

# Annual Report 2018-19

**3** GOOD HEALTH  
AND WELL-BEING



**PUBLIC HEALTH**



**4** QUALITY  
EDUCATION



**EDUCATION**



**5** GENDER  
EQUALITY



**CHILD PROTECTION**



**6** CLEAN WATER  
AND SANITATION



**WATER SANITATION &  
HYGIENE (WASH)**



**8** DECENT WORK AND  
ECONOMIC GROWTH



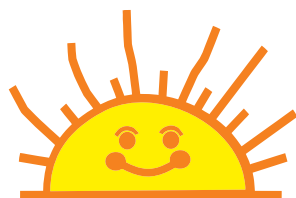
**LIVELIHOOD**



**10** REDUCED  
INEQUALITIES



**WOMEN  
EMPOWERMENT**



**Development Action Society**

**DEVELOPMENT ACTION SOCIETY**

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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 30 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, child protection, health care, water sanitation hygiene (WASH), livelihood and 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 2018-2019 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.

DAS also focused in national and international development goals in each areas of interventions. Through our entire intervention das tried to address the issues of access the education for all, development of community level child protection mechanism supporting the govt structures, enhancement of health slicking behaviours addressing issues of child & maternal mortality and morbidity issues due to communicable and non-communicable diseases; encouraging community in safe accessing of potable water, sanitation and hygiene practices and facilities; Facilitate the skill building initiatives of women and youths and also facilitate the community level women empowerment mechanism through developing the financial and functional literacy. 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 eleven 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, Save the Children Bal Raksha Bharat, Azad Foundation, Me-Importas, Mennonite Central Committee, Friends of Calcutta, Toronto Canada Foundation , Samagra Siksha Mission (SSM), TEAM CAFÉ, West Bengal Pollution Control Board, ONGC, SMILE Foundation, Weavers Studio, Rotary Club, Lions Club, Urmibala Smriti Kalyan Sangstha, , National Child Labour Project, Sarva Shiksha Mission, Child In Need Institute (CINI) 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:

Samagra Siksha Mission (SSM)  
West Bengal Pollution Control Board  
National Child Labour Projects  
KCLRCWS (Kolkata Child Labour Rehabilitation  
come Welfare Society)  
State Education Department  
SUNDARINI

### ➤ International Agencies:

Save the Children – BalRaksha Bharat  
Friends of Kolkata  
Mennonite Central Committee  
Azad Foundation  
Toronto Canada Foundation  
Me Importas  
SUAS Ireland  
SMILE Foundation  
TEAM CAFÉ  
Charities Aid Foundation (CAF)

### ➤ National Agencies:

Weavers Studio Resource Centre  
ONGC  
Urmibala Smriti Kalyan Sangstha  
Rotary Clubs

Lions Club

Child In Need Institute (CINI)

Individuals and Groups

Jagori Rural Trust

Delhi Public School,

Silver Point School

Ashoka Hall

Riddhi Beauty Parlor

Bantala Bhatri Sangha

Kalarit Adarsha Shiksha Niketan

### ➤ Individuals:

Shri Swapan Samdder, MMIC-Basti  
Development and Ward-58 Councilor, KMC  
Shri Nibedita Sharma, Ward-65 Councilor,  
KMC  
Shri Sushil Sharma, Social Worker, Ward-65  
Shri Sushanta Ghosh, Ward-107 Councilor,  
KMC  
Shri Subhas Chakraborty, Social Worker,  
Ward-58, Kolkata  
Mrs. Susila Almal  
Mr. Nirmalendu Basu  
Ms. Vishaka Das  
Ms. Sujata Kar  
Mr. Nitish Sapui  
Mr. Bablu Mondal



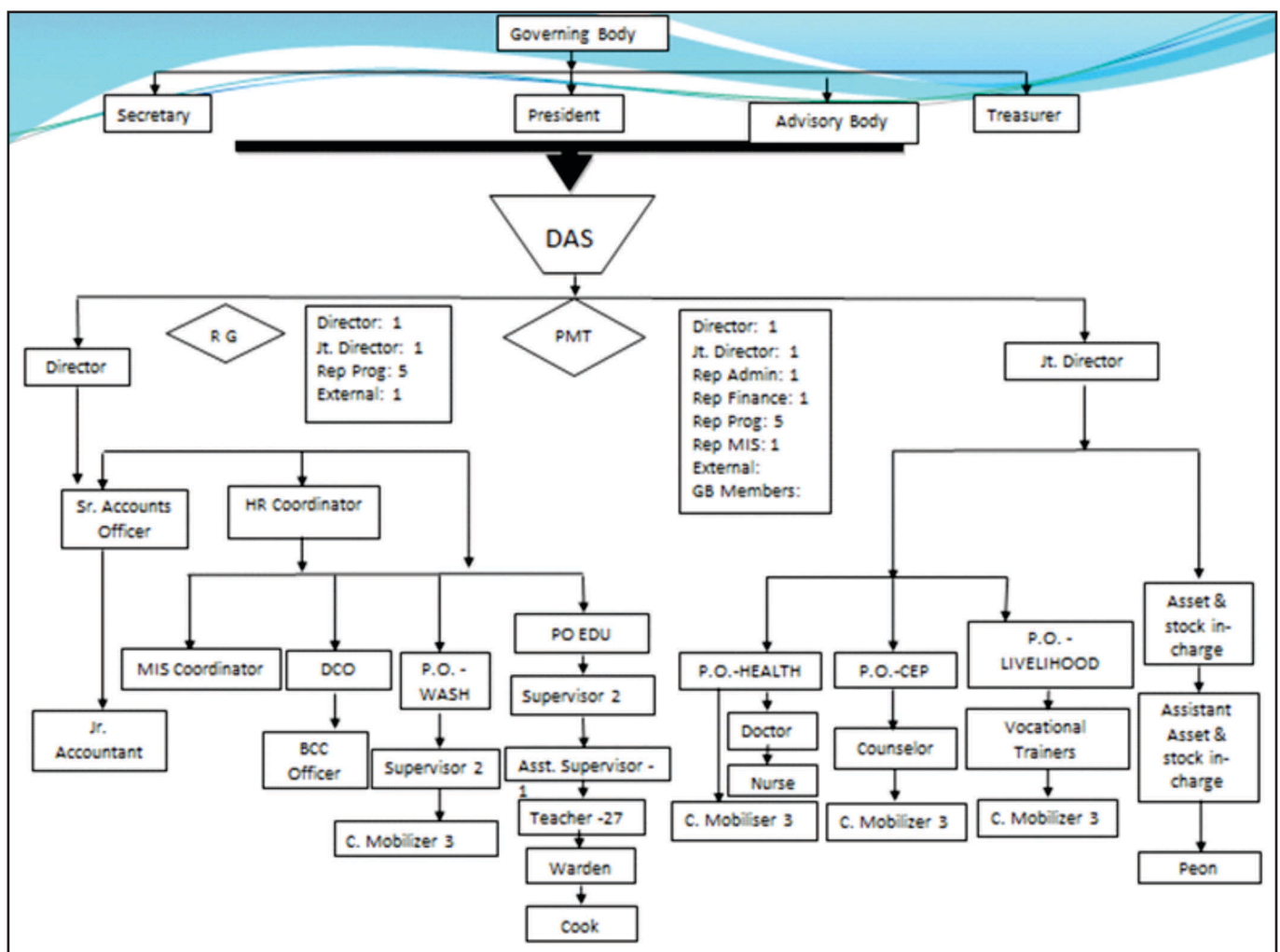


## ORGANISATION PROFILE

**Establishment:** Founded on 18<sup>th</sup> August 1989, Development Action Society is a not for profit, non – political, non religious – government organization registered under the Society's Registration Act XXI of 1961, Registered under NITI Ayog, 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.

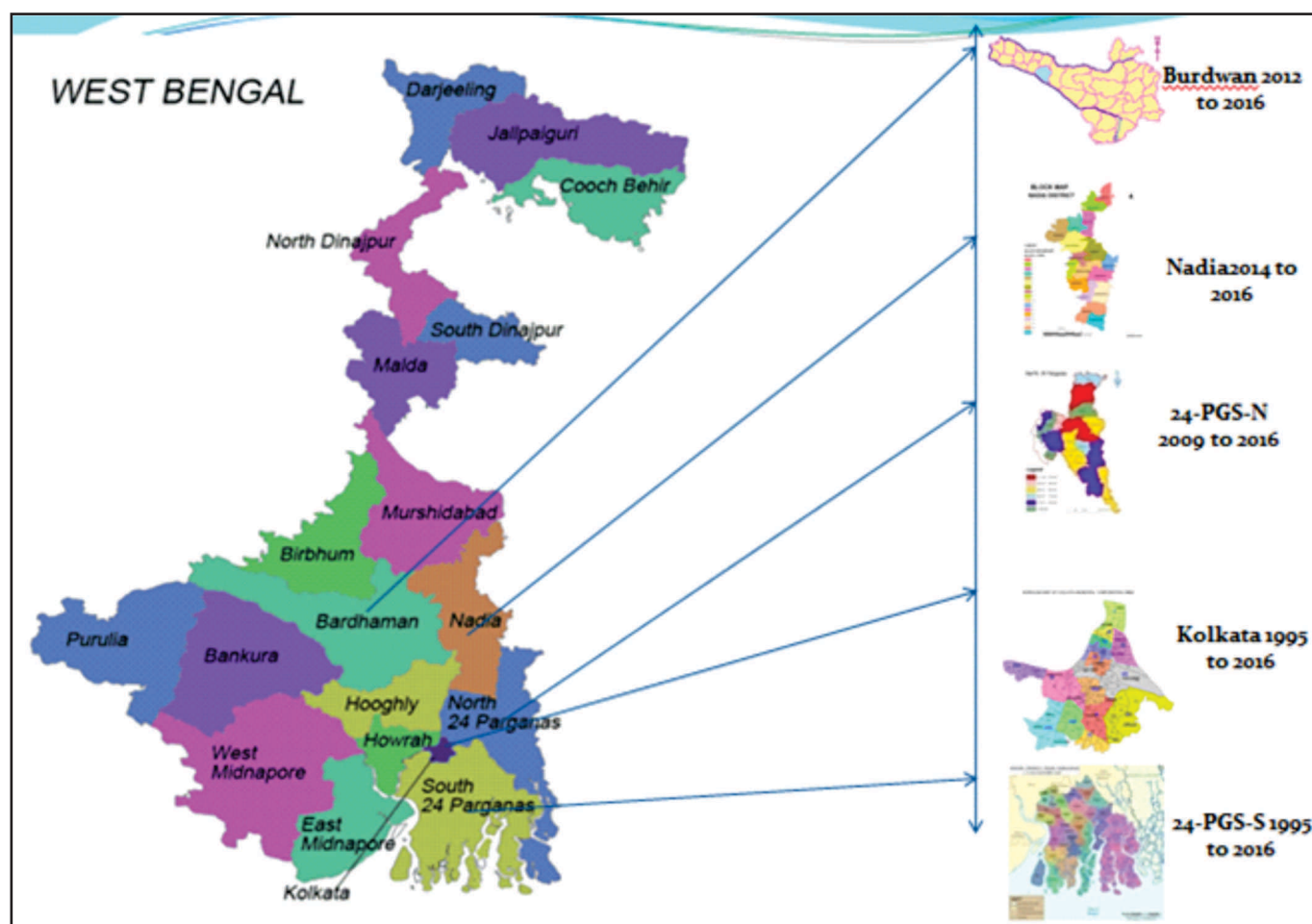
**Vision:** We believe in a world where every human being enjoys equal rights and opportunities in order to lead a healthy and creative life with dignity and self-respect.



## GOVERNING BODY MEMBERS 2018 – 2019

SL	NAME	DESIGNATION	OCCUPATION
1	MRS. SOMA BASU-MALLIK	PRESIDENT	SOCIAL DEVELOPMENT CONSULTANT
2	MRS. SUBRATA KAR	VICE-PRESIDENT	SOCIAL DEVELOPMENT PROFESSIONAL
3	MRS. PURABI ROY	SECRETARY	SOCIAL WORKER
4	MRS. SATHI DE	ASSISTANT SECRETARY	HOMEMAKER
5	MRS. SOUMI GHOSH	TREASURER	SOCIAL WORKER AND CONSULTANT-ENVIRONMENT
6	MRS. BANI BISWAS	MEMBER	HOMEMAKER
7	MRS. RINA SUKAI	MEMBER	HOMEMAKER

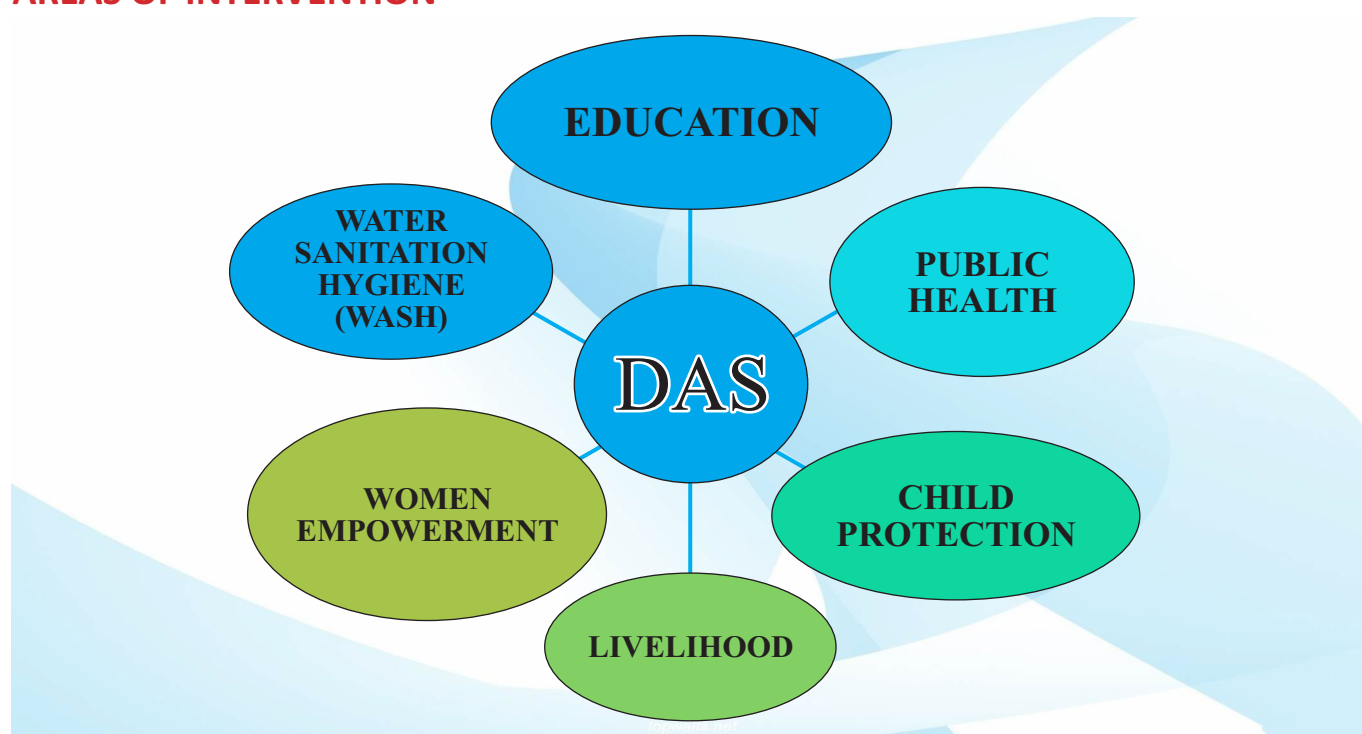
## GEOGRAPHICAL LOCATION



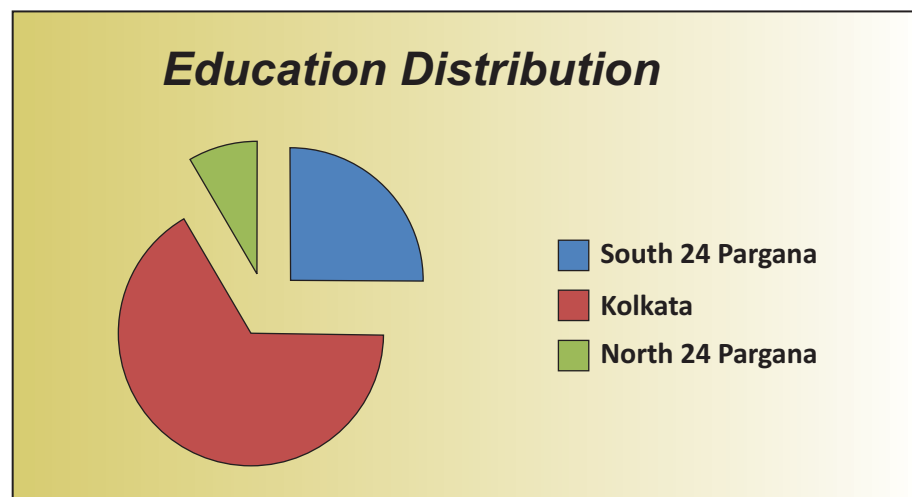
## POPULATION COVERAGE

Parameter	Total Population Covered in Kolkata District	Total Coverage in 24 PGS South District	Total Population Covered Nadia District	Total Population Covered in Burdwan District	Total Population Covered in 24-PGS North District	Total Population Coverage in West Bengal
No of Households	180932	18279	6226	30526	25,973	261936
Total Population Person	774172	81371	26906	137820	105,678	1125947
Total Population Male	399793	41661	13843	71033	52,899	579229
Total Population Female	374379	39710	13063	66787	52,779	546718
Population in the age group 0-6 Person	68145	9898	3585	12914		94542
Population in the age group 0-6 Male	35029	5048	1815	6811		48703
Population in the age group 0-6 Female	33116	4850	1770	6103		45839
Literates Population Person	591116	51383	16013	110662		769174
Literates Population Male	317585	28969	8536	59323		414413
Literates Population Female	273531	22414	7477	51339		354761
Illiterate Persons	183056	29988	10893	27158		251095
Illiterate Male	82208	12692	5307	11710		111917
Illiterate Female	100848	17296	5586	15448		139178

## AREAS OF INTERVENTION



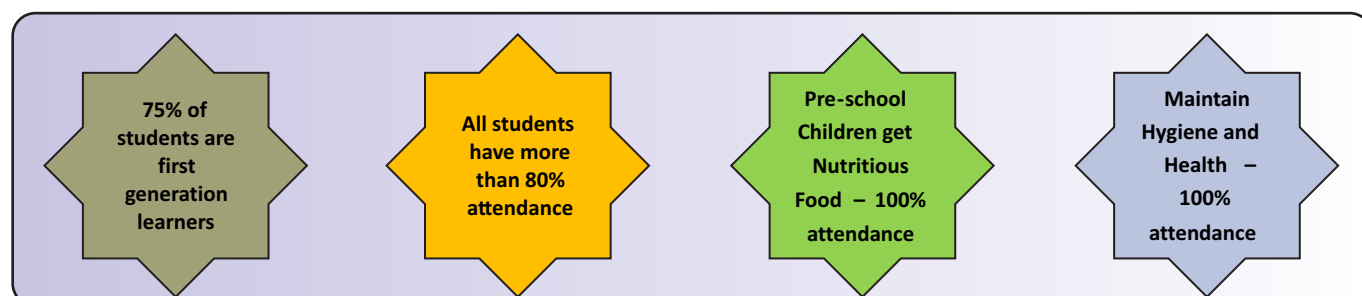
## EDUCATION & CHILD PROTECTION PROGRAMMES



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 below 5 years 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 malnourishment 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.
- ❖ Pre-school Children get Nutritious Food– 100% attendance
- ❖ All students have more than 80% attendance
- ❖ 75% of students are first generation learners
- ❖ Maintain Hygiene and Health – 100% attendance
- ❖ To inform all the children of their rights, especially their right to education.





## BACK-UP EDUCATION SUPPORT & PRE-SCHOOL

### WITH SUPPORT OF SMILE FOUNDATION:

Development Action Society running the education centers in following areas with the support of Smile Foundation the centers are –

1. ANANDALOK : Anandapur – Ward -108, KMC, West Bengal
2. NABADEEP : Arupota – Ward -58, KMC, West Bengal
3. MUKULBITHI : Makhaltala - Ward -57, KMC, West Bengal
4. NABADOY : Bantala - Ward -108, KMC, West Bengal
5. Ucchepota - Ward -108, KMC, West Bengal
6. Chowriswar – Beonta -1 Panchayat, Block: Bhangore – II, 24 PGS South

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 partly funded by the **Smile Foundation**.

Anandalok School implements two teaching sessions, one in the morning from 9:00am to 12:00am and one in the evening between 2 to 8 years, 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 improvements 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. In this year the player from KKR delightedly interacted with the students and all students enjoyed the moment very much. 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:



**SANTANU MUNDA** is a nine years old boy and he studies in class III. He lives in the village of Ucchepota, P.O – Sonarpur, 24 Parganas (South). He is very polite, shy in nature and a slow learner. He studied here from his early age. He goes to kharki Primary School for his study. His father Dilip Munda works as a temporary labor and he earns about Rs. 4000/- per month. His mother Jhumpa Munda also works as a domestic maid in Ruby housing complex. He is the only child and he stays with his parents and grandparents. Earlier, he did not know any “Sarachinho in Bengali”, correct spellings etc. He did not know additions, subtractions, tables. He also could not read the book properly. But now he concentrates on his study and has improved

greatly. He does his home tasks willingly. Their financial condition is very poor and he cannot afford private tuitions. Hence he comes to our centre. He attends the coaching classes regularly. He wants to be a teacher when he grows up. He loves to watch the cartoons, movies and cricket matches on television.



**RIYA PRAMANICK** is an eight years old girl who lives in Arupota, P.O- Dhapa, P.S –Pragati Maidan, Kolkata – 105. They are staying here for about twenty years. She is enrolled in the year of 2017 when she was in Class I. Now she studies in class II and goes to Boinchta Upendranath F. P School for her study. She is very pretty, talkative and always bears a smiling face. She could not remember the old tasks but she always learn the lessons with concentration, she attend the class regularly and completes her home tasks on time. She has a younger brother. Her father Bibek Pramanick works in a car service centre which has in their locality and he works as a car washer. He drinks alcohols regularly when he returns home from his job. He does not bear the family

expenses and sometimes assaults Riya's mother badly. Riya is very scared of her father and does not talk to her father. She loves her mother and also her coaching teachers. Her mother Latika Pramanick is a housewife. They are very poor. Her mother wants to earn some money for their family but cannot leave the children behind alone. Riya loves to play with her classmates and watch cartoons on TV. She is very ambitious and wants to be a doctor when she grows.

## 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.

## EARLY CHILDHOOD EDUCATION

This project is supported by **MENNONITE CENTRAL COMMITTEE**. This project looked after the marginalized children and women of the targeted areas in the villages of Tongpara, Andulgoria and Mousal of Tardaha Gram Panchayat.

### Objectives:

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

### Target population:

**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:

**SAMAGRA SIKSHA MISSION (SSM), 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 population:**

Children of vulnerable families residing in the project areas.

**Target area:**

Semi-urban areas of Arupota, Makaltala, Anandapur, Ucchepota, Chowbaga, Bantala in Kolkata and Chariswar in South 24 Parganas.

**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 10–16 years 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 of art and culture to the children.

**CHOWBAGA SPOKEN ENGLISH AND COMPUTER CLASS**

**Location:** Chowaga

**Supported by:** ISRC

**Objectives:**

- Teaching spoken English, including sentence structure, nouns, verbs, and tenses.
- To carry out a drive towards social commitment by providing free basic computer literacy training to women primarily in the rural areas so as to make them able to use computers and related technology efficiently and specially utilize the wide advantage of accessing the Internet.
- For these spoken English and computer skills to translate into real use of English and computers on a day-to-day basis.



## 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-reliance 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 fundraising 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 equipment.



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.
- 6 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 equipment 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 2018 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.





## 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 Population:

Geographical areas include 73 registered Slums and colonies in Ward 58 and 65, both under Kolkata Municipal Corporation. Total population coverage more than 1 Lakh 43 Population



#### Target Area:

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 revitalized 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 and 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:

- Celebrating International days to make the project more viable and acceptable to local people and meet the govt. interest. The international days are World Water Day, Global Hand Wash Day, Intensified Diarrhoea Control Fortnight (IDCF) and World Toilet Days. World Breast feeding week involving the 3 medical colleges in Kolkata Viz. Cihittaranjan National Medical College and Hospital (CNMC&H), Nil Ratan Sircar Medical College and Hospital (NRSMC&H) and Calcutta Medical College and Hospital (CMC&H).
- 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 Belegghata, Borough VII Office, Ward Offices, Ward Health Offices, Indian Medical Association (IMA), 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

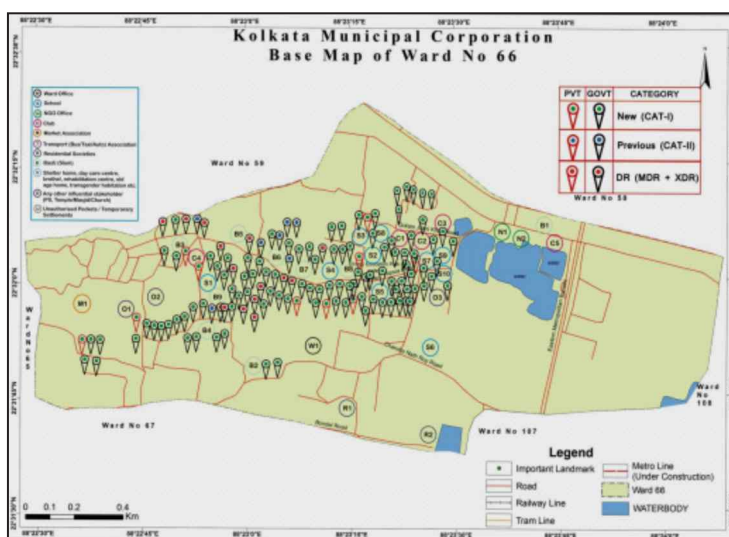


## Scope of work:

- 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 of 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.

## DENGUE INSURANCE FOR GOVT. SCHOOL STUDENTS

### 1. Introduction and the background of the program (Behtar India Campaign):

CAF India is partnering with NDTV and DHFL Premedical Insurance for Behtar India Campaign. It is a nationwide campaign which focuses on three main pillars of the initiative – Health, Hygiene and Environment. The first phase of the campaign is ensuring Behtar Swasthya (Health). The main aim of



this phase is to fight the scourge of mosquito borne disease- Dengue. It will look at creating awareness about the cause, prevention and mechanisms to fight such diseases.

Under this phase we aim to reach out to government school children through our NGO partners and undertake the following:

- Provide dengue Insurance cover of Rs. 23,000/- per child
- Spread awareness in school
- Provide repellents/fumigation

CAF in partnership with DAS (due diligence certified NGO by CAF) has implemented the program to cover 9,742 underprivileged school students of government schools in the Kolkata Municipal Corporation area over three phases from 2017 to 2018. The Councillor of KMC and MMIC Bustee (Slum) Development deeply appreciate the effort of DAS to cover children under Dengue medical insurance of his Ward. Many schools were covered under his Ward, i.e. KMC Ward 58.

The specific roles of the DAS were:

- Identification and Finalization of Government schools
- Meeting the relevant district authorities/ education department
- Identification and Finalization of beneficiaries/students
- Capturing details of students in prescribed format
- Signing of Master Policy with the person designated by Government/School Principal
- Policy Purchase from Insurance Company (funds will be routed through CAF India)
- Awareness session in school (Marketing collateral will be provided by Insurance Company)
- Arranging mosquito repellents/fumigation in the covered government school (funds will be provided by CAF India).
- Identifying of hospitals in the areas where school are located

## **2. Activities**

### **1. Identification and Finalization of Government schools**

DAS operates two residential units of two Govt. Girls High School under the Sarva Siksha Mission, Kolkata. Hence DAS has access to a resource directory of all the government schools in the KMC operational area.

### **2. Meeting the relevant district authorities/ education department**

DAS was granted permission by the Chairman of SSM Kolkata to implement the Dengue Insurance Program. It was decided initially to target the schools having residential units attached to them as these students were more vulnerable to Dengue.

### **3. Identification and Finalization of beneficiaries/students**

The school authorities were instructed to provide with the student database by the order of the Chairman SSM Kolkata. Most of the school supplied handwritten database while some gave computerized database. However, they took a long time to share the data base which delayed the project implementation.

### **4. Capturing details of students in prescribed format**

DAS had to deploy many staffs for the data entry of the student's database sent across by the schools. The database once prepared (in batches) was sent to CAF and DHFL.

5. Signing of Master Policy with the person designated by Government/School Principal

The forms were given to the Head of the Institutions and were duly signed by them. Policy Purchase from Insurance Company (funds will be routed through CAF India). The students list was mailed to DHFL and funds were insurance premia was also remitted to the Company. After some sometime, the policy documents were issued by DHFL and received by DAS for distribution to the respective schools.

6. Awareness session in school (Marketing collateral will be provided by Insurance Company)

The awareness sessions were organized in the schools as per the table annexed in a separate MS Excel file.

7. Arranging mosquito repellents/fumigation in the covered government school (funds will be provided by CAF India).

Distribution of the mosquito repellents like Good Knight Coils, Flash Guard Cards, etc. to the students was carried out during the Awareness Session organised in the schools. Black Hit Spray was given to the school for fumigation. Mosquito nets were distributed to the residential units of the schools wherever applicable.

8. Identifying of hospitals in the areas where school are located

Hospitals are already identified where the schools are located. However, the most popular hospital for Dengue is the Belegghata ID Hospital which is a government facility.

### 3. Achievements/Beneficiaries:

The direct beneficiaries of the program have been the underprivileged school children who were insured against the deadly Dengue disease for a period of one year under this project. The project proved to be very effective in terms of providing hospitalisation coverage as Dengue became a menace in the autumn of 2017 in Kolkata. The other components of the project like distribution of repellents to the children, fumigation at the schools and awareness generation at schools on the disease also helped to arrest the spread of the disease in the target schools. As a matter of fact only two students in the targeted schools were affected by Dengue and were cured after proper and timely treatment offered by the Residential units of the concerned schools.

The project could provide customized medical insurance for the Dengue disease to 9,742 underprivileged school students of the government schools in Kolkata is the most poignant feature of the intervention.



## WATER SANITATION & HYGIENE (WASH)

### SOCIAL CHANGES UNDER REMEDIATION WORK AT DHAPA



#### Background:

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 BOARD**.

#### 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 stakeholders
- 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.



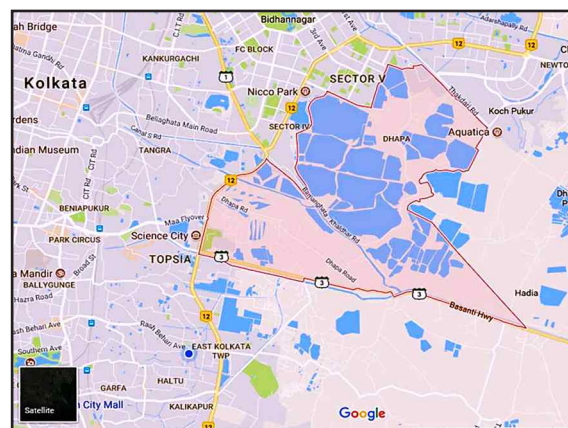
#### Methodology:



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 Dhapadhipi. 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.



## 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 'Swachh Bharat Abhijan'. One of the aims of the project sets out to reach 50,000 beneficiaries in low income settlements.

### Objectives:

- Conduct a comprehensive WASH related risk analysis, including the living, social, gender-related variables and occupational conditions and human health impacts in cluster of threeslums in Kolkata Ward 58.
- Develop and implement participatory intervention strategies in DhapaDhipi, 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.

## LIVELIHOOD PROGRAMMES



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

**Title:** Textile Skills and Entrepreneurship

**Location:** Jamalpur, Nadia

**Funding Partner:** Urmibala Trust

**Aims:**

- Economically empower 23 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:**

- There were 23 students enrolled on 1st March 2018.
- Between March and September, 2 students left.
- As on 31<sup>st</sup> August 2018, there were 21 students.
- The average attendance of 21 trainees was 87% for the month of September 2018.

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

20 women trained under the Livelihood 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.

## TAILORING TRAINING OF UNDERPRIVILEGED RURAL WOMEN & ADOLESCENT GIRLS

**Funding Partners:** **TORONTO CALCUTTA FOUNDATION CANADA (TCF)** & Associate Sponsor -Rotary Club of Calcutta Downtown (**RCCDT**)

**Location:** Korolberia Prathamik School, Charishwar Village, District 24 Parganas, West Bengal, India

**DAS** is implementing Tailoring Training Centre (**TTC**) project for teaching sewing skills to around 28 underprivileged rural women and adolescent girls who have no other livelihood means. It will be a 2-Year training programme. The project is being implemented in Charishwar village in South 24 Pargana District, West Bengal, India. Charishwar village is at a distance of 70 km (approx.) from Kolkata.

The project aims to provide not only tailoring skills but will also provide a measure of commercial and marketing skills for the students to exploit their learnt skills commercially. The implementation began from 17<sup>th</sup> June 2018 while the formal inauguration took place on 2<sup>nd</sup> July 2018.

The trainees were selected from the list of mothers who enrolled for the course. They were shortlisted based on their economic conditions, their enthusiasm for learning, their household condition (to determine whether it is possible for them to attend classes) and such other determining factors.

### Attendance:

- There were 26 students enrolled on 1st March 2019.
- Between March and September, 1 student left.
- As on 31<sup>st</sup> March 2019, there were 25 students.
- The average attendance of 25 trainees was 78% for the month of March 2019.



### WOMEN EMPOWERMENT:

Name of the Project: **SAKHA**

Supported By: **AZAD FOUNDATION**

### Project Summary:

The project will focus on **Female Youths**. Through life skill educations and knowledge sharing in specific areas the risk and vulnerabilities of the female youth would be addressed. These women are prepared to find dignified jobs focused on driving public transport vehicles like App-based cabs and taxis as they are being skilled technically. Life skill classes enable them to manage their crisis situations which are pertaining



in health, education, livelihood and protection.

The proposed project location would be all the Gram Samsads of Tardaha Gram Panchayat under Bhangore Block I, adjacent areas like Bantala, Kheyadaha and all 144 Wards of KMC and 03 wards under Bidhannagar Municipal Corporation (BMC).

**40 female youths** will be provided with vehicle driving and other allied skills training in this specialized service sector. Development Action Society (DAS) will work with in liaison with various stakeholders like local schools, resident welfare associations, and network of youth clubs, police, education and labour department, media, corporate.

#### Specific Objectives:

- 40 women youths will be identified from the targeted areas within a period of twelve months.
- Mapping of vehicle operators, training institutes and its associated cost within Kolkata for a period of two months.
- Training 40 potential women youths for public vehicle (taxi) driving and operations.
- Link them with Azad Foundation to operationalize the profession.
- Educate the youths of the targeted areas on hazardous occupation in the unorganized job sectors.
- Provide life skill support to the identified women youths of the locality.



#### Project Outcomes:



- 06 staffs aligned and trained with “**Skill Building and Placement of Marginalized Women Youth**” project
- 40 women youth engaged in hazardous activities will be provided skill training on public vehicle (taxi) driving, and self-employment as a means of livelihood
- 40 women youths will be provided psychosocial support through counseling and play therapy.
- 40 women youths will be provided life skills, skill building training to develop discipline, work culture & ethics
- 40 women youths linked with formal financial institutions.
- 12 street plays/puppet shows/ Auto campaign conducted
- Interface meeting with all stakeholders at all phases
- 12 Project Planning & review meetings held
- 12 meetings with key stakeholders and stakeholders

## **ANNUAL REPORT 2018-19**

# **DEVELOPMENT ACTION SOCIETY**

**1721 Rajdanga Main Road, Block: EC71,  
Kolkata - 700 107**

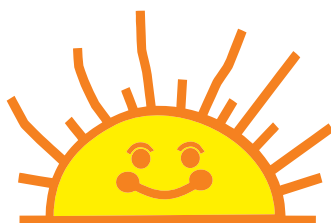
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**Development Action Society**