

Christmas Greetings from Bangladesh

December 2011

I'm sitting, working, at my table on my verandah at the back of the outpatients' side of the health care project. The noise here is constant. The murmur of voices (adults and children) in the background, the sound of people talking and then a mobile phone goes off and someone's voice gets even louder. It is standard practice here to shout into a mobile phone.

There is also the sound of traffic, though a lot quieter than in Dhaka. I can sometimes hear a bicycle bell as they signal to people (and animals) that they are behind them and coming past. Motorbikes have made their place here recently as a means of public transport and can be heard frequently tooting their horns. Before I came, large trucks transporting pineapple would come through the Project blasting their air horns but that stopped as these trucks made the dirt road in the rainy season unpassable for all including themselves. The road is now in the process of being tarsealed with promises from authorities that the trucks would be provided a loading bay some 1.5km before Kailakuri. This remains to be seen.

I've been sitting here when golshap (lizards) have wandered past, the largest almost 3 feet long. If I'm quiet he moves slowly. The golshap keep the rat and snake population down, so are useful to have around. I've yet to photograph a large one. At night the ground is alive with small toads, also useful. They keep the insect population down and I often find them in my house hopping over the floor along with geckos running across the walls.

My biggest frustration living here is the internet connection, occasionally I am lucky and can get reasonably good access from my verandah but often I need to move elsewhere on the project grounds where the signal might be better.

I spent an hour in the inpatients' office one night on my computer (so far the best place for internet connection) while staff (just around the corner) were stitching a wound on a patient's leg. He seemed to be in so much pain I thought they were stitching without anesthetic but later learned that he had, had a local and it was the uncomfortable position he was being held in which made him moan. This man was on his bicycle and had been in an accident. I was told he got caught between two trucks trying to pass each other. The villagers have taken the truck driver and truck owner into custody to be tried for the accident. Village justice here is recognised by the authorities so when involved in an accident in Bangladesh it is a case of hit and run as justice meted out by locals can be severe. During the operation the power went off and stayed off for most of the time. The operation continued by torchlight. (I sometimes wonder if these power cuts are a means of torture by the authorities. The power gets shut off at the most inconvenient times especially in the evenings when it can go on and off, two or three times or more.)



Now can I introduce you to Mim. Mim and her mother, Moriam, have been in the nutrition wing of the hospital since the end of September. Mim was admitted with malnutrition. Her mother, who has been largely ignored by her husband who prefers to be with his other wife, lives with her mother who works for another family and often they do not have enough food. Both mother and child are in the hospital to improve their health and gain weight.

Unfortunately the middle of October saw some staff spend time in hospital with severe fever from a flu virus, while many were cared for at home for up to a week. This was along with a financial crisis caused by the hold-up of funds in the bank, where some staff could not be paid for four days. Finances for many here can be extremely tight and it was found that a few of the staff needed to borrow money in order to buy food. We hope never to have this situation occur again. The financial crises continued on for another month while donations sent from overseas were tracked down and finally transferred into our bank account. Now as we enjoy the cooler weather of autumn and move into winter, the flu virus has abated and we live in anticipation of a more secure financial future.

Christmas comes as a time of hope and joy for many as they celebrate the birth of Christ. For those of you who celebrate Christmas we trust you will all experience the many blessings of the season. Please remember in your prayers and gifts those who struggle with the daily necessities of life, often through no fault of their own.

Christmas Greetings to you all, from the staff of the Kailakuri Health Care Project.

Christine Steiner

Funding and Management Consultant

October 2011

Mid September 2011, volunteer Christine Steiner travelled to Bangladesh to live and work at Kailakuri. Christine writes:

I have moved into my new home on the Project grounds. I spent the first 4 nights in Dhaka then the next 6 with the Holy Cross Sisters (Mina and Rupa) at Pirgacha (some 30min cycle from Kailakuri). The cycling has been good exercise and I'm so pleased I have a mountain bike, the fat tyres make negotiating the mud and ruts in the road a lot easier (thank-you Glenn). Interestingly no-one here on the project wanted it and I think they wonder why I like it. I've also been getting some sideways looks as it's quite different from the standard Bangladeshi cycle, or maybe it's also because I'm a foreigner.

Many workers in the Project are trying to help me with my Bengali. I quite often get asked if I am well or have I eaten (this is all I understand so far) amongst other things. I have learnt to answer them and can now say 'see you again'.

The days from now will probably start to become fairly routine. I haven't done a lot of work yet except access and send emails, but now that I am here living on site I will start to get onto a few things that need to be done and I know there is more, especially looking for funders.

Last Tuesday, Pijon (the Project Manager) and I went to Mymensingh to sort out my internet connection and buy a printer. Wireless internet connection at 1gig per month is about NZ\$5. It cost about NZ\$50 to sign up. I also picked up a mobile phone to use here (about NZ\$15 – the cheapest they had) as calls, even overseas, are very cheap.

A trip to Mymensingh (46km) takes about 2 ½ hours. We started out by motorbike (the driver, Pijon, then myself on the back). This was from Pirgacha to Modhupur (about 30min). From Modhupur it's by bus to Mymensingh. The motorcycle ride is actually quite pleasant especially when compared to the bus, whose driver spends most of his time tooting the horn, braking and accelerating.

We had quite a successful day, only forgetting to buy a power stabiliser which we should be able to buy in Modhupur so meanwhile I'll use the one I brought from home which I thought wasn't working because although the 'protected' light was on, the 'faulty' light was also on. This is apparently because the electricity current is weak.

After being told it was not easy to find a place on the Project site to get internet connection, I am totally rapt that I have it on my verandah. It's a bit dodgy and a bit slow at times but I can use it and that right now is the most important thing.

I'm expecting to go mad soon with the mosquitoes unless I find a way of coping with them, roll on winter, I've been told it's not too bad then. I'm not sure my feet will ever be clean again! I'm often walking on muddy footpaths and roads and well, cycling through muddy potholes in sandals doesn't help either. My feet have also been swollen since I got here – again roll on winter!

The food is rice and rice and more rice, heaps of it with each meal! However, the cooks have been kind and are making me rooti (flat bread) for breakfast though I think that is also made out of rice flour. The food is very basic, turmeric goes into everything and I'm pleased to taste garlic often. Most food is cooked until 'dead' and has varying degrees of heat (spicy and depending on when I get to the dining room for a meal). The only fresh food I've had are pineapple and tomato. They also cook a green vegetable for each meal and even though I'm not usually fussy - it's not nice! I still try to eat it as I guess it has to be good for me. Meat is usually fish (eel – full of bones) and chicken. And we also get boiled eggs.

Each day the power goes off at least twice and always in the evening for at least two or more hours. Right about dinner/bed time! It makes a laptop and wireless internet and rechargeable table lamps very useful.

The spiders are the size of the palm of my hand but harmless, toads come into the house to eat the bugs, one slid down the toilet the other day (poor thing). There are lizards and each time I see one it seems larger than the last I saw - the last one being 2-3ft long. These lizards keep the snake and rat population down so they are quite useful to have around. The lizards are also apparently quite safe as they are scared of humans but have been known to bite and can do damage with their tails. I've been told they live in the roofs of houses. I'm not sure I want one in mine, I'll have to photograph my ceiling for you. The cicadas here are deafening!!! I thought there was a fault with the electricity when I first heard them.

What makes it worthwhile being here are the people. I have felt welcomed and accepted from the start and hope that as time goes on and my Bangla improves I will be able to build some good relationships.

August 2011

VOLUNTEER WANTED TO DEVELOP AND MANAGE A GIFT SCHEME IN NZ.

At the recent AGM (see below) a motion was passed agreeing that the NZ Link Group will establish a donor gift scheme. The scheme will allow benefactors to fund specific activities at the Kailakuri Health Care Project. The gift packages will vary in nature and size. Some will be suitable to give to friends and relatives as birthday or Christmas gifts, others will be more suitable for larger or corporate donors.

A range of gift packages will be planned and costed by the Kailakuri staff. They will design gift packages for things that are needed the most. Small attractive vouchers will be designed describing the gift and the benefits which the gifts will bring to the poor.

A volunteer is sought to develop this vision and manage the gift scheme.

Here is a rewarding challenge for somebody! Is that somebody you?

Interested? Looking for a way to serve? Got some questions?

Please contact Link Group Coordinator, Peter Wilson: kailakurihealthcentre@gmail.com

ANNUAL GENERAL MEETING

The AGM, held recently in Hamilton on 16th July, was attended by Peter Wilson (Chair), Glenn Baker (Treasurer), Ann Baker, Hilary Lynch, Nelson Lynch, Hilda England, Alton England, Betty Baker and Christine Steiner. Main points discussed during the meeting follow for your information

Financial It was noted that donations from NZ are down in the last 12 months. This has been countered by an increased donation from the Morgan Family Foundation and from donors in the USA. Finance of ongoing operational costs remains a concern.

A motion was passed thanking Peter Reid for auditing the NZ Link Groups accounts.

A motion was passed agreeing that the Link Group establish a donor gift scheme and seek a volunteer to develop and manage this scheme.

A motion was passed agreeing that the Link Group “as a registered Charitable Trust, set up a separate bank account and establish a scheme for attracting bequests and other donations to create an investment fund, the proceeds of which would be used to support ongoing operational expenses at Kailakuri Health Care Centre.” Carol and Peter Laing, have graciously agreed that this fund be named after their mother, Libby Laing who gave so much of herself to the poor of Kailakuri and who loved Bangladesh so much. We will keep you informed as this new long term support initiative is developed.

INTERIM MISSION MANAGER Christine Steiner of Hamilton who visited Kailakuri last year has volunteered to help out over an interim pending somebody volunteering to work as Mission Manager on a more permanent basis. It took a long time (very frustrating for all) but finally all the approvals and paper work came through in July and a visa is currently being issued by the Bangladesh High Commission in Canberra. Christine hopes to travel to Bangladesh towards the end of August. This is a very exciting development and we are thrilled that Christine has felt challenged to take on this testing position. At Kailakuri, Christine will liaise with donors, process

funding applications and help out with training of staff and some administration. Our sincere thanks go to those who are providing financial support for Christine in this new step on her journey through life. Our gratitude, love and prayers will be with you Christine.

Funding (\$3,500) is currently being sort to build an extra cottage so that Christine can be accommodated.

LONG TERM PLANNING FOR MEDICAL OFFICER IN CHARGE Dr Mariko who is working at Kailakuri for 8 or 9 months of the year has been able to relieve Edric's load somewhat. With the arrival of an Interim Mission Manager, it is anticipated that Edric's load will be lightened even more, thus allowing him to spend time canvassing for both financial and personnel support inside Bangladesh.

Discussions have been held with both Church Mission Society (CMS) and Service In Mission (SIM). Both of these organizations are publicising the need somebody to replace Edric.

A young American couple, both qualified medical Drs, who visited Edric in the field some years ago, returned recently and spent two days at Kailakuri. They apparently are looking for a place where they can carry out their life's work and service, but there is no indication that this will be Bangladesh or Kailakuri. It is however encouraging to know that there are young committed professionals who are willing to commit to this demanding type of work, and this gives us hope that a replacement for Edric will be found.

Thank you for your continued interest and support.

Peter Wilson,

Coordinator,

Kailakuri Health Care Project NZ Link Group