

KAILAKURI HEALTH CARE PROJECT

(Project of Dr Baker's Organisation for Well-Being NGO)

Kailakuri Village, Madhupur Thana, Tangail District, Bangladesh



July 2021 – Memories of Dr Edric Baker and the Thanarbaid/ Kailakuri Health Centres

After about 20 years as a missionary in the Pacific Islands, the last few years being in the isolated Chatham Islands with a population of about 600, in 1994 I arrived in Dhaka, Bangladesh, where I felt absolutely overwhelmed by the sheer number of people. After 3 months at language school, I was missioned to the very busy health centre our congregation ran in Tuitai, a rural area which was 6 hours by engine boat up the river from Dhaka. Although the clinic was only a simple tin building, the quality, affordable health care that was provided, resulted in people coming not just from the local area but also from far away villages. So many lives were saved at this clinic, especially those of pregnant women, those who had complications at delivery and the babies of these women.



Sister Julianne Hayes-Smith recently returned to NZ after many years in Bangladesh working with the Missionary Sisters of the Society of Mary (SMSM). Provaty (left) is now running the Safe Motherhood Project.

In writing about Edric and the health centre he established first at Thanarbaid and later in Kailakuri, I am starting with this experience at Tuitai because there was so much that was similar. Both Edric and us (the SMSM Sisters) felt called by God to share our lives, as Jesus did, with the poor and marginalised, particularly in the area of health care. No one was turned away because they could not afford to pay. People of every ethnic group, religious affiliation and socio-economic group were welcome. Just as Edric wanted 'health care for the poor by the poor', so did we. This meant employing as staff, people who were poor, deprived of the opportunity for much formal education and unable to find a job elsewhere. These staff were trained, according to their capabilities, to fulfil the various roles needed within the health centre and its outreach programmes.

Unfortunately, over time, some of those who came from outside areas started to cause major problems for the Tuitai mission. Although the Archbishop deeply appreciated the work of the health centre, his priority was to protect the local people. He saw that the

only way of stopping these troublemakers from coming to Tuitai was to close the health centre, which we did in August 1995, after 14 years of love and sweat there! Edric too went through many tough times, when it seemed that his dreams might be shattered. He must be so happy that the health centre at Kailakuri remains true to his vision and that people he trained and loved as his brothers and sisters, continue to offer wonderful health care to so many very needy people. After leaving Tuitai we moved to Dhaka where we had a house. After a time of doing further Bangla studies and then helping train paramedics for several slums of Dhaka, Caritas Bangladesh asked me in 1996 to help them develop their community health programmes. I also worked 3 evenings a week running health education sessions and providing primary health care to poor garment workers.

I do not remember exactly when I first met Edric, but he certainly came to visit us at our house as soon as he knew that Libby Laing was going to come and work with him. He wanted to make sure that Libby would have a place where she could stay whenever she was in Dhaka. Naturally, we were delighted! My initial impressions of Edric were those of a gentle, quietly spoken (seemingly timid) man. I was struck by his sensitivity to the challenges Libby would surely face in adapting to Bangladesh and the work with his project. He really wanted to make sure that she would have support from other women of a similar culture and a place where she could

relax away from his project. Libby became an integral part of our community, so much so, that she decided that she would be our 'mother superior', as we didn't have one at that time. She would sign her letters to us: Libby Laing MS. We loved her deeply!

During the many years that Libby was in Bangladesh, we got to know Edric much better, both when he would come to our place or when I visited Libby and the Health Centre, both at Thanairbad and Kailakuri. I felt very much in tune with Edric's vision of care for the poor, and the 'family' approach he had with both staff and patients. The amazing health care that was being given with such basic equipment and medicines, really impressed me. His personal austerity of life reminded me of Jesus's words to his disciples as he sent them out on mission. "Take no extra tunic, nothing in your haversack". All of his clothing would have fitted in a small overnight bag! Mind you there was a downside too. Edric would not travel overseas with more than carry-on luggage. This caused friction with Libby when she prepared a suitcase full of goodies for the people at Kailakuri and us, and then Edric would not bring it back from NZ! At first, when Edric visited our place he was reluctant to have anything to eat, especially any 'special treats'...as though he didn't have the right to have any luxuries in his life! The things we were offering were certainly not luxuries by most people's standards. Gradually, he relaxed and was happy to sit down and eat something with us, as we shared our common concerns, hopes and even some treats!



Sharing Safe Motherhood experiences at Kailakuri – KHCP staff on the left

Becoming aware of the incredibly high number of women in Bangladesh dying of preventable causes during pregnancy or delivery stirred me to start the Caritas, Safe Motherhood Project (SMP) in 1999. Assisted by Provaty Rozario, a wonderful Bangladeshi woman, we began training poor village women in disadvantaged areas, with high maternal and infant mortality, to provide antenatal/ postnatal care and conduct safe home deliveries. When Libby saw the success we were having, she suggested to Edric that his staff members involved in mother child-care in the community and at the Health Centre, take part in our training. He agreed, and so in 2005 Nibita and Hamida started the first of 5 modules of midwifery training, interspersed by practical experience back at the project. They were keen students and readily put into practice whatever they learnt.

Edric was pleased with the outcome and so over the years Morium, Eti Rani, Shapla, Sobuza, Dipali, Shima and Nazma (I may have missed some names), were also sent for training. Edric once said to me, tongue in cheek, "I'm scared to send you my midwives, because they become so excited about what they have learnt, that they come back to Kailakuri and want to have another baby", (obviously thinking of the time they would need off work!). These women continue to come for refresher courses, where the midwives share experiences of positive learning, as well problems they have encountered; what has worked, what hasn't, and are then given the help they need to deal with these situations. Recently, a group of SMP trained midwives from various parts of the country had a very enriching Peer Learning Programme at the KCHP, thanks to the wonderful cooperation of staff and community people there.

I was away from Bangladesh, serving on our leadership team for Asia-Pacific, when Edric died. However, just before I returned to Bangladesh, Sr. Jenny Clarke who had been helping Edric during the last months of his life and continued to support the KCHP staff after his death, asked me to continue that support. It was a privilege to get to know Pijon and staff, as they tried to maintain Edric's vision and philosophy. It is always incredibly difficult for the person who has to take over from the founder of an organization, particularly when that person is a charismatic leader, as Edric was. There were times of immense struggle, during which I would tell Edric in prayer: "Now that you are face to face with God, you have more power than you had when you were here on earth, so please sort these problems out," and he obviously did (with help from the dedicated staff and supporters of KCHP), because the project with the lovely new name 'Dr Baker's Organisation for Wellbeing', remains true to the beautiful spirit Edric instilled in it. He must be happy and proud of the loving quality care for the poor, given both at the Health Centre and in the Community Programmes. I am!

Although I have had to leave Bangladesh because of incurable lung disease, I continue to keep in my prayer the staff and all those who help this wonderful project continue. I am very grateful for having known Edric, a deeply spiritual man, who generously gave his ALL, in the manner of Jesus, at the service of the poor and marginalised. He will continue to intercede on their behalf!

Sr. Julienne Hayes-Smith, SMSM

In memory of our former staff member, Anayet Hossain



In 2007, the patient load at Kailakuri kept increasing. Dr Edric Baker was responsible for the project and training suitable staff to become paramedics. At that time, Anayet Hossain, a diabetic patient from Solakuri village, applied for a job. The number of diabetics patients was increasing day by day. As diabetes is a lifetime disease, Edric thought that it would be worth recruiting a diabetic patient, and he chose Anayet as a staff member. Anayet used to live as simple a life as he could. Because of his long-time diabetes, he was also affected by heart disease. He took regular medication and follow up. He visited BIRDEM Hospital (one of the biggest diabetes hospitals in Bangladesh) on 13th of April 2021 and got treatment. And he was an inpatient at Kailakuri Health Care Project after he returned from BIRDEM. There was an iftar party

(an event of Muslim people during Ramadan in which they fast all day long and have some food to break their fast) on 11th of April where all staff including Anayet, patients and their attendants were present. Everybody participated in the party cheerfully. Unfortunately, that night Anayet had a heart attack at around 11:30 pm and died. He was 43 years old. He left behind his wife, one son (9 years old), and a daughter (5 years old).

Building donation from DSV



In Kailakuri, the temporary tin shed building, which was used to accommodate inpatients, was in a very poor condition and required extensive repairs. Kailakuri Health Care approached DSV Air & Sea Ltd, Bangladesh, requesting for a sponsorship for renovating the building. DSV Air & Sea Ltd, Bangladesh a subsidiary of DSV Panalpina A/S, a global Freight Forwarding & Logistics company, was kind enough to accede and replaced the old and dilapidated structure, with a permanent and beautiful concrete building, which can accommodate 7-8 patients at a time. This project commenced on 20th Feb 2021 and the inauguration of the wonderful new inpatient building was done on 10th May 2021, attended by the staff from DSV Air & Sea Ltd, Bangladesh. We take this opportunity to thank the Management of DSV Air & Sea Ltd for their kind and timely support.

Update from Drs Jason and Merindy Morgenson

Merindy, Jason, and the kids are waiting every day for God's approval to go back to Bangladesh. At this point, Merindy has been having some health issues and has been scheduled for surgery 14 July 2021. Please pray for her. Due to the COVID pandemic and health issues, we have not been able to travel in the USA to give presentations about Kailakuri. This has been very discouraging for us, but God always has a plan. We are now considering Zoom presentations and visits for our family, friends, and churches that we planned to visit. This was not our choice, as we much rather see everyone in person. Given our situation, though, it is the only practical alternative at this time. Please pray for us and for Kailakuri that we will be able to set up these presentations and visits. Pray that God will raise up many supporters for Kailakuri.

We have been so blessed with many supporters and friends of Kailakuri that we have not had any financial issues this past year and a half or so. We thank all of you for your faithfulness to Kailakuri. The staff and patients give thanks to God for you as well. The staff at Kailakuri pray for you every day. Thank you.

Kailakuri is dependent on your support. Donations can be made by ...

- Internationally:
 - Paying online through our website via Paypal at www.kailakuri.com
 - 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, 1920 Ralston Ave, Richmond, CA 94805, 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

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

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