



Vacham

The Janaki Foundation's Newsletter

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It is a pleasure and privilege to bring out this issue of the newsletter as march 2010 saw JF entering 10 years of its founding. We reiterated our commitment of serving the community at our areas of operation through the following program domains: *Health and health determinants; Technical Assistance and support; Knowledge Management; Micro Finance and Micro Enterprise Development; Training and Development and Livelihood Interventions*. These happenings brought to the spotlight core issues, barriers and success stories from the different geographies of our thematic program interventions.

JF reinforces its commitment to focus on the un-served and under-served urban areas and the vulnerable sections of the society through its urban development approaches. The technical updates and the background papers to streamline urban health interventions in the state of Jharkhand has been well accepted and acknowledged by the key decision makers of the state. Nevertheless to mention that these initiatives has led to more refined urban health planning and budgetary provisions in the Department of Health, Project Implementation Plan (FY 2008 – 2009).

Acknowledgements

JF is grateful to the members of the Governing Board, Advisory Council, Expert Groups, Social Workers/Volunteers, Health Professionals, NGO's and Corporate Partners who have readily responded to our call for advise and assistance in the true spirit of service for the cause of the humanity.

We are grateful to various departments in the State Government of Jharkhand and Bihar, Particularly the department of Health and Family Welfare, GoJH; the Adityapur Notified Area Committee, the DRDA, the Adityapur Industrial Area Development Authority, Aditya Foods, Bebbco Motors, JF Solutions for their sustained interest and cooperation in furthering the aims of The Janaki Foundation. We are also grateful to the media, both Print and Electronic – who in recent times have displayed enhanced sensitivity to facilitate expansion and access of the services to the unserved and underserved, and helped build public opinion in favour of a determined action.

I appreciate the staffs and volunteers of JF who continue to discharge their duties with enthusiasm and efficiency. Looking forward to new initiatives towards achieving the vision of The Janaki Foundation (JF).

Arun K. Tiwari
Chief Executive Officer

March 2010

Health

World Population Week

World Population Day is annually observed on July 11 to reaffirm the human right to plan for a family. It encourages activities, events and information to help make this right a reality throughout the world. World Population Day aims to increase people's awareness on various population issues such as the importance of family planning, including gender equality, poverty, maternal health and human rights across the globe.

In response to this rights based approach for improving access to services and awareness on population and related issues including morbidity and mortality, governments across the globe organize important events to mark the occasion. Some of the events include sensitizing the key stakeholders through workshops and seminars, conducting IEC campaigns for an extended period starting on the day, organizing camps for improving family planning services etc.

To mark the occasion of the world population week (July 2009), the JF organized health and family welfare service delivery day at the Sadar Hospital, Saraikela Kharsawan in close partnership with the PSI.

Civil Surgeon inaugurated the world population week mela at 10.00 A.M. He was followed with the DPO, ACMO and others. They then moved along all the stalls understanding the products, brochures and placements.

The stalls were put up by the following development partners

- PSI
- HLFPPPT
- ABT
- Unicef
- Blindness Control Department
- Malaria Control
- TB - among others...



After which the team went to the conference hall for further deliberations. Our Banners were placed at all critical locations giving complete mileage and branding to the Janaki Foundation Health Interventions.

To make the day more lively, nukkad natak were coordinated on Family Planning issues by the PSI.



In the conference room, a lecture was organized on issues related to Population Growth – its management and control; where in a projection of the movie was shown to the audience that focused on Family Planning Counseling.

In all 12 clients were provided injectables while 43 clients were provided IUD services during these two days.

JF Develops Databank for Urban Health Service Delivery in Jharkhand.

JF supported department of Health, Govt. of Jharkhand in preparing the following documents:

- Right from inception, Jharkhand, a recently constituted state of India, is politically and administratively unstable. In a short span, Jharkhand witnessed more than nine chief ministers and nine health secretary who are key decision makers. The decadal growth is 28.36%. State houses 23.9 lakh urban poor. This does not account unrecognized population residing in non-notified slums. Health indicators are at dismal state with 85.5% home deliveries, 23.1% complete immunization with IMR 57.4%. While undertaking efforts to strengthen health service delivery to support urban poor; a need was felt to understand “what” and “How”. As a response, an inclusive multi-stakeholder consultative approach was undertaken in form of Technical Assistance.

In response of its vision mandate, JF supported the department in updating the slum list, preparing the background information for strengthening Urban Health Initiatives in select cities in the state of Jharkhand (Ranchi, Jamshedpur, Dhanbad, Bokaro, Hazaribagh, Dumka, Deoghar). A city profile has been prepared as a justification note for expanding access and reach of health services in the state of Jharkhand.

- Prepared the Sahhiya Compensation Package modules as part of ASHA training modules.

Training and Development

Orientation on Food Processing Training to women self help groups

Food Processing Orientation was facilitated for the unemployed youths as part of vocational training at Gamharia Block in District Saraikela Kharsawan.

Orientation on Quality Standards (ISO 9001 : 2000)

JF, as part of its management and technical support initiatives, provided support to the following companies and institutions in adhering to its quality manuals and certifications. The companies are: TRAMCO, BEBBCO Motors, ADITYA FOODS, JF SOLUTIONS among others.

Training for Members of Panchayat representatives

One day training for members of panchayat representative was held on 18 February 20011 at the Gamharia Block of the district Saraikela Kharsawan operational area. The main purpose of the training was to sensitize the panchayat representative on gender issues which are prevalent in their community. The panchayat representatives acknowledged that discrimination between girls and boys still exists in the society and that there is a strong need to identify and resolve such issues. Issues like gender inequality, the role of women in decision making etc were discussed. It was felt that an effective mainstreaming of village level development program needs to be done.

JF and Aditya Foods link up to train young unemployed in Saraikela and East Singhbhum in Jharkhand.

About 200 underprivileged young people in Saraikela Kharsawan and East Singhbhum program intervention area will be trained for employment under a new Aditya Foods and The Janaki Foundation partnership.

Aditya Foods, a leading Food Processing firm and JF have joined forces to provide skills to hundreds of 18 to 25 year olds to get a job or start their own business. Aditya Foods is providing financial support and commercial expertise for the pioneering scheme which will also reach out to youth in remote areas through world-class virtual training modules. Free skills and training programs will target industries such as information technology, customer relations and business process outsourcing where local demand for jobs is high.

The two-year scheme will bridge the gap between job supply and demand by matching disadvantaged young people with local opportunities through networks of employers. The new partnership was launched first in Jamshedpur this year and it is planned to roll it out statewide with Gamharia and other blocks being considered among the next locations.

Education

Inter school competition with the involvement of children and school teachers was also organized where activities like sports events, rangoli competition, spring event, etc. were held.

Policy Analysis and Public Advocacy

World Environment Day

June 5, 2009 was the World Environment Day, when we renewed our commitment to conserving Earth's resources for future generations. The United Nations Environment Program (UNEP) thematic decision to celebrate world environment day was "Forests - Nature at Your Service".

Forests are one of our greatest natural resource against global warming. Trees absorb carbon dioxide (a key greenhouse gas and principal contributor to global warming) from the atmosphere and store it while releasing oxygen back into it.

We at JF understand that slums are not "the problem." Rather, they are the spatial manifestations of urban poverty, social exclusion, and inappropriate government policies. Indeed, slum settlements represent an active, grassroots attempt by the desperately poor to take care of themselves, which is characterized by Poor structural quality of housing: densely packed and poorly built with substandard or even flammable materials, poor sanitation etc.



Observing the reality that world environment day is the best occasion to advocate for cleanliness, disease surveillance, promotion of healthy behaviors, generate awareness among the slum residents and prepare them to be able to respond to health exigencies in a better manner.

In furtherance of its mission and Goal, JF too, pledged its support to raise awareness among the urban slum dwellers of the immediate simple acts / local solutions to meet the environmental health challenges: like closing open sewers and hand washing to limit diarrheal disease, lighting footpaths to deter violence, or diverting run-off or reinforcing dams to lessen loss of property and life from heavy rains, waste disposal and management and provide bio engineering solutions to stop Malaria outbreaks, especially Falciparum - which is very predominant in slums after the first shower - during rains.

World Water Day

March 22, 2010 was the World Water Day! JF in close coordination with the Department of Education celebrated the world water day. The witnessed different activities slated between the days March 22 - 24, 2010.

Hon'ble MLA, inaugurated our stall. Thousands thronged the stall set up by JF to mark the occasion of the world water day; where a list of 06 Oaths was put up for the people of all age groups. The unending queue for taking the oath and signing the pledge only indicated the enthusiasm and joy of the common masses to witness a change.

With a raised right hand and a two minute pledge, more and more people on the world water day shared something in common. They all joined a club of responsible citizens who took oath to save water, a pledge for the safe, quality and sustained drinking water for all the inhabitants – irrespective of class,

caste, creed, religion or status; they pledged to make their state more beautiful and a much better place to live in.



Day 02 (March 23, 2010): Campaign on Wheels.....

With the huge success of the signature campaign on Day 01, the campaign was rolled out on the streets of Ranchi to the uncovered areas. This was done through a fully branded mobile van decorated with signature pads on three sides of the vehicle with message promoting conservation of water. This was complemented with use of AV system which continuously played messages of safe, quality, clean and sustainable drinking water.

The JF team followed the trail of the van and approached the Vice Chancellor – Ranchi University to sign for this very important cause. He obliged respectfully by putting his words. The next destination for the van was RIMS, which is located in the heart of the city. The team approached the Director of the college and hospital to join the cause. He also obliged the team by signing on the campaign van. Co-incidentally, the team met with the MLA – Ichagarh, also who signed for the cause with a very fitting message: “Water is life. the campaign moved to the other locations of the city such as Secretariat, Ranchi Women’s College, Chanakya Knowledge Centre and other important locations in the city.




Thus, the signature campaign – on wheels was able attain the purpose sensitizing the common people, key stakeholders, activists, academicians and policy makers on the issues surrounding the safe, clean, quality and sustainable drinking water in the cities of Jharkhand.

DAY 03 (March 24, 2010)

JF team supported Kilkari by organizing the painting competition for the participating children. Kilkari is a forum promoted by the department of HRD as an inclusive approach to elicit participation of children from all strata of society.

Around hundred children participated in the painting competition and expressed their creative insights, views and ideas through their paintings on the theme “Water Conservation”. Parents accompanying their children were also sensitized, took oath and provided creative inputs to their child to portray their feelings on the very important issue of this scarce resource.

Some of the glimpses of the Painting Competition:

		
<p>Children sketching on thematic issue of water conservation</p>	<p>Master Yasir Anjum from Jain High School, Dumka impressions on water..</p>	<p>Miss Divya from Baldwin Academy collated life with water and sketched her thoughts in the manner</p>

Technical and Managerial Support

Prepared the compendium of service provisions for Urban Poor as request from the Department of Urban Development and Housing Development, Govt. of Jharkhand.

ICDS: Nutrition, Water, Environment and Sanitation

Field Level Consultation on ICDS for Mapping, Health and Nutritional Services

Jharkhand has witnessed unprecedented growth in the past few years and is on an unparalleled development trajectory. On the one hand this has resulted in creation of vast opportunities for the people living in the state; but on the other hand this has also led to rapid urbanization without much improvement in the urban infrastructure or service delivery. Whereas the affluent sections of the population have evolved means and ways to cope up with the stress on the infrastructure, the urban poor people living in the slums and squatters of cities are facing increasing hardships. As a result of this rapid urbanization, health of the urban poor is emerging as a major challenge for policy makers and programme managers.

Urban poor are vulnerable to many health risks as a consequence of living in conditions characterized by cramped low quality housing with limited sanitation, limited access to quality health care, widespread illiteracy, social isolation and a lack of negotiating capacity to demand improved public services. This is further compounded by the fact that urban poor have to face health hazards on a day to day basis as a consequence of limited access to safe and quality drinking water, hygienic environment and sanitation facilities. The nutritional status of the urban poor population especially that of women and children is extremely poor notwithstanding the fact that nutrition is one of the most important determinants of health.

Some facts about Nutrition:

Nutrition is a critical part of health and development. Better nutrition is related to improved infant, child and maternal health, stronger immune systems, safer pregnancy and childbirth, lower risk of non-communicable diseases (such as diabetes and cardiovascular disease), and longevity. Healthy children learn better. People with adequate nutrition are more productive and can create opportunities to gradually break the cycles of poverty and hunger. Malnutrition, in every form, presents significant threats to human health.

Based on the above and the objective of JF to respond to the need of strengthening the ICDS and Health services and basis the discussion with key officials of ICDS directorate and District Program Officer – Saraikela Kharsawan, a half day consultation cum mapping exercise with the ICDS and Health functionaries was organized on August 26, 2009.

The Consultation

The consultation was organized in the office of CDPO in which more than 100 ICDS workers representing various wards, Lady Health Visitor (LHV) and ANM from Health Department participated in the mapping cum consultation process. This consultation was facilitated by CDPO of Urban ICDS project. The agenda of this exercise included:

- Discussion on gaps in RI and VHND
- Extent of Reach and Coverage of ICDS services among urban slum and other vulnerable population groups
- Orientation of Participants on WES which also included demonstration of Hand Washing
- Mapping of ICDS centres on the map of Ranchi city

To make the exercise participatory, participants were requested to share their views on the mapping exercise and were requested to plot the approximate location of the ICDS centre themselves. This was a very useful step as the ICDS workers who are the pillars of service delivery of ICDS were able to express the ground realities and enthusiastically participated in the mapping exercise.

Key Observations

- Need to map and realign the ICDS and Health Services focusing on the urban poor and other vulnerable communities
- Though the proportion of the urban poor and the vulnerable communities has increased over the years, there is a considerable gap in increase of reach of services. As such, a larger proportion of such communities are left out from the basket of services offered by ICDS
- While government is focusing on improving the physical access, the social access has not improved due to marginalization and vulnerability of the poor communities
- There is a need to bridge the caste and gender gap for improving social access to the services
- There is a need for joint training of health and ICDS functionaries to improve community access and strengthen service delivery
- Success of convergence in health, nutrition, and empowerment requires convergence of approaches in DSW and DHFW in: behaviour change communication strategies, planning modalities, monitoring and information systems, capacity building and training inputs. Additionally DHFW must ensure that convergence efforts are backed by a strong service delivery system, responsive to community needs.

Conclusion

- The following areas of convergence between DHFW and DSW could be considered:
- Women and Children's Health: Mobilization of women, adolescents, and children and provision of a package of quality health education and services at the village level Women's

empowerment, gender and equity: Involvement of community based women's groups to ensure that social and related determinants of health including gender and equity are addressed. These include prevention of early child marriages, implementation of the PCPNDT Act, including awareness and action against girl child elimination, leading to distorted sex ratios, domestic violence, and mobilization of resources through collective action for health and other emergencies.

- Convergence between the following functions of both departments for nutrition, health and women's empowerment is also necessary. They include:
 - Joint formulation of BCC strategies, materials, and messages,
 - Operational strategies for joint planning at village, block and district levels,
 - Development of joint MIS including common indicators

Way Forward

The consultation proved to be very useful in eliciting ground realities and bottlenecks in service delivery; reach and convergence related issues. The valuable discussions during the consultations provided learning opportunities for improving the ICDS services among the poor and other vulnerable communities in the urban areas of the state. One of the most pressing needs that emerged was realignment of the health and ICDS services for improving both physical and social access to services. For this, a well laid out mapping exercise is required involving both the departments i.e., Health and ICDS which will support both the departments in assessing service delivery gaps of health and ICDS services in the urban areas and will help in developing robust convergent plans for bridging the gaps.