



2020-21



# Annual Report

Battling Crisis through Local Intervention



Saathi Samaj Sevi Sanstha

Saathi envisions to create and exploitation free, sustainable and self sufficient rural community.



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## About Our Organisation

SAATHI was established in 1988 by a group of social activists from different regions of India. They were initially working with an organisation inspired by the teachings of Mahatma Gandhi and J.C. Kumarappa. They were oriented in social development practice at Gramodaya-Sangh, located in Chandrapur (Maharashtra). These social activists started their work to promote the interests of impoverished artisans in Kondagaon. But with every passing year and the teams evolving interactions with the community, we realised the need for integrated development measures in Chhattisgarh. The ideas and philosophies of Gandhi inspired us to work towards our development mission.

For the last 35 years, Saathi has been working from health and livelihood to education and human rights. We are working towards strengthening every pillar of life in Bastar. Saathi's work aid in enhancing the decentralised form of existence and Rural Economy.

# Saathi's VISION STATEMENT

"Saathi envisions to create & exploitation free, sustainable & self-sufficient rural community".



## Saathi's Values

Transparency, Accountability, Integrity, Inclusiveness irrespective of religion, caste or class & Gender Sensitivity are the foundational values for all functions of Saathi.

## Saathi's Mission Statement

To work towards a society where poor and landless people can earn a dignified living out of their traditional livelihood systems.



# President's Note

The financial year 2020-21 in India started with a global pandemic covid 19. On March 24th 2020, the prime minister declared an unprecedented countrywide complete lockdown. The lockdown created an environment of fear, fear of covid, and, most notably, the fear of lockdown and survival. On the other end, the migrant workers who had gone out in search of livelihood in different cities were returning to their homes on foot, travelling for thousands of kilometres with their children and life packed on their backs.

We believe that it is our social responsibility to respond to the crisis faced by the community we live and work with. The rural community of Bastar was not well informed regarding covid and its protocol, making them vulnerable; that's why it was our first and foremost responsibility to protect the community from corona infection. We assessed that if covid reaches the villages, the situation will become so severe that it would be impossible for the Government to control it. Keeping this in mind, we laid the foundation for our work this year.

We started with an awareness campaign among the interior rural community about Covid. Simultaneously, responded to covid-19 by trying to control the spread of the infection through various activities like Naaka bandi of villages and providing everyone with masks and sanitiser to follow covid protocol. During the first wave, lockdown affected rural communities more than covid-19. We tried to respond to the crisis that arose during and after lockdown, such as unavailability of bare essentials, increasing inaccessibility of critical public services to villages, and unsafe conditions for migrants.

It was commendable how our partners and donors provided us with financial assistance according to our needs with great sensitivity towards the situation. The global pandemic has compelled communities, Govt. and organisations to contemplate about themselves and give us all a significant opportunity to think about which direction we should go and which path should be avoided. We hope that we will be able to play the role of civil society in a better way in the coming time.



**Bhupesh Tiwari**  
president

**Saathi Samaj Sevi Sanstha**



# Executive Committee Members



**Bhupesh Tiwari**  
President



**Khodin Bai**  
Vice- President



**Harilal Bharadwaj**  
Secretary



**Narendra  
Chakradhari**  
Treasurer



**Ashok Chakradhari**  
deputy-Secretary



**Dr. Ratna Verma**  
Executive  
Member



**Rajesh Verma**  
Executive  
Member

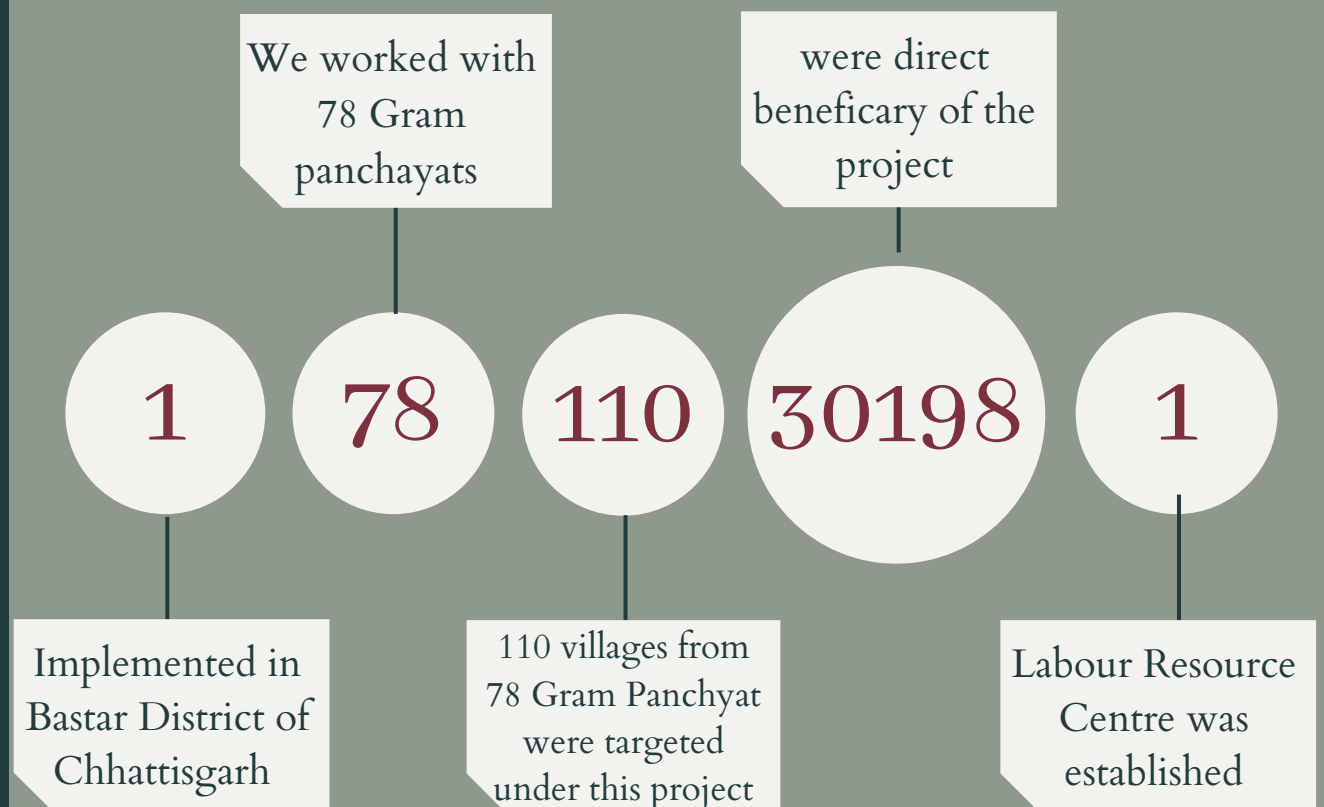


# Bastar Labour Project

Chhattisgarh is a massive source of migrant labour, and Due to Covid 19, many workers had returned to the state during the pandemic. The economic activities of the vulnerable and migrant labourers have been greatly affected. Given the financial situation wherein workers were hesitant to migrate again, it becomes crucial for them to benefit from Social Security Declared by the Government. Due to various reasons, such as lack of mandatory documents, they were not getting the benefit of social security. Thus, to create a sustainable social protection system that increases social security for deprived, vulnerable and migrant women and men, Bastar Labour Project was formulated under Response to mitigate migration, create awareness and access to social protection in Chhattisgarh supported by UNDP, C.G. State Labour Department and Samarthan.

The Bastar Labour Project was Commenced in September 2020. To enhance coverage of deprived/ vulnerable and migrant households under social protection measures like government's social security schemes, the entitlement of unskilled work under MGNREGA, Social schemes of labour welfare, village-level social systems etc.

## Project Outreach



# Activites

- Labours informed about the social protection schemes by the centre and state governments in Bastar block.
- Households are linked with at least one social security scheme.
- Training provided to functionaries of PRI, SHG members and Covid response team of GP and block on social protection schemes and Covid 19 response.
- LRC facilitated the scheme related information and application filling process for the labours.

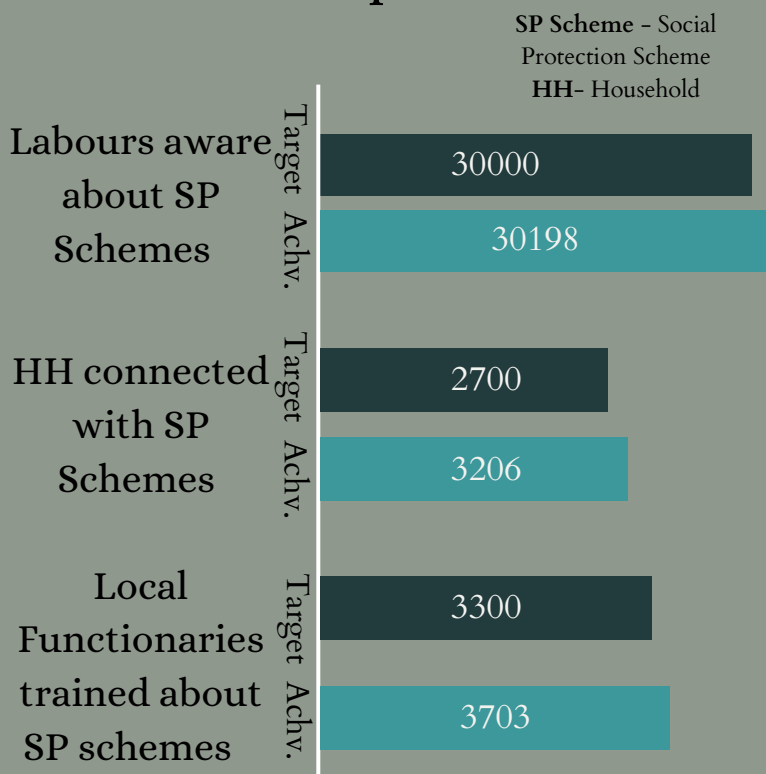


Labour Resource Centre

# Collaboration

Smarthan, UNDP, PRI, state Labour department, Zila Panchyat, Government of Chhattisgarh

# Graph Representing Project's Impact



HH Counselling about Social Protection Scheme

# Achievements

The state government adopted the Labour resource centre scheme and Labour Resource Centre were established at the block and district level in all 28 districts of Chhattisgarh.



# Plight of Displacement and hope of Protection

In the tribal-dominated district Bastar, a small village called Salemeta was situated about 45 KM from Janpad Panchayat Bastar. The Kosarteda irrigation project was started in 1985 and was completed in 2007. The project resulted in submerging all the houses and land of the village in water. Because of the project, many villagers were displaced and had to give away their land and major source of livelihood. Because of the displacement, they were homeless and struggled to meet the basic necessity of 'roti, kapada and Makan', which profoundly affected their socioeconomic status. Haiku's (the name is changed in the account) family was also one of the displaced families.

Haiku, a resident of village Salemeta Jadipara is a father to 2 young children and lives with his wife and brother. The problem arose when their house and land got submerged in 2007. His father used to work and take care of the family. In 2015, his father's health deteriorated and he became disabled; since then, the whole family's responsibility has come on Haiku. They had no source of income left; Haiku's wife suggested that he goes away to some city for work and she will take care of his deceased father and family. Haiku went to Hyderabad and started working in a cloth shop. In return, he used to get Rs.8000/- per month, but the situation at his house started worsening with his father's and children's deteriorating health. Seeing this and COVID 19, Haiku had to come back and was unemployed.



Kosarteda Dam



2007 Flooding in Bastar

When we visited him and came to know of his condition, we suggested he could enrol under various social protection schemes, but he ignored our words. After a few days, we again visited him and he told us that he didn't have any government identification or job card to apply under such a scheme. We helped him get his government identification, took all his documents, and applied for his job card. By the end of December 2020, his job card was ready and today, Haiku is working under the MNREGA scheme.

He was not the only one who was unaware of the social protection scheme or did not have all his documents ready. The Labour resource centre established under this project helped many people like Haiku efficiently complete their documentation and benefit from various Social Protection schemes made for them.

**-Premlal chakradhari**

# Childline- 1098

Saathi started Childline 1098 in May 2019 in partnership with Childline India Foundation. The aim was to work toward a child-friendly society where we can ensure the protection and rights of children are met. Saathi firmly believes that every child deserves the best chance for a bright future, which is why we are fiercely committed to ensuring that children survive and thrive.

This year we focused on the children affected by Covid, i.e., whether they lost their parents or could not get the proper facility needed for basic survival. Another significant activity this year was the rescue of child labours from a different state who were forcefully bonded and not paid by their employers.



Open house at Bhandarshivni, Kondagaon



Child rescue at Bustand, Kondagaon

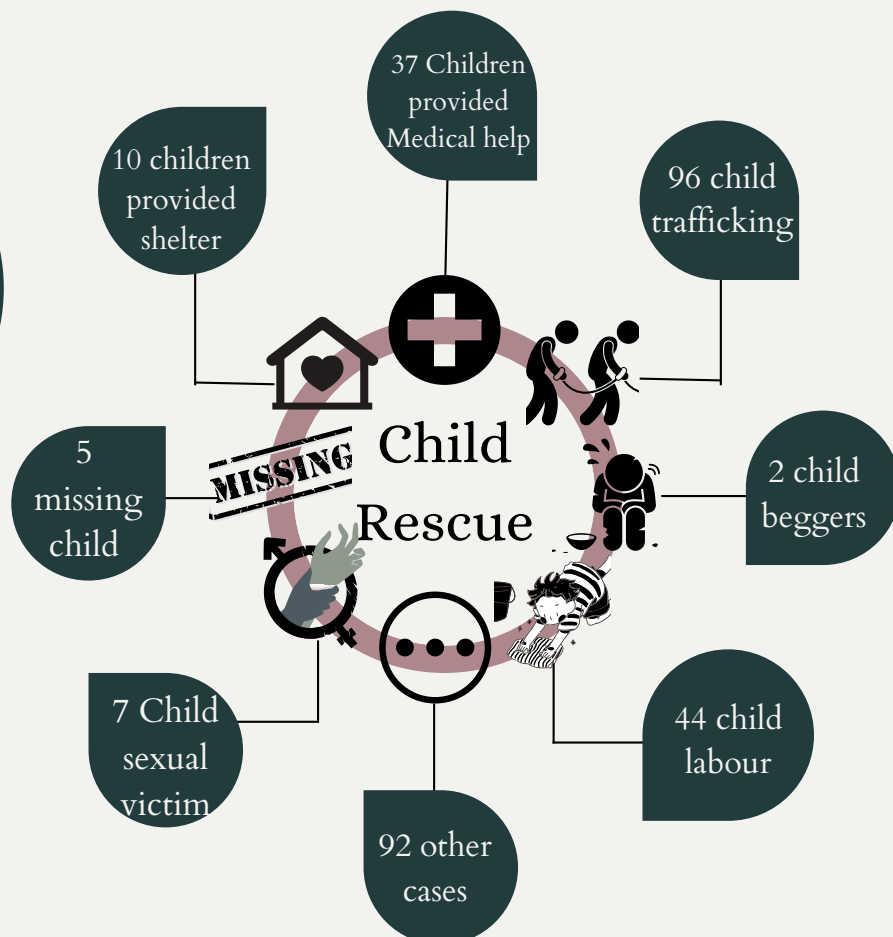
We run Childline in  
2 districts of C.G.  
(Kondagaon &  
Naranyanpur)

Childline-  
1098

We are working  
with 17000 children  
on childrights

## Collaboration

Childline India Foundation,  
Department of Women and Child  
Development, Child Welfare  
Committee & District Child  
Protection Committee





43  
Awareness  
Campaign

- Awareness campaign conducted on child rights, child protection, child abuse and childline 1098. Apart from this, the team also focused on creating awareness about covid protocol. We conducted these campaigns in public spaces like markets, haat bazaars, schools and other recreational spots.

12152  
Hour of  
Outreach

- Conducted daily outreach in hotels, factories, brick kilns, bus stands, and villages to identify any child whose rights were violated. This has greatly helped in rescuing and counselling child labour migrants against it.

10  
Openhouse  
with 363  
Children

- The team conducts open houses at schools. The open house is planned based on the significant child rights concerns that the children identified during outreach. It helps resolve and inform children and other stakeholders regarding the said concerns.

339  
Children  
rescued

- Based on the information received through childline 1098 and outreach, the childline team rescued the children in distress. It facilitated their rescue, relief and rehabilitation in partnership with the district child welfare committee.

2  
program  
with 500  
participant

- In November 2020, the team organised a program, 'childline se Dosti,' where children ask various parts of the society, administration and childline to protect them from any harm and ensure that their rights are protected. In this program, children participate in many recreational activities.

400  
Mask &  
Sanitiser  
35  
Nutrition kit

- We distributed masks and sanitiser to children, especially from the rural regions that did not have the resources to ensure the covid 19 protocol.



# Covid-19 Response

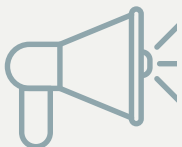
In the month of March 2020, India experienced a countrywide lockdown. Though the lockdown was a crucial step to control the infection and flatten the epidemiological curve of the disease, it has had disastrous effects on the lives of the people, especially the poor, who have lost their livelihoods and are struggling for basic needs of lives like food and shelter. In the interior regions of Kondagaon and Narayanpur, Programs like Mid-Day meals in schools and distribution of take-home rations, hot meal/egg distribution in Anganwadi centres to children, pregnant and lactating mothers and other beneficiaries had halted because of lockdown.

People were unable to buy their necessities as weekly markets were closed. Daily wage workers and people dependent on the money acquired by selling forest products have lost their source of income. These times of Catastrophe have forced numerous families to undergo impoverishment. Another sector which is taking a hard blow due to the crisis is the Handicraft sector. The problem caused by COVID-19 has resulted in a sudden disruption of businesses across the globe. Artisans in small districts such as Kondagaon and Narayanpur were vulnerable due to the small market size of the group. The sector had experienced sudden stalling of orders as retailers were closed due to the worldwide lockdown and no signs of immediate recovery as the crisis unfolded. Given the sudden stall of transportation in the district and inter-state, there were no possibilities of trade for the artisan.

## Collaboration

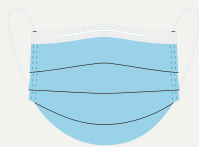
APPI, ikai Asai, Creative Dignity, Jeev dava Foundation, Public Donors, Government of Chhattisgarh and District Administration Narayanpur and Kondagaon

Covid 19  
Awareness



50000 people  
from 200  
villages

Mask &  
Sanitiser  
Distribution



10000 mask  
and Sanitiser

Dry Ration  
Distribution



2716 HH  
from 250  
villages





- Provided Food essentials and dry rations to Nagar Palika Narayanpur & Kondagaon for distribution to the migrant labour returning to the villages.
- Supported 22 families of nomads returning to Maharashtra by providing them with rations and other essentials for a month. Particular emphasis was given to providing a nutritional meal to the children in these families.
- Supported Govt. in running & monitoring “Shramik Rahat Shivar”. We conducted monitoring of the camps assuring that covid protocols were being followed. Apart from this we also provided basic food essential of Approx. Rs. 100000 to many such villages camps.
- Saathi’s field team did Gaon Bandi (closing village borders) for 100 villages. It established a proper mechanism with villagers to monitor the movement of villagers and outsiders to prevent the spread of Covid 19. Anyone moving out of the village had to properly sanitise themselves at the sanitisation station established at the village border before entering the village.
- Saathi also assisted village level front line workers by providing them with the covid kit (Sanitizer, Mask, Soap, handwash etc.) of Rs. 120000 to ensure their wellbeing while working during the lockdown
- In Narayanpur, Saathi provided dry ration and sanitary materials to Govt. run isolation centres in livelihood colleges and primary education centres.
- Saathi conducted an awareness campaign in May 2020 in 100 villages of Kondagaon & Narayanpur, reaching 35000 community members. This campaign used local language and folk forms to generate awareness regarding covid protocols.
- In our project area, our field staff continuously encouraged the community to follow appropriate covid behaviour such as using masks, hand wash practice, and social distancing.
- Distributed nutrition to malnourished children through Childline 1098 in Kondagaon & Narayanpur.
- We distributed dry rations and Sanitary/hygiene material to vulnerable communities (Pregnant & lactating mothers, elderly, differently-abled, poor, single mothers, migrant labourers etc.) of Kondagaon and Narayanpur.
- One of the significant livelihoods in the Kondagaon district is a handicraft and due to the loss of their livelihood, they were struggling to meet their day-to-day necessities. Saathi distributed Dry rations and Sanitary/hygiene materials to artisan families.

# Local Intervention helps fight COVID



Bawadi is a small village located 15km away from the Narayanpur district headquarters. Bawadi only has 90 households with a population of around 450 and is majorly a tribal-dominated village. This area faces an influx of Central Reserve Police Force (CRPF) due to left Wing Extremist activities and many people from the village have also gone out for migrant work. Because of this situation and its nearness to the only town in the district, we established that it is one of the vulnerable villages regarding the spread of COVID 19 infection.

Before the first lockdown could be lifted and the region experience the movement of labourers and other outside entities in the villages from outside. We gathered the village youth and explained to them the importance of restricting movement in the village, so the covid doesn't reach the village. We told the youths that if covid enters the village, it would be impossible to contain it as the village shares most of its resources like water and toilet. Following covid 19 isolation protocol would be impossible. Once everyone in the village was aware of the COVID 19 severity and preventive protocol, we concluded the best solution to prevent the spread of covid is "Gaon Seema Naka Bandi".

The village volunteers together sealed the village for any outsiders and started monitoring the movement of the villagers and outsiders. The volunteer and saathi's team ensured that the villagers didn't need to go to the town by providing dry rations, sanitation kits and other essentials. But if the villagers had to move out of the village, they had to be thoroughly sanitised at the border and perform a covid test before entering the village. Apart from this, the volunteers informed the labour returning to the village to isolate themselves in the forest for 15 days and later perform a covid test to enter the village. The villagers met the food and other necessity of the isolated labourers, and the community provided them with cooked meals and other essentials. Practices like this ensure that covid doesn't reach the villages.

Seeing the success of this initiative in Bawadi, we conducted the same activity in other 99 villages. Gaon Seema Naka Bandi was a great success and covid could not break out into the villages of Narayanpur even in the third way.

- Siddharth Mane



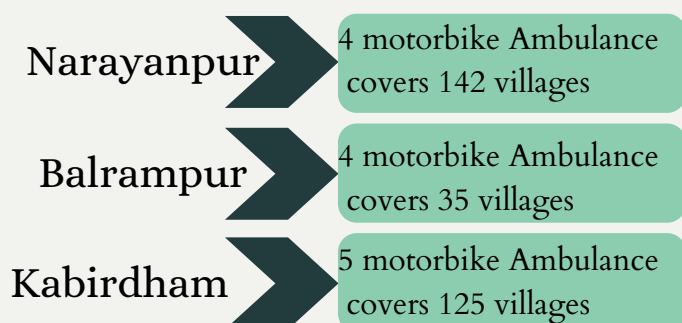
# Early Referral Centre (ERC) & Motorbike Ambulance (MBA)

Saathi started the motorbike ambulance in 2014 to increase access to health services in the Bastar division. To further improve institutional delivery and connect pregnant women to the health services, Saathi started Early referral centres (pre- Birth Waiting homes) in 2016, which are placed close to health facilities (delivery points) where the pregnant woman and her companion can stay before delivery in a home-like environment. This prevents any delay at the time of transportation when the labour pain starts and ensures prompt health services.

## Collaboration

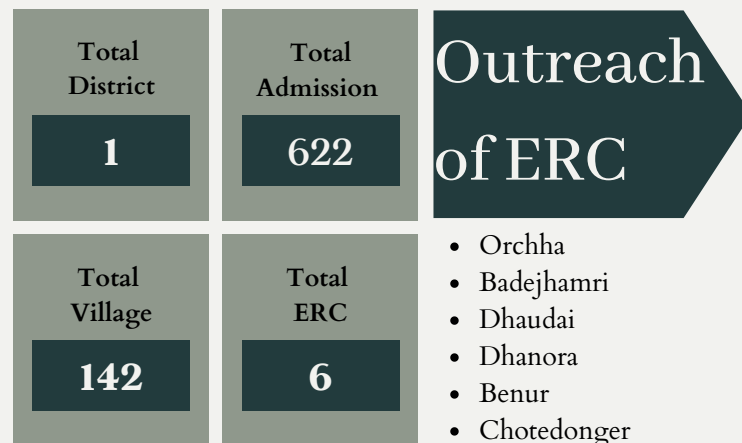
UNICEF, District Mineral Fund and District Health Department

## Outreach of Motorbike Ambulance



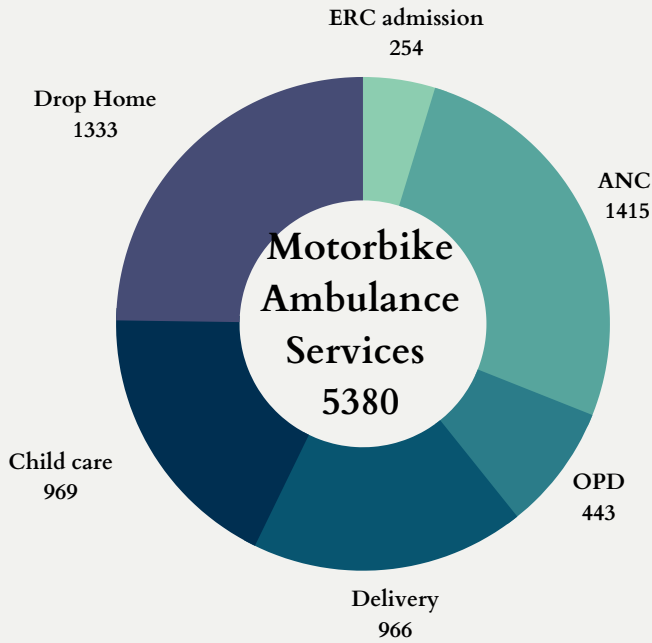
## Background

Bastar witnessed a low proportion of institutional deliveries. One of the primary reasons for the high rate of maternal mortality and Infant Mortality is the inaccessibility of health centres and the unavailability of transportation in the remote hilly areas. This Challenges, paired with hesitation, compel women to deliver at home. Most of the people in the region come from the rural part, mainly the tribal population. The last mile community living in the deep forests or faraway villages cannot access the healthcare system because transport within the area is along rough paths, which are only accessible on foot. The continued poor access due to the rugged terrain, compounded by the deteriorating security situation, has meant inadequate coverage for essential primary and healthcare services.



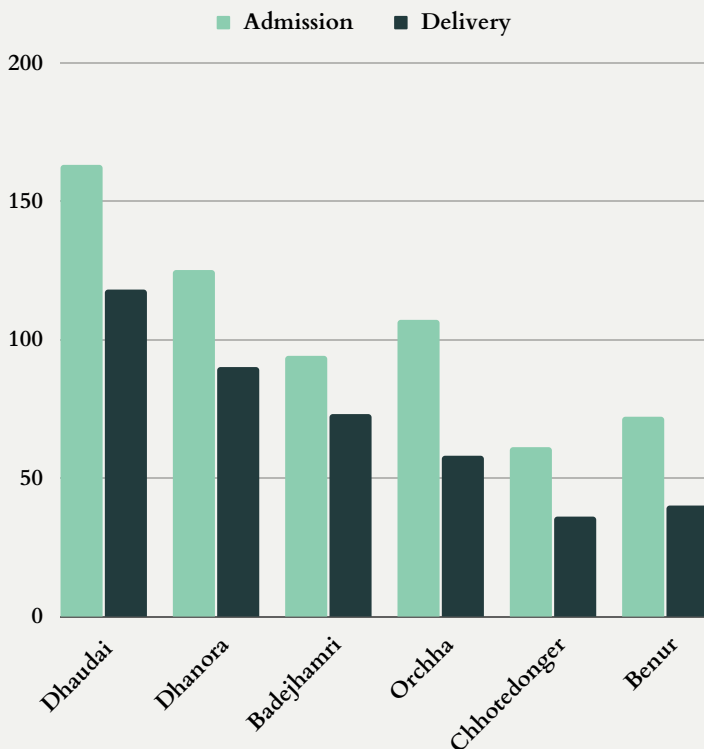
Women returning home after her delivery by MBA

## MBA utilised for various services



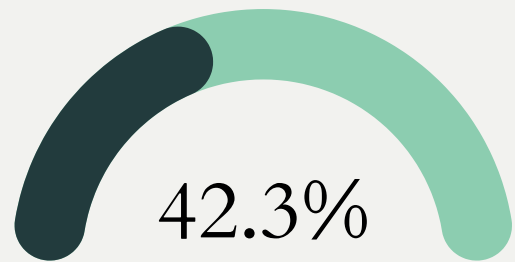
Pregnant Women enjoying meal in ERC

## Facility of ERC Utilised by Pregnant Women



## Activities

- ERC counsellors Counsel, Pregnant women regarding necessary precautions during pregnancy, the importance of regular antenatal Checkups and institution delivery. They are also informed about Pre-Birth Waiting homes and it's benefits.
- Admitted pregnant women are provided with utmost care and timely nutritious meal. Special consideration is given to anaemic women to improve their condition through dietary means and supplements.
- Every ERC has a kitchen garden that helps provide pregnant women with a balanced organic meal without significant dependency on the market. It also serves as a model to train and motivate pregnant women to establish a kitchen garden in their homes.
- ERC counsellor conducted awareness around covid 19, WASH and Sanitation in the project area.
- Motorbike ambulances cater to hard-to-reach areas. Patient and hospital both refer to motorbike ambulance. It is generally used for ERC admission, ANC, PNC, delivery, OPD, NRC admission and other.



Institutional Delivery via ERC



ERC counselor Counselling Women on Institutional Delivery



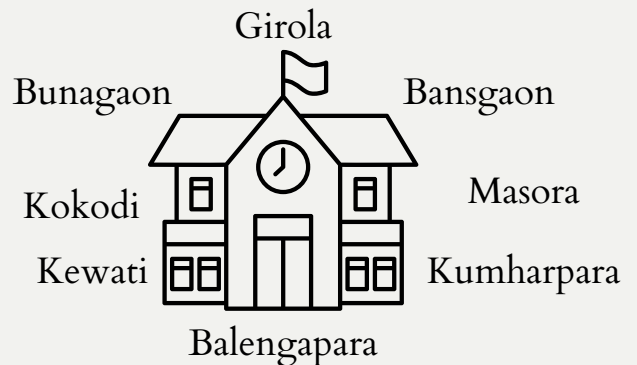
# Saathi Round Table Gurukul

Saathi Gurukul was established in 2004 in Kumharpara, Kondagaon, Chhattisgarh. Our school was established to provide quality and holistic education accessible to the members of nearby villages. We currently have 400 students enrolled; 98% of our students belong to the SC, ST, and OBC communities. Our students come from families of artisans, craftsmen, and farmers.

In 2020- 21, all the schools were physically closed because of government guidelines under the covid 19 protocol. Most of the Saathi Round table Gurukul School students come from interior villages with poor connections to the mobile network. They are not financially equipped to own and recharge their mobiles monthly. Thus, online classes were not a feasible option for learning. Because of school closing, rural children faced learning loss. Keeping this in mind, the local government permitted to run Mohalla classes at the village level following the covid-19 protocol.



## Villages where Moholla Classes were conducted



## Activities

- Teacher training on modules created for ensuring learning continuation during covid lockdown through mohalla classes. 2 days of training were conducted in September 2020 of three modules for 15 teachers.
- Mohalla Classes- It started from November 2020 to March 2020. Teachers used the learning curriculum of the classroom and the Siksharth module. The classes were conducted in open spaces such as the ground, community hall etc. In mohalla classes, Gurukul students and other children of the village also participated. Saathi's teacher interacted with 600 students from class 1st to 8th.
- Children were also educated on the covid protocol to avoid getting infected through covid. Under this, children were taught how to use sanitiser, Mask and Handwash practice.

# Off-Farm Producer Organisation :

## Diagnostic Study Report

Due to covid 19 lockdown, the handicraft sector has experienced sudden stalling of orders as retailers themselves are closed due to the worldwide lockdown, leaving artisans with no source of capital for production. The stall of transportation in the district and interstate restricted them from purchasing raw materials, which increased the cost of raw materials and made them a scarce commodity. Most of the artisan in Bastar depends on the market (local or Urban) to conduct business. Still, because of the closing of markets, exhibitions, and transport, the artisan could not produce or sell the product. Artisans in small districts such as Kondagaon remain vulnerable due to their small size. Vulnerability increased as most artisans were not organised and worked independently.

Saathi realised that the vulnerability faced by most artisans is because they are not organised in a group and thus do not have a strong voice or support at the time of adversity. Therefore, Saathi proposed to NABARD to form the Off-Farm Producer Organization. Nabard Sanctioned a Diagnostic Study of the craft cluster. We completed this study in 3 months with a furnished Diagnostic Study Report submitted to NABARD for further approval.



Bamboo



Dhokra



Wrought Iron



Tumba



Wood



# Activities Under DSR

- Survey of 412 artisans HH composed of 835 artisans belonging to the Dhokra, Wrought Iron, Bamboo, Wood and Tumba.
- 5 Focus Group Discussion with the senior artisan of the five crafts to understand the social. Economic market conditions of the artisan.
- Questionnaire development of the Diagnostic Study.
- Training of the survey team to conduct the survey efficiently.
- Furnishing report according to the qualitative and quantitative response.



Survey of Bellmetal artisan

## Collaboration

National Bank for Rural and Agricultural Development, & Artisans,

The Study was conducted in Kondagaon and Bastar **District**

2

In Kondagaon, Lohndiguda and Bastar **Block** of the Districts

3

33 **villages** of the 3 block were selected

33

412 **Households** of the artisan were surveyed under the study.

412

the 412 Household comprise of 835 **artisans** from 5 crafts

835

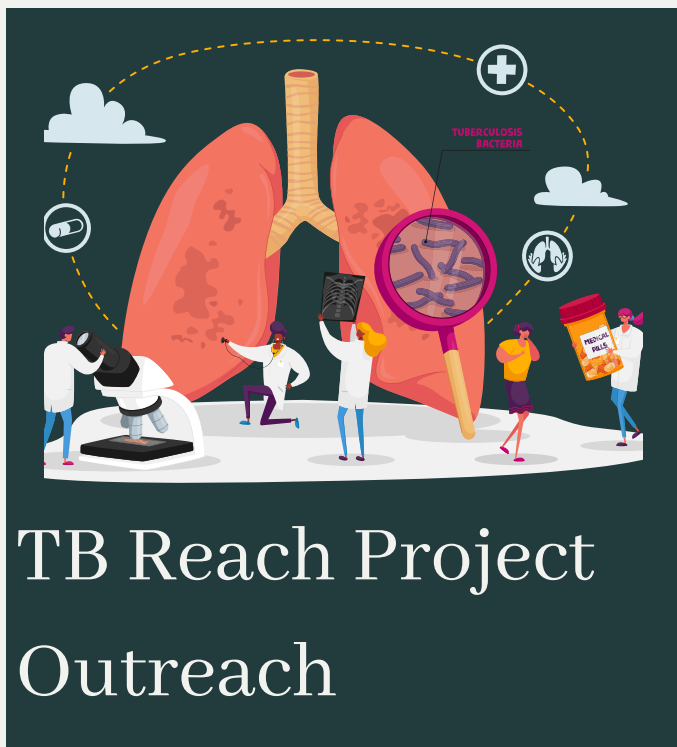
We estimated 1884 **indirect beneficiaries** to benefit from OFPO

1884

# TB Reach

The Union conceived this program to identify and treat people with Tuberculosis T.B in Naxalite areas where government officials aren't allowed. Saathi Partnered with The Union to implement this project in the Kondagaon and Narayanpur districts of the Bastar division in Chhattisgarh. This region faces many Left-Wing Extremism activities. Under this project, Saathi identified unreachable active TB cases and ensured people received adequate medicines and treatment.

TB Reach started in Feb 2019; last year, Saathi covered the 304215 population, out of which 2063 patients were tested for TB and out of which 376 TB positive cases were identified. Three hundred fifty-three patients received medical treatment. This project ended in July 2020.



458 villages were covered from the 2 district under this project



363113 people were beneficiaries of the project





# TB Reach Project

## Activites

- Home to Home Screening at the village level with the collaboration of FLHW to identify TB patients.
- Testing of Possible TB patients by collecting a sample of their mucus and sending it via DTC to CBNAAT for testing.
- Treatment and follow-up of TB positive cases (identified by CABNAAT or Chest XRAY) and monitoring of patients' daily medication with the help of FLHW.
- The team planned awareness activities in local haat markets in the local language. These sessions aimed to create awareness about the symptoms, effects, and cure of TB.
- Saathi Staff conducted awareness about covid 19 and its protocol in the community.



TB Patient after due medical checkup

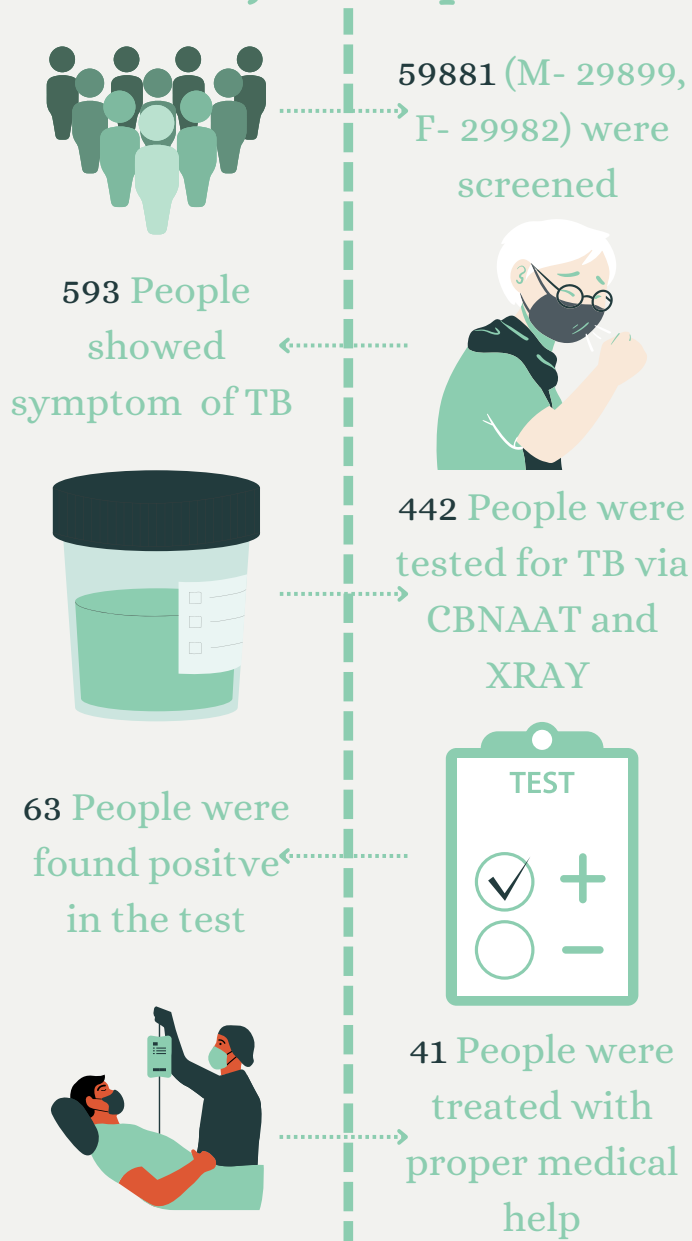


Consultation with saathi's volunteers

## Collaboration

The Union, GoI, Government of Chhattisgarh, Department of Women and Child Development and District Health Department

### Project Output



# The Courageous Chameli.

## Facilitating early diagnosis and treatment initiation through Active Case Finding



This is the story of forty-eight-year-old Chameli Kashyap living in Mohali village of Kondagaon, Chattisgarh. She belongs to the marginalised community of the Halba tribe, and she is the Mitadin of her village. During the field visit, the team met her regarding the information on presumptive TB patients in her village. The Team further explained her symptoms of TB and asked her to inform Saathi if she found someone with similar symptoms.

She started collecting information in her village and informed about eight people having similar symptoms within a week. She also helped in collecting sputum. Out of the eight patients, One patient named Mr Anant Chakradhari was found positive on the CBNAAT test, and his treatment was initiated from Farasgaon DMC.

During the lockdown of COVID – 19, Mr Anant Chakradhari was running out of medicine and could not continue his treatment. Chameli knowing his situation travelled twelve kilometres on foot to get the prescription from Farasgaon DMC. Today Anant is continuously taking medicine, and his health is improving.

Villagers shared that Chameli is always ready to help in medical emergencies and aided in many cases to the hospital. Her husband had migrated ten years ago for work and has not returned since, and she has entirely devoted her life to serving people in need.

**- Tarun Baghel**



# Multi-sector Narayanpur Project

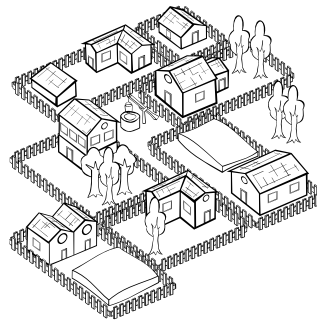
Saathi started Multi-Sector Narayanpur Project in 2012 in partnership with UNICEF. The project primarily focused on Reducing incidences of severe malnutrition and maternal and infant mortality in the Narayanpur district, where the rate of IMR, MMR and Malnutrition was alarmingly high. The project runs in the Abhujmad region, greatly affected by Left Wing Extremist activities and geographical dysconnectivity.

With time the focus of the project broadens with increased emphasis on WASH, Child Protection, Early Child Development and access to preventive and curative health care facilities.

Due to Covid 19 Lockdown from March 2020, apart from the routine activity, the project focused on ensuring timely service delivery to the beneficiaries, i.e., pregnant women, SAM and MAM children, lactating mothers and other vulnerable community members.



District



Villages



Beneficiaries

## Project Outreach

### Collaboration

UNICEF

Department of Women & Child  
developmnet

District Health Department

Department of Education

Panchayati Raj Instiution

Public Health Engineering Department



Awarness through Kala Jhata



# MSNP Activites

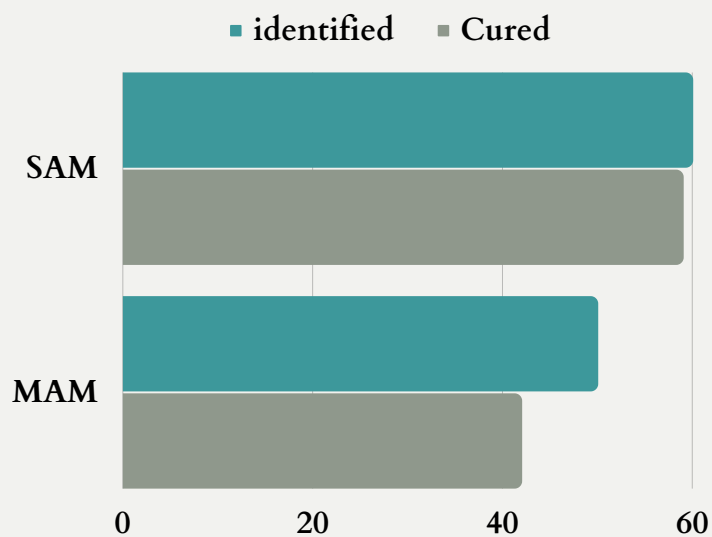


Images of various activites under MSNP

- Screening of children from 6 months to 5 years old to identify and cure Severely Acute Malnutrition (SAM) and Moderately Acute Malnutrition (MAM) at NRC.
- Counselling of Pregnant women on early ANC registration, health, nutrition, child feeding and WASH-related practices.
- Facilitating Full Routine immunisation of children from 0 to 2 years to reduce dropouts and prevalence of diseases.
- Management of Haat Bazaar Health camps at Benur, Bade Jhamri, Dhaudai, Aedka and Chote-Dongar to ensure health taking behaviour among the community.
- Kitchen Gardens were set up at the household level and community level, i.e., in schools and Anganwadi, for people to grow vegetables to fulfil the household's nutrition requirements.
- Training of Adolescent girls on Mensuration Health Management, Health and nutrition, and child protection.
- Training of Mitanin and Anganwadi Workers on Home-based Newborn Care, Malaria Management, Acute Diarrheal Diseases
- Training of teachers and Field Staff on School safety for govt schools, Sports for Development and School disaster management Plans.
- Training field-level functionaries and project staff on child protection and child rights.
- ADD campaign in 20 high-risk gram panchayat for prevention of Diarrhoea.
- Training of community-level Master Trainer for Community Lead Total Sanitation (CLTS).
- Awareness campaign led by Master Trainer for the community on CLTS.
- Kala Jhata on WASH and Covid 19 protocol.



## Output of Intervention with SAM & MAM



## Health Seeking Behaviour

- 688 Full Routine Immunisation of children
- 19929 OPD facilitated in community

### Kala Jhata

72- Program 4710- Male

12038- Female 3412- Children

## Impact of Multi-Sector Narayanpur Project

### Child Delivery

Total No. of Delivery	844
No. of Institutional Delivery	751
No. of Home Delivery	93

## Counselling

### Outreach

1334 Pregnant Women	1539 Lactating Mother	2249 Adolscent Girl	2410 mother of 0-2 year child
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### Topics

Nutrition	MHM	infant & child Feeding	WASH	Pregnancy
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# Story of Cooperation and Perseverance



This is the story of Asha (the name in the account has been changed), who was from Kodoli Village in the sector Kamari. Kodoli (32 km from the district Head Quarter) is a hard-to-reach village situated on top of a small hill, which can only reach on foot by walking 8-10 Km from Rengabeda. People from Kodoli face many difficulties accessing health care facilities, which is one reason for their hesitation toward modern medicine. Asha and her family held the same hesitation and worried about the public health institution; this fear increased because of the covid 19. When Asha got Pregnant in November 2019, Saathi's team started visiting her and counselling her about early ANC registration and precaution she needed to take during her course of pregnancy. She was due for her delivery in August 2020.

With regular counselling and relationship building with Asha, we found out that she had previously lost her infant due to home delivery and delayed Post Natal Care. Because of regular counselling from our team members, she agreed for ANC. She was taken for the ANC by motorbike Ambulance. We came to know she had a high-risk pregnancy because of her history, low Hemoglobin level (anaemic) and malnutrition. Therefore, they were provided counselling on proper food, adequate rest and locally available food items to fulfil the nutritional requirement.

She was hesitant to deliver in a health centre because of COVID, but we encouraged her and her husband to admit Asha to an Early Referral Centre due to her condition. During our visit to the village in the Last Week of July, we found that Asha's feet and body had become very swollen. After rigorous counselling of the couple, they understood the seriousness of Asha's condition and finalised admitting her to ERC on 12th August 2020. Asha was in no condition to undertake an 8 km journey on foot by that time. Villagers and our team together created a makeshift wooden carriage for her to travel. The villagers helped her carry her to Rengabeda, where Saathi's motorbike Ambulance took her to the ERC.

Seeing the seriousness of her condition, she was immediately admitted to Narayanpur District Hospital. The doctor found out she only had 4 grams of blood and needed an immediate blood transfusion during her checkup. The Narayanpur hospital referred Asha to Baliram Medical College Dimrapal, Jagdalpur. The pregnant woman was admitted to Jagdalpur. Our team continuously remained in contact with them, and she gave birth to a child safely on 17/08/2020.

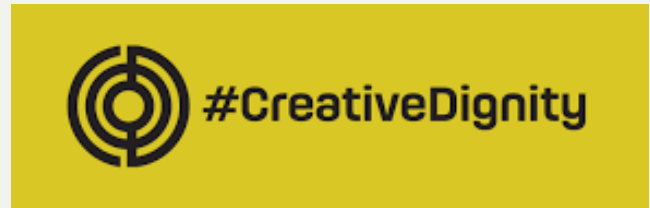
This story shows a picture of cooperation between the community, our team( MSNP team, motorbike ambulance and ERC) and the health department. Asha's delivery would not have been possible without the absence of any of these pillars. Our team was able to pacify the villagers and Asha's family about the covid. We supported and coordinated with her from the day we came to know she was pregnant till the time she gave birth. Similarly, despite growing covid cases, the health department prioritised her treatment and provided proper counselling. The villagers were at the core of her institution's delivery, and they motivated Asha's family and supported them in every step of the way.

- Neelbati



# Partners in our Work

We are grateful to all our funders who were part of our work. During this crisis, their financial aid helped us to work in this vulnerable region and fight the ever emerging challenges from the global crisis.



Other Private donors



