



Workers making bricks



Carrying bricks from making place to chimney



Smoke coming out from chimney after baking

## NEEDS:-

Ram Maya Garti from Ghorí, Dang carry bricks with her husband and three elder daughters and her five kids goes to Children Development Program (CDP). She came to factory after their house was swept away by the landslide. After receiving clothes from CDO, she said with smiling face "Today my children will be very happy to get these clothes. I cannot afford to buy new clothes for my all children. CDP is good program my kid got chance to study, get food to eat and even get medicine when they are sick. I was so happy when my kid taught me about the health and how to wash hand properly. Before I did not know much about reproductive health, so I had 8 children now I know. Thank you so much for being our parents.

Ram Maya with her family in front of her hut



Thousands of migrant workers come to work in brick kilns to either repay the debts they have incurred from middle men or fleeing the hardship and joblessness of the country side. The workers are compelled to work in brick kilns with no safe drinking water, no toilets, no safe shelter and no health check-ups. From the outside it really looks like a huge refugee camp with small temporary huts (called Jhyaulis) made up of raw bricks covered by corrugated galvanized iron sheets. The porous walls of the jhyaulis are not at all efficient to protect them from the cold breeze of Kathmandu valley, 1350 meters high in altitude. Poor shelter conditions compounded by dust and high levels of air pollution released from the chimneys create a deadly combination.

The workers and their children frequently suffer from respiratory diseases, fever, diarrhea, and stomach pain. Hundreds of children end up in the brick kilns with their parents or with their peers making bricks and carrying bricks for six months in the dry season (November to June).



Most of them are in debt and work themselves to death to re-pay their loans. They are not aware of free medical facilities or cannot afford missing one hour of work. They live on the fringes of society and society is only interested in them molding bricks. If they fall sick or die, another migrant worker will replace them.

Keeping this in mind Care and Development Organization (CDO) provided an environment that nurtures learning while distributing daily nutritious meals as well as regular health care for the children of brick factories workers. It is a Day Care Centre for 120 brick children, but sometime children were increases to 150 children. More than 500 children have been benefited from CDO till to date.

## The goal of CDP -

- To provide nutritional food
- To teach non formal, behavioral and moral education.
- To prevent them drowning in pit.
- To make them habit for formal school.
- To admit them in formal school by providing them scholarship after the program completed.
- To train and aware them about personal hygienic, basic health and trafficking which is really need of them.
- To provide health check-up with counseling, awareness and follow-up



Children in class "A"

## PROJECT SUMMARY

The CDP was design for the 120 children of the 6 Brick factories worker-Kantipur , Lapa, BolBom, Bajra, Rameshwor, Shantaneshor Brick factory of Godawari VDC.

As the work in the brick factories is seasonal work for six month, so the Children Development Program was only for the six month starts in 1<sup>st</sup> Dec and finished on 30th May of every year.

We start CDP in 2006 with 30 brick children and have increased to 120 children in 2010. Target number of children was 120, but sometimes children reached the number to 141 children name which was registered in attendance file. 500 brick children have benefited from this program. And 45 children are getting full scholarship from CDO.

To make program more effective three class (A,B And C) was divided.

Class "A" has children from age 18months to 5 yrs.

Class "B" has children from age 6yrs to 9yrs

And class "C" has children from age 10 year to 15 yrs

Shyam shrestha doing his class-work



Fr.Joe & Fr.Paul from maryknoll and CDO volunteer Claire with CDP children

## Daily routine

10:00 - 10:30	Brushing/ Washing Hand, hygienic maintenance
10:30 -10:40	Nepali class
10:40 - 11:20	Moral Education class
11:20 - 12:00	1 <sup>st</sup> Lunch
12:00 - 12:30	Health class
12:30 - 01:00	Cartoon/Indoor Games
01:00 - 01:40	English class
01:40 - 02:20	2 <sup>nd</sup> Lunch
02:20 - 02:50	Math class
02:50 -03:20	Extra Activities
03:20 - 03:40	Out Door Game



Children with smiling face after receiving new jacket



CDO Health worker Jyoti examine chest of Jeevan.

## Regular medical check-up:-

The hazardous work, long hours, low pay and unsanitary working and living conditions combine to pose very serious health threats to the workers.

Taking a day off to rest means not earning enough to eat, so health problems escalate for both the parents and children. Their low income not sufficient to provide proper diet to their children, so due to it most of the children are malnutrition. Some children even die due to malnutrition and lack of medicine. So regular medical care with free supply of medicines, monthly follow-up and counselling was done. De-worming was done for all children.

## Vaccination

Vaccination was given to all the children below 5 years. 165 children got vaccination. 165 children were vaccinated and 388 parents received vaccine awareness



Vaccines given to child

4. IMMUNIZATION STATUS					
Vaccine	When	Date vaccinated (day/month/year)			
BCG	at birth	19/2/067			
Polio1	at 6 weeks of age or later	19/2/067			
Polio2	one month after first dose	19/2/067			
Polio3	one month after second dose	21/4/067			
DPT/Hep B 1	at 6 weeks of age or later	19/2/067			
DPT/Hep B 2	one month after first dose	19/2/067			
DPT/Hep B 3	one month after second dose	21/4/067			
Measles	after 8 months before 12 months	19/10/2012			
J/E	after 12 months before 24 months				
TT	Date vaccinated	Others (specify)	Date vaccinated		
1					
2					
3					
4					
5					
Vitamin 'A'			Albendazole		
Age (years)	Dose	Days	Age (years)	Dose	Days
6	36	6	6	36	
12	42	12	12	42	
18	48	18	18	48	
24	54	24	24	54	
30	60	30	30	60	

weight and height record card



Distribution of Sarbottom Pitho parents

Throughout that time community health-worker, Rina and mobilizer, Ram move from hut to hut in 17 brick factories with 3 months follow-up and make ensure that all the children completed their majority of their vaccinations . To encourage the children for vaccine toys were given to children and mothers were given “SARBOTTAM PITHO” highly nutrition food recommend by WHO and train them preparation of it.



Measurement of weight

	Vaccines Given	BCG	DPT/ Hep 1	DPT/ Hep 2	DPT/ Hep 3	Polio 1	Polio 2	Polio 3	Measles	JE
Total number of children	165	8	17	20	11	16	20	12	25	36

### Vitamin "A" and polio drops:-

The health-worker and mobilizer provide polio and vitamin A to all the children of seven brick factory. 151 children were given polio drops with vitamin "A". Awareness about the important of vitamin A and polio was given to all mothers.



Nimesh taking 2<sup>nd</sup> Lunch in CDP

### WORD OF PARENTS.....

*Durga Phariyar, mother of Nimesh brings 10 liters water once in a month in CDP and watches her son reading in class in CDP She said "this is very good program for our children. After coming now my sons can read and write and even improves his health. I thank to miss for such good program.*

### Health Care Training:-

To promote life-long healthy behaviors through training of proper technique of hand washing, brushing, hygienic maintenance, safe drinking water and sanitation are given to children and their parents. Monthly height and weight were recorded to see the progress in health.



Teacher teaching them proper technique of hand-washing



Children brushing teeth with proper technique of brushing before their class starts.

**Health training** on proper technique of hand washing, SODIS Water (Solar disinfection water), preparation of nutrition food for children, important of vitamin was given to parents. To overcome literacy poster and pamphlets with colorful pictures was used. To make them understand easily demonstration was done. To check how much they understand some participation was asked to demonstration at the end of the program.



Health workers explaining effective method of hand washing before demonstration



**WORD OF PARENTS.....**

*We used to wash hand every day, but I did not knew about the proper technique of hand washing. Now I knew why i get diarrhea most of the time. Now I will wash my hand properly and will teach it to other. This is very good education, this training should taken to our village, where people clean cow dung and do not wash their hand with soap”.*

**Cloth Distribution:-**

Both the winter and summer clothes was distributed to the brick factory workers and their children. Their income is \$ 8.00 to \$12.00 per day and have to feed 2 to 5 children with that income. So they hardly two pair of clothes. Once in every year CDO provide clothes to the workers that were collected from CDO friends.

- 135 jacket distribution to CDP kids.
- Baby clothes -105
- Women clothes -254
- Men clothes – 105
- Shoes & slippers - 34



**Warm succour for brick kiln children**

POST REPORT  
KATHMANDU, FEB. 10, 2011

CARE and Development Organisation-Nepal (CDO-N), an NGO working for underprivileged children, displaced people and single women, on Thursday distributed warm jackets to children of brick kiln labourers at Godawari on the outskirts of the Capital. As many as 120 poor children were an elated lot after they donned the new clothes distributed under the organisation's Children Development Programme (CDP). CDO-N started the programme in 2006 with the



theme 'Good Health Good Education Good Children' and currently serves around 120 children of labourers who come all the way from Western districts in Nepal to work in the six brick kilns in the area. "The labourers and their children live in pathetic con-

ditions in the brick kilns," Arati Basnet, the coordinator of CDO-N said on Thursday. "Children here are almost always hungry, while families live in dire conditions in the makeshift brick huts with no bed rolls and food, even during the winter seasons," she added. Basnet said most of the workers in the kilns are conflict-hit people who came to the City from the western region during the Maoist insurgency. Under the CDP, the NGO provides nutritional food to the children twice a day, provide informal education and admit them in formal schools by providing them full scholarships.

Please click the link to know more about cloth distribution  
<http://www.caredevelopment.org/updates/winter-cloth-2011.pdf>

*News published in National Daily Newspaper –Kathmandu Post published on 10<sup>th</sup> Feb 2011.*

## *Wearing jacket for first time.....*

*Veggie Magar came to Ramashor Brick factory with her parents and younger sister from Rolpa, western Nepal. They live in temporary hut with no window and around 4 ft in height. She speak some typical Nepali language that it became hard for the teacher in CDO to understand. She cooks food in firewood and helps her mother to carrying bricks in the morning and evening and comes to CDP program in daytime.*

*On the first day of her in CDP, when she received tooth brush to brush her teeth she look at it, surprised and said "what is this? She never brushes her teeth before. All most all the things were new for her. She always comes to CDP in same old unclean dress, so when we asked to wash her clothes she said "I have only this".*

*It was her first time to wear new jacket.*

*Like her out of 135 children that received jacket, it was the first time of 32 children wearing new jacket.*



*Veggie with her parents in front of her hut*



*Veggie with her sister after receiving jacket*



*Veggie cooking food inside her hut*

## *Words of Claire Ping, volunteer from USA*

*"I think that the CDP program is an incredible and invaluable program. It is my favorite place to visit, walking up out of the brick factories to the bright house full to the brim of happy and laughing children is like a salve for the soul after the barren brick factories.*

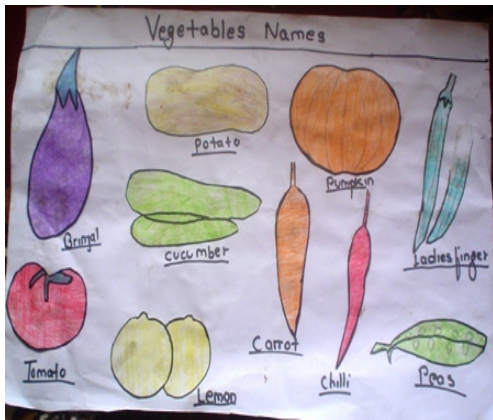
*The teachers and staff work so hard to provide the 100+ children of brick factory workers with a basic education and a place to learn, play, and eat away from the dangers of the brick factories and the black coal smoke which swirls through the camps. I hope that in the near future CDO will be able to open another CDP project site on the far side of the Godawari valley so that it could better serve the families of brick factory workers who don't feel comfortable sending their small children so far away to the current CDP site."*



## Extra Activities:-

To encourage the children for regular present in class weekly extra activities like painting, singing, dancing, storytelling, sport, picnic was done. Three winners were given prizes. Group division was done and in each week each group was asked to conduct extra activities. This help children to develop confidence and leadership on them.

As a part of program monthly test on each subject was conducted. Weaker students were given priority.



*Painting of children*

*children going for picnic*

*Children playing blowing balloons game*

## Good food good children:-

Two meals were provided in a day, breakfast at 11.00a.m and lunch in at 2.00p.m. It is given on routine bases.

Kesh Kumar shrestha 9 yrs was 19 kg in May and by the end of May his weight has gain by 21kg by good food and regular medical care.



Day	Break fast	Lunch
Sunday	Egg/fruit	Boiled potatoes
Monday	Milk/bread	Mixed rice
Tuesday	Fruits/biscuit	*Sewai / milk
Wednesday	*Satu/tea	Dalmute /murai/tea
Thursday	Bread/jam/egg	Beaten rice/vegetable
Friday	Satu/milk	Mixed rice



\*Satu – mixture power of eight different grain & food which prescribed as healthy food by WHO for children.

\*Sewai – pudding of milk & wheat

## Outcome of CDP:-

15 children from CDP program were admitted in Kitini Higher Secondary School from class nursery to class three. CDO provide school fees, school dress, all stationeries and school dress. All total scholarship of brick factories reach to 45 students. Monthly monitoring with consult with class teachers is done. Counseling for needy children are done once in month



## Summary of treatment to CDP children in 6 months:-

Illness	Boy	Girl	Total	Reason of illness	Prevention taken
Worm Infection	58	33	91	✓ Bare foot	✓ Regular check-up with supply of medicine and counseling
Viral fever	32	33	65	✓ Less immunity power ✓ They stay in cold, damp unhygienic hut.	✓ -Provide nutrition food . ✓ Awareness and training of maternal care, personal hygienic. ✓ Regular check-up with supply of medicine and counseling
Allergic Cough	22	19	41	✓ They stay close to brick factory which is full of dust & pollution ✓ They stay in cold, damp unhygienic hut.	✓ Awareness and training of maternal care, personal hygienic. ✓ Regular check-up with supply of medicine and counseling
common cold	35	31	62	✓ 97% of children dose not warm cloths ✓ Less immunity power	✓ CDO distributed warm clothes to the children and parents. ✓ Provide warm soup and food
Cuts(Leg& hand)	15	4	19	✓ Most of the children walk barefoot	✓ CDO distributed slipper.
Eye/ear infection	4	5	9	✓ They stay in hut close which is full of dust and pollution of brick factory	✓ Hygienic maintenance of children in CDP and training given of personal hygienic to children and parents
Dysentery	32	20	52	✓ Unsafe drinking water & unhygienic environment	✓ Regular check-up with supply of medicine and counseling and awareness of personal hygienic
Diarrhea	5	4	9	✓ Unsafe drinking water & unhygienic environment.	✓ Regular check-up with supply of medicine and counseling and awareness of personal hygienic
Headache	21	29	50	✓ Sun heat and less eye sight	✓ Regular check-up with supply of medicine and counseling
Sunburn	14	28	42	✓ Prickly heat of sun	✓ Regular check-up with supply of medicine and counseling
Ring worm	32	44	76	✓ Unawareness of the diseases and contact to infected children	✓ Awareness of the diseases and Regular check-up with supply of medicine and counseling
Pneumonia	8	4	12	✓ Cold and unhygienic environment	✓ Awareness of maternal care and Regular check-up with supply of medicine and counseling
Jaundice	2		2	✓ Unsafe drinking water	✓ given homeopathic medicine ✓ counseling.
Chicken pox	2	1	3	✓ Unawareness of the diseases and contact to infected children	✓ Awareness of the diseases and Regular check-up with supply of medicine and counseling



## Taken to hospital & Health post :-

s.no	Name of patients	Age/sex	Brick factory name	sickness
1	Jeevan Shrestha	16month/M	Bajra	Acute respiratory infection and pneumonia
2	Laxmi Neplai	2yrs/F	Bajra	Spiral fracture
3	Thuli Pariyar	16 yrs/F	Bolbom	Sevier diarrhea/dysentery
4	Suntali Nepali	15 yrs/F	Bolbom	Virginal white discharge/weakness



**Jeevan Shrestha** is 1.5 yr. old, only 7kg, boy from Ramachapp. His parents work as brick makers in Bajra brick factory.

On Jan. 14, 2011 he was taken by CDO Health workers and admitted to Kanti Bal hospital, Kathmandu with severe pneumonia, a urine infection and a fever of 102°F. On the day we took him to the hospital his body was drake blue. Dr. Bharat said if it been a day later he would not survive. He was kept in hospital



for 7 days.

CDO paid 80% of the hospital costs and medications and health-workers followed up with him for 5 months. Counseling was done to his parents and follow-up was done for 4 months. At the end on May 2011 he is 9.5 kgs and a happy little boy!



*Kid playing broken bricks in holidays.*

*Meena Tamang helping parent lining up brick in front of brick chimney after CDP class*



## MONITORING AND EVALUATION

The project was for a short duration of six months, but in short time there are many improvements and successful to achieve its goal. To make the program more effective and solve the problem monthly meeting and monitoring with program officers, teachers, cook and health workers was done. To solve the problems for children and to counseling talk program was organized once in month for needed parents and children.

After six months it was found that children were healthy, well discipline, able to read and write simple sentence, knew about basic health and hygienic and elder children became able to spread the message of health to their parents and friends. Health awareness and training to their parent helps them to prevent themselves from the various diseases and became able to take care of their children.

*Tim Berttoi, Executive director of USAID  
distributing toys for small kid of CDP*



## RECOMMENDATION

- Children Development Program was very effective. Parents were very with the program and request to continue in future.
- They promise to teach their neighbor and friends the health education and training they learnt. Ram Maya Tamang says *“this training of preparation of nutrition food should be taught in village where children die, due to lack of good diet and most of mother does not know what to feed and how”*



*Group picture of CDP staffs , children with their parent, Fr. Joe and Tim and Mai Berttoi*



THANK YOU SO MUCH  
NOBLE FAMILY  
FOR BRING BACK THEIR SMILES

For further information please log in -  
<http://www.youtube.com/watch?v=Txwhqmtwyy4>  
[http://www.ucanews.com/image-gallery/?gallery\\_id=31](http://www.ucanews.com/image-gallery/?gallery_id=31)  
[www.youtube.com/watch?v=2Te1t9NYCc](http://www.youtube.com/watch?v=2Te1t9NYCc)

