

DEVELOPING INDIGENOUS RESOURCES INDIA

Annual Report 1 Jan. - 31 Dec. 2015

"Be the change that you want to see in the world."

- Mahatma Gandhi

705-C ADARSH NAGAR, NAYAGAON, MOHALI

INTRODUCTION



DIR is a non-profit organization with no religious or political affiliations. In India, it has three major objectives – health improvement, education, and income generation. DIR is funded *exclusively* by donations, which incidentally, the government has approved for income tax deduction. Our AIM is to improve the quality of life of those in greatest need without regard to class, caste, creed, color or any other physical characteristic other than need itself. In keeping with its name, Developing Indigenous Resources, DIR does not set out to solve problems. Instead, it empowers those in need to solve their problems through education, training, and planning and implementing effective programs.

Developing Indigenous Resources (DIR) strives to improve the lifestandards in the neglected areas of our country, particularly urban slums.Our chief expertise is in developing the resources of the residents and helping them to solve their own problems through education and demonstration in committee meetings. The strength of this NGO is that 96% of employees are women from the slum, as it believes in women empowerment.

Infant Mortality Rate and Maternal Mortality Rate are high in our country. In the year 2006, DIR adopted a population of 10,000 residents which has now increased to 18,000 in and around Janta Colony of Nayagaon, District Mohali Punjab. Our first project in Janta Colony was a Medical

program to look after children under 5 years of age, immunization of mother and child, Antenatal and Post Natal care of pregnant mothers and motivation towards Hospital deliveries. Our emphasis was to bring down the Infant Mortality rate and Maternal Mortality Rate.



CONTENTS

- **❖**MEDICAL CAMPS
- **❖**IMMUNIZATION PROGRAMME
- **❖**D.O.T.S.
- ❖ANTE NATAL AND POST NATAL CARE OF PREGNANT MOTHERS
- **COMMUNITY MEETINGS**
- ❖NUTRITION IMPROVEMENT PRIORITY PROGRAMME (NIPP)
- ❖SCHOOL WITH A DIFFERENCE (SWAD)
- **❖INCOME GENERATION ACTIVITY**
- *****EVENTS



MEDICAL CAMPS

1. DIR launched its Vitamin A program at the end of January 2015. DIR linked up with the NGO Vitamin A Angels in order to reduce Vitamin A deficiency in children under 5. We began the launch of Vitamin A immuization through talks and demonstration by educating the mothers on the deficiency of vitamin A can lead to blindness and skin diseases. A large number of mothers

were made aware about the new Vitamin A capsules which comes in two strengths, 100,000 unit meant for children less than 11 months of age and 200,000 unit for children between 1 year to 5 years of age. These doses are given twice a year ,one after every six months. On the first day of the launch 31 children were immunized. A successful message was spread in the *Basti* that all mothers came on their own to get their kids immunized for Vitamin A. The total of 1,575 children of Janta Colony were immunized by DIR's immunization health program.

2. In 2015 we had two cases of Swine Flu in the month of February. This was a great worry when one patient died. We immediately started holding community meetings, educating the masses on preventive measures. "Not Transmitting the Flu," issued a cloth handkerchief to all staff and rigidly enforced handkerchief use to muffle coughs and

sneezes. There after no case of swine flu was reported in our project area.

3. DIR-India organized an eye camp with the help of Professor Dr. Amit Gupta from PGI for all the residents of Janta



Colony in our *Basti* office. Dr. Lomi, and a technician set up one of our larger rooms to their liking. They had an efficient system and the waiting line was no longer than 3 minutes. A total of 118 patients were seen by the doctors. They gave out required medicines at no cost. The doctors were given a tour of our DIR center. They appreciated the work the organization was doing. The doctors offered to see the referred patients by DIR on a regular OPD and help economically weak patients of Janta Colony for surgery if required without any cost.

4. In September, there were two medical camps. On 6th of September, doctors were called from Post Graduate Institute of Medical Education and Research (PGIMER). In this camp, 113 persons including our Health Promoters came for checkup. This camp was for patients of Hyperthyroidism, Hypertension and Hypotension. On the 8th of September, we had another Medical Camp at our DIR Centre with Specialists. The gynecologists attended to 66 patients and the Ophthalmologist attended to a total of 93 patients. People were very



- happy to have such camps at their place where they have free checkup and medication.
- 5. On 27th September, 2015, we had second meeting with the parents of the children who are under our NIPP Program. 33 parents attended this meeting. Our Nutritionist, Mrs. Natasha addressed the parents and educated them how to prevent Malnutrition. Parents whose children went to green zone from red zone shared their personal experience and gave their tips how to overcome malnutrition in children. This workshop of parents was a big success as everyone who attended the meeting were made aware the importance of healthy meal for development and growth of the child.
- 6. "DIR organized a Mega Medical Camp. In this camp, we had specialists from PGIMER (Post Graduate Institute of Medical Education and Research), Grewal Eye Institute, Fortis Hospital, and Dental Team from Dr..Kalra's clinic. Doctors from PGI saw 57 malnourished children. Ophthalmologist from Grewal Eye Institute screened and tested 131 patients. Fortis team performed free on the spot blood sugar test and took blood pressure of 160 patients and the Gynecologist saw 56 women. A dentist and technician from Dr. Kalra's practice attended to 74 patients performing basic fillings, Scaling and



routine checks in their mobile Van "Smile Express." The camp took place at our DIR Centre from 9am to 5 pm.

IMMUNIZATION PROGRAMME

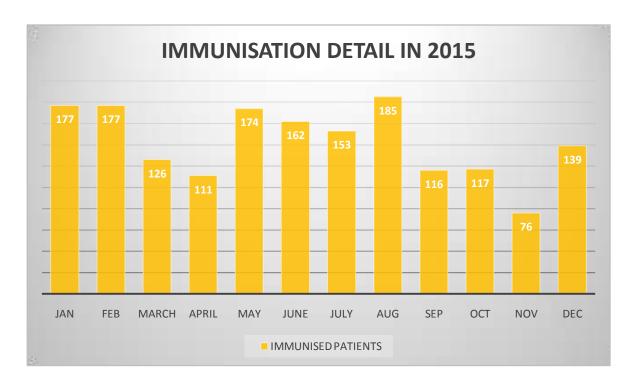
Every Wednesday is designated as immunization in collaboration with Punjab Government Health Services. The following shots are given to children:



- 1. HEPATITIS B
- 2. DPT
- 3. DPT-B
- 4. TT
- 5. TT 10 YEAR
- 6. MEASLES
- 7. BCG
- 8. PENTAVALENT
- Immunization of Pregnant Mothers with TT shots.ss

DIR provide Iron tablets along with folic acid to pregnant ladies and also gives nutritious food to them on the immunization day. Vitamin A Capsules and Deworming tablets are given to children under 5 years of age every six months.



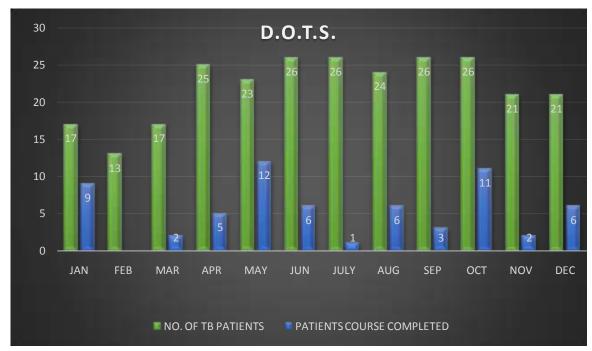


- In March, the immunization was done only once due to strike of ASHA workers. As routine it is done every Wednesday.
- In September and October, we had only two Immunizations as ANMs were on training for two weeks. We have 10% of population is migratory in this slum due to which some children miss the dose. Though we do educate the parents on the importance of immunization for child's health.
- In November The Punjab government has introduced Polio injection. Earlier it was oral drops, but now injections are also available which will



be given with DPT I and DPT II. Second dose of polio is to be given with DPT III.

D.O.T.S.



The number of TB patients was increasing day by day. The local Health Department, at our request, sent a specialist to deliver a public talk on "Preventing TB."

• In August, DIR is working on a project called Akshya under the Voluntary Health Association of India (VHAI). The project has many programs running under it and the most extensive one is Akshya Samvad, which is a door-to-door household survey. We were given a target of 500 households helping spread awareness about TB.





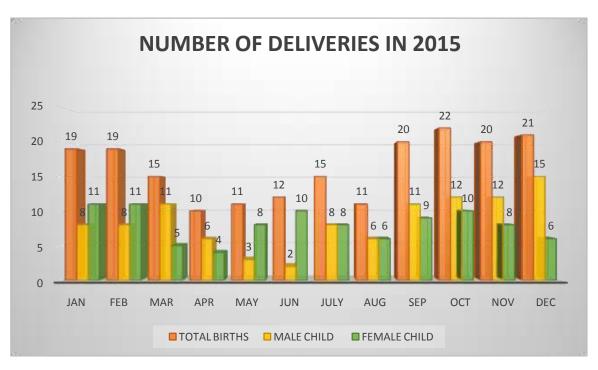
ANTE NATAL AND POST NATAL CARE OF PREGNANT MOTHERS



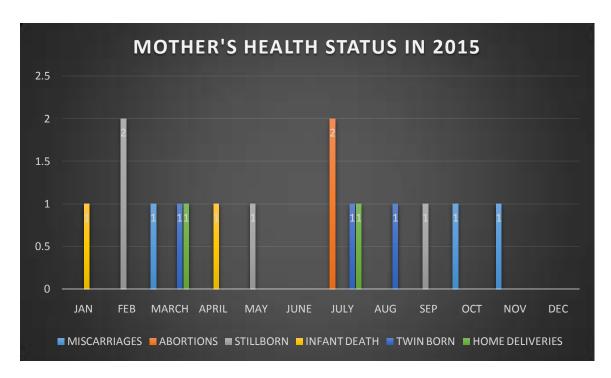
- DIR conducts regular classes on health education by giving demonstration on healthy diet, breathing exercises and awareness on reproduction and Pregnancy.
- Volunteers from Punjab
 University conducted
 professional yoga classes and
 deep breathing exercises along

with meditation to ease mental stress in pregnancy.

• In September 2015 DIR hosted a medical camp in collaboration with Primary Health Centre (PHC) in which a gynecologist participated in checkup of *Basti* ladies. 159 Women patient benefitted from this camp.



- In the year 2015 we had two neonatal death.
 - 1. The child died 2 hours after birth due to a thyroid imbalance of the mother in pregnancy.
 - 2. Congenital abnormality of the heart. Baby died due to oxygen insufficiency.
- In addition we had 3 still born births.





COMMUNITY MEETINGS

• DIR's project area had two cases of Swine Flu in February 2015. This was a worry as one death occurred. DIR Team geared up to hold community meeting on how to prevent the spread of the disease by using handkerchiefs or muslin clothuse to mufflesssFebruary



made us apprehensive, and this apprehension quickly turned to worry when one patient died within a few days. We immediately mounted a crash course on "Not Transmitting the Flu," issued a cloth handkerchief to all staff and rigidly enforced handkerchief use to muffle coughs and sneezes. There is no evidence that our corrective action influenced the outcome, which was that no more cases have been reported, but our consciousness was certainly raised by our realizing how undisciplined we had become where disease transmission in concerned, and we view our new emphases on stopping disease transmission to be a very positive event.

• The second week of March was Glaucoma Awareness week in India, and



some of our staff participated in that event.

• DIR held a community meeting on May 3rd with families in which the children are severely malnourished. This gettogether was held in the

hopes of reaching out to the parents of NIPP children and to convey information aimed at improving their children's health. Approximately 40-50 parents attended, as well as Dr.Anju, a visiting psychiatrist.

NUTRITION IMPROVEMENT PRIORITY PROGRMME (NIPP)

NIPP stands for nutrition improvement priority program. The weight and height of the child reflects the health status of the child under 5 years of age. In a population of 18,000 approximately we have around 1,625 children under five years of age. In this generally 11% to 12% kids are in red zone category, which means the weight of a child is more than 3Kg underweight for that



particular age. Children which are more than 4kg underweight come under high priority zone. DIR-India feeds children in high priority zone of poor socioeconomic status families who cannot afford high protein diet. In this

program we include few pregnant mothers with weak health status due to domestic violence, drug addiction and alcoholism.

Our Dieticians plan a weekly menu comprising of high protein diet, which is fed to children and mothers under direct supervision.

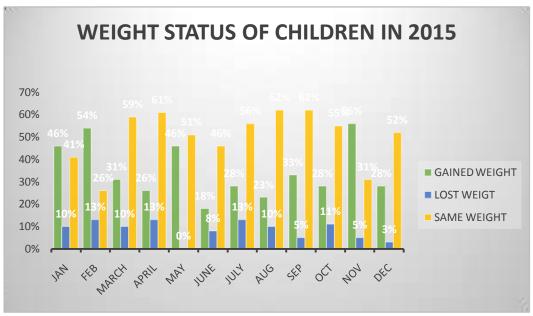
In NIPP the meal provided as follow:

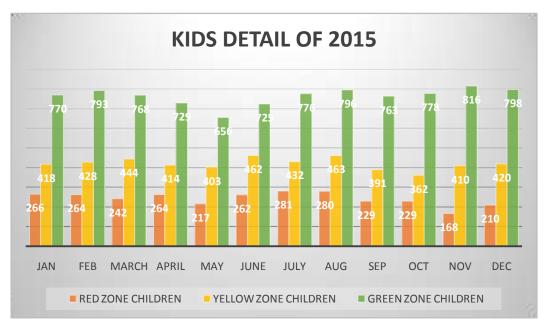
- 100 ml milk
- 1 banana
- 1 egg
- Khichdi / Daliya/ Soya Nutri / Black Chana/ Poha



We included 39 malnourish, economically weak children every month in the NIPP. Also the iron syrup, deworming tablet and vitamin A capsule were given to malnourish children.







SCHOOL WITH A DIFFERENCE (SWAD)



Young children loitering around in the *Basti* motivated DIR to start a school program and it was named "SCHOOL WITH THE DIFFERENCE". It is a kindergarten school in Janta Colony, Nayagaon, which was opened in 2008. In this school we have *basti* children between the age group of 2.5 to 6 years.



English medium It is an school. Our education curriculum has both written and oral Hindi and English, mathematics, along with creative activities. We practice playful methods of teachingto DIR interest. generate promotes education in low rates to the needy and help them to break the vicious



circle of poverty and ignorance. All SWAD children graduate to be bold, smart, skilled and confident to face any interview in top schools of Chandigarh.

• In March teachers had interactive training sessions given to them by a teacher-trainer from Hamari Kaksha (HK) School. HK is an

excellent, well-established NGO, which runs a very good after- school program to help students develop into wholesome adults, and also has expertise in improving academic performance. We are grateful to HK for their generous help and for sharing their helpful experiences with us.

- School was on break for the month of June, so DIR had a break from all the ruckus.
- Our School celebrated Independence Day with our little kids. Students were told the importance of Nation and how our people had made it free. Students made Indian flags with the help of drawing sheet, crayons and sticks. The younger lot had flags pinned to their uniforms. Kids also learnt about the different kind of animals, their sounds, their pictures and they had enjoyed this activity.
- They were also told how to make sunflower with crumple pieces of yellow and black paper or newspaper. The school also took on another teacher for the pre-nursery class.
- Rakshabandhan, an Indian festival celebrating a sister's love for her brother who protects her. Students were told to make Rakhis, the traditional thread that is tied around the brothers wrist by the sister to remind him of his duty to



- protect her.
- In the month of September, children had learnt new things. We told
 them the importance of fruits and vegetables. Teachers drew fruits and
 vegetables on drawing sheets and told children to colour them. Teachers
 also made fruit and vegetable Salad and asked the kids about its taste
 and colour. Kids also made Ladybird with the help of stone and water
 colours.
- We had celebrated our SWAD's Sports day on 16thOctober, 2015. There were games like Sack race, Frog Race, Three Legged Race, Ball in Spoon Race, Tug of War. Prizes were distributed to them by our C.E.O. and one of our trustees, Ms. Joyshree Lobo.
- DIR's Cultural Evening was celebrated in November in which our school kids participated in Fancy Dress. They dressed themselves in Army officer, King-Queen, Hindu God and Goddess, Actor-Actress etc. One of our children group participated in dance which was prepared by DIR's Field Coordinator Mr. Sanjeev. Neeti was awarded as the Best student of School. And Mrs. Manjeet was given the Award of Best Teacher. Teachers also sung a prayer in beginning of the function.



INCOME GENERATION ACTIVITY

The main aim of our income generation project is to empower women. Make her financially independent so that she can fulfill her personal needs and raise the socioeconomic status of the family. It has been seen after running this programme, the growth and self-confidence which build up in women changes her mental make-up towards life around her. It is



good platform to build a female gender's self-esteem and courage so that she can stand up along with their male counterparts to face and confront life.

STITCHING

Several of the women who have taken the tailoring class, now make products at home using fabric we provide, and are getting paid, per item, when their products pass our quality-control inspection. They make cloth purses, re-usable giftwrapping for a bottle of wine, cloth cases for iPads, Salwars, etc. For the most part we send the products overseas where they



are marketed in the U.S., France, and Switzerland. A new product we are trying this time, thanks to Maya Shaw's help, are heavy scarfs. These seem to be the rage in the U.S. and we have sent a sample installment of 10 scarfs to be sold and check the markets for such items. We are looking to shift our products and try to tailor towards the youth of America. We will run this as a trial and see is these are viable profit making fund-raiser.

In October, 15 women are attending tailoring classes. Two salesmen from USHA came to DIR to demonstrate their electronic sewing machines to our women. These machines are easy to use and time saving. We are now hoping that we can assist women to increase their production by getting three or four donors to provide electric sewing machines.

BEAUTICIAN TRAINING CENTER

Ms. Loveleen teaches girls I basics of threading and started to learn different hairstyles. After few months their skills have expanded well beyond threading and hairstyling. The classes have given these young women skills that may be used to generate their own incomes. The timing of the class is 11am-1:30pm, Monday to Friday. They have learned to make beautiful hena and hair designs. Dr. Asha spent time with them explaining the medical benefits of massage, and what affects their skills can have on the body. Their skills have expanded and their personalities are also changing. This is very good for us that these girls will be working in beauty salons with a better understanding of internal beauty.





EVENTS

4 December, Developing Indigenous Resources completed its ten years of service in Nayagaon. It was a grand celebration where there were many programmes

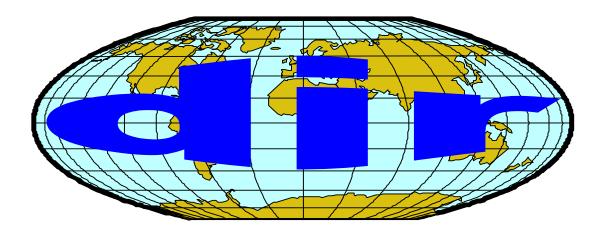
held. Punjabi Dances, Educational Skit, Instrumental plays, Honors & Awards, Fancy Dress. The entire staff did participate in it. Function began with a religious prayer sung by our school (School with a Difference) teachers. Health Promoters took part in skit and dances. Our *busti* children did outstanding Western Dance. Everyone was appreciating them. Two Boys from *busti* sing songs and played guitar.

Our Beauty school girls did fashion show in which they were dressed in beautiful Indian Sarees and Indian Salwar Suits. Their Mentor Mrs. Lovely also did a stage walk with her students.

Our chief guest of the evening was Additional Director General of Police, Mr. CSR Reddy. He shared his views with the audience. He also announced the prizes and awards. Ms. Sarita was awarded as the best Health Promoter of DIR and Mrs. Manjeet was selected as the best teacher of the school. Mr. SM Sharma, President of DIR and our Trustee Mrs. Joyoshree Lobo were also the part of the celebration.

Self-Defense Programme:

Some of the staff members of DIR believe self-defense is a very necessary exercise to delve into because it helps foster confidence and self-pride. We believe women, regardless of age, should learn how to protect themselves and prevent harm. Under this same belief, a couple of our very own Health Promoters attended a free training programme in Sector 26, Chandigarh. Maya and Sangeeta feel proud of their accomplishment and found it to be a self-empowering experience.



DEVELOPING INDIGENOUS RESOURCES INDIA

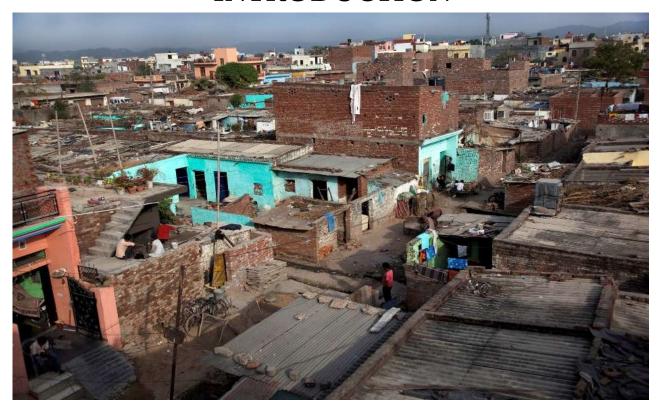
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"Never stop fighting until you arrive at your destined place that is, the unique you. Have an aim in life, continuously acquire knowledge, work hard, and have perseverance to realize the great life."

- A. P. J. Abdul Kalam

705-C ADARSH NAGAR, NAYAGAON, MOHALI

INTRODUCTION



Developing Indigenous Rescources (DIR) is a non-profit organization with no religious or political affiliations.

In India, its main objectives are – Health Improvement, Education, and Income Generation. DIR is funded exclusively by donations which are covered under ORDER U/S 80 G(5) (vi) of The Income Tax Act, 1961 and ORDER U/S 12 AA of THE INCOME TAX ACT, 1961.

DIR's principle focus is to improve the quality of life of those in need regardless of class, caste, creed, color or any other physical characteristic other than need itself. It strongly beleives in women empowerment and hence 96% of employees are women.

True to its name, DIR is set out to empower the needy to solve their own problems through life skills. By means of medical education, field training, planning and implementing the knowledge, it strives to improve the life-standards in the neglected areas of our country, particularly urban slums (also called Basti). Through demonstrations and community meetings DIR makes the residents self-sufficient and confident.

India has a high Infant Mortality Rate (IMR) and Maternal Mortality Rate (MMR). In the year 2006, DIR adopted a population of 10,000 residents

which has now increased to 18,000 in and around **Janta Colony of Nayagaon**, **District Mohali Punjab**. Our first project in Janta Colony was a **Medical Program** in which health status of children under five, immunization of mother and child, antenatal and post natal care of pregnant mothers and motivation towards hospital deliveries. Our emphasis was to bring down the Infant Mortality rate and Maternal Mortality Rate.

CONTENTS

- **❖MEDICAL CASE**
- ***COMMUNITY MEETINGS**
- **❖IMMUNIZATION PROGRAMME**
- ❖D.O.T.S.
- *****ANTE NATAL AND POST NATAL CARE OF MOTHERS
- **❖NUTRITION**IMPROVEMENT
 PRIORITY
 PROGRAMME (NIPP)



- **❖CHILD ACTIVIST PROGRAMME (CAP)**
- **❖INCOME GENERATION AND WOMEN EMPOWERMENT**
- **SCHOOL WITH A DIFFERENCE**

MEDICAL CASE

On 31st March 2016, DIR- India dealt with an unusual case although common in India. A couple with a child had recently moved to Janta Colony. The child had been suffering from a high a fever with rashes all over his body for a week and the family refused to provide him with medical care. One of our Health Promoters (HP) brought up the case during the weekly training by Dr. Fredrick and Dr. Asha Katoch who



immediately left to see the child. The child was hyperpyretic gasping for breath; it was a clear case of Chicken Pox but the family believed the fever had come upon the child due to wrath of a female goddess. On that account, the child was not bathed and the entire family ate only boiled rice and potatoes. The child was being fed with junk as he demaded mostly that; failing to meet his demands would further make the goddess angry was the common belief. Only a quack (Baba) was allowed to check on the kid who reinforced family's conviction to keep away from doctors and hospitals.

The child was in delirium when our doctors checked him up. Pulse Rate was above 160/mt, Respiratory Rate was 35 to 40 per minute with high temperature. The family had to be counselled for two hours before they allowed our doctors to take the child to a hospital. The child was taken to PGI , Referral and Research Institute and Hospital, Chandigarh. Without further delay, the child was put on oxygen, and all monitors were connected and corrective measures were taken.

Our compliments go to the entire team of emergency doctors and paramedical staff to revive the child. The child is healthy and stable today, and this incident changed the attitude and belief of entire community in the area. It has remained a vital catalyst to informed people of *Basti* (slum). Their faith in our HPs and their counsel is more than ever. The Quack never returned to Janta Colony.



COMMUNITY MEETINGS

Summer India in can unforgiving. To keep up with the rising heat, people of the Basti natutally prefer cold drinks and ice creams without being bothered about the unwholesome ingredients and methods used for their preparation. A lot of times these treats are produced in unhygenic conditions that serious health issues. result in can Diarrhoea and Dehydration is the most

common of all. Keeping this in view, DIR has repeated field demonstrations on how to make homemade Oral Rehydration Solution (ORS). It is being done year after year in the Basti.

The Health Promoters go from home to home endlessly weighing children, classifying their nutritional statistics, advising mothers on food, health and hygiene. They make their many rounds of inspection to spot signs of preeclampsia or other possible problems; cheerfully giving care to elders with Hypertension, Diabetes and Thyroid and other Cardiac related



ailments. Our HPs have built a well-earned reputation amongst their follow-residents in our project area. They are popular, well liked, respected and welcomed. Their work is important, often difficult and invariably demanding.

IMMUNIZATION PROGRAMME





Ever since DIR's inception, it has a collaboration with Punjab Government in running the Immunization Program every Wednesday in the project area. The Health Department sends health staff (Asha Workers & Medical Supervisors) who bring their supplies and skills to our centre. In Janta Colony, Nayagaon (project area) 100% of the children under the age of five are fully immunized and all pregnant women are immunized against

Tetanus. There are regular Antenatal and Postnatal check-ups for them which include Blood Pressure and Body Weight monitoring.

We provide them with Multivitamins, Iron, Folic Acid and Calcium supplement tablets. Additionally, DIR serves nutritious food to all pregnant mothers and children visiting this program.



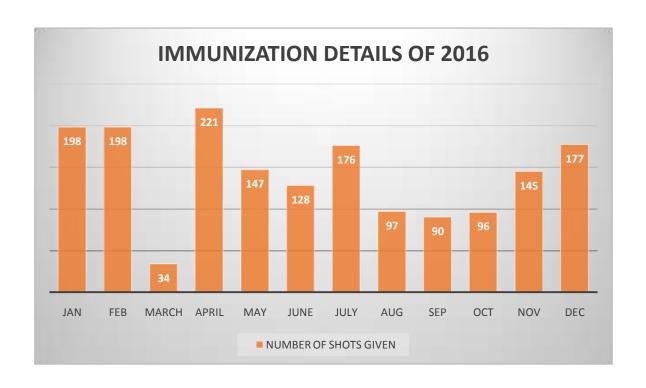
The diseases covered under the Immunization Program are as below:

- HEPATITIS B
- DPT
- DPT-B
- TT
- TT 10 YEAR
- MEASLES
- BCG
- PENTAVALENT

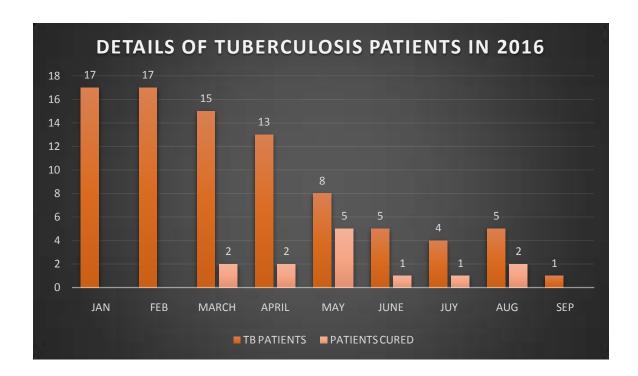
In collaboration with Vitamin A Angels, we also provide Vitamin A capsules of 100,000 and 200,000 unit for



children up to 11 months and 1-5 years, they are given to each child every six months. This NGO also provides us with Deworming Tablets for the entire Basti. Deworming is done both for adults and children twice a year.



D.O.T.S.



In Janta Colony, for eight years D.O.T.S. patients were monitored and managed by DIR. With introduction of government's new policy in September 2016, this project was handed over to Asha Workers of Punjab Government.





ANTE NATAL AND POST NATAL CARE OF MOTHERS

DIR's one of the main obejctives is to look after the health status of pregnant and lactating mothers to bring down IMR and MMR. Detailed information about pregnant women and deliveries in 2016 is as below:

Total no. of pregnant women-1277

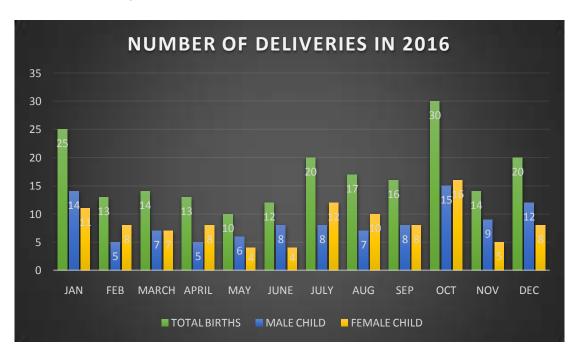
Total deliveries- 204

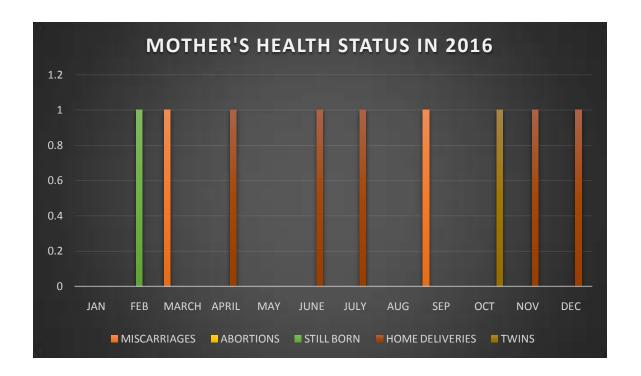
Total no. of children born- 205 (includes twins)

Total female child- 101

Total male child- 104







NUTRITION IMPROVEMENT PRIORITY PROGRAMM (NIPP)

for NIPP stands Nutrition **Improvement Priority** Program. weight and height of a child reflects the health status of children under 5 years of age. In a population of approximately 18,000, we have around 1,625 children under five. Among these, 11 to 12% children are in Red Zone category, which means the weight of a child is more than 3kg underweight for that particular age. Children who are more than underweight come under High Priority



Zone. DIR India feeds children in the list of High Priority Zone and who belong to poor socio-economic status. It has been observed that these

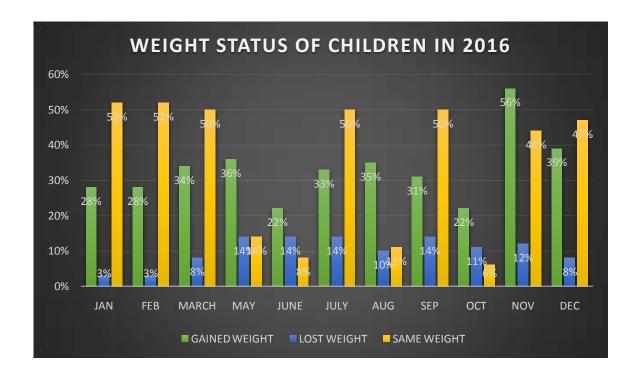
children mostly in protein and their families cannot afford a high protein diet. In this program, DIR also includes a few pregnant mothers with weak health status.

Our Dieticians plan a weekly menu comprising of high protein diet which is fed to children and mothers under direct supervision.

In NIPP, the meals provided are as follows:

- 100 ml milk
- 1 banana
- 1 egg
- Khichdi / Daliya/ Soya Nutri / Black Chana/ Poha





NUTRITION TRAINING

National Nutrition Week is celebrated from 1 to 7 September every year. Nutrition is the focal point of health and wellbeing. 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.

Teachers SWAD (school run by DIR) observed that kids carried unhealthy food in their lunch boxes. Most of them carried plain chapati with sugar or pickle, biscuits, instant noodles, etc. The teachers were alarmed and



brought it up to DIR's administration which resulted in a workshop for parents by professional Dieticians from DIR.

The workshop for parents was held in July in presence of the teachers to educate them on good dietary habits, balanced diet, nutritional needs of children and bad effects of sugar and junk food. A number of innovative ideas to prepare nutritious and palatable food were discussed with the parents. Parents were given easy recipes like that of Poha, Upma, Besan Chilla, Black Gram Chaat, Stuffed Parantha with seasonal vegetable, vegetable Pulao, etc., which they could send in the lunch boxes of their children to school.

The workshop was a huge success and it is very satisfying to see children bringing and eating healthy food for lunch.

We celebrated the first week of **August as Breastfeeding Awareness**

Week. Until now breastfeeding is usually the most "highly effective and convenient practice" to be followed by any new mothers. It is recognized as the best way to provide newborns with the nutrients they need. WHO recommends exclusive breastfeeding until a baby is six months old and continuous breastfeeding in the addition to nutritious complementary foods for up to two years. Unfortunately, that information is not universally appreciated and we are obliged to devote much of our time to educating mothers. Given that WHO has made August "Breastfeeding Awareness Month" we use it as a reason to emphasize on it more than ever. We schedule many discussions with groups of women to talk about the advantages of breastfeeding and set about clearing up doubts and dismissing misconceptions. Additionally, we reinforce the idea that a fully nutritious diet is absolutely essential during pregnancy and lactation time.

DIR also celebrated October 16th as **World Food Day**. The day is celebrated to honor the founding of the Food and Agriculture Organization of the United Nations in 1945. World Food Day is also known as "Food Engineer Day." We used it as an opportunity to spread awareness about hunger and poverty and how to reduce these evils.

Global Iodine Deficiency Disorders Prevention Day celebrated on 21st October encouraged us to educate children and women about Iodine Deficiency Disorder (IDD). It is one of the most preventable and prevailing micronutrient deficiencies, which mainly affect small children and pregnant women. IDD can result in spontaneous abortions, brain disorders and low mental development for too many people.



CHILD ACTIVIST PROGRAMME (CAP)



CAP was started in April 2009. As the name suggests the program is conducted for children between the ages of 7-13 years. It is held daily between 3:30 and 4:30pm. The children of Janta Colony are assembled and then divided into groups of about 20 each. Every group is led by two HPs and the group meets up twice a month for social activities. The HPs ensure the activities are a fine mix of education and fun for the children. The motive behind conducting these activities is simple: **to educate children and their**

families, to help the children develop socially, to inculcate a sense of sportsmanship and team spirit, to build leaders for sports and community outreach.

Given below are a few of the activities performed under CAP:

<u>Dice Game:</u> It's our own version of the board game **Snakes and Ladders (Saap Seedi)**. Along

with numbers there are pictures of various nutritious and junk foods on the board. Before starting the game, HPs educate the children about **balanced diet**. Children are then divided into four groups. Every child in the groups takes turn to roll the dice. For example, if a child from a group throws 5, their game piece is moved



forward by five and say it lands on a picture of an egg, the child has to speak a line or two about egg and its importance in our diet, and by doing so the team scores an extra point. Similarly, if the game piece lands on any junk food, e.g. a cold drink, the game piece is moved backward by 5. The objective of the game is to navigate the game piece and win the game. The team that wins the game is felicitated. It's very popular with the kids and is based on luck like any other board games.

Ring Throw Game

In this game, the HPs have to label cups/ bottles according to the topic chosen. For example the topic is 'sources of vitamin C.' The bottles will be labeled as: orange, sprouts, tomato and lemon, etc. The children are divided into teams and they have to aim to toss the ring around a bottle relating to the topic. If the rings loops around a bottle with matching (to the topic)

label, the team scores a point. Every child is given three chances to throw the ring.

HPs also make sure to involve the children in many outdoor games alongside to ensure the children and parents don't lose interest in CAP. Kho-Kho, Badminton, Cricket and Football are the most preferred amongst the children. There's a monthly topic for Medical Training of the residents in



which the HPs integrates education with games (Puzzles, Musical Chairs, etc.) for children and adults alike. Awareness on Malaria, Dengue, Chilblains, Balanced Diet, High Protein Diet, Dehydration, Cancer, Diabetes, Thyroid Disorder, Obesity, Liver and Kidney diseases, Decay of teeth and weakness of Bones, etc. is spread year after year.

CAP aims to have a better society by educating children in the hope that it will have a positive spell over effect on their friends, families, neighbours and society as a whole.

INCOME GENERATION ACTIVITY AND WOMEN EMPOWERMENT



Pandit Jawaharlal Nehru once said, "You can tell the condition of a nation by looking at the status of its Women." It is a very relevant and positive statement and DIR feels no differently about the status of women. By providing vocational training to girls and women, DIR increases their chances of employability and self-employment.

A lot of times we come across girls and women who either got no education or they dropped out of school. Hence our focus is to have training

sessions for them under **Income Generation Program**, so that they acquire a skill-set to earn a living for themselves. Currently, we train them in tailoring and beauty treatments. With future donations, we aspire to train them to use computers.

BEAUTY TRAINING:

Girls are taught to do Waxing, Nail Art, Threading, Hair Styling, Hair-Candling, simple Hair Cut, Pedicure, Head Massage, and etc. Some girls do a great job of Facial and Head Massage and some are adept at doing Manicure and Pedicure. They are also



learning advance level of hair cuts (U & V, Step cut, etc.).

TAILORING:

Women are learning different kinds of Stitching, making Button Holes, Knitting Mufflers, etc. Most of the women are interested in how to make Salwar Kameez, Frocks, Saree Blouse to be able to run their boutiques from home. A lot of them are also learning to stitch men's shirts. They are very happy to learn new skills.

DIR's CEO, Dr. Shaw, was able to bring in orders to make Shopping Bags made of



cloth. To ensure the bags were durable and good-looking, the women put in extra labour and did a great job of patch-work on them.





SCHOOL WITH A DIFFERENCE (SWAD)



SWAD has four classes; 2 Pre Nursery with age group of two to three and a half years, 1 Nursery and 1 KG. The kids from SWAD graduate to various Government Schools and English Medium Schools under RTE quota. In 2016, SWAD had the strength of 80 children. The main focus of the school is to have team activities, sports, art & craft and communication as a part of the curriculum. The school wants to ensure that all kids are able to introduce themselves in English. There are regular Parents and Teachers

Meetings to track the progress of the children.

To make education fun for the little ones, SWAD celebrates almost all significant days and festivals of India-Republic Day, Independence Day, Raksha Bandhan, Janamashtmi, Diwali, Children's Day and Christmas to name but a few.



A team of 18 people from Khusi Hona Woodstock collaborated with DIR and arranged Dance, Painiting, and How To Make Hand Bands workshops for the children of SWAD on 11th and 12th August. Needless to say, our children enjoyed every bit of it. The team also educated the teachers about Social Networking Sites and how to make good use of internet to adopt latest Teaching Methods. They also visited our field areas with our Health Promoters.

Later in the month of August, India Celebrated 70th Independence Day and SWAD educated children about the importance of the day and National Flag. Every child made National Flag on paper as well as on their cheeks. Kindergarten kids sang patriotic songs.

In November SWAD celebrated Sports Day with 100% participation from all classes (Play Class, Prenursery, Nursery, and Kindergarten). There was a wide range of games including Lemon-And-Spoon Race, Sack Race, Three-Legged Race and



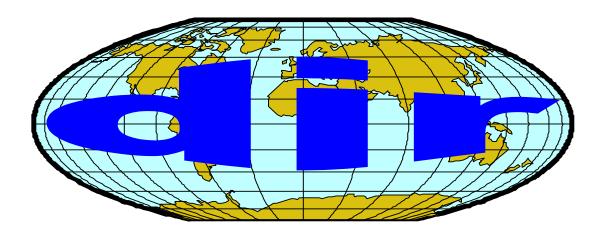
Frog Jump, etc. Our CEO, Dr. Shaw, distributed the prizes to all the winners, and gifts to the helping staff. Many parents attended to cheer up and encourage the kids.

SWAD concluded the year with Christmas Celebrations on 23 December. Municipal Chancellor (MC) Parmod Kumar, Meena Devi, and Vasudev Passy graced the occasion.









DEVELOPING INDIGENOUS RESOURCES INDIA

Annual Report 1 Jan. - 31 Dec. 2017

"Success: To laugh often and much, to win the respect of intelligent people and the affection of children, to earn the appreciation of honest critics and endure the betrayal of false friends, to appreciate beauty, to find the best in others, to leave the world a bit better, whether by a healthy child, a garden patch, or a redeemed social condition; to know even one life has breathed easier because you have lived. This is to have succeeded!"

- Ralph Waldo Emerson

705-C ADARSH NAGAR, NAYAGAON, MOHALI

INTRODUCTION



DIR is a non-profit organization with no religious or political affiliations. In India, it has three major objectives – health improvement, education, and income generation. DIR is funded *exclusively* by donations, which incidentally, the government has approved for income tax deduction. Our AIM is to improve the quality of life of those in greatest need without regard to class, caste, creed, color or any other physical characteristic other than need itself. In keeping with its name, Developing Indigenous Resources, DIR does not set out to solve problems. Instead, it empowers those in need to solve their problems through education, training, and planning and implementing effective programs.

Developing Indigenous Resources (DIR) strives to improve the life-standards in the neglected areas of our country, particularly urban slums. Our chief expertise is in developing the resources of the residents and helping them to solve their own problems through education and demonstration in committee meetings. The strength of this NGO is that 96% of employees are women from the slum, as it believes in women empowerment.

Infant Mortality Rate and Maternal Mortality Rate are high in our

country. In the year 2006, DIR adopted a population of 10,000 residents, which has now increased to 18,000 in and around Janta Colony of Nayagaon, District Mohali Punjab. Our first project in Janta Colony was a Medical program to look after children under 5 years of age, immunization of mother and child, Antenatal and Post Natal care of pregnant mothers and motivation towards Hospital deliveries. Our emphasis was to bring down the Infant Mortality rate and Maternal Mortality Rate.

CONTENTS

- **❖**MEDICAL CAMPS
- ***COMMUNITY MEETINGS**
- **❖IMMUNIZATION PROGRAMME**
- **❖ANTE NATAL AND POST NATAL CHECKUPS**
- **❖NUTRITION IMPROVEMENT PRIORITY PROGRAMME (NIPP)**
- **❖**CHILD ACTIVIST PROGRAMME (CAP)
- **❖INCOME GENERATION ACTIVITY**
- **SCHOOL WITH A DIFFERENCE (SWAD)**



MEDICAL CAMPS

• On 8th April, DIR had an eye camp at the busti office. The camp was set up support from Grewal with Eye Institute – a premier eye care center in Chandigarh that provides free eye care to the underprivileged through its charitable wing. One of the objectives of the Trust is that there should be no blindness due to cataract as about 80% of the people suffering from blindness in India suffer due to cataracts. Unavailability of resources, awareness and education are the prime reasons for this. At the camp at



DIR, a total number of 155 people from the *busti* came for a check-up, of which there were 108 females, and 47 males. 21 cataract cases were diagnosed during the camp (12 females and 9 males). Patients suffering from cataracts will get free surgeries at GEI.

Another Camp was for skin diseases and gynaecology problems on 23rd
 April in which Dr. Vivek Malhotra, Dermatologist, MD, PGI (Beau Visage

Skin Clinic in (FF) **SCO-72** Sector-40 C, Chandigarh), examined 101 patients (24 male and 77 females) and Dr. Sonica Chugh, Gynaecologist (3159 Sector-21



D, Chandigarh) examined 55 patients. There were more ladies attending as they don't get a chance to go out of the *busti* for medical check-ups because they are poor and unable to afford the expense of treatment and in most cases their husbands are labourers or working in private sectors where there is less possibility of taking leave with salary. As most of the ladies are illiterate, they tend to ignore their health. So such medical camps helped them a lot. We are pleased with the results of the camps, and this gives us one more opportunity to educate about and promote preventive treatments.

COMMUNITY MEETINGS

• In May, Natasha presented an interactive session on hypertension with *busti* women in which causes and symptoms were discussed and then dietary precautions are discussed with them.

• On 12 July, Dr. Shalini and Natasha conducted an interactive session on the subject of Iron Deficiency for the mothers of children in our two worst nutrition categories (those in Yellow "Malnourished" Zone, and those in the "Red" Severely Malnourished Zone). We described causes

and symptoms to help mothers identify affected patients.

In the month of August
 Importance of Breastfeeding was explained to pregnant and lactating mothers in the basti.



IMMUNIZATION PROGRAMME

Auxiliary nurses, mid wives, Health Promoters, and Asha Workers (of Punjab government) work together to give their best to serve the people. We provide Iron and folic acid tablets to the pregnant women and give nutritious food to them and the small children. We give nutritious food (Sweet Dalia and seasonal fruits) to children and pregnant women. We also provide Iron and Calcium Supplements and take weights and blood In addition pressures. Homeopathic Medical College and Hospital

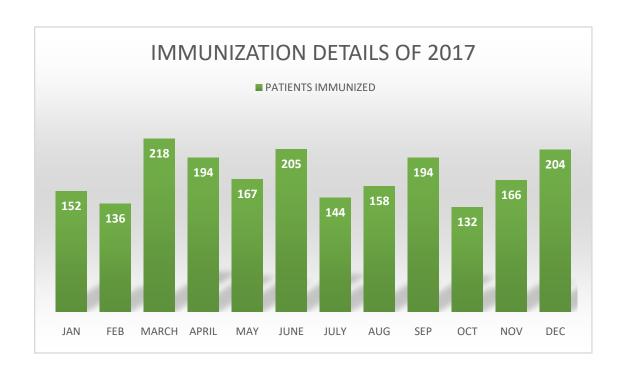


of Sector-26 Chandigarh, conducts a medical camp every Wednesday for all inhabitants of Janta Colony, Adarsh Nagar Nayagaon in DIR-I *basti* office. A team of 3 doctors and paramedical staff give consultations and free medications. We are grateful to Dr. Sandeep Puri, principal Homeopathic





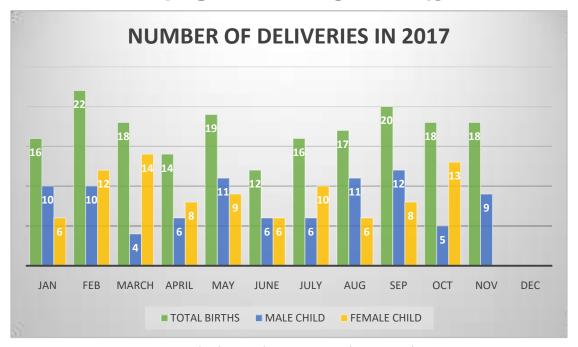
Medical College and Hospital for his gracious contribution for the welfare of the underprivileged people.







ANTE NATAL AND POST NATAL CARE OF PREGNANT MOTHERS



- In January, a pregnant lady at her seventh month pregnancy went to a hospital for her routine checkup, where doctors informed her that heartbeat of the fetus is absent and is dead inside. Then doctors abort the fetus in emergency as it can cause infection in her body.
- In February, we faced numerous cases of hypertension and thyroid issues in the pregnant ladies, but they all were given their medicines properly on



time and were taken care of their diet.

• In March, one pregnant lady had an abortion in her 3rd trimester because the heartbeat of the baby had not developed properly and the heart had stopped, so the doctor suggested her abortion. That was her 2nd pregnancy.

• In April, Pooja, age 22, in her 3rd trimester (7th month) went to the hospital for her routine check-up. After the check-up and screening, doctors found that there was no fetal movement in the womb. Then they

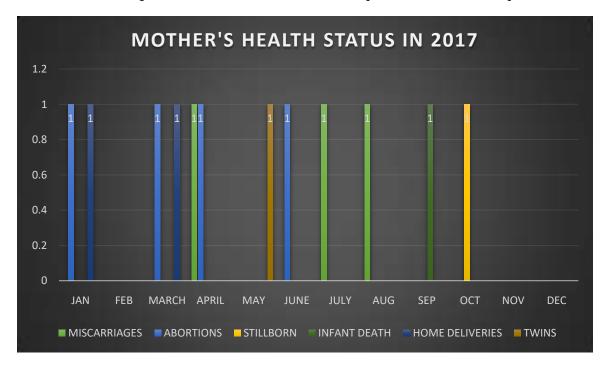


did some more tests to assure the life of the fetus. After doing all the check-ups they came to know that the fetus was not living, so they advised her to have an abortion.

• In April, one woman named Babita, age 22, had a bleeding in her 3rd trimester pregnancy, which eventually caused her a miscarriage. She

is a very careless and ignorant kind of a background. She always refused to follow the instruction given by the doctors, our Health Promoters, and others as well.

• In June, one lady unfortunately had an abortion in her 3rd trimester (8th month). She did not feel any fetal movement, so she went to the hospital for her checkup. After she was examined by the doctors, they said that the



baby's heartbeat had stopped and that the baby had died, which explained why she was not able to feel any fetal movement. The doctors delivered the baby with artificial labor pain through injection. It was Shanti's first pregnancy. Everything had been going well and it was a natural incident, according to doctors.

- In September, one woman had a pre-mature delivery. She gave birth to a male child and his weight was 1 kg. He had a respiratory infection. Doctors kept him under observation but he died after 14 days of infection.
- In October, we had one still born baby due to umbilical cord stuck around the neck.

NUTRITION IMPROEMENT PRIORITY PROGRAME (NIPP)

NIPP stands for nutrition improvement priority program. The weight and height of the child reflects the health status of the child under 5 years of age. In a population of approximately 18,000, we have around 1,625 children under 5 years of age. Among those, generally 11% to 12% children are in Red Zone category, which means the



weight of a child is more than 3kg underweight for that particular age. Children who are more than 4kg underweight come under high priority zone. DIR-India feeds children in high priority zone of poor socioeconomic status families who cannot afford high protein diet. In this program we include few pregnant mothers with weak health status due to domestic violence, drug addiction, and alcoholism.

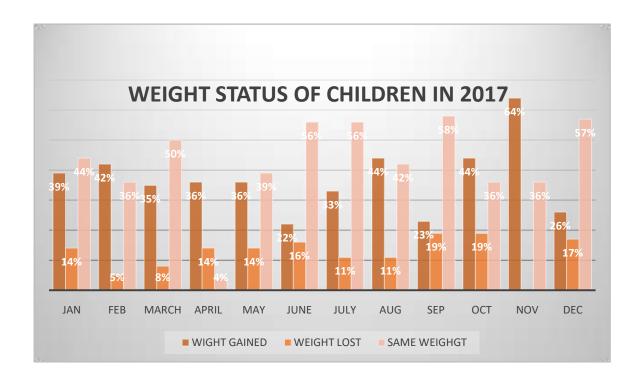


Our Dieticians plan a weekly menu comprising of high protein diet which is fed to children and mothers under direct supervision In NIPP the meal provided as follow:

- 100 ml milk
- 1 banana
- 1 egg
- Khichdi / daliya/ soya nutri / black chana/ poha We included 39 malnourish ,economically weak children every month in the NIPP.

Also the iron syrup, deworming tablet and vitamin A capsule were given to malnourish children.





CHILD ACTIVIST PROGRAMME (CAP)

This programme, which is conducted for children between the ages of 7-13, is held daily between 3:30 and 4:30pm. The children are collected into groups of around 20 each, and each group is led by two HPs. Each group meets twice a month for activities which are a combination of Fun and Education. Our motives for conducting these activities are to;

- 1) Educate the children and their families.
- 2) Help the children develop socially.
- 3) Increase sportsmanship and team spirit.
 - 4) Create leaders for sports and





community outreach.

- Firstly Health Promoters explain the causes and prevention of diarrhea children. Then they give Demo of ORS the to children. After that each kid gives the same demo of ORS.
- In this game, firstly

Health Promoters inform the children on oral hygiene with the help of charts and they also explain how to clean the teeth and the things which we use in our oral hygiene. Health Promoters also give them a demo with the help of Denture and Brush.

- Health Promoters explain about Iron Deficiency Anemia to children through charts. In this game if we have 20 children and 19 chairs. Then we play the music, and children start moving around the chairs. When we stop the music, every child rushes to get a seat and whosoever without a seat will tell the class about the sources of Iron.
- Health Promoters explain about what a Balanced Diet is and the reasons why we should have a Balanced Diet. After that we divided the children
 - into two teams. Then we introduced a bowl in front of the children, which we have already filled with the noodles, potato, onion, salt, chocolates, stones, banana, tomato, chips, toffees, etc. Then we called up one child from each team. After that the children had to pick one thing



from the bowl and describe it on the board. Then the other children also

do the same, and the team which collects more nutrition rich items becomes the winner.

- Health Promoters explains everything about dengue to the children. Then they are divided into two groups. Two circles are formed by these groups, then Health Promoters spin the bottles in the middle of each circle. When the bottle stops spinning, with the direction of the cap of the bottle pointing at a child, that child would tell us about the causes and the preventions to be taken in dengue fever.
- Health Promoters explains the source of Iron using a chart. Then the game begins, in which there were 20 children and 19 chairs.
 - Then they played the music and when the music stops, they rush to occupy the chairs and the one who was left out would tell everyone about the source of iron.
- The Health Promoters educate the children about the importance and resources of Vitamin A through a chart. Then we divide the children into two groups. Next we call up one child from the first group. Then that child sits in front of the white board with his back facing the white board.



different children.



Then we call up a child from the other team and then he draws a picture of a source of Vitamin A on the board. Then the teammates of the child sitting on the chair give him clues regarding the picture drawn by the other child. If he guesses the right source drawn on the board then his team will get a point for that. We repeat this game several times with



• Firstly Health Promoters explain about the deficiency and sources of Iodine to the children. Then everybody makes a circle and settle down. In this game one child throws a football to any of the child in the group and that child has to catch the football, afterward they have to say their

names loudly and whoever misses the catch is out of the game and has to tell the sources of Iodine to everyone.

- The name of game is Jump Over the Rope. In this game firstly Health Promoters explain sources of Vitamin C through a chart. The two children hold the rope both side and other children make a line. Then they jump over the rope one by one. Every time rope gets higher than the last time. The one who touches the rope during jump is out and tells the source of Vitamin C to everyone.
- Children learn how to throw and catch a Frisbee. Then they also learn (1) what the common disease CHIKUNGUN is and (2) how it may be prevented. HPs also teach 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, with gastroenteric of violent vomiting and diarrhea.
- The game was dance, music and statue. First of all Health Promoters educate children about Typhoid, its symptoms, and prevention. When

HPs play music, all children must dance and when they stop the music, they all have to become statues. Whoever makes any kind of movement gets disqualified and has to tell the preventions to be taken during typhoid.



INCOME GENERATION ACTIVITY

TAILORING:

Women are learning how to create Salwar suit, frocks, blouses, Punjabi suits etc. in the stitching classes.



In November, Susi and

Doris have placed the order of 500 wine bags and bought the bags which worth Rs. 13,000 during their visit. This has become a great motivation for our poor-income-group ladies who are living with the hopes of livelihood.



SCHOOL WITH A DIFFERENCE (SWAD)

- DIR Staff and SWAD celebrated "Lohri Festival," famous festival of Punjab on 13 January 2017.
- On 25 January 2017, we celebrated "Republic Day". Students drawn our National Flag on the sheets and colored it. We also taught the students about the



importance of "Republic Day" and why we celebrate this day, as the constitution of our country came to its existence. We also painted the flag on the face of the students and all the staff members also participated in it. After that we distributed sweets among the students and staff. Students showed great interest in all the activities

• On February 1, the DIR family celebrated Basant Panchmi. All the DIR staff and the SWAD kids chose yellow outfits to show the value of this auspicious day.



Students brought yellow colored meal in their lunch boxes like, halwa, yellow rice, and pakoras. Our educated teachers the students about the of importance this day. According to Hindu religion belief, the goddess Saraswati the deity of knowledge, music, arts, science and technology -



was born on this day and people worship her to achieve wisdom. On this occasion we distributed sweets among the students and Mrs. Bindu Sharma also distributed gifts among the students including pencil sharpener, pencil, eraser, biscuits and sweets.

- On 21 February, Municipal Counselor (MC) Mr. Parmod visited DIR and distributed sweets among SWAD Kids and DIR staff.
- We celebrated Mother's Day with the SWAD kids and their mothers. We invited mothers to SWAD on 15 May, where we organized a cooking competition for

all mothers. All had to make different kinds of dishes which can be made easily without using fire, for example; chaatpappdi, fruit chaat, channachaat, lemon drink, etc. We also had a press coverage for this event by a news paper "Dainik Bhaskar Mohali." Monica Bakeries kindly donated cakes to us for this celebration. The cakes and the dishes made by the mothers were distributed among SWAD kids, mothers and the DIR staff.

• In July we celebrated Van Mahautsav, in which children planted different kinds of tree. We educate them about the trees and their importance in our life and surrounding. We educated them that trees provide us food, oxygen, paper, wood, etc., and they intake carbon dioxide. Students also drew and colored trees on sheets of paper. After this we celebrated Teej festival, in which every student participated. Children drew kites on sheets and also decorated them. After the activity, Poha was served among all children and staff of DIR.

We had a celebration on August, 70th 15 Independence Day. Children made colourful flags. We also painted their faces with the Tri-Color of Indian Students also sang We patriotic song. educate the children about the Importance of



this day and Significance of each color in our national flag. We also celebrated "Janamastmi" on this day. As it also falls for the birthday of Lord Krishna. Some students dressed up like Krishna, Radha, Patriotic, etc. Mr. Surjit Singh, ex-Sarpanch of Janta Colony along with his friends came to DIR on this occasion. He also distributed sweets among the SWAD kids and DIR staff.

• SWAD did salad decoration activity. In this activity we educated children about the importance of fruits and vegetables and their necessities for our body. We used seasonal fruits and vegetables for salad decorations. We told students that before cutting fruits and vegetables wash them first as most people did cutting first, for it could also wash away indispensable nutrients. After washing fruits and vegetables, we cut them into small slices then decorated the salad with fruits and vegetables.



We also celebrated Children's day and Sports Day on 14 November 2017. School with the Difference celebrated Christmas on The December. program was sponsored by Mrs. **Jyoti** Jain and Mr. Chaudhary Neeraj DIR). (adviser to Woole caps, socks along with packet of pencils and sweets,



eraser were gifted to each child on this occasion. Mr. Surjit Sing, ex-Pradhan of Janta Colony was the chief Guest. Mr. Surjit Singh gifted DIR-India a high powered Luminous inverter of more than 15 thousand rupees worth, which would make DIR-India's functions much more comfortable whenever there are power cuts especially during summer time. DIR-India has been extremely grateful to Mr. Surjit Singh towards his kind and generous contributions each year.

