

JAN CHETNA MANCH BOKARO

Annual Report 2010 – 2011



**Chamrabad, Chandra, Chandankiari, Bokaro, Jharkhand,
828134**

**Registered under Societies Registration Act, 21/1860
Registration No.918, 2006-07, Jharkhand.**

Jan Chetna Manch , Bokaro

(Forum for People's Awareness)

Jan Chetna Manch, Bokaro is a registered society based in Chandankiari, Bokaro, Jharkhand. Its mission is to help improve the lives of the poorest and weakest section of society, particularly women. It believes that women's empowerment, in particular, is the key to improve the lives of the most impoverished.

Most of the activities of **JCMB** have continued to increase through out the year. The demands for better health care and sanitation, setting up women's self help groups, and accessing government programmes are growing.

In our endeavour we have been helped by many organisation and individuals. In the sphere of women's health the **Sir Dorabji Tata Trust** has been a source of solid support for the critical health services for women. The **Tzedakah Trust** enabled us to provide much needed support to women during the difficult time of pregnancy and childbirth. The **Department of Health and Family Welfare of the Government of Jharkhand**, through the local health administration, continues to provide us with financial support to enable payments under the 'Janani Suraksha Yojana' programme.

This year also saw JCMB's health programme receive a much welcomed boost from the **EdelGive Foundation**. JCMB was awarded the first prize in their Social Innovation Honors under the Health and Well Being category.

WaterAid India supported our work in the sphere of hygiene and sanitation. Many families constructed low cost latrines under this project, breaking new ground in our villages. The menstrual hygiene programme for adolescent girls was also hugely successful.

The **Niwano Peace Foundation** continued to support our activities in the sphere of promotion of organic farming, medicinal plant cultivation and its use. Ponds were also deepened under this project, benefiting many farming households.

We wish to thank all these organisation, as well as countless individuals, friends and well wishers, for their continued support.

Satyaban Bose
Secretary

July 2011

Women's Self Help Groups

JCMB has facilitated the formation of 420 women's SHGs with a total membership of around 8000 women and their cumulative savings have gone up to Rs 1crore 35 lakhs as on March 2011. Out of these 3165 women so far have become members of a registered cooperative called '*Chetna SHG Mahila Swabalambi Sahakari Samiti Ltd.*'

The savings of individual SHGs are utilized for providing loans to their respective members for mainly domestic purposes like medical treatment, marriages, etc. Bigger loans required for income generating activities usually come from the cooperative.

These groups are the base for most of JCMB's other activities, be it in the sphere of health, sanitation, agriculture or livelihood. Most of the women accessing health care from JCMB's health centre, and in the outreach programmes, are families of the SHG members.

The members of these groups also take active part in cases of violence against women, domestic or otherwise. In one village the women's groups supported one woman in a case of sexual abuse. The local police refused to register the case, since it was considered a 'domestic' issue. The women organized a blockade of the main Chanankiari to Purulia road for 24 hours, until the case was finally registered, the culprits arrested and finally jailed.

Women's Day Celebration



Women's Health Programme

Women's health continues to be a major concern of JCMB, and several activities have been undertaken to improve the health and wellbeing of poor women in the villages of Chandankiari and Chas.

This year has seen a steady growth in the number of people – mainly women – who are accessing the facilities in the Women's Health Centre. The health centre continues to be supported by a grant from the **Sir Dorabji Tata Trust**. Though delivery-related care continues to be a major component, other health problems affecting women are also being addressed: infertility, uterine prolapse and other gynecological problems.

The number of deliveries continues to grow, from 321 in the previous year to 431 this year. All of these women received the government incentive for institutional delivery, since the health centre is accredited under the 'Janani Suraksha Yojana' scheme, and payments are made through JCMB.

The operation theatre has been well utilized this year, with the number of surgeries increasing. This has been mainly with the help of the Royal College of Obstetricians and Gynecologists. Teams mainly from the eastern region have been unfailingly coming every month. Women – especially elderly women – who have been suffering from severe prolapsed uterus for years – have been successfully operated upon.

Health Services at a glance

Health Service	Number
<i>Outdoor patients at Health Centre & outreach programs</i>	
Women registered for antenatal care	997
Antenatal check ups	4098
Couples treated for infertility problems	121
Women with other gynecological problems	302
Illnesses of babies & children	1031
Children given primary immunization	464
Total patients	6897
<i>Indoor patients at Health Centre</i>	
Deliveries	431
Surgeries (Cesarean sections, hysterectomies, etc)	97
Minor operations (D & C, etc)	65
Other illnesses (typhoid, dysentery, malaria, etc)	54
<i>Investigations undertaken in laboratory</i>	
Hb	2389
Urine for protein & glucose	2963
Routine urine examination	408
Blood grouping	816
Malaria	132
Semen analysis	87
Others (TD/DC, HIV, Widal, sputum for AFB, etc)	483



*Iron tablets & chana sattu
– staple antenatal care*

The successful implementation of JCMB's ante natal program has been helped by the promotion of nutrition during pregnancy – and providing mothers-to-be with chana sattu during the last three months of pregnancy. This was helped with a donation from the **Tzedakah Trust**. The cost of iron and calcium has been kept low by purchasing generic medicines from LOCOST in Baroda (Gujarat).

The backbone of the health programs are the *swasthya sakhis* – health guides. These women are selected by the women's groups and serve their basic health needs, and provide the much needed link between the health facilities, services and programs and the community. There are 50 such women serving the health needs of women.



*Healthy mother & baby in Women's
Health Centre*



Swasthya sakhis- Health guides

There are always some poor families who will be in need of subsidized health care. In the case of JCMB women who have had to avail emergency cesarean sections in the private hospitals of Chas or Bokaro, or newborns in need of special care at birth, loans or grants have been provided. Throughout the year 12 such cases were helped, which helped the families access health care without selling their land and other assets.

Water & Sanitation

JCMB launched an intensive campaign against the practice of open defecation and helped in the construction of low cost household latrines for some very poor families (but not included in the government's BPL – Below Poverty Line – list). Some subsidy was provided with the financial support from **Water Aid India**, but the bulk of the expenditure was born by the beneficiaries themselves. The campaign has also prompted many comparatively well off families to build their own latrines without any subsidy.



Household latrine

Similarly with the support from WAI and villagers own contribution many dysfunctional hand pumps were repaired and new ones were installed.

JCMB also organized a campaign amongst school children for hygienic practices like hand washing with soap particularly after defecation and before eating.



Hand pump built by villagers

A series of menstrual hygiene workshops for adolescent girls was another new and important activity taken up this year. Pictures and videos were used by four young women to explain various aspects of menstrual hygiene. These programs were extremely popular, and also included the physiology of menstruation, fertility and discussed various menstrual health related problems.



Menstrual hygiene training materials for adolescent girls

Agriculture, Livelihood and Environment

The villages in this area are drought prone, so the conservation of rain water is the most important requirement for agricultural production. The state government has spent much in building dams or digging ponds here and there but the traditional and time tested method of stopping the rain water flow by constructing small bunds have been neglected. This method had resulted in the formation of many ponds which stored excess water during rainy season and helped irrigating land in lean season. During the year JCMB – with the financial support of **Niwano Foundation**, regenerated 5 such water bodies by de silting them, benefitting the people of five villages.



De-silting ponds

JCMB also implemented a method of water conservation known as “5% model”. According to this method a 3” deep pit (locally known as ‘hapa’) is dug at the corner of each plot of paddy field (the area being 5% of the surface area of the respective plot). This conserves the excess rain water and help maintaining the moisture level of the land. One hundred such ‘hapas’ have been dug.

All these water conservation works were undertaken by the beneficiaries themselves, with JCMB providing the technical assistance and a portion of the cost involved as subsidy.



Aloe vera cultivation

A similar subsidy was given to farmers for procuring medicinal plants. Propagation of the cultivation of medicinal plants on barren and unused land had been undertaken by JCMB during the last three years. We had established two demonstration farms and organized seminars, meetings, fairs, exposure trips, video shows etc. on this topic. As a result of which some villagers have started cultivation of medicinal plants for the first time in our area.

Large tracts of uplands are lying fallow in our area. To bring these barren lands under cultivation and generating some income was another priority of our work. We tackled this problem by adopting new techniques of cultivation (e.g. SRI – System of Rice Intensification) as well re-introducing those crops which used to

be grown here in the past but have been abandoned by the farmers of late. *Ragi* (finger millet), *kurthi* (horsegram), *surguja* (niger oilseed) are some such crops. We have succeeded in persuading many farmers to grow these crops again. If followed by large number of famers this can be a very important step towards food security and rural income generation.



Cultivation of 'ragi'

An unexpected success this year was the re-cultivation of shellac. Again this was not a new innovation. Villagers used to grow shellac worms in the *palash* (flame of the forest) trees, which are plentiful in this region. JCMB brought new seeds and introduced new techniques and result was impressive. Merely half an acre of Palash forest had gave a profit of Rs 30,000/- in one year.

Edelgive Social Innovation Award



Health Centre workers with Edelgive Prize

The year ended on a high note with the Edelgive Social Innovation Honour being awarded to Jan Chetna Manch for the health and well being category.