

# ANNUAL REPORT

## 2017-18



**Narottam Lalbhai Rural Development Fund**

Arvind Mills Premises, Naroda Road, Ahmedabad – 25.

[www.nlrdf.org](http://www.nlrdf.org)



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## From Executive Director's Desk

I am pleased to present the 2017-18 Annual Report, reporting on activities that took place last years. Our team has put in their sincere efforts to make some difference in the lives of people and communities that we could reach out with our variety of well – designed programmes. Our team of committed professionals made focused and sincere attempts toward self – sustainability of communities including women and strengthening their perspective towards importance of their empowerment and overall village development. We witnessed communities coming out from their dependent way of living and started taking decisions towards betterment and wholeheartedly participated in making our efforts coming alive. Among all programmes a few programmes that got tremendous response was capacity building of women, better health promotion for women and child including HIV and AIDS.

During the year, the fund received grant of Rs.1,77,03,044 from UNICEF-Gandhinagar, NABARD, Women and Child Development Department-Gandhinagar, Gujarat State Aids Control Society, Gujarat Women Economic Development Corporation - Gandhinagar, Anup Engineering Co. Ltd., University of Pittsburg - USA, CottonConnect-Ahmedabad towards multiple programmes and initiatives like Infant and Young Child Nutrition Practices at Family and Community level, AIDS Control Programme, Skill Upgradation, Widow Empowerment Programme, Solar Project, Better Cotton Initiative, Livelihood etc. In addition fund has received interest of Rs.18,99,416 from its investment. However after spending for the activities and for administration there was a deficit of Rs. 12,99,284 that is borne by the fund.

I would like to reiterate that we do not believe in working in isolation and define our territories but we are committed to build a network of likeminded people / organizations for a bigger goal of service to mankind. We strongly believe in the value imbibed by our organization NLRDF. The Annual Report gives an opportunity to thank sincerely different stakeholders, who have participated actively in our voyage. To be specific we are privileged to be an NGO that has always been held in high esteem and respect by the Government of Gujarat and the funding agencies like UNICEF, NABARD, University of Pittsburg - USA, CottonConnect-Ahmedabad for extending financial and directional support. We are committed to pursuing mission of NLRDF with sincerity.

**B. M. Shah**

## About NLRDF

Narottam Lalbhai Rural Development Fund (**NLRDF**) is a registered NGO founded in 1978 by **The Arvind Mills Ltd.** The organization stands on the principles and philosophy of services to mankind with a genuine interest in integrated human progress and firsthand experience in diverse facets of social development.

In the last 38 years of its foundation, **NLRDF** has grown as a grassroots organization striving for a holistic development. Our initial direct intervention was participating in the development process at the village level through specifically designed programmes.

### OBJECTIVES

The broad basic objectives of NLRDF in rural development can be summed up in the following words:

“Stimulating, initiating and setting into motion a process of development which within a specific span of time would become self-sustaining and self-perpetuating, whilst monotonically reducing the relative disparities between various levels of the society”.

### STRATEGY

In order to evolve a strategy for the fulfillment of the objective, it was decided to copy mother nature as far as possible. If we look closely at Mother nature, the various facets of life are all inter-related and inter-dependent. It was accepted that NLRDF would take an overall integrated, total-view point in development intervention, at the same time, taking care of the various components that together form the whole.

### ROLE DIMENSIONS

In the light of the above strategy for development intervention the trust carried out operations in various sectoral areas, like agriculture, social and farm forestry, horticulture, fodder development, animal husbandry, minor irrigation, rural electrification (street and agriculture related), roads, biogas,

medical services, health care, nutrition, sanitation and disease control, non-formal education, Adult education vocational training of handicapped persons, watershed development, aids awareness and prevention, women empowerment and women and child development etc.

### STAFFING

The trust has a total strength of more than 48 persons, most of whom are in rural areas. Most of them are post graduates in various disciplines related to rural life.

### MANAGEMENT

NLRDF is structurally working under a Board of Trustees, the Chairman of which is directly responsible for the overall policy direction and guidelines for the trust. The present Chairman is **Mr. Samveg A. Lalbhai.**

Reporting directly to the Chairman and the Board of Trustees is the Executive Director of the trust, who has the responsibility of guiding policy formulation and providing necessary feedback for the same. He is also responsible for the strategic and operational planning of the trust's programme. The present Executive Director is **Mr. B. M. Shah.**

### FUNDS

NLRDF has so far been funded by the Arvind Mills Ltd. Ahmedabad, to the tune of Rs.30 Million. NLRDF has also been mobilizing government funds directly for the beneficiaries of its programme as well as for certain infrastructural activities and other purposes of rural interest.

#### ADMINISTRATIVE OFFICE

Mr. K. P. Patel – Chief Manager

**Narottam Lalbhai Rural Development Fund**

Arvind Mill Premises, Naroda Road,  
Ahmedabad - 380025.

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Tel.: 079 – 30138760

## Board of Trustees



**Shri Samveg A. Lalbhai**  
Chairman



**Shri Anang A. Lalbhai**  
Trustee



**Mrs. Jayshreeben S. Lalbhai**  
Trustee



**Mrs. Anamikaben S. Lalbhai**  
Trustee

## Management



**Shri B. M. Shah**  
Executive Director



**Shri K. P. Patel**  
Chief Manager

## NLRDF Identity

- ❖ Narottam Lalbhai Rural Development Fund is a Voluntary Organization registered under the Bombay Public Trust Act 1950 as Charitable Trust (Reg. No. E/3296/29.7.1978.)
- ❖ Narottam Lalbhai Rural Development Fund is registered u/s 12A of the Income Tax Act. 1961 No. N-83/ARV.
- ❖ All individual & Corporate donations are also eligible for exemption u/s 80.G The exemption under section 80 -G is available vide their letter No. DIT(E) /80G(S)/1176/06-07, dated. 20.9.2007
- ❖ Narottam Lalbhai Rural Development Fund is also registered under Foreign Contribution Regulation Act 1976 for accepting foreign donations and grants vide Registration No: 041910009 dated. 8.1.1985

## Our Bankers and Auditor

State Bank of India	Naroda Road	Ahmedabad, Khedbrahma, Dahej
State Bank of India	Bhadra Main	Ahmedabad. (FCRA Account).
HDFC Bank	Mithakhali	Ahmedabad
Kotak Mahinda Bank	Ellisbridge	Ahmedabad
Dena Bank	Idar	Sabarkantha

## Name and address of Auditors

Sorab S. Engineers & Co.,  
909, ATMA House, Ashram Road, Ahmedabad.



# PROGRAMMES AND INITIATIVES



## Strengthening Community Networks to Promote Appropriate Maternal and Infant & Young Child Nutrition Practices at Family and Community level in Sabarkantha

Gujarat, situated in the western region of India, with a population of about 60 million, is considered as one of the most progressive states of the country. It comprises of 33 districts and 226 Blocks, 242 cities/towns and 18,622 villages. In spite of its impressive economic development, there is stagnation in key social indicators. Like most of the other states in the country, it has made slow progress in reduction of infant and maternal mortality rates. Malnutrition among children continues to be the matter of concern. Issues related to children and their growth on certain social indicators including increase in enrolments of both boys and girls in primary schools.

In Gujarat, malnutrition is a major problem seen in children, particularly in children less than 2 years of age. The current prevalence of under nutrition among children under 5 years in Gujarat is high; 39.3% of children are underweight. 38.5% of children are stunted and 9.5% of children are severely wasted (NFHS 4). One of the key reasons for undernourishment setting in early in life is wrong and sub optimal infant feeding practices, which is further aggravated by factors such as repeated episodes of childhood illnesses and low birth weight.

### Nutritional status of Gujarat and Sabarkantha

According to recent NFHS 4 survey (2015-2016), the percentage of malnourished children in Gujarat, in all its forms (under weight, stunted, wasted and severely wasted) is more than the average of India

While in Sabarkantha, it is much higher than Gujarat and India. Stunting, which according to research studies(Asia report, 2020) is more prevalent among the tribal children, NFHS 4 data also reveals that though the percentage of stunted children in Gujarat (38.5%) is similar to that of India (38.4%), however, it is much higher (50.6%) in Sabarkantha.

The prevalence of anemia among children (6 – 59 months), one of the major causes of malnourished children (6 – 59 months), is a public health problem in India (58.4%), and Gujarat (62.6%), while in Sabarkantha, it is alarmingly higher (72.5%), and according to NFHS 4 data.

Moreover, infant and young child feeding (IYCF) is the most critical intervention for promoting young child survival and development. Infant and young child feeding practices directly impact the nutritional status and ultimately, the child survival of children less than 2 years of age.

According to NFHS 4 data the percentage of children who received breast feeding within one hour of birth, although is more in Gujarat (50.0%) than India (41.6%). But, in Sabarkantha also it is much lower (46.5%) than 50%. Similarly, though the percentage of children receiving exclusive Breastfeeding in Sabarkantha is slightly high (58.3%), but initiation of complementary feeding at the correct age is a major problem. Not initiating age appropriate complementary feeding along with breast feeding after six months aggravates the situation of children being stunted, wasted and under weight.

Coming to pregnant women, the anemia among them remains a public health problem both in India (50.3%) as well as in Gujarat (51.35). However, in Sabarkantha, the percentage of anemic pregnant women is slightly high (52.3%). The anemia among pregnant women is dangerous for both women as well as for the unborn child.

Further, it is very important for the pregnant and lactating women to receive all the services provided by the government (4 ANC check ups, full ANC checkups, 100 or more IFA tablets to be consumed by

pregnant women, and post natal care within 2 days of delivery) being provided to them during that period. Again it is beneficial for both woman and the child.

The percentage of women receiving 4 ANC check ups (Gujarat: 70.6% vs India: 51.2%) and mothers who had full antenatal care (Gujarat: 30.7% vs India: 21.0%) is higher in Gujarat than India. Further mothers receiving postnatal care within 2 days of delivery (Gujarat: 63.4% vs India: 62.4%) is also higher in Gujarat than India. Similarly, the mothers consuming IFA tablets for 100 or more days during pregnancy (Gujarat: 36.8% vs India: 30.3%) is slightly higher in Gujarat than India.

However, for all the above mentioned indicators for pregnant and lactating mothers, Sabarkantha scores are slightly better comparative to INDIA and less than scores of Gujarat. NFHS 4 data (see Figure 5) indicates that only 66.4% of pregnant women receive ANC check ups, only 23% receive full ANC checkups, and mothers receiving post natal care within 2 days of delivery in Sabarkantha is 60.3%. While a very low (27.5%) percentage of pregnant women in Sabarkantha consume 100 or more IFA tablets during pregnancy.

Therefore, the Sabarkantha district of the Gujarat, comprising of 95% of the tribal population coupled with low maternal and child care indicators require more focused interventions to improve the health of child and mothers of this district.

The lifecycle approach as the core principle. This is based on the acknowledgement that children and women face multiple deprivations at different stages of their life and that multidimensional problem need multi-pronged, inter-sectoral solutions. The vision is to ensure that mothers are empowered to take positive decisions for themselves and their children. Healthy, well informed mothers give birth to a well-nourished children, in a nurturing supportive environment. To this end, a key strategy of UNICEF will entail leveraging of partnerships that mutually reinforce

each other's strengths towards an agreed agenda. Social and behavior change interventions are directed at supporting government and civil society partners in addressing gaps on supply side. Special efforts are invested in improving the quality of services in maternal and child health, nutrition and the motivation and supportive supervision of service providers and facilitating effective engagement of local communities.

### About Sabarkantha

Situated in the north of Gujarat, Sabarkantha district is spread across 7,390 square km, constituting about 4 per cent of the state's geographic area. The district's headquarters is Himmatnagar. It has 8 talukas, out of which 3 fall under the Tribal Development Programme namely khedbrahma, Poshina and Vijaynagar. These Talukas are mainly hilly and forest area. Dungari garasiya community is a major tribal community. The "Tropic of Cancer" passes through Sabarkantha district. The total area of the district is 5390 Sq.km. North – Eastern part of the district is covered by the rows of "Aravalli" hills. Sabarmati, Meshwo, Vatrak, Hathmati, Mazum, Vaidi, Harnav, Khari are main rivers in the district.

### Objective

To ensure that communities and families with pregnant women and mothers of children below 2 years of age and caretakers are aware of appropriate IYCF practices and access ICDS and VHND services.

Specially, it will contribute to meeting the following outputs:

- ✓ Front line functionaries have access and know how to use the communities tools to provide information and counseling to families and communities.
- ✓ Communities and families, particularly the most marginalized, have access to information and counseling to improve upbringing of their children.

## Methods

100 Villages were divided into 10 Clusters of Khedbrahma and Poshina Block of Sabarkantha.

Clusters names are Gadhda Shamlaji, Matoda, Lakshmipura, Hingatiya, Kheroj, Delwada, Salera, Dantral, Labadiya and Poshina.

## Selection of Village Volunteers (VVs)

From the community, 4 Village Volunteers (VVs) were selected from each village, thus the total number of VVs in the programme are 400. The VVs were selected based on the following criteria:

- The VVs should be 7<sup>th</sup> class passed.
- They should not be ICDS / Health worker.
- They should be having mobiles for mobisodes.
- They should be from distant areas.

## Roles and responsibilities

- They should help in mapping the target groups (pregnant women and mothers with 2 years of children).
- They should help in mobilizing the target groups to MAMTA diwas.
- They should counsel the target groups with the tools provided (interactive game, flip books and mobisodes) to encourage evidence based IYCN practices.

## The implementation on ground through communication tools

Various communications tools used in the programmes were:

1. Videos: Ammaji Kahe Theem (Facts For Life)
2. Flip charts
3. Mobisodes

## Activities carried out to achieve the following outcome

1. Film shows of IPC video and discussions held in all the villages.

- i. Breastfeeding: Early initiation & Colostrum Feeding
  - ii. Breastfeeding: Colostrum Feeding
  - iii. Breastfeeding: Exclusive breastfeeding
  - iv. Breastfeeding: Proper techniques of breastfeeding
  - v. Breastfeeding: Complimentary feeding
2. Sensitization of PRI members on their role to monitor implementation of IYCN activities
  3. Sensitization of SHGs / WADI / Dairy cooperatives on issues of IYCN
  4. Counseling of mothers by VVs through home visits, group counseling's and phalia meeting

## Target population under various programme (as on November 2016)

Target population	No. of Population
Pregnant women	2641
Lactating Mothers	3679
0-2 years of children	2477

Community networks strengthened to promote appropriate maternal and Infant & Young Child Nutrition Practices at Family and Community level

## District level Training of our staff on infant and young child feeding and caring practices and on use of communication material on MIYCN

The our staff as mentioned in ,was provided four days training on infant and young child feeding and caring practices and on use of communication material on MIYCN.





The four days training, focused on the importance of communication skills to create awareness about importance of developing good behavioural practices with respect to MIYCN practices. It laid the importance of life cycle approach to tackle malnutrition, i.e., 1000 days concept (from the very first day of conception till the two years of the child). It focused on the importance of good behavioural practices with respect to nutrition and health services during the 1000 days. The NGO staff was trained on Social and Behaviour Change Communication (SBCC) also, so that besides identifying the primary target population (pregnant and mothers of 0-2 years of children) they are able to identify secondary TP (influential family members) and the tertiary TP (influential people in the village community) target population. The importance of secondary and tertiary target population is, if they are made aware about the good behavioural practices during 1000 days, then being the influencers in the family and in the community respectively, they can motivate or help the pregnant and 0-2 years children to adopt the good behavioural practices, which in turn may help to reduce the maternal and child malnutrition status.

The staff was also trained on interpersonal counselling and correct use of various communication tools (Fact For Life videos, mobisodes, Flip charts, MAMTA cards etc).

### **One day orientation of village volunteers (VVs) at village level on IYCN and how to use communication material for counseling mothers and family members**

A total of 400 Village Volunteers, from the village were identified by the our field level workers. One day training was given to them on MIYCN and how to use communication tools for counseling mothers and family members at the village level.

They were trained to identify the target population. Their communication skills were developed so that they are able to mobilize the target population to the service delivery points.



### **Capacity development of grassroots level structures (SHGs, PRIs, VHSNCs, VVs) in promoting and monitoring reach of services to the identified target audience.**

#### **Sensitization of WADIs / SHGs / VHSNCs on issues of IYCN in monthly or quarterly meeting.**

Besides the training provided to the VVs, Focus Group Counselling (FGC) sessions were held to create awareness at the grass root level in the village community through the local group meetings. Thus total 117 FGCs were conducted through which 1098 group members were counselled on MIYCN related information.

#### **Formation of Mother Support Groups(MSGs)**

In more recent times, over the past 5 to 10 years a more "mobilized and empowering" approach has been to form "Mother Support Groups", where 7 to



10 mothers are either elected by the community or selected by the Public Health Midwives (PHM) and other leaders to look after the interest of mothers and children especially those under 5 years. While assisting with the same routine tasks as described under village volunteers, they are assigned more upper level tasks of mobilizing mothers to come to delivery points, assist with compliance factors such as mothers ingesting supplements, drawing the attention of the PHM to vulnerable mothers and children and a host of other tasks. The MSG may or may not have a plan. They may also be asked to help achieve certain indicator targets. Various studies have shown that MSGs help in improving the MIYCN indicators

### Formation of Mother support Group in 20% of Villages

The total numbers of villages in the programme are 100. During the programme period (Oct 2016 to Dec 2017), against the target of 20 mother support group total 34 mother support group formed during the project period. 4980 Mothers or Lactating women participated in 509 meetings. The MSG groups formed comprise of the target population themselves who can share their positive experiences amongst themselves and support the unexperienced pregnant women and mothers to understand the importance of practicing correct behaviors regarding MIYCN. The group may also have health and ICDS staff to reiterate the messages in the community.

### Sensitization of mothers and care givers on care during pregnancy, EIBF, EBF, ICF and age appropriate feeding.

#### FFL Video Shows

Fact for Life (FFL) video shows are core component of the project. During the 15 month project period 5 different FFL videos on MIYCN related issues. Topics of the FFL video shows were mention below.

1513 Video shows were organized during the project period, 1 video show/month had organized in each targeted villages.. 37121 target populations were reached out through video show out of them 14322 pregnant, 17583 lactating and 5216 family members.



#### Flip Chart Use

Flip chart is another very important interpersonal Communication tool for the project as well as for community who is not able to come for Video show or family members of targeted population. Flip chart is widely very good accepted in field due to its pictorial representation and interaction in local dialogue. 3382 times flip chart were used and 11588 target population covered. 5188 Pregnant women, 5036 Lactating and 1364 family members were counselled.



If we see these numbers in percentage, Out of 100% percentage use of flip chart we had invested our 45% energy for pregnant women and 43% for lactating women. Our project objective is also involve the family members in the video show. We found for the rest and dietary practices family members are also a decision maker so, 12% efforts put for the counsel family members.

### Mobisodes

Mobisodes is very innovative tool in the project, thanks to innovation of smart phones. Most of the household have smart phone, they are using their smart phones as entertainment tool also. After the identifying this, we took as a opportunity for SBCC in the project, 2506 mobisodes were done for IPC sessions, through this efforts 2355 Pregnant women, 2180 Lactating women and 503 family members. Percentage wise analysis is below in graph:



### Home Visit

Home visits are very important for follow up and linkages between beneficiaries and service provider. 5873 home visits done by field staff during the project period. With the team efforts 7345, 7026, 2944 and 1331 beneficiaries such as pregnant women, Lactating women, underweight and SAM/MAM children are reached out.

Village volunteer had also done home visits of target group. 13257 times Pregnant women, 11681 Lactating mothers, 1216 times UW Children and 710 times SUW Children's covered during the home visits.

### Service Utilization by beneficiaries.

#### Mamta Diwas

379 mamta diwas were directly monitored during project period. 2560 pregnant women, 2624 Lactating mothers 459 Underweight and 207 SAM Children were mobilized and were present.

#### Regularization of AWC's Services

Project is more focus on community mobilization for the availing the benefits given from government system and providing information about field related problem which are taken care by govt. 3673 times AWCs made visits were visited out of which 845 times AWCs were found closed.

Due to regular visits 37 AWCs were found completely closed. Like wise team also identified 10 AWCs buildings were illegal occupied by the villagers. Data of the same were shared with concern CDPOs and PO(ICDS). Capacity of the worker and helpers were improved due to these visits.

#### VHSNC Meeting

Village Health and Nutrition committee's (VHSNC) meeting is promoted by Health department as platform to discuss and solve village level issues. In this project total 50 meetings were held and 476 members participated.



#### Weighing Drive

The AWCs provide the nutritional and pre school education services to the children age group 6 months to 5 years in each villages of the Khedbrama and Poshina taluka. During the MIYCN project, it came into notice that AWCs were under reporting



the Nutritional status of the children (especially severe underweight and moderate underweight) due to lack of knowledge regarding the correct weighing and correct plotting of weight on growth chart/register. The aim of the initiative was to identify under weight children correctly and to strengthen the present services provided by the ICDS and Health department.

**Project Goals** Identification of the underweight children, increasing the knowledge of AWWs regarding correct weighing, plotting weight correctly on growth charts, interpreting and counselling and strengthening present services provided by ICDS and Health departments to improve the nutrition status of children.

**Duration: March 2017- October 2017**

#### Area selected for the Project

- Khedbrama Taluka: 5 ICDS Sector's– 5 Villages and 11 AWCs
- Poshina Taluka: 3 ICDS Sector's– 3 villages and 7 AWCs

#### Activities

##### PHASE 1

- ✓ Identification of the villages.
- ✓ Cross verification of the anthropometric measurement under the presence of Health, ICDS Functionaries and UNICEF supported NGO staff.

- ✓ Common reporting format were developed and data collection was done.
- ✓ Data Compilation done by the ICDS and rechecked by DPC and District MIYCN Consultant.
- ✓ Data Analysis was done and presented the observations in front of Hon. Collector, Hon. DDO and PO (ICDS) – Sabarkantha

During the cross verification it came into observation that there were very high numbers of moderate as well as severe underweight children in the selected villages/AWCs.

#### Following major causes was identified

- ✓ AWWs having Lack of knowledge regarding the growth chart plotting and weighing protocol.
- ✓ Gap in SNP supply and not preparing the hot cook meals as per prescribed norms.
- ✓ Lack of Counselling skills
- ✓ Irregular home visit by AWWs.
- ✓ Issue of equipment ( electronic weighing machine)

##### PHASE 2

- ✓ Sensitization of AWWs  
On job training of AWWs by District MIYCN Consultant/CRP/VC/ ICDS Supervisors regarding the ideal weighing methods and proper plotting weighs on the growth charts and identification of underweight children.
- ✓ Regular Home visits done by AWW, Village Volunteer and CRP.
- ✓ Streamline of Supplementary nutrition services as per the Guidelines
- ✓ Counseling of mother on IYCF and Care during illness.
- ✓ Supportive Supervision of AWW on skills and knowledge



## Results

After sensitization the scenario along with supportive supervision and streamlining the present services provided by the AWWs, observed the following below result.

59 percent of children from the SUW category upgraded to MUW and normal grade.

27.5 percent of children from the MUW category upgraded to normal grade.

**Conclusion** We can achieve the target of bringing down the under nutrition level among these children by regular supportive supervision and sensitizing the AWWs regarding the ill effect of malnutrition on children and society.

## Intensive Nutrition Campaign Center (INCC)

In order to reduce the prevalence of Under-nutrition in Gujarat, Department of Women and Child Development have started Intensive Nutrition Campaign Center (INCC) known as Ghanishth Poshan Abhiyan. INCC is a camp based approach of 30 working days which is planned considering the prevalence of moderate and severe underweight children in anganwadi center. Total 200 INCC were covered 2857 beneficiaries in Sabarkantha. Out of them 119 INCC were covered 1701 beneficiaries (59.53%) only in Khedbrahma and Poshina block only. 101 INCC (84.90%) were regularly monitored and technical support provided to the AWCs. Total 290 Severely Under weight and 1410 Under weight Children benefitted by the Campaign.



## Capacity Building of Field Functionaries on use of IPC Tools.

Strengthening and Capacity building of field functionaries is also a project goal. Whenever the FFL video shows were organized in the village AWWs are pre informed and invited them to attend and facilitate the video shows. Out of 1513 FFL Video Shows AWWs were attended in 1150 and 945 times AWWs facilitate the video show partly or whole. 632 times AWWs using flip chart during the counselling.

## Different Output indicators related to MIYCN

### Institutional Delivery

Institutional Delivery is very important for correct IYCF practices. As per the NFHS 4 87% delivery took place in institution. As mention below in MIYCN project average 77% delivery had took in institution. Among the 10 clusters of project area with 98% Gadhada Shamlaji, Kheroj and Hingatiya have the highest institutional delivery, at the same time with 56% institutional delivery Salera is last. Total 4201 Delivery had taken place during the project area, among these 3244 delivery had taken place in institution. 957 deliveries had taken place at home or at the time of transportation.

### Initiation of Breastfeeding within an hour

Initiation of breastfeeding within an hour is very critical component. NFHS 4 shows only 47.8% children breastfed within an hour in Sabarknatha. IPC activities and capacity building gives very good result. In all 10 clusters percentage of breastfed children within an hour is higher than the district average. Among the 10 clusters of project area with 81% Matoda have the highest percentage, at the same time with 50% Hingatiya is last. Total 4157 live birth 2723 infants breastfed within an hour.

### Exclusive Breastfeeding up to 6 months

Another critical component in MIYCN project and correct IYCF practices is exclusive breastfeeding not even water up to 6 months of child. NFHS 4 shows only 63.3% children exclusive breastfed up to 6

months in Sabarknatha. MIYCN project area average rate of exclusive breastfeeding up to 6 months is nearly 4% higher than the district average. Among 10 clusters Gadhada shamlaji is first with the average of 90% and labadiya with 56% is last. Total 1529 children had exclusive breastfeed up to 6 months.

### Timely Initiation of Complimentary feeding

Initiation of complimentary feeding is very important for healthy children in project area. Average rate of initiation of complementary feeding 52%. Among 10 clusters Matoda is first with the average of 67% and Kheroj is last with 38%. Out of 4319 Children total 2240 children had initiated complementary feeding after 6 months. 1362 Children had initiated complementary feeding in “Annaprashan Diwas” observed at AWCs.

### Mothers who had antenatal check-up in the first trimester

NFHS 4 shows 71.6% mothers had antenatal check up in their first trimester. MIYCN project average is 10% higher than the district NFHS 4 average. Out of 7730 Pregnant women during the project area 6288 Pregnant women had antenatal check up in the first trimester.

### Mothers who had at least 3 antenatal care visits

MIYCN project area’s average of mothers who had at least 3 ANC visits is 88%. Among 10 clusters Salera is first with the average of 94% and Labadiya is last with 75%.

### ICDS Service Utilization

One of the project goals is to improve service utilization by the community. During the project time 9334 target group members were started utilizing ICDS services regularly. Out of these 3474 Pregnant Women, 3294 Lactating mothers and 2566 Children age group between 0-3 yrs.

### Success Story

147 success stories documented during the project period on different topics like EBF, IBF, Exclusive breast feeding, ANC care, support from community leaders and so on. Out of them some of the stories are as below:

### 1. Anandi Patel-Former Sarpanch

Anandiben Mogajibhai Patel, the former Sarpanch of Laxmipura, is a guiding force and beacon of hope for all aspiring women leaders. Laxmipura is a village with a population of 4500 in Gujarat’s tribal district Sabarkantha where Anandiben served as a Sarpanch between 2012-16. The only woman and graduate among the six candidates who contested for the post, her victory was a landmark as it initiated positive trends in all women and children centric welfare schemes.

Right after taking office, she approached the ICDS Block Supervisor for release of funds to repair and improve the infrastructure in all the seven Aanganwadis under her jurisdiction. She regularized mid-day meals and personally supervised the distribution of Bal Bhog. “I followed up on the activities of the VHND sessions and ensured two monthly sessions in all seven Aanganwadi centres (AWCs). There were five underweight children in one of the Aanganwadis and we did regular counseling and follow-up meetings with the parents until all five recovered. Although, literacy is not low in Laxmipura, awareness on basic nutrition practices is missing. I am a woman and I know how nutrition affects the overall health of mothers and children. Therefore nutrition was my key priority” shared Anandiben. Rekhaben, and Aanganwadi worker, who regularly seeks Anandiben’s guidance, said “We still go to her when we need to counsel resistant parents; her goodwill in the community helps



Anandiben taking a keen interest in reading the growth chart to track progress of children assisted by Rekhaben

us reach out to everyone. Even though she is not the Sarpanch anymore she resolves our woes and difficulties deftly. We have found a new sense of purpose and motivation under her able leadership and now we will take forward her good work.”

## 2. Parmar Dahiben Jagdishbhai - Village Volunteer

Thori Vaas is a settlement of 25 houses on the edge of Laxmipura village in Gujarat’s Sabarkantha district. It is inhabited by a community of cane basket weavers - “Thoris”. While the baskets are woven by the womenfolk, the men sell them in nearby markets.

Three years ago the Thori women and children had no inclination to visit the local Aanganwadi Centre (AWC), before Village Volunteer Dahiben Parmar began work in the area. Dahiben’s co-workers warned her that the community would never convert but Dahiben volunteered to initiate regular house-visits. Soon enough, she made friends with the women but they still resisted change. “They feared venturing out of the house in the absence of the men and they also did not want to compromise on their weaving hours. **Their lack of education abetted their resistance.** By a stroke of good fortune I met Ashaben, a young mother who had studied till seventh grade” recalled Dahiben. “I saw hope. I repeatedly discussed food and nutrition information and requested Ashaben to come with me to the Aanganwadi”, she added.



*Dahiben sharing a mobile phone with a woman in Thori Vaas while she carries out her daily chores*

Ashaben relented and her decision set in motion a momentous change in attitudes. Soon other mothers followed and today the entire community avails ICDS services. “The community has abandoned the traditional practice of feeding gur-ghee (a mixture of jaggery and clarified butter) to newborns and the practice of exclusive breastfeeding until six months is largely accepted and followed. It was made possible because of Dahiben’s persistence and the community’s faith in her” remarked Alkaben, the ASHA in Thori Vaas.

## 3. Parmar Dali Ben, Mother-in-law

Sexagenarian and a revered midwife, Dali Parmar from Demti village of Gujarat’s Sabarkantha district is also a proud grandmother of four. She delivered three of her grandchildren at home but for the youngest, she chose an institutional delivery.

“For as far back as I can remember I have been delivering children in Demti. But times are changing and government health facilities are becoming more accessible. When I accompanied my daughter-in-law to the hospital, I also realized the critical nature of post-partum care and the feeding information that was imparted at the facility” informed Dali.

The Cluster Resource Person Arvind Bhai working in the locality spoke to Dali Ben about institutional deliveries and educated her with information on other health and IYCN schemes. Familiar with the



*Dali ben feeding khichdi to her 9 month old granddaughter Jeenal, with mother Chandrika*

risks involved in home deliveries, Dali Ben decided to lead the other mother-in-laws in her village by setting an example.

**“My mother-in-law advised that it would be the best for me to have the baby at the hospital. The skilled assistance and information provided there made my last delivery much easier to negotiate and I felt safer”** shared Chandrika, Dali’s daughter-in-law and mother of 9 months old Jeenal.

“Dali Ben has become our greatest ally in Denti. She counsels mothers on complementary feeding practices, accompanies pregnant mothers for check-ups and deliveries, calls 108 during emergencies and actively advocates availing ICDS and health facilities provided free of cost by the government,” noted Arvind Bhai.

#### 4. Dinesh Bhai- Traditional Healer/ Bhuva Bhagat

“I have been practicing traditional healing since i was 12 years old. I used to believe that i was blessed with a divine power to serve people until last year when I attended a training organized for

us at the Mamlatdar Office by the local NGO. **The training taught me about malnourishment and how it affected mothers, children and an entire population. I comprehended the gravity of the ailment and it dawned upon me that it required medical assistance beyond my practice”** confessed Dinesh bhai, from Ghatada Shamlaji village in Gujarat’s Sabarkantha District.

When a young mother Kajal recently fell ill, Dinesh Bhai was summoned. The family thought Kajal was possessed by some evil spirit. “I had resolved to refer all my patients to health facilities after the training. I took advantage of the opportunity and announced that divine forces wanted Kajal to be taken to the district hospital” shared Dinesh Bhai. CRP Suresh from the local NGO added, “Kajal was anemic and was hospitalized for two days, Dinesh Bhai put her in touch with the local ASHA and FHW after her discharge.” The local ASHA shared, “Dinesh Bhai now conducts regular meetings of all the traditional healers in the village and reiterates the oath to refer all their patients to health providers or facilities.”



*Dinesh Bhai (Centre) convening a meeting of traditional healers with CRP Suresh (Right)*

## Better Cotton Initiative (BCI) – Khedbrahma

This program implemented by NLRDF in Sabarkantha District aimed to produce better cotton and thus to help farmers to be part of huge channel for BCI. This is the project where it raises the level of crop protection and helps in water and soil conservation.

This project has been implemented in 8764 acre of land of 2267 farmers in 26 villages of Vadali Taluka, and 4205 acre of land of 1754 farmers in 18 villages of Khedbrahma Taluka of Sabarkantha District. Under this project implementation, each field facilitator coordinate with about 400 farmers to support them.

The situation of farmers in these Taluka was vulnerable before the project started. The farmers were struggling with quality & quantity of seeds, over use of pesticides, taking care of produces, getting insufficient prices and degradation of land which were very harmful to the community. Hence BCI project was very helpful to the farmers which focused on crop protection, water, land, quality of fiber and promotion of decent work.

The project team was given TOT in the beginning of the project in which Agriculture experts from Cotton Connect and Krushi Vigyan Kendra as resource persons were present in the training. The following subject were covered in the training:

- Role of IP & PU
- Better cotton standard system
- Decent work
- Method of baseline
- Entering details in Farmer Field Book
- Health safety, security and environment

After the training field facilitator prepared details of farmers, and planned PRA in 6 villages of Vadali and 5 villages of Khedbrahmma Taluka. After PRA issues came out from the farmers. A group of 40 farmers was formed and they were given training on their issues and solutions.



<b>Sr. No.</b>	<b>Training Head</b>	<b>Subjects</b>	<b>No of Participants</b>
1	TOT-1	About - CottonConnect and Local partner, Programmatic Training - BCI programme- Better Cotton Standard System , About decent work, How to conduct baseline survey , About data collection in the FFB (Farmer Field Book), Health Safety, Security and Environment ( HSSE)	15
2	TOT-2	Technical agronomic Training- Pre Sowing Aspects - i.e. Seed Selection, Spacing , Soil Preparation etc.	15
3	Farmer Training-1	Programmatic Training - BCI programme - Better Cotton Standard System	3752
4	Farmer Training-2	Documentation- FFB, Decent work- Child labour & wage equalities & HSSE	3765
5	Farmer Training-3	Pre sowing activities- seed selection, soil testing, soil preparations, sowing-spacing etc.	3765
6	TOT-3	Technical agronomic Training- Crop management-1 –Water Management, Integrated nutrient management, Integrated pest management & Integrated disease management	14
7	Farmer Training-4	Crop management-1 - Water Management, Integrated nutrient management , Integrated pest management & Integrated disease management	259
8	Labour Training-1	Decent work- Child labour and wage equalities and HSSE	360
9	TOT-4	Refresher Training Programmatic and Agronomic aspects	15
10	Farmer Training-5	Refresher Training - Crop management-2- Water Management, Integrated nutrient management , Integrated pest management & Integrated disease management	3474
11	TOT-5	Supply Chain - Picking of Cotton, Storage and Marketing	16
12	Farmer Training-6	Pre harvesting- Safe harvest, contamination free picking, storage & marketing	3474
13	Review and Refresher	Planning, Review Meeting and Field Visits by CottonConnect	12
14	Review and refresher	Planning, Review Meeting and Field Visits by CottonConnect	15

### FFB ( Farmer Field Book )

FFB is maintained regularly. FF regularly make follow up with the farmers and keep updating FFB. Generally following details are recorded in the FFB:

- Purchase of seeds
- Quality & quantity of seeds
- Utilization
- Use of NPK
- Use of water
- Labor charge
- Production

Prices & income, etc. Complete set FFB including agronomic data capturing sheet, Cotton POP containing BCS information, Safe use of pesticides, Compost and botanical preparation pamphlet and file were distributed in the month of May to June. FF & PU Manager trained the LG farmers on how to capture agronomic data and note down on FFB in the month of May to June. In case of illiterate farmer their house member who are literate were trained. In this activity farmers are educated how to write the cotton cultivation data on given sheet, its importance, how it is useful in respect of BCI. This helps farmers to understand their expenses and profit.

### Development of Demo Plot

To promote the best practices, demo plots were prepared. Demo plots were monitored regularly. Farmers from other villages came to visit demo plots. Following are the details of demo plots:

Sr. No	Area of Demo Plot	No. of Demo Plot
1	Feromen tap	24
2	Inter cropping	03
3	Irrigation system	01
4	Inter cropping	03
5	Method of composed manure	37
6	13:0:45 fertilizer	03
7	Border crop	02
8	Neem oil	02



### School Awareness Activity

Some activities for children were organized to generate awareness among them on land, water, human resources. Competitions such as drawing, group discussions, etc. were planned. Total 625 children from 25 schools took part in the activities.

**School Rally** Organized on the local primary school in the villages. We have organized 7 rallies disseminating the message on "Save water and Child labour" awareness in Khedbrahma and Vadali Block.

**Labour Training** Training programmes were conducted under Decent work. Total 32 trainings were conducted in both PU. Labour are aware about freedom of association, minimum wages, what is child labour & hazardous work, bonded labour, safe use of pesticides, health safety, local PPE use and right way of pesticide formulation.



### Wall Painting Work

To generate awareness in the interiors of villages, wall paintings were chosen as a medium to spread awareness on better cotton initiative. Such type of awareness helped farmers to understand about their issues and importance of better cotton initiative.



### Working with Disadvantaged Group

The farmers who fall under disadvantaged group were given awareness and information about different Government schemes and about benefits.



**Ghar Diwda Project** – Under this project women get upto Rs. 50,000 loan. Women who are interested and have skills of entrepreneurship get Rs. 20000 subsidy. 34 women were benefitted by this scheme.

**Widow Pension Scheme** - under this project widow women who come under the age of 18 to 40 years get Rs. 750 per month and Rs. 100 for a child per month as pension by Women and Child Welfare Department, Gandhinagar. Under this project, 10 widow women applied to be benefitted.

**Old Age pension scheme** – Old aged man and women under the age group of 70 years and are living alone are eligible to get pension of Rs. 200 per month by Social Justice Department.

**Adhar card scheme** – the organization helped processing their Adhar card. 24 beneficiaries Adhar card were made.

**New bar code ration card** – under this scheme, beneficiaries received assistance to get different certificates from Government.





## Better Cotton Initiative ( BCI ) in Akola Dist. - Maharashtra

### Soil Testing

Soil testing activity carried out in the month of May to June with State Agriculture Dept. NLRDF facilitate the farmer and Govt. agencies. In this activity total 1464 soil samples were collected from 1464 farmers covering 45 villages.

### Staff Training

To build the capacity of staff in terms of BCS and agronomic aspect 3 staff training were arranged in the year.

First training was given to staff on 19<sup>th</sup> & 20<sup>th</sup> May 2017 by BCI accredited trainer, Mr. Prashant Tekade, Mr. Dipak Khande and social experts Mr. Chandrashekhar Jikar. Guest lecture on irrigation management by Mr. Vishal Umale (Agronomist, Jain Irrigation). In this training detailed training given on BCI, MPCs, Cotton cultivation practices like selection of varieties, pest identification and management, Beneficial insect identification their role and importance, composting and botanical preparation,



fertilizer management, various methods of irrigation, water conservation, clean cotton picking and storage, Social aspects like child labour, age, rights, hazardous work, Gender equity, fair minimum wages, freedom of association, bounded labour etc. and data capturing and maintenance.

Second training was given on dt. 30/06/2017 & 01/07/2017 by local agronomic experts Mr. Gajendra Wankhade. He explained about cotton cultivation, soil and water conservation. Staff role as a social volunteer.

Third training was conducted for one day on dt. 29/08/2017 with Dr. PDKV Akola. In this training Dr. Surendra Deshmukh (Cotton Breeder, Cotton Research Unit) imparts detailed knowledge on cotton varieties, University contribution, Cotton history and cultivation practices. Dr. Prashant Nemade (Entomologist, Cotton Research Unit) explains the pest and beneficial insects their role and management, Pink Bollworm life cycle, occurrence, damage and management. Dr. Wadatkar (Head Irrigation and Drainage Dept. College of Engineering) give lecture on various irrigation types, different water measurement instruments, Water measurement. Dr. Deshmukh (Professor Irrigation and Drainage Dept. College of Engineering) explains about types of fertigation, how to apply fertilizer, different types of irrigation and their parts, care of drip irrigation.

### FFB (Record Keeping)

Complete set FFB including agronomic data capturing sheet, Cotton POP containing BCS information, Safe use of pesticides, Compost and botanical preparation pamphlet and file were distributed in the month of May to June. FF & PU Manager trained the LG farmers on how to capture agronomic data and note down on FFB in the month of May to June. In case of illiterate farmer their house member who are literate were

trained. In this activity farmers are educated how to write the cotton cultivation data on given sheet, its importance, how it is useful in respect of BCS. In every LG 2 training in New PU and 1 in Old PU were conducted. Total training given 304 in 211 LGs covering the 7020 farmers.

### LG Training

To build the capacity of farmers on BCS and good management of cotton cultivation, we have categories the training and formulated training topics to train the LG farmers.

Sr. No.	Training	Months	No. of LG	No. of Beneficiaries
1	Cotton Cultivation	June	118	2615
2	Integrated Pest Management	July, August and Sept.	118	2802
3	Nutrient Management	June, July and August	118	2860
4	Water Management	May, August	118	2727
5	Decent work	June, August, October	118	2850
6	Training on Fiber quality and cotton contamination	September, October	118	2854
7	Training on safe use and disposal of pesticide	July, August & September	118	2770
8	BCI Introduction	June	93	2627
9	BCI MPCs	July	93	2791
10	Nutrient Management Practices	July and August	93	2463
11	Pest and Disease Management	July, August and September	93	2364
12	Water Management	August, September and Oct.	93	2561
13	Decent work	July, August and September	93	2298
14	Fiber quality and clean cotton picking	September & Oct.	93	2397



## Awareness Activity

**Wall Paintings** In the year 2017-18 we have done 15 wall paintings in Old & New PU covering 52 villages. It is community awareness activity which give the message on child labor and their rights, safe use of pesticides handling while spraying.

**School Rally** Organized on the eve of 15<sup>th</sup> August with local primary school in the villages. We have organized 14 rallies disseminating the message on BCI practices and Child labour awareness in Babulgaon and Mazod centres 9 rallies covering New & Old PU villages (Goregaon Bk.& Kd., Kapashi, Sukali, Degaon, Bharatpur, Mazod, Khirpuri and Takli khureshi) and in Barshitakli centre 5 rallies (Salpi, Walpi, Nimbhara, Mahan, Mahagaon and Alanda).

**Labour Training** Training were conducted under Decent work. Total 64 training were conducted in both PU. In Old PU 37 and in New PU 27 training were conducted. Labour are aware about freedom of association, minimum wages, what is child labour & hazardous work, bonded labour, safe use of pesticides, health safety, local PPE use and right way of pesticide formulation.

## School Awareness Training

Conducted school training programme in both PU, objective of training to aware the students about the child labour, their rights, government initiative and ill effects of pesticides on their health, environment and what is hazardous work, how it effects on their health and growth. Total 25 training were conducted in project villages.

## Tree Plantation

Activity carried out with LG lead farmers with Social Forestry Dept. 2000 plant saplings of Neem, Karanj, Glyceridia, Cassia, Custard apple in 20 villages of Old PU and 15 villages of New PU. Arvind team link the LG with Social Forestry Dept. for free saplings and LG had done Shramdan to plant the saplings.

**Infield Training** Objective of training is farmers learn practically by seeing in the field. These training includes the pest and beneficial insect identification, how to take observation of plants, exchange the good practices within farmers, trapcrop, importance of refugia, pest damage and its control. 2 training were conducted in every LG in farmers field covering 6800 farmers of both PU.

## Clean Cotton Cultivation

Training were given in 31 villages covers 401 farmers mainly focus on clean cotton picking and good storage practices to avoid contamination. Farmers are educated on various types of contamination, sources, how contamination is impacted in fabrics, good practices to avoid contamination, how to improve the cotton picking and storage practices.



## Farmer Producer Organisation (FPO)

NLRDF initiated the project of Farmer Company, as a part of this, a meeting was planned with the farmers of Khedbrahmama Taluka, DDM, NABARD Mr Naval Kannor presented in the meeting. The purpose of the meeting was to generate awareness among farmers about FPO. DDM discussed the following issues to the farmers in the meeting.



- Process of FPO and planning of forming 2 FPOs of 500 farmers by NLRDF with the support of NABARD
- Importance of farmers' organization
- Focusing on profit
- Purchasing of seeds in group
- Forming board of directors
- Share holding
- Execution by FPO with the support of NLRDF and NABARD, and after three years FPO will work independently
- increasing member of FPO

### First level training program was planned by SajjataSangh in which following discussions were held

- Importance and structure of FPO
- Roles and Responsibilities
- Registration process of FPO
- Planning and implementation
- Marketing

2 FPOs named ***Khedbrahmama Tribal Agriculture Producer Company Limited*** and ***Nirankush Agriculture Producer Company Limited*** were formed under the company Act. After the registration process of FPOs, Board of Directors called a first meeting in which resolution was passed to select Chairman, to appoint CEO and Auditor and opening bank account. Khedbrahmama Tribal Agriculture Producer Company Limited and Nirankush Agriculture Producer Company Limited has 618 shareholders and Nirankush Agriculture Producer Company Limited has 623 shareholders.

Exposure visits were organized for Board of Directors and members at Krushidhan Agro Producer Company Limited, Modasa, and Viksat organization. Kharoj.Mr Manubhai Vadher – CEO, Krushidhan Agro Producer Company Limited discussed and shared activities and learning of his FPO. He explained the process of making depo of seeds and fertilizer. He also shared that Krushidhan Agro Producer Company Limited has turnover of Rs. 50 lakhs and earns 1.25 lakhs profit. He also discussed about accounting system. Then farmers visited other members of FPO in the village and learnt their experiences. They also visited vermi compost bed and the shop of agricultural products. Later they visited soil testing and understood about it. This exposure visit was very helpful.



## National AIDS control Programme Migrant Workers Project at Dahej, Dist- Bharuch

There are many migrants workers in Dahej Industrial Area Dist - Bharuch. They are from various parts of India e.g. Bihar, Rajasthan, MP. Punjab, Orissa and other districts of Gujarat. They mainly between age group of 18-49 years. Their literacy level is low. Due to high unemployment in their native places, they migrate to the Dahej industrial zone. They are earning 8000 to 15000 per month. They either live at their work-place or rental places with co workers. They visit their families annually/biannually at their native place. They spend 10 to 12 hours in their work place. Excess money and being away from family make them vulnerable to indulge into high risk activities.

This project helped to scale up TIs with the aim of reaching out to the targeted population groups.

The interventions under this programme included: (i) the provision of behavior change interventions to increase safe practices, testing and counseling, and adherence to treatment, and demand for other services;(ii) the promotion and provision of condoms to HRG to promote their use in each sexual encounter; (iii) provision or referral for STI services including counseling at service provision centers to increase compliance of patients with treatment, risk reduction counseling with focus on partner referral and management.



### IPC Meetings

Inter Personal Communication (IPC) is very important process. According to the process 10 to 12 migrants are mobilized and are given awareness and education on HIV/AIDS. The activities are done by ORW and PE. Awareness and information during the meetings were disseminated through IEC materials, condoms demonstration and used IPC tool which included body mapping, importance of using condoms, seasonal map and daily routine of migrant. In the meetings, emphasis was given to encourage targeted stakeholders to join with the project.

### Counseling

Counseling is very crucial step after IPC. Counseling help migrants to understand their issues and make them stronger which help them in their treatment process. After identifying HRB through IPC, it is registered by counselor.

### Health camps and testing

Organization made efforts to avail health services to beneficiaries by health activities through health camps. The health camps focus on providing solutions, information dissemination and preventive health care practices. The objective of conducting the camps was to create awareness and offer counseling about general health and health care issues, as well as provide non-specialized health care services.



As per target 25 camps per month are planned. During the camps, check up of HRP and other people is done and refers STI patients for further treatment. A number of targeted stakeholders attended the health camps and availed assistance, guidance and necessary information regarding HIV/AIDS. Organization also helped migrants for ICTC testing.

### Demand generation activity

This activity focuses on generate awareness and sensitization on treatment of HIV/AIDS, ICTC testing, STI, using condoms etc. After ten days of the program, the team plans for follow up to monitor and assess the progress. Specific visits to the migrant colony were planned and the project staff met about 80 migrants in the colony, and also they were provided essential services by placing stalls at the colony through which they get information regarding their health, use of condoms, SIT treatment and also other related information through IEC.

### Rally

A rally in coordination with primary school was planned on awareness generation of HIV/AIDS. Slogans were prepared. School teachers, children and people from colony participated in the rally.

### Poster exhibition

Poster exhibition is an effective medium to generate and disseminate education particularly among migrants on HIV/AIDS. Poster exhibition was organized through which people from migrant colony received awareness and understanding on HIV/AIDS.



### P.E Meeting and Training

In this meeting and training, a local person was identified as P.E, and helped them to make understand about HIV/AIDS related information, benefits of testing and health camps. Generally P.E is trained and guided by ORW, Counselor and PM.

### Stakeholder Meeting

Organization conducted different stakeholders meetings with medical staff, contractor, village Sarpanch, Panchayat members etc. These meetings were helpful to promote awareness and education regarding HIV/AIDS.

### DIC Meeting

Drop-In-Center (DIC) is very helpful to migrants. They come to the DIC for counseling, rest and getting information. Organization has DIC at Dahej and also has arranged a room from Reliance and PHC.

### Video Show

Video shows were conducted by organization during health camps, counseling, IPC programs and DIC meetings. During video shows migrants get awareness and education on HIV/AIDS and condom promotion.

### Street Play

The organization planned street plays to generate and disseminate awareness and education among people on HIV/AIDS. This activity was very helpful to develop understanding and to be sensitized on HIV/AIDS.

### Condom Distribution

Organization planned and took care for distributing condoms. Unsafe sex is always dangerous to life which organization made efforts to sensitize migrants and people on HIV/AIDS.

### Celebration of World AIDS Day

NLRDF organized week celebration for generating awareness on HIV/AIDS. The celebration started



on 1<sup>st</sup> December on World AIDS Day. The program was initiated from Bharuch Railway Station on 30<sup>th</sup> November 2017 followed by poster exhibition and distribution of IEC materials, red ribbon and disseminated awareness on HIV/AIDS. Railway staff and general public participated in the program. During the program, Shri Satish Mistry of Vihan Project were present. Print and electronic media also took note of the program.

On 1<sup>st</sup> December, Organization conducted different awareness programs at SRF Company. A drama "Jindgi Jindgani" was played, poster exhibition and a talk were planned, and condoms also were distributed. And the same process of program was followed at WellSpun company. All the programs were successful and received good responses from the people. On 2<sup>nd</sup> December, program was organized at Dahej Chokdi where IEC related activity and exhibition were done, and IEC materials were distributed. On 3<sup>rd</sup> December, street play was planned and IEC materials were distributed at Jolvani market in coordination with Filatex company, officials of the company were present in the program. On 4<sup>th</sup> December, a program was organized at Jubilant Company, Vagra. Shri Ashok Parmar – ICTC Councilor of Vagra was present in the program.

The interventions under this programme included: (i) the provision of behavior change interventions to increase safe practices, testing and counseling, and adherence to treatment, and demand for other services; (ii) the promotion and provision

of condoms to HRG to promote their use in each sexual encounter; (iii) provision or referral for STI services including counseling at service provision centers to increase compliance of patients with treatment, risk reduction counseling with focus on partner referral and management.

#### Celebration of Migrant Day – 18<sup>th</sup> December 2017

NLRDF celebrated Migrant Day on 18<sup>th</sup> December 2017. The program was organized in coordination with Navin Floren and Lubrizol company with support of Himanshu Vanza and Dinesh Parmar. Miss Priti Rana – Project Manager and Shri Jignesh Bhimraj – Councilor interacted with migrant workers gave information on HIV/AIDS including using of condoms. Questions-Answer session also was followed.

A health camp was organized by NLRDF in coordination with Fortune Hotel on 30<sup>th</sup> November 2017. During the program, the employees of Fortune Hotel were present. Project Manager gave details about working in Jolva village, Khedbrahma and Idar. Shri Jignesh Bhimraj provided detailed information about HIV/AIDS.



Sr. No.	Activities	Population Covered
1	No. of IPC conducted	3005
2	No. of migrants were contacted through IPC session	32204
3	No. of migrants registered	9321
4	No. of Demand Generation Activities	31
5	No. of Health camps organized	258
6	No. of migrant treated for STI	251
7	No. of migrants HIV positive	2
8	No. of total outlet established	50
9	No. of ICTC Referral	2768
10	No. of HRG tested for HIV	949
11	No. of migrants counseled	6171
12	NO. of migrant came in NGO Clinic	5608
13	No. of condom Distribution	53826
14	No. of Advocacy meeting	31
15	No. of Staff Meeting	49
16	No. of one day P.E. meeting	12
17	No. of street play	3

## National AIDS Control Programme HIV/AIDS Control Programme in Sabarkantha

The project HIV/AIDS Control was implemented with the support of Gujarat State AIDS Control Society, Ahmedabad. NLRDF has been actively involved with GSACS in the programme since 2003 and has been implementing the programme in Sabarkantha district. These interventions provide comprehensive and integrated approach for HIV prevention among the marginalized and vulnerable populations. NLRDF Target areas for the programme are Idar, Khedbrahma, Vadali and Himmatnagar. Target population in core group MSM-390 ,FSW-610 Total HRG: 1000

(MSM- Male having Sex with Male and FSW - Female Sex Worker).





### Following are the major components to control epidemic of HIV/AIDS in the areas

- BCC- Behavior Change Communication.
- Condom Promotion.-condom distribution & condom demonstration.
- STI CARE -counseling, Regular Medical Checkup (RMC), Presumptive Treatment (PT), Sexually Transmitted Infections(STI) Syndrome treatment.
- Referral and linkages- Integrated Counseling and Testing Center (ICTC) Anti-Retroviral Treatment(ART),DOTS, DIC center, Govscams,
- Enabling Environment
- Community Mobilization.



Peer Educators are trained by GSACS and they have been given Orientation by the organization at the work place regularly in monthly meetings. The various sessions included condom demonstration, counseling with key population regarding RTI and STI, RMC and PT. Condom promotion is done by peer educators by one to one contact. Participatory methodologies like games and interaction sessions were planned in the training.

Referral services and linkages are provided at ICTC center in Civil Hospital Himmatnagar, ICTC Center Idar, Khedbrama, Laxmipura, Vadali PHC center, ICTC Vijapur, Pilvai F-ICTC center, etc.



### Major Activities Conducted During the year

Sr. no	Particulars	Achievements
1	Converge	8637
2	STI Clinic Visit	2730
3	Regular Medical Checkup	2359
4	Presumptive Treatment	359
5	STI Treatment	12
6	HIV Testing	1550
7	RPR Testing	1550
8	Counseling	1327
9	Free condom Distribution	137744
10	Hotspot & deemand meeting	40
11	P.E Review meetings	59
12	DIC meetings	26
13	Crisis Meetings	2
14	Stakeholder Meeting	16
15	STI Meeting	7
16	DIC Committee Meeting	8
17	1-Relly ( World Aids Day)	Relly

## Economic Assistance to Widows for Rehabilitation



The programme of giving economic support to widows is being implemented by NLRDF for the last twelve years. The basic objective of this programme is to make widows independent, self sufficient and self reliant so that they can respectfully earn their livelihood. They are trained in various vocational skills and given kits to earn their livelihood. As a part of training, lessons in entrepreneurship development are also given in which quality assurance, marketing, management of trades costing are included to enhance their self confidence, so that they can start their own business. After the completion of the training a kit worth Rs.8000/-is provided to each widow.

NLRDF has so far implemented this programme in 20 districts of Gujarat State and imparted training to 11192 widows. The Government of Gujarat has awarded target of imparting training to 50 widow in Ahmedabad districts.

### Objectives

The programme is sponsored by Department of Women and Child Development, Gandhinagar for rehabilitation of unsupported widows in Gujarat State. Women Entrepreneurship Development Programme is implemented in order to make the widows self sufficient. The aim of the programme is to provide with economic development along with self respect.

### Subjects incorporated in the training

- Business Opportunity Guidance
- Selection of Trade/Occupation and its criteria
- Market Survey/study through practical self experience of "Mini Market"
- Experience sharing with successful entrepreneurs
- Market management
- Technical Training in their selected Trade
- Preparing Project Report

### No. of Training held during the year

No	District	Centre	Duration	No. of beneficiaries
1	Ahmedabad	Bapunagar - 1	4 weeks	25
2	Ahmedabad	Bapunagar - 2	4 weeks	25

The training was imparted through innovative and practical methods like games, group discussion, group activities, field work, field visit, mini market, lectures of successful women entrepreneurs etc. As a part of technical training raw materials of relevant occupations are provided to the participants.



### Kit distribution to widows

The organization provides training to the widows with the help of Women and Child Department and provide them necessary equipments/kits for their business. As help they receive kit through which they start their business initially. During this year networking and linkages were done with Women and Child Development Department, Gandhinagar and at the District level. This coordination at the State and District level helped to receive kit for widows. The widows who participated in the training from the year 2015-16 to 2016-17 receive the kits for their business. The kits were distributed to 300 widows in 2 districts.



### Details of Kit Distribution

Sr. No.	Place of Kit distribution	District	Date of Kit distribution	No of Beneficiaries
1	Shri Chandraprasad Desai Hall, Bapunagar	Ahmedabad	22/07/2017	75
2	Varinath Hall, Detroj	Ahmedabad	03/10/2017	50
3	Khatri Samajvadi, Mandavi	Surat	05/01/2018	125
4	Shri Chandraprasad Desai Hall, Bapunagar	Ahmedabad	22/03/2017	50



## Vocational Training Programme for Vulnerable Women

The organization planned the training programme with the support of Gujarat Women Economic Development Corporation Ltd, Gandhinagar. The objective of the programme is to help VULNERABLE WOMEN and help them sustain their lives by providing them training of entrepreneurship.



### Details of the Training

Place	Type of training	No of participants	Duration
Idar	Tailoring and cutting	21	4 Months
Khedbrahma	Tailoring and cutting	21	4 Months

During the training, the participants were given sessions of theory and practical which included concept, types of business, analysis of cost and benefits. At the end of the training women received certificates. After training, with the financial help of NLRDF they were given tailoring machines which helped them to start their own income because of work they get. Now women were economically strengthened and became sustained as women started earning. Participation of women in the training programme and aid of getting tailoring machines raised their confidence and now they are very happy and they will do their own work. This will help them to live with dignity.



### Outcomes

Voices of women came from their experiences that because of support they received by the organization, they could develop potentials of entrepreneurship and could bring positive changes in their lives which impacted the society also.



## Program Under Village Child Protection



Certain child protection schemes to protect child are implemented to provide security to children in our country. All these schemes are called Integrated Child Protection Scheme (ICPS). This scheme is implemented from village to District level.

- Village level–Village Child Protection Committee
- Taluka level–Taluka Child Protection Committee
- District level–District Child Protection Committee

Under this scheme, NLRDF formed village level committees in 73 villages of Khedbrahma Taluka and 59 villages of Poshina Taluka of Sabarkantha District.

Firstly, Gram Sabha (Village meeting) is held and village child protection committee is formed in Gram Sabha. The committee is formed of 11 people consisting of village Sarpanch, Talati, Anganwadi worker, primary school teacher, nurse, two village leaders, two representatives from the village and two children. Total 132 committees have been from in 132 villages.

The main aim of the committee is to spread awareness about laws and different Government schemes. The committee also works to conduct meetings with children at the village level and to assess issues of the village and to work on it further.



## Jal Hi Jivan – Save Water Campaign

NLRDF with the support of NABARD initiated “Jal Hi Jivan” (Water is Life) campaign in 29 villages of Khedbrahma Taluka. The campaign was planned for a month from 2<sup>nd</sup> June to 3<sup>rd</sup> July 2017. The focus on campaign was on water conservation, cleanliness, importance of toilets and farming technology.



During this program, villagers got information and awareness on water conservation through different experiments; and understanding on check dam, gully plug, pond, etc. Awareness also was disseminated on drip irrigation and other related system, water wastage. Villagers also were given information on different Government schemes like drip irrigation, small check dams, deepening well etc, and their benefits to the villagers. About 3319 villagers from 29 villages participated in the program.

Action in the villages also was made through the exercise of PRA and was presented to the Government to get associated with the different schemes. School children organized a rally in the villages provided support to the program. A committee of “Jal Doot Swayamsevak” was formed and now the committee will work and promote the campaign and will spread awareness on different Government schemes in the villages.

After the end of the whole program, a debriefing workshop by NABARD was organized in which Collector, DDO, CGM of NABARD were present in the workshop.



## Campaign with farmers on Clean Cotton



Since years NLRDF and Arvind Limited in the Talukas of Vadali and Khedbrahma work in the area of rural development. The employees of Arvind Limited and NLRDF have generated and disseminated awareness and information on litter free cotton by organizing night meetings with the farmers in the villages. During night meetings with the farmers and villagers, interactions were very helpful and meaningful on 10 different litters (wastes) which harm cotton:

- Head hair
- Rapper of tobacco
- Dowry

- Kathi
- Fibers of plastic bags
- Threads of sari
- Feathers of birds, etc.

Farmers and villagers also were given understanding on the process of using cotton bags prepared by Arvind Limited keeping cotton in the bags during braiding, during working in farms and storing cotton in the bags and packaging, which contain about 28 to 32 kg cotton in a bag.

**Process of selling** The farmers take away their cotton bags to the vendor Shree Ji Ginning Factory which has been associated with Arvind Limited and farmers get good price on their produces.

**Benefits to the Farmers:** The farmers who have associated with the program get good market price by Arvind Limited. Market prices are checked prior to loading produces to the market yard. The minimum and maximum prices are checked, and farmers are given good market price comes between minimum and maximum prices. So accordingly farmers get more price than market yard.



## Crop Protection Workshop



Under the initiative of Knowledge Dissemination through Distance Learning scheme running by Agriculture University, Dantiwada, NLRDF with the support of KVK organized workshops on 'Crop Protection' in Zanzvapanai and Rudramala villages of Khedbrahma Taluka.

In the beginning of the workshop, Shri S. M. Patel, Scientist, Sardar Krushi University interacted with the farmers and discussed benefits of using effectively local tools and techniques to get maximum produces from agriculture and livestock.

Shri A. M. Sheikh, Head, KVK discussed with the farmers on effects of overuse of fertilizers on

environment and health of human. He encouraged farmers not to use fertilizers and pesticides which are very harmful to agriculture and human society. He encouraged farmers to go for organic farming and to contribute in better way in the society. Dr. Sunil Patel, Sardar Krushi University, Dantiwada interacted with the farmers and gave information about the diseases of animals occurred during monsoon, winter and summer. He also discussed about treatment and caring of their livestock.

Shri Vinod Desai, Representative of NLRDF gave information on different projects going on in the villages and their effects in the lives of villagers. NLRDF has made efforts and organic farming project has come out with good opportunity for farmers to develop new production methods and access new markets. It also helped initiating supporting existing capacity building programmes as well as promoting the exchange of experiences and information between the farmers. Total 108 farmers participated in the workshops.





## Solar Light Project – Tuvar Village - Khedbrahma



Mr. John C. Camillus, Professor of Strategic Management, University of Pittsburgh, USA had visited our field area along with his two team members and Mr. B.M. Shah – Executive Director, NLRDF. During this visit a meeting was planned at village Tuvar, a tribal village, with villagers and Panchayat members. During interaction with the community, they came to know about the situation of the community people. Community people shared that most of the families in the community do not have facilities of electricity and sanitation, because they are unable to afford the cost of power connection.

After the meeting Mr. John Camillus requested NLRDF to undergo a survey of the village to assess the needs and to prepare detailed report on comprehensive needs of the community - power

to household, potable water, Sanitation, hygiene, health education etc. In this direction, NLRDF did survey in the village and forwarded the detailed report to them. They have studied the report and sanctioned \$ 157682 to NLRDF for the following work in the Tuvar village.

- Solar light in 50 houses of lower income family
- Solar street light in the village
- potable water plant for the people
- 2 sanitation blocks at 2- places 5 – in each place
- Community centre with tele health

In this regard, part payment has been released by the University of Pittsburgh to NLRDF for the above project subsequently. NLRDF has entered into agreement with Safeworld Rural Service to implement the above project. Implementation of the project will be initiated in April and will be completed within 3 months of period.

During the year various meetings were held with the villagers, Gram Panchayat as well as Taluka Authority with representative of NLRDF and Safe world Rural Services to acquire the land and permission for the Solar panel and Community Centre and also to solve other related issues to this project.



## Representation of NLRDF in Government

- Member of Advisory Committee of Sabarkantha District-Himatnagar
- Member of local monitoring body for various project of Krushi Vikas Kendra-Khedbrahma, District sabarkantha
- Members of District level Committee for Rehabilitation of Vulnerable Wonem in Sabarkantha District by Women & Child Development Dept. Gandhinagar.
- Member of Committee of E-formal sector Development – Urban Community Development Dept. in Ahnedabad Municipal Corporation.
- Member of Appeal Samiti for Prime Minister Avas Yojana in DRDA of Sabarkantha District.

## Block Placement for Students

Sr. No	Name of Student	Course	Name of College	Place	Period of Placement
1	Kadiwala Akib javed	BRS	Gramseva Maha Vidhyalay - Thava	Khedbrahma	1/12/17 to 31/12/17
2	Vasava Pragenesh Sursingbhai	BRS	Gramseva Maha Vidhyalay - Thava	Khedbrahma	1/12/17 to 31/12/17
3	Makawana Niruben Laxmanbhai	MSW	Lokniketan – Ratanpur	Khedbrahma	1/1/18 to 28/2/18
4	Solanki Indiraben Dhanabhai	MSW	Lokniketan – Ratanpur	Khedbrahma	1/1/18 to 28/2/18

## Visitors

Sr. No	Name	Designation and Name of Institute	Project of Visit
1	Ms. Niruben Patel	Trustee, Vanita Shishu vihar, Danta, Ambaji	NACP field Area visit
2	Rahul Subedar	Field facilitator, UNICEF-Gandhinagar	MIYCN
3	Mrs. Somiya	Field facilitator, UNICEF-Gandhinagar	MIYCN
4	PU Manager and Sraff	Shreeji Edu.Trust, Dhasa, Bhavnagar	BCI Programme
5	Somiya, Kavita & Abhisek	UNICEF, Gandhinagar	MIYCN - Field Visit
6	Nathalie Neiman	The GANT Team Takagonia	BCI – Field Visit
7	Zoe Hannorth	The GANT Team Takagonia	BCI – Field Visit
8	Nicole Zethenus	The GANT Team Takagonia	BCI – Field Visit
9	Miki & Babu	TESCO	BCI – Field Visit
10	Saleena Kupunjoo	2 <sup>nd</sup> Party Evaluation from BCI	BCI – Field Visit



United Nations Children's Fund | Gujarat State Office  
 Plot 70, Sector 19, Opposite Punit Van, Gandhinagar -382019  
 Telephone: (79) 39845600 | Facsimile: (79) 23225364 | gandhinagar@unicef.org | www.unicef.in

GFO/200/2018/42

21 March 2018

Mr. Kanti Patel  
 Chief Manager  
 Narottam Lalbhai Rural Development Fund (NLRDF)  
 NLRC Building  
 Arvind Mills Premises, Naroda Road  
 Ahmedabad 380025  
 Gujarat

Sub: Field visit to four villages of Sabarkantha to see ongoing nutrition and communication convergent programmes for women and children.

Dear Mr. Patel,

At the outset, we wish to express our sincere gratitude to you and your team for all the support and cooperation provided for organising the field visits to four villages in Khedbrahma and Vadali Taluka of Sabarkantha district on 15 March 2018.

As was planned, around 60 Officers of the Communication for Development (C4D) and Communication, Advocacy and Partnerships (CAP) sections of UNICEF across 13 states and Delhi, alongwith a few Officers from Gandhinagar Office, made field visits to the villages, divided into four groups. Various activities were observed by all the groups, and were deeply appreciated by one and all. Attached is a soft copy of a few glimpses of the field visit.

We at UNICEF are deeply touched by the commitment and engagement of NLRDF in addressing undernutrition through various channels for promoting optimal maternal, and infant and young child nutrition. It was quite heartening to see the enthusiasm and ownership of the community specially, the engagement of various stakeholders.

We look forward to continued collaboration with NLRDF to improve the nutrition situation of children in Gujarat.

With best regards,

Dr. Kavita Sharma  
 Nutrition Specialist

September 12 2017

It was truly a pleasure being invited to learn about the many important initiatives of NLRDF. Thank you very much for your efforts and showing us how your work is effecting positive change in the community. Please keep up your work and we look forward to visiting again.

Wishing you great future success,

The GANT team:

Nathalie Neiman

Loë Hannum

Nicole Zottelius

## Visitors



Meeting with Collector and DDO of Sabarkantha with UNICEF Team



Field visit of MIYCN Project area by visitors



Mother Support Group meeting with visitors



Visit of GANT Team to BCI Project area



Visit of TESCO Team to BCI Project area



Visit of Ms. Saleena, 2<sup>nd</sup> Party Reviewer from BCI to our Project area



Team from Vanita Shishu Vihar (NGO), Danta to our field area – Khedbrahma

## Abbreviation

<b>NLRDF</b>	Narottam Lalabhai Rural Development Fund	<b>ORW</b>	Out Reach Worker
<b>PPP</b>	Public Private Partnership	<b>TKN</b>	Taluka Kelavani Nirikshak
<b>NGO</b>	Non Government Organization	<b>HRG</b>	High Risk Group
<b>RMC</b>	Regular Medical Checkup	<b>NABARD</b>	National Bank for Agri. and Rural Development
<b>STD</b>	Sexually Transmitted Diseases	<b>HRB</b>	High Risk Behavior
<b>GSACS</b>	Gujarat State AIDS Control Society	<b>EDP</b>	Entrepreneurship Development Programme
<b>SHG</b>	Self Help Group	<b>PRI</b>	Panchayati Raj Institute
<b>NACP</b>	National AIDS Control Programme	<b>VV</b>	Village Volunteer
<b>STI</b>	Sexual Transmitted Infection	<b>FFL</b>	Fact For Life
<b>PHC</b>	Public Health Centre	<b>IPC</b>	Inter Person Communication
<b>ICTC</b>	Integrated Counseling and Testing Centre	<b>AWW</b>	Aganwadi Worker
<b>CHC</b>	Community Health Centre	<b>ONGC</b>	Oil and Nature Gas Corporation
<b>RTI</b>	Reproductive Transmitted Infection	<b>DIC</b>	District Industries Centre
<b>TI</b>	Targeted Intervention	<b>KVK</b>	Krushi Vigyan Kendra
<b>MSW</b>	Master of Social Work	<b>HIV</b>	Human Immunodeficiency Virus
<b>IYCN</b>	Infant and Young Child Nutrition	<b>AIDS</b>	Acquired Immuno deficiency Syndrome
<b>TRP</b>	Technical Resource Person	<b>FPO</b>	Farmer Producer Organization
<b>BRP</b>	Block Resource Person	<b>AWC</b>	Anganwadi Center
<b>MO</b>	Medical Office	<b>IP</b>	Implementing Partner
<b>EDI</b>	Entrepreneurship Development Institute	<b>PU</b>	Producer Unit
<b>ELM</b>	Employment Lead Model	<b>CC</b>	Cotton connect
<b>FICTC</b>	Facility Integrated Counseling and Testing Centre	<b>VHSNC</b>	Village Health Sanitation and Nutrition Communication
<b>ART</b>	Anti Retro Viral Therapy	<b>BCI</b>	Better Cotton Initiative
<b>DIC</b>	Drop In Centre	<b>TOT</b>	Training of Trainee
<b>BHO</b>	Block Health Office	<b>IPM</b>	Intrigeted Pest Management
<b>KP</b>	Key Population	<b>LG</b>	Learning Group
<b>SMC</b>	School Management Committee	<b>BCSS</b>	Better Cotton Standard System
<b>PE</b>	Peer Educator	<b>MPCA</b>	Minimum Production Create Area
<b>DPO</b>	District Planning Officer	<b>PPE</b>	Personal protective Equipment

नरोत्तम लालभाई रुइल डेवलपमेन्ट फंड संस्था अने नाभाईनां संयुक्त उपक्रमे भेडब्रह्मा तालुकाना २८ गावोमां "जुष अजे जु छुवन छे" अभियान कार्यक्रम यथाववामां आय्यो



आ कार्यक्रममां ग्रामज्जोने अेकत्रीत करीने पाली बयावोनां जुडा जुडा प्रयोगी समजाववामां आय्यो. वरसादी पाखी वडी जुनु रोडवा, आडबंध, गलीपलज, नाना नाना बेडडेम अने तलाव बनाववानी समज आपवामां आयी. पालीने रोडीने तेना उपयोगी विविध प्रवृत्तिओ जेची के डीप छरीगेशन द्वारा पियत, पासे पाली आपव पाली आपव...

THURSDAY, 25.01.2018

**ईडर-भेडब्रह्मां महिला सीवण तालीम वर्गे योजया**  
 भायड : नरोत्तम लालभाई रुइल डेवलपमेन्ट फंड-ईडर द्वारा विपरीत परिस्थितिमां छुवन व्यतित करती महिलाओ माटे ईडर अने भेडब्रह्मां ४ महिनाना सिवण तालीम वर्गोनु आयोजन करी महिलाओने पगभर बनाववामां सुपेरे प्रयास थयो छतो. ४२ ताबीमार्थीओने सिवण तालीम आपवामां आयी छती. भेडब्रह्मा नायथ मामलतदार जे.पी.नाथी तथा प्रोजेक्ट डायरेक्टर के.पी.पटेलनी उपस्थितिमां महिला सिवण तालीम वर्गोनु समापन थयुं छतुं.

**दिव्य भास्कर** शुक्रवार • 01 डिसेम्बर, 2017



भडुय रेलवे स्टेशन पासे अेडस जगृति अंगेनो कार्यक्रम योजायो छतो. -राजेश पण्डे

**रेलवे स्टेशन पासे पोस्टर प्रदर्शन, पेम्पलेट तेमज जगृतिलक्षी सुत्रो उख्यारायां भडुयमां अेडस जगृति अंगेनो कार्यक्रम योजायो**  
 अेयआईवी-अेडस प्रिवेन्शननी प्रतिकरूप लाल रिभीननी वडेयणी कराई

कार्यक्रममां भडुय रेलवे स्टेशनना स्टेशन सुप्रिन्डन्ट डी. के. राजूल, विधान प्रोजेक्टना डायरेक्टर सतिष भिरनी, नरोत्तम लालभाई रुइल डेवलपमेन्ट फंडना प्रोजेक्ट मेनेजर प्रिती राधा, कडन्सिलर जिबेश भीमराज, मेधना गोर तेमज डिड अेरियाना अधिकारीओ जितेन्द्र परमार, जगदीश राडोड, बीलावल वेस्तीयाशी तेमज रणज्जतसिंह गोडिल सखितना उपस्थित रखां छतां. तेमथे अेयआईवी- अेडस प्रिवेन्शननी प्रतिकरूप लाल रिभीननी वडेयणी कराई छती.

आयबरसांग जिल्लानां डेक्कटरशी. डी.डी.ओशी. नाभाईनां CGM अने संस्थानां प्रतिनिधिओ आब  
**भाबसरनी युनिसेफनी टीमे मुलाकात वीधी**



वडावी तालुकाना भाबसर गामनी दिव्डीनी युनिसेफे मुलाकात वीधी छती अने कुपोषण, शिक्षण, आरोग्य जेवा मुद्दा पर चर्चा करवामां आयी छती. आ

शुक्रवार, 8 डिसेम्बर, 2017 | 3

**वडावी आर्टस कोलेजमां अेडस अंगे व्याख्यान योजायुं**  
 वडावी : वडावी डेणवणी मंडण संखालित शेड बी.सी.शाह आर्टस कोलेजमां अेयआईवी अेडस अंगे विद्यार्थीओमां ताजेतरमां व्याख्यान योजवामां व्याख्यान वडावी सामुहिक सलाहकार भरतभाई प्र लालभाई रुइल, शंकरभा अेयआईवी अेडस अंगे छतो. कोलेजना आचार्य डी. अेन.सी.सी. ना अे.अेन. पटेल, दिव्याभेन पटेल तेम विद्यार्थीओ उपस्थित रखां छतां.

FRIDAY, 8.12.2017

**ईडरमां अेडस जगृति कार्यक्रम योजायो**  
 भायड : ईडरनी नरोत्तम लालभाई रुइल डेवलपमेन्ट संस्था द्वारा विव्व अेडस दिननी उजवणी करवामां आयी छती. संस्थाना कडन्सिलर शंकर वखकर, जगदीश पटेल, योगेश वखकर द्वारा अेयआईवी. अेडसनी जगृति विशे विद्यार्थीओने समज आपवामां आयी छती. तालुकानी उमेदगड तथा भेडब्रह्माना कन्या विद्यालय अने वडावी कोलेजमां योजथेला अेडस जगृति कार्यक्रममां भाग लीधी छती.

# रुढियों को बदलाव से जोड़ने की कोशिश

गुजरात के आदिवासी इलाकों में एनजीओ, युनिसेफ, आंगनवाड़ी कार्यकर्ताओं तथा गुजरात सरकार के प्रयासों से एक बदलाव होता दिख रहा है. गर्भवती महिलाओं के स्वास्थ्य के बारे में चर्चा हो रही है और उन्हें पोषण दिलाने के प्रयास भी हो रहे हैं. स्वस्थ मां और स्वस्थ शिशु से देश बनता है और आगे बढ़ता है.

**आ** दिवासी समाज की एक खासियत है कि वह देश में हमेशा बदलाव के बावजूद अपने को आसानी से बदलता नहीं, कम से कम परंपराओं और मान्यताओं के मामले में नहीं. सैकड़ों वर्षों से चली आ रही उनकी मान्यताओं में जरा भी बदलाव नहीं होता है, अजादी के 70 सालों में भारत के शहरों में अनगिनत बदलाव आ गए हैं और कई परंपराओं ने दम तोड़ दिया है. मान्यताएं बदल गई हैं लेकिन आदिवासी समाज वहीं ठहरा हुआ है और वहीं बात उसे दूसरों से अलग करती है, वही उसके अस्तित्व की निशानी भी है लेकिन यही मान्यताएं और रूढ़ियां कई बार उनके लिए परेशानियां खड़ी करती हैं. उससे बंधे होने के कारण वे बचाव का कोई जरिया नहीं



गणुदेन्द्र सिन्हा  
 वीथि एडिटर



पोस्टल जोड़न देनी के लिए यह जस्टे वरु कि महिलाओ के लाले-पीले के ररीयो मे बदलाव किश्व जाए.

किन्वा. डबलपुपुओ के आंकड़ों के मुताबिक भारत में 58 प्रतिशत गर्भवती माताएं खुन की कमी का शिकार रहती हैं. यह संख्या बहुत ज्यादा है और इसे कम करने के प्रयास होने चाहिए. इसके लिए सरकारों और एनजीओ को मिल-जुलकर अपने स्तर पर प्रयास करना चाहिए. गुजरात में वह प्रयास रंग ला रहा है. युनिसेफ और अन्य स्वयंसेवी संस्थाओं ने इस दिशा में अच्छे पहल की है जिसके दूरगामी परिणाम होने, ग्रामीण और आदिवासी इलाकों में महिलाओं के लिए पोषिक भोजन का प्रबंध करना टेडी खीर है. गर्बी और संभावनाओं तक पहुंच न हो पाने के कारण मां और बच्चे कुपोषित रह जाते हैं. इस बजट से एक तिहाई बच्चे तो पैदा



## GET IN TOUCH

### ADMINISTRATIVE OFFICE

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### FIELD OFFICES

#### **Khedbrahma**

##### **NLRDF**

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At. Khedbrahma,  
District: Sabarkantha

#### **Idar**

##### **NLRDF**

E-207 Damodar Complex  
Opp-SBI Bank, At. Idar,  
District: Sabarkantha

#### **Dahej - Bharuch**

##### **NLRDF**

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