



ANNUAL REPORT 2021 -22

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CEO'S MESSAGE



Indrajit Chaudhuri

CEO and Country Director

Dear Friends and well-wishers of PCI India,

2021 was a roller-coaster year of sorts. As a result of the unprecedented crisis of COVID-19, there was a need to ramp up immunisation coverage while also addressing the new complexities emerging in livelihoods and hunger. Working with Governments, partners and communities, PCI India supported evidence-based government and humanitarian responses, including initiatives to raise public awareness to foster behaviour change.

At PCI India, it was also a year of reimagining, rebuilding and responsiveness, combined with unparalleled organisational growth while enduring the challenges posed by the global transition, COVID-19, and an evolving development sector landscape. During the year and despite the general adversities, we received incredible support and trust from our Donors and the willingness of Governments to believe in our abilities to partner on flagship development initiatives.

Despite the travel and location limitations during the year, we were able to achieve a significant scalable impact on several programs and domains, considered to be critical developmental vectors in the country's backdrop.

As a progressive development organisation, we have always looked at opportunities to pivot and refresh our operating framework. Considering the fast-changing external dimensions and the internal realisation to drive ourselves into a futuristic organisation, we also initiated a strategic organisational transition and localisation program, paving the way for a revitalised, rejuvenated and reimagined PCI India. With this, we started the journey of, as we named it, Organisational Rebuilding during the year.

This strategic rejigging also enabled us to align with the global transition emerging out of the merger of PCI US with Global Communities. With this, our journey has commenced to reimagine the 'PCI India of tomorrow'; one that is more future-ready, is able to deepen collaboration with governments, private sectors, and development organisations; is more nimble-footed and agile in our way of working. We believe that once completed, the Organisational Rebuilding initiative will allow us a lot of headroom for new thinking and create new capabilities to address emerging social challenge, at scale,

We expanded our Senior Management Team to harness its maximum potential in transforming PCI India into an agile and efficient organisation and constituted the Change Management Team to steer the 'Organisational Rebuilding' process to align its organisational structure, systems, and ethos with the fast-changing future. We have renewed our vision and mission in congruence with our values and set ourselves on the path of making 'PCI India – a solution provider to complex development problems'. We grew multi-fold last year, with around a three-fold increase in our revenue, and a multi-fold increase in our donor and partner portfolio. We have undertaken 32 projects in the domains of health, nutrition, women's economic empowerment, livelihoods, gender, adolescents, and social protection across more than 150 districts in 13 states.

I would like to thank all our partners for their continued faith in PCI India. As we continue to anchor active interventions that will transform the lives of communities at scale, for its quality and delivery. My gratitude extends to all the members of PCI India for their relentless pursuit of excellence and unmatched passion for the communities we serve.

Thank you all for being with us and encouraging us in our mission to solve complex development problems at scale. I hope you will take a moment to read through some of our heart-warming stories in the following pages illustrating the impact that we created during the year.



GENDER
AND
ADOLESCENTS

UMANG



At a glance



Goal

Stop the prevalence of child and early marriages



Intervention Area

Jharkhand



Norm Shifting

Relies on the potential of mother-daughter bond in facilitating a normative shift towards addressing gender norms and child / early marriage



People Impacted

Impacted the lives of more than 36,000 women and 9000 adolescent girls

Designed on the principle of Naila Kabeer's Empowerment Framework, Umang advocates the theory of inter-generational transmission of empowerment from mothers to daughters. Umang project has been working towards improving the lives of adolescent girls in Jharkhand through empowering their mothers.

The project relies on the potential of the mother-daughter bond in facilitating a normative shift towards addressing gender norms and the prevalence of child and early marriages in Jharkhand's Godda and Jamtara districts. The initiative has identified education & career aspirations as the ultimate facilitators for strengthening agency among girls.

PCI India has partnered with the International Centre for Research on Women (ICRW) and the Jharkhand State Livelihood Promotion Society (JSLPS) for capacitating women's collectives (most members happen to be mothers/aunts of adolescent girls) as primary agents for social & behavioural change at household & community levels. For ensuring a systemic scale-up of change from village to block level, Umang is layered upon the existing 3-tier SHG structure comprising Self-Help Groups (SHGs), Village Organisations (Vos) and Cluster Level Federations (CLF).

KEY ACHIEVEMENTS IN FY 21-22

1

Project Scale-up

Scaled up from 2 pilot blocks to 11 new blocks, thus making the reach to a total of 13 blocks in Godda and Jamtara districts.

2

COVID Impact Assessment

Survey conducted to understand economic impact of COVID second wave on rural families and to understand Psycho-Social Impact of the Prolonged COVID-19 Situation on Rural Women & Adolescent Girls at Jamtara & Godda districts.

3

COVID Support

Supported community mobilisation for COVID-19 vaccination through door-to-door visits, community meetings and awareness sessions. Facilitated on-the-spot registration for vaccination.

WOMEN RISE UP AGAINST CHILD MARRIAGE



At a glance



Goal

Stop Child, Early and Forced Marriages (CEFM)



Intervention Area

Jharkhand



Leadership

Builds collaborative leadership among members of Cluster Level federation



Taking Action

Women leaders take action against CEFM and other violations against women and girls in their communities

‘Women Rise-Up against child marriage’ addresses the issue of child, early & forced marriage (CEFM) through building leadership among members of Cluster Level Federations (CLFs) and capacitating them to do advocacy at the system level. This has been implemented at Nala block in Jamtara district, Jharkhand.

‘Women Rise-Up against child marriage’ initiative has nurtured a collaborative style of leadership among women (CLF members) by:

- Enabling their access to resources
- Building agency for them to be able to define their own goals and achieve them.
- Creating awareness & sensitisation on social issues
- Providing access to relevant information as evidence from the community and primary stakeholders
- Exposure to systems and services (police stations, helplines etc.)
- Engagement with duty bearers and skill building (communication, negotiation, evidence building) through experiential learning.

The scaling up of the approach across the remaining five blocks of Jamtara district through the support of the District Child Protection Unit (DCPU) is a testimony of its impact.

KEY ACHIEVEMENTS IN FY 21-22

1

Capacity Building

150 women leaders have been capacitated for acting against child/early marriage in their communities.

2

Demand for Education

Capacities of 15 women leaders (Social Action Committee members of CLFs) have been specifically built for them to engage with Block Level Child Protection Committee (BLCPC) for demanding quality services for adolescent girls to continue their education.

3

Recommendation in BAP

Women leaders have shared recommendations to bring down CEFM, for Block Action Plan (BAP)

GENDER TRANSFORMATIVE MODEL



At a glance



Goal

Create a community-based and scalable Gender Transformative Model



Intervention Area

Odisha



Part of the whole

A model that can be integrated within the structure and framework of the Odisha Livelihood Mission (OLM)



Vulnerability Mapping

Vulnerability mapping done with a specific focus on violence against women

The Gender Transformative Model (GTM) seeks to create a community-based and scalable gender transformative model that can work within the structure and framework of Odisha Livelihoods Mission (OLM) to integrate gender within the rural livelihoods framework of the OLM.

PCI India has been supporting OLM in 61 GPs in 54 blocks of 20 districts in Odisha.

The National Rural Livelihoods Mission (NRLM) – which has created a vast network of women throughout the country – presents a highly promising opportunity for addressing the last mile connectivity challenge, faced by most gender initiatives and provides a potent platform to empower women and shift gender norms.

The project is working with the objective that women enjoy safety and security and are protected from domestic violence. They are aware of their rights and entitlements and can access the necessary services if required.

KEY ACHIEVEMENTS IN FY 21-22

1

Gender Self Learning Program

501 community-level cadre trained on rights and entitlements. The cascade training further reached 48832 SHG members.

2

Gender Facilitation Centers

Gender Facilitation Centres (GFC) operationalised in 61 Gram Panchayats for women in distress to seek support on access to entitlements, schemes, and Gender-Based Violence.

61 Gender CRPs were hired and trained to manage the GFC and 686 women reached out to these GFCs to seek services offered by these centers. Approx. 85% of these cases were related to schemes and entitlements, while approx. 13% of the cases received were related to Gender-Based Violence.

TRANSFORMATIVE ACTION FOR RURAL ADOLESCENTS (TARA)



At a glance



Goal

Promote well-being and self-reliance of adolescent girls in rural Bihar



Intervention Area

Bihar



Approach

Evidence based



Premise

Improved skills and better health not only bring about larger economic and social benefits for adolescents but also enhance the social capital of the nation

The TARA (Transformative Action for Rural Adolescents) pilot, led by PCI, had the goal of empowering older adolescent girls (aged 14-19) and improving their well-being, with a specific focus on future employment. The pilot was implemented in the Rohtas district and received support from GAP Inc., BMGF, and C3.

It involved the participation of 1,205 girls in 110 Adolescent Groups (AGs), which utilised customised PACE thematic modules on empowerment, employability, entitlements, and health and nutrition.

Despite challenges caused by the COVID-19 pandemic, the pilot successfully adapted through a digital strategy and alternative support methods to sustain the programme objectives. Encouraging results from a randomised controlled trial (RCT) demonstrated positive changes in the girls' awareness and reduction of gender stereotyping.

The pilot also underscored the crucial role played by JEEViKA Community-Based Organisations (CBOs) providing mentorship to adolescents. These Village Organisations or VOs, as community institutions, proved to be capable of effectively maintaining the core objective of the TARA initiative.

KEY ACHIEVEMENTS IN FY 21-22

1

Increased Self Efficacy

The self-efficacy of adolescents showed significant improvement after the intervention. In the treatment group, self-efficacy increased from 6.43 at baseline to 7.07 at endline. In the control group, it increased from 6.45 to 6.86 during the same period.

2

Overall Wellbeing Awareness

The qualitative assessment showed that the adolescent girls spoke with increased awareness about their bodies, health, hygiene, and the importance of nutritional intake.

3

Strengthened decision-making beliefs

The program intervention had a positive impact on decision-making related to household purchases and cooking.

SOUTH ASIA SOCIAL NORMS LEARNING COLLABORATIVE (SA-SNLC)



At a glance



Goal

Build a network of researchers, implementers, donors and others interested in working on social norms in South Asia



Intervention Area

South Asia



Type

A consortium that aims to build a network of researchers, implementers, donors and others interested in working on social norms in South Asia



Collaborators

Centre for Social and Behaviour Change (CSBC), Ashoka University and Institute for Reproductive Health, Georgetown University

The South Asia Social Norms Learning Collaborative is a consortium that aims to build a network of researchers, implementers, donors and others interested in working on social norms in South Asia. PCI India and Centre for Social and Behaviour Change (CSBC), Ashoka University jointly host this collaborative in South Asia.

The pioneering collaboration is an initiative of the Institute for Reproductive Health, Georgetown University. The vision of this initiative is to create a Learning Collaborative to advance normative change in South Asia and allow its members and affiliates to strengthen and build the capacity to improve social development programming. The Collaborative has been received well among organisations working in the field, and CSBC and PCI have established a good working relationship. Membership in the collaborative is consistently increasing, given the webinars and capacity building workshops, and other online engagements. Members of the collaborative are showing keen interest in the learnings and workshops the SA-SNLC has to offer.

KEY ACHIEVEMENTS IN FY 21-22

1

Agreement Signed

An agreement was signed between Georgetown University Institute for Reproductive Health (GU/IRH) and Project Concern International for convening the Social Norms Learning Collaborative (SNLC) in South Asia.

2

Launch Event

A Launch event was conducted aiming to provide foundational understanding on 'Why Social Norms matter: A conceptual foundation for norms-shifting interventions.' Panellists included:

1. Poonam Muttreja, Executive Director of the Population Foundation of India
2. Siddharta Swarup leads Social Impact, Health, Education and Communities at Facebook India.
3. Dr Ravi Verma, Regional Director for the International Centre for Research on Women's (ICRW) Asia Regional Office in New Delhi
4. Khairul Islam, leading public health and development professionals of Bangladesh



HEALTH
AND
NUTRITION

JEEVIKA TECHNICAL SUPPORT PROGRAM (JTSP)



At a glance



Goal

Reduction of neonatal, infant, under-five, and maternal mortality rates. Improved nutrition for SHG members and their families



Intervention Area

Bihar



Target Group

Pregnant Women; Lactating mothers of 0-6 months old children; Mothers of 6-23 months old children



Improvement

Significant improvement in the child diet diversity and maternal diet diversity

Launched in 2015, JTSP is a BMGF-backed PCI India-JEEViKA partnership, integrating Health and Nutrition (HN) into JEEViKA's framework. Employing SBC and Convergence, JTSP demonstrates scaled HN behaviour improvement, aiming to model an integrated HN SRLM.

JTSP facilitated JEEViKA's digital leap through 'Chatkarey Zindagi Ke,' a Learning Management System for staff, and Samvaad Kunji, a hybrid tool equipping cadres across the state. JEEViKA led the Family Dietary Diversity Campaign, reaching mothers and children via five touch points. Online communities were formed using the Meta group's Facebook partnership for women and health workers to exchange health and nutrition insights.

PCI and Dr. Rajendra Prasad Central Agriculture University signed an MoU to help set up Nutrition Enterprises under JEEViKA. JTSP aids five SHG-run Didi ki Rasoi towards ISO 22000 certification, enhancing standardisation, productivity, and competitiveness.

Furthermore, JTSP secured an MoU between the Department of Health and JEEViKA, advancing Family Planning via the SHG platform with Ministry of Health and Family Welfare (MoHFW) funding.

KEY ACHIEVEMENTS IN FY 21–22

1

Improvement in Diet Diversity

A higher proportion of pregnant women from SHG households (51%) consumed the Minimum Dietary Diversity (MDD) compared to non-SHG households (38%).

Similarly, a higher proportion of lactating women from SHG households (53%) consumed MDD compared to non-SHG households (36%).

Among children aged 6–23 months, the consumption of MDD increased from 23% to 53% in SHG households, while non-SHG households saw an increase from 20% to 40%.

2

Convergence

CLF leaders started establishing convergence with the health department and advocated for conducting Health Check-Up Camps for CLF members. Camps were organized at 3 Model CLFs

3

Scaling up

The successful implementation of Family Planning and Gamification opened up avenues for scaling up in 38 districts.

PRERNA TECHNICAL SUPPORT PROGRAM (PTSP)



At a glance



Goal

Improved health and nutrition outcomes;
Strengthened community institutions;
Strengthened internal systems



Intervention Area

Uttar Pradesh



Convergence

ICDS and Department of Health



Partner

Transforming Rural India Foundation

PCI India, entered into the third year of implementation of the Prerna Technical Support Program (PTSP) with the objective of strengthening systems and processes of Uttar Pradesh State Rural Livelihoods Mission (UPSRLM).

As the state of Uttar Pradesh rebounded from the second wave of COVID-19, PTSP supported accelerating the roll-out of Health and Nutrition (HN) interventions through community institutions.

As part of systems strengthening and capacity building of PTSP, supported in the revision of UPSRLM's Human Resource Manual and induction of 3300 staff members on community institutions strengthening process.

All five sessions on HN were rolled-out in 70% of the SHGs. Further, village-level convergence among Front Line Workers of Health and ICDS, and the community cadre of UPSRLM was reflected in the participation of ASHAs and AWWs in 53% of Village Organisations' monthly meetings.

The external evaluation of PTSP has shown that Internal Professional Resource Persons (IPRPs), a community cadre for community institutions' strengthening process have become a fulcrum for Cluster Level Federations' performance in terms of governance and financial inclusion. The evaluation also showed that the role of ICRPs has been complementary to Front Line Health Workers (FLWs) in mobilising women to access benefits during Village Health and Nutrition Day, home visits for counselling, organising health camps to access services and more.

In addition, the project also supported UPSRLM in initiating decentralised Take Home Ration (THR) initiative in partnership with ICDS.

KEY ACHIEVEMENTS IN FY 21-22

1

Strengthened HR Processes

Revised Human Resource manual of UPSRLM approved by the government.

2

Health and Nutrition agenda in VOs

70% of SHGs exposed to key Health and Nutrition messages.

3

Better Community Mobilisation

ICRP complemented FLWs in mobilising community members for VHND, health camps and counselling.

4

Take Home Ration

PTSP Supported in the Take Home Ration initiative, thereby going beyond the project mandate.

TECHNICAL ASSISTANCE TO TRIPURA RURAL LIVELIHOOD MISSION



At a glance



Goal

To strengthen Cluster Level Federations (CLFs) of Tripura Rural Livelihood Mission (TRLM)



Intervention Area

Tripura



FNHW Strategy

Develop SBCC strategy, capacity building of staff and cadre and convergence with line departments



Resource Material

Modules of importance of first 1000 days developed

PCI India worked with Tripura Rural Livelihood Mission (TRLM) to capacitate and strengthen CLFs of the mission with regard to FNHW-related interventions. The support comprised mechanisms development to drive FNHW strategy through its member community institutions, designing interventions in consultation with the TRLM state team and CLFs to influence the normative changes at the community level.

PCI India supported the TRLM in designing and implementing the three-day training for 'Swasthya Sakhis' on the first 1000 days. The Technical Assistance (TA) team facilitated four batches of Training of Trainers (ToT) in the project areas organised by TRLM for Swasthya Sakhis (SS) on their role in the project and module one. Total 63 SS participated in the training who cover 1092 SHGs of Killa, Dumburnager, and Matabari blocks. To cover all 69 Village Organisations (VOs) in the project area, few SS were assigned additional VOs by the BMMU teams. Post-training, team supported SS in developing the module rollout plans for their areas in the prescribed format, under the guidance of the concerned Cluster Coordinator and VO.

Trained SS have started module roll-out in all 69 VOs. The TA team designed a deliverables-based monthly payment sheet, monthly reporting format for SS in consultation with the State Mission Management Unit team and submitted for approval and implementation.

KEY ACHIEVEMENTS IN FY 21-22

1

Swasthya Sakhi Trainings

63 Swasthya Sakhis trained on the first 1000 days to cover 1092 SHGs

2

Material Designed

PCI India supported in designing the facilitator's guide and key messages on first 1000 days

3

SHGs Reached

1092 SHGs of Killa, Dumburnager, and Matabari blocks covered for the importance of first 1000 days trainings

TECHNICAL ASSISTANCE TO DAY-NRLM FOR INTEGRATING HEALTH & NUTRITION



At a glance



Goal

Improved status of health and nutrition in households of women members of self-help groups



Intervention Area

National level with demonstration sites at Jharkhand, Madhya Pradesh and Chattisgarh



Strategy

Strengthen systems & capacities of national & state Rural Livelihood Missions to effectively implement interventions aimed at improving food security, nutrition, health and WASH in households of women of self-help groups and their community



Resource Material

A set of flipbooks and counselling cards created with the objective to effect a positive change in behaviours and practices around FNHW; Standard operating procedures developed to guide managers through the processes

This project provides technical assistance to Deendayal Antodaya Yojana – National Rural Livelihoods Mission (DAY-NRLM) to integrate the agenda of food, nutrition, health and WASH (FNHW) into its core mandate.

The project has been instrumental in consolidating a space for FNHW within the core mandate of the Mission. Early in the year, the project supported the finalization of an FNHW strategy of DAY-NRLM. The strategy defines a multi-pronged approach with four aspects - system strengthening, social behaviour change communication, promotion of FNHW enterprises and convergence. Over the course of the year, the project actualized the approaches of the FNHW strategy.

System strengthening

- Built social capital by defining a training cascade and preparing master trainers
- Developed training materials on 18 FNHW themes
- Trained all data entry operators to build their skills on capturing progress indicators
- Supported the initiation of quarterly reviews by Joint Secretary, MoRD

Social behaviour change communication

- Designed a set of SBCC materials with gender-sensitive messaging on FNHW
- Co-drafted an advisory on a multi-touch point SBCC model
- Directly reached 200,000 SHG women through SBCC interventions in three focus states – Madhya Pradesh, Jharkhand and Chhatisgarh

Convergence

- With Farm Livelihoods vertical of DAY-NRLM to co-develop a comprehensive SOP on nutrition gardens and livestock
- with Non-Farm Livelihoods vertical of DAY-NRLM to co-develop an SOP on enterprises

KEY ACHIEVEMENTS IN FY 21-22

1

FNHW National and State Strategies

The project supported in developing a national level strategy for DAY - NRLM on integrating Food, Nutrition, Health and WASH (FNHW) .

2

Indicator inclusion in NFHS-6

Consistent efforts resulted in the inclusion of key questions on SHGs in the NFHS-6 questionnaire that will help in the segregation of SHG vs non-SHG households when data is collected and analysed.

3

FNHW Resource Materials Package

A standardised gender intentional package of SBCC materials and Standard Operating Procedures has been developed and designed in English and Hindi and disseminated to all SRLMs for building capacities and enabling smooth implementation and roll out of activities.

ENGAGING MEN FOR BETTER HEALTH & NUTRITION OUTCOMES



At a glance



Goal

Devise and test several innovative solutions that focus on engaging men as a channel for promoting more equitable gender relations, joint household decision-making practices, and improved family planning and nutrition behaviours



Intervention Area

Bihar



Approach

Interdisciplinary, anchored on Human-Centred Design (HCD) research and behavioural science



Output

Two concepts co-developed and tested successfully to increase male participation in decisions related to family planning and contraceptive use, and nutrition of children under two years of age

The main objective of project was to devise and test several innovative solutions that focus on engaging men as a channel for promoting more equitable gender relations, joint household decision-making practices, and improved family planning and nutrition behaviours. The project was implemented in Sarairanjan and Khanpur of Samastipur district in Bihar.

Two concepts were devised under 'Engagemen':

1. **Dekh-Rekh:** Community facilitators provided families with tools to visualise their nutrition habits and relate them to their aspirations, encouraging couples to have more conversations on food choices and make more informed and collaborative decisions on what they purchase, prepare and feed their children. The facilitators gathered weekly data from each household and provided them feedback on the adequacy of the minimum diversity in their child's diet, and its effect on the child's growth and development.
2. **Hamari Shaadi, Hamare Sapne:** Community facilitators enrolled newlywed couples in a financial education course that helped them better understand how they can achieve their life goals and aspirations. This served as a platform to incorporate conversations on family planning, delaying, and spacing as a way to reach their financial goals. The financial education course also had a few modules related to the child's nutrition needs and the link between undernutrition and increased expenses on child health.

KEY ACHIEVEMENTS IN FY 21-22

1

Increased Spousal Communication

Spousal communication on child nutrition went up by almost 19% points. Spousal communication on family planning needs went up by 14% points.

2

Better Food Choices

Couples in the intervention villages started substituting packaged foods (biscuits, chips) being given to young children with home-cooked nutritious foods.

3

Healthier Children

Parents reported increased activity and visible growth signs and reduced episodes of sickness among children.

4

Contraceptive Usage

Couples enrolled for the family planning intervention reported the adoption of modern contraceptive methods and discussion with the village health worker to learn more about spacing and delaying methods

NEGLECTED TROPICAL DISEASES



At a glance



Goal

Elimination of Lymphatic Filariasis (LF) and Visceral Leishmaniasis (VL)



Intervention Area

Bihar, Chhattisgarh, Jharkhand, Karnataka, Telangana, Uttar Pradesh, Madhya Pradesh, Maharashtra, Odisha, and West Bengal.



Social Mobilisation

PCI India facilitated social mobilisation



Sensitisation

PCI supported NITI Aayog, to sensitise the district leadership— District Magistrates and the Zila Parishad president— on NTDs with focus on LF, VL and Leprosy.

PCI India supported in social mobilisation interventions under the LF Elimination Program in 19 MDA rounds across ten states (Bihar, Chhattisgarh, Jharkhand, Karnataka, Telangana, Uttar Pradesh, Madhya Pradesh, Maharashtra, Odisha, and West Bengal).

A major achievement of the VL elimination program is the launch of the VL mobilisation toolkit. The toolkit was launched by NVBDCP in the presence of leads of the State VBDC Program and is being used widely across VL endemic states. The toolkit consists of a poster, a sticker, a game for school children, one animated video and audio content for announcements via the public address system at the community level. PCI assisted the districts and blocks with social mobilisation activities for two rounds of IRS. After the completion of the first round of IRS in April 2021, PCI undertook a household-based cross-sectional survey in July 2021 to understand the factors which led a household to be completely sprayed versus falling into partially sprayed or refused households.

PCI India also supported NITI Aayog, to sensitise the district leadership— District Magistrates and the Zila Parishad president— on NTDs with a focus on LF, VL and Leprosy. Under the aegis of the Ministry of Health and Family Welfare and NVBDCP, the program was conducted under the chairmanship of member NITI Aayog, Dr VK Paul.

NTD team continued its collaboration with GSK to provide Technical Support for the Elimination of LF in two districts of Uttar Pradesh (Sitapur and Unnao) where, apart from MDA, the Morbidity Management and Disability Prevention (MMDP) by trained ASHAs is also an integral component of LF elimination efforts.

KEY ACHIEVEMENTS IN FY 21-22

1

Social Mobilisation

PCI India's support to social mobilisation interventions under the LF Elimination Program in 19 MDA rounds across ten states, contributed to reaching approximately 79% of the population with LF drugs during the MDA rounds in the project districts.

2

VL Mobilisation Toolkit

The VL elimination program successfully launched the VL mobilisation toolkit, which includes various educational materials such as posters, stickers, games for school children, animated videos, and audio content. The toolkit is being widely used across VL endemic states to raise awareness and mobilize communities.

3

Technical Support for LF Elimination

The NTD team continued its collaboration with GSK, to provide technical support for the elimination of LF in two districts of Uttar Pradesh.



WOMEN ECONOMIC EMPOWERMENT AND LIVELIHOODS

SKILLS ADVANCEMENT FOR ABLE LEADERSHIP (SAFAL)



At a glance



Goal

Build the capacities of women leaders of rural Bihar to improve their knowledge, and leadership abilities and promote collective action to address local issues.



Intervention Area

Bihar



Premise

Women leaders are key agents for transformational change in the economic and social elevation of Bihar.



Training Tool

Personality Advancement and Career Enhancement (PACE) life skill modules of GAP used as training tool

PCI India aspired to build the capacities of women leaders of rural Bihar to improve their knowledge, and leadership abilities and promote collective action to address local issues. To amplify the power of women collectives & their leaders in Bihar, with a focused approach & critical thinking, PCI proposed to utilise the chain of social capital created by JEEViKA in the form of 10.32 lakh SHGs across Bihar.

PCI envisaged women leaders as key agents for transformational change in the economic and social elevation of Bihar. The project execution began with identification of Community Resource Person (CRPs) for which PCI planned to leverage upon the existing CRP policy of JEEViKA, with a vision of smooth transitioning and adoption of the project in the existing SRLM system. With this approach, the BPMs were asked to encourage interested community members to come forward and get themselves registered for the CRP selection process.

Upon having the list of prospective CRPs, the team from PCI moved to the blocks to interact with the interested women and understand their calibre and skills for being the forerunners of the project. Two-day selection process was carried out for all the women across the 3 blocks and each of them underwent a module briefing followed by written test and oral examination. The objective of this process was to identify and select the best of the women for being the Master trainers for roll out of the PACE curriculum. The selection of the CRPs was done keeping in mind the block geography and therefore, 2 CRPs per CLF were selected.

KEY ACHIEVEMENTS IN FY 21-22

1

Training Sessions

Training sessions organised for 300 women leaders.

2

Modules Contextualised

Contextualisation and abridging of PACE modules into 17 sessions (dealing with communication, problem-solving and decision making, time and stress management)

TECHNICAL SUPPORT TO MGNREGS IN UTTAR PRADESH



At a glance



Goal

Mainstreaming women workforce and supporting them in financial empowerment



Intervention Area

Uttar Pradesh



Migrants Database

Successful tracking of returning migrants



Employment

100 days of employment to 20 lakh households during the year

PCI India established a Migrant Support Cell in the Department of Rural Development (DoRD), Government of Uttar Pradesh (GoUP) to support returning migrants due to COVID-19, to access various government entitlements and mitigate the adverse financial implications.

Overtime, the cell has successfully supported DoRD-GoUP in providing employment opportunities to returning migrants and other vulnerable households through Gareeb Kalyan Rojgar Abhiyan (GKRA) & Atmanirbhar Uttar Pradesh Rojgar Abhiyan (AUPRA) where more than nine lakhs returned migrants have benefitted so far. The cell has also successfully shaped the narrative for increasing women's participation in Mahatma Gandhi National Rural Employment Guarantee Act (MGNREGA) in convergence with Uttar Pradesh State Rural Livelihood Mission (UPSRLM). The DoRD has undertaken various significant initiatives such as Mahila Mate, and Vishwas MGNREGA to increase women's participation and has issued Government Orders to ensure the effective implementation of these schemes.

The success of this intervention has been massive. The migrant support cell has successfully tracked and validated the database of returnee migrants which has further supported decision-making levels. The cell has also been successful in implementing and monitoring the central and state-level social protection schemes. The cell has brought women's participation to the forefront. Through MGNREGA, they have accelerated women's participation in the scheme and provided complete 100 days of employment to 20 lakh households in the state.

KEY ACHIEVEMENTS IN FY 21-22

1

GKRA and AUPRA

More than 900000 returning migrants benefited under various social entitlements schemes

2

Policy Push for Women's Participation

Mahila Mate policy was formulated to boost women's participation in MGNREGA

TECHNICAL ASSISTANCE TO THE DEPARTMENT OF RURAL DEVELOPMENT, BIHAR



At a glance



Goal

Advance women's economic empowerment by fostering social and economic convergence



Intervention Area

Bihar



Premise

Improving women's access to entitlements and safe and dignified employment by increasing their participation in government programs, increasing their agency and power to make and act on decisions and control resources



SDG Contribution

The project contributes to five SDGs: SDG 1- No Poverty; SDG 5 - Gender Equality; SDG 8 - Decent Work and Economic Growth; SDG 9 - Industry, Innovation and Infrastructure; and SDG 10 - Reduced Inequality

The Technical Assistance to Rural Development Department (TA RDD) project has been initiated in September 2021. The three-year project aims to advance women's economic empowerment in Bihar by catalysing an enabling environment for their access to entitlements and collective action. TA RDD seeks to amplify the impacts of MGNREGA for sustainable economic gains for poor households, especially women, from these households.

The project approach is centred around strengthening the livelihoods of women by facilitating capacitated women collectives for accessing social entitlements and schemes of the government including MGNREGS; and enhancing access to Income-generation opportunities for women as wage earners, as owners of individual or community assets, also as worksite supervisors.

Under the TA RDD, PCI has embedded professionals at the state level in the Rural Development Department (RD), as well as in two learning and immersion districts and blocks under the same. TA RDD is facilitating MGNREGS and SRLM convergence by facilitating strengthening of implementation at system, community and individual level; undertaking field studies and research; advising on policies and their implementation; learning from best practices and suggesting innovative and high-quality solutions.

KEY ACHIEVEMENTS IN FY 21-22

1

Village Poverty Reduction Plan

Implementation of the Village Poverty Reduction Plan (VPRP) was ensured across the state which was highest among all states for FY 21-22, exceeding 9 lakhs.

2

Real Time Data Management

Community-led real-time data management through Data Community Resource Person (Data-CRP) was implemented. This increased the accountability of community institution leaders and helped them in making informed decisions.

3

Data Analysis

Data has been analysed for elevating MGNREGS Impact, by means of two studies conducted:

1. Emerging Trends of MGNREGS Implementation in Bihar: Challenges & Opportunities
2. Documentation of work done by Cluster Facilitation Team blocks in JEEViKA



EMERGENCY RESPONSE COVID -19

ACCELERATING PROGRAM FOR COVID-19 CARE & ECONOMIC SUPPORT & SERVICES (PROJECT ACCESS)



At a glance



Goal

Migrants and other marginalised rural households get access to economic support and services



Intervention Area

Bihar



Aanganwadi Centres

The project covered 334 Aanganwadi Centres.



Reach

3,000,000 people

The ACCESS project, implemented by PCI India in rural Bihar from October 2021 to February 2022, aimed to support vulnerable and migrant households during the COVID-19 pandemic. It covered 334 Aanganwadi areas in four blocks, facilitating access to economic support and services.

The project focused on awareness generation, linking eligible households to schemes, and promoting COVID-19-appropriate behaviour, vaccination, and psycho-social support through community engagement. Over the project duration, 45,000 households were visited, 87,000 people were contacted for online registration, and 3,000,000 individuals were reached through community campaigns and e-rickshaw rallies.

KEY ACHIEVEMENTS IN FY 21-22

1

Reached the Vulnerable

The project achieved significant outreach by visiting 45,000 households and contacting around 87,000 people for online registration, while a community campaign and e-rickshaw rally successfully reached an estimated 300,000 individuals, generating awareness and fostering participation in various initiatives.

2

Mapping Women's Vulnerability

A qualitative research was done in East Champaran, Bihar (source area) and Delhi (destination area) that aimed to understand the risks and vulnerabilities of every-married women in 18-49 years group from migrant households and their access to formal and non-formal social protection.

RAPIDLY ENHANCING COVID-19 VACCINATION THROUGH EFFICIENT SUPPLY-DEMAND RESPONSE (RECOVER) BIHAR



At a glance



Goal

COVID-19 vaccine coverage at hard-to-reach, marginalised and hesitant populations



Intervention Area

Bihar



Total Vaccinated

249002



District Level Training

All ASHA and Anganwadi workers were trained on tools and the project model

RECOVER, an acronym for ‘Rapidly Enhancing COVID-19 Vaccination through Efficient Supply-Demand Response’. The project was operational in Rural Bihar. It covered 602 lowest coverage villages across 50 low coverage blocks of 10 lowest coverage districts (for all doses of COVID-19 vaccines and across all cohorts) and was initiated in October 2021.

PCI India supported the Government of Bihar in COVID-19 vaccination through supply-side as well as demand-side solutions.

The project worked towards breaking refusal among the vulnerable and marginalised, increasing vaccine accessibility in hard-to-reach areas, promoting a positive vaccination experience and boosting vaccine uptake by addressing multifaceted barriers.

KEY ACHIEVEMENTS IN FY 21-22

1

Phenomenal Coverage in Percentage

The project reported 95 % achievement of dose-1 of Covid-19 vaccination (from approx. 53 % pre-intervention) and 83 % achievement of dose-2 (from 18 % pre-intervention) within the selected intervention areas of 15 years+ cohort (i.e. 605 of most socially challenging, border areas and access-compromised villages of Bihar).

2

High Absolute Coverage

Administered doses were approx. 250,000, out of which 3443 were given to pregnant women, 7336 to lactating mothers, 20404 to senior citizens, 2213 to chronically ill patients, 697 to persons with disabilities, 9843 were refusals who were converted, and 6892 were migrants.

3

Support from Grocers

The local retailer matched the coupon code and provided groceries worth Rs.200 to beneficiaries.

JEEVIKA MOBILE VAANI



At a glance



Goal

“Community/SHG engagement through Voice-Media” by setting up an interactive voice response (IVR)- based communication platform



Intervention Area

Bihar



Approach

Strengthen integration, coordination, and content planning with JEEViKA to effectively deliver health and nutrition messages through the Jeevika Mobile Vaani platform, ensuring scalability and sustainability



Output

successfully utilised JEEViKA Mobile Vaani to enhance health and nutrition awareness, resulting in increased community engagement and information retention, particularly during the COVID-19 pandemic

The project, JEEViKA Mobile Vaani (JMV), implemented through the collaboration of Gram Vaani, PCI India, and JEEViKA, aimed to leverage an IVR-based communication platform to enhance health and nutrition awareness among rural communities in Bihar.

Through the project, key messages on COVID-19, health behaviours, and government schemes were disseminated, fostering community engagement and knowledge retention. The project prioritised partnership formalisation, content planning, and system integration, resulting in improved coordination, increased user engagement, and enhanced capacity of JEEViKA team to independently manage and scale the intervention.

Despite the challenges posed by the pandemic, the project successfully utilised technology to bridge literacy and connectivity gaps, empowering community members to access vital health and nutrition information.

KEY ACHIEVEMENTS IN FY 21-22

1

Increased Awareness

The IVR platform used to disseminate information led to increased awareness on COVID appropriate behaviour

2

Empowered Communities

The project facilitated the communities to independently manage and scale the intervention

3

Efficient Dissemination

The usage of IVRS ensured that the message could be disseminated to a large number of households multiple times, thereby making the process efficient and faster

NORM_VAX



At a glance



Goal

To promote COVID-appropriate behaviour and vaccination



Intervention Area

Bihar



Reach

8,18,182 SHG members



COVID Protection

Mask availability increased to 90%; 13.2 percentage points increase in vaccinations

Amidst the COVID-19 pandemic, JEEViKA's Community Based Organisations (CBOs) took the lead in producing face masks on a mass scale. One significant aspect was the incorporation of the innovative 'Duraprot' technology developed by the Indian Institute of Technology Bombay (IITB).

These Duraprot-coated masks, manufactured and commercialised with support from Shilpgram, offered enhanced protection against the virus. Through a non-exclusive license agreement, Shilpgram obtained the rights to use the patented technology. This collaboration ensured the widespread adoption of Duraprot-coated masks, contributing to the prevention of community transmission and providing a sustainable means of income for rural households. The project contextualised and tested the SBCC materials (such as videos, audios, flashcards, posters, handouts etc.) developed by Ashoka University's CSBC team for the campaign. The PCI team supported rolling out this intervention.

The SBCC materials were field tested before use through the JEEViKA cadres to ensure contextual suitability, acceptability, and comprehensibility of critical messages and to understand the effectiveness of driving norm change towards covid appropriate behaviour and uptake of the vaccine. It was field tested in one block per district.

KEY ACHIEVEMENTS IN FY 21-22

1	<h3>Effective Awareness Generation</h3> <p>The project effectively generated awareness in the community through JEEViKA women's platform on the COVID pandemic, its vaccination and emphasised on mask-wearing</p>
2	<h3>Financial Opportunities</h3> <p>The mask production intervention created an opportunity for rural women during times of adversities</p>
3	<h3>High Mask Availability</h3> <p>10,30,000 chemical-coated masks were provided to the targeted population</p>
4	<h3>Vaccinated Population</h3> <p>More than 70% of the people vaccinated due community mobilisation activities</p>

POST COVID CARE & SUPPORT FOR EMOTIONAL & SOCIAL WELL BEING



At a glance



Goal

Provide psycho-social first aid to the affected families



Intervention Area

Bihar



Reach

3811



Mental and Social Aid

The intervention induced self-confidence in the people and helped them get through the difficult time by providing them with mental and social aid

The project was a joint initiative of CARE and PCI to alleviate or minimise the effect of mental health burden due to the second wave of COVID. It aimed at providing psycho-social first aid to the affected families by identifying affected individual(s) from the family through tele-counsellors.

It also provided other services including the generation of awareness about post-COVID symptoms and telephonic medical consultation through qualified doctors in case of specific complications. After the signing of the MoU with Care India, 30 Tele Counsellors and 9 Coordinators were placed in collaboration with Care India. Sarv.com was hired for smooth outbound calls with proper call recording and a detailed dashboard. Further orientation by mental health experts, Karuna Fellows, and Gandhi Fellows was held. Two days of technical training on Psychosocial first Aid by NIMHANS, Bangalore was hosted.

The tools used for this project were Diagnosis call, first call, second follow-up call, Emphatic enquiry and ODK-based checklist for reporting.

Most of the queries were about financial assistance, support for death certificates and information about vaccination; inputs were provided to the tele-counselling team on vaccination and COVID related social protection schemes.

KEY ACHIEVEMENTS IN FY 21-22

1

Restored Self Confidence

Tele-counselling provided emotional support to people which resulted in a positive behaviour change. The intervention was successful in restoring self-confidence.

2

Escalated Support

44% of the total psychosocial support-seeking patients/family members were escalated to the mentors.

3

Counselling Completion

Of the cases that escalated to the Psychosocial mentors, 58% of patients or family members completed counselling after two sessions, only 5% of patients required four and above sessions.

REACH



At a glance



Goal

100% vaccination of 18+ target group for both doses of COVID



Intervention Area

Bihar



Reach

95,338



Outcome

Administration of both doses in intervention areas

In December 2021, five lowest performing blocks were selected after the review of the current COVID Vaccination coverage in close coordination with the State and District health officials.

This project was commenced to ensure the COVID- 19 Vaccination of the eligible population in the selected pockets. The aim was to provide technical support to the district and block health officials to increase the COVID-19 vaccination coverage in all 15 villages of the five blocks identified as low-coverage blocks of Muzaffarpur.

The REACH Bihar project aimed to mobilise the target group of the 18+ population to ensure their 100% COVID Vaccination of both the recommended doses. The 18+ population was categorised into six special groups to address the special needs and concerns of the unvaccinated people. The selected groups were - Pregnant Women, Lactating Mothers, Elderly People (60+ age group), People with Critical Diseases, Differently Abled, Mahadalit and Minority (Refusals) and General People (Total population excluding Special categories).

KEY ACHIEVEMENTS IN FY 21-22

1

Addressed Vaccine Hesitancy

With the help of home visits and proper counselling, the community was encouraged to take both the doses of COVID-19 vaccine.

2

Digital Assistance and Support

People with special needs were supported in digital registration.

3

Mobilisation for 100% Vaccination

The on-ground team ensured social mobilisation and worked towards 100% vaccinations.



SOCIAL PROTECTION

THE VULNERABLE CHILDREN AND YOUTH (VCY) PROGRAM (SHELTER HOME)



At a glance



Goal

To provide boys in hazardous situations access to shelter, nutrition, clothing, health care, psychological support, and formal and non-formal education



Intervention Area

Haryana



Capacity

40 boys between the ages of 6 and 18 years



COVID-19 Protection

Sessions on COVID appropriate behaviours

The Vulnerable Children and Youth (VCY) Program aims to address the needs of marginalised and disadvantaged children and youth. The program provides an enabling environment that can help everyone survive and thrive.

The Shelter Home is registered under section 34 (3) of the Juvenile Justice (Care and Protection of Children) Act 2000 by Govt. of Haryana. Many of the children at home have no parents, some have run away from home because of abuse, and some have been lured away from home at the promise of jobs.

KEY ACHIEVEMENTS IN FY 21-22

1

Coming of Age and Future Ready

Boys who turned 18 decided on their future path and left Shelter Home. One of the residents, Shiva, got admission to ITI Escort where as part of his apprenticeship he started to earn a monthly stipend. Mustakeem on the other hand wanted to go back to stay with his mother after finishing class XII and was able to do that.

2

Proactive Approach to Wellness

To promote environmental consciousness, a tree planting drive was organised, and every child was given the responsibility of one tree. To ensure good physical health, the children were given yoga lessons.

3

Exceptional Performance at WCD Event

Ministry of Women and Child Development, Haryana organised an online competition - Sunshine -A Ray of Hope 2021, for Children residing in childcare institutions on COVID-19. In the District level competition, the children won awards in painting, waste management, slogan writing, and singing.

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