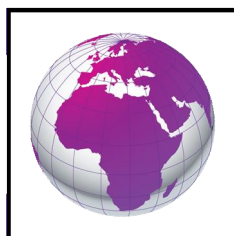




....saving the greatest number of children's lives at the lowest possible cost

Issue #1 2016

Small Grants Awarded



In 2015 we received 76 proposals from 19 countries covering various children's health related issues. They were reviewed by our grant committee of health experts, who look for projects which employ innovative methods to improve and save children's lives, and then award them up to \$5,000 which, especially

in developing countries, is a small fortune. We were able to fund 7 innovative grants (\$5,000) and 1 Humanitarian (\$3,000) to 6 different countries*. **Lessons learned ultimately benefit children everywhere.**

Innovative Grants

1. **Grampari, India**, (funded in 2013) will continue the Tippy Tap program to teach handwashing.
2. **Women Empowerment Program, Rwanda**, (funded in 2014) will continue bcpap program to save newborns.
3. **Youth for Social Change Org., Rwanda**, are conducting a study to determine malnutrition and give nutrition training.
4. **Nyakach Helping Hand Group, Kenya**, plan to install water pumps and give hygiene instructions.
5. **USAWA Development Initiatives, Kenya**, will conduct a survey to determine main causes of disease in that area and then work to prevent them.
6. **Education & Health for Economic Empowerment, Ghana**, will promote child feeding and care practices.
7. **The Iba Foundation, Nigeria**, wants to publish comic books as a means of eradicating malaria.

Humanitarian Grant

TDP, Sierra Leone, will install solar lighting and purchase a refrigerator for a community health center.

*We wish we could fund the others that received high scores. If you would like to help with funds for these, please let us know and we will even let you select the project, then keep you informed about its progress.

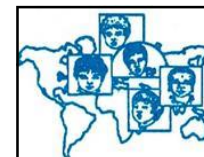
Our 2014 Annual Report will soon be ready for distribution. If you would like a copy, please call our office, email or read it on our website.

Something New

Please visit and admire our new website. Our Board felt that since we are now in our 30th year of saving children's lives we should update our technology to fit the 21st century. And we add new things to our Facebook page too.



Child Health Foundation, established as a non-profit in 1986 is celebrating its 30th birthday. Of course there was no website then, but saving and improving children's lives was the paramount activity as it is today. Charlene Dale (now Rikkonen) was the original Executive Director. Then called *International Child Health Foundation*, the name changed to the present name in 1994, with a change to the logo used now. This was the logo until that change.



Ms. Dale and her colleagues were committed to promoting funding for projects that affect the poorest people, particularly in developing countries. A quote from a 1992 newsletter states, "One of the key areas of frustration was that most research and implementation funds somehow go to diseases and problems in the developed world."

One of the specific efforts was the promotion of oral rehydration therapy (ORT) which at the time, though the effectiveness was proven and it was known and used worldwide, after more than a decade, less than 20% of children who needed the treatment got it. As a result of this effort, at least in part, it is used widely now for the prevention of dehydration in children with severe diarrhea.* In the U.S., when ORT is given at home, the greatest benefit is that it prevents the child from having to go to the hospital and get poked with needles.

Charlene went on later to found an industry to produce ORT. She is now the CEO of Cera Products, Inc, successfully supplying a much needed elixir.

Changes, yes, but our vision "to inspire community organizations which promote child health and survival across the globe" remains the same.

*See homemade recipe for ORT on page 3



Letter from the Chair

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Dear Friends,

Child Health Foundation is celebrating 30 productive years as a non-profit, public charity dedicated to improving the lives of children in low-income settings across the globe. Our biggest 2015 news is the launch of our new website, www.childhealthfoundation.org. We are mobile-friendly, enabling us to use the latest technology as we keep in touch with our donors and with the wonderful grantees whom we have funded through our Small Grant Program.

We are also celebrating 14 years of continuous funding to our clean water project in Bangladesh, with the generous support of Miss Esther Lazarson of New York. This project supplies clean water to thousands of families, including many children. We continue to support the icddr, b in Bangladesh, by receiving donations for their Centre Fund committee meetings, and shipping supplies for an NIH project on the epidemiology of cholera.

The Child Health Foundation is always sensitive to the impact of disasters on children. This year we funded the donation of CeraLyte, a rehydration solution produced by Cera Products Inc. to victims of the typhoon in the Philippines.

We are very pleased that 2015 brought us two new Board of Directors members. Bonita Stanton, M.D. a pediatrician and Vice Dean of Research at Wayne State University School of Medicine in Detroit, and Susan Lisovicz, a journalist, educator, and communication consultant who is a visiting professor at Arizona State University's Walter Cronkite School of Journalism. Both are past members of our Advisory Board and have transitioned to the Board of Directors. The Board of Directors, with 14 members, met four times in 2015, including a very productive all-day retreat. The members of the Board of Directors are dedicated child health professionals who make great contributions to the work of the Foundation, including reviewing the hundreds of proposals that we receive for the Small Grants Program.

We were extremely honored in September 2015 when the Foundation's Director Dr. R. Bradley Sack received the Johns Hopkins Global Achievement Award for his lifetime commitment to global health. The all-day event at Johns Hopkins Bloomberg School of Public Health, culminating in a dinner, hosted by Drs. Mathu and Patricia Santosham, brought together many colleagues who have dedicated their lives to promoting children's health throughout the world.

We are 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. With the help and support of our donors, Child Health Foundation has made a difference in the lives of thousands of children and families throughout the world. Yet, the need continues! We thank you for your support in the past and hope you will continue to help us reach the many children in need with your generous donations. We appreciate your comments and your assistance in enabling us to fulfill our mission of *improving the lives of children in low-income settings across the globe by empowering local communities to creatively solve their most pressing child health challenges.*

Sincerely,
Maureen Black, PhD
Chair, Board of Directors

Visit our website at www.childhealthfoundation.org, Facebook and Twitter

Clean, Clear Water



EPRC, Bangladesh: This water project, funded by Esther Lazarson of New York, is now in its 19th phase. The recent report indicates that they have installed 7 new tubewells serving an additional 1250 people, 300 of them children. Three of the wells were financed by Maryland Presbyterian Church. These folks all live within 50 meters of the wells, and so carrying pots on their heads, leaving their toddlers tied to bedposts, and walking to the dirty water river is not necessary any more and they are very grateful.

The total number served now since the project began in 2003 is over 40,000. Some of the funds were used to install latrines for very poor families to prevent open defecation. Other EPTC funds were used to continue classes for school children unassisted by the government and for education of women since they were now free from carrying water from the river. A volunteer group from each option area, called Women for Environment and Livelihood (WEL) was formed to overlook care of the tubewells as well as being instructed in sanitation and health.



One Program, Ten Years Later, Hundreds of Lives Changed.

The Child Health Foundation gave a \$5,000.00 one-time grant to a Nigerian initiative in 2006 that promotes healthy practices. The Sweet Mother program has reached nearly 2,000 women and is still going strong. **This is what CHF does.**

The following is from a 2008 newsletter.

Eclipse Development Initiatives finalized their Sweet Mother Program, empowering parents and families with knowledge, resources, skills and behavior to ensure safe motherhood, healthy children and a good start in life for newborns. They used counseling sessions and visual and auditory aids to promote breastfeeding, immunizations, and oral rehydration therapy, and treated bed nets to prevent malaria.

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

Make it at Home

Sometimes it's not possible to go to the store when your child is having diarrhea. And of course you don't want your precious one to get dehydrated. So here is the recipe for ORS.

Feed even if the child is vomiting, just give by spoonful, a little at a time. And continue to breastfeed.

A good suggestion is to have a supply of ready-made ORS on hand also. Pedialyte is readily available, or we would like to recommend that you order some CeryLyte from ceraproducts.com.

But you can't beat the price for the home-made!

Oral Rehydration Solution

- 1½ tablespoons of granulated sugar
 - 2 cups of water
 - 1/2 tsp. salt
- Instructions:
Mix well sugar, water, and salt together. Drink enough to replace the amount of fluid lost. Banana or other non-sweetened mashed fruit can help provide potassium.

Saving Babies

SAVE, Bangladesh, has trained midwives to facilitate safe deliveries. The service is very much appreciated by the Government Health Department and they are cooperating. They have provided 6 training sessions with 25 midwives in each session, also providing them with delivery kits. Then these trained midwives continued to instruct others and they have noticed a reduction in infant and maternal mortality.



An article about the project appeared in a Dhaka newspaper. CHF's name and icon are on the poster.



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Newborns Survive

Tenwek Hospital, Kenya: This program called Helping Babies Breathe has provided training for 180 neonatal care providers in Kenya and Tanzania at 4 sites and 6 master trainers have been trained at 2 different sites that will continue to teach HBB and sustain education programs. (HBB is a curriculum for neonatal resuscitation designed to train health providers in low-resource settings).



The team saw a dramatic drop in birth asphyxia in the first 3 months and they report now that this decline has continued. Dr. Rule, the PI of the project writes, "The project has been presented at multiple meetings at Cincinnati Children's hospital and both papers have been submitted for presentation at Pediatric Academic Societies in the Spring of 2016." She hopes this project will be a model for other low-resource settings to save newborns and mothers.



RPDS, India, Humanitarian grant: The objective of this organization was to increase awareness on health and hygiene through education. They were able to reach 400 adults and 360 children by training 20 Community Health Volunteers to hold workshops, visit the slums and hand out pamphlets. They taught preventing enteric illnesses by encouraging the drinking of clean water, storing it properly, and handwashing.

Families Survive

Aguayuda, Columbia: A project, designed to improve health for children and their families, sought to reduce water-related illnesses.

Their results included the successful installation of 196 of the 200 handwashing stations (Tippy-taps), benefitting families of 13 indigenous communities and one school. This benefited 1,360 people, 600 of them children. Residents of the 13 communities were provided training in water management, proper hygiene and sanitation and the prevention of water-related illness through a series of 5 day workshops, and in 7 of the targeted communities, community WASH committees were established. In addition, a total of 14 hand-washing training sessions were carried out. Survey results at the end of the project pointed to a 42% reduction in instances of diarrhea in participating households. This was determined by a survey using a mobile phone app called Magpi.



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