



CHILD HEALTH FOUNDATION

...saving the greatest number of children's lives at the lowest possible cost. • Issue No. 3, 2011

Saving Lives in Nigeria



Nutrition education involved training community health-care providers and volunteers on essential nutrition actions by the **University of Ibadan** in Nigeria.

(2009 Small Grant) These actions were carried out in 4 communities and about 5,000 people were reached.

The project was divided into 3 phases. First a survey was done involving 339 mother/child pairs. Then the nutrition education phase which used innovative methods such as drama, focused group discussions, audio-visuals, and posters such as the one above. The 3rd phase was a monitor of growth.

Education focused on teaching pregnant and lactating mothers exclusive breastfeeding, immunization, micronutrient supplement availability and sources, hygienic environment and the provision of care for their children, using community drama, focused group discussions and audio visuals in their local dialects.

They also provided skills training for 50 women for income generation to overcome poverty. We are pleased with this very fine report and the accomplishments.

Saving Lives in West Bengal

With a 2009 Humanitarian grant, **Chapra Social and Economic Welfare Association** in India is working to lower the infant mortality rates from 53% to 20% by motivating pregnant and lactating mothers to practice good health habits.

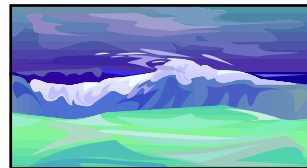
Thus far they have held group discussions with 292 young mothers. And 94 young women from the community have been encouraging pregnant women to register at health centers.



Full reports of projects available upon request.

From Pond to Sea

Everyone of us, if we encountered a child drowning in a pond, would do everything possible to save the child. Most of you who read this newsletter have already saved many children who were “drowning in the sea,” metaphorically speaking. You didn’t even see them.



Yet there are still children drowning. According to UNICEF, 21,000 children die **every day** from preventable causes. Child Health Foundation is, with your help, working to change that number and to improve the health of those who survive.

We welcome your dollars to help us help them. Use the envelope included with this newsletter or make your donation on line on our website. Thank you.

Saving Lives Everywhere

This is to introduce the **HealthPhone**, an innovative instrument designed to provide families with their own personal reference library and guide to better health practices, using their mobile phones. HealthPhone, designed by one of our Board Directors, Nand Wadhvani, won the most promising mBillionth Award of 2011. Please go to our website:



www.childhealthfoundation.org
and see the exciting information that is sure to save many children's lives as it becomes better known around the world.

Saving Lives in Madagascar

Our 2010 Small Grant project there, carried on by **Opportunity Solutions International**, is developing innovative ways to distribute and ensure the use of insecticide-treated bednets to prevent malaria.

They have been able to train a staff of surveyors and identify a region in the rainforest which is underserved. But the project has been delayed because they are developing a new technology to monitor the use of nets. Stay tuned.

Saving Lives in Orissa



They call them ASHAs, that is, accredited health activists. Because prescribing Zinc supplementation significantly reduces the duration and severity of diarrheal illness, AHSAs are being trained by the **Paribartan** organization (India) in its use. This with the help of a 2009 Small Grant.

Twenty villages with a population of about 5,000 were targeted. Seventy-five AHSAs and 60 Community Health Workers were trained, during a 5-day program, to counsel mothers to begin oral rehydration therapy on onset of diarrhea and continue breastfeeding, and to provide a 2-week supply of zinc supplementation. They were also instructed to inform them about the signs for seeking emergency care immediately.

This is, of course, a success story we like to hear about because it continues to save children's lives long after the program ends.

Saving Lives in Nicaragua

Tasca of North Carolina, investigated fecal contamination by detection of bacteria producing H₂S in rural water supplies in Nicaragua. Working with the Nicaragua government, they, with a simple, innovative field-test kit, have trained hygienists in their use and then distributed them to two areas of the country. This action has the potential to improve the health of a population of about 460,000.



This kit was designed to make the need for a laboratory unnecessary by using sterile plastic bags for the samples rather than glass bottles.

When contamination of the water was found, the hygienists returned to find and implement solutions, perhaps chlorination or recommending the boiling of the household water.

Dr. Harvey, investigator of the project, says, "I was very pleased to hear that in communities where the tests had shown fecal contamination, the people had responded willingly to the recommendations and there were documented instances of improvement in water quality.

TASCA is committed to supporting the testing for an indefinite period with supplies and follow-up training.

Emergency Relief

This year our emergency assistance went to Somalia and other countries in the horn of Africa, where the people (about a million) are suffering a horrendous famine, then complicated with an epidemic of cholera. A call for donations reaped \$1260 which bought 6 cases of CeraORS, then matched case-for-case by Cera Products Inc. Direct Relief made the delivery.



Oral rehydration solution is the lifesaving product in an epidemic of diarrhea, preventing the dehydration which is lethal to more than half of the sufferers. Most of those affected are children.

Monica Ashok, a senior student at the University of Maryland, served as an intern during the summer months, helping with many office duties and becoming familiar with the activities of the Foundation. She plans to go to medical school and wanted to learn about public policy and global health. Monica was a welcomed addition and plans to return.



Saving Lives in Dominican Republic

Undertaken by the **University of Medicine and Dentistry of New Jersey** (2009 Humanitarian grant), an undertaking, called the Outreach Project, to build a bathroom and a septic system to improve sanitation for an orphanage housing Haitian refugee children has been completed.

Because the flow of refugees from Haiti, still trying to recover from the earthquake and cholera epidemic, has been considered a threat to the Dominican Republic, the government has been deporting Haitians. This has caused the Outreach Project to go undercover.

Yet they have been able to gather additional support for constructing a kitchen and more dormitory space. They say the bathroom construction had the effect of encouraging this support. We are pleased to have had a part in this endeavor.

Saving Lives in Mali

Work in Mali was conducted by the **Mali Health Organizing Project**. They called it Action For Health and is designed to help the community help themselves. The program was aimed holding workshops to teach mothers to make enriched porridge using locally available and inexpensive ingredients, and then those mothers would lead workshops with neighbors. When an increase in waterborne disease was linked to illegal trash dumping in the stream, Mali Health helped rally community members to remove the waste and impose a fine for future dumping.

Other action involves teaching the importance of vaccinations and bednets using unique educational tools shown in this picture. So far the program has reached 800 children and continues.

