

2014-2015

REPORT ON THE ACTIVITIES



HASSANPUR, BIDYADHARPUR P.O., BASTA,
BALASORE, ODISHA, INDIA.756029. E-MAIL
sahelibasta@gmail.com, Website-saheliodisha.org.

A. INTRODUCTION

The SAHELI completed 12 years of existence and six years of operations after getting registered under the Societies' Registration Act, 1860. It continued to cater to the needs mostly of tribal women, tribal adolescent girls and other women as well as girls who constitute the primary target of its operations residing in nearly 100 villages belonging to Basta CD Block of Balasore district and Rasagovindpur CD Block of Mayurbhanj district in Odisha, India. 85, 042 persons belonging to 16, 330 households were covered by the organization. Among them 73, 119 persons belonged to indigenous population known as the Schedule Tribes. They constitute 85.97 per cent of the total population under the coverage of the organization. The year under report was active with a variety of programmes and the major activities carried out by the organization through various projects are presented below.

B. ORGANISATIONAL ACTIVITIES

One member left the organization and another one new member joined it during the year under report. There were two meetings of the Governing Board and all six members attended the same. These meetings dealt mostly with day-to-day business of the organization. Project application to MISEREOR, Germany for promoting reproductive child health and addressing problem of harassment of women was submitted and the processing of the same is in good progress. The application pending with MANOS UNIDAS, Spain was followed up and it was informed that the same will be processed by the donor agency in February 2015 only.

The Global Fund for Women (GFW) granted a project to support a set of activities aimed at reducing early marriages and other forms of violence against women. The project was for duration of eight months and it got concluded in February 2015. The organization approached the Friends of Children of Odisha (FCO), London with a request to support a hostel for tribal girls to be opened in its office building at Basta. The efforts of the organization to get registered as child care centre under the Juvenile Justice Act became unsuccessful and on this ground, the proposed support from the FCO was withdrawn. It permitted the organization to utilize the first installment of support for the girls' hostel even though it will not continue to support SAHELI.

As a part of fund raising efforts, the President and the Treasurer attended the international conference of the International Forum of Indigenous Populations (IFIP) held in New York in September 2014. The travel was supported by the GFW under its travel grant scheme.

The meeting of the annual general body was held on 25-07-2014 at Basta and the same was attended by 11 persons. Annual report, audited statement and budget were approved by this meeting. Election to the vacant positions in the Governing Board was held.

C. PROGRAMME ACTIVITIES

The organization continued the same activities it has been implementing in the last few years. Besides, activities for prevention of early marriages were added and the preliminary work for opening the hostel for tribal girls was undertaken.

1. Promotion of Reproductive Child Health (RCH)



SAHELI

Awareness building and sensitization were the main activities undertaken for promoting health. Regular meetings of SHG and AGG discussed variety of health problems. 1850 sessions were held with 22, 200 members for health awareness building. The organisation promoted menstrual hygiene. The discussion on the subject took place in the discussions referred to above. Sanitary napkins were demonstrated in these meetings and sanitary napkins were distributed. These sessions became the platform for women and girls to get introduced with the Accredited Social and Health Activists (ASHA) and Anganwadi Worker (AWW). Link camps were also organized. The ASHA and the ANM from the government health service attended the camps organized by the organization for adolescent girls and sexual health services were extended to adolescent girls by the ANM in such camps. Many adolescent girls got such services for the first time from such link camps. Further, they started accessing such services directly from the ANM.

The percentage of utilization of sub-centre services in Rasagovindapur Block was 11 only. This meant that only 11 per cent of the women in the reproductive age and adolescent girls accessed services from a health sub-centre manned by the ANM and supported by the ASHA. The above mentioned efforts of the organization were to effect change in this situation. The sessions were, keeping the above objectives in view, followed up by the field staff of the organization during their field visits.

Reporting instances of reproductive tract infections (RTI) was the immediate response to the awareness sessions held by the organization was the Reporting RTI Though the discussions were attended primarily by the members of SHG and AGG, the messages were passed on to others. Consequently, 866 women and girls reported instances of RTI. The corresponding number was around 428 in the last years. This indicates that the trend of openly discussing the RTI continued in the period under report. There still remains taboo on openly talking anything related to sex. In such context openly reporting RTI by 866 village women is a great achievement. The diagram below presents the progress in this regard.

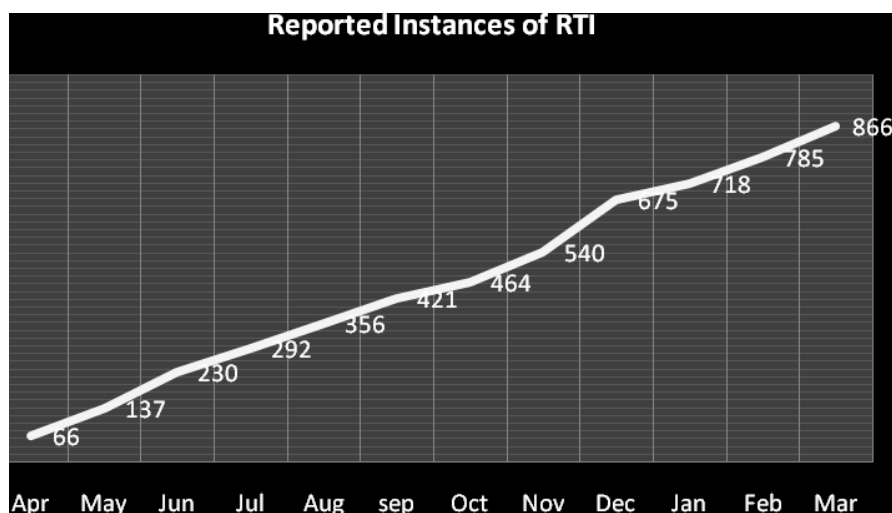


Fig: 1. Progress in reporting RTI

The organization following up the awareness sessions linked women and girls with the ASHA and the AWW who are among the frontline health care providers in the government system. The number of



women linked with ASHA was 2341 in 2014-2015 and another 4102 women were linked with the AWW for the first time. The figures given below depict the progress made by the organization in this regard.

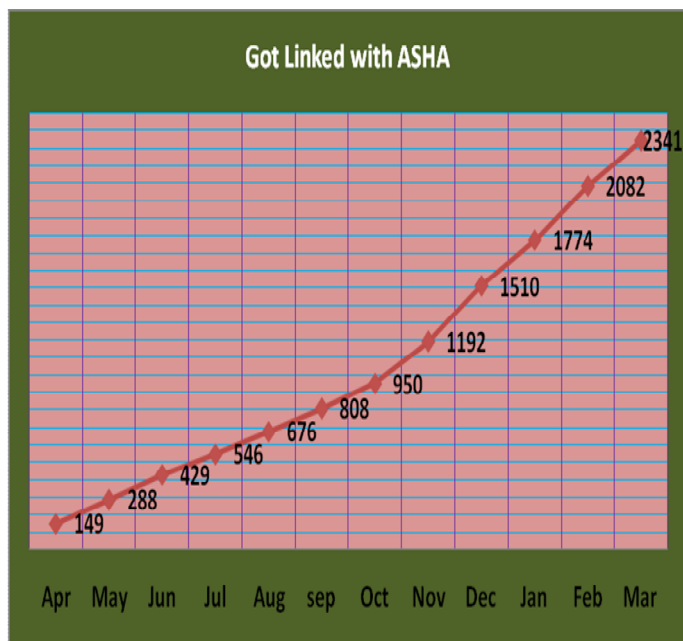


Fig: 2. Progress in Linking with the ASH

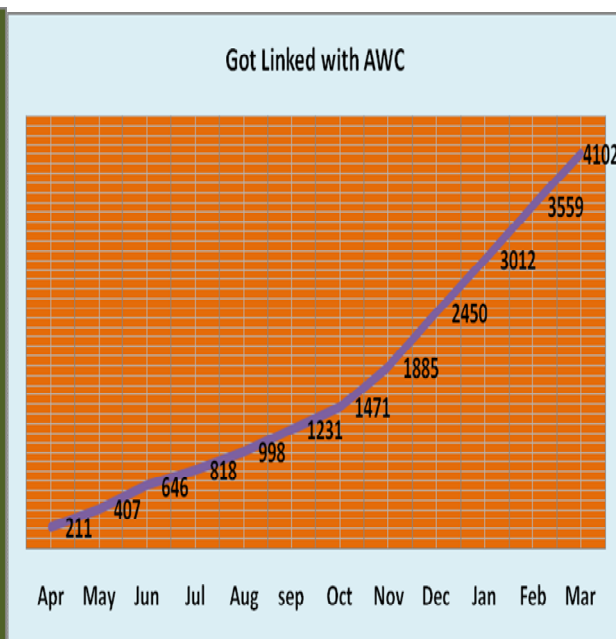


Fig: 3. Progress in Linking with AWW

The women linked with service providers continue to retain the linkage. Nearly 2600 women sustained his linkage and continue to access services. See the graph below for the progress in this regard.

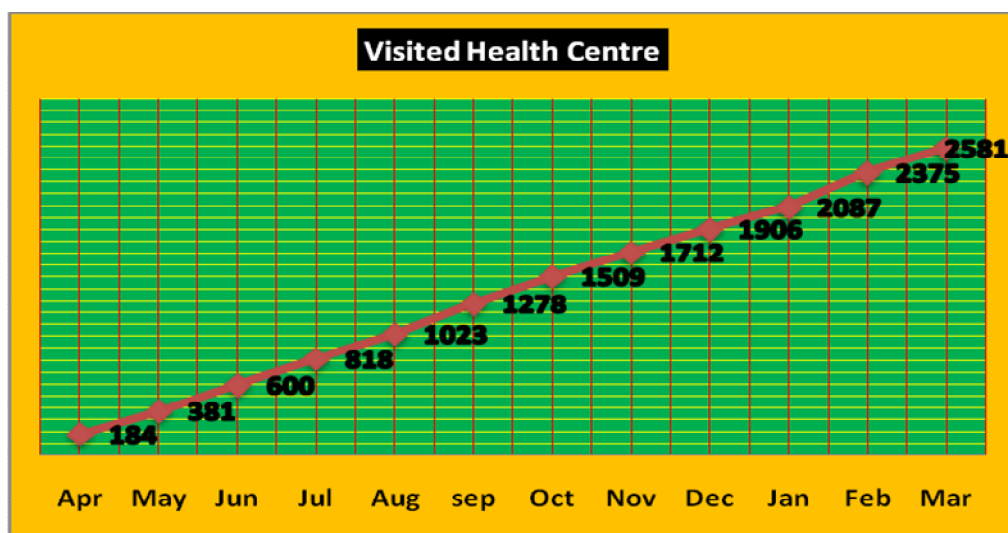


Fig: 4. Progress in Accessing Services

The percentage of sustained access to those got linked with the service providers is almost constant 68 with the exception of 86.54 December 2013. The two graphs given below depict this situation.



The efforts made by the organization to encourage use of condom and other contraceptive methods generated positive results.

Following up the discussion on RCH in regular meetings of SHG and AGG and during the special sessions held for those purposes 58 pregnant women got linked with the ASHA afresh. Another 17 pregnant women were encouraged to access available ANC services. The organization identified malnourished women and girls and referred them to AWC. The sessions on menstrual hygiene also generated positive results as indicated by the demand for more sanitary napkins and the instances of women and girls procuring napkins from open market.

Unwanted pregnancies were reported by many women. This is an indication of poor reproductive health. More than 80 per cent of such pregnancies were terminated as demonstrated in the diagram below.

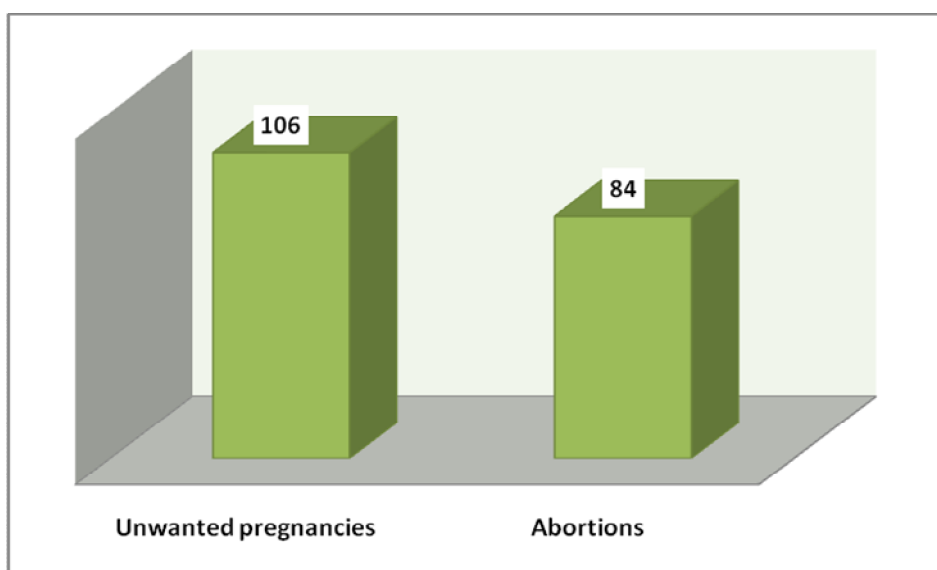


Fig: 5. Unwanted Pregnancies and Abortions

As evident from the foregoing narration the sexual and reproductive health is very poor among the target women and girls. The institutional delivery is very low.

2. Preventing Violence Against Women (VAW)

All forms of violence against women are rampant in the target area. The reported instances of gender based violence were 1512. There was an increase in the number of GBV being reported to various authorities and being taken note of by the SHGs.

Women and girls never dared to speak openly about such instances. They took it for granted and considered violence against them as part of their life. It was in this context that the SAHELI launched intensive and focused campaign against violence on women and girls. Awareness sessions, seminars, discussions with Gram Panchayat leaders, referrals of violence instances to the Police and direct interventions such as dialogue with the aggrieved, mediation, discussions with the newly-wed couples and individual as well as group counseling were the major elements of this campaign. These campaigns



were led by the newly formed women's Federation and Village Vigilance Councils created by the organization.

Consequently the silence of culture on this was broken. The SHGs started intervening in the instances of violence. The different types of interventions made by and promoted by the SAHELI are graphically presented below. A large number of mediations at one to one and one to group mediatory dialogue sometimes involving local political leadership also were undertaken. There were instances when the women victims or their family members directly approached the SAHELI for intervention. Except a few cases almost all such instances were resolved through mediations. These interventions helped to emerge the organisation as the one standing by the women at distress and the women in need.

Santhwana Nikethan, centre for short stay for the women at distress continued to function. It can accommodate 10 women at a time.

3. Intervening in Early Marriages

SAHELI started addressing the question of child marriage and hence child right has been added to the list of topics for awareness building. Awareness building was held at SHG level, at schools level and at the levels of adolescent girls' groups. The already referred to two community based institutions such as the Women's Forum and the Village Vigilance Councils were instrumental in preventing early marriages. The organization involved in more than 100 instances of attempts for early marriage and the success rate is more than 75. It has been decided to work more focused on prevention of early marriages and to open a hostel for tribal girls to support in their education.

4. Awareness Building

The organization held 271 sessions of awareness building attended by 5265 persons. General health, RCH, menstrual hygiene, SRI, gender based violence, programmes offered by various government departments, leadership traits etc. were the topics dealt with in these sessions. These sessions were facilitated by field staff and volunteers of the organisation. Another three mass awareness programmes were organized and these were attended by 88 persons. Initially the attendance in the seminars and discussion sessions was low. But later on it increased and more women started showing interest in attending seminars and discussion sessions.

6. Capacity Building

Training and exposure visit were the major capacity building activities undertaken by the organization during the year under report. Leadership development and organizational management were the main topics discussed during training sessions. Further, strategies for intervention on early marriages and gender based violence were also discussed. The organisation promoted the target population to hold community gatherings and observance of important days.

7. Community Organisation

SAHELI promoted various need based community based organizations (CBOs). Among these, 100 Self-help groups (SHG) and 100 adolescent girls' groups continued to function. These CBOs function as vehicles for carrying out most of the activities being promoted by the organization. It has been decided



to promote a Women's Forum to further the actions for preventing violence against women and villages vigilance councils to prevent early marriages through community involvement.

8. Linkages and Collaboration

The organization maintained very good relations with the ICDS, CD Block, Local Bodies, Department of Agriculture, Social Welfare Department, District Legal Services PHC, media and other NGOs working in the area. The collaboration was at the level of programme implementation, exchange of experience and sharing of common concerns.

D. STAFF

The year under report witnessed the turnover of four staff members. They got better opportunities. Six new recruitments were made. There were 12 full timers and 10 volunteers with the organization when the year under report ended.

E. FINANCE

The organization received Rs. 2,815,171.00 from various sources and spent Rs. 2,204,425.00 on the activities discussed above. The closing balance was Rs. 610,746.00

G. FUTURE DIRECTIONS

Geographical expansion

It has been decided to make foray into new geographies in the coming years. Expanding activities into the neighboring CD Blocks and adjacent districts are under serious consideration. The possibility of starting operations in other states, especially in Kerala is also being considered by the organization. The organization has decided to work more with gender and gender related violence. A centre for women at distress, counseling services, legal aid, vocational training and awareness building constitute one set of activities in this regard. The activities initiated for this and centre named as Santhwana Niketan will be strengthened. It has been decided to work for the rights of women also with a right based approach. The Women' Forum and the Village Vigilance Councils require strengthening. Promotion of contraceptive, increasing the age at marriage as well as that at the first pregnancy, reducing unsafe abortions and reducing gender based violence are the target towards which the organisation will be moving in the coming years.

After realizing the need for encouraging retention of girl upto higher secondary level of schooling to prevent early marriages and thereby to ensure sexual and reproductive health, it has been decided to undertake comprehensive education promotion programme. Residential facilities for school going girls, bridge schools, condensed education for the drop out, English medium school with residential facilities, child development centre to work on the genetic skills, English language courses and library are the elements of the proposed comprehensive education promotion programme. As the data clearly indicate that stunted growth is the main reason for educational backwardness and the stunted growth is related to the poor ANC and early childhood feeding habits, the organization proposes to undertake an experimental intervention covering children from inception to nine years.



H. ACKNOWLEDGEMENT

The achievement of the organization during the year under report was a result of collective efforts of many individuals with the support of many organizations. Our staff and volunteers of CBOs who constitute the front line workers did their level best to create the results listed above. We received full support from Sarpanches, special mention to the Sarpanch of Sadanandapur, CDPOs and BDOs of both Basta and Rasagovindapur, the police, officers of the agriculture department, banks and other NGOs working in this area. M/s. Rustagi & Co. did auditing for us. MANOS UNIDAS and MISEREOR extended funding support. We put on record our deep-felt gratitude to all mentioned above and expect similar positive gestures in future too.

I. CONCLUSION

The year under report had been fruitful because the project activities were in full swing and more project ideas were generated while implementing the existing ones. While recognizing that much more remains to be done, the positive results generated by the organization is very much encouraging. The behavior changes brought in among the target population are getting retained and the target group keeps on accessing services at grass root level. The realization of the criticality of education of girls in ensuring gender equity as well as sexual and reproductive health of women the SAHELI has resolved to work more on education of girls. The SAHELI will continue its long march to gender equity and healthy as well as dignified womanhood in the coming years too. This occasion of submitting this report on activities carried out during the year 2014-2015 has been considered as one of reconfirming the commitment of the SAHELI to the cause of the poor, the tribal and the marginalized women all over the world. In solidarity to them this report is submitted to all women in distress and in need.

Dalia Antony,
President



SAHELI