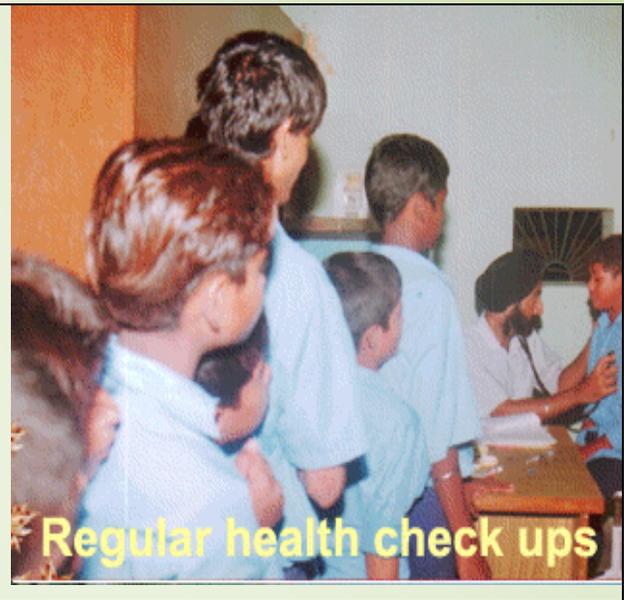


PRAYAS HEALTH SERVICE



HEALTH REPORT

Foreword

Imagine a child separated from his poverty-stricken home, as a part of a rural urban exodus and arriving helpless at the railway station or any bus stop in Delhi to join the thousand others like him in the city. Much more than all of us who are well protected and cared for, this vulnerable child needs attention and care.

They are often described as street or working children, disadvantaged, exploited for work or sex and living in especially difficult circumstances. The new Juvenile Justice Act 2000 defines them as the children “in need of care and protection.” They are a common sight in cities, living under sub-human conditions, like shadows without identities.

However, these children, who number anywhere between 80 to 100 million in India, exist beyond the concern of society, governance and even policy makers. While working with these children for their education, health care, shelter and development, Prayas has attempted to estimate the national budgetary allocations for the most vulnerable 10% of India’s population. The concerned ministries and even apex bodies such as the Planning Commission could not give the estimates.

Finally, from a recent budget analysis made by some NGOs, it was estimated that in the 1998-1999 allocation, 0.2% i.e. 20 paise in every 100 rupees is on children’s health. This has come down from previous allocations, which were about 0.3%. This gives stark proof of the extremely low priority given to children’s health. The share of 80 to 100 million children has to fall within this amount.

Prayas has attempted to fill this gap with its limited resources and has given priority to health and nutrition within this intervention programme. Our philosophy is to respond to the felt needs of these children. With this vision the Prayas Health Service started in 1995 from a health camp near Jama Masjid in the walled city. Since then, we have slowly created some infrastructure such as mobile health vans and clinics in the slums areas. We have reached out to thousands of children through health camps. But we have not been able to give them complete and holistic care, which they deserve and which is also their basic right and which India has committed to the international, constitutional and legal covenants.

Today, Prayas serves almost half a million children in the National Capital Territory of Delhi. This is a small but significant beginning since many of these children would perhaps have simply perished unattended had this support not come their way. Prayas Health Service operates through a full time dedicated team of 43 staff, which includes 5 doctors and a voluntary group of medicos, medical and non-medical institutions. We owe it to the doctors and others in the Prayas Governing Body who have begun this process and to others who have sustained it sometimes with no resources. We are grateful to our partners, the National AIDS Control Organization, the Delhi State AIDS Control Organization and our friends in USA – “Children’s Hope” who have joined hands with us to create this unique dedicated health service for the neediest in Delhi. Health care and nutrition should be the first call in the care and protection of children. Children up to 5 years of age have different health needs from those in the age group of 6-14 years. While Prayas is dedicated towards all these children and there is some Government programme for the younger age group, those in the age group of 6-18 years are often left uncovered.

We intend to intensify our efforts for this age group in the coming years by coordinating with both Government and Private sector organizations to create a network that will reach out effectively to those who are beyond the reach of services. We would like to create a grassroots health care system with referral services dedicated towards such children. We have been actively associated with the Indian Academy of Pediatrics and others such as social service clubs in our endeavours for a deeper awareness and sense of urgency to support the health needs of the children in a more systematic way.

Let us remember, the child cannot wait for our promises for the future – his name is “today” and he needs us now.

VISION:

Prayas aims at providing Health Services to more number of street children in Delhi. A child is a part of a family, and family is a part of a larger community. Hence the plan is to cover all the three levels (child, family and community). The health services would include awareness Programme in health related issues.

The Prayas Health Service stands for tangible medical related activities directed towards the communities in slum clusters of Delhi. Interwoven into this fabric of tangibility is the intangible. A vision that while considering no service as too small, dares to assume that the sky is the limit. Prayas aims at providing direct health services to the half a million children who are in the need of care and protection in the National Capital Territory of Delhi.

What PHS right now stands for is the beginning of an effort, a movement to create a network of health workers to reach out the unreachable. A movement aimed at giving back the disadvantaged, under privileged children, what is their by right-“the right to their childhood”.

About Prayas

Established in 1988 with 25 children in Jahangirpuri (North Delhi), Prayas today reaches out to thousands of helpless street and destitute children every day. Prayas essentially works at the grassroot and most of its centers are located in the slums, in the midst of the community it serves. We in Prayas believe that the needs of a child are synonymous with his basic rights; therefore we strive to provide *education, vocational training, health, nutrition, shelter, counseling and recreation to the neglected street children*. These Prayas community based centers have rendered multiple services to the community in a dedicated manner through its centers in Delhi and have virtually become their lifeline. They try providing them care, protection and health support. Prayas attempts to restore the childhood of a neglected child and is thereby contributing to the nation’s development.

About Prayas Health Service (PHS)

One of the most significant services provided by Prayas for neglected children is the health service. Prayas Health Service (PHS), was established in 1995 with a health camp in the walled city, with the aim of providing health services to city’s half a million street and working children, who live on the streets of Delhi and are beyond the pace of any health programme of the Government. Street children have special health problems because of the conditions in which they live and grow. They are vulnerable to a number of infections most of which go unattended causing unusually high mortality rate and higher health problems to them. Hence, Prayas tries to reach out to as many such children as possible through its **five** dedicated medical units, 36 education centers and with the networking of the strong 20 member Delhi NGO formed for street and working children in different parts of Delhi.

These units are:

- **Prayas Health Service , (West Delhi)**
8/35, Industrial Area, Kirti Nagar New Delhi- 15.
Ph : 011-25927766
E-Mail: prayashealth@gmail.com
Project Manager: Ms Deepika Sharma
Doctor: Dr. Sarla Sharma

- **Institute of Juvenile Justice, (South Delhi)**
59, Tughlakabad Institutional Area, New Delhi -62.
Telefax: 6089505, 6089544, 6078103 (Ph)
Web site: www.prayaschildren.org
Doctor: Dr. Poonam Seth

- **Prayas Observation Home For Boys, (Central Delhi)**
Near Feroz Shah Kotla,
Delhi Gate, New Delhi- 110002.
Ph: 23318003, 23731218
Project Manager: Ms. Monalisa
Doctor: Dr. Anita Malohtra

- **Naya Prayas, (South Delhi)**
Basti Vikas Kendra, J.J. Slum Wing
MCD, Bhanwar Singh Camp,
Vasant Vihar, New Delhi 110057.
Ph: 6140291
Project Manager: Ms. Priyanka Pathak
Doctor: Dr. Mishra

- **Prayas Children s Home,(north Delhi)**
EE- Block, Jahangirpuri, Delhi 110033
Ph: 7121853, 7433906, 7433907.
Project Manager; Mr. Ranjeet
Doctor:

- **Bawana (GRC)**
Ph. 64502393
Project Manager: Jyoti Chaudhary
Doctor: Dr. Kumar

- **Wajirabad (GRC)**
Ph : 27651467
Project Manager: Ms Pratima
Doctor; Dr. Nusrat

- **Anupam Prayas**
Project Manager: Ms. Akhilesh Sharma
Doctor: Dr. Anil kr. Sharma
Ph: 65472103

Prayas Health Service also provides these children to specialists through its widespread network of highly qualified doctors who volunteer their services in Prayas. Each health unit has a motivated and qualified team of a medical doctor, nurse, laboratory technician, counselor, health workers & peer educators for health and HIV/AIDS awareness programme and they cater to the needs of the children living in these slum areas. Delivering these health services to people in slum areas resulted in greater participation of the people in availing these services and thereby improving their health and secondly provides medical treatment through its OPD clinics and emergency health services. The units are assisted by three medical vans, which facilitate in reaching out to those children who are unable to benefit from the five units of Prayas.

The health unit in the West Delhi (8/35, Industrial area, Kirti Nagar) coordinates the health activities of all the other Prayas health units' besides other health and HIV/AIDS related programmes in different areas of Delhi. "Apart from providing health services Prayas also spreads awareness about various health issues including STD/HIV/AIDS to the disadvantaged sections of the society". Prayas delivers these health services because of support from NACO (National AIDS control Organization) Ministry of Health & Family Welfare, Govt. of India and another organization, Children's Hope, USA, Netherlands Foundation of International Child Health (NFICH). The total number of children benefited by Prayas Health Services during the year 2009 were **46,463** (forty six thousand four hundred and sixty three only).

Prayas provides the following health services to the community through its medical center at Kirti Nagar.

1. GENERAL HEALTH

- Outdoor Patients Department (OPD).
- General/ special HEALTH CAMPS
- HEALTH AWARENESS CAMPS
- LABORATORY SERVICES
- PARTICIPATION IN CAMPS / FAIRS

2. TARGETTED INTERVENTION OF FEMALE SEX WORKER

- STDs/HIV/AIDS AWARENESS TO FEMALE SEX WORKER
- STDs/HIV/AIDS AWARENESS TO COMMUNITY AT LARGE
- TREATMENT OF STDs
- IEC MATERIAL
- LIBRARY
- COUNSELLING SERVICES
- RESEARCH AND STUDIES
- PEER EDUCATION
- GROUP MEETING WITH DIFFERENT COMMUNITY

3. NEITHERLAND FOUNDATION OF INTERNATIONAL CHILD HEALTH

- PRE AND POST SURVEY OF THE CHILDREN 0 TO 14 YEARS
- FREE TREATMENT
- FREE HB TESTING
- BAL CLUB
- HEALTH CAMP
- AWARENESS CAMP
- GROWTH MONITORING
- NUTRITION CAMP
- MEETING WITH THE PARENTS
- FOLLOW UP
- REFRELS SERVICE

4. VOCATIONAL COURSE

- NURSING ATTENDENT
- FIRST AID (SANT JONS AMBULANCE)
- COMPUTER
- BEAUTY CULTURE
- ENGLISH SPEAKING
- DRESS MAKING

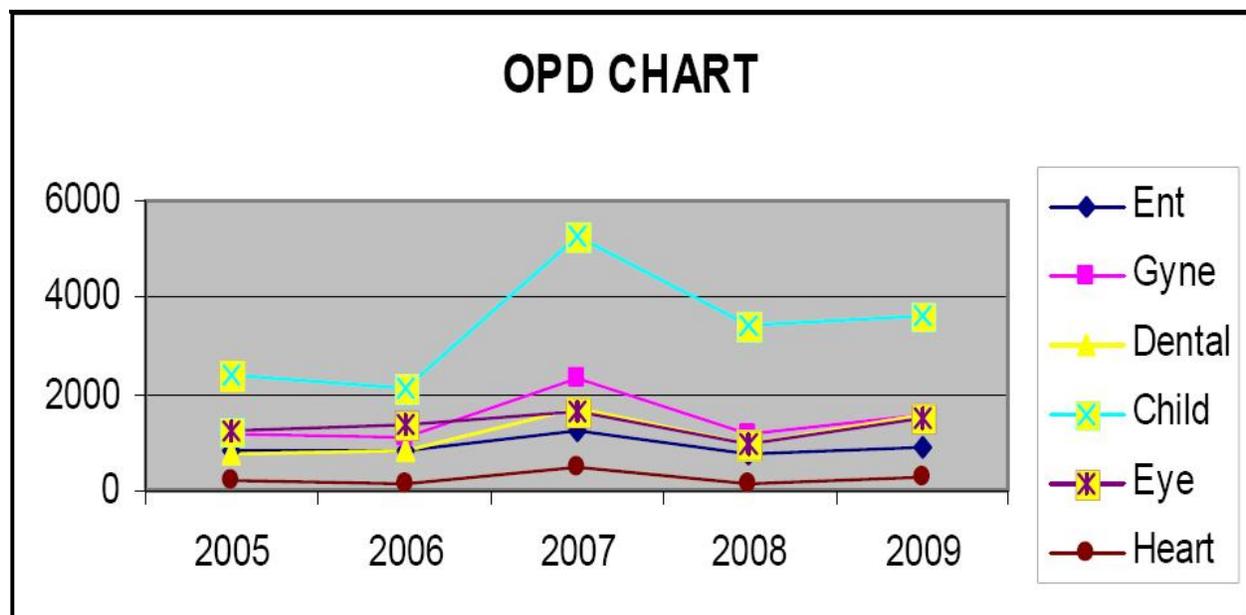
1. GENERAL HEALTH

OPD:

Regular free OPD is run at their premises in Kirti Nagar and other areas to meet the health needs of the children and other vulnerable sections of the community living in the slum areas of Pandav Nagar, Kirti Nagar, Shadipur Depot and Naraina. Based on the need, some of the children are referred to the hospitals for special treatment along the health worker of Prayas under special personal attention. Minor OT procedures like I&D of abscess, suturing of open clean, lacerated wounds, burns dressing etc.

OPD Cases of last five Years

Year	Ent	Gyne	Dental	Child	Heart	Total	Eye
2005	821	1183	756	2372	1204	234	6570
2006	789	1117	815	2138	1394	167	6420
2007	1208	2347	1725	5218	1643	482	12623
2008	732	1162	964	3391	967	166	7382
2009	914	1602	1593	3581	1472	301	9463



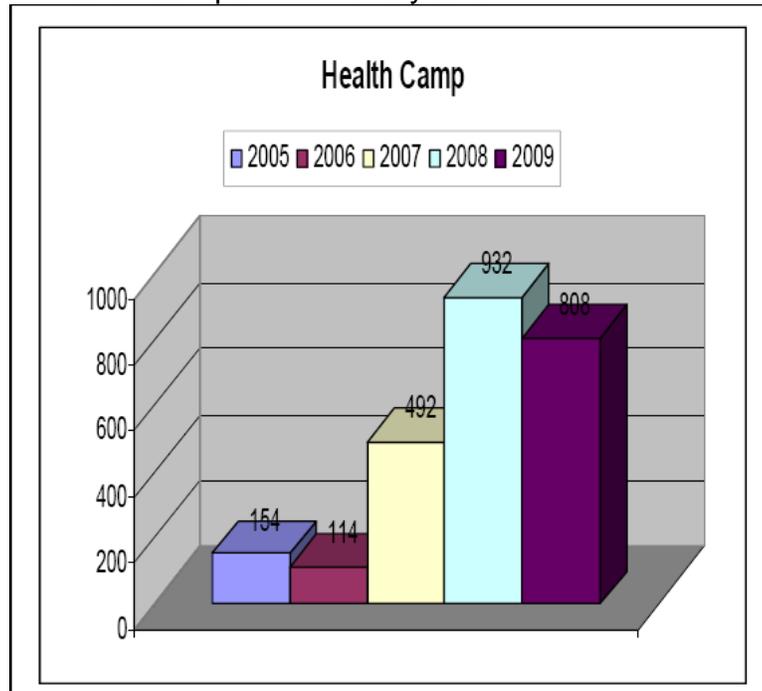
HEALTH CAMPS:

Health camps are organized in different slums of Delhi focusing those children who are not covered by any Government health care programme and cannot come to the Prayas centers or take the services of other NGO projects. Teams of medical and para-medical staff go to the slum area at least once a week for the general health check up and distributing the free medicine.

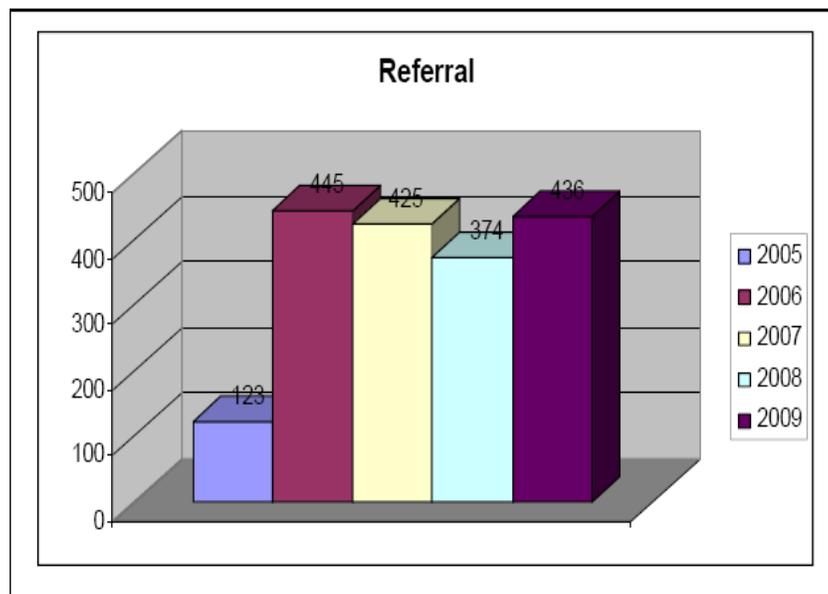
Registration in Health Camp Distribution of Medicine in Camp

Health Camps Detail of 5 years

2005	154
2006	114
2007	492
2008	932
2009	808



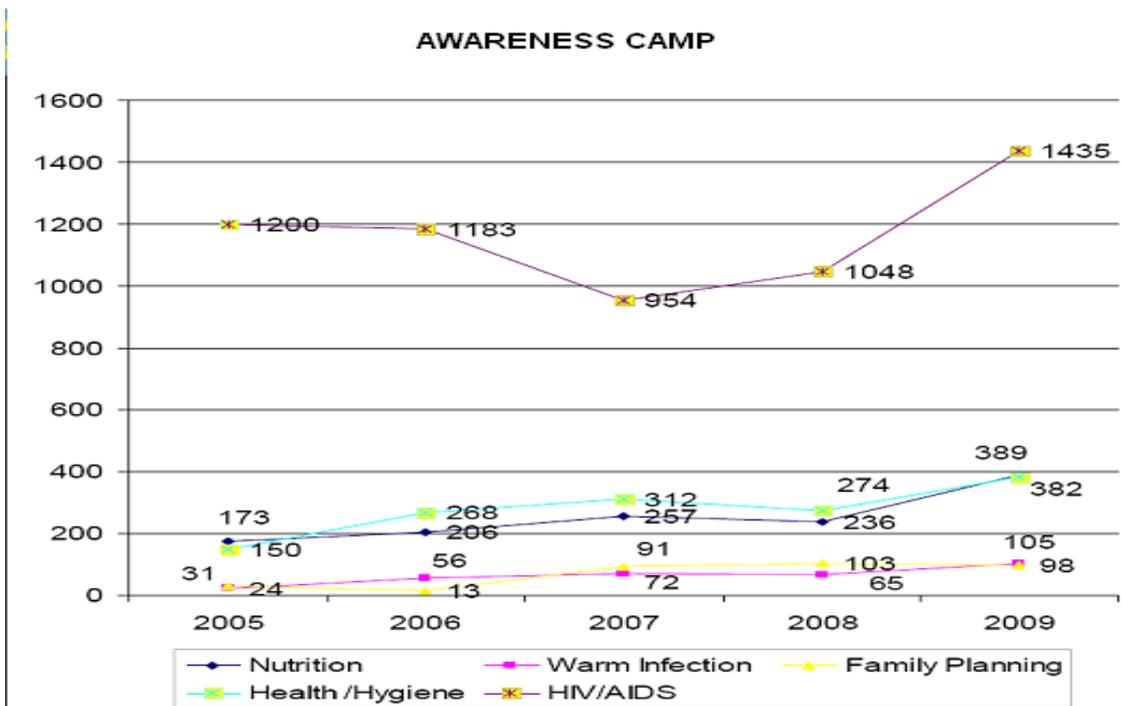
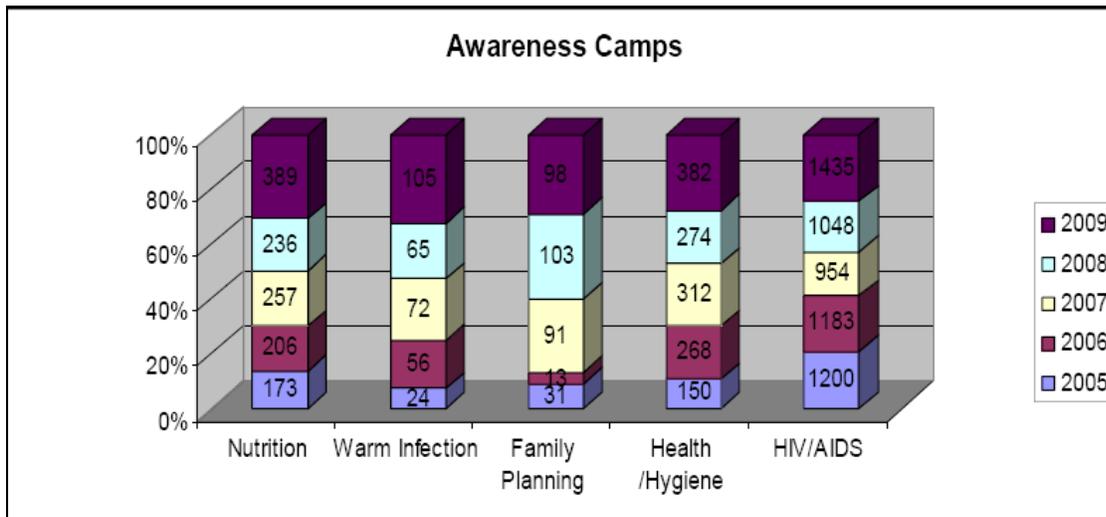
Referral Cases	
2005	123
2006	445
2007	425
2008	374
2009	436



The team in order to make the community aware to the camp. The camps also act as a platform for the GENERAL HEALTH AND HIV/AIDS awareness because during that camp the team is able to talk to the people about the issue.

Katputly Show for aware the community Nutrition Awareness Camp

Awareness camp of five Years					
Year	Nutrition Warm	Infection	Family Planning	Health/Hygiene	HIV/AIDS
2005	173	24	31	150	1200
2006	206	56	13	268	1183
2007	257	72	91	312	954
2008	236	65	103	274	1048
2009	389	105	98	382	1435



LABORATORY SERVICES:

Thorough diagnosis of the health problem of a child, through Laboratory Detection. The Laboratory Services strengthen the OPD service of PHS. It is able to do routine examinations like Hb, TLC, DLC, ESR, WIDAL, VDRL, urine Routine, sugar, ABO and Rh grouping, peripheral smear of malaria parasite, urine bile salt, Bile pigment. The laboratory Service is also nominal cost & assist in the thorough detection of the problem

Lab Investigation in Health Camp

Lab Investigation of five Years

2005 2053

2006 1543

2007 784

2008 1169

2009 1872

Group Meetings

Regular Group Meetings are organized with adolescent boys and girls in order to create awareness among them about various common diseases and other health issues specially STDs/HIV/AIDS. It is often found that the knowledge of sex and sexual behaviour among the street children is vague and inaccurate. Their main sources of knowledge are their friends, media and pornographic literature. Sexual activity starts at very younger age as homosexuality is the most common sexual activity among the street children.

2053	Lab
1543	Investigation
784	2005
1169	2006
1872	2007
0	2008
500	2009
1000	
1500	
2000	
2500	

PHS organizes regular community meetings with major stakeholders like the Government/Private Hospital and NGOs and others like dhaba walas, police personnel, local leaders etc who affect the life of street children. The main thrust is given on the improvement in their knowledge, change in attitude, and behaviour. Various IEC (Information, Education and Communication) medium i.e street plays, film shows, puppet shows, wall writing, display boards are used for awareness spreading. Boards with AIDS Awareness slogans are put up on various important places like postoffices; railway reservation counters and near non-formal education centers of Prayas, areas frequented by rag pickers and also near few dhabas. Slogans on AIDS are written on the walls for spreading awareness on the issue. Lot of enquiries is made telephonically regarding AIDS and STDs.

COUNSELING SERVICES (INCLUDING TELE-COUNSELING):

Our trained counselors provide counseling services to children at the intervention areas for their problems relating to sex, sexuality and HIV/AIDS/STDs. This really proves out to be very helpful to the children, as they can now share their Problems. Various medical camps organized at different intervention areas provide the necessary platform for the screening of STDs cases too. Counselling has brought about change in the behaviour and attitude of the community people. Counseling services are also provided through the telephone. The major problems are related to safe sexual practices and the chances of HIV infection.

TREATMENT OF SEXUALLY TRANSMITTED DISEASES (STDs):

One of the activities of Prayas is the treatment of STDs. Since the presence of STDs increases the chances of HIV infection. Hence it is recommended that STD should be treated in order to reduce the incidence of HIV infection. During the general health camps many STD cases are also identified. Prayas has successfully treated several patients for STDs in its intervention areas by identifying consistent groups of symptoms by following the Syndromic approach (flow chart) prepared by NACO, Ministry of Health and Family Welfare, Govt. of India, which provides simplified STI & RTI treatment guidelines. Those with sexual history with multiple partners are especially counseled about safe sexual practices and partner notification. The STD patients are encouraged for the treatment of their sexual partners. Partner notification offers an important opportunity for identifying a symptomatic patient.

This is particularly important in the case of gonorrhoea and chlamydial infection.

PRAYAS VOCATIONAL TRAINING CENTER

Prayas health service also started the various skill based training programme with the technical support by Jan Shikshan Sansthan, in the course of Nursing Assistance, Computer courses, English speaking, Beauty Culture and Dress making in our premises for the poor and needy slum people by this they can fight our poverty and negligence and show their importance because education is the most powerful weapon you can use to change the world.

We are recently started the first-Aid course with technical support by Red Cross Society.

LIBRARY :

Library for the children and adults at Prayas Health Service. Prayas is also running a library for the community. This library is a place where young people of the community feel good to come. The books in the library are primary in Hindi so that maximum number of children can read them
Library

2. TARGETTED INTERVENTION OF FEMALE SEX WORKER (FSW) SPONSERD BY DELHI STATE AIDS CONTRON SOCIETY

HIV/AIDS awareness programmes are organized for the FSW in different parts of OLD Delhi as per the guidelines given by NACO (National AIDS Control Organization), Ministry of health and Welfare, Govt. of India. The entire programme is designed in a way, which would interest the FSW. It basically involves the following activities vis-à-vis:

Street Play on HIV/AIDS Awareness Campaign on HIV/AIDS Awareness

Condom Distribution

2005 223749
2006 253852
2007 287543
2008 492912
2009 352761

Behavior Change Communication:

The Programme focuses on communication on the AIDS issue aiming at changing the behavior of people. The prime means to achieve this objective is the selection of a group of female sex worker. (Called as Peer educators). From the slum community and their training in the field of HIV/AIDS. The other means are community mobilization through community events and various Information, Education and communication materials.

Peer Educators formation:

The Peer Educators are a link between Prayas and the community. Basically groups of fsw are selected from the slum area and to communicate on general health issues and STDs/HIV/AIDS. These peer educators then reach out to

Condom Distribution

223749
253852
492912 287543
352761
2005
2006
2007
2008
2009

Other youth of their age group and also the general community, especially who involved in the sex activities. In order to make them aware on the issues. They even bring patients suffering from STDs to the PHS clinics or ICTC clinic. Peer Educators also develop acting street plays or programme on HIV/AIDS.

Prayas health service peer educator awarded on world AIDS Day

NEITHERLAND FOUNDATION OF INTERNATIONAL CHILD HEALTH

Prayas also work with Netherlands foundation of International child health in the field of slum community in Delhi (Kirti Nagar , Pandav Nagar, Shadipur Depot, Maya Puri and Narayana) under 0-14 years girls or boys, under this project we serve the free medicine, HB testing, Growth Monitoring and timely follow up of the identified children.

In two year we benefited around three thousand children successfully under this project.

OBJECTIVES OF THIS PROJECT:

1. To meet the basic needs of health care
2. Educating the high risk children and their parents in streets and slums e.g. difference between qualified doctors and quacks
3. To change their behavior towards health related issues by spreading awareness through programs and health camps
4. Medical treatment through OPD and reference to hospitals if needed.
5. Focus will also be on prevention of diseases in the area of slums.

Bal Club Under NFICH Project Health camp Under NFICH Project

-Pulse Polio Campaign:

PHS participated in the pulse polio campaign organized by Delhi Govt. It covered more than 200 children during the camp.

Pulse Polio Campaign

Pulse Polio Campaign of five years

2005 1479

2006 960

2007 1270

2008 1545

2009 1826

-International Women's Day:

PHS celebrated International women's day on 8th March 2001 by organizing rangoli and mehndi competitions for the community women. This activity helped in developing good community relation especially with the women. Prize distribution to community ladies on the occasion of "International Women's Day"

-Perfect Health Parade:

PHS participated in the Perfect Health Parade organized on World Health day, 7th April 2009 .The peer educators and the staff marched holding placards of health and HIV/AIDS messages.

Pulse Polio

1479

960

1270

1545

1826

2005

2006

2007

2008

2009

Perfect Health Prade

-TEACHER DAY CELEBRATION

On this day our chief gust Shri Subhash Sachdeva, MLA, Kirti Nagar and Ms. Usha Mehta counselor, Shri H.R. Sikka president of Kirti Nagar Industrial Area, school principals and staff of

Prayas were celebrated the opening ceremony of vocational course of dress Making, beauty culture and English speaking. We are distributed the certificate to the students for nursing course who is completed their course successfully and also awarded the school principals **Shri Subhash Sachdeva, MLA, Kirti Nagar and Ms. Usha Mehta counselor, Shri H.R. Sikka president of Kirti Nagar Industrial Area**

1. RESEARCH:

Prayas conducted a survey on knowing the awareness level of street children on the issue of HIV/AIDS in the intervention areas.

The major findings of this survey were:

- Lack of knowledge about sex and sexuality amongst street children.
- Knowledge about HIV/AIDS is very poor.
- Children have lot of misconceptions about the issue of AIDS and STDs.
- Unsafe sexual practice including homosexuality is also due to lack of knowledge of sex and reproductive health. Poor living conditions and illiteracy also act as major contributors.

2. INTERACTION WITH THE OTHER ORGANISATIONS WORKING IN THE FIELD OF HIV/AIDS:

Regular contact was maintained with other organizations working in the area of health and HIV/AIDS in order to update knowledge. This also strengthened the network with the other organizations working in the area of HIV/AIDS.

3. PARTICIPATION IN A NUMBER OF MEETINGS AND CONFERENCES RELATED TO HIV/AIDS:

PHS participates in a number of meetings organized by various organizations vis-a vis NACO, Lawyers Collective HIV/AIDS unit, UNESCO, DSACS (Delhi State AIDS Control Society), UNICEF, IMA (Indian Medical Association), Synodical Board of Health Services -AIDS wing etc. On the occasion of World Health Day The staff of Prayas Health Service are well trained in the field of HIV/AIDS/STDs and had the privilege to attend several training programmes during this year,vis-à-vis

- Orientation Programme on HIV/AIDS and counseling organized by Prayas Central Office.
- Orientation and training Programme on targeted intervention of female sex worker, organized by Delhi State AIDS Control Society
- A five days residential workshop on "Behavior change communication and skills building in the areas related to sexuality," organized by UNICEF.
- Prayas Health Service on HIV/AIDS organized One day in-house training Programme of staff and misconceptions related to it.
- A three days training workshop on "counseling for promotion of sexual health", a residential Programme was organized by UNICEF.
- Three day orientation programme on capacity building organized by slaam balak trust.
- A two days National conference on Human rights and HIV/AIDS organized by NHRC/NACO lawyers' collective, UNICEF and UNAIDS.

Prayas in Other State....

Prayas Health Centre, Arunachal Pradesh

- The PHC at Arunachal Pradesh provides services to the entire neglected community in the Lohit district of the eastern part of the state. The centre is run with the aim of creating a model health care delivery system in an innovative way. Prayas knows the public Grievances and its capacity well Enough, So we the mother provider of health care service determined to Modernize the deprived health centre with: Ultra Sound Machine has installed in PHC-Wacro and facility rendering to the vast area people and patients had benefited from USG machine.

Facilities in PHC- Wakro

- General OPD
- Free Dispensary
- Medical Laboratory
- Minor O.T.
- Ultra-Sonography
- Labour Room with Bed

OUT REACH ACTIVITIES

- Free Health Checkup Camp
- Immunization Camp
- Nutrition Camp
- Personal Hygiene Camp
- Family Planning Camp
- Quarterly School Health & Nutrition Programme
- RE-ORIENTATION Training ASHAs & VILLAGE Dals

Other Health Activity In Wakro.

- Mosquito nets distribution to villages
- Impregnation of Mosquito Nets
- Malaria awareness camp
- HIV/AIDS awareness camp at Govt. School
- School Health Checkup Camp
- Family Planning Counseling
- De addiction counseling camp
- Female Adolescence Counseling programme

Five Year Data of The Different Activities in Wakro

- 2005 2006 2007 2008 2009
- Total OPD 87 186 175 150 240
- Total Delivery
- Cases 56 136 151 130 156

- Total other Lab
- Test
- No record 206 303 265 664
- Total minor OT 127 581 524 450 678
- Casualty &
- Emergency
- No record 43 86 83 102

Year wise NVBDCP Section Report of WAKRO PHC

- 2005 2006 2007 2008 2009
- Total slide
- collected 3305 5073 6565 7275 10762
- Total slide
- examined 3305 5073 6565 7275 10762
- Total Slide positive 440 1651 1871 1545 1250
- P.F. Positive 20 578 809 658 491
- P.V. Positive 407 1056 982 771 663
- Mixed (PV&PF) 13 17 80 116 96

Year wise Report of WAKRO PHC in Immunization Section

- 2006 2007 2008 2009
- Total Children Immunized 1079 1181 1383 1224
- Total Antenatal Check Up 237 258 288 412
- Total Children covered
- during IPPI 1508 2576 2814 2965
- Total Houses Covered
- during IPPI 2303 2445 2389 2455
- R.I. Out reached session
- held 22 100 112 122
- Total Children Covered
- during I/W 154 480 375 422

Year wise Institutional Delivery Report from 2005 to 2009

- 2005 2006 2007 2008 2009
- Hospital Delivery 24 37 90 102 156
- Home Delivery
- No Record 20 24 12 6
- Referred Cases
- No Record 3 4 5 4

APHC (BIHAR)

The APHC was inaugurated on October 12, 2009 by the Civil Surgeon of Supaul. In spite of PACS, nearly 300 local people and PRI representatives of Karjain and adjoining Panchayats were present in the meeting. They have great concern that what are the facilities which is going

to be provided by this organization. Why Govt. has transferred this hospital to Voluntary Organization? What was the need of privatizing this hospital.

Prayas representatives and Civil Surgeon satisfied their queries and also told them not to be very demanding with the organization we are trying to develop the system which was paralised. In due course of time the organization will develop the required facilities in the hospital with the support of Govt.

Services Available:

Initially, we are starting with the OPD services and in due course of time, we will be able to provide all the facilities laid down in the guidelines. These facilities are:

Basic RCH Services and General OPD as per the guidelines from 8 am to 6 pm.

1. Delivery System (24 hours)
2. Essential New-Born Care
3. Provision for Referral (Ambulance)
4. Other Functions -
 - Ø Anti Natal Care
 - Ø Immunization for children and pregnant women
 - Ø Post Natal Care
 - Ø Family Planning Services
 - Ø Prevention and management of RTI / STI.
 - Ø Essential Laboratory Services.

Note: A 24 hour APHC must have all the above functions. However, the first 3 are critical and APHC can not be classified as functional for 24 hours delivery and new born care services even if any one of these 3 is not available.

Community Participation:

The total population of Karjain is about 15000, and it is situated on NH -106, 60 kms from Supaul. It is an important marketing center for the people of the region. Basic amenities available at Karjain are – Police Station, Post Office, Primary, Middle and High School, Bank (SBI), Panchayat Bhawan etc. Community participation is very rich in Karjain, they have knowledge of various welfare schemes and its provisions but there is no organized pressure group for their implementation.

We are in regular contact with the local people, Panchayati Raj Institution (PRI) Members, Media Persons, Teachers / Principals, Social Workers, Businessman etc. They all are very positive with our working culture and they have very high expectation from us. They expressed their happiness that for the first time, this APHC is going to be maintained in terms of cleanliness and systematic working. They also assured us that this is our duty to maintain all the system in the APHC.

EXECUTIVE SUMMARY of Andaman & Nicobar

The present narrative represents the preparation during the 1st quarter of the 1st phase of - PRAYAS Project in Baratang North & Middle Andaman. The present project builds on the Water sanitation, and health improvement in BT Islands.

The 30 months Project aims at improving the Water Sanitation and Health of the tsunami affected children in Baratang Island in North & Middle Andaman. This part of the island has been one of the least supported by the relief agencies after the Tsunami and is still seriously suffering from its consequences. This is the second project that PRAYAS has delivered on Baratang.

In the first project, water and health orientation was provided to 7 villages of the island. A second project was planned keeping in mind the huge gaps in sanitation on the island. Based on this the second needs assessment was carried out.

The project covers all the 8 schools in the island reaching out to 1600 school going and pre-school children, as well as 22 villages through the community education programme. In three villages on the Northern part of the island, including its AWC, we will work more intensively, aiming at maximum sanitation coverage.

The preparatory works for the project is already begun at the time of writing this report. Meeting at the district level with the District Commissioner, CDPO(Child Development Programme Officer) and the DEO has been done and have been informed about the project activities. MoU with relevant authorities has been signed ; to extend full co-operation

The newly recruited staff are in place. A team of one CHN and two CM is put in-charge of each 3 schools and 7 villages respectively. They will be following up all the activities of the WASH project in their particular schools & villages.

Operational Frame work:

The operational frame of the project remains the same as mentioned in the proposal. The Baratang population staying in the remote area where there is no sanitation facilities. Baratang is one of the Island which is situated approximately 100 kms by road and 35 Nautical miles sea route from the capital city of Port Blair. There are two Panchayats i.e. Nilambur & Sundergargh consisting of 22 villages. Inhabitants live in small and scattered villages; many live in forest areas. Sixteen villages are electrified . It is made up of different religions, communities, and castes came mostly from central and eastern India. There are approximately 1200 families. The majority is now Christian. A number of languages are spoken, including Hindi, Bengali, Tamil, Telugu, Malayalam and Uroan. They mostly live in small and scattered villages, though some reside in forest areas. There are no impediments to working with the community – there are, for example, no Jarawa people in the island. The main occupation is manual labour and agriculture.

There is a scarcity of alternative livelihoods. The main products are paddy, vegetables, coconut, arecanut and fruits. The economy has been seriously affected by a ban on the use of forest timber. Designed to protect the forest, the impact has been hard on the people who live in it and

who earned a living from it. There are consequential problems of homelessness and unemployment. Many have fallen back on minor or smallholding agriculture. The infrastructure is poor roads and poor, adding to the sense of remoteness and isolation.

2. The project

2.1 The general progress objectives

The objective of the project is that by the end of April 2012, 1600 school children and their families in Baratang Island benefit from a better access to health structures and improved sanitation.

Outcomes: The project has three outcomes:

- 175 households in focus villages benefit from toilet facilities and improve Hygiene practices.
- 1600 children access water and sanitation facilities in a safe Education Environment. The community health infrastructure will be improved.
- 175 households in focus villages benefit from toilet facilities and improved hygiene practices
175 families in focus villages fit, use and maintain double pit pour flush latrines.
- A WASH and health community education course will be developed and delivered, then refined and improved as appropriate throughout the time of its delivery.

Name: Child Sponsorship Program

Areas covered by the project: Port Blair and Little Andaman

Major issues covered: The killer Tsunami that hit the Indian Ocean, on the morning of 26 December, 2004 has been described as worst natural disaster by relief experts. It is estimated that more than one-third those perished were children and it feared that more are at risk from diseases and many more would be in need of care and protection. The tragedy of tsunami had left the people in devastated conditions. However children are the worst struck section with the trauma. The natural disaster has not only jeopardized the basic infrastructure but has also put the survival on the rocks.

Working with: Tsunami affected children

About the project in brief: Te enormous destruction of tsunami catastrophe had cluttered the lives of the people especially the children. Hence there was a need to stabilize the torment situation and safeguard the children against mental and physical destruction. Judging the sensitivity of the issue, Prayas started a child sponsorship program to fund the basic needs like food, shelter, education and health check-ups of the children. Through this program Prayas arranges funds to sponsor the school education fees of the needy children besides looking after the entire expenses on books, uniforms and shoes. Apart from funding the education expenses

Prayas is also looking after the nutrition, sports material and conducting regular health check-ups.

NAME – Bal Center (Aviva- Prayas initiative)

STATE – A&N

AREAS COVERED BY THE PROJECT – Port Blair and little Andaman.

MAJOR ISSUES COVERED – since Andaman & Nicobar Islands all together a different ball game due to its unique geographic location in Indian Ocean. Unfortunately it has been worst affected in tsunami. Tsunami has left children enormously traumatized and in shattered condition. Many of them were left orphan with no life support.

WORKING WITH – Tsunami affected children

OBJECTIVE – To help children to overcome trauma by counseling. And eventually strengthen the mental health. Apart from counseling Prayas is also working upon core issue of education. Since Prayas is a core member of Sarva Shiksha Abhiyaan (SSA) initiative it is also providing alternative education and encouraging them to achieve a bright literate future. Moreover it has set up childcare centers where marginalized children are provided with nutritious mid day meal.

ABOUT THE PROJECT IN BRIEF – Due to the insufficiency of the policies in tackling cases affecting children, Prayas being one of national level voluntary organization took an initiative along with Aviva to set up a childcare center where distorted, displaced and bereaved children could be provided with counseling to overcome the trauma of catastrophe. Moreover these childcare centers also provide alternative education and mid day meal to entrench the right to literacy and to reconstruct a joyful healthy physical as well as mental environment.

- Community/Prayas Children Participate in Anti-Tobacco Rally
- Drawing Competition
- Prayas Health Van Display The Diff. Slogan on HIV/AIDS
- Diff I E C Material
- Rally on HIV/AIDS Awareness
- Nutrition Awareness Camp
- Prayas Children Offer to eat Veg