 **21 Nov 2014** **The Weekly Bulletin of Rotary Club of Kathmandu Mid-Town** **bc-20/11.014**

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District: 3292 Web:www.rotarymidtown.org.np Club Id: 26776

**NOVEMBER IS THE ROTARY FOUNDATIO N MONTH**

The **Mission** of The Rotary Foundation is

to enable Rotarians to advance**world understanding, goodwill, and peace** through

the **improvement of health,** the **support of education,** and the **alleviation of poverty.**

Club’s Regular Weekly Meeting : Friday, 14 November :

Club’s regular weekly meeting # 1254 was held as usual in Hotel De l’ Annapurna.

Extracts of the Meeting Minutes are given below:

“1. Meeting No.1254 was called to order at 8:05 by 1st VP HE Rtn Peter Bodde

“3. VP Rtn Peter welcomed visiting Rotarians, members and guests. Visiting Rotarian (RC Budhanilkantha) and guest speaker Dr Shankar Rai, Rtn Ole Saur (Norway) and friend, Rtn France Rodingen (RC ST Mortiz), Rtn Carol Vernal, and Mrs Mina Panday.

“4. Sunshine announcement by sergeant-at-arms, Rtn Isa's anniversary, PP Komal's birthday (who is making a significant donation every year on his birthday (10,000Nrs) also because November is Rotary Foundation Month).

“7. Vice President Peter remarked on the celebration for the 25th Charter Day. The hosting of a former head of state on the occasion was memorable and historic. He thanked everyone who had been involved in the planning.

“8. Visiting Rotarian Carol Vernal introduced Dr. Shankar Rai, a renowned surgeon/specialist in burns at the Model Hospital. Dr Rai made a presentation on 'Skin Bank- Its possibilities and usefulness in Nepal'. Every year, eleven million people sustain burn injuries in the world but there is a great disparity in the distribution of these injuries. Ninety five percent of these burn injuries happen in the low and middle income countries. His presentation stressed the importance of tackling the rampant problem of burns in Nepal and how a skin bank will help. Anyone wishing to sign up for donating their skin post-mortem or would like more information please contact Dr Rai at: Dr Shankar Man Rai, Kathmandu Model Hospital/Kirtipur Hospital, 9841295062, email: [shankarrai1956@gmail.com](mailto:shankarrai1956@gmail.com). PP Giri gave the vote of thanks.

“9. Information sharing:

> Rtn Ranjit said that a CD containing of all photos taken by a professional photographer on the occasion of our 25th Charter Day Celebration is on sale starting today. It is available from Mr Dahal for 300Nrs.

> Trip to Rara – site visit on the occasion of the closing of the ANM Project. This was a very big signature project for Mid-Town and this trip is an excellent occasion to see the progress that has been made over the past few years. Please see PP CK for details. Proposed dates Dec 12-14 – leaving right after the meeting on Dec 12.

> PP Arun shared that a young lady we had helped years ago, Radika Dahal, has written another book and that she has now also received the President's Award for her work.

> November is "The Rotary Foundation Month" District 3292 has planned to make a significant TRF contribution. If you have any queries, Please contact Rajib Pokhrel, Chair, Fund Raising Sub Committee. PP Ambica and PP Mani said that more information would be available soon.

> Rtn Bhairaja had tickets available for a special screening of a new movie "Hamro Ghar…" please contact him for more details.

> Rotary South Asia Conference on Peace, 6-9 February 2015 in Lumbini, Nepal.

> PE Paras said that he had been to visit Charter Member Rtn Werner to deliver GET WELL SOON greetings and his certificate from the Charter Night from Mid-Town. Rtn Werner can be reached at his new cell no.: 9801179500.

> Bom dia! You’re invited to the 2015 Rotary International Convention in São Paulo, Brazil. The fun now begins one day earlier on Saturday, 6 June and continues through Tuesday, 9 June 2015. Plan now.

“10. Exchange of flags with Rtn Ole Saur (Norway) and Rtn France Rodingen (RC ST Mortiz).

“11. Statistics of the meeting: Members present: 25”

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# Weekly Meetings and Programs :

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| Date | Program/Speaker | Topic of Presentation |
| 21 November | Gen Balanand Sharma, | Reminiscence of integrating Maoist force |
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**100 Rotarians of RI District 3292**

being provided an opportunity of becoming PHF by contributing a sum of US$ 300 !

This opportunity is on FCFS basis.

Hurry up!

For more details, please refer to circular sent by District Fund Raising Subcommittee Chair Rajib Pokhrel as given in *Annex* ‘A’

**Committee Chairs’ Column:** *(This column is for use by chairpersons of 5 permanent committees: Club Administration, Membership, Public Relations, Service Projects, and the Rotary Foundation)*

November is the Rotary Foundation Month and TRF Chair Komal has made an appeal to all MidTowners to contribute liberally to TRF and be recognized with PHF/MPHF or higher honour. He suggests why not we can make it a habit of annual giving of a minimum of $ 100 to TRF as sunshine contribution dedicated for the cause.

A good idea!

TRF Chair Komal did so on Friday 14 Nov morning as his Birthday sunshine!

Who’s following suit ?

**Members’ Corner:** *(This column is for Club members to express anything they would like in matter of Club activities, Club administration, Club issues or on Breakfast Chatter, or on anything else that would be of interest to fellow members.)*

**Skin Bank in Nepal**

People sustain burn injuries every ten minutes in Nepal. According to WHO, 2100 people die of burn injuries in Nepal each year. Burns is not only a health problem but also a human right as well as an economic one.

When the burn injury damages only the superficial layer of skin, it heals within two weeks if it does not get infected. When the injury damages deeper layer of skin, then the damaged skin needs to be removed and the wound needs skin transplantation from another part of the body. When the deep burn injury involves more than 30% of the total body surface area, then patient’s own skin is not enough to be transplanted. In this case, skin from a dead person can be used as temporary skin coverage to save life to save life.

Due to the lack of adequate burn care at present in Nepal, half of the patients who sustain deep burn injury of less than 20 % total body surface area die. This scenario could be changed with the access to ‘Skin Bank’.

Public Health Concern Trust-Nepal has started “phect Burn Initiative” to work in the field of prevention of burn injuries, provision of adequate acute burn care while continuing the program of reconstructive surgery for correction of disabilities and deformities. Thus, establishment of a skin bank is a natural progression of its activities.

Skin can be donated similarly after death. It can be harvested up to six hours after death and if the body is kept refrigerated, it can be harvested up to 24 hours. Only a thin layer of skin is harvested so that there will be no disfigurement. A dressing will be applied after the harvest. It can be harvested in hospital, morgue, and house or even by the river side (like eye)………….

For more information on skin bank concept, read in Annex ‘B’

**International Day for Tolerance :** 16 November

"On this International Day of Tolerance, I call on all people and governments to actively combat fear, hatred and extremism with dialogue, understanding and mutual respect. Let us advance against the forces of division and unite for our shared future." - *Secretary-General Ban Ki-moon*

In 1996, the UN General Assembly (by resolution [51/95](http://www.un.org/en/ga/search/view_doc.asp?symbol=A/RES/51/95)) invited UN Member States to observe the International Day for Tolerance on 16 November, with activities directed towards both educational establishments and the wider public.

This action followed on the United Nations Year for Tolerance, 1995, proclaimed by the UN General Assembly in 1993 at the initiative of [UNESCO](http://www.unesco.org/new/en/unesco/), as outlined in the [Declaration of Principles on Tolerance and Follow-up Plan of Action for the Year](http://unesdoc.unesco.org/images/0010/001013/101344Eb.pdf).

The 2005 World Summit Outcome document furthered the commitment of Heads of State and Government to advance human welfare, freedom and progress everywhere, as well as to encourage tolerance, respect, dialogue and cooperation among different cultures, civilizations and peoples.

**Promoting Tolerance:**

Tolerance is neither indulgence nor indifference. It is respect and appreciation of the rich variety of our world's cultures, our forms of expression and ways of being human. Tolerance recognizes the universal human rights and fundamental freedoms of others. People are naturally diverse; only tolerance can ensure the survival of mixed communities in every region of the globe.

Along with outright injustice and violence, discrimination and marginalization are common forms of intolerance. Education for tolerance should aim at countering influences that lead to fear and exclusion of others, and should help young people develop capacities for independent judgement, critical thinking and ethical reasoning. The diversity of our world's many religions, languages, cultures and ethnicities is not a pretext for conflict, but is a treasure that enriches us all. ……..

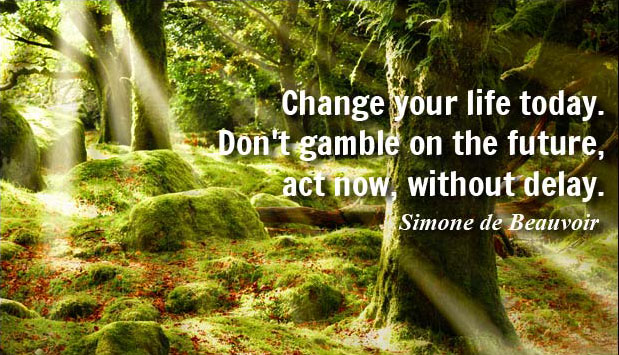
More on Annex ‘C’

*Source: Internet*

On Lighter Side :







**A THOUGHT FOR TODAY:**

No drug, not even alcohol, causes the fundamental ills of society.

If we're looking for the source of our troubles, we shouldn't test people for drugs,

We should test them for stupidity, ignorance, greed, and love of power.

- P.J. O'Rourke, writer (b. 1947)

*Courtesy: Rtn Isabella Khadka*



In Rotary, strong friendships and great service go hand in hand. When we enjoy our work,

we want to do it. We want to work harder, and we want to work better. We look forward to

Rotary meetings. Even when our lives are busy, we make Rotary a priority – because we

want to see our friends, and we want to serve.

**RI President GARY C.K. HUANG**

Please send information on club activities, progress reviews on service projects, relevant photos etc to:

BC Editor: RR Shrestha email: rryesrr@gmail.com

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*Annex ‘A’*

**From:** Rotary Office [mailto:[rotary@ntc.net.np](mailto:rotary@ntc.net.np)]

**Sent:** Thursday, November 06, 2014 12:27 PM

**To:** [president1415@rotary3292.org](mailto:president1415@rotary3292.org); [secretary1415@rotary3292.org](mailto:secretary1415@rotary3292.org)

**Cc:** 'BASU DEV GOLYAN'; 'Rajib Pokhrel'; [ag1415@rotary3292.org](mailto:ag1415@rotary3292.org); [do1415@rotary3292.org](mailto:do1415@rotary3292.org);

**Subject:** "The Rotary Foundation Month" - Contribution to TRF

Dear Presidents and Secretaries

Rotary Clubs

RI District 3292

Warm Greetings!

As you all know that this month, November, is the **"The Rotary Foundation Month"** as per the Rotary Calendar. Thus, to mark this month, District has planned to make the TRF contributions to a sum total of USD 300 each for 100 Rotarians only. Rotarians contributing for the planned sum will be given the opportunity of becoming the PHF member. Moreover, this opportunity will be facilitated in a first-come first-serve basis.

I hope for a positive response for successfully marking this month.

P.S. The contribution should be deposited in the following accounts:

Account Name            :           RI District 3292 TRF

Account No:               :           00100001791F

Account Bank             :           NMB Bank, Babarmahal Branch.

If you have any queries, Please do let me know.

With Best Regards

Rajib Pokhrel

Chair, Fund Raising Sub Committee

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*Annex ‘B’*

**Skin Bank- Its possibilities and usefulness in Nepal**

**Background**:

Every year, eleven million people sustain burn injuries in the world but there is a great disparity in the distribution of these injuries. Ninety five percent of these burn injuries happen in the low and middle income countries. Fire related burn injuries alone cause 320,000 deaths every year but more than 50% of these deaths occur in South East Asia alone. This is why WHO considers South East Asia the epicenter of burn injuries. Just as many women worldwide suffer a severe burn injury (3.8 million) from fire each year as are diagnosed with HIV (2.3 million) and AIDS (1.5 million) combined. More women sustain burn injuries than they are diagnosed with Tuberculosis (2.7 million). More school-aged children die of fire (34180) each year than of tuberculosis (33182) or malaria (15633). More girls in South East region die of fires (9700) than die of tuberculosis (6337), HIV/AIDS (2105) and malaria (352) combined. More than a million people sustain moderate to severe burn injuries out of whom 140,000 die each year in India alone. In Bangladesh, 375000 people (0.25% of 150 million populations) sustain burn injuries each year but 173,000 of them are children. The scenario in Pakistan is not any better. Each year 210,977 people sustain burn injuries in Pakistan (Population 159 million). Eighty six percent of people who sustain burn injuries involving 40% of their total body surface area die in Pakistan where as only less than 20% sustaining the same extent of burn injury will die in the developed countries. According to a report from Pakistan, any burn patient admitted to the dedicated burn ICU had a probability of 41.3% dying there. People who survive the burn injuries live with disabilities and deformities. Fire related burns alone contribute to 10 million Disability Adjusted Life Years. This is why burn is considered a “Forgotten Global Health Crisis”.

In Nepal, 55902 people sustain burn injuries every year. Thus someone sustains moderate to severe burn injuries every ten minutes in Nepal. According to WHO, 2100 people die of burn injuries in Nepal each year. Anybody sustaining burn injuries involving more than 40% body surface area in Nepal is almost sure to die. According to an unpublished data from the Department of Burns, Plastic & Reconstructive Surgery, Kathmandu Model Hospital, 88% of burn injuries are due to open fire. Data from the same source also showed that in an average, Nepalese burn patients wait for 18 years from the time of burn injury for reconstructive surgeries. Burns is not only a health problem but also a human right as well as an economic one. Over 80 Billion dollars have been estimated to have been wasted due to the burn injuries and its consequences.

**Need and Usefulness of Skin Bank:**

When the burn injury damages only the superficial layer of skin, it heals within two weeks if it does not get infected. When the injury damages deeper layer of skin, then the damaged skin needs to be removed and the wound needs skin transplantation from another part of the body. When the deep burn injury involves more than 30% of the total body surface area, then patient’s own skin is not enough to be transplanted since skin cannot be harvested from many parts of the body e.g. face, neck, axilla, groin, hands, feet, etc. In this case, skin from a dead person can be used as temporary skin coverage to save life to save life. This will improve the general outcome of the burn injury treatment.

The skin thus used will prevent Infection, decrease pain, decrease plasma oozing and will require less dressing changes and promotes wound healing. This will also test if the skin from the patient will be taken so that the patient’s own skin is not at risk of being wasted should it not take due to infection.

Due to the lack of adequate burn care at present in Nepal, half of the patients who sustain deep burn injury of less than 20 % total body surface area die. This scenario could be changed with the access to ‘Skin Bank’. Public Health Concern Trust-Nepal (phect-NEPAL)/Kathmandu Model Hospital through its Department of Burns, Plastic & Reconstructive Surgery has been providing surgical and rehabilitative assistance to patients with disabilities and deformities due to burn contractures for many years. When a patient comes to us with a burn contracture deformity/disability, two very unfortunate things have already happened- that the burn injury at first could have been prevented and that the deformity/disability could have been prevented by providing adequate and proper acute burn care. The department has been performing over 500 free reconstructive surgeries every year for the correction of deformities and disabilities but more and more patients are pouring in for such surgery. To address this issue, phect-NEPAL has started “phect Burn Initiative” to work in the field of prevention of burn injuries, provision of adequate acute burn care while continuing the program of reconstructive surgery for correction of disabilities and deformities. Thus, establishment of a skin bank is a natural progression of its activities together with the new burn unit with dedicated two operating rooms, 12-bed High Dependency Unit and ICU and 32-general bed unit. Phect-NEPAL has trained three surgeons and two other professionals in skin banking by sending them to two different fully operational Skin Banks in India (Indore and Mumbai). Harvesting and banking of amniotic membrane from placenta is already in place. A dedicated team of 9 surgeons supported by nurses, therapist, and anesthetist provide the service at the new burn unit.

**Skin Donation and Banking**

Eye donation has been common in Kathmandu now. Skin can be donated similarly after death. It can be harvested up to six hours after death and if the body is kept refrigerated, it can be harvested up to 24 hours. Only a thin layer of skin is harvested so that there will be no disfigurement. A dressing will be applied after the harvest. It can be harvested in hospital, morgue, and house or even by the river side (like eye) but it has to be harvested in a similar sterile fashion as performing any operation. The family members need to give the consent for this even if the person has given prior written permission. A blood sample is also collected to test for HIV, Hepatitis B and C. Skin cannot be harvested in case of skin conditions, infection and cancer. A toll free telephone number will be made available for the public to call the team for skin donation. A team of doctors and nurses will reach the site for skin harvesting. A donor ID card will be issued to persons who have filled up the pledge form for skin donation after death. Coordination will be done with the Cornea (Eye) harvesting team. After the harvest, skin will be transported to the Skin Bank in a sterile fashion. It will be stored in preservative till the report of the HIV, Hepatitis B and C is available. Once the tests are found to be negative, then further processing will be started. The skin can be stored up to five years but the demand for the skin is so much that it will not be stored that long. High standard of banking will be maintained following the international standards of tissue banking. Records of all the processes and the users, follow ups will be maintained. Collaboration with Skin Banks in India is already in progress.

Due to our religious beliefs, it will require a lot of efforts in the awareness program for skin banking. Social organizations e.g. Rotary Clubs are already in collaboration with us. Health professionals also need to be aware of this effort. Media will also need to play a big and positive role. Legal aspect may not be a big hurdle since eye donation after death is already established in Nepal.

America Nepal Medical Foundation has been very kind to provide the initial fund to start the skin bank in Nepal.

**For Further Information:** Dr Shankar Man Rai, Kathmandu Model Hospital/Kirtipur Hospital, Phone: 9841295062, Email: shankarrai1956@gmail.com

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*Annex ‘C’*

**Promoting Tolerance**

On the day of its fiftieth anniversary, 16 November 1995, UNESCO's Member States adopted a [Declaration of Principles on Tolerance](http://www.un.org/en/events/toleranceday/pdf/tolerance.pdf). Among other things, the Declaration affirms that tolerance is neither indulgence nor indifference. It is respect and appreciation of the rich variety of our world's cultures, our forms of expression and ways of being human. Tolerance recognizes the universal human rights and fundamental freedoms of others. People are naturally diverse; only tolerance can ensure the survival of mixed communities in every region of the globe.

The Declaration qualifies tolerance not only as a moral duty, but also as a political and legal requirement for individuals, groups and States. It situates tolerance in relation to the international human rights instruments drawn up over the past fifty years and emphasizes that States should draft new legislation when necessary to ensure equality of treatment and of opportunity for all groups and individuals in society.

Along with outright injustice and violence, discrimination and marginalization are common forms of intolerance. Education for tolerance should aim at countering influences that lead to fear and exclusion of others, and should help young people develop capacities for independent judgement, critical thinking and ethical reasoning. The diversity of our world's many religions, languages, cultures and ethnicities is not a pretext for conflict, but is a treasure that enriches us all.

**How Can Intolerance Be Countered?**

**Fighting intolerance requires law:** Each Government is responsible for enforcing human rights laws, for banning and punishing hate crimes and discrimination against minorities, whether these are committed by State officials, private organizations or individuals. The State must also ensure equal access to courts, human rights commissioners or ombudsmen, so that people do not take justice into their own hands and resort to violence to settle their disputes.

**Fighting intolerance requires education:** Laws are necessary but not sufficient for countering intolerance in individual attitudes. Intolerance is very often rooted in ignorance and fear: fear of the unknown, of the other, other cultures, nations, religions. Intolerance is also closely linked to an exaggerated sense of self-worth and pride, whether personal, national or religious. These notions are taught and learned at an early age. Therefore, greater emphasis needs to be placed on educating more and better. Greater efforts need to be made to teach children about tolerance and human rights, about other ways of life. Children should be encouraged at home and in school to be open-minded and curious.

Education is a life-long experience and does not begin or end in school. Endeavours to build tolerance through education will not succeed unless they reach all age groups, and take place everywhere: at home, in schools, in the workplace, in law-enforcement and legal training, and not least in entertainment and on the information highways.

**Fighting intolerance requires access to information:**Intolerance is most dangerous when it is exploited to fulfil the political and territorial ambitions of an individual or groups of individuals. Hatemongers often begin by identifying the public's tolerance threshold. They then develop fallacious arguments, lie with statistics and manipulate public opinion with misinformation and prejudice. The most efficient way to limit the influence of hatemongers is to develop policies that generate and promote press freedom and press pluralism, in order to allow the public to differentiate between facts and opinions.

**Fighting intolerance requires individual awareness:**Intolerance in a society is the sum-total of the intolerance of its individual members. Bigotry, stereotyping, stigmatizing, insults and racial jokes are examples of individual expressions of intolerance to which some people are subjected daily. Intolerance breeds intolerance. It leaves its victims in pursuit of revenge. In order to fight intolerance individuals should become aware of the link between their behavior and the vicious cycle of mistrust and violence in society. Each one of us should begin by asking: am I a tolerant person? Do I stereotype people? Do I reject those who are different from me? Do I blame my problems on 'them'?

**Fighting intolerance requires local solutions:**Many people know that tomorrow's problems will be increasingly global but few realize that solutions to global problems are mainly local, even individual. When confronted with an escalation of intolerance around us, we must not wait for governments and institutions to act alone. We are all part of the solution. We should not feel powerless for we actually posses an enormous capacity to wield power. Nonviolent action is a way of using that power-the power of people. The tools of nonviolent action-putting a group together to confront a problem, to organize a grassroots network, to demonstrate solidarity with victims of intolerance, to discredit hateful propaganda-are available to all those who want to put an end to intolerance, violence and hatred.