and 4:30pm daily. The goals of the CAP Programme are: -

- ❖ To educate children and their family
- ❖ To help children develop socially.
- ❖ To promote sportsmanship
- ❖ To Increase team spirit
- ❖ To create leaders for sports and community outreach.



"INCOME GENERATION ACTIVITY"

The main aim of our income generation project is to empower women. Make them financially independent so that they can fulfill their personal needs and raise the socioeconomic status of the family. It has been seen after running this program, the self-confidence and growth which builds up in women, changes her mental make-up towards life around her. It is a good platform to generate self-esteem and courage, so that she can stand up along to face and confront life.



SCHOOL WITH A DIFFERENCE (SWAD)

- ❖ Introduction of discipline in school timings and attendance.
- ❖ Changes in teaching pattern to ensure that self-confidence of each child builds up and is able to perform independently.
- ❖ Introduction of smart class improved the pronunciation of both teachers and children. All recitation of poems with actions while performing. **Gurukul Global School** donated the furniture for smart classroom.





- Improved the standard of education by upgrading the syllabus. In math, Tables from 1 to 10 are introduced for Kindergarten class. Phonetic method of learning English so that child is able to read and write simple sentences.
- Introduction of story books and activity books for children to improve the skills.
- Library and smart class introduced in the routine curriculum.



SWAD EVENTS AND ACTIVITIES

In May 2018 SWAD celebrated Mother's Day in which all the mothers participated in cooking competition.

- In August Teej festival, Independence Day, Raksha bandhan and Janmashtami was celebrated.
- In September first terminal was conducted in which all students scored 90 % and above.
- In October Dussehra was celebrated in which students and teachers made statue of Ravan with different colored papers and burnt it.
- In November Diwali and Annual Sports day was celebrated in which all the students participated in various games and won prizes.
- In December Second terminal exams were conducted and on parents' teacher meeting blankets were distributed to all the students. Christmas celebration also took place in this month.
- In January Republic day and Lohri festival was celebrated.
- In February Basant panchami was celebrated.
- In March Final exams were conducted and all the students performed outstanding.
- 1 student graduated to St. Stephen's, 1 WAS graduated to Shishu Niketan, 1 to DAV Model Sector 15 and 1 graduated to Guru Teg Bahadur School.

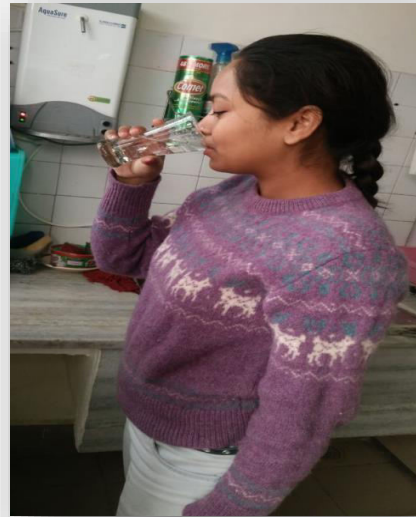


VISITORS WHO CONTRIBUTED TO UPGRADE THE STANDARDS OF DIR- INDIA

- Mr.Surjit Singh an Ex Pradhan of Janta Colony donated RO water purifier for safe drinking water for everyone and an Inverter to ensure that the frequent power cuts in Nayagaon does not hamper the functioning of Dir-India office in the Basti.



- ***Col. Avtar Singh donated a RO water purifier for DIR- INDIA Chandigarh office. This saved the funds for purchasing mineral water.***



- ***Gurukul Global School donated books and colorful furniture for SWAD School.***
- ***Mr. Sukhi Chahal, CEO and Chairman of Punjab Foundation donated a smart class for SWAD School We are grateful to Mr. Chahal for exposing our children to modern technology of teaching skill.***

“MR. SUKHI CHAHAL WITH SWAD STUDENTS”



- We are grateful to Shivalik Rotary club for renovating the 3 toilets of the SWAD School and converting one toilet into a hand washing room for the schoolchildren.



❖ Mrs. Neepa Sharma, CEO of Coloring Box donated colorful furniture, wooden book rack and story books and activity books for school children. A session has been allotted to reading stories to the children. This will encourage the children to build their reading and listening skills.



SWAD LIBRARY



❖ *Mrs. Rani Jain has sent caps and socks as Christmas presents for all school children.*



❖ *Mrs. Rani has also donated 100 blankets to shield the children from the severe cold.*



- **Mr. Amritinder Singh has donated school uniform sweaters for all schoolchildren.**



- DIR-INDIA is extremely grateful to Mr. Harsh Vardhan Jain for donating 28 cartons, containing approximately 26000 Sanitary napkins for Basti women and young girls.
- When HP's took a class on adolescent and menstrual cycle, it was learnt that most of the girls used rags and old clothes. The health and personal hygiene was serious concern to save the women from infection.



VISIT OF SBI OFFICIALS



- Representatives from SBI bank raising awareness about “**Atal Pension Yojna**” started by government for financial security. Employees have to invest nominal amount every month till they turn 60 years of age. Thereafter the investor gets pension money every month by the SBI Bank plus Insurance coverage of Rs.8, 60,000.
- Chief Manager of State Bank of India Mrs. Sunita opened Salary account for all employees in the month of March 2018



VISITORS FROM INTERNATIONAL RED CROSS SOCIETY



Mausam Bohara, Asia Pacific head for health programs of Red Cross and Noni from Nepal visited DIR-India in September. Our special thanks to Mausam for adopting five NIPP children.

Professor Meenu Gupta with Punjab University Student



- *Mrs. Meenu Gupta, Professor in English in Punjab University visited DIR- India along with one student. Punjab University English Department is keen to offer their social services to the organization.*

IFMR TEAM

A team of four from Institute of Finance Management and Research (IFMR) visited DIR-India. This team arrived early morning to assess the entire program of SWAD School from morning assembly to class activities. They took videos and pictures of children of each class. Later they attended the medical class and tailoring class. The team complimented and appreciated with a remark that DIR-India stands top in the list of NGOs' they had visited so far.



VISIT OF Mr. AMRITINDER SINGH AND TANVI



Mr. Amritinder Singh and Tanvi visited DIR-India on 15th August 2018. It was Mr. Amritinder's birthday and he chose to celebrate his birthday with SWAD children. He brought fruits, snacks and juice with him to be distributed to all children. Mr. Amritinder appreciated the medical project. He was impressed by the Medical and Nutrition knowledge our HP's have after seeing their test paper. He promised to be associated with Dir and will keep contributing to the organization in kind as and when he visits.

VISIT OF CHAIRPERSON OF DIR-CALIFORNIA



We were pleased to have Dr. Shalini with us during her short visit to India. We are grateful to her for generating Diwali Bonus for all HP's and Teachers.

VISITOR FROM NGO COLORING BOX



Coloring Box CEO Mrs. Neepa Sharma and her son Geet Sharma visited us on 3rd October 2018. They appreciated the work of DIR-India. Mrs. Neepa Sharma promised to donate Library for SWAD School in December.

VISIT OF MARKETING HEAD FROM HIMALAYAN CREAMERY



❖ **On 9th February, Mr. Neeraj Kumar from Himalayan Creamery paid visit to DIR basti office.**

VISITORS FROM SWITZERLAND



❖ On 13th February Mrs. Ashima Grover, Mr. Woolly, Mr. Raghuvinder Singh paid visit to DIR basti office to see medical program and SWAD school.

VISITORS FROM NGO OORJAA

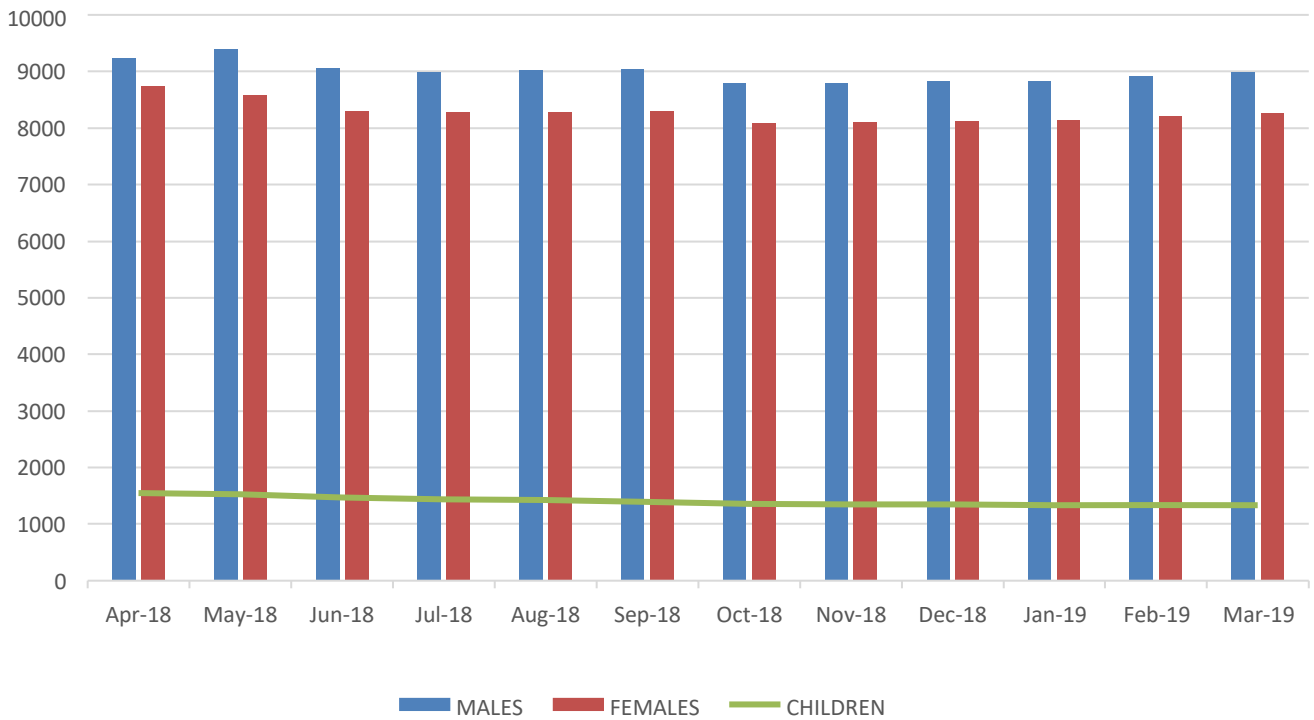


On 26th February Miss Shreya and Mr. Tarun Sharma from NGO OORJA paid visit to basti office to see medical and school program.

POPULATION OF PROJECT AREA

Month	MALES	FEMALES	Total Population Including Kids	Total No. of Children
Apr-18	9233	8746	17979	1547
May-18	9400	8572	17972	1531
Jun-18	9065	8304	17369	1465
Jul-18	8992	8275	17267	1440
Aug-18	9014	8284	17298	1420
Sep-18	9038	8298	17336	1392
Oct-18	8798	8092	16890	1352
Nov-18	8806	8104	16910	1346
Dec-18	8834	8126	16960	1343
Jan-19	8835	8134	16969	1331
Feb-19	8923	8217	17140	1332
Mar-19	8990	8269	17259	1331

Total Population



As per the records and data assembled, on an average 8.3% is the floating population in our project area.

In November 2017, we introduced a system where each Health Promoter maintains a record of total population in his/her area. Each HP must have statistics of total number of male and female in his/her area. The data of children under five and mothers was already being maintained by health promoters.

The average population of Janta Colony floats between 16500- 18000 approximately.

DEATH DETAIL

Month	Health Promoter's Name	AGE	SEX	REASON OF DEATH
Apr-18	Sangeeta	32	Male	TB
	Sushma	55	Female	Uncontrolled Diabetes
	Dimple	50	Male	Liver Failure
May-18	Sushma Bisht	7 month	Male	Congenital Abnormality
	Sushma Bisht	25	Female	Nephritis
	Meena	65	Male	Brain Hemorrhage
	Banita	38 month	Male	Unknown
	Sangeeta	65	Female	Sudden Death
Jun-18	Lata	52	Female	Cardiac Arrest
	Lata	22	Male	Murdered
	Dimple	18 month	Female	Severe Dysentery (Water Pollution). Took medicine from a local quack.
Jul-18	Meenakshi	75	Male	Natural Death
	Sushma Devi	54	Female	Heart attack
	Lata	60	Male	Cancer
	Meena	30	Male	Murdered

	Sunita	60	Female	Lung cancer
Aug-18	Meena	65	Male	Cardiac Arrest
	Sanjeev	65	Male	Cardiac Arrest
Sep-18	Poonam	24	Male	Murdered
INFANT DEATH	Banita	7 days	Male	Respiratory distress due to malfunction
Oct-18	Veena	45	Male	Suicide
	Sapna	28 months	Female	Kidney Disease
	Sushma Bisht	40	Male	Renal Failure
	Sunita	50	Male	Alcoholic
Nov-18	Sushma Bisht	45	Male	Brain Hemorrhage
	Jyoti	70	Male	Multiple organ failure
	Sunita	21	Male	Post-Operative Death (Surgery)
	Sunita	28	Male	Liver failure
	Meena	14	Male	Burn
	Meena	65	Male	Kidney failure
Dec-18	_____	_____	_____	_____
Jan-19	Sushma Bisht	55	Male	Heart attack
	Lata	80	Female	Natural death
	Sushma Devi	74	Male	Natural death
	Muskan	87	Male	Natural death
	Muskan	100	Female	Natural death
	Muskan	65	Female	Lung infection
	Muskan	62	Female	Brain TB
	Meena	70	Male	TB
Feb-19	Sushma Devi	55	Male	Heart attack
	Meena	70	Male	Multiple diseases
Mar-19	Lata	70	Male	Paralysis
	Sangeeta	55	Male	Respiratory disease
	Sushma Bisht	45	Female	Heart attack
	Sanjeev	24	Female	Accident
	Veena	0 month	male	STILLBORN

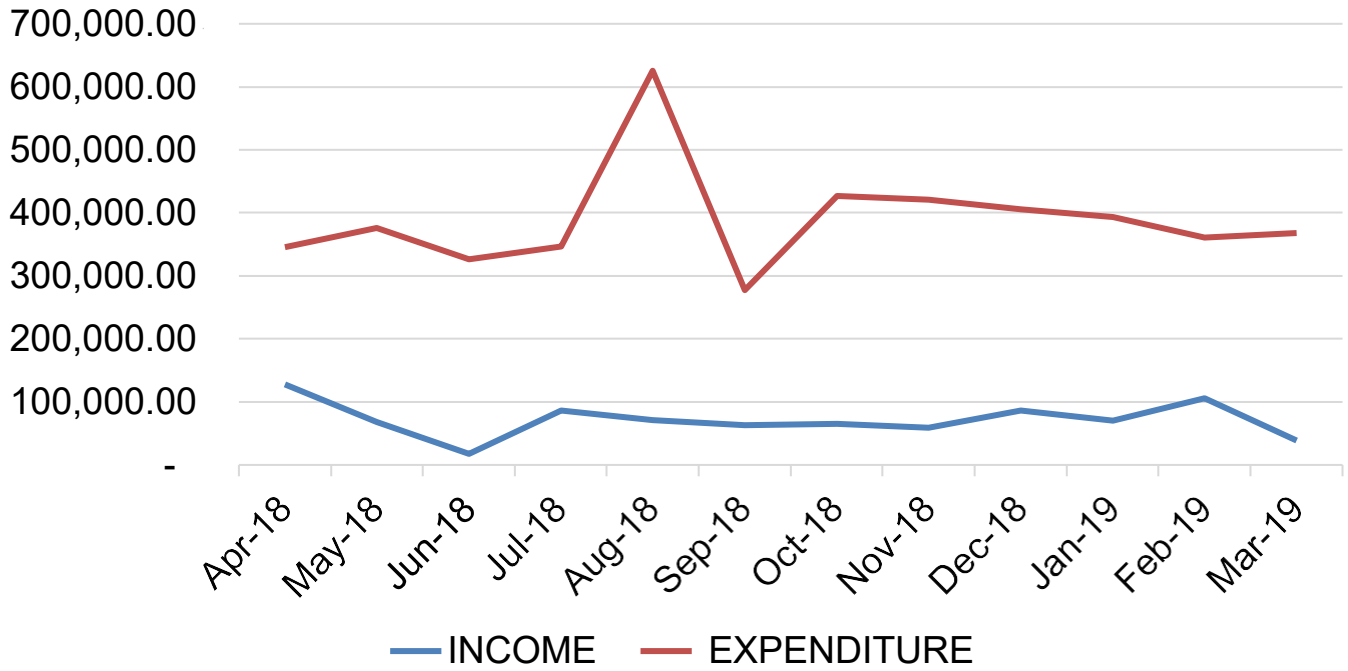
FINANCIAL REPORT

1 APRIL 2018 TO 31 MARCH 2019

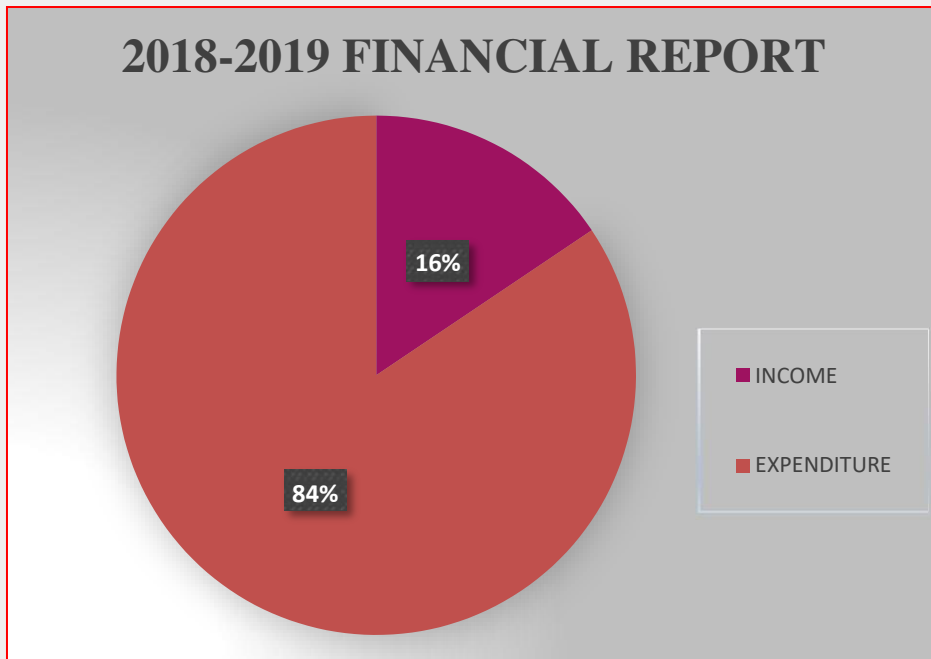
S.No.	MONTH	INCOME	EXPENDITURE
1.	APRIL	1,27,950.00	3,45,445.00
2.	MAY	68,350.00	3,75,770.00
3.	JUNE	17,750.00	3,26,000.00
4.	JULY	86,650.00	3,46,639.00
5.	AUGUST	71,894.00	6,25,509.00
6.	SEPTEMBER	62,800.00	2,77,533.00
7.	OCTOBER	65,310.00	4,26,879.00
8.	NOVEMBER	59,110.00	4,20,625.00
9.	DECEMBER	86,554.00	4,05,843.00
10.	JANUARY	70,754.00	3,93,387.00
11.	FEBRUARY	1,05,718.00	3,61,038.00
12.	MARCH	38,822.00	3,67,594.00
	TOTAL	8,61,662.00	46,72,262.00

DEVELOPING INDIGENOUS RESOURCES-INDIA

Income vs Expenditure



(GRAPH SHOWING INCOME AND EXPENDITURE FOR THE YEAR 2018-2019)



DIR-INDIA FUTURE PLANS

- DIR Professional team (Doctors and Nutritionists) will address the mothers of Red Zone Children twice a month in DIR Office. All Mothers whose children improved in their health from Red zone Category to Green Zone will be invited as living examples to motivate the reluctant mothers.
- To give additional incentives to Health Promoters who perform outstandingly well both in academics and field work.
- Each Health Promoter will maintain detailed statistics of the cases suffering from Hypertension, Diabetes/Gestational Diabetes, Ischemic Heart Disease and Thyroid in his/her areas of responsibilities. These cases will be personally addressed to improve the health status and avoid risk factors.
- Replicating the Medical program in Dhanas, Chandigarh.
- Recognition of courses by Ministry of Skill Development and Entrepreneurship, Government of India

DIR is aiming to start the following courses duly recognized by Ministry of Skill Development and Entrepreneurship, Government of India:-

1. Tailoring Classes: DIR tailoring classes to be recognized by Ministry of Skill Development and Entrepreneurship including Job Placement.

2. Starting of Health Courses for Helpers needed in hospitals and Nursing homes.

3. Starting of Domestic Attendant Classes.

DIR-INDIA ACCOUNT 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.

“FCRA ACCOUNT”

IN FAVOUR OF	DEVELOPING INDIGENOUS RESOURCES INDIA.
BANK	ICICI BANK.
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