

Annual Report

2017-18

Social Awareness Institution (SAI)

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Message from Ashok Kumar Hota, Secretary

Report for the year 2017-18 to our friends, benefactors in particular and to the public at large .It is intended to provide innovative services and solutions in response to development problems, issues and projects at local, national and international level with a mission to promote and establish prosperous, happy and healthy living environment for the people everywhere on permanent basis. We are supported by a panel of experts/specialists, development planners, and community organizers in various fields who act as the key resource persons for various development and public welfare projects. We are having a team of young and dynamic professionals having expertise in multiple niches of socio-economic and market and action research. The organization is also well-known for its media advocacy and networking activities on various diverse fields .In fact, our initiatives are targeted to help improve sustainable community living by joining hand with the Various department of Central and State Government, Cooperative Sectors , Funding Agency to help them advance their welfare and development initiatives and resources to the needy, weaker, distressed and disadvantaged families inhabiting within and around their operational areas. We emphasize on innovative and integrated approach to address to the issues with the active participation of all the relevant stakeholders including the targeted community members. In our projects districts, we will also be increasingly important on issues such as HIV/AIDS, Public health, through Action aids and OSACS Government of Odisha, Skill development Through JSS, Department of Human Resources Government of India Handicraft DC Handicraft ,Govt of India food security and global inequality. To be relevant in the 21st Century, SAI needs a presence and links with allies and civil society in these emerging economies. To achieve that, we are increasing our campaigning in all over Khurdha Cuttack, Balangir and Nuapada District of Odisha State .

I express my sincere thanks to the supporting Agencies like Action Aids , Government of India and Govt of Odisha, Collector and District Magistrates, All 4 district for kind support an encouragement. I am also thankful to the district and block levels officials who extended their co-operations to the organization in implementing the programme. The staff of the organization worked in the most adverse condition to make all the programmes of the organization a success. I am thankful to them and expect that they will continue to work in the same vigor and enthusia in the future. I am thankful to them. Last, but not the list I extent my sincere thanks to all those faceless persons who associated themselves with the organization at some point of time for the cause of social development. This message, therefore, is earnestly a communication of gratitude to all those who have always been with us on this journey of SAI.

Ashok Kumar Hota
Secretary

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IMPLEMENTATION OF SWACHHA BHARAT MISSION (G) PROGRAMME

Supported by RWS&S Govt of Odisha

SAI has taken 5 Blocks of Cuttack district at where SAI engaged Block Coordinator and Cluster Coordinator to assist towards implementation of Swachh Bharat Mission (G) and National Rural Drinking Water programme under WSSO. The names of those Blocks are follows:-

Sl. No.	Name of Block	No. of Block Coordinator engaged	No. of Cluster Coordinator engaged
01)	Cuttack Sadar Block	01	01
02)	Tangi-Choudwar Block	01	01
03)	Baranga Block	01	01
04)	Mahanga Block	01	02
05)	Nischintakoili Block	01	01

With implementing the above mentioned programme in the blocks the following activities are undertaken by the Block Coordinator of the concerned block.

- Block Coordinators will help the village community in formation of VWSCs in all villages.
- Taking up awareness generation and development communication activities among the G.P and VWSC members and the village community.
- Conducting training courses on various aspects of water and sanitation at block and village level for members of VWSCs and GPs and other grassroots level workers / Sanjog Partners in the village (ASHA worker, Anganwadi worker, School teachers, SHGs Mahila and Yuvak Mandals etc.). This can be through classroom training, hands on support in village and exposure visit.
- Preparing an Annual activities Calendar mainly focusing on IEC and training activities and will be responsible for its implementation.
- Helping the GPs/VWSCs in baseline surveys, sanitary survey of drinking water sources and system falling within their jurisdiction.
- Helping the village community/VWSCs/GPs in preparation of their village Action Plan and its approval by the Gram Sabha.
- Guiding VWSCs in implementing and monitoring the works relating to water supply schemes and sanitation as envisaged in the village action plan.
- Coordination and follow-up with grassroots level workers trained in water quality monitoring and surveillance and ensuring that they take up water quality testing and surveillance activities.
- Regularly interacting with Panchayats, ASHA workers, Anganwadi workers, Self Help Groups, Mahila and Yuvak Mandals to ensure that issues relating to water supply, quality and sanitation get regular attention.
- Visiting schools to deliver talk to sensitise teachers and students to adopt improved hygiene practices, improve sanitation and safe handling of water to keep it potable.
- Helping in conducting social Audits.

- Coordinating with water quality testing laboratories for water quality testing, reporting to villages, cautioning the GPs/VWSCs/PHEDs to take effective steps for maintaining portability and guiding on remedial steps.
- Assisting in gathering information for updating habitation status on the IMIS.
- Helping the Gram Sabha in selecting/Electing VWSCs in all villages in the block, opening Bank Account etc. coordinating with PHED officer's in-charge of rural water supply and sanitation.
- Distribution of chlorine tablets if so decided by the Public Health Authorities.
- Coordinating and exchange of information to and from the block level engineer to the block level health officer for taking corrective action in cases of incidence of water and sanitation related disease.
- Documenting case studies and success stories from villages
- Handling day-to-day accounting of BRC expenditure.

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- Documenting case studies and success stories from villages.

SAI has engaged some Data Entry Operator in different Blocks of Cuttack district for supporting SBM (G) programme through PFMS.

The names of those Blocks are follows:-

- 01)Nischinta Koili Block
- 02)Mahanga Block
- 03)Baranga Block
- 04)Cuttack Sadar Block
- 05)

Jan Shikshan Sansthan, Balangiri

Vocational Courses conducted

The JSS Balangiri is endeavoring to take up programmes with the objectives of achieving development in socio-economic, cultural and educational fields. During the period, as many as 80nos. of training programs which includes curriculum under NIFT, DAE, and MES course were conducted. Lectures, distribution of pamphlets, street plays, International Day celebrations, competitions and participating in exhibitions is always a part and parcel of the training programme which enable the beneficiaries to widen the range of knowledge .The total number of 2000 beneficiaries were covered under the programme The target groups for JSS ,Balangir are clearly given in the guidelines issued by the Govt. of India. They include socio-economically backward and educationally disadvantaged groups of urban/rural population such as men, women and youth, employed, self-employed, neo-literates, prospective workers and their family members as well as unemployed youth. However, priority to be given is to adult neo-literates, semi-literates, SC, ST, Women and Girls, oppressed, migrants, slum/pavement dwellers and working children. In course of time, a number of administrative orders have been issued by the Ministry of Human Resource Development with regard to the target groups. Accordingly the priority target groups are SC, ST, OBC, Women and Muslim minorities. From the below table it is clear that females have been given priority in the vocational skill development programmes organized by the JSS Balangir . However, it may be appropriate that coverage is consistently increased year after year instead of more coverage ..

Current set-up (Staff position)

Sl. No.	Name of the Person	Designation	Regular/ Contract
01	Ashok Kumar Hota	Director	Regular
02	Sanghamitra Jena	Programme Officer	Contractual
03	Santosh Parija	F.A.O	Contractual
04	Sudam Kumar Nayak	A.P.O	Contractual
05	Bishnu Prasad Dash	A.P.O	Contractual
06	Niku Naik	Computer Asst.	Contractual
07	Bhagirathi Brahma	Driver	Contractual

08	Hemanta Kumar Sahu	Peon	Contractual
	Total:		

Vocational Courses conducted during 2017 -18

no	Sl	Beneficiaries	As per Action Plan			Completed		
			Male	Female	Total	Male	Female	Total
1.		Beneficiaries in vocational courses	100	760	860	80	740	820
2.		Beneficiaries covered in activities	-	-	-	99	94	193

Educational status of the beneficiaries in vocational courses

Sl.No.	Category of the beneficiary	Total
1.	Non-literates	37
2.	Neo-literates	284
3.	Rudimentary	499
4.	Others	
	Total	820

Social status of the beneficiaries in vocational courses

	SC	ST	OBC	Minorities	Others	Total
No. of beneficiaries	180	246	344	9	41	820
Percentage	22%	30%	42%	1%	5%	100%

Vocational Trainings organized at AECs in Saakshar Bharat Districts

No.	Name of the Vocational Course	Name of the AEC	No. of persons trained	Name of the collaborating agency, if any
1.	2.	3.	4.	5.
1.	Cutting & Tailoring	Bandupala, Titilagarh	20	Saakshar Bharat

2.	Cutting & Tailoring	Kankariya	20	Saakshar Bharat
3.	Soft Toy Making & Waste Material	Kumbhepada, Titilagarh	20	Saakshar Bharat
4.	Hand Embroidery	SiletPada	20	Saakshar Bharat
5.	Hand Embroidery	JharBalangir	20	Saakshar Bharat
6.	Hand Embroidery	Bhati Pada, Titilagarh	20	Saakshar Bharat
7.	Cutting Tailoring & Dress Making	MahulPada, Titilagarh	20	Saakshar Bharat
8.	Cutting Tailoring & Dress Making	Nanajhar, Titilagarh	20	Saakshar Bharat
9.	Cutting & Tailoring	Banjijhal, Titilagarh	20	Saakshar Bharat
10.	Beauty Culture & Health Care	Kumuda, Titilagarh	20	Saakshar Bharat

Activities

(All awareness programmes including Saakshar Bharat)

No.	Name of the Activity	Date on which conducted	Place	Expenditure incurred	Name of the collaborating agency, if any
1.	2.	3.	4.	5.	6.
	Observation of International Yoga Day	21 st June 2017	SiletPada village of Puintala Block	2,730/-	N.A
	Observation of International Literacy Day	8 th Sept.2017	Rajib Gandhi Seba Kendra, Bakti village of Agalpur Block	9,780/-	N.A

Employment Status of the Beneficiaries for the last 3 years:

Year: 2015-16

S.No.	Sector	No. of persons			Salary/Income wages/Per month
		M	F	Total	
1.	Public Sector				
2.	Private Sector	45	81	126	3,000/- per month
3.	Self Employment	47	248	295	4,500/- per

					month
4.	Wage Employment	26	80	106	5,000/- per month
5.	Any other				
	Total	118	409	527	

Year: 2016-17

S.No.	Sector	No. of persons			Salary/Income wages/Per month
		M	F	Total	
1.	Public Sector				
2.	Private Sector	45	77	122	2,000/- to 3,000/- per month
3.	Self Employment	67	230	297	3,000/- to 4,000/- per month
4.	Wage Employment	46	80	154	5,000/- per month
5.	Any other				
	Total	158	387	573	

Year: 2017-18

S.No.	Sector	No. of persons			Salary/Income wages/Per month
		M	F	Total	
1.	Public Sector				
2.	Private Sector				
3.	Self Employment	15	276	291	2,000/- to 3,000/- per month
4.	Wage Employment	9	58	67	3,500/- to 4,500/- per month
5.	Any other				
	Total	24	334	358	

Specialisation of JSS in the vocational training programmes(s) may be indicated in bullets

- Skill development training programmes to the needy, deprived and under privileged sections of the society for augmenting their income and to improve their quality of life.
- Training programmes in skill formation and skill up gradation for potential youths, dependents of workers, migrants , men and women belonging to unorganized and informal sector, slum workers etc. in both urban/rural areas.
- Promote Life Enrichment activities by developing their knowledge on day to day affairs pertaining to health, population education, environmental sanitation, HIV/AIDS, Adolescent health, mother and child care etc.

Rajib Gandhi Scheme for Empowerment of Adolescent Girls (SABLA)

The Ministry of Women and child development government of india in the year 2000 came up with scheme called Kishori Shakti Yojana (KSY) using the infrastructure of integrated child development services (ICDS). The Objective of the scheme were to improve the nutrition and health status of girls in the age group of 11-18 years as well as to equip them to improve and upgrade their home based and vocational skills and promote their overall development. Rajib Gandhi Scheme for Empowerment of Adolescent Girls (SABLA) would be implemented using the platform of Integrated child Development Services Scheme through Anganwadi Centre.

Objective:-

- (i) Enable the Adolescent Girls for Self Development and Empowerment .
 - (ii) Improve their Nutrition and health Status.
 - (iii) Promote Awareness about Health, Hygiene, Nutrition, Adolescent Reproductive and Sexual Health and Family and Child Care.
 - (iv) Upgrade Their home based skill, Life Skill and tie up with National Skill Development Programme for Vocational Skills.
 - (v) Mainstream out of school Adolescents Girls in to Formal and Non Formal Education.
 - (vi) Provide Information, Guidance about existing public service Such as:- Bank, Police Station, Post Office, Medical.
- SAI Conducting SABLA 4 Nos Block in Cuttack District Such as:- Niali, Kantapada, Tigiria, Athagarh in this work details given bellow:-

Sl No	Name of the Block	Total Nos of Vocational Training	Total Nos of Participant	Total Nos of Exposure Visit	Total Nos of Participant
01	Niali	12	480	8	240
02	Kantapada	12	480	7	210
03	Athagarh	06	240	-	-
04	Tigiria	02	80	-	-

Sl No	Name of	Total Nos	Total Nos	Total Nos	Total Nos
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	the Block	of Vocational Training	of Participant	of Exposure Visit	of Participant
01	Niali	12	480	8	240
02	Kantapada	12	480	7	210
03	Athagarh	06	240	-	-
04	Tigiria	02	80	-	-

Operation and Management of urban PHC in Cuttack

Two no's Urban Primary Health centres (UPHC) one is at Choudwar city of Choudwar NAC & another one is at Jagatpur city of Cuttack CMC of Cuttack district are running & managed by Social Awareness Institutions (SAI). In Key Focus Areas in PPP mode with the support of OSH&FW Society under National Health Mission (NUHM). It is the explicit mandate of the UPHC to provide priority services to urban poor people, especially those in most difficult circumstances such as street and slum children, the aged, disabled, single women, un-organized workers in unsafe occupations, and survivors of violence. The UPHC not only integrate RMNCH+A services but also integrate all vertical disease control programs and non-communicable diseases program. Both the UPHC also work and cover the preventive, promotive and curative services.

Objectives of UPHC

- To provide comprehensive primary health care to the urban population in general and particularly the urban poor.
- To achieve and maintain an acceptable standard of quality of care.
- To make the services more responsive and sensitive to the needs of the urban poor.

Scope of work in the UPHC

OPD timing & Consultation: OPD services are providing twice in day i.e. **(8.00 am to 11.00 am)** in morning and **(5.00 pm to 8.00 pm)** in the evening. Free medical consultation provide to the patients in the OPD. With Provision of two no's observation beds in the UPHC.

Staff of UPHC

Total 11 no's staffs are engaged to providing institutional services

Post/Position	In No's	Proffesnal qualification	Frequency of visit
Medical officer	2	MBBS	Daily
Part time Specialist	2	P.G In O&G	Once in a week
Part time Specialist	2	P.G In Paediatric	Once in a week
Part time Specialist	2	P.G In B.D.S	Once in a week
Pharmacist	2	B.Pharma	Daily
Staff Nurse	4	GNM	Daily
Lab Technician	2	DMLT	Daily
Data Assistant cum Accountant	2	B.COM	Daily
Support staff	4		Daily

RogiKalyanSamiti (RKS)

The RogiKalyanSamiti (RKS) has formed & registered in UPHC it is an independent body to manage the affairs of the UPHC with consist of members from the Urban Local Bodies, NGO's, local elected representatives and officials from Government etc. To ensure accountability of public health

providers to the community, Introduce transparency in management of funds, Improve participation of the society in the running of the hospital

Monitoring & Evaluation

Monthly staffs review meeting of UPHC staff & sector meeting of ANMs, ASHAs also conducted under the chairmanship of chief functionary & MO (I/C). The report of the virtual sub-centre compiled and consolidated. The monthly report of the U-PHC submitted in the prescribed format by 1st week of each month to CHC/District/City with a copy to DPMU/CPMU. The MO (I/c) & Pharmacist also visit at least 5% of UHND and immunisation sites in each month

Internal Mechanisms:

For smooth functioning & quality assurances the internal mechanism has established in UPHC by Record maintenance, checking and supervision, Medical Audit, Patient Satisfaction Surveys: For OPD patients, Complaints and suggestions received

MAS Training

To capacity building of MAS members & strengthening of community process work a two days Capacity Building training programme was held for MAS leaders. In the training programme total 105 members from 35 no's MAS was participated in 03 batches training programme.

Urban Local Bodies (ULB) Representatives sensitization program

One day sensitization program for the representatives of Urban Local Body (ULB) and city officials of Choudwar urban areas was held in the month of February at conference hall of Choudwar Municipality Office. In the program 40 no's local bodies representatives & city officials from various line department was participated, in the sensitization program the following topics are discussed - Challenges in urban health care, Coverage plan under NUHM, Institutional mechanism(District and city level) , Structure of CHM, CHS, DHM, DHS, Administrative reform ,NUHM mandate ,NUHM intervention (Clinical & Community Process)etc.

Vulnerability Assessment of Choudwar Urban Areas

One of the main objectives of the program was to ensuring that vulnerable population in a city have access to primary health care services. We are conducting the assessment to understand the health vulnerability of different wards of this city. We are trying to assess how different aspects related to a ward, such that would make the people living in the ward vulnerable with reference to health. The assessment was conducted by using a tool, which covers various aspects including location of slum and status of housing, availability and accessibility of basic services like water supply, drainage and toilets, nature of occupation/employment, access to health services, and education. We also analysis the ward's situation with reference to the questions of the tool .The survey was completed in all the slums areas both authorised & unauthorised with the help of ASHAs & ICDS workers.

Kapilaswar PHC at Glance

Total Population	59900	Total OPD patient	16649
No. of Household	6000	Total O & G patient	1604
No. of Slums	17	Total Paediatric patient	1250
Slum Population	5263	Total Dental Patient	955
No. Of Wards	19	Total Blood Test	7251
No. Of ANM (FW)	05	Total Urine Test	1347
No. Of ASHA	11	Total stool Test	242
No. Of MAS	35	Total No .of HB Test	396
No. Of Routine Immunization spot	04		
No of RKS formed & performed	01		
Grievance readersal committee	01		

Jagatapur PHC at Glance

Total Population	42522	Total OPD patient	13965
No. of Household	8445	Total O & G patient	1527
No. of Slums	28	Total Paediatric patient	1167
Slum Population	11212	Total Dental Patient	1051
No. Of Wards	04	Total Blood Test	7361
No. Of ASHA	24	Total Urine Test	1347
No. Of MAS	25	Total stool Test	247
No. Of UHND spot	28	Total No .of HB Test	396
No. Of Routine Immunization spot	16		
No of RKS formed & performed	01		
Grievance readersal committee	01		

Conclusion

Both the UPHC are engaged themselves to provide Health services particularly curative, preventative and Promotive measures at door step in urban areas especially in focus to urban poor in a conducive & user friendly atmosphere with a motto health for all. Though the sector is very vast & challenging one but we were very much satisfied because during last 1 year the comments, appreciations and positive responses we receive from the expert, dignitaries & NUHM it was really encouraging one and give us the motivation to remove the bottlenecks.

Targeted Intervention (TI) Project FSWs and MSMs in Nuapada District

Project Background

It is estimated that more than 90% of HIV transmission in India is related to unprotected sexual intercourse or sharing of injecting equipment between an infected and an uninfected individual. Not everyone in the population has the same risk of acquiring or transmitting HIV. Much of the HIV transmission in India occurs within groups or networks of individuals who have higher levels of risk due to a higher number of sexual partners or the sharing of injection drug equipment

These high risk groups (HRGs) of individuals who are most at risk include:

- Female sex workers (FSWs)
- High-risk men who have sex with men (MSM), and trans-genders (TGs)
- Injecting drug users (IDUs)

The broader transmission of HIV beyond these HRGs often occurs through their sexual partners, who also have lower-risk sexual partners in the “general” population. For example, a

client of a sex worker might also have a wife or other partner who is at risk of acquiring HIV from her higher-risk partner. Individuals who have sexual partners in the highest-risk groups and other partners are called a “bridge population”, because they form a transmission bridge from the HRG to the general population

Programme Objective

To reduce the vulnerability of HIV infection among FSWs through awareness.

- To reduce STI/STD infections or disease among targeted population.
- Create an enabling environment among the community against HIV/AIDS

Project Strategies	Activity
<ul style="list-style-type: none"> • Community mobilization • Enabling environment • Health services • Condom promotion • Care and support to PLHA • Outreach communication 	Identification and registration of HRGs. Condom promotions. Outreach activities. ICTC services. STI services. Advocacy. Review meetings. DIC meetings. Hot spot meetings. Stakeholder meeting

Advocacy Meetings

The core group population has social contacts which are to be very influential. and who can positively or negatively influence the project activities with the primary target audience namely core group population. The are vital stakeholder of the project who are responsible for the effective implementation of the target intervention programme for the core group population. Social awareness Institution organized advocacy meetings on following date covering 60 people .

Advocacy Meeting	6/29/2017	Office	21(Male-14 Female-7)
Advocacy Meeting	11/8/2017	Office	19(male-11 Female-8)
Advocacy Meeting	3/21/2018	Office	20(Male9 Female-11)

The meetings with the physicians and counselors team are being organized for smooth referral service. The project motivates the stakeholders to get involved in the program activities .

Demand Generation Activity (FSM and MSM)

The key population along with the peer educator meet at the hotspot to discussion their issues particularly on the basic facts of HIV. The peer educators with the help of outreach facilitate the meetings. Communication materials focusing on HIV awareness ,addressing the problems of violence and promoting quality of life were used during the hotspot level meeting .The meetings are useful to make the community accessing the service of the project without fail. Ten to fifteen community members has gathered in every demand generation meetings. The major objectives of this activity is to introduce the programme components to the newly identified community member . SAI preference is given to new members to attend the meeting .During the reporting period 45 meeting were facilities in different hotspots in Nuapada District.

Community Event(Khadial Mohastav)

The community event Khadial Mohastav Organised by District cultural council from 5.2.,2018 to 9.2.2018 at Raja A.T,High School in Nupada. Social Awareness Institution was organised a stall .It was Exhibition of posters on STI, RTI, HIV, Social Security Schemes were displayed, Individual counseling, group counseling, written quiz, STI treatment, HIV testing was done, Condoms were distributed. The five-day event has witness cultural programme, quize competitions, health check up camps and seminars etc. As in Nuapada district only one ICTC completely functional with laboratory technician of OSACS, most of the persons at risk can not test themselves for HIV infection. With an objective to reach maximum number of people with less expenditure, local troupes including local artists and volunteers. There was a one day orientation programme of the troupes, script were developed for street play and pala and the troupes performed in and around their gram panchayat . “Khadial Mahotsav is a Lok Mahotsav, totally funded by public. We are always grateful to the Khariar Public,” said Ashok Kumar Hota

World Aids Day

World Aids Day is observed on December 1 every year to create awareness about the symptoms, causes and preventives of the pandemic disease HIV/AIDS that has taken unprecedented number of lives. Like every year, World AIDS Day 2017 was celebrated with a new theme "Right to health' including a range of interactive activities, campaigns by distributing posters and events that are endorsed by governments, people and organisations. “Under the slogan 'everybody counts,' WHO will advocate for access to safe, effective, quality and affordable medicines, including medicines, diagnostics and other health commodities as well as health care services for all people in need, while also ensuring that they are protected against financial risks,. On this occasion Ashok Kumar Hota ,Secretary, SAI graced the function & welcome the Guests and expressed the volunteers to unite the people of the society in the fight against HIV & show their support for people living with HIV. He elaborated the topic of HIV prevention, treatment and care and support services. Besides, urged the volunteers to take up initiatives to motivate the people to increase awareness and prevention for the diseases of AIDs. The participating took oath to spread awareness about HIV / AIDS infection and act as peer educators in their respective communities located at the inaccessible regions of Cuttack district. They pledged to volunteer efforts for achieving zero infection in the State by the end of year 2020.A team of Cluster Link Workers, Zonal Supervisors and DRP presented a play “ Ekla Jeeban” on the theme “Bhedabhaba Raheeta Samaj” on the22nd November 2017 which was adjudged 1st in the state. The play was again enacted at Soochana Bhawan on the Celebration of State Level World AIDS Day on the 1st December 2017

Condom Distribution

Implements a condom distribution program as part of its prevention, education, and outreach programs. As part of these programs, Social Awareness Institution Condom Distribution Programs are a type of structural intervention that involve the distribution of condoms as a mechanism to prevent HIV transmission. Condom distribution programs have been shown to be the most effective in preventing STIs and HIV when implemented as a component of a larger education and prevention strategy. Proper use of condoms during sexual encounters greatly reduces the chance that an HIV-positive person will infect his/her partner with HIV. Condom distribution programs “have been proven to increase condom use prevent HIV.STI and save money. Distributing and educating about condom use is a wellknown HIV prevention strategy. Still, in some locations, implementing programs that include condom distribution can be a challenge. While many evidence-based prevention interventions include condom distribution among populations such as adolescents, there are barriers in some communities. Distributing condoms in schools as part of health education courses is acceptable in some school districts but is not universally accepted

Project Monitoring Committee (PMC)

Project Monitoring Committee (PMC) was held on 12.5.2017 and 6.9 2017 at conference hall Social Awareness Institution at 11 AM on wards. The meetings was started with the greetings from Mr Ashok Kumar Hota PD TI Projects . ADMO (PH) was present and discussed on progress of activity .

.The second meetings were held on 6.9 2017 in the beginning of the meeting PD asked about progress of activity. The Transit Project under SAI was monitored both internally and externally. The internal monitoring was done by the Project Manager, counselor and the Project Director by visiting the Transit point from time to time, organizing review meeting and checking their daily record

TI (TRUCKERS) PROJECT, Cuttack

Management of Trucker project

SAI-TI (Truckers) Project implemented for the year 2017-18 headed by Project Director Mr. Ashok Kumar Hota assisted by Project Manager, M&E Cum Accountant, Counsellor, 2 ORWs and 5 Peer Educators to ensure quality of interventions, TI staffs have been trained with various components of TI in the light of NACP-III operational guidelines. The training to build capacities of the TI Staff is being conducted by the Social Awareness Institution at Head Office . Different trainings are organised for project staff implementing TIs; the TI staff undergoes induction, refresher and thematic training programs . SAI adopted different strategy in the year 2017-18 to get maximum output in Targeted Intervention on Truckers .Provide information services and behaviour change communication to increase knowledge of Truckers and motivate them to change the unsafe behavioural practices and to reduce their vulnerability. Create awareness of the target community about STI/RTI/HIV/AIDS.

Project Goal

At least 5000 out of the 10000 truckers running through Cuttack district practice safer sex and rate of new infection are reduced to 50% by the end of the year.

Objectives of the project

- To control High -risk behaviour of the target population.
- To identify the STI cases and treat them syndromically through static clinic.
- To increase health seeking behaviour of the TG
- To ensure correct and consistent use of condoms among the truckers
- To increase the awareness level of the target groups.
- To create a pro-enabling environment.
- To identify the PLWHA
- To Provide Care and Support.
- To make them able to access the existing health care service.
- To take up advocacy for empowerment and rights of the TP.

Counselling (100% referred for STI cases)

Sexually transmitted infections (STIs) present a huge burden of disease and adversely impacts the reproductive health of people. The emergence of HIV and identification of STIs as a co-factor have further lent a sense of urgency for formulating a programmatic response to address this important public health problem. In Current year social Awareness Institution has counselling 1992 and referred to STI cases 1334 in Cuttack Provide different motivational counselling, group counselling accompany the TI Trucker staff in the field and provide group/individual counselling.

HIV Testing (15% Yearly)

HIV testing shows whether a person is infected with HIV. HIV stands for human immunodeficiency virus. HIV is the virus that causes AIDS (acquired immunodeficiency syndrome). AIDS is the most advanced stage of HIV infection and advice to take medicines to treat HIV (antiretroviral therapy or ART) the right way every day so that achieve and maintain an undetectable viral load TI-Trucker project has conducted 895 no of HIV testing among Truckers and helper and found HIV + Found 7 Only in current years 2017-18.

TB Referral(10% of Referred to ICTC cases-

TB (Tuberculosis) is a disease caused by a bacterium called Mycobacterium tuberculosis. The bacteria usually attack the lungs, but TB bacteria can attack any part of the body such as the kidney, spine, and brain. If not treated properly, TB disease can be fatal. TB and HIV co-infection is when people have both HIV infection, and also either latent or active TB disease . When someone has both HIV and TB each disease speeds up the progress of the other. In addition to HIV infection speeding up the progression from latent to active TB, TB bacteria also accelerate the progress of HIV infection . In this connection TI-Trucker project has 180 no of people referred to ICTC cases and found 3 number of person in this year 2017-18

SM Condom Sold(In Pc)

TI Trucker Project aims to promote safe sex among truck drivers in Odisha. Truck drivers spend large amounts of time away from home, and are a particularly vulnerable group for HIV – 2.59% of truck drivers carry the virus, compared to just 0.26% of the general population. It has been reported that more than 70% HIV cases are transmitted through unprotected sexual activities. Over comes from this saviour virus every one should know AIDS and lead his/her sexual life by being faithful to one sexual partner or using condom regularly TI Trucker Project SM Condom Sold (in PC) 1620 in 29 outlet in Cuttack.

Condoms made available, accessible and affordable at the halt point and recreational area of Truckers .Create awareness for using of condoms by Demonstration and demonstration method. Availability of condom at halt points by opening outlets

Social Marketing of Condoms through outlets.

- Provide Interpersonal Communication towards behaviour change of Truckers.
- Research based counselling provided to determine the underlying causes of high-risk behaviour leading to vulnerability to HIV/AIDS
- Attracting the highest volume of Truckers by street Ghoda nacha and Pala.

Provide knowledge of Safe Sex Practice.

- One to one discussion
- Group awareness and orientation
- Street plays
- Video shows
- Promotion of Social Marketing Condoms

Service and Linkages

Govt had created various infrastructures, facilities for various health related service, unfortunately many victims and sufferers are not aware about it and they are suffering a lot due to ignorance or consciousness to ask some others about it. In the mean time our dedicated volunteers like PEs, ORWs, Counsellor and Project Manager conducted one to one, group sessions and through mid media activities spread the messages of the existing service facilities and some where the volunteers motivated the victims for avail the facilities.

Focus Group Discussion

A Focus Group is a facilitated group discussion for 6-12 participants on a HIV/Aids topic. The discussion lasts for 1-2 hours. In health promotion and prevention, Focus Groups are used to gather feedback from members of the target group on all stages of project planning and implementation. TI –Trucker project has conducted 1360 FGD in various part of Cuttack . The following discussion was...

- Inter personal behavior change communication (BCC)
- Promotion/ distributions of condoms
- Provision of services for Sexually Transmitted Infections (STIs)
- Linkages to Integrated Counseling and Testing Services (ICTC)
- Advocacy for Enabling Environment
- Community Mobilization

Advocacy Meeting

To create an enabling environment among the truckers community SAI-TI conducted 24 nos. Advocacy meetings with different secondary stake holders like Truck Owners Association, Transport owners and Health referral centres. By these lots of huddles and issues in related to hazard free behaviour of truckers created and pressure group established by advocacy.

GMC(30% Yearly)

TI-Trucker creating a healthier society by popularizing preventive measures, awareness programs on general medical checkups at various truckers halt point at Cuttack. Health-weeks and health camps are also generally organized for different age groups. Information about the conduct of health awareness sessions and camps is widely canvassed by TI – Trucker Project well in advance. These sessions and camps are organized in coordination with the Truck Driver ,helper and general public keeping their time and other constraints in mind. Through these activities, project ensures that such programs reach maximum number of people.TI-Trucker Project has been conducted 1531 number of people in the Cuttack on general and specific health awareness camps with focus on diseases like Dengue and Chikungunya, eye, ear, dental problems, HIV/AIDS, H1N1 (Swine Flu) have been organized at all locations. Awareness programs on Ante-Natal and Post-Natal Healthcare, Reproductive Child Health etc., are also conducted.

Mid Media Activities

We conducted Truckers Mid media Activity programme for the year 2017-18 . As part of this, we organized various cultural programmes like Drama, Cinematic dance, Songs at various truck halt point and distributed leaflets in Oriya language .SAI-TI organized 24 mid media

activity by sharing about HIV Aids, causes and how to protect this virus and escape from spreading of STI diseases through Folk show at ware house, Jagatpur. This folk show attracts many truckers to listen and enjoying at same time. Other stake holders like truck owners, manager and brokers are present in the show and gain knowledge about HIV Aids

Demand Generation Activity:-

To create demand for facilities, services provided by Health Deptt. among the truckers community and create demand to lead healthy and infection free life SAI-TI staffs 24 Demand Generation meeting

Weekly and monthly meeting for status monitoring:-

Weekly meeting conducted by the Project Manager regularly and one monthly meeting headed by Project Director towards monitoring and gap analysis of the project.

IEC services

IEC has been an important component of the NACP. With the expansion of services for Counseling and testing, ART, STI treatment and condom promotion, demand generation campaigns has been the focus of the NACP communication strategy. Social Awareness Institution has efforts towards IEC service to continued focus on the following:

- Increasing awareness among general population in particular women and youth
- Behaviour change communication strategies for HRG and vulnerable groups
- Continued focus on demand generation of services
- Reaching out to vulnerable populations in rural settings
- Extending services to tribal groups and hard-to-reach populations

World AIDS Day-2017

World Aids Day is observed on December 1 every year to create awareness about the symptoms, causes and preventives of the pandemic disease HIV/AIDS that has taken unprecedented number of lives. Like every year, World AIDS Day 2017 was celebrated with a new theme "Right to health' including a range of interactive activities, campaigns by distributing posters and events that are endorsed by governments, people and organisations. "Under the slogan 'everybody counts,' WHO will advocate for access to safe, effective, quality and affordable medicines, including medicines, diagnostics and other health commodities as well as health care services for all people in need, while also ensuring that they are protected against financial risks,. On this occasion Ashok Kumar Hota ,Secretary, SAI graced the function & welcome the Guests and expressed the volunteers to unite the people of the society in the fight against HIV & show their support for people living with HIV. He elaborated the topic of HIV prevention, treatment and care and support services. Besides, urged the volunteers to take up initiatives to motivate the people to increase awareness and prevention for the diseases of AIDs. The participating took oath to spread awareness about HIV / AIDS infection and act as peer educators in their respective communities located at the inaccessible regions of Cuttack district. They pledged to volunteer efforts for achieving zero infection in the State by the end of year 2020.

Formation of Project Monitoring Committee

Formation meeting of Project Monitoring committee of SAI-TI

- The PMC will act as Advisory Body for the Targeted Intervention Project.
- PMC will review the programme & finance activities undertaken by the project as well as the CMIS Reports sent to OSACS.
- PMC will suggest corrective measures for issues raised during program implementation, mid course intervention to address gaps identified and suggest steps for the overall of the project to ensure smooth intervention in the designated area with the HRGs.
- PMC will review the frequent staff turn-over & suggest measures for retaining trained & experienced staffs.
- Review the performance of the staff periodically & ensure that each staff is working as per the job responsibilities assigned to them.
- Identify the challenges faced by the Project and suggest measures for Advocacy, Networking and Linkage with other agencies for effective service delivery.
- Undertake periodic visits to the field to gauge the impact of the intervention and to ensure improvement in quality.
- Major decisions such as inclusion of new target population, hot-spots or dropouts of target population etc. should be shared with the PMC

ADMO-PH advised to all members to fix a date for conducting the PMC meeting as per regular interval prescribed by the guideline of NACO.

Targeted Intervention Project, Titilagarh Dist – Balangir

TARGET POPULATION AND OPERATIONAL AREA:

The Target population of TI, SAI Titilagarh has been increased to 700 HRGs with 350 MSMs and 350 FSWs. Though the operational area was same as before yet the area of Patnagarh was excluded from SAI. Hence, the operational area was confined to Turekela, Muribahal, Belpara and Titilagarh Blocks only. The TI has 24 hotspots altogether scattered over these 4 blocks.

PROGRAMME:

As the goal and objective of the NACP-IV was Zero new infection in India over the end of 2018 by integrating programs for prevention, care, support and treatment so the program of the TI was also the same which was based on the six components:- 1.BCC, 2.Condom promotion, 3.STI management, 4.referral and linkages, 5.community mobilization and 6.enabling environment. The activities carried out to achieve the above mentioned goal were discussed below.

OUT REACH ACTIVITIES:

BEHAVIOUR CHANGE COMMUNICATION (BCC):

The term risk was closely associated with the behavior of an individual. And the behavior of an individual was highly influenced by the environment he/ she live and the knowledge and information she/he has. So behavior was not a permanent or inborn quality of individual. The risk factor of an individual can be reduced by changing the behavior of that person through proper and effective communication. To disseminate the proper information and make the people aware of HIV and AIDS, SAI, TI adopted the strategy of Hotspot meeting, DIC meeting, organized Video shows, and street Plays etc. along with the audio visual activities, participation and involvement of HRGs was given the priority because without their support no program would have been successful.

HOTSPOT MEETING:

Hotspot was the common place where the HRGs gather to be hired by the client. So the HRGs were easily available in the hotspot and hence meeting can be organized with them. Hotspot meetings were organized by the ORW in the monthly basis to be in touch with the HRGs. In the meeting the information of the organization was shared with them and the reaction, opinion and issues were brought forward to the Organization. All issues related to the HRGs were discussed freely without any hesitation and common opinion was developed for further action.

In last one year 109 Hotspot meetings were organized in the field and 1630 HRGs had participated in the decision making process. Hence, that signifies the active involvement of the community in the behavior change communication.

DIC MEETING:

DIC was generally a place of recreation for the HRGs. It was the safest place for them. They come here to have fun, play or to take rest. Some came for counseling while others come to pick the condoms. That also provided them a platform to share their ideas, views and problems with each other which in other hand strengthen their community bond.

At DIC level a DIC Committee has been formed consist of 14 members who represents the different hotspots. Every month a DIC level meeting was organized with the committee members. All issues related to the HRGs were discussed and decisions taken in the meeting were recorded. Till March 2018 TI, SAI had facilitated 24 DIC level meetings which were participated by 463 HRGs.

TI SERVICES:

As per the NACO guideline TI was to provide the three basic services to the HRGs free of cost to prevent the new infection and halt the epidemic of HIV and AIDS in the area. They were as follows:

A.ICTC SERVICES:

HIV was such a virus that does not develop any sign or symptoms in its incubation period. In the absence of such signs and symptoms the person infected with HIV take it granted that he was healthy hence, goes on spreading the infection to other with whom he/she keep the sexual relation. Therefore it has been made mandatory to have the HIV test of HRGs twice a year in the interval of six months each to confirm their HIV status and to take further action according to that prevent the spread of the epidemic.

For the year the target of the TI for the HIV test in the ICTCs was 1380 and the TI had achieved 1097no. of testing till the end of March 2018 which was 81%.

Though the rate of testing was less yet 3 persons were found as HIV Positive which was a great achievement of TI. That justifies the commitment of the staff and volunteers in the fight against HIV/AIDS in the globe.

B.STI MANAGEMENT SERVICES:

STIs/STDs were very common among the high risk population. The presence of STIs/STDs increases the chances by 20 times more to get HIV infection. Hence, the early detection and treatment of STIs/STDs were essential to reduce the threat of HIV/AIDS among the high risk group. So the HRGs were provided STI treatment free of cost by the government. The TI make plan and effort to provide the STI services facilities to the HRGs at the best way possible.

The TI had identified 4 PPPs in the operational area and MOU had been also signed to provide STI clinical services to the HRGs both FSWs and MSMs. And till March 2018 the referrals cases to PPP clinics were 2241. Out of that 23 HRGs had received STI treatment, 26 had got PT, 1682 HRGs had

received RMC, and 1018 HRGs had undergone syphilis testing so far. The achievement was 73% in the year.

C. Condom Services:

Another important service that was provided through the TI was the condom promotion. In that component, the usage and benefits of the condom were well explained to the HRGs by the TI staffs. The HRGs were taught about the safer sex practice through information and demonstration and re-demonstration. To promote the utmost use of condoms by the HRGs, the easy availability and accessibility of condom was taken care of in the field. Condoms were given directly either by the Peer Leaders or ORWs and kept in the outlets from where they pick up them easily without any hesitation.

Altogether TI has 24 outlets spread all over the operational area like Kantabanji, Muribahal, Belpara and Titilagarh. In the year TI had distributed 72844 pieces of free condoms (including the outlets) to the HRGs. 223 pieces of condoms were used for demonstration and re-demonstration.

D. Counseling:

Counseling was the important tool and technique in the TI. Counseling was the professional advice, instructions, guidance or suggestions to the persons to do or not to do certain things accordingly. It deals with human psychology. In the context of TI it was very important as it gives moral and emotional support to the HRGs who were in need. It helps to convince and motivate them to go for their HIV testing, STI treatment or to avail other services from the TI and the government.

In the TI HIV/AIDS counseling and STI counseling were provided by the counselor in the field and office. The counseling may be individual counseling, group counseling or family counseling. So till the month of March 2018, a good number of HRGs received counseling for different aspects. 2475 HRGs had been given individual counseling and 84 families reached out for the family counseling. Out of them 1775 HRGs received STI Counseling, 1230 received HIV/AIDS counseling and 3 HRGs received counseling for ART registration.

Referrals And Linkages To Other Services:

Apart from the three major services the TI provides other additional services (such as linkage to ART Centre, BNP+ (DIC), CSC, RNTCP and 26 other government facilities) to the HRGs for their wellbeing.

a. ART Centre, TI PLUS & CSC:

HRGs those who were found HIV positive were to be linkage with the ART Centre. Till March 2018 TI had referred 3 PLHIVs to ART Centre, Balangir. Out of them 3 HRGs were linkages with ART centre. At present 27 HRGs are on ART and 2 HRGs are on Pre-ART.

The PLHIVs those who were sick/ weak or taking medicine for the first time were kept in the Community Service Centre till they feel better. In the CSC they were provided with all sorts of care and support that were essential for them to get well soon. In the CSC they get medical care, nutrient food, moral and psychological support and counseling from the counselor. SAI had sent 3 PLHIVs to the CSC Balangir and got the better services and returned back to their home after a short stay in the CSC.

Community Mobilization:

Community mobilization was a major component of the TI project. The HRG community was scattered all around far and near in the rural area. Hence, they have no unity and failed to stand together even when their rights were often neglected or violated in the general society. So in order to organize them, SAI initiated the effort in 2011 and led the foundation stone of the CBO "SAMPARK", an organization of the MSM HRGs of its operational area. The executive body members meet every month to discuss on various issues related to the community. SAI TI was always a supportive hand to the CBO, SAMPARK.

Under the guidance of SAI, the executive body decided to get it registered as soon as possible. Hence, require documents have been forwarded through the BDO, Titilagarh to the ADM, Balangir for the registration and to get legal status. Hopefully it was registered by the end of the month of October 2013.

Apart from that 24 Hotspot Committees have been formed as one in each hotspot area. 3 STI Committees one in each PPP area and 2 DIC committees one each for MSMs and FSW communities have been formed. Such committees provide the HRGs a platform to express themselves freely without any hesitation or fear. It also helps them to develop their leadership quality. So at one hand these committees strengthen their community bond and on the other hand it works as the powerful means that motivate them to stand for the common cause that influence their life. These committees were formed on the line of democracy and each HRG was given equal value and importance to participate in the decision making process. The effort was undertaken by SAI absolutely to strengthen the community bond, develop capacity to such extend so that they could be self dependent even if the NGO withdraws itself from the field.

NUAKHAI BHETGHAT:

“NUAKHAI” was a famous festival of western Odisha. It was a festival of love and care. The name “NUAKHAI” itself clearly indicates its meaning that the people eat or consume the new or first harvest of their farm produce after offering it to their family deity or “Kul-devi”. That was the festival of the farmers. But people of western Odisha irrespective of their caste, creed, religion, profession and language celebrate it with much pump and show.

It was the festival of brotherhood and love. All dear ones of the family return back to their families to offer the thanks giving and eat together. After receiving the “Nuan”, it begins the celebration of greetings or “Bhetghat”. The Younger of the family and society greet the elders by touching the feet of the elders and show their regards and on the other hands the elders raise their hands and bestow the blessing upon them. Hence, “NUANKHAI” can be called as the festival of “reunion” of the family members and the dear ones.

So, TI, SAI organized a “BHETGHAT” for the HRGs on dt. 18 October 2017. HRGs from all over the field were invited to attend the party.

DPM, DAPCU, Rajendra Moharana, LT OF SDH Titilagarh, sanjeev rana and Mr. sobhan kumar Mohapatra STS SDH, adv. Mr. Rajdip Patnaik, the legal advisor and advocate of Crisis Committee of TI, SAI, PPP, Dr Prakash Mohanty, and Mr. Pratyaya Ojha etc. had accepted to be the distinguish guests of the day. DPM, DAPCU was the chief guest and DPM DAPCU was the chief speaker of the day. A short meeting was held which was coordinated by the Project manager Mr. Pratyaya Ojha. He welcomed the guest and the audience and briefly presented the work and achievement of TI, SAI, Titilagarh. He disclosed the very objective of the program to the community. After the welcome ceremony and felicitation DPM DPCU addressed the community. In his speech he urged them to lead a healthy sexual and social life. As long as the female of the family was not empowered to talk to her husband she will be vulnerable to different diseases and sickness. Hence, their empowerment was very important.

After the meeting different games like singing, fashion show, musical chair were organized on the day. Many HRGs participated in the game joyfully. The winners were given away the prizes by the chief guest.

The primary objective of the program was to organize the HRGs of different areas by providing them a common platform, to strengthen their community bond and empower them to stand together for their common cause. Hence, it was observed that the HRGs were very happy for getting such an occasion. They expressed their gratitude to SAI and requested the project manager to organize such program in the future. 53 HRGs (both MSMs and FSWs) had participated in the program.

Enabling Environment:

Enabling environment means creating such an environment or condition that was suitable and conducive for the HRGs to lead a happy life without any fear. So Advocacy meetings and stakeholders meetings with the various secondary stakeholders like: Local Police, political leaders, GOs & NGOs of same interest, elected bodies of the Panchayats etc were to be conducted in the last six months. The primary objective of such activities was to convince and motivate them to deal with the HRGs softly and empathetically and not cruelly even if they were caught red handed. So therefore, they won't hide and go for unsafe sex with their client. In that way the chance of vulnerability to HIV & AIDS can be minimized.

Keeping that objective in mind TI, SAI organized 114 Community or Hot spot meetings which was participated by 1091 members from the community and 3 stakeholders Meeting with the elected leaders of the Gram Panchayats ASHA, ANGANWADI WORKER, Youth, Community leader and Auto rickshaw driver. The meeting was attended by 16 word members including the Sarpachs and the Samiti Members. They were oriented on HIV & AIDS and the vulnerability of HRG community. They were urged to join their hand with the organization and contribute their little deeds and be a part in the fight against that dreadful disease.

Human Resource related:

Human resource was the very important element of the organization. The success and failure of the program or project mostly depends on its men power. Hence, their capacity building from time to time was very essential. That helps them to get familiar with the project and upgrade their skills with the pace of time and hence, enhance their performances too.

In a year SAI organized 2 in-house training programs in the month of 19 June 2017 & 30 December 2017 respectively for the newly appointed TI staff. All the TI team (36 Members including PM, Counselor, ORWs and PEs) had participated in the training program Rakesh Mahapatra PO TSU Were the resource persons. The participants were oriented on HIV & AIDS, TI Project, STDs/STIs and their doubts and misconceptions were clarified through the training program.

Project Manager Mr. Pratayaya Ojha and M&E cum account had received the Refresher training while Counselor Mr. Kshirasindhu Rana had received both induction and refresher training from TSU OSACS Bhubaneswar in the months of December 2017 and February 2018 respectively.

Monitoring and evaluation:

Monitoring and Evaluation was the most integral part in the project work. That was the yard stick to measure how much was done how much was to be done. The tool was commonly used in every sector just to ensure that the work assigned or undertaken was progressing on in the right direction and in the right time.

In the TI, SAI the work of the Peer leaders was monitored by the ORWs (Outreach Workers), and ORWs were monitored by the Counselor. And Project Manager being at the top was responsible to monitor work of all the TI staff. He was the key person to lead the team in the right direction. He had been vested with power to take necessary action as per the situation to achieve the desired goal. In the same way the work of Project Manager was monitored by the Project Director to ensure that the activities of the project were resulted oriented.

On the other hand Evaluation was done by two different parties one by the NGO itself called as Internal Evaluation and the other by the Funding Agency or by any other agency on its behalf was known as External Evaluation respectively. Internal Evaluation was done by the organization from time to time on weekly or monthly basis. But external Evaluation was done by the Funding or Monitoring agency half yearly or yearly as per their convenience.

Since April 2017 to March 2018, the organization had 36 Weekly Review meetings and 12 Monthly Review Meeting headed by the project Director as a part of internal evaluation. The performance of each staff was assessed during the review meetings and new target was set every month. Those who performed well were appreciated while the under performers were strongly urged to increase their performance.

In the month of September External Evaluation was conducted by OSACS. The gaps were identified and urged the organization to take the measures to correct them.

Achievement:

- ❖ Till March 2018 of the project year 591 MSM HRGs and 485 FSWs were have been registered and provided TI services.
- ❖ In the year 2017-18,16337 HRGs (both MSMs and FSWs) had been reached out through the one to one contact. Out of them 7655 HRGs were reached out through individual contact which was 91.13% of the target and 7590 HRGs were reached out through the regular contact.
- ❖ TI, SAI had organized 109 Hotspot Meetings in the operational area to share the information with the HRGs and those meetings were participated by 1091 HRGs. Apart from that 24 DIC meetings had been organized in the DIC to discuss on various issues related to the HRGs and those meetings were participated by 463 HRGs representing the various hotspots.
- ❖ 2241 HRGs have been referred for STI treatment and 1757 HRGs have received the Treatment (STI-23, PT-26 & RMC-1682). The achievement was 73% against referrals.
- ❖ Out of 1230 referrals to ICTC for HIV testing 1097 HRGs had had their HIV testing which was 81% achievement of total referrals. Out of that 3 were found HIV positive. The positivity rate was 1.42%.
- ❖ 33PLHs were referred and linkage with the ART Centre, Balangir. 84(HRG & General) PLHs were referred to DIC (BNP+) and 3 PLHs to the CCC Balangir to receive the health care facility.
- ❖ 33 PLHs have been linkage with the MBPY scheme of the government and 3 PLHs linked up with DIC (BNP+)
- ❖ In the 1st half of the project year 3 Stakeholder Meeting was organized with the local leaders and panchayat members. 82 members had participated in the meeting and put forward some valuable suggestions.
- ❖ In a year of TI services, 2475 HRGs had received individual counseling where as family counseling was 46
- ❖ TI, SAI organized 2 no. of in-house Training program for the capacity building of the TI field level staff in the months of june asnd December respectively. Project Manager, counselor and M &E cum accountant had received both induction and refresher training organized by OSACS/TSU.
- ❖ Altogether 36 Weekly Review Meetings and 12 Monthly Review Meetings headed by the PD were organized by TI, SAI.

Link Worker Scheme (LWS) Project, Nuapada

Target Area:

A broad mapping was done in consultation with the District Health Unit, ICTCs, DSRC, RNTCP, CHCs and other secondary stake holders like PRI members, labour department, labour contractors etc. The 20 clusters were selected at an average of 5 villages in a cluster and 107 villages in total. The following villages were selected

Human Resource Recruitment:

Recruitment for different posts were done as per the guidelines of NACO. There was no staff turnover in the staff. The same DRP, M&E cum AA and Zonal Supervisors continued in the project. Only two Cluster Link Workers were changed and for the posts for cluster link workers advertisements were done in the form posters in the villages. A panel consisting of OSACS officials/representatives of local health department and senior NGO staff selected the candidates through written and vivavoce tests.

CAPACITY BUILDING:

Induction Training: It is a rule in Social Awareness Institution that induction training shall be given to the new staff within 15 days of their joining. In this context induction trainings were organized twice for the new CLWs in which they were oriented on Goal and objectives of SAI, its different policies, goal and objectives of Link Worker Scheme Project, OSACS, NACO and the basics of HIV , AIDS. They were also trained on the different reporting formats and their implications.

Refresher Training of Link Workers:

Though was no budget refresher training of Link Workers was organized on the 02.09.2017, 3.10.2017, 03.11.2017, in which the old and new Link workers were capacitated on the behavior change communication including body mapping, condom Promotion, and other aspects of Link Worker Scheme.

BEHAVIOUR CHANGE COMMUNICATION:

The 20 Link Workers in 40 GPs of the 5 blocks of the district listed out the HRGs and vulnerable population in their respective categories. There after they prioritize them with respect to vulnerability and started interacting with them. Their communication processes with the target group was one to one counseling, one to group counseling. Different IEC materials like charts flip books, stories and models were used to communicate different messages on prevention, care and support. At the outset the link workers felt it difficult to discuss sexual issues especially with the FSWs later this was incorporated in their training and then they were empowered to help the target groups to assess their own risk, make risk reduction plans and motivated for correct and consistent use of condoms. Following are the achievements of the

WALL WRITING:

Wall writing was done with a very limited cost by the artist CLWs. The CLWs were paid colour cost of Rs 500 each at 20 different places including Anganwadi centers, clubs, Panchayat office, Rajib Gandhi Seva Kendras.

COMMUNITY OUT REACH

To enable an enabling environment, the link workers, supervisors, DRPs discussed with different secondary stake holders like PRI members, ASHAs Anganwadi workers, village leaders, SHG members regarding the vulnerability of the area and worked out plans to protect people from HIV infection, ensure elimination and stigma and discrimination, clear the myths and misconceptions, community care and support of the infected and effected by HIV. It was observed that there was wide acceptance of the HIV/AIDS intervention in the district from all sectors. Health care professionals have extended their hands to support the workers in carrying out their responsibility, guide them and welcome them in all activities of the health department. Similarly our volunteer, workers participated in the Pallibashas, Gramsabhas, GP level meetings, organise special meetings with the PRI members to seek their attention towards the prevention, care and support of HI/AIDS. Their knowledge on HIV/AIDS increased and they realized the need of coordinated approach to fight against HIV/AIDS.

REFERRAL AND LINKAGES

After the vulnerability assessment of the target groups they were referred to different service delivery centres like ICTC, PHC, TB centers, ART center. 4774 persons were referred to ICTC out of which 7917 were tested and 8 were found positive. All persons were referred to ART center, Balangir. All these PLHIVs were registered at the ART center and all of them have started taking ART drugs. 1158 persons received treatment from STI clinic, 242 persons were referred to the TB center and 2365 persons to the PHCs.

CONDOM PROMOTION

Correct and consistent use of condom plays an important role in HIV prevention. In Nuapada district, the majority of the HIV infection was through sexual route and hence condom promotion was given utmost importance in the project. The workers explained the benefits of condom use, correct way of using it by demonstrating condoms before the target groups both in one to one and group interactions. It was observed that the demand for condom has a steep increase after the Link worker Scheme intervention in the district. To make condom accessible and available, condom outlets were established in almost all the villages of the project area. 107 outlets have been established. The outlets were mainly with the ASHAs, AWWs, betel shops, dhabas, wine shops. Condoms were also distributed through the Link workers and in the programmes undertaken by the project 2596 pieces of free condoms were distributed to the target groups due to the low economic conditions of the people of this area social marketing condoms could not be marketed much. Social marketing condoms were displayed in different exhibition stalls to aware people about their availability. 6306 numbers of Social marketing condoms were sold by the CLWs.

PLHIV networking meeting:

Networking meeting for the people living with HIV/AIDS was organized at District Head Quarters, Nuapada on the 12th March 2018. The first Network of positives in Nuapada in the name of **Jeevan Dhara** was earlier formed but till date it has not been registered. The members reorganized the office bearers and decided to meet the collector and the CDMO to discuss about bus pass and other social security linkages..

World AIDS Day:

World AIDS day was observed on the 1st December 2018 jointly by SAI, CHC, Khariar, Block administration, ICDS and other NGOs. The ABDO, Medical Officer in charge, CDPO and other block level officials were present. The rally was flagged off from Raja A.T.HighSchool ground by the Medical Officer I/C and the Head Master of RATHS and moved throughout the town reciting slogan on HIV/AIDS. Cluster Link Workers, Volunteers, ASHA, AWW participated in the programme. Then the participants of the rally assembled at Raja A.T.High School where there was an awareness meeting, Speakers like Baruna Baghar, Counsellor, ICTC, Medical Officer, CDPO, PHEO, BPM spoke on the different aspects of HIV/AIDS. Artists of Khariar Sanskritik Anusthan presented a street play on HIV/AIDS. Quiz completion was held after the meeting in which persons given correct answers were given prizes.

STATE LEVEL COMPETITION ON ONE ACT PLAY

A team of Cluster Link Workers, Zonal Supervisors and DRP presented a play " Ekla Jeeban" on the theme "Bhedabhaba Raheeta Samaj" on the 22nd November 2017 which was adjudged 1st in the state. The play was again enacted at Soochana Bhawan on the Celebration of State Level World AIDS Day on the 1st December 2017.

Advocacy Meetings

Advocacy meetings at the block and GP level were conducted for a stigma free environment, early detection, 100% testing of pregnant mothers. Keeping in view of the expected draught situation it was

anticipated that there will be more migration this year in comparison to the last years. Hence the PRI members were requested to implement the MGNREGS programme properly so that the migration will be less and to educate the migrants for prevention. This resulted in increase in testing of migrant labour and ANC. The PRI members attended the VHNDs and explained the need of testing of the ANC mothers.

Health cum Testing camps. Health cum HIV screening camps were organized in remote places from where people find it very difficult to reach to the ICTC for HIV screening. Hence camps were being organized in consultation with the counselor, ICTC. 16 health camps were organized in which 1828 persons were screened. Two persons were found reactive and were confirmed at the ICTC later.

Stigma Reduction Activities:

Five numbers of stigma reduction activities were organized in different CHCs in which the health care professionals were sensitized on the myths and misconceptions regarding HIV infection. It was also discussed how the attitude of service providers is forcing the HIV positives to remain hidden which increases the risk of the health care professional. The identification of stigma in the villages where the PLHIV resides are to be also reported to the project to take necessary action by the LWS project.

MONITORING AND SUPERVISION:

Joint visits were held with ICTC counselor, PO, TSU, staffs of TI NGO periodically for monitoring the progress of the project and avoid duplicity. This too helps in identifying vulnerable population in the respective areas. There are clients of the HRGs of the TI who hail from the Link Worker Scheme Project area. Thus it helps us in prevention strategy. In addition the Project Monitoring committee sits every quarter to evaluate the project. OSACS too monitors the project periodically and accordingly improvement plans were made

BEST PRACTICES IEC stall in Mega exhibition cum festivals:

The project creates awareness in Mega exhibitions like Khadial Mahotsav, block and district level Maraguda Utsavs where thousands of people come. Exhibition of posters on STI, RTI, HIV, Social Security Schemes were displayed, Individual counseling, group counseling, written quiz, Condoms were distributed. More than 6000 Persons visited the exhibition stall in Khadial MAhotsav and were made aware on HIV/AIDS. 3000 free condoms were distributed, 580 numbers of commercial condoms and 240 numbers of Social marketing condoms were sold.

Creation of Street Play Troupe by CLWs for mass awareness:

The Cluster Link Workers were trained on performing street plays and were used on various occasions to create mass awareness which proved to be very effective in HIV/AIDS communication.

Training of adolescent girls on STI/RTI/HIV/AIDS The adolescent girls are trained on STI/RT/HIV/AIDS in coordination with ICDS. Though Anganwadi workers should have meetings with adolescent girls every Saturday, they are not capable of educating the girls properly on these issues hence they welcome the staff of LWS project to train the adolescent girls. This activity could be done without incurring any expenditure..

Inter Project Coordination Staffs of Link Worker Scheme Project were trained on related topics like Financial Management, MGNREGS, RTI, Labour rights, Women rights through other projects of the organization.

National Fund on Enabling Partner Community to claim labour rights and rights over natural resources

SINAPALI BLOCK LEVEL LABOUR AWARENESS MEETING CUM LABOUR ORGANIZATION FORMATION PROCESS INITIATION MEETING

One day block level "Labour Awareness Meeting cum Labour Organization Formation Process Initiation Session had been organized at GorlaGram Panchayat office of Sinapali block district of Nauapada, Odisha on dated 25th September, 2017 at 10am. Mr. DillipMajhi, Sarpanch of Gorla Gram Panchayat had presided over this meeting. Miss JosobantiSabar, Coordinator of SAI, for Sinapali block had given welcome dialogue and the participants had given their own identification. Mr.JitendraNathPattnaik clarified aims and objectives of this meeting in details. Peoples of this area have been engaged as labour in seasonal agriculture labour, kendu leaf plucking, kendu leaf bundle making work, Mahatama Gandhi National Rural Employment Guarantee Act work, collecting seasonal Minor Forest Products within a year. Now-a-days some of the people are being engaged in construction labour work under PradhanMantry Gram SadakYojana, MukshymantrySadakYojana, Mo Kudia, PradhanMantryAabasYojana, BijuPucaaGharYojana like government sponsored works . Some of you are going outside of the state for searching of works in brick kilns to Andhra Pradesh, Telengana, Tamil Nadu and Karnataka like states as seasonal migratory labour under unauthorized labour contractors command in every year. These migratory labours are going with their family members that hampered their children education and development of the family. They have been deprived up from their ration items that provided by the government every month to the family under Food Security Act. They have also been working under insecurity, unhygienic conditions at their workplaces. Women have been facing physical and mental torturers by the employing men or labour contractors, supervisors frequently.

On the other hand those who are working under Mahatama Gandhi National Rural Employment Guarantee Act work (MGNREGA) work have not been getting their wages in timely that prescribed in the Act. Peoples from Dhungiamunda, Maheswar, KusumKhunta, Punjipada, Bhoropada, Patelpada, Baijalpur, Gorla villages along with Gram RozgarSevaks were participated in it and shared their views. According to them due to shortage of required technical personals in block office the MGNREGA work measurement and wage payment has been delayed for months. So the villagers those who are the real beneficiaries of this scheme they are leaving out the village for search of work to out side of the village as migrant labour. So the purpose of this significant Act of the government cannot achieve its target. There is neglect in government level particularly in block office. We the GRS are do nothing in this regard we just approaching the block officials again and again for speed up process and right time payment. Participants said that the GRS are not maintaining muster rolls, required documents properly for time bound payment. Those GRS are doing it appropriately the labor are getting wages timely.

The state government has declared 200 days works in drought affected districts under MGNREGA since last year. But no one has done it or completed 100 days work in last year. There is drought this year also, but we are not applying for MGNREGA work to our Gram Panchayat office through written manner. We are demanding work the Gram Panchayat provided it unless unemployment allowance will be given to the applied workers after 15 days of work demand application. When we are applying for work we should demand acknowledgement receipt from the authority unless we shall deprived up from unemployment allowance. MGNREGA has been introduced by the government to prevent seasonal migration in rural, to creating permanent structures for benefit of the farms and farmers, village to village or one hamlet to other hamlets or habitation to village ponds, farm fields, worshipping places, graveyards will be connected with earthen roads, to dig out small connecting canals to farm fields, farm lands can be leveling or reclaimed, fruit bearing trees can be planted for the purpose of orchard rising, big or small water bodies can be installed for water storage purpose that can use for irrigating crop fields, used multiple ways by the villagers. Benefits of MGNREGA work directly goes to the villagers, so they should have taken its direct benefits in person and collectively. We are doing

work under MGNREGA and stop seasonal migration in our villages from today onwards it is our promise, let us come forward to fulfill our aims with collective works.

It has been decided that job applications under MGNREGA will be filled up and submitted to Gram Panchayat office with acknowledgement receipts on October second week onwards. In every village level labor organizations will be formed and then block level committee in the month of November. Gram Panchayat and regional level committees and meetings will be arranging in the month of October and November. One suggestion has been given by DhaneswarMajhi of Patelpada village that it needs construction of one cross dam over GhatDumarNullha near GhatDumar of Gorla village. If the proposed cross dam will be constructed then the entire agro fields of Gorla Gram Panchayat would be irrigated during monsoon seasons and half of it will be getting water during winter and summer crop seasons. It has been decided that team will be visited the suggested place and proposed to the water resource department for its construction as early as possible.

Mr. DillipMajhi, Sarpanch of Gorla Gram Panchayat said that it has been decided in the last meeting of Gram Panchayat that MGNREGA work will be begin from the month of November, job application process will initiate from the second week of October in village level with consolation with the villagers. We are welcoming to SAI for helping us to motivate people for this purpose. I have discussed with Block Development Officer, Sinapali to cooperate me for speed up and time bound payment to the labors. I will discuss with the technical persons of Water Resource Department regarding construction of Check Dam over GhatDumarNullha. Village level Labor Union will supervise the MGNREGA work and mount pressure upon the department for timely payment to the labors. Record keeping process will be monitor vividly in every village during work period. It is my mission to stop seasonal migration in my Gram Panchayat. MrMahendraBag, Cooradinator Nuapada Block of SAI said we will give importance on maintenance of record keeping process while the work will be on progress. Due to faulty record keeping practice labor are not getting time bound payments. Mr. Dasumu Patel, Cooradinator Boden Block of SAI had given vote of thanks to the participants' persons on the podium and organizers for this sensation discussion and gathering.

KOMNA BLOCK LEVEL LABOUR LEADERS AWARENESS MEETING –

One day level "Labour Awareness Meeting had been organized at Pendrawan Gram Panchayat office of Komna block district of Nauapada, Odisha, on dated 13th December, 2017, at 10am,. Mr. AmareshPattnaik, Sarpanch of Komna Gram Panchayat had presided over this meeting. MrPramodBarik, Coordinator of SAI, for Komna block had given welcome dialogue and the participants had given their own identification. Mr.JitendraNathPattnaik clarified aims and objectives of this meeting in details. Peoples of this area have been engaged as labour in seasonal agriculture labour, kendu leaf plucking, kendu leaf bundle making work, Mahatama Gandhi National Rural Employment Guarantee Act work, collecting seasonal Minor Forest Products within a year. Now-a-days some of the people are being engaged in construction labour work under PradhanMantry Gram SadakYojana, MukshymantrySadakYojana, Mo Kudia, PradhanMantryAabasYojana, BijuPucaaGharYojana like government sponsored works . Some of you are going outside of the state for searching of works in brick kilns to Andhra Pradesh, Telengana, Tamil Nadu and Karnataka like states as seasonal migratory labour under unauthorized labour contractors command in every year. These migratory labours are going with their family members that hampered their children education and development of the family. They have been deprived up form their ration items that provided by the government every month to the family under Food Security Act. They have also been working under insecurity, unhygienic conditions at their workplaces. Women have been facing physical and mental torturers by the employing men or labour contractors, supervisors frequently.

On the other hand those who are working under Mahatama Gandhi National Rural Employment Guarantee Act (MGNREGA) work have not been getting their wages in timely that prescribed in the Act. Peoples from Pendrawan, Dharmsagar, Jhalkusum, Haripur, Chandopala villages along with Gram RozgarSevaks, PEO, were participated in it and shared their views. According to them due to shortage of required technical personals in block office the MGNREGA work measurement and wage payment has been delayed for months. So the villagers those who are the real beneficiaries of this scheme they are leaving out the village for search of work to out side of the village as migrant labour. So the purpose of this significant Act of the government cannot achieve its target. There is neglect in government level particularly in block office. We the GRS are do nothing in this regard we just approaching the block officials again and again for speed up process and right time payment.

Participants said that the GRS are not maintaining muster rolls, required documents properly for time bound payment. Those GRS are doing it appropriately the labor are getting wages timely.

The state government has declared 200 days works in drought affected districts under MGNREGA since last year. But no one has done it or completed 100 days work in last year. There is drought this year also, but we are not applying for MGNREGA work to our Gram Panchayat office through written manner. We are demanding work the Gram Panchayat provided it unless unemployment allowance will be given to the applied workers after 15 days of work demand application. When we are applying for work we should demand acknowledgement receipt from the authority unless we shall deprived up from unemployment allowance. MGNREGA has been introduced by the government to prevent seasonal migration in rural, to creating permanent structures for benefit of the farms and farmers, village to village or one hamlet to other hamlets or habitation to village ponds, farm fields, worshipping places, graveyards will be connected with earthen roads, to dig out small connecting canals to farm fields, farm lands can be leveling or reclaimed, fruit bearing trees can be planted for the purpose of orchard rising, big or small water bodies can be installed for water storage purpose that can use for irrigating crop fields, used multiple ways by the villagers. Benefits of MGNREGA work directly goes to the villagers, so they should have taken its direct benefits in person and collectively. We are doing work under MGNREGA and stop seasonal migration in our villages from today onwards it is our promise, let us come forward to fulfill our aims with collective works.

Mr. AmaershPattnaik, Sarpanch of Pendrawan Gram Panchayat said that it has been decided in the last meeting of Gram Panchayat that MGNREGA work will be begin from the month of January, job application process will initiate from the third week of December in village level with consolation with the villagers. We are welcoming to SAI for helping us to motivate people for this purpose. I have discussed with Block Development Officer, Komna to cooperate me for speed up and time bound payment to the labors. Village level Labor Union will supervise the MGNREGA work and mount pressure upon the department for timely payment to the labors. Record keeping process will be monitor vividly in every village during work period. It is my mission to stop seasonal migration in my Gram Panchayat. Mr.Pramod Kumar Barik, Coordinator Komna Block of SAI said- we will give importance on maintenance of record keeping process while the work will be on progress. Due to faulty record keeping practice labor are not getting time bound payments. Ms.JasobantiSabar, Coordinator Sinapali Block of SAI had given vote of thanks to the participants' persons on the podium and organizers for this sensation discussion and gathering.

PERSPECTIVE BUILDING ON GOVERNANCE STRUCTURE, SYSTEM IT'S FUNCTIONING, RIGHT TO INFORMATION & ITS APPLICATION-

A training program on "Perspective Building on Governance Structure, System it's Functioning, Right to Information & it's Application" has been organized at SAI project office, Khariar from 26th to 28th, October 2017. Recognized RTI activist, guide, columnist, law expert, leading essayist and social worker Mr. Chitta Behera of Cuttack has facilitated in this three days training course as trainer. Participants were given their self introduction with the field they have been working. Mr. Jitendra Nath Pattnai, Project Coordinator of SAI has shared aims and objectives of this training. He said that we should have taking advantages of this three days training program with clarification of our doubts and followed the time table strictly. Mr. B.N. Durga of Actionaid, Bhubaneswar office given detailed information about Chitta Behera and approached all asking questions within the training period for better clarification. As much as subject matter queries you asked so much you gain from this exercise. Chitta Behera has enormous experience on Right to Information and its application. Total 37 (14 female + 23 male) participants from Nuapada, Kahriar, Sinapali, Boden and Komna blocks of Nuapada district have taken part in this three days training program.

Chitta Bhai asked to the participants "whether they have been known about Right to Information Act, its application and outcome". Thirteen of them answered that for first time they are come to know RTI here only, before they did not acquainted with this term. Six of them have written applications to Gram Panchayat, Tahasil, Chief District Medical Officer and Block office for information through prescribed format and get back its result form the concern offices. They have given its detail description. Rests 18 have known about RTI Act but never utilize it for self or for others.

Then ChittaBehera informed that “Our country India was ruled over by the British Government for 200 years. In 1947 we achieved our Independence through a long struggle. In 1923 AD, British- India Government had introduced ‘Government Official Confidential Act’. If some one appealed verbally or written to the Government office to know certain information then he had been deprived up from it under this Act. It has been promoting authoritarianism among the government bureaucrats’ and leads corruption also. In this situation peoples from civil society organizations and think tanks had initiated campaign on right to information throughout the country. After a long battle, the citizens of the country got their justifiable right to get information from the offices of the public authorities through Right to Information Act of 2005. Which had been passed in the Parliament had got the assent of the President of India on 15th June and come into full force from 12th October 2005. It is a historic and inimitably pro- people Act since Independence. It aims at maintain maximum transparency and accountability in the administration and delivering a clean and corruption free system of Governance for the whole country”.

Question put up by the participants that which country of the world enacts RTI earliest for benefit of citizens? ChittaBehera answered that “Sweden has enacted RTI in 1774 AD, letters corresponded in between the King and the Prime Minister had been kept in a library for public information. Those who were interested to know about it they could find out it. Sweden is the only country of the world where information have been automatically displayed in the libraries and reading rooms for public acquaintance”.

Further question asked by the participants that from which year RTI course of action had been initiated in India? He stated that “in middle of nineties RTI campaigners of India demanded for it through meetings, rallies, memorandums, news paper articles. In 2000 AD, the central government of India introduced ‘Freedom of Information Bill’ and it had passed in Parliament in 2002. But it was not an effectual one that demanded by the campaigners. So the RTI activities demanded for an effective one. In 2004 AD, United Progressive Alliance (UPA) under leadership of Congress Party had come into power in centre. UPA amended the ‘Freedom of Information Bill’ and further reintroduced it with Draft Rule Bill through public opinion. In 2005 AD, RTI comes through suggestion of people, RTI activities and campaigner, and Draft Law Bill circulated in 7 states like Maharashtra, Madhya Pradesh, Tamilnadu, Delhi, Assam and Rajasthan. It has given freedom that each state can introduce laws on RTI and an effective central RTI law also enacted with effective manner through various suggestions”.

The participants put questions to know what the difference among Act, Rule and Law are! ChittaBehera said that “i) act introduced by the legislatures in Parliament, Legislation Assembly by the MPs and MLAs, concern Ministry introduced rules by the bureaucrats, ii) fundamental provisions are given priorities, it may be to the point, rules may be in details as act work out through rules, iii) act considered as main, rules considered as minor, iv) rules have modify according to the modification of act, act cannot modified according to the modification of rules, v) amendment of act is composite as legislation process inclusion with it, amendment of rules are simple it needs approval of concern authorities only”.

He further added that there are two types of RTI acts are functioning in our state, one is central government and another is state government introduced. One can get information from the central government offices through a simple application with attachment of required amount Indian Postal Order (IPO) only. There is a specific RTI format for the Odisha state government office and both IPO and Money Order form of amount accepted. Simple RTI applications shall be rejected in the state government office and Odisha state government RTI format shall not be accepted in the central government offices. Sixteen types of information shall have notified by every government offices for public awareness. Individual RTI applications shall accept. RTI applicants shall get information within 4 hours of appeal in case of medical treatment.

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STATE LEVEL ADIVASI EKTA PARAV-2017

The sixth state level Adivasi Ekta Parav had been observed at Upkaganga of Jharnamal village, coming under Boden block of Nuapada district on 14th & 15th November, 2017. On first day at 11 am, a colorful inaugural procession was started from Maetighar (worship place) of Jharnamal village with tribal music and dance to Upkaganga. Different tribal community priests (Jani, Dishari, Dehury) had worshipped their divinities traditionally there.

Mr. Jaysing Chinda, President; district organizing committee of state level Adivasi Ekata Parav-2017 had acknowledged commencement of this two days function formally. He had given welcome speech and updated previous Adivasi Ekata Parav information to the gathering. He said that in 2012, first Adivasi Ekata Parav was organized at Khandadhar Water Fall of Lahunipada block of Bonei Sub-division of Sundergarh district, Odisha. Discussed topic was "Adivasi's Right Over Water Resources", eminent social workers, distinguished personalities and experts of Water resources were shared their views along with Adivasi leaders and participants from different districts of Odisha. The second Adivasi Ekata Parav was organized at DebKunda Water Fall of Udala block of Mayurbhanj district in 2013. "Adivasi's Right over Natural Resources" was the topic of discussion. Third Adivasi Ekata Parav was arranged at Ekataguda of Koraput block and district in December, 2014. "Adivasi and their Language" was the topic of discussion. In 2015, fourth Adivasi Ekata Parav was disposed at Adapada village of Lakhanpur block of Jharsuguda district of Odisha, "Displacement & Adivasi" was the theme of discussion there. Fifth Adivasi Ekata Parav was organized at Badnal of Padampur block of Rayagada district in 2016. Theme of discussion was "Adivasi & Self Governance". He further added that- here we are observing the sixth state level Adivasi Ekata Parav- 2017. "Non-cultivated forestry product food items" is the subject matter of this year Adivasi Ekata Parav. So we are assembled here to discuss on it vividly and fixed up of our next activities according to our analysis.

The priests and community leaders of Bhunjia, Chakotia Bhunjia, Kuikandh, Ganda, Paraja, Sansari, Paudibhuyan, Oram, Lodha, Mankadia, Kondh, Sanara and Paharia like tribal groups were given their views on non-cultivated forest available food items in details. Most of them were concerned about non-availabilities of these items both in quantity and qualitatively as dense and area of the forest has been reducing rapidly day by day. Paudibhuyan and Oram communities from Sundergarh expressed their apprehension towards illegal encroachment of forest areas by the mining companies in the district. Once upon a time they had been collected more than 100 types of non-cultivated food items from their forest throughout the years. It was different kinds of green leaves, flowers, fruits, roots, tubers, seeds, mushrooms and fishes from the natural springs, water falls, channels and water bodies frequently. Now-a-days, these food varieties have been disappearing from our forest day by day, due to non-tribal human centric activities.

They further added that we the tribals have been preserving the forest since long for our own interest. So it has been seen dense and large for years. We have been worshipping our Goddess and Gods inside of the forest since long. We have been getting benefit from it and do well being for it. But the so called civilized society people are the destroyer of the forest. Traditionally we had got two months food from the forest in every year. Now it has been reduced less than one month only. On the name of so called development we the Adivasis are being deprived up from our land and livelihood since independent of our country from the British rule in 1947. Thousands of tribals have been displaced from their territory and their living for mines, dams, roads, industries, urbanization, and defense projects. It is time for us to fight together for our constitutional rights as prescribed in PESA and provisions of sixth scheduled area to our fifth scheduled regions.

Well-known mentor, law specialist, leading writer, columnist, Right to Information activist and social worker Mr. Chitta Behera of Cuttack said that "Adivasis are brave and fighter in nature. They never acknowledged British government like so called civilized and educated persons in plain areas. In 1774 AD, Tilka Majhi of Bhagalpur, Bihar first revolt against British rule and continued it for ten years. In 1785, he had hanged by the British Government in Bhagalpur jail. He is the first freedom fighter of India who sacrificed his life for cause of the self-government. In 1833 AD the Orams of Chhotnagpur region raised their voice against the British rule. Like this, the Santals of Chainbasa region revolted against the British rules under leadership of Siddu and Kannu. It is sad to mention here that the historians are not recognizing these revolutions as freedom movement of India. They accepted Sipah Mardana (soldier's rebellion) of 1857 AD as the First Indian Independence Struggle against British rule. Birsa Munda, one of the young from Ranchi area uprising his voice in opposition to British Government's exploitation in 1895 AD. He had distinguished as "God Birsa" by the tribal communities then".

He continued that "tribal communities of Odisha were not far behind then. In 1850 AD the Kondhs of Ghumusar region revolted against the British rule under leadership of Chakra Bisoi and Dora Bisoi. In 1891 AD, the Bhuyans of Keonjhar, raised their voice against their king's tyranny and exploitation under unique leadership of Dharanidhar Bhuyan. The Bhuyans of Sundergarh augmented their voice against misrule of the princely state Gangapur king under leadership of Madri Kalo in 1897 AD".

He further added that “Jaypal Sing Munda of Jharkhand, the tribal leader and high qualified personality was the one and only tribal member of Indian Constituent Assembly. He was advocating for the cause of the entire tribal community of the country. As a result, fifth and sixth scheduled like special provisions are being in Constitution of India in favor of the tribal communities. PESA has been enacted for the benefit of tribal communities from 1995. Under this act, the tribal communities have been granted permission for collection, processing and trading of 60 types of Non-Timber Forest Products through Self Help Groups under jurisdiction of their own Gram Panchayat. Now it time for us to take advantage of these constitutional provisions for development of our communities through combined efforts. We should have given education opportunities to our children from primary to higher level through the facilities provided by the government under reservation”.

Ms. Tulsi Naik (Lodha), Baya Mankadia (Mankadia) both are from Mayurbhanj, Bilua Naik (Paudibhuyan), Rajendra Oram, Lalmani Minz, Abraham (all are Oram), from Sundergarh, Shankar Jani (Kondh), Ganjam, Bishnu Khila, Trinath Khara, (both are Parja), Koraput, Ms. Etwari Dang (Sansari), Sambalpur, Ms. Jasobanti Sabar, Tikeswar Sabar (Sanra), Baliram Gond (Gond), Harising Chinda (Bhunja) from Nuapada and others have given their views.

Ms. Jasobanti Sabar and Rajendra Oram read out the oath paper and others go after it. People from the villages of Jharnamal, Kholivitar, Bhuinpani, Chhuinpani, Nagpada, Sirli, Bolda, Dedara, Rajna, Sukalpur, Kirekela, Reng, Gorla have contributed money, rice, dal, vegetables, firewood, cooking utensils, leaf plate and cup. They, also have working as volunteers during this two days function. More than 3000 people have taken part in this two days gathering and enjoyed the song, dance, music of tribal groups and encouraged the artistes with clapping.

Mr. Jaysing Chinda has given vote of thanks to all the participants, villagers, Action Aid and SAI for their selfless contribution to make this occasion a grand success.

TRAINING ON PREPARATION OF ORGANIC MANURES INSECTICIDE, PESTICIDE, VERMI COMPOST ETC,-

Two days training program on “Preparation of Organic Manures, Pest Control Measures and Seeds Conservation” has been organized on 7th and 8th December, 2017 at Junapani village of Kirkita Gram Panchayat, coming under Khariar block of Nuapada district. Mr. Kailash Nayak of SAI Khariar Project has been linked the program as resource person. The participants have given their self introduction. Then a question rose among the participants “why we are interested to adopt organic method of cultivation instead of chemical added hybrid or hi-yielding seeds based agro activities”? Most of the participants answered that chemical support agro method is not our tradition. It is costly one, needs high investment and hazards to environment and health of the farmers itself. The farmers will depend upon the markets for seeds, fertilizers and pesticides. On the other hand organic method of agriculture is our own traditional system it has been practicing since long. The farmers are using their own usual seeds, homemade bio compost and pest control measures. It need not required high budget, production cost is very low in comparison with chemical one. Here we are discussing about paddy cultivation. As it are the staple food item and our climate suitable for it. Preparation of Compost, Mixed Compost, Vermin compost, Bijamruta, Jibamruta, Amrit Pani, Neem oil pest has been explained with demo.

A - The following method will be adopt to preparation of **Cow Dung Compost** :- i) dig a pit having 10 feet long, 5 feet width and 3 feet in depth, ii) filled up with cow dung, ash, dried leaves grasses, vegetable wastes with urine collected from cow shade in lyres. When the pit filled up with these items and it will be 2 feet high from the ground then covered the compost pit with 2 inches of soil. After 3 months it will be ready for use in crop field.

B - Mixed compost can be prepared with cow dung, black soil collected from the bottom of a pond, banana plant log, green and dry leaves, water shrubs collected from the ponds, sugarcane waste, straw, ash, cow urine, bio-gas plant slurry, vegetable waste etc. First dig a pit having 10 feet long, 5 feet width and 3 feet in depth. Keeps dried leaves sugarcane waste, straw, ash, in the bottom of the pit and then dump mix up item on it up to 2 feet high above the surface. It should have covered with 5 inches of mud for air tight purpose. Now leave it out for three months for preparation of compost then used in the crop fields.

C - Vermin Compost Pit: - Make a square size brick, cement and sand mixed container with 6 feet length, 4 feet width and 3 feet depth. It should have filled up with soil, dry grasses, leaves, straw, half rotten cow dung or biogas plant slurry mixed items. One can keep 2000 earthworms in it for making

of vermin compost. In summer it has needs to keep wet the container for moisture of the soil that keeps comfort the earthworms. One can apply wheat flour, motor flour or feed that available in the market as food for earthworms. Make a shade on it to avoid direct sun light or rainfall. It also needs care against lizards, chickens, mouse, ant and black ant. Because these creatures are takes earthworms as food. If this vermin compost plant is managed properly then manure can collect in every month.

D -Bijamruta: - i) collect one liter cow urine and keep it in a bottle for 7 days, then mixed up 10 liters of fresh water with it. Now your medicine is ready for purifying 100 kilograms of seeds. It may be paddy, black gram, green gram, vegetables seeds etc. ii) Bring 500ml fresh water, mix up detergent powder in it and then add 500ml neem oil with this mixture. Now your seeds purifier medicine is ready for use. It can be used for purifying 100 kilograms of any types of seeds. Bijamruta destined for seeds purifying purposes only.

E -Jibamruta: - It needs a) fresh cow/ bullock/buffalo dung 10 kilograms, b) cow/ bullock urine 10 liters, c) any kinds of pulses flour 2 kilograms, d) Juggery 1 kilogram e) soil 1 kilogram (collect under banyan tree) e) fresh water 200 liters,

Preparation: - Keep all the items in a plastic or cement made container and mixed it properly with help of a stick. It should have covered with a cotton cloth or jute made sack for 3 days. Apply it at your crop fields as liquid or jell conditions.

F -AmritPani: - It needs a) fresh cow/ bullock/buffalo dung 5 kilograms, b) cow/bullock urine 5 liters c) Juggery 500 grams d) fresh water 100 liters,

Preparation: - Keep all the items in a plastic or cement made container and mixed it properly with help of a stick. It should have covered it with a cotton cloth or jute made sack for 3 days. Then filtering it with a cotton cloth and apply the filtered liquid at your crop fields through a sprayer.

G -Neem oil pesticide: -It needs a) Neem oil 500ml, b) garlic 250grams, c) one bottle(glass/plastic)

Preparation: - make garlic pest, keep it with the neem oil in the tighten bottle for 48 hours and then filtered the mixture again keeps it in that bottle for use purposes. It can be used in advance for avoiding pests from the crop fields. Mixed 20 grams of detergent powder with 15 liters of fresh water and add this neem - garlic mixture with this and spray on the crop fields.

Total 29(23 male+ 6 female) participated in this two days training program.

5 - PERSPECTIVE BUILDING (TRAINING) ON WOMEN AS LABOR & FARMER - Three days training program on "Perspective Building on Women as Labor and Farmer" has been organized at "SAI" Project office Khariar from 9th to 11th December 2017. Known farmer leader, writer, poet, social activist Mr. Saroj Mohanty of Sambalpur has facilitated the training program as resource person. Participants have given their self introduction.

He said that "first of all we should have understood to whom we called Indian Women"? Is there any specific description on it! India is a big country with hundreds of culture, tradition, custom, practice, rituals etc. It varies from one region to another. It also has been based on imaginary concepts and made understand to the people accordingly. Our impression about Indian women based on such notion. One can be free from these perceptions if she/he will make questions, taking part on debates, analysis the situation conscientiously.

The participants divided in two groups and talked about two themes: - a) Women as Labor and b) Women as Farmer. Two groups presented their findings. The following points are coming from group a) Women as Labor i) all types of domestic category works are being performed by the women, ii) male have been getting their wage against any types of work but females have been depriving from it, iii) domestic works that are being executed by the women are think about as sense of duty, iv) Where the males are doing domestic works(women centric) are being paid by their employer, v) taking care of children are being regard as obligatory for women as they given birth of the child, vi) remuneration less work cause danger to the women situation, vii) So it is said that "there is no country for women, viii) paid labor has relationship with right and self-esteem, ix) one male can make an impression through his exertion, it might have transform male dictated centric common sense towards female, x) every man should have assume that whether I will make my child as a male or female in future, xi) sagacity of male female emotions developed inside of the home from childhood, xii) women have been disregarded by the family, society, village, religious segments usually,

The following points are coming from group b) Women as Farmer. - i) women are inventing plants are coming out from the seeds, from then, they have been doing all sorts of agro activities with the male members, ii) preparing land for seedlings, iii) transplanting and nurturing infant crop plants in the field, iv) harvesting crops and threshing out corns from it, v) keeping seeds for next season, vi) taking care of cattle, fowl, vii) women has no land ownership, viii) women has been doing agro works just as paid/unpaid labor, ix) women have not been taking part on agro production, distribution practices of the family, x) women have not been recognized as farmer,

Mr. Saroj Mohanty said that "land ownership, Kisan Credit Card, Land Pass Book, Bank Account, cooperative bank membership is considered as identity of a farmer. Women should have obtained these and established themselves as farmer. Now they have been treating as indiscernible farmer. They have yet to exercise their right over land, water, seeds, crops, minimum support price of productive agro items etc. In Landlords Abolition Act, Land Reform Act and Bhoodan land distribution movement women have not been given attention. Brother should have given paternal share to his sister without any legal action. Women should have established themselves in political fields without any ones facilitate. Women should have confirmed themselves that there is no specific work for them, work is work there is no distinguish between male work and female work. Men should have done female centric works without vacillation. Those who are present here should have instigated it in your home and set a model for others. Agricultural policy has been commenced by the government; pressure should have created through public demand that recognized women as farmer for all purposes in administration echelon".

He further added that "women are very fond of ornaments. It can be called a weak point for them; they should have give up it and maintain simplicity. Those women who are in glamour society they should have boycott the picture that showing their sensitivity limbs as commodity. Women are more precious than men in the social order. There are no recognized women leaders in agricultural sector in the country. There, also, is no strong farmer's association in India. So farmer's problems can not influence the policy makers of this country or state.

Question arise that more and more farmers have sacrificed their life due to loss in agriculture. If the women would be granted as farmer by the government is there any change will happen in the agro society? Saroj Mohanty said that "Farmers are killing himself due to lose of crops. Agro production cost has been increasing due to introduction of high technology, hi-bred, hi-yielding seeds and soaring labor wages. Along with inadequate irrigation system, out of order crop insurance, insufficient minimum support price for the farming products are additional grounds. Now the agro labors are able to brain for their wage. Nearly 94 percent of farmers cannot sellout their products in government depots. So they are being deprived up from government declared minimum support price of their products. These are some aspects for sky-scraping production cost and low returns in agricultural sector".

Mr. Saroj Mohanty added that "the farmer's problems have associated with the manual agricultural labor problems, landless family problems, Scheduled tribe and scheduled caste family problems and marginalized household problems. It also has a connection with agricultural, seeds, fertilizers, pesticides, cooperative society, bank, industries and insurance policies of the government. Agricultural sector has been covered more than half of the general public since long. In the Indian social order, a farmer himself is a consumer, a labor himself is a farmer and their problems are co-related with each other. It needs a work bound political determination and result oriented administration execution. Agricultural sector has been dominated by lower economic group of people; those are no position in policy making course of action.

He further included that "there is an anti labor psychology among the peoples of higher, middle even lower middle class general public. It is just a reflection of caste and class hierarchy. It should have dissolve through women based organized way of functions only. We those who are understand the situation should have encouraged our daughters, sisters to do according to their preference. A violence free society would be possible when we will able to establish a violence free family. Alcohol is one of the great challenges for society, particularly for the women. It can be diminishing through uninterrupted mass anti-liquor movement. Women can be take important role to making a violence free society. Women empower does not means reduce male one. Both male and female have equal role in the society. Women should have given importance in organic farming. Total 33 (11 female+ 21 male) participated in this three days brain storming sessions.

DISTRICT LEVEL MEETING ON MONITORING PROHIBITION OF CHILD MARRIAGE ACT

-One day level "District Level Meeting/Discussion on Monitoring Prohibition of Child Marriage Act" had been organized at Sadhabana Sabhagruha of Nuapada, Odisha, on 14th December 2017, at 11am. Mr Baldev Rath, District Child Protection Officer, Nuapada district, presided over it. Mr. Mahendra Bag, Coordinator, Nuapada Block of SAI had given welcome talk to all the participants gathered there and partakers had given their own identification.

Mr. Jitendra Nath Pattnaik, Project Coordinator, SAI, Khariar, clarified aims and objectives of this meeting in details. He said peoples of this district have been giving marriage to their child, both male and female members before legal age by and large. Most of the parents have thinking that adolescent

girls are the burden of the family; it should be wise to marry them as soon as possible. Once upon a time child marriage or early marriage was tradition in Indian society. To stop it, in 1929, British- India Government introduced Prohibition of Child Marriage Act- 1929. From then Child Marriage considered as offence before the eye of the law. Marriageable age had been fixed for the male and female candidates individually. This act has been amended twice by the India Government in 1978 and 2007 correspondingly. Now marriageable age for male is 21 and for female are 18 according to the law. But parents have been giving marriage to their son/daughters in between 18 to 20/15 to 17 ages in that order that is offence before law. In Odisha its percent is 21.3 less than the national average that is 26%. In our district Nuapada, it is 19.1% that is less than in comparison to Mayurbhanj, Malkangiri, Koraput, Nabarangpur, Raygada like districts of Odisha as per government data. Here we are assembled to discuss its cause and remedies as we are working in grass root level and associated with people problems in our particular regions.

Ms Swain Madam, District Project Officer, ICDS said- minor girls those who have got married have been deprived up from their education, facing health problems, domestic violence, pregnancy and child birth dilemmas on a regular basis. Low weight child, mal nutrition child, mentally challenged child might have been born from these early married couples. There are protective measures have been taken to stop it by the administration but it has not given productive results yet. It needs particular strategies and effort to stop it through public awareness measures by the government departments and social institutions of the district with a combined attempt. Integrated Child Development Scheme (ICDS) Officer (CDPO) has been designated as Child Marriage Protection Officer in each block since 2010. So, one can inform her through fill up the Form – I, about the child marriage within three months of its occurrence. I am giving my heartfelt thanks to SAI and Actionaid for their endeavor towards this grave social issue.

Mr. BaldevRath, District Child Protection Officer, Nuapada said- there are laws and designated officials for prohibition of child marriage, but its successful results are yet to come. There are GaonKalyanSamities, Anganwadi centers in every village. Child marriage problems should have conversed, there first. Adolescent girl groups shall have formed in villages and make aware to them about dangers of early age marriages. Every Anganwadi workers have been eying the matter in villages and reporting to their Supervisors in every quarter. Sometimes they have been facing rough and tough situations from the bride and bridegroom families. Those girls or boys are not obeying their parents, developing affairs and got married before age. Those under age male and female, who have going out as seasonal migrant labor; they have build up love relationship at their work place and got marriage. When a suitable bride or bridegroom has been presented then the parents agreed to marry them without considering their age. In this case ICDS workers, NGO workers elected word members, Sarpanchs, teachers should have interfered and hold up the marriage before its commencements. Sometimes orphan girls have got married before age by their relatives. Nuapad district administration has been initiated Rs 50,000/ Rs 40,000/- as ex-gratia aid to the orphan woman/ man those who have got married after 18/21 age. HIV affected either male/female those age are above 18/21 and who have got marry shall entitled to get Rs 50.000/ Rs 40.000/- as ex- gratia aid from the district administration. There are free study facilities for the orphan boys/girls from the age group of 5 to 18 up to graduation and above studies accordingly. Orphan girl child has right to obtain SukanyaSramudhiYojana benefit of Rs 1000/- per annum as bank deposit, according to the report of ICDS worker of the concern village from age group of 5 to 18 years. Free safe abortion facility for minor girls in the District Head Quarter Hospital according to the report of DCPO to CDMO

There was an open conversation session for all participants. So many questions asked by the partakers on child marriage act and rehabilitation packages. ICDS workers, supervisors, CDPOS, PRI members, volunteers and NGO workers assembled and shared their vision. It has been decided that ICDS, District welfare department, PRI members, volunteers and NGO workers will work together to stop child marriages in the district. Ms. NilendriSahu, volunteer, SAI Nuapada block project, had given vote of thanks to district administration, guests, participants and organizers.

PERSPECTIVE BUILDING OF TEAM & LEADERS LABOR DIGNITY AND RIGHT-

A three days training programon “Perspective Building of Team & Leaders Labor Dignity and Rights”was organized at SAI Project office, Khariar from 19th to 21st December 2017. Established trainer, law expert, leading writer, magazine columnist, RTI activist and social worker Mr.

ChittaBehera of Cuttack had facilitated as trainer in this three days training curriculum. Participants were given their own self introduction with the field they have been working. Mr. JitendraNathPattnaik, Project Coordinator of SAI had given key note address of the training.

Mr. B.N. Durga of ActionAid said that to whom we have called labor? People belongs to Scheduled Caste, Scheduled Tribe, landless, single women, marginalized groups have been called labor. They have been doing wage labor for their livelihood reason. Why the labors migrated from their village to out of the district and state seasonally? In our district Nuapada labors are getting wage work during agricultural production seasons only, for four months from July to October months. Article- 21 of Indian Constitution provides right to live with dignity to its citizens. According to provisions of MGNREGA each registered labor have right to get 100 days work in rural region. Only 30 to 40 days work has been provided to the job seekers by the Gram Panchayat in every year in Nuapada district. He further added that we are working in migration prone areas of the district. Thousands of labors are being migrated to outside of the state for seeking of works every year. Our training is to reduce out going migration labors number providing more and more day's works to the job seekers under MGNREGA in village level. After getting training, we shall have to motivate the people for demanding work at their Gram Panchayat level.

Mr. ChittaBehera said that those who are going out as seasonally migratory labor have been suffering alot at their work field in every year. As, they have not been known their agents name, contractor's name and address of their work site, so their complaints cannot resolve by the administration. On the other hand irregularities in MGNREGA by year to strengthening the shouldto five months within one UjalbatiMajhi, vice- sarpanch, Pendrawan G.P.

BIKE RALLY ON DIGNITY OF LABOR AND THEIR RIGHTS -

PERSPECTIVE BUILDING ON ECOLOGICAL FARMING -Three days long "Perspective Building on Ecological Farming" had organized at Nrusingnath of Paikmal block, in the district of Bargarh, Odisha from 28th to 30th December 2017. Ms. SaranyaNayak of Koraput explained the importance of biological farming as resource person to the participants. Total 29 (8 female + 21 male) participants had taken part in this three days exercise.

ALLIANCE BUILDING WITH OTHER PARTNER ORGANIZATIONS -

Decision taken to establish Mini Anganwadi center at Maraguda Maraguda village in Kermeli panchayat of Nuapada block is one of the most neglected villages in Nuapada district. The village was under the sub-merged area of patora irrigation project. When the dam was constructed some people of the village shifted up and settled there to cultivate their land not sub-merged. But till SAI with the support of ActionAid started working in the village in 2014, the people were deprived of any support from the Government. Even there was no tube well for drinking water. After the intervention of SAI, people fought for their rights and in 2015 and 2016, 5 tube wells had been dug in different hamlets of the village.

As maraguda village is abolished from the list of villages in Government records, the habitants of this village were put under Pethiapali village which is about 8 KMs crossing hilly tracts. There is no school or, anganwadi center. Children of the village go to nearby residential schools to read, or stay in their relative's house for study. But lack of anganwadi center and distance the pregnant women and infants were deprived of supplementary nutrition provided by the government. In 2016, the staff and volunteers tried hard and the anganwadi worker visited the Maraguda in regular interval and supplied dry ration. But Village Health and Nutrition Day was organized at Pethipali for which it was not possible for the pregnant women to walk 8 KMs for their health check up. Thus the people demanded a mini anganwadi center in the village. The matter was brought to the notice of the district collector who visited the village on 18.12.2017 with the District Welfare Officer and other ICDS officials. Understanding the problem of the people, the collector ordered to complete survey and start a mini-anganwadi center in the village within one month.

