

Newsletter

Kailakuri Health Care Project



(Kailakuri & the Institute of Integrated Rural Development, IIRD)

Village Kailakuri, Madhupur Thana, Tangail District, Bangladesh

OCTOBER 2012

Back to the Coalface

Jesus taught that we should give freely to those requiring of us. On the one hand it is easy to water down his teachings. On the other hand they are powerful injunctions essential to the Judeo-Christian ethic and its capacity to stir up social justice, aid and development. They are the measure to which sensitivity and concern must be ready to go weighing up situation and circumstances for the greatest good of people and community – not to be watered down.



Edric with Roton, Medical Administration Manager

A month ago I arrived back from New Zealand whose natural beauty is equal to Bangladesh's though different. And the bracing winter climate together with the friendliness, stimulation and generosity of the people gave me new energy, inspiration and ideas for our work over here. Everywhere I was given hospitality and empathetic hearing. Over NZD50,000 has been given for our work. We and our people really appreciate your kindness. Our work is essential and effective though small in the larger context. We just wish we could do more but we need another doctor who will not be easy to find either from within Bangladesh or overseas. We are doing a different kind of work relating to

basic needs in a difficult situation where high salaries are not easy to come by. Sustainability requires a Bangladeshi but it is a big (maybe unrealistic) sacrifice to ask of a young doctor struggling to get established and unfamiliar with simple village life. We need someone who will identify with the aims and methods. It will take time to find the right person. In the meantime we are looking for a nurse/midwife who will hold the programme.

The pressure of the poor does not let up.

Haydor is a faithful paramedic (Muslim) who has three sons, two studying and none earning and one daughter. He has got the family into debt paying his daughter's dowry and his sons' education. He is begging us to give work to his oldest son who can't adapt into the law 'of the jungle' in either town or village. We had a family conference with them but failed to make progress.

Bilu is Mandi Christian and was a very faithful worker at the nearby Thanabaid Clinic made redundant because the clinic ran out of funds. He is also begging for work but currently we don't have a gap for him. His pregnant wife has been admitted for malnutrition and he will come with his 4 year old daughter to be her attendant. While here he will work for us and maybe in time we can find a gap for him.

Ajahaar and Moiful (Muslim) have two daughters. Despite an old crushed arm injury he was a good worker but he ran his family into debt gambling. Three times we pulled them out and we sent him to a rehabilitation centre. When he relapsed and would not go back we sacked

him. Now his wife is pleading for help again.

Beauty Borman aged about 20 came to us ten days ago, eight months pregnant with severe anemia and semi-starvation. She has her five year old daughter Pria with her, suffering from kala azar (a slowly fatal but readily treatable infectious disease). They are Hindus and extremely poor. Her husband, Krishna (also previously treated for kala azar), went off to work in a garments factory. He had a court marriage in Dhaka taking a junior wife and has been sending nothing for the support of Beauty and Pria who for the past couple of months have been surviving on only rice and salt. When Beauty heard what had happened she walked out of the marriage, moved in with her brother and the next day came for admission at Kailakuri. She does not plan to go back to Krishna. We expect Beauty and Pria to make good recoveries but the severely malnourished fetus she is carrying is another matter. But what happens when they are ready to go home and Beauty's brother does not want them? This will be a major testing of our rehabilitation skills.

The need for the Kailakuri Health Care Project is not decreasing. We thank you enormously for your help and encouragement.

Edric Baker

Kailakuri while hiring 96% of staff from the local community also relies on and appreciates



the help and dedication of outside professionals. Dr Mariko Inui (above right) has been with Kailakuri for 2.5 years of her 3 year term, coming and going between Bangladesh and Japan. Ayako Yamauchi (physiotherapist, above

left) visits once a month from Mymensingh to help with the rehabilitation of patients. Both are supported by JOCS (Japan Overseas Christian Medical Cooperative Service).

Mariko's first visit to Kailakuri lasted no more than two or three hours. At that time Dr Baker was in New Zealand and she was surprised and wondered how they could run a clinic without a doctor. She wanted to visit again to know the secret. Mariko came back a second time the following year (2008) for one week. She stayed with Bruno (village worker) and her family. A third visit of one month the following summer staying in the home of, Lucas (paramedic) parent's home and Mariko has been coming back regularly for three months at a time ever since living on the project in a house provided by The Rotary Club of Newmarket, Auckland, New Zealand.

Mariko tells us when she was a child in Japan, it was just like Kailakuri, no TV, no fridge and her mother sometimes cooked outside. Even though she grew up in a town area she felt at home at Kailakuri. As a child she envied many of her friends who would visit their grandparents in the countryside during the holidays. She says being here feels like visiting grandparents in the countryside.

Mariko was asked to speak at a seminar in Dhaka, she very simply said "I feel sad about the poor people here who cannot get the medical care they need."

Ayako has been working in Bangladesh since 2007 and started work with Kailakuri in 2008. When asked why Bangladesh Ayako commented "It will be very long story, but to say shortly 'God's calling'. I wanted to become His tool of peace. The thought had started since 2000. I was praying to God and He answered me with an amazing way." And when asked how she feels since she has been here and about Kailakuri she answers "Bangladesh is very different from Japan. People, culture, religion, ...everything. But God is blessing me all the time. I think He is in charge of my life. I live in Bangladesh with feeling at home. I often think it

is mystery. I like coming to Kailakuri Clinic. Local staffs are working well and I respect them. So when I have a guest who is working as a

medical staff in Japan I all the time bring him/her to show Kailakuri Clinic.”



A burns patient with her husband.



A young fracture patient in traction.

KHCP – NZ Link Group



Thank-you to all those who helped with organising meetings, transport and accommodation while Edric was in NZ.

Philanthropist Gareth Morgan recently visited Kailakuri and wrote of his impressions:
http://garethsworld.com/blog/morgan-foundation/new-zealands-own-mother-teresa/#disqus_thread

Kathryn Ryan interviewed Edric on National radio:
http://podcast.radionz.co.nz/ntn/ntn-20120702-1010-feature_guest_-_dr_edric_baker-048.mp3

TVNZ Close Up also recently featured Edric and Christine and the work at the health centre:
<http://tvnz.co.nz/close-up/wednesday-september-5-5064939/video?vid=5065259>

For any changes to your contact details or if you would like to receive your newsletter by email please contact me (Christine) at kailakurihealthcentre@gmail.com
To make a donation visit our websites or contact Bill Rose (USA), Glenn Baker (NZ) or Christine Steiner (BD)
One of our most important needs is help towards the on-going running costs of the project.

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