



Ghoghardiha Prakhanda Swarajya Vikas Sangh (GPSVS)

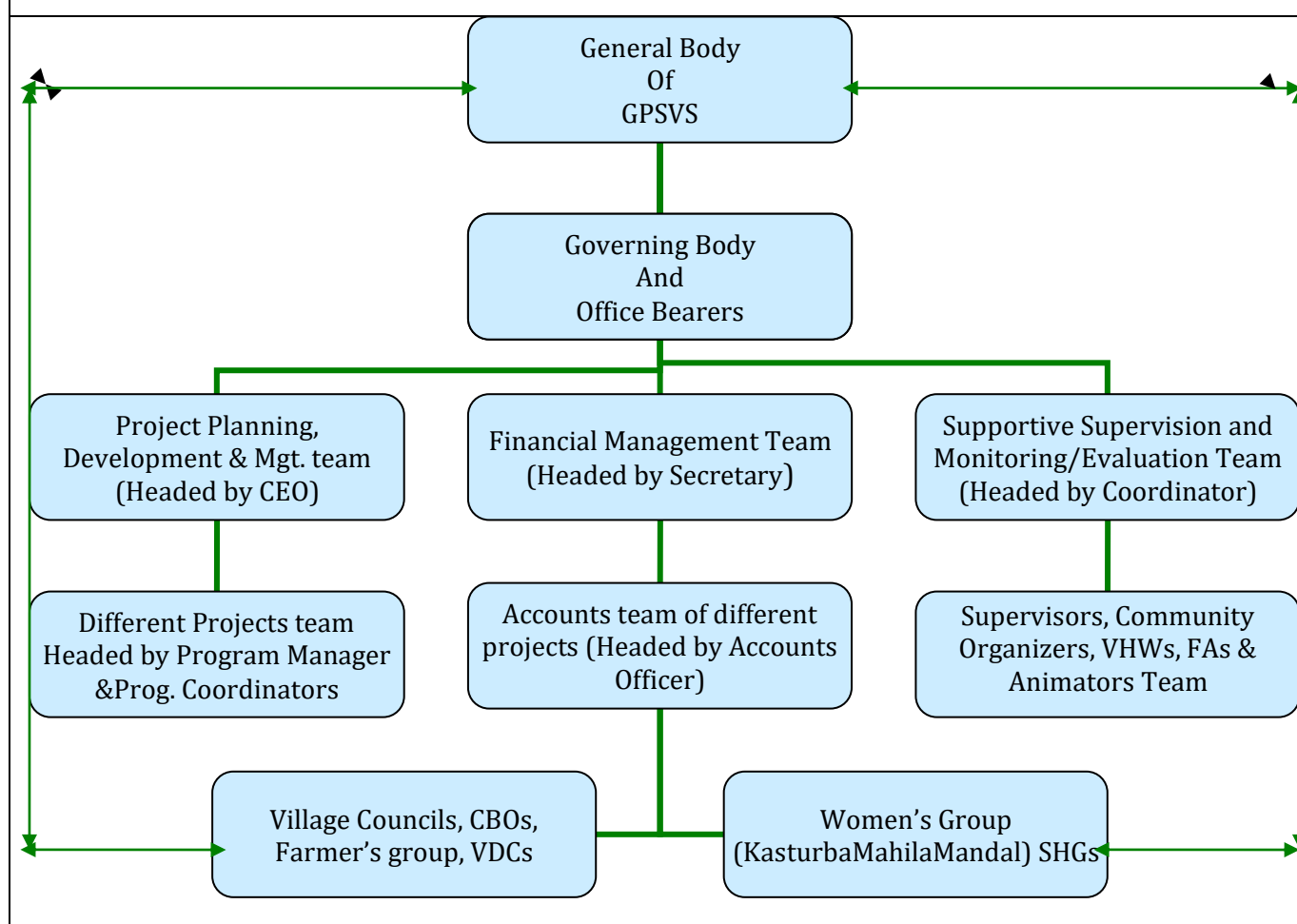
Head Office: Village & Post: Jagatpur, Via: Ghoghardiha, Dist. Madhubani, Bihar (India)- Pincode-847402

ORGANISATIONAL INFORMATION

General Information:		
Organization name	Ghoghardiha Prakhanda Swarajya Vikas Sangh	
Short name or acronym	GPSVS	
Postal Address (HO)	Village & P.O.-Jagatpur, Via- Ghoghardiha District- Madhubani, Bihar, Pin- 847 402 (INDIA)	
State Coordination Office	SCO-GPSVS Srikrishnapuram- Lane-21 West, Nayatola (Near Pump house) P.O- Danapur, Patna – Pin-801503	
Mobile No	M- 9431025373, 9955494453	
E-mail	gpsvsjp@gmail.com	
Website	www.gpsvs.org	
Contact Person & Designation	Ramesh Kumar Singh, Chairman Other office bearers: Mr. Basudeo Mandal -Secretary, Mrs. Renu, Coordinator	
Statutory Information:		
Registration Authority	Registration Number	Date of Registration/Year
Societies Registration Act 1860 (XXI)	78	11 th July 1978
Foreign Contribution Regulation Act- 1976	031290001	1984-85
12 A Registration of Income Tax Act	1398-400/1993-94	1993-94
80G Exemption Under IT Act	14/2012-13	Renewal
Permanent Account Number (PAN)	AAATG3111E	1994-95
TAN	PTNG04928A	2013-14
Core Values:		
<ul style="list-style-type: none">▪ Non-discrimination & non-violence▪ Transparency & accountability▪ Good governance & democracy▪ Women empowerment & gender equality^{[1][2]}▪ Peace, tranquility and humanity^{[1][2]}▪ Respect to all kinds of culture, values and heritages▪ Voluntarism/ Sacrificing spirit etc.		
Geographical areas of operation	Core concentrated area in Madhubani, Darbhanga, Supaul, Saran Districts and working in Muzaffarpur, Samastipur,Saharsa & other districts of Bihar.	
Philosophy of the Organization	GPSVS has been inspired by the philosophy of Gandhi, Vinoba and Jayprakash Narayan. The values of total revolution (Sangthan (<i>Organization</i>), Shikshan (<i>Education</i>), Rachana (<i>Development</i>) & Satyagrah (<i>Non violent struggle</i>) are at the ethos of the organization. The organization believes in the society in which moral revolution constitutes a significant part.	
Establishment	GPSVS was structured in the year 1977 in a meeting of Gandhian social workers and was formally registered under Societies Registration Act- 1860 (XXI) on 11th July 1978 bearing No.78. The organization started with the organization of Gram Swarajya Sabhas (Village Councils) and Mahila Mandals (Women’s group) with representation of every section of society in it. It had separate wings such as youth, Women, Bhoodan Farmers etc. to address their appropriate needs. After the formation phase the organization carried a massive Programme of awareness generation, which was followed by other pro-poor development activities with the support of local communities and some support agencies.	
Vision	The organization has vision of Gram Swarajya (Village Sovereignty) based on the Gandhian Principle of Equity, Justice, tolerance and Ahimsa (Non -Violence).	

Mission	GPSVS mission is to develop people's conscience to live in harmony with nature and high moral values, tolerance to all faiths, compassion and non-exploitation of the fellow beings and achieve dignity, self-reliance, equity and above all people's sovereignty.
Aims & Objectives	<p><i>Key Objectives of the organization:</i></p> <ul style="list-style-type: none"> • Formation of People's organization (for women and youths) and strengthen the capacity of marginalized community for sustainable development • To organize campaign for right based and people's centered advocacy • To develop the socio-economic condition of the poorest of the poor (Antyodayee) • To enable and ensure the basic rights of marginalized community & Person with Disability. • To provide Quality Elementary Educational and vocational training facilities for the children, adolescents & Women. • To preserve the cultural heritage and indigenous skill of the area. • To ensure gender equity • To provide Reproductive & Community Health care services including HIV/AIDS & Eye care • To promote Traditional /Alternative health care systems. • To develop community based Disaster Mitigation/Risk Reduction in Hazard prone areas of Bihar • To work on School Safety Programs for Integrated DRR actions • To improve Ecological balance to protect environment • To re-establish village self-reliance

Organogram of GPSVS



POLICY

- General and governing bodies are constitutionally authorized for policy level decisions.
- GPSVS has formed following committees for smooth and transparent functions:
 - Advisory committee
 - Procurement committee
 - Financial management team
 - Project planning & implementation committee
 - Monitoring and Evaluation team

SYSTEMS AND PROCEDURES

- Thematic orientation of program personnel
- Participatory strategies planning
- Community based need assessment
- Action plan with concern staff, chief functionary and participants
- Monthly and quarterly meetings of the program implementation workers and beneficiaries
- Regular monitoring, Evaluation and Learning (MEAL Exercise)

Governance: Name of General body and number of members: General Committee, 300 Members (Female -230 & Male-70)

Executive Committee: 13 members (Female-5 Male-8)

Key achievements of GPSVS

The major areas/sectors the organization covers:

- ***Strengthening CBOs Community Based Institution***
- ***Education & Trainings***
- ***Water, Sanitation & Hygiene, Health (RH & Traditional Health cultures)***
- ***Disability***
- ***Environment, Climate Change Adaptation, Disaster Response & Risk Reduction***
- ***Agriculture & Rural Livelihood***

Target Audience:

- Distress & Landless women / men
- Disadvantaged children & adolescents/girls
- People with Disability
- People with HIV/ AIDS
- Dalit & Mahadalit and other vulnerable community people

GLIMPSE OF GPSVS PROGRAM BASED PROGRESS REPORT

GPSVS performance its concern for sustainable development for poor community has focused in the financial year **(2017-2018)** on the issue of Water, Sanitation & Hygiene, Climate Change, Natural Resource Management, Trans-boundary Flood Resilience, Community Reproductive Health, Climate Change proofing Traditional health Cultures & climate induce Disaster mitigation and preparedness, environment protection and conservation. The poor and marginalized community which is suffering lot due to rapid climate change and natural resource degradation of land, water and forest and high risk on health. Realizing this fact Climate change adaptation and mitigation became the core issue cutting across all thematic areas like health, WASH, Natural resource management, Disaster Management, agriculture and other livelihood programmes. GPSVS intensified its past effort to promote Green Infrastructure like traditional water bodies, agro and social forestry, conservation of native environmental friendly plants and also developed health and nutrition garden for improving nutrition level as well as livelihood security. It intensified its awareness programme on climate induced disaster particularly flood and drought. It has also intensified its programme for mitigating the effect of climate change on health through the promotion of Traditional Health culture. It took steps to strengthen the capacity of CBOS like KMM/KMS, WASH committee, Farmers club, CDMC, TBCF, VDMC and other on climate change mitigation and adaptation and link it with project activities. For Trans-boundary flood resilience & natural resource conservation and CCIDRR & sustainable agriculture, GPSVS organized state level workshop with

the collaboration of BSDMA, ATMA & INGOs and other institutions to make climate change mitigation and DRR programme more effective. Through the various training, orientation and workshop & mock drill, Trans-boundary community people became more aware on the issues of flood preparedness even at the country level, GPSVS has been established trans-boundary Citizen Forum for Early Warning System which is run by the community people through the linkage with Nepal hydrology and metrology station at Ranibas (Sindhuli District). Throughout these years, small and marginalized farmers have improved their farming practices & strengthened through the introducing of vermin compost, mix cropping, Farmer Field School, health and nutrition garden, water-pest management.

Kasturba Mahila Samiti has strengthened its capacity further; it is better able to monitor the activities of 302 Kasturba Mahila Mandal. It has developed business plan for livelihood. At the community level GPSVS-KMM provided various training and orientation program for increase the capacity of small-scale business. GPSVS has been successful in educating the community in Baheri and Singhwar block of Darbhanga on family planning as indicate by growing demand of RCH services from local PHCS. GPSVS static clinic has been established at Jagatpur Headquarter for providing quality health services like ANC/PNC checkup, family planning counseling and family planning contraceptive. WASH is the most important part of our daily living life. WASH practices & condition has further improved through awareness, training and construction of toilets and High raised platform around hand-pumps. These are the major achievements of these years. In future it will continue its effort for sustainable development in the context of changing climate and natural resource degradation.

Overview & Achievement of GPSVS thematic Areas & Project Activities

1. Women Empowerment through the strengthening of livelihood & Healthiness

GPSVS has been formed various groups and committees at the community level for the holistic development but KMS/KMM is one of most effective for the long term reflecting of achievement. At the present day, 10 cluster groups has been working very positively in the various sectors like – WASH, Health, Education, Social discrimination, human rights, Livelihoods, Climate change. In these financial years, Livelihoods & CCIDRR is the core concern areas. This Pandemic has been affected on rural livelihood very badly and women have learned from this pandemic crisis. Rural economic empowerment has been disproportionately affected. At the community level, GPSVS –KMS are actively working to try to mitigate these affects in this crisis of COVID-19. GPSVS-KMS has been introduced various small scale business module to the rural women. GPSVS –KMS provided training program to KMM members and other women on health –nutrition garden establishment, vermin compost preparing and selling process, face mask –liquid soap preparing process and selling unit establishment etc.

- 756 KMM & 530 other community people got training and orientation on health and nutrition garden & own business establishment
- At the community level, 2200 health & nutrition garden has been established for the improving of nutrition level and livelihood option.
- The women farmers have produced 1500 KGs vermin compost and they earned money by the selling of vermin compost.
- 56 Kasturba Mahila Mmandal members have started their income generation activities through the establishment of Kirana Shop
- Kasturba Mahila Samiti has been supported to 120 women through the proving of loan for the purchasing of goat and cow. Now at the present day, they have increased the number of domestic animal.

Major Achievements (Inter loaning by the KMS & Cooperative bank)	
Results/output	Year 2017 - 2018
Health (KMM/KMS members took loan for health purpose basically safe delivery, family planning, medicine, treatments and other emergency disease/illness.) Loan took for better health.	501 times /1491012 amount
Income generation activities (Small scale business, agriculture, buying domestic animals, kirana shop, kitchen gardening, vermin compost, social and agro farming.)	1025 times/ 579391 amounts

2. WASH (Water, Sanitation & Hygiene)

In this background GPSVS with the support of WHH & WN implemented WASH project 20 villages of Madhubani district of Bihar with the clear objective of achieving good life through improved water and sanitation facilities. Still, WASH practices is reflecting at the community level and community people are practicing WASH. This was to achieve with community led right based approach supported with well-designed integrated public awareness and infrastructure (Soft skill for hygiene practices as well as infrastructure for sanitation) development. In the beginning of the project these villages had major problem of open defecation. 96% people were involved in open defecation. Women were the main vulnerable population of this bad practice. It not only gives the dirty look to villages but it is also against the gender justice as women/girls and children are more vulnerable to the practice of open defecation. Use of unsafe drinking water, poor sanitation, poor personal hygienic practices and low awareness were some factors for making intervention in these villages to bring the desirable changes in overall WASH condition. This project has been successful in achieving its result/output as well as left important impact on the different aspects of personal/HH and community life. Women and children have emerged as the WASH champion during implementation of the project.

- *55 WASH communities have been working actively with the motive of making community healthier from all round of WASH condition. Regular training and orientation of WASH committee members, they have improved the knowledge on WASH practices and this practice has promoted at the various level by the involvement of KMS & KMM.*
- *GPSVS – KMS provided 26 training for capacity building to 650 WASH committee members*
- *Through the linkage with the Govt scheme/entitlement, 6973 toilets had constructed in 20 villages*
- *300 Matka Filter has been installed for safe drinking water*
- *35 hand pumps constructed cemented platform & 75 hand pumps has retrofitted during the flood and monsoon period.*
- *8000 Ltr rainwater has been collected by the collectively effort of community people and PRIs representative.*

3. Comprehensive Eye Care (VISION CENTRE)

GPSVS vision centre is one of the most sustainable output which is run by the GPSVS own support. This centre is situated at GPSVS, H.Q jagatpur. Basically this centre is monitoring by 3 persons like – Dr. Umesh Kumar, Dr. Santosh Kumar & Md. Islam. GPSVS Vision centre is responsible for providing comprehensive eye care services to the most vulnerable and marginalized community people and also raise awareness on the eye related problems.



Characteristic of GPSVS Vision Centre: -

- It is a permanent facility to the local community people
- It is managed by the trained eye care technician
- It is directly linked with Muzaffarpur Eye Hospital
- It is linked with primary eye care/primary health care workers/community health workers for increasing awareness and quality services
- It utilize community resource through community participation and monitoring and individual support
- It formed a medicine shop for accessibility and availability of medicine at centre
- Follow up, motivation and counselling session is conducted at centre

Specific Objectives: -

- To provide eye care services to marginalised people with nominal charge
- To organise free of cost eye screening camp and spread awareness on major eye diseases

Major Achievements	
Results/output/outcome	Years 2017 - 2018
OPD patients	5709 patients
Cataract patients	1309 patients
Glaucoma patients	17 patients
Refraction services	189 Patients

Sustainability: -

- Nominal contributory from individual/local community for eye care services:- patients are easily agree
- Ensuring quality of services and patients interaction
- Vision centre staffs are available at most of the time
- Patients waiting and setting rooms/space are well established
- Centre environment is suitable, all services are available like toilet, drinking water, hand washing

4. Sustainable Agriculture and Rural Livelihood/Natural Resource Management

GPSVS has been working on Sustainable agriculture and rural livelihood through the promotion of farmers field school, farmers group & clubs, conservation of land, plant and animal genetic resource. Through the support of WN, WHH & MISEREOR, we have introduced organic farming practices and promoting the traditional knowledge to produce farming product. At the present day Farmers are sharing their knowledge and technology to produce agriculture production. Not only that GPSVS has been promoted small scale business like Kirana Soap, producing de-hydrate food and organic pesticides and fertilizers. Community-based natural resource management (CBNRM) is a people-centered approach to the integration of conservation of the natural resource base (water, soil, trees and local biodiversity) and development to overcome poverty, hunger and disease. GPSVS treated the physical environment as part of the community and see the community as part of the landscape. Recognizing the interdependence of community well-being and ecosystem health, GPSVS strengthens the capacity of communities to have a voice in decisions about planning and design of conservation initiatives affecting them. Due to changing climates, environmental damage from the uses of pesticides and many other causes, people who depend on the land for their livelihoods are suffering. Changing climates often make ecosystems less predictable, leaving people that rely on those ecosystems vulnerable. GPSVS recognized this and works to help people adjust to changes.

Major Achievements

- Formed 5 Farmer field School at the community level for the producing small amount organic farming and farmers to farmers share their agriculture knowledge in the field.
- Developed IEC materials for sustainable agriculture and CBNRM
- Produced 786 KG vermin compost through the CDMC, KMM/KMS, WASH committee and other existing groups
- Prepared 316 Ltr organic liquid pesticides through the traditional knowledge
- Developed social and agro forestry for environment protection at the panchayat level.
- Established Master nursery and home herbal garden
- Provided TOT training for develop as a train agriculture resource person at the community level.
- Linked with the multi stakeholders and local government administration

Project Based Activities & Achievement

Trans –boundary Flood Resilience project at the Kamala River Basin (Support – Welthungerhilfe (WHH)

Project Objective: - The Overall objective is to flood affected households of the trans-boundary communities at Kamla River Basin in Nepal & India are less vulnerable and more resilient to monsoonal flooding.

Specific Objectives is to –

- To strengthen community based DRR & Early Warning System of trans – boundary communities of Kamla River Basin.
- To improve the safety net options among flood vulnerable HHs of the community residing trans – boundary kamla River Basin.
- To improve the livelihoods of flood affected trans – boundary communities of Kamla River basin

In this background GPSVS with the support of WHH implemented a project “Trans – boundary Flood Resilient Project at Kamla River Basin” in 10 villages of Jainagar Block, Madhubani district of Bihar with the clear objective of flood affected households of trans boundary communities at kamla River Basin in Nepal & India are less vulnerable and more resilient to monsoonal flooding. This was to enhance their capacity to understand the Disaster Risk Management (DRR) through the involvement of local self-government, panchayat representatives and community resource person and youth in the vulnerable community. Before the project implementation, community people didn’t have the knowledge about the DRR and community managed Early Warning System (EWS). After the TBFR project implemented, community people increased their knowledge and capacity to enroll in safety nets through the training of insurance and linked with the financial institutions. This was the Trans boundary matter for flood preparedness. During the project period, GPSVS formed School Disaster Management committee at the school level. School children have trained on disaster preparedness through the mock drill and rehearsal exercise. School children were prepared School Disaster Risk Reduction action plan with the support of teacher, CDMC and GPSVS and it has submitted to School HOD. Each and every years community people affected by the Kamala River flood and the most is the loss of farming. Before the flood affected community didn’t have the knowledge and idea about climate smart farming technology but after the project implementation in these areas, farmers, SHGs, CDMC, TBCF and other community people have increased the knowledge about the climate change adaptation farming technology through the preparing of vermin compost and use of compost, organic pesticide and use of traditional seeds. Community people have made a different identity not only that flood vulnerable households have enrolled in safety net options through the access of insurance scheme and mechanism at the community level.



Distributed IEC materials for improving knowledge on flood preparedness.



176 Trans-boundary community people have received IEC materials for increasing knowledge and raise public awareness. It educated them - Now they are aware on flood preparedness.

BENEFIT OF FLOOD PREPAREDNESS IEC MATERIALS - GPSVS

has educated communities on disaster risk reduction, increased safety and resilient through campaigning, formal discussion, training, meeting and participatory learning -sharing interface meeting. IEC material distribution main objective is to create awareness on flood preparedness through pumplate and DRR related calendar. In order to disseminate knowledge and information on flood risks in flood-prone areas, IEC materials raised public awareness of flood risks and reduce possible damage to the public. IEC key information of flood risk awareness was modified and formulated through group discussions. IEC (Information, Education, Communication) has been widely used in various fields. When it comes to flood control and mitigation, IEC referred to planned, organized and systematic education activities among trans-boundary communities.

Result: - It has improved/increased knowledge and information to learn the public awareness of and behavioral response to flood risks at different levels.



Impact of Flood Safety Week - Public awareness Campaigning

Through this campaigning program, we have categorized some major impact on public-

- Flood Safety Awareness Week, June 1-7, is an excellent opportunity for trans-boundary communities to become more educated about the dangers that flooding can cause and what steps to take to be prepared for the risk of flooding.
 - This flood safety week Improved flood risk awareness, public engagement on risk management, and efforts to minimize flood damage and mitigate health risks. Community people have learned how to prepare for hazards both at home and at a community level.
 - Through the demonstration of IEC materials, life saving kits and mock drill exercise - community people improved their knowledge and it has impacted on their socio-economic and health.
 - Directly 322 & indirectly approx. 1200 community people have benefited through this flood safety campaigning program.
 - Trans-boundary community people have established good relationship with local stakeholders (Mukhiya, Sarpanch, ASHA, AWW, CO, BDO, BSDMA, NDRF, BSDRF) & kamala river irrigation department.
 - Identified the direct and indirect social consequences of risks through this campaigning.
 - developed appropriate and effective mitigation mechanisms to hazards which community people recognized reactions to events.
1. **Social Impact** - Flood early warning systems play a major role in the disaster risk reduction paradigm as cost effective methods to mitigate flood disaster damage. It was help to guide decision-making in the community level of flood early warning systems.
 2. **Socio-economic** - Through this campaigning program, we reached out insurance mechanism. As result community people understood insurance package and risk cover.
 3. **Impact on Health:** - Through this campaigning program, we could able to share the information about how to access safe sanitation and safe drinking - during, after and before flood. Health hazard is the major issue of flood. It helped to reduced the health hazard through flood preparedness.

Exceptional Achievements

Key Elements of the Trans boundary community based early warning as follows:

1- Risk Knowledge on hazards, Risk, Vulnerability 2- Monitoring and Warning services, 3.-Dissemination and Communication, 4-Improvement of the community Response Capacity

Risk Knowledge on Hazards, Risk, Vulnerability: Conducted participatory hazards, Risk, vulnerability and capacity assessment and analysis exercises in the 15 communities of the project operational areas to identify the season wise, region wise and hazards wise risk. Recognized the local actors for drive the disaster risk reduction process, this process includes

- Prioritized local knowledge on disaster risks and adaptation strategies.
- Developed integrated village disaster management plan.
- Formed 15 Community Disaster Management Committee (217 members) and
- Nepal Trans-boundary Citizenship Forum (9 members).

DHM Nepal and local authority have developed Monitoring & warning service: community based system for monitoring and warning the River trend of the Kamla Balan River and Rainfall of the upstream and downstream areas through coordination. It is linked to Kamala River Engineer to get updates on changing water level (Up & Down stream) in Kamla Balan River.

Dissemination and Communication: Developed the Trans boundary communication channel for information collection and dissemination from upstream to downstream community through proper linkages of community to community and citizen forum. Created a what Sapp group of the CDMC and Trans boundary flood citizen forum for sharing cost effective two way information and communication related to river-water trend and rain fall along with others trans boundary issues among community of Nepal and Bihar living in Kamla basin.

- 15 CDMC and 7 SDMC (school Disaster management committee) have been formed and their capacity to make effective response during flood has been strengthened. CDMC and SDMC members have received several raining on how to respond during flood time. CDMC and SDMC members have received live saving kits. They also got training on how to use these materials during the flood times. It has helped these communities to build their capacities to mitigate the impacts of flood and enable them to achieve and maintain their development process. The communities are getting aware about their risks. Communities are getting aware on the importance of early warning system and its importance in flood resilience.
- The TBFR project also provided agricultural training in flood resistant crops, diversification to help farmers ensure multiple sources of income and food, improved WASH practices and home based nutrition activities.
- Trans- Boundary Flood Early Warning System guideline has been prepared by the Trans –boundary Citizen Forum Members & collaboration with GPSVS and Aasman Nepal.
- Developed 10 VDMPs
- 7 School DRR mock drill and exercise program conducted by the SDCM and GPSVS. 532 school children were participated in this training program.
- Established 10 grain bank in 10 communities/villages
- 10 communities formed Task force group such as First aid, search and rescue, water and sanitation, relief and rehabilitation
- Formed 5 Farmer Field School with 67 members
- 15 Community Disaster Management Committees with 217 members
- Community people are aware on government entitlements and insurance schemes. 35% HHs have been linked with insurance schemes after end of the project.
- Through the CDMC and local communities efforts 2 villages flood resistant road has been constructed
- At the HHs level nutrition and income has increased through the promotion of kitchen garden (approx 173 HHs made their own kitchen garden
- Formed India – Nepal Trans- boundary Citizenship Forum (TCF) with 9 members for informal communication
- CDMC organized health camp at the community level. During the monsoon season they provided free of cost medicine with the linkage of Jainagar health center/hospital
- 4 village Cattle vaccination camp organized through CDMC at the community level cattle diseases have reduced.

- 156 women including SHGs, CDMC and other small farmers have received certified seeds for promotion of health and nutrition garden.
- Constructed 5 Vermin Compost bed with the support of TBFR-GPSVS and
- 11 new model vermin compost bed constructed by the linkage with Agriculture Department (BAO).
- 648 Women (SHGs) got training on household economic security and SHGs financial management.
- TBCF have played an effective role for flood early warning services in Pre, post and during the flood time. It has established a relationship with Nepal Hydrology and Metrology Department.

Technical Assistance to district administration in the implementation of the Resilient Village Program (RVP) and Chief Minister School Safety Program (MSSP) in Supaul district.

Supported by- UNICEF

- The district risk profile has been developed and identified climate induced disasters with various risks on human lives and their livelihood.
- The district level departments have developed Risk informing departmental plan on various sectors such as WASH, Health, Food Security and Nutrition, education, child protection and shelter in keeping mind of climate induced disasters.
- 2047 Gram Panchayats and Block level service providers and officers trained and improved their knowledge on flood preparedness, response and recovery planning.
- 48 vulnerable HSCs and 1 PHC identified and alternative high and safe places were identified for the services
- 196 vulnerable AWCs identified and alternative safe place were identified for shifting.
- 8 BDOs, 7 COs, 8 BEOs 24 BRPs trained and improved flood preparedness and response plan.
- 2 CDPOs, 33 LSs and 1843 AWW taken training and improved their flood preparedness and response plans.
- 122 ANMs have been trained and improved flood preparedness plans.
- Total 252 participants actively participated like block agriculture coordinators, Kisan Salahkar, ANMs, ASHAs workers, block veterinary officer, review workers, Vikash Mitra, Tolasevak, Tolasevaks, AWWs, supervisors, AWWs and PRI representatives and other officials.
- PRIs and DRR catalyst have taken lead in this flood preparedness campaign in the facilitation of BDOs.
- The required resources identified by participatory process such as Boat required- 532, available- 183, survival kit- 33561 animal fodder- 44337, need HPs- 1613, available-793
- The 26 wall writings related to prevention from different kinds of disasters and risk mitigation relates have done in district on different community places, villages and urban areas.
- We have established partnership with Bhrukwa FM 98.2 for disseminating mass level fire safety messages in local language in 8 times a day. Our team members, DRR catalyst, PRI members, maulavee, priests, TalmiMarkaj, Fire man and front line service providers are directly promoting their working areas under this campaign. We have aware approx. 27000 peoples directly in our direct project intervention areas. It was a big achievement of comprehensive campaign that no one fire incident happened in our project areas.



Figure 1 Mock drill at School

Climate Change Proofing Traditional health Cultures in Bihar State.

Supported by - MISEREOR

Goal: The goal of this project is to strengthen the health and food culture of people in India's state of Bihar so that the livelihoods of large marginalized population groups are substantially increased the areas of "health", "food" and "income".

Objective No. 1: Community access to sustained herbal medicines and health services is improved, not least in the face of climate change effects

- Through the creation of awareness on health and nutrition, 3010 Nutritional and Herbal Garden has been developed by Vaidyas THPs, AYUSH doctors and Young THPs.
- 40 THP/YTHPs have trained on preparation of Karah, Sitoplaiza Churn, Mica powder etc. They are well educated on the herbal plant qualitative and quantitative part so easily they can share with other people
- 49378 people got health services, preventive advices by the experienced AYUSH doctor, Vaidyas. These services have been given in remedial camps, herbal dispensaries and field level services by THPs/Vaidyas.
- 49378 people are directly benefited through traditional health practices. Through the Health-Nutrition garden a large number of communities habituated of traditional treatment, which directly or indirectly reduced the probability of side effects from Allopath. On the other hand, community felt the importance of essential nutrition in their day-to-day life. Now easily they get vegetables in their won gardens, which are totally chemical fertilizer free and economy-friendly.

Objective No.2: Quality standards have been set in the project area for processing native herbs as medicines

- Specific Trainings (Seasonal diseases and its prevention, awareness and treatment, quality preparation of herbal medicines, importance of medicinal plants in common diseases of the local contexts) have been organized for AYUSH doctor, Vaidyas and THPs on Climate Change impacts on life, health and livelihood especially poor and marginalized communities of Bihar. The Vaidyas are motivated to perform quality outputs on reviving of traditional health cultures, propagating the local herbs and its uses among women members, adolescents, youths and other citizen for promotion of THP. 20 Young THP (only female) trained on THC. Young female viadyas were trained to identify the local herbs and know their usefulness for the treatment of specific diseases. They were trained for the treatment of Leukemia, Anemia and improvement in nutrition by home-based measures. Old viadyas got training on Ras- Rasyan , a kind of extract from different kinds of herbs and metals.
- GPSVS trained Vaidyas prepared various medicine like - Gas Harbati , Methadi Churn, Sitopladi Churn, Uday Vaskar Churn ,Laban Vaskar Churn , Chatpata Pachak , Trifala , Chawanprash , Chandra Prbha Bati , Misri Cough nasak , Sfatith Vasmoo , Yog- Raj Gu-gul

Objective No.3: Evidence –based advocacy on integration of traditional medicine into the health care system for certain indications has increased social and political acceptance level in the state of Bihar.

- Community level advocacy programmes have raised a kind of awareness and realization among the community-people to make changes in the lifestyle to improve their health as well as the environment. They have strong realization that the environment of their villages is on degradation as reflected in the contamination of soil, water and air. After the advocacy and awareness programme they saw the solution of these problems in their hand to some extent.
- Regional level workshop on traditional knowledge and climate change has successfully sensitized the different stakeholders from PRI representatives to government officials for the promotion of traditional knowledge based practices to mitigate the impact of climate change was highly appreciated. The resolution was taken to spread the work of GPSVS supported by MESERIOR as model in entire block of Phulparas with the support of panchayats. Areas for major interventions were selected. Traditional seeds conservation, promotion of indigenous plants, promotion of traditional water management and above all more and more adoption of traditional health culture (ayurveda /yoga/naturopathy/plantation of herbs and others.) suggestion comes to spread this work in other panchayats of district.
- PRIs like: Mukhiya, Sarpanch, Ward Members, block pramukh, Panchayat Samiti members of local self-governance unit (PRI representatives) agreed to do awareness programme on the effect of climate change on local life. They also agreed to provide the support for plantation of indigenous trees from prevailing government schemes under forestry and MGNREGA. It was decided for 40% medical plantation of total forestry. Advocacy activities have been started with core department like Bihar AYUSH Mission, Horticulture, ICAR (Indian council of agriculture research, PRI department and BSDMA (Bihar state Disaster Management Authority. Bihar AYUSH Mission has taken the work of GPSVS on very positive note and assured support in its work once AYUSH Mission is fully established. Official- Deputy Director Horticulture Mission Bihar appreciated the concept of plantation of Panchbatti – five kinds of plants like

Banyan (Pipal), Bargad, Pakar, Neem and Bel, which have significant environmental importance and in the core of heart of people in India. Advocacy is being made with concerned forest department to save and promote other indigenous plants having environmental.

Objective No.4: Herbal and nutrition cultivation, processing an appropriate storage has been made climate-proof in the light of strong local climate change

- 1867 Health and Nutrition Garden (HNG) successfully formed in target villages, which have been promoted by women leaders, THPs, Young THPS, AYUSH Doctors/Vaidyas.
- Training and exposures to women members organized to learn on health and nutrition garden, kitchen garden, home herbal garden through participatory learning exercises.
- 1011 School Children have participated in awareness campaigning program on traditional health culture and climate change adaptation.
- At Ghuskipatti our women led farmer field school actively running. In this semester 41 female members of the farmer school have produced traditional paddy like Chanan Chur, Katarni, and followed the way of mix cropping according to seasonal pattern. As a promotion of Climate Smart Agriculture seed distribution programme were held at Noniatol, Hassanpur and Ghuskipatti. This time we distributed certified seed of varieties vegetables and crops (Matar, Dhaniya, Muli, tharia sak, Gheera, vindi etc.)
- FFS members have well educated on the producing of “Jhol – Mal & Pancho Gab” for organic farming

Coordination with actors

- GPSVS collaborate with all actors linked with the project consistently. The actors are representatives of Panchayat Raj institutions (PRI), Bihar District and State Health Society, ENVIS, BSAPCC, ATMA, District Agriculture Department, DDMA (District Disaster Management Authority) Professor and lecturer of Ayurvedic and Unani medical college, AYUSH doctor etc.
- AYUSH doctor: they are closely work with us and in the part of advocacy with state health society, they play important role.
- Bihar District and State Health Society- Provide the resource material and technical support in the development of Ayurvedic first aid kit for water borne disease
- Director-Bihar State Pollution Control Board, Patna has been supporting regarding policy level mentoring to our team on Climate Change Adaptation and Mitigation
- ENVIS, Bihar State Resource Group on Climate Change Adaption
- KVK/DAO/BAO: Krishi Vigyan Kendra/District-Block Agriculture Officer: They are actively cooperating for the promotion of organic farming, climate proofing agriculture practices in Madhubani district, Bihar.
- Network Partner NGOs/CBOs: Regular meeting and planning for future actions
- PRI- In the plantation of medicinal plants under MANREGA scheme.
- Professor and lecturer of Ayurvedic and Unani medical college: Technical guideline and product modification.

Reproductive & Child Health Including HIV/AIDS

Program: Support – World Neighbors

Current situation, women in India faces multitude health problems, which ultimately affect the aggregate economic output. India is suffering maternal health problem particularly in rural areas therefore women ability to participate in the economic activities are decreasing. According to the National Family Health Survey, In Bihar, 71 percent of illiterate women did not receive any antenatal check-ups for their births.

Reproductive Health Problems: - Absence of reproductive tract infections (RTIs) is essential for the reproductive health of both

women and men and is also critical for their ability to meet their reproductive goals. There are three different types of



reproductive tract infections for women: endogenous infections that are caused by the multiplying of organisms normally present in the vagina; iatrogenic infections caused by the introduction of bacteria or other infection-causing micro-organisms through medical procedures such as an IUD insertion; and sexually transmitted infections (STIs).

In this background GPSVS with the support of Kym Williams and World Neighbors implemented “Reproductive health programme” in Madhubani district of Bihar. During this one year, lots of activities conducted by the GPSVS – RH programme with the goals of improving reproductive health status among the marginalized community. During this period we could able to build a strong Seheli network team. At presently 50 members have involved in this network (In the month of June 2017, there was 10 members and Feb 2018, 40 members came forward to involve for membership of seheli network). Area Representative and Mobile Health providers were applied their role and responsibility outside the clinic. GPSVS – Clinic seheli network has been committed to provide family planning methods and counseling. Both AR and MHP were encouraged to the community people for long term, short term and permanent family planning services methods and provided information about the suitable services to them.

1 Year Objectives

- To establish RH clinic with registration through the government norms and policy.
- To provide reproductive health care facility and reduce the MMR & IMR at the community level.
- To increase the health & nutrition status among the rural women including pregnant and lactating mother & new borne child.

Training/Orientation on Reproductive Health Service including Referral System and Social Mobilization for Area Representative (Saheli Network):

During this period, GPSVS-RH programme could able to organised two time seheli network ‘Training/Orientation on Reproductive Health Service including Family Planning Counseling and Social Mobilization’ that aimed at enhancing the capacity of Seheli Network team members including Area Representatives & Mobile health providers form different communities in conducting/serving in their respective community. Major topics during the training included: Introduction of Reproductive Health Services, Family Planning, Counseling, Social Mobilization, Roles and Responsibilities of Area Representative, and Field Reporting to serve better service in the marginalized community.

Objective of the Training

The general objective of the training/orientation was to capacitate and increase knowledge and skills of area representative on reproductive health service to serve communities people for quality and door to service for healthy living.

Specific Objectives:

The specific objectives of the training were

1. To increase the knowledge of area representatives on reproductive health service components
2. To ensure the understanding of the important of reproductive health services among area representatives
3. To capacitate area representatives in counseling on reproductive health services, including family planning, in their respective working areas.
4. To make area representatives understand their roles and responsibilities

Summary of the Workshop

The session of the training/orientation was opened with a lighting of the candle and welcome remark from the Mr. Sailendra Kumar Sharma, RH Coordinator, Sangita Pandit, Regional Program Associate, World Neighbors Kathmandu, and Anil Poudyal, RH Consultant, World Neighbors Kathmandu, Jitendra Kumar Singh and Bashudev Mandal from GPSVS, Jagatpur, Madhubani Bihar. This was followed by sharing of the objective of the training/orientation by Mr. Anil Poudyal, RH Consultant, and WN. After welcome remarks and self-introduction, Mr. Anil Kumar Karna, Trainer from Jhpiego, India, presented his session on introduction of RH services, types/methods of family planning and benefits of these methods, along with its effectiveness and side effects. He highlighted the importance of counseling and rights related to reproductive health, especially family planning. Using ‘GATHER’ technique, he explained the importance and processes of conducting counseling on FP services, which was followed by role plays amongst the participants for better understanding. Ms. Meena Lal Karna form Darvanga led a session on maternal child health with special focus on antenatal and postnatal care and services. Following this, Ms Karna focused on

skills required for counseling and described the referral mechanism as required. Explaining the meaning of 'Saheli' as someone who is closer than the parents and guardians and with whom people of community share private matters related to reproductive health, Ms Karna explained the roles and responsibilities of the participants who work as Saheli in their respective community and provide counseling, care and services to community people seeking reproductive health services. RH Consultant of WN, Mr Anil Poudyal led a session to explain the structure and working modality of Saheli network, along with client record system and reporting.

Special achievement	
Major Achievements (Madhubani)	
Results/output/outcome	Years 2017 - 2018
Clinic Family planning Services (IUCD, 3 month injectable, condom, pills) & Family planning counseling	1520 HHs got counseling services, 107 IUCD (this period was intervention – Static clinic was formed)
General Patients checkup from Clinic	New 340 Patients
Patients Admit in clinic	8
Out Reach Services (IUCD, 3 month injectable, condom, pills) & Family planning counseling)	2136 HHs got counseling services

Advocacy Communication Accountability: Increasing access to and demand for quality family planning services:

Support: Population Foundation of India.

With the financial support of **Population Foundation of India (PFI)** GPSVS implemented CBMS programme in 165 revenue villages of 52 panchayats of Darbhanga district. The purpose of this project is to strengthen the community based Monitoring system for public health programme in the targeted region and thereby to bring the improvement in the availability and use of family planning and reproductive health services. Other objectives of the project is to bring improvement in community health services by ensuring regular meeting of Village Health Sanitation and Nutrition Committee, participation of community, monitoring of the community health services and regular interaction on Interactive Voice Response system(IVRS).



Aims to achieve: -

- Ensure equitable distribution of quality health services particularly of the availability of family planning devices
- To prepare comprehensive action plan to address the identified problems
- To make community front line health workers as advocate of change as well as to improve the capacity of ASHA and Block health catalyst to strengthen the VHSNC.
- To ensure the institutional arrangement of Family planning health services and availability of family planning devices at health sub Center and primary health center
- To encourage the use of IVRAC and share the data with block and district official to solve the problems/issues
- To link PRI representatives to the programme and develop their capacity on health and family planning programmes.

Major Achievement

- In 14 months 631 out of 728 VHSNC meetings were organized in 52 panchayats. It was short of 97 scheduled meetings. The reasons behind this was the inadequate number of ANM ,the frequent transfer of health staffs and lack of special initiatives/drive by Baheri PHC to arrange meetings in these panchayats. ASHA facilitators conducted 297 meetings and ANM conducted 270 meetings.As a result of VHSNC meetings untied fund was released which was used to purchase nine types of equipment in 30 panchayats . With these equipment's all kind of services are now available in 30 out of 52 panchayats. At 124 places services like Iron-folic tablets, weight machine for pregnant women, BP instrument, and tasting kit for hemoglobin test and TT vaccines are available. Total Rs.7, 17,134 Rs released in both blocks under VHSNC. Of this Rs.424900 was used to purchase ANC kit.
- By the use of M_SAKTI technology cluster coordinator identified 4847 new callers in 14 months in Singhwara and Baheri blocks. This technology was used to survey 2278 community members on family planning,1969 on Health sub center, 1676Janani Bal surksha Yojna ,1710 Maternal health,2043 PHC 2043 and 2261 on Aroogya Day. This techonolgy helped in quick and easy survey. (Source- IVRS dash Board).
- For the promotion of IVRC (0926609555) 478 call were made by adolescent girls and 683 calls were made by members of VHSNC. Pamphlets and stickers were distributed on door steps during home visit. Community was made aware that M-Sakti number 0926609555 can be used to get detailed information on the temporary and permanent means of family planning and health related other government services. They can register any complain as well as give feedback on this number.

Capacity Building of Front Line Workers

Month	AWW	ASHA	ANM	Topic of Discussion
October 2018	92	93	49	VHSND STRNGTHENING
November 2018	84	86	37	VHSNC FORMATION AND ON INCREASE OF USE OF CONTRACEPTIVES
December 2018	95	89	47	VHSNC FORMATION AND ON INCREASE OF USE OF CONTRACEPTIVES.

