



CALCUTTA KIDS

APRIL 2006



Dear Friends of Calcutta Kids,

It is with great pleasure that I write to you on behalf of Calcutta Kids. My name is Kalyan Roy and I am the Managing Trustee of Calcutta Kids, India. While originally trained as a chartered accountant, I have been working within the healthcare system as the chief executive of a private clinic, Udit Nursing Home

(UNH) providing medical services to people living in and around the slum area of Salkia in the Howrah area of Kolkata. Along with providing medical services to individuals and families who can pay for their medical treatment, we also offer highly subsidized services to poor families. The collaboration between Calcutta Kids and UNH is an exciting one. It combines the dedication of an energetic non-governmental organization with a medical clinic that can provide low-cost medical expertise and institutional-based deliveries for pregnancies, which have been identified as high-risk by Calcutta Kids.

For the past nine months the staff of Calcutta Kids has been working on the creation and implementation of the Calcutta Kids Maternal and Young Child Health Initiative. In the September 2005 newsletter, Noah wrote about the importance of this initiative. Here I will write briefly about our goals and what has been implemented to reach those goals.

The ultimate goal of this project is to reduce maternal and infant mortality within the defined geographic area that we serve. Its primary objectives are empowering the local population to understand the needs of prenatal and infant health and providing resources to facilitate healthy pregnancies and healthy children aged 0-2.

Our field operations are conducted by our community health workers (CHWs) and their supervisor. Each CHW is in charge of a 'catchment' area of the slum, and each is responsible for:

- ◆ Counseling pregnant women and newly married couples on the need for adequate prenatal care checkups and nutrition, and on pregnancy danger signs
- ◆ Monitoring the progress of each pregnant woman
- ◆ Addressing common problematic practices during pregnancy (such as eating less in the hope of an easier delivery)
- ◆ Directing those underserved by prenatal care to the Udit Nursing Home, contracted by Calcutta Kids for this purpose
- ◆ Identifying high-risk pregnancies; In these cases Calcutta Kids helps to finance the cost of a facility-based delivery at the nursing home.

- ◆ Assuring that each newly born infant receives necessary immunizations and micronutrient supplementation
- ◆ Counseling on infant feeding and caretaking practices, including breastfeeding
- ◆ Organizing monthly health awareness camps where health information is disseminated through puppet shows, films, cook-ins, etc.

These activities are being carefully monitored and evaluated. The project assesses the quality of staff work with each mother we counsel, keeps accurate records of the children to whom we provide services, and records the number of prenatal and postpartum care sessions provided to pregnant women. We are in the process of completing a baseline survey of 1,000 households in the area where we work. After three years, we will conduct an end-line evaluation to assess the impact of this initiative on maternal and young child health and on death rates.

Expected outcomes include decreased maternal and infant mortality; higher birth weights; decreased incidence of measles, whooping cough, tuberculosis, respiratory tract infections, malaria, vitamin A deficiency, and diarrhea – these the result of regular immunizations and preventative care, increased local awareness of prenatal and best infant health practices, and the arrangement for safe deliveries in the case of high risk pregnancies.

While still in the early stages of this new initiative, we are heartened by the smiles we see every day from pregnant women and children. These give us confidence that we are doing the right thing.

Included in this newsletter is

- ◆ A message from our project coordinator, Mrs. Sumana Ghosh,
- ◆ information regarding the commission of a baseline survey,
- ◆ a message from our director, Noah Levinson,
- ◆ two entries from the Calcutta Kids journal, and
- ◆ a profile of one of our community health workers, Mrs. Jayshree Hella.

Sincerely,

Kalyan Kumar Roy
Kalyan, Kr. Roy
Managing Trustee, Calcutta Kids

Introducing Sumana Ghosh

I am pleased to be working as the project coordinator for Calcutta Kids because I very much enjoy working with people. I believe that community is a living media through which both learning and the deepest satisfactions can be found. At the same time, I consider myself privileged to be a resource and a friend to many pregnant women, mothers and children who live on the fringes of society.

Before coming to Calcutta Kids, I was actively involved in community activities in these slum areas. Since joining Calcutta Kids, I have been coordinating the organization's Maternal and Young Child Health Initiative in the slum of Fakir Bagan. This work presents new and difficult challenges. Many of the slum dwellers in Fakir Bagan are migrants from other states throughout India—some even come from Bangladesh. There is, as a result, enormous variation in knowledge, attitudes, and behaviors, particularly with regard to pregnancy practices.



Even though Fakir Bagan is adjacent to a major metropolitan area, the inhabitants of this slum live precarious lives, where the wrong choice can put a family member over the edge. In such a context, there is a natural reluctance to do things differently – to take risks. Bringing about behavioral change in such a population therefore is challenging and requires considerable skill – we have to understand fully both the fears and the actual constraints faced by these families who have endured unimaginable hardships. We at Calcutta Kids want to learn from them while also serving as a resource to help create change through health education and service delivery.

Calcutta Kids staff are constantly in these desperately poor neighborhoods, talking with women, examining children, and learning everything we can about those we are seeking to serve. Getting to know people like Jayshree Hella (profiled in this newsletter) and engaging the talents of local women to serve others in need is what this organization is all about.

Calcutta Kids' first demographic study

Calcutta Kids has hired Jayaprakash Institute of Social Change's well-respected survey team to carry out a detailed baseline survey of health conditions and socio-economic determinants in the slum areas where we work. This data will help inform the efforts of our Maternal and Young Child Health Initiative and aid in the design of further intervention strategies. Data collection has now been completed. In our next newsletter we will share with you our findings along with a link on our website to the completed study.

Message from Noah



Dear Friends,

Greetings from Dhaka, Bangladesh!

Let me begin by offering special thanks to our 'matcher' and to all of you who made the 2005 Calcutta Kids matching grant

campaign such a success. Because of your generosity we have been able to hire a committed and energetic staff which is engaged in saving the lives of mothers and children every day.

For the next year, while maintaining daily contact with our Calcutta Kids staff, I will be here studying here in neighboring Bangladesh at the new James P. Grant School of Public Health at BRAC University. BRAC is the largest, and surely the most innovative indigenous non governmental organization in the world. Its newest venture, launched in 2005 with a Gates grant, is a School of Public Health, named for a former Director General of UNICEF, and with a mission of "improving health outcomes in populations in disadvantaged areas of the world, particularly low income women and children, through the application of the art and science of public health." The school operates in collaboration with schools of public health at Columbia, Johns Hopkins, Harvard and the London School of Hygiene and Tropical Medicine whose faculty also are engaged in teaching at the School. Half of my 24 classmates are Bangladeshi; the other half are from 11 other countries throughout the world;

half are female and half are male; half are medical doctors, while the others come from professions ranging from NGO management to civil engineering to health journalism.

The school places great emphasis on experiential learning, utilizing as prime examples the public health problems of Bangladesh. Bangladesh and West Bengal used to be two parts of the same Indian state, so that many of the public health challenges faced in Bangladesh are the same challenges Calcutta Kids faces every day.

It is a real honor to have been chosen to participate in this program. While it's difficult to be away from the day-to-day activities of Calcutta Kids, what I am learning here is going to be extremely beneficial to our work in Kolkata. (And the fact that Kolkata is only a 30 minute plane ride from Dhaka means that I will be able to spend my vacations and one weekend a month with the Calcutta Kids team.) While the School itself is turning out to be a wonderful gift, the greater gift is being able to have such confidence in our remarkable staff and in their abilities, and to know that CK operations will continue to run efficiently and effectively.

Last but not least, a word of thanks to my parents, Louise Cochran and Jim Levinson who are taking care of the Calcutta Kids correspondence in the United States while I am studying.

With kindest regards and blessings to you all,

Noah Levinson

Director, Calcutta Kids Inc

From the Calcutta Kids Journal

January 16th, 2006

“This morning, Chandi, (names have been changed to protect identity) to whom we have been providing prenatal care and pregnancy counseling, and who had been identified by the doctor as a high risk pregnancy, came to our clinic to deliver her child. Chandi delivered a very healthy little girl. However Chandi’s placenta did not come out of the mother for one hour, two hours, three hours...Chandi was losing a lot of blood and her condition became critical. One of our doctors brought her into the operating theatre and removed the placenta, but by this time the woman had lost so much blood that a transfusion was needed. We desperately began calling blood banks. Eight of them told us that her blood type was not available. The ninth blood bank did have her type and we arranged to have it quickly delivered to the clinic. Once it arrived, and the transfusion was carried out, and as soon as Chandi was out of danger, the entire Calcutta Kids team—which had been desperately worried throughout the day—broke into unbridled celebration, together with the new father, unable to contain his tears of joy and bringing in sweets for all of us. Now mother and child are recovering nicely upstairs—and both are looking very happy. It has been a magical day here. All of us know that had this woman delivered her child at home or in the government hospital instead of with us, she may well not be alive this evening.”



The Calcutta Kids office, Salkia - Howrah

February 8th, 2006

“It's been a tough day here at Calcutta Kids. This morning we experienced the first death of a woman to whom we had been providing services – and we all are distraught. Tragically her husband returned to their home and found their one year old son trying to wake up his mother who had died earlier in the day. The husband is a sweeper and unable to take care of a child on his own. Yet he is terribly attached to his son and doesn't want to lose him.

At a meeting called this afternoon, the staff shared a moment of silence in honor of our departed friend. During the meeting, the father burst into our office with tears in his eyes begging us to take care of his child. We decided to send a community health worker to the house daily to make sure that the child is getting enough food and remaining healthy.”

Inspiration Among Us

Early in December, during one of the weekly health camps that Calcutta Kids operates to address acute health problems of children and mothers in Fakir Bagan, we came across a remarkable young woman named Jayshree Hella holding in her arms, her six month old daughter Radhika. After her medical examination and counseling session, she lingered around the health camp observing our operations.

One of our counselors was having trouble communicating to another mother the proper dosage of medicine to give to her child. After watching their interaction for a few minutes, Jayshree spoke to the mother and the counselor, suggesting that little marks could be made on the bottle so that the mother would know exactly how much medicine to give each time. Our surprised and delighted project coordinator, Sumana Ghosh then invited Jayshree to remain with her while she worked. It soon became clear that this 24 year old woman had a unique ability to communicate with the mothers and children in ways that combined strict instruction, compassion, and understanding, all done with an endearing and disarming smile.

Sumana indicated to the rest of us that Jayshree might prove to be an invaluable resource for Calcutta Kids because of her personality, her ability to communicate so effectively, and the fact that she lives in Fakir Bagan



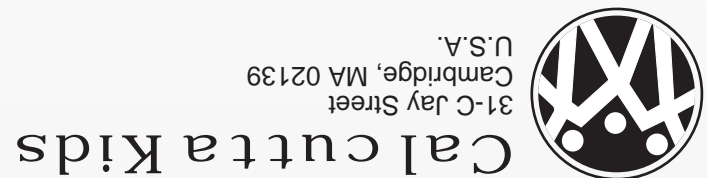
and understands first hand the constraints faced by her neighbors. So we invited Jayshree to our office and asked her if she would be willing to work as a part time community health worker for Calcutta Kids. She agreed — on the condition that little Radhika be allowed to accompany her to the office for meetings and office work. The next day, Jayshree began her community health training.

Jayshree, we learned, grew up in a working class family in Kolkata. She studied in a government school up to the age of 11 when her mother tragically committed suicide. Jayshree was then required to stay at home and care for her younger brothers and sisters.

Five years later, Jayshree was married off to a sweeper living in nearby Kidderpore. Within a year, Jayshree was pregnant with her first daughter, Priyanka. But the family soon was in serious financial debt, the result of costs incurred in treating the stomach cancer of Jayshree's mother-in-law, and they were forced to move to the slum of Fakir Bagan where

they have lived since 2000.

Over the course of these past few months, the entire staff of Calcutta Kids has been deeply moved by the example of this remarkable woman, energetic yet wise, who has stepped out of her personal hardship to aid her neighbors and friends in Fakir Bagan. The mother and daughter team of Jayshree and Radhika is Calcutta Kids' new living inspiration.



About Calcutta Kids

Calcutta Kids is a not-for-profit organization; a recognized 501c3 under the United States Internal Revenue Service, committed to the healthcare needs of the poorest children in and around Kolkata India. This healthcare is comprehensive and includes monthly checkups, free medicines, follow-up treatment, referrals, and hospitalization when necessary. Calcutta Kids is devoted to the complete rehabilitation of each and every child we encounter and acts as a resource to help these children find vocational training, education, proper nutrition and lodging when necessary. Additionally, Calcutta Kids has created the Maternal and Young Child Health Initiative, designed to improve health knowledge, increase access to healthcare for pregnant women, and provide health services to new mothers and their children up to 24 months in specific slum areas.

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