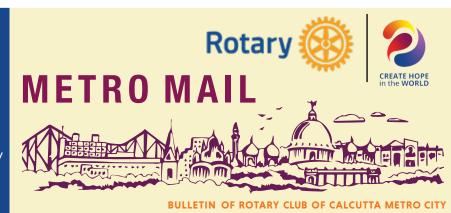
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For private circulation only



RI District 3291 | Charter Date : 14/06/1995 | Club No. : 30869



The ultimate goal in the fight against diseases is their eradication. In theory, many diseases could be eradicated. In practice, only a handful of diseases meet the criteria that make them eradicable with current knowledge, institutions, and technology.

Eradication versus "Elimination, the eradication of a disease is a global and permanent achievement, while the elimination of a disease relates to a specific geographic area. Eradication means that intervention measures are no longer required, and the agent that previously caused the disease is no longer present.

In contrast, the elimination of a disease is when deliberate effort leads to local infections being reduced to zero within a defined geographic area. A disease can be eliminated from a specific region without being eradicated globally. Additionally, actions to prevent the disease from

transmitting or re-emerging are still required once a disease is eliminated. Disease eradication is an ongoing process, So far, the world has eradicated two diseases — smallpox and rinderpest. We are primarily guided by the list of eradicable diseases provided by The International Task Force for Disease Eradication (ITFDE). ITFDE was formed in 1988 at The Carter Center; it is supported by the Bill & Melinda Gates Foundation and advises bodies such as the World Health Organisation on various aspects of disease eradication.

While ITFDE has placed seven diseases on its eradicable diseases list, the WHO currently suggests that polio and Guinea worm disease are eradicable, while lymphatic filariasis, cysticercosis, measles, mumps, and rubella could be eliminated from some parts of the world. Even for diseases where the possibility of eradication has been agreed upon, the target date may evolve. The timeline for Guinea worm disease eradication was first set for 1991, then moved to 2009, then 2015, then 2020, and is currently set for 2030.

The Global Malaria Eradication Program was established in 1955 to eradicate malaria, but it was abandoned in 1969. Since then, however, a renewed focus on malaria eradication has emerged, and the Bill & Melinda Gates Foundation have proposed a plan to end malaria by 2040. Louis Pasteur once said that "it is within the power of man to eradicate infection from the earth". That power has so far eradicated two infectious diseases: smallpox and rinderpest.

We are also getting closer to eradicating polio and Guinea worm disease. But can we eradicate all infections from the world?

For a disease eradication to be feasible and an option worth considering it needs to meet certain criteria. Tragically, recent events are slowing and even reversing this progress. The COVID-19 pandemic caused millions of deaths and severely hampered efforts to immunize children.

"When we managed to end polio in India, this milestone was a major boost to public confidence in public health in the country, to the Ministry of Health, to every health worker, to caregivers, and to all our partners. Our efforts had paid off. The jubilation was just exceptional. I think the biggest learning of all of this would be that when entire countries and their leadership are working in unison, towards a shared vision of a healthier future for our children, a sense of mutual accountability is automatically established. All parties feel responsible for their own roles. It was always a constant process of programme assessment and refinement. And it seemed impossible until it was done.

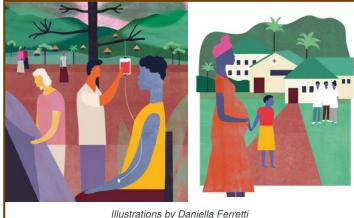
That's how I feel today about the situation in Afghanistan and Pakistan, the two countries where polio is still endemic," says Dr. Hamid Jafari, Director of Polio for the WHO's Eastern Mediterranean Region, reflecting on his time eradicating polio in India.

(The above is Editor's personal opinion and may or may not be reflection of the Club's opinion)

RI News Birth of a Hospital

Working among the Batwa people of Uganda, a California doctor discovered the power of collaboration, the joy of service, and a slice of heaven

By Dr. Scott Kellermann



In the late 1970s, my wife, Carol, and I spent two and a half years working at a mission hospital in Nepal. When we returned to the United States, I established a medical practice, but we decided that every year we would volunteer as a family in a needy part of the world.

I discovered that several of my friends were members of Rotary. They talked to me about Service Above Self and encouraged me to join. This was the beginning of a wonderful partnership that would sustain me during my many ventures in the years to come. In the summer of 2000, we were asked to perform a medical survey of people from the Batwa Pygmy group of the Bwindi Impenetrable Forest in southwestern Uganda. Initially, Carol was unsure about working there, but her hesitancy was trumped by the desire to get to know the people who lived in that part of Africa.

The Batwa were the ancient inhabitants of the Bwindi Impenetrable Forest. But in the early 1990s, the forest was designated a national park and a **UNESCO World Heritage Site** to protect mountain gorillas and other endangered species. As a result, the Batwa were evicted from their homeland, and, as our survey revealed, their lives had grown exceedingly dire. They had an estimated life expectancy of 28 years and an annual income of \$25.

Despite the desperate circumstances and harsh conditions, Carol felt like she had come home. The Batwa people's survival was in jeopardy, and she was moved by their plight. She shocked me by suggesting that, this time when we returned to the U.S., we sell our possessions and relocate to Uganda to assist them.

Delivering medical services was a challenge as there were no hospitals or clinics in the region. The only option for treatment was to bring services to people through mobile medical clinics. We drove as far as the road allowed and then carried our medical supplies to villages at the edge of the forest. While I unpacked medicines and unfolded mats for examinations, Carol pitched our tent, where we would spend the night.

Vigorous drumming by the Batwa spread the message that health care was available. Typically, our clinics attracted 300 to 500 patients per day. Our intensive care unit was established under the shade of a tree. Children, semi-comatose from the ravages of malaria, lay on mats while IVs, hung from the tree's branches, dripped lifesaving quinine into their veins.

Medical practice in its purest form. The vast majority of diseases we encountered were infectious and, with simple regimens, they were treatable. Being surrounded by daily miracles and grateful patients was a true gift.

In the process of living among the Batwa, we came to learn their language, culture, and traditions. Another benefit of our new lifestyle surprised us. When we lived in California, Carol continued to further her education, while I had a busy medical practice, ran an indigent care center, and engaged with the Rotary Club of Nevada City 49er Breakfast. Exchanging that hectic lifestyle for the simplicity of life in a tent was a gift to us. We talked long into the night regarding how, as a couple, we could deal with the travails we faced. In the process we learned to love each other in ways we never thought possible.

I was exceedingly grateful to be loved by, accepted, and integrated into the Batwa community. In the United States, we tend to be goal oriented. This is in contrast to life in that part of Africa, where it's all about relationships.

After we'd spent a few years providing mobile clinics, the village elders became convinced that we needed to establish a permanent clinic. From this collaboration was born **Bwindi Community Hospital**. With the community's support and the generosity of several donors, we were able to construct an outpatient unit and a maternity unit.

Once the hospital's initial structures had been completed, along came our many Rotarian friends. Through a grant from The Rotary Foundation, District 5190 (parts of California and Nevada) sent a container outfitted with the first X-ray unit in our region. Best of all, a Rotary team came to assist with the installation. Another Foundation grant was secured to facilitate rainwater collection, protect springs, and provide sanitation to prevent diarrheal diseases. After seven years, when the grant was finally closed, diarrhea rates had dropped more than 50 percent.

Rotary Foundation grants provided equipment for surgical, pediatric, and medical units, as well as neonatal and adult intensive care units, at the Bwindi Community Hospital. But as the hospital grew, so did the headaches for Carol and me. We were illequipped for the challenges of administration, logistics, accounting, and human resources.

Once again, help came from Rotary, in particular, from Jerry Hall, a past governor of District 5190 and, at the time, the vice president of Rotary International. What's more, Jerry, who came to the Bwindi to help with the installation of medical equipment, was a strategic planning consultant.

We developed a strategic plan for the hospital and began transferring responsibility to the Ugandans. Over the next year, we hired additional staff. The transition took time, but our efforts paid off with the establishment of a sustainable medical facility. Today, Ugandans lead and manage an award-winning 155-bed institution — and in 2013, the hospital started the **Uganda Nursing** **School Bwindi**, which is now rated as one of the country's finest nursing schools. As an added bonus, Carol and I discovered that our smiles had returned.

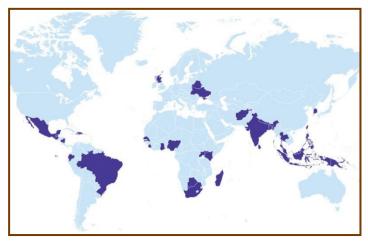
I currently spend five to six months a year in Uganda. I remain on the hospital board, I'm still engaged with fundraising, and, when I am in Uganda, I consult on difficult hospital cases. The Bwindi Community Hospital was chosen as a site for viral research through a National Institutes of Health-funded program called **EpiCenter for Emerging Infectious Disease Intelligence**, where I am a senior consultant. In collaboration with the University of California, Davis, the program is searching for novel viruses that may spill over from animals to humans, with one goal being to prevent future pandemics.

My time in Africa has been the best of my life. I gained a true understanding of the gift of relationships and the joy derived from service. All this was done in collaboration with committed members of Rotary. I encourage them all to come to the Bwindi, where they will touch a slice of heaven.

A physician specializing in tropical medicine, Scott Kellermann is a proud member of the Rotary Club of Nevada City 49er Breakfast in California.

This story originally appeared in the January 2024 issue of *Rotary* magazine.

A Preventable Killer



Why so many people are still dying of cervical cancer, and what Rotary is doing about it

Women diagnosed with cervical cancer are almost twice as likely to die as those diagnosed with breast cancer. Yet cervical cancer is a disease that is preventable and treatable. What's going on?

About 90 percent of the women killed by cervical cancer — more than 340,000 in 2020 — live in low- and middle-income countries, where access to prevention, screening, and treatment is severely limited. And reproductive care remains a taboo topic, even when it means people are dying as a result.

- 116 Global grants awarded to fund cervical cancer projects since 2014
- 91% Share of cervical cancer deaths in low- and middle-income countries, where access to prevention, screening, and treatment is severely limited
- 604,127 Number of people diagnosed with cervical cancer in 2020

The Rotary Foundation has awarded more than \$10.3 million in global grant funding for cervical cancer projects since 2014, and other Rotary projects, such as an initiative in Alabama, have tackled this issue outside of global grant funding. In addition, \$2 million was awarded to United to End Cervical Cancer in Egypt as part of the third annual **Programs of Scale** competition. The Foundation awards these grants to evidence-based programs that align with at least one of Rotary's causes and are ready for expansion to create larger-scale change.

The four-year program in and around Cairo will vaccinate more than 30,000 girls ages 9 to 15 to prevent infection with the human papillomavirus, which causes the disease. It will provide cancer screenings for 10,000 women — allowing for early detection and treatment — and launch a public awareness campaign to reach 4 million people, helping address cultural

misconceptions that may deter people from seeking care.

For Cervical Cancer Awareness Month in January, we examined the state of the disease around the world, and what Rotary members are doing about it.

Your Foundation money at work

Countries and geographical areas where global grants have funded cervical cancer projects in the past 10 years

How HPV infection can lead to cervical cancer

Cervical cancer is primarily caused by the human papilloma virus, a group of more than 200 related viruses, some of which are sexually transmitted. Nearly all sexually active people will be infected with HPV at some point in their lives; most of these infections are harmless, but some high-risk HPV viruses can progress to cancer. HPV vaccinations before a young person becomes sexually active can prevent infection, and therefore cervical cancer. The cancer develops slowly, with five to 20 years between the first cellular changes to the actual development of cancer. Screening for abnormal cells and treatment when necessary can stop the disease from progressing and save lives.

- Normal cervical cells -- Vaccination opportunity: 11–12 years old
- HPV Infection (Most infections do not turn into precancers) -- Screening opportunity 21–65 years old
- Precancers (May still go back to normal)
- Cervical Cancer

This story originally appeared in the January 2024 issue of Rotary magazine.



Rotary Projects Around the Globe - January 2024

By Brad Webber

United States



The Rotary Club of the Lower Keys, Florida, is k n o w n f o r t h e Independence Day festival and fireworks display it sponsors in Big Pine Key. At last year's event, the night had a sweet send-off: the creation of a massive K e y lime pie in celebration of Monroe

County's bicentennial. Rotarians joined local chefs Kermit Carpenter and Paul Menta as they scooped free samples of the pie, which spanned a precise 13.14 feet in diameter. The dimension, harking back to the mathematical constant pi, squeezed past a 12.25-foot creation made in 2018 by a Florida business; its producers were awaiting certification of the grand concoction — made of Key lime juice and condensed milk spread atop a graham cracker crust — as the world's largest. The precise tally of servings was unclear, but club member Keara McGraw says it's safe to say it was "a lot."

Brazil



Improper disposal of household cooking oil is not only an ecological hazard, it's also a missed opportunity to recycle the waste into new products. Oil poured down drains also increases water treatment costs. Members of the Rotaract Club of Penápolis in São Paulo state distributed 400 funnels to help residents collect oil in bottles, along with pamphlets explaining the benefits of recycling and how to do it. Members of a recycling cooperative in Penápolis gather the bottled oil and sell it to be

turned into biodiesel, homemade soap, paints, resin, and animal feed. "It's essential to reduce and prevent pollution in all its forms," says club member Lucas Silveira de Campos

- .1,493 Year Christopher Columbus introduced citrus seeds to the West Indies
- \$6 billion Value of the global market for used cooking oil in 2022

South Africa

The Rotary Club of Polokwane, northeast of Johannesburg, has given new meaning to the expression "waste not, want not." The club has helped train more than 550 preschool teachers and caregivers to turn common household waste items cardboard tubes, plastic sticks, egg cartons, newsprint, and more — into craft projects for children. In 2017, the club teamed up with Shayne Moodie, founder of an initiative called Empty Toy Box Education, to train rural educators to engage children with such projects. Club members collect recyclables and supplies such as glue and scissors, assist with the training, and provide the certificates for teachers. "The early childhood development program has been the most successful, sustainable program offered by our club in recent years," says club member Ursula Moodie, who is Shayne's mother. The program has reached as many as 17,000 preschoolers, the club estimates.

This story originally appeared in the January 2024 issue of Rotary magazine.

Finland



Rotary members are working with the **F** i n n i s h **E n v i r o n m e n t Institute** to collect, categorize, and measure trash in the Baltic Sea. "Scientists have little time for this kind of work," explains Liisa Stjernberg, a past

governor of District 1420 and a member of the Rotary Club of Helsinki City West. Stjernberg, the Finland country coordinator for the **Environmental Sustainability Rotary Action Group**, leads a group of volunteer members from her district who monitor blue algae blooms, raise funds for research, and promote marine conservation. In September the group enlisted 22 Rotary **Youth Exchange** students to join a measurement outing off the islands of Suomenlinna. They fished out trash including polymer fibers and shock tube detonators used in construction, Stjernberg says. Afterward they took up their oars for another cause: the Rotary-led "Rowing for Herring" longboat regatta, which drew 300 participants.

Nepal



Dr. An and Jha, a pediatrician and past president of the Rotary Club of Birganj, noticed that many children in his region of Nepal, about 50 m i l e s s o u t h o f Kathmandu, were underweight. "Most parents would feed only [cow's] milk to their children," says Jha. "As a

result, the children were mostly iron-deficient," a condition easily addressed with an improved diet. Since 2018, Jha has conducted 11 conferences on child nutrition, attracting as many as 80 parents at each session. The events include discussions of problems parents face, including, he says, the challenge of steering children from junk food. "I try to give them practical solutions. The biggest mistake that parents make is that they do not plan the diet" and fail to consider the nutritional value of foodstuffs, he says. Members of the Birganj club assist with the logistics and the management of the sessions.

- 242 Recorded fish species in the Baltic Sea
- 19 % Share of Nepalese children under age 5 who are underweight

Club News

Cataract Surgery Project at Beldanga, Murshidabad



Members of Rotary Club of Calcutta Metro City as part of its annual project visited Rotary Beldanga Eye Hospital being run and managed by RC Domkol Murshidabad.

Led by PDG Shyamashree Sen along with PP Rtns Subhojit Roy and Sunand Sen participated in the project where the club donated Rs 25,000 for the IOL operations of 5 economically challenged senior citizens. This year the beneficiaries included 5 women and 1 male patient.

The project was preceded by a formal meeting of the RC Domkol Murshidabad which was addressed by PDG Shyamashree Sen, Mr Md Enamur Rahman (WBCS-Exe), Jt Secretary, Minority Affairs, GOWB, Journalist Hathemul Islam, PP Rtn Subhojit Roy, Nasim Haider, Chairman, Rotary Beldanga Eye Hospital. The speakers shared their vision for the overall development of the region, the hospital and also the Rotary School that is coming up soon at Domkol.

A visit to the site location of Rotary School gave us a firsthand impression of the master plan and also a commitment of our future participation in the education project which surely is going to be a path breaking initiative by a group of extremely diligent, hardworking and honest Rotarians.

Overall it was an extremely satisfying project conducted by our club and we hope to continue this every year on a bigger scale. **(Reported by PP Rtn Subhojit Roy)**

No challenge is Too Big for Us

For more than a century, we've bridged cultures and connected continents. We champion peace, fight illiteracy and poverty, help people get access to clean water and sanitation, and fight disease. Our newest cause is to protect our planet and its resources.



Edited & Published by PP Rtn Subhojit Roy Designed by : DARK HORSE : 9831050155