

# **Journey during Fellowship**

**Savitri L.P  
Raichur**

- I. Introduction
- II. Objectives
- Learning's
- List of Visits and work
- Understanding the Community Health
- LOOKING INWARD
- Fellows Orientation
- Organisations Visits
  - a). HCCRAP Hanur visit
  - b). Hospet sakhi visit
- c). Navjeevana Mahila Okkuta Raichur.
  - Swami Vivekananda Youth Movement (SVYM) Mysore
  - a). Work of SVYM
  - b). What did I do in SVYM
  - c). What did I learnt from SVYM
- d). My thoughts
  - a). Jagrutha Mahila Sanghatan Pothnal
  - b). Sanchalakies
  - c). Herbal medicines
  - d). Terracotta Jewellery Unit
  - e). Neem Fertiliser Unit
  - f). Land project
  - g). Chilipili Residential School for child-labourers
  - h). What did I do in JMS
- i). What did I learnt from JMS
  - a). Basic Needs India
  - b). What did I do in the Basic Needs
- c). What did I learnt in Basic Needs India
  - a). Narendra Foundation Pavagada, Tumkure
  - b). Activities of the Narendra Foundation
  - c). What did I do in Narendra Foundation
- d). What did I learnt from Narendra Foundation
  - a). Community Monitoring Programme (NRHM) in Raichur Dist.
  - b). What did I do in this Programme
- c). What did I learnt from the Community Monitoring Programme (NRHM).
  - a). National Rural Employment Guarantee Scheme (NREGS).
  - b). Public Distribution services (PDS)
  - c). Right to information
- d). Alumni Workshop in CHC
  - a). Medico Friend Circle (NFC) Annual Meet
  - b). What did I learnt from the MFC meet
  - c). Ant Organisation
  - d). Chakrasheela (Assam)
- e). Health communication workshop
  - Project Field work for 3 months in fellowship
- What did I like in this Fellowship
  - Case studies
    - a). Members of Herbal Medicine
    - b). Members of Land Workers
  - c). Members of Disabled Person
- ANNEXERS
  - a). SHG Members Information
  - b). Self Help Groups Information
  - c). SHG Level Question and Answers
  - d). Federation level Question and Answers
  - e). Individual Question and Answers

Presentations during Fellowship

Land work survey details

## **I. Introduction**

Born in a village, to a poor family I have seen the struggles of my people. People have to go far for work early in the morning without caring for their children. The children used to roam in the village without wearing clothes. With nobody to take care, it is hard to know if a child will have food or not. Some times the child's brother or sister will stay in the house to take care of the child. The children never go to the school and lack education. People use to stay in one small room, 10-15 members together and one woman will be having more than 10 children. The woman will always get headache, back pain, uterus problem etc. And one bigger problem is that the situations of primary Health Centres PHCs in the villages are poor. If the doctor is there, there are no drugs, if drugs are available, there was no doctor. I had not gone to a PHC and I was so scared to go to PHC. Even the village people never go to the PHC because there was no hope that the person will come back to the house safely. I had no idea why the people are migrating to Bangalore, Mumbai and Hyderabad etc. and bringing Sexually Transmitted diseases (STD) like HIV-AIDS to the village. I have no idea how to tackle these problems

While studying Bachelors in Social Work degree BSW I used to have fieldwork twice a week in a primary school. In the school I have seen many children who were HIV + and there was no care given for them. Many were suffering from skin diseases.

In the beginning, I was thinking what I am going to do for the future after finishing BSW. I had fieldwork during my degree BSW and also had worked for 3 years an organisation called Vimukti in Pothnal with Dalit women. I had visited many other organisations. I was confident that I can work at the community level and I was also interested to work with community. I had heard about Community Health Cell, in Bangalore. At the time, I came to know about the Community Health Learning Programme (CHLP). Then I applied for the CHLP, and luckily I got selected for the CHLP.

I joined the CHLP Programme mainly as I have seen these struggles of the people so this is the best opportunity to my interest in the community, I wanted to build confidence among my self, to find in myself what I am searching for and find out in which issue I was interested.

## **II My objectives while joining CHLP**

- To understand the health issues of Woman and Children and Correlate between gender and health.
- To understand Right to Health.
- To know linkages between Livelihood practices and how livelihood relates to health.

As I got exposed to Basic Needs I got interest in their work in mental health and I included the following objectives

- To understand the Mental Health Programme and how it is implemented
- To learn how Person Living with Mentally Ill (PLMI) have benefited from joining a support group and Self Help Group SHG.

These objectives were included to understand more about Disability and about mental health

## **Personal Goals**

- To improve my skills in Documentation
- To improve my skills in training

## **LOOKING INWARD**

While looking back at myself, I have many differences, my thinking capacity has really improved because now while going out and seeing people who are suffering, I will not go without understanding the situation and think and ask with others what can be done for that. I realized that every issue is related to health and also I can relate each issue to health.

My Observation skills have improved and I am able to

understand the situation much better. And if I see any problem in the village I will go to them and talk with them and if I don't know any thing about the medicine, I have the confidence that at least I can tell them to go where they have to other wise I will find out the thing and make sure. I also visit the PHC and Sub Centers and see what are the facilities that they are having in the PHC. Sure that I have got information about the PHC and Sub Centers etc from the orientation programme and practically with community monitoring programme.

### **LEARNING'S**

In the beginning, I learnt about health, Health care and Health services. Primary Health Care and how it should be implemented. The senior on Ill Effects of Tobacco and the diseases due to Tobacco use was Very useful.

I came to know about the problems people get from the mining and where they are staying and normally what are the types of diseases that will affect them during mining work.

One of the important skills I got gained is, have given training on the community monitoring, personal hygiene and about health in the Raichur, Bagalakot, Mysore and in Chellikere. I have developed confidence in giving training following the CHLP.

My Communication skills have improved including my skills in Speaking in public, I was responsible to submit the case study of people who were denied services from the PHC in the public hearing during the community-monitoring project in Raichur.

Talking with people especially with disabled people when I went to the Narendra Foundation. Learnt about Disability and Mental Health and types of Disability.

I learnt how to do case study and Survey during my field placement at JMS. I had developed 6 case studies and also did a survey of agricultural workers.

Difference between Federation and SHG.

What is the use of Caliper and learnt about it, which is used by Disable people.

Getting more interested in Organic farming, learnt about the preparation of vermi compost

In my house, we had no toilet, as it was not acceptable in our village. The CHLP helped me to understand the social and cultural dimensions of building and using a toilet within the house. I felt that I would not be able to convince other people in the benefits of toilet without using one in my own house.

### III. List of Visit and the work during Fellowship

<b>Date</b>	<b>Name of the Organisations that were visited</b>
02.06.2008 to 05.07.08	Orientation programme in CHC
01.09.08 to 07.09.08	Midterm Review
01.12.08 to 17.12.08	Alumni workshop and Silver jubilee programme, Debriefing and planning for Field Project
23.02.09 to 28.02.09	End term meet of Fellows
	<b>Visits to Organisation</b>
07.07.08	FRLHT
08.07.08	Association of People's with Disable (APD)
10.07.08	Agriculture Man Ecology (AME)
25.07.08	Visit to handloom centre in Ilkal
26.07.08 to 29.07.08	Jagrutha Mahila Sanghatan Pothnal
30.07.08 to 23.08.08	Swami Vivekananda Youth Movement Mysore
08.09.08	Community Based Rehabilitation (CBR) Forum
31.10.08 to 29.11.08	Basic Needs India and Narendra Foundation, Tumkur
18.12.08 to 20.12.08	Tribal Health Initiative Sitlingi Tamilnadu
	<b>Meetings and Trainings that are attended</b>
15.07.08 to 20.07.08	TOT ( Training Of Trainers) Training in Raichur - Community Monitoring and planning pilot project-NRHM
21.07.08	Lokayuktha meeting and JAAK meeting
23.07.08 to 24.07.08	Health as a Human Right training in Bagalkote
30.08.08	CHESS meeting
15.09.08 to 30.09.08	National Rural Health Mission (NRHM) Community Monitoring in Raichur
17.10.08 to 19.10.08	NRHM meeting in Bangalore
20.10.08 to	Survey and case study of Land worker in Raichur

30.10.08	
24.12.08	Aid India Annual meet Bangalore
27.12.08 to 29.12.08	Komu Souhardha Vedike Chikamagalure
15.01.2009 to 18.01.09	MFC Annual meet in Assam
	<b>Field Project Work</b>
01.01.09 to 20.03.09	Field Project work during Fellowship

## **Community Health Learning Programme (CHLP)**

### **Learning's from the orientation programme**

- In the beginning I was so scared while talking to every one in English and slowly I picked up.
- Interacting with the people from different backgrounds was a good learning experience for me
- I learnt about the definition of health and illness.
- Class, Caste and Gender sessions were really good and it made me to observe the situation what is happening in the world.
- I was able to understand the values and responsibility of the community health worker. The Chinese proverb explained clearly the role of those working with the community-
  - “Go to the people
  - Live among them
  - Love them
  - Learn from them
  - Start from where they are
  - Build up to what they know”
- Socially, Economically, Politically, Environmentally and culturally these all have related to Health by seeing the pictures
- Relating the Issues by telling stories of health
- I Got an idea about Primary Health care and public health care though the PHC visits. The visits to PHC and Sub centre helped me to understand what facilities should be at the PHC level.
- The seminar presentations on Migration, child labour, Issues of women and children living with HIV and Environmental pollution and health impacts was very useful.

- I also learnt a lot by meeting with our mentor and with the Staff.

## **FIELD VISITS**

### **HCCRHP Hanur**

In Hanur I saw many projects meant for the community about Water shed programme, Residential school for children removed from child labour and bridge school, SHGs, and Herbal Medicine. Here we met Sr. Teena, Sr Marsita, Basavaraj, Rani ect who are actively working in this field. CRHP is also working with the school and weekly they conduct mobile clinic in all the villages

The Satvidya residential school is for children removed from child labour is very good and they teach children for a year so that the children can join regular school. They also have tailoring and computer classes for older children so that they can build skills. The Day Bridge schools in villages help children to learn and join the schools.

The Health workers had been trained in preparing and giving herbal medicines to the community. One of the health workers Jedemma explained all the medicines which they used and shared the health status of the people.

Jedemma's brother is engaged in making bamboo chairs from a locally available "Lantana" grass.

Visit to the PHC to see and understand what the facilities available at the PHC level, and saw the drugs that were there, 6 beds, allopathic medical officer was there, no AYUSH medical officer and Delivery room that were there in the PHC.

### **MYRADA project**

Myrada is basically working in Agriculture and Livelihood sectors in giving training to the community. They have computer and the tailoring training too.

### **b) Sakhi, visit Hospet**

Sakhi started working with 1<sup>st</sup> generation Dalit girls, in supporting their studies. SAKHI supports girls sexually abused.



Girls are now coming forward and some are working, some others are doing higher studies.

When SAKHI started at that there were only use to get 8-9 seats in the hostel for the SC/ST students but now, 80-90 seats are available for them after doing strikes and Darana, It is a good improvement and success in their life.

Sakhi is also working with child labourers and with the people who are working in the Mines. These people are migrants from different places and staying there in small plastic huts where the mining work is taking place. The people go for mining work with their children, so lot of child labour is present. People depend on mining as they get good salary. They cannot worry about their own health and their children also, as they all are depending on this work. Many have sold their land for mining and now they don't have any options other then to work in mining.

Sakhi had developed a short film called "hjghsdkj". And they had struggle while doing this short film by the people was that, without telling to the people they have taken some of them in the film and Sakhi had asked with the people that what they are going to do other wise they will not express their thoughts etc.

We visited the de-addiction centre of Punyakoti foundation. The social worker of this centre shared their experiences, which was really interesting. They explained the struggle to talk with people and make them aware of that centre, and the activities done and the advantages that will be available for the people. While listening to this, I understand how much patience one should have to build a relationship with the people while doing community work.

### **Swami Vivekananda Youth Movement (SVYM) Mysore**

SVYM had started in 1984 and the organisation is not only working for Health care but also working on other aspects like Education, Community Development in tribal village of Saragure. I met Dr. Balsubramanya, Dr. Seetharam, Dr. Ananth and the Staff who are working on the field.

### **Work of SVYM**

SVYM is working on Primary Health care especially in tribal areas.

- Visited Govt Schools with whom SVYM is working to show slides on Personal Hygiene
- Communities are shown video on hygiene and sanitation
- Went with the SVYM team on their monthly home visits to check Mothers, Pregnant women and children's Health and to give tablets and to guide about Family planning
- Kenchanahalli Hospital where SVYM has started in the beginning, to meet the Doctors who are using herbal medicine to the community
- Hosalli Tribal School
- Mobile Clinic
- Mysore V-Lead training center
- Basavagiri halli where Tribal people are shifted. These people are shifted their place to Basavagiri Halli and SVYM is working with them.
- Visited PHC and Sub centers
- Went to SPT (School Parliament Training) camp with school children

Dr. Ananth had introduced the whole programme of the SVYM. At the community level they are not only working on health but also on education and economic issues.

### **Visits and learning**

The activities that SVYM is doing are free medicine distribution to the tribal community and to the other backward community.

- SVYM gives awareness on sanitation to the community, through video documentations including the benefits of sanitation and the problems related to open-air defecation. And I attended this programme.
- SVYM gives training on personal hygiene in the govt schools. This type of training was really good to make each student understand the things that has to be kept in mind. Cutting nails, washing hand, wearing slippers, and that each to be take care by them selves so that they won't get any health problems. I took a part in it and gave training to the children by learning from there and learnt to give training.

I also learnt how to keep the place clean and dry, in one dig, they have to put the big stones and sand and then fill it full, it will observe the water, so that place is clean without water and no irritation of the mosquitoes are breed.

- They have RCH (Reproductive and Child Health) programme in the community. Training in the community on how to take care of woman and children health and also pregnant woman by doing home visits. Basically this training is to reduce maternal and infant mortality rate.

How to take Care of self, Mother, Pregnant Woman and the Children, from 3 months of Pregnancy to 45-days old baby. What are the schemes that are available to the Mother?

At the same time I came to know that there is a PHC in next village and there is no sub center in this PHC and there is one more PHC near by village and that is at a distance of 10 km to both the PHC, I was so excited to see the PHC and get information about that PHC, I thought there may be some difference in this place. I thought visit to the PHC and to know what the structure of this PHC is and what is special in this place. Went to the PHC and asked about PHC, the doctor was not telling any thing, he only told that tell some medical officers to call me to give you information and he left from there, he was not at all listening to me. Then I came out and I called to Lokayuktha and applied for the RTI so he has to give at any cost. Learnt to apply RTI when I went to the PHC.

- They give information about Family Planning by interacting with Husband and Wife this activity is really good to learn for me and interesting.
- They are working with Antenatal care, Intra natal care and Postnatal care in the community, going to the community and checking them and giving medicine to the person.
- They are also working on out reach YPM (Youth People's Movement) in 100 villages

- Working on HIV/AIDS patient project called Samastha. Giving awareness and training to the people in the Anganawadi so that Anganawadi teacher can be involved in this programme.
- Kenchanahalli Hospital was established in 1984, where SVYM started. Later moved to Saragur where SVYM is presently placed. Kenchanalli hospital not only gives allopathic medicine but also herbal medicine. This hospital is very far from the city; system of this hospital is that, the permanent doctor will be one and the others for surgery and other needs three doctors visit the hospital twice in a week. Other staffs that are working in this hospital will change once in 3 months and go to Saragur hospital where the SVYM is located.

The day I went was heavy day, for the Doctor which the process of BCG and Immunization to the children were given was rush and the doctor had no time for lunch and at the same time we were talking to the mothers and seeing the process of BCG. And then went to the sub center which is in the same village. The ANM has no work; she was saying that there are no people so she is going to other place for personal work. see the situation of the privatization and the Govt. This is one of the examples to say that the privatization impact, the Govt moves away from that place.

- They have built their own school for the tribal children with free Education and there are more than 400 children in this school. The Education is till 10<sup>th</sup> standard. Now they have started D.Ed from 2008 in this school, for this course other community people can also join. 8-acre of land has been given by the govt for this school. They have a big and large place. In each class they have a drawing of picture of tribal cultural, social, marital practices so that they should not forget the practices, which were carried by their ancestors.

They have in the computer lab, 28 computers for the students to learn computer. They have a Library in this school, this library has 90,000 books on arrange of

topics on whatever the children need to understand and is arranged in an order. They have trees; birds and cocoons, which are built by the birds and the snake's skin (pari), all there are placed on the trees and kept in the library.

The Biology laboratory was really good as the children learn practically. They have a model of a foetus to explain the development of a foetus. They also have models of body organs and skeleton to explain the functions.

I have gone to the Hosalli school, this school was really good and the teaching method, practical experiments, Computer Education and the Structure of the class rooms all were very good, method that they are using to the tribal children to understand quickly.

And also I saw boards to both the sides in the classroom so that first preference to the children and the Teachers this is very good method which learnt here.

- They have School Parliament Training in the school and exposure to one school to another school for cross learning. Cleanliness in the schools like watching to cook, is she cooking after washing vegetables, cleaning of the toilets and school ground this is done by the Health minister and other ministers like Education minister, Cultural minister etc. will have their own work to maintain. I participated in this SPT.

SPT (School Parliament Training) is really good and it has made me to start in my place. So the children also will know the problem in the village and that child can be the member to reduce the problem. So that child can also teach their parents about the personal hygiene, cleanliness and about the health. This also makes sense to keep school ground clean by making one minister on Health, Education, and Cultural and on the Sports so that they will do whatever the responsibility on them.

### **My thoughts**

When I went to SVYM staff it was really good that they

were interacting with the community. They were giving training to the community people that how to take care of Mother and the pregnant woman and baby and also the Anganwadi teacher, but now the Anganwadi teacher has to take care of the village, going to the house for check up of mother and baby. But the SVYM staff only will go and check the mother and baby, and give medicine etc. then what is the work of the Anganwadi teacher and the ANM in these places.

They have to give awareness about what can be got from the Sub Center and from the PHC and what is not possible from there, then it really works. When we talk about privatization I feel this type of work also will makes the Govt to move away from their responsibility.

### **Jagrutha Mahila Sanghatan (JMS) Pothnal, Raichur Dt. (Navanirman Trust)**

JMS is working with dalit women in Raichur Dt. Pothnal. JMS is working for the Rights of Dalit Women, because the upper caste people in this district dominate this community. Residential school for the Child Labourers

JMS is having 42 SHGs in 30 villages in 2 taluks, pothnal. JMS started in the beginning by conducting SHGs in 10-15 villages in VIMUKTI NGO and then shifted JMS. Fitting for their rights and started small kind of livelihoods like, watershed programme, Terracotta, herbal medicine etc, Because of no work and migration of the people. JMS is found by Premdas, Neju george, Mita Deshpande, Koshy, Chourappa, Deveputra and Narsappa. JMS have done many strikes and Dharanas on women's violence and rights. JMS is working well and women have come forward and they are ready to share others problems too. JMS is also having many group activities.

They are working on the issues of PDS, NREGS, and RTI. They have given many awareness programmes about PDS and the people are able to ask in the PDS if they give fewer grains to them and the PDS shop person is scared and gives properly to the person who demands it as a right. And NREGS work

going well and now who are not given wages have done strikes and taken the money from them. Still if they are not paid then they apply throw RTI and RTI is not only applied for NREGS but also on the panchayat, PHCs, totally 23+4+11=38 applications has been applied in the RTI from JMS.

They have Sanchalakis team in JMS, and are working on Community Monitoring programme of NRHM. They have also started different types of livelihood activities because this district is very drought prone area. So the people from this place migrate to Bangalore, Mumbai and Hyderabad etc. They have Herbal Medicine, Terracotta Jewelry, Neem Fertilizer, and Land work and also have child labour school. All these activities are running well and the people are also working hard.

### **Sanchalakis:**

It is new method, which JMS have developed from five years. . Eleven Sanchalakis work as staff of JMS. They are responsible for all activities. They conduct Sangha meetings daily in the villages. They facilitate discussions according to the situation with women in the villages and stay over night in that place and then in the morning go to the next village. Once in a week they will go to their houses and to the JMS office. The type of work done by them has brought in changes and improvement with in them. This type of work has long standing benefits as the sanchalakis are from the same place, and they can understand the situation of the people compared to outsiders. They have been trained on capacity building, on conducting SHGs, Taught them reading and writing etc. They have visited many places to see the other organization, to understand what can be improved in their places.

### **Herbal Medicine:**

Herbal medicine started from 2001 it self this was in the beginning when Mita Deshande ask with the people the people were saying they don't know about herbal medicine but when Mita took them to the field to find out the name of the plants in a village that time women only started saying that it will comes for this disease that disease and all. Then Mita thought thinking that this herbal medicine almost people

knows and they can continue by adding other herbal medicine which they don't know and they can remember the medicine and the plants because they will be seeing daily in the field.

This is how the herbal medicine has started and also the women were not able to come out from the house to learn more about this medicine. The staff going to their house and telling them that they will learn more about the medicine and they can able to give to the others that this and all. Then only our community will improve.

Sixteen women have been trained in preparing and dispensing herbal medicines. Two from each village members have been selected and they have gone to different places to learn about herbal medicine. The women conduct a clinic in the JMS office at Pothnal. People from the villages come to this clinic to get medicines. This herbal medicine is given for many problems like cold, cough, jaundice, women related problems, Piles Mulawadi, Thannu (white marks on the body), Joint pain, skin diseases, hair fall, TB, Kidney stone etc. they will give a medicines on all most of diseases. Only for severe problems they will refer to the Govt hospital.

They are going to give training about herbal medicine to the other organizations. The health workers have a good training and still they want to learn about health wherever the training is held on health. And all the people will remember Mita who taught them this Herbal Medicine.

With Herbal Medicine Members (Health Worker) I asked how did they get interest in this Herbal Medicine and now how they feel about their patients? They said, all of them were very happy as, they were helping others in this way. I have done some case studies of Herbal Medicine members.

### **Terracotta Products:**

The Terracotta unit was established in JMS Raichur Dist. Pothnal and has 15 members. This Terracotta unit has started from year 2001 and in the beginning the people were neglecting this work because this is made by clay, the people started to tell that who will take mud products and we don't know to do it, we are village people, from our hand it will not come properly like this many were sterted. Koshy going and calling them to do and started to do in summer time when they dont have work the people started to come and now this is the spirit of the members who aremaking these products.



The products are they have jewellery and not only jewellery but also wall Hangings and door curtain are made by clay. Terracotta has really made them to stay back in their own place other wise many people are migrated from this place. Now these people have 365 days work in this unit. They also go to different places to sell their products, like Exhibitions, and they are part of the Dastakar Exhibitions, Like Bangalore, Delhi, Mumbai, Hyderabad, Pune, Goa etc to sell the products. V. Koshy who gave training to them and able to be doing independently now these people.

Terracotta Jewelry production is carried throw out the year and when there is an urgent order placed, the work is done even during the night. Members were asking opinion about improvement of the quality of the product in order to attract more people to buy their products. I helped in designing and packing of the products.

#### **Neem Fertilizer unit:**

Neem Fertilizer unit is started from 2003-04 and it placed in Pothnal Raichur Dist. Neem powder Fertilizer is been accepted by the local people have faith in using it as fertilizer. This unit is stared by one SHG from Mudhanaguddi village Raichur Dist. when this idea has given by the Neju George, the people found very difficult to go to all the villages to collect the neem seeds and then crushing it by the tractor.

This is a unit coming of more than 20 members. They manage all the process of this work, though they are not educated are managing 5-10 lakh Rs accounts. They are getting many orders from different places like Bangalore, Kolare, Doddaballapure etc. and they only will deliver it. Totally whole process of the product is taken care by them selves.

Neem Fertilizer unit members were very happy about this work and whenever the order comes they will prepare the fertilizer so that product will be very strong. In the beginning they have to go all the villages to collect the neem seeds and pile it in one place. End of the year they divide the profit among them selves.

#### **Land Project:**

JMS has taken Land project to work in their area because of migration. Land work has been started in 3 villages covering

100 acres of land. In this project land basic work of Tiller, 2 times ploughing, totally to make the land ready to grow crops in the field. This work is under taken in drought prone areas where people are not able to grow any crop in their land. This work has been done to stop migration. After starting this project work on land the migration has come down especially among dalit community and they say that this has made us to stay back in their place with their children enabling them to go school now.

I Visit to the houses of the Agricultural labourers to do a survey on the Land project to understand whether it has helped them or not. As well as did few case studies about land workers and documentation of land project. I grew in this place but still I did not know the problems faced by agricultural labourers. Now I understood the problem the reason for migrating to other places.

When I saw vermi Compost I got interested, learnt to make it. I improved to do survey, case studies and Documentation.

#### **g) Chilipili Residential school for child-labourers:**

.Chilipili School was started 5 years ago to bring back children who had dropped out of schools to become child labourers in Raichur district. From five year this school was shifting to one village to another, where dropped out children found in Raichur where the JMS is working. 2-3 months the Teachers are in process of doing survey of these children and if the people are ready to support to this school by sending their children to the school has been build. And from this year school has become Residential school with 40 – 50 children. In this school they have 3 Teachers one cook and one warden. The teacher will teaches them using non-formal methods like singing, dancing, playing, group discussion, slogans etc. This type of education builds self-esteem and confidence and each child helps children to learn quickly. The teacher teaches them according to their mental ability and age. They have exams to write every month to see their improvement in studies and end of the year also they will write a exam. Then they referred to Govt Schools in different places. Now children are able to tell their parents not to send children for coolie work and it is their right to be asked. Every year they goes to the Villages for rally by saying that send children to the school and they have a slogan conveying the meaning and

make every one understand.

And also the old students of this school will come to this school to share their experience and one in a year they have a meeting by calling all the students of this school.

Chilipili school children are very active and ready to do whatever wants them to do. And while listening to the songs and the slogans by the children it was really amazing

I have participated in the Community Monitoring programme was attended and took some of the responsibility in this programme. And did the MC (Master of Ceremony) in this programme. So it helped me to develop my public speaking and improved communication skill. I came to know about schemes for mother and child. Facilities available at PHC, Sub center and Anganawadi and their role in the community.

We went to the villages to see the Panchayat and the PHC. In order to understand the problems and the situation of the Panchayat and the PHC.

## **Basic Needs India**

Basic Needs India is working with Mentally Ill person in rural area and in the urban slums. Organization is working on giving project to other organization who is working with Disability and mental Health and gives project only on Mental illness. Basic Needs is working in many states Tamilnadu, Andhra Pradesh, Karnataka, Kerala, Maharashtra and Rajasthan.

In Karnataka they are working with other organizations like Apsa, Paraspara, APD, Narendra Foundation etc. And they counsel mental ill person and the caregiver. This counseling gives very good improvement for the mental ill person.

### **b) What did I do in the Basic Needs**

Basic Needs India counseling center was visited, which is held for the mental ill person and to the caregiver. Went to attend the meeting got held for the caregivers, unfortunately this meeting was canceled and the doctor came to check the patient and gave medicine to that person; this type of clinic will be conducted once in a week in Koramangala office.

I attended the programme held for the mental ill person and to the caregivers and took the responsibility in this programme as a volunteer to help the people.

From Basic Needs India I visited the place Narendra Foundation in Pavagada taluk, to understand the role of Federation and the SHG of this foundation. And how the Mental Health activities are implemented.

**c) What did I learn in Basic Needs India?**

I learnt how to talk with mental ill person by seeing the counsellor. And I realize that counselling is one of the main methods for the mental ill person to recover the problem.

I learnt to prepare for the presentation and to do it.

**VIII Section**

**a) Narendra Foundation Pavagada, Tumkure**

Narendra Foundation works with Disabled people in Sidhapur of Pavagada thaluk, Tumkur District. The foundation is now 13 years old and in the beginning they were working in Pavagada Taluk only but now spread to whole district. The foundation is basically working on right based approach, all the volunteers, staff and the Disability groups are very strong, when I saw them in the meeting I was so shocked because they were so independent and do their work on their own. They know what is right and wrong and go directly to the Govt officer to talk and clear it.

This foundation is not only working with disability people but also with Women, Children and Youth. They have 98-women's group, Men and Women mixed 3 groups, 8 Youth groups and more than 150 Disability groups. All caste people are involved in this foundation, till 2001 there was no SHGs were there in this foundation after that only they have built. Among the Disability group only 4-5 groups are doing savings other groups are not interested in savings.

Narendra Foundation has made them to build a federation themselves, so that we can see the different levels of the group meeting in this place. At first they will have village level SHG meeting, from each SHG group 5 members will go to the Panchayath level meeting, from each panchayath 5 members will go to the Hobli level meeting, from each hobli 2-3 members will go to the taluk level meeting, from each taluk 2 members will go to the District level meeting, from each district 2 members will go to the State level meeting, and from this each state one person will go to the National level meeting. This is how they have networked from the village to National level. So that one person can participate in all the activities. And before joining the group they have to pay to the federation or the sangha an amount of Rs 15 – 50 at different level.

The Foundation has given training and awareness on right to Disability and mental health to each group. They are getting all the schemes that are available for them and also use it very well. They have done many Dharanas and strikes to get the schemes. When a rape had happened on a disabled woman and they succeeded in those cases.

Now all the responsibility has been given to the taluk federation, Pavagada. And this federation is conducting the programmes and trainings for the Disabled. In the beginning 23 staffs were there but now only 4members because the foundations goal was to reduce the staff and the federation to take care of all the activities. Already the responsibility has been taken up by them and has started to conduct the trainings.

They are also giving training on EDT (Entrepreneur Development Training) to every one to do some small kind of business and sheep rearing, these kinds of activities have already been started in some villages.

They have got 15,000 houses from the scheme IAY (Indira Awaj Yojan) in the Tumkur District for the Disability people. And this year in each panchayath level one-disabled member has been chosen as a VRW (Village Rehabilitation Worker) to work with disability and to find out other disability member in the village. And in Karnataka 1600 VRWs are selected in the

panchayath. And the foundation is giving training to the VRWs and to the MRWs to understand the rights of disability and to work on that.

In this foundation there are different types of people been involved they are Educated, illiterate, Students, Anganawadi Teachers, Advocates, Man, Woman, Children, Youths, Rich and Poor.

They have sabha for the mental ill person to share their experiences of last month because they will conduct this meeting once in a month and so they can learn from others and in this type of group they are comfortable to share

The process of the meeting was really good, when they come to for the meeting they will introduce them selves and put the subject which they want to discuss and start the meeting. The subject, which they have put, fully about to talk with BEO, go to panchayath to ask, go to the district office to give this letter, these kind of discussion. There is no savings or loan etc. it was really wonderful federation I feel.

next month after January 15, 2009 they have a state level convention in Bangalore and have some objectives to ask in the convention that they need a separate minister for the Disability people, Treatment has to be available in PHCs to mental ill person, Housing schemes should not change again and again and VRWs programme has to be continued it should not stop in one year.

SHGs in the Narendra Foundation are really good, because these groups are build for the right based and all the groups are not doing a savings only few are doing. From the gram panchayath 3% money is given to the disabled people and selected VRW for the work in panchayath level and these VRWs are working with the foundation is very well. All the Govt officers are giving respect to the disabled people and the work also is done faster then before. Houses are sanctioned 40% of the disabled people, not for 60% disabled. The federation has built to take care of the saghas and for the communication with the people.

This Foundation is basically working with disable people.

Physically Handicap, Mentally Illness, Mental Retardation and Speech and hearing. This foundation is started to work in pavagada thaluk only, this is what called projected area, and in full of district they have started to work now, this is called non projected area.

### **Project Area**

Basically in project areas work started with service based and then went to the right based. Project area is included 33 Gram panchayaths in Pavagada thaluk.

### **Non-project Area**

Non-project area is not like that it's started with the right based. The non-project area is included rest of 9 talukas in the Tumkur district. Here there is no income generation programme works on the right based and they only have build the volunteers to work in the particular area

This foundation has done many strikes and Dharanies to get govt facilities, which are available to the disable people.

- ◇ Disable peoples Participation should be in the Gram panchayath level
- ◇ Discus and meeting should be front of the disable people
- ◇ 3% money should give to disable
- ◇ Medical certificate should allow every where and
- ◇ Every 40% of the disable people should get a houses

In this foundation all the issues have discussed not only on disable. With school they will talk about children's rights and giving information to the teachers about disable, and to the school children.

### **b) Activities of the Narendra Foundation**

1. To make aware of the people about facilities that are available to the disable from the Govt
2. SHGs of the disabled
3. SHGs of the Women's and youths
4. Federation in Hobli, taluk and district level
5. Sabha for the mentally ill members in the panchayath and Hobli level
6. Giving training and awareness in different topics, like

- ❖ Mental illness
  - ❖ Personal hygiene
  - ❖ EDP
  - ❖ To VRW and MRW training
  - ❖ Occupational training like, handicrafts out of cocoons, Tailoring, etc
7. Training to the school teacher and to the children
  8. Child massage (case study of the children) funded by the ADD India
  9. Orthopaedics unit for the repairs the callipers, walker and physio- therapy etc
  10. Discussing with school teacher and with BEO for the sports day for the disable children

Now foundation is given the responsibility to the taluk federation. Mr Sudhindra is the president of the taluk federation. This taluk federation is conducting the programmes and Taken the responsibility. And now to this taluka federation site has given by the taluk panchayath

### **c) What did I do in Narendra Foundation?**

I had attended 3 Federation meetings at different level, one is District level federation, second one is Taluk level Federation and another one is Hobli level Federation.

Training on Personal hygiene to the Disability people especially women because there are many rape cases that are happening in the villages on Disability women and they don't know whether they are pregnant or not, in this personal hygiene subject they will learn that how to take care of them selves and how the woman will get pregnant, every thing is explained to them. This rape is basically happening on the dumb and deaf, blind woman and to the mentally ill woman. I have visited the houses of the raped and she is having a child now, and I have visited the houses that have kept the small shop in their own house.

Attended the meeting, which they call sabha of mental ill person will come and share their experience of previous month. And this meeting will be held once in a month.

I have done survey on Individual, SHGs and on the federation and also some of the case studies on disability what are the



benefits they have got and what the changes have happened in their life. 14 Individual, 7 SHGs and 3 federations have done. I spent 14 days in this foundation.

Individual Benefits they had after joining the Foundation

- Self-care and Personal hygiene training
- Livelihood options have realized
- Role in the SHGs is very good
- Awareness of schemes and funds
- Availing Govt schemes
- Opportunity for the treatment
- They have confidence
- Physiotherapy
- Training in different issues
- Attending household duties
- Improved inter personal relationship
- Participated with zeal in Dharanas
- Stopped Mal practices

I also have visited the training on silkworm product which has given by the govt. attended 3 days EDT (Entrepreneur Development Training) and the meeting, which was held with BEO to discuss about Disabled children sports day.

**d) What did I learn from Narendra Foundation?**

Inspired to see people who have stopped begging. And they were saying that they will never go for begging if nothing is there to eat in the family because we have realize that we don't get respect from others in the village.

Training given to the disability people from the Govt, they only have decided to give training to these people this is very good and now they are able to see to the Govt.

Sabha for the mental ill person, this sabha has really well and this kind of sharing also will reduce the sickness of the person.

Understanding the use of caliper. Before I use to think that this caliper has used only the person whose leg has broken, here I came to know the use of caliper. And I was thinking that to talk with the Disability person because if I speak what will they feel or I don't know how to talk with them all these kind of things, now I realized that they are also human being why to

think to talk with them talk as usual how will talk with others. Inspired by the achievement of a blind person, I was hear that a blind person will be very strong but here I saw a person called Sudeendra staff of the foundation he alone goes to the meeting and for other work, and he carries the things like coconut and other thing to their shop not for the house. He is the one person who is selected in National level federation meeting.

Silkworm products where the training was held in Thumkur to this disability people and I were involved in that training and learnt.

Federation-symbol of self-advocacy and strength, this is new learning for me to understand the federation and its strength.

Group going one level to the other, village to panchayath and panchayath to Hobli...etc. this is one of the great thinking that to make every people to participate in all the activities.

Learning from other sangha by exposure visit, this type of exposure I have seen in the school level and learn but this is really good idea, and one more thing is that the people will never come from the house but here they all are ready to go to the other sangha to improve their own sangha.

And at the end of the day I was practicing the drum with youth unit who were coming to practice in the foundation and I learnt a bit.

## **IX Section**

### **a) Community Monitoring Programme (NRHM) in Raichur Dt.**

Community monitoring programme is very good programme to give awareness about the govt schemes and the services which needs to be proper in the rural areas. Community-monitoring programme basically has come to reduce maternal mortality rate and the child birth rate. This Community Monitoring has implemented in 2005 but in Karnataka it started this year. In the beginningof this programme they have taken only 4 districts to see the use of the programme and then can be given to the other districts. And in one district 3 thaluks has taken to this programme.

The main objectives of the NRHM is to reduce maternal mortality rate and the child mortality rate, Select one ASHA health worker in each village, Create a VHSC committee for 1500 population, 2 medical officer should be there in each PHC one allopathic and another medical officer is Homeopathy, to reach the services to every human being in the world.

In the village the process is by, giving information to the public about the programme, mother and pregnant woman meeting, VHSC committee meeting, and do the survey with VHSC members and end of the day have to draw the village map this process takes three days in one village.

**b) What did I do in this programme**

I have attended the TOT (Training of Trainers) in Raichur district for 5 days. And in this training they taught us to what are the activities to be done in the community-monitoring programme. Giving information to the public about the programme, mother and pregnant woman meeting, VHSC committee meeting, and to do the survey with VHSC members and end of the day, have to draw the village map, this process has done in three days in one village.

Went to the Community Monitoring Programme in the villages with Jagrutha Mahila Sanghatan karyakarthis. And done some studies in the village about how the PHCs running and the Sub Centers, Snakebite cases and who are not got services from the PHC and from the Centers.

I have gone to places called Bagalkot, Ilkal, Chellikere to give training on community monitoring programme And also took responsibility when the PHC level public hearing was held in Raichur Dt. Submitting the cases which were neglected by the medical officer in front of the public, done the MC (Master of Ceremony) in the PHC public hearing. Totally I have attended the 5 public hearings in the district.

**c) What did I learnt from the Community Monitoring Programme (NRHM)**

In this community-monitoring programme I have learnt to give

training to other people. Speaking in the public have improved and I am able to talk in the community and with the public.

Learnt what is Health and Health as Human Rights, and how to get health by the services, what facilities should be there in the community, which are schemes that are available for the mothers etc.

And what are the difficulties that the Anganwadi teachers are facing problems and the Community problems.

## **X Section**

### **a) National Rural Employment Guarantee Scheme (NREGS).**

NREGS scheme was very good learning and I did practise in the village where I was doing my project work during fellowship, and gave good response from the panchayat to hand over again to the panchayat and to the people. Because some times the panchayat people did not receive the application that we have written by asking work and the job cards.

### **b) Public Distribution Services (PDS)**

I have learnt about PDS that, how it will be applied from the RTI and after wards how it is effectively works in the village level.

### **c) Right To Information Act (RTI)**

About RTI act I did not know any thing, and now I learnt what is RTI and how application has to be put through RTI I applied in Raichur district by asking the 18% scheme which is there for the SC, ST Community and in Mysore asking information about the PHC because when I went to ask, the medical officer did not give me the information.

### **d) Alumni workshop in CHC**

This alumni work shop was very useful for me because all the Alumni had come and there are lots of people whom we can meet and listen to their experiences their past CHC experience and their work experiences after leaving the CHC was very good.

We can see that lots of work has been done by Alumni from the

spirit of CHC. And the CHC always gives a spirit to young generation and to all.

## **XI Section**

### **a) Medico Friend Circle (MFC) Annual Meet.**

MFC Meet is the entire medical and the other background people who are wants to think and share their thoughts and work experience in the group and discusses issues that are rising in the community such as Migration, Health status in their area, History of the place etc. This group is always ready to work with the Community and MFC is very good platform to learn and discuss about different topics.

### **b) What did I learn from the MFC meet?**

I learnt mainly about Northeast life style and the historical stories.

I had met and talk to elder people who were sharing their experience

### **Details of North East**

One thing I clearly understood that there is no caste system in this North East.....

### **c) Ant Organisation**

This Ant is working in the North East Bongegao with Women of the Poor family basically on the Livelihoods. Because when the people are not having work that time Janny and Sunil has come to this place and did study on these people. They found that there is a need to work and also they came to know that all the people were know handloom work so they have started that handloom work is good and now this work is handled very well from them selves only they have shops of their own.

This Ant is also working on Community Monitoring Programme (NRHM) in this place. These people are having very simple life style.

### **d) Chakrasheela (Assam)**

Golden lungur is the famous in this place and we went and stayed in the tent, which I really love to stay. We saw many

golden lungurs, went to bird watching, claiming the mountain was fun for me, and went to river and Boating. These all are unforgettable memories in my life.

### **e) Health Communication Workshop**

Health communication workshop was very good learning for me. About Communication they have teach us in very simple method how to understand very easily.

By using velvet paper and telling stories to the people, skits and awareness songs. This class was really very good useful for me and enjoyed a lot. Every one has participated in this class.

This Health communication workshop is use for me and if I have to do the presentation I am using this method thank you for the CHC for this Workshop

### **Understanding the Community Health**

Community is a small world. But this is the place where the people lead life, community Health is where people are healthy that is only community health according to me. In this community, people did not get any information about health and their life style.

Working with tribal people and giving free health care for them.

- Training in the community about taking care of mother and child, giving information about family planning and also how to take care of pregnant women from 3 months to 45 days baby.
- Mobile clinic to the community, giving medicines was really good and this is a new learning for me.
- Training at the school level about personal hygiene and School Parliament Training (SPT) and exposure visit.
- Community level awareness programme to build toilet.
- Giving training about community monitoring and asking schemes, which are available in the PHC level by the

community people.

- Asking medicine for the Mental illness from the PHC level by the community (Disable groups).
- Choosing VRW in each panchayath level especially to work for the Disability.
- Understanding the use of Herbal Medicine

## **XII Section**

### **a) Project work for 3 months in fellowship**

- 2 Training on Health and the Health Rights to SHG women in 2 villages.
- Training to the VHSC members on what is NRHM and who and all should involved in VHSC and what is their work
- Meet PHC and get list of Arogya Raksha Samithi in PHC.
- 2 Public Hearing in Balaganoore PHC level and in the Ragalparvi PHC
- Planting Herbal Medicine plants in the 2 Village by making small garden.
- Put NREGA application to the Panchayat by asking Work and the Job Cards.
- And put application to 10 Panchayat by asking what was plan of budget in NREGA from 2000 by using RTI.

The project work has really helped a lot for me because when I was going to the village to talk with the people that I want to give training on health and on health rights. All people agreed for the training and did.

While giving the training to the women who all are involved in the SHGs of JMS and to the others, I felt very useful because after finishing the training all the women started to discuss among them selves. And all participated actively in the training. Both the trainings which I have done in the village were very useful. When this type of the training happens in the community level the people will able to understand the health status and schemes.

The people always thinks that any body comes to them and tell some thing to them, and that should be like make them to think of their village and what the solution is for that. So that people will get an answer for the question.

When I went to the PHC to ask information about PHC, the PHC medical officer gave me the information and supported me to Public hearing and the people who lives in the village have supported.

20<sup>th</sup> of Feb I have done the Public hearing in Balaganoore in front of PHC. I feel that I have done good job by doing Public hearing in Balaganoore because not only conducting the public hearing but also cooking food in the programme instead of buying food from the Hotel because one issue has come up that when the SC (Dalit) people were cooking no body was touching the things. And in the programme the most important we feel it should not happen caste discrimination. This type of problems always will be there in the community but where these all which we called discrimination is, the community health will not improve.

One more public hearing done on 20<sup>th</sup> of March 2009 in Ragalparvi PHC level and the people all are participated and PHC medical officer also have encouraged doing public Hearing.

#### **b) What did I like in this Fellowship**

- Round table discussion was really made me to feel every one is equal and in the CHC all are feels equal.
- Explaining the subject by telling stories and playing stories to feel they are in the village
- Taking section to think our self. This is the section I really love. This section is very good useful for me by thinking Negative and Positive
- Every one will encourage to every body who know language and who don't know the language has equal.
- Every one in the CHC is very helpful and helping for every thing, which is needed for us.
- My batch was really very good because all back ground members were there and every one can learn from every body. Thank you so much to my batch and to the CHC for encouraging me in this journey.

This CHLP programme had changed my life and gave some space and taught me a lot. I have learnt about Health, Grown up my skills and I had a new skills which is use full for me. I had visited many Organisations which were gave me to understand of primary health



care and its implementation, about Disable people especially mental health people.

My personal objectives also have fulfilled here while doing my fellowship. I have done case studies, Survey documentation and conducting the programmes etc. thank you once again for every one in the CHC.

### **XIII Section**

#### **Case Studies**

##### **a). Member of Herbal Medicine**

###### **1. Huligemma Mudhanguddi**

Huligemma is illiterate women; she got married in her childhood. She is having 3 children and is a active member in the family. She was working in the Vimukti (where the JMS started from) as a cook. And in this NGO one of the staff who taught herbal medicine to sangha people was Mita Deshpande.

Huligemma dont know any thing about herbal medicine, and Mitha wants to teach about herbal medicine to these sangha people and Huligemma also one of the sangha member in Mudhanguddi village.

Mita started to teach herbal medicine and took Huligemma and other members for one round in the field, that time these people were thinking that is she teaching us medicine or some thing else and Mitha knows the purpose of going to the field, to make them understand the plants and taking out from them that what they know about herbal medicine. And then every one started to tell this plant, that plant and learnt the name of the plants, which is called in this place. And then started to teach them the medicine. Huligemma says that Mitha has taken risk to teach us herbal medicine.

Hiligemma has gone to many training to learn herbal medicine; first training that she has attended in Mysore Jeevadaru with Fr Chitoor. When she attended this training, she was confident that she could prepare medicine in their village and use it.

And she also has gone to the Bangalore, Udupi etc. to learn herbal medicine. All these training have made her to be comfortable to prepare the medicine. Now she knows many medicines they are Pain oil, Skin oil, Hair oil, Cough choorna,

Cough syrup, for the kidney stone etc. every thing she can manage.

She says that Mita has taught us not only preparation of medicine but also how to communicate with the people who comes to ask medicine how to make people feel comfortable and then go to the medicine and also she was sitting with us to teach how to give medicine to the people. This method really good and now we are using this method only, she says.

And now she is going to give training to the other organizations, Huligemma says that she is very happy in giving training to others and so that they also are aware of the medicine and use it.

Now Huligemma is involved in the Neem Fertilizer when it has started because this fertilizer group is same which she is there. huligemma says that I m not getting time as before because involved in fertilizer but still she is there in this and goes to give training to the other organisation. She says she is very interested in herbal medicine and also she says that if training is there on the herbal medicine i m ready to learn.

## **b). Members of Land workers**

### **1.**

Name of the person	: Mariamma (Devadasi)
Name of the Mother	: Eramma
Name of the Village	: Gonavare
Age	: 45
Sex	: Female
Education	: Nil
Land	: 7Acreas
Work	: Coolie
No of the children	: 8 members

### **Family Profile**

No of the family members : 9 members

Resources available in the Family : Nothing

Situation of the land before

Starting the land work : From 60 years this land was not used and this land was not issue and no water for this land. This land is full fallow land

Mariamamma is a person in the house to take care of every one. Because she is a Devadasi. Mariamma is from SC community member. Socially the higher caste people dominate this community. She has 8 children, 2 boys and 6 girls. Only boys are going to the school, girls are doing agriculture work. She is having 7 acre of land but because of money problem she is not able to grow crops in the field.

And also she is having 6 members of girls; she is responsible to get them married. Till now 4 girls marriage has been done, 2 are small. This type of situation had made her to stay back. Economically this community people are very poor.

Now she says that from 60 years we could not clean and crop this land even my father also has not done, but this project has made us to do it. This work was use full for me and to the family. Now I feel like to do some thing in the family, because of cleaning and have put organic fertilizer in the land. Yield is better if you want to see more yield then have to wait for 6 months definitely yield will be good. But still she is having 2acreas full of fallow land she thinks that cant do any thin in that land. She can able to do by the Panchayath from National Rural Employment Guarantee Act.

Mariamamma says that after joining in this sangha I had learnt many things, before I could not talk in front of the village gowdas and lords, but now we are ready for every thing. And this land work had given life to us.

## 2.

Name of the person	: Sidhappa
Name of the wife	: Nirmalamma
Name of the Village	: Pannure
Age	: 44
Sex	: Male
Education	: 7 <sup>th</sup>
Land	: 2Acreas 10 Gunte

Work : Coolie Girls 50 Rs  
Boys 70 Rs  
No of the children : 4 members

### **Family Profile**

No of the family members : 6 members

Name of the children : Arogyamma – Tailoring  
Pavithra Raj – 9<sup>th</sup>  
Nobel Raj – 6<sup>th</sup>  
Parimala – 5<sup>th</sup>

Resources available in the  
Family : Nothing

Situation of the land before  
Starting land work : Land was not prepared and we did  
not touch the Land to crop

Sidhappa is from SC family member. Basically this SC people are dominated by the higher caste and by the village Gowda people. This caste people will never have land and other things in their life, if there is they don't have capacity. This has made them economically backward. They are labourers. 2-3 years back this family had migrated to Bangalore because of no work in the Pannure.

And at that time Sidhappa had a piles problem, this problem become very serious and continuous bleeding was there. The doctor told that he has to go under surgery. To do surgery family went Mangalore and stayed for 20 days. Surgery was done freely but Rs 4000 was this spent for other expenses. This made them poor. Nirmalamma use to have half head each, she was not able to go to work this also made them poorer. She says that, land work we was not taken seriously because we were spending money for studies of our children.

Nirmalamma and Sidhappa say thanks to JMS, for involving in the sangha. our children are studying and we got a land work, other wise our children might go to the field. This land work made us not to migrate again to Bangalore. Now the

plan has changed and we have crops on own land, which made us stay back. And from the sangha Nirmalamma took loan and repayment is done this is also useful to family. She used to take Rs 4000 per year and repays it.

The neighbours says that land work has made them to stay back in the village. This world help every body to stop migrating.

### **3.**

Name of the person : Ningamma (Widow)  
Name of the Husband : Mudhakappa  
Name of the Village : Pannure  
Age : 46  
Sex : Female  
Education : Nil  
Land : 2 Acrers 10 Gunte  
Work : Coolie Work  
No of the children : 5

#### **Family Profile**

No of the family members : 6 members

Name of the children : Dhodda Hanumantha  
Sanna Hanumantha – Degee  
Amrutha  
Marianna – 10<sup>th</sup>  
Monesh – 4<sup>th</sup>

Resources available in the  
Family : 2 Cows  
: 2 Ox

Situation of the Land before  
Starting the land work : Land was full of sallow land

Ningamma is a responsible person in the house. 3 years back her husband died. She has 4 children 2 boys children are studying and 2boys are engaged in land work with her. She belongs to SC (Scheduled Caste).

Economically very poor and after Ningammas husband death the family has become very poor. She spent Rs 48,000 for her

husband operation but he never woke up from the bed. And her brothers also helped her in this situation.

Ningamma says because she is a sangha member of JMS (Sangha) has made her stay back in the village. Upper caste domination is reduced and SC families have become stronger. From agriculture we were able to buy books for children and lead the life

Ningamma's 2 children dropped out of a school because no money for studies and helping the mother in agriculture work and going as labourer.

Ningamma says that this land work had made us very useful because we don't have that much money to spend for the land. This land was not good but we were putting some crop simply, yield was nothing. But now every crop will come properly because land has become clean and level has done. She says that water is not there for the land so this is also has big problem in this area. And this year crop has come proper but no rain so all crop is becoming dry. If rains than the crop will be good, but it should be in October and November other wise the situation will be very difficult. At last she says if possible please do get water facility for this area.

#### **4.**

Name of the person	: Balaswami
Name of the wife	: Rangamma
Name of the village	: Pannure
Age	: 52
Sex	: Male
Education	: Nil
Land	: 5Acreas
Work	: Coolie
No of the children	: 5 members

#### **Family Profile**

No of the family members	: 7 members
Name of the children	: Ravi Loordu Kamala

Shivakumar – II PUC  
Hanumantha – 8<sup>th</sup>

Resources available in the  
Family : Nothing

Situation of the land before  
Starting land work : Sallow Land

Balaswami is a Physically handicap person he doesn't have his right hand. He is a father of 5 children 2 girls and 3 boys. He is only child to his parents. Balaswami had married when he was 25 year old. His wife is Rangamma. Balaswami is SC community member.

Balaswami had a severe Underarm pain, that pain had to an Operation. For this Operation 30,000 Rs was needed, but nobody was willing to give money to the Balaswami. So they sent their son as a Bonded Labourer to an Andra family, who gave money. This had happened when his son was 12 year old, that time they were dedrecting Rs 900 per year towards the loan. Till he was 21 years old he had to work as a bonded labour. the operation was conducted (open drynage), but not successful. Still there is an open hole under the arm.

This person suffered very badly in his life because all the children were small and elder son was sent as bonded labour, no body was there in his house to do work. Rangamma and Balaswami had to work. But Rangamma always suffered from headache and was not able to go to work daily. Balaswami had to go for woodcutting and other work, which he can do. And it is their way of life.

Balaswami had 2 acres of land but nobody was there in his family to work on the land. Govt had given 2 acres of land and a place to stay. 10 year the land was left fallow. For the land 4-5 years they have started growing crop on the land. His son (who was sent as a bonded labour) came back at the age of 21, this has made him happy.

Balaswami says that cultivating land had made us very good use full from the JMS. Because till a day, we could not able to clean a land we were suffering from the other problems. Our land was full of Stones and trees that all had clean and I was happy while

seeing all these things.

This year (2008 March), 6 months before he had a problem that is air breath in will come from the underarm and puss also will come ones in a while. Doctor told that again he has to under go surgery. He says that he is very weak well not be able to control pain and may live in the world for another 2 or 3 years so why to take a loan and go for surgery. I don't wanted my family to suffer again because of the loan. But yet had spend 8000Rs for me. Now he is not able to do any work this is the situation. We are growing crops on the land and getting good yield. This is what he needed and it is happening and is happy.

## **5.**

Name of the person	: Renukamma (Widow)
Name of the Husband	: Erappa
Name of the Village	: Gonavare
Age	: 42
Sex	: Female
Education	: Nil
Land	: 6Acreas
Work	: Coolie
No of the children	: 1 Daughter

### **Family Profile**

No of the Family members	: 2 Members
Name of the Daughter	:
Resources available in the Family	: Nothing

Situation of the land before starting land work	: this land was given to others on a loan
---	---

Renukamma is a lady who is suffering from poverty. She is a widow; 12 years back her husband died. She is having one daughter, when daughter was 5-6 years old the father died. So Renukamma had to take care of the child. She belongs to SC community. Basically the higher caste community dominates this community.



Erappa her husband had taken loan for his health problem (cough and wheezing), because of this loan his 6 acres of land was mortgaged to the Gowda (Who have given loan) for 10 years. After this her husband died. She is alone in family with her 5-year-old daughter. And was not able to send her to school. That land was given back to Renukamma in 2007 March when JMS started (Lean the for agricultural activity) land. This mainly helped her to use this project.

Yet she is alone and nobody is there in the house to do the land work. So she leased it, so that she will get half of the yield from the land. Due to financial problem as well as no male member to help her in cultivating the land which is far away from the village. No water facility available. One has to go 4 kms to bring drinking water.

Renukamma says after joining JMS (sangha) she had got the strength and able to go from the village, and participated in strikes, jathas and other programmes, that is related to them.

### **c). Members of Disabled person**

#### **1. Shashidara**

Shashidar loves his mother so much that he does not want to leave his mother. Once his mother migrated to Bangalore at that time he was fully upset and was not talking to any one. One more reason was that he likes to act in Drama, but his parents did not allow him. These two reasons made him a mentally ill. During this time he was fully ill person and wanted to kill his parents and throws stones at others. His interest in acting made him to tie the anklets to his legs and started dancing in the mid night. This was his behaviour when he was mentally ill.

At that time the Narendra Foundation came to form SHG of disable people and this person. Got involved in this SHG and started to get treatment. During that period from Basic needs project came and helped for the treatment and one more thing is that from the foundation they have started a monthly once meeting for the mentally ill person to share their experience and difficulties they have fused in the time. This activity helped a lot of mentally ill person, accept the treatment.

Now this person is very good, he is fully cured. Going for work and taking care of the family. And the village people are giving respect to him and he is fully recovered now and his family is very happy.

## **2. Erkyathappa**

Erkyathappa is a very poor family member. He is only child to his parents. He has finished BA and got married. He loved his wife, very much but she had some other affair, but he did not believe others saying about it. Once he saw her with other boy. Then he threw her out of the house and was fully upset thinking about her. From that time he and became mentally ill. He did not listen to his parents, he was talking to him self. His parents were worried about him and they were aged. They have to go for work (Coolie) and take care of the family and him.

Narendra foundation had come to work with disabled people, that time Erkyathappas mother made him join the SHG of disabled and Basic Needs project was there in this foundation, and then started the treatment for the MI. He took medicine properly and now he is cured from the illness.

Now is selected as a VRW in Gram panchayath, and taking care of the family. He is helping other people for the pension and other things not only disabled people but others also in the community.

Now he is doing very good work and if he finds any mentally ill person he will take them for treatment. He keeps the documents of the patients with their photos; this document is referred even by the foundation and has appreciated him. He is conducting the SHG meeting and is the member of Hobli level federation.

### **XIV Section**

#### **In Narendra Foundation**

##### **a) SHG member Information**

1.	Name of the person	-
2.	Name of the Village ( place)	-
3.	Age	-

4.	Sex	-
5.	Caste	-
6.	No. of members in the family	-
7.	Marital status	-
8.	No. of the children	-
9.	Education (Qualification)	-
10.	Which group do they belongs to	◇ Federation : ◇ SHGs : ◇ Association: ◇ Other :
11.	Nature of Individual	◇ Physical : ◇ Psycho-Social : ◇ Normal :
12.	Occupation	-
13.	Income (Wages)	For Male: For Female:
14.	No. of members working in the family	-
15.	No. of members involved in the SHGs	-
16.	Any group Occupation Out come in the Family 1. Economic 2. Social	- - -
17.	Benefits of joining the Group	-

## b) Self Help Groups Information

1.	Name of the Group	-
2.	Areas which SHGs is formed	-
3.	Which caste belongs this group	-
4.	Total no. of members in Group	-
5.	No. of Male members	-
6.	No. of Female members	-
7.	No. of Disabled members	- Male : Female :
8.	How many Mental ill members are there and Why they join the group?	-
9.	Changes after joining in the group a) Economic b) Social recognition c) Individually d) Other	- - - -
10.	Any Group Occupation - Outcomes	◇ Individually : ◇ Family : ◇ As a group
11.	Benefits of joining the group	-
12.	Functions in the Group- a) What issues are discussed in a meeting? b) Has the Group organized an event? c) Has the group or any members attended the panchayath meeting? d) Does this group have any panchayath members? e) Have the group participated in any Dharana or Rally? f) Awareness about Mental illness g) Do you have conducted any training of mental illness h) What kind of schemes availed	- - - - - - -

	<ul style="list-style-type: none"> <li>- Disability (ID Cards)</li> <li>- IAY Group House</li> <li>- NREGA</li> <li>- Total sanitation Programme</li> <li>- Bagya jothi</li> <li>- Other(Advocacy)</li> </ul>	
13.	Link of the SHG to Federation	-
14.	Do federation members participate in any SHG meeting?	-
15.	How does information pass from federation to SHG, SHG to Federation?	-

### **c) SHG level Question and answers**

1. Why does mental ill person join the group?
  - Treatment
  - They are also the disabled person, so that they can get a govt facilities
  - To come out from the illness
2. Changes in Economic after joining the SHG?
  - Got loan for the surgery from the SHG
  - Loan for the house repair
3. Changes in Social recognition after joining the SHG?
  - Community is respecting and govt officers also
  - If some thing happens wrong to the members we all are ready to fight
  - Decided Not to going to the begging
  - All will comes to the SHG meeting
  - Asking to the panchayath about govt schemes
4. Changes in Individual
  - Courage to talk with others
  - Satisfaction is there
  - Got training of making silk products and SSA
  - Woman's are going out of the house
5. Individual occupation
  - Selling Coffee Powder
  - Sheep raring
6. Benefits of joining the SHG

- Govt schemes
  - ✚ Houses
  - ✚ I D cards
  - ✚ Wheel chair
  - ✚ Pension
- Getting treatment to the mental ill person
- We have strength
- Getting awareness of the different issues
- Helping child labour to go the school

7. What are the issues discussed in the meeting?

- Disabled schemes
- Personal hygiene
- Loan
- 3% money from the panchayath
- RTI, Right to food
- Houses to the 40% disabled not to the 60% disabled
- Pension
- State level convention in January
  - ✚ Separate minister for the disabled
  - ✚ Houses scheme should be stabilized
  - ✚ Need PHC level medicine for the mental illness
  - ✚ VRW scheme should continue
- School, Anganawadi
- World disabled day celebration
- According to the situation of the village, SHG and individual will be discussed

8. What are the schemes has got from the Govt?

- ID Cards
- Bus pass
- 3% money from the panchayath
- Ration cards
- Pension
- Medical certificate
- Houses (IAY Group houses)

9. NREGS work

- Started to distributing the job cards

10. Link between SHG to Federation

- SHG members only will be participate in the federation meeting and they are the member of the federation

- When the SHG will feel that they are not able to solve the problem than that issues goes to the federation
11. How does information passes from the federation to SHG and SHG to federation?
    - SHG member only will participate in the federation meeting, so that they will come to the SHG and share the issues which are discussed.
    - What are the sangha discussed will goes to the federation if it is serious issues but, What the federation discusses all will comes to the SHG through the members
  12. Has the SHG organized any event?
    - Organized a exposure visit to see the developed SHGs to develop their own SHG
    -

**d) Federation level Question and answers**

1. Why does mental ill person join the group?
  - To get treatment
2. Changes in Economic after joining the SHG?
  - Helping to the other in financial matter
3. Changes in Social recognition after joining the SHG?
  - Getting respect from the people
  - Municipality has given a room to conduct meeting
  - The all people feel that others problem is our problem
  - All are having helping nature
4. Changes in Individual
  - Self confidence
  - Aware of talking to other
  - We know the govt officer
  - Commitment is there
  - Participation
  - Identifying in the thaluk level
  - Aware of the legal rights
5. Other Development
  - Govt officers are giving respect and encourages
  - Govt officers only thought to give a training of the silk products to us

6. Benefits of the joining the federation
  - From the govt SSA, Anganawadi teacher and ASSIRD
  
7. What are the issues discussed in the meeting
  - Education
  - Personal hygiene
  - World disabled day celebration
  - EDT (Enterprones development training )
  - Houses and 3% money
  - PDS system
  - NREGS
  - Children's sabha
  - State level convention
    - ✚ Separate minister for the disabled
    - ✚ Houses scheme should be stabilized
    - ✚ Need PHC level medicine for the mental illness
    - ✚ VRW scheme should continue
  - VRWs work ( In panchayath)
  - Monthly meeting to the mental illness
  - Property right
  - RTI
  
8. Has the federation organizes an event?
  - Dist convention
  - World disabled day
  - Awareness of the mental health
  - EDT ( Enterprines Development Training )
  - Personal hygiene
  
9. Govt schemes
  - more than 40% of disabled can get houses not to 60% disabled
  - ID Cards
  - Medical certificates
  - 160 Wheel chairs from the govt
  - 3% money from the panchayath
  - Bus passes
  - Pension
  - 15000 houses have sanctioned in thumkur dist
  - NREGS started to distribute the job cards
  
10. Link between SHG to Federation



- Link is that from the SHG 5 members will go to the panchayath level federation, from the panchayath 5 members will go to Hobli level federation, from the Hobli 5 members go to the taluk level federation and from the taluk 2 members go to the district level federation.
- SHG members only will participate in the federation meeting and

They are the member of the federation

- When the SHG will feel that they are not able to solve the problem

Then that issue goes to the federation

11. How does information pass from the federation to SHG and SHG to federation?

- SHG member only will participate in the federation meeting, so that they will come to the SHG and share the issues which are discussed.
- What are the issues discussed will go to the federation if it is a serious issue but, what the federation discusses all will come to the SHG through the members

### e) Individuals Question and Answers

Benefits of joining the group

- He himself wears the cloths
- Interesting in helping
- Govt schemes
  - Pension
  - Calliper
  - VRW (working in the panchayath)
  - Toilet build
  - Medical certificate
  - 3% money from the panchayath
  - Wheel chair
  - ID Cards
- Loan for the Sheep, House repair, For the surgery
- Conducting SHG meeting
- Speaking
- Treatment for the TB
- Training of Basket making, Leadership, Gender and vegetable garden
- Drip irrigation
- Courage
- Dharana

- Spoke with Kumaraswami
- Working in the house
- Involving with others
- Working as coolie
- Strikes
- Identifying in the village as a normal person
- Disabled children Going to the school
- All the class mates speaks to me
- Last year class leader in the school
- Drawing the pictures and got prize from the England
- Doing occupation as a individual
- Support from the group
- Left alcoholism
- Made to keep a person in the custody because of raped to Shivamma
- Physio therapy
- Special sheet
- CP child will be able to move from the place