



ANNUAL ACTIVITY REPORT

April 2011- March 2012

BIHAR

&

JHARKHAND

IntegratedDevelopmentFoundation

MAURYA PATH, KHAJPURA, PATNA – 800014, INDIA

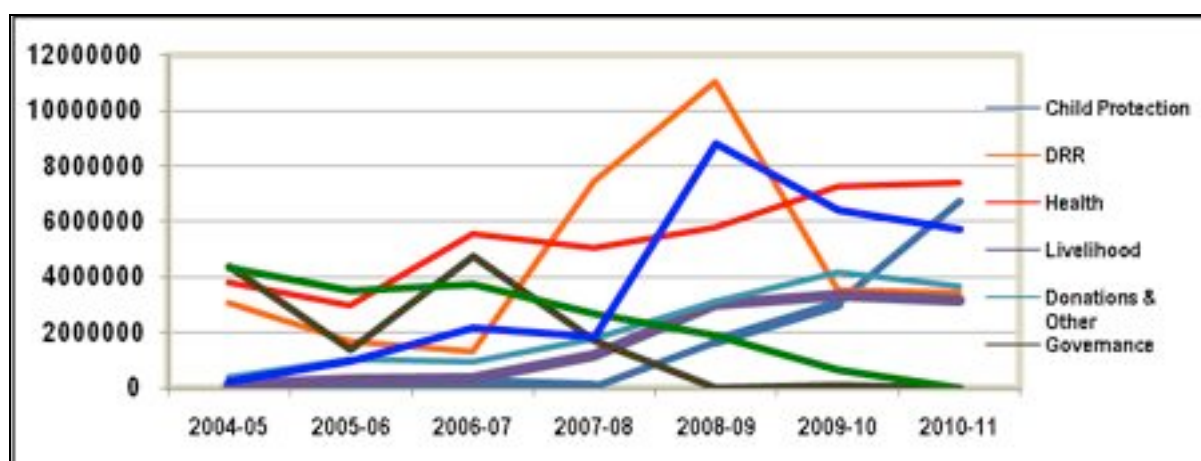
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IDF Thematic Issues & Yearly Fund Allocation



Organization Status

- | | |
|---|---|
| • Registered in 1993 (18 th November), under the Societies Registration Act 1860, = No. 536 | |
| • Registered under FC(R) A | = No. 031170122 |
| • Registered under 80G and 12A | = No. 1781-83 and 1784-86 |
| • IDF PAN Number | = No. AAAT1253K & TDS No. PTNI00415C |

IDF is accredited by Credibility Alliance as an organization adhering to the Desirable Norms for Good Governance

Organizational Focus

- | | |
|------------------------------------|---|
| • Women's Empowerment /SHG | • Population & Adolescents |
| • Local Self Governance | • Child Protection & Care |
| • Disaster Preparedness and Relief | • Water, Sanitation & Hygiene |
| • Watershed and Livelihoods & IGA | • Reproductive, Sexual & Community Health |

Our Vision is an egalitarian society in which all community members can realize their right to a life of quality and dignity. This vision is guided by three operating principles: building local capacity, strengthening community institutions, and fostering community-based leadership. Our key strategies for creating sustainable rural development are using a rights-based approach and leveraging women's empowerment. IDF projects are supported by UN agencies, national and international funders, and state governments. IDF is also the lead member of several state and regional NGO networks.

Mission Statement:

IDF's mission is to ensure better health, security, and well-being for the poorest and most deprived members of rural communities.

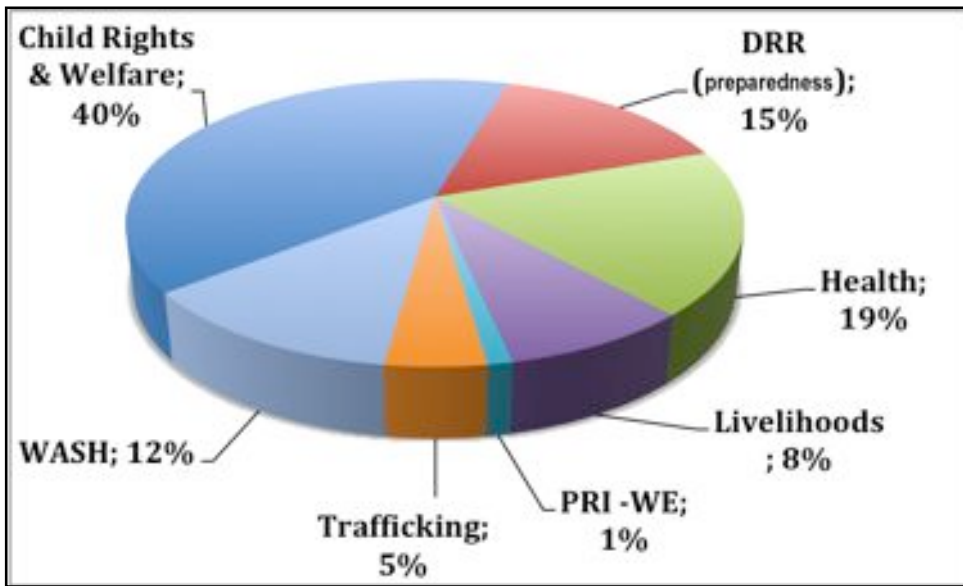
Objectives

1. To improve the **quality of life of the rural poor** women and their families through increased access to health, nutrition, education, services and productive assets –together leading to informed **realization of entitlements** by them.
2. To establish a cost-effective and accessible **alternative savings and credit system** for the working women in the rural areas that is owned by their respective communities.
3. To **enhance rural poor women's capacities** for the actualization of the above objectives through collectively owned & managed institution building processes.
4. To innovate **fresher strategies for programme execution** for achieving optimum results.
5. To support and facilitate the government in its development endeavours. This includes providing training in need assessment, orientation in development perspectives, training to develop financial and management skills and evolving systems to supervise and monitor the programme on a regular basis.
6. To build **strategic alliances with Govt.** agencies for directly implementing the Govt. programmes or to leverage resources from other donor agencies to supplement ongoing Govt. programmes by additional interventions needed either to enrich the programme or to plug gaps in the existing ones.
7. To develop a resource centre catering to the needs of voluntary agencies, development workers, government / semi-government agencies, private companies and freelance professionals engaged in development activities. To produce relevant reading and training materials, organise seminars and workshops, and to undertake training assignments through this centre.
8. To promote capacity building of voluntary agencies
 - Assistance to voluntary agencies in obtaining technical expertise and training inputs.
 - Working with voluntary organisations to undertake background studies related to specific development activities or the socio-economic and ecological background of project area of voluntary agencies
 - Monitoring and reviewing projects under implementation through field level interaction with voluntary organisations.

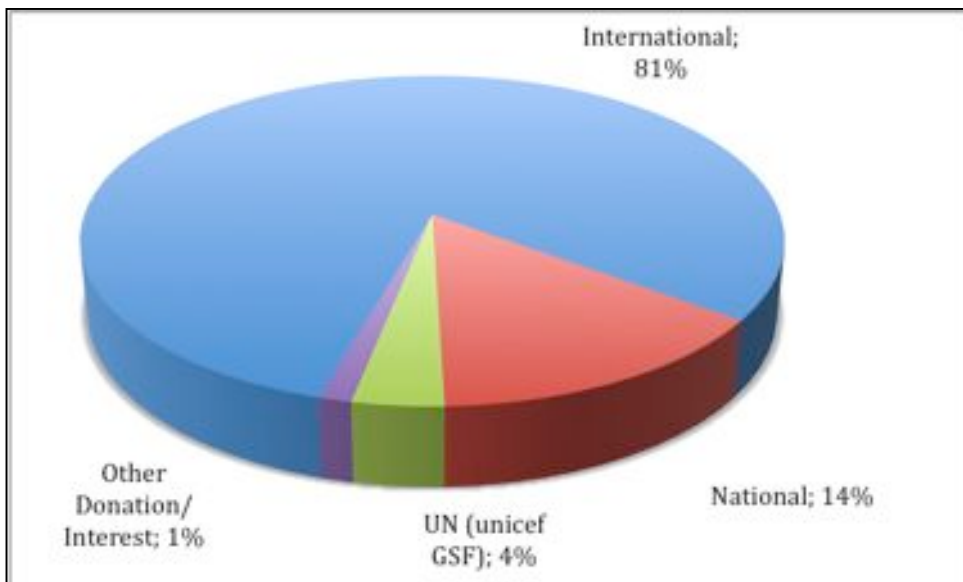
Donors (till date)

UNICEF, Australian High Commission, the Consulate General of Japan, Project Concern International, Action Aid, Pathfinder International, The Hunger Project, CARE, CRS, WDC (IFAD-Bihar State Govt.), JWDS (IFAD-Jharkhand State Govt.), UNDP, ICRW, NFI, SIMAVI, Water Aid, PACS (DFID) Geneva Global, PLAN International, IPAS, SDTT, LWR CAF India, DCA, Global Sanitation Fund,

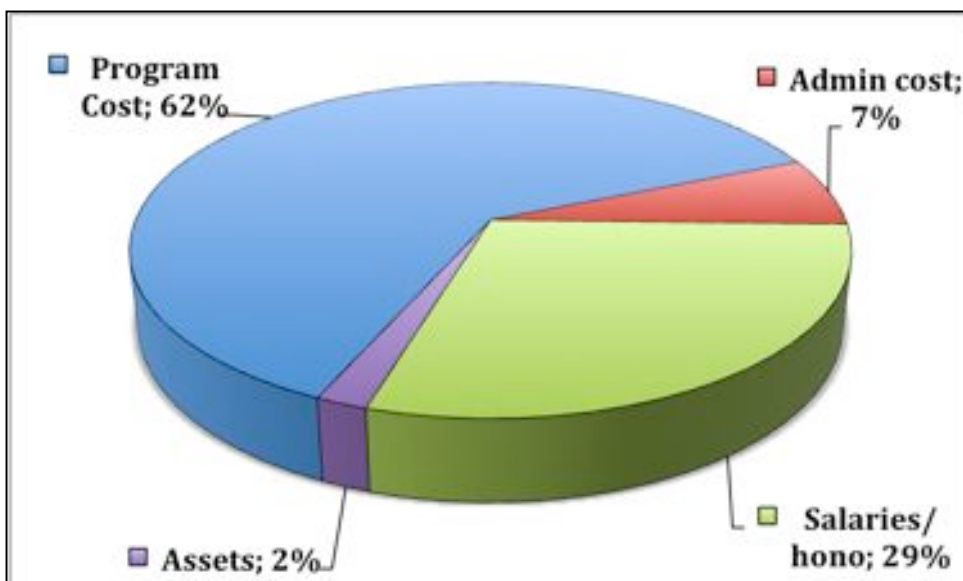
Contact Persons: MANOJ KUMAR VERMA, DIRECTOR(9431456434)&BABUL PRASAD, CHAIRMAN



Total Thematic Cost of the Organization in FY 2011-12



Type of Fund in FY 2011-12



% Distribution of total expenditure in FY 2011-12

Project -1

Project Title	Let Girls Be Born
Project Coordinator	Virat Prince
Funder/Support Agency	Plan India
Starting date of the Project	June 01, 2011

COVERAGE

District	Palamu, Jharkhand
Block	Patan 2. Daltonganj Sadar
Panchayats	20
Villages	83
Population (Direct):	22,000
Population (Indirect):	107945

GOAL:

Empowering the community for eliminating Sex Selection & Determination and guarantee the right of girls to be born in the selected districts of six states by December 2013.

OBJECTIVES:

- To make members of targeted communities aware of female feticide and its negative effect on women's health and thus creating balance in the society in 4 districts of Jharkhand state by December 2013 and develop the selected Panchayats of the districts as model district.
- To establish and support community based advocacy groups on rights of girl child with members from Local Self Governments/PCPNDT Advisory committee.
- To set up community based support systems for adolescents and newly married women, through which they can get advice, orientation and immediate help in case of a forced sex selective abortion
- To sensitize the larger civil society including Media, lawyers, doctors and college.
- To establish a successful model that can be scaled up to state and national level.

ACTIVITES

Training of Project Team: Project team is the back bone of any project. Achievement of goal and objectives of any project depends upon the understanding of the project team. It is important that project team have understanding not only about the goal and objectives of the project but also about the activities and knowledge on related issues and subject. Therefore every organization orients its staff on goal, objectives, activities and related issues. It is also necessary for better and smooth functioning of the project. IDF organized training program at Ranchi for its staff under this project. During the training program IDF staff acquainted with the objectives and strategies of LGBB intervention in the district of Palamu. In course of the orientation the roles and responsibilities of staff were also discussed. The orientation also included the session on Universal Birth Registration which further added value to their learning on facilitating the activities at the field level.



District Level Launch Workshop: IDF has organized district level workshop at Daltonganj to introduce the programme in the district. The objective was to share the goal, objectives, mode of operation and desired outcome of the programme with the various stakeholders i.e. health and ICDS officials, NGOs, media. Apart from this it was also tried to sensitize them on the issues of declining Sex Ratio, importance of girl child & her rights. The other objective was to develop understanding on the enforced central legislation PCPNDT(Preconception and Prenatal Diagnostic Technique) Act 1994 (Prohibition on Sex Selection) to curb the practice of sex selection.

Workshop on PCPNDT Act with Doctors and US clinic owner: Two one-day workshops were organized in collaboration with district Civil Surgeon office in 2 districts named,



Hazaribag and Ramgarh. As both districts have sharp declination in child sex ratio. Ultrasound (US) Clinic Owners, Doctors, Radiologists participated in the workshop. They have been sensitized on the issue of "Declining Child Sex Ratio and PCPNDT Act & its Provision". The workshop was inaugurated by the Civil Surgeons of the respective districts. The objective was to introduce the effort of the Plan on LGBB and share the objectives as well as desired outcome of the programme with the various stakeholders on the issue of declining Sex Ratio. The other objective was to bring a greater understanding on the

enforced central legislation PC & PNDT (Preconception and Prenatal Diagnostic Technique) Act 1994 (Prohibition on Sex Selection) to curb the practice of sex selection. Booklet on PCPNDT Act in Hindi was also distributed to the present doctors and ultrasound clinic owners for better understanding of the Act. This workshop helped the participants in increasing the awareness level on the impacts of declining sex ratio on the society was increased. Present Doctors and USC owners were getting aware on the PCPNDT Act. Submission of Form 'F' and to follow all the provisions of the Act is mandatory.

State Level NGO Workshop: One day State Level Workshop was organized at hotel Green Horizon, Ranchi with like-minded NGOs to prepare a common agenda and action plan to curb the issues. Main objective of the workshop was i) to increase awareness on the issue of declining child sex ratio & PCPNDT Act and its impact on social imbalance ii) Importance of Birth registration and its relation with the survival of the girl child thereby highlighting the role of LGBB in protecting the existence and identity of every child.iii) Effective implementation of the PCPNDT act. iv) Possibility of integration of LGBB issues in their work & work area.



This envisages sensitizing the key stakeholders and controlling the misuse of the ultra sonography technology, members of local NGOs to know the community perception on the alarming decline in Child Sex Ratio and its social impact. Participants were also getting acquainted with the objectives. This will also facilitate onset of multi stakeholders' partnership mutually recognizing the roles and responsibilities in curbing the practice of sex selection & sex determination. It will be facilitating better understanding among participants as how to ensure efficient enforcement of Pre- Conception and Pre-Natal Diagnostic Techniques (Prohibition of Sex selection) Act, 1994. The event will also help the administration to understand the reason for the skewed child sex ratio in the district,

envisage an action plan. Mission Director NRHM, Joint Director & State Nodal Officer PCPNDT Act, NRHM, Jharkhand, Members of State Supervisory Board, NGOs Representatives from the districts of Ranchi, Ramgarh, Hazaribagh & Palamu participated in the workshop. Action plan were prepared by the NGO representatives of 4 districts.

Orientation of Health Department Staff (MOIC/BPM/BAM): A one-day orientation of health department staffs was organized at district level. A total of 25 members participated. Civil Surgeon of Palamu district Mr. Gopal Srivastava was the chief Guest and objective of this orientation was to make aware all the MOIC and important person of health department of the Palamu district on the situation of declining child sex ratio and PCPNDT Act & its provisions. Their roles and responsibilities to follow the Act were discussed. CS, Palamu asked all the members present in the workshop to understand the need and follow the provisions of the Act. All the present members were sensitized and assured to follow the suggestions.



Orientation to GVPA/VHSCs, ANM and Panchayat Level Registrars: Two orientation programme of ANM, GVPA, and block level Registrar were organized at district level. Objectives of the workshop were to share the LGBB Project and its objectives. To orient the stakeholders on the value & importance of girl child, reasons for female infanticide and feticide, to discuss on the social imbalance due to declining child sex ratio. The orientation started with the registration and introduction and welcome note by the District Coordinator, Mr. Mahendra Prasad. In order to sensitize the participants over the issue the participants were shown a video clips based on sex determination and sex selection. After this session



Mahendra Prasad started with the introduction of the Integrated Development Foundation (IDF), its working area in Bihar and Jharkhand. He also briefed about the concern over the declining Sex ratio and introduced about Plan India and IDF initiative in the form of a Project called Let Girls Be Born (LGBB) to curb the menace of the declining sex ratio. Later on he briefed about the Goal, objectives, and strategy of the project. After that resource person Swarna Lata Ranjan oriented the participants on sex and gender, Child sex ratio, importance of girl child and PCPNDT

Act through power point presentation, lecture method and group discussions.

Training of Teachers / ICDS / Village Pradhans / Literacy: One day orientation was organized with selected teachers, ICDS and Village Pradhans of Patan and Sadar Block. Objective of organizing the training was to sensitize the identified stakeholders on the LGBB issues related with declining child sex ratio, causing social imbalance, strong son preferences, low status of the girl child, sex determination, sex selective abortion etc. Teachers, Sahiya, PRI Members and ANMs were oriented on the identified issues of LGBB. 25 male and 65 female participated in 3 orientation programme.



Identification of the Youth Group and orientation of Youth Group Leaders: Youths are the future of any country. Development and change in any country depends on the thoughts and attitude on the youth of the country. We have to involve and take participation of youths to change the thoughts and behaviour of the community. They have to be on the driving seat to change the existing norms of the community. Keeping in mind IDF has decided to involve youths in this important project (Let Girls Be Born). IDF has identified youth and adolescent boys and girls under this project and orient them on the related issues. IDF organized workshop for them at district level. The objective of the workshop was

- To sensitize the identified youths on the LGBB project goals, objectives and LGBB issues.
- Introduce the concept of gender
- Issues related with declining child sex ratio-social imbalance, strong son preferences, low status of the girl child, sex determination, sex selective abortion.
- Birth registration and its importance.
- The role or contribution in addressing the issue.

During the sessions identified youths and adolescents sensitized on the LGBB project goals, objectives, issues related with declining child sex ratio, Introduce the concept of gender with the different tools developed by Plan & its partner, issues related with declining child sex ratio-social imbalance, strong son preferences, low status of the girl child, sex determination, sex selective abortion (how, happening with the support of the doctors)

Celebration of Girl Child Day and International Women Day: On the occasion of the National Girl Child day, Integrated Development Foundation (IDF) proposed to celebrate this by organizing a rally. The objective of the rally was to create awareness among the people which will help in eliminating the illegal practice of sex determination & sex selective abortion and for ensuring the effective implementation of PC & PNDDT act.



The rally was organized in the Kankekala Panchayat in the Patan Block of the Palamu district. The rally started from the school of the Kankekala and it passed through the different hamlets i.e. Brahman tola, Musalman tola, Chero tola and Rai tola it finally reached to the School



and get disbursed. Around 50 people participated in the rally comprising of Kishore, Kishori, ASHA, IDF representatives and villagers.

In preparation part for organizing the rally the Mukhiya, Kishore/Kishori, Sahiya were contacted and were briefed about the importance of the Girl child day and reasons to organize a rally. Rally started by flagging off by Mukhiya of Kankekala Panchayat. The people were carrying the slogans and messages related to the sex determination and sex selection. Some of the common slogans were

- *Aankho ka tara hai beti, Ghar ghar ka ujyara hai beti*
- *Beti ko marwawoge to Dulhan kaha se laoge.*
- *Songs related to the girl child were also sung. The one liked by all was:*
- *Jon kokhe beta janme, waihe kokhe betiya*
- *Du ranga nitiya*
- *Ka kaila wo babuji du ranga nitiya*

Birth Registration Camp: Birth Registration is one of the important issues of LGBB.



Therefore Birth Registration camps were organized at Panchayat level to ensure birth registration and certification and also to create awareness about its importance in right prospective among the parents. Panchayat Motivators prepared the list of those children who have no birth certificate. They did home visits and consulted the parents in this regard and prepared the list. After preparing the list Block Motivators and Panchayat Motivators consulted the respective Panchayat Sevak, who is also the registrar and finalized the date for organizing the camp. Panchayat Motivators informed the date

and venue of the camp to the concerned parents and requested them to come to the scheduled place on scheduled date. Apart from these parents other people also participated in the camp. During the camp Panchayat Sevak registered the children who were under 21 days after their verification. Panchayat Motivators and Block Motivators addressed the importance of birth registration and certification during the camp. They also informed the people about the process of birth registration and certification of those children who had crossed 21 days. Apart from this they also discussed these issues during their monthly meeting. Last year 14 birth registration camps organized at panchayat level. All together 356 (192 girls and 164 boys) children got registered during these camps.

Street Play (Nukkad Natak): Street play is a strong and effective means of communication. It covers larger group of community and spread messages in entertaining way. Community people were able to remember the messages for long time and it has better impact on the community. Therefore it was decided to organize street plays under this project. First of all team was selected to conduct the street plays. After that script was finalized and performed by the trained artists within the community. Nukkad Natak were organized in different villages to create awareness on the gender roles and the impacts of declining sex ratio including the significance of birth registration. Guidance was provided to the cultural team with regard to the conceptualization of the script of the performance beforehand upon which they prepared the play and practiced it. Altogether 93 street plays conducted during the reporting period in different villages of different panchayats of Patan and Sadar Blocks.



Altogether 93 street plays conducted during the reporting period in different villages of different panchayats of Patan and Sadar Blocks.

Capacity building workshop of SHG members: 3 residential trainings of two days each were organized for the SHG members with a view to build their capacity on the issue of Child Sex Ratio, social implication of gender imbalance, importance of birth registration along with their role to mobilize the community on the issue of preventing sex selection. Brief orientation on PCPNDT Act was also organized to let them know the mandatory provisions of the act. The workshop proved beneficial with regard to develop their understanding as how to address the issue and foster community owned action.

Apart from this 5 cluster level meetings were also organized at panchayat level. SHG members were oriented on importance of girls child, domestic violence, ill effect on the health of women due to SSA, birth registration & certification, PCPNDT act etc. 169 members oriented on above mentioned issues during these 5 meetings.

Development and Printing of reference material on PCPNDT Act: Reference book on PCPNDT was developed after rounds of discussions with NRHM state officials in Ranchi and within IDF team members. After getting approval and forwarding message from Mission Director, Aradhana Patnaik, NRHM, Jharkhand, 1000 copies has been printed with the NRHM logo and Logo of Jharkhand Govt. Govt. of Jharkhand would be using it by distributing to their officials, Doctors, ANMs and other health functionaries. 250 copies of PCPNDT booklet have been provided to the NRHM Government of Jharkhand.

Collage Seminar: 4 unit of Collage Seminar were organized in different colleges. College teachers and students participated in it with greater interest. Essay, Drawing and slogan writing competitions were also organized there and students participated in it with full numbers. Platforms like College Seminars helps in spreading the message not only to the young and energetic youth groups but also to the faculty members. In order to sustain the message the different wings of the college needs to be activated.

Wall Painting: Wall painting is an effective means of communication for literate people. Literate people could read it on daily basis whenever they go through it. It motivates people to think over the related issues and positive impact shown among the community. Wall paintings have been done in the strategic locations of villages in Patan and Sadar block of Palamu district. The messages for the wall painting were approved by Plan before their final display on the walls. The messages pertained to prohibition of Sex selection, gender justice and importance of birth registration. 200 slogans had been written in different villages of different panchayats of Patan and sadar block. Wall paintings create awareness on larger scale in the community. Messages with the colourful picture on wall give more clarity and understanding to the common people about the issues.



Apart from budgeted activities some non budgeted activities also organized under this project on monthly basis. These are as follows:

Meeting with general community: Panchayat Motivators and Block motivators organized meeting with general community in every month in their working areas. The objective of the meeting with the community members is to disseminate information on the issues related to the project and receive knowledge about the villages' status on Birth registration of children, Importance of girl children, etc. These types of regular meetings will help in building the rapport with the community.



Meeting with Panchayat members: The objective of the meeting with the Panchayat members is to strengthen the knowledge of the members on the LGBB issues. In the regular meetings need of the intervention was discussed with them. Knowledge on PCPNDT Act, declining child sex ratio, importance of birth registration, Panchayat member's role and responsibilities was also discussed.

Meeting with SHG: SHGs are treated as the best platform to intervene in the community. Objective of the meeting with the SHG members is to create their awareness on the Significance of UBR, gender roles and the impacts of declining sex ratio as well as to strengthen the SHGs. Knowledge on declining child sex ratio causing social imbalance, strong son preferences, low status of the girl child, sex determination, sex selective abortion

were shared with the SHG members. Monthly meeting helps in increasing the awareness level among the women on the impacts of declining sex ratio on the society. Regular meeting with SHGs help them to internalize the LGBB issues and resolve their queries.

Case Story

अधिकार हमारा भी.....

1. नाम- पुनम देवी

पति- संजय सिंह

उम्र- 37 साल

ग्राम- गाड़ीखास पंचायत- गाड़ीखास

ब्लॉक- पाटन जिला -पलामू झारखण्ड

आई. डी. एफ. पलामू द्वारा, प्रोजेक्ट एल. जी. बी. बी. जो प्लान इंडिया द्वारा संयोजित हैं उसके तहत महिलाओं को जन्म पंजीकरण, पी. सी. पी. एन. डी. टी. तथा महिला साक्षितकरण आदि विषयों की जानकारी का परिणाम अब देखने को मिलने लगा है।

ये बात हैं चुने हुए 81 गाँव में एक गाँव गाड़ीखास की जो जिला मुख्यालय से 16 कि. मी. उत्तर दिशा में पड़ता है। पुनम देवी, पति संजय सिंह उम्र 27 साल जाति चरो, जो क्लास दसवी तक की पढ़ाई की हैं, उनका घर लातेहार जिला के बरवाडीह जक्सन गाँव में हैं, उनका विवाह पलामू जिला के उर्पयुक्त गाँव में संजय सिंह जो एक कृषक है उनके साथ हुआ है। उनमें तीन बच्चे हैं जिसमें एक लड़की तथा दो लड़के हैं। वे अपनी माली हालत को देखते हुए तथा पति की सहायता करने हेतु तथा अपनी योग्यता को उपयोग में लाने हेतु गाँव के तेरह महिलाओं को मिलाकर एक स्वयं सहायता समूह बनायी है, जिसका ग्रेडिंग कई बार हो चुका है तथा पहली बार उनको 250000 रु. सहायता राशी मिल चुकी है जिसका उपयोग उनलोगों ने अपनी खेती बारी में सब्जी उपजाने हेतु काम में लाया तथा पहला किस्त समय रहते भर दिए। दूसरी किस्त हेतु उन लोगों ने फार्म भरा और पास भी हो गया तथा दूसरी बार उनको 200000 रु. का सहायता राशी मिला, उसका भी उन लोगों ने अपनी खेती में उपयोग किया और समूह को फाईदा दोगुना कमाया तथा समय रहते इस राशी को भी उन लोगों ने चुकता कर दिया। अब इनके साथ आई. डी. एफ. की बराबर बैठक चल रही है जिसमें उनके पति भी शामिल होते हैं और इनको एक बड़ा प्लान बनाने की सलाह दी जा रही है।

इसी बैठक में इनको महिलाओं की घटते हुए लिंगानुपात की जानकारी देते हुए बताया गया था कि गर्भ में पल रहे कन्या शिशु को मारने के कारण में एक कारण यह भी है कि मरने के बाद मुखान्नि देने का अधिकार महिलाओं को नहीं है जिसका बड़ी जोर के साथ खण्डन किया गया था कि ये तो समाज का बनाया हुआ कुरिति है जब महिला और पुरुष एक ही कोख से पैदा होते हैं तो उनको भी वो सारा अधिकार होना चाहिए जो पुरुष को है।

और एक दिन ऐसा हुआ, पुनम देवी की माता जी काफी बीमार पड़ी जिनके इलाज के लिए वे बाहर अर्थाथ रॉची ले गई, उनके इलाज लिए काफी पैसा भी खर्च किया गया, लेकिन अततः उसे बचाया नहीं जा सका और उनकी मृत्यु हो गई, पिता पहले से ही लकवा ग्रस्त हैं वे अपने जगह से इधर उधर हेतु दुसरो का सहारा लेते हैं उनके लिए उनका हमसफर जो देखभाल करती थी वो नहीं रही ऐसे समय में पुनम देवी जो अपने परिवार की बड़ी बेटी हैं पापा का सहारा बनी। गाँव वालों को कहना था पति तो चल कर कहीं जा नहीं सकता तो फिर मुखान्नि देने कैसे जाएगा कैसे होगा उसका दाह संस्कार। अच्छा होता उनके भाई के बेटे में से कोई मुखान्नि दे, क्योंकि उनके तो दोनरे ही बेटियू ही हैं। पर उनके पिता ने कहा मेरी बेटियाँ किसे के बेटे से कम नहीं हैं हमारे कोख से जो जन्मा हैं उसी को ये अधिकार होता है भले ही वो बेटा ही क्यों नहीं हो। उसने पुनम को बुलाकर कहा पुनम तुम्हारे होते किसी दुसरे को ये अधिकार नहीं है जाओ अपने मम्मी को तुम ही मुखान्नि देना। नहीं तो तुम्हारी माँ की आत्मा को शांति नहीं मिलेगी, और इस तरह से पुनम ने आई. डी. एफ. की बैठक में किए गए बातों को याद किया और अपने गाँव वालों के साथ श्मशान घाट पहुँच कर अपने माँ को मुखान्नि दी।

अब वो अपने समुह में ही नहीं अपने गाँव में महिलाओं के लिए एक प्रेरणा बन गई जिनकी उदाहरण महिलाएं ही नहीं अक्सर पुरुष भी देते रहते हैं क्योंकि उन्होंने एक बड़े समाजिक बदलाव के लिए एक अनूठा पहल किया है।

जीने का अधिकार

2. नाम - आसपति देवी, उम्र 36 वर्ष
पति- बालकेश राम ग्राम - नवडीहा

पंचायत – नवडीहा थाना – पाटन

असपति देवी पति बालकेश राम, ग्राम नवडीहा, पंचायत नवडीहा थाना पाटन के निवासी हैं असपति देवी को पहले से तीन बेटी हैं और अभी वह गर्भवति हैं। जब टीकाकरण में टी. टी. का सुई ली और मैं उनसे पुछा कि पहले से कितना बच्चे हैं तो उन्होने बताया कि 3 बेटी हैं प्रथम बेटी 15 साल की दूसरी 10 वर्ष की और तीसरी बेटी का उम्र 5 वर्ष हैं। इसके पाँच दिन बाद मैं गांव भ्रमण कर रहा था इसी बीच नवडीहा गांव की सहीया दुर्गा देवी से बातचित हुई तो सहिया ने बताया कि आसपति देवी को पहले से तीन बच्ची हैं इस लिए वह इस बार अल्ट्रा साउण्ड कराना चाहती हैं यदि लड़का होगा तो रखेंगे और लड़की होगी तो खराब करवा देंगी। उसके बाद हमने उस आसपति देवी के घर पुछते-पुछते पहुँचा और उनके पति बालकेश राम से मिला। उससे बातचीत किया, उससे भी पुछने पर पता चल गया कि वह भी लड़का चाहता हैं तथा आसपति ने भी बताया कि अगर अल्ट्रासाउण्ड मे पता चलता है कि लड़की हैं तो उसे खराब करावा देंगे। हमने उनको बताया कि लड़का लड़की में कोई फर्क नहीं हैं, दोनो ही आपके संतान हैं। उन्हें विस्तार से पी.सी.पी.एन.डी.टी एक्ट के बारे में बताया कि इस एक्ट के तहत जो भी लोग गर्भ में पल रहे बच्चे का लिंग जाँच तथा लिंग चयन करवाया तो उसे तीन से पाँच साल तक की सजा हो सकती हैं तथा 50000 से 100000 रु. तक का जुर्माना हो सकता हैं।

इसके बाद उस दम्पति ने अपनी गलती स्वीकारते हुए उन्होने कहा कि अब हम जान गए है कि जो भी बेटी हैं वो सिर्फ हमारी ही बेटीयों नहीं हैं ये तो गांव समाज तथा सरकार की बेटी हैं इसलिए तो सरकार अब बेटी के पैदा होने पर एक लाख रुपया भी दे रही हैं, तो ठीक हैं हम भी अब इस बच्चे को जन्म देंगे चाहे वो बेटी ही हो दोनो तो उसी मां के गर्भ से पैदा होते हैं फिर हम क्यो एक को अपना दूसरे को पराया माने। अब हमलोग गर्भ जाँच नहीं करवाएंगें जो भी हो उसे इस दुनिया में खुशी खुशी लाएंगें। आपको

बहुत बहुतधन्यवाद कि आपने हमारी आँखे खोल दीं।



लिंगानुपात में अंतर होना खतरनाक संकेत

सोना परबतिया के समूह में पंचायत समिति के सदस्यों के साथ बैठक का आयोजन किया गया

सूचना : लिंगानुपात में अंतर होना खतरनाक संकेत है। यह संकेत है कि गांव में लड़कियों की संख्या कम हो रही है। यह संकेत है कि गांव में लड़कियों की संख्या कम हो रही है। यह संकेत है कि गांव में लड़कियों की संख्या कम हो रही है।

वर्ष	लड़कियों की संख्या	लड़कों की संख्या	लिंगानुपात
2001	953	1000	953
2006	926	1000	926
2011	926	1000	926

लेट्स गर्ल बी बॉन अभियान के तहत कार्यशाला का आयोजन

राजगढ़ : लेट्स गर्ल बी बॉन अभियान के तहत राजगढ़ को शिवानी रोड स्थित होटल केन्द्र के सभागार में कार्यशाला हुई। कार्यशाला में लड़कियों की पठनी संख्या को जानकारी दी गयी, कार्यशाला पर आयोजन दिल्ली की संस्था प्लस इंडिया ने किया था। कार्यशाला में जानकारी दी गयी कि राजगढ़ जिला में लड़कों के अनुपात में लड़कियों की संख्या घटती जा रही है। वर्ष 2001 में एक हजार लड़कों के अनुपात में लड़कियों की संख्या 953 थी, यह लगातार घटते हुए वर्ष 2011 में प्रति एक हजार लड़कों पर लड़कियों की संख्या 926 हो गयी, बताया गया कि

ऐसा लिंग परीक्षण होने की वजह से हो रहा है। कार्यशाला में बताया गया कि जब से आपुनिक यंत्रों में अल्ट्रा सोनोग्राफी आदि बाजार में आयी है, तब से लड़कियों की संख्या दिनों-दिन घटती जा रही है। कार्यशाला में बताया गया कि राजगढ़ जिला में 18 सोनोग्राफी सुविधायुक्त अस्पताल है, कार्यशाला में चिकित्सकों से अनुरोध किया गया कि वे लिंग परीक्षण नहीं करें, बताया गया कि लिंग परीक्षण को रोकथाम के लिए पीसी एंड पीडीएटी एक्ट 1994 बनाया गया है, इसमें लिंग परीक्षण करने पर कार्रवाई का प्रावधान है। कार्यशाला में क्लिप के सिविल सर्वेज डॉ रमेश कुमार मिश्र, डॉ महाश्वमी प्रसाद, डॉ तुलिका राठी, डॉपीएचआरएफएम एमएड जाहिर, डॉ इंदिरा प्रसाद, डॉ केएस प्रसाद, पंचायत इंडिया के दीपकजी खान आदि उपस्थित थे।

Project – 2

Project Title:-	Community Center Child Development Project
Project Manager:	SUJEET BARI
Funder/Support Agency:	Plan India
Starting date of the Project:	January 2011

COVERAGE

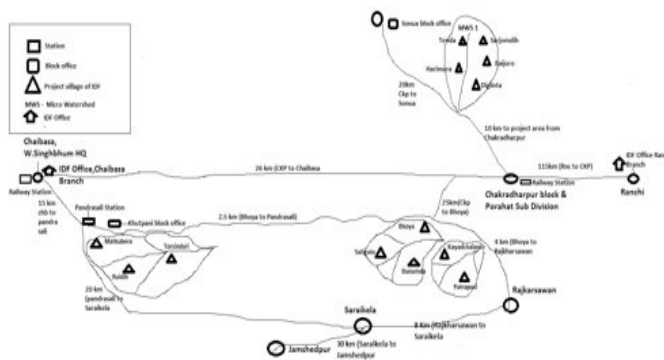
District:	West Singhbhum
Block:	1 (Khutpani)
Panchayats	4 (Bhoya, Kayadchalam, Matkubera, Ruidih)
Villages	15
Population (Direct)-Khutpani:	8268
Population (Indirect)-Khutpani:	8268

BACKGROUND

West Singhbhum is one of the oldest districts of Jharkhand. There are two accounts relating to the origin of the name of the district. Firstly the name “Singhbhum” or the lands of “Singhs” has been derived from the patronymic of the Singh Rajas of Porahat. Secondly the name is an altered form of “Singhbonga” the principal deity of the tribal’s; it is situated about 150 kilometers away from Ranchi, the capital of the State of Jharkhand.

People’s Life

Population of the area is predominantly inhabited by Ho tribe. Among the different other Castes, the Machua, Gope, Lohar are also present in the area who belongs to backward caste. Agriculture is the main source of income of the people. But most of the people are marginal farmers. Due to low income and lack of employment throughout the year, people tend to migrate to urban & nearby areas in search of livelihood as daily wage labourer, especially the male members of the family. Most of the houses are made up of thatched or local mud tiled (*Khapra*) roofs with mud walls and floor plastered with cow dung. Women do the household chores and girls support their mothers in looking after younger siblings, cooking, collection of fire woods and other daily household chores. The main food habit of the area is rice, Dalia (semi solid food made up of wheat), roti (flat bread made from wheat) and vegetable curry. In the predominantly rural state of Jharkhand, villagers have historically eked out a living with almost no reserves, so that in case of drought or other natural disaster their only recourse is for male family members to migrate elsewhere to find work. In addition to living a marginal existence, members of these extremely backward and deprived tribal communities are also resistant to change and therefore not receptive to intervention by outsiders.



Hindi is the main language of the state; but people speak local tribal dialect *Ho & Santhali*. The main festivals is celebrated by the people is like **Maghe**-This festival is observed to bring prosperity to the community. **Baa** -. This festival is celebrated to mark the splendor of the nature, **Hearo**-No one sows any seed before the celebration of this festival, **Jomnamah**-When the first crop is ready for harvesting in the month of Aug-Sep this festival is celebrated. The first harvested crop is cashed in every house on this occasion.

The operational area has the majority of tribal community, which is about 70% of the total community. Among the tribes **Ho** tribes are in majority, also other tribal communities like **santhali** and **Mahli** are also there. Besides tribal communities, other communities from Backward class like **Mahto, Gope, Tanti, Machua, Lohar and Sao** are also the resident of that particular locality. The total geographical area of assigned CCCD, Program is of approx 3000hectares.

GOAL:

To address the root causes of child poverty, three level of mutually interrelated intervention are required namely a) ensure child are protected from abuse and exploitation; b) ensure children have access basic services, (e.g. Nutrition, Education, Health, Sanitation & House hold economic security) c) Ensure Children's voices are heard and they are participating in decision affecting their lives.

1. Child Right Program Goal:

"Children grow up and develop in safe and enabling environments that ensure their right to protection is respected and realized, and that they can grow and develop free from abuse, discrimination and exclusion."

2. Education Program Goal:

"Enable all girls and boys in the Plan communities to complete 8 years of education"

3. Community Governance Program Goal:

"Children, families and communities in India can exercise their right to participate actively in value based community governance and take on the responsibilities that come with this."

4. Water Environment and Sanitation Program Goal:

"Children, families and communities realize their right to a healthy environment, where they have geographical and economic access to quality integrated water & sanitation services that they are free from social exclusion and gender discrimination."

ACTIVITES

Each and every activity undertaken during the year will be described heading wise clearly mentioning the process involved in it.

There were few prominent activities carried out, that has tremendous influence over the very goal of project. Moreover the emphasis was on the vital components to achieve the goal of the project such as-:

1. **Child Participation**
2. **Child Protection**
3. **Early Childhood Care and Development**
4. **Household Economic Security**
5. **Health**
6. **Education**
7. **Water Environment and Sanitation.**

1. CHILD PARTICIPATION-:

a) **Formation of Children Group and having regular monthly meeting-:** The main objectives are to give a plat form to the children where children can speck and learn new things from their friends. They can discuss about their problem faced by the children and document and it can be present in the PRI. With this objective IDF-Plan India had formed 60 Children's club in 15 targeted communities. Children's club members every month they are coming together. Having their group discussion on various topic such as-:

- Importance of Childhood education and Primary Education
- Discuss with Drop out children on Value education
- Pressurising Parent's of drop out children to sent school.
- Follow up to ensure drop out children going to school

- Made discussion on RTE
- Discussion made during regular group meeting on Child Protection Issues and Child Rights
- Regularising the monthly meeting.
- Discussion made during meeting on child base issues and skill development
- Orientation of Children group members on life skill education
- Organising child led monitoring of essential services
- Sharing of findings of the monitoring at the Panchayat level during Gram Sabha meeting by children representatives
- Initiation of federating children clubs at the village level through innovative issue based activities from time to time.

Result:-

- Total 60 children's club formed in 15 targeted areas.
- Approximately 1000 children had taken membership in the children's club.
- Every month children's club members are regularizing the monthly meeting.
- 25% children were sensitized on the importance of their participation in Gram Sabha, own decision for better future.
- Children's club members are taking active part in the children's club's group activities.

b) Formation of adolescent group (Separate male/ female) and having regular monthly meeting:-

To bring the unity among all the teenager of the community, there are separate (for Male and Female) Adolescent group was formed. The main objective is to form the adolescent group is to, make the sensitized on child rights, child protection issues at the community level and make sensitized on their career. During the field visit of the staff of IDF-Plan India, most of the boys and girls are found drop out from the school, so we had planned and tried to give them a way to make their future bright by the vocational training or career guidance counseling. On this reporting year 75 candidates got the apparel design "Smart Operating" course. Among them 35 candidates are from 1st batch and 15 candidate receiving training from Don Bosco, Ranchi, 25 is 2nd batch. From the 1st batch 10 candidates got the placement from ADTC training center. Rest 25 batch, they are still receiving the training.



Result:-

- 75 candidates got the vocational training on apparel design and motor mechanic.
- 10 candidates got the placement from ADTC training center.
- 25+15 candidate still receiving the vocational training.



c) Developed Child Friendly Resource Center:-

Every village has a child resource center. The community has donated their personal home/platform/ Aganwadi center to make the child friendly resource center. Total 15 child resource center was identified. The CBOs representatives, children's club members and child protection committee representatives

are taken responsibilities to maintain the child resource center. Every month children's club members are coming together for meeting and having discussion. They have also play material for their entertainment. Comic books and magazine to read. The register is maintained by the community volunteer and field level worker.

Result:-

- 15 Child Resource Center identified.
- Total 60 children's club members are the beneficiaries of this child resource center.
- Play material and magazine distributed to the child resource center from IDF-Plan India.

d) Orientation of Children groups members on child rights and child protection issues:- Orientation meeting was organized on child rights and child protection issues for children's club members at community level. In a community all children's club members were participated. Approximately 70 children's club members oriented on the given topic. The main topic of discussion was:-

- Type of child violation at community level.
- Role and responsibilities of the children's club members to fight against child violations.
- Concept on child rights and child protection issues.
- Platform to raise the voice.

Result:-

- Approximately 70 representatives of 60 children's club members were oriented on child rights and child protection issues.
- Children's club members sensitized on child rights and child protection issues.

e) Sensitization meeting with PRI members on importance of Child Participation:- To orient on child rights and child protection issues given to the PRI members. The orientation program was organized in Panchayat Bhawan. All the PRI members such as, Sarpanch, Nayab Sarpanch, Panchayat executive officer, word member, Dakua, Mukhia and other traditional leaders were attended the program. The main topic of discussion was:-

- Brief discussion of objectives of IDF-Plan India.
- Objectives sharing of training program.
- Who is child? Why child participation?
- Child violation issues at Panchayat level.
- Child marriage and child labor
- Child health and nutrition.



Result:-

- High appreciation to the CCCD, Program by the Panchayati members.
- Panchayat members assured their support to IDF-Plan India team to implement the CCCD, Program in the targeted area.
- PRI members got clear understanding on child rights and child protection issues.
- Also made clear understanding on child marriage and child labor.
- Understand on important of children's health and nutrition for their physical and mental growth.

2. CHILD PROTECTION:-

a) Orientation to CBOs of the community on child rights and child protection issues:- To bring sensitize to all the CBOs of the community such as children's club, SHG members, Farmers Club, Adolescent group (male and female) and child protection committee on child rights and child protection issues. All the CBOs

representatives were participated in the orientation program. The main topic of discussion of the program was as follows:-

- Brief discussion of objectives of IDF-Plan India.
- Objectives sharing of training program.
- Role and responsibilities of the CBOs against child violations.
- Consequences of child marriage, child labor.
- Child rights like education, health, food, play, speck etc.

Result:-

- Representatives from all the CBOs of a community got oriented on child rights and child protection issues.
- Participants got clear understanding on the above discussed topic.
- CBOs representatives assured their cooperation to the IDF-Plan India staff for implementing the program.
- Participants made sensitized on the importance of education in building the child future bright.
- They made aware on consequences of child marriage and child labor.

b) Orientation of teacher & SMC members of every school on Child Rights issues:-

To sensitized through the orientation program to the School Management Committee (SMC) on child rights and child protection issues. It was a one day program for each school. All the SMC members and all school teacher of a school took part in the orientation program. The main topic of discussed in the meeting was as follows:-

- To procedure of address of child rights issues.
- Prioritizing the problem of school children.
- Objectives of formation of School Management Committee (SMC)
- Role and responsibility of the SMC members.
- Parent's role to check the children's attendance in school.
- Identify the child violations of child rights and abuses.
- Process to check the drop out at community level.

Result:-

- Teacher and SMC were sensitized on violations of child rights.
- Teacher and SMC have assured their cooperation with IDF-Plan India.
- Made clear understanding on objectives of formation of SMC
- Made clear understanding on role and responsibilities of the SMC members.
- Parents were assured that, they will check the attendance of the school going children.
- SMC members have accepted the responsibility to encourage the student to come to the school.

f) Orientation of PRI members of Child Protection issues:- To orient on child rights and child protection issues given to the PRI members. The orientation program was organized in Panchayt Bhawan. All the PRI members such as, Sarpanch, Nayab Sarpanch, Panchayat executive officer, word member, Dakua, Mukhia and other traditional leaders were attended the program. The main topic of discussion was:-

- Brief discussion of objectives of IDF-Plan India.
- Objectives sharing of training program.
- Who is child? Why child participation?
- Child violation issues at Panchayat level.
- Child marriage and child labor
- Child health and nutrition.

Result:-

- High appreciation to the CCCD, Program by the Panchayat members.
- Panchayat members assured their support to IDF-Plan India team to implement the CCCD, Program in the targeted area.
- PRI members got clear understanding on child rights and child protection issues.
- Also made clear understanding on child marriage and child labor.

- Understand on important of children's health and nutrition for their physical and mental growth.

g) Formation of Child Protection Committee (CPC) and regularizing the monthly meeting in every village-: The main objectives are to make a environment where children can get a plat form, to they can speck and learn and express their feeling freely. The environment where they can move there and they can move without fear. They can discuss about their problem faced by the children and document and it should be solved by the CPC members or it can be present in the PRI. With this objective IDF-Plan India had formed 15 Child Protection Committee in 15 targeted communities. These Child Protection Committee members every month they are coming together. Having their group discussion on various topic such as-:

- Importance of Childhood education and Primary Education
- Discuss with Drop out children on Value education
- Pressurising Parent's of drop out children to sent school.
- Follow up to ensure drop out children going to school
- Made discussion on RTE
- Discussion made during regular group meeting on Child Protection Issues and Child Rights
- Regularising the monthly meeting.
- Discussion made during meeting on child base issues and skill development
- Orientation of Children group members on life skill education
- Organising child led monitoring of essential services
- Sharing of findings of the monitoring at the Panchayat level during Gram Sabha meeting by children representatives
- Initiation of federating children clubs at the village level through innovative issue based activities from time to time.

Result-:

- Total 15 Child Protection Committee formed in 15 targeted areas.
- Approximately 250 members had taken membership in the CPC, all the CBOs representatives are selected for the CPC.
- Every month CPC members are regularizing the monthly meeting.
- 25% CPC members sensitized on the importance of their participation in Gram Sabha, own decision for better future.

c) Celebration of Bal Divas, Annual Sports & Cultural event for children in every village under the direct supervision of CPC at the Block level under the direct supervision of BCPC-: The main

objective is to celebrate Bal divas and organizing annual sports and cultural event was to encourage and motivate children by sports and game for physical and mental growth. To explore the hidden quality of children organizing different activities and sports. To enhance the positive competitive spirit among the children of the same age group and to impart the objective of IDF-Plan India to all the villager of 15 villages. Approximately 5000 children took part in the event. Different sports items conducted as per the age group.



Result-:

- Generated feelings of unity among the deferent villages.
- To generated Positive attitude on completion among the peer groups.

- To address the importance of cultural and sports activities for the children as important as education.

3. EARLY CHILDHOOD CARE AND DEVELOPMENT:-

a) **Training of AWC worker, Sahiyya, CVs and program staffs on home based care and preschool education at the cluster level:-**

To give the technical support in terms of training to the Aganwadi worker, Sahiya, community volunteer and other staff of the CCCD, Program a training program was organized on home based care and value/ importance of preschool education. The topic for discussion was as follows:-



- Pregnancy guide
- Breast feeding
- Guideline/chart for baby food
- Baby personal health care (like teething, diapering, bathing and personal hygiene etc)
- Vaccination and immunizations
- Baby massage
- Play materials/ toys
- Importance of pre-school education

Result:-

- Total 40 AWC workers, Sahiya and other staff of IDF-Plan India received training on home based care and importance of preschool education.
- Participants got clear understanding on above given topic.
- Participant appreciated the program and suggested to organize such kind of the program.

b) **Start Growth monitoring of registered children at the AWC:-** A training program organized for the IDF-Plan India staff to orient the staff on purpose of growth monitoring especially the community volunteer, field level worker and cluster super visor were trained. They have also given a module/format to do the practical. The technical person came to train the staff on growth monitoring. The main topic of discussion was:-

- What is growth monitoring?
- Growth chart documentation
- Indicators.
- Practical demonstration.

Result:-

- IDF-Plan India staff got clear understanding on growth monitoring, documentation, set to indicators.
- Staff of IDF-Plan India already started to maintain the growth monitoring register with the cooperation with AWC worker.

c) **Orientation of Mata Sammittee members and two members of each SHG at the village level on the essential component of Home based care:-** A training program organized for the representatives of Mata Sammittee and SHG group to orient and sensitize on purpose of growth monitoring especially to the leaders of the group. They have also given a module/format to do the practical. The technical person came to train the staff on growth monitoring. The main topic of discussion was:-

- Concept of growth monitoring?
- Growth chart documentation
- Indicators.
- Practical demonstration.

Result:-

- Participants were got clear understanding on growth monitoring, documentation, set to indicators.
 - Representatives of Mata Sammittee and SHG leaders were already started to monitor the growth monitoring register with the cooperation with AWC worker.
 - Representatives of Mata Sammittee and SHG leaders were supporting to the AWC worker to ensure that all child are taking part of the growth chart process.
- d) **Procurement of preschool education kits for the AWCs and supply it to the centres:-** To make the learning playful, entertainment and interesting and to teach the children, preschool education kits distributed to all the AWC. The AWC worker maintained the learning material. There are good comments coming from the AWC worker. The learning materials are very helpful for the AWC worker, to make understand the children.

4. HOUSEHOLD ECONOMIC SECURITY:-

- a) **SHG group formation, revitalization and regularizing the monthly group meeting:-** To make sustainable access to financial service, stronger livelihood support system, enhancement of strong collective bargaining power, self reliance and sense of dignity and improve standard of living with dignity and empowerment of the women group IDF-Plan India revitalized the 50 existing Self Help Group and 13 new SHG formed. To regularizing the group and bring the unity among the group, they are coming together twice in a month. There are few points which they made discussion during the meeting such as:-
- Importance of childhood education and primary education.
 - Process to involve in discussion with the parents of drop out children on value of education.
 - Follow up to ensure that drop out children are going to school.
 - Made discussion on RTE.
 - Discussion and share the measure health problem of the community to PRI.
 - Discussion made on health, nutrition and immunization to sensitize the other women.
 - Discussion made on child marriage, child labor and other child hazardous issues.
 - Discussion made on breast feeding, sexual reproductive health, importance of VHND and HIV/Aids.
 - Promoting on kitchen garden, SHG concept, norms, role and responsibilities, record maintenance, internal loaning, group saving and Income Generating Activities)
 - Discussion made on child rights and child protection issues at community level.

Result:-

- Total 50 SHG revitalized and 13 SHG formed.
 - 50 SHG group had opened the bank account and 13 SHG have on the process.
 - Regularizing the practice for group saving.
 - SHG group members trying to motivate the parents of drop out children to send their children go to school.
- b) **Capacity Development of group members about the book keeping methods and other documents maintenance and distribution of printed registers for book:-** After the formation/revitalization all groups are having regular meeting to regularize the group. But one of important part of the group was missing during the group meeting. So IDF-Plan India staff found the documentation part need to be orient to the SHG members. So village level capacity building training on book keeping organized. There were three participants were present namely president, secretary and treasurer. Major topic covered on this training program is as follows:-
- Cash book (weekly saving, Trail balance).
 - Internal loaning, Bank loan reimbursement.
 - Minutes register, meeting register, visit register etc.

Result:-

- Total 189 and 22 staff got training on SHG book keeping.
- Every SHG group have maintained the records.

c) Skill Development of 30 youth –male (2 from each targeted village) and 30 youth - female (2 from each targeted village) on different marketable trades:- To help the less educated youths (male and female) and make them self dependant. There are total 54 youths got the training on “Smart operating Design” it’s all about operating the swing machine.

Result:-

- Total 54 youths got the training.
- 10 students got the placement at Hyderabad by training ATDC.

d) Farmer’s club formation and regularizing the monthly meeting:- Agriculture is the backbone of the Indian economic as nearly 60% of population depends on agriculture. The intent behind to form the Farmer’s club at grass root level is to build their capacity on technical agriculture with eco friendly. Also motivate them to go for vermin compost, SRI plantation method and linking with the Government schemes. They have regular meeting in the group at monthly basis. The meeting was facilitated by the community volunteer and field level worker. The main topic held during the monthly regular meeting:-

- Made discussion on role and responsibility of the Farmer’s club members.
- Facilitated to develop the norm and rules for the Farmer’s club.
- Regularized monthly meeting and maintain the records.
- Made discussion on grain bank and healthy eco environment agriculture.
- Motivate for promoting kitchen garden, soil treatment and benefits of it.
- Discussion made to link with Government schemes and call center.
- Discussion made on child rights and child protection issues at the community level.

Result:-

- 60 Farmer’s club formed in 15 villages. In a club 15 to 20 members are selected.
- Farmer’s club members coming together every month and updating their document.
- Developed capacity building of Farmer’s club members on SRI, Organic farming and leadership.
- Made concept clear on grain bank.

e) Support to farmers of Farmers club in terms of seeds and fertilisers inputs and also in terms capacity building on improved farming practices like SRI & Organic Farming at the village level:- To motivate the Farmer’s club members for organic farming and kitchen garden, vegetable seeds were distributed to all the club members. There are also training programs on SRI and organic farming was conducted. There are three members were took participated in the training program. The main topic of discussion made:-

- SRI process, method and benefits
- Types of compost like grub composing, Bokashi compost, Humanised and vermin compost.
- Soil treatment and seeds treatment.

Result:-

- Total 180 Farmer’s club member’s skill developed on SRI and composed.
- Sensitized on SRI and organic farming.
- Made clear understanding on benefits of soil treatment, seeds treatment and its process.

5. HEALTH:-

a) Activation and strengthening of VHCs:- The objective behind forming the VHC of the Government of health department is to create awareness at village level about available health service and health entitlement, to develop a village health plan best on

the assessment of the situation and priorities of the community, to maintain a village health register and health information board and calendar, to analyse key issues and pertaining of the village level health and nutrition activities and provide feedback to relevant functionary and officials and to present the annual health report from village to Gram sabha. To make this all objective in the community and to reactivate the VHC, every month IDF-Plan India staffs are taking initiative to organize monthly meeting.

b) **Training of ASHA (Sahiyya) workers on health and nutrition technical issues:-** To orient the ASHA (Sahiyya) worker on health technical issue a training program was organized. There are total 129 members took part on this training program. The main topic of discussion was:-

- Brief discussion on IDF-Plan India.
- Training objectives sharing.
- Health related issue for the pregnant women and children of the community.
- Home base care for infant child and pregnant women.
- Adolescent health care
- Health effect of child marriage.
- Role and responsibility of the VHC and other health sector worker at village level.
- Different Government schemes on health related issue. (Like NRHM, JSY etc.)

Result:-

- Total 129 members participated in the orientation program form three cluster.
- Brief knowledge received on training objectives.
- People got brief knowledge on major health related issue on pregnant women and children of the community.
- VHC committee members were assured their participation to IDF-Plan India staff.
- People got aware on home base care for infant child and pregnant women.
- People got aware on adolescent health care and health effect on child marriage.
- People got aware on role and responsibility of the VHC members and other health sectors worker at community level.
- People got aware on different Government schemes.

c) **Orientation of VHC members and ASHA (Sahiya) on community mobilisation aspects such as developing village health plans along with village health fund:-** One day orientation program was organized to help to develop the health plan. The facilitator shared the metrology and process to prepare the village health plan.

d) **Communication activities (nukkad natak, puppet show and other communication activities on important events such as NNW, WAD, etc in covering the issues of child marriage, JSY scheme, ICDS facility & Breast Feeding, SRH, HIV/AIDS:-** To sensitized the mass in the micro level few slogan developed on health issue and it was painted in the community.

e) **Facilitate community led VHNDs at the village level:-** There is a monthly village Health and Nutrition Day (VHND) observed by the Government in the community. The main objectives are to observe the day is to give the immunization to all the pregnant women, children, malnutrition children and adolescent girls. After the immunization and nutrition food distribution, there were a meeting organized to sensitize on disease and its prevention.



Result:-

- Staff of IDF-Plan India (CV, FLW) ensures that, beneficiaries are coming to the VHND centre.
- Beneficiaries are sensitized on consequences of disease and its effects.
- Good rapport among AWC worker, Sahiyya, ANM and other related with IDF-Plan staff's.

- AWC worker, Sahiyya, ANM ensure their support in organizing the program in the target area.
- f) **Organising Health and nutrition camps at village levels-:** To give the need based care to all the villagers a health camp was organized in all the communities. There are medicines for the patient brought. There are two major issues patient were found and they were referred to Tata Jamshedpur hospital. The patients were given free treatment and medicine.

6. EDUCATION-:

- a) **Stay-in-School Campaign at the village level twice a year-:** Stay in school campaign rally organized in 15 villages. The main intent behind for stay-in-school campaign is to spread the message of value education, to make aware the people on education and bring back to the drop out student in the school. In a rally approximately 150 school going student, youths were participated.

Result-:

- The mass people sensitized on value of education.
- Approximately in a village 150 participant took participate
- Some parents were counselled to send their children back to school.

- b) **Capacity building of Children Club on the RTE-:** A capacity building training on RTE was organized in all the villages. The children club members were the main participants. The main topic of discussion made was-:

- Benefits of right to education
- Free and compulsory education.
- The value of education in life
- Career counselling.
- Personality development

Result-:

- Children's club members got aware on their education rights.
- Sensitized on free and compulsory education
- They made aware on value of education.
- Got tips to build their career and personality development.

- d) **Wall painting in every school about the important provision of RTE in local language-:** To sensitize the mass in the micro level few slogans developed on Education, RTE, issue and it was painted in the community.

- e) **Orientation of SMC representative about their roles & responsibility under RTE-:** To sensitized through the orientation program to the School Management Committee (SMC) on right to education. It was a one day program for each school. All the SMC members and all school teacher of a school took part in the orientation program. The main topic of discussed in the meeting was as follows-:

- Role and responsibilities of the SMC
- Concept of RTE
- Objectives of RTE
- Right to education act.
- To procedure of address of child rights issues.
- Prioritizing the problem of school children.
- Objectives of formation of School Management Committee (SMC)
- Role and responsibility of the SMC members.
- Parent's role to check the children's attendance in school.
- Identify the child violations of child rights and abuses.
- Process to check the drop out at community level.

Result-:

- Teacher and SMC were sensitized on violations of child rights.
- Teacher and SMC have assured their cooperation with IDF-Plan India.

- Made clear understanding on objectives of formation of SMC
- Made clear understanding on role and responsibilities of the SMC members.
- Parents were assured that, they will check the attendance of the school going children.
- SMC members have accepted the responsibility to encourage the student to come to the school.

7. WATER ENVIRONMENT AND SANITATION:-

a) **Orientation of JASC representatives on water and sanitation issues and services, water security plans at cluster level:-** One day an orientation training program was organized for Jal Abam Swachta Committee. The representatives of the group members were present in the orientation training program. The main intention to have the orientation training program is to sensitize the JSAC to motivate the community people to improve the every community health and hygiene through practices. Approximately 120 members participated in the training program. The main topic of discussion in the meeting was:-

- Role and responsibilities of the JASC members
- Importance of water, health and hygiene
- Water bone disease, air bone disease
- Process for water preservation
- Government schemes

Result:-

- JASC members got clear understanding on role and responsibilities of the JASC.
- Understand on importance of water, health and hygiene
- Understand on cause of water and air bone diseases.
- Made clear understanding on process of water conservation.
- Got knowledge on different government schemes.

b) **Mass Communication activities on water and sanitation best practices, important events such as World Water day, etc at the village/panchayat level such wall paintings, nukkad natak etc:-** To sensitize the mass in the micro level few slogans developed on water environment and sanitations issue and it was painted in the community.

ACHIEVEMENTS AND CHALLENGES

- 50% group regularized and having their regular meeting.
- Awareness generated among community on child rights and child protection issues.
- Youths were got the skill on smart operating to enhance their livelihood support.
- To enhance livelihood opportunities a wide-ranging intervention of land development this includes capacity development in improved farming focusing on vegetables cultivation.
- As sustainability was a prerequisite of all the efforts toward greater production, the success of these improvements is expected to continue. SHGs gave women the opportunity to borrow money to engage in agricultural businesses for the first time, but also allowed them to increase their capacity to take an active political role in their communities.
- Both men and women became aware of their political as well as economic rights, and some became community leaders.
- Having witnessed the effectiveness of the innovations the project introduced, community members also began to take the initiative themselves to plan future endeavors.
- A further benefit of the villagers' improved economic status and opportunities was a significant reduction in migration for work.

Project – 3

Project Title	India Nepal Human Liberty Initiative
Project Coordinator	Sanjay Kumar
Funder/Support Agency	Geneva Global India
Starting date of the Project	April'2011

COVERAGE

District	Muzaffarpur
Block	Minapur
Panchayats	7
Villages	15
Population (Direct):	3,500
Population (Indirect):	17,500

BACKGROUND

Trafficking especially human trafficking is a curse for the civilized society. It is the trade of human beings for the purpose of commercial sexual exploitation or forced labor, illegal by the law. The situation is so intense that it can be termed as modern form of slavery.

In the state of Bihar commercial sex workers are found in good numbers as it is reported that 19 Red light areas are in existence throughout the state and Muzaffarpur district is one of them.

Muzaffarpur district is one of the oldest districts of Bihar and this district is well connected to the nation through rail route and roadways. Muzaffarpur is focal point, which connect north Bihar with the rest of Bihar. It is the entry point not only for across the nation but also for international level i.e. Nepal. Low land holding pattern, dependency on agriculture that too on monsoon, feudal pattern of land holding, lack of industrial activities in these region force the people to migrate to other places in search of job. Moreover, poverty also compels the families to migrate along with their children or forced to send their children outside their vicinity area in search of menial job. Recurring flood in the region also limits the livelihood opportunity and force poor people to migrate. Sometimes forceful migration also takes place as the intermediaries or brokers provide money to the parents in advance and make false commitments for their bright future. Muzaffarpur is the hub for commercial activities such as trading, so people come here in search of livelihood.

The overall context fairly indicates that Muzaffarpur is vulnerable for human trafficking. Poverty and lack of economic opportunity make women and children potential victims of traffickers. They are vulnerable to false promises of job opportunities in other places and sometimes other counties also. Many of those who accept these offers from what appear to be legitimate sources find themselves in situations where their documents are destroyed, they or their families threatened with harm, or they are bonded by a debt that they have no chance of repaying. While women and children are particularly vulnerable to trafficking for the sex trade, human trafficking is not limited to sexual exploitation. It also includes persons who are trafficked into 'forced' marriages or into bonded labor markets, such as sweet shops, agricultural plantations, or domestic service.

SCOPE OF THE PROJECT

As the issue of trafficking is getting alarming day by day, it needs an immediate attention to address through appropriate intervention at different points/levels. The project has strategic intervention at various levels – community level to make the community aware about the issue of human trafficking, its causes and consequences and how they could take joint

action against by establishing liaison with various authorities (Govt.) and PRIs/media to enact legal provision of law against the different agents involved in human trafficking. The Govt. officials from administration/police, PRIs, media would be sensitized through liaison/meeting/workshop status sharing about the issue which would result into joint collaboration and support to the project intervention. The community would be made aware about status of human trafficking and its consequences through various meeting/orientation/workshop/training.

GOAL

Ensuring dignified life to the rural marginalized community by capacitating them to combat with social evils i.e. human trafficking in a sustainable and proper manner.

OBJECTIVES:

- To make the community/CBOs aware about trafficking and its consequences
- To functionalize the Govt. authority/administration about human trafficking
- To provide livelihood development support

ACTIVITIES

Deployment of Project's Personnel: For proper execution of the project deployment of personnel is an essential step. In this connection advertisement was placed on mail/website for the post of project coordinator where as advertisement was displayed at block offices and other public places for the post of Field Worker. After getting the application, candidates got short listed on the basis of qualification, experience etc. When short listing process got completed; short listed candidates were informed about the interview dates. Before conduction of interview, an interview board was constituted at head office and district office level. The interview board finalized the questions for written test and group discussion. On the interview day firstly group discussion was held and followed by written test. In written test only those candidates got chance who competed the group discussion. Finally, personal interview was conducted and final selection was done.

Orientation of the project Personnel: A one day orientation programme was organized for the project personnel and it was attended by all staff. Through the orientation programme project's personnel got oriented about IDF, project concept & Philosophy and their role & responsibilities. The programme was facilitated by the Programme Manager.

Baseline establishment of the working villages:

A project base line was done in all the working villages to know the actual situation of the area. Before conducting base line a planning meeting was held of the project's staff. That meeting was attended by staff. In that meeting a check list got finalized for information collection. Apart from check list, team decided to use Focus Group Discussion as a PRA tool to collect the information. Through FGD data were collected. After data collection it got compiled, analyzed and final report was prepared on the basis of findings.



Project Launching Workshop / Symposium: A project launch workshop was organized in the block premises and attended by the different stakeholders along with different officials. The total number of the participants was 35. This workshop proved helpful to make clear understanding of the different stakeholders on the trafficking issues. They realized that it is in practice in different form in the working area also. To minimize it a general consensus

developed. This event also helped in establishing better coordination and cooperation among the different stakeholders.

Residential Training of Project Staff: A three days residential training was organized at district level for the project staff and it was attended by all staff. This training was focused on trafficking, its different forms, consequences, human rights, legalities, techniques and approaches of addressing this issue. They also got acquainted with the process of proper execution of the programme.

Finalization of Different Key Actors: Based on available information and interaction different key actors for the project at the community level got finalized. These were Non SHG, SHG, Youths, School Children, PRI members, Migrants etc. Altogether 3500 key actors got finalized. The key actors got sensitized and aware on the issue of trafficking through various programmes.

SHG Formation: The marginalized community basically who or their family members are migrants got organized in the form of Self Help Group. The basic purpose of organizing them was to sensitize and mobilize them about trafficking scenario in and around their localities. Apart from it they also got sensitized to opt for locally available livelihood options. Altogether 448 marginalized community members got organized in 28 groups.

Interface Meeting With PRI Representatives and Social / Opinion Leaders:

A one day interface meeting was organized for PRI representatives and social/opinion leaders. A total 34 participants attended that meeting. Before conducting meeting cordial relation was developed through regular interaction and inter personal contacts. In the meeting discussion was made on trafficking issues. During the discussion it was found that migration is very prominent. So PRI representatives were requested to ensure safe migration through registration of migrants at panchayat office and police station.

Orientation to PRI & Other Stakeholders: An orientation programme of different stakeholders was organized at block level and there were 31 participants in the programme. Before conducting the programme a meeting of project's staff was held and it was decided to orient the stakeholders on minimizing the trafficking in the locality. In the programme stakeholders got aware on the trafficking issues and its consequences. To minimize the trafficking in the locality stakeholders were asked to have list of migrants and their full details.

Orientation to Youths: Youth can play crucial role in minimizing the trafficking. Therefore two orientation programmes were organized for them and altogether 99 youths attended it. Before organizing this programme good rapport was established with some selected youths and they were aware on the issue. After their consultation it was found that other youth should also be sensitized on the issue. Thus these orientation programmes got organized. In the programme they got oriented on trafficking issues and to play active role in minimizing it.

Orientation to School Children:

One orientation programme was organized for school children. Altogether 38 students of class 8th participated in the programme. After monthly interaction with the students this programme was organized. In the programme they were oriented on child rights, issue of child labour, migration etc. they were asked to sensitize the other children on the issue in the vicinity.

Theme Camp: Theme camp was organized for youths, school children, migrants, SHG and Non SHG members. In the theme camp IEC materials were used to sensitize the audience. It proved helpful to deliver the message about the status of trafficking, its consequences and sincere effort to minimize the trafficking.

Training to Community Level Mentors: Two training programmes each one of two days were organized for community level mentors on trafficking issues, advocacy and counseling. Altogether 30 mentors participated in the training programmes. Before conduction of programme local people were contacted asked to suggest the name for mentoring. As per people's suggestion they were contacted and discussed them about the trafficking issues and their role in minimizing them. After getting their consent they were finalized as mentors and got invited to attend the training programme.



Training to SHG Members: Three days residential training programme was organized for SHG members. Altogether 30 members attended the training programme. The training programme was focused on group management, human trafficking and its consequences, social evils etc. In the training programme posters, Philip Chart and other visual aids were used to make it more effective. After the training programme participants seemed quite confident.



On Spot Training to the Migrants:

A total two training programmes on vegetable cultivation were organized for migrants. A total 104 migrants and member of marginalized community attended the training. Through these training programmes they were aware and motivated to opt vegetable cultivation as one of the income generation activity. These training programmes were imparted by the agriculture expert. In the course, on spot demonstration was done at field. This helped the participants to understand the things clearly. After training programme 25 members started the vegetable cultivation.

Training to the Migrants on Viable IGA: A three days residential training programme was organized for migrant and marginalized community members. This training was imparted by the agriculture experts. This training was given on goat rearing. Altogether 31 women participated the training programme.

Counseling Cum Health Camp: To provide proper guidance on trafficking issues, migration etc. one day counseling camp was organized. In this camp altogether 70 community members were counseled. Apart from counseling medical treatment was also provided to the children of migrants. In the counseling camp posters, Philip charts and visual aids were used.

Audio Visual Show: To aware the masses audio visual shows were organized in all the working areas. In this show documentary films on trafficking, migration etc were shown to the people. It helped in making clear understanding of the masses on the issues.

IEC Development: IEC were developed in form of Philip Chart, calendar, poster, hand bill etc. At first team members held the meeting and finalized the mater for each IEC. After finalizing the matter it was shared with other staff after including valuable suggestions it was given to the cartoonist. Cartoonist prepared it in the visual form and after its approval it got finally printed. All the IEC materials are quite informative and attractive and it is proving helpful in sensitizing the community and others.

Solidarity Event (Human Rights Day): Human rights day was observed as a solidarity event. In this programme different stakeholders i.e. PRI members, youth, school children, teachers etc participated. An easy competition was organized for the school children. Different stakeholders shared their views. Finally experts deliver their speeches on the issues and gave stress to ensure dignified life for all.



OUTPUT:

- All the stakeholders got listed
- 6 project personnel got trained on project concept & philosophy, programme execution and role & responsibility
- 60 PRI members & social leaders got sensitized on trafficking issues.
- 100 Youths were mobilized on trafficking issues.
- 38 School children got aware on child rights, child labour etc.
- 104 migrants and members of deprived section got trained on vegetable cultivation
- IEC materials were developed on human trafficking, child labour, social evils etc.

OUTCOMES

- Project personnel executing the programmes effectively.
- 25 women of deprived section started income generation activities.
- PRI members have started ensuring safe migration by registering migrants at panchayat office and police station
- School children have started to mobilize the child labour for schooling

ACHIEVEMENTS AND CHALLENGES

- 8 child labour were freed from child labour
- 5 migrants have opted vegetable cultivation as livelihood and their income slightly increased.
- 100 School children organized rally programme to sensitize the community on trafficking, child rights, education etc.

Case Story

1. TITLE: A MOVE TOWARDS POSITIVE CHANGE

Name: Smt.Meena Devi
Member of : Shivani Mahila Vikas Samiti (SHG)
Village: Chhitarpatti
P.O.: Chandparna
Block: Minapur
Distt.: Muzaffarpur



Chhitarpatti is one of the underdeveloped village of Minapur block in Muzaffarpur district. It is situated in the south west of block head quarter at the distance of 3 Kms. The population of this village is dominated by SCs and followed by OBCs. This village is bond to face flood every year and it paralyzes the lives of residents for one to two months. The major chunk of population having no land or very meager pieces of land and wage earning is the prime source of livelihood.

This situation compels them to migrate for livelihood. As they are unaware of safe migration so some of the families become victims of trafficking.

In the month of July'2011 women of unprivileged families got organized in the form of Self Help Group (SHG) namely Shivani Mahila Vikas Samiti and they got sensitized on the issues of safe migration, child labor, trafficking & its consequences etc. One of the member of the group namely Smt. Meena Devi came forth and took the responsibility to contact and aware the migrant families on safe migration with the help of other members. She convinced the other group members by saying that now time is very less as migration will start just after the Chhath Puja. She has just started to contact and convincing the migrant families for safe migration.

2. TITLE: ACTION OF PRI (Mukhiya) MEMBER

Name: Shri Ganesh Ram
Village: Nandana
Panchayat: Nandana
Block: Minapur
Distt.: Muzaffarpur



Nandana is one of the remotest village of Minapur block in Muzaffarpur district. It is situated in the north west at the distance of 15Kms from the block head quarter. This village looks like delta during rainy season as it is surrounded by chaur (low land) area. The basic services go paralyzed during flood days for one to two months. The population of this village is dominated by SCs and followed by OBCs. Agriculture is the prime source of livelihood for the villagers. Most of the SC's family members are daily laborers. As the flood is regular phenomenon for this village so migration is very prominent in this village.

Before INHLI project's initiation people were hardly aware about the safe migration. After project's inception apart from community members PRI representatives also got aware about trafficking, its consequences, importance of safe migration etc. Mr. Ganesh Ram, Mukhiya (Panchayat Head) of Nandana panchayat, use to attend meetings on regular basis. Through these meetings his understanding got developed on the trafficking issues and he decided to do some thing better for the villagers in his panchayat. In the meeting of executive committee he brought a resolution that every ward member ensure safer migration in their respective wards and registered migrants at panchayat office. So that it would be helpful and easier to take corrective measures during need. After discussion this was accepted by the members of executive committee (Ward Members). Now respective ward members have started taking care of that. As a result 65 migrants got registered in the panchayat office. When Mr. Ganesh Ram was asked how is felling now, he smiled and stated that abhi to shruat hai abhi bahot kuch karana baki hai. Hum logon ko lamba chalna hai aur is burai ko mitana hai. Hum thora bhi pa le ye to apne ko safal manenge.

Project - 4

Project Title:-	Rights Based Disaster Risk Reduction in North Bihar
Project Coordinator:	Wasi Md Alam
Funder/Support Agency:	Dan Church Aid, India
Starting date of the Project:	1 st Jan'2010

COVERAGE

District- 3	Muzaffarpur & North Bihar Districts
Block-1	Katra
Panchayats-2	Sonepur, Katra
Villages	10
Population (Direct)	3124
Population (Indirect)	22280

OBJECTIVES:

1. TO CREATE A STRONG CITIZEN'S NETWORK AT REGIONAL AND STATE LEVELS WHO PERPETUALLY FACE flood in north Bihar in next 3 years.
2. To sensitize policy makers, stakeholders and civil societies against the plight and devastation of flood and climate change in north Bihar with special reference to Dalit plights.
3. To advocate the issues of poor, marginalized and Dalit with special focus on Dalit women of flood prone areas.
4. To influence the planners and decision makers for flood friendly structures and infrastructures in the flood prone areas.
5. To organize and capacitate community (Dalit Women) in ten villages on DRR to improve their quality of life and replicate the same in other parts of flood prone areas in north Bihar.

GOAL

Capacitated Dalit communities have strength to reduce their vulnerabilities of disasters and hazards and live a dignified and better life in a sustainable manner and have voice for their rights and entitlements.

ACTIVITIES

SHG TRAININGS – THE SHG FORMATION WITH ITS FEMALE MEMBERS INVOLVING IN THE PROCESS OF SHG management has honed their skills in group dynamics by enlisting active participation which further has paved the way for increased participation. The SHG members were trained on developing Family utility kits containing dry rations, emergency medicines and equipments.

VDMC Training:-The VDMCs across the 10 intervened villages were oriented on roles & responsibilities, developing various task forces for information dissemination, health & first aid, search & rescue, relief & assistance. They were also equipped with emergency items such as life jacket, rescue kits, megaphones, tool kits etc.

Mock Drills- The community members of each of the intervened villages and the involvement of women & their active participation in the mock drill exercise in the village for better disaster preparedness in relation to first aid, search & rescue.

DCA Monitoring Visit (23rd-24th March, 11:- There was a monitoring visit with the purpose to monitor and follow-up on key objectives and related activities and its contribution to programme goal as well as discuss and identify areas of support. This was led by Mr. Mani

Kumar (Regional Prog. Officer-DRR, DCA) which involved meeting with key partner staffs and field team members as well as discussions with Village Disaster Management Committees (VDMC) and Village task forces, SHG members of Baradih & Sonepur village in Katra block.

Establishing Lok Sahayog Sthal (Community Support Centre) :The objective of LSS is to maximize the participation among the community members for common issues like- flood, flood preparedness, Livelihood promotions, and information dissemination and as resource center for the network partners and convergence with other programmes. It is a unique place where the participation among community is highest and a two-way communication is flowing with meaningful output to resolve the prime issues of Community Preparedness on flood and enhancing Livelihood opportunity for the community.

Capacity building of Project Staff on DRR & Climate Change- The project staff was provided with training in relation to Disaster Risk Reduction & climate change and the topics covered in this training were

- Disaster –Nature & Types
- Discussion on Pre, During & Post Disaster Scenario
- Social Exclusion;- Issues & Challenges
- Rapid Assessment Formats
- HAP standards on accountability & quality management
- Preparing Case Study
- Orientation on Panchayat Raj Institution
- Training on First Aid, Search & Rescue Techniques
- Climate change- Nature & causes

Participated in DCA SA Annual Partnership Meet (28th Feb, 11- 2nd Mar, 11):The Programme Manager & director participated in the meet, where there was immense information shared by speakers on Dalit- Rights & issues, Hugo Framework & Action, Domestic Workers- Issues & Challenges, Right To Food, Secular Spaces in South Asia, Political Space-Role of Civil Society, Post Tsunami-Social Equity Audit, FCRA, DCA global goals & advocacy activities, Public Space for Women, DRR-Prog. Goal & strategy, Humanitarian responses in DCA etc.

Exposure Trip – Exposure Trip of 30 VDMC members to Gorakhpur Environmental Action Group, Campereganj, UP- 17th Dec’11: The exposure visit involved an introduction to Disasters with focus on floods, roles & responsibilities of various task forces on DRR issues, alternative cropping techniques i.e. flood resistant as the community members suffer a huge loss in terms of crop damage due to floods & water logging. The variety and usage of medicinal plants were also discussed. This was followed by a visit around the campus to see vermin-compost pits, integrated model of poultry, fish pond & fruit plantation, medicinal plants. There was a visit to Mehdawal village to interact with their VDMC members, visit the village resource centre as well as interact with farmers involved in Flood Resistant Cropping and cropping in tune with the occurring climate change.

RBDRM programme Review (16th-19th Nov’11): A review team comprising of (DCA and partner) conducted a programme review to facilitates processes for reflexion, learning and discussion that ensures that all the project stakeholders agree to and take ownership of an argued fine-tuning to achieve the objectives of the project in future.

Capacity Building of Network Partners on DRR policies & Advocacy: The Mission DRR network partners across 8 districts of North Bihar were trained namely East Champaran, Darbhanga, Madhubani, Sitamarhi, Muzaffarpur, Saharsa, Madhepura & Supaul enhanced understanding of State Disaster Mitigation & management policy and understanding of the gaps in relation to the hardly functioning structural committees i.e. at State & District levels, minimal role of CSOs & community in District Plan, listing of disasters.

This has further provided a platform to the network partners to mobilize public opinion to the existing policy. Further increased knowledge of Network Partners on Standard operating procedure (SOP) of the Bihar Government for Flood Disaster Management in which details with respect to Preparedness, Response & Rehabilitation Strategy is drafted. They are further laced with the copies of the checklist of activities attached with the SOP in relation to Preparedness, Response & Rehabilitation. Thus, further dissemination of information to the masses in relation to the checklist & strategizing to voice their concerns as well as demanding for the same for the same will move the wheels in ensuring the rights & entitlements of the right holders.

The State Level Workshop on Policy Analysis and Advocacy on DRR which brought 61 participants (form varied CSOs in the state, activists, academicians, INGOs) under the same roof collectivizing to highlight various other disasters along with floods such as Fire, Earthquake, Cold Wave as well as issues of climate change through various presentations by core committee members of Mission DRR as well as Fr. Robert Athickal (Co-ordinator, Tarumitra) who spoke on issues in relation to climate crisis. This was followed by developing an action plan in relation to strengthening the early warning system inn the flood prone regions of North Bihar.

The activity was carried out by participants being provided with chits of paper to write on suggestions & recommendations on developing the early warning system.

The Action Plan thus developed at the end of the workshop included

Early Warning System – Action plan

1. Risk Knowledge

- Awareness raising (pamphlet, poster, street drama, video, folk song, radio jingle, news paper, wall painting, hording board, meeting/workshop etc..)
- PCVA
- Identification of warning stations
- Assessment of warning and danger level

2. Monitoring and Warning

- Identify existing monitoring stations
- Establishment of rainfall and water level stations
- Analysis of information/data (analysis of threshold rainfall for flash flood – 60 mm in one hr; 80 mm in 3 hr. ; 100 mm in 6 hr.; 120 mm in 12 hr. and 140 mm in 24 hr.)

3. Communication and dissemination

- Receiving and sending data/information
 - Establish operation center
 - Analyze, archive and disseminate information
 - Develop communication flow diagram
 - Identify an appropriate means of communication (Voice mail, text message, radio, TV, Warning signal, P/A system, CDMA, mega phone, siren)

4. Immediate response

- Community evacuation plan
- Identification of evacuation sites/route
- Pre positioning of search and rescue equipments/materials
- WASH kit
- Training of task forces
- Mock drill (simulation)
- Coordination with DDRC

ACHIEVEMENTS

- Organisation level Disaster Preparedness Plan prepared by network partners has ensured swifter communication flow by network partners in providing flood updates to & from the community and has been effective in developing the early warning system.
- Reduction in time taken for emergency response by Pre-positioning of emergency items at field level by network partners (e.g. rescue kit, Boats, life jackets etc.)
- Trained field staff on SOP-flood management, , exclusion issues, rapid assessment format has led to the community being informed about flood preparedness expected from DMD, Bihar , skilled in identifying excluded groups & conduct assessment Workshop on sharing preparedness measures on flood response in Bihar, 2011 by NGOs working in flood prone districts & DMD conducted by BIAG clubbed pre-positioned items & HR. Regular dialogues & lobbying with the DMD led to a committee being formed to spell out preparedness measures for Dalit tolas and the report of it is to be out in the coming months.
- Case Studies developed by partners to showcase best practices in the districts of North Bihar Usage of disseminated booklet on Disaster Mitigation & Management Policy as well SOP-Bihar on Flood management by network partners has led to pressure building on district & Block administration Inclusion of excluded groups (Dalits, minorities, widow, physically challenged, elderly in relief distributed as 11 FGDs with community in the intervened villages comprising a total of 331 participants (F-195, M-136) were organised to spread awareness in relation to the plights of the marginalized groups.
- Awareness generated amidst the community (total of 277 through SHG meetings & through FGDs a total of 331 participants has led to demand for relief by the dalits & the marginalized by organising dharna & in ensuring the beneficiary list prepared by PRIs had their names, also demanding health services.
- Community members have submitted application demanding for work under MNREGA
- Behavioural changes in Dalits & in terms of demanding from PRIs (services such as PDS, MNREGA (Rt. To work) & attitudinal change in PRIs to avoid neglecting dalits through Formation & strengthening of 20 SHGs in the villages intervened &
- 11 Village Disaster Management Committee formed in intervened village
- Active participation & involvement of SCs, EBCs and minorities women's in decision making in group meetings is also visible in ward & gram sabhas for they are more vocal with gained knowledge on govt. schemes. Representation of SCs, EBCs & minorities women in SHGs (71%, 21% & 8 % respectively) & VDMCs(59% , 24% & 7% respectively, others-11%).
- Information provided during community meetings have led to high raised Hand pumps & toilets being constructed in the villages.
- 563 families comprising a population of 3124 across 11 villages developed resilience in the wake of flood situation due to preparation of family survival kits & gained skills on administering first aid The 286 VDMC & task forces members in relation to info. Dissemination, Search & Rescue, Health & sanitation, Emergency response & assistance are effectively equipped with community contingency plan, rescue kit, life jacket, public address system. & boat.
- The 8 core partners of Mission DRR have developed better preparedness strategy due to sharing of the field level initiatives on institution building on DRR by IDF to network partners.

CASE STORY

Smile of Recovery

Name: Chuniya Devi
Husband's Name: Ganesh Majhi
Age: 30 yrs
Village: Deogan
Panchayat: Sonepur
Block: Katra
District: Muzaffarpur
State: Bihar



She stays in the village with her 6 yr old son Manish and her husband runs a small shop and barely makes ends meet for his family.

Like any other day she was to leave the house to collect fodder for her cattle, but since morning itself her 6 yr old son had already vomitted thrice but she thought to herself that he would be fine and asking him to rest she left the house. Her husband was out of village as he had moved to the district town in the pretext of purchasing items for his shop. By evening his condition worsened as he had vomitted another 5-6 times and was also suffering from diarrhoea. On receiving the news through the villagers of her son's condition having worsened she rushed home at once. She began crying uncontrollably on seeing her child's condition and her mind was filled with terrible thoughts. On hearing Chuniya Devi cry, women from the neighbourhood rushed to her house. On enquiring they learnt that her son was suffering from diarrhoea and thus had gone very weak.

It was then Chintu Devi belonging to the same Self Help Group (Chandni Mahila Samiti) reminded her that the rescue kit provided by IDF (Integrated Development Foundation) staff contained packets of ORS which could be used if a child was suffering from diarrhoea as it helps in stabilizing the excess water loss from the human body. Chuniya Devi too was reminded of the trainings that she had attended on First Aid. She at once rushed and collected two packets of ORS from Sunil Majhi (member-Village Disaster Management Committee) who was made incharge of the Rescue Kit.

She was assisted by the SHG members who boiled a litre of water and as soon as the water cooled she prepared the ORS solution and began giving it to her child. The child liked the taste of ORS solution and he drank up the entire glass, In the next 30 minutes he had another loose motion but she remembered that he had to be given ORS solution continually as it would make up for the water loss from the body, so she gave him the remaining one glass of the ORS solution.

By now it was 7 in the evening and she had to prepare supper for her child and herself but at the same time she was also aware that Manish required liquid food which could be easily digested. So she went on to prepare rice with more than usual water required for cooking it so it could have more liquid content, with it she also prepared mashed potatoes. In the process of boiling water for cooking rice she took out a litre of water for preparing ORS solution. She utilized the other packet of ORS to make the solution when the water cooled.

In the mean while Manish was trying to tell something, on moving nearer to him she learnt that he was feeling giddy and felt like vomiting, no sooner he vomitted near the bed. She caressed the child gently, cleaned up the area and then went on to wash her hand with

soap, after which she gave him the prepared ORS solution. Half an hour later when his condition became a bit stable, she fed the child with boiled rice solution and ate it herself too. Later, she also gave him the remaining glass of ORS solution after which he slept peacefully through the night & she kept stroking his hair gently and finally fell asleep herself too.

With the next morning her son was feeling a lot better, she put the water to boil in order to prepare rice so that she could feed him early. After getting fresh in the morning she noticed that though her son looked a bit lathargic but was continually breaking into laughter as he spoke with his friends. At the sight of this Chuniya Devi smiled to herself and thanked the IDF project staff who during their regular meetings had provided her with simple & correct information to handle the situation on her own. She also pledged to herself that she would share the knowledge & skill with all those who could be in need in her village.



Project – 5

Project Title:-	Promoting Capacitating Community on DRR, Climate Change Adaption for Sustainable Development in Muzaffarpur, Bihar.
Project Coordinator: -	Gaurav Ranjan
Funder/Support Agency	OXFAM INDIA \
Starting date of the Project:-	1 st of April 11

COVERAGE

District	01
Block	04
Panchayats	18
Villages	40
Population (Direct)	13350
Population (Indirect):-	58230

BACKGROUND

Muzaffarpur district is considered as one of the worst affected districts out of 19 districts of Bihar where flood comes on regular basis. The devastating effect of flood in 2004 changed the whole perspective and need of overall developmental program around Disaster Risk Reduction felt badly. IDF intervention around DRR first started in year 2002 when UNDP supported the organization to do relief operation with 600 families in one block namely Meenapur featured activities like Supplementary food distribution, health camps, veterinary camps. In the year 2004, IDF started its partnership with Oxfam Hong Kong during 2004 flood relief activities. Soon after the relief activities was over, the partnership between OHK and IDF got formalized for rehabilitation of the 2400 target families residing in 25 villages of the three most affected blocks namely Gaighat, Meenapur and Katra of Muzaffarpur district. Considering the regularity, vulnerability and devastation of flood in the area IDF adopted the strategy to involve and capacitate the community for long-term sustainability of the actions. Meanwhile another more ferocious flood in 2007 reinforced the need to intensify the community preparedness activities as the part of Disaster Risk Reduction objective with the involvement of local people. Since then IDF has been working on DRR issues in four blocks **Gaighat, Meenapur, Katra, and Aurai** of Muzaffarpur district.

So far, IDF focused on community organization, capacity building, livelihood, WATSAN and linkages with PRIs and government welfare schemes through the project. In the 2008 one significant initiative was also taken for the most marginalized groups residing in the 25 previous target villages comprised of women headed families, completely landless families, old aged households and families head having physical disabilities. This was mainly considered on the rehabilitation measures for the most vulnerable groups and focus was on food security, livelihood, WATSAN and linkage with the existing community structures such as Self Help Group (SHGs), Village Level Committee (VLC), Lok Sahyog Sthal(LSS) and Grain Bank etc. In the year 2009 – 10 onwards, IDF established new linkages with OXFAM INDIA and has been focussing on Capacitating Community on DRR, Climate Change Adaption for Sustainable Development.

SCOPE OF THE PROJECT

IDF has been working on DRR issues in four blocks namely Gaighat, Meenapur, Katra and Aurai of Muzaffarpur district covering 18 panchayats and 40 villages. The target Beneficiaries were mostly belonged to socially and economically poor communities having special focus on women headed families, landless, old aged households and families having physical disabilities

The potential stakeholders mainly belonged to the vulnerable communities, Panchayati raj representatives, government front line workers, civil society organizations and socially active bodies

The project was implemented with the direct interface and involvement of the above stakeholders. The SHGs represented the vulnerable communities, the VLC members have PRIs and government frontline workers were supporting the organizational activities in their respective jurisdictions like ASHA, ANMs, School Teachers, Block officials etc. Immunization, Pre and post natal care of pregnant women, health and hygiene issues were pertinent with ASHA and ANMs while infrastructure development, MNREGA and social security issues were linked with the PRs and block officials.

GOAL

Increase resilience of vulnerable women, men, and children living in four recurrent disaster prone states of Eastern India through promoting appropriate disaster risk reduction and adaptation measures, addressing policy implementation gaps in collaboration with state and non-state stakeholders

OBJECTIVES:

- To enhance coping capacities of community and its institutions, to withstand disaster risks due to climate related hazards through improved and sustained community level preparedness and adaptive measures. (Emergency Response Capacity Building)
- To enable vulnerable community especially the women and children living in flood prone areas to identify and manage public health risks
- To increase food and cash security through promotion & up- scaling of context specific (taking consideration the changing climate) agricultural package of practices with existing Farmer's Clubs.
- To build organizational preparedness capacity of IDF and its network partners with improved knowledge and skills for effective humanitarian response during disasters and enabling them to effectively take up emergent pro-people, pro-poor advocacy

ACTIVITIES

Organize village level CCP review and planning camps :- During reporting time altogether 40 CCP camps was organized and reviewed focusing flood at village level to draw a realistic plan for flood mitigation and this regard target community from 40 villages learnt CCP and involved actively in following process :-

- Situational analysis of the village
- Problem identification and prioritization
- Formulation of action plan
- Role and Responsibility with time line

The CCP exercise with community was very useful as it enhanced community understanding for developing response mechanism to minimize the risk of Disaster .

Structured Capacity Building programs for SHGs, VLCs and newly formed federations:-

During the period altogether 20 units of one-day, training program organized focusing to capacitate CBOs representatives on different government schemes and provisions and Federation Management. Capacity building programs for CBOs proved very effective and enlightened them towards accessing government schemes and provisions. Their understanding about bigger programs like MNREGA, NRHM, MID DAY MEAL, IWY, and RTI got enhanced resulting in range of entitlement accessed by community especially among women. During the period we captured several incidences of community lead initiatives to avail the government's schemes and other benefits.

Awareness campaign and demonstration on family survival kits at cluster level:-

During the period altogether 20 units of awareness, campaign on FUK done at cluster level in all the four working blocks. During the campaign, focus given on the technical aspects of preparing Family utility kit i.e. Packing, transportation, weight management. On the occasion participants were learnt the skill of proper packaging, transportation skills through demonstration. Earlier to this a list was prepare and given to the entire cluster mentioning important material with quantity to be kept in FUK. During demonstration process to purify water with alum and bleaching powder also done

Mock drill exercises on emergency preparedness and life saving skills:-

Mock drill carried out in 20 batches with the objective to make community better prepares to respond in emergencies.

This activity performed with all age group to ensure maximum participation. During the event participants were learnt the art of life saving skills. Trained volunteers from respective villages assigned to facilitate the event. During the event, exercises done on following topic:-

- Rescuing of drowning cases
- First aid t in the case of DROWNING, SNAKE BITE, FRACTURE
- Preparation of Emergency stretcher
- Use of bandage during cuts and wounds
- Artificial respiration
- Establishing of early warning chain

Training of volunteers on emergency response and management (First- aid, search & rescue, public health in emergencies, SPHERE standards):-4 units of training on emergency response and management were carried out in all the four working blocks where 135 volunteers participated. In the training following topics were covered:-

- Introduction of sphere guideline:
- Water, Sanitation and hygiene promotion:
- Food and Nutrition:
- Shelter and settlement:

For this activity volunteers were identified at village level in consultation with the village level committee for which the criteria of selection was that of including youth (18-35)yrs, permanently residing in the village, presence of additional knowledge & skills in relation to health, search & rescue etc



The entire training was demonstrative and participatory. Practical exercises on bone fracture and its treatment, artificial respiration,

handling of Water related emergencies and making of life jackets and temporary stretcher was undertaken for skill up gradation of the participants.

Support to Lok Sahyog Asthal (LSS) to act as Help Centers for NREGS and Safety Net schemes (6 nos.):

During reporting time all the Six LSS were strengthen and capacitated to provide a base to the community for accessing the information and services related to health & hygiene, flood preparedness, agricultural etc

In recent times, LSS made strong presence among government and non-government agencies as now government officials and



other stakeholders recognizing its importance and using this platform. Further LSS were also proved an effective tool to bridging gap between line up department and community in term of providing relevant information on the issue of DRR, HEALTH, and LIVELIHOOD.

Sanitary survey and water testing:-

Sanitary survey and water testing camps organized in all the four working blocks covering 143 Hand pumps that were checked through DEL AQUA KIT to measure water purity about PH value, chlorine, and Turbo TT. The entire process of water testing camps enhanced the community understanding about water purification measures and indicators of polluted water. The entire process of sanitary survey came up with following findings:-

- Hand pump is almost the only source of water in all the sampled villages but very poorly maintained at community end
- Cemented platform is found in very limited pocket and in most of places only bricks is placed
- Distance between hand pump to toilets is up to 2 feet in the case where toilet is in existence
- Disposal centre of waste water is very near to HP and in most of cases distance is one feet to two feet where as at some places it is 5 to six feet
- Soak pit near the HP is also very less though community had initiated to prepare Zero Cost Soak pit using local resources

Soon after sanitary survey the process of water testing begun in all the four working blocks covering 147-house hold. On the fixed date community told to bring out the water to get it checked. A team of trained person started the process of water testing using DEL AQUA KIT.

Earlier to this community were pre informed about the water testing camps. During the event, community made aware about the indicators of polluted water and their remedial measures. The entire process of water testing camps affected well among the target community and gave a broader idea about the water quality.



Raised and repairing of hand pumps:-



During the reporting time efforts were made to negotiate with PRI for installing HP as per our project mandate and this regard our VLCs took lead role in the entire process and finally 5 spot for raising and 1spot for repairing was done during the reporting time. The process of installation work started with the identification of Mason and quotation of material supply. This followed by procurement of materials and construction work. This year we specifically focused, those pockets where the safe drinking water facility was very bad. Since this year, we had the budget limitation so community also contributed in meeting cost. In Katra around 500 bricks were contributed by the community that worth around Rs 2,500. In the other

blocks, also contribution from community also been recorded.

Orientation with school children on key Public health messages on Wash:-To promote Public health messages among community on WASH altogether 30 units of orientation with school children was held at different places in which 878 school children and 24 teachers participated. The whole event was done in two phases where in Phase one-school children

were orientated on Public health messages and its application in their day-to-day life. In the second phase different competition in form of Essay and Quiz on above said messages were organized and successful students were rewarded. Before involving and strengthening school a meeting was conducted with all the project staff.

Input support to farmers for promotion/ replication of crop packages [Pre- flood paddy cultivation with SRI, System of Wheat Intensification (SWI) and vegetable cultivation] with 450 farmers:-

During the period, 400 farmers from all our working blocks motivated to initiate wheat/Paddy cultivation with Systematic Root Intensify techniques. The process began with the identification of farmers who opted for SRI for cultivating wheat/ paddy. After the identification process, the data bank was generated



and documented at block level. During activity implementation, our CLAs/BCs kept close eye on the entire process and made coordination among Krishi Salahkar/ SMS and Farmers. Apart from it during reporting period farmers also supported with agriculture tonic namely BOOM FLOWER that has proven very effective in enhancing productivity.

Training to the farmers on flood/ Climate change resilient cropping system:-

During reporting period farmers got capacitated through one day training program on flood/climate change resilient cropping systems with the objective to make them acquainted on different climate friendly cropping. The training was imparted in 5 batches covering 2 broader topics.

- SRI FARMING AND TECHNIQUES
- VERMIN COMPOSTING PREPARATION



Develop/upgrade ECP with partner organization:-

One day workshop was organized with the network partners to develop and upgrade OLDP for their respective organization with the objective to develop better understanding on response plan in emergencies. In the workshop representatives from seven organizations participated and acquainted with the techniques to develop OLDP. During the session participants were orientated on different process of Organization level Emergency Contingency Planning that are as follows :-

Contextual Analysis: - In the session participants learnt about contextual analysis on the basis of following information:-

- Context of District/Block in term of social/political/Economical
- Geographical details/ Spread out of organization
- Organizational Profile
- Disaster Response History of Organization
- Involvement of Other actor in the area

Scenario Setting: - In the session Participants were told to set a hypothetical scenario of disaster situation, keeping flood in mind and set a numerical figure of damage. In the session participant were told about the importance of scenario setting and its relevance in developing response plan.

Response plan: - In the session discussion were made on different aspects of Response plan i.e. Response strategy to Response Mechanism and finally Response plan. On the response strategy part, focus was given to draw strategy on the basis of past response intervention and present strength of the organization. In the Response mechanism part, focus was given to set different hierarchy in response plan. In the next session different templates related to data bank was shared and facilitation was given to fill it properly. At the end of the workshop draft format was given to the representatives of Partner organization to develop ECP/OLDP for their organization.

District level workshop with network partner, Line up department, Farmers, Academician to share and up scaling of good practice in context of DRR and CCA:

One district level dissemination workshop on sharing and scaling up DRR led good practices and invited PRIs/ government officials / academician/Media person to explore ways out for effective advocacy in context to DRR and CCA. In the event, we conducted one session on *Emergency Contingency Planning (ECP)*. In the event representatives of different govt. officials along with NGO partners, Media persons participated and got capacitated on different dimension of DRR. This event also gave an opportunity for participant to know how to develop an E.C.P.



Further, on the day, there was a presentation on IDF's initiatives on Disaster, which included Relief and Rehabilitation operation, as well as Community based preparation around Flood. The initiatives further included Need based Capacity-building programs on WASH, Search & Rescue, Community Contingency Planning, and Shelter Management. During the event, some successful model was also displayed of DRR led activities.

Gender perspective: - (participation) Oxfam India seeks to mainstream gender equality across all thematic portfolios that include DRR and CCA. IDF also have the similar understanding and that is why in our project design we focused mostly to increase effective representation of women in decision-making forums like in PRI and other government and non-government forums.

As IDF works closely with women SHGs, the women members had learnt the preparedness skill to tackle with disaster problems. Over the period women presence has been broadly seen in economic activities, add in their income thereby improve the quality of life. Secondly, the health education, cleanliness, and personal hygiene have also improved their health status. In the existing community grain bank that has been run by women only also minimized the starvation situation particularly during flood times.

One significant change that we witness over the period is regarding improved participation of women in agriculture activities as previously they always considered support hands to the male despite their intense involvement.

OUTPUT:

- A village wise team of trained cadre has developed in all the 40 villages to attain and serve victims in emergencies
- All 6 LSS are equipped to support community to access Govt. social security Schemes
- 40 villages have their own Community Contingency plan for addressing the issue of Flood in more organized way
- Better coordination developed with PRI/ line departments to address the felt need of the community in relation to DRR and CCA

- Strong CBOs created in 40 targeted villages to deal with DRR and other socio – economic issue
- Community learnt life saving skills in all the 40 targeted villages to ensure minimum casualty
- The community got familiar with the WASH good practice to ensure better hygiene in all targeted 40 villages
- The concept of WASH preparedness plan was shared and a common understanding was build aligning effective implementation of WASH ensuring participation of ASHA / ANGANWARI/ BLOCK HEALTH MANAGERS/PRI in all the four blocks
- The community understanding got enhanced on water purification through sanitary survey and water testing camps organized in all the four working blocks. The entire process of water testing camps enhanced the community understanding about water purification measures and indicators of polluted water
- 400 farmers across all the 40 targeted villages learnt the skill of SRI techniques
- Skills of 7 NGOs got enhanced on developing organizational level community contingency plan

OUTCOME:

- The members of existing farmers club adopted SRI/SWI method of cultivation and shown good result in the form of increase in productivity
- Adaptation of Innovative farming techniques by members of farmers club has paved the way to address issues of climate change
- Swasthya saheli emerged as a strong cadre as many of them holding important post in their respective areas and playing a crucial role by performing different roles like assisting ANM in pulse polio programs and others health drives, working as an ASHA, AWW/AWS.
- The knowledge level of community got enhanced through Awareness Building Campaign on WASH issues and all has been transformed in their day to day life resulting in some successful models
- DRR led activities have been brought out to the gram sabhas and expenditure were made in the construction of bridges, Raising of platforms, improving drainage systems and other earthen work.
- The understanding of community about government programs and scheme got enhanced resulting in range of entitlement accessed by community especially among women
- Support of line up department/ PRI in CCP implementation in 40 villages has been ensured through completion of many DRR activities through gram sabha
- A book has been published and released in the name of “PAIGAM” covering grass root good practices related to DRR and CCA. The book show casing the joint initiative of community /NGO/INGO led work from the mouth of community.

ACHIEVEMENT:

- A book has been published and released in the name of “PAIGAM” covering grass root good practices related to DRR and CCA. The book show casing the joint initiative of community /NGO/INGO led work from the mouth of community. The “PAIGAM “got appreciation from all round the corner that includes media/ masses

CHALLENGES:

- WEAK OR LEAST PRESENCE OF DISASTER DEPARTMENT AT BLOCK AND VILLAGE LEVEL
- No concrete plan of action to address DRR issues at government end
- Huge migration of youths during and after flood days

- Delay start of Project created problems in maintaining time schedule
- Lack of self motivated and committed youths to take up voluntary work
- The knowledge & skill base of most of the ASHA/ANM members is relatively low which poses a problem in getting desired outcome.
- inadequate staffing at government ends also limited the desire outcomes
- VLHSC under NRHM is not formed at many places affecting implementation of WASH related activities. Further the program is badly misinterpreted and mishandled at policy level
- Total Sanitation Campaign proved to be a big failure due to lack of planning and insufficient funds
- In spite of good result SRI/SWI yet to get acceptance at mass level due to ineffective implementation of government programs
- No directives from state to district and districts to block about disaster planning and management
- Disaster crisis and management is least prioritize as compare to Health and Education
- Commitment of people's organization to evolve volunteerism process in DRR initiative is very minimal

LESSON LEARNT:

- Community Contingency plan has help the community to view the response plan and its relevance in DRR resulted in better preparedness to deal emergency situation
- Involvement of other stakeholder such as PRI/Health workers in CCP camps is much more required for broader impacts.
- Support of P.R.I. representatives in the work of advocacy, relief operations, mobilizing resources for flood victims is largely required from Government.
- Due to lack of productive populace DRR led initiatives keeps on hold
- Centres like Lok Sahyog Asthal could easily be develop as a resource centre and forge linkages with government department to meet project's objective
- Regular and intensive follow up plan is required at village level for proper implementation of WASH Plan
- Government led committees should be immensely monitored by their higher authority in accordance to assess their work
- Ensuring Change in behavioural practice of community is not one day episode as it needs concentrated plan of action with required assistance
- Government driven programs coming as an opportunity for other stake holders i.e. NGO to work for the same cause
- SRI cropping appear as boon for those who intend to work hard to get desire results
- Farmers should be more meticulous in planning i.e. field preparation, seeds selection before initiating farming to get good results
- Micro level initiatives has more retention value in promotion of climate resilience cropping practice

Case Story

1. Name: Reshma Devi
Husband: Late Saryu Mandal
Village /Post: Jaya
Panchayat: Loma
Block: Gaighat

This story is of a widow lady who raised her voice against the corrupt system and fought hard to get her entitlement. Coming from a very poor family Reshma Devi is a wage labor and a group member of Ankancha Mahila Samiti, in the village Jaya.

Being a wage labor, Reshma Devi got the work under MNREGA program and worked for around hundred days but when time came for payment she was misguided by the Rozgar Sewak that the fund has not come and the process might get prolonged. In the month of September 2011 Reshma Devi participated in CBOs training organized by IDF and learnt so many things about different government Schemes and Provisions included the provisions under RTI. In the training, she also got familiar about the MNREGA programs and the provisions of funds come in advance. After the training, Reshma Devi immediately discussed the matter with other women whose payment was also stuck at panchayat. Soon a discussion was made commonly by the members to fill an application under RTI to know the actual scene and a public petition was given at BDO office. This incident soon impacted in the form of threatening by the so called Dabangs for withdrawal of the application. The process of threatening continued for about three to four days but all the members showed great courage and again moved to block office and pressurized the BDO and MNREGA Program officer to take necessary action otherwise they will go to District in a Janta Darbar. The pressure worked well as BDO immediately ordered Program Officer to settle all the dues amount of concerning applicant and within a week payment was made available to all applicants. After the payment all women met the local CLA and shown gratitude to IDF for generating awareness amidst them. As per Reshma Devi “**humlog ko agar parsikshan mai yeh bat nahi pata chalta to hum log ka paisa mahino latke rahta aur hum pachaso mahila ka paisa rozgar sevaka rok leta.**”



2. Name: Satya narayan choudharay
Father: Late Ram Punit Choudharay
Village/Post: Dumri
Panchayat: Changel
Block: Katra

Satnarayan Choudhary, Aged 52 is living in a remote village namely Dumri of Katra with his family. Geographically Dumri village is situated between two rivers Bagmati and Lakhandehi that always creates the fear of flooding every year and under such circumstances agriculture become a big challenge here. As a mitigating measure IDF promoted few models like SRI/SWI, Vermin compost pit, multiple cropping e.t.c and this regard capacity building exercises conducted here on regular basis. Satendra Choudharay also got an opportunity to be part of such event and participated in a training program on vermin composting. During the training he learnt the process of making vermin compost. In the training, he also learnt that Government is also giving support to those farmers who willing to initiate vermin compost pit. Soon after training Satnarayan choudhary applied for the scheme under **JAIVIK PROTSAHAN YOJNA** and consulted concerning S.M.S for further action. After the marathon one month, continuous effort satnarayan choudhary got the scheme from block and initiated 4 pits vermin composting unit. Under the scheme, he supported with Rs 1500 cash, 24 K.G of worm and tarpaulin pit.

Presently satnarayan choudhary is not only producing vermin compost but also facilitating others to avail government scheme as he properly guiding others. During this quarter, 10 farmers from different parts of Katra had applied for schemes and likely to get it. When we contacted Mr. Choudhary and asked about the recent happening he proudly state that the concept of vermin compost pit not only give us an alternative option ahead of chemical fertilizers but also lessen the dependency on Urea, DAP. He further explained “*Ab hum log pura man bana liye hai ki kehti mei jyada se jyada jaiwik ka upyog karege aur rasayanik khad ka upyog kam kare gai aur is disha main logo ko jagruk karege.*”



Project - 6

Name of Project	PROMOTING DISASTER RISK REDUCTION IN MULTI- HAZARD PRONE DISTRICT, PATNA, BIHAR
Name of the Partner	Integrated Development Foundation
Project location and coverage details	No. of Schools: 14 District:- Patna
Reporting period covered	15th August'2011 – 31st March'2012

BACKGROUND

Natural hazards are not occasional phenomena with unfortunate consequences. Natural hazards are natural events that threaten lives, property, and other assets. They are related to weather patterns or physical characteristics of a specific geographic territory and often, they can be predicted. We need to know and understand the risks in our natural environment and take sensible and feasible precautions to prevent natural hazards from becoming disasters or, at minimum, to mitigate the impact of disasters when they occur.

Basic education and disaster prevention and preparedness go hand in hand. Families trust schools to keep their children safe during the day. Thanks to the efforts of millions of teachers, principals, and other education staff, schools are usually safe havens for children.

Personnel and children in every school should be aware of the dangers that threaten their lives and be prepared to take appropriate action in the event of an imminent or actual disaster. Teachers and staff must know how to protect their students during an emergency and return them home safely. Knowing what to do when faced with a disaster can be the difference between calm and chaos, between courage and fear, between life and death. Schools and pre-schools need to be ready to handle emergencies, large and small, to keep children and staff out of harm's way and ready to learn and teach.

Disasters can all be mitigated with knowledge and planning, structural and non-structural protection measures, disaster risk reduction and disaster preparedness activities.

RATIONALE:

Flood in Bihar is so common that when we think of disaster; flood comes in our mind. There have been so many floods in the past; therefore the focus of disaster mitigation has been concentrated only to flood. Unfortunately most of us forget that Bihar lies in the high to very high earthquake zone as well. Bihar has witnessed devastating earthquakes in the year 1934 and 1987 but unfortunately it is hardly in our memory.

Almost all the disaster risk reduction interventions are with being implemented with adults as active participants; children are left out. Globally this has been proved that children and women could be instrumental in implementation of DRR and act as one of the most effective links in the entire process.

Education and knowledge awareness are critical to building the ability to reduce losses from disasters, as well as the capacity to respond to and recover effectively from extreme natural events. It has been an established fact that integrating DRR into the education system is essential; there have been several initiatives to mainstream DRR into school education. Disaster management has been included in the school curriculum by ICSE, CBSC as well state educational boards. The mainstreaming of DRR in schools will ensure that DRR knowledge and messages would reach into every home and community and that learning is sustained into future generations.

PROJECT LOCATION, COVERAGE AND BENEFICIARIES DETAILS:

District:	Patna
No. of Government Schools:	7
No. of Private Schools:	7

Beneficiaries Details:

Students	8500
Teaching/Non teaching staff	500
Parents	8500
Other Stakeholders	BSDMA, DDMA, IRCS, BEP, DM, HRD-Bihar

OBJECTIVES:

1. To save lives and prevent injuries to school children, teachers and other staff by training, awareness generation activities and school safety initiatives.
2. To make the schools a secure place against disasters through risk reduction measures
3. To reduce underlying risk (both structural and non structural) by conducting Hazard, Risk and Vulnerability Assessment (HRVA) and adopting appropriate measures through school disaster management plan.
4. To prevent interruption of education by putting in place appropriate measures.
5. To promote disaster risk reduction through co-curricular activities in schools acknowledging that children in schools need to develop "survival life skills" first, along with "academic inputs".

ACHIEVEMENTS: (AGAINST OUTCOMES & OUTPUTS)

(a) Expected Outcomes

Vibrant and functional School Disaster management committee in place.

(b) Outputs Of The Program:

- Formed and activated 14 School Disaster Management Committees in 14 government & private schools for the first time in urban areas of Patna.
- More than 400 students and around 30 focal teachers act as core members of their respective SDMCs leading around 8500 students as active member of SDMC and DRR agents in the schools and at homes.
- Awareness Generated amidst students, teachers & Parents in relation to Disaster and ways to reduce risks in schools & their work place in case of earthquake & Fire
- Development of school evacuation plan in 14 intervened schools to minimize risks in the awake of disasters

ACTIVITIES:

1. Formation and training of 14 School Disaster Management Committee

The school guides involved in formation of SDMC (in between 15.11.11 & 16.01.12) comprising of 30 members in each of the 14 intervened schools (majorly involving students of Standard VIII, IX, XI & 2 focal teachers) through orientation programmes on Disaster-nature & Types and Disaster preparedness.

The membership to this committee has been voluntary in nature so as to involve students



based on their keenness. The training of SDMC members comprised of

- Spelling out their roles & responsibilities,
- Do's & Don'ts on Fire & Earthquake (**Annexure 1 & 2**)
- First Aid,
- Search & Rescue
- Hazard, Risk & Vulnerability assessment
- School Safety Plan

2. Training Of 87 Students And Teachers On Preparing School Evacuation Plan, Emergency Response And Preparing Disaster Management Plan For The School.

The training exercises were carried out to build capacities of teachers & students (in between 16.11.11 & 20.01.12) in developing school specific evacuation plans through illustration of the school premises & chalking out an evacuation route to identify safety locations. The training imparted on development of Disaster Management Plan in all the 14 schools intervened led to a number of exercises in developing the school specific action plans based on the analysis of HRVA (Structural & Non-structural risks) conducted as well as dovetailing responsibilities amidst the SDMC members. The training imparted also included identification of functions of various task forces formed i.e. before, during (response mechanisms) & after disaster.



Expected Outcomes

1. Risk faced by children and teachers identified and incorporated in plan.

Outputs Of The Programme:

- School specific safety plan of 14 schools have been made and ready to use by SDMCs and School administration to mitigate the Structural & Non Structural risks.
- The children, teachers and project staff together conducted HRVA both Structural & non-structural for the first time in their schools and acting to mitigate it through various steps suggested by the concerned SDMCs after the HRVA exercise

ACTIVITIES:

Conduct an assessment of schools on "Safety and Preparedness."

The assessment of the 14 intervened schools on safety & preparedness was carried out by Mr. T N Pratap (Fire Safety Expert & Member-National Safety Council) in coordination with SDMC members to evaluate the existing fire safety scenario in each school.

1504 Students & teachers of the intervened schools have been trained on the types of fire and ways to extinguish them based on their typology, mock drills were conducted in each school to strengthen the skill set of students on ways to extinguish the fire based on their typology.



Conduct Hazard, Risk and Vulnerability Assessment (HRVA) in each school.

The HRVA exercise was conducted in the 14 intervened schools (in between 15.11.11 & 21.01.12) by the students, teachers with facilitation from the project staff to identify the hazard posed by buildings & status of roads surrounding the school, WASH issues within & school periphery.



Prepare School Safety Plan & its documentation in 14 schools

The school safety plan was developed by the students, teachers with facilitation from the project staff & hired consultant in between 1st to 22nd March'2012, for the 14 intervened schools including development of school specific evacuation route, identifying risk both structural & non-structural, dovetailing an action plan based on the assessment, listing of roles & responsibilities of SDMC members & Task force, grouping of emergency contact numbers, developing evacuation map etc.

The school specific safety plan of the 14 intervened schools has been documented compiling all the exercises conducted for each school in order to develop the plan such as Structural/ Non-structural assessment, mapping of evacuation route, emergency directory development, roles & responsibilities of SDMC, Task forces (before, during and after disaster), detailed action plan to be carried out by each school.



School Safety plan sharing meetings with focal teachers, students and other stakeholders.

The sharing meeting was conducted on 22nd March'2012 at Indian Red Cross Society, Patna with representatives from across 14 intervened schools comprising of SDMC members (students and teachers).

The sharing included listing the fundamentals of each school specific safety plan by their representatives, wherein they discussed on the action plan developed, based on the assessment conducted.

Expected Outcomes

1. Measures are taken to build knowledge and address underlying risks so as to create safer and more resilient conditions for children.
2. Safety audit mechanism developed and practiced.

Outputs Of The Program:

- Non-structural problems have been identified in 14 project intervened schools & mitigation plan developed thereby.
- 14 schools are equipped with basic school disaster preparedness equipments such as first aid kit, public address systems

Activities:

Conduct Assessment To Identify Non-Structural Problems Existing In The School Premises & Develop Action Plan



The survey format was developed and survey **conducted in between 11.11.11 and 28.02.12** in the 14 intervened schools by SDMC members with support from project staff in order to identify non-structural problems related to fastening of cupboards, almirah, wall hangings, electric items, other related risks in the awake of an earthquake & fire, as major damage & accidents are caused due to the non-structural items.

Support to schools in non- structural mitigation activities

The intervened schools have been supported under the programme through provision of L-shaped hooks, screws, screw driver, hammer, to fasten the furniture & equipments to the wall to minimize the risk of its falling and thus reducing the chance of an accident caused by its falling in the awake of an earthquake situation. They were also provided with 10 m rope & bamboo stick in development of temporary stretcher for the purpose of safe evacuation.

Equip schools with basic School Disaster Preparedness Equipments

The intervened schools have been equipped with First Aid kit (**Annexure 3**) for utilization in the awake of emergency before medical help arrives. They have been provided with public address systems to practice information dissemination during mock drill on disaster preparedness as well as display techniques of administering first aid.(for cuts, burns, fracture, CPR).

Prepare A Standard Checklist To Assess The Existing Risks In The School Buildings (Structural And Non-Structural Risks) & Develop Action Plan

A standard checklist has been developed keeping in mind the structural and non structural risk in the intervened schools which comprises a list of items (**attached in annexure 4**). The level of risks has been marked on a scale 1 to 9 to portray the level of risk the particular item poses. On the basis of the assessment report a detailed action plan has been developed.



Training of school Disaster management committee on safety audit

The SDMC members have been trained by the project team & Mr. T N Pratap (Fire Safety Expert & member-National safety council) on safety audit, in order to assess high risk zones in the school and requirement of fire safety equipments as per the specific need of the 14 schools intervened. The roles & responsibilities of the SDMC members were discussed and enlisted for the process of safety audit to be conducted.

Routine checks to ensure schools adhere to minimum standards and safety measures

The school guides were involved on an ongoing basis along with members of the School Disaster Management committee in conducting routine checks in the intervened schools to ensure the adherence of safety measures such as proper positioning of the first aid kit, public address system, display of emergency contact numbers, evacuation route etc.

Develop system for periodic maintenance of school facilities and resources (fire safety equipments, first aid kits etc).

The periodic maintenance of the school facilities & resources has been inbuilt in the roles & responsibility of the School Disaster Management Committee and enlisted in the School safety plan, the maintenance cost for the facilities (fire safety equipments, first aid kits etc) is to be met by the school untied fund of the intervened schools as per decision taken by the SDMC of the intervened schools.

Expected Outcomes

Emergency planning, preparedness, early warning and response is strengthened at school & district levels.

Outputs Of The Programme:

- More than 400 core members and around 8500 general members of SDMCs along with more than 30 focal teachers of 14 schools have capacitated by getting the training on First Aid, Fire safety, Search & Rescue, Evacuation route, mock drill etc.
- Core Members of SDMCs from 14 schools capacitated on media by getting the training on child reporter. Child reporters from 14 schools are now making the news on hazards around their schools and neighbourhood and send us to publish in the local news papers.
- By this project not only 8500 students and more than 500 teaching and non teaching staff have been benefitted but also 8500 households and neighbourhood has been benefitted.

Activities:

Awareness building on local hazards and risk reduction through various methods i.e. discussions, posters, street play and demonstration.

The children and teachers of the intervened schools have been oriented through group discussions on Disaster-Nature & Types, history of disasters in India & Bihar, the risks & vulnerability of Patna district in case an earthquake strikes as Patna falls in seismic zone IV of the earthquake map thus corresponding to high damage, level of preparedness of individual, family & at school level in a disaster situation. Further awareness generated through poster making competition which was held in the 14 intervened schools for children to showcase their creativity in depicting disaster scenario incase of fire, earthquake & flood.

901 children across the 14 intervened schools participated in drawing, essay and quiz competitions which were organized in between 17.10.11 – 17.03.12 in the intervened schools which has assisted them to increase their awareness on disaster preparedness issues and learn about safety measures in the awake of a disaster. They have been oriented on Do's & Don'ts in case of fire & earthquake and provided with pamphlets developed on the same and were asked to use the same checklist to enhance safety measures at their family & neighbourhood level.



Over 3000 people developed awareness in relation to disaster risk reduction through 6 street plays organized by a theatre group



(Nav Jagriti Kala Manch) comprising of 8 members in between 24th -26th March'2012 in various locations such as Children Park, Gandhi Maidan, Maurya Complex, Bus Stand, Mithapur, Kumhrar Park, Lohia Nagar children Park & nearby Botanical Garden. The process also involved filling up of questionnaires (individuals were selected randomly) to assess the awareness level on earthquake, fire & other hazards.

Organize meetings with service providers like police, civil defense, fire stations, medical and other emergency service providers like NDRF etc.

Meeting was conducted of the SDMCs with the service providers **on 22nd March 2012**, which have assisted them in building the emergency directory as well as understands their roles when a disaster strikes. This also helped the students in understanding about their own roles and its vitality in ensuring better preparedness at the school level as the students themselves would be the first responders.

Skill training of children as child reporters & meeting with print media

Selected children of the intervened schools were trained on 18th January'2012 as child reporters and have been actively involved in developing articles on hazards around their schools and neighbourhood and have sent us to publish in the local news papers, as well as to gather updates on any disaster striking the nation/world. The reports generated would help them sensitize the larger masses as to the high amount of damage caused due to under/ no preparedness level of the affected people/communities.



Expected Outcomes:

- Schools are equipped with disaster preparedness plans and basic school disaster preparedness equipments

Outputs Of The Program:

- Mock-drills are conducted in all the 14 intervened schools as part of regular co-curricular activity in schools in participation with children and teachers.
- SDMC meetings are conducted on a regular basis to implement the school safety plan
- The SDMC members are involved in routine check of the first aid kits & fire safety equipments.

Activities:

Mock- drill exercises involving teachers together with children

Mock drill exercises have been conducted along with teachers & children on a fortnightly basis on how to administer first aid, search & rescue, earth quake drills (Drop, cover & hold exercise), fire safety drills so as to be better prepared in case a disaster strikes.



Training of students and teachers on First-aid, fire safety, other response skills as appropriate (eg. light search and rescue, evacuation and emergency shelter creation).

Representatives from the 14 intervened schools comprising a total of 137 (113 students + 24 teachers) have been trained as Master Trainer by 09 Bn NDRF personnel under the leadership of Mr S C Guleria, Commandant, 09 Bn NDRF. The 3 days extensive training on school safety dealt with the topics mentioned below:-

- Disaster Management in INDIA
- Earthquake: Precaution & Safety in School
- Vital Signs
- BP/Pulse Measurement
- DM Planning at



School

- School Preparedness
- Steps Towards School Safety
- Drill on Earthquake & Hazard Hunt
- CPR Technique
- FBAO
- Demo on Fire Fighting & Evacuation Drill
- Safety Assessment of school
- Stabilizing of patient
- Dressing & Bandage
- Splinting
- Lifting & moving



Develop and monitor family preparedness checklist.

The family preparedness checklist was developed (**attached in Annexure 5**) and provided to all students of the 14 intervened schools to assess preparedness level in their homes in relation to earthquake & fire safety which has become eye openers for children & parents. Thereby, led to pressure building on home fronts for initiating correctional measures to be better prepared in awake of disaster situation.



Organize quiz competitions, essay/ slogan writing, drawing competitions, rally etc.

The quiz competitions were organized in the intervened schools wherein students were asked a set of question in relation to disaster & disaster preparedness on which they had been oriented & trained earlier, the purpose being to assess the retention of information by the participants as well as revision and reflection on the same.

The essay/ slogan writing competition organized amidst the school students saw a number of students participating and sharing their opinion on disaster issues.

The energy of school students is well depicted in what Ankita Kumari Sinduriya (Class IX B) of Rabindra Balika Vidhyalay writes in her essay ...

*“Chattanon ko hila de, use toofan kahte hain,
Toofanon se jo takkar le, use insaan kahte hain”.*

The vitality of disaster preparedness is visible in what Shantanu Bhardawaj (class IX B) of K B Sahay Government High School has to say

**“KOI AAPDA NAHI HAI BHARI,
JAB HO POORI TAIYYARI”**

Monika (Class IX C) of St. Michael’s High School sends a strong message to one and all by her words.....

“Safety initiatives must be taken by every individual as the future of our nation is in our hands. Starting this from the school level has its own significance in dealing with the disasters that occurs without giving a notice. The key safety measures in my opinion are wisdom, courage & presence of mind.

The painting competition organized in the intervened schools saw a variety of thoughts sketched beautifully by the students, below on one hand Nishita Kumari (Class VIII C) of Rabindra Balika Girls high school depicts the various types of disaster and on the other hand Vivek Vatsalya (Class VII A) of St. Michael’s High school depicts hope for mankind in the awake of disaster.



A rally was organized on the 22nd March’12 on the occasion of Bihar Diwas to spread mass awareness on disaster preparedness wherein students & teachers from across 14 project intervened schools participated by shouting slogans & its display on placards which the students themselves had prepared for the occasion.



OVERALL IMPACT OF THE CBDRR PROGRAMME:

- The approved project by BEPC now well recognized by SDMA and DDMA
- After the successful implementation of the project demands for such projects are coming from various schools to run similar type of projects in their schools too.
- More than 400 core members and around 8500 general members of SDMCs along with more than 30 focal teachers of 14 schools have capacitated by getting the training on First Aid, Fire, Search & Rescue, Evacuation route, mock drill etc.
- Core Members of SDMCs from 14 schools capacitated on media by getting the training on child reporter. Child reporters from 14 schools are now making the news on hazards around their schools and neighbourhood and send us to publish in the local news papers.

- By this project not only 8500 students and more than 500 teaching and non teaching staff have been benefitted but also 8500 households and neighbourhood has been benefitted.
- 137 (123 students + 14 teachers) across 14 intervened schools have become Master Trainers on school safety with training from personnel of 9 Bn NDRF
- 14 schools of Patna are now safer schools for children and teachers.

LESSONS LEARNT:

- Merging of activities & events whenever possible with school specific activity calendar
- Yearly calendar of activities & events to be shared with the intervened schools
- The need of such type project is more in government school due to high acceptance of this project by teachers and students.
- The government school are more vulnerable compare to private schools on earthquake and fire as their buildings are much older.
- The knowledge of students on this topic of government schools is less.
- Fire is never taken as a serious topic in schools in general and in Government school in particular.
- The knowledge about untied funds could be discussed and mobilized for structural & non structural risk mitigation in government schools.
- DDMA's and SDMA's participation linkage in the program is highly sought.

CHALLENGES FACED:

- Approval for implementing school safety programme in schools from the principals.
- Acceptance of the project in the school in the initial phase
- Time management for organizing intra and inter-school activities & events due to clash of planned school activities
- Limited knowledge & experience on school safety of the project staff in the initial phase

NEWS CLIPPINGS



Project - 7

Project Title	PAHEL: Towards Women's Empowerment
Project Coordinator	Md. Shakil Anwar
Funder/Support Agency	CEDPA INDIA, Bihar
Starting date of the Project	November'2011

COVERAGE

District	Muzaffarpur
Block	Minapur & Gaighat
Panchayats	Minapur: 28 Gaighat: 23 = 51
Villages	Minapur: 151 Gaighat : 84 = 235
Population (Direct):	463 Elected Women Representatives (EWRs)
Population (Indirect):	3,57,000

BACKGROUND

Bihar being very poor in social developmental indicators had always attracted the attentions of policy makers and development oriented leaders, peoples and organizations both INGOs & NGOs. The efforts for improving indicators particularly related to health, population and development had been full of challenges. With a population of around 83 millions, Bihar fared very poorly on almost every demographic indicator compared to other states in the country, often at the bottom ranking.

A number of factors played role in the low status of health in Bihar. To improve the health situation in India including Bihar, a dynamic programme called – National Rural Health Mission (NRHM) was launched in 2005. In NRHM, thrust was given to provide effective health care to the rural population, especially the disadvantaged groups including women and children, by improving access to health services, enabling community ownership and demand for services, strengthening public health systems for efficient service delivery, enhancing equity and accountability and promoting decentralization.

For utilizing the scope of enabling community ownership, there was a felt need of building capacities of community and local self-government. CEDPA India with the support of The David and Lucile Packard Foundation through PAHEL project seeks to improve the reproductive health outcomes of women and children in Bihar by enhancing the leadership skills and competencies of Elected Panchayati Raj female representatives (EWR) of different tiers by joining hands with NGOs. In Muzaffarpur district Integrated Development Foundation (IDF) got an opportunity to implement PAHEL project in Minapur and Gaighat blocks with the support of CEDPA India. The project is focusing on capacity building of Elected Women Representatives (EWRs) of all three tiers Panchayati Raj institution and their role would be to work as the link between the community and the service providers by playing the role of the facilitator for health and FP/RH services in particular. It is believed that they would not only result in effective implementation of FP/RH programmes but also ensure sustainability for a longer term.

SCOPE OF THE PROJECT

The National Rural Health Mission has been launched with the focus of ensuring better health facilities & services so that health indicators can be improved. Though changes have been noticed but still a lot has to be done to get the desired results. There are some gaps at community and service provider level.

Now, it is time to address these gaps and focus on the leadership potential. The proposed project aims at capacity building of the leaders / EWRs of different tiers for increased effectiveness of population and developed interventions especially with regard to FP/RH. Apart from capacity building other adopted strategies were:

- Mobilization & Sensitization
- Advocacy and
- Convergence

GOAL

To strengthen the voice, participation, leadership and influence of Elected Women Representatives (EWRs) in decision making in panchayats to bring about social change in areas that affect women particularly reproductive health/family planning (FP/RH) and girls education.

OBJECTIVES:

- Strengthening leadership quality of Elected Women Representatives (EWRs) to improve Panchayats Accountability in Health.
- To ensure health services / facilities for women and children with the facilitation of capacitated EWRs.

ACTIVITIES

Deployment Of Project' S Staff: For programme execution deployment of staff is an essential step. In this connection advertisement was placed on mail/website for the post of project coordinator where as advertisement was displayed at block offices and other public places for the post of Block Officer and Field Animator. After getting the application candidates got short listed on the basis of qualification, experience etc. When short listing process got completed; short listed candidates were informed about the interview dates. Before conduction of interview, an interview board was constituted at head office and district office level. The interview board finalized the questions for written test and group discussion. On the interview day firstly group discussion was held and followed by written test. In written test only those candidates got chance that completed the group discussion. Finally personal interview was conducted and final selection was done. The staff details are:

Training Of Project's Staff: A five days residential training programme was organized by CEDPA India at State Institute of Health & Family Welfare, Shekhpura, Patna. This training programme was attended by the Project Coordinator and Block Officers. The core contents of the training programme were project's concept & philosophy, NRHM, PRI, FP and RH issues.

Orientation Of Project's Staff: After the training of Project Coordinator and Block Officer, a one day orientation programme was organized to familiarize the Field Animators with the concept, philosophy and strategies of the project. This programme was attended by the all staff. This orientation programme was facilitated by Mr. Rajan Gautam and assisted by Mr. Shakil Anwar. Apart from project's concept & philosophy staff also got oriented on NRHM and Panchayat Raj Institution.

Inter Personal Contact: Once the project's staff got oriented has started their work at the field level. All staff visited their respective working areas and interacted with the Elected Women Representatives and their guardians. This was done to interact with them and develop a rapport with them. During the course they discussed and oriented the EWRs about the project. Initially EWRs were in hesitation but gradually they came forth. As a result good rapport was established with them. Their guardians also assured to provide their full support.

Data Collection: After rapport building all field staff were asked to generate data bank of the elected women representatives and the working areas. In the data bank they collected the information related to name, designation, qualification, their experiences, population of the area, caste composition, available services in context of health & nutrition etc. All the field

staff collected the data and submitted to CEDPA office for processing. CEDPA will share the findings after its procession.

Cluster Meeting / Mahila Sabha: Altogether 4 cluster meetings were held and attended by 90 EWRs. In these meetings EWRs were oriented on project concept & Philosophy, PRI systems, Role of PRI members and their capacity building programmes. During the programmes IEC materials i.e. flip book on PRI, NRHM etc. were used to make the programme more effective.

Training Programme Of Elected Women Representatives (Ewrs):

Altogether 4 training programmes were conducted for Gram Panchayat Level EWRs and it was attended by 95 EWRs. All trainings were residential and each of them was of three days. The resource persons were made available by CEDPA India. The core contents of the training programme were:

- Gender
- Leadership
- Panchayati Raj Institution
- Reproductive Health
- Family Planning
- Effective Communication
- NRHM
- Girl's Education etc.



The methodology used in the training programme was participatory. The used IEC materials were, flip Book, flip Chart, Poster, Visual aids etc. The trainings were effective and interesting. The other details are:

Monthly Meeting Of Project's Staff: Review meetings of project staff were held on monthly basis at the district office as well as field level also. These meetings proved effective in proper execution of project's activities and reviewing the performance of field staff. This meeting is very helpful to equip the field staff with knowledge, guidance and their queries to bring forth the desired qualitative and quantitative outputs. In the monthly meeting, the progress of previous month is discussed and plan for the next month is prepared. Apart from monthly meetings at district level, fortnightly meetings are also held at block level by the Block Supervisors with the CLAs.

OUTPUT:

It was the inception period of the project and during this short time span the out puts were:

- Altogether 15 project staff got capacitated on project concept & philosophy, gender, PRI, RH,FP etc.
- A total 95 EWRs got trained on issue of gender, NRHM, PRI, RH, FP etc.
- Data bank of 463 EWRs got completed

OUTCOMES

- Project team got formed and performing as per given assignments.
- After capacity building programme staff started performing well.

CHALLENGES:

- Elected Women Representatives are more introverts and less out going.
- Dependency syndrome of EWRs on their male counterpart.
- Restricted movement of EWRs.
- Low literacy rate of EWRs.

Project - 8

Project Title	Integrated Programme on facilitating access to WASH in Maner Block of Patna district
Project Coordinator	Rajeev Rajan
Funder/Support Agency	WaterAid India
Starting date of the Project	April' 2010 (3 rd Phase)

COVERAGE

District	Patna
Block	Maner
Panchayats	11
Villages	60
Population (Direct):	103588
Population (Indirect):	201345

BACKGROUND

MANER block is adjacent to patna district and characterized with low social and economic status of the backward and downtrodden community not in a position to have access to safe drinking water and sanitation facilities by themselves but to remain dependent on government assistance to cater to the requirement. Their social status is a taboo to even acquire what is rightfully theirs as in majority of the cases the installation is done in the houses of the well-off ones. Inadequate dissemination on the water, sanitation and hygiene aspects has further disheartened the actualization of eradicating the practice of open defecation.

Sanitation has not been taken as priority issue by the PRIs and community also not well acquaintance with the repercussion of inaccessibility to water & sanitation. This is why, community as a whole neither organized around the issue nor has taken as rights for realization. Village Water and Sanitation Committee formed under the aegis of TSC has no grounds and its formation has reduced to mere formality. In case of weaker & deprived sections, the situation is further aggravated by their lack of knowledge & inaccessibility to the sanitation facilities.

SCOPE OF THE PROJECT

The project envisages scaling up of the sanitation services in the area & enhanced access of the community with special focus on the deprived sections. Capitalizing on the previous field experience it is learnt that the planning at the local level paying due attention towards the need of the weaker sections and mainstreaming them in the local development process is very much needed and this is to be addressed through fostering participative planning at the local level with regard to water & sanitation. As per our previous experience, investment on software component like community mobilization, knowledge enhancement/capacity building, and strengthening community's organizations pays more dividend than other components. In the present situation, access of the marginalized community to water sanitation services is very low & in some of the villages is decimal not by way of eviction of the facilities only but also the extent of adoption of services. Since the accessibility of rural poor to water & sanitation is largely dependent upon the efficiency of delivery mechanism & proactive role of the officials supposed to deliver, the linkage & coordination with nodal govt. department will ensure increase in water & sanitation coverage.

Thus there is a need of holistic plan for enabling the community manage & have control over the WASH needs. The proposed initiative envisages easy accessibility to water & sanitation by rural community in Maner block by enhancing the capacity of community, organisations at grassroots complimented by fostering linkage for universal access to water & sanitation facilities. Capacitated community will rightfully demand for water & sanitation facilities and

potential local resource (Community Sanitation leaders), on the other hand, will play instrumental in linking the community with PRI & TSC spearheading promotion of water & sanitation at the community level.

OBJECTIVE:

- To empower vulnerable and excluded poor community to access to safe drinking water and sanitation services as their rights in 11 Panchayats of Maner Block Patna district
- To support & capacitate the Community Leaders to facilitate access of all government WASH schemes
- Female Hygiene chain at Community Level capacitated

ACTIVITIES:

I. WASH Status Assessment: An assessment of the WASH situation in all 11 Panchayats of Maner Block was undertaken to overview the prevailing conditions, extent of usage of sanitation facilities, adoption of safe hygiene practices and the rapidity of the incidence of diarrhoea owing to the poor sanitation and hygiene practices. An external expert was hired to study the situation and submit the report to the organisation suggesting the measures to curb the incidence of enteric diseases including diarrhoea. It has facilitated our acquaintance with the epidemiological state of the area for sharing with the community to learn and go for action themselves.

II. Training to Identified Community leaders: 325 Identified community Leaders comprising of PRI members, ASHA, SHG members and youth were imparted Two- Day training in Eleven Batches. The training components included the following:

- Importance of sustainable sanitation, safe drinking water and improved hygiene
- TSC provisions, entitlements and power structure
- Roles and responsibilities of different stakeholders
- Technological options of toilets
- Community based Monitoring
- Operation and Maintenance mechanism
- Right to Information

III. Training to Female Hygiene Chain Members: Visualizing a good sustainable impact on of the project, the selected FHC members were given two days' training so they would be able to inculcate such learning's to their neighbour as well as to the entire community. A total of 110 members have been trained in 5 batches. Training Components included:-

- Importance of Water and Sanitation
- TSC power structure & provisions under the scheme
- Social Surveillance
- Diarrhoea Management
- Right to Information

IV. Nukkad- Natak: The Nukkad- Nataks (Street Plays) were organized in 24 villages of project intervention area. The performance aimed at sensitization on sanitation and hygiene with focus on how open defecation is derogatory for the respect of women folk. In each village, two performances were given in two corners of the village to ensure maximum outreach to common mass for dissemination. During the performance, a huge number of spectators were present. The play was supplemented with the open session dealt by the project staffs and the inquisitiveness of the audience was quenched with regard to their questions regarding problems arising out of the poor water and sanitation provisioning.

V. Meeting with PRIs members: In order to mobilize the PRI representative to give serious thought towards WASH issues, a meeting was organized at the block level in the month of July 2011 with presence of representative from all 11 intervention Panchayats. The specific focus of the meeting was on strategizing leveraging of resources for WASH services and making all Panchayats ODF.



- To make each and every household of the community under the intervention area aware about WASH issues and available services under WASH and how to access those services;

- How to make all intervention area as ODF.

The project gives special thrust on active involvement of PRI representatives because, as per Govt. norms, all the WASH services (from TSC under District Water and Sanitation Mission) are provided with involvement of respective representatives of PRI.

PRI representatives were oriented about the nature of support the project is committed to extend. 2 PRI representatives from outside the project intervention area in Maner block, one each from 2 Panchayats on their own made their presence in the meeting and expressed their interest about IDF-run project extended to their Panchayats also. As the Panchayat election commenced in the month of May 2011 and as the elected PRI members are yet not aware of the details about their jurisdiction of working, they will get to update themselves about WASH/TSC services shortly. It was decided in the meeting that the IDF-Water Aid project personnel would be invited at the block level meeting of PRI to have got a clear picture and a common consensus about PRI's roles and responsibilities and that of the project towards universal access to WASH services to the community to make the Panchayat ODF.

VI. Block Level Workshop:

A Block Level Workshop on Water, Sanitation and Hygiene was organized at the community hall of Block campus on 24th September, 2011 to achieve Panchayat level synergy and also to build strategic alliance to work and advocate on the concerned issues in the intervention area. Local legislature, president of Mahadalit Vikash Mission, PRI Representatives from Intervention panchayats, CL members, SHGs members participated in the workshop.



Outcome of the Workshop

- Sensitization of key stakeholders towards the cause & issues of water and sanitation
- Clarity of Role and responsibilities of PRIs in Mobilizing the community on the said issues as well as on Total sanitation campaign also the Concept of Nirmal Gram Puruskar; its goal & the strategies for achieving the same understood by the participants

VII. Wall Painting:

A total number of 20 wall paintings measuring 6"×4" Feet and displaying the messages of water & sanitation have been done in strategic locations of intervention Panchayats. The message included Sanitation Use, Hand washing, Water quality, solid and liquid waste

management. The Wall paintings have been done in schools and community place for broader dissemination and better visibility. It has ensured continuous spread of the message at the community level.

VIII. Hand Pump Restoration\Repair:

Major and minor repairing work of the defunct hand pumps have been undertaken to facilitate easy and smooth access to safe drinking water to the local communities. Total 35 hand pumps have been repaired and restored in the project intervention area during the reporting period.

OUTPUT:

- 400 HHs of weaker/deprived sections has provided with IHHL by leveraging
- 325 community leaders identified and trained on govt. WASH, RTI, Social audit & their knowledge updated
- 300 Female Hygiene Chain leaders trained
- Capacitated Community Sanitation leaders available at the community level
- VHSC in all Panchayats are functional & meet regularly

OUTCOMES

- Community in 11 Gram Panchayats capacitated enough to take the issues of WASH as their rights and go in for action for its realization
- WASH issues are getting priority with all stakeholders concerned
- Inclusion of marginalized sections of the community to WASH services and Sensitized & proactive govt machinery/delivery mechanism
- Sustainable network available at the community level advocating as well as facilitating WASH needs
- Emulating model of universal access for replication to broader area

ACHIEVEMENTS AND CHALLENGES

- During community leaders meeting water, sanitation and hygiene discussed and executed as per their decision.
- Consciousness is gradually coming up on various WASH diseases.
- Female Hygiene Chain working to bring awareness and facilitate to raise hygiene issues. They help in identifying those Households, who deviate from hygienic issues
- Regular social monitoring of the programme.
- Catalytic to the promotion of low cost sanitary facilities in the community.
- Overcoming the mental barriers among the rural poor that hygiene issues are not a priority concern for them due to their low economic status.
- Bedrock for the Project activity and structure
- Challenges: There is disparity in the coverage as per geographic settlements which cannot capitalise on the community mobilisation initiatives. Insufficient focus of TSC on Capacity building and IEC has also hampered the process of behaviour change at the community level.

CASE STUDY

Name: Shijanti Devi
Husband's name: Madan Rai
Village: Bagichatola
Panchayat: Sadikpur

There is a family which live in bagichatola belonging to lower class, having total 9 members in the family with 5 boys and 3 girls. Shijanti devi's husband use to travel out of the state in search of work, he is the only earning member in the family. The whole family use to suffer either one or the other with diarrhoea and other stomach problems due to the use of open hand pump after several warnings given by VHP (Renu Kumari) that it's contaminated water not to use the open hand pump repetitively but never gave importance to her words because of her attitude one or the other member of her family always got sick of diarrhea and other stomach problems. To get rid out of it one day Shijanti devi in the absence of her husband she went to VWSC committee to take loan at that time she met Kalpana devi, Shijanti devi expressed her problems in front of Kalpana devi, she advised Shijanti devi to take advise from IDF worker VHP (Smt.Renu Kumari) next day she met VHP and decide to follow the words of VHP after few months she felt that what was the reason behind her family getting sick frequently, and as a result every day she bring drinking water from a hand pump which is located at a distance of 400 feet an hand pump was installed by IDF. When her husband came back home and asked her that "in your previous letters you always use to mention regarding the illness of one or the other member in the family but for last few months you were not mentioning such type of problems" then she explained her husband the problem which they faced and now I am following the words of VHP. After that Shijanti devi and her husband went to VHP to pay thanks and at present both of them work as information disseminator in the village regarding safe drinking water.



Project - 9

Project Title:-	Addressing Kala-azar , Health and Sanitation Issues in North Bihar
Project Coordinator:	Manoj Kumar
Funder/Support Agency:	CAF India
Starting date of the Project:	15 th May 2010

COVERAGE

District- 3	Samastipur ,Muzaffarpur and Vaishali
Block-6	Baris Nagar , Kalyanpur ,musahri, Gayghat, Mahua, Jandaha
Panchayats	13
Villages	18
Population (Direct)	36000
Population (Indirect)	36000

BACKGROUND

Ravidas, Paswan and Mushar communities in Bihar, traditionally known to have been the worst sufferers from Kala-azar as their habitations are close to those of sand flies, would now be joined by one and all with the entire surroundings get pest lineal. This is because sand flies are known to grow on the cow dung and faecal matter, but now the huddling of humans and animals innumerable populations has become immediately vulnerable. Ignorance, lack of awareness about the treatment, treatment being a long regimen and available only with the District Health Centers are other key reasons, though man-made, aggravating the problem.

SCOPE OF THE PROJECT

Spreading awareness and complete information about symptoms of Kala-azar, by building community's ability to identify symptoms, procure early diagnosis and timely treatment; amongst the population in the three selected districts of North Bihar



GOAL:

Reduce Kala-azar cases by 80% in 54-targeted villages of three districts in north Bihar.

OBJECTIVES:

To address Kala-azar, health and sanitation issues in North Bihar by creating Information and Education Communication (IEC) material and its appropriate dissemination.

ACTIVITIES:

Participatory planning: 39 FGDs with communities in 18 villages were conducted with an average of 20 community members, with nearly 35% of them being women. PRI/ASHA/AWW/ANM/SHG/key community members old (cured) Kala-azar patients and community people from all sections were present in the community meetings.



Health Camps: Health Camps were organized for a cluster of villages by which people were made aware about Kala-azar. The date of the camp was communicated via mobile van fitted with public address system and posters. The doctor present in the camp did health check-ups and suspected cases were tested with RK 39 test. Those found positive during the test were linked with PHCs for treatment.

Nutrition Promotion: Twice a month, in each of 18 villages, events were conducted for promoting nutrition education in the community. There was active involvement of PRI/ASHA/AWW/SHG/key community members in the meetings. During the meeting



importance of nutritious food were shared in which it was asked to the community that nutritious food support in health building. It also supports in developing immunity power of the body which prevents from different diseases and an individual remains healthy. It also discussed during the meeting that an individual could save his/her earnings by staying healthy as if he/she fell ill he/she has to spend money on medicine and doctor. Apart from this he/she also lost his/her man days. During the meeting it is also discussed that Kala-Azar has less or late affect on healthy individual. Apart from this community

informed that kala-Azar patient should take fibrous and full of protein food as it is easy to digest and healthy for him/her.

IEC activity: 525 signboards were used to disseminate information on medicine use for Kala-azar patients. 500 of the 525 signboards were given to Govt. Health Department for use in all PHCs and district hospitals in Bihar on its formal request. Apart from this IDF has done 24 wall paintings in 18 villages and 6 PHCs, in which prevention, available treatment facilities in Government facilities and symptoms of Kala-Azar are spread out.



Formation of Water and Sanitation

Committee: Village level Water and Sanitation Committees were formed in 18 villages to facilitate village level planning and monitoring of sanitation and hygiene promotion.

Kala-azar Nigrani Samitis were formed at village level:The status Kala-azar Nigrani Samitis of first year are as follows is that the status of the 18 Kala-azar Nigrani Samitis formed is that they are conducting monthly meetings, the minutes of which is shared with IDF, as well as performing their roles of identifying people showing symptoms of kala azar, referring them to PHCs for RK-39 test and if diagnosed the group members ensure the patient's access to government services & entitlements such as free medicine, financial provision for loss of wages throughout their treatment period @ Rs 50 per day, if required to stay at PHC 3 meals ensured to the patient & attendant as well as financial provision for loss of wages for the attendant throughout the stay period (if admitted at PHC) . If the patient belongs to a BPL family and hasn't availed of Indra Awas Yojana, the group members with the patient's prescription get it forwarded by the Mukhiya and submit their claim at the block headquarter.

Quarrantine Method: Spray of bleaching powder at water sources - in the wells and around the hand pumps. Beside sites with stagnant water were also covered with spray of bleaching powder in all 18 villages. Community people actively involved in the whole process of spray of bleaching powder starting from planning, execution.

Convergence: Convergence with IDF - run project "community leadership program to strengthen the major goals of NRHM" in Vaishali and Muzaffarpur District was facilitated with a view to disseminate the information on Kala-azar to the broader sections of the community. In this context, community Leaders was oriented on Kala-azar who in turn made it known to the community in their respective domain. 140 community leaders continued to generate awareness on Kala-azar.

Other Routine Activities:

- Community Meetings
- PRIs, ANMs, Anganwadi workers Meetings
- Meeting with PHC officials
- School Campaigning
- Liaison with State and District Level Health Officials
- Identification of Kala-Azar patients
- Ensuring required provisions for the Kala-azar patients from PHCs
- Formation of a committee to fight Kala-azar through raised awareness
- Follow up and hand holding activities in old villages
- Home Visits

OUTPUT:

- Status Report of 18 villages through participatory exercise
- Participatory plan development for tackling Kala-azar in 18 villages
- 24 health camps conducted involving 5569 community members
- 217 suspected cases underwent Rk-39 test
- 09 positive cases referred to PHC and followed up with continuously
- 525 sign boards used for information dissemination
- 27 cases (14 from direct referral, 09 during health camp and rest 4 through community information) were provided ongoing support to avail referral services from PHC
- All these 27 cases treated with the support of PHC and cured from the disease.
- 218 community level meetings and 36 school campaign organized covered 657 students on two thematic issues: health & hygiene and nutrition
- 18 Kala-azar Nigrani Samitis were formed at village level
- 18 Village Water and Sanitation Committees were formed

OUTCOMES:

- Increased Awareness of people on the disease and the existing facilities
- Good linkages with health department & proactive delivery of services
- Improved awareness among the patients about the use of medicine and its proper dosages
- Community ownership over the process of awareness, sensitisation, and linkages with govt. facilities via village level Institutions (Kala-azar Nigrani Samiti & Water and Sanitation Committees)
- Convergence with IDF's Community Leadership Programme established for synergy & fostering link with leadership initiative
- Close coordination with PRI and VHSC has been reinforce

CASE STUDY:

Arti Kumari eliminated the danger of Kala-azar with a joint effort of IDF & PHC

Arti Kumari no longer has Kala-azar, the disease that gave her family relief from further financial expenses to cover the disease.

Arti Kumari is 12 years old and is from a who lived in the village of Budhnagra Radha under Musahri block of Samastipur district. Her father, the sole earning member of the family, meets his family's bread need by working as an agri-labourer in the locality. Treatment expenses exacerbated the financial condition of the family for Sangeeta in 2011. Arti got a fever, and so, treatment was given by a local doctor (RMP). However, her fever did not pass and so her family took her to the Mushari PHC, where the doctor suspected she had Kala-azar. Due to unavailability of the treatment kit, Arti could not take the RK 39 test at the PHC of Mushari. Consequently, the same local doctor continued treating her fever, which increased their expenses by Rs. 3500.00 and even after that, no positive change occurred. In the mean time, as IDF staff intervened in her village, her case eventually came into light. As IDF staff took initiative and took her to the PHC, the RK 39 test (kit was supplied by IDF) was done and medicine from the PHC was given and proper follow-up was initiated.



Arti's case is considered to be exemplary evidence of support by Non-Govt. initiatives for the PHC and a confidence-building incidence for the community because of IDF and its programme. Sangeeta has been receiving regular medicine from the PHC along with counselling services. Her family is also in touch with IDF. The community people wonder, "Had the case of Arti not been addressed by IDF, her condition would have been grim, leading her towards death." The ward member, ANM, AWW, and the community see IDF and its programme with a very high level of recognition.

Project – 10

Name of the Project	:	Community Leadership Programme
Supporting Agency	:	JTT, Mumbai through XISS, Ranchi
Coverage	:	100 Panchyats of 10 Blocks in 3 Districts (Patna, Muzaffarpur and Vaishali)
	Direct	: 400 community leaders
	Indirect	: 300000 population
Staffs :		1 State Project Manager, 3 District Program Coordinators & 7 Block Coordinators

BACKGROUND

For reason maternal and child mortality continued to be high and increasing in the state of Bihar which becomes the principal factor of working upon the health issues by developmental organizations and government department as well. Based on the study and observation, a Nationaa Rural Health Mission was launch for improving the health situation in Indian states.

In the mission, thrust was given to provide effective health care to the rural population, especially the disadvantaged groups including women and children, by improving access to health services, enabling community ownership and demand for services, strengthening public health systems for efficient service delivery, enhancing equity and accountability and promoting decentralization.

Leading the community for accessing health facilities as their entitlements and rights was felt someway lacking that causes status of access to services poorer. To address these gaps effectively, a community leadership program was conceptualized. Under this program, a group of community leaders comprising ASHA (worker under NRHM), Anganbari workers, Auxiliary Nurse Midwifery (ANM), members of Panchayat Raj institutions (PRIs), youth members and community leaders at district and grassroots level was targeted. Their role was to create awareness on health and facilitate them to access the health services as their entitlements.

PROJECT GOAL:

The program aims to contribute towards NRHM goals, in particular:

- Reduction in infant mortality rate and maternal mortality ratio
- Universal access to public health services such as women’s health, child health
- Population stabilization, gender and demographic balance

OBJECTIVES:

- To strengthen the health system designated under the NRHM as being critical for the successof the District Health Action Plan (DHAP):
- The Panchayat Raj Institutions (PRIs) or Village Health Committees (VHC) - leadership,organizational development and capacity.
- The Accredited Social Health Activist (ASHA) programme -- tasked with promoting access to improved health care at the household level.

ACTIVITIES:

All most all the activities planned in the proposal completed during the year because June 12 being the project end time. As designed capacity building of the community Leaders was the vital aspect of the program followed by awareness on health and sanitation and its entitlements and facilitates collective community action towards accessing those services.

I. Capacity building of community leaders: Residential training for a period of 4 weeks (in 5 different slots) was the principal means to capacitate the CL. The components of the training:

1. Understanding Community
2. Leadership
3. Effective Communication
4. Volunteerism
5. National Rural Health Mission
6. Reproductive and Child Health
7. Participatory Community Planning
8. Monitoring and Evaluation

Residential training across 3 districts finished during the period that covered nearly 400 community leaders. SPM/District Programme Officers acted as resource person beside external resource agency like PHRN in the training. Group exercise, group presentation, and discussion, open sessions were applied to impart training to the leaders. They knew about the basis on which they can monitor the progress and evaluate the outcome and processes of the different services available under government schemes, besides role of VHSC in village level Health and sanitation planning & community led monitoring process.

II. Household Survey and its dissemination: 400 community leaders of 100 Panchayats with were oriented at the block level on the methodology of Household survey, standardizing the data and practical introduction to the survey techniques. The orientation was followed by undertaking Household survey by CLs on prescribed formats that covered 59500no. of households constituting the total population of 430326 across the project districts. The collected data including the village profile was consolidated & analyzed with submission of a final report by the external SPSS Expert. The findings of the survey disseminated at workshop at different levels:

a) State level Survey dissemination workshop: Two-Day state level workshop was organized from 12th to 13th January 2012 to disseminate the findings on key indicators coming out of the Household survey. The workshop proved fruitful for the community leaders to get acquainted with the actual scenario indicator wise in their respective areas and also to identify focus area for leadership intervention. Essentials of a Model Micro plan was also shared in the workshop to give out clear picture about the shape and design of micro plan.



b) District level Survey Dissemination Workshop: District level survey Dissemination workshops were organized in all 3 districts viz. Patna, Muzaffarpur and Vaishali with the objective of sharing the findings on key health indicators with the district level line department officials, NGOs, INGOs, Zila Parishad members and selected community leaders. The Civil Surgeon in his speech appreciated the programme that the capacitated CL at the grassroots, if communicate the message regarding institutional delivery, effect of early marriage, ill effect of hygiene and sanitation among others which would help in reducing MMR and IMR. In the workshop, roles and responsibility of Panchayats representatives at different levels were also discussed so as to strengthen the functioning of VHSC and delivery mechanism.



c) Block level survey dissemination workshop: Block level workshops were organised in 10 intervention blocks. In the workshop MOIC, Block Health Manager, CDPOs, TSC coordinator, Pramukh and Mukhiyas of intervention Panchayats took part. This workshop helped in developing better coordination among different stakeholders. CLs got the clear idea to address the issues more effectively. PRI members as well as government officials assured to provide their full support whenever required. In the block level workshop, separate session with CLs was also organised to orient them about the design and performance of the Micro plan to be developed by them at the Panchayat level.

III. Monthly meeting of block level CL team: Block CL team comprising 4 CLs continued to hold monthly meeting to share the ideas, taken initiatives, liaison activities and achievements. As this forum is new, so discussions were also made on its relevance, importance, working style etc. Apart from these they got aware on their role & responsibility along with effective advocacy for reinforcing the existing system in place.

IV. Micro-planning: Micro planning exercise was undertaken in all 100 intervention Panchayats. 4 trained CLs and 4 Peer CLs in two teams initiated Micro Planning Process at the local level. Micro-planning comprised of social & resource mapping, Problem identification, Problem analysis, Prioritization, devising Panchayat plan and preparation of Panchayat profile. Through Micro Planning process CLs as well community members came to know the real picture of their Panchayats in context of health scenario and helped them to chalk out plan to redress the identified plans.



V. Quarterly follow up, orientation/refresher and work review meeting with the community leaders at block level: Quarterly follow up meeting with CL were organized at Panchayat level with attending the CLs from a number of Panchayats adjacent to one another. In the meetings Community Leaders shared about their initiatives, learning and challenges. They got provided proper suggestions and guidance. Apart from it, they also got aware on different government schemes, provisions and health services stipulated at health centres.

Individual follow up of trained community leaders by BC/DPO continued. The aim of follow up was to refresh acquired knowledge of these leaders, extend support to leaders in playing their role, monitor how they are resorting to action, the problems faced by the leaders. It proved beneficial in enabling leaders with clarity on different aspects and root out difficulties in the way of taking recourse.

VI. Monthly Progress Review Meeting: Monthly review meetings of project's staff were held at district level. This was organised in each of the district per month. This meeting helped in gauging the project's progress and also helped in providing proper guidance to the staff on time. In these meetings monthly action plan was reviewed, learning was shared, challenges were discussed and action plan for next month got finalized. This proved effective tool for supportive monitoring.

VII. Information/data collection, analysis and assessment cost: All the community leader initiated the process of data collection from the anganwadi center of intervention panchayats from the month of Oct 2011 in the specific Format consisting of information on functioning of VHSC, Status of delivery, Birth spacing/contraception, STIs/RTIs and common diseases rampant in the areas with number of people affected by the diseases. The CL's were supported by the block coordinator in the data collection work. The data was submitted to District Office after verifying the same by the BC concerned. Regular collection of data

gave an opportunity to track the extent of progress on the identified indicators and the impact of the leadership initiatives.

VIII. Network and liaison: The project has developed and strengthened relationship with



key stakeholders- Health/ICDS/PRI/NGOs during the third year of implementation which will have positive impact on gradual improvements in service delivery even beyond the project period. Monthly/weekly staff's meeting at PHC and monthly with ICDS and regular interaction, interaction with Mukhiya/Pramukh/other PRIs by CL/BC/DPO have proved effective in mainstreaming of weaker sections to the existing services and ensuring that these services reach to the community. Block coordinators attended ASHA Diwas and weekly meeting at the PHC level with

the presence of all ANMs. IDF has been given representation on the Rogi Kalyan Samiti at PHC and APHC level in Maner block of Patna, Katra block of Muzaffarpur.

IX. Convergence: Convergence with other programmes/schemes and projects also

facilitated for bringing about synergy to the CLP project across the intervention districts. The community leaders played active role in ensuring health services with the coordination of other project staff. In this connection community leaders of Dumari panchayat in Mushahri block and Loma also in Gaighat block of Muzaffarpur actively participated in managing the health camp organized under Kala Zar Eradication project. These leaders also made effort for their rehabilitation as per the government provision i.e. helped in getting Indira Awas and stipend. The community level awareness generation program helped the community leaders to advocate the best practices to be followed during the day to day household activities. This would certainly reduce the drudgery and risk of being victim of many diseases. In vaishali district, convergence with child centric community development project and the project supported by LWR was fostered to give the synergy to CLP programme. In patna district, convergence with Ipas supported programme aimed at preventing maternal morbidity and mortality and Water Aid supported projects focussing on water, sanitation and hygiene were facilitated which further accelerated our strive to strengthen NRHM goals.



IMPACTS:

Consequent upon the intervention in the operational area of Community leadership programme some positive changes are emanating in the area within the short period. The following changes are furnished as hereunder:-

- Community Led by CLs started advocacy strongly for service provision and improving system under ICDS and Health responsible for delivery in a democratic way
- Community get acquainted with the field situation and the domain/areas of further attention and their involvement in the process has instilled faith in their own competence to carry forward the community led initiatives
- Quantum of people availing the services at the government facilities increased
- AWWs open the centres regularly across the project areas and they are now providing services at the centre

- Health Department involves leaders in their planning & implementation of activities and vice versa resulting in required support to the programme.

CASE STUDY:

1. Community leader Smt. Sabita Sinha made it possible to provide **Polio Drop for the first time to 3 children** under 5 years of Shulekha Devi of Jaitipur village under Srichandpur panchayat, Bihta block in Patna district.

It was a challenge for the MOIC (Dr. Dadan Prasad Singh), Bihta PHC to ensure with Polio Drop for 3 children of one family after repeated denial. Based on the discussion Smt. Sabita Sinha (Community Leader under) of Srichandpur panchayat, as a strategy to sort out the problem, was deputed as Polio Vaccinator in the month of April 2011.

On the first day of the Polio Round Smt. Sabita with the concerned ANM Smt. Bebi Sinha visited the family in Jaitipur village and talked to Shulekha Devi and her other elderly family members to provide Polio Vaccine drop to the children.

Smt. Sabita Sinha in the training session satisfying her query
However, as Smt. Sabita tried her level best to convince the family to get their child vaccinated with Polio Drop for continuous 3 days but they denied. But on 4 day the family agreed and their 3 children were vaccinated with Polio Drop.



The message spread across the block. The MOIC, Bihta appreciated the effort and skill of Smt. Sabita Sinha as well as Community Leadership Programme that made possible the impossible.

2. Voice against corruption



Out of 160 CLs trained in community leadership program in Patna district 46 were ASHA under respective OHC. ASHA on Sampatchak PHC once was to receive a lumpsum outstanding amount of incentive from the PHC and every AHSA was illegally to pay Rs. 2000 to some PHC personnel. Nobody protested of the illegal act. After few months as all CLs received all 5 slots training that helped build the knowledge and skills of the participants on different fronts i. e. leadership, volunteerism, communication skills, Govt. entitlement under health/ICDS including the proper way how to have it as people's rights, micro-planning, monitoring and evaluation and RTI also and this enabled the ASHAs to think that they have been cheated by PHC personnel and there should be some way out against. They (the trained 10 ASHAs of Shampatchak block) started discussion among themselves and shared it with other ASHAs also. DEEPA SINHA community leader took the lead along with other CL-ASHAs on behalf of all ASHAs. They wrote an application signed by most of the ASHA and submit it at CS-cum-member secretary of District Health Society, Patna. As a consequence the CS office made an enquiry of the complaint. And finally 2 contract staff of Sampatchak PHC was dismissed/suspended.

The ASHAs in their words, "Ab Hum Lok Aur achha se Kam karenge, samuday ko labh pahuchhayenge, quiki hame hamara adhikar se koi banchit nehi kar sakte hain. Hum jan gaye kaise apna adhikar ke liye larai karna hain".

Project -11

Project Title:	Dalit Women empowerment through Self Help Group Initiative and Micro enterprise
Project Coordinator:	Prerna Verma and Mahendra Prasad
Funder/Support Agency:	Lutheran World Relief
Starting date of the Project:	01 Aug 2009
Coverage	District- Vaishali Block: Rajapakar, Panchayats- 11, Villages – 25 villages
Population (Direct)	650 Families = 3730
Population (Indirect)	Male - 1791 Female - 1176

BACKGROUND

Integrated Development Foundation (IDF) is implementing the project titled “Dalit women empowerment through Self Help Group Initiative and Micro-enterprise” with the support of Lutheran World Relief since August 2009 in Rajapakar block of Vaishali district, Bihar. The project intends to focus the problem “Lack of steady income among dalit communities in 25 target villages of Vaishali district in Bihar” through implementation strategies reinforcing organized strength of dalit women, functional literacy, capacity building on income generation and revolving fund support to initiate business enterprises. In light of the above strategies, activities such as facilitation meeting for SHG formation, training on accounting, group norms and leadership, functional literacy, formation of local resource group to support women for accessing their entitlements, skill development for enterprise development and revolving fund support has been planned for 3 years time frame.

SCOPE OF THE PROJECT

The project primarily focuses on 650 women belonging to scheduled caste and scheduled tribe (650- SC/ST women) and their families. The project aims to ensure targeted women increased access to credit, enhance their awareness and capacity to mobilize govt. resources and rights/entitlements. It includes creating systems and mechanisms for steady income for 455 women through micro enterprises and agriculture value chain interventions on leased land and also by building their income generation /business skills. By doing this, these families will have improved access to credit and will gradually be less dependent on money lenders and be free from the debt trap which most of the target families have fallen into. A strong need is also felt to educate these communities about Govt. programs /provisions and systems related to health, education, and rural development for long term sustainability.

GOAL

650 dalit women from 25 target villages in Vaishali district have increased access to credit (through SHGs) and about 70% (455) of these women have steady income of Rs.1200 per month through micro-enterprises by 2012.

OBJECTIVES:

1. To organize 650 women from 25 villages into 45 self help groups and strengthening their capacities in functional literacy, micro- credit management and leadership by 2012.
2. To increase awareness among the target (650) women SHG members and their male partners on Gender, Panchayati Raj (local governance) systems, accessing existing government services (Health care, safe drinking water) and government sponsored programs by 2012
3. To train 455 women SHG members from 45 SHGs on feasible income generation activities /enterprises and its management(animal husbandry, bamboo craft, collective

agriculture on lease land, banana stem thread craft, Clothes business, Spices making) by 2012

4. To increase women's access (650 women) to credit for IGP /enterprise activities by Revolving Capital support to SHGs by 2012.

PROJECT ACTIVITIES/OUTPUT/OUTCOME/INDICATOR

Activities	Output	Outcome	Outcome indicator
Saving and credit activities within the 45 self help group	<i>Savings and credit status till January 2012.</i> - Rs 9, 14,480 /- has been saved by 647 members of 45 SHG's. - Rs 17,48,550/- have been inter- loaned among the members of the groups (cumulative) - Rs 13, 42,300/-have been repaid by the members. - Rs 29,530/- has been earned by the groups. - 519 members have taken loan from the group in the inter-loan process at least for one time.	-650 SHG members have access to credit for and productive purpose -45 SHGs comprised of 650 women from 25 villages are effectively managed with sound financial and management systems	-45 SHG have developed group policies and procedures regarding savings and credit(loaning) -At least 75 % of SHG women have accessed credit from the group
Organized capacity building workshop for 130 members of 13 LRG and field staff	Organised 06 workshops for 130 local resource groups on gender, local governance systems, accessing existing government services (Health care, safe drinking water). Each LRG constitute 10 members with representation from SHG, male Partners, teachers, ANM, PRI and social worker. The project was planned to strengthen the LRG to support SHGs to redefine the role of women/men and demand for their rights/entitlements.	- 25 LRGs as Local peer support system is formed and operational to support SHG women and their male partners to demand for their rights, entitlements & govt. services -Increased awareness of women and men on gender, local governance and government services	-25 LRGs have developed village wise plan and support groups in accessing rights/entitlements and govt. services
Conduct 36 literacy sessions for all 288 women SHG member	288 women have attended 30 days of literacy classes	- 288 women are functionally literate	288 women have completed 30-day course of literary classes and now functionally literate.

<p>Organised 25 step down workshops on capacity Building for rest 515 SHG women.</p>	<p>25 LRGs conducted 25 step down workshops at village/tollas level to sensitize rest of the 515 SHG members and their male counterparts on gender, local governance, accessing existing government services (Health care, safe drinking water etc)</p>	<p>-Women SHG members and male partners are able to articulate /voice their demands in Gram Sabha (Village council/local governance system)</p> <p>-Women SHG members and their male partners have increased access to their rights entitlements, govt. services/programs.</p>	<p>-At least 70 % of the households (both men and women) have increased understanding on productive and reproductive roles (pre & post test).</p> <p>-70 % of women and men have received benefits/entitlements (rural pro-poor govt. provisions and services)</p>
<p>Conduct Awareness Campaigns at village level (by SHG) with the support of LRG and project team on participation in Gram Sabha /education /cleanliness/health/ sanitation through IEC material</p>	<p>In 5 village international women's day were celebrated. In 2 villages health camp was organized In 6 villages awareness rally and program were conducted on health and hygiene on World Toilet Day In 10 village awareness campaign was conducted in health and HIV/AIDS on World AIDS day</p>	<p><i>As a result of awareness campaign 100% child is immunized of target beneficiary. 181 beneficiary have received free health services and medicines Women now have started availing basic health services from the primary health centres. Women are now going for Ante natal care and Post natal care.</i></p>	
<p>Interface Meeting with Bankers, Stakeholders and Credit Institutions</p>	<p>On 25th April 2011, an interface meeting was conducted in Hotel Anamika. Total participants in the meeting were 31 SHG members form village Harpur Mukund, Hasanpur Bakhri, Banbira and Rajapakar (south</p>	<p>-SHGs have leveraged Existing Govt. resources/programs on IGP.</p> <p>-SHGs have increased access to credit from local credit institutions(banks)</p>	<p>-At Least 30 % of SHGs have been graded under SGSY/ RMK scheme.</p> <p>-Loan application of at least 30 % of SHG members have been sanctioned</p>
<p>Skill Development Training on identified Trades</p>	<p>- Members have attended goat rearing trainings in which 286 members participated through 10 training programs. - Members have attended vegetable cultivation trainings in which 141 members have participated through 5 training programs. - Members have attended vermin compost trainings</p>	<p>-455 trained women are better equipped with knowledge and business skill.</p>	<p>-SHG members have finalized their trade specific market chain.</p>

	in which 31 members have participated through 1 training programs. All the training programs were organized at Krishi Vigyan Kendra, Hariharpur, Vaishali		
Workshop for SHG members to work and develop their Business Plan with the help of Consultant	22 workshops were organized in which 645 members attended the programs. The workshop was organized to develop the business plan so that livelihood units could be established.	-455 women SHG members have established their income generation units	-455 trained women SHG members have developed business plans. -SHG members are attending meeting of their respective trade sub group and sharing experience once in a month
Training on Federation	18 selected leaders from the 45 SHG's were trained on the concept of federation	- Federation has been formed and has its own bye laws.	- Written bye-laws with share capital is available.
Disbursement of Revolving Fund	Rs 1075500 have been disbursed to the groups for income generation activities.	-455 women are earning increase income from their businesses	

ACHIEVEMENTS AND CHALLENGES

- Collective unit established by the self help group
- Liaison with the government agencies for the capacity building of the women
- Liaison with the bank for the financial transaction of the self help group
- 100% immunization of the children from the target group
- 100% children going to school/re-enrollment/back to school
- 100% women have availed the ANC and PNC services from the sub centre and primary health centre
- 100 women have got job card and working in the NAREGA.
- Constraint due to FCRA new guideline, disbursement of Revolving Fund was held up.
- Non Availability of good technical resource agency at the district level.

CASE STUDY

Case Study - 1

Name – Mrs Anita Devi

Group Name – Shiv Mahila Self Help Group

Address - Vill – Chak –Evaj, Vaishali

The formation of group in Chak –ewaj was a real tough one. The nearby market of Sarai had a great influence over the household economy. Each household was involved in the small petty business, which earn them a good sum of amount in each day of business. But this earning was not quite enough to feed the family member as the middle man involved in the process used to charge at high rate of interest as high as 2% per day. The villagers used to take money from the moneylender on the daily basis and settled the amount at the end of the day as soon as the market is over. When IDF intervened entered into the village this was the common scenario and the lending and repayment was on the daily basis. The community was not ready to listen, as our process to them seemed to be a lengthy one. The whole processes of development were ignored by the community members. With our continuous effort we succeed in the formation of one group and so on continued with the formation of another group.



Mrs Anita Devi joined the group on 6th January 2010 with the aim of saving some amount for the future and well as to gain some social strength.

Previous Conditions – Anita Devi is a small petty business woman, having a small vegetable shop in the Sarai market. She purchases vegetable from the wholesale market and sells it off in retail market. She had taken a land in the rent at Rs 600/- per month. The owner of the land used to disturb her and used to take away her vegetables. She was very disturbed by this act. This continues for many days but one day she

thought to discuss the issue in her self-help group meeting.

She discussed the issue in the meeting. She said that she is facing a lot of problem in the market and profit share has also gone down due to all this activities. All the members advised her to vacate that place and search for new place. Anita was very hesitant as it would cost her extra burden to her. She would have to pay handsome amount as guarantee money to the land owner as well as the rent. The group discussed and finally come into conclusion that group would support Anita by providing her the working capital of Rs 5000/- which would not only serve as a guarantee amount but also help her to add some extra vegetable for her shop. This has helped Anita in getting the new shop open and started her business smoothly. Moreover the rent for the new place was Rs 400/- per month. There was not only additional saving of Rs 200/- per month but started earning more profit from the new shop. At present the profit ranges from Rs 100 – 150/- day. Now she is a happy woman. She gives all the credit to the group which has helped her and supported her.

CASE STUDY 2

Name of Group: Ravidas Self Help Group

Village: Bhata Dasi

Panchayat: Rajapakar (North)

Block: Rajapakar

Dist: Vaishali (Bihar)

This is an example of the old saying quote “United we stand, divided we fall” and a model for both IDF and LWR where 10 members of a group Ravidas Self Help Group, Bhata Dasi collectively established a livelihood unit of Poultry. When asked how the journey of SHG started the member recalls “It was the month of *Kartik*, 3 years back when one of the *bhaiya* from IDF came and briefed us about the SHG, importance of savings and its other related benefit. Since the matter is related with money there was initial resistance from the male members that they (IDF people) will collect the money and will flee away. But we members agreed and finally the SHG was formed” Initially they concentrated on savings and after completion of almost two years when they had a good amount of money in the box then they thought for starting any livelihood unit. At that time they had two problems, one although they had good amount of money but was not sufficient to fulfill the demand of all members and second, starting small and personal units were not so beneficial for them.

With rounds of discussions with the project staffs and their families, they decided to go with the collective unit establishment. When this point rose in the meeting then few were agreed and few didn't show any interest. Finally ten members agreed to go with it. All wished to go with the Poultry business as they had experience of rearing chicks at small level. Two years ago, from government department few chicks were distributed to them. They reared it and got good benefit from selling it.

Finally, all ten members requested for RF amount Rs. 40, 000 as loan amount and put their Rs. 20,000 as their own contribution. In the construction of shed also all members contributed their support in the form of labor and built a farm of 500 chicks. All ten members divide themselves for



the duty/ work for the business. One member has to work for 3 complete days (24X3 on a revolving basis). From the effort of the group, they sold first lot they have earned profit of Rs. 10, 000. They have also had bitter experience when the morbidity rates of the chicks was quite high in the winter season and they have to suffer a loss. To see the profit now all members

are thinking to repay the loan first and then thinking for the expansion of the business and to construct a brooder shed also.



Project - 12

Name of the Project	:	Emergency Preparedness in Bihar (on WASH)
Supporting Agency	:	Water Aid
Project Coordinator	:	Abhinav Kumar
Starting date	:	June 2009
Coverage	:	5 Districts in 5 Blocks in 60 Villages (Samastipur, Darbhanga, Madhubani Muzaffarpur and Sitamadh)
	Direct	: 30000 flood affected communities
	Indirect	: 300000 population
Staffs :		1 Project Manager, 5 Block Coordinators & 240 Trained Volunteers

WASH SITUATION

Theoretically right to life with dignity is fundamental right guaranteed by the constitution access to and availability of safe drinking water, safe sanitation and clean environment are recognized as the basic human rights. Despite several commitments since seventies for health for all, water and sanitation for all, sustainable access to safe water & sanitation and clean environment generally kept out of the development priorities.

As per the available information 96 percent of the rural households of the State have access to improved / safe source of drinking water and 27.25 percent [37.42 percent BPL and 14.58 percent APL] rural households have access to [IHHL] individual household latrines.

Access to safe source of drinking water does not meet access to safe drinking water throughout the year and access to IHHL is not reflection of the access to basic sanitation facility for all season in a year. In Bihar borehole is the main or only source of drinking water as 94.4 percent of the rural population is getting water from it and generally PHED [Public Health Engineering Department] installed the hand-pumps at surface level without considering the flood vulnerability and contamination threat due to flood.

Waster and sanitation are basic human needs and it is a known fact that 70-80 percent of the morbidity is due consumption of contaminated water and unsafe sanitation practices and possibilities of spread of diseases and general morbidity are significantly higher in the recurring flood affected areas of the Bihar.

Access to and availability of sustainable WASH [Water, Sanitation and Hygiene] is extremely important in the flood prone Bihar to reduce the vulnerability of the affected people. Though water and sanitation are basic needs but generally it remains neglected from the community priorities and local development planning and coverage is treated as static numbers without considering all season functioning of it.

Theoretically approach of flood control is replaced by flood management especially after constitution of Disaster Management Authority and enactment of Disaster Management Act but practically the programs are generally focused towards flood control measures. There are initiatives through which integrated emergency response is planed and executed but such initiatives are generally limited to relief during disaster and integration of various programs suitable for sustainable development of community infrastructure and services is generally missing. Government schemes and programs of basic services and facilities are planned and implemented without considering the needs of the flood prone areas. The design of the individual household toilet constructed under TSC and handpumps installed under the rural drinking water program is without assessing the safe and sustainable functioning for all seasons.

Considering the vulnerability of the people living in the flood prone areas of the Bihar, the program for sustainable access to WASH was conceptualized to develop demonstrative and

replicable models for community base water and sanitation services under the Emergency Preparedness in Bihar. The three years program on emergency preparedness focus on water and sanitation was conceptualized after 2007 floods. The present document is consolidation of the intervention and learning of the program for sharing at larger level

Article II.

THE INTERVENTION

Bihar faced one of the worst floods in last 20 years in 2007 in which 18832 villages of 22 districts were affected. In total more than 24.44 million people and 1.88 million hectare including 1.06 million cropped area was affected. Besides huge crop and property losses, 1287 human and 2423 animal deaths were recorded.

Emergency preparedness is very important aspect in the highly flood prone Bihar and after the flood 2007 WaterAid in consultation with the Minister for disaster management, Govt. of Bihar and its partner IDF conceptualized a three year program [2008 – 2011] on emergency preparedness focused on water, sanitation and hygiene for flood prone areas of the State.

INTERVENTION AREA PROFILE

For the purpose of the demonstrative intervention five most vulnerable districts of the north Bihar namely – Darbhanga, Madhubani, Muzaffarpur, Samastipur, and Sitamadhi were selected.

OBJECTIVES OF THE INTERVENTION

Objectives of the intervention are listed below –

- ◆ To set up models of flood preparedness in 25 villages in 5 districts, for emulation by the Government and other agencies
- ◆ Develop IEC Materials for the Government to promote awareness about Emergency Preparedness measures on mass scale
- ◆ Contribute the WASH Section to the Government Document on Disaster Preparedness

The intervention was aimed at integration of flood proof WASH services with emergency preparedness program for the communities repeatedly vulnerable to floods. The purpose of the intervention was not to create the infrastructure usable during emergency / floods rather it was intended towards availability of sustainable WASH services through out the year including time of floods.

KEY COMPONENTS OF THE INTERVENTION

The key components of the community based disaster risk reduction program focused on sustainable WASH services were as given below –

- ◆ Community consultation and general assessment of the flood situation with problems including water and sanitation related problems being faced by the community during floods.
- ◆ Identification and selection of the site by the community with consent of the Panchayat
- ◆ Identification, orientation and training of village volunteers
- ◆ Construction of all season toilets and installation of all season handpump
- ◆ Community monitoring during construction / installation
- ◆ Handover of the created assets to the community
- ◆ Development and launching of the IEC material related to preparedness and do's and don't before, during and after floods
- ◆ Provision of water tank, water filter and emergency kit in the villages
- ◆ Regular community meetings for awareness generation, preparedness and sustainability
- ◆ Networking among the other NGOs and CBOs working in the targeted districts and capacity building on the sustainable WASH services in flood prone areas
- ◆ Learning sharing with other stakeholders including Government departments

COVERAGE

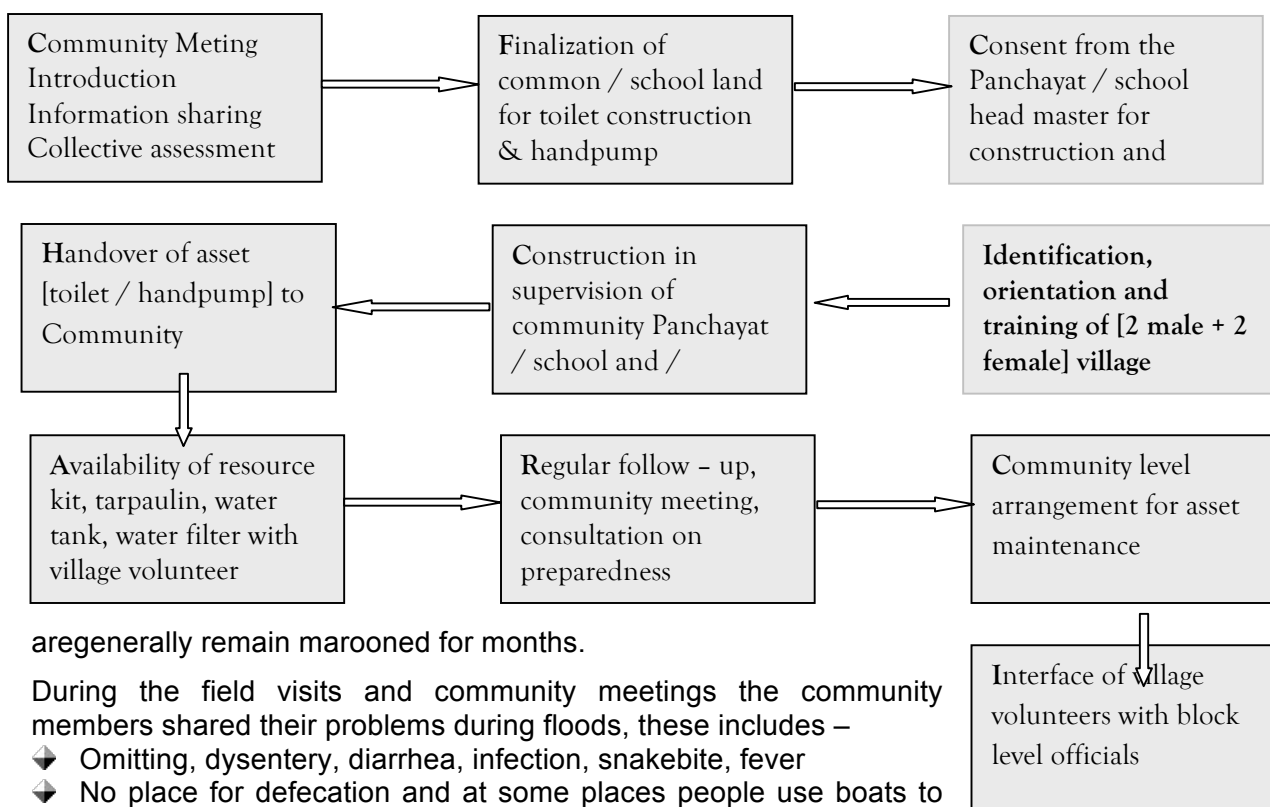
At the time of conceptualization the project was aimed at developing 25 model villages in five districts for flood proof WASH services in the flood prone areas of the Bihar. Gradually

District	Block	No. of Villages Covered	Communi ty Toilet	Hand pump	Resour ce Kit	Water Tank	Water Filter	Tarpaulin	Life Jacket	Trained Volunteers
Darbhanga	Kewati	12	12	09	48	08	12	24	12	48
Madhubani	Jhanjharpur	11	11	08	44	07	11	34	11	44
Muzaffarpur	Aurai	13	13	13	52	09	13	42	13	52
Samastipur	Kalyanpur	13	13	11	52	08	13	38	13	52
Sitamadhi	Belsand	12	12	06	48	10	12	29	12	48
Total	05	61	61	47	244	42	61	167	61	244

the covered villages were increased to 61. District wise distribution of covered villages is given below and list of the covered villages in enclosed

Process of Community Level Intervention

Flood is reality in the area of intensive intervention and during the community level interaction and observation it was found that people in the highly vulnerable areas are compelled to face impacts of the floods for a period of 2-4 months due to water logging. Majority of the families are living in the kachcha houses and finding upland for the survival in the villages become difficult during the floods. The flood control programs are aimed at construction of the embankments and earthen bunds it may be protective for section of the population and specific area but villages surrounded by the embankments and river streams



aregenerally remain marooned for months.

During the field visits and community meetings the community members shared their problems during floods, these includes –

- ◆ Omitting, dysentery, diarrhea, infection, snakebite, fever
- ◆ No place for defecation and at some places people use boats to find some place for defecation
- ◆ Drinking water crisis due to water flow over resources [handpumps] and contamination
- ◆ No place for keeping food articles
- ◆ No arrangement for saving drowning
- ◆ Non availability of clean water even in case of delivery
- ◆ Crisis of food, fodder and fuel
- ◆ Safety of the village from break or crack in the embankment

Construction of the toilet and installation of the raised handpumps were not the sole objective of the intervention rather focus of the intervention was on effective and sustainable WASH services in the flood prone area to reduce vulnerability of the flood affected communities.

Therefore involvement of the community at every stage was the key of the intervention. The process of the community level intervention is given in the following chart –

Capacity Building

Capacity building is one of the key strategies of the intervention and during the duration of three years following training programs were organized

Type of Training Program / Workshops	No. of trainings	No. of persons trained /participants	Participants
Training of masons	01	15	Masons from coverage area
Training of staff	03	5	Project coordinators and animators
Training of volunteers	04	100	Village volunteers
Training of Networks working on Emergency preparedness in Bihar	01	35	30 Local /Grass Root NGO of 5 District, 5 Mukhiya of intervention areas
Interface Workshop	03	90	Participants including village volunteers, animators and block level officials
Hygiene education camps	50	1500	

Besides training of the project team and village volunteers community education on emergency preparedness was one of regular activity during the project. It includes following:

- ◆ Community level assessment
- ◆ Micro planning for flood preparedness
- ◆ Basic sanitation and hygiene education
- ◆ Community monitoring and management of the community infrastructure developed during project
- ◆ Mutual support during emergencies
- ◆ Interaction among village volunteers and community for effective use of available resources [emergency resource kit etc.]
- ◆ Life skill training
- ◆ Training for preparation of life jacket using empty bottles



Material Development & Dissemination

Mass awareness and information sharing among the various stakeholders was an important strategy and following IEC material and documents were prepared during the course of Intervention

Type of Material	Title	Targeted Audience
Radio and Video Spot	AAYEBARH YA TOOFAN, GYAN BACHAYE SAB KI JAAN	Rural population and people having access to TV
Posters	1. AAYEBARH YA TOOFAN, GYAN BACHAYE SAB KI JAAN 2. Do's and Don't before, during and after floods	Panchayat, AWCs, Schools and others Panchayat, AWCs, Schools and others
Hoardings	On preparedness	Public/Community representatives, and people at large
Wall Writings	On preparedness	People of the flood affected areas
Blue Book on WASH during Emergencies		For network members, CBOs, other NGOs and agencies working on WASH during emergencies
CBDP approach paper on WASH during Emergencies		For submission to Govt. of Bihar and sharing with other stakeholders

Community Asset Management Procedure

Community assets and infrastructure has created in 61 villages during the intervention under Emergency Preparedness in Bihar and proper maintenance of toilet block and handpumps with use of self-acquired knowledge is the key for sustainable WASH services.



Handovering of Assets to the Community

The central theme of the intervention was community based sustainable WASH services in the flood prone areas of the State. There is no standard operating system was designed rather community in the respective village of the intervention make its own arrangements for asset management.

Conscious efforts were made to develop community ownership over the assets created in the village through involving community in every stage of the project implementation. The process of community handover of the asset also helped in developing community ownership.

The toilet block and handpump constructed in the schools for providing drinking water and basic sanitation to the flood affected community takes shelter in the schools during floods are generally manage by the schools.

The toilet block and handpumps constructed on the public land are managed by the community using it. At some places formal arrangements are made by the community.

In the intervention villages of Kalyanpur block of Samastipur district community is contributing rupees 2 per month which is collected by one of the community volunteer and this money will be used for repair, maintenance and cleaning if required. Where as in the Aurai block of Muzaffarpur district community has decided to contribute as the need and their willingness is already expressed during the construction and community of the Basua village contributed 4000 bricks and waste water outlet at the time of construction. The 4 seated toilet block was constructed in 2008 and part of it was collapse due to soil conditions and it was also repaired by the community contribution.

In Samastipur the community in consultation with animator and village volunteer slightly modify the handpump installation procedure. Generally single piece of 10 feet steel pipe is used at the top and in the handpumps installed in Samastipur under the project instead of single pipe of 10 feet 2 pieces of 5 feet each are used and they said in case of leakage, rusting or breaking of pipe defected piece of 5 feet can be changed and it reduces cost of repair.

Generally the close user group of the toilet and handpump has taken the responsibility of the repair and maintenance and it has fixed it own norms for it.

Changes and Sign of Changes

The project is just not created some community infrastructure useful during the emergencies rather it has contributed in change in the community perspective on WASH and emergency

Toilet Block	
Toilet block at community land	31
Toilet block in school premises	30
Total	61
Hand-pump with High Rise Platform	
High rise hand-pump at community land	34
High rise hand-pump in school premises	13
Total	47

preparedness.

In total high rise all season 4 seated toilet blocks are constructed in 61 villages and high rise handpumps are installed in 47 villages and out of the total constructed the site wise distribution is given below

Generally the community uses the toilets constructed in the school premises during the floods as the schools are used as the shelters for the flood affected communities. But the toilets constructed at the community land are useful during the normal days as well as at the time of flood.

The change in approach of the community can easily understandable through following observations and experiences –

1. Musihari village in saidpur Panchayat of Kalyanpur block of Samastipur district. The Dalit village comprises of 35 households of Mushar community. The village generally faces flood every year and it is about 5 KM from the River Bagmati. Community level interventions were started in 2008 and formally project interventions were started in 2009. A 4 seated toilet block and a high rise platform was constructed and other resources were provided in the village. The village is covered under the TSC [Total Sanitation Campaign] and in community meeting people informed that individual household toilets are constructed for the all the households but none of the toilet is used by the community as all are incomplete. The toilet are simply constructed at surface level with a single brick wall of 2 ½ - 3 feet without cover or door. All the toilets are useless and community members informed that they are using the toilet block constructed during the project through out the year. The users generally clean the toilet and they have developed a system of monthly contribution of Rs. 2 per household for repair and maintenance of the toilet block and handpump.

2. Rampura village of Ladaura Panchayat of Kalyanpur block of Samastipur district. Rampura is a big village of about 600 families and 400 of them are dalits. The village is about 6 KM from River Bagmati. Majority of the population is dependent on agriculture and about 97 percent of the Dalit families are landless largely dependent on share cropping and agriculture labour work. Community informed that there about 200 houses sanctioned/constructed under Indira Awas Yojana but about 175 of them are incomplete and the completed houses do not have toilets. Total Sanitation Campaign [named Lohia Swachata Abhiyan] is under implementation but for majority of the people can not take benefit of it being landless and available community land is under control of the landlords. In Paswan tola of the village project intervention was started in 2009-09 and toilet block and handpump were constructed with provision of other components. About 50 families of the Paswan tola are using the toilet regularly and besides these families guest coming to village for social purposes and marriage are also using the toilet. There are about 10 Government handpumps in the tola but people informed in June 2011 that only 1 of them is functional and that will be useless at the time of flood as it is without platform and the handpump installed under the project will remain the only source of water. Sri Vinod Paswan, community leader said that such facilities are needed in every tola [mohalla] of the village to improve the situation of the dalits.

INTERVENTION APPROACH AND SECTORAL CONTRIBUTION

- Working with the community in the remote and un-reached areas of the five flood prone districts of the north Bihar was the key approach. Though intervention was primarily focused towards development of the model villages for emergency preparedness program focused on water, sanitation and hygiene but conscious efforts were made to develop these models in the area of most vulnerable groups.
- IDA and WaterAid are primarily social development agencies and focus of the intervention was towards developing social infrastructure to reduce the vulnerability of the most deprived people in the flood affected areas.
- Despite the fact that consumption of unsafe water and unsafe sanitation practices are the main cause of the morbidity and it aggravates the vulnerability of the people during floods, safe water and sanitation is not the issue of priority. Therefore the situation assessment during community meetings and listing of the problems for community level

micro planning was helpful in realization of the problem and issues of water and sanitation by the community.

- The approach of community involvement at every stage of the implementation was helpful in developing sense of collective responsibility towards effective use of the created infrastructure and maintenance of it.
- The approach and the intervention also contributed in demand generation for safe water, basic sanitation and hygiene in the in the project area to some extent.
- It is difficult to say any thing about the policy level influence of the project by it own but with the collective efforts of the civil society Integrated Water and Sanitation Management and special provision on Suitable water and sanitation systems to minimize the impact of flood on the communities; especially on women and children are included in the Draft 2 of State Water Policy, March 2010
- Interface meetings were organized among community volunteers and block level officials were organized and list of the trained village volunteers on preparedness and emergency relief has been handed over so they can be contacted at the time of need.

CHALLENGES AND LEARNING

- **Mobility vis-à-vis Vulnerability**

Entire area is highly vulnerable to recurring flood and the challenge was to reach to un-reached and mobility in the most vulnerable areas was very difficult. The coverage was increased gradually to reach to most difficult areas.

- **Service Delivery vis-à-vis Sustainability**

Delivery of the services in terms of numbers was much easier as compare to develop community awareness for utilization and its importance for reducing vulnerability. Realization of the problems and collective efforts for finding solutions and owning the solutions by the community was the real challenge. Sustainability is a dynamic process and it requires continuity in the efforts. Realization of the sense of sustainability was one of key challenge of community education process.

- **Resource Constrains vis-à-vis Community Expectations**

The intervention was primarily focused on demonstrative model building for emergency preparedness focused on WASH in few villages of five flood prone districts of the north Bihar. IDF and WaterAid both are not specialist emergency response agencies thus the conceptualization was based on doing – learning – doing. Initially there was an obvious mental block related to how community will take entire intervention and then how it take it forward but the effectiveness became visible after its effective utilization and handling demand for creation of more such community toilet and handpump became difficult. At one side community demand may be consider as sign of achievement about the functioning and use but at other catering of such demand in a small demonstrative project is difficult.

QUANTITATIVE AND QUALITATIVE ACHIEVEMENTS - Idf-Wateraid Consolidated Activities

Sr.	Activity	Darbhnga	Madhubani	Muzaffarpur	Samastipur	Sitamadhi	Total
1.	Community Toilet Constructed	11	12	13	12	13	61
2.	Hand pump Installed	08	09	11	06	13	47
3.	Resource Kit provided to the community	44	48	52	48	52	244
4.	Water Tank provided in school and comnty	07	08	08	10	09	42
5.	Tarpaulin to the community	44	48	52	52	75	269
6.	Water filter given in the schools and community	11	11	12	11	12	57
7.	Life Jacket to the voluenteers	07	08	08	07	10	40
8.	Wall Painting	22	22	24	22	24	114
9.	Trained Volunteers	44	44	48	44	48	228

Project - 13

Name of the Project	:	Promoting Sustainable Sanitation in Rural India
Supporting Agency	:	GSF-NRMC
Project Coordinator	:	Baidhyanath Datta
Starting date	:	January 2012
Coverage	:	1 Districts (Seraikela) in 9 Blocks in 136 Panchayats
Direct	:	1063485 Total District Population
Staffs :		1 Project Manager, 5 Block Coordinators & 12 cluster coordinators

BACKGROUND

Promoting Sustainable sanitation in Rural India is highly ambitious and promising project in sanitation sector for the nation. This project extending adequate scope to deliver context specific innovative feasible IEC and BCC package to enhance require level of awareness among the population to achieve sustainable sanitation practice. Achieving ODF status at scale in stipulated timeframe is require very strategic, structured and phase wise layering on of gamut of activities to promote awareness and demand of population for improved sanitation practice.

Seraikella-Kharsawan district comprises of 9 blocks and 136 Panchayat. There are 1118 revenue village officially reported in this district are situated in very scattered geographic area. Majority of population of this district belongs to Oriya origin. Oriya and Bengali are two major prevalent languages speak and understand by the inhabitants of this district. The minimum basic infrastructure facility are lacking in district level after passing of one decade. Population of this area are little conservative and believe in Rajgharan system and district is internationally reputed due to CHAW ART.

Considering high prevalence of all traditional socio-cultural factors, IDF proposed to implement PSSIRI project at Seraikella in consortium partnership mode with local NGO to support pace of implementation with differential approach based on contextual evidence based intervention.

IDF –strategically followed 5-D Approaches’ since inception of project operation. All the local partners well communicated about the final shape and budget of the projects to DEVELOP a common understanding for coordinated project implementation. A common understanding also develop on Geographic allocation and phase wise involvement of the various partners based on the technical proposal. Detailing of activities along with phase wise layering of various activities as when require also DESIGNED in the partners meeting. Logical frameworks in tandem with integrating require number of Panchayat in commensurate with govt. Priorities to DEMONSTRATE result also defined in design part. DCUMENTATION and DISSAMINATION of success and failure of all critical activities with emphasis of highlighting any facilitating factors for learning unanimously considered part and parcel of the project IMPLEMENTATION.

OBJECTIVES:

- Promoting Open Defecation Free Villages
- Towards community level awareness generation & demand creation
- Towards promoting adoption of improved hygiene behaviour

ACTIVITIES

Selection and positioning of project staff:

All core staff of IDF as Programme manager, Community mobiliser were recruited and in place by March2012. IEC expert cum hygiene educator also identified as per requirement of

the project and he is in the process to formally resign from current organisation. Process of selection of accountant was in process expect to finalise and facilitate to join by April 2012. All field level staff of IDF, Lokhit and Shramjivi Unnyan as 03 block coordinator , 06 cluster coordinator were recruited and initiated field level work from 2nd week of Feb 2012. The status of staff position by the end of March 12 was as follows:

Geographical Data Base:

IDF put intensive effort to collect comprehensive information of geographic area. This geographic information comprises 9 blocks comprehensive data base block , Panchayat , village and target of APL & BPL for IHHL along with coverage of IHHL achieved by the govt. for BPL till date . Lead agency also finalised and oriented all field staff to use survey format to develop village as well family data base. This format also ensures collection of critical information regarding institutional sanitation facility along with use and maintenance of the same facility by each villager.

Pre-Triggering Exercise

Pre-triggering exercise is a normal and simple action carries by all other development



projects to intervene in the actual field of operation for implementation. But this activity played crucial role for sanitation project where CLTS considered as life line activity to promoting mass awareness among community by creating resentment. There is often chance to hurt sentiment of the community during CLTS exercise to link various social issues prevails in the society and any particular community. Strong rapport with community is highly desirable to tackle any **awkward** situation may arise during CLTS. On other hand few village volunteers

also requires to identify from each of the tola of the village to obtain support to gather community at a common place for CLTS. Those village volunteer may support for follow up action. Organisation judiciously selecting those village volunteers in consultation with village resources person to assign responsibility of follow up of progress of ODF development process in future. In 2nd quarter targeted number of quality pre-triggering exercise activities performed successfully with little deviation in number. This deviation also occurred due to onset of monsoon and people engagement in field in mono crop area.

Community Led triaging system

CLTS considered core/foundation activity of PSSIRI, GSF – project. CLTS comprises three core components. Pre triggering action, Triggering (Stimulation and gain consent), Post triggering action (Follow up). CLTS have immense of potential to achieve desire result in Sanitation projects through quality implementation of each component of CLTS. In Village triggering process facilitator often put effort to sensitize and stimulate thought process of whole community towards desirable



sanitation behaviour so that community took challenges to ensure adoption of feasible behaviour by entire community. IDF successfully completed 27 quality village triggering activities in one quarter against tentatively plan for 30 CLTS. Roughly 10 villages identified out of 27 villages for consistent follow up action and monitoring to develop ODF village. The date wise CLTS happened in various locatioun of operation villages.

IEC Activities:

(a) All the development players engaged in the sanitation sector highly aware about role of IEC to promote awareness demand in the community accordingly kept in the programming principle to achieve desire result. IDF also plan and identified entire critical site for wall writing for 06 Panchayat taken in the quarter first as per yearly action plan. Quotation also invited and block wise painter also finalised by till March12. Process of shorting of Slogan and painting dispenses



sanitation message fully match with each area specific socio-economic and cultural factors is going on. Expected to complete all site wall writing for 06 Panchayat by April12.

- (b) Required number of Schools also identified for 06 Panchayat till March12 to organise grand school rallies in the month of April12. Necessary process as obtaining verbal consent regarding dates from school authority accordingly formal communication to district authority is in process to organise the rallies in the month of April2012.
- (c) There are few strategic site tentatively chose by the IDF and partners and waiting for inputs of IEC cum hygiene educator to decide real activities need to finalise and mode delivery of action for hygiene camp. Expected to finalise by 3rd week of April12.

Community Follow up Action

Quality of follow up in community lead sanitation projects decided future of ODF development. Because community agreed for debarred open defecation on the day of CLTS exercise forgets very next day. Repeated follow up and consistent reminder their commitment on the day of CLTS only may ensure initiation of community to entails arrangement for safe disposal of human excreta. IDF put real effort for follow up since inception . Follow up is the most monotonous and time consuming activity in the whole project concept of PSSIRI. IDF also faced lot of constrained to maintain desire pace of follow up along with organising plan CLTS. Idea of keeping some locally available resources person at the same village is gradually evolve with passage of time and maturity of programme implementation. IDF is in the process to identify those resources for organising orientation on IPC and follow up to ensure rigorous follow up at the village level follows by each of CLTS activities. Organisations already identify few potential villages to put uninterrupted follow to develop ODF villages.

Project -14

Project Title	:	Child Centred Community Development Program
Project Coordinator	:	Mr. Tapan Kumar Ball/Mr. Rananjay Rai
Funder/Support Agency	:	Plan India
Starting date of the Project	:	August 2008
Coverage	:	District- Vaishali. 22 Villages of Rajapakar Block
Population (Direct)	:	2150 children
Population (Indirect)	:	67784
Persons involved	:	1 Project Manager, 4Project Coordinator, 16 FLWs

BACKGROUND

CCCD Project is a long-term project focusing holistic development of child in their right prospective through its community development intervention with a major aspect of sponsorship for well being of children. This is 4th year of program intervention with deprived section of the 22 communities. To address holistic approach and total development of a child, the project intervene through six clear-cut defined domain with specific purpose lead to the goal of the project.

Children's or adolescents' participation in work that does not affect their health and personal development or interfere with their schooling is generally regarded as being something positive. This includes activities such as helping their parents around the home, assisting in a family business or earning pocket money outside school hours and during school holidays. These kinds of activities contribute to children's development and to the welfare of their families; their childhood, their potential and their dignity, and that is harmful to physical and mental development. It refers to work that

- is mentally, physically, socially or morally dangerous and harmful to children; and
- interferes with their schooling by:
 - depriving them of the opportunity to attend school;
 - obliging them to leave school prematurely; or
 - requiring them to attempt to combine school attendance with excessively long and heavy work."

SCOPE OF THE PROJECT

The CPU- Patna intends to address the child Rights issues of Bihar across its operational areas by implementing rights based programs. As a right based child centered organization it would like to influence policy at state, district & local level considering specific strength of each region. In order to touch every child, it requires a systematic planning, deeper understanding & proper dissemination of messages in the communities and households with the involvement & supports of all the stakeholders. Thus CPU-Patna sees its role as an indispensable actor at the state, districts, block and the community level, & hopes to address the child protection issues by capacitating partner staff, various stakeholders and communities.

Domain 1: Child Participation:

GOAL:

1. To build capacity of children and youth, particularly girls and women, to organize and express themselves as active citizens.
2. Providing space for children to monitor the implementation of child rights programming by government and NGOs and recommendations of the UN Committee on CRC.

3. Create an enabling environment for children's participation at all levels through aptitude and attitudinal change in duty bearers.

ACTIVITIES AND OUTPUT

1. 2 units of Capacity building of Child club representatives on different child media skills - total 70 youths were oriented.
2. 22 units of Consulting with children on Plan India programs such as sharing the project information, plan of action and its indicators- total 662 Stakeholders were capacitated.
3. 11 units of Awareness campaign on child rights, child protection and child participation - 333 community members have taken part.
4. 12 units of Interface meeting of CBOs, PRIs, Duty bearers, child and youth clubs at village level to review the child rights situation and achievements-366 participants from 12 village have taken part.
5. Personality development skills training at school level for school going - total 436 students were oriented.
6. Training the youth clubs on political systems and their democratic rights to vote at village level— total 673 participants oriented.
7. 07 units of Child social audit of PDS / MNREGA / MDM / Girls cycle yojna / Kanya suraksha Yojana / Janani Suraksha Yojana / BRGF (Panchayat funds for village development) / school development fund -total 233 villagers trained.
8. 05 units of Sensitization and capacity building of duty bearers on UNCRC and Child participation at block level- -total 174 participants were oriented.

KEY FINDINGS

- Children are aware of their four rights – *Right to Participation, Right to Protection, Right to Survival, Right to Development*
- Total 22 Child clubs and 21 youth clubs have been formed and regular meeting is happening.
- Through various trainings they are now feeling confident in discussions, and expressing their views at the family and village level. They are also teaching their peers about leadership and communication skills. The children's club members are working together and helping other children to develop their potential.
- The children are playing important role in spreading awareness on child rights, importance of education, negative consequences of early child marriage, child labour and child abuse, health & sanitation etc. through cartoon making, plays, rallies and slogan writing. Quote: "Hum log ke aganwadi centre per 2 Kg 500 gm chawal and 1kg daal ke jagah 1 kg 500 gm chawal or ½ kg daal deti hai, isko hum cartoon ke madhyam se bana rahe hai aur jaldi hi sab ko dikhayenge" (*Radha Kumari member of child club from village-Bakhrisupyan, Rajapaker, Vaishali*)
- 40 children have been trained on media tool and 03 editions of newspapers has been published by IDF that contains news items and articles developed by the children from IDF-Plan intervention area.
- PRI member/Community members trained on UNCRC and RTI Act. The children's groups members will work together and help their peers in developing their potentialities. Parents and communities are sensitized on child rights. Parents allowing their children to come out of house / village as needed and to participate in the activities being organized by Plan / partners for children.
- 12 Interface meeting of CBOs, PRIs, Duty bearers, child and youth clubs at village level

to review the child rights situation and achievements.

- 183 Children have got training on Child social audit of PDS / MNREGA / MDM / Girls cycle yojna / Kanya suraksha Yojana / Janani Suraksha Yojana / BRGF (Panchayat funds for village development) / school development fund
- Training were given to 673 members of 21 youth clubs on political systems and their democratic rights to vote at village level.
- Women members especially SHG Members are well aware on the importance and now they are encouraging their children to participate in different forums.
- Children expressed very happily that now their parents involve them in the family matter. That they are now heard at home and in school as well. *“Ghar mein function tha to papa puchhe kaisa kapda kharidna chahati ho, per pahle aisa koi nai puchhta tha”* (Girl Child club, Village-Bhalui, Rajapaker)
- Children from communities have been provided with spaces and forums to put forward their views. This has been appreciated by all the stakeholders including community and state level officials and can be regarded as a best practice for ensuring active engagement of children
- Sports Kit has been distributed in 22 Child Club, 21 youth club

Domain 2: Child Protection

GOAL:

1. To improve knowledge, attitude and practice (KAP) among children and parents on child abuse, female foeticide, child marriages and gender-based violence.
2. To improve child protection legislation and policies.
3. To promote community-based child protection and its effective integration into the state/national child protection system.

ACTIVITIES AND OUTPUT

1. 1 Unit of Strengthen Coalitions: Supporting and Strengthening Child Rights Coalition group at district, state and national level- .
2. 5 units of Carry out joint monitoring and review of project performance with government officials, the media, civil societies, and communities-
3. 1 units of Formation and Strengthening of Child Protection Committees at Village level –
4. 22 unit of Awareness raising of parents, community members, and neighborhood on issues related to child Protection at village Level-
5. Organizing interface meeting between various micro systems at community level (duty bearers:
6. 22 units of Conduct awareness-raising events in project villages on Child Protection issues including child labour, child trafficking, corporal punishment, and child marriage as well as on government child protection schemes and systems
7. 22 units of Capacity building of children in community, schools, institutions and children clubs on issues related to child protection and related reporting mechanisms



8. Capacity building of Plan staff, PU staff and volunteers on issues like physical, and sexual abuse, child marriage, child labor, female feticide and birth registration, related legislations and protection systems at village and district level :
9. 22 units of Awareness raising of parents, community members, and neighborhood on issues related to child protection
10. Conduct awareness-raising events in project villages: "Form and/or Strengthen District Child Protection Units
11. Functions of Child Protection Committees Mapping vulnerable children in their villages/areas

Domain 3: Disaster Risk Reduction in vulnerable communities

ACTIVITIES AND OUTPUT

1. 22 units of Child centered Participatory Vulnerability Analysis, .
2. 1 unit of Formation and capacity building of the school based disaster preparedness committee.
3. 1 unit of Training and capacity building of Disaster preparedness committees/Emergency Response Team on child protect
4. 1 unit of training to volunteers at the community / school level and initiates their training towards development of a Emergency Response Team.
5. 1 Unit of Orientation and capacity building of the existing community based organizations on first aid, disaster preparedness drills and preparation of contingency plans.
6. Allocation of First Aid and Disaster Preparedness kits for trainings and mock-drills both at community and school level

KEY FINDINGS:

- The district is adjoined to the Muzaffarpur and Samastipur which is a flood prone area and apart from that in the south river Ganges flows and in the west river Gandak is there which makes is more vulnerable to the flood. Some of the area is heavily affected by flood.
- The topography of the block is such that it is in the low line which makes is vulnerable as the water logging is the major concern in the Rajapakar block.
- Apart from the flood, fire plays devastating role in the disaster.
- There has been huge loss due to fire as sometimes standing crops has been damaged, houses has been burnt and loss of cattle.
- The DRR committee has been formed but need to be capacitated on the disaster preparedness and disaster mitigation
- The government benefit is for the rich farmers who have lot of lands and who have their registry in their names. The small farmers do not get benefits as they are the on the share cropping basis and have no control over the land.

Domain 4: ECCD

ECCD Early Childhood Care and Development essentially looks after the physical and mental of the child within the age group of 0-6 years making the village level ICDS (AWC) as the centre point. Community Counselor (40) deployed made their effort through directly extending their support to their corresponding 40 identified AWC spread across entire 22

project villages. Home visit with PW/LM to counsel of mother and child health care (RI, nutritious food/services, breast feeding, pre/post natal care, safe delivery) and sharing in community meeting and giving feedback to concerned AWW was quite effective and helped a lot.

GOAL:

1. To improve early childhood care and development of children between 0-6 years at home and in centres by strengthening the capacities of the government and communities.
2. To facilitate all girls and boys to complete 10 years of quality education in schools by improving access to formal education and increase their transition into higher education by enhancing the classroom transactions.

ACTIVITIES AND OUTPUT

1. 4 units of Joint training of Health workers, Nurses and ICDS worker
2. Birth registration camp was organized in Jafarpatti panchayat of Rajapakar block. 122 community peoples (Male-64 & Female-58) was present in this event.
3. *Street plays on Early childhood care & development* was conducted in 22 community of Rajapakar block.
4. *1 Unit of Annual district level planning and sharing workshop*
5. 5 units of Training of community groups on nutrition in each village:
6. 5 unit of one day consultations with community groups regarding benefits of ICDS schemes
7. 2 units of Quarterly Liaison Meeting was organized with CDPO, MOIC, BHM, MOs and LS
8. 2 units of Training of ICDS workers on joyful pre-school education (3 days):
9. 1 unit of Training of community counsellor on ECCD (5days residential)
10. 2 units of ECCD byscope at community level was organized.
11. Mobile exhibition on bullock cart



Domain 5 : Strengthening of MFI & Food Security (HES)

GOAL:

1. To increase children and young people's access to food to meet their dietary needs for an active and healthy life.
2. To promote access to formal financial services (savings, credits, insurance, and remittance) especially for women.
3. To prepare young men and women to get decent and formal employment or self-employment through market oriented vocational, business and life skills training.

ACTIVITIES AND OUTPUT

1. 7 units of 2 days Training for group leaders of SHGs (3 from each group) on CBMF, cluster and federation concepts at partner level
2. 4 units of training program to build capacities of the partner staff, adolescent groups and frontline staff on nutrition education
3. 22 units of Awareness generation camp at village level on food and nutrition in light of Mal nutrition and its impact-
4. 1 unit of financial literacy classes for SHG members at village level was organize
5. 1 Unit of financial literacy classes for adolescent children groups was organized at village level
6. 1 unit on 2 days capacity building program on grain bank management:
7. 1 unit of orientation on to support the Panchayat to develop work plan –
8. Grading of SHG: Grading of SHG made with 12 groups.



KEY FINDING;

- The major source of livelihood is agriculture and brick kiln in the area. There is dearth of employment in the area due to which majority of the youth migrate to nearby cities or to the major states like Punjab, Haryana and West Bengal.
- The group is new in the area and still they are in the transformation stage, the group mgmt and group accounting system is being practiced. Some of the members have taken initiatives to start new business and money is being rolled within the group.
- Malti Devi said that *“after we form the samiti we at least know how to sit together and practice thrift and credit in our group,*
- The group has been trained during their monthly meeting on the group management norms inspired by the other programs of the IDF at the Rajapakar. The groups have started inter loaning among themselves.
- The members of the groups actively take part in the other activities conducted under the plan project. Many of the members have attended training on health, child education, workshop, orientations, etc.
- The federation has been formed by the IDF with the support of the LWR in the Rajapakar, the group formed under the plan would be merged with the federation of the IDF and would provide the broader platform.
- The SHG has been the good platform to provide the necessary and detail information on the activities going around the village. The group has been very useful as they have lot of information regarding the sponsorship child, health related issues, disaster, child protection, and other issues related to the plan interventions.

Domain 6: Maternal & Child Health

GOAL

1. To improve maternal health by enabling women to access knowledge and quality health services.
2. To improve nutritional status of malnourished children and promote child health by promoting community response.
3. To increase access to information and capacity building to exhibit responsive health seeking behaviour and system strengthen mechanism for sexual and reproductive health.
4. To increase access for children and their families affected by HIV to care and protection from stigma and discrimination.

ACTIVITIES AND OUTPUT

1. 15 ANC camps in collaboration with
2. 19 units of Immunization camps at sector level was organized in collaboration with local health institute
3. 2 units of One day training of ANM, AWW, ECCD teachers & ASHA on child care , infant feeding & treatment of ARI at block level
4. Demonstration of complementary food at Block level
5. 5 units of Training of eligible couples & adolescents for familiarizing the availability & use of different family planning method at sector level was conducted.
6. Two days training of mothers on safe delivery, pregnancy care & infant feeding practices & treatment of diarrhea
7. Two units of training (2 days) for 61 mothers
8. Two days training of mothers on safe delivery, pregnancy care & ii) infant feeding practices & treatment of diarrhea and 2 Days Training



KEY FINDINGS:

- 158 Newly married, pregnant, lactating women & mothers has got training on safe delivery, pregnancy care & infant feeding practices & treatment of diarrhea.
- The community has now become aware of the institutional delivery.
- 60 ANM, AWW, ECCD teachers & ASHA has been trained on child care and infant feeding. AWWs facilitate the women on the need and importance of infant feeding and child care.
- AWW has received training on HIV-AIDS. **Quote-**“Garwati mahilao ko batate hai kis abhi test ke sath HIV ka bhi test kerwana jaruri hota hai, lekin sirf mahila ko hi bolte hai per ye purush nahi karwate hain. – (AWW, Kalyanpur)
- The organization with its own effort has organized health screening camps, immunization camps, awareness camps etc.
- The communities have admitted that this has helped them in identifying the source point where the children are to be immunized. The community also understood the need of immunization for the children and pregnant women. They are now visiting the nearby

center for the immunization. They also have the immunization schedule of the children till they attain the age of 5 years.

- The role of the ASHA, ANM and Anganwadi has been very effective in making the immunization and institutional delivery a success. Quote: “Sabhi mahila prasv keliye aspatal(hospital) hi jati hai or agar kisi ko emergency mein gaon mein hi karana pada to wo surkshit prasav hi karati hai” – (Asha Devi, AWW, Kalyanpur, Rajapaker)
- Adolescent girls also discuss their problem with their mother and also with AWWs and getting proper suggestion from them. They are also getting Iron tablets from AWC.
- Children are well aware on connection between health and sanitation. “Swasth rahne keliye saaf rahna jaruri hai. Saaf pani, Saaf aur pausti ckhana, saaf kapde, saaf vatavarn, savyam ko saaf rakhne se hi hum sawasth evam khus rah sakte hai” – (Child Club Bhalui)
- The health screening camps have helped them in making them conscious of their person health. They are now visiting the government hospitals for services.
- Strong liaison with the health department by the organization has ensured the availability of medicine for the patient.
- The community accepts that the organization has helped then in realizing the importance of immunization and keeping health in the priority sector. In the recent past one-year health camp has been organized in the distant and remote areas that is far from the PHC.
- Due to non-availability of pediatric services the screening camp for the children has not been held by the health department. The need was felt to organize camp in the remote areas, which has surely helped in identifying the health concerns of the children. It was found that the worms affected most of the children. De-worming campaign was conducted in the community especially to the children. The other issues, which came up during the campaign, were of the anemia, eye-sight, skin diseases, etc. The In-charge PHC were informed on the issues and has assured the community on taking necessary actions in the future.

Domain 7: Quality Education

ACTIVITIES AND OUTPUT

1. *Nukkad Natak on Right to Education and Learn Without Fear*
2. *Exhibition by children on violence free schools and quality education*
3. 4 units of orientation of VECS/SMCs on their role and responsibilities:
4. Quarterly planning and Review meeting with VEC, SMC, Teachers and children:
5. Visioning Exercise with PRI/SPTA, PTA regarding education:
6. Visioning exercise for teacher’s headmasters, ICDS, PRI/SPTA, PTA and Partner staff on model school carried out.
7. 2 units were organized on consultation with teachers, students, and Community / parent representatives on Child protection in schools:
8. Consultation on child protection issues at schools and community level :
9. PRI, SMC/ Education Department members sensitization workshop on education for all



at/ Learn without Fear/ Promotion of Girl Education at Block Level

10. District level seminar with SSA, Education department, PRI, ICDS, Children and other stake holders for one day on Learn without Fear Campaign
11. Training of teachers and headmasters on positive discipline manual at block level
12. Training on Positive Discipline & Learn without Fear to Project Staff
13. SIKSHA JANKARI MELA
14. Celebration of annual Maths Mela, Exhibitions, Annual Day etc.
15. Follow up Training on LWF & Community Based Monitoring System at School level
16. Follow up Training on RTE/Education Schemes at Partner level
17. Training of staff on Positive Disciplining manual at PU level (TOT)
18. Capacity Building of PRI, SMC, PTA on RTE & other Government schemes
19. Children's IEC campaigning on Education at 25 schools:
20. Inter school competition in 25 Schools including children club Members and other students of the schools



Key findings

- Children are attending school on a regular basis as their parents have begun taking interest in their child's education on realizing its vitality. But still some children from lower community are not attending the school.
- Teachers and headmaster of school acknowledge the increased interest as participation of parents in the academics of their children to IDF-Plan's intervention and (Students Teachers Parents Associations). As per the MIS there are 38 VEC in the all the 22 villages. Regular interaction of teachers and parents has facilitated improvements in the children's education. However, in certain communities the Village Education Committee is either defunct or dormant.
- On interaction with headmaster & teachers, it was revealed that they have participated in trainings on Learn without fear, positive discipline, and library management by IDF-Plan and have understood the importance of violence free environment in schools, tried to ensure that every child of school going age in the area be in school . However, they still feel that it will take some time to make their school completely violence free.
- Few of the remarks during the APPR consultation comes out like: (i) *Puri kosis kerte hai ki bacche ko nai mare lekin kabhi kabhi chhadi ka istemal kerna pad jata hai*, (ii) *Maa-Baap apne bachcho ko school to bhejte hai per ye nai dekhte ki bachcha school pahuncha ya nai* – (Vinod Kumar, Principal, Rajkiya Primary School Madanpur Milky, Rajapaker, Vaishali)
- The staffs trained on positive discipline and learn without fear have been continually advocating for positive discipline and violence free environment to the community and stakeholders at the district level.

- There is a change in perception amidst the parents, teachers, government officials at the block and district level i.e. child protection is very much a necessity and that by creating a violence free environment at home and in schools will ensure holistic development of the child.
- Almost every school has “Bal Sansad” which is involved in activities related to child & school development.
- There has been increased awareness amidst the varied stakeholders on issue of quality education, promoting girls education, learn without fear, positive discipline, violence free school and community based monitoring system with different stakeholder in the project area through IDF-Plan organized seminars, workshops, rallies, exhibitions, nukkad natak, competitions, Shiksha Mela, meetings etc to sensitize the community as whole .

Domain 8: Healthy Environment (WES):

GOAL

1. All families have improved hygienic practices including disposal of human and other waste.
2. To enable children and communities to access safe drinking water supply by making them aware about government schemes, policies and provisions.
3. To facilitate the availability of water and sanitation facilities in preschool, primary and secondary school for all girls and boys.

ACTIVITIES AND OUTPUT

1. One day capacity building program on water and sanitation with teaching, non-teaching staff,
2. Training on use of water testing kit to children group members
3. Celebration of world water Day was organised to make aware about Importance of Safe water and saving of water the community of the intervention area.
4. 27 units of one day training on hygiene promotion techniques with children:
5. Awareness generation training
6. Community consultation
7. Block level workshop on importance of safe drinking water
8. Awareness generation training
9. Two days Capacity building and training
10. One unit of consultation meeting with a total 34 School teachers, SMC members, Children club members, Village water & sanitation committee members were organized.

KEY FINDINGS

- Children, SHG members in particular and Community as a whole aware on importance of safe drinking water and are trying to practice it at their own level.
- Children have learnt hygiene promotion techniques. They are very vocal and able to explain the 7 dimensions of healthy hygiene and sanitation.
- Children are explaining proper hand washing techniques.
- Children are aware and also practicing the uses of bleaching powder and they also want that now villagers should also learn to practice it.

- Water logging is a major problem because IDF intervention area comes under low land.
Quote:“ Barsaat ke din mein bahut dikkat hota hai, pani lag jatahai, sauchalay bhar jata hai, aur use chapakal ka pani bhi kharab ho jata hai” – (SHG member, BakhariSupyan, Rajapaker)
- Construction of high raise new bore well / hand pumps in the needy area that would facilitate access of portable drinking water
- VWSC is not functional in many villages
- Training has been given on use of water testing kit to children group members.
- Usage of the household toilet is very low and the most often the toilet is not functional.
- The user friendly technology should be introduced so that community can benefit out of it.
- The community is well aware of the government schemes but it is not accessible to the people.
- It was also found that, the social audit or any form of assessment has not been undertaken by the government so there has been no participation in the audit/monitoring.
- The community also said that Bhalui has been declared Nirmal gram panchayat but still there has been increase in the household in the last 2 years but the toilet construction is not undergoing as per the demand.
- Nirmala Devi said that now a days we have become aware of the diarrhea and we take precautionary measure when there is a outbreak of diarrhea. Even we rush to the ASHA, Aanganwadi Centre or to the nearest Health sub-centre where we get the ORS packet by the health worker.
- Kusuma Devi said that there needs to be more capacity building program and more work to be done on the water and sanitation issues. Our village is not clean, there are cases of Kala-Azar and malaria due to lack of awareness among the people

ACHIEVEMENTS AND CHALLENGES

- ✓ Child club is a platform created for children to show their potentialities, the trained children are able to express their views through cartoon making. But very few children are able to express themselves; few children have hesitation as they required more training on personality development skill.
- ✓ Interface meeting should organize on village level. The children’s groups members will works together and help their peers in developing their potentialities
- ✓ Need to strengthen the child group
- ✓ Materials are provided at AWC but some AWW don’t know the use of dice game & puzzle game. A complete orientation of the material supported by PLAN should be given so that proper orientation should be given at the field level.
- ✓ The PLAN India should also consider taking view of the partners on the material support to the Aanganwadi centre as it should be according to the local needs and acceptability.
- ✓ AWWs are taking care of the child at centre but need exclusive training on better care of child because in one small centre they have to attend 40 children of different age group.
- ✓ There should be liaison with the government at the state level for opening up of new AWC where the population coverage is higher.
- ✓ In some villages there are no lots of space in which children play with all the sports materials provided by IDF-PLAN so all the ICDS centre should run in their own building, for which approach from the PLAN state office is required at the earliest.
- ✓ 783 members have been associated through the 63 Self Help Group
- ✓ 22 SHG have opened their bank account in regional rural bank/nationalized bank.

- ✓ Total amount generated through saving is Rs 442930 by the 63 SHG.
- ✓ Total amount inter loaned by these SHG is Rs 133200 which is 30 % of the total saving.
- ✓ Altogether 5 Cluster has been formed.
- ✓ The leaders have been oriented on the formation of Federation and would be linked with the federation formed by the organization.
- ✓ SHG women also ensure that their children are also attending the school on regular basis and get benefited, they feel the importance of being literate, and most of them now are stopped to give thumb impression.
- ✓ Children clubs are very vocal and active. Few child club members are trying to integrate others child to their club. They have received and participate in many activities/trainings organized by IDF-Plan. They are also playing crucial role to integrate children from the school those who are out of schools. They need more trainings on personality development,
- ✓ Wall paintings, hoardings training have helped children and some parents, SHG members, teachers to know about the Right to Education Act, violence free environment, as compared to the last year, there is an increase in the awareness level as well as most of them are practicing it at some level. .
- ✓ Lack of knowledge and awareness on the health issues
- ✓ Demand and supply gap between the service provider and receiver
- ✓ Poor health planning in respect to block health action plan.
- ✓ Village Health and Sanitation committee is not functional at the Panchayat level.
- ✓ Communities especially mother become conscious of Health related issues concerning Children and women.
- ✓ Training to service delivery personnel TBA, ANM and ICDS improves the safe delivery ratio than before. AWW ensuring 95 % institutional delivery, few deliveries has happened in the village but that is also a safe delivery”.
- ✓ Community members became aware about health facilities and thus accessibility to these services becomes easy for vulnerable section of People.
- ✓ Through discussion at different forums complete immunization of new born and children at early age (12-23 months) ensured.
- ✓ Immunization of pregnant women has also improved. SHG women have ensured that every woman is following the growth chart and only prefer institutional delivery.
- ✓ Knowledge of Community members especially of adolescent youth increased on STI/HIV/Aids and in other health related issues.
- ✓ Through capacity building of staffs of all level there is uniformity in programme quality delivery.
- ✓ Through constant liaison with health officials, Convergence ratio of Health benefits increased.
- ✓ Newly married, pregnant, lactating women & mothers has got training on safe delivery, pregnancy care & infant feeding practices.
- ✓ After getting training on Diarrhea management community is ready to handle this problem. Even a child knows the immediate action to take, how to prepare ORS at home.
- ✓ ANM, AWW, ECCD teachers & ASHA has been trained on child care & infant feeding
- ✓ Capacity building of CDPO, ICDS supervisors, MO, select ANM, LHVs & AWWs on addressing child malnutrition & familiarizing importance of growth monitoring chart at block level

- ✓ The organization with its own effort has organized health screening camps, immunization camps, awareness camps etc.
- ✓ The communities have admitted that this has helped them in identifying the source point where the children are to be immunized.
- ✓ The community also understood the need of immunization for the children and pregnant women. They are now visiting the nearby center for the immunization. They also have the immunization schedule of the children till they attain the age of 5 years.
- ✓ Adolescent girls also discuss their problem with their mother and also with AWWs and getting proper suggestion from them. They are also getting Iron tablets from AWC.
- ✓ The health screening camps have helped them in making them conscious of their person health. They are now visiting the government hospitals for services.
- ✓ Strong liaison with the health department by the organization has ensured the availability of medicine for the patient.
- ✓ The community accepts that the organization has helped then in realizing the importance of immunization and keeping health in the priority sector. In the recent past one-year health camp has been organized in the distant and remote areas that is far from the PHC.
- ✓ The availability of pediatric services is not available and the screening camp for the children has not been held by the government agencies. The need was felt to organize camp in the remote areas, which has surely helped in identifying the health concerns of the children. It was found that the worms affected most of the children. De-worming campaign
- ✓ Community participation in the education system is visible but needs more attention to connect all the children from school in some of the villages. Issues related to quality education of children have to be raised in the gram sabha and Panchayat.
- ✓ Village Education Committee needs to be strengthened and their meetings have to be regularized in few schools. Further, the capacity of the members of these forums has to be built and strengthened to ensure quality education.
- ✓ Orientation sessions and capacity building of children, parents and teachers have to be on a regular basis and follow up of trainings should be done at the community level
- ✓ More orientation on Right to Education and violence free environment in schools should be done and also document success stories related to the same
- ✓ The focus should be on few excluded communities as there is a need to mainstream their children to school.
- ✓ Children are attending school on a regular basis as their parents have begun taking interest in their child's education on realizing its vitality.
- ✓ Teachers and headmaster of school acknowledge the increased interest as participation of parents in the academics of their children to IDF-Plan's interventions.
- ✓ Schools are running on time it prescribed time schedule, but few teachers and schools are still didn't realize the importance of time.
- ✓ Child Club and youth clubs are playing an important role to re-unite the children who has been dropouts and not interested in to join the school. Quote: Lalita and Sunder school nai jana chahti thi, per hum logo ke baar baar bolne or samjhane pe ab school jane lagi hai" – (*Child Club, Madanpur Milky, Rajapaker*)
- ✓ Teachers and students are well aware of violence free environment and also understand that there is no use of any type of punishment is required in the best interest of a child.
- ✓ All the member of 22 child clubs are well aware of their four rights and they mean it.

- ✓ After receiving training from IDF Plan a Learn without fear, positive discipline teachers are also trying to maintain it, but in some cases they feel helpless without using stick.
- ✓ Girl child education has been promoted in the community. Parents are ensuring that they are giving equal importance to girl child without any discrimination.
- ✓ Increased awareness among the mothers, parents and community of marginalized communities on importance of education especially girls education and allow them for the higher education.
- ✓ Increase in children's enrolment and retention in primary and upper primary school especially girls.
- ✓ Children able to influence their peers about importance of education and positive discipline.
- ✓ The teachers realize the rights of children and promote child friendly environment in the schools.
- ✓ Children express their views about school in front of VEC / PRIs.
- ✓ The PRIs and community demand to promote government schools
- ✓ Community has information and understanding ensure education in their villages.
- ✓ 500 community members children were aware on hand washing practices
- ✓ 800 school children were aware on hygiene practices
- ✓ 254 members of the SHG and PRI were made aware on safe drinking water
- ✓ 20 high raise hand pumps were installed
- ✓ Nearly 1000 families have now access to safe drinking water
- ✓ Separate plans were prepared at the block level on the minimum standards on Water Sanitation and Hygiene for each of the school.
- ✓ 265 children took out rally on World Toilet Day to make the community aware on the usage of Toilet and to de-motivate open defecation.
- ✓ 305 children, members of the SHG and PRI representative participated on the event of World Water Day to spread the message "Paani Bachao".

CASE STUDY

Case 1:

Name - Jyoti Kumari **Father name** Rajeev Ranjan Singh
Mother name: Rinku Devi **Name of Child Club** Chand child club
Village-Jaffarpatti

Subject - Child protection in the child right:

Jyoti Kumari member of child club attended the training of child right. The child rights issue was new to her. The trainer discussed on the child abuse and neglected abuse. After the training, Jyoti shared the training with her mother and teacher on the child rights and child abuse. The teacher was very happy to know about child rights and ask Jyoti to facilitate the training in the school for the children. At the event of Children's Day, Jyoti shared the child rights and child abuse with all the children. Her parents are also happy as she was awarded on the children's day.

Her parents also very happy to know that her daughter is awarded at children's day & they always agree to send his daughter in participate these types of training.

Case -II

NAME : **Sunila devi**

Husband name : **Rajesh rai**
Village : **Chausiwan klayanpur**
SHG NAME : **Sakhi, SHG**

Suniladevi, village - Chausiwanklayanpur is a member of Sakhi SHG . Sunila Devi decided to take a loan of RS four hundred only from the group and started a vegetable shop.

Sunila devi has two children .Her Husband is labour, but due to lack of regular work he was not able to meet day to day basic expenses . The economic condition of her family was very poor. Children were out of school .she was very helpless .people were not ready give her a loan. She joined Sakhi SHG of IDF Plan. She shared her business idea with her group member and proposed a loan for Rs 400/ to start vegetable shop. The group allowed the loan after discussing her proposal; Sunila got the amount and started her business.



Today Sunila devi Purchases Vegetable from village and sell in the village hatt . Now she is earning a handsome amount and fulfill her family daily expenses , Children are going school , The whole family is Very happy

Case Study III

Name : **KajalKumari**
Name of Village : **Baikunthpur**
Name of Child Group : **Jigyasa**

A small potential initiative of girl child for hygienic related issues

A girl named KajalKumari in a village Baikunthpur was like general girl child not aware about child centred issues especially hygienic issues. Her family members condition was more pitiable. The best thing about this girl was that she was very active and wants to do something good in future. Her family members were not interested in educating and promoting girl child.

The girl one day came and listen issues discussed in Child club meeting named Jigyngas.She ask Child club member about the group. After listening she finally approach the child group member to join her and fnallyshe joined the Jigyasa Child group.

By attending different trainings given by IDF Plan she has developed demonstrative capacity to address these issues at different forums like Seminars,Local level meetings.,She now start giving Orientation to Child group members on different sanitation related issues. She is also playing key role in Strengthening of Children group across the project area.She is playing key role in Convincing important Stakeholderesabout child cantered issues especially related to Health and Sanitation issues.Govt Officials and PRI representatives appreciated her efforts at different forums in promoting Child Centred issues.

Project -15

Name of the Project	:Behavior Change Communication (BCC) Intervention to provide information to women on Safe Abortion
Supporting Agency	: Ipas India
Project Coordinator	: Manoj Kumar
Starting date	: Dec,2010
Coverage	: 1 Districts in 5 Blocks in 266 Villages
	Direct : 126044
	Indirect : 663402 population
Staffs :	1 Project Manager, 9 Block Coordinators & 9 Supportive link worker

OBJECTIVE OF THE PROJECT:

- To promote awareness on safe abortion services with special focus on early and legal aspects of seeking abortion services. Inter-personal communications will be utilized to reach women directly and /or indirectly
- To measure the impact of this intervention over a period of time which would enable us to identify critical elements in this process and would be helpful in scaling up the same in other areas with broader geographical diversity.

BACKGROUND:

During the first phase of implementation, the interventions were focused in Danapur, Maner, Bihta, Phulwari and Sampatchak blocks of Patna District but the coverage of the target group in terms of IPC activities was acknowledged less than the desired level. Moreover, knowledge enhancement of the target group on safe abortion, its legal aspects and existing govt services also needed to be strengthened further. The findings of the evaluation study undertaken by Ipas also revealed the need of continuing the BCC interventions in the same operational area. This is why the second phase of the project was conceptualized & designed based on the felt need of the community of the area concerned.

INTRODUCTION:

The same five blocks, covered in the first phase, were considered as the operational area. Keeping in view of the experiences during first phase and considering local scenario, efforts were made to devise suitable strategy for program implementation. Since successful implementation mostly depends on wise/suitable strategy which by and large leads to expected outcome of project, the following implementation strategies were finalized and specified in the approved plan:-

- **Maintaining uniformity in conduction of IPC activity** across the villages i.e. once with all target groups during the project period.
- **Village to village coverage**, i.e., stepping in another village after covering one village for IPC meeting

- **Deployment of additional manpower** i. e. supportive link worker for support to each of the link workers to conduct meeting simultaneously.
- **Convergence with IDF-run “community leadership program”** in all intervention blocks except Danapur.

ACTIVITIES DURING THE PERIOD

Training of staff: Project staffs were imparted training on safe abortion and its technicality and legal aspects in two phases. Purpose of this training was to educate the team on technical aspects of safe abortion and how to contextually execute the program in diverse field scenario. In the First phase, Two-Day training was organised participated by PC, 9 Link workers and 1 supportive link workers, Tarun Kumar Jha, Danish Umair Khan of IPAS facilitated the training.



Phase II:

8 Supportive link workers were provided training on this phase. This training was imparted by Mr. Manoj Kumar, PC IDF-IPAS project. Mr. Tarun Kumar Jha, Mr. Samsad Alam from IPAS, as resource person, facilitated the training. The training plays instrumental in refreshing the acquired knowledge as well as providing the additional inputs for smooth handling of the BCC intervention. During training imparted by IPAS personnel there had been a detail with the project team which helped develop a clear and common understanding about the training module.



On the job training to staff and CHW: On –the- job training was given by the immediate senior or core team personnel. This helped the team earn capacity and remain updated with thematic knowledge as well as event management and sort out problems faced during the field intervention.

Develop liaison and rapport with government & non government service providers. Liaison made with Govt line departments i. e. PHC and ICDS officials in all intervention blocks. The main purpose was to apprise them about the second phase of the project and to muster mutual support in promoting safe abortions.

IPC Group Meeting :

IPC (Interpersonal Communication) meetings were organised with female within the age group of 15-45 years in 108 numbers of villages across the intervention blocks. Efforts were made to cover all women target group in one village. All meetings were organised as per the convenience of the participants.



Focus was given on importance of safe abortion, process, and local access to service beside legality of safe abortion. Kalyani Flip Chart &

games used during the IPC meeting attracted attention of the target audience and proved very interesting & lucid way of information dissemination & knowledge enhancement.

Sl. No.	Block	No. Of Villages	No. Of Meeting conducted with target group	Total Member
1	Maner	18	372	5335
2	Bihita	38	516	7038
3	Sampatchak	13	185	2287
4	Danapur	13	301	3568
5	Phulwari	26	356	4232
	Total	108	1730	22460

Details of IPC meeting

Programmatic Convergence for synergy

Convergence made with SDTT supported Community Leadership Programme in 4 blocks except Danapur. 160 CLs (4 in each of 40 panchayats) were made aware about safe abortion program with details during training conducted in CLP. Project personnel in CLP during their monthly/quarterly meeting with the CLs detail the community about safe abortion. And also the CL makes the community aware about safe abortion. Beside the CL in the respective villages cooperate to organize IPC meeting.

CHALLENGES & corresponding action to overcome

- Time taking for new staff to internalize/update with the project
- In many villages conduction of meeting proved tough due to resistance from some segments of the community which was overcome by gradual efforts
- Drop out of supportive link worker slowed the pace of work and deployment of other support worker further sped up the process
- Lack of cooperation and support of PHC in quality services pertaining to safe abortions at facility point. Medical Officers -in -charge were contacted for strengthening the service delivery
- Affluent & well off people found reluctant to participate in IPC meeting. Additional efforts were made to involve those group in meetings

LEARNING:

Learning based on ground reality was quite meaningful. Project plans to capitalize this learning to have a smooth and efficient implementation for the rest project period.

- Developing good relationship with key stakeholders at village level help sort out problems
- Close monitoring and mentoring to the supportive link workers ensured their capacity building and in turn better dissemination at the field level
- Quality reporting (monthly) by link worker/supportive link worker becomes a base for the project in follow- up, support and end evaluation
- Proper convergence proved to be effective and result based.

Financial Status of the Organization for the FY 2011-12

Receipts & Payments A/C

Receipts	Total Amount Rs.	Payments	Total Amount Rs.
To Opening Balance		By Training/Capacity Building	4269170.00
Cash in hand	92049.44	By Orientation	781916.00
Cash at Bank	59244.52	By Disaster Risk Reduction/Mitigation	444484.00
State Bank Of India, IDP Main A/c	1151671.34	By Need/Base Line Assessment/Increase Food and Income Security	239782.00
State Bank Of India C/P	8982.00	By Direct Action With Community/Community Mobilization/Cluster	1378790.00
Union Bank Of India	3924.00	By Water and sanitation	1353886.00
State Bank Of India Ranchi	221742.40	By Advocacy and Networking	141005.09
Palamu Kshetriya Gramin Bank	2648.00	By Awareness Building	5720495.00
State Bank Of India, Boring Rd, Patna	3115043.15	By Solidarity Events	297326.00
To Plan International (INDIA)	12944998.00	By Cluster Level Meeting /VLC Meeting	5622.00
To National Foundation of India	150000.00	By Project Monitoring, Evaluation and Learning ,Review Meeting	1018068.00
To Lutheran World Relief	1911667.00	By Workshop/Seminar	506492.00
To Water aid India	3275642.00	By IEC/ Material Printing	366813.00
To Oxfam India	2000000.00	By Capital Input/Revolving fund/	380590.00
To CEDPA	1005870.00	By Flood Relief	12000.00
To Gorakhpur E A Group	15000.00	By Implementation Support, Operational expenses and Administrative Cost	2207433.50
To Geneva Global	2938112.00	By Exposure Visit	304344.00
To Dan Church Aid	880708.63	By Program Support	1682366.00
To IDP - Hazipur(T.L)	1100.00	By PERSONNEL / Honorarium and Remuneration	3055664.00
To IPAS	446700.00	Salaries and Benefit	5740886.43
To UNICEF ,Patna	987000.00	By Assets (Annexure-2)	965328.00
To CAF India	1186012.00	By Bank Charges	20238.00
To Xavier Institute of Social Service (XISS)	7200000.00	By Disallowed Amount	14113.00
To Jharkhand Tribal Development Corporation	203283.00	By Payable	637991.38
To Global Sanitation Fund-M/S NR Management Consultants India Pvt Ltd	468270.00	By IDP FCRA 2009-2010	103291.00
To Donation	177000.00	By IDP Non FCRA Account	300359.00
To Membership Fee	9000.00	By Staff Welfare /FRINGE BENEFITS (PF)	109777.14
To Income Tax Department-TDS	74490.00	By Plan CCCD-Project Chaibasa	5330.00
To Oxfam-Travel Reimbursement	3183.00	By Plan CCCD-Project Vaishali	10262.74
To Photocopying	13928.00	By JTDProject	40090.00
To IDP - Main Account	129746.00	By CAF Project	89746.00
To IDP - FCRA Account	112970.17	By Oxfam India-New Delhi Balance	172960.00
To Transferred to GG Project	271505.00	Amount Refd.	400910.00
To Transferred to LWR Project	6057.00	By Loan & Advance	380268.93
To DCA Project	8145.00	By WAI	
To IPAS Project	7520.00	By Closing Balance	
To GG Project	7880.00	Cash in hand	98470.05
To IDP- Plan Chaibasa	79746.00	State Bank of India-IDP Main Account	1157087.34
To CAF Project	300359.00	State Bank of India-Patna (CLP)	3394026.00
To MNSY Project	35725.00	State Bank of India-Muzaffarpur (CLP)	51491.00
To BCC Programme	29455.00	State Bank of India-IDP FCRA Account	3902324.78
To Deep Parlyazna	69922.00	State Bank of India-Hazipur FCRA Account	44179.00
To Flood Araria	8424.00	State Bank of India-Chaibasa FCRA Account	5460.00
To Integrated Village Planning Process	971.00	State Bank of India-Muzaffarpur FCRA Account	146159.18
To Sundry Deposits	59197.00	State Bank of India-Daltonganj FCRA Account	5624.34
To Interest	273285.00	State Bank of India-CP	16731.00
To Interest From Project Office	28753.00	State Bank of India-Ranchi	327243.40
To Temporary Loan	10000.00	Union Bank of India- Silli Ranchi	4081.00
To Retd -Loan and Advance	346517.95	Palamu Kshetriya Gramin Bank	2771.00
		Bank Of Baroda	297638.50
Total Rs	42333464.60	Total Rs.	42333464.60

In terms of annexed report of even date
for V. Jha & Co.
Chartered Accountants

Place: Patna
Dated: 10th August 2012

Manoj Kumar Verma
Director
Integrated Development Foundation

Niraj Kumar Sinha
Treasurer
Integrated Development Foundation

V.K.Jha
(Proprietor)
M.No-72378

Income & Expenditure A/C

EXPENDITURE	Total Amount Rs.	INCOME	Total Amount Rs.
To Training/Capacity Building	4331576.00	By Plan India	12944998.00
To Orientation	782020.00	By National Foundation of India	150000.00
To Disaster Risk Reduction/ Mitigation	444667.00	By Lutheran World Relief	1911687.00
To Need/Base Line Assessment/ Increase Food and Income Security	239782.00	By Water aid India	3275642.00
To Direct Action With Community /Community Mobilization/ Cluster Level Coordination	1423950.00	By Global Sanitation Fund-M/S NR Management Consultants India Pvt Ltd	520300.00
To Water and sanitation	1353886.00	By CEDPA	1005870.00
To Advocacy and Networking	141005.09	By Gorakhpur E A Group	15000.00
To Awareness Building	5981342.00	By Geneva Global	2938112.00
To Solidarity Events	322403.00	By Dan Church Aid	880708.63
To Cluster Level Meeting /VLC Meeting	5622.00	By IPAS	446700.00
To Project Monitoring, Evaluation and Learning ,Review Meeting	1019356.00	By UNICEF ,Patna	987000.00
To Workshop/Seminar	519227.00	By CAF India	1186012.00
To IEC/ Material Printing	451633.00	By Xavier Institute of Social Service	7200000.00
To Capital Input/Revolving fund/ Flood Relief	380500.00	By Jharkhand Tribal Development Cooperation	224903.00
To Implementation Support, Operational expenses and Administrative Cost	2293060.50	By Oxfam India	2000000.00
To Exposure Visit	304344.00	By Liabilities Amount MNSY+UNICEF +DEEP+BCC+FLOOF Araria	233474.00
To Program Support	1787789.00	By Membership Fee	9000.00
To PERSONNEL / Honorarium and Remuneration	3521666.00	By TDS Receivable from Income tax	73650.00
To Salaries and Benefit	5803110.43	By Oxfam-Travel Reimbursement	3183.00
To Bank Charges	20238.00	By Photocopying	13926.00
By Disallowed Amount	14113.00	By W.E.Project -Bad Debts	20000.00
To Oxfam	172960.00	By Donation	177000.00
To TDS	73650.00	By Interest Refendable to UNDP	16061.00
To WDC -Disallowed Amount	16277.00	By Interest	302018.00
To Staff Welfare	114879.14		
To Depreciation :	700270.00		
To balance Being Excess of Income Over Expenditure ie Surplus C/O to Balance Sheet	4303918.47		
Total Rs	36535244.63	Total Rs	36535244.63

In terms of annexed report of even date
for V. Jha & Co.
Chartered Accountants

Place: Patna
Dated: 10th August 2012

Manoj Kumar Verma
Director
Integrated Development Foundation

Niraj Kumar Sinha
Treasurer
Integrated Development Foundation

V.K.Jha
(Proprietor)
M.No-72378

Balance Sheet

Previous Year Amount 2010-2011 Rs.	LIBILITIES	Amount	Current Year 2011 2012 Total Rs.	Previous Year Amount 2010-2011 Rs.	ASSETS	Amount	Current Year 2011 2012 Total Rs.
7917454.17	Surplus B/F From Income & Expenditure	7917454.17		251326.20	Computer and Inverter set	251326.20	
	Add: Surplus during the year	4109636.89			Add: During the Year	440853.00	
	Less: Deficit During the year	872403.41			Less: Depreciation 60%	404893.20	295386.00
	Less: Deficit Previously the year		51174887.64	25508.00	Printer	25508.00	
5000.00	Auditor Remuneration	5000.00	5000.00		Add: During the Year	27508.00	
20000.00	W.E.Project			497541.00	Less: Depreciation 40%	25203.00	27905.00
	Community Revolving Fund				Motorcycle	497541.00	
234117.00	Palamu	234117.00	234117.00		Add: During the Year	251723.00	
412787.00	Garhwa	412787.00	412787.00	41238.80	Less: Depreciation 20%	149773.00	599051.00
575345.14	ICDF-FCRA Account	201848.81	201848.81		Bicycle	41238.80	
7147.00	Payable to Muzaffarpur Office				Add: During the Year	3808.00	
	GG Project/LWR Project/ICGA Project	285707.00	285707.00	286418.50	Less: Depreciation 20%	9427.00	37751.00
9198.00	Water Aid-EPB	9198.00	9198.00		Furniture and Fixture	286418.50	
748687.00	ICDF-Non FCRA Account-Main	545756.00	545756.00		Add: During the Year	89563.00	
16041.00	Interest Refundable to UNDP ,New Delhi			179066.00	Less: Depreciation 10%	37798.00	340181.50
	Payable at :-				Generator	179066.00	
38800.00	Cluster Level Coordination Payable	45250.00	45250.00		Add: During the Year	68008.00	
22000.00	Office Rent	21000.00	21000.00	2379.00	Less: Depreciation 15%	32003.00	214864.00
99913.00	Travel/Mobile/ Logistic and coordination & Travel Cost	102123.00	102123.00		Telephone Set	2379.00	
552158.00	Honorarium/Salary/ Fringe Benefit	496843.00	496843.00	14097.00	Less: Depreciation 10%	218.00	1961.00
16000.00	Incentive to PC			65119.00	Water Filter	14097.00	
	IC Material	63808.00	63808.00		Less: Depreciation 10%	14268.00	12777.00
	Minister Program at Block	25000.00	25000.00		Camera	65119.00	
	Public Hearing	34848.00	34848.00		Add: During the Year	52690.00	
	Insurance Study	71130.00	71130.00	29794.00	Less: Depreciation 30%	11438.00	106371.00
	Fee/ Group - PFI	21000.00	21000.00		Photocopying Machine	29794.00	
	Filing of RTI Application	37125.00	37125.00	4328.00	Less: Depreciation 15%	4468.00	25325.00
	ANC Camp	328.00	328.00		Fax Machine	4328.00	
	Child Protection -Village Level	1087.00	1087.00	4211.00	Less: Depreciation 15%	649.00	3679.00
	Orientation to IC	1701.00	1701.00		Refrigerator	4211.00	
	Youth Group	685.00	685.00	98.00	Less: Depreciation 15%	81.70	3494.00
	Sundry deposits	99127.00	99127.00		Gas Connection	98.00	
	Accountant TDS Amount	920.00	920.00	8831.00	Less: Depreciation 60%	59.00	40.00
43275.00	Administration/Office Exp./NGO	111973.00	111973.00		Inverter	8831.00	
	Audit Fee Payable			54415.00	Less: Depreciation 15%	1328.00	7525.00
11800.00	Solidarity Events	11800.00	11800.00	63.00	HandyCam	54415.00	
11325.00	Organiser Payable				Less: Depreciation 15%	2043.00	12253.00
2279.00	Meeting				Pen Drive	63.00	
7761.00	Telecommunication	7761.00	7761.00	954.00	Less: Depreciation 60%	37.00	25.00
1238.00	Payable at partner (Muzaffarpur)	1238.00	1238.00	6966.00	Telephone Securities	954.00	
7108.00	Capping Printing & Stationery	900.00	900.00		P.A. System	6966.00	
7200.00	Instructor Payable			43403.00	Less: Depreciation 25%	1748.00	5120.00
	Info Boucher for PRGs	23800.00	23800.00		LCD	43403.00	
	Consolidation Report	19800.00	19800.00	5625.00	Less: Depreciation 30%	4348.00	39061.00
	Payable to Vendors				Cooler	5625.00	
2451.00	Overhead	900.00	900.00	1645.00	Less: Depreciation 10%	563.00	5062.00
	Skill Development Training -TDS	305.00	305.00		Fan	1645.00	
	Conduct Workshop for all the 453 women	12600.00	12600.00	5663.00	Less: Depreciation 20%	387.00	1488.00
	Training of EWRs/Community Leader	57674.00	57674.00		White Board with Stand	5663.00	
	Campaigning-solidarity events	0.00	0.00		Less: Depreciation 10%	566.00	5097.00
69200.64	Duties & Taxes	90662.38	90662.38	7526.00	Loan and Advances		
15125.00	Documentation /Stationery	22593.00	22593.00	97.00	WAI		108763.93
	Referral Service to be encouraged	2000.00	2000.00		OPMS		
11900.00	Health and Hygiene Promotion	14280.00	14280.00	7886.00	Dan Church Aid		8342.00
	Information/Data Collection, Analysis & Assessment	60000.00	60000.00	446.50	Oxfam Project		
21000.00	Nubkard Natak	21000.00	21000.00		Geneva Global		446.50
18703.00	Facilitation of Data	18703.00	18703.00		ONK		0.00
349.00	Orientation	349.00	349.00		Plan Chhabisa		
84.00	District Level Workshop	84.00	84.00	79746.00	WAI - (Loan from GG Project)		271505.00
12065.00	Media Workshop	465.00	465.00	84306.00	Plan CCOD Project (Loan from LWR Project)		93262.74
28760.00	Payable to Vendors			300338.00	Plan CCOD Project Chhabisa		5330.00
71280.00	Training -WSGon Leadership& GRP.MOT			37306.00	JTDProject		136200.00
50179.00	Training on NREGS, WCA & Community Health			10000.00	CMF Project		89746.00
27682.00	Training -LRG of SMC			990.00	NFI Project		37306.00
5280.00	Campaigning -Solidarity Events			328818.00	Simari		18000.00
8248.00	Documentation	10898.50	10898.50	29438.00	Care orphal		990.00
15898.50	Training to PLW's/Block			26385.00	JTDS		33910.00
	External Hard Disk	0.00	0.00	16277.00	Unicef		25438.00
54540.00	To Other Sources as Temporary Loan	32972.50	32972.50	184834.00	CLP		28285.00
440.00	Bad Debts	320.00	320.00	340705.00	Receivable from WDC		104834.00
					Receivable from JTDs		33883.00
					Tds Receivable from I.T Department		
					Deficit C/F	2798522.65	
					Add Deficit During the year		1135672.00
					Less Surplus C,Year		292357.00
					Less Surplus P,Year		
					Closing Balance:-		3711837.65
					Loan and Advances (Annexure - 3)		466429.00
					Cash in Hand		98470.85
					State Bank Of India-ICDF Main Account		1157487.34
					State Bank Of India-Palua (CLP)		3204026.00
					State Bank Of India-Muzaffarpur		51481.00
					State Bank of India-CKP		18731.00
					State Bank of India-Banohi		317343.40
					Union Bank Of India		4081.00
					Palamu Kshtriyra Gramin Bank		2771.00
					Bank Of Baroda		297658.50
					State Bank of India-Raipur FCRA Account		44179.00
					State Bank of India-Chhabisa FCRA Account		5469.00
					State Bank of India-Muzaffarpur FCRA Account		149159.18
					State Bank of India-Daltonganj FCRA Account		5824.34
					State Bank of India-ICDF FCRA Account		256224.78
10874594.45	Total Rs		10874594.45	10874594.45	Total Rs		10874594.45

Place: Palua
Dated: 20th August 2012

In terms of annexed report of even date

Manoj Kumar Verma
Director
Integrated Development Foundation

Niraj Kumar Sinha
Treasurer
Integrated Development Foundation

Chartered Accountants
for V. Jha & Co.

V.K.Jha
(Proprietor)
H.No-72378

Foreign Visit By the GB Members

Philippines Visit:

The Director Mr. Manoj Kumar Verma also being the member of the working committee of VANI has visited Philippines to attend the workshop on 14-15th December 2011 on behalf of VANI and its member organization IDF. The agencies of social sector in South Asian countries have felt a need of introduce self-regulatory and self-accreditation system in the organization which lead to transparency and good governance in the organization. In the workshop we discussed and learned various models and criteria for self-regulation and self-accreditation adopted by different countries. VANI is also in the process of developing model and criteria for Indian NGOs, which would be applicable initially with the desired members of VANI and further it would be open for all NGO in the country to adopt.

The entire cost of the Philippines visits was born and reimbursed by VANI India.

Members actively involved in the projects and programs and getting honorarium.

Following are the members of the governing board who are actively involved in programs of the organization and against their time commitments in the project-receiving **honorarium** in FY 2011-12 from the respective projects and programs.

Name of the Board Member Getting Honorarium from their respective projects	Designation	Total amount paid in last financial year	Form of payment Salary/Honorarium)
1. Manoj K Verma <i>(from 9 different projects)</i>	Director	Rs. 611660/=	Honorarium against the time commitments under different respective Projects ONLY
2. Niraj Kr. Sinha <i>(from 9 different projects)</i>	Treasurer	Rs. 433151/-	Honorarium against the time commitments under different respective Projects ONLY
3. Babul Prasad <i>(from 2 projects)</i>	Chairman	Rs. 202500/-	Honorarium against the time commitments under different respective Projects ONLY

The Total Human Resource of the organization as per honorarium slot and Male Female Ratio

Slab of gross salary (in Rs.) plus benefits paid to staff (per month)	Male staff	Female staff	Total staff
Less than 5000	75	23	98
5,000 – 10,000	23	3	26
10,000 – 25,000	27	3	30
25,000 – 50,000	07	0	07

Total Cost in Traveling (includes local, field, national, international) of all the **161** staffs, the board members and volunteers is **Rs. 1389790.50 in the year 2011-2012**

Highest and Lowest Honorarium paid

Highest paid Full Time regular staff:	Rs. 384000/- per year
Lowest paid Full Time regular staff:	Rs. 50200/- per year

Details of the Board Members/Executive Committee Members of the Organisation

Name	Designation	Age/Sex	Address	Occupation	Education
1. Mr. Babul Prasad	Chairman	43/Male	S/O Late KC Prasad Sita Sadan, Laxmipur Laheriasarai, Darbhanga	Social and Mgt. Services	MBA
2. Mr. Manoj Kumar Verma	Director	40/Male	S/O Sri DK Verma D-54 Ashok Vihar, Ranchi	Social and Devl Professional	Rural Management
3. Mr. Mahendra Pd. Sinha	Dy. Director	45/Male	S/O Lt. RP Sinha Kidwai Puri, Patna -18.	Social worker	MA
4. Niraj Kr. Sinha	Treasurer	37/Male	S/O Sri Adya Prasad Near Chotiline, Didadih Ranchi – 834012	Accountancy	ICWA (Inter)
5. Mini Kurup	Exe. Member	32/Female	Mannadiel House PO Kozhuvallur District Alleppy, Kerala	Social and Devl. Worker	Rural Management
6. Ms. Ratna Ghosh	Member		House No. 375 GF Surya Nagar, Ph-II, Sector-91 Faridabad -121013	RD Professional	Rural Management
7. Ms. Kavita Preetam	Exe. Member	30/Female	D/o Shri Kamta Prasad Tara Kunj -108 1E, Kidwaipuri, Patna	Social worker	BSc. Honors

Previous Project Undertaken

<p>1. Project</p> <p>Women's Empowerment through Convergent Community Action strategy</p> <p>Supporting Agencies Duration Area</p>	<p>UNICEF</p> <p>5 Years</p> <p>5 blocks in Patna of Bihar 4 Blocks in Palamu and 4 Blocks in Garhwa of Jharkhand</p>	<p>15. Project</p> <p>Supporting Agencies</p> <p>Duration Area</p>	<p>Swawablamban Bihar State Women Development Corporation</p> <p>5 Year</p> <p>2 Block in Patna district</p>
<p>2. Project</p> <p>Facilitating attendance in schools through economic empowerment.</p> <p>Supporting Agencies Duration Area</p>	<p>UNICEF</p> <p>3 Years</p> <p>4 Blocks in Palamu and 4 Blocks in Garhwa Jharkhand</p>	<p>16. Project</p> <p>Supporting Agencies Duration Area</p>	<p>DISHA (Adolescent & Reproductive Health) Project</p> <p>ICRW</p> <p>6 Year</p> <p>2 Block in Patna district</p>
<p>3. Project</p> <p>Water and Environment Sanitation initiative</p> <p>Supporting Agencies Duration Area</p>	<p>UNICEF</p> <p>1.5 Years</p> <p>2 Blocks in Patna district</p>	<p>17. Project</p> <p>Supporting Agencies Duration Area</p>	<p>Flood Relief Program</p> <p>Water Aid</p> <p>3 Months</p> <p>Araria (Forbishganj)</p>
<p>4. Project</p> <p>Community Based Hand Pump Maintenance System</p> <p>Supporting Agencies Duration Area</p>	<p>PHED + UNICEF</p> <p>1 Year</p> <p>4 Blocks in Garhwa district</p>	<p>18. Project</p> <p>Supporting Agencies Duration Area</p>	<p>Food and Non Food Assistance to 2500 Families affected by Kosi Flood</p> <p>Oxfam HK</p> <p>6 Months</p> <p>Araria (Raniganj)</p>
		<p>19. Project</p> <p>Supporting Agencies Duration Area</p>	<p>Swashakti Bihar State Women Development Corporation</p> <p>2 Years</p> <p>2 Block of Muzaffarpur</p>

5. Project	Women's Empowerment for Sustainable Action	20. Project	Sustainable community Action Through Local Res-ources/Self Governance and Convergence
Supporting Agencies	AUS-AID (Australian High Commission)	Supporting Agencies	PACS-DFID
Duration	2 Year	Duration	6 Year
Area	2 Blocks in Patna district	Area	4 Block in Bihar 2 Block in Jharkhand
6. Project	Community Based Safe Drinking Water Project	21. Project	Capacity building of Elected women Representative and functionaries of PRI
Supporting Agencies	CONSULATE GENERAL OF JAPAN	Supporting Agencies	UNDP
Duration	1 Year	Duration	4 Years
Area	1 Block in Patna district	Area	5 Block of Palamu District
7. Project	Integrated Women Development Program	22. Project	Village Micro Planning initiatives
Supporting Agencies	THE HUNGER PROJECT	Supporting Agency	FORCES (NOVIB)
Duration	1 Year	Duration	1 Years
Area	1 Block in Muzaffarpur district	Area	1 Block of Patna District
8. Project	Integrated Nutrition and Health Programme	23. Project	Village Micro Planning initiatives
Supporting Agencies	CARE	Supporting Agency	UNICEF
Duration	1 Year	Duration	1 Years
Area	2 Blocks in Patna district	Area	1 Block of Patna District
9. Project	Operation Research on A Community Based Approach to Improve Utilisation of Health Care Services in Favour of Women Reproductive Health	24. Project	DEEP
Supporting Agencies	UNICEF	Supporting Agency	WDC, Gov. of Bihar
Duration	4 Year	Duration	4 Years
Area	1 Block in Patna district	Area	2 Blocks of Patna District
10. Project	Stree Shashaktikaran, A Dalit women targeted Project	25. Project	MNSY
Supporting Agencies	ACTION AID	Supporting Agency	WDC, Gov. of Bihar
Duration	1 Year	Duration	1 Years
Area	1 Block of Madhubani District	Area	2 Blocks of Patna District
11. Project	Gram Swaraj Abhiyan	26. Project	Adolescent Reproductive Health
Supporting Agencies	ACTION AID	Supporting Agency	NFI
Duration	1.5 Years	Duration	7 Years
Area	2 Blocks of Garhwa in Jharkhand	Area	4 Blocks of Palamu District
12. Project	SWASHAKTI	27. Project	Sustainable action of Community and Reproductive Health
Supporting Agencies	Jharkhand Women Development Societies	Duration	7 Years
Duration	3 Years	Supporting Agency	Simavi, The Netherlands
Area	1 Block of Ranchi District	Area	2 blocks in Patna District
13. Project	Child Care and Immunization	28. Project	IRAC – for RH Network
Supporting Agency	FORCES (NOVIB)	Supporting Agency	IIE
Duration	1.5 Years	Duration	2 Years
Area	1 Block of Patna District	Area	Bihar State. – State Network Of RH fellows.
14. Project	Prachar Project	29. Project	Indian Villagers learn healthy habits & gain better care community Health
Supporting Agencies	PATHFINDER INTERNATIONAL	Supporting Agency	Geneva Global
Duration	5 Year	Duration	3 Years
Area	2 Block in Patna district	Area	2 blocks of Muzaffarpur Dist