











# ANNUAL REPORT 2017 - 2018

## DEVELOPMENT ACTION SOCIETY

1721, Rajdanga Main Road, Block EC : 71, Kolkata, 700 – 701

Date of Inception: 18<sup>th</sup> August 1989

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## MISSION

Our mission at Development Action Society is to empower women, children and youth to realise their rights and access resources through quality intervention in Education, Health and Livelihood, so that they are enabled to transform their communities.

## VISION:

We believe in a world where every human being enjoys equal rights and opportunities in order to lead a healthy and creative life with dignity and self-respect.

## FROM THE DIRECTORS DESK

The organization was founded in the year 1989 and established in 1995. The little seed sown in the heart of the founders, over 25 years ago has now grown into a mighty tree with its branches spreading over three districts of West Bengal. Development Action Society fulfils the purpose of its existence through education, basic health care, livelihood, women empowerment and protection. It aims at developing the children, women and youth into committed people who would be putting meaning into their lives thus making a difference not only for themselves but also for the community as a whole. The year 2014-2015 has seen DAS focus strongly on issues of urban/rural schemes and entitlements as one of the essential areas of work whereby people would gain increased accessibility to the much needed entitlements.

The child's interest and inherent potential are tapped not only in the classroom but also in other areas like sports [rugby], dance, drama, art and craft.

Like every year, this year too, we had twenty two volunteers from Suas Educational Development, Ireland to volunteer as teaching assistants in our Educational Centres. They engage themselves in a number of activities that benefit the children.

DAS's experience has revealed that stand alone training inputs do not go a long way in enhancing the organization's capacities as these capacities are more often retained by the individuals trained and attrition leads to a drain of any such capacities built. A plan and design is in the process of being formalized and systematized where in a pool of resource personnel is created and retained within the organization thus overcoming this challenge.

While we place on record the outstanding services of the staffs, we also acknowledge their unflagging zeal in upholding the ideas and values of the Organization.

We appreciate and highly value the constant support rendered by Suas Educational Development, Goal India, Save the Children, Bal Raksha Bharat, Me-Importas, Mennonite Central Committee, Friends of Calcutta, Weavers Studio, Urmibala Trust, National Child Labour Project, Sarva Shiksha Mission, and Kolkata Child Labour Rehabilitation Cum Welfare Society.

I call upon our long standing supporters to further strengthen "Development Action Society", so that the organization can keep itself relevant to the development needs of communities across West Bengal.

Purabi Roy  
Director

## ACKNOWLEDGEMENTS

We wish to offer our sincerest gratitude to the following agencies, departments, groups, individuals and staff for their support and continued patronage.

➤ **Government:**

National Child Labour Projects  
KCLRCWS (Kolkata Child Labour Rehabilitation come Welfare Society)  
SarvaSiksha Mission  
State Education Department

➤ **International Agencies:**

SUAS Ireland  
Friends of Kolkata  
Save the Children – Bal Raksha Bharat  
Mennonite Central Committee  
Me Importas

➤ **National Agencies:**

Weavers Studio Resource Centre  
UrmibalaSmritiKalyanSangstha  
Mennonite Central Committee  
Rotary Club  
Lions Club  
Round Table Kolkata  
Individuals and Groups



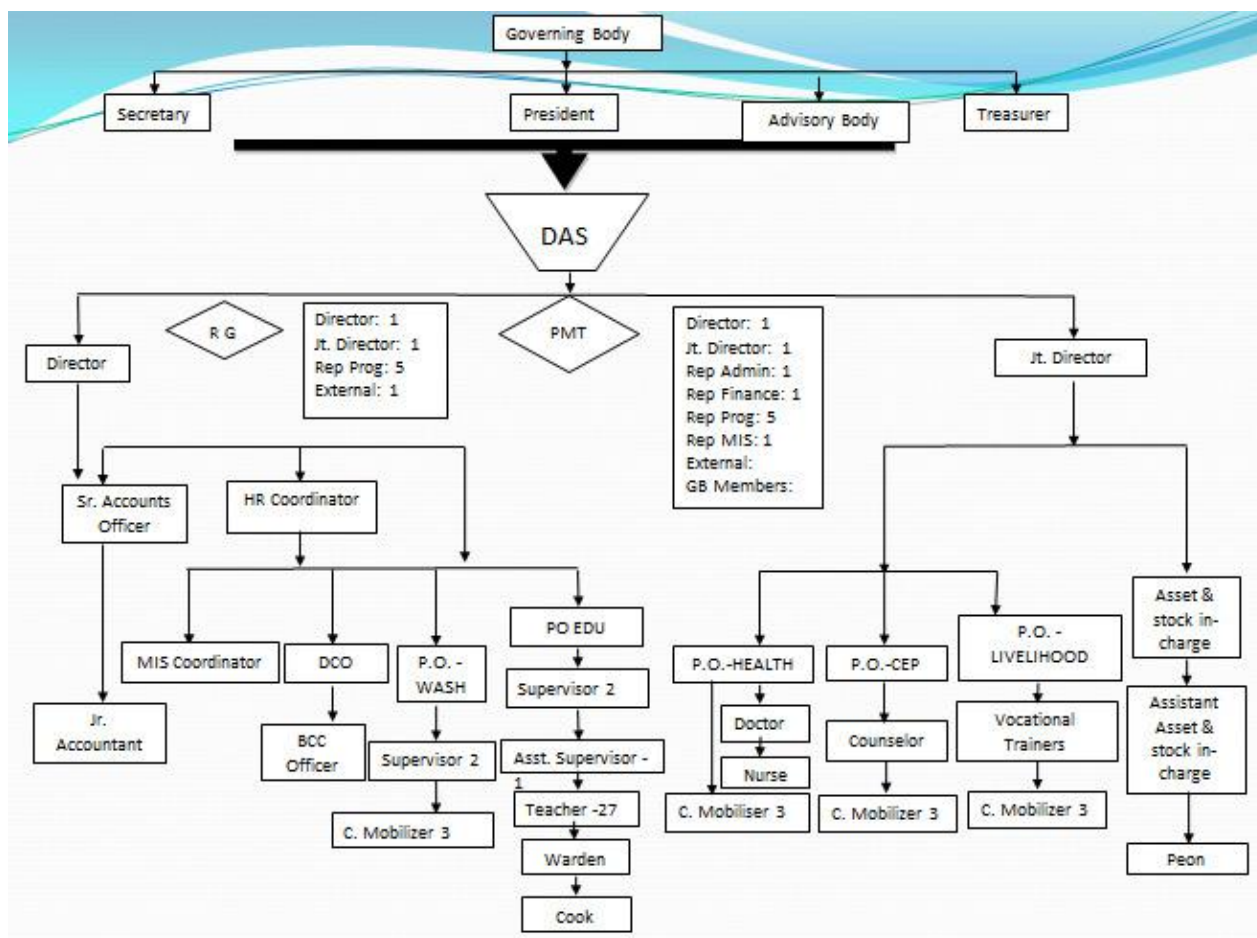


## ORGANISATION PROFILE

**Establishment:** Founded in 1989, Development Action Society is a not for profit, non – political, secular non – government organization registered under the Society's Registration Act XXI of 1860, the Foreign Contribution Regulation Act (FCRA) and Income Tax Exemption 80G and 12A.

**Mission:** Our mission is to empower women, children and youth to realize their rights and access resources, through quality interventions in education, health and livelihood, so that they are enabled to transform their communities.

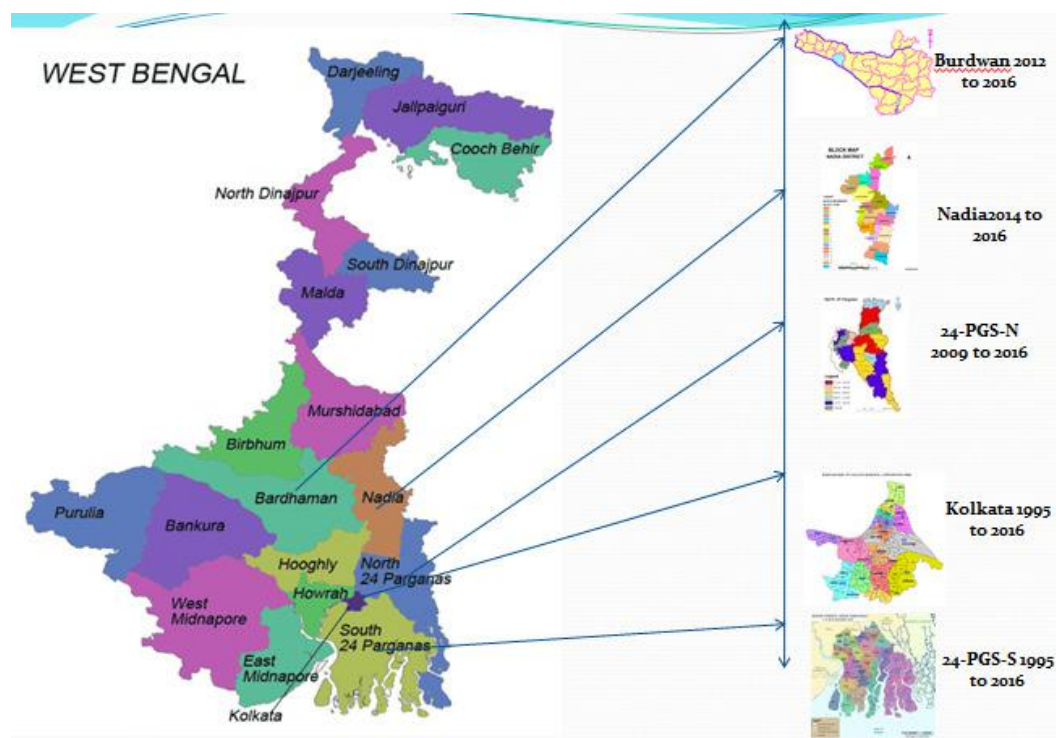
**Vision:** We believe in a world where every human being enjoys equal rights and opportunities in order to lead a healthy and creative life with dignity and self-respect.



## GOVERNING BODY MEMBERS 2017 – 2018

SL	NAME	DESIGNATION	OCCUPATION
1	MRS. SOMA BASU-MALLIK	PRESIDENT	SOCIAL DEVELOPMENT CONSULTANT
2	MRS. PURABI ROY	SECRETARY	FULL TIME IN DAS
3	MRS. SOUMI GHOSH	TREASURER	SOCIAL WORKER AND CONSULTANT TO KMDA
4	MRS. SUBRATA KAR	ASST. SECRETARY	SOCIAL DEV. PROFESSIONAL
5	MRS. BANI BISWAS	MEMBER	HOUSEWIFE
6	MRS.TANIMA BANDOPADHYAY BISWAS	MEMBER	ADVOCATE
7	MS. DORA CHAUDHURI	MEMBER	SOCIAL DEV. PROFESSIONAL

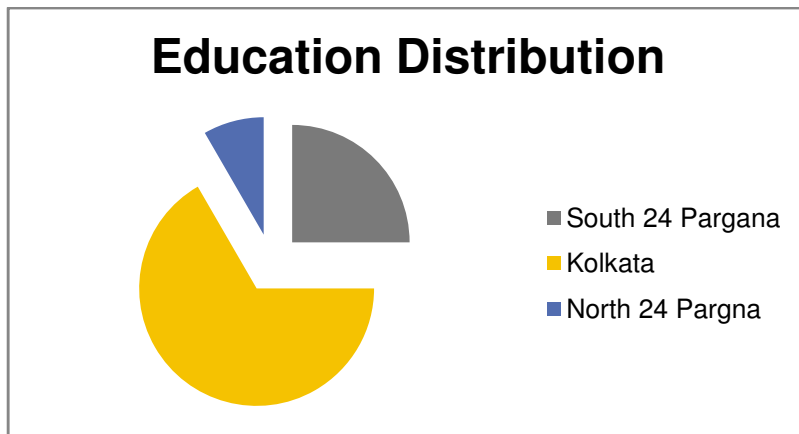
## GEOGRAPHICAL LOCATION



## AREAS OF INTERVENTION



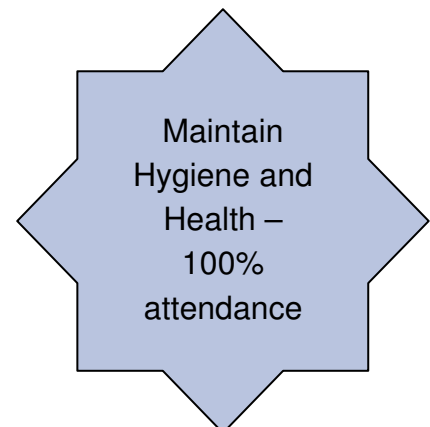
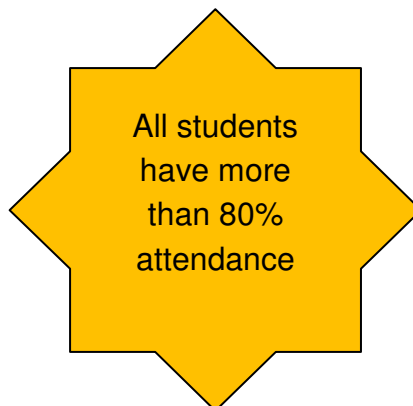
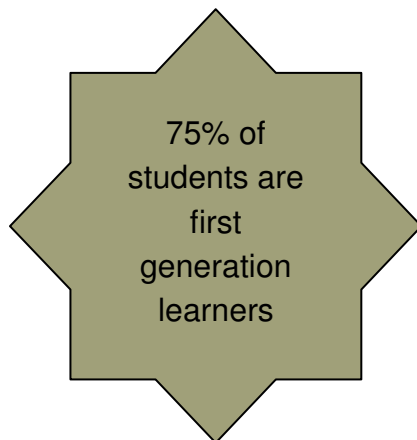
## EDUCATION PROGRAMMES



Over the years DAS have covered more than 10,000 children under Pre-Primary, Primary, Secondary and Tutorial Support. Also we have prepared children to appear for the board examination through National Open School (NOS).

### DAS EDUCATIONAL PROGRAMME AIMS

- ❖ Increased access of young children from numerous communities to receive pre-school education and be mainstreamed in the formal school.
- ❖ Increased number of children accessing mainstream formal education and being retained within that system to Class X.
- ❖ Increased access and retention in formal education, improving quality of life by reducing poverty and allowing students to become self-reliant, productive members of society.
- ❖ Inspiring youth representatives from numerous communities to be capacitated to advocate their issues on a larger platform.
- ❖ To inform all the children of their rights, especially their right to education.





## ANANDALOK SCHOOL

Since 1997, Anandalok School has been contributing to the educational development of underprivileged students in the Anadapur area. The centre provides education to children whose parents are generally daily waged labourers. This project is funded by the **National Child Labour Programme (NCLP)**.

Anandalok School implements two teaching sessions, one in the morning from 9:00am to 12:00am including 50 students and an evening session for older children aged between 9 to 14 years old. The main focus is on developing the childrens basic literacy and numeracy so that they will be eligible for admittance into the mainstream government schools. The students sit their examinations in the months of April and May, those who excell continue their education in the government schools. With the older students the main target is to enroll the students within a mainstream school within one year.

Two main teachers are responsible for the education programme at Anandalok school namely Shikha Chakraborty and Lalita Padra. They have taught here for twenty years and have seen many improvemnets despite the economics challenges. Many modern teaching methodologies are implemented for the students such as worksheets, flashcards, picture study and group work. The school also provides educational resources for their students. Each year the children are taken on an excursion. Last year they were taken to Science City and in 2015 to the Zoo. Volunteers from SUAS Ireland visit this school annually to initiate activities with the students for 10 weeks.



Additionally, Anandalok provides a medical service to its students and their parents whom can attend regularly for medical check-up.

### Student Profiles:

Name: **Rini Khatun**

Age: 3 years old

Initially, Rini was struggling with her pronunciations. However, after receiving structured lessons on the alphabet, phonetics and pronunciation she has hugely improved. Her attendance is excellent and she is always interested in learning new information. Currently, she is preparing to be eligible for Class 1 in a Government school.

Name: **Gourab Das**

Age: 10 years old

Gourab is a new student at this school. He lost his mother at a young age. His father and brother work daily to make a living. As a result, Gourab's education was neglected. The centre provides him with an opportunity to receive an education and the goal is to help him to enroll in a Government school as soon as possible.

## Friends of Calcutta



The partnership with “Friends of Calcutta “started in the year 2013. The project supports education, health and livelihood programs for the children, youth, mothers and Community stakeholders in Tangra, Topsia, Khidirpur and Sunderbans.

**Education:** The project supports almost 800 students by providing them with quality education in the centers of Topsia, Tangra, Khidirpur and Bhuvneswari (Sunderban). The centers Topsia, Tangra and Khidirpur Educational and Vocational Centers are placed right in the middle of the slums, where a basic necessity for decent living conditions is few and far between. Bhuvneswari is a village located in a remote place in the Sunderbans under the Kultali post office. It is one of the largest islands in Sunder bans about 85% of the population is very poor. They eke out an existence collecting non- timber forest produce like tiger prawn seeds, fishing, vending vegetables and fish, and by working for a daily wage. The Pre School caters to children between 3 to 6 years, who are also provided with wholesome nutrition. Children in formal school receive coaching support, five days a week from mid afternoon to late evening. The children in spite of their difficult backgrounds understand the value of education and regularly come to the preschool and coaching centers. The teachers are qualified, dedicated and render great service in helping the children with their studies, many of whom are first generation learners. The children perform very well in the Board Exams and take admission in good colleges for higher studies. Capacity building of teachers is done every year to help them follow the latest methods of teaching and learning. Review meetings are held twice a year to take stock of different issues arising from time to time and further plan of action is initiated for the smooth running of the project. Groups of children are taken for outings to different other centers like Bhuvneswari and Swapnopuri. This outing gives the children huge exposure and a refreshing change from their present living condition.

**Vocational Training:** The 3 centers Topsia, Tangra and Khidirpur also have vocational training units. Trained vocational staff who are skilled and dedicated, prepare young drop out girls and women in tailoring and embroidery. The young girls and women are taught with a lot of care and soon they are able to start earning for themselves. They stitch uniforms for children of different centers, also get orders from several people, thus they begin to earn a decent

income. A yearly assessment is done after they complete the two year course. Successful candidates are given sewing machines, thus enabling and encouraging them to be entrepreneurs in their own right.

**Medical:** Once a week, Health Clinics are run in the 3 centers under the supervision of a trained nurse. The nurse also links them to hospitals for advanced medical support. Medicines are also provided for common ailments. Health Camps are organized once a year in all the three centers. In these health camps special doctors are brought in and a total health check up is done for the children, youth and elders .Eye Camps and Dental Camps are also organized each year. Many Community people were given free spectacles.

**Sports and Games:** Regular indoor and outdoor games are organized in all the three centers by the sports in charge. Center Sports in all the four centers are organized each year in different events. The events are divided into two main broad groups' boys and girls and further divided on the basis of age groups. This encourages participation of huge number of children and prizes are given away as incentives. The children look forward to this activity as it is a great stress buster and their energy too is well channelized. The Annual Rajiv Ganguly Sports Tournament a two day mega annual event organized by Friends of Calcutta provides a huge platform to the marginalized Children from different NGO's from all over Kolkata to showcase their talents in a whole range of sporting activities. The children from different NGO's enjoy the two day mega event.

### Case Study:

MD.SANWAR aged 5 yrs is a cute super naughty little boy studying in our Topsia Pre School and is in the preparatory class. He lives with his mother Swagufta Begum and step father Sk. Sahenawaz



and his little sister. His parents migrated from Bihar some 24yrs ago and settled in Topsia bustee ,besides the Topsia canal. His residential address is Topsia Majudarpa, Police Station – Tiljala, Kolkata -39. He lives in a poor shelter made of bamboo and covered with plastic sheet. They have very little protection from the hazards of nature. In spite of his difficult background , he comes to school everyday and is a lively and mischievous child. His step father is a Rickshaw Van puller and his mother works as a domestic maid. There is no one to look after him or take care of him . When he joined our preschool center in 2016, he used to come shabbily dressed ,his shirt buttons would not be in the

right button hole and his pants would be hanging loose as there was no button/ hook to fasten. He was deprived of a proper meal as he was not cared for. He would not study, but he gave verbal answers promptly. He was clever and intelligent, but whiled away his time after school in the lanes and bylanes of Topsia and would be involved in one mischievous activity or the other. His neighbours were fed up of him. When he came to the center ,the teachers would feed him well and would counsel him to present good behaviour to all . Slowly he began to put his mind to his studies and is able to take care of himself. He now comes neatly dressed and being an intelligent boy he is also coping well with his

studies. Teachers counselled the mother too and she now is giving a little more time to look after him . Sanwar is now a happy child and everyone speaks good about him.

## EARLY CHILDHOOD EDUCATION

This project is supported by **Mennonite Central Committee**. This project looked after the marginalised children and women of the targeted areas in the villages of Tongpara, Andulgoria and Mousal of Tardaha Gram Panchayat. The main objectives of this project were;

### Objectives

1. Targeted children will be mainstreamed and retained till up to the primary section of the formal system of education.
2. Children and community stake holders will become aware and active on Child Rights and Protection.
3. Linkage established between Government departments and targeted communities on all entitlements.

### Target people

Marginalized Children, mothers and adolescent girls and boys of the geographical area.

### Geographical areas

Three villages Tongpara, Andulgoria and Mousal of Tardaha Gram Panchayat, under Dist. 24 Pgs. ( South)

Facts & figures-

Reach	Children (3 -5 years)	Mothers	Total Adolescent Boys and Girls	Stakeholders
Direct Reach	90	90	30	30
Indirect Reach	30		10	20

### Case Study

Tongpara village in Tardaha Gram Panchayat is one of the most backward and poverty stricken community in Tardaha. They are schedule tribes (Adivasi) having migrated from Jharkhand belt some 250 years ago. Generations after generations have lived here, working as daily wage earners and primarily belonging to the scheduled tribe community they were ill treated, neglected and dominated upon by the upper caste and others, no effort was made to improve their lot by the governments





before or after Independence. Their socio economic status has been pathetic. They are landless and have no Patta; a patta is a revenue record which is required to prove legal ownership over a specific plot of land. It is a document extract issued by the Registrar of Land holdings. It is important for its role as a proof of ownership and permissible evidence in the court of law. In the absence of the required documents, they face a lot of challenges; they can be evicted any time and their homes destroyed. Most of the people reside in mud houses with tiled roofs. They are illiterate and few of them are daily wage earners, the other men folk sit idle at home and depend on the women to earn a meager income which is barely able to meet the daily needs of the family; over and above the men are addicts and squander away the little money earned by the women, besides the women are ill treated by the husbands. Children are malnourished and usually drop out from school, as the family background gives no importance to education and scope for children to study. Ever since we made our intervention in Tongpara with the support of MCC, in the areas of education, nutrition to the children, orientation of teachers and mothers on entitlements and child protection and overall women empowerment, there has been a noticeable change in the behavior and attitude of our teachers, community women and children. When we started our preschool center in the year 2014, teachers were selected from the community and we were very fortunate to note that the 3 teachers selected were all educated, having a minimum Madhyamik pass. From this center one of our teachers Pampa Munda is aged 28yrs and is married to Jayanta Munda who is only class 8 pass and works as a daily wage earner. They have a 3 yr old daughter. Pampa Munda was selected on the basis of her qualification, as it is difficult to get a lady teacher with a minimum Madhyamik pass from that area. Pampa has passed her higher secondary examination. In the beginning she was timid, unsure of herself, spoke very little and used to be quiet most of the time. She used to listen a lot but was not vocal and uncomfortable and hesitant in sharing her views. The constant and continuous awareness meetings and exposure to workshops with Government school children and staff, interaction with Panchayat Pradhan, government officials, Panchayat members' health workers and community stakeholders over the last four years has gradually transformed her into a bubbly, lively, vivacious and enthusiastic young woman. She from the very beginning has been a good teacher and quickly followed the play way method of teaching preschool children, using the teaching aids to the maximum and showing keen interest and eagerness to learn and apply the knowledge gained from the capacity building programs and monthly meetings held. Today she is empowered, and oozing with confidence. She conducts the mothers and stakeholders meetings now and then. It is a matter of pride to all in DAS and MCC that she has been noticed by the party leaders and her name proposed for the Panchayat election from three villages namely Bhangarkhal, Haripota and Tongpara as a Panchayat member representing the three villages. The Panchayat election was held on 14th May 2018 and the results declared on 17th May. She has been elected as a Panchayat member of the three villages and she is the first lady member to hold this position. People have a lot of expectation from her for the progress and development of the three backward communities, which have been neglected so far. She has

been awarded the certificate of Panchayat Member from the Block Development Officer. The process of selecting the Panchayat Pradhan is on and she stands a chance of becoming the Panchayat Pradhan. In her own words she is grateful to MCC and DAS for enabling her to discover her hidden talent and potential.



## **SARVA SIKSHA MISSION: RESIDENTIAL SCHOOLS FOR GIRLS**

### **Background:**

This project has been initiated for providing basic education to street, underprivileged children from both urban and rural areas. DAS operated two residential units at Kasba, Kolkata comprising of school drop-out children and children who never enrolled in schools. These units serve as full-fledged secondary school along with residential hostel facility. These homes for girl students offer education and residential accommodation to 200 children. The parents of these children are satisfied to see their girls pursuing education without obstacles.

### **Supporting Agency:**

Sarva Siksha Mission, Kolkata

### **Target Population:**

Girl students from Kolkata and neighbouring districts. The Residential Unit has provision for 100 girls. Currently there are 90 children are enrolled in Bidyadharpur High School for Girls and 96 children in Kasba Modern Residential School.

### **Target Area:**

KASBA AREA OF KOLKATA.

## **SHIKHA PROJECT~EMPOWERING THROUGH EDUCATION**

### **Background:**

DAS is working in the rural-urban border of southeast Kolkata, with some of the target areas coming under the Kolkata Municipal Corporation and South 24 Parganas. In this segment, an attempt been made to look critically at the continuation of work on the need based section of education, health, youth empowerment and skill building of women for employability. The programmatic intervention aims to increase access and retention in formal education, various awareness programmes and allowing students to become self society.

**Supporting Agency:**  
SUAS Educational Development

### **Target area and Population**

**Target Area** includes semi-urban areas of Arupota, Makaltala, Anandapur, Ucchepota, Chowbaga, Bantala in Kolkata and Chariswar in South 24 Parganas.

**Target population** includes mainly children of vulnerable families residing in the project areas.

### **Significant Achievements:**

- Door-to-door survey for identification of children. 77 children for pre-school and 109 children for
- back-up support identified.
- Carried out continuous assessment four times throughout the year.
- 159 pre-school admitted in government schools.
- 30 children from the Back- up centres appeared for the 10th standard examination (Madhyamik)
- and all of them have passed successfully.
- 63 youths in the age group of 10–16years participated in life-skill training.
- Ucchepota's Child Protection Group (CPG) was sanctioned a water tank by the Gram Panchayat
- for accessing safe drinking water in their locality.
- Exposure to the children on art and culture.

## **MISSION EDUCATION**

### **Background:**

DAS have been addressing the issue of education and is yet working for the same target as the beneficiaries are primarily first generation learners who come with the problems related to it. The areas being underprivileged are highly neglected by the government. The people, who are most in need of the basic facility that the government commits, are all time deprived from it, which brings a constant fight for survival in their lives compelling them to pay less heed for improving their quality of life through proper education, personality development, health facilities and no gender discrimination. The situation naturally brings hindrances in bringing any kind of radical development in their lives.

**Supporting Agency:**  
SMILE FOUNDATION

### Target Population:

The project aims to provide development through quality education to children of six selected underprivileged community living such as remedial back up support, youth empowerment in the community of southeast Kolkata and south 24 Paraganas. In this context the strategy had been taken to involved work at several levels for achieved change within the project, involved expertise for local leadership and working with existing networks.

### Activities Undertaken:

- Educational support to school goes through remedial back up support classes helping them to prepare themselves to perform better for formal schools and secondary level support.



- DAS had taken initiative to decrease the percentage of school dropout, education issues and available Govt. services through arranged monthly awareness parents meetings, stakeholders meetings in community and also taken informal tracking system through door to door home visits.

• Skill development of adolescent groups, emphasizing specialization in particular aspects helping them to generate employment opportunity leading to self dependence in future.

- Capacity building of educators on Teaching Learning Methods, Child psychology, appropriate school curriculums.
- DAS had taken initiative on fund raising approach programme for few corporate persons, community stakeholders and NRI persons who belongs to our country due to those marginalized children who are suffered poverty level and can't get any kind of basic survival materials.

### Progress:

- 315 girls and boys received educational support through pre-school and remedial back up support.
- 400 parents and stakeholders from the communities already awarded and capacitate to access government schemes, linkages and facilities.
- Periodic evaluations of students have been conducted for children performance.
- We have conducted fund raising programmes through Women Empowerment, Sit & Draw competition, sports for





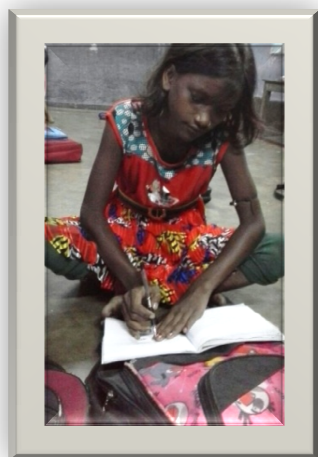
community children. Few financially established persons also joined with those programmes and contributed dry food, copies, shoes, clothes, educational materials and classroom equipments.

- DAS organized an event to commemorate One Billion Rising on especially for the women and girls. It was supported by Jagori Rural Foundation. The programme focused on solidarity. Many community women and girls, government primary school teachers, club members and local stakeholders participated in this programme. More about 300 people participated in the event. Most of them were from Self Help Groups, domestic maid servants, Muslim minor community women, men, adolescence girls and boys. They actively participated in the event by singing, dancing, sharing their stories of freedom for more than four hours. Nearly 10 women shared their stories of struggle and success and how DAS held their hands in the journey. Few adolescence girls performed dance related the theme. A popular women band performed by singing Tagore and folk songs. The programme was a huge success.

### **Achievements of the Projects:**

- ❖ 23 students passed Madhyamik Examination in the period of 2017-2018.
- ❖ 28 Preschool children have been mainstreamed in age specific classes at government schools.
- ❖ 10 youths from Makaltala completed the driving training and got individual licenses, training cost subsidy from government project.
- ❖ 06 youths girls from Makaltala completed beautician course and works in popular parlors which was linked by DAS.
- ❖ Few Local donors have liked our programmes and frequently joined us by donated money, usable equipments and also gave free services.

### **Case Story:**



She is a 13 year old girl who lives in a village called Garumara near Bantala Hat. Her family relocated to this village a few months ago. Her father's name is Dharmindra Roy and mother's name is Sita Roy. They both work as rag pickers in Dhapa dumpsite. She has three sisters and one brother.

Jhuma had never been to school in the past. From her early childhood she worked in a brick kiln as a temporary labor. At that time she lived in the village of Neruli, PO Malancha, South 24 Parganas District. They belong to a poorest of the poor family. Her parents and other family members also worked in the brick kiln. The family relocated to Bantala owing to occupational crises and moved to their relative's house.

Thanks to the DAS intervention in July 2017 one of the teacher-cum-social workers of DAS visited the village for meet the purpose of regular home visit and met to her at village play ground. She made an enquiry. Then she talked to her mother and convinced her to admit Jhuma in a government school. However, her age was not appropriate to admit her in Class I. Also she could not recognize any alphabet. Therefore our teachers helped Jhuma to prepare for the admission and convinced the Headmistress of Bantala F.P. School and admitted Jhuma in Class-I. After the mainstreaming, she also brought Jhuma to the Bantala Coaching Centre. The teachers put in great effort to help her catch with the academic curriculum of her class. Jhuma is very happy now to be connected with school and studies. She wants to completed higher studies. She loves her teacher very much. She is a regular student both at school and coaching centre. Jhuma is now a dedicated, diligent and enthusiastic student who believes in hard work and is committed to succeeding and developing her skills into further education. In the future, she is devoted to make a meaningful impact on her community and with DAS' help her future is set to be bright.



## LIVELIHOOD PROGRAMMES

### IMPROVE LIVELIHOOD OF 100 WOMEN THROUGH SUSTAINABLE POULTRY FARMING

**Title:** Procurement of Chicks to Mother Unit

**Location:** Korakhali Area

This project was initiated because it is one of the easiest means of livelihood in this area. Poultry, farming and animal rearing are activities that are easy and affordable for poor underprivileged people. This type of activity can help families to improve their economic condition. Male chicks can be sold as meat which is quite in demand in the markets. Similarly, female chicks can lay 10-14 eggs per month which can also be sold for money.

**Objectives:**

- To identify 100 participants for poultry training
- To strengthen the mother unit of rearing of chicks
- Economic upliftment of the 100 people involved in the programme.

**SUSTAINABLE LIVELIHOOD FOR WOMEN OF JAMALPUR, NADIA.**

**Title:** Textile Skills and Entrepreneurship

**Location:** Jamalpur, Nadia

**Funding Partner and Implementing Partner:** Urmibala Trust and DAS

**Aims:**

- Economically empower 30 women
- Learn and develop tailoring skills
- Gain knowledge of financial literacy and entrepreneur skills
- Utilise these skills as a future profession and means of income

**Attendance:**

- 30 trainees : 90% for the month of May 2017
- 30 trainees : 85% for the month of June 2017
- 26 trainees : 85% for the month of August 2017
- 18 trainees : 60% for the month of March 2018

Month	Number of Women	Total Attendance
MAY 2017	30	90%
JUNE 2017	30	85%
AUGUST 2017	26	85%
MARCH 2018	18	60%

**JUTE CRAFTS AND PRODUCTS, KHANABERIA KMC WARD 58**

20 women trained under the Livelihood programme programme supported by GOAL India continued their activities in the work shed at Khanaberia.

DAS procured orders from ONGC, Sundarini (Govt. of West Bengal) to support this initiative of the women who work under SHGs.

These women have been successful in staying away from hazardous activities like rag-picking and remained engaged in dignified yet productive activities which were the objectives of the project.

# ENVIRONMENT PROGRAMME

## COMMUNICATION AND AWARENESS CAMPAIGNS FOR DHAPA REMEDIATION WORKS

### Background

Development Action Society (**DAS**) is a community based organization and is committed towards the sustainable development of marginalized women, children & youth through education, health, protection and livelihoods since 1995. DAS's core strategy is to address the needs of its target populations which are a mix of service delivery and facilitation approaches. Being a registered organization and having 20 years work experience in the sub-urban disadvantage population of south and southeast Kolkata. DAS has received a consultancy service for communication and awareness campaign in project area closed Dhapa dumping site due to remediation, funded by World Bank and supported by West Bengal Pollution Control Bank.

### Objectives

- Increase awareness of the environmental risks in the absence of remediation work at the closed dumping site.
- Increase awareness of the social issues pertaining to the site during remediation work.
- Develop an awareness of the remediation needs for safe and clean environment.
- Develop contextual IEC and promotional materials to educate the community stake holders
- Capacitate the stakeholders to cope with the social and environment changes.
- Capacitate project affected people with regards to the positive and negative impacts of social issues.
- Develop a community based mechanism to deal with the issues during and after the completion of remediation work.

### Methodology

Our first approach was to deliver a brief introduction about remediation work and its future impact on the community through meeting with the project affected people. Although the community of Makaltala is directly affected by the remediation work, we also took steps to raise awareness for the people who are indirectly affected. The methods of awareness were one-to-one interaction, small group discussion, focus group discussion (FGD) and advocacy and orientation workshops. We also developed and distributed IEC materials among community people written in Bengali script (local language) so that everyone can read and understand the information regarding remediation and its overall benefits.

To increase knowledge regarding health and hygienic practices, we implemented intervention programs on the correct ways of hand washing, safe drinking water, protection from polluted air and plantation and sanitary practices. Since school going and elderly people are more vulnerable we placed special attention on them and conducted orientation programmes on various health hazard related issues. We monitored and evaluated the programmes using suitable formats based on key factors to measure the changes.

To receive grievances anonymously from community members due to remediation work we have installed drop boxes at different locations of the community. We open the boxes



periodically to receive grievances if any and try to mitigate those through the meeting with community stakeholders.

A number of community members have lost their occupation as cultivation on Dhapa dhipi. In response to this, as a part of social management, we introduced vocational training based on aspiration mapping. The approach of providing alternative livelihood training not only will remove the financial constraints of the male members but will also help the female members to earn money.

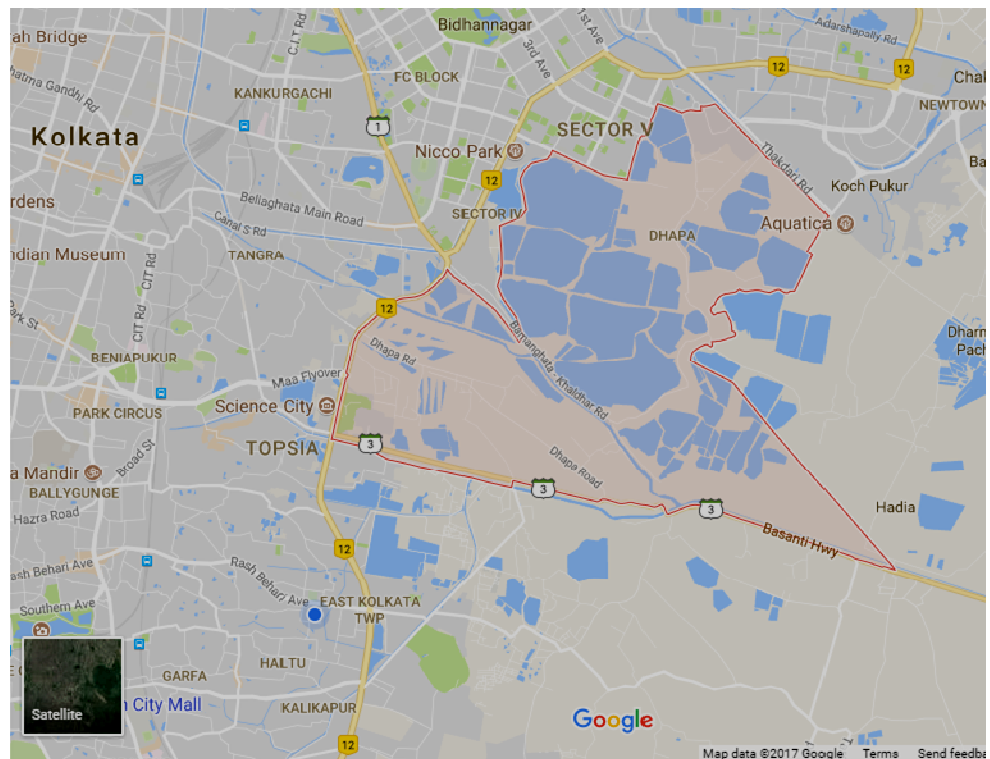
## Outcomes

Some observed positive outcomes from regular awareness and intervention programs are

- 1) The community have realized that there is a long term benefits after remediation
- 2) Community stake holders have taken initiative to spread awareness to others
- 3) Young adolescents have formed a group to protect their environment by plantation and cleaning garbage
- 4) Mother's become more conscious regarding their families health, especially the health of their children
- 5) They have started using masks to protect themselves from the hugely polluted air due to the remediation work.

## Challenges

- Difficult to get male members to attend regular meetings
- Initially community members were not willing to attend any meetings, until they realized that their dwelling would be at stake due to remediation
- Many people felt hesitant to participate as they were illiterate
- Most of the male members were reluctant about the workshops
- It was very difficult to change the daily practice of the disposal of waste at a dustbin instead of in the canal.



# **MINIMIZING AND ZEROING OPEN DEFECATION IN TARDAHA PANCHAYAT THROUGH LINKAGE WITH GOVT. SUBSIDIZED TOILETS**

## **Background**

Development Action Society (DAS) has started interventions in Tardaha Panchayat since March 2012 on four major thematic areas, viz. Health, Livelihood, Women Empowerment, Water Sanitation Hygiene (WASH) and Environment. Since Tardaha is an economically backward Panchayat, most of the people, especially children and elderly people are compelled to defecate openly. Most households are devoid of individual toilets. They also lack access to community toilets. The situation of women is worst. Most of the women have to go for open defecation in early morning. They often encountered harassment, snake and insect bites. The situation worsens during the monsoon season due to prolonged water logging and prevalence of water borne diseases. The population especially under 5 children and elderly people become extremely vulnerable. In this context DAS and Weavers Studio Resource Centre (WSRC), focuses on facilitation of individual toilet construction under Govt. Scheme of Swaccha Bharat Mission and Nirmal Gram Abhiyan. For the 1st phase, 293 toilet constructions in 18 Sansads in Tardaha Gram Panchayat were facilitated. WSRC assured to provide Rs. 300/- out Rs. 900/- from the counterpart of selected beneficiaries. The major objective of this program is to facilitate construction of 293 low cost individual toilets under State and Central Govt. Sanitation Schemes for minimizing incidence of open defecation and reducing the trend of waterborne diseases.

## **Supporting Agency**

Weavers Studio Resource Centre (WSRC)

## **Target Area and Population:**

1500 marginalized and socio-economically backward people in 18 Samsads in Tardaha Panchayat in Bhangore-I, 24 Pgs-South

## **Highlights of Progress**

- Home visit and meeting with identified HH & processing of the documents for govt. subsidized
- toilets.
- Meeting with service providers such as Panchayat Pradhan, BDO and TSC cell for finalizing the documents.
- Providing Rs-300/- to each of 293 household for applying govt. subsidized toilets from WSRC and households have to pay Rs-600/- for each household toilets. Hence the total amount which will be borne by WSRC is Rs-87,900/-, which will be directly paid by WSRC.
- For facilitation and after completion of each toilet DAS will be received Rs-300/- as facilitation cost from WSRC.
- Visibility materials will be developed and DAS will ensure the visibility after completion of each
- toilet.

- Till date 197 toilets constructed under Scheme of Swaccha Bharat Mission and Nirmal Gram
- Abhiyan and WSRC support Rs-300/- to 197 poor HHs for building their individual toilets.

### **Significant Achievements**

75% of targeted populations are in safe defecation practices

## **STRENGTHENING WATER AND SANITATION IN URBAN SETTINGS**

### **Background**

India, as other South Asian Countries, is heading towards a freshwater crisis mainly due to improper management and use of water resources and environmental degradation. The stress on human populations and ecosystems from this depleting water situation is further aggravated by a rapidly declining quality – in particular in urban areas. While the challenges on better water management remain huge, the situation on sanitation is much worse. Beyond the issue of infrastructure is the fact that the per capita water supply itself, being inadequate and less than 140 to 200 lpcd (liters per capita per day), is an impediment as these are estimated to be the minimum flows required for a sewerage system to function properly. Thus, focusing on water, sanitation and hygiene (WASH), in many ways leading to the definition of purpose for policy makers, designers and implementers, a project has been taken up. The Energy Resource Institute (TERI) & Development Action Society entered into a partnership in the year 2015 in three urban slums in ward-58 under jurisdiction of Kolkata Municipal Corporation (KMC) viz. Dhapa Dhipi, Dhapa Durgapur and Dhobia Tala on the backdrop of the grave situation of Water, Sanitation and Hygiene with regards to inadequate availability and accessibility (knowledge, resources and practices).

**The Goal of the project:** is to achieve sanitation targets, through enhancement of people's capacity to choose appropriate options. The activities of the project are in alignment with the approach of Govt. of India flagship program 'Swach Bharat Abhijan'. One of the aims of the project sets out to reach 50,000 beneficiaries in low income settlements.

### **Objectives:**

1. Conduct a comprehensive WASH related risk analysis, including the living, social, gender-related variables and occupational conditions and human health impacts in cluster of three slums in Kolkata Ward 58.
2. Develop and implement participatory intervention strategies in Dhapa Dhipi, Dhapa Durgapur & Dhobiatala in Ward 58.

### **Supporting Agency:**

The Energy and Resources Institute (TERI)

### **Highlights of Progress:**

#### **1. Sample survey of 517 households in three clusters:**

This Baseline Study was a part of the programme supported by The Energy and Resource Institute

(TERI) titled “*Strengthening Water and Sanitation in Urban Settings*”.

The sample study was conducted in three urban slums of Dhapa Durgapur, Dhapa Dhipi and Dhobiatala covering a population size of almost 30,000, situated under the jurisdiction of Kolkata Municipal Corporation (KMC), West Bengal. The summary of the key findings of the sample study in a sample size of 517 Households (HH) are presented below which shall enable strategizing and designing of key interventions:

## **2. Facilitation of water sampling (NABL will collect the water samples in presence of TERI personnel)**

Water testing was done by TERI personnel on the 24th & 25th of May 2016 in the three project locations in Ward-58, KMC. The test report is yet to be shared with us. The schedule is as follows-

## **3. Facilitation of four structured FGDs, TERI professionals will carry out the FGDs:**

Nb.: As per the contract this activity was to be conducted by TERI personnel, since it is still pending we can carry-out this activity and send you the report if consent is given to us.

## **4. Regular community meetings/interactions for two years on urban WASH**

In this activity total 12 meetings have been conducted with 829 mothers and community key stakeholders on community WASH issues. Information was shared to the community through film show on relevant WASH issues. The community was sensitized on the following issues –

- Safe water handling,
- Safe defecation practices,
- Best practices related personal hygiene, community hygiene and cleanliness
- Prevention and control of waterborne diseases

## **5. Cluster based 4x1 day workshops having 40-50 participants from the community and important stakeholders spread over two years**

4 x 1 day workshops with more than 50 community participants and stakeholders have been conducted in all the three project locations. Ward President, Ward Councilor and key stakeholders

were present in all the workshops. 224 people attended the 4 cluster based stakeholders workshops from three project locations.

## **6. Development of two existing community based WASH organizations – sensitization and capacity building:**

## **7. Development of Five community based WASH organizations – monthly meeting:**

Composition of WASH committees-

- Each WASH committee consists of minimum 20 members,
- Each member represents –population of 250 people within their community,
- Regular orientation of WASH committees has been done through meetings and trainings
- WASH committees have taken responsibility of the following:
  - Identification of community level issues on drinking water, safe sanitation and hygiene

- Practices:
- Issues have been raised in the concerned departments,
- Community level WASH monitoring mechanism has been developed

#### **Activities accomplished within the reporting period:**

- 76 interested people from Dhapa Dhipi have been identified for formation of 2 WASH committees.
- 60 interested people were identified from Dhapa Durgapur and 2 WASH committees formed.
- 1 WASH committee formed in Dhobia Tala with 27 participants.

#### **8. Mobilize the community using ‘citizen voice and action’ tool:**

This activity will be carried out in the month of October 2016 and the report will be shared.

#### **9. Other Major Events:**

- TERI invited us to make a presentation on “Waste & Waste Management Solutions at School Level” where 100 KMC schools participated on 12th August 2015,
- We participated in “Stakeholder Consultation Workshop on Water, Sanitation and Hygiene (Urban)-Eastern Region” organized by TERI on 24th November 2015,
- We participated in a workshop on “Community Water Management Model” on 12th August 2015,
- We have Participated in “World Water Day Celebration” at American Center on 22nd March 2016
- World Water Day Celebration.

## **HEALTH PROGRAMME**

### **STOP DIARRHOEA INITIATIVE (SDI)**

#### **Background:**

In our country Diarrhoea contributes approximately 10% of total under-five deaths every year. WHO estimates that 88% of deaths can be prevented just implementing WHO/UNICEF 7 point plan that talks about Treatment package and Prevention.



#### **Supporting Agency:**

Save the Children

#### **Target Area and Population:**

Geographical areas include 16 registered Slums and colonies in Ward 58 and 12 registered slums and colonies in Ward 65, both under Kolkata Municipal Corporation.

Target population include children under the



age of five, school going children, pregnant and lactating mothers, community people, respective Government Officials as stakeholders.

### Highlights of Progress:

- Involved 192 WASH Committee members and other community people to prepare area mapping process through PRA;
- Formed 17 new and revitalised 10 WASH committees through 45 meetings;
- Renovated 10 drinking water points, 9 Community Toilet Blocks and 3 additional space for
- urinals/change room/future expansion, 8 toilet blocks in 5 schools;
- Reached 7140 target community people through 19 education campaigns on safe water, water
- handling process and chlorination;
- Reached 948 community mothers for discussion on safe disposal of child faeces and promoting hand-washing with soap;
- Reached 614 community mothers and other stakeholders to address the 7 point plan of Diarrhoea Prevention and Control;
- Arranged 3 sharing meetings with 42 officials from concerned Govt. Departments;
- Organized orientation sessions on 7 point plan, diarrhoea- prevention and control in 18 schools
- ensuring participation of 1324 school children and 239 teachers / SMC /SDC members;
- Reached 467 community toilet user group members in 24 meetings, 4 CMT user groups formed and 2 restructured.

### Significant achievements:

- Rapport building with different Government Departments like MMIC-Health/Bustee Development at KMC, Directorate of Social Welfare-Salt Lake, District Family Welfare Bureau, ICDS- Entally and Belegkata, Borough VII Office, Ward Offices, Ward Health Offices, Indian Medical Association, through regular interaction ensured their participation in sharing meeting /
- programme;
- Received permission from DFWO for displaying banner at all health service points in ward 58 and 65, received permission/NOC from Ward Councilors- 58 and 65 for initiating hardware intervention at CMTs/Water Points, received permission from SSM for initiating hardware
- intervention at schools;
- Developed rapport with Primary and High Schools in ward 58 and 65 running under SIRVA Siksha Mission, ensured participation of Head Teachers/Assistant Teachers in sharing meeting, children's active participation in awareness programme;



- Renovation of all CMTs, School Toilets and Water Points completed within time line, displayed
- IEC materials at all hardware intervened sites.

## TUBERCULOSIS HEALTH ACTION LEARNING INITIATIVE (THALI)

### Background:

Tuberculosis Health Action Learning Initiative (THALI) is a consortium based project lead by World Health Partners (WHP) and supported by other consortium partners, Child in Need Institute (CINI), John Snow India (JSI) and Global Health Strategies (GHS).

The project is currently operational in 144 municipal wards of Kolkata Municipal Corporations, 17 municipal wards of Baruipur Municipality, 35 municipal wards of Rajpur-Sonarpur Municipality and 66 municipal wards of Howrah Municipal Corporations in West Bengal.



The project aspires to curb the disease of Tuberculosis through early identification of the disease and notify the government who are being treated in private sector, create greater awareness of the population, contact tracing and adherence to treatment protocols.

THALI Community Engagement initiative is envisaged as a multi-pronged strategy for creating a local level network with the local key stakeholders through NGO led model. Child In Need Institute (CINI), being a part of the consortium, leads the community engagement domain to ensure increased social mobilization and community action towards fighting against the disease.

DAS is a community engagement partner of this initiative working in all the designated 08 KMC Wards of Tangra UHD under KMC-RNTCP.

Tuberculosis Health Action Learning Initiative (THALI) project's role is in improving the TB patient support system through a patients' centric approach in West Bengal. The objective is to engage



community level human resources who will be

equipped with solid interpersonal skills and knowledge to address TB prevention and care in the respective area. TA will serve as an intermediary between community, private providers and public health system as she/he will be collecting and maintaining accurate information of patients under the assigned operational areas. She/he will be responsible for individual counselling and support to the diagnosed TB cases and their family members, outcome of which will lead to an increased treatment adherence and completion rate in order to ensure the improved TB outcomes.

### Objectives:

- To identify and map the vulnerable areas under the assigned territory with population
- To support all TB cases of operational areas in creating the base work for accessing benefits, as per the guideline of RNTCP through DBT
- To support the community-level workers and Targeted Outreach to Uplift Community Health (TOUCH) Agents and supervise their activities in coordination with the THALI field team where applicable
- To develop community-level system through CBOs to generate awareness on TB care, prevention and eligibility to receive the benefits under RNTCP
- To strengthen relationship with local government and line departments to create linkage between the patients and available government benefit options including social welfare schemes
- To create opportunity for the TB patients and their family members to link with insurance schemes and microfinance
- To demonstrate innovative community based models on treatment adherence support

### Scope of work:

- Mapping and updating information on the vulnerable areas under the assigned territory with population covered
- Support field workers in connecting all THALI identified TB cases in the community
- Keep close contact with DTOs, STSs, STLs to collect the list of TB patients from public facilities
- Create database of all TB cases in the areas for accessing benefits, as per the guideline of RNTCP
- Support the community-level workers /Targeted Outreach to Uplift Community Health (TOUCH) Agents for maximum utilization of their services and supervise their activities in coordination with the THALI field team when required





- Conducting community-level events to generate awareness on TB care, prevention and eligibility to receive the benefits under RNTCP guideline in coordination with local governments and respective departments by involving identified CBOs
- Create opportunity for the TB patients and their family members to link with insurance schemes and microfinance
- To demonstrate innovative models on community based treatment support and patient care and additional nutritional support if available.

### **Achievements:**

- Mapping of vulnerable areas focusing strategic locations with population
- Validation through home visit of the patients' list of all TB patients supplied by THALI and RNTCP under the assigned operational area
- Collection of required information in the prescribed format regarding DBT from all existing patients, collation and sharing of data on all ( Public, Private, DR,DS) TB cases under the assigned operational area
- Creation of database in line with RNTCP and template available in the system and share the database of TB cases for accessing benefits, as per the guideline of RNTCP.
- The joint initiative provided services to 413 TB patients across 08 Wards under Tangra Urban Health District (UHD).
- Sharing of updated database periodically with THALI team as per direction
- Counselling of patients, care-givers and their family
- Household visit around those area where the patient is identified and beyond, for spreading TB prevention messages
- Filling up the check list of household visit and weekly submission to THALI CE team
- Facilitate sensitization meetings through community mobilization, especially in the priority areas, as and when required
- Create community level network of CBOs to support TB patients, community based care givers for counselling and education for TB patients
- Keep the record on number of community sensitization meetings held, and report the same on every week
- Report on exploring and creating opportunity for the TB patients and their family members to link with insurance schemes and microfinance

- Palliative care to identified TB patients in coordination with govt, as well as additional nutritional support, as and when required through community led models.

