

KAILAKURI HEALTH CARE PROJECT

(In association with Indigenous Peoples Development Services)

Village Kailakuri, Madhupur Thana, Tangail District, Bangladesh

April 2018

“Easter Greetings from Kailakuri”



We would like to let our friends and supporters know that having applied to register Dr Baker’s Organisation for Well-Being with the Bangladesh NGO Bureau, three levels of the Bangladeshi government (National Security Intelligence, Tangail District Special Branch (Police) and Tangail District Commissioner) are now carrying out simultaneous investigations. There are a lot of friends who are helping and praying about this process. We hope that we will be able to become an independent NGO within a few months.

Mothers and Babies at Kailakuri – by Sujit Rangsa

Warm greetings from Kailakuri Health Care Project to all our friends and supporters on Easter Sunday. In this newsletter, we will share some stories about our young patients and their families.

Kailakuri Health Centre is in the northern part of Tangail District, near the border with Jamalpur and Mymensingh Districts. We have a patient named Faria Khatun, who is from a village in Jamalpur. It is about 22 kilometres away (and falls outside our mother and child village health care area). She was born on 21st of August 2017. She was a premature baby, born at seven months, and weighing 1.5 kgs. The baby couldn’t suck milk properly from her mother Poppy’s breast. As a result, the mother’s right breast swelled up and she developed a fever and pain. Some family members stopped her feeding the baby and they started feeding her with medicine from a village healer. But the baby and mothers’ conditions deteriorated. Faria lost weight and became weak.

Her mother heard about Kailakuri Health Care Project from some other patients. She requested family members to take her baby there. But family members would not agree to that. In the meantime, the baby’s situation was getting worse.



Poppy and Faria

Finally, one day Poppy came at the hospital on her own accord. When she came, her child was 1.3 kgs, and very weak. Treatment began immediately after getting admitted. But Poppy always worried, “Will my child and my breasts be cured or not?” Over seven weeks, Faria gradually improved and now her weight is 3 kgs. Poppy doesn’t have a breast-feeding problem anymore. When asked why she didn’t take her daughter to another clinic or hospital, she said they would have involved more hassle and expense than Kailakuri.



Mukta and her daughter Bithi

Mukta Begum, aged 25, is one of our Type One diabetic patients. Her village is Rashidpur, which is 10 kilometres away from our project. She takes insulin and other health treatment from Kailakuri regularly. Her daughter Bithi, who was born at her grandmother’s house on 3 Sep 2017, was her first-born and an 8-month premature baby. As she was premature, her size was small. She was keen to come to Kailakuri to deliver her baby as Kailakuri staff motivated her and gave some good advice.

But the rest of the family pressured her to go to her mother’s house. There is a tradition for Muslim women to go to their parents’ home when they first give birth. Her baby Bithi was 1.4 kg at birth. Mukta’s relatives admitted them in a private clinic in Jamalpur. They were not able to manage expenses there, so after 3 or 4 days they returned. The private clinic referred them to Mymensingh Medical Hospital. In the meantime, Mukta’s left breast became fat including fever and pain. She stopped breast-feeding her baby. Mukta was not keen to go to other hospitals. She made a call to the Kailakuri clinic. Staff from Kailakuri advised her to come to the project as soon as possible. They came on 12 Sep 2017. The child was very weak. After two months, Bithi’s weight increased to three kg and she is in good health. Family members changed their mind about Kailakuri and became quite emotional when Mukta was discharged from the project.

Sagor Ali was born on 21 Sep 2017. She went to her parents’ house a few months before her first birth, as per Bengali tradition. When her pregnancy was at nine months, she was diagnosed with eclampsia. They didn’t know what eclampsia was. Kailakuri treated her for eclampsia. When we told her she would need a caesarean operation for a safe delivery, both families would not agree to take any responsibility. There was a conflict between the two groups. We sent staff to both groups and educated them about the matter. When they accepted, we sent Sunia to Madhupur for operation alongside one of our birth attendants. Sunia had a son, now three kgs. Both families are happy now.



Sunia and her son Sagor

Update on Dr Baker's Biography

Kate Day continues on the task of writing Edric's biography. She recently finished a chapter about the beginnings of the Diabetes Programme, and she is currently writing about Edric's methods for teaching paramedics. It's fascinating stuff! Kate hopes to finish the first draft manuscript by mid-2018, then revise this into a publishable form. She welcomes your prayers for the best ways to capture this important story.

Merindy and Jason Morgenson's Update - 29 March 2018

We are doing well. I think we find it hard to believe that we are actually going to be leaving for Bangladesh soon. We have been waiting so long for this day, and now it seems like it is finally here! We are very grateful for all the patience that everyone has had with us, and with the multiple delays we have had over the last five years. We have had a lot to get ready since receiving the NGO Bureau Approval letter for our visas. Jason's last day working in the Emergency Room at our local hospital is 12 April.

We plan on cleaning out the house and putting it up for sale after Jason is done working at the hospital. One of our friends is getting married 12 May. So we are hoping to leave immediately after the wedding. We will be making final decisions about the airline tickets within the next week or so. Thank you so much for your support!



It is five years now since Edric did his last NZ-wide speaking tour. This year we would like to be able to visit all of the groups he visited to bring you up to date on this unique and most worthwhile mission. As you plan your 2018 programme, please get in touch with Peter Wilson to arrange a speaker to visit.

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WEBSITE www.kailakuri.com

FACEBOOK www.facebook.com/kailakuri
(Like our Facebook page and receive regular updates)

GIVELALITTLE www.givealittle.co.nz/org/khpc

Donations can be made by...

- From New Zealand:
 - Making an online payment to our New Zealand bank account (ANZ, Whakatane). Account name: Kailakuri Health Care Project – Link Group; Account number: 01 0486 0185024 00.
Please email Glenn Baker at treasurerkhcp@gmail.com with your donations and contact details for receipts, also details of any regular automatic payments set up.
 - Posting a cheque to “Kailakuri Health Care Project – Link Group” to KHCP-NZ Link Group, PO Box 522, Whakatane 3158, New Zealand.
- Internationally:
 - Paying online through our website via Paypal at <http://sites.google.com/site/kailakurihealth>
 - Making a telegraphic transfer (TT) payment to our New Zealand Bank Account (ANZ, Whakatane, New Zealand). Account Name: Kailakuri Health Care Project - Link Group; Account Number: **01 0486 0185024 00**, SWIFT code **ANZ BNZ 22**. Please email Glenn Baker at treasurerkhcp@gmail.com with your donation and contact details.
 - Please get in touch with Pijon Nongmin at drbakersorganisation@gmail.com for options to donate within Bangladesh.
- If you live in the United States, you can write a cheque to “Asia Connection Inc”. Please indicate on a separate note that the donation is for Kailakuri and send to Ted Rose, Treasurer, Asia Connection Inc, 1226 Scott St, El Cerrito, CA.94530-2458, and give your contact details for a receipt.

For any changes to your contact details or if you would like to receive your newsletter by email please contact Pijon Nongmin at drbakersorganisation@gmail.com (international) or Hilary Lynch at tui_eden@xtra.co.nz (NZ)

*Thank-you so much for your support.
Our greatest need is gifts towards on-going running costs.*