Annual Report
of
Water, health and education for women and children project
April 2021 – March 2022

Supported by
Asha for Education

Prepared by
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Jodhpur
Introduction

Like previous year, the reporting year was also a challenging year as the second wave of pandemic hit India and causality and mortality were witnessed at large scale. The reporting phase of project was started in April 2021. The rapid survey was conducted by an independent agency and the neediest 40 families have been marked as project beneficiaries for taanka construction in project villages. Though the 1st quarter of project was almost in lock down but other 3 quarters have been dedicated for implementation of project activities and monitoring of outcomes post interventions. The work of project resumed in June taking precautions steps. Though the in-school education of children was affected in most of days in earmarked year but we encouraged field team and local teachers to facilitate the peer group study for kids staying at homes. And at the same time community has been motivated for taking vaccination doses to prevent the disease. Nutritive assistance has been given to project families and awareness has been developed among community on pandemic.

By the end of the project we found good acceleration in vaccination and re-opening of schools in last quarter. The project reflects the outcomes of rainwater harvesting in form of water security among families. The capacity building trainings have been organized with precautions and care with limited number of attendees. In this distressed year though the schools were closed but teaching was continued. The vision of educating girls was continued with innovative “peer group” approach of transferring knowledge. Teachers and project staffs played important role in mobilizing and motivating parents in continuation of study of children. Community health has been given importance by organizing outreach health camps and eye surgeries to people from unprivileged families. This report presents progress of project in one year and its impact on overall wellbeing of community.
Progress of GRANT Activities and Impact

1. Grant Overview

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<td><strong>List of communities where project is being carried out</strong></td>
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<td>April 2021 to March 2022</td>
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| Rs 2,731,000.00 | *Water, health and education for women and children in Thar*
| 6 villages of Jodhpur district. The list of villages is being attached as annexure in Table 1. | Women, Girls & other village community. |

2. Objective of project

The overall goal of project is to empower women and girls through addressing their needs of water, health and education. Specific objectives of project are:

- To enhance water security through rain water harvesting,
- Improve the status of health of the vulnerable sections of the society, especially covering the groups of women and children
- Improve education of children, and
- Support to poor families with COVID relief activities

3. Project Location and Coverage

The proposed project has been implemented in 6 villages of Osian block of Jodhpur. The project has been implemented in field through *Gagadi* centre of GRAVIS.

4. Description of activities in the project:

Following activities have been accomplished in one year of project execution.

4.1 Construction and Maintenance of Taanka: –

A taanka is not just a structure but a lifeline for desert families. It is a cemented underground structure specifically designed to harvest rainwater for drinking and domestic use. Though all taankas constructed are identical in shape but their catchment varies according to soil, topography and availability of rain in region which varies in between 100 mm to 300 mm in Jaisalmer. Once filled, the structure serves a family of 5-6 members with availability of safe
drinking water at least for 7 to 8 months. The money saved during these months supports family in educating their children and other necessity in household. In lack of proper water facility at home, the study of girls usually discontinues, saving reduces and health of women and girls gets worse. The one hidden aspect of water scarcity is taking debt for water and its effect on overall well-being of family. The impact of taanka is observed in terms of money and time saved, health improved and continuation of girl child education. Two taanka management trainings also have been organized at field covering all aspect of structural design, maintenance and technical knowhow in simple local language.

Pic 1: Taanka Maintenance Training at field

Pic 2: Rekha of Bhakhari village with her taanka
Story of Guddi

Guddi of Bhakhari village is belongs to poor Meghwal community and leads a large family of 8 members. Her husband is a wage worker and works in mines of Bhikamkore. Her eldest son is also a wage earner. For managing all household work is Guddi’s responsibility and she has very little time for herself. She has to fetch water from nearest water body 3 km far from her house. Due to her poor economic condition she is not able to construct a taanka by her own. She approached VDC for it. Now a taanka is constructed at her door step. After taanka she is relaxed and is living a stress free life. She has also started saving money. Taanka filled with rainwater has provided her water security for 6-7 months and a saved an amount of Rs 4200 in between till Jan 2022. After that the taankas is refilled with pond water and has secured water till next monsoon. Guddi and her family is very happy to have taanka at door step. She is grateful to Asha and GRAVIS for giving her such a gift.

4.2 Medical Camps:

12 medical camps have been organized in all 6 project villages. These medical camps are instrumental in generating awareness which can then be disseminated by participants into the wider community, creating the situation whereby knowledge can be passed down from generation to generation. The medical camps also serve as a makeshift temporary clinic, treating participants for illnesses and vaccinating them against preventable diseases. Medicines are also distributed, as well as brochures outlining reproductive health issues highlighting the benefits of institutional deliveries. Common illnesses treated at medical
camps include asthma, fever, cough and colds, gastroenteritis and eye diseases. Patients identified with eye problems have been referred to GRAVIS hospital for further check-up and treatment and surgery if required. The subsequent part of camp is about generating awareness among community. Brief sessions have been addressed on Covid, and other infectious diseases. Community have been also made aware about importance of vaccination and motivated to visit nearest healthcare centre for Covid vaccination. Near 720 patients have been benefited through these camps in this year. 19 eye surgeries also have been conducted with the support of project.

![Medical camp provides primary healthcare to rural community](image)

**Story of Luni Devi**

60 years old Luni Devi w/o Nema Ram of village Cherai (Osian block) is enjoying her second phase of life with bright sunshine and colours of the universe. The last few years formed the dark interface between the present and the earlier happy phase of her life. She belongs to poor family and lives with her son and his family. She lost her husband few years back and now only her son works as wage earner. One day she realized that something is wrong with her vision. Day by day blurring of vision increased and ultimately it happened that she could just spot a faint ray of light. More than one year elapsed in such a condition. She became dependent on others for her daily chores. Life seemed a burden to her.

One day she visited GRAVIS outreach health camp and doctors found her condition genuine to get free eye surgeries. She was convinced to be examined at GRAVIS hospital. On
examining the eyes it was found that cataract in her **right eye** was obliterating her vision and is progressing towards blindness. Couple of years ago she was operated for left eye. This time she was advised to get her **right eye** operated.

Following this, she was admitted in GRAVIS hospital at Tiwari where she underwent eye surgery of her **right eye**. She was operated in February this year but later the team met at her home to know her progress. Now her both of eyes are good and functional. Now she is able to do all her routine work with restored vision. She paid thanks to Asha and GRAVIS for giving her new life.

Pic 5: Luni Devi - Eye care beneficiary
4.3 Educative sessions for children and adolescence girls

To educate school children on COVID-19, nutrition and hygiene, two WASH sessions were organized. GRAVIS health team conducted these trainings and explained children about COVID-19 and about the roles of nutritious diet and of hygiene with the help of pictures and games. All children listened to topics with great interest and they asked many questions. Their knowledge on COVID-19, nutrition and hygiene was significantly improved.
Due to COVID-19 restrictions, schools in person remained closed most of the time. The Government encouraged distance, from home education. Since there is no or little digital technology available in our villages, our teachers visited hamlets every day and taught children in small groups of 8-10. Overall, the process went well and was very meaningful. Moving forward, the COVID-19 situation is getting better and schools opened in late 2021 and remained open till March 2022 then after summer break was announced. All teachers received salary throughout project period for their efforts and dedication. All children cleared their current grades and were enrolled to next grade in May-June.
Self-doubt is very common among rural girls. They hardly discuss their problem with other including mothers. In adolescence age, a friendly discussion plays important role in building confidence and self-esteem among rural girls. All girls pass through tough face in teen age. They witness many physical and psychological changes in their bodies. GRAVIS organized 2 Adolescent Girls camps with the support of Asha for Education. In these camps, they have been taught about the various topics related to their physical changes and upbringings, health, hygiene, nutrition and food. Ms. Sanju Sisodiya and Mrs. Veena Mathur handled these two camps in two distinguished places. In camps, health and hygiene kits were also provided to girls. Around 40 kits have been distributed to these young girls. Kit contains sanitary napkins, nail cutter, inner wears, soaps and shampoos and many other attractive hair accessories.

Pic 10 & 11: Adolescence girls’ camps organized in project village
Impact of project

- Water security improved in villages a study has been conducted to assess the impact of rainwater harvesting at homes.
- Vaccination increased with the help of COVID assistance. Medical camps enable villages to seek health care facilities at door steps and vision restored to 19 poor people fee of cost.
- Girls child enrolment and retention through girls educational camps and dedicated female teachers which 60 % in schools.
Annexure – 1

List of project villages

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<th>S. N.</th>
<th>Village</th>
<th>Implemented from</th>
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<td>1</td>
<td>Bhakri</td>
<td>GRAVIS sub-center Gagadi</td>
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<td>2</td>
<td>Bhim Sagar</td>
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<td>3</td>
<td>Harlaya</td>
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<td>4</td>
<td>Saran Nagar</td>
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<td>5</td>
<td>Samrau (Meghwalon ki Dhani)</td>
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<td>6</td>
<td>Mahadev Nagar</td>
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