VIII

South Chhotanagpur Development Cluster (SCDC)



Chhotanagpur Plateau is one of the oldest landforms (Archean Period) in the world and also the oldest living human habitat. It is inhabited by several Adivasi groups like Munda, Oraon, Khariya, Chik Baraik, Lohra, and Mahli and PVTGs like Asur, Birhor, Kharwa and Birjia. The area comprises of Gumla, Khunti, Lohardaga, Ranchi and Simdega districts. Of the total land available, 17 percent is demarcated as forest area. The major sources of livelihood are farming, livestock, and forest based products. Seasonal distress migration is common in this region. The area is mineral rich but this has not translated into much job generation for the marginalized population here.

OVERVIEW OF PRADAN'S OPERATIONS IN SCDC

Particulars	DC Total	PRADAN Outreach
Districts	5	5
Population	5.3 million	661,105
Percent of Rural Population	80	100
Percent of ST and SC Population	61	79
Households	801,078	132,221

Particulars	Scale
Number of SHGs	9,904
Number of VOs	699
Households covered under Livelihoods	85,513
PRADAN teams	6

Themes	Community Collectives	
Health and Nutrition	237 SHGs	
Education	104 VOs	
WASH	1,925 Households	
Gender and Governance	4,596 SHGs	

PRADAN is working with communities in the SCDC for close to two decades now. We mobilize women into strong collectives, work with their groups, facilitate their participation in grassroots governance and demonstrate livelihood prototypes.

Our major engagements in the DC is developing the Adivasi women's collectives, planning and executing village level integrated natural resource management, facilitating women to lead various social and economic interventions. We also provide strategic support to different stakeholders. In addition to this, in the last few years, we have also made significant progress in other themes such as gender, health and nutrition, education and WASH.

WASH for a Healthy and Dignified Life

Most rural communities in the central-eastern India lack access to clean water and sanitation, and are therefore more prone to diseases which push them into a perpetual debt trap. PRADAN's water and sanitation program links common health concerns to poor sanitation, and empowers communities to construct, manage and maintain their own sanitation facilities and launch development initiatives that improve community health and quality of life.

In SCDC, WASH program is being implemented in Palkot, Gumla and Ghagara blocks of Gumla district. In technical collaboration with Gram Vikas we are developing comprehensive WASH facilities for each

family in the targeted habitations. Our partnership has restructured toilets. It has introduced the 'two-room' concept - one part is used as the lavatory, the other for bathing. The WASH program is being developed keeping in mind the correlation between hygiene and livelihood, so as to build synergy in interventions for gains in productivity, income, health and nutrition. In this process, we focused on providing water, sanitation and hygiene facilities for rural households, which would be owned and managed by women in the villages. It aims to empower rural women in taking leadership roles in planning, implementation, operations and maintenance of the infrastructure and systems. More than 3,000 toilets have been constructed in this process.



The Swachh Bharat Abhiyan (Clean India Campaign) Warriors

The women only needed a small trigger to change. Unheard of before women from Santoshi SHG began talking about construction of toilets in the village.

In the village of Kurmidih in the Chandwara block of Jharkhand, there were no toilets. Open defecation disproportionately impacted women as it was difficult to get a reclusive spot in broad daylight. The health impact of open defecation was also largely unknown.

We had been working in this village on issues of food security, income enhancement and grassroots governance through SHGs. In one of the group meetings, the issue of poor health in the community came up. In a follow-up meeting, we prompted a discussion on open defecation, linking it to the adverse impact on health. The related everyday challenge and health issues were enough to trigger an intense discussion. Unheard of before women from Santoshi SHG began talking about construction of toilets in the village.

But open defecation is more than just lack of toilets; it is about certain deep-seated community behavior and thus requires conscious and persistent effort to change.

PRADAN professionals engaged in this village on sanitation issues by working on different aspects of behavioural change through training and information dissemination. Training on 'Community Led Total Sanitation' was attended by SHG leaders from several villages. We also organized a series of awareness camps, skits and wall paintings in the entire block.

The Santhosi SHG declared their intent to turn Kurmidih into an Open Defecation Free (ODF) village. Fifteen women started work on soak-pit layout for construction of toilets. Women of Santhosi SHG also engaged with the district administration for toilet construction for other families in the village.





Seventy toilets have been constructed so far. There was a major transformation due to this community-led intervention – 90 percent of toilets are in use after a year of construction, a complete normative behavioural change. Men, in the village, who were indifferent to the effort, have also started using it.

The women are now trying to install a water lifting device along with overhead tank from a well, adjacent to their homes so that running water can be made available in toilets.

Other SHGs, in nearby villages, also took a cue. Similar community-led processes were facilitated and two adjacent villages have toilets in every household now. The block level federation, of which, Santhosi SHG is a part, is now actively pursuing the agenda of sanitation in the entire area.

The women of Santhosi SHG, who ignited this grassroots change, are the true Clean India Warriors!

WASH INTERVENTIONS ACROSS PRADAN LOCATIONS

Over the last four years, we have been engaged in WASH interventions in Mayurbhanj, Keonjhar, Kandhamal, and Rayagada districts in Odisha, apart from Gumla and Ramgarh districts in Jharkhand.

- Thirty-eight villages in Odisha and 17 villages in Jharkhand were declared Open Defectation Free (ODF) by the respective administrations
- Forty more villages are moving steadily towards attaining ODF in Odisha and Jharkhand
- Toilets and bathrooms in about 1,300 households

- in 24 villages of Odisha and Jharkhand are connected with piped water supply
- Second generation sanitation related interventions such as storage and safe handling of drinking water, hand wash and solid-liquid disposal are undertaken in ODF villages
- In total, INR 168 million (US\$ 2.6 million) was mobilized from the community, government sources and private donors to help communities improve their health and sanitation conditions