

Empowering Marginalized Communities of Bhal region of Ahmedabad & Bhavnagar district by focusing on Social Justice, Micro Finance, Health, Youth Development and Natural Resource Management

Annual Report 2009-10



Capacity building of Village Health & Sanitation Committee



Adolescent Girls – Tailoring Training



Safe Water at the Door Step



Construction of Roof Rainwater Harvesting Tank

July 2010



MAHITI Rural Development Centre

Registered Head Office

At & Post: Dholera, Opp. Bhimtalav, Rahtalav Road, Tal: Dhandhuka,
Dist: Ahmedabad, Pin : 382455 Telephone: 02713 – 313 437, 293 071
Mobile: 955880 3901 Email: mahiti@bsnl.in

Liasion Office

G-2/1 Om Shantinagar, Nr. Shrinandnagar II, Tagore Road, Vejalpur, Ahmedabad Pin: 380 051
Telephone: 079 – 2681 1003
Mobile: 95588 03902, 97127 16925 Email: mahiti.india@gmail.com

Index

Sno	Particulars	Page Number
Brief Information of the Organization		04
Section A: Introduction and Programs		05
1	Introduction of the Organization	05
2	Major Focus	05
3	Area of Operation	06
4	Activities and Programs	06
4.1	Social Justice	06
	4.1.1 Interventions of Bhal Social Activist Group	07
	4.1.2 Interventions of Legal Aid and Guidance Centre	07
	4.1.3 Youth Development and Empowerment	08
	4.1.4 Setting Up Youth Centers	08
	4.1.5 Vocational Training Programs for the Youth	08
	4.1.6 Tailoring Training for the Adolescent Girls	09
4.2	Community Health Program	09
	4.2.1 Empowerment of village level women health workers	10
	4.2.2 Reproductive Health Program – Capacity building of Midwives	11
	4.2.3 Adolescent Program	12
	4.2.3.1 Selection of Project Villages for Adolescent Health	12
	4.2.3.2 Baseline survey of Adolescent Youth	13
	4.2.3.3 Guardian Meetings	13
	4.2.3.4 Selection of Kishor Mitra and Sakhi	13
	4.2.3.5 Staff Training of Trainers on Adolescent Youth Program	13
4.3	Capacity Building of Village Health & Sanitation Committee (VHSC)	14
	4.3.1 Base Line Survey of Members of VHSC	14
	4.3.2 Orientation of VHSC	14
	4.3.3 Two Days Training Program for VHSC	15
4.4	HIV / AIDS Awareness Program for Members of Self Help Groups (SHGs)	16
	4.4.1 Staff TOT for Training SHGs Leaders	16
	4.4.2 One Day Training Programs for Self Help Groups on HIV / AIDS	17
4.5	Women Empowerment through Micro Finance	18
	4.5.1 Capacity Building of Women’s Savings and Credit Cooperatives	18
	4.5.2 Financial Condition of Women’s Savings and Credit Cooperatives	19
	4.5.3 Sector Wise Utilization of Credit	19
	4.5.4 Bhal Women’s Convention Cum Annual General Meeting	20
	4.5.5 Marketing of Seeds and Essential Commodities	20
	4.5.6 Social Security Schemes	21
	4.5.7 Capacity Building of Other Institutions	21
4.6	Natural Resource Management and Development	21
	4.6.1 Soil Conservation – Land Improvement	22
	4.6.2 Drinking Water Resource Management	22
	4.6.2.1 Coastal Area Development Program: DWRM – Dhandhuka	23
	4.6.2.2 Coastal Area Development Program: Sanitation Activities	24
	4.6.2.3 Swajal Dhara Sector Reform Scheme – Barwala Taluka	24
	4.6.2.4 Swajal Dhara Sector Reform Scheme – Dhandhuka Taluka	24
	4.6.2.5 Swajal Dhara Sector Reform Scheme – Dholka Taluka	25

Sno		Particulars	Page Number
	4.6.3	Construction of Roof Rainwater Harvesting Structures (Tanks)	27
4.7	Targeted Interventions with Single Male Industrial Migrant Workers on HIV / AIDS		29
	4.7.1	One to One Contact	29
	4.7.2	Condom Demonstration	29
	4.7.3	Out Reach Clinics (Health Camps)	30
	4.7.4	H.I.V Testing and I.C.T.C Referrals	30
	4.7.5	Street Plays	30
	4.7.6	Advocacy Meeting with Key Stakeholders	30
Section B:- Internal Organization			31
5	Organizational Internal Matters		31
	5.1	Role of Board of Trustees	31
	5.2	Organizational Structure	31
	5.3	Decision Making Processes	32
	5.4	Human Resource Management and Development	32
	5.5	Present Staff Profile	33
	5.6	Present Board of Trustees List	34
	5.7	Annual Audited Accounts and Other Matters	34
Annexure 01:- Details of Workshops, Trainings attended by Staff during the year			36
Annexure 02:- Details of Visitors visited the organization during the year			38

Name of the Organization : **Mahiti Rural Development Center**
 Status of the Document : Approved by Board of Trustees on 18.09.2010
 Reporting Period : **1st April 2009 to 31st March 2010**

Organization in Brief

Address : Registered Head Office
 At & Post: Dholera, Opp. Bhimtalav, Nr. Khun Village, Rahtalav Road,
 Tal: Dhandhuka, Dist: Ahmedabad, Pin : 382455
 Liasion Office
 G-2/1 Om Shantinagar, Nr. Shrinandnagar II, Tagore Road, Vejalpur,
 Ahmedabad Pin: 380 051

Contact Numbers : Dholera: 02713- 313 437 / 293 071
 Ahmedabad: 079 – 2681 1003 Telefax
 Mobile: 955880 3901, 955880 3902, 97127 16925

Email : mahiti@bsnl.in ; mahiti.india@gmail.com

Main Contact Person : Mrs. Devuben Pandya, Executive Director

Year of Establishment : 9th August 1994

Registration Details : Trust Registration No: F/4410/Ahmedabad, dated 9th August 1994
 Society Registration No: Guj/4550/Ahmedabad dated 9th August 1994
 FCRA Registration No: 041910199, dated 2nd September 1998

Area of Operation : Bhal region – Coastal Belt of Gulf of Khambhat
 Ahmedabad District: Dhandhuka, Dholka and Barwala Blocks Villages 60
 Bhavnagar District: Bhavnagar, Shihor Blocks Villages 30 Total villages 90

Vision : *“To abolish social discrimination created by unjust social structure of Bhal region and envisage advancement in living standards of exploited / deprived / marginalized sections while making them self-reliant”*

Mission : *“To empower the oppressed communities of Bhal region focusing on women by organizing communities around issues related to natural resources, health, hygiene, social justice, micro finance and disaster mitigation”*

Major Activities :

- Formation, nurturing and strengthening various Village Level Institutions
- Strengthening Micro Finance Institutions
- Natural Resource Management & Development – Land Covervation, Drinking Water & Sanitation, Watershed Development Program
- Social Justice and Violence against women
- Community Health, Hygiene and Sanitation
- Youth Development
- Disaster Management

Networking : **State Level:** Pravah, Janpath, Sajjata Sangh, Mahila Swaraj Abhiyan, Gujarat Dai Sangathan, Working Group for Women and Land Ownership, Jan Swashyay Abhiyan
National Level: Voluntary Action Network of India - VANI, National Alliance of Women’s Organizations - NAWO, Confederation of Rural NGOs of India – CNRI

Governing Board	:	Men	04	Women	04	Total	08
Management Staff	:	Men	02	Women	02	Total	04
Program Staff	:	Men	09	Women	05	Total	14
Support Staff	:	Men	02	Women	00	Total	02
Administrative Staff	:	Men	05	Women	01	Total	06

Section A

The Organization and Its Programs

1. Introduction



Mahiti Rural Development Center is a village level non government organization working in the extremely backward and resource-deprived coastal area of Gujarat State. This region called “Bhal” in Gujarati language which means “forehad”. This region has been named so because like forehead on human face it has no growth – it is just plain and flat. This organization formed and run by local people was officially registered as a non profit organization in 1994. Since than it has been working for the issues related to socio economically and politically exploited and deprived communities keeping in view the human rights issues. Since its inception women and gender issues have been priority issues for us and all the activities, processes and structures are formed and being carried out with gender

equality at its base. The organization works through various village level organizations and that has made “Mahiti” truly an organization of and for local population.

Mahiti started working as an information exchange center under the name of “Mahiti Project” in 1981 as a part of Ahmedabad based NGO called “Utthan” for drinking water problem in this area. Various development projects were initiated with four committed professionals in this area. After a few years (in 1994), “Utthan” handed over the work of development in this area to Mahiti and stepped out from this area. During 1981 to 1994, Utthan and Mahiti Project were collectively working in about 20 villages in this area. Mahiti has registered as an autonomous organization in 1994 and its work has now expanded in more than 90 villages.

The main office of the “Mahiti” is in Dholera town in Dhandhuka taluka (block) in Ahmedabad district. Dholera is an erstwhile business town and port, Now there is little of business in the village and it is in tight control of a few powerful landowners and shahukars (moneylenders) who holds much control on local population.

This area is faced with umpleen natural and manmade problems. The soil here is alkaline, water resources are scarce, other natural resoures like rain and favourable whether also are scanty resulting scarcity of livelihood activities added by frequent natural calamities. All these make life tough and challenging. During last decade the socio economic environment of Bhal has changed a lot, the forms of exploitation and leadership have changed. New challenges have been posed and Mahiti is bracing itself up to counter these challenges. The approaches and strategies of the organization have been reconsidered.

2. Focus of the Organization

The main focus of Mahiti consists of seven major issues (1) Micro Finance, (2) Formation, nurturing and strengthening of village level institutions, (3) Creating atmosphere of social justice and equality, (4) Development and Management of Natural Resources, (5) Health care and sanitation, (6) Youth Empowerment and (7) Disaster management

Table: - Details of Village Level Institutions formed and facilitated by Mahiti since its inception

Districts	Blocks	SHGs	WCs	Women Cooperatives	BSAG	Watershed Committees	Youth Groups	DPMCs
Ahmedabad	Dhandhuka	168	27	Ahmedabad Cooperative 5735 Women Members	50 members	07	15	12
	Barwala	58	15			01	3	00
	Dholka	34	15			06	3	00
Total		260	57			14	21	11
Bhavnagar	Bhavnagar	100	06	Bhavnagar Cooperative 3013 Women Members	50 members	10	09	09
	Shihor / Vallabhipur	14	00			00	--	00
	Total	114	06					10
Grand Total		374	63	2 Cooperatives 8748 Women Members	50 members	24	30	20

SHGs= Self Help Groups, SAG=Bhal Social Activist Group, WCs=Water Committees; DPMC= Disaster Preparedness and Management Committees

3. Area of Operation



The inception and existence of Mahiti is direct outcome of the complexities that Bhal region presents – both natural and socio economical. Mahiti is working in 90 villages of 6 blocks in Ahmedabad and Bhavnagar districts. These are Dhandhuka, Dholka, and Barwala talukas of Ahmedabad District and Bhavnagar, Shihor and Vallabhipur talukas of Bhavnagar district. The details are as in the table below.

District	Block	No. of Villages	District	Block	No. of Villages
Ahmedabad	Dhandhuka	36	Bhavnagar	Bhavnagar	24
	Barwala	14		Shihor	04
	Dholka	10		Vallabhipur	02
Total		60	Total		30

4. Activities and Programs

4.1 Social Justice

The caste pattern in Bhal region is varied which consists of Darbars, Kanabi Patel, Koli Patel, Devipujak, Bharwad and a number of dalit communities. Among these Koli Patel and Dalit communities are included in backward communities whereas Darbar, Kanabi Patel is high caste communities and they are land holders. Surprisingly 80 % of total population in Bhal region is of Koli Patel community and 10 % are dalits. Government has recognized Koli Patel community as other backward caste and dalit as Schedule Caste but very little attention has been paid to them. Thus 90 % of total population in the region is controlled by 10 % local land holders and sahuikars population. In several coastal villages 90 % of population consists of Koli Patels who are dominated by a handful of local high caste people. In such circumstances it is not surprising that the status of women and children is vulnerable. Many social evils like caste discrimination, dominance of patriarchal values and evils social customs like dowry system and child marriages are highly prevalent in this region. Politics has not remained unaffected by caste discrimination. In spite of being in such a large number Koli Patel and dalit communities hardly have any political power which is being closely guarded by land holding / sahuikars communities. During last decade socio economic environment and realities have changed a lot and Mahiti has prepared itself to counter these changes. Majority of population lives under pressure incapable to enjoy their human rights. The dominant minority interferer in the government aided welfare schemes for the backward communities and prevents them from utilization of natural resource depriving them from the rightful exercise of their rights and privileges. As a result these communities have but little participation in business and market system.

Since last five years, Mahiti has started working for a very serious social problem in the area and that is issues related to violation of social justice. This kind of injustice is prevalent at family level as well as large social level. Women's exploitation, violence against women, drinking and gambling habits, illegal encroachment and possession of land, evil social customs, deprivation from rightful place at decision making level area some for the issues for which Mahiti is working intensively. Mahiti believes that the most effective way of bringing about social change is to educate the youth. In the initial capacity building stage Mahiti realized that these changes cannot be achieved by addressing the issue of women only. After number of reflection and brain storming sessions a strategy was drawn out to involve and train sensitive young women as well as men and also social leaders and carry out various processes to enhance their courage, knowledge, leadership qualities and capacity to raise voice against exploitation.

4.1.1 Interventions of Bhal Social Activists Group (B-SAG)



Carrying this idea forward, Mahiti initiated efforts to create awareness regarding human rights, campaign for social justice, understand the subtleties of social exploitation and develop capacity to raise voice against that among the people, especially the youth in the area. After incessant work for five years Mahiti has formed “Bhal Social Activists Group (B-SAG) at local level. About 50 men and women from exploited communities have joined the group who have taken up activities for social justice by creating awareness among people and directing them towards right direction. This activists’ group regularly meets on 25th of every month and people come to seeking help for a number of social justice issue like domestic violence, violation of human rights, illegal possession of

land, marriage disputes, personal venegance, land owership issues like inheritance cases, non registration of land, non approval of ownership rights, exploitation, harrasment etc. The activists group handles these cases initially by counselling, assistance and guidance to the concerned parties and if that fails legal interventions is sought with assistance of two leagal advocates.

Details of cases handled and interventions made during the year.

No	Type of Cases	No. of Cases	Action Taken
1	Violence agsint women, domestic dispute like marital discard, divorce, beating, maintenance etc	34	Compromise ade in 20 cases Legal action in 10 cases Follow up work is going on in 4 cases
2	Land ownership cases, like inheritance issues, illegal possession of land and land disputes etc	36	Inheritance process in 16 cases Process taken up to get the land on the legal owner 30 case
		70	Cases

Thus as mentioned in the table above 70 cases were handled with legal interventions and family counseling as required.

4.1.2 Legal Aid and Counseling Centre



A family counseling cum legal aid and guidance center has been set up at Mahiti campus since 2007. People from all villages around Dholera frequently come to the center to seek guidance and assistance in legal matters pertaining to their problems. This center has got good access and impact in this area. Gradually we have developed a good library which has many law related books and other materials and local people especially youth often take benefits of this facility.

People visit the center and seek assistance in inheritance procedures, correction in ownership documents and sale purchase of land etc. This center has proved to a boon to women who seek help in their cases of domestic dispute and violence.

4.1.3 Youth Development and Empowerment



When Mahiti started working in this area its initial focus was on women's empowerment, women got organized and solve number of problems too, so much so that the sahuks and dominant section of the society in the area got a bit altered regarding women's capacities and strength. The avoid doing any injustice to women but men do get exploited and suppressed because men folk in this area do not have much education and resultant confidence to resist ill treatment. They submit quite easily to the traps of exploitation set up by the dominant class. Realizing the need to address their problem Mahiti decided to organize youth groups and build their capacities so far 30 youth groups have been set up in these 30 villages with total membership of 1239.

4.1.4 Setting up of Youth Centers

We have set up 30 youth centers in remote, far-flung village close the sea coast. The each center has been equipped with a library and indoor games like chess, carom board and also cricket and volley ball kits to encourage youth to spend their free time in useful activities. This center also increases changes of interactions and exchange of ideas and information. Village youth visit the centers, organize picnics. They also organizing cleanliness campaign, cricket matches and volley ball matches, visit school talk with children regarding cleanliness and sanitation.

4.1.5 Vocational Training for Youth



Mahiti has developed strong linkages with various vocational training institutions. These institutions provide information related to their various vocational training programs to Mahiti. Mahiti plays its roles as a facilitator for youth in this area. A few selected youth are sent for various vocational trainings and Mahiti helps them to gain confidence. These youth when they leave their homes for training are hopeful to lean something to increase their scope of employment and at the same time are concerned because they leave their home for the first time. It is an adventure for them to go out from safe and secure home environment. Even though this venture provides them with better opportunities the youth with very conservative upbringing have never been training to think of future

opportunities or problems. Such a venture itself in an achievement for them. They have to leave their family and the family also has to face the absence of a working members. Besides they have to restart the studies they had left many years back. They gather courage to take such a step with hopes for a bright future. Mahiti has to work intensively to persuade these youth. This year **27 young boys and girls** have been sent to "Rudset Institute" Nadiyad for vocational training

No	Name of the Training	Name of the Youth	Village	Duration
January 2010				
1	TV-DVD Repairing	Rajeshbhai Baraiya	Kama Talav	30 days
2		Velabhai Baraiya	Kama Talav	
3		Jayeshbhai Makwana	RahTalav	
January 2010				
4	DTP Course	Maganbhai Vaghela	Rahtalav	45 days
5		Rajeshbhai Jadav	Shela	
6		Dasharathbhai Magharola	Shela	
7		Vinodbhai Chavda	Otariya	
8		Dhumrutbhai	Ambali	
9		Sunilbhai Baraiya	Shela	
10		Ranjitbhai Thakarshibhai Dhoriya	Navagam Karna	

		February 2010	
11	AC & Fridge Repairing	Vijaybhai	Kama Talav
12		Maheshbhai	Kamatalav
13		Maheshbhai	Otariya
14		Lakhabhai	Otariya
		January 2010	
15	Tailoring Training	Parulben K49 hushalbhai Dulera	Otariya
16		Bharatiben Chandubhai Jadav	Sarsala
17		Jayaben Chandubhai Jadav	Sarsala
18		Ushaben Jivrajbhai Vagadiya	Bhim Talav
19		Sonalben Jadhubhai Mer	Sandhida
20		Labhuben Arajnabhai Mer	Sandhida
21		Sangitaben Jadavbhai Mer	Sandhida
22		Nayanaben Mavjibhai Maru	Otariya
23		Ramilaben Dhudabhai Solanki	Bholad
		January 2010	
24	Wireman Training	Umeshbhai Jemabhai	Sarsala
25		Ganeshbhai	Otariya
26		Budhabhai	Kadipur
27		Maheshbhai	Kadipur

4.1.6 Tailoring Training for Young Girls



In the previous year, Mahiti had sponsored girls to other institutes for training in tailoring. This year we have started tailoring classes at its campus. Vivekanand Research and Training Institute (VRTI), Bhavnagar has given sewing machines for the classes. These machines were out of order but Mahiti got them repaired and they are being used for tailoring classes. The trainees pay Rs. 200/- as fees. This has generated much interest in the villages around Dholera and the girls spend their money to attend the classes. 20 girls have been trained in March 2010 this year who have started working taking up stitching job work in their villages.

In addition to this, tailoring training has been taken up at Nari village in Bhavnagar district. The Mahiti received financial support from Polytechnic College Bhavnagar under the CDTP program. Parsottam Gankula Mahila Mandal also extended its support. 20 women have received tailoring training at Nari village by Mahiti. This training activity has proved quite motivating for women; young girls have sincerely received training. They have been awarded certificates at the end of training. After the training, Dena Bank Dholera has extended loan to each trainee to purchase sewing machines under its Suvarna Jayanti Gramin Swarojgar Yojna (SGSY). So far a total of **40 women and young girls** have been trained and **09 girls** have been linked for tailoring training during the year.

4.2 Community Health Program

Bhal is a backward area with extremely poor infrastructure facilities and socio economic development also is very backward. Health related problems also are many. There is insufficient outreach of government health services. Private medical doctors exploit the poor population. Mother and child health problems are very serious which are difficult to deal with due to lack of awareness, prevalence of superstitions, deprivation of human rights to poor especially women. People resort to the service of local midwife who are often untrained for deliveries often this results in mortality of the infant and mother. In such a situation it is imperative to create an alternative provision for health care facilities. This area is backward and remote with almost no transportation facilities. Poverty deprived people of good nutritious food. Addictions of tobacco, liquor and drugs is rampant. This also becomes one of the reasons of poor health and disturbs family life. Looking to these problems, Mahiti has initiated health and sanitation activities in this area since many years. Mahiti aims at not just providing infrastructure facilities but also to create health care awareness among people. Mahiti wants to create a system in this area through which villages here become self reliant in handling their health related issues. Mahiti makes

efforts to become a link with connect government health services and village level women health workers and midwife (Dai women). Moreover, Mahiti wants to prepare trained women health workers and dai women in the villages of its work area who can provide primary health care services and safe deliveries respectively so that people can get quick and easy treatment for common illness and also mother child mortality rate can be reduced. There are Primary Health Centers (PHCs) and Community Health Centers (CHCs) in this area but these are quite far from remote, far-flung villages and people can not have easy access to these centers. Moreover, all these centers do not work very efficiently. Nurses do not visit villages regularly. In this situation Mahiti tries to help for services of PHCs and nurses more effectively.

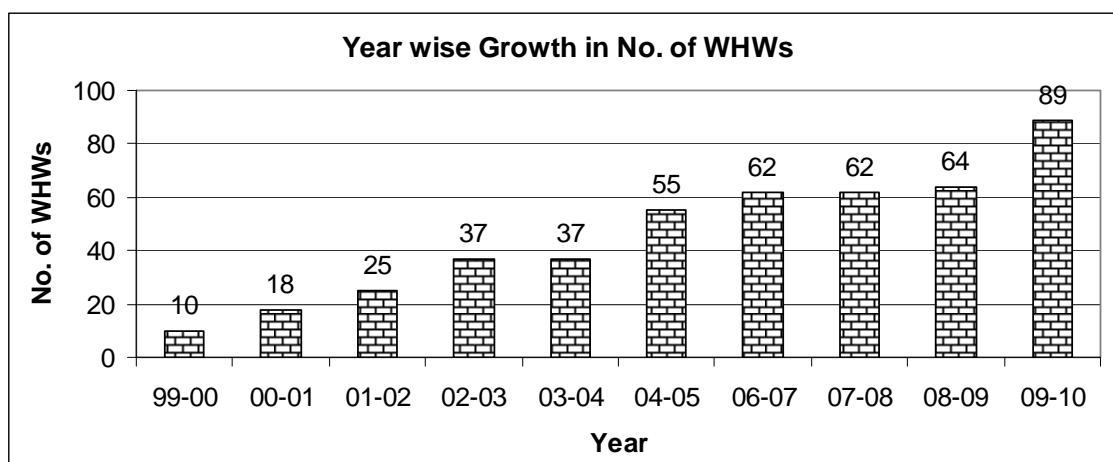
Activities during the year

Mahiti had laid much stress on community health program this year. Till now our main thrust area was primary health care and reproductive and child health care. This year we have added one more issue that of adolescent youth development and health care.

4.2.1 Empowerment of Village Level Women Health Workers (WHWs)



Under community health program cluster wise review meetings of the WHWs are called on 3rd, 5th and 7th of every month. The WHWs present report of their activities during the month and also share their experiences and responses. The medicines are provided by Mahiti and reports of the utilization of the medicines also are presented. The discussions have revealed that these medicines have proved much useful and affordable to villagers.



The most important development in this regard is that these women health workers have started working as “Asha” workers under the National Rural Health Mission (NRHM), 09 WHWs from Dhandhuka cluster, 09 from Barwala cluster and 1 from Bhavnagar cluster have become “Asha” worker. Several of these workers are members of village health and sanitation committee (VHSC). They provide their services as first aid workers guiding people for maintenance of cleanliness and also handle anganwadi activities and remain present on “Mamta Day” to provide care to children, pregnant mothers and adolescent girls. They also handle immunization services; check up of pregnant women and administering proper supportive medicines to them. Though these WHWs are almost illiterate but after receiving training they are as good as a doctor for residents of remote villages.



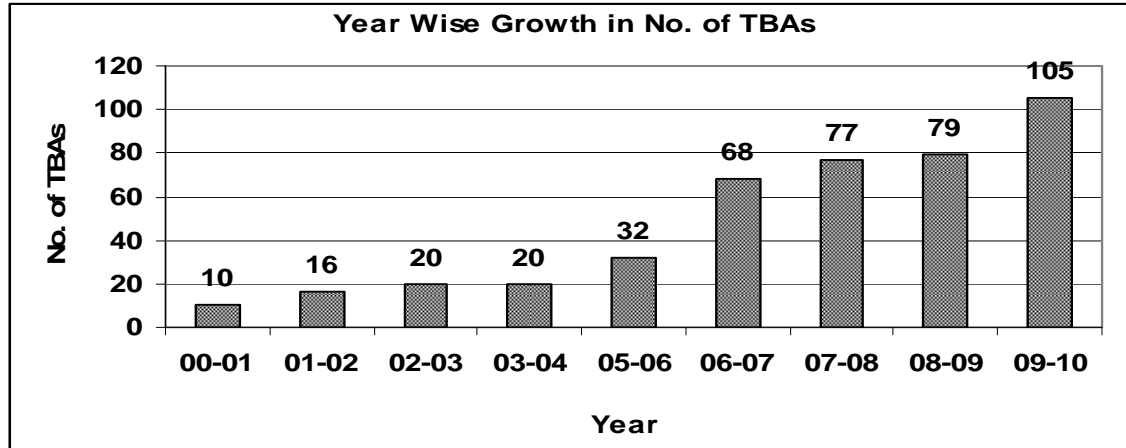
In addition to this, new WHWs also have been trained to work in villages where there are no health workers or were not enough number. This year 25 new WHWs have been selected. They were imparted training for two days during 3rd – 5th March 2010 at Sardar Patel Smarak Bhavan, Ahmedabad. They were imparted information and training regarding their role as health workers and basic issues related to health care and how to render health care services to villagers.

4.2.2 Reproductive and Child Health Program – Capacity Building of Midwife (Dai Women)

Dai women have been imparted training under community health program. Cluster wise review meetings of Dai women are held on 3rd, 4th and 7th of every month. The dai women working in villages present their report and share their experiences and responses related to their pregnancies, neo-natal and infant care activities in villages.

It often happens that Dai women call 108 service and shift the patients in labor to government hospitals but the patients are not paid necessary care and attention by the staff at the hospital. Gynecologists are not present, nurses do not treat the Dai women properly and the facilitator is not paid her rightful incentive at the hospital (which they should be paid as per rules). The benefits under the Chiranjivi and Janani Shuraksha scheme are paid by cheques and often the patients relative are compelled to open an account deposited a sum in advance to get the cheque encashed. This condition deprived many poor women from getting the benefits of the scheme.

Mahiti's trained dai women handle prenatal health care and take pregnant women for health care and HIV test to the PHCs.



During the year 26 dai women have been selected. Criteria for selection are age below fifty and having traditional knowledge and enthusiasm for work and willingness to devote time and dedication to work. The first phase of the training for dai women was organized during 21st to 25th March 2010 at Gujarat Vidhyapith, Ahmedabad.

Case Study
Samuben Veljibhai – Village: Dhanala

Samuben who works as dai had to attend a delivery case. The patient was from Bharwad community. As her condition got serious Samuben called 108 services and shifted the patient to the hospital. On the way to hospital a baby boy was born. Nevertheless, she took the patient to the hospital. There is another such case a woman from the Odd community who was taken to the hospital and was in a serious condition. The attending nurse refused to handle the case and rudely asked Samuben to go any other hospital. Samuben felt sorry for her and eventhough it was not her case. She went forward to attend the patient. The nurse on duty refused to take any responsibility. She left the place but Samuben persisted and helped the patient deliver her baby.

As the case study above indicates dai women carry out their work with full dedication and responsibility. Government does not encourage treatment at home and appeals people to have institutional delivery but as the situation stands often in many cases there is neither time nor convenience (transportation) to shift the patient to a hospital where many a time there is no responsible medical attendant present. This is quite a common situation in Bhal area and looking to that in the remote far-flung villages' local Dai women is truly a great help, in fact the only help that people can resort to.

4.2.3 Adolescent Program

Mahiti has been working in Bhal region since last 16 years. We have been constantly making efforts to help mitigate the socio economic, caste and gender discrimination influences in the rural communities. Our more than a half decade of experience of working with cross section of castes and all groups made us understand that children of 13 – 19 years age group are most neglected group in rural communities. This all group when children are growing in the most crucial time in a person's life. A child feels many changes occurring in her / his body and mind which are inexplicable for her / him. A child at this stage needs an adult who is affectionate and sympathetic and guides her / him through this journey. Deprived of such guidance adolescent boys and girls resort to wrong ways to fulfill their needs and ruin their lives, especially if they get trapped in wrong sexual relationships.

This situation is made dangerous for girls because in Indian society and that too is rural society girls have restricted accesses to everything food, education, opportunities, social contacts, friendship outside a limited circle. Girls are confined to domesticity and dependency and have subservient status. Adolescent age is a time of exuberance and energy and curiosity. If kept ignorant of the risks of sexual relationship girls often get pregnant by illicit relationship and that creates problems for her and her family parents in frustration and concern for preserving honor of the family make attempts to abort the foetus which often create risk to the girls health. In addition to that the girl has to bear the brunt of insults throughout her life because once the incident is exposed her marriage relationship gets damaged forever.

Child marriages and bride pricing are two very rampant social evils here. The groom's family has to pay a price for the bride to her parents and later the girls are almost treated as a "purchased" commodity. Ill-treatment, insults, taunting discrimination is food and many such harassment wither a blooming flower in bud. This is one of the very serious and fragile social systems in this area.

In recent years, Bhal region has been declared as "SEZ" Special Economic Zone by Government of India and "SIR" – Special Investment Region by Government of Gujarat. Several studies carried out to examine the condition created by such industries reveal that in such conditions also women are more victimized compared to men. They have to face problems like poverty inequality in material changes, evils of social system and addictions. Women do not have awareness regarding their rights and needs for healthcare excessive pressure from labor force coming from other state to work in newly set up industries also compel. Women to live life to extremely poor quality, young women enter into flesh trade because it brings quick money and later pass painful life. Mahiti having experience in the health care sector has taken up a special program for adolescent boys and girls aiming at bring about changes in conditions.

4.2.3.1 Selection of Project Villages for Adolescent Program

Mahiti has selected villages for this activity on the basis of its field experience. The selection was made with unanimous consent at the staff meeting. The criteria for the selection have been based on the location of the village i.e remote and far-flung village where there are not adequate transportation facilities and socio economic and education level of the village i.e. where education level is very low and ignorance and exploitation are excessive. Moreover, we have selected such villages where Mahiti has developed good rapport and relations

with local residents. These villages are Rahtalav, Kasindra, Khun, Sarasala, Gogla, Sandhida, Kama Talav, Navagam Karna, Shela and Anandpur.

4.2.3.2 Baseline Survey in the Villages

A questionnaire was prepared with a view to collect sufficient and purposeful information regarding adolescent population in consultation with the program villages. With the staff members the survey was conducted in January and 644 adolescent boys and girls in 10 villages were covered. Among these 375 were boys and 269 were girls. The survey revealed that majority of them were engaged either in agriculture activity or diamond polishing work. The survey led to the following conclusion:

- Majority of boys and girls are unmarried.
- Majority of them have studied up to primary level, school level. Boys were a little more educated compared to girls.
- Majority of boys are engaged in diamond polishing work whereas girls stayed at home and helped the family.
- Boys like to play and watch cricket and films, girls like watching television.
- Both boys and girls have habit of eating tobacco and gutkha.

4.2.3.3 Guardians Meeting

3 meetings were held to talk with guardians to explain them the objectives of the program. Such meetings were held separately in each residential cluster. Many important issues like the local conditions in the village, employment, education and other facilities available in the village, economic condition of the village residents, their health, political scenario, social custom and other relevant issues were discussed. The village residents were informed regarding the good and bad impact that its status as a SEZ may create in Bhal region. These were:

- Possibility of losing agriculture land to industrialists
- Need of educate / trained workers shall arise in future
- Children need to be educated because future is in their hands.
- Uneducated person may get work but they would be paid less and exploited.
- Industrialization shall increase pollution
- Labor force coming from other states might create problems
- One more ill impact of industrialization could be sexual exploitation of young women.

4.2.3.4 Selection of Kishor Mitra and Kishor Sakhi

Volunteers for this program are called Kishor Mitra and Kishor Sakhi – a young man and a young woman respectively. These are so far as possible young married couples who expressed willingness to work and devote time for the program activities. 20 Kishor Mitran and Kishor Sakhi were selected at the guardians meetings.

4.2.3.5 Staff TOT for Adolescent Program



As this has been a new initiative at Mahiti it was necessary to create awareness and develop the skills of the staff. A 3 day TOT program was organized during 7th to 10th September 2010 at Mahiti Campus. The issues covered under the training included cultivating understanding regarding adolescence, physical aspects of

adolescence, food and nutrition, qualities needed to work with adolescents, psychological changes occurring in a young person during adolescence, employment opportunities and development of skills of adolescents, sexually, sexual relationship, anemia, HIV – AIDS, PRA, gender equality, selection of adolescent boys and girls etc which were discussed in detail. The trainers were Nilamben Jani and Dr. Laxmiben Bhatt. The training helps the staff on how to carry the program forward.

4.3 Mobilization and Empowerment Program for Village Health & Sanitation Committee

Gujarat government has taken up an administrative decision to form health and sanitation committee in every village. The objectives of the decision were to enhance the outreach of health services and facilities at the village level and help village residents themselves to take decision and provide those services within their village. Such committees have been formed in the all villages in the state but they are still on paper. It has got fully implemented in villages and due to that the funds allocated for the purpose also are not utilized. The government has realized to carry out capacity building of VHSC in villages with the help of voluntary organizations working in health sector in villages. Considering that Health and Family Welfare Department of the State has got in an agreement with “Jan Swasthya Abhiyan – Gujarat” regarding capacity building program for VHSC. Foundation for Research in Health System – FRSH had been appointed as nodal agency for this task. FRHS had appointed Mahiti to carry out the program for VHSC in 116 villages in Dhandhuka, Barwala and Bhavnagar block.

4.3.1 Base Line Survey for the VHSC

Mahiti collected a list of VHSC from PHC and CHCs in these talukas including opening their bank accounts. The team members of Mahiti visited every village and each of the members in all the villages was informed that they were members of VHSC in their respective villages. This task was carried out during February to August 2009. Following this information regarding the sub centers run in the villages under PHC and their activities was collected during September to December 2009. In addition to this in coordination with concerned PHCs a few members in several VHSC were changed. The base line survey forms given by the FRSH were filled up for 116 villages and collected data was entered in the software.

4.3.2 Orientation of VHSC

After carrying out staff TOT half day orientation programs were carried out in every village. The objective was to create rapport with VHSC and explain to them the aim of training. The facilitators explain to VHSC members the objectives of the National Rural Health Mission under which VHSC are formed in every village. Moreover, the role and responsibilities of the VHSC, purpose and utilization of funds also were discussed.

The facilitators assured the VHSC to extend necessary cooperation and guidance to the VHSC. Along with this three members from the committees were selected for planning and imparting of training. Anganwadi and Asha workers working in the village were also included in this training. Nurses from PHCs and primary school teachers also had participated in the meeting.

Following issues emerged during the meetings with members:

- In all the villages it was found that the members of local VHSC were not aware of this inclusion in the committee.
- Female health workers spends the untied fund committee has no role in management of that fund.
- Furniture and other articles purchased from committee funds are used by individuals for this personal purpose. In majority of villages nurses distribute sarees purchased from committee funds.
- In a few PHCs in Dhandhuka local staff exploits female health workers and medical officers.
- In a few villages majority of members from Darbar community are appointed who never participate in any activity or program.
- There is only one nurse working in Bhadiyad PHC in Dhandhuka block. She is expected to work for all the villages. Her services are irregular.
- Due to the irregularity of the nurse, Asha workers have negative impact they are not paid their dues regularly.
- Staff is insufficient in every PHC as a result health service at village level is insufficient and irregular.

4.3.3 Capacity building workshop for the VHSC



Two day workshops were organized for village health and sanitation committees in coordination with concerned PHC for 116 committees. In all 16 workshops, 348 VHSC members were participated. Rapport was built up with female health workers and computer operators. PHC medical officers from every PHC also cooperated and the facilitators created clear awareness regarding the program. Health workers, asha workers and anganwadi workers also were included in the trainings.

Details of Capacity Building Training imparted to VHSC members

Ahmedabad District

PHC	Date of Training	Place of the Training	No. of Participants			
			Members	Asha	Anganwadi Workers	Nurse
Pipli	22/01/10 23/01/10	Training Hall, Mahiti Dholera	23	12	11	04
Bhadiyad	29/01/10 30/01/10	Training Hall, Mahiti Dholera	25	12	07	01
Pipli	17/02/10 18/02/10	Training Hall, Mahiti Dholera	26	04	07	04
Vagad	22/02/10 23/02/10	Training Hall, Mahiti Dholera	28	07	12	04
Barwala	15/02/10 16/02/10	Mahiti Branch Office, Barwala	22	12	07	05
Bhimnath	26/02/10 27/02/10	Mahiti Branch Office, Barwala	27	07	09	03
Dholera	26/02/10 27/02/10	Training Hall, Mahiti Dholera	29	18	12	03
Bhadiyad	09/03/10 10/03/10	Training Hall, Mahiti Dholera	23	06	07	03
Dholera	18/03/10 19/03/10	Training Hall, Mahiti Dholera	18	06	05	02
Vagad	22/03/10 24/03/10	Training Hall, Mahiti Dholera	23	06	07	03
Vagad	27/03/10 28/03/10	Training Hall, Mahiti Dholera	20	05	05	03

Bhavnagar district

PHC	Date of Training	Place of the Training	No. of Participants			
			Members	Asha	Anganwadi Workers	Nurse
Nari	18/02/10 19/02/10	PHC, Nari	15	10	05	0 2
Nari	25/02/10 26/02/10	PHC, Nari	20	05	05	0 1
Bhumbhali	18/03/10 19/03/10	PHC, Bhandariya	30	10	10	12
Undavi	22/03/10 23/03/10	PHC Undavi	25	05	05	10
Nari	15/03/10 16/03/10	PHC Nari	15	05	05	05
Nari	10/03/10 11/03/10	PHC Nari	20	05	05	03
Nari	13/03/10 14/03/10	PHC Nari	17	02	01	01

Issues that emerged during the VHSC training:

- Anganwadi workers also have to work to go to each house and take children to the center. Due to this dual responsibility they can not pay sufficient attention to their anganwadi and children.
- Asha workers and village midwives do not get necessary cooperation from PHC when they take patient for institutional delivery.
- Due to absence of gynecologists and facilities for caesarean operation the expectant mothers and their families have to face many worries and problems.
- Asha workers are paid their due monetary return after deduction and payment is very meager. Quite often the work vouchers are filled up with writings with a pencil.
- The funds of the committees are handled by the medical officers and female health workers. The committees are kept in darkness. The resolutions are written down after the actions are carried out.
- Financial incentive under Janani Suraksha Sahay payable at the birth of the child is paid after a lapse of 5 to 7 months.
- In Bhavnagar district Janani Suraksha Sahay is paid by cheque causing inconvenience to beneficiaries who are often from BPL families.

Impact of training imparted to VHSC

- After joining of the training female health workers has become positive regarding the funds.
- After receiving explanation regarding funds allocated to VHSC it has been assured that now onwards funds shall be utilized by keeping the committee in confidence.
- Female health workers have shown willingness to help Asha workers to be effective and help them get proper compensation.
- VHSC in villages have started holding meetings regularly.
- They demand explanations regarding the funds to the nurses.
- Village health committee members have started taking initiative on sanitation issues in the village. The remains present on Mamta Day.
- The training has enhanced the knowledge and information level of the committee members, ash workers and anganwadi workers.

4.4 HIV / AIDS awareness program for the SHG leaders

Mahiti has taken initiative to create awareness regarding a new issue i.e. HIV / AIDS. We have started working actively on this issue last two years. There has been an increase in the number of HIV positive patients in Gujarat. Gujarat State AIDS Control Society – GSACS carries out intensive efforts to create awareness among people, prevention of spread of HIV / AIDS and extending proper and timely treatment to the victims. Mahiti has participated in these efforts. Mahiti has started HIV / AIDS awareness program with single male migrants working in Changodar industrial area near Ahmedabad. It has been found that this disease has started spreading in rural areas also because men who go to cities in search of work and often become victims due to lack of awareness and then carry it to their wives in villages. Moreover, the patriarchal social structure in our society grants a kind of license to have extramarital relationships to men and women who are socially at a lower strata become victims of HIV even though they are in single partner relationship.

As it has been recently found there has been an increase in the number of women victims of HIV infection. Gujarat state AIDS control society has initiated the approach of creating awareness among rural women regarding HIV / AIDS. The society has developed a special training for rural self help groups leaders and number of organization working with women have been requested to participate in this program.

GSACS has given the responsibility to Mahiti to carrying out this training program to SHG group leaders in Ahmedabad and Bhavnagar districts. Under this program, 400 SHG group leaders from Dhandhuka, Barwala, Dholka talukas in Ahmedabad district and 500 SHGs group leaders from Bhavnagar district shall be imparted HIV / AIDS awareness training by Mahiti.

Following the training these women leaders shall create awareness regarding HIV / AIDS to illiterate and poor women and young girls and also young men in their villages. These women leaders also help any patients having symptoms of this illness to get proper treatment.

4.4.1 Training of Trainers (TOT) for HIV / AIDS training for the SHG group leaders

A training of trainers was organized by GSACS at Ahmedabad during October 2009. This three day TOT was attended by 08 team members from Mahiti. Training included detailed information on HIV / AIDS infection, the way it spreads and how HIV infection develops as AIDS was given by expert doctors. Moreover, how HIV /

AIDSA is connected with other sexually transmitted diseases and how HIV / AIDS infection can be prevented also was discussed. The participants were also informed how an infected person can live normal life, safe sex, rising number of infected women patients and patriarchal values related to this etc. The participants were explained how SHG group leaders can play an effective role in this program. These issues were discussed in detail. So that each participants can carry over the training at grass root level

4.4.2 One day Workshop for SHG Leaders



Following the training received by our team members through GSACS, Mahiti training team made presentation to impart this training to SHG leaders. A power point presentation was prepared and training material for each session was prepared in easy language accompanied by visuals. The trainings were planned for cluster wise villages. As 900 women leaders were to be trained they were divided in groups of 50 participants each totaling to 18 trainings. 08 of these trainings were conducted for Ahmedabad district and 10 for Bhavnagar district. We thought that if representatives from local PHCs and ICTC centers joined the training it could be more effective and the concerned centers were informed by letters. The representatives of these centers consulted to participate and assist in imparting the training. The doctors also explained the problem well and assured to cooperate in future. Mahiti's team continued follow up of the participant group leaders and persuaded the group leaders to join the training. As a result of these

intensive efforts women leaders joined the training. 15 such trainings were organized during November and December 2009. In Ahmedabad district 390 women leaders participated against the target of 400 whereas in Bhavnagar district 575 women leaders were participated against the target of 500. Thus 975 women from both districts received training.

Details of Training Organized in Ahmedabad district

No	Date of Training	Place of the Training	Participants	Resource Persons from Government Departments
1	05/11/2009	Mahiti Campus, Dholera	50	Dr. Rasmin Kalasava, Dr. Satish Solanki from PHC Dholera, Ms. Kailashben ORW, ICTC Dhandhuka
2	06/11/2009	St. Yosef Institute, Vataman	89	Dr. Gupta Medical Officer, PHC, Vataman, Mr. Khoduma ORW, ICTC, Dholka
3	10/11/2009	Mahiti Branch Office, Barwala	77	Mr. Dipen Pandya, Counsellor, ICTC, Barwala, Manjula Mundhava Female Health Workers, PHC Barwla
4	11/11/2009	Mahiti Branch Office, Barwala	49	Mr. Dipen Pandya, Counsellor, ICTC, Barwala, Manjula Mundhava Female Health Workers, PHC Barwla
5	27/11/2009	Mahiti Campus, Dholera	46	Ms. Kailash Makwana, ORW, ICTC, Dhandhuka
6	15/12/2009	Mahiti Campus, Dholera	79	Medial Officer, Dholera PHC
Total Participants			390	

Details of Training Organized in Bhavnagar district

No	Date of Training	Place of the Training	Participants	Resource Persons from Government Departments
01	12/11/2009	PHC Nari	66	Vasudevbbhai, Supervisor, PHC, Nari
02	13/11/2009	PHC Nari	76	Vandanaben, Medical Officer, PHC Nari
03	25/11/2009	PHC Nari	58	Atul Vyas, District TB Control Center, Bhavnagar
04	26/11/2009	PHC Nari	59	Rajubhai and Pareshbhai from Sardar Patel Snatak Mitra Mandal, Bhavnagar
05	03/12/2009	PHC Nari	72	Atul Vyas, District TB Control Center, Bhavnagar Vasudevbbhai, Supervisor, PHC, Nari
06	17/12/2009	Utthan Akawana, Bhavnagar	52	Atul Vyas, District TB Control Center, Bhavnagar
07	22/12/2009	PHC Nari	72	Atul Vyas, District TB Control Center, Bhavnagar
08	24/12/2009	Navjyot Mahila Vikas Mandal, Tatam, Botad	57	
09	26/12/2009	PHC Nari	63	Atul Vyas, District TB Control Center, Bhavnagar
Total Participants			575	



Impact of HIV / AIDS awareness training program

- Women from backward villages in Bhal area heard the name of HIV / AIDS for the first time.
- Women learnt about sexually transmitted diseases and expressed willingness to be more careful.
- Several participants know that HIV / AIDS is but they were not serious about that.
- The participants were informed about the efforts made by the government and facilities available for HIV patients that helped them to know how to help a person infected by HIV / AIDS.
- A few participants shared their experiences about HIV / AIDS infected persons in their village. They expressed sorrow to have treated them with insensitivity.
- The officers from health department and ICTC representative remained present at the training. As rural women leaders have got acquainted with them it will be easier to extend health services up to village level.

4.5 Women Empowerment through Micro Finance

Since its inception Mahiti has been providing impetus to savings and credit activities by forming women groups. As we have already discussed this area is a clutches of moneylender – land owners and they control the poor communities by first encouraging borrowing and then exploiting the poor through repayment pressures. Especially, women have to bear the brunt of such exploitation. They moneylenders grab the land of poor in lieu of their borrowings. Mahiti has been encouraging savings and credit activities to address this issue and has achieved remarkable success too. Women through these activities have successfully liberated their families by join small savings and credit activities.

As time passed it was felt that these were a need for alternative financial structure which is easily accessible to women and owned by them because women find it quite difficult to get credit from nationalized banks. The process is also difficult for rural women. This is a disappointing truth.

It was in 2001 when Mahiti felt that there should a structure which gives ownership to women in its true sense. Which works on democratic value and profit is shared equally to all the members. Without losing much time, Mahiti formed two administrative clusters in Ahmedabad and Bhavnagar districts and set up two cooperative societies in each district and got the societies registered. They were named “Bhal Mahila Bachat ane Dhiran Sahakari Mandali, Dholera and “Bhal Mahila Jagruti Bachat ane Dhiran Sahakari Mandali, Kala Talav, Bhavnagar. Efforts were made to consolidate all the women’s groups in these societies. Presently, both these cooperatives are going through the phase of expand its outreach and financial access so that they can be sustainable and emerge as a regional level sustainable small micro finance institution – women’s bank.

4.5.1 Capacity building of women’s savings and credit societies

Mahiti’s aims to form these societies as a strong micro finance institution at the regional level so that people especially women can be free from the moneylenders’ clutches and have a better socio economic status. To fulfill this aim it is imperative to empower women through trainings like spread of micro finance activity, laws of cooperative society, policy matters, accounts training, management and supervision of society, roles and

responsibilities of executive committee of the cooperatives, leadership development, gender sensitization, providing impetus to economic activities etc. In addition to these leaders of cooperatives are imparted training on various topics. During this year, only the leaders of new savings and credit groups and office bearers of the society were given training.

Date of Training	Place of the Training	Name of the Training	Resource Person	Topics Covered
29.06.2009 To 30-06-.2009	Doliya	Training for the Leaders of New SHGs	Ms. Laxmiben Desai Jayaben Jadav	<ul style="list-style-type: none"> Objectives of cooperatives How Cooperative works Roles & Responsibilities as SHG leaders
17-10-2009	Dholera	Training for the Office Bearers of the Cooperative (President, Vice President and Cooperative staff)	Harsidaben Shah	<ul style="list-style-type: none"> Record Keeping Understanding Books of Accounts Cooperative Management Aspects

4.5.2 Financial Condition and Progress of the both the Cooperatives

No	Particulars	Status as on 31-03-2009		Status as on 31-03-2009		Increase during the Year		Status as on 31-03-10
		Ahm	Bhav	Ahm	Bhav	Ahm	Bhav	
1	2	3	4	5	6	7=5-3	8=6-4	9=5+6
1	Villages	59	28	60	30	1	2	90
2	Women's Membership	5443	2389	5735	3013	292	624	8748
3	No. of SHGs	246	96	260	114	14	18	374
4	Share Capital	608060	288470	665590	380740	57530	92270	1046330
5	Total Savings	6904843	1936750	8482284	3320468	1577441	1383718	11802752
6	Total No. of Loanee	7738	1599	8736	3047	998	1448	11783
7	Loan Outstanding	9156388	1936750	1015831	2737942	-8140557	801192	3753773
8	Fixed Deposit by Coop.	0	300000	0	0	0	-300000	0
9	Members' Fixed Deposit	213800	514330	514330	10000	300530	-504330	524330
10	Interest on Credit	784162	430693	1184688	299825	400526	-130868	1484513
11	Income – Status	827708	236649	1201070	299825	373362	63176	1500895
12	Expenditure – Status	673930	147359	882336	273665	208406	126306	1156001
13	Profit - Status	153778	89290	318734	82031	164956	-7259	400765

4.5.3 Sector Wise Utilization of Credit during the year

The following table shows how the members have utilized the credit extended to them during the year. This year, credit was extended to 1932 members for various purposes. Among these purchase of agriculture products, seeds and agriculture equipments had a major share following which comes small income generating activities. Now women have realized the importance of education and many ask for credit for this purpose also. With increase in credit women's economic and social capacities also have enhanced. Both the Ahmedabad and Bhavnagar cooperatives manage themselves including bearing their administrative expenses. Up to previous year, Bhavnagar cooperative could bear 65 % of its expenses but this year situation has improved for good.

Objective of Loan	Ahmedabad	Bhavnagar	Total No. of Loans
	Cooperative	Cooperative	
	No. of Loan	No. of Loan	
Children's Education	26	97	123
Land Redemption	8	8	16
Tailoring Machine	4	32	36
Flour Mill	6	12	18
Provision Store	9	38	47
Other Loan		177	177

Objective of Loan	Ahmedabad	Bhavnagar	Total No. of Loans
	Cooperative	Cooperative	
	No. of Loan	No. of Loan	
Vegetable Shop	6	14	20
Animal Husbandry	8	56	64
Agriculture Equipment	32	99	131
Debt Repayment	100	0	100
House Repairing	35	149	184
Health	28	40	68
Edible Oil Purchase	514	0	514
Rice Purchase	64	0	64
Seed Purchase		257	257
Social Occasion	12	8	20
Carpentry Work		5	5
Saree, Cutlory Shop	5	0	5
Sanitation Construction	7	3	10
Food Grains Purchase	66	0	66
Diamond Polishing	4	3	7
Total Loans	934	998	1932

4.5.4 Annual General Body Meeting of the Cooperatives



26th March 2010. In Bhavnagar district AGM 250 women were present whereas 750 women were present at Ahmedabad district AGM. Government officials and voluntary organizations also were invited. They appreciated Mahiti's efforts towards encouragement to savings and credit activities and expressed their views on women's issues. As per the cooperative act the annual accounts of the society also were presented at the AGM.

Every year, Mahiti organizes annual meet for the women in its work area with a view to raising awareness among women regarding their area level issues, development processes, government schemes and also enhance their involvement with the organization and sensitivity towards women's issues. This year, Bhavnagar district annual general meeting was held at Nari on 21st May 2009 and Ahmedabad District meeting was held at Dholera on



4.5.5 Marketing of Seeds and Essential Commodities

Bhal area has jowar, cotton and wheat as major crops. With an objective of provide good quality seeds and edible oil at reasonable rates to the members at their door step. Mahiti purchases these commodities in bulk from wholesale traders and supplies these to its members. This saves the members from unnecessary intervention of middle man and local traders. Moreover, as these commodities are supplied with part credit i.e. the member pays only half of the total amount and remaining half of the total within next six months. Members find it fairly convenient, this year Ahmedabad cooperative traded in seeds and Bhavnagar cooperative traded in edible oil as shown in the table below.

Particulars of Trading	District	Villages	Beneficiaries	Total Quantity
Trading of Jowar Seeds	Ahmedabad	22	257	12860 Kgs
Trading of Edible Oil	Bhavnagar	24	514	1297 Tins

4.5.6 Social Security Schemes

Mahiti has set linkages with Janshri Insurance Scheme and Jivan Madhur Scheme of Life Insurance Corporation of India on behalf of its members as a part of creating social security for its members. Both the cooperatives have become nodal agencies for the schemes. An insurance of Rs. 25,000/- is given with a premium of Rs. 200/- The insured person (insurance holder) has to pay Rs. 100/- and Government of India pays Rs. 100/- for each policy. The policy holder is covered with risks like natural death, death by accident, permanent disability etc. During this year, 50 women joined with Janashri Insurance Scheme and 70 women joined with Jivan Madhur Scheme.

4.5.7 Helping in Capacity building of other institutions

Mahiti has fairly vast experience in micro finance activity. Mahiti organizes exposure visits and trainings for other non government organizations and micro finance institutions to the leaders of cooperatives societies in Ahmedabad district with an aim to provide impetus to cooperative movement. Mahiti extend trainings to the organizations who need guidance and training for administration of cooperatives and SHGs groups.

No	Date of Exposure	Name of the Organization	Topics
1	27-04-2009	People's Learning Centre – Water & Sanitation Bhavnagar	Administrative Structures of the Cooperative
2	14-05-2009	Development Support Centre, Megharaj	How to transfer SHGs Federation in Cooperative
3	02-12-2009	Mahila Vikas Sangh – Dhangandhra	How to transfer SHGs Federation in Cooperative
4	30-12-2009	Ambuja Cement Foudnation, Kodinar	Formation of SHGs and its functioning

4.6 Natural Resource Development and Management

Most of Bhal region has alkaline saline soil with large cracks. Earthquake, floods due to excessive rains, tidal waves at sea coast and drought is common natural disasters here, seawater ingress has damaged the soil in coastal areas. Soil being saline and hard is virtually unproductive and can not even take rainwater. When it rains the water gets logged and never goes down in the soil making routine movement difficult for people. Small rivers like Sabarmati, Bhogavo, Sukhbhadar, Ghelo and Kalubhar flow through this region and merges with the Gult of Cambay. Average rain is 400 – 600 mili meters but most of the water flows into the sea. Owing to these adverse geographical and climate conditions livelihood systems here are very poor.

Vegetation is scare; only propolis Juliflora and Salvadoara persica grow here. About six decade back the sea coast here was covered with mangroves and vegetation like Salvadora and forage grow here is abundance but the camel owners from Kutch graze their cattle here and coastal vegetation growth got imbalanced. At present it is scare.

There have been a number of geographical climate changes in this region. Tidal waves have increased and so have sea water ingress and water logging. The rivers change their course quite often. Large creeks have developed near the sea coast and have reached up to cultivable land.

Mahiti has been working to address these issues through natural resource management and development activities. These efforts include soil conservation, soil improvement, drinking water resource management activities by organizing people's group and their insight and participation.

4.6.1 Soil conservation and soil improvement

Various activities have been taken up in this issue with cooperation of government and non government organization. Mahiti had implemented watershed development program during 1998 – 2002 at 11 villages in Bhavnagar taluka with financial assistance from DRDA under employment assurance scheme and during 2001 – 2006 in 6 villages of Dhandhuka taluka with financial assistance from DRDA, Ahmedabad.

During the period of this report, various water conservation activities like improvement of water inlet channel in village ponds, construction of protection wall around the village pond, deepening of ponds have been carried out in 3 villages such as Nani Boru, Jakhda, and Rampura in Dholka taluka. This shall prevent soil erosion in the fields around the ponds and village ponds will become stronger and this shape shall be maintained. The people having their houses around the ponds shall be safer. There is also a potential of developing a garden behind the wall of the ponds. Rs. 1,49,000/- have been spent for this wall. Rampura – Anandpura join watershed scheme also shall be completed soon. More physical work remains to be done which shall be carried out during the year as per the protocol of the project.

Details of Soil conservation and soil improvement activities

No	Details of Activities	Unit	Status of 31.3.2009			Progress of During Year			Status of 31.3.2010		
			Unit	Beneficiaries	Village	Unit	Beneficiaries	Village	Unit	Beneficiaries	Village
1	Farm Protection Bund	C.M.	355413	2360 farmers	21	--	--	--	355413	2360 farmers	21
2	Farm Pond (Individual)	No.	40	40 farmers	06	---	--	--	40	40 farmers	06
3	Ponds	No.	80	242 farmers	11	1	12 farmers	1	80	242 farmers	11
4	Check Dam Water Harvesting	No.	11	313 farmers	7	--	--	--	11	313 farmers	7
5	West weir	No.	27	232 farmer	11	--	--	--	27	232 farmer	11
6	Village Protection Bund	C.M.	52954	158 farmers	07	--	--	--	52954	158 farmers	07
7	Farm Protection Bund										
8	Inlet Channel	C.M.	13910	116 farmer	2	--	--	--	13910	116 farmer	3
9	Tree Plantation	Saplings	60000	--	22	--	--	--	60000	--	22
10	Mangrove Plantation	Hec.	500	Villagers	2				500	Villagers	2
11	Recharge Bore	No.	87	87 farmers	3	--	--	--	87	87 farmers	3
12	Demonstration Plot	No.	3	3 farmers	1	--	--	--	3	3 farmers	1
13	Gauchar Dev. Plot	Hec.	06	Villagers	4	--	--	--	06	Villagers	4
14	Protection Wall and Inlet Channel for Village Pond	No.	7	Village	4	3	3 Village	3	10	Village	7

4.6.2 Drinking Water Resource Management.

Mahiti has been working for drinking water issue in this are which is an issue of the serious concern looking to the geographical condition of the area. Till now, 21 rainwater harvesting plastic lined ponds have been constructed in 19 villages in cooperation with Utthan organization. These process is necessary here because in the arid, hard, saline soil in this region. The rainwater collected in the ponds turns saline within a few months. Moreover, 822 roof rainwater harvesting structure (tanks) have been constructed by Mahiti which has made more than 5774 people have fresh drinking water available in their homes. 19 village ponds in 17 villages have been deepened and repaired to increase their water holding capacity.

After many efforts by us Water and Sanitation Management Organization (WASMO) has selected Mahiti has an implementing support agency under Swajal Dhara Sector Reform Scheme and Coastal Area Development

Program in 15 villages of Barwala taluka for drinking water activities. Last year, this year 30 more villages have been included for implementation under Swajal Dhara Sector Reform scheme. Following paragraphs describe the activities in detail.

4.6.2.1 Coastal Area Development Program : Drinking Water Resource Management

Coastal Salinity Prevention Cell which is a joint venture of AKRSPI and Ambuja Cement Foundation and Sir Ratan Tata Trust. As a joint effort and with financial assistance from WASMO, CSPC and Sir Ratan Tata Trust, a program has been drawn out to implement a pilot project for drinking water and sanitation issues in 300 villages in Gujarat. At present, the program is being implemented in 15 villages of Dhandhuka taluka. The main objective of the program is to provide safe drinking water to people and make them self reliant in this regard. Activities like in – village water supply, water resource management and awareness creation regarding health and sanitation issue among people. Construction of toilets in the houses of poor, needy people has also been taken up as a part of these program activities.

In the previous year, only software activities and capacity building activities were carried out. These included holding gram sabhas, women’s meetings, PRA, base line survey, opening of bank accounts, preparation of scheme file. A number of hardware and software activities have been taken up. Technical scheme files have been prepared for 15 villages and pipelines have been set up in 11 villages. Among the 3 villages were the work has been completed. Water supply through pumping is maintained till the last located house in Sarasala and Buranpur village. Pipeline laying activity is in the last stage in Mingalpur village. Pipeline laying work is going on at different level in other villages.

The Table below gives a summary work carried out during period reporting.

No.	Activities	2008-09	2009-10	Covered Villages
Software Activities				
1	Introduction Meeting	15	-	15
2	Mahila Meeting	28	5	15
3	Gram Sabha	15	10	15
4	VWSC Formed	14	1	15
5	School Program	15	-	15
6	Village Action Plan PRA	5	10	15
7	WQT Formed	14	1	15
8	Baseline Survey	7	8	15
9	PRA	7	8	15
10	Exposure Tour	--	1	8
11	Bank A/C Open	--	15	15
12	Collection of Contribution 10%	--	15	15
12	Training VWSC	--	--	
>	Operation and Maintenance Training	--	1	15
>	Record Keeping Training	--	1	15
13	Final Audit	--	--	--
Hardware Activities				
1	Pipeline	--	4	4
2	Well Repairing and Recharge Work	--	--	--
3	Washing Ghat	--	--	--
4	Cattle Through	--	13	9
5	GSR - SUMP	--	4	4
6	Pump Room	--	6	6
7	Pumping Machinery	--	--	--
8	Toilet	--	218	3

Status of activities carried out under CADP

No.	Village	Total cost (amt in lakhs)	Sump	Pipeline (in M)	Cattle trough	Pumping M/C	Pump House	Overall progress
1	Rajpur	4.59	-	0%	1	0%	1	50%
2	Zankhi	4.14	-	1710	1	0%	1	75%
3	Mingalpur	17.71	1	OG	4	0%	OG	54%
4	Mahadevpura	9.94	-	-	OG	-	-	20%
5	Gandhipura	6.94	-	-	OG	-	-	20%
6	Rahatalav	6.48	1	OG	1	0%	1	52%
7	Khun	10.14	-	OG	-	-	-	25%
8	Gogla	5.05	-	2300	1	0%	1	75%
9	Kamatalav	5.61	-	0%	1	0%	0%	25%
10	Sarsala	6.33	0%	2765	1	0%	1	58%
11	Shela	5.49	-	-	OG	-	-	20%
12	NavagamKarna	5.05	-	0%	2	0%	1	50%
13	Buranpura	5.13	1	1760	1	0%	-	75%
14	Anadpura	4.61	1	-	-	-	-	80%
15	mundi	6.45	-	-	OG	-	-	20%
	15 villages	103.66	4	4	13		6	47%

Note: OG=Ongoing, % Percentage of progress for work, 0% Not Started Work

4.6.2.2 Coastal Area Development Program : Sanitation Activity

Along with drinking water storage distribution and development of new sources activities health and sanitation issues also has been covered under this program. As a part of health and sanitation activity a sanitation survey was carried out in 15 villages allocated by WASMO. It was found that 308 houses have toilets where as 2310 houses do not have that facility and they go to open places outside the villages in the backyard of their houses for natural calls. Out of these 2310 houses people from 1962 houses expressed that they would like to have toilets facilities in their homes but they did not have either money or did not have much awareness that defecating in an open space is harmful to sanitation. Mahiti put a proposal before CSPPC, WASMO to construct toilets in those houses. The proposal has been approved and permission has been granted to construct 1314 toilets in 8 villages – Buranpur, Mingalpur, Gogla, Rahtalav, Navagam Karna, Zanki, Shela and Kama Talav in the first phase. Along with this various activities have been taken up for awareness creation this includes holding village level meeting, explaining the scheme to the beneficiaries. Cooperation of DRDA has also been sought under its total sanitation campaign program. 208 toilets have been made up to March 2010.

4.6.2.3 Swajal Dhara Program – Barwala taluka

This remaining physical work in Barwala taluka Swajal Dhara Project has been almost completed. Only in 3 villages, construction of the high storage tank has not been completed. These shall be completed during the year 2010 – 11. 92 % of overall physical work has been completed. In many villages were doorstep water tap connections were not done and water storage facilities were not completed and pump rooms were not made or pumping machinery was not set up. People used to collect water whenever there was a supply of water from group water supply scheme. That created a number of problems. Now, village water committees have carried out all the necessary work to supply water to residents' doorsteps.

Status of Swaja Dhara Program – Barwala Taluka - Component-wise Physical Progress Report												
No	Village	Total cost (amt in lakhs)	ESR/ HGLR	Sump	Pipe line (in M)	Cattle trough	Washing ghat	Pumping M/C	Pump House	Open well repairing	R&R	Overall progress
1	Kapadiyali	12.88	-	1	2800	1	-	1	1	1	-	100%
2	Rojid	17.67	OG (60%)	-	4300	1	-	1	-	-	-	90%
3	Kundal	14.85	-	1	4200	1	1	1	1	-	1	100%
4	Devpura	12.63		1	2000	1	-	1	1	-	-	100%

No	Village	Total cost (amt in lakhs)	ESR/ HGLR	Sump	Pipe line (in M)	Cattle trough	Washing ghat	Pumping M/C	Pump House	Open well repairing	R&R	Overall progress
5	Ratanpur	12.47	-	1	1825	1	1	1	1	-	-	100%
6	Hebatpur	21.78	-	1	4400	1	-	1	1	-	-	100%
7	Bela	13.44	-	1	2900	-	1	1	1	-	-	100%
8	Sangasar	12.74	-	-	1500	1	1	-	1	-	1	100%
9	Nabhoy	11.27	-	1	1000	1	-	1	1	1	-	100%
10	Navda Juna	27.77	0%	0%	7850	1	-	0%	0%	-	-	35%
11	Sodhi	21.88	-	-	3800	1	-	-	-	-	-	100%
12	Vahiya	14.31	OG (40%)	-	4150	1	-	1	-	-	-	85%
13	Refda	13.74										
14	Ranpari	13.55	OG (40%)	-	2300	1	-	1	-	-	-	85%
15	Khamidana	10.73	-	1	1200	1	-	1	1	-	-	100%
	Total	231.70	4	8	14	13	4	12	10	2	2	92%

Summary of work carried out under above mentioned program

No.	Activities	2008-09	2009-10	Covered Villages
Software Activities				
1	Maihla Meeting	31	5	15
2	Gram Sabha	30	10	15
Hardware Activities				
1	Pipeline	14	--	14 village
2	Well Repairing, Recharge Work	1	3	4
4	Washing Ghat	1	3	4
5	ESR – Over head Tank	--	3 ongoing	3
6	Cattle Through	10	3	13
7	GSR Sump	--	8	8
8	Pump Room	--	9	9
9	Pumping Machinery	--	11	11

4.6.2.4 Swajal Dhara – Sector Reform Scheme – Dhandhuka Taluka



As mentioned earlier having the experience of swajaldhara program implementation in Barwala taluka, Mahiti was assigned by WASMO the implementation of Swajaldhara program in 15 backward village in Dhandhuka taluka. This activity was taken up during last four months of this year and so far Mahiti has carried out introductory meeting. Women's meetings, formation of water committees in villages, Technical survey work, opening of bank accounts in the villages. In addition to these technical scheme files for six villages were submitted to WASMO. As the baseline survey of a out of 15 allocated villages indicates majority of villages are supplied water by Dholera and Pipli group water supply scheme by GWSSB. The water supply is insufficient and problem like leakages in

pipeline clogging of roots of meets in pipes, choking up of lines etc. When water is supplied with higher pressure pipelines break the sumps constructed to store water are hardly ever used and lie in dilapidated condition. Cattle drink water from villages' ponds, water troughs are broken. As pumping system is not well set up people rush to get water at the open storage tank whenever water is supplied. The soil strata are saline. There are wells which contain fresh water for a few months during monsoon. The objectives of program are to help people get sufficient water; water wastage can be prevented cleanliness is maintained and supply water village residents' doorsteps.

The table below gives a summary work carried out during period reporting.

No.	Village Name	No.	Software activities	2009-10	Covered villages
1	Ratanpur	1	Introduction Meeting	15	15
2	Cher	2	Mahila Meeting	11	11
3	Bhimtalav	3	Gram Sabha	9	9
4	Kadipur	4	Formed of VWSC	9	9
5	Kamiyala	5	School Program	10	10
6	Ambali	6	Village Action Plan	6	6
7	Pachi	7	Formed of WQT	0	0
8	Dholera	8	Base line Survey & PRA	9	9
9	Bavaliyari	9	Exposure Tour	0	0
10	Kashindra	10	Bank A/C Open	6	6
11	Bhangadh	11	Collection of Contribution 10%	3	3
12	Otariya	12	Training VWSC	--	--
13	Valinda	>	Operation and maintenance Training	--	--
14	Pachchham	>	Record Keeping Training	--	--
15	Kothadiya	13	Final Audit	--	--

4.6.2.5 Swajaldhara Programme – Dholka taluka

As in Barwala and Dhandhuka talukas Mahiti has been assigned by WASMO the work of drinking water facility management and awareness program in Vataman Chokdi and other 15 villages in Dholka taluka. This program was assigned to Mahiti during last four months of the previous year. During this period are have carried out activities like introductory meetings, women's meetings formation of water committee, survey, Gramsabhas, opening of bank accounts in the villages. Database for six villages also was prepared and technical survey file has been submitted to WASMO for approval but people's contribution could not be collected till the district level Swajaldhara scheme meeting was held so it was decide to approve the files in next meeting.



The baseline survey of 11 villages' show that these villages get water supply from Pariej-Kaneval Narmada group water scheme by GWSSB but people do not get sufficient water. The pipelines are broken or leaking and as a result water does not reach with enough pressure. People resort to various alternatives like collecting water from the leakage point, setting up submersible motor or get water from local well when there is no pipeline water supply.

Well water in Samani, Bholad, Javaraj, Moti Boru, Bhurkhi and Raipur villages are saline. Only the water collected during monsoon months is fresh. Water supplied by GWSSB is not given to Bhurkhi and Ganeshar villages. In Bhurkhi village water supply pipelines cannot be set up from Javaraj village because a Railway track is lying between the two villages. In Ganeshar village the Bore made in village pond has fresh water so they have not asked for water supply from GWSSB. The well waters in Ganeshar, Dholi, Arnej, Rampura, Anandpura and Jakhada villages have fresh water so it has been planned to repair the wells in these villages as a part of local resource developments work.

In several villages in this taluka doorstep pipelines are already there. As the pumping and machinery system is not yet complete women in the village have to fetch water from open storage tank whenever water is supplied. This creates much chaos and problems. This program has been initiated with the objective of supplying sufficient water to people, setting up distribution system by pumping, prevent wastage of drinking water and maintain cleanliness and sanitation and above all supplying water to village residents' doorsteps. Village action plan for six villages has been prepared out of these pipelines laying work in the villages Moti Boru and Samani.

The Table below gives summary of the work carried out during period of reporting.

No.	Village Name	No.	Software activities	2009-10	Covered villages
1	Rampura	1	Introduction Meeting	15	15
2	Anandpura	2	Mahila Meeting	13	13
3	Samani	3	Gram Sabha	14	12
4	Javaraj	4	Formed of VWSC	11	11
5	Arnej	5	School Program	3	3
6	Raipur	6	Village Action Plan	6	6
7	Dholi	7	Formed of WQT	11	11
8	Jakhada	8	Base line Survey & PRA	11	11
9	Ganeshar	9	Exposure Tour	0	0
10	Moti Boru	10	Bank A/C Open	1	1
11	Kharanti	11	Collection of Contribution 10%	0	0
12	Kaliyapura	12	Training VWSC	-	--
13	Bhurakhi	>	Operation and Maintenance Training	-	--
14	Simej	>	Record Keeping Training	-	--
15	Bholad	13	Final Audit	-	

4.6.3 Construction of Roof Rain Water Storage Tanks Program

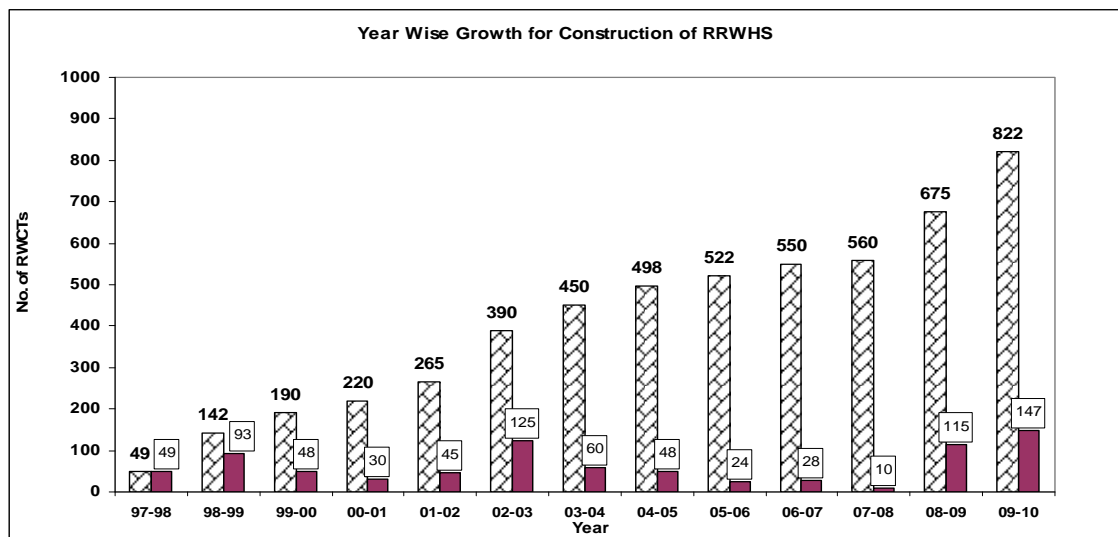
The best alternative for solution of drinking water scarcity in Bhal region is to collect rainwater in storage tanks. With a view to help people to have this system Mahiti had placed a proposal to constructed 262 Roof Rain storage tanks in five villages – Rajpur, Gogla, Zankhi, Kamatalav and Navagam Karna before WASMO. These villages in Coastal areas in Dhandhuka taluka of Ahmedabad district face perpetual drinking water scarcity. The proposal was accepted by WASMO. Under this scheme families living below poverty line are expected to pay 30% of the total expense of construction of the tank and people above BPL are expected to pay 50% of the total expense of construction of the tank.

During last year 115 RRWHS tanks were constructed. This year remaining 147 RRWHS also have been constructed the table below gives the details.

No.	Village Name	Total allocated RRWHS	Constructed RRWHS During 2008-09	Constructed RRWHS During 2009-10	Total Constructed RRWHS
1	Rajpur	30	30	--	30
2	Zankhi	56	30	26	56
3	Gogla	55	55	--	55
4	Kamatalav	75	-	75	75
5	Navagam karna	46	-	46	46
Total		262	115	147	262

Having completed the work under previous proposal one more proposal for construction of 407 RRWHS tanks in five more villages has been prepared and submitted to WASMO. This proposal includes Mingalpur, Rahtalav, Khun, Mahadvepura and Sangasar villages in the same area. WASMO has granted permission for construction of 100 RRWHS tanks and Mahiti has started planning to construct RRWHS tanks in Mingalpur and Rahtalav villages.

The year wise information graphs below show that Mahiti has constructed 822 RRWHS tanks in Bhal area with financial assistance from various donor agencies GWSSB, CAPART, UNDP, DRDA, WASMO and other agencies.



Details of Drinking Water and Sanitation Work

No.	Activity		Status of 31.3.2009			During the year			Status of 31.3.2010		
			Unit	Bene.	Village	Unit	Bene.	Village	Unit	Bene.	Village
1	RRWHS	No.	675	675 families	24	147	147 families	5	822	822 families	24
2	Plastic lined Pond (by Utthan-Mahiti)	No.	22	2750 families	19	--	--	--	22	2750 families	19
3	Village Pond	No.	19	Village	17	--	--	--	19	Village	17
4	Commnity RRWHS	No.	06	Village	3	--	--	--	06	Village	3
5	Hand Pump	No.	05	"	1	--	--	--	05	"	1
6	Well Repairing	No.	2	Village	2	--	--	--	2	Village	2
7	Bore well	No.	1	Village	1	--	--	--	1	Village	1
8	Toilets	No.	292	292 families	5	--	--	--	292	292 families	5
9	Soak pits	No.	204	204 families	4	--	--	--	204	204 families	4

Details of Capacity Building Training regarding Natural Resource Management

No.	Type of Training	Status of 31.3.2009		During the Year		Status of 31.3.2010	
		Partici-ate	Covered villages	Partici-ate	Covered villages	Partici-ate	Covered villages
1	User Groups Training for Watershed Dev. Program	35	24	--	--	35	24
2	Exposure Tour for NRM	16	30	--	--	16	30
3	Gram Sabhas for Drinking water facilities Management	133	64	20	20	153	84
4	Workshop of Sarpanchs for Awareness of Swajal dhar Program	6	28	1	5	7	33
5	Training of O & M and Monitoring	36	53	2	15	38	53
6	Drinking water source Testing Program	32	45	2	30	34	45

Photographs of Natural Resource Management



Training of Technical Guidance



Distribution of Water Testing Kit



O & M Training of Water committee



Account Training of Water committee

4.7 Targeted Intervention Program for Single Male Industrial Migrant Workers in the context of HIV/AIDS.

Last year Mahiti took a new initiative and started working with in changodar industrial estate situated near Ahmedabad city. This is a well developed industrial estate having very good industrial and employment opportunities but the sanitation issues here are quite serious. There is no system for outlet of polluted water, garbage is strewn all around the place, and people have no awareness regarding cleanliness because most of the residents are uneducated. The worker from other states in India in a very large member arrives here for work. They are constantly busy with hard manual work away from their families. They are careless towards their personal health and healthcare facilities are meager. The health centre set up by government is located at a little distance and there no other good hospital or a dispensary nearby. Residents who are mainly laborers suffer from a number of illnesses take waterborne illnesses, skin disease, hydrosol problems, mental upsets and sexually transmitted diseases. The residents are mainly young men living alone and seek sexual satisfaction through unprotected sexual relationships. This is a dangerous situation and there are many possibilities of spread of HIV/AIDS and other contagious diseases.

Activities taken up during the year

4.7.1 One to one contact

Mahiti has initiated a noble program of HIV/AIDS awareness rising since January 2009. This program taken up in collaboration with Gujarat State AIDS Control Society and National AIDS Control Society has been named TI (Target Group Intervention) covers single migrant workers working in industrial areas from Sarkhej to Matoda Patia located near Ahmedabad city. Mahiti implements one of the AIDS control and prevention program drawn out by GSACS and NACO under which outreach workers and volunteer peer leaders impart, share information related to AIDS to migrant workers. Every month 2500 to 3000 workers are covered under this 'one to one contact' program. The volunteers and leaders who are from among the workers' group explain to the workers the causes of infection of HIV/AIDS, symptoms of HIV/AIDS and other sexual transmitted diseases, preventive action, places where the infected persons can go for help etc.

4.7.2 Condom Demonstration

Moreover, condom demonstration also is taken up so that young men can know the proper way of using a condom. The information material prepared in local language as distributed to workers. Our health camps and street plays are organized every month counseling regarding safe sex, high risk behavior and testing and treatment for HIV/AIDS and other STDs also is imparted to needy persons.

Details of activities taken up during the year are given below:

4.7.3 Health Camp

Mahiti organized 37 health camps during July 2009 to April 2010 and 1819 single male migrant workers working in different companies and factories were covered. Their health check up were carried out and they were given treatment for fever, cold, cough, itching, hand and feet ache, headache, waist and stomach pain, diarrhea. Moreover, 107 patients of STD were treated and cured. Many cases of hydrosol are found in this area and those cases are referred to sola civil hospital. A few patients have been operated.

4.7.4 HIV testing and ICTC referral

During March 2009 to April 2010 1554 migrant workers and other 101 persons went through HIV testing at HIV testing camps. Out of these 6 persons have been positive, 3 persons are giving through ART treatment at ART center in Ahmedabad. There persons in spite of having continuous follow up and counseling have left for their home. Every person having HIV positive also are tested for tuberculoses and they are given tuberculoses medicines by the worker of the organization for tuberculoses positive patients are regularly counseled and administered medicines. Moreover, if a HIV positive person finds any difficulty in starting treatment at ART contact the organization worker accompanies him to the centre and assists in getting treatment.

4.7.5 Street play

During this year 16 street plays were performed covering issues like AIDS, SIDS and other illnesses and problems out different place in Changodar area. These plays are prepared covering the conditions in which the migrant worker live and their level of comprehension. The plays are performed in Hindi language. Communication material related to these issues and also condoms are distributed during the performance. The audience interaction sessions also are held at the end of play.

4.7.6 Advocacy meeting

Fair advocacy meetings were held during the year with the stakeholder, condom depo holder, and volunteer peer leader. Issues like enhancing the effectiveness and outreach of the program, seeking people's cooperation, persuading owners to cooperate were discussing. The workers volunteers share their experiences and problems at the meeting.



Problems faces in the implementation of the program and their solutions :

Initially it was quite difficult. The main problem was to have access and entry into the industrial area and estates. Local residents, Leaders, supervisors, contractors, Managers and other institutional persons were contacted and persuaded to cooperate. When they go to convinced of the objectives of the program they cooperated. Another problem was of availability of medical professionals to work in HIV testing and health check up camps MBBS degree holders could not be found but BAMS, BHMS degree holders were available but their time could not be adjusted. One more problem was of carrying out HIV testing at the camp because the migrant workers who have only one day off duty proper taking rest as have outing and shopping. Moreover, all the ICTC centers were 12 to 15 kms away from the area and it was not possible to get the workers go all the way there to get themselves tested. Them ICTC counselor and lab technicians were sent to camp base with cooperation of District AIDS Prevention and control unit – DAPCU and GSACS and the problem was solved with joint efforts.

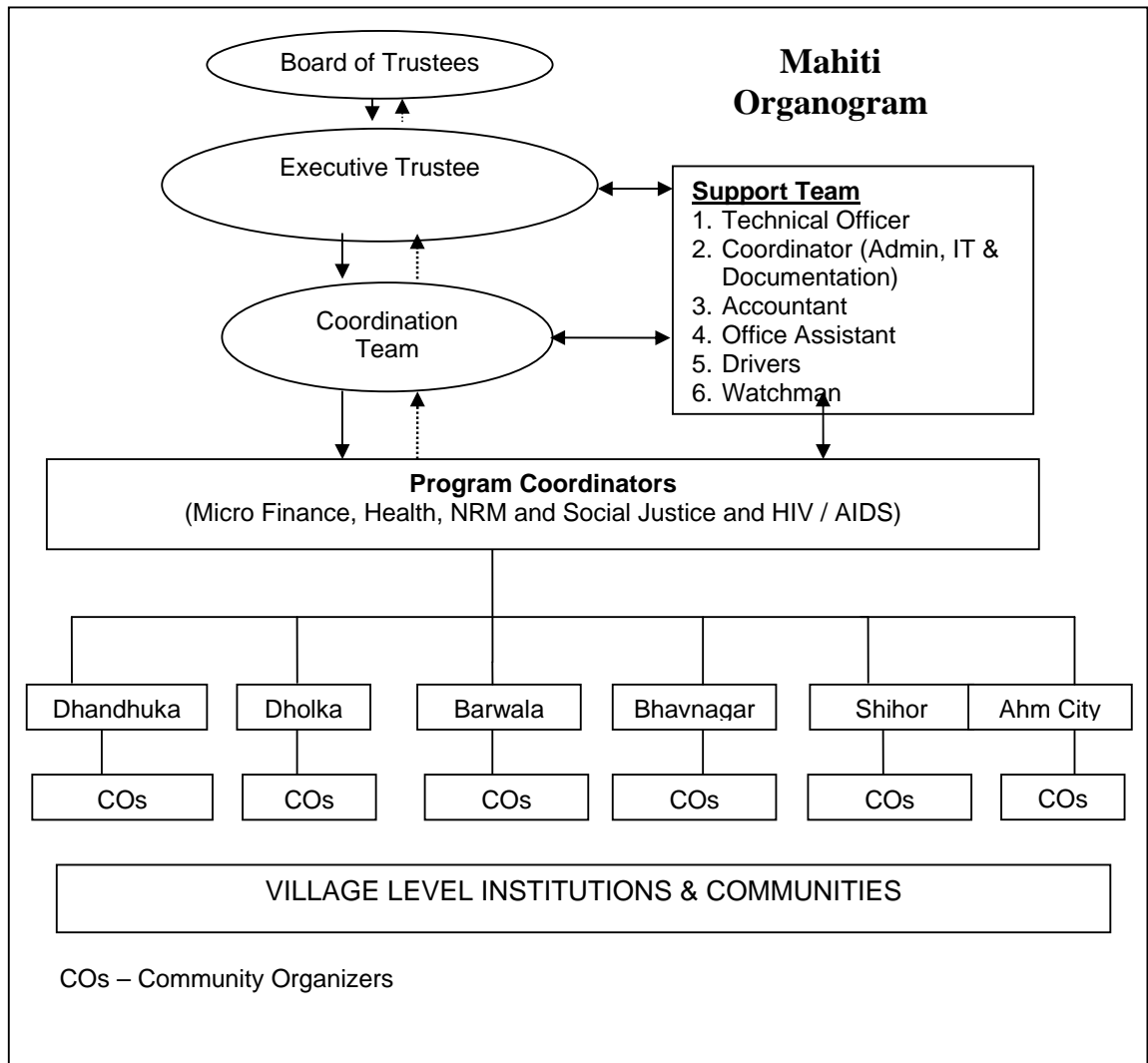
Section B Internal Organization

5 Organizational Internal Matter

5.1 Role of the Board Members

The board members assist the organization for the oral, legal, long term direction and sustenance of the organization also if any serious issue arises in the organization. The trustees also participate in the activities of the organization as and when need arises and provide guidance. Thus all the trustees show proactive interest in the organization and make efforts to make the organization strong and efficient. Every year, the accounts and progress report of the organization are place before the trustees and further action is taking keeping their suggestions in view.

5.2 Organizational Structure



5.3 Decision Making Processes at the Organization

A coordination team has been formed at the organization level which includes executive director and other senior staff members and program coordinators. This handles planning, implementation, administration, documentation and capacity building matters of the organization. This team meets once every month and decisions are taken collectively. The planning of the programs is carried out by the program team.

The decisions regarding important activities are taken at community level. All planning is drawn out from the input received from discussion of issues related to people. The leaders of women's cooperatives and activists contribute in these discussions. The input received is presented to the coordination committee and is implemented according to their guidance. The decision making process at different levels is presented in the table below.

Who	When	Functions and decisions
Governing Board (Board of Trustees)	Twice a year	<ul style="list-style-type: none"> Organizational policy level discussions and decisions Approval of plans / projects to be submitted to funding agencies Approval of annual plan and budget Approval of annual financial audited reports
Executive Trustee		<ul style="list-style-type: none"> Day to day financial decisions (investments, expenditure, budget approvals, & other approvals) Personnel matters Planning, Monitoring & reviews
Coordination team	Monthly	<ul style="list-style-type: none"> Review of program implementation Staff related issues Finance and accounts related matters Planning and monitoring
Program Team	Monthly	<ul style="list-style-type: none"> Monthly planning of individual staff Process discussion of specific issues / activities
Staff members	Monthly	<ul style="list-style-type: none"> Overall monthly plan Execution and recording activities Institutional issues and resolutions

Due to certain unavoidable circumstances we called board meeting only once in the year on 10th September 2009 at Ahmedabad. 7 out of 8 board members attended the meeting. All the activities and accounts of the organization with minute details were presented before the members. A brief presentation of balance sheet and activities was appreciated by the members. They also took note of the improvement in documentation. The annual report and accounts were unanimously approved. Planning for the next year also was presented before the board members. There has not been any change in the members of board of trustees during the year.

5.4 Human Resource Management and Development

There have been fairly notable changes in the staff turnover during this year. 6 staff members left the organization for different reasons and 5 new members have been appointed. Ms. Geetaben Vaghela and Ms. Hansaben Makawana who were senior staff members left the organization because they got government jobs. Their absence has had effected our activities. Hansaben who worked as coordinator in our health care program left and her going hampered the implementation of the program because she left just after she received training as a trainer for our new initiative of program for adolescents. Appointing a new person and training her for the work takes much time. The details of staff members who have left and those who have appointed are given in the table below.

Details of Staff left the organization during the year

No	Name of the member	Designation	Reasons for leaving the organization
1	Hansaben Makwana	Program Coordinator	She wants to put his child in the school and there is no English medium school in Dholera therefore she left the organization
2	Manubhai Vegda	Community Organizer	He got government job therefore he left the organization
3	Gitaben Vaghela	Program Coordinator	She got the government job therefore he left the organization
4	Pradip Dulera	Office Assistant	He left the organization because he wants to help her mother as sarpanch's work
5	Varshaben Parmar	Counsellor	Due to pregnancy she resigned from the organization
6	Chandrakant Baraiya	Community Organizer	He got job in other organization

New Staff Recruitment during the year

No	Name of the Member	Designation	New Recruitment
01	Vipul Chauhan	Program Coordinator	Recruited as program coordinator in health program
02	Ramesh Parmar	Office Assistant	Recruited as office assistant
03	Manojbhai Parmar	Outreach Worker	Recruited in Changodar office
04	Jyotsanaben Makwana	Community Organizer	Recruited in health program as community organizer
05	Kunal Makawana	Counsellor	Recruited in Changodar office

Looking to this there has been much staff turnover during this year. At present our staff strength is 19 in which 14 are program staff members and 5 are administrative staff members. The table indicates that the number of women staff members has reduced.

5.5 Staff Profile

No	Name of the Employee	Designation	Educational Qualification
1	Devuben Pandya	Managing Trustee	7th Pass
2	Binduben Bhatt	Coordinator (Bhavnagar Cooperative)	M.A. B.Lib
3	Ishwar M. Parmar	Accountant	B.Com
4	Bhanjibhai V. Khasiya	Technical Officer	Diploma in Civil Engineering
5	Dinesh Pandya	Coordinator (Admin, IT & Documentation)	B.Com & DISM
6	Kalpesh M. Mistry	Coordinator (NRM)	D.C.A.
7	Laxmiben D. Desai	Coordinator (Ahmedabad Cooperative)	B.A.
8	Jayntibhai C. Bosiya	Coordinator (DPAP)	M.A. B.Ed.
9	Jagdish G. Sindhav	Social Mobiliser Coastal Area Development Program	B.A.
10	Rajesh K. Juvaliya	Out Reach Worker	B.A.
11	Santosh D. Anjara	Out Reach Worker	BA
12	Ashok B. Pandav	Project Officer HIV – AIDS project	M.S.W
13	Manoj Parmar	Out Reach Worker	BA
14	Deena Chavda	Out Reach worker	M.A. Hindi
15	Kunal Makawana	Counselor	B.R.S.
16	Vipul Chauhan	Coordinator (Adolescent Youth Programs)	M.S.W.
17	Jyotsana Makawana	Community Organizer	B.R.S
18	Jivrajbhai Vaghadiya	Watchman	5 th
19	Subaben	Sweeper	Illiterate

5.6 Details of Board of Trustees

No.	Name	Occupation	Office held in Trustee Board	Relationship with other organization	Address
1	Devuben Kuberdas Pandya	Social Activist	Executive Trustee	---	Mahiti, At & Post: Dholera, Tal: Dhandhuka, Dist: Ahmedabad Pin 382455
2	Nafisaben Rajubhai Barot	Social Activist	Trustee	Executive Trustee UTTHAN	36, Chitrakut Twins, Naheru Park, Vasrtapur, Ahmedabad - 380015
3	Jhanviben Jitendrabhai Andhariya	Development Professional	Trustee	Director ANANDI	21, Manmohan Society, 2 nd Floor, Opp. Aditi Vidhyalay, Manjalpur, Vadodara 390011 Phone: 2635158
4	Binoybhai Padmanabh Acharya	Social Activist	Trustee	Director UNNATI	G/1, 200, Azad Society, Raksha Appartment, Himmatlal Park, Ahmedabad
5	Rajivbhai Wishwanath Khandelwal	Development Professional	Trustee	Director, AAJIVIKA BUREAU	38, Mangalam Complex, Nr. Sifon Colony, Sifon Choraha, Udaipur, Rajsthan – 313001, Phone: 0294-2454092; 2454429
6	Vijaybhai Simonbhai Parmar	Expert (Human & Institutional Development)	Trustee	HIDRC, JANVIKAS	C/105-106, Royal Chinmay, Next to Simandhar Towers, Off Judges Bungalows Road, Bodakdev, Vastrapur, Ahmedabad
7	Sachin Ajaybhai Oza	Development Professional	Trustee	Executive Director Development Support Center	Development Support Center Nr. Govt. Tube Well, Bopal Ahmedabad
8	Laxmiben Sudarshanbhai Iyengar	Doctor (Aayurvedik)	Trustee	Freelance Trainer	3, Parth Sarthi Appartments, 26, Bhaikaka Nagar, Thaltej, Ahmedabad

5.7 Annual Audited Accounts and Other Matters

- Managing trustee or any other persons from our organization has not visited a foreign country during this year.
- This managing trustee has been paid Rs. 2,02,980/- (yearly) as honorarium. No other trustee has been paid any amount.
- The office assistance at the organization is paid Rs. 3000/- as minimum monthly wages and the executive cum managing trustee is paid Rs. 16915/-.

Salary Slab in Rs.	No. of Staff Members		
	Male	Female	Total Staff
> 1500 - < 2500	1	1	2
> 2500 - < 5000	3	1	4
> 5000 - < 7500	7	2	9
> 7500 - < 10000	4	1	5
> 10000 - < 15000	0	0	0
> 15000	1	1	2
Total	16	6	22



During this year one computer system and office furniture have been purchased for Barwala office. Moreover, dining hall under construction for women in Bhal area has been carried out but flooring is not done there yet.

Consolidated Income & Expenditure A/c for the period 01-04-2009 to 31-03-2010

EXPENDITURE	TOTAL RS.	INCOME	AMT RS	TOTAL RS.
Project Expenditure	10,016,061.00	Grants Received / Receivable		10,016,072.68
Other Expenditure	515,892.00	Other Income		203,847.00
Receivable Grants Written off during the year	131,851.53	Bank Interest Income (FC)		37,820.00
Loss on Sale of Nokia Mobile	2,947.80	Earmark Fund:		
Depreciation Exps	253,189.95	Transferred from BS		
		Staff Social Security Fund	167,310.00	
		Administrative Fund	<u>176,837.50</u>	344,147.50
		To Excess of Expenditure over income transferred to Balance Sheet		318,055.10
TOTAL RS.	10,919,942.28	TOTAL RS.		10,919,942.28

Consolidated Balance Sheet as on 31-03-2010

FUNDS & LIABILITIES	AMT RS	TOTAL RS.	ASSETS	TOTAL RS.
Funds		4,408,936.60	Fixed Assets	4,708,940.00
Capital Expenditure Grants		2,445,593.00	Projects' Grant Receivable	1,434,927.54
Un-Utilized Grants		1,953,359.37	Deposit and Advances	65,289.00
Liabilities		680,085.00	Bank & Cash Balance	3,355,113.63
Income & Expenditure A/c				
Balance as per Last Year	394,351.30			
Less: Deficit during the year	<u>318,055.10</u>	76,296.20		
TOTAL RS.		9,564,270.17	TOTAL RS.	9,564,270.17

Annexure 1:- Details of Training, Workshops participated by team members of Mahiti during the year						
No	Date	Team Member	Place	Topic	Organizer	Objectives
1	15/04/2009	Bhanjibhai Khasiya	Education and Social Welfare Organization, Amreli	NGO meeting	Pravah Saurashtra Zone, Bhavnagar	Campaign on Drinking Water and Sanitation and its understanding. Distribution of campaign material.
2	29/04/2009		WASMO Bhavnagar	Training of Pipeline Design	CADP and Mahiti	Understanding the pipeline design
3	19/06/2009		WASMO, Bhavnagar	Technical Scrutiny of VAP	CSPC and WASMO	Technical scrutiny of VAP
4	25/06/2009		DWSC, Ahmedabad	Workshop of Swajal Dhara Program	WASMO, Gandhinagar	Understanding the Swajaldhara Scheme
5	23//07/2009		ESI, Sughad	Water Resource Management	CSPC	Understanding the Water Resource Management Components under CADP
6	24/07/2009		Nalanda Hotel, Ahmedabad	Workshop on Sanitation	CSPC	Understanding sanitation activities implementation under CADP
7	08/08/2009		Chamunda Mataji Mandir Dhandhuka	ARG Group meeting	People Leaning Center, Bhavnagar	Review of monthly activities of ARG members and its planning
8	20/08/2009		Mahiti Campus, Dholera	Coordination Meeting	Pravah Saurashtra Zone	Review of Pravah's work
9	23/08/2009		Shaishav Bhavnagar	Workshop on Disaster Management	Unnati, Ahmedabad	Future planning on disaster preparedness
10	16/09/2009		Mahiti Campus, Dholera	Operation and Maintenance of Roof Rainwater Harvesting Tanks	Mahiti and Saurashtra Cement Ltd	Operation and Maintenance of Roof Rainwater Harvesting Tanks
11	24-25/09/2009		Gujarat Vidyapith	Coordination Committee Meeting of Pravah	Pravah Ahmedabad	Pravah Annual General Body Meeting
12	10/11/2009		Lok Bharati Sanosara	Meeting for Campaign	Pravah Saurashtra Zone	Understanding the Campaign Program of Pravah
13	17/12/2009		Gujarat Vidhapith	Networking and Policy Advocacy on Drinking Water	Pravah	Building common understanding on WASMO's and TSC programs
1	01/04/2009	Jagdish Sindhav	Mahiti	Workshop on Sanitation	CSPC	Area Level Workshop on Sanitation
2	26-27/11/2009		ESI, Sughad	TOT	CSPC	Capacity building for CADP Program
3	7-9/12/2009		Mahiti	TOT	Mahiti-Dholera	Staff TOT on Adolescent health Program
4	23/02/2010		Ahmedabad Management Association	Sanitation Workshop	CSPC	Workshop on Sanitation
1	3 – 4 March 2010	Dinesh Pandya	College of Agriculture Banking Pune	National Conference on SHGs Federation – Challenges and Way Ahead	Chaitanya Sanstha, Pune	Discussion on Federation of SHG and Micro Finance
2	22 – 23 December 2009		Hotel Ratnamani, Jaipur	Workshop on Good Governance in Civil Society Organization	Voluntary Action Network of India	Good governance of voluntary organizations
3	7 – 9 December 2009		Mahiti	Staff TOT on Adolescent Health	Mahiti Sanstha, Dholera	Staff TOT on Adolescent Health Program
3	30 th March 2010		Ahmedabad Management Association	Networking Meeting on SHG Federation	Janvikas	Establishing rapport with NABARD, MFI and NGOs
1	6-7/10/2009	Laxmiben Desai	Ahmedabad	TOT on HIV – AIDS	Gujarat State AIDS Control Society	Staff TOT on HIV – AIDS
2	16-20/11/2009		Chetna, Ahmedabad	TOT	Chetna	Staff TOT on Capacity building of Village Health and Sanitation Committee
3	7-9/12/2009		DSC, Ahmedabad	TOT	Mahiti	Staff TOT on Adolescent Health Program

1	6-7/10/2009	Jayantibhai Bosiya	Ahmedabad	TOT on HIV – AIDS	Gujarat State AIDS Control Society	Staff TOT on HIV – AIDS
2	16-20/11/2009		Chetna, Ahmedabad	TOT	Chetna	Staff TOT on Capacity building of Village Health and Sanitation Committee
3	8-10/04/2010		DSC, Ahmedabad	TOT	Mahiti	Staff TOT on Adolescent Health Program
1	8-10/04/2010	Narendra Chavda	DSC, Ahmedabad	TOT	Mahiti	Staff TOT on Adolescent Health Program
2	11/04/2010		Koba	State Level Dai Sammelan	Gujarat Dai Sangathan	State Level Dai Sangathan
3	22/04/2010		DSC, Ahmedabad	Rainfall Insurance	DSC	Rainfall insurance
1	12-14/10/2009	Vipul Chauhan	Unnati, Ahmedabad	TOT	Unnati Ahmedabad	Citizenship & Governance
2	16-20/11/2009		Chetna-Ahmedabad	TOT	Chetna Ahmedabad	Capacity building training on VHSC
3	7-9/12/2009		Mahiti-Dholera	TOT	Mahiti Dholera	Capacity building training on adolescent health issues
5	11/04/2010		Koba, Gandhinagar	State Level Dai Sammelan	Gujarat Dai Sangathan	State Level Dai Sammelan
1	7-9/12/2009	Jyotsaben Makawana	Mahiti-Dholera	TOT	Mahiti Dholera	Capacity building training on adolescent health issues
2	19/03/2010		Koba, Gandhinagar	State Level Dai Sammelan	Gujarat Dai Sangathan	State Level Dai Sammelan
3	8-10/04/2010		DSC- Ahmedabad	TOT	Mahiti	Capacity building training on adolescent health issues

Annexure 2:- Details of Visitors visited the organization during the year

No	Date of Visit	Name of the Visitor	Objectives of Visit	Institute and Place
1	23/05/2009	Gadhvi Dilavar H	To understand the training program for youth	Rudset Institute, Nadiyad
2	12/06/2009	Bhimjibhai Sonara	Verification of RRWHS	ESC, Dhandhuka
3	19/06/2009	Jagdish D. Chad Jayprakash Gosaliya Manubhai Jorubha, Kishor Sinh	To understand the issues of the area	VRTI, Bhavnagar
4	01/07/2009	Sukhdevbhai Luni	To evaluate the progress of Swajaldhara and CADP Program	ESC, Dhandhuka
5	16/07/2009	Kajal P. Vekariya Prakash Sacaliya Rahan Shah	To understand the community participation in the programs	Surat
6	20/07/2009	P. K. Shah J. S. Chheta Hargovan Patel	To understand the condition of Rainwater Harvesting Plastic Lined Pond	DWSC, Ahmedabad
7	29/12/2009	Chetnaben Gohil	To understand the condition of kaccha houses	People in Center Consultancy –Ahmedabad
8	18/03/2010	I K Chhabra Krunalbhair Satyajitbhai	Accompanying with Nandini Van – Awareness Campaign for Sanitation	WASMO, Gandhinagar