Twelve Small Grants Awarded

Thanks to the generosity of our board members and donors like you, we were able to fund 8 Innovative and 4 Humanitarian grants in 2009. The funds ($3,000 to $5,000) went to the following programs:

1. **Paribartan**, India, will provide training on the use of zinc therapy to reduce the severity of diarrhea.
2. **Blue Veins**, Pakistan, is reducing child mortality rates by debunking breastfeeding myths.
3. **Institute of Water and Sanitation Development**, Zimbabwe, plans to improve access to safe water by implementing a bio-sand filter system.
4. **Ethiopian Orphan Health Foundation**, Ethiopia, will train health workers to provide improvements in children’s health and nutrition.
5. **Research Center Food and Development**, Mexico, is studying to determine the prevalence of zinc and iron deficiencies in adolescent girls.
6. Another project at the **Research Center Food and Development**, Mexico, will study to reduce the prevalence of gastrointestinal infections associated with parasites.
7. **University of Ibadan, Dept. of Nutrition**, Nigeria, is educating pregnant mothers on exclusive breastfeeding, immunizations, and micronutrients.
8. **Tasca**, North Carolina, (in Nicaragua) plans to detect fecal contamination in drinking water.

The four 2009 Humanitarian grants:

1. **Univ. of Medicine and Dentistry** of New Jersey in the Dominican Republic
2. **Kared-Fod Women’s Group**, Kenya
3. **Friends Orphanage School**, Uganda
4. **Didi Pre-school and Crèche**, South Africa

Clean Water

It is well recognized in both scientific and negotiating communities that Bangladesh would be one of the areas most affected by climate change. And it already is. Flooding, due to sea-level rise, in many areas is annual and the salinity and arsenic contents are on the rise. And water is further contaminated.

Child Health Foundation is changing this a little at a time. With the tubewells that the **EPRC** (Environmental and Population Research Center) is installing with grant funds, more and more people have access to clean water and children are experiencing fewer episodes of illness due to water-born organisms.

EPRC now has two separate districts where this activity is being carried out and about 22,000 people have been served, many of them children. They are also teaching sanitation practices, for example, hand-washing, as well as proper storage of the water. Further activities have included primary child education, literacy training of women, and homestead gardening to improve nutrition.

The project continues.
Dear Friends,

2009 has been a very productive year for the Child Health Foundation. For example, in our Small Grants Program, we reviewed over 300 letters of intent from countries throughout the world, invited 80 to submit proposals, and funded 12 excellent projects in 11 different countries. It was an extremely difficult task because many of the projects that we were unable to fund were innovative and deserving of support, reaching children at the greatest need, in line with the mission of the Foundation. The Board of Directors is reaching out to you to ask if you could contribute a targeted gift to support several extremely worthy projects in the Small Grants Program. **If you donate $5,000 to support one project, we will match you with a project that you may “adopt” and watch over for the next year. A very rewarding experience!**

Our Director and his wife visited two projects supported by the Foundation this fall and found extremely valuable work in progress. In Bangladesh, they observed a water project that has been installing water pumps to give clean water to local children and their families. In India, they observed the clean up after a disastrous cyclone had struck an orphanage, now serving as a refuge to families who had lost their homes. Both projects were appreciative of the support and in both cases it was clear that their work was consistent with our mission to save and improve the lives of children.

The Board of Directors met three times in 2009, either in person or by teleconference. Meetings always included discussions on the Foundation’s ability to continue to support the Small Grants Program and to develop new initiatives to further our objectives. We are optimistic that even in these economically challenging times, we have been able to maintain our initiatives. We added a new member to the board, Dr. Jean B. Nachega, an Associate Scientist at The Johns Hopkins Bloomberg School of Public Health. Dr. Nachega is a native of South Africa where he holds a professorship at Stellenbosch University.

The Foundation continues to provide support to the International Centre for Diarrheal Disease Research (ICDDR,B) in Bangladesh through logistical support, facilitation of funding, and an NIH-funded cholera project. Child Health Foundation also continues a relationship with Cera Products, Inc. With a donation of CeraLyte and the competent distribution facilitation of Direct Relief International, we supplied oral rehydration solution for the treatment of diarrheal diseases to 19 countries suffering from natural disasters and to the residents of Baja, California who were affected by Hurricane Jimena in November.

We have been pleased that the Child Health Foundation has continued to be responsive to the humanitarian and health needs of children throughout the world, including the USA. We thank you for your generous support in the past. We appreciate your comments and your assistance in enabling the Child Health Foundation to fulfill our mission of “saving the greatest number of children’s lives at the lowest possible cost.” We welcome your donations as we look forward to new opportunities to improve children’s lives.

Sincerely, Maureen Black, PhD
Chair, Board of Directors

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**2010 Innovative Small Grants**

We are pleased to announce that we are now soliciting letters of intent for this year’s ISG awards. See our guidelines on our website or Email a request and we will send them. Deadline for letter of intent is April 30th. These grants are competitive and the campaign is open to organizations anywhere in the world.

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**CHF 2009 Annual Report is soon ready for distribution. If you would like a copy, please email or call our office and we will send you one.**

contact@childhealthfoundation.org  
410-992-5512
Inexpensive Worm Treatment

National Institute of Health Research and Development in Indonesia has completed their project to reduce the prevalence of children suffering from worm infestations by introducing a safe and effective deworming program at low cost. Of the 204 children tested for worm infestation, 91 were positive and 95% of those treated recovered. Most were under 5 years of age. The treatment used was Curcuma, a natural plant easily found in Indonesia. The mothers were also instructed about the importance of treatment as well as the method for planting and preparing the plant. NIHRD recommends twice yearly treatment for all children. Examination of stools then becomes unnecessary.

According to a WHO report, deworming is a very effective way to lower anemia levels, support growth and the ability to concentrate, to study, and to play. So, of course, we are pleased that this method for improving children’s lives has been studied and found effective.

Finger-lickin’ Good

The Koder Women Group in Kenya has completed their project to manufacture peanut butter and thereby to improve the health of the children in their community. Peanut butter is rich in Vitamin A, protein and carbohydrates. The group conducted training of 76 local farmers, with onsite training in production, packaging and handling and marketing. Women were given the skills of machine operation. Our 2008 grant had helped them purchase milling, huller, and roasting machines.

From the period of April to June 2009, the group managed to produce a total of 938 jars of peanut butter (shown in the photo) for marketing, with much more expected after harvesting time, thus proving that they could provide a sustainable source of income.

Health and Child Support

The Friends Orphanage School in Uganda, a 2009 Humanitarian grant recipient has already submitted their interim report. As a result of the funding, 80 children received the benefit of the nutrition and counseling program, 50 girls were chosen to receive personal sanitary materials, and 100 received books, pencils and pens. All of this, of course, contributed to increasing both their physical and mental health.

What Can Be Done?

About 1.5 million children die from diarrhea each year. It kills more young children than AIDS, malaria and measles combined. Only 39 per cent of children with diarrhea in developing countries receive the recommended treatment, and limited trend data suggest that there has been little progress since 2000.

This WHO/UNICEF report focuses attention on the prevention and management of diarrheal diseases as central to improving child survival, and among other things, sets out a 7-point plan, for which our board member, Nand Wadwhani, in partnership with Word Health Organization, has created a website. He says, “This site focuses on a package of proven prevention and treatment measures for diarrhea. Because of the user-friendly language of this report, I see this as an important reference, planning and implementation tool that will be used by a very large audience - general public, health worker, government, NGO, UNO, policy maker, business, ... By giving this report higher visibility, we assist in increasing the adoption of this 7 point plan by a wider audience, communities and countries.”

Please take a look at this important information which includes, our specialty, oral rehydration therapy as the number one point: www.7pointplan.org.

HIV and Anemia

St. Johns National Academy of Health Sciences in Bangalore, India (2005 Small Grant) set out to examine the role of nutrition interventions in improving health among anemic HIV-infected children.

Maternal-to-child transmission of HIV is considered an epidemic in India and a common association of anemia in these children increases their chances for illness and stunted growth.

A total of 88 children aged 2 to 12 were studied and followed. Over half (52%) of these were found to be anemic, and the main cause was iron deficiency. Thus, adding iron supplements to the antiretroviral treatment was found to make a significant benefit. The caregivers were also instructed about improving the children’s diets to contain more iron.

The investigators, however, conclude that much more research is needed, but are grateful that they now have a cohort of subjects and contact with a community.

All reports herein are available on our website and more complete reports can be sent to you if you request them.
Breastfeeding is best because:

♦ It is the natural way to feed the baby.
♦ Provides mom’s antibodies to baby to boost immunity.
♦ Protects against allergies.
♦ Helps bonding.
♦ Baby can easily digest it.
♦ Delays fertility in most women.
♦ Produces hormones that help mom relax.
♦ Mom’s body recovers faster.

A Coloring Book for Siblings
Some 10-15 percent of babies born in the U.S. are premature and need care in a neonatal intensive care unit. Brothers and sisters of these infants, expecting to have a new family member to join them at home, are extremely disappointed and often do not understand. Platypus Media has published a delightful coloring book (shown here) which explains in simple terms what is happening and that everything is being done to make their baby well enough to take home. Book is available from www.platypusmedia.com.

Good News in Pakistan
One of our 2009 Grant recipients (also 2007), Blue Veins, reported that Pakistan’s Health Ministry has finally agreed to the rules of the Protection of Breastfeeding & Child Nutrition Ordinance 2002. This will prevent baby formula producers from using expressions such as “equivalent” on formula containers and will require labels that encourage, not discourage breastfeeding. Other rules also apply, all of which are likely to improve the rate of natural feeding in Pakistan.