

DECENTRALISING BENEFITS

 Editors

Dr. Syed S. Kazi and Osama Manzar

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Editors: Dr. Syed S. Kazi and Osama Manzar

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Contributors:

This publication has been produced based on ground work and experiences of 14 national level Civil Society Organisations (CSOs) in India in the domain of improving last mile access to public schemes information, entitlements and benefits in India during 2014-2018.

The introduction Chapter one on *'Poverty, Backwardness, and Improving Access to Information of Public Schemes, Entitlements & Benefits'*, has been contributed by Digital Empowerment Foundation (DEF), authored by Dr Syed S. Kazi and Mandira Narain. DEF is a pan India ICT for Development Agency, working since 2002. [<http://defindia.org/>]

Chapter Two on *'Promoting Access to Entitlements by Strengthening People's Capacities: A Case Study of Action Aid's Strategizing People's Capacities in the Backward Districts of India,'* has been contributed by Action Aid India. ActionAid Association is an organisation working for social and ecological justice with the most marginalised communities in India since 1972. [<https://www.actionaidindia.org/>]

Chapter Three on *'Enabling Public Programme Delivery Reaching at the Last Mile: Strengthening Inclusive Civic Leadership for Social Accountability and Effective Delivery of Public Programme initiative of UNNATI in Gujarat and Rajasthan,'* has been contributed by UNNATI. UNNATI - Organisation for Development Education is a voluntary non-profit organization working across India and registered under the Societies Registration Act (1860) in 1990. [<https://www.unnati.org/>]

Chapter Four on *'Community mobilization and People's Participation in the Governance Process: An Initiative by Welthungerhilfe in Jharkhand,'* has been contributed by Welthungerhilfe. Welthungerhilfe is one of the largest private aid organisations in Germany. Since its establishment in 1962, more than 9,830 overseas projects in 70 countries including India have been supported with 3.95 billion euros. [<https://www.welthungerhilfe.org/>]

Chapter Five on *'Promoting Access to Entitlements by Strengthening People's Capacities: ACTED's Strategizing People's Capacities in Backward Districts of North East India,'* has been contributed by ACTED. ACTED, is a not-for-profit, endeavors to respond to humanitarian crises and build resilience. [<https://www.acted.org/en/>]

Chapter Six on *'Strengthening Community Access to Entitlements with the Assistance of Technology: The 'Soochna Seva' Initiative of Digital Empowerment Foundation in Five Backward Districts in India,'* has been contributed by Dr Syed S. Kazi and Mandira Narain from Digital Empowerment Foundation (DEF). [<http://defindia.org/>]

Chapter Seven on *'Enhancing Access to Public Services: The Interweaving Civic Engagement and Responsive Local Governance Initiative of PRADAN in the States of Madhya Pradesh and Jharkhand,'* has been contributed by PRADAN. PRADAN (Professional Assistance for Development Action) was created in 1983 with the mission to end poverty through economic and livelihood strengthening. [<https://www.pradan.net/>]

Chapter Eight on *'Svavritti: SAATHII's Building Spaces Initiative for Mainstreaming Service Delivery Reach for AIDS-affected families, Female sex workers, Sexual/Gender Minorities, and Injecting Drug users,'* has been contributed by SAATHII. Founded in 2000, SAATHII works for universal access to rights, health, legal and social services for communities marginalised on account of HIV status, gender and/or sexuality. [<http://www.saathii.org/>]

Chapter Nine on *'Strengthening participation in local governance to enhance access to entitlements and basic services by marginalised tribal communities: The Aga Khan Rural Support Programme (India) Initiative in Gujarat and Madhya Pradesh,'* has been contributed by the Aga Khan Rural Support Programme (India) - AKRSP (I). The AKRSP(I) was formed in 1983 to uplift the quality of lives of the most marginalised communities in remote rural locations of the country. [http://www.akrspindia.org.in/home_homepage]

Chapter Ten on *'Strengthening Maternal Health Care through Swasthya Slate: An initiative by NJKF in Bihar,'* has been contributed by the

Nand and Jeet Khemka Foundation (NJKF). The NJKF is an Indian public charitable trust established in 2005 with the mission to build innovative cross-sectoral collaborations and development infrastructure. [<http://khemkafoundation.net/>]

Chapter Eleven on *‘Empowering people to access the public schemes: The CESVI Initiative in Five Backward Districts of Karnataka,’* is contributed by CESVI. Cesvi (Italian, “cooperazione e sviluppo”, cooperation and development) - one of the biggest humanitarian organizations in Italy, founded in 1985 and has about 30 offices all over the world including in India. [<https://www.cesvi.eu/>]

Chapter Twelve on *‘Addressing Nutritional and Income Insecurity of Underprivileged Communities by Improving Access to Relevant Government Schemes: The Agramee Initiative in Odisha,’* has been contributed by AGRAGAMEE. AGRAGAMEE is a non-profit organisation working with the poorest communities in Odisha, in India since 1981, and is committed to their development and well being. [<https://agramee.org/>]

Chapter Thirteen on *‘Fighting Poverty and Social Exclusion by Improving Access and Governance of Public Schemes and Services: The Dan Church Aid’s Initiative in Backward Districts of Odisha,’* has been contributed by Dan Church Aid. DanChurchAid assists the world’s poorest to lead a life in dignity and based in Denmark and a member of the ACT Alliance together with 110 other organisations. [<https://www.danchurchaid.org/>]

Chapter Fourteen on *‘Empowering Tribal Communities to Address their Poverty through Improved Access to Public Services: The ‘Johar’ Project Initiative of ‘Find Your Feet’ in Jharkhand and Chhattisgarh,’* has been contributed by Find Your Feet (FYF). FYF works to end poverty and hunger in India and Africa. [<https://find-your-feet.org/>]

Chapter Fifteen on *‘Project ‘Sammalit Vikas Jankari’: Improving Access by People Living With Disability to Information on Public Schemes in Backward Districts in India, Initiative by German Leprosy and TB Relief Association (GLRA) in Five Backward Districts in India,’* has been

contributed by GLRA. Started in the year 1966, GLRA-India has been serving the cause of leprosy for more than 50 years. [<https://www.glraindia.org/>]

Chapter Sixteen on *‘Is the Optic of E-Governance Enough? Case Studies from e-District Implementation in Rural Jharkhand,’* has been contributed by Srividya Balasubramanian, Department of Anthropology, University of Leipzig, Germany

Chapter Seventeen on *‘Transcending Digital Exclusion: An Evaluation of Institutional Deliverance through the Study of Rajasthan Sampark Online Grievance Redress Mechanism in Rajasthan,’* has been contributed by Mandira Narain, Shishir Purohit and Dr Syed S. Kazi, Digital Empowerment Foundation. [<http://defindia.org/>]

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Abbreviations

| | |
|-------|--------------------------------------------------------|
| AA | ActionAid |
| ACP | Analyst-cum-programmer |
| ACTED | Agency for Technical Cooperation and Development |
| AJWS | American Jewish World Service |
| ART | Anti-retroviral therapy |
| ASHA | Accredited Social Health Activist |
| AWs | Anganwadi Centres |
| BRGF | Backward Region Grant Fund |
| CBO | Community Based Organisation |
| CBOs | Community Based Organizations |
| CHCs | Community Health Centres |
| CIRC | Community Information Resource Centre |
| CLEP | Civic Literacy and Engagement Program |
| CMP | Common Minimum Package |
| CRC | Citizen Report Card |
| CRCs | Citizens Report Card |
| CSC | Community Score Card |
| CSO | Civil Society Organisation |
| CSS | Centrally Sponsored Schemes |
| DAP | District Action Plan |
| DAPCU | District AIDS Prevention and Control Unit |
| DEF | Digital Empowerment Foundation |
| DGM | Demand Generation Meetings |
| ELBAG | Economic Literacy Budget Accountability for Governance |
| FGD | Focus Group Discussions |
| FPS | Fair Price Shop |
| FSW | Female sex workers |

| | |
|---------|---------------------------------------------------------------------------------|
| GDP | Gross Domestic Product |
| GPDP | Gram Panchayat Development Plan |
| GPEC | Gram Panchayat Executive Committee |
| GPOD | Gram Panchayat Organisational Development |
| HH | Households |
| IAY | Indira Awaas Yojana |
| ICDS | Integrated Child Development Services |
| ICs | Information and service Centre |
| ICT | Information and Communication Technologies |
| ICTC | Integrated Counselling and testing Centres |
| IEC | Information, Education and Communication |
| IMR | Infant Mortality Ratio |
| JSSK | Janani Shishu Suraksha Karyakram |
| JSY | Janani Suraksha Yojana |
| KNP+ | Kalinga Network of People Living |
| LGBTIQ | Lesbian, gay, bisexual, transgender/transsexual, intersex and queer/questioning |
| MARPs | Most-at-risk populations |
| MDM | Mid-Day Meal |
| MGNREGA | Mahatma Gandhi National Rural Employment Guarantee Act, 2005 |
| MGNREGS | Mahatma Gandhi National Rural Employment Guarantee Scheme |
| MIS | Management Information System |
| MMR | Maternal Mortality Rate |
| MNP+ | Manipur Network of Positive People |
| MSM | Men who have Sex with Men |
| NACP | National AIDS Control Programme |
| NALSA | National Legal Services Authority |
| NBA | Nirmal Bharat Abhiyan |
| NEICORD | North East India Committee on Relief and Development |
| NFHS | National Family Health Survey |
| NFS | National Food Security |
| NFSA | National Food Security Act |
| NGO | Non-Governmental Organization |

| | |
|---------|----------------------------------------------------------|
| NRHM | National Rural Health Mission |
| NSAP | National Social Assistance Programme |
| NVA | Net Value Added |
| OSACS | Odisha State Aids Control Society |
| PAC | Public Affairs Centre |
| PDS | Public Distribution System |
| PHC | Primary Health Care |
| PHCs | Primary Health Centres |
| PLA | Participatory Learning and Action |
| PLHIV | People living with HIV |
| PMAY | Pradhan Mantri Awas Yojana |
| PPTCT | Prevention of Parent to Child Transmission |
| PRADAN | Professional Assistance for Development Action |
| PVTG | Particularly vulnerable tribal group |
| PWD Act | The Rights of Persons with Disabilities Act, 2016 |
| PWID | People Who Inject Drugs |
| RCDSSS | Roman Catholic Diocesan Social Service Society |
| RGGVY | Rajiv Gandhi Grameen Vidyutikaran Yojana |
| RGSK | Rajiv Gandhi Seva Kendras |
| RKVY | Rashtriya Krishi Vikas Yojana |
| RSBY | Rashtriya Swasthya Bima Yojana |
| RTE | Right to Education |
| RTH | Right to Hearing |
| RTI | Right to Information |
| SAATHII | Solidarity and Action against the HIV Infection in India |
| SBM | Swachh Bharat Mission |
| SECC | Socio-Economic Caste Census |
| SMCs | School Management Committees |
| SSA | Sarva Shiksha Abhiyan |
| SSV | Strengthening Support Visits |
| TPDS | Targeted Public Distribution System |
| TSC | Total Sanitation Campaign |
| TSP | Tribal Sub plan |
| U5MR | Under Five Mortality Rate |
| UNNATI | |

| | |
|---------|-----------------------------------|
| UNW-FGE | UN Women Fund for Gender Equality |
| VDP | Village Development Programme |
| VDPs | Village Development Plans |
| VHND | Village health nutrition day |
| WHH | Welthungerhilfe |

Poverty, Backwardness, and Improving Access to Information of Public Schemes, Entitlements & Benefits

The notion of 'empowerment' has been understood in varied forms and more often than not contextually evaluated. Understanding within its wider connotation, policy analysts and scholarly debates compounded the idea of empowerment as an expansion of civil, social, political and a robust citizenship. Consequentially, the processes' underpinning the guarantee of an empowered citizenry is vested within the Constitutional frameworks of rights and responsibilities. Taking cognizance of the society's weaker sections, many countries worldwide have embarked upon sanctioning special responsibility towards the deprived, in order to ensure a level playing field, often backed by strong laws. Structurally, such provisions become the basis on which State, governance and welfare provisions are evaluated to be in consonance with the principles enshrined in the Constitution. In the Indian context, the welfare rights are envisioned within the ambit of the Directive Principle of State policy (DPSP), which reflect upon the promise of 'empowering' the weaker and the marginalized.

Theoretically, the State apparatus has had a role of ensuring Distributive Justice¹, first, by ensuring just distribution of goods and services and second, by improving this equitable distribution of goods and services through grievance redressal mechanisms. The role of the State in alleviating poverty and backwardness along with coalescing it with the function of the State apparatus, reverberates with Rawl's theory of distributive justice. However, theoretically and

1. John Rawls, A Theory of Justice (University Press 1978)

in practice, the idea of distributive justice falls insufficient, if due and considerable attention has not been given to the incapability of the citizens to access entitlements. Therefore, setting policies in place and delegating duties to operational levels within the State apparatus is just an onset, not a magic bullet to the problem. Amartya Sen, the pioneer of the capability approach to justice² gleans into the lacunae present in the conception around distributional justice, asserting that it is not access to these primary goods which suffices, rather it's the extent to which each individual has a capability to pursue these goods to her fulfillment. Therefore, converting these "primary goods and services into life" requires an enhancement of capabilities. This approach creates the need to understand local realities and advocate for a participatory approach by empowering individual capabilities of the people. Further, such an impetus supports in carving out a new discursive space for other frontline agencies and people's initiatives, which evaluates, assists, and effectually reshapes the policy imagination of the State.

Analyzing under the fulcrum of institutional role and State's responsibility, poverty and backwardness are not only taken to be semantically synonymous but have also been attributed to the same umbrella of causes stemming from poor governance. For a long time, there have been groups, communities, social classes, and geographical areas that have traditionally experienced disproportionate and uneven levels of poverty, social and economic exclusion, inequity, and denial. Due to the country's complex social structure and classifications, even individuals within families, especially women and lower castes and classes, or families within clusters and communities have continued to face increased risk of poverty and exclusion. The result of these discriminatory intersections such as caste, tribe, ability/disability, religion, gender, age, marital status, cultural and ethnic background, and others further contribute to regional developmental imbalances. Irrespective of the overall country's rising growth story numbered in higher Gross Domestic Product (GDP) and other indicators implying impressive economic

2. Amartya Sen, *Commodities, and Capabilities* (1985)

growth in recent years, poverty and backwardness still continues to hold back the inclusive growth with equity in real terms, particularly in most backward regions. The poverty analysis has further revealed the widening gaps in the context of urban and modernizing growth activities in cities whereas the majority of country's landscape still reels under absence of basic amenities and facilities. It is undeniably a circumstance of how there are two parallel versions of India existing in two brinks – developing India and an underdeveloped 'Bharat', to represent these two landscapes. Substantiated by the difference in the Net Value Added (NVA) estimates between the urban and rural per capita income of Urban areas at Rs 1,01,313 followed by the per capita of rural areas as Rs 40,772 has often invoked a debate in policy discussions.³

The fundamental absence of strong and sound social, economic capital, and resources, therefore, seeks regular and continuous social welfare policies, programmes and schemes aimed at the poor and vulnerable groups and communities, whose capacities to rise and be part of the mainstream be enhanced to match the national and urban pathways. Relatedly, the 'We and Us' approach has and will have to take precedent over the 'me versus the other' in order to uplift the 'living at the edge' majority towards developing a sound social and economic capital to propel the growth story. Alternatively, the pyramidal force majority will continue to exert pressure on the national efforts to accelerate the growth and development processes in addition to reiterating inclusive growth agenda. Hence, the desirable stage of development can then be defined, when basic needs and entitlements of the majority are met with quality social investment. Moreover, this in turn prepares the human capital to contribute in economic and development sectors along the vast rural

3. The Central Statistics office(CSO) has been compiling the estimates of Rural and Urban Income of the Indian economy in terms of the Net Value Added(NVA). The per capita NVA for rural and urban divide last recorded in 1970-71, 1981-81, 1993-94, 1999-2000, 2004-05 and 2011-12. The Lok Sabha discussion with the Ministry of Planning (Unstarred question no. 2426 addressed to the Minister of Planning in session- answered on 11 March 2016) reiterated that the burgeoning gap has been stalled to an extent by several Centrally Sponsored Schemes and State specific schemes which are being implemented to improve the per capita income levels in different states.

economic horizon through establishing effective urban linkages and demand-supply chains. Therefore, converting this enormous human resource into a vital economic force must be the ultimate push for the government of the day through adopting large scale social welfare service delivery practice and mechanisms.

Reiterating the mandate set since independence, the Government of India and its constituent State units have been pressured to commit to reduce socio-economic poverty and has been encouraged to promote inclusive growth”, “balanced development”, “growth with equity”, and “good governance” through the recent Eleventh Five Year Plan (2007-2012). The planning process illustrated in the Eleventh Five Year Plan, emphasized on the need for significant improvement in the quality of governance to achieve inclusive growth, reduce poverty, and bridge the many divides that fragment Indian society. The plan also gleaned into the partnership of the civil society organizations with the Panchayati Raj Institutions by trying new experiments and gaining strength together in trying to reach the unreached citizens. Subsequently, the Twelfth Five Year Plan (2013-2017)⁴ acknowledged the “greater desire [among citizens] to access information about the rights and entitlements made available by law and policy, besides the eagerness to demand accountability from the public delivery systems augurs well for the future”⁵. Further it also revealed a concern building regarding the backwardness of specific districts [within] economically-weaker states struggling to catch up with the growth rate. The Twelfth Five Year plan garnered greater attention to improve accountability and better implementation of programs aiming for a model of governance in establishing deeper partnerships with civil society organizations, along with the community by encompassing the aspiration and need of the people.

Within the framework of the Planning Commission’s Five-Year Plan and now under the NITI Ayog aegis, the Government of India has developed a wide range of Centrally Sponsored Schemes (CSS)

4. Faster Sustainable and more inclusive growth, An approach paper to the Twelfth Five Year Plan. Accessed 27 February, 2019 http://planningcommission.gov.in/plans/planrel/12appdrft/appraoch_12plan.pdf

5. *ibid*

to address poverty reduction and social inclusiveness. The total expenditure on the CSS by the central government in 2011-2012 was Rs 188,573 crore and during the Eleventh Plan period was almost Rs 700.000 crore.

Flagship Development Programmes

| SL. No. | Programme | Ministry/ Department | 2007-08 Actual Expenditure | 2011-12 BE | Total Eleventh Plan |
|---------|------------------------------------------------------------------------------------------------------|-----------------------------|----------------------------|------------|---------------------|
| 1 | MGNREGA | Rural Development | 12.661 | 40.000 | 156,301 |
| 2 | Indira Awas Yojana (IAY) | Rural Development | 3,886 | 10.000 | 41,486 |
| 3 | National Social Assistance Programme (NSAP) | Rural Development | 3.104 | 6.158 | 23,536 |
| 4 | Pradhan Mantri Gram Sadak Yojana (PMGSY) | Rural Development | 6,500 | 20.000 | 65.002 |
| 5 | NRHM | Health & Family Welfare | 10,509 | 18.115 | 69.214 |
| 6 | ICDS | Women & Child Development | 5.193 | 10.000 | 38.980 |
| 7 | Mid Day Meal (MDM) | School Education & Literacy | 5.832 | 10.380 | 38,602 |
| 8 | Sarva Siksha Abhiyan (SSA) | School Education & Literacy | 11.477 | 21,000 | 77.576 |
| 9 | JNNURM | Urban Development | 5.508 | 13.700 | 48.485 |
| 10 | Accelerated Irrigation Benefit Programme (AIBP) and Other water resources programme | Water Resources | 5.446 | 12.650 | 46.622 |
| 11 | Rajiv Gandhi Gramin Viduyati Karan Yojana (RGGVY) | Power | 3.913 | 6,000 | 25.913 |
| 12 | Rajiv Gandhi Drinking Water Mission (Rural Drinking water) NRDWP and Total Sanitation Campaign (TSC) | Drinking Water Supply | 7.320 | 11.000 | 46.722 |
| 13 | Rashtriya Krishi Vikas Yojana | Agriculture & Cooperation | 1.200 | 7.811 | 18.550 |
| | GRAND TOTAL | | 81,217 | 186,539 | 691,976 |

Source: Approach paper to the Twelfth Five Year plan.

Summary of Expenditure

| <i>Ministry/ Department</i> | <i>Actuals 2016-2017</i> | | | <i>Budget Estimates 2017-2018</i> | | |
|-----------------------------------------------------------------------------|--------------------------|----------------|--------------|-----------------------------------|----------------|--------------|
| | <i>Revenue</i> | <i>Capital</i> | <i>Total</i> | <i>Revenue</i> | <i>Capital</i> | <i>Total</i> |
| Central Expenditure (2+3+4) | 1317435.33 | 256262.77 | 1583696.1 | 1434013.59 | 209393.18 | 1723406.77 |
| Establishment | 415653.13 | 5397.49 | 423850.62 | 431233.41 | 6304.19 | 407577.6 |
| Central Sector Schemes | 342744.63 | 246725.98 | 589470.61 | 396114.24 | 267548.78 | 663663.02 |
| Other Central Expenditure | 556237.57 | 14130.30 | 5703701.87 | 606665.94 | 15540.21 | 622206.15 |
| Transfers (6+7-01) | 373148.90 | 18346.71 | 391495.61 | 402920.39 | 20407.62 | 423328.01 |
| Centrally sponsored Scheme | 240775.19 | 520.30 | 241295.55 | 277597.61 | 835.62 | 278433.23 |
| Finance Commission Transfers | 95555.3 | 95550.3 | 103101.38 | | 103101.38 | 101490.18 |
| Other Transfers | 36823.41 | 17826.35 | 54649.76 | 22221.40 | 19572.00 | 41793.4 |
| Total Expenditure through Budget (1+5) | 1690584.23 | 284609.48 | 1975193.71 | 1836933.98 | 309800.80 | 2146734.78 |
| Resources of Public Enterprises | 338096.92 | 338096.92 | | ..385027.37 | 385027.37 | |
| Total Expenditure through Budget and Resources of Public Enterprises (9+10) | 1690584.23 | 622706.40 | 2313290.63 | 1836933.98 | 694828.17 | 2531762.15 |

| <i>Ministry/ Department</i> | <i>Revised Estimates 2017-2018</i> | | | <i>Budget Estimates 2018-2019</i> | | |
|-----------------------------------------------------------------------------|------------------------------------|----------------|--------------|-----------------------------------|----------------|--------------|
| | <i>Revenue</i> | <i>Capital</i> | <i>Total</i> | <i>Revenue</i> | <i>Capital</i> | <i>Total</i> |
| Central Expenditure (2+3+4) | 1474780.90 | 266400.62 | 1741241.52 | 1603405.87 | 291944.15 | 1895350.02 |
| Establishment | 412761.45 | 6152.58 | 488914.03 | 500571.54 | 7828.06 | 508399.6 |
| Central Sector Schemes | 390847.90 | 243470.18 | 634318.08 | 441517.58 | 267416.09 | 708933.67 |
| Other Central Expenditure | 621151.55 | 16857.86 | 638009.41 | 661316.75 | 16700 | 678016.75 |
| Transfers (6+7-01) | 469544.39 | 6964.15 | 476506.54 | 538366.13 | 8497.15 | 546863.28 |
| Centrally sponsored Scheme | 284957 | 624.15 | 285581.44 | 304733.97 | 783.15 | 305517.12 |
| Finance Commission Transfers | | 101490.18 | 109373.5 | ... | 109373.5 | |
| Other Transfers | 83096.92 | 6340.00 | 89435.92 | 124258.66 | 7714 | 131972.66 |
| Total Expenditure through Budget (1+5) | 19440305.29 | 213444.77 | 2217750.06 | 2141772 | 300641.3 | 2442213.3 |
| Resources of Public Enterprises | ..47858.52 | 478858.57 | | 478071.07 | 478271.07 | |
| Total Expenditure through Budget and Resources of Public Enterprises (9+10) | 1944305.29 | 753303.34 | 2694608.63 | 2141772.00 | 778712.37 | 2920484.37 |

The flagship development plans along with the budgetary allocation, have reflected an escalation in the expenditure on the centrally sponsored schemes and the central sector schemes ranging from 2016-2017 to revised estimates of 2017-2018, to now a recent budget estimation of centrally sponsored scheme of Rs 305517.12 as compared to Rs 241295.55 in 2016-2017. These budget allocations and spending are also aided by other initiatives such as the Common Service Centre (CSC), Right to Information Act, 2005 and more with Digital India initiatives within the new era of E-governance.

Key Issues and Findings: A Brief Discussion

Each case study compiled in this publication centers around common themes and areas that witness specific lacunae in governance structures, and effective service delivery mechanisms in the Indian context. As each case study showcase specific discrimination patterns and inefficient service delivery reaching the last mile, few common themes and concern emerge throughout the book which helps to revisit policy formulation and functioning of institutional apparatus. The sixteen case studies measure unequal percolation of government schemes and welfare provisions at many instances and additionally elucidate the need to demand for accountability measures in consonance with principles and provisions enshrined in the Constitution of India. First, the recognition that the government is the biggest public service delivery provider through its varied institutions is the biggest reality. Investigations related to specific case study explicates the role of the government through its different institutional apparatuses. For instance, apart from the decisional autonomy measured in terms of budgetary allocation to CSS and other sector specific schemes, other institutions such as Primary Health Centres (PHCs) and CHCs, Anganwadi centres and panchayats among others constitute the focal points of citizen's utilization of the services. Various case studies emphasized on the need of a deeper engagement of the government and the community participation simultaneously to facilitate the role of these State institutions. The case studies also provide key lessons to extend this network of agencies and institutions to other frontline agencies such as

Civil Society Organizations, and Non -governmental Organizations among others. Therefore, the second recognition comes in the form of a key lesson to adopt a multi-stakeholder approach to capacitate as well as create a niche of a State- citizen interface. The CSOs, NGOs and even private service delivery systems through a cordial networked relationship can strengthen citizen-State interaction and also develop an understanding of these frontline agencies. Apart from creating the synergy of facilitating the interaction between the two stakeholders, it emerges from the case studies that adopting a multi-stakeholder approach has aided in reversing a bottom up approach for optimal realization of efforts, investment and building the vast social and economic capital. Adopting a multi-stakeholder approach, continues to be instrumental even after the recognition of appropriately designing public schemes as urban in design and rural in delivery. Therefor the compilation highlights the work of these frontline agencies crucially contributing to socially mobilizing the poor and marginalized communities, by assimilating them in village, block and district planning apart from expenditure and programme reviews. The third common theme stemming from the case studies lies in the common issue of addressing lack of access to information (demand side) and absence of sound information, dissemination and delivery framework (supply side). It is comprehended that information poverty has widen exclusion by making people live bereft of opportunities in the right time and space. Most of the case studies in the book, direct towards a need for an effective framework at all levels of demand and access for public schemes and entitlement. Even though a dominant reason for lack of effective reaching out to the beneficiaries has been attributed to corruption, red-tapism and money unspent, the resultant ramification commonly compounds to ineffective information management and dissemination system. Cyclically, information illiteracy among the people has contributed to lack of awareness in questioning unaccountable functioning of the government bodies and worse, had also led to an underutilization of the existing transparency laws. A key lesson emerging from this theme lies in the area of strengthening discussions and efforts in the Information Management System (IMS). Resultantly, an

effective information dissemination framework of information decentralization and democracy would also enhance the role of the community to hold the government accountable. Moreover, apart from building a collective consciousness regarding rights and entitlements, 'information empowerment' is central to uplift individual voices and making them heard from the information dark areas. The fourth theme resonates with the theme before and prescribes with instating new feedback mechanisms and strengthening the existing ones. Such an approach has been reflected in designing effective grievance redressal mechanisms and feedback at the state level and the central level in order to develop systems of downward, horizontal, upward and mutual accountability. Even though the redressal mechanisms have proven to ease redressal procedures for the backward and the marginalised, the system is marred with opacity and delays taking away from the very purpose of installing accountability checks. The initiatives undertaken by some organizations elucidated in this book have had to technologically enable people and spread information literacy in order to fully utilize these grievance redressal and feedback mechanisms. Under the paradigm of e-governance and ICT tools, the mere installation of technological channels to access service delivery benefits remains insufficient, until the digital divide addresses access to the benefits of feedback mechanisms. Lastly, the fifth theme emanates from this deduction of a governance paradigm embarking upon principle of justice, equality, morality along with realizing the essence of embedded constitutional principles. Supported by demonstrating the need of increased and improved public service reach making a difference in people's life, a key intervention lies in ensuring social and economic empowerment of the backward and the marginalised. An effective working with the local authorities and service providers at the village/ward level along with data analysis, data use and feedback concerning different stakeholders and audiences contribute towards the required 'professionalism' in delivering services and entitlements. One could glean into the word 'professionalism' which could be inferred to have multiple meanings, however here the use of the word aims to reflect upon following the principles without

any biases, and therefore capturing the essence of these principles to follow. The constitution of India, comprising of these principals in the form of Fundamental Rights, Directive Principles of State policies and even special provisions for the weaker section needs to echo by comprehending the theory of good governance in consonance with the practice of effective governance.

Conclusion

This publication, attempts to redefine opportunities and challenges that persist within the existing legislative formulation and policy implementation by evaluating the access and reach of welfare and entitlement service delivery mechanisms. It is also an attempt to understand the changing architecture of the welfare State with concomitant technological design in the governance architecture envisioning a 'minimum government'. The book can also be seen as a response to this vision, reiterating that minimum government also implies responsive governance, fundamentally characterised by active participation of civil society and citizens besides a responsible government.

This publication, an outcome of 4-5 years of program intervention on ground by 14 major Civil Society Organisations (CSOs) working in India and supported by the EU, has been an example of vivid contextual and situational based information entitlement ecosystems as diverse as the country's social, economic, cultural and institutional landscapes. This publication with sixteen different cases is based on years of community engagement and stakeholders involvement programme with the wider goal and aim of strengthening local information and entitlement ecosystems which is very critical to achieve India's 'Sabka Saath, Sabka Vikas' (With Everyone, Development for Everyone) latest governance and development focus.

Promoting Access to Entitlements by Strengthening People's Capacities

*A Case Study of Action Aid's Strategizing People's
Capacities in the Backward Districts of India*

Abstract

The idea of participatory development is time and again revisited within the present paradigm of governance. The experience of proceeding with a keen consciousness alone to secure rights and entitlements for the marginalised remains feeble without institutional preparedness. The present case study entails a focus on the targeting of inherent social exclusionary identities of Dalit, Tribal, Muslims, women and children. These identities are majorly bereft of easy and better access to rights and entitlements. Advocating for efficient integration of all arms of local, state and central government apparatus, the actions discussed in the case study centrally aimed to empower the marginalised as assimilated citizens in a democratic space. Based on principles of transparency and accountability, the aim was to grasp these principles in standard practices, ensuing impactful and timely services. Action Aid (AA) employed tools of social auditing and Public hearing to discuss subjects such as local budget available at the Panchayat level. Further, an ELBAG (Economic Literacy Budget Accountability for Governance) framework was implemented to mobilise the community. The project aimed at fostering a practice encompassing exercises such as public monitoring of entitlements, followed by partner community-based organisations which aligned the local administration services during the project period. Over thirty sensitisation workshops were conducted for Panchayati Raj Institutions, establishing an interface with public officials and local authorities. The project showcased effective outcomes, through

adopting the approach of designing Village Development Plans (VDPs) among other programmes in all the 96 Panchayats covered under the project. Overall, the project took a rights-based approach, counting on technical and social capacity building, which ensured the sustainability of intervention by instilling confidence through a participatory approach.

Keywords: Action Aid, Capacity building, community advocacy, social audits, community-based organizations, ELBAG

Introduction

Democratisation of society, economy and polity at all levels is one of the core strategic priorities of ActionAid Association (hereafter, AA). To this effect, it supports initiatives that encourage the participation of the excluded in all three tiers of government, especially at the Gram Panchayat level. Thus, it supports the collectivisation of the excluded communities and builds democratic consciousness among youth and women around issues of marginalisation, governance, and democracy and works towards institutionalising a bottom up participatory planning process where the dispossessed communities will play an active part in decision making processes. The objective of the EU funded project as a case study, titled, 'Promoting Access to Entitlements by Strengthening People's Capacities', and the methods and tools employed, were thus in line with AA's overall strategy. Under this project with the support of European Union, ActionAid and its allied organizations – Vikas Sahyog Kendra in Latehar district, Jharkhand; Samajhik Sodh Evam Vikas Kendra in East Champaran district, Bihar; Vasudha Vikas Kendra in Jhabua district, Madhya Pradesh; Samvad Samijik Sansthan in Pratapgarh and Barabanki districts, Uttar Pradesh; and Sankalp in Chamba district, Himachal Pradesh had been able to enhance community access to public schemes and increase their role in local decision making.

The impetus behind the initiative emerged from an evaluation of key legal provisions under the Forest Rights Act¹, Right to

1. The Scheduled Tribes and other Traditional Forest Dwellers (Recognition of Forest Rights) Act, 2006.

Education², MGNREGA³ and National Food Security (NFS) Schemes⁴. The case study envisaged to map the best practices emerged through the interventions at state and local levels as well as to identify the gaps and challenges to achieve the project goal in order to increase community access to information of public schemes in backward districts. The aim was further fostered by an increased mobilisation of communities, which have the capability to negotiate with the authorities by voicing for access to entitlements and demanding more responsive service providers. These service providers have also been hinted at, as the lower level bureaucracy who has little motivation to deliver services to the poor effectively accompanied by challenges such as prominent delays and inefficient last mile service delivery which then leads to a demand of thorough accountability and a result-oriented culture. These benchmarks become pivotal in questioning the weak government functioning and feeble institutional apparatus in the local regions. The aim of this case study is to highlight and share the learning from this project with the civil society organisations, government departments, thematic experts and wider development community. This would help exchange of learning between different stakeholders in India working on issues of democratisation and good governance.

Background and Description

AA and its partners in the action implemented the project, 'Promoting Access to Entitlements by Strengthening People's Capacities', with the aim of "Improving access to information of public schemes in backward districts in India". The initiative was implemented in 234 villages (across 96 Gram Panchayats), in 11 blocks of 6 districts in 5 states of India with an aim to reach at least 30,400 households in the districts of Barabanki and Pratapgarh in Uttar Pradesh; East Champaran in Bihar; Latehar in Jharkhand; Jhabua in Madhya Pradesh, and Chamba in Himachal Pradesh. The project sites were chosen targeting the marginalised in line with the

2. Right of Children to Free and Compulsory Education Act, 2009.

3. Mahatma Gandhi National Rural Employment Guarantee Act, 2005.

4. National Food Security Act, 2013.

overall goal of working in solidarity with the excluded and participate in their struggle for their empowerment. The rationale behind opting for the sites was to target the marginalised within the households, on the basis of ethnicity, caste or religion, as well as gender based marginalisation with women experiencing double discrimination due to their gender difference. In Himachal Pradesh, the project implemented in the district of Chamba⁵ with Dalit population that constituted 29 per cent of the district population and Gujjars who were tribal and constituted 5 per cent of the district population. In Barabanki, Uttar Pradesh, the project team had worked with Dalit and Muslims who formed 26 per cent and 24 per cent respectively of the total population of the district, and in Pratapgarh where 14 per cent of the district population was Muslim, and 16 per cent of the district population was Dalit. Further, in Latehar, Jharkhand, 40 percent of the district population was Tribal and more than 66 percent were from the Tribal and Dalit communities combined. In East Champaran, similarly, 25 per cent of the district populations were Dalit.⁶ The project was guided by praxis of social transformation, by endorsing participatory processes with the marginalised communities to address issues of their social and economic exclusion. The initiative undertaken aimed at fostering procedures and systems on access to information, through trainings on inclusive growth, community monitoring systems like social audits, public hearings, and, strengthening village level committees.

The set action, aimed at enabling targeted groups to know their entitlements over a complete range of government schemes available; participate in planning of village development needs and engage in monitoring the Panchayat delivery of public schemes. This would increase transparency and speed up the response of local government to overall community needs. On the delivery side, the action sought to enhance the responsiveness of Panchayats through increased engagement with the community. The aim of the initiative was to push for responsiveness of local government officials in

5.

6. All figures in this paragraph have been taken from the official district statistics from the national informatics centre [NIC] of government of India).

providing information on government schemes and become more vigilant to the needs of the communities they serve. Resultantly, through facilitation of community planning processes and training, the mission was to build community monitoring mechanisms and ensure access of the poorest to community services. Hinged on principles of transparency and accountability, the aim was to inculcate these principles in standard practices, ensuing in effective and timely services. Thus, the action fused with the mainstream focus on transparency and participation in governance which is also the focus of Government of India through its national, regional, local laws and policies. The impulse resonated with AA's larger goal of democratisation and governance envisioned as one of the core areas of work in India, blending in with the previous and on-going work of the organization.

Principal Issues

The AA initiative emanated from three main issues: First, the issue of lack of awareness due to lack of sharing of information by the lower levels of bureaucracy besides lack of appropriate information sharing methods hinting at poor governance and less than responsible behaviour by officials. Secondly, poor governance, lack of transparency and accountability was triggered because of an absence of 'results-culture', accompanied by lack of monitoring or supervision which remains unchallenged due to lack of awareness among people. Lastly, selective discrimination by government officials, rooted in society's historical and social-cultural classifications into various social systems, remained one of the core challenges which have been ingrained as a practice by the local governance officials leading to further discrimination of the marginalized.

Objectives

The overall objective of the project was - To increase and improve the access, delivery and quality of public services aimed at reducing poverty and social exclusion. The specific objective of the project was - to improve access to public schemes and services for poor and marginalized by identifying the gap between community action for

rights and entitlements along with local state's ability to respond to them effectively through timely information and coordinated systems in 6 backward districts of North India.

Project Methodology

The project components were consistent with the AA's operational strategy. The idea behind this project was to build the capacity of poor and marginalised community through training in leadership development, organising them into collectives and encourage them to participate in democratic forum to access their rights and entitlements. AA, in collaboration with the co-applicants, had implemented the action in the 6 districts directly reaching 30,400 families. The key method used, was to conduct base line surveys to evaluate results of the initiative. This was done through mobilisation and by organising people through public hearing and regular interactions. Trainings were held at various levels such as interaction with local authorities by guiding them for participatory planning and inclusive governance. In order to create awareness amongst people, interactions were held to sensitize them with laws such as Panchayati Raj Extension to 5th Schedule area, TSP / SCSP⁷, PM 15 point programmes as a deterrent measure (also short-term measure); Secondly, discussions were held to adopt long-term measures of sensitizing them on issues of discrimination (against categories of gender, and identities of Muslim, dalit and tribal); Lastly, the problem was addressed by training and preparation on gender responsive budgeting, in addition to sensitize budgeting for each of the marginalised groups

There were key methods used to implement the project. First, the use of Economic Literacy Budget Accountability for Governance (ELBAG) framework⁸, which was used to mobilise the community to

7. The idea of Tribal Sub plan (TSP) and Schedules Caste Tribal Sub Plan was in mooted to develop the the scheduled caste on the basis of financial, physical and, other benefits.

8. ELBAG is a tool that simplifies economic tools like budgets by explaining how they are prepared, who prepares them and how money is sourced. It is a process and methodological framework developed by various civil society organisation that combines organising people, developing grassroots monitoring mechanisms and using participatory tools and methods for building public accountability and transparency to initiate people- centred advocacy processes.

analyse the local budget available at the Panchayat level and check it for its responsiveness to excluded sections of the society such as gender responsiveness. It was further used to ascertain how this budget is used for fulfilment of real needs of the villagers. Social audit and public hearing formed the second method, where Social audits and Public hearings as a part of public monitoring of entitlements and local administration services were conducted during the project period. A total of 54 social audits and public hearings were conducted on various schemes like Food Security (PDS), Integrated Child Development services (ICDS), RTE, Pensions, Panchayats and MGNREGS which helped in implementation of the schemes at the grass roots. Social auditing and public hearing were chosen to recreate an impact on governance and strengthen accountability and transparency in local bodies of these project locations. It had also given a voice to stakeholders, including marginalized/poor groups whose voices were rarely heard.

Engagement with the Panchayat level officials and other local authorities was also being used as a method and approach to engage with local authorities. While the project was about increasing participation of the marginalised communities in local governance through preparation of Village Development Plans (VDPs), engagement with local authorities formed an integral part since the acceptance of the VDPs by the local authorities had been a crucial step for their implementation. This approach was operationalised through engaging with the local authorities to increase their sensitivity to the issues of social exclusion.

Programme Implementation

The duration of the project action was for 4 years beginning January, 2014 and ending at 31st December, 2017.

Year 1: Activities that were conducted during the first year included the inception workshops with various stakeholders and conducting the Base Line Survey to provide a necessary reference point. Evaluated against which at the end, were able to access and measure whether the expected results were being achieved. By using participatory tools, the current status on access of the poorest and

most excluded groups to public services especially on education, health, livelihoods and food security were established.

Sensitisation workshops for Panchayat officials on the role of Panchayati Raj and inclusive development were conducted, and 96 Village Information Resource Centres were established. A data tracking system was also established; IEC⁹ materials on the various rights and entitlements were also published. There were 6 training sessions given to the project teams on gender responsive budgeting and ELBAG; and 6 training sessions on Backward Region Grant Fund (BRGF) and e-governance. Training programmes for CBO members on government schemes were also organised. This was followed by the preparation of VDPs. Further trainings were conducted on the Right to Information Act, Central schemes and State specific schemes. Following the trainings, a series of awareness generation programmes were conducted.

There were 6 trainings of PRI representatives on participatory planning and RTI, one training on ELBAG and gender responsive budgeting and the preparation of a manual on ELBAG. In the first year also, formation and strengthening of various village/Panchayat level committees and CBOs took place which allowed for an analysis of Panchayat budgets in all 96 Panchayats. Half yearly monitoring of Panchayat budgets was also conducted.

Years 2-4: Activities for years 2 to 4 included sensitisation workshops for the Panchayat officials on role of Panchayat Raj, inclusive development and database management systems. Support was continued for the 96 Village Information Resource Centres that have been established and were accessed by the communities. The database management systems (of the BRGF) that were set up were timely updated and were accessed by the people with the help of CBOs and fellows.

Training on participatory planning; gender responsive budgeting and ELBAG; BRGF and e-governance were followed. This was followed by an exposure visit to School for Democracy at Rajasthan and Hiware Bazar Panchayat in Maharashtra to learn from their work

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on strengthening grassroots democracy. The partner agencies were involved in preparing village development plans, and also provided training on Right to Information Act, Central schemes, State specific schemes, and also training on ELBAG and gender responsive budgeting along with awareness generation programmes.

Village/Panchayat-level CBOs and committees were formed and strengthened. These helped in organizing and conducting 54 social audits and 24 public hearings on various government schemes. Analysis of Panchayat budgets had begun in Year 2 while Monitoring of Panchayat budgets also began in Year 1 after trainings to the community on ELBAG. Lastly, half yearly monitoring of budgets and annual analyses of budgets was correspondingly been carried out.

Activities included development of a document on good practices, conducting state level advocacy action through an action research and consultation with state and district level government officials along with experience sharing workshop with partners.

Implementation Outcome

The interventions of the project were designed to achieve four strategic result areas towards specific progress of the action in 5 states. ActionAid, in collaboration with the co-applicants, implemented the action in 6 districts, directly reaching out to 30,400 families.

Result 1: Increased capacity and responsiveness of local administration and Panchayat Raj Institutions (PRIs) in providing information and access to public services to poor and marginalised.

Result 2: Increased awareness and capacity of poor and marginalised communities to demand and access information and public services.

Community based organization (CBO) members were capacitated who were now assisting the preparation of Village Development Plans (VDPs) in all the 96 Panchayats and their capacity to facilitate social audits and public hearings were also been built to enable them to scrutinise the delivery mechanisms of Panchayats and make them accountable to the community. A total of 742 VDPs were prepared

and submitted involving PRI representatives and Block development officials, out of which 441 got sanctioned. Around 720 CBO members from among the villages were trained as cadre, with key experience in facilitation of village development plans, regular interactions between the community and Panchayat and also with the Information Centres opened under the project.

Efforts were made to improve MGNREGA implementation and were pushed forth through CBO members lobbying with the district administration. The community members accessed MGNREGA work in 86 villages by encouraging people to submit their work demand applications, getting receipts of same, availing 100 days of employment, and other provisions of the MGNREGA. More than 12761 work demand applications were submitted out of which 9451 families received work. There has been an increase in the social audit of NREGA at the Panchayat level and also the social audit committees were strengthened in the project area and as a result people received Rupees 3.07 Crore pending wages.

Other outcomes related to a total of 3267 Dalit families applied for homestead lands out of them 93 have received homestead land in East Champaran of Bihar. Similarly, 63 ICDS centers in the project locations and Midday meals in 71 schools were regularized. Around 12,495 people benefited from various pension schemes (2851 widow pension, 9532 old age pensions (4936 women, 4596 men), disability pension 112 (69 men, 43 women). Housing under Indira Awas Yojana also helped around 222 households receive benefits. A total of 958 dropout children were enrolled in schools.

A landmark outcome received after three years of perseverance was with respect to tribal community in Latehar district of Jharkhand who managed to get Community Forest Right claims for 6 villages in 4 Panchayats. Further, these villages were granted right to protect and manage community forest resources of 1629.2 acres under Forest Right Act, 2006. Simultaneously, 549 tribal people received a total of 1107.5 acres of forest land under Forest Rights Act in 9 villages in

Latehar district of Jharkhand. The pattas or land titles were issued in both wife and husband's name.

Lastly, measures under the Right to Information Act were adopted by the community to review village development and ensure transparency and accountability. A total of 64 RTI applications were filed to take account of public expenditure made by the government for implementing various public schemes like PDS, Midday Meal Scheme (MDM) and RTE during the project period. These initiatives had resulted in people raising questions on entitlements and tried to assert for effective utilisation of public schemes.

Result 3: Community based planning, monitoring, transparency and accountability practices established to provide information and review performance of public services and schemes with active participation of organisations of poor and marginalised.

The public programmes that the project focused on for effective implementation were National Rural Employment Guarantee Scheme (days of employment and payment status); PDS (Status of distribution of the grains) and also the status of social security schemes. The implementation status of these programmes was learnt through Social audits and was then made known to public and the policy makers through public hearings. A total of 54 Social audit and public hearing were organised during the action period by the partner staff, volunteers and CBO members by physical verification, data collections and compilation and finally a report on the same were prepared. In the project location, community started monitoring the utilization of allocations made to various schemes meant for the poor people through public meetings. At the end of the project period at least 50 per cent of the CBO members at village level (with half of them being women) were able to monitor Panchayat budgets and this had increased transparency and speed up the response of local government to community needs.

Result 4: Civil society organisations actively participating in advocacy efforts based on action researches and good practices documentation.

In all the targeted districts (of Latehar, East Champaran, Jhabua, Chamba, Pratapgarh and Barabanki) good practices of community initiatives of monitoring, transparency and accountability systems to access government schemes were identified and documented for the entire project area. The documents were published and made widely available. State level consultations were organised in Madhya Pradesh, Uttar Pradesh, Bihar, Himachal Pradesh and Jharkhand with state and district level officials. The main objective of these consultations was to advocate about various tools utilised in the project for accessing social services and also to replicate the good practices that were arrived at during the project duration. Officials from the Ministry of Rural Development, Integrated Tribal Development Authorities of the various states, and other officials from the relevant ministries participated in these state level consultations.

The project ensured positive benefits to the beneficiaries at the household level and society level by increasing the capacity and responsiveness of local administration and Panchayat raj institutions in providing information and access to public services to poor and marginalised. The larger benefit was realised in the increased capacity of the poor and marginalised communities to demand and access information and public services.

Access to Entitlements: During the project period (2014-2017), as per the data collected for the Baseline and End-line Survey, efforts at increasing access to entitlements and services had reached out to 21,833 Households consisting of 124,448 persons. Over the 4 years from 2014 to 2017, 1114 persons were eligible for Widow Pension of which 859 (77%) turned beneficiaries; while 2135 persons were eligible for Old Age Pension, 1411 (66%) became beneficiaries. Similarly, while 458 persons were eligible for Disability Certification, 334 persons acquired Certification (73%); 474 persons were eligible for Disability Pension and 269 persons became beneficiaries (56%); Janani Surakasha Yojana (JSY) had 1192 eligible persons and 1170 became beneficiaries. There were 4165 eligible persons for housing under the IAY/PMAY and 2735 became beneficiaries (65%), while under the MGNREGS there were 21,345 eligible persons and 8185 beneficiaries (38%). After three years of perseverance, villages have

been granted right to protect and manage community forest resource under the Forest Right Act (FRA) over 1629.2 acres. For individual rights a total of 1876 tribal people claimed and out of that 549 received a total of 1107.5 acres of forest land under Forest Rights Act in 9 villages in Latehar district of Jharkhand.¹⁰



After three years of perseverance, villagers managed to get Community Forest Right claims for six villages in four Panchayats. Villages have been granted right to protect and manage community forest resource under the Forest Rights Act (FRA) over 1629.2 acres of land.

Information Resource Centres: The information resource centres had greatly contributed to community mobilization and awareness raising about their rights and entitlements. In the project locations, 96 Information Resource Centres had been established in Gram Panchayats strategically located at the Panchayat Bhavan.

| <i>Years</i> | <i>No of people visited and benefited from IRCs</i> |
|--------------|-----------------------------------------------------|
| 2014 | 1571 |
| 2015 | 8477 |
| 2016 | 16737 |
| 2017 | 21431 |

* This data represents the number of people benefitted from Information resource centres from the year 2014 to 2017.

10. All figures on this page have been taken from the ActionAid end line survey report.



Panchayat Resource Centre acted as interface between local villagers and the block administration



Community-based Planning (Village Development Plans – VDPs):
In all the project locations, community-based organizations

actively took part in participatory planning processes, participatory processes of monitoring and engagement with PRIs to strengthen developmental planning for village and Panchayats. The process of formulation of VDPs was facilitated in 234 villages in 96 Panchayats during the project period. Partner organisations provided hand-holding support to the communities in submitting these Gram Sabha resolutions to the district officials and obtaining financial and administrative sanctions to implement the plans. Resultantly, in more than 59% cases, villages (a total of 742 VDPs were formulated of which 441 were approved by the Panchayats over the duration of the project) had benefitted from infrastructure improved funded under various schemes.



Village development plans increased the ground water table in the entire region and not just to their village

Promotion of Advocacy Effort: ActionAid had undertaken two evidence-based study, first, for highlighting the challenges faced and indicating the way forward to ensuring vulnerable communities have access to public services. Second, AA also did the best practice documentation for promotion of advocacy efforts. It aided in improving the implementation process of Yojana Banao Abhiyaan

(YBA) in the state of Jharkhand. On the basis of experience of best practices used, state level consultations were organised with state level and district level officials to advocate with them about the various tools utilised in the project. This was further endorsed by replicating the good practices that were arrived at during the course of the project. Also, findings from the study illustrated challenges faced in accessing public services which were also submitted to the Ministry of Rural Development. Integrated Tribal Development Authorities of the five implementing states, and other officials from the relevant ministries were invited for these state level consultations. Other district level officials and administrative officials had also participated in these consultations at their respective state level.

Project Limitations and Key Lessons

The project could fulfill the targeted indicators as a result of key contributing factors relevant for projects of similar nature and implementation focus.

Appropriateness to Target Beneficiaries: The target communities like the Musahars of Bihar, Tribal of Jharkhand, Madhya Pradesh and Himachal Pradesh have long been deprived of basic rights of food and education. This coupled with issues of access to land and livelihood makes them further deprived and desolate. Low levels of literacy, lack of awareness of government programs and procedures to access such programs has led to ineffective implementation of national flagship programs like NRHM, SSA and MGNREGS within these communities. The constant concerns of low accountability and transparency of flagship programs not reaching the target communities have never been appropriately addressed. This further deteriorated the situation of the already marginalised communities.

Right Based Approach For Intervention: The project adopted a right based approach. The key elements that made this project relevant and sustainable were social mobilization, capacity building (technical and social), institutional development and policy advocacy. This approach addressed the requirements of the vulnerable communities at its core and supported communities in filling the gap between

program announcements and accessing these programs in reality. The communities recognised and showed great appreciation and confidence of this approach. This confidence is significant for such projects as sustainability of intervention depends much on it.

Establishment of Information Resource Centres at Panchayat level: One of the established reasons for lack of accessibility of the programs is that changes brought at the government are not made known to communities and neither is the communities updated with appropriate skills. Their unfamiliarity with using technology creates a hindrance and feeling of intimidation. The project sites were far from district headquarters. Thus, the strategic set up of Panchayat level Information Centres at Panchayat Bhawan's helped the communities to easily access their entitlements without inhibition.

Facilitation to beneficiaries for ownership taking: The project activities had been well received by the affected communities so much so that they were willing to put their own resources to ensure the continuity of the project. A good example of this was the resource centres that had been established. The communities had been planning on its expansion at their own expense. This exhibited their enthusiasm and relevance of the centres for their welfare. .

Need based social intervention: The success of the project had also been attributed to the fact that the selected project sites fell in the 6 most backward districts of Northern India. These districts also had the lowest level of development index in the country. The high concentration of poverty and low literacy levels lead the regions to lower access of public services. The regions showed low leadership initiatives. The project set a lesson addressing issues such as gender inequality as well as social exclusion.

Incorporation of gender issue and its acceptance: This project strongly focussed on promotion of women participation in all development activities and created space for women to express, share and leads activities to bring about the necessary changes. Resultantly, women's opinions were clearly articulated.

There were few key suggestions that were shared during the EU de-briefing meetings and AA had been requested to explore the possibilities such as the need to engage in capacity building

programme of PRI with state and local administration in future to improve access to public schemes and to strengthen community-based planning, monitoring, transparency, and accountability practices. Since advocacy at state level is very strong, it needed to be continued. ActionAid regional offices along with local partners should advance the advocacy agenda related to entitlements. There is a pressing need to continue engaging with public authorities in a constructive way to effectively bridge the gap between entitlement beneficiaries and public authorities at state level. The issues and concerns raised at the local level were applicable to other districts and states. Projects like this can help bring about a big change in overall state and national level policies. A detailed strategic communication plan of engagement with media and other stake holders would be very useful in bringing greater attention, accountability of government authorities.

Inevitably, few challenges were also thought through as these were fundamental for identifying with a larger policy and programme priority. An inevitable challenge faced by implementing partners and the communities was the constant changes in the government administrative staff. By the time rapport has been built with an official, the official got replaced. This slowed down the advocacy process as well. There was always the possibility of an unfriendly officer that played a big role in taking backward the concerning issues. Many times, the process was indefinitely stalled with no particular reason given.

The government constantly changed rules and regulations in its implementing programs, there were new schemes proposed by the government, new processes included. The communities hardly had little knowledge of the details. With this project the dependency on the Information Centres had increased tremendously and as much as it was good to have these facilitation centres, the question of how these centres will be sustained in all the 96 Panchayats after the project remained a challenge.

Conclusion

The presence of pro-poor policies has proved to be insufficient in achieving significant pro-poor results. With a purpose of fostering inclusive growth and access to information and services for the marginalised, the initiatives undertaken by AA substantiated the need for a two-way dialogue between the citizen and the state. CBOs and other civil society organisations, correspondingly created synergy for community-based strategies along with extending government-based initiatives to fuse with the actualities of these regions. Strikingly, the project set a directive to engage in adopting broad measures, good practices and furthering interventions at a multi-sectoral level. The initiative championed for participatory processes within these multisectoral spaces which primarily rests on building a democratic society by empowering the marginalised.



Project Factsheet

| | |
|------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <i>Project Implementing Agency</i> | ActionAid Association |
| Survey Method (s) | The participatory rural appraisal (PRA) tools like social mapping and resource mapping of villages, conducting household surveys, conducting economic well-being ranking exercises among others, were conducted in the project period. Focus group discussions with stakeholders on the provision and quality of basic services and response from government stakeholders were also organised during the project period. |
| Stakeholder(s) | <p><i>Key Stakeholder (s)</i></p> <p><i>Community level:</i> Dalits- specially mahadalits (i.e. musahars) in Bihar, tribals-gujjars in Chamba, HP; Bheel and Bhilala in MP, and local tribals in Jharkhand, muslims and dalits (with muslim dalits also) in UP are the primary stakeholders. Among them, there is specific focus on women, children, and persons with disability (PWD). Community based organisations including civil society organisations, youth and women's groups wherever existing and advocacy networks were part of the joint work.</p> <p><i>Local administration:</i> Governments at local level (Panchayats, block level administration) and traditional leadership structures responsible for policy planning and implementation were part of this project.</p> <p><i>Implementing partners:</i> Since they have been implementing such projects, they are keen to take up the actions in this project and implement learning from other areas.</p> |
| Site / Field (Exact Location) | India; 6 BRGF districts: Barabanki and Pratapgarh in Uttar Pradesh, East Champaran in Bihar, Latehar in Jharkhand, Jhabua in Madhya Pradesh, Chamba in Himachal Pradesh (in 234 villages and 11 blocks from 6 districts) |
| Duration | <p>Start Date 1st January 2014</p> <p>End Date 31st December 2017 (48 months)</p> |
| Project Partner(s) | <ol style="list-style-type: none"> 1. Samvad Samijik Sansthan (SSS); 2. Samajik Shodh Evam Vikas Kendra (SSEVK); 3. Vikas Sehyog Kendra (VSK); 4. Vasudha Vikas Sansthan (VVS); 5. ActionAid Association (AA). |
| Contributing Doner (s) | ActionAid Association |
| Thematic Area (s) | Education, Livelihood, Employment, Financial Inclusion, Food and Social Security. |
| Organisation Contact (Web link) | https://www.actionaidindia.org |

Enabling Public Programme Delivery Reaching at the Last Mile

*‘Strengthening Inclusive Civic Leadership for
Social Accountability and Effective Delivery of
Public Programme’ initiative of UNNATI in
Gujarat and Rajasthan*

Abstract

The framework of policy decisions is examined continuously by an impact on the ease of access to public programmes and services. As a corollary, the participation of people from the grassroots has frequently accounted in building civic leadership and holding service delivery institutions accountable. Nevertheless, the effort to shape capacity building and empower the marginalised requires an informed vantage point. Only information on a public program does not automatically improve its access; support is required at different stages like preparation of the application form with all the documents to prove eligibility, tracking the approval process and provisioning of additional information as asked by the authority, access to the grievance redressal mechanism and many others. The UNNATI case study discusses strategies adopted such as community-based monitoring and information advocacy, besides actions that facilitate access to public scheme programmes and grievance registration. The study discusses initiatives which asserts on the assumption that improved access to public services will contribute to poverty reduction, a critical UN SDG Goal.

Keywords: Community monitoring, Citizen Leaders, Civic action, Social accountability, Public programs, Pro-active information disclosure

Introduction

Citizen engagement is vital for making public programmes perform in an accountable and responsive manner. Citizen engagement can happen when they are empowered with information and have the confidence to interface with ground level functionaries responsible for delivering the programmes. Systematic monitoring of public services assists the citizenry with vibrant citizen engagement and social accountability. Such a process creates enough evidence about the nature and quality of delivery mechanisms making a compelling reason before the authorities to take corrective action. The two critical benchmarks for efficient delivery thus are, first, organizing the community with an empowered voice and secondly, establishing a strong transparency mechanism.

With the advent of digitisation of service delivery processes, experiencing user-friendly portals follows up after an interaction with the people who use and question regarding their entitlements. Evidently, web-based information on National Food Security Act¹ And MGNREGA² has helped common people to verify their entitlements and raise grievances if any. The government of Rajasthan has welcomed the civil society inputs and simplified the digitisation of the pension programs and other benefits under National Food Security Act (NFSA). The UNNATI initiative has helped in designing ‘information clinic’ to support people to track their applications, register grievances and check the status of the redressal. However, once there is information available regarding a public program, it need not be uniformly accessible. Importance of access to critical public programs has a direct bearing on poverty reduction which is the first goal under SDGs.³

The initiative under the project aimed to improve access to public programs on social security and protection, health and nutrition, primary education by strengthening demand articulation,

1. National Food Security Act, 2013

2. National Rural Employment Guarantee Act, 2005

3. “Transforming Our World: The 2030 Agenda for Sustainable Development,” accessed January 2, 2019, https://sustainabledevelopment.un.org/content/documents/21252030_Agenda_for_Sustainable_Development_web.pdf.

particularly among Dalit, tribal, women, and persons with disabilities by enabling responsive service delivery mechanisms. The strategies and activities executed in the project are described along with the outcome. Comparative data of baseline and end-line is provided to show improvements in coverage and quality of public programs and reduction in the transaction cost thus accruing increased benefits for poor households. It shows how the community-based monitoring of public programs, along with civic action has contributed to tripling the benefits for poor households as was aimed in the proposal. The lessons derived in the project if replicated and mainstreamed, the public programs in the current format and budgetary provision with its limitations can provide significant support to ordinary citizen to lead a dignified life without poverty.

Background and Description

The project by UNNATI, i.e., ‘Strengthening Inclusive Civic Leadership for Social Accountability and Effective Delivery of Public Programs in Rajasthan and Gujarat’, aimed to reach out to 18,000 households in 2 blocks each of Barmer district in Rajasthan and Sabarkantha district in Gujarat. Sabarkantha district in Gujarat has 11 per cent Dalit and 17 per cent Tribal population.⁴ Poshina and Vijaynagar blocks / talukas selected for intervention has a high tribal population. Both districts have low sex ratio, high malnutrition, and rank low on human development indicators.⁵ It was targeted to improve service delivery regarding easy access, coverage, quality in 22 major public schemes and programs under social protection and security, health and nutrition and primary education to reach the last mile effectively. The project had a clear social inclusion focus, hence have selectively targeted Dalit, tribal, women and persons with disabilities, who usually remain excluded from mainstream development processes.

4. “District Human Development Reports,” UNDP in India, , accessed February 13, 2019, <http://www.in.undp.org/content/india/en/home/library/hdr/human-development-reports/district-human-development-reports.html>.

5. *ibid*

Principal Issues

Enabling public service delivery reaching the last mile has been a significant concern in India. The government of India has designed many rights and entitlement-based programs aiming to benefit the poorer and vulnerable sections of society. However, the programmes designed under Parliamentary Acts like MGNREGA and NFSA are not effectively reaching the last mile because of lack of information among the entitlement holders, irregularities in implementation and poor grievance redressal mechanism. There are many other social assistance programs which are poorly designed with conditionality, making it difficult for people to prove their eligibility.

On the one hand, poor people are not able to effectively receive benefits from the public programs, and on the other side, they are not able to absorb the burden of private health care, child care and education for the children. Despite having the Right to Information Act, 2005 and the social accountability provisions in the schemes, these instrumentalities are not promoted in letter and spirit to hold the service delivery institutions accountable. For instance, even Anganwadis⁶ in many areas remain defunct in the target regions. In the absence of access to social security, as well as programs, the vulnerable groups fall into exploitative debt trap at the time of calamities. Likewise, school dropouts suffer from many adverse effects, culminating into further exploitation through illicit activities of child labour, juvenile crimes or addictions. Further, poor health condition contributes to malnutrition and disability. India can address the issue of poverty and malnutrition if, with the existing level of budget outlay and infrastructure, the public programs are implemented effectively reaching the last mile. Increasing budgetary expenditure and support on public programs is also an essential requirement. Nonetheless, the priority is making program delivery effective with social accountability.

6. Angadwadis, meaning “courtyard shelter” under the Integrated Child Development programme, 1975, was started as a form of rural child care Centre in India.

Objective

The project had a strong emphasis on demand articulation at the community level and enabling service delivery through the creation of appropriate mechanisms at different levels by facilitating the pro-active disclosure of information. It is assumed that improved access to public services will contribute to poverty reduction. Therefore, the proposed action sought to remove difficulties for people in accessing their entitlements like pension, insurance, food security, employment and healthcare which are marred with opaque transaction process and irregularities for the claimants for whom the program is designed. It was intended that the project move in the direction of supporting people to access their entitlements as well as build the capacities of service providers.

Project Methodology

The project's core strategy was to strengthen demand articulation of the community for public programs. The mechanisms used for strengthening community demands were information campaigns, participatory community-based monitoring, citizen-centric actions for social accountability, strengthening people's accountability forums and support through Information Resource Centers (IRCs) at the block level. It also sought to strengthen good governance and service delivery practices through capacity building of Panchayati Raj Institutions for Gram Sabha level development planning effective pro-active disclosure of information. Capacity building of service providers and making the delivery mechanism responsive underpinned the mechanisms. The approach was also to build collaboration with the Government at all levels, to address redressal of people's grievances and facilitate changes in administrative mechanisms of programmes to enlarge the benefit coverage. Networking for sustained advocacy was intrinsic to the project resulting in several collaborative efforts on access to free and quality health care, better toilets in schools, right to information, pro-active information disclosure, universal and larger social security pension cover, policies, and programs for persons with disabilities.

Programme Implementation

The project was implemented with a slew of programmatic interventions integrated with core activity framework. The following major activities were undertaken.

1. Information Campaigns

Several rounds of information campaigns had been organised at the community level to enable people to understand the schemes, eligibility criteria and application process. During the campaigns, people were supported to make applications for their entitlements and lodge grievances. Separate campaigns were launched on the criteria of Socio Economic Caste Census (SECC)⁷, and inclusion of names for different schemes. In the project area of Rajasthan, 850 households were supported to file objections on the SECC data. In 2015, in Rajasthan another campaign namely Suchna Swabhiman Yatra was organized, in which 6421 people participated and 746 grievances were registered. In the subsequent years there were campaigns in the project areas of Gujarat and Rajasthan focusing on importance of Jandhan Aadhar Mobile (JAM)⁸ for accessing public schemes, Rashtriya Swasthya Bima Yojana (RSBY)⁹ for card renewal, certification of Persons with Disabilities and understanding on types of disabilities mentioned in the new Disability Act, 2016, entitlements under NFSA, and Right to Information Act, 2005.

2. Community Based Monitoring of Public Programs

Participatory monitoring of public programs helped to engage citizens in strengthening village institutions by demanding accountable service delivery mechanisms and people got an exposure to different grievance redressal strategies. Five rounds of campaigns

7. Socio Economic Caste Census, (SECC) commenced in 2011, under the Ministry of Rural development. SECC data is the first Caste based census and has been used for evaluating programmes such as NFSA, and others.

8. Pradhan Jan Dan Aadhar Mobile Yojana 2014, aiming at financial inclusion refers to the government initiative of linking the Jan Dhan accounts, Aadhar cards and Mobile number to access financial services.

9. Rasht Riya Swarthy Bema Yovanna, 2015, a project under the Ministry of Health and Family Welfare, aims to provide health insurance cover to the workers Below Poverty Line.

had been facilitated for community engagement and action to improve the performance of public programs. The community monitored the quality of program delivery on Anganwadi, primary school, health centres, institutional delivery, immunisation, MGNREGA, PDS, social security pensions, disability and health insurance using five indicators namely, first, people not accessing a service/ program; second, people not receiving full entitlements or adequate service; Third, on the basis of facilities and equipment at the centers; fourthly, status of people’s committee mandated in the program, and lastly, on the basis of status of pro-active information disclosure at the centers.

Communities interfaced with local functionaries at six-month intervals. The campaigns had triggered local action for enrolling people left out from the services, improving facilities and quality of services, and making the ground level functionaries accountable. Altogether, the monitoring programmes covered the participation of 14,910 people. Community undertook 7120 actions for improving the delivery of the public programs following community monitoring of public programs. Most Anganwadis in Barmer were not opening at the start of the project and have now started opening and giving cooked food to children after several rounds of monitoring and consistent engagement by the women. The performance of Mother and Child Health and Nutrition (MCHN)¹⁰ Days increased from 40 per cent villages to 88 per cent of the project villages.

3. Citizen Centric Actions for Social Accountability

| | 2014 | 2015 | 2016 | 2017 |
|----------------------------------------|------|------|-------|-------|
| Number of citizen leaders (cumulative) | 179 | 214 | 317 | 506 |
| Number of actions by citizen leaders | 357 | 676 | 4,074 | 2,909 |

About 1100 citizen leaders were trained to improve the quality and coverage of the public programs. They had undertaken more than 8000 actions for improving access to public programmes,

10. Mother and Child Health and Nutrition (MCHN) project is an intervention strategy that started in January 2001. It concentrates on community-based advocacy to counsel families at the risk of malnutrition.

promoting citizen participation in Gram Sabhas and popularising social accountability through information disclosure and social audit. Actions were backed by the community, where Villagers feel empowered in the presence of citizen leaders and vice-versa. Most middlemen were now out of the scene legitimizing the role of citizen leaders with the community and the government. They had developed an understanding of the process of accessing different programs and have been given training on issues related to citizenship, governance, poverty analysis, government schemes, social justice laws, RTI, social accountability and the uses of an active interface with stakeholders. Citizen Leader actions are effective when they are backed by and accountable to Community Organisations. Efforts have been made to form and strengthen Gram Vikas Sangathans with inclusive representation. (Annexure 1)

4. Activating People’s Accountability Forums

| Committee | Number of Meetings facilitated | | | | |
|------------------|--------------------------------|------|------|------|----------|
| | 2014 | 2015 | 2016 | 2017 | Sep 2018 |
| SMC | 52 | 184 | 153 | 327 | 307 |
| VHSNC | 36 | 56 | 90 | 165 | 179 |
| AWC | 0 | 41 | 40 | 186 | 146 |
| Other committees | | 8 | 2 | 38 | 9 |

Efforts had been made to reform, educate, and activate the village level public program committees like School Management Committee (SMC), Village Health Sanitation and Nutrition Committee (VHSNC), Village Vigilance and Monitoring Committee (VVMC) to examine the effectiveness of program delivery and initiate action for improvement. It was observed that due to faulty selection by frontline government functionaries, the committees were either not formed or lacked communication amongst members who were unaware about their role.

5. Support in accessing public schemes through Information Resource Centers (IRCs)

| <i>No. of Visitors at IRCs</i> | | | | |
|--------------------------------|-------|-------|-------|----------|
| 2014 | 2015 | 2016 | 2017 | Sep 2018 |
| 686 | 2,231 | 2,171 | 2,989 | 2,866 |

| <i>Scheme</i> | <i>People benefitted</i> | <i>Grievances redressed</i> |
|----------------------------------------------|--------------------------|-----------------------------|
| Old age and destitute pension | 903 | 604 |
| Disability certification | 1198 | |
| Disability pension | 51 | 48 |
| Disability card | 652 | |
| Transport pass for persons with disabilities | 655 | |
| Aids and appliances | 22 | |
| Widow pension | 112 | 84 |
| Palanhar/ Palak matapita (for orphans) | 66 | 35 |
| Janani Suraksha Yojana | 728 | 78 |
| Kasturba Poshan Sahay Yojana | 82 | 22 |
| Rajshree yojana (for girl children) | 126 | 32 |
| Bhamashah/ Rashtriya Swasthya Bima | 5 | 5 |
| Student scholarships | 24 | 68 |
| Aadhar/ Jan dhan/ Bhamashah yojana | 336 | 50 |
| MAA card | 111 | 74 |
| Awaz Yojana | | 60 |
| Hitadhikari yojana | 16 | 31 |
| MGNREGA | 15,989 | 1,478 |
| Other schemes | 9,468 | 1,495 |
| Total | 30,544 | 4,164 |

Figure depicting number of people benefitted from Information Resource Centers (IRCs) in the project area

IRCs were functioning in the block headquarters of the project in Patodi, Sindhri, Poshina and Vijaynagar. They supported communities by providing information to citizens and PRIs representatives on government programmes; Secondly, by establishing interface with frontline departments for pro-active disclosure and grievance redressal; and lastly by facilitating planning and accountability in

Panchayats. IRC guided people who were unable to access their entitlements for various reasons. 30,544 people had been supported to get the benefit of schemes. In Rajasthan web (IT) enabled mechanism (Rajasthan Sampark) had been extensively used for grievance redressal. In Gujarat, there had been regular discussions on grievances with the authorities at Taluka, District, and State level. Consequently 4,164 grievances have been supported for redressal.

6. Strengthening PRIs and Proactive Disclosure on Development Activities

All 62 gram panchayats had taken actions for improving service delivery, social accountability and participatory planning. PRIs had been oriented on public programs, roles and responsibilities and preparation of Gram Panchayat Development Plan (GPDP).¹¹ In 2015, UNNATI worked as a resource agency to the state government on conducting Intensive Participatory Planning Exercise (IPPE)¹² for convergence based planning of Rural Development Programs. During 2016 and 2017, UNNATI was part of GPDP State Resource Team in Rajasthan and Gujarat. Trainings were also organized for PRI representatives on importance of conducting gram panchayat meeting, the role of Panchayats in improving the GPDP and utilisation of grant received under the 14th Finance Commission and information disclosure.

Government Orders were generated for information disclosure at Anganwadis, wall-writing of list of affiliated private hospitals under Bhamashah Swasthya Bima Yojana¹³ (Health Insurance Scheme) and Rate charts were painted at all E-Mitra (information kiosks) outlets. In 2015, UNNATI provided a template to the Rajasthan government for display of information on the beneficiary list of social security pension, IAY, MGNREGA work on individual land and other details of MGNREGA implementation for wall painting in Gram Panchayats.

11. Gram Panchayat Development (GPDP) is the convergent development plan prepared by panchayats in a participatory manner.

12. Intensive Participatory Planning Exercise, a strategy under Ministry of Rural Development for convergent planning under MGNREGA

13. Bhamashah Swasthya Bima Yojana (BSBY) developed by the Government of Rajasthan is a cashless scheme, providing healthcare insurance to poor families.

For the Gujarat State Information Commission, the status of proactive disclosure was studied for selected departments and recommendations had been made to improve both web-based and physical display of information.



Gram Panchayat Development Plan (GPDP) Campaign

| Type of Information Displayed | | | |
|-------------------------------|------------------------------------------------------------------------------------------------------|-----|-----------------------------------------------------------------------|
| 1. | Basic Village information | 8. | Accountability channel |
| 2. | List of services of particular institution | 9. | Works undertaken with expenditure |
| 3. | Name and contact of PIO and Appellate authority | 10. | Timing of Institution |
| 4. | Children with disability - name, type of disability, benefits availed | 11. | Panchayat Development Plan |
| 5. | Work wise amount spent on labor and material in MGNREGA works | 12. | Stock of MDM food grains |
| 6. | List of food security beneficiaries | 13. | Duties and responsibilities of service providers |
| 7. | Category wise beneficiary list with benefit accessed – (housing, toilet, BPL benefit, THR, JSY, PDS) | 14. | Enrollment and attendance of Children, Regular and irregular children |

Information displayed in the project locations.

7. Facilitation for Change in Administrative Mechanisms for Improved Public Service Delivery

Capacity building of service providers and recognizing the need for responsive interfacing with the government at all levels is fundamental to flexible administrative mechanism. For example, 1908 Anganwadi workers were trained on the early identification of disability with the support of Blind Persons Association (BPA) for all the 8 talukas of Sabarkantha in 2015. Anganwadi workers, ASHAs¹⁴ and ANMs¹⁵ of Patodi and Sindhri in Rajasthan were trained to use social mapping for identification, tracking of high-risk pregnancies and undernourished children. They were also versed with the importance of pro-active disclosure of information. (Annexure 2)

8. Information Packages

A series of information packs had been developed and disseminated to popularise the public programs. Information booklets and leaflets had been prepared on government schemes to cater to the needs of citizen leaders and also the ground level government functionaries. These stakeholders found it very useful to have the information available in a simple format at one place. In Gujarat, the public programme information pack was reprinted to incorporate changes in scheme criteria and benefits in collaboration with, Aga Khan Rural Support Programme (India), AKRSP (I), an EU project partner. All important Acts, Guidelines and Government Resolutions/ Orders related to existing public programs had been compiled and made available to Panchayats, citizen leaders and ground level functionaries. Information kiosks had been developed and are used by citizen leaders to hold information camps. An interactive game was designed on 'transparency and accountability of gram Panchayats' for use in training (Hindi).

14. The role of Accredited Social Health activists (ASHA), a community health worker was instituted in 2005 by the Ministry of Health and Family welfare. These are usually local women trained to provide health education and in turn spread awareness regarding health issues.

15. Auxiliary nurse Midwife (ANM) is also a female health worker and generally works in the Primary Health Centers (PHCs) at the village level.

Process flow charts showing de-jure and de-facto situations for access to social security and protection schemes had been beneficial in training of PRIs and citizen leaders on public programs. Mobile-based voice messages on government programs and camps had been disseminated regularly to 4000 contacts to actuate instant communication. Besides, UNNATI publishes a quarterly bulletin 'VICHAR' in Gujarati and Hindi that reaches to more than 2000 members and institutions covering academic institutions, CSOs, PRIs and government representatives. Eighteen issues were published and disseminated in project duration. It carries articles from development researchers and practitioners and is often cited as an essential contributor to development thinking and practice.

9. *Networking, Learning and Articulation of Agenda*

UNNATI undertook a series of partnership based programs initiated to bring value addition and learning to the intervention process. The four rounds of partner's meeting had been very significant for mutual learning and making the program strategy useful. Secondly, training on mainstreaming disability was conducted for all EU project partners in 2016 to encourage an inclusive approach to address specific barriers and enhance the participation of persons with disabilities in decision-making processes. In this training, there were 25 participants from 8 organisations. Additionally, a workshop on strategies for improving access to government schemes was organised in Ahmedabad.

CSOs presented on three themes, first, Strengthening People's Collectives for Demand Creation, second, on Public engagement for accountability, and lastly, Innovations in accessing public schemes. These meetings witnessed representatives from 11 of the 14 European Union supported project partners, participants from academic institutions and representatives from other NGOs.

A wider participation was observed, when trainings were conducted for other organizations such as AKRSP (I) on community monitoring of public programs, and Nand and Jeet Khemkha Foundation (NJKF), a project partner from Bihar visited Rajasthan for orientation on civic leadership program and intervention on

information disclosure. Likewise, UNNATI staff visited the field areas of Ekjut, partner of Welth Hunger Hilfe, PRADAN and AKRSP (I) to learn about community capacity building and engagement with PRIs and women collectives in improving service delivery. Comments were provided on Draft National Policy on Women, 2017 and the New Education Policy debate from the perspective of disability governance and access to information on public schemes. UNNATI supported two significant campaigns in Rajasthan led by a network of CSOs 'Soochna Evam Rozgar Adhikar Abhiyan' (SR) Abhiyan' for demanding social accountability in primary education and other basic services and the need for an Accountability Law. A national level workshop on proactive disclosure was also co-hosted with Population Foundation of India in 2016.

Implementation Outcome

The outcome of the project can be tracked from the community-based monitoring and the baseline and end-line study. Project end-line survey showed that benefits to households had indeed tripled. The number of people/ households accessing the programs had increased notably for Anganwadi and health services as well as leakages had considerably reduced in PDS. In Anganwadi the attendance of children increased from 5 percent to nearly 55 percent. Pregnant women and adolescent girls getting Take Home Ration had improved from 23 per cent to more than 70 per cent. Most service locations also displayed pertinent information about services, providers, beneficiaries, accountability channel and the grievance redressal mechanisms.

People's monitoring committees had become functional at the schools, health centers and the Anganwadi. In Gujarat, a scheme like Ann Triveni¹⁶ (which people did not know and were not accessed at all when the project started) showed 100 per cent coverage in the end-line mapping. Leakages substantially reduced in Janani Suraksha

16. The Anna Triveni Yojana, prevalent since 2003 was implemented in giving priority of tribal girls and their family. According to the Yojana, annually 60Kg of food grains is given to the girl's family. The push behind the Yojana is the criteria of providing benefits to tribal girls only, who are enrolled in school between standard 1 to 7.

Yojana with the average benefit for household increased from 33 to 93 per cent. During baseline in Rajasthan, 15 per cent people were using public health services which became 100 per cent towards the end-line. Indicating a substantial shift both in the outlook of people, and the attitude of the service provider hinting at remedies as against the alienation poor people felt as described earlier in the problem statement. Coverage of ICDS showed an improvement from 21 to 88 per cent. At the time of baseline survey, people received only half of their PDS entitlements. Therefore, an overall of 92 per cent was recorded.

| | <i>Schemes in Gujarat</i> | <i>Coverage</i> | | <i>Quality of Benefit</i> | |
|---|---------------------------|-----------------|----------------|--------------------------------------|--------------------------------------|
| | | <i>Baseline</i> | <i>Endline</i> | <i>Baseline</i> | <i>Endline</i> |
| 1 | Mid day Meal | 100 % | 100 % | 38.5% | 100% |
| 2 | Ann Triveni | 0% | 100% | 0 % | 100 % |
| 3 | JSY | 100% | 100% | 32.7% | 93% |
| 4 | Expense in Pvt Hospital | 100% | 100% | Avg HH exp. Rs.2922 | Avg HH exp. Rs.931 |
| 5 | Old Age Pension | 280 | 131 | 50 | 78 |
| 6 | Awas Yojana | 23HH | 108HH | Avg receipt Rs.20000 | Avg receipt Rs.94620 |
| 7 | MGNREGA | 7HH | 155HH | Avg wage received per HH-Rs. 1128 | Avg wage received per HH-Rs.4045 |
| 8 | NFSA | 230 HH | 351 HH | Avg benefit in Rupee terms - Rs.2228 | Avg benefit in Rupee terms - Rs.8437 |

| <i>Schemes in Rajasthan</i> | | <i>% of eligible people able to get benefit</i> | | <i>% of benefit received out of entitlement</i> | |
|-----------------------------|---------------------------------------|-------------------------------------------------|----------------|-------------------------------------------------|----------------|
| | | <i>Baseline</i> | <i>Endline</i> | <i>Baseline</i> | <i>Endline</i> |
| <i>I</i> | <i>Social Security and Protection</i> | | | | |
| 1. | Old Age Pension | 87.6 | 93 | 59.4 | 92 |
| 2. | Pension for widows/ single women | 79.4 | 94 | 56.5 | 72 |
| 3. | Pension for persons with disabilities | 82.6 | 77 | 49.6 | 76 |
| 4. | Life and disability insurance for BPL | 50 | 66.7 | 0 | 50 |
| 5. | PDS | 85 | 100 | 51 | 92 |
| <i>II</i> | <i>Public Health and Nutrition</i> | | | | |
| 6. | ICDS | 21.6 | 89 | 17.5 | 88 |
| 7. | Maternity entitlements | 76 | 94.5 | 79.7 | 82 |
| 8. | Health insurance | 9.5 | 96 | 0 | 97 |
| 9. | Public health services | 15.8 | 100 | 32 | 99.7 |
| 10. | Immunization | 67.9 | 98 | 38.9 | 99 |
| <i>III</i> | <i>Primary Education</i> | | | | |
| 11. | Mid-day Meal Scheme | 100 | 100 | 99 | 98 |
| 12. | Student scholarship | 28 | 94 | 33.7 | 54 |
| <i>IV</i> | <i>Others</i> | | | | |
| 14. | Individual land development works | 74 | 98 | 53.6 | 91 |
| 15. | Housing support | 64 | 100 | 80.5 | 77 |
| 16. | Support for toilet construction | | 86 | 41 | 86 |

The table depicts the the baseline and endline figures for the project area in Gujarat and Rajasthan.

In Rajasthan, the study on the status of old age pension was carried out in 3 non-project Gram Panchayats (control area) by Centre for Equity Studies (CES). It was compared with the intervention area. The results were as follows:

- (i) 72 per cent people did not have information on entitlements in the control villages and 8 per cent did not have information in project villages.
- (ii) 29 per cent of eligible people were not availing pension in the control area, and 1 per cent of claimants were not getting benefit in the project area.
- (iii) Nearly 50 per cent people in the control area had not received their pension for more than six months because

they were not informed about verification formalities and Aadhar seeding of bank accounts. The percentage of people not paid pension for less than six months was much larger. In the project area, there was nobody with pension pending for more than 6 months. Lastly, all pensioners in the control area had used agents for making the application. None of the pensioners in the project area had used agents.

Information on public programs had been provided to 35,274 households (HHs) against the target of 18,000 HHs. Around 30,544 people were helped to get the benefit of public schemes, and the grievances of 4,090 people were supported for redressal till September 2018. Benefit from government schemes concerning access, quality and coverage to households had tripled in the five years of the project period 2014 - 2018. A strong cadre of 506 citizen leaders (against the target of 300) had been developed from amongst the marginalised communities. Improved information disclosure was facilitated for gram Panchayats and village institutions at 1136 locations.

By capturing grassroots evidence on the hurdles faced by the poor in accessing public programs and collaborating with civil society networks and the government the web-based information on pension program and NFSA have been redesigned in

Rajasthan for practical use by people to demand accountability leading to expanded coverage. In Gujarat, a sound disability camp protocol has been developed improving the announcement mechanism, attendance, and total coverage. In Gujarat, the amount of support of old age and widow pension and benefit under Palak Mata Pita Scheme (foster care and education of orphans) had been increased. Likewise In Rajasthan too, glitches in Palanhar (foster care) and Hitadhikari (support to informal sector workers) scheme implementation were ironed out, and leakages in PDS had been addressed.

Project Limitations and Key Lessons

Over the five years of the project period, many public programs have been newly formed, or the eligibility criteria and benefits have

changed. There is no mechanism whereby people are informed and supported to access the benefits. The project had demonstrated many strategies like information campaign, community-based monitoring, facilitating access to programs and grievance registration. However, mainstreaming the facilitation services to access public schemes remains a considerable challenge. Such services can be best provided by CSOs. Therefore, creating a policy environment and provisions for CSO engagement to facilitate access to public programs is the primary requirement. Many of the public programs are designed with so much conditionality and complex provisions of eligibility criteria that ordinary citizens find it difficult to access. It is necessary to develop some of the public programs universally accessible like in MGNREGA. Despite having an Act on information disclosure and official guideline on a social audit of public programs, there has been resistance for operationalisation as much as, registering of grievance redressal is very difficult in cases of corruption and irregularities.

The existence of information on a public program does not automatically improve its access; support is required at different stages of the process flow together with a strong grievance redressal mechanism. For informing people on public programs and their entitlements, the basket of activities needs to be appropriate for the local context. Further, to make the public program active, collaborative interface with the government requires engagement with different grievance redressal mechanisms and tracking grievances for effective redressal. Importance of access to public programmes has received better articulation, even in SDGs. What is achieved is very important especially regarding easing the access to benefit process for beneficiaries also by widening and deepening the social security net. However, consistent efforts are required in the ever-changing eco-system to generate strong citizen feedback and advocacy.

Conclusion

CSOs have played a critical role in creating a synergy between the citizens and the State. What is more fundamental to observe is to fathom the role of these CSOs in facilitating citizen participation

and grasp the potency of their involvement in the institutional processes. The project undertaken by UNNATI strategises the vigour as well as the discontent among the poor in order to bring change. UNNATI believes in channelising change; Change in the form of reforms in public policies, public institutions; change in the form of transformation in citizens' realisation of being able to affect the developmental process.

Annexure (1)

Citizen Leader Annaben Kalaswa follows RTI Application for 2 Years

Annaben Kalaswa, a citizen leader from Biladiya panchayat, Sabarkantha in Gujarat, filed a RTI on August 22, 2016 seeking information on scheme beneficiaries, selection criteria and the income and expenditure of the panchayat. The information she asked should have been pro-actively disclosed. She did not receive a reply despite appealing and second appeal was made to the State Information Commission on November 22, 2016. The Information commission called the PIO and the appellate authority for a hearing on February 22, 2018. PIO did not attend. The Information Commission issued an order to the District authority to ensure that information is provided and all concerned officials be present for next hearing.

Daud Khan uses Rajasthan Sampark to Regularise Village School

Citizen leader Daud Khan from Patodi block had been constantly complaining about teachers coming late and irregularity in mid-day meal to block authorities did not respond. Ultimately, he lodged a complaint on the on-line grievances portal 'Rajasthan Sampark'. The administration came to the village on the pretext of investigation to pressurize the people. Daud Khan ably kept the people own up to their testimonies and action was initiated.

Residential Land Rights of Nomadic People

Hasam Khan, citizen leader from Patodi has single-handedly raised the case of the land patta for 100 families of traditionally nomadic community. He mobilized the people and helped them to present their demand to the

District Collector. In the face of opposition from the local panchayat and administration, he stood with the people for boundary demarcation and measure of land required for the re-allocation.

Identifying the vulnerable families and linking them to public programs Puro Devi, citizen leader from Sindhri was supporting a MCHN day when she was told that children of Ruparam are never brought for immunization. She visited him. Ruparam Bhil was living on the edge of the village in extreme poverty. They did not avail any public program because they did not have supporting documents and bank accounts. Puro Devi helped the family to get documents and the family is accessing pension, PDS and MGNREGA.

(Annexure 2)

Regularising the charge on bar code coupon in PDS - At the beginning of the project, in the pre NFSA period in Gujarat, it was found that PDS beneficiaries spent Rs10 every month because of the 2-page coupon for getting their rations. Through change in the format of the bar code coupon, it was brought to one page and beneficiaries across Gujarat benefitted from it as because of the change they have to pay only Rs. 5 for the coupons. This translated into a substantial amount of money saved considering the number of PDS beneficiaries in the State.

Reforms in Palanhar Yojana implementation – The scheme is in operation in Rajasthan for supporting the education of orphans and children of vulnerable families. It faced delivery snags during digitization and creation of MIS. UNNATI worked closely with the government in improving the system. Palanhar MIS was linked with primary school informationportaleliminating the need for annual verification of beneficiaries, alignment of age information on Aadhar cards with the age information in school, availability of E-Mitras for registration, and SMS to the beneficiary on the status of application.

Easing application process of land and water development works in MGNREGS – Land and water resource development works for SC, ST and BPL as provisioned in MGNREGA is taken forward as ‘Apna Khet Apna Kaam’ in Rajasthan. Applicants have to attach map of their land and get attested by the Patwari (Revenue functionary) and notarized no-objections from the co-claimants of the land. These two clauses were the cause of

corruption and leakages in scheme delivery. Decisions were made at the state level to replace patwari's map with map drawn by the beneficiary and submissions of no-objections on plain paper after cases were presented.

Getting PDS information in public domain – The Department of Food and Civil Supplies was convinced to put information on PDS beneficiary list with entitlement, customer account ledger and abeyance list after cases and evidences of irregularities captured from the community were presented to the Secretary. Order was released that the online beneficiary list had to be followed for all purposes and there were no other approved lists. Orders were also released for PDS monitoring committees to be made with immediate effect and reported. All PDS outlets were asked to display the beneficiary list on the outside walls and mention specifically that rations are provided according to the number of members in the family and no units have been deducted by the State for whatever purpose.

Making life and disability insurance available to poor - Pannadhay Jeewan Amrit Yojana, alternately called in some states as Aam Admi Bima Yojana, is an insurance scheme for BPL households. It is contracted to LIC. The Contract had expired and the Company had informed local functionaries not to entertain applications unless informed otherwise. The contract was renewed immediately after representation at the State level with evidences.

Expanding the social security benefits - UNNATI made a comparative table on eligibility criteria and amount of financial support on pension schemes for old age, widow and for persons with disabilities provided by Goa, Telangana, Andhra Pradesh, Delhi, Rajasthan and Gujarat and discussed with the Secretary SJ&E, CMO and Chief Secretary in Gujarat. Many policy level changes were subsequently observed. These will impact SDG 1 and 2. It is needless to mention that UNNATI does not take full claim for them.

- The criteria for old age and disability pension and Sankat Mochan was expanded from BPL Score 0-16 to 0-20. By this the beneficiary number will be almost doubled.
 - The amount for old age, destitute and disability pension were increased from Rs.400 to Rs.500 per month for 60-79 years and from Rs.700 to Rs.1000 for those above 80 years.
 - Widow pension was increased from Rs.750 to Rs.1000 per month.

- The Palak Mata Pita scheme that provided financial support for only orphan children was expanded to include children of widows who have remarried. The number of eligible children increased three times. This will help to prevent child labour as one of the conditions is that these children need to be either going to the Anganwadi or school. The amount of support has been increased from Rs.1000 to Rs.3000 per month.
- The income limit for eligibility of schemes related to Social Welfare Department and the Social Defense Departments for SC and ST was increased. For rural areas it is increased from Rs.47,000 to Rs.1,20,000 and for urban areas it is increased from Rs.68,000 to Rs.1,50,000. It will enlarge the eligibility list.

The Program Coordinator from Gujarat represented in the committee for formulating the State Policy on Disability and the State Rules following the enactment of the Rights of Persons with Disabilities Act 2016.

The Government of Gujarat has implemented the disability camp protocol developed by UNNATI. In Rajasthan too, several representations have been made for ensuring certification of visible disabilities at the PHCs and arrangement of specialists at the district hospital once a month. Efforts have been made with Department of Elementary Education to take notice of toilets constructed in schools with overhead tank in schools and their use.

Project Factsheet

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|--------------------------------|-----------------------------------------------------------------------------------------------------------------|
| Project Implementing Agency(s) | UNNATI -Organisation for Development Education |
| Project method(s) | Household level consultation with the poor – Participatory Poverty Assessment (World Bank Group) |
| Stakeholder(s) | Community, Panchayat elected representatives, CSOs, government officials |
| Site/ Field (Exact Location) | Vijaynagar and Pohina in Sabarkantha district in Gujarat and Patodi and Sindhri in Barmer district in Rajasthan |
| Duration | 60 months |
| Project Partner(s) | NA |
| Contributing Donor(s) | NA |
| Thematic Area(s) | Governance, Social Accountability, Civic Leadership, Citizenship, Rights and Entitlements |

Community Mobilization and People's Participation in the Governance Process

An Initiative by Welthungerhilfe in Jharkhand

Abstract

The idea of Good Governance hinges on parameters of effective reach of services and overall development of people. Simultaneously, the concept has often been rebuked on witnessing an uneven reach of development planning and is thus termed as the 'inflated' understanding of good governance concept by academic scholars. Welthungerhilfe's (WHH) work in the state of Jharkhand substantiates this paradox of the state's uneven development against the slow growth it has been witnessing since the late 1990s. The case study provides insights on the 'ground zero' situation on issues such as health and nutrition, employment, and education. Working within the umbrella of these three thematic areas, Welthungerhilfe uses innovative participatory tools to encompass a broader reach to increase administrative capacity, improve institutional performance and evolve strategies to capacitate people at the ground level. These tools consist of measuring the quality and accessibility of services by deploying feedback mechanisms such as the Citizen Report Card (CRC). Besides, tools Implemented such as Micro Planning Flip Book and 'Mobile for Mothers' application recognised the negligence towards information dissemination and, lack of effective communication. Resultantly, WHH recognised the need for strengthening the existing institutions such as School Management Committees and Pragya Kendras to improve the Information, education and communication process. The initiative targeted 3,81,000 beneficiaries, in addition to self-governing bodies, and service providers in the four targeted districts in Jharkhand.

The initiative draws our attention towards systematic advocacy at the state level with stakeholders comprising of lawmakers, bureaucrats, media persons, among others to weed out operational hindrances. Welthungerhilfe's intervention in Jharkhand underwent challenges of survey research in Naxal areas and staff attrition in implementing programmes on the field. With a challenging terrain and lack of awareness of existing rights, the project executed with a belief in community mobilisation and an innovative framework to strengthen the prevailing information gaps, while encouraging newer participatory processes.

Keywords: Health and nutrition, education, Jharkhand, innovative tools, community monitoring, Citizen Report Card

Introduction

Fighting corruption and promoting people's participation can establish a transparent and an accountable good governance system which is critical for development. India's Parliament passed the Right to Information (RTI) Act in 2005 towards an aim of creating an increased transparent and accountable governance system. Over the years, RTI has become a powerful tool that enables citizens to participate in the governance process and become aware of their rights and entitlements. Yet, a significant portion of the population has little knowledge about it. Transparency is necessary for making the public service delivery system effective; it enables information in the hands of the citizens in a manner that they may be able to claim their entitlements. However, mere knowledge of what entitlements are, and who is responsible for fulfilling them, is not enough in ensuring that public services are adequately and effectively delivered to the targeted citizen. This is particularly true for the poorest people in the country's remotest areas in underdeveloped States as Jharkhand.

The historical marginalisation, persistent exclusion of tribal and Dalit communities as well as deep-rooted corruption have reduced faith in public service delivery system in the state. According to Prof. Jean Drèze, a development economist and a visiting professor at the Ranchi University, the nutrition situation in Jharkhand is

very serious - worse than almost anywhere else in India, or in the world for that matter. "Ten years ago, when I first started working in Jharkhand, the Public Distribution System (PDS) was virtually non-functional and people did not even know their entitlements.

Today, the system works to a significant extent, and people are more aware of their rights. This shows the possibility of change, but there is still a long way to go. Further, public mobilization, using all democratic means, is the more responsive and accountable,"¹ he said. The case study targets the prevailing concerns in Jharkhand. Resounding Welthungerhilfe's mission, of empowering local self-governance bodies for improved citizen participation. The initiative proceeds with aiming for an accountable and transparent governance system in Jharkhand, with partner organizations as Badly Foundation, Ekjut, LEEDS, NEEDS and Pravah.

Background and Description

Jharkhand is home to 4, 88,494 PVTG² (Particularly Vulnerable Tribal Group) from 10 tribes identified by Planning Commission of India in the year 2006. Being ranked 16 out of the total 17 in the Indian State Hunger Index, the State population suffers severe hunger and malnutrition.

According to the National Family Health Survey (NFHS)-4³ (2015-16), in Jharkhand, about half (49.8 per cent) of the children under three years are underweight, which is an increasing trend. Meeting the basic needs of a household is a challenge for the majority of the population. Due to the lack of food and job availability, many people, including small farmers, migrate to other parts in search of work. Such a pattern has a direct repercussion on children's education. They struggle in the vicious cycle of poverty and ignorance. Through the project initiative Welthungerhilfe, along with its local partners worked in Jharkhand's four least developed districts (Khunti, Dumka, Pakur and Sahebganj), to increase and improve the access, delivery

1. Prof. Jean Dreze said this during an interaction with WHH team from Germany on 20th Feb 2017.

2. NAC records on PVTG

3. National Family Health Survey of India, NHFS-4

and quality of public services aimed at reducing poverty and social exclusion. The intervention focused on four key thematic areas: rural employment, health and nutrition, entitlements as well as education in the state under the 'Initiative for Transparent and Accountable Governance System' in Jharkhand.

The initiative targeted 381,000 beneficiaries, in addition to self-governing bodies, and service providers in the four targeted districts. Previous studies show that government schemes fail to address issues of unemployment, malnutrition, and hunger, as well as illiteracy. While vital health indicators are improving slowly, in tandem, the gap between Jharkhand and the more developed states in India continues to widen. Moreover, besides, poverty, poor education, poor nutrition, traditional practices such as home births and wrong breastfeeding accompanied by prominent gaps in NRHM⁴ and ICDS⁵ 'free' services provision contribute to the developmental challenge in the state of Jharkhand.

The motivation behind selecting the target areas within Jharkhand also rested on reasons such as, serious flaws in the Public Distribution system, MNREGA covering less than 30 days of employment cover in most communities, and poor access to Integrated Child Development Services (ICDS). Therefore, the project intervention also addressed concerns such as nutrition under the sub-sector on health and MNREGA, which in turn have a reverse trend on migration and community disintegration. In order to establish a yardstick for the project, a baseline study was conducted to assess the ground level situation examining the themes; first, health and nutrition, second, education and third, MNREGA (Including, PDS, RTI and Pragma Kendra). The focus of the Welthungerhilfe intervention was also to develop a 'mind-map' of the ground zero situation which further contributed to the rationale of conducting a baseline survey.

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4. National Rural Health Mission, 2005 was launch to provide affordable, accessible, and quality health services, to the rural population, especially the vulnerable groups.
 5. Integrated Child Development Services, 1975, a scheme initiated to provide primary healthcare to children under six years of age and to their mothers.

Principal Issues

An analysis of the prevailing situation under the four thematic areas selected for intervention was done through primary and secondary data in the baseline survey. This method revealed crucial insights in examining the principal problems at the ground level situation,

For instance, in the first thematic area of 'Health and Nutrition,' the overall state in all the districts were poor. Institutional and systemic challenges persisted with low capacity of the target community to effectively access the services. Accompanied by low institutional deliverance, except for Khunti, the per cent of institutional deliverance was less than 60 per cent in the primary investigation. This defied the target of achieving 100 per cent institutional delivery by 2015 as illustrated under the Millennium Development Goals. Low level of support in Janani Suraksha Yojana (JSY)⁶ observed mainly in Sahebganj where the incidence of poverty was very high. Moreover, despite the presence of Anganwadi centres in all districts, the services remained defunct. Except for Dumka, the rest of the three districts lagged in providing necessary and basic services to the beneficiaries. Similarly, poor information dissemination formed another roadblock in ineffective service delivery. For instance, it was found that ignorance towards schemes like RSBY⁷ and VHND⁸, reflected in poor registration and unawareness regarding the available entitlements. Besides, IEC activities were visibly neglected. The information regarding the overall schemes and programmes was obtained through neighbours, friends and others with led to inefficient information dissemination.

In the area of Education, discrepancy was found in the primary and secondary data. However, common conclusions were drawn to highlight that gap between the quantity and quality of services

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6. Janani Suraksha yojana, 2005 aims to reduce neo natal mortality and maternal mortality by promoting institutional delivery among the poor and maternal woman
 7. Rasht Riya Swarthy Bema Yokan, is a scheme let out in 2008 that aims to provide health insurance to the BPL category people.
 8. Village health nutrition day, is organized every month where ASHAs, AWWs and other mobilise villagers, children, and women to assemble at the nearest Anganwadi Centre.

provided with the enrolment level. Services, like books, scholarship, and the frequency as well as the quality of mid-day meals suffered especially in Dhumka (39.4 per cent). There was also a gap about the Right to Education Act (RTE), for the target community, where off the record, people believe in certain kind of corporal punishment which could be awarded to children to keep them disciplined. This has been a deterrent in maintaining higher attendance, quite contrary to the RTE.

Access to MNREGA was also hampered as a result of low level of awareness in Sahebganj and Pakur. Alarming, in the context of Job demand, low demand for job was witnessed in all four of the districts. Such a pattern indicated low levels of awareness which further contributed to people failing to demand in front of the government officials. Delayed in wage and low job mobilisation in terms of submitting application created disrepute in the community (except for Khunti, with a 104 per cent registration)

With respect to Entitlements, barring gaps between the primary and secondary data, Public Distribution System (PDS) infrastructure presented a satisfactory picture in the four study districts. However, an in-depth analysis of the primary and secondary data of districts shows that infrastructure forms an insufficient criterion to assess the status of Fair Price Shops, (FPS). For instance, Study showed a gap regarding the ownership of ration cards. According to the primary data, only 36 per cent families in Sahebganj and 34 per cent in Pakur have stated to own ration cards. Access to PDS, shows a gap in information and lack of procurement in majority of the districts. Moreover, during the interaction with the people, it was confirmed that corrupt practices in weighing and providing less than the actual amount was being reported. There was a further information gap among samples in all the districts regarding the operation of Fair Price Shops.

The level of awareness also showcased the level of negligence, which was high between 5 to 10 per cent and restricted to a focus on the rule that the RTI act provides information with demand within 30 days. In all, two cases in Sahebganj and Dumka district and one case each in Pakur and Khunti have been reported as filed under the

RTI. However, the processes remained unfinished, as the applicants had no knowledge about the provision of appeal and could not do so, on the basis incomplete information. Lastly, the result of the baseline survey on the last thematic concern taken under the study showed that the Pragya Kendras which had been launched years ago to promote e-governance in the state continues to be in launching phase. Despite wide-ranging services are offered at these Pragya Kendras, lack of awareness among the people leads to no utilisation or marginal utilisation of services.

Objectives

The overarching objective of the Welthungerhilfe's project was poverty reduction through good governance. The project aimed to enhance capacities of functionaries and public service providers in four blocks in four districts of Jharkhand for better service delivery, transparency and accountability in education, health, nutrition, and rural employment. Secondly, developing and promoting innovations/ best practices related to disseminating information, participatory processes as well as Management Information System (MIS) was a core objective. Furthermore, another core objective was to activate and empower local self-governance bodies (Gram Sabhas, Panchayats, Panchayat committees, SMCs) and youth leaders to improve citizen participation, planning, management, monitoring and performance audits of public services.

Therefore, the initiative had adopted a multi-stakeholder approach involving all key role players in addressing vital gaps in public services and information dissemination. The project was executed with a belief that the community mobilization should happen within an innovative framework, so that it is systematically implemented in the field to give the desired results.

Project Methodology

WHH along with its local implementing partners undertook various activities for different thematic areas such as health, nutrition, education, and livelihood in Jharkhand. The baseline study was designed to provide a map covering the ground zero situation.

The sample consisted of 50 villages belonging to one block, in each district. District Kunti with Block Torpa, District Sahebganj with Block Barhet, District Dumka with Block Jama, District Pakur with Block Littapara formed a total number of 200 villages in all the four districts. Since, 'households' was selected as the basic unit of the study, to maintain homogeneity, Stratified Random Sampling method was adopted to overcome any distinctiveness from the four districts. Data was collected from primary and secondary sources. The primary sources used were the interview scheduled on factors such as awareness, attendance in school, quality and quantity of services, among many others. A combination of both, structured questionnaire for the Household (HH) survey and semi structured questionnaire for the Focus Group Discussions (FDGs) were used.

The approach used by WHH resonates with its larger aim of enabling people to help themselves. Easy information dissemination was propelled by using participatory tools and face to face interaction through creative interaction by using nukkad nataks (street plays) and community radio. Effective communication mechanisms had been evaluated by the surveys to conduct Social audits with other stakeholders. Overall, the approach focused on creating a Constitutional mandate for the Community-based organisations (CBOs) to sustain effective functioning in key areas of Health and nutrition, education, and rural employment.

Programme Implementation

WHH intervention consisted of training people as well as developing skills of Community Based Organisations (CBOs) to work cohesively in ensuring timely service delivery. Innovative programmes and tools were implemented to constitute a wider framework that could encompass maximum stakeholders to support the intervention. Secondly, to ensure maximum participation by the beneficiaries, creative tools were incorporated which could be easily comprehended by people and thus be inclusionary in nature.

- *Community Monitoring*

The Village Health Sanitation and Nutrition Committees were trained to work with the Pictorial Assessment of Village

Health and Nutrition Day. A tool was deployed that helped committee members orient towards monitoring and tracking of health and nutrition-related services available in the village. The pictorial assessment strengthened community participation in turn, by providing an easy grasp to monitor for the women and children. This enabled front line workers to mobilize the community, monitor the services and identify the gaps more effectively. Moreover, this exercise had generated interest among community members, who can now monitor the services they are provided and act on experiencing an irregularity of services. For example, the community can watch, what their children are being fed at the ICDS centres or in schools.



- *Innovative Participatory Tools*

Innovations related to dissemination of information, participatory planning and monitoring were adopted under the initiative. These included Participatory Learning and Action (PLA) on mother and newborn care, participatory School Development Plan, and Micro Planning Flip Book. Before the project rolled out, it was observed that ICDS and Accredited Social Health Activists (ASHAs) focused almost entirely on a basic service provision, but neglected preventive health and behavioural change, due to missing capacities and lack of focus by the management. The PLA showed how effective a health extension could be implemented and up-scaled. PLA piloted in 140 villages of the project area with

ASHA workers, adopted by the state government and was subsequently replicated to the entire state.

- **School Management Committees (SMCs)**
For all the SMCs have been known to exist only on papers, and there was no consistent approach to engage the SMCs in a meaningful process towards improving the performance of the school, both in terms of quality and access to services. Through School Development Plans, the SMCs can assess not only the enrollment of children per year, but also the requirement of infrastructure and human resources for the schools. Around 2500 SMC members were trained on School Development Plans and the RTE over the period of 4 years. Mobile based Baseline and monitoring happened in 1287 schools in four blocks, covering all four districts.
- ***Micro Planning Flip Book***
Developed in consultation with experts on MGNREGA (Mahatma Gandhi National Rural Employment Guarantee Scheme), the Micro Planning Flip Book, a user's tool helped prepare and implement participatory micro-plans besides providing information and access to the government scheme. Intensive promotion and application of such a tool can become a game-changer for MGNREGA as people will not only gain information but also will be able to have an impact over the service delivery processes too. MGNREGA community monitoring tool has been established in 100 villages, 25 in each block of the four project districts.
- ***'Mobile for Mothers' Mobile App***
This application helped ASHAs record the health parameters of pregnant women until their safe delivery. The App included Management Information Systems (MIS) for advocacy as well as Facility Audits on themes such as health and education, conceptualised, developed, tested, and rolled out across the intervention areas. This tool helped in mobilizing community as well as in expediting the service delivery processes.



- *Capacity Building of CBOs*

This approach focused on the community-based CBOs having a constitutional mandate like School Management Committees, Village Health Sanitation and Nutrition Committee, Gram Sabha, ASHA workers and so on. The CBO members went through capacity building practices on the above-mentioned participatory tools, their roles, and responsibilities. The impulse behind strengthening the CBOs was based on recognition of sustainable community participation as being organized. It was witnessed that due to role of CBOs people started actively taking part in the micro-planning processes at the village level, whether it is health, education, MGNREGA or in general Gram Sabha or village assembly.

- *Creating Volunteers Base*

Other than information dissemination and capacity building of CBO members, it is also essential to develop a community resource pool. In the project areas of Jharkhand, WHH and partners mobilised more than 1000 volunteers (in 200 villages), who were trained on how to access public service schemes. In each village, there were two Soochna Mitras or Information Champions positioned, who worked on a voluntary basis. They not only provided information on the schemes but also helped people with the application

process. The idea was for the people to easily approach them on the basis of their requirement. Similarly, more than 600 community volunteers had been capacitated, and in turn, they facilitated the integrated village level micro planning processes.

- *Citizen's Report Card (CRC)*

The CRC was designed as a tool that was adopted in the project to measure the quality and accessibility of services. By systematically collecting regular feedback from citizens on availing public service schemes, the Citizen Report Card provided a basis for all the stakeholders to engage with service providers to improve service delivery.

- *Social Audit*

The Social Audit mechanism was adopted for MGNREGA and ICDS services in collaboration with the state Social Audit Unit, Jharkhand. The survey tool was jointly developed and executed by WHH's partners and the local government.

Implementation Outcome

The implementation using tools and programmes started from the results established in the baseline survey, aimed at a benchmark set through the ground zero evaluation. Till the end of the 4th year of the intervention, a total of 198 villages were experiencing Community Monitoring through the intervention of the Village Health Sanitation Committees in Khunti, Dumka, Pakur and Sahebganj, out of which 148 were actively involved in monitoring. The PLA process piloted in 140 villages of the project area with ASHA workers which was further adopted by the state government and was subsequently replicated in the entire state. Around, 2500 SMC members were trained on School Development Plans and the RTE for four years. Furthermore, the Mobile-based Baseline and monitoring happened in 1287 schools in four blocks, covering all four districts. Lastly, the MGNREGA community monitoring tool had been established in 100 villages, in 25 in each block of the four above mentioned districts.

Assessing Interventions through the Citizen Report Card (CRC)

For the quality and accessibility of services, a feedback survey was conducted of 20 per cent of the 200 project village target. The final Sample survey conducted was robust and covered closely to the baseline survey. The final sample survey (1040) was around 80 per cent of the sample size intended in the Baseline survey (1400). The average household size taken for all end line evaluation was 5.53 units with per cent of BOL households consisting of a 65.8 per cent of the population of the four districts. The CRC for all the schemes and programmes, was collectively mapped for the four blocks and four districts, Barhait(district Sahebganj); Littipara(district Pakur); Jama(district Dumka) and block Torpa(district Khunti).

The CRC (Annexure 1) for the impact of the interventions undertaken by WHH on overall MNREGA was evaluated on a number of indicators. The important one can be summarised as, the CRC showed a 91.2 per cent of respondents who were now aware about MNREGA as a scheme, followed by 81.5 per cent households participating in MGNREGA Gram Sabhas in the last 12 months. Further, with a 0.1 per cent households only having received unemployment allowances and only 2.8 per cent households having 'NO' pending wage payments. After the interventions, a 96.4 per cent of the job card holders had their job cards in their own custody. In the area of worksites facilities, 85.3 per cent of the worksites had drinking water facility now as compared to only 19.2 per cent earlier.

The CRC for the impact of interventions in the area of ICDS showed that the average number of days of functioning of an Anganwadi as 23.1 days. The CRC also revealed that in terms of services delivered by Anganwadi, 98.4 per cent of services provided in the area of giving vaccination with referral to sick children to health care at 43.2 per cent. Supplementary nutrition had variants of understanding, 80.2 per cent supplementary nutrition to children and 81.4 per cent nutrition service delivery was being given to women. Where 60 per cent of the services constitute counseling of women on health and nutrition, 45.9 per cent counseling was given to the adolescent girls. Services were also delivered on Village Health Sanitation and Nutrition days, recording 95.8 per cent of services

on vaccination, and 93.9 per cent registration of pregnancies. Other services, such as distributing ORS, Zinc packets at 48.7 per cent and distribution of supplementary nutrition stood at 71.1 per cent. The vaccinations administered by the Anganwadi also recorded 88.8 per cent B.C.G vaccinations, with 87 per cent of vaccinations delivered for Polio. The percentage of pregnant women who received TT injections at the Anganwadi and percentage of women registered at the local Anganwadi was 98.3 per cent and 99.2 per cent respectively. In terms of spreading awareness, 90.2 per cent of the Anganwadi were providing learning material to the children regularly. Likewise, 85.8 per cent of the children received supplementary nutrition at the Anganwadi in the intervention areas.

Under the thematic area of Health and Nutrition, a CRC was also prepared to record the changes in benefits received under the National Health Mission. The key performance indicators included the level of awareness with respect to different schemes. 24 per cent of respondents had heard about Janani Shishu Suraksha Karyakram. 45.1 per cent of the respondents had heard about Rashtriya Swasthya Bima Yojana, (RSBY) whereas only 0.9 per cent respondents had heard about Matritwa Labh Yojana. With the high number of respondents knowing about RSBY, 16.8 per cent of the household had the RSBY cards. With more contribution to the Village health and nutrition day, participation of 75.9 per cent from the households was witnessed. Within the National Health Mission CRC report, it displayed that 73.8 per cent of women in the four districts of Jharkhand opted for institutional delivery; this entailed that a 52.1 per cent of institutional deliveries for which amount stipulated under the (JSY) was paid.

The WHH intervention also had significant changes in few indicators under the thematic area of education. Under the cover of Sarva Shiksha Abhiyan/RTE, the CRC showed only 88.3 per cent school-going children in the 6-14 age group who attended government schools whereas 11.7 per cent of school going children in the same age group attended private schools. Another observation accounted for the reasons of absenteeism among irregular students

in schools. 38.2 per cent of the students missed school due to domestic work or compulsions of earning livelihood, followed by finding teaching in school not interesting, being taken as the performance indicator. Another key performance indicator, taken into consideration was the relative availability of key facilities, services, and essential arrangements in schools. 92.1 per cent of Mid-day meal facility was available in schools besides 87.3 per cent of the facility was given as free uniform or money to purchase uniform in the 4 districts. Infrastructural wise, only 6.3 per cent recorded as representing separate classroom for every class.

In the last thematic area, the CRC recorded the outcomes of the programme intervention under three major headings. First, under the CRC report on National Food Security Act, entitlement such as a PDS was assessed. For instance, percentage of households having a PDS shop located within their village was 41.1, followed by percentage of respondents claiming to know their entitlements related to ration shop was recorded at 74.6 per cent. On further interaction, it was noted that 72.4 per cent respondents were satisfied with the behavior of the PDS dealer.

Similarly, through reading the key performance indicators, the status of Pragma Kendras was observed by using the tool of CRC. With respect to awareness, 73.6 per cent of respondents had heard about Pragma Kendra, out of which 44.4 per cent respondents had visited the same. Conclusively, an escalating 93.6 per cent of respondents identified Pragma Kendras within their Panchayat, and were aware about the programme. Likewise, entitlements such as claiming through Right to Information, 37.1 per cent respondents had heard about the Right to Information Act. The commonest source of information, emerged to be Mass media in general (newspaper, radio, TV among others). The percentage of households, who tried seeking information using the RTI, was 5.4 per cent. A total of 97.4 per cent households were satisfied with the quality of information received among those who received information. However, 26.8 per cent households had to approach appellate authority to get information among those who sought information using the RTI Act.

Project Limitation and Key Lessons

The initiative taken by WHH in Jharkhand indicated existing lack of awareness about public schemes and programmes and therefore aimed at addressing the same by an approach to capacitate people by building pressure on the government through a demand-driven approach. However, the intervention underwent challenges in implementing programmes and collecting samples on the field. Jharkhand as a state experiences severe administrative constraints due to the Naxalism affected areas. Forest areas that are under Naxal influence are difficult to cover under survey reach and adversely affect the social infrastructure besides the economic cost at risk. Resultantly, this also led to staff attrition in monitoring as well as conducting the designed programmes in remote areas in Jharkhand. Another issue faced during the implementation was the change in the government programme and policies. Such revisions were difficult to put across the people in the villages, who already had little knowledge about the existing schemes and programmes. Likewise, Assembly and Panchayat election too caused delays in the implementation phase. Moreover, Cultivation time also kept the respondents' busy foregoing time for community participation.

The key lessons discovered in the study were put forth as the road ahead for the implementation process. However, a few lessons remain the same and need to be continued to replicate similar interventions. In the IEC intervention, a collaboration with government is necessary to ensure fuller utilisation of information. Usage of innovative methods should be used to disseminate information. A key lesson in the study is the idea to make community-level collectives at the village level, as well as collaborate with local institutions such as PRIs and other bodies, to ensure effective deliverance of services at the local level. Training should be implemented for PRI functionaries so that they are accountable and discharge their duties well. Overall, consultation with the government is crucial to discuss potential problem areas as well as to assist in the capacity building of the government. Correspondingly, a key lesson remains, to launch systematic advocacy at the state level with stakeholders like bureaucrats, lawmakers, politicians, media persons to weed out

operational hindrances in the programmes by encouraging for policy changes.

Conclusion

A decentralised form of governance need not guarantee an even, equitable, and an efficient service delivery of goods and entitlements. At the end of the spectrum what is important is the conviction in seeing the citizens as part of the democracy who contributes in designing a decentralized, inclusive governance. WHH through the initiative exhibited the uneven and sociopolitical parameters of the process of decentralisation. WHH through the project intervention emphasized on capacity building of both, the government bodies to adapt to the need of the people as well as the focus on citizen capacity building to efficiently grasp the results of the formulated policies and schemes. A key innovation illustrated in the study had been the use of innovative tools which further added in deepening the benefits through a participative democracy.

Annexure 1

| Initiative for Transparent and Accountable Governance Systems in Jharkhand | | | |
|---------------------------------------------------------------------------------------|-------|----------------------------------------------------------------------|-------|
| Citizen Report Card | | | |
| Name of Programme | | Mahatma Gandhi National Rural Employment Guarantee Act | |
| Names of Blocks & Districts | | Barhait (Sahebganj); Littipara (Pakur); Jama (Dumka); Torpa (Khunti) | |
| No. of households surveyed | 1040 | Sample population | 4687 |
| Sample particulars | | | |
| Average household size | 4.53 | Per cent BPL households | 65.8% |
| Per cent SC households | 7.4% | Per cent Christian HHs | 28.4% |
| Per cent ST/ PVTG households | 73.0% | Per cent Hindu HHs | 64.4% |
| Per cent BC households | 18.5% | Per cent Muslim HHs | 2.1% |
| Per cent HHs of other castes | 1.2% | Per cent HHs of other religions | 5.1% |
| Key Performance Indicators | | | |
| Per cent respondents who had heard about MGNREGA | 91.2% | | |
| Per cent households with job cards | 67.2% | | |
| Per cent households having worked in MGNREGA in the last 12 months | 28.8% | | |
| Per cent households having received unemployment allowance | 0.1% | | |
| Per cent job card holders who had their job cards in their own custody | 96.4% | | |
| Per cent households participating in MGNREGA <i>gram sabhas</i> in the last 12 months | 81.5% | | |
| Per cent households with NO pending wage payments | 2.8% | | |
| Per cent households who demanded work during the year | 23.3% | | |
| Per cent households with job cards with names of members added during the year | 8.9% | | |
| Average no. of times work was demanded by a family in the last 12 months | 2.8 | | |
| Average no. of days of work demanded by a family during the year | 33.2 | | |
| Average no. of times receipt was issued against work demanded in the last 12 months | 0.9 | | |
| Average lag-time (no. of days) in work being made available since demand | 21 | | |
| Average no. of days for which work was made available | 29.3 | | |
| Average no. of person-days for which work was made available | 43.7 | | |
| Average no. of person-days for which full payment of daily wages were received | 39.0 | | |
| Average lag-time (no. of days) in release of payment | 25.4 | | |
| Per cent worksites with key facilities | | | |
| Drinking water | 85.3% | First Aid kit | 53.8% |
| Crèche facility for small children | 19.2% | Place to rest in the non-working hours | 42.0% |
| Muster roll | 62.2% | Daily measurement of work | 36.5% |
| Notice board related to work | 49.0% | | |

Project Factsheet

| | |
|---------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Project Implementing Agency(s) | Welthungerhilfe |
| Project method(s) | PPS sampling method; participatory approach, multi-stakeholder engagement |
| Stakeholder(s) | Teachers and headmasters of 348 primary schools, 110 middle schools; Health Activists (ASHAs) & Auxiliary Nurse and Midwives (ANMs) of 92 Health sub-centres, staff of 10 Public Health Centres and 681 Centres of the Integrated Child Development Services (ICDS) and staff of line departments; 76 Panchayats, 348 School Management Committees (SMCs) and 76 Village Health and Sanitation Committees (VHSCs), |
| Site/ Field (Exact Location) | Four Blocks in four Districts: (1) Barhait Block of Sahibganj District, (2) Jama Block of Dumka District, (3) Littipara Block of Pakur District and (4) Torpa Block of Khunti District |
| Duration | January 2014- December 2018 |
| Project Partner(s) | Badlao Foundation, Pravah, NEEDS, LEADS and EKJUT |
| Contributing Donor(s) | European Union |
| Thematic Area(s) | Health and Nutrition, Education and Rural Employment Social Security schemes |
| Organisation Contact (web link) | A-3, Soami Nagar, New Delhi -17 |

Promoting Access to Entitlements by Strengthening People's Capacities

*ACTED's Strategizing People's Capacities
in Backward Districts of North East India*



Abstract

This case study presents a project implemented by ACTED in partnership with North East India Committee on Relief and Development (NEICORD) and Public Affairs Centre (PAC) in key remote district areas of Northeast India. The Study provides ground examples of how to engage local communities, including the private sector, in social accountability and awareness-raising processes for better public services for local communities, and that too in North

East part of India. In particular, it highlights two components of this project that aimed to engage local communities to improve access and quality of public services.

Service users were involved through two complementary social accountability tools, namely the Citizen Report Card (CRC) and the Community Score Card (CSC). Through these tools, service receivers were able to provide feedback directly to the service providers, even at the time of face-to-face meetings in the case of the Community Score Card. This case study sheds light on the differences between these two social accountability tools, how communities of Northeast India were involved in these, and why both these tools were used in ACTED's project.

While ACTED's project was built on local initiatives, it also relied on innovative approaches, including that of working with the private sector to provide access to information on public or government schemes. The second part of the study introduces the concept of Common Service Centres (CSC), an integral component of this project with 24 micro-entrepreneurs across Northeast India. These micro-entrepreneurs were provided with small grants for enhancing their existing businesses to become Common Service Centres. The presentation of the service centres is illustrated by a Case Study with two of these service centres, highlighting what these entrepreneurs have delivered for their communities. Finally, the study suggests recommendations for further improvement in service quality and delivery pertaining to public schemes and welfare programmes for the wider community.

Keywords: Community Score Card, Citizen Report Card, Public Services, Social Accountability, Common Service Centres

Introduction

Between January 2014 to March 2018, ACTED and its implementing partners, the North East India Committee on Relief and Development (NEICORD) and Public Affairs Centre (PAC), implemented the project entitled Promoting Access to Entitlements by Strengthening People's Capacities in some remote and backward districts of Northeast India. The project covered 232 villages of

Northeast India across Ribhoi district in Meghalaya; Wokha district in Nagaland; and Cachar and Goalpara districts in Assam.

While Northeast India makes up only four percent of India's population but it comprises of different ethnic minorities, coupled with geographical isolation from the rest of the country and with extremely limited connectivity. This region is also excluded from policy-making and outreach of mainstream service deliveries. This has led to political fragmentation, as well as serious development challenges in this region since the partition of India. Development has been further hampered by the central government's concern over the security situation of the region. The lack of effective, citizen responsive and centric access and delivery of critical public schemes and welfare programmes has further deferred the outreach.

In this context, and through this project intervention, ACTED worked on the issues around promoting access to quality public services for local communities. It particularly focussed on improving the access to entitlements of public schemes specially for the excluded and vulnerable population by enhancing their information and knowledge about various provisions entitled to them. The project was implemented following a three-tier/stage approach: 1) Recommending the demand for improved service delivery through a set of activities aiming at enhancing the knowledge of beneficiaries regarding their rights and access to public services; 2) On the supply side, improving the quality of public service delivery through building the capacity of service providers; and 3) On accountability, promoting the surveillant role of civil society and encouraging dialogue, joint review and planning between stakeholders.

Beyond these three key objectives, the project overall aimed at improving access to entitlements of public schemes for vulnerable populations by enhancing the accountability of public service providers. The project also intended to enable selective local entrepreneurs to become Community Service Centres and spread information on public schemes. In achieving so, involvement and commitment of a wide range of actors like government officials, civil society, and the private sector through a multi-stakeholder approach was highly required and recommended. The project also

directly involved civil society organisations, self-help groups, citizen leaders, village volunteers, community members, journalists, citizen reporters, media organisations, micro-entrepreneurs, private service providers/companies, government officials, and PRIs/VC members. As a project final outcome and impact, it could contribute to improving delivery of the selected public schemes down at the village level, at peoples doorsteps.

Background and Description

Being both marginalised and geographically isolated, the people of North East India face major constraints in seizing social and economic opportunities to improve their lives and women. The indigeneous communities often bear the brunt of the socio-economic disparities that hinder equal access to information and opportunities to participate in development processes. Realising this, ACTED along with its implementing partners, the NEICORD and PAC, implemented the project with the objective of promoting access to quality public services for local communities across 232 villages in Northeast India. Mountain specificities of inaccessibility, fragility and marginality creates several challenges in North East India and in the hope of improving this the project implemented specific schemes to improve access to basic services regarding health, education or housing. Yet these schemes are often obscure to the people who live there, especially since they speak a different language from the rest of the country. So, the project aimed to bridge the communication gap for better access to public services and besides raising awareness, ACTED also strived to address the issue of service quality and give a voice to service users.

The project focused on 10 key public schemes and services from the Central Government, targeting those most relevant to the development of the communities of Northeast India, mainly related to health, education, livelihood, food security, women & child development, rural development, and agriculture. These schemes were: Janani Shishu Suraksha Karyakram (JSSK); Integrated Child Development Services (ICDS); Indira Awaas Yojana (IAY); Mid-Day Meal (MDM); Mahatma Gandhi National Rural Employment

Guarantee (MGNREG); Rashtriya Krishi Vikas Yojana (RKVY); Nirmal Bharat Abhiyan (Total Sanitation Campaign) (NBA/TSC); Rajiv Gandhi Grameen Vidyutikaran Yojana (RGGVY); National Social Assistance Programme (NSAP); and Targeted Public Distribution System (TPDS).

In order to improve entitlement access to public schemes, the project aimed to follow a multi stakeholder approach and involved different individuals as well as organisation both public and private. The project focused primarily on the most remote, marginalised people and communities, women and socially excluded groups, taking into consideration their specific needs and constraints in accessing public schemes. Through targeted audits and feedback mechanisms, such as the Citizen Report Card (CRC) and Community Score Card (CSC), their specific needs and constraints were used as a reference for designing and implementing other activities, in particular the training of service providers and the content of District Action Plans (DAP).

Some of the activities conducted in this project included: surveys on access to information on public schemes and service delivery through Citizen Report Cards (CRCs) and Community Score Cards (CSCs); the development and dissemination of a Service Provider Handbook; social inclusion workshops for service providers; a capacity and constraint assessment of officials at District, Sub-division, Block, and Panchayat levels; advocacy meetings, in coordination with civil society organisations, on improvement of public schemes in line with findings of the various assessments, with relevant officials at different levels; multi-stakeholder audits of planning, budgeting, implementation, control, evaluation, and grievance redressal mechanisms of key schemes from district to village levels in each target district; the establishment of district and regional forums for participatory and consultative review of planning, implementation, and budgeting of key schemes; multi-stakeholder workshops on strengthening and improving RTI and grievance redressal mechanisms at village and district levels; tailored training for selected civil society organisations and Citizens Leaders on organisational development and advocacy; an information

campaign conducted through SMS, media programmes, and door-to-door visits and support.

Many of the above-mentioned activities were implemented subsequently to initiate field research conducted through social accountability tools. The findings were used to advocate for better service delivery and to adapt the project activities to effectively address the gaps identified through the accountability tools.

Principal Issues

The initiatives taken up by ACTED were originated from two main issues. First and foremost is the lack of awareness among the marginalized people in access and utilization of public schemes and services. Secondly, to encourage demand for improved service delivery and to boost up innovative approaches at the local level by transforming few selected micro entrepreneurial ventures into Community Service Centres.

In order to encourage the demand for improved service delivery, different types of activities were implemented in ACTED's project to enhance the knowledge of beneficiaries regarding their rights and access to public services, as well as on the role they can play in demanding accountability from service providers. This case study aims to provide an overview of two social accountability tools used in this project, and the results that came through these tools. Moreover, this study will also examine innovative initiatives undertaken in this project to involve local communities, including the private sector, for disseminating information on public schemes.

Objectives

The overall objective of the project was - To improve the access to entitlements of public schemes for vulnerable populations by enhancing the accountability of public service providers.

To bridge the information communication and services gap by supporting micro-entrepreneurs in transforming their platforms into Common Service Centres and to disseminate useful information about the targetted schemes.

The specific objective of the project was -To engage local communities, including the private sector, in social accountability and awareness raising processes for better public services in remote and backward districts of Northeast India.

Project Methodology

The project delved on social accountability, ways and means to enable improvement in quality of services delivery. It relied on the use of social accountability tools for citizen-driven accountability measure to assess, monitor, and evaluate service delivery. Two key tools used in this project were the Community Score Card (CSC) and the Citizen Report Card (CRC), which are often used by various non-governmental and international organisations across the world in projects aiming to improve the quality of public services. Both tools are qualitative diagnostic tools for identifying areas for improvement amongst service providers.

Understanding the Difference and Complementarity of CSC and CRC

Although both the CRC and CSC aim to collect feedback on the quality of public services, each follows a very distinct methodology. In order to understand their singularity and complementarity, one should understand the core aspects of each tool and what makes them different yet complementary.

a) *The Community Score Card (CSC)*

The Community Score Card provides the opportunity for citizens to analyse a particular service they receive based on their personal feelings, to express dissatisfaction, or to provide encouragement if good work is done.¹ The CSC is a participatory process for which data are collected through focus group discussions rather than from individuals separately. In this method, both service users and service providers evaluate the services by providing scores based

1. Khadka Kedar and Bhattarai Chiranjibi: Sourcebook of 21 Social Accountability Tools, Program for Accountability in Nepal (PRAN), World Bank, Nepal, February 2012, Accessed on: 9.5.2019, see: <http://siteresources.worldbank.org/PUBLICSECTORANDGOVERNANCE/Resources/285741-1233946247437/21SAToolsSourcebook.pdf>,

on their feelings and perceptions about the quality of the service delivery. Scoring is done by the service providers and service users in separate groups, followed by a joint, collective analysis and discussion during face-to-face meetings to seek improvements in the services. As such, the CSC gives communities the opportunity to interact directly with the service providers, and vice-versa, thereby providing a platform for direct advocacy by the communities towards government agents. Listening to each other raises the feeling of mutual respect and also plays a significant role in forming consensus for solutions aiming to improve access to and quality of public services.

b) *The Citizen Report Card (CRC)*

The Citizen Report Card is a method of providing detailed feedback to service providers after evaluating the experience, observation, and feelings of citizens through a participatory survey method. The CRC is primarily a survey instrument under which data are collected through questionnaires, at the individual or household level. Through a census method, a contact is established with every service user so that service-related information can be collected. In the CRC process large numbers of citizens are involved and so this tool is much more time-consuming but it is more precise than the CSC. While the sampling method for the CRC ensures generalisation of larger trends in the population through statistics and quantitative data, the CSC allows for qualitatively richer data as it rigorously captures local context in much detail. Additionally, while the CSC methodology emphasises community empowerment, the CRC does not allow for strong interaction and engagement with the community. It relies more heavily on statistics for a scientific survey approach and provides accurate, unbiased information.² Overall, the CRC is a powerful tool to

2. For further information on the differences between the CSC and the CRC, see: <https://www.internationalbudget.org/wp-content/uploads/MBI-MODULE-5-Presentation-Comparing-CRC-CSC-optional.pdf>, Accessed on: 1.6.2019

express the voice of citizens about the services they receive. However, it is not an opinion survey but rather a scientific and unbiased analysis of citizens' experience with public services, based on qualitative data measured quantitatively.

Programme Implementation

In this project, two CSCs and two CRCs were conducted. The first rounds of CSC and CRC were used as a baseline survey to review the schemes for quality and performance at the beginning of the project. The findings and action plan for follow-up were presented in the form of one District Action Plan (DAP) per district, detailing a set of recommendations and action points for the relevant service providers to undertake. The DAPs also included indicators for measurement of progress, and were used to shape and formulate other project activities such as the information campaign, the multi-stakeholder audits, and the district and regional forums. The DAPs were also giving documents that were revised following the subsequent CRC and the decisions made by the district and regional forums. The second CRC was conducted half-way through the project as a review for taking stock of the progress made. It also contributed to both monitoring and evaluating the activities undertaken as well as to adjusting ongoing or planned activities.

a) Findings of the Community Score Cards

The first round of the Community Score Card was conducted in 2015 in 14 block sites across seven districts to assess and quality of the 10 schemes targeted by the project. A total of 543 community members (including 239 women and 87 people from minority groups) from 200 villages attended Group Discussions to rate the performance of concerned service providers, during which the community attributed scores on a scale of 0 to 5 (5 being the highest level of satisfaction) to each of the 10 targeted schemes. The scores were related to the application/registration/selection process, usage experience, perceived quality of service, and grievance redressal mechanisms. A self-evaluation exercise, during which the service providers in turn attributed a

separate score to their own schemes on the same topics, was then organised with 130 public officials from the relevant service providers, including district and sub-district governmental officials involved in the provision of the 10 target schemes; Gram Panchayat/Village Council members; Civil Society Organisations (CSOs); and Community Based Organisations (CBOs). Half-day face-to-face meetings between service users and service providers were then organised in each of the locations to debate both community and service providers scores, and to agree upon an action plan for the improvement of the schemes. During this phase of performance, rating by the communities in Goalpara and Cachar districts in Assam, scores were attributed separately to each of the 10 schemes respectively by specific target groups: women, minorities, and general population. In all other five districts, scores were attributed respectively by women and the general population, meaning that minorities were not specifically taken into consideration as most of the population in these five districts comes from non-minority groups and their opinions represent those of the general population, which is not the case in Goalpara and Cachar districts. The approach was adopted to ensure that any relevant issues or grievances pertaining to women and ethnic minority groups were properly taken into account and analysed in the CSC. The main goal was to ensure that any response provided by the service providers would address these specific needs.

The first Community Score Card report³ described the identified gaps and the joint action plan per topic, per service, and per district, for the 10 schemes targeted in this project. For example, in Goalpara, one of the issues identified was that the number of doctors in Primary Health Care (PHC) was insufficient to cover the entire population, and as

3. See the first CSC report, Available at: http://radiostud.io/temphost/bps_nei/bootstrapfinal/files/csc/CSC1_Report-2015.pdf, Accessed on: 2.7.2019

a result the District authorities were agreed to advocate with the State for filling vacant positions. Promises were fulfilled, and in the second CSC, it was found that users' satisfaction regarding the availability of doctors increased by 60 percent (from 2.5 to 4 on a scale of 0 to 5). In Cachar, it was noticed that the application form for the Mahatma Gandhi National Rural Employment Guarantee Scheme was not available at the Gram Panchayat offices, and Gram Panchayat authorities were therefore committed to making these forms available. Similarly, authorities upheld this commitment, and users' satisfaction regarding the availability of application forms increased from 0 to 3 between the first and second rounds of CSC.

During the second CSC⁴, it was found that for a particular scheme, progress made in service quality varied significantly from one district to the other. Generally, there had been an improvement in infrastructure and human resources allocated to the implementation of the schemes. Overall, more than 87 percent of the participants reported an improvement in the delivery of the target schemes between the beginning and at the end of the project. However, for some of the schemes such as the Mid-Day Meal (MDM) and National Social Assistance Programme (NSAP) programmes, it was found that service quality needed to be further improved. For instance, respondents reported that they were not satisfied with the quality of meals provided under the MDM scheme, and others reported that they did not receive the correct amount of pensions under the NSAP scheme. Delays in payment of NSAP pensions were also mentioned. One consistent remaining weakness across all target schemes was the grievance redressal mechanism. While there has been a slight improvement in scores related to grievance redress and helplines, this was only true for a few schemes,

4. See the second CSC report, Available at: http://radiostud.io/temphost/bps_nei/bootstrapfinal/files/csc/CSC2_Report-2018.pdf, Accessed on: 27.6.2019

and scores remained generally low. Further, space for users or beneficiaries to share their issues and concerns regarding public service delivery should be focused upon moving forward. Lastly, while the creation of joint action plans and their implementation were rather successful, it is very important to continue this momentum and to continuously engage relevant communities in the feedback process to demand efficient service delivery. This was to be institutionalised, through local CBOs who received support from the project.

b) *Findings of the Citizen Report Card*

The first CRC was conducted in 2014 across seven districts and covered 10 schemes. A total of 2,542 households were surveyed. The report⁵ provided conclusions and recommendations for each of the 10 targeted schemes, revealing that the situation varies from one district to another and from one scheme to the next. The main grievances commonly highlighted by surveyed users were that some of them were not even aware of the existence of certain schemes; some were confused by the lack of clarity of the application processes set up for potential applicants; and others reported bribery, lack of grievance redressal mechanism, and inefficient service delivery as the major bottlenecks to avail scheme benefits. Major district-specific findings of the CRC (scheme wise) included for example the fact that beneficiaries in Chandel (Manipur) and Goalpara (Assam) districts faced problems related to the processing of their applications for NBA/Swachh Bharat Mission (SBM) scheme⁶. On the other hand, in Wokha district (Nagaland) almost all beneficiaries claimed that they had to pay a bribe to get their toilets built.

5. See the first CRC report, http://radiostud.io/temphost/bps_nei/bootstrapfinal/files/crc/ACTED-2015.pdf, Accessed on 11.6.2019

6. A comprehensive programme to ensure sanitation facilities in rural areas with the broader goal of eradicating the practice of open defecation

The findings of the first CRC were then used to develop one District Action Plan (DAP) per district. Each DAP set out the gaps identified for each scheme in the relevant district, and outlined what was to be done throughout the project to address these gaps. It has also provided recommendations on the content of the planned project activities, such as phone alerts, radio and TV programmes, village information campaigns, service provider handbook, and various trainings.

The second CRC was conducted in 2016, for which a total of 2,734 households were surveyed. 200 villages across seven districts were covered. Through this second CRC⁷, it was found that overall awareness of the target schemes increased between the first and second CRCs. As a result, enrolment in the target schemes also increased. It was also found that more beneficiaries expressed dissatisfaction with the quality of the schemes (except for some schemes such as SBM and RGGVY). This may be explained by the fact that the quality of service delivery remains challenging and is still not always up to the beneficiaries' expectations. The finding may also be explained by the fact that more people are now aware of the existence of the schemes, thereby leading to an increase in the number of people able to provide feedback on the schemes' quality.

Other key findings included:

- *IAY*: The main type of houses that were built under this scheme had changed from mud house to brick house, except in Chandel and Churachandpur Districts where mud houses are still common. This is in line with the ambition of the Chief Minister's Rural Housing Mission to encourage a shift from "kutcha houses" (made of mud) to "pucca houses" (solid and permanent houses).⁸
- *MDM*: The second CRC showed an increase in the number of children covered by this scheme, compared to the figures

7. See the second CRC report - http://radiostud.io/temphost/bps_nei/bootstrapfinal/files/crc/BPS_NEI%20Mid-CRC%20report.pdf, Accessed on: 12.6.2019

8. Ministry of Rural Development, Briefing Book - Indira Awaas Yojana, p.2; p.12, 2014. See http://pmayg.nic.in/netiay/Briefing%20Book%20June%202014_new.pdf, Accessed on: 22.6.2019

provided by the baseline CRC. While according to the first CRC, 95 percent of respondent children going to school benefited from the mid-day meals; while this percentage had increased to 99 percent in the second CRC.

- *RKVY*: According to the second CRC, a higher percentage of respondents received High Yielding Variety (HYV) seeds (64 percent), compared to the percentage reported in the first CRC (57 percent).
- *SBM*: Dissatisfaction due to the behaviour of officials dropped from 30 percent to two percent between the two rounds of CRC.

Implementation Outcome

In order to sustain the findings of the CRC and CSC in the long term, the PAC set up a dashboard specifically dedicated to these findings⁹. This online dashboard served as a comprehensive platform that concerned service providers can refer to anytime for better understanding of the issues and to take relevant measures to address the issues highlighted in the CRC and CSC. Moreover, civil society actors, researchers, and the general public could also use this dashboard for their own advocacy and/or research on public services in Northeast India.

The CRC and CSC tools were the backbone of ACTED's project, serving as the basis to advocate for better public services towards service providers and other government officials. Beyond its research and advocacy components, this project also focused on raising awareness and on communicating about public services, including in collaboration with actors from the private sector.

Bridging the communication gap for better public services

While ACTED's project built on local initiatives, it also contained new, innovative components. In one of its innovations it collaborated with the private sector to provide access to information on government schemes. By bringing in an economic perspective, the

9. See www.bpsnei.pacindia.org

project also aimed to achieve financial sustainability for local actors—e.g. by supporting micro-entrepreneurs in setting up Common Service Centres based on business models (see case study below).

With the aim of raising awareness among the population of four districts, the project relied heavily on communication tools to disseminate information as widely as possible. For instance, in an effort to engage the media in the project, 20 dedicated TV and radio programmes were developed and broadcasted to disseminate useful information about the target schemes. A total of 21 fellowships were also offered to local journalists to support the publication of articles in relation to the target schemes by either identifying issues in service quality and delivery or showcasing the benefits of the different target schemes. These journalists informed local communities of their social rights and of governmental initiatives, thereby encouraging demand for effective public services. They also transmitted users' grievances or dysfunctions of some public services to service providers and encouraging them to take corrective measures to improve the service quality. Furthermore, phone-based alerts on schemes were set up, with two million SMS sent to the beneficiaries. In addition, project staff worked in partnership with micro-entrepreneurs of Northeast India to set up Common Service Centres, as illustrated in the following case study.

Case study on Common Service Centres

Co-constructing E-governance with Local Entrepreneurs

Many vulnerable Indians do not know about government schemes or how to access them. To address this issue, 24 micro-entrepreneurs were provided with small grants for enhancing their existing businesses to become Common Service Centres, with the aim of disseminating information on the target schemes and helping community members to apply.

Most of the selected micro-entrepreneurs were previously functioned as Internet cafés or stationery shops. Through this project, they were selected via a grant competition to be the recipients of a grant which is to be used for purchasing computers and other

IT equipment, including printer/photocopier/scanner, as well as electrical items including inverter, battery, and solar panel. With these tools, the Common Service Centres can provide wide variety of services such as IT courses, CD burning, scanning, printing, or digital imaging. It enables Common Service Centres to become much more than just Internet cafés. Through the project, they have become essential community resource points for any information related to the 10 government schemes targeted under this project. Information on public services, entitlements, procedures and offices to go to for applying the schemes, as well as access to e-grievance facilities, were made available by the Common Service Centres. Additionally, they also provided help to potential beneficiaries of schemes for filling their application forms. Converting micro-entrepreneurs into a Common Service Centre also supported and helped them in strengthening their social business.

Overall, after the 24 Common Service Centre owners received training on social schemes covered by the project, as well as on the Right to Information (RTI) Act, they have helped more than 52,385 people to access public services. The Common Service Centres helped in providing information on public services, entitlements, procedures and offices to approach for applying the schemes, as well as access to e-grievance facilities.

How Entrepreneurs Raise Awareness of Public Services in Remote Communities

Jai¹⁰, who was running a Common Service Centre under this project since August 2015, stated: “I have gained more respect and recognition as I am not only running a business but also helping people to know about government schemes and how to access them”. He counted that from August 2015 to October 2016, he had helped 234 people by providing them with important information on social services. After converting his shop into a Common Service Centre, the number of his customers had increased, thereby also increasing his daily earnings, and ultimately ensuring the financial viability

10. All names have been changed.

of his shop. “I am very happy that now people are aware of my Common Service Centre and come for different information relating to the social schemes; it is building the knowledge and capacity of the community, and is also increasing my income up to 15 percent”, said Jai.

Anika has always been an active and engaged citizen committed to serve her community. As an active member of a local women’s group, she actively contributed to peace building initiatives, took part in programmes for women victims of violence, supported youth in developing their skills and career, and raised awareness on AIDS. Yet, she felt she could do even more for her community. That is why she decided in January 2016 to convert her computer and stationary shop in Nongpoh, Ribhoi District into a Common Service Centre. After she took part in the training sessions organised under the project and received IT equipment to set up her service centre, Anika started providing information and guidance to customers visiting her centre to help them in accessing government schemes.

Although the mandate of Common Service Centres within the project is to disseminate information and help people apply for 10 specific government schemes, Anika also helped community members to access other governmental welfare programmes, in addition to the 10 target schemes. For instance, Anika had helped more than 700 people to register online to validate their teaching diploma. She also disseminated information on national scholarship programme to encourage students from Meghalaya to apply. She further provided support to interested students in filling online applications for the scholarships. She also helped new voters to register online on voter list, and guided them in filling application forms for passports, ID cards, etc.

Anika’s Common Service Centre also circulated information from various government departments on the notice board that she had installed so that anyone who passes by her Common Service Centre can be informed of the latest updates regarding government services in the area.

Since the creation of her Common Service Centre, and despite recurrent power cuts that affect the proper functioning of her

business, Anika looked determined to continue to expand the range of services that she provides to her community. More than ever, she was convinced that her service centre is contributing to the development of her community. The exposure she had gained through her Common Service Centre had enabled her to increase her daily earnings, thereby securing an additional source of income.

Project Limitations and Key Lessons

The project was implemented with the support of the European Union to promote better access and quality of public services but in only three states Assam, Nagaland and Meghalaya of Northeast India and that too covering only four districts and within the four districts only 232 villages were selected, though there were equal need to cover more communities and households.

The project felt that the communities of Northeast India need to be continuously engaged both by NGOs and government authorities in the feedback processes to demand efficient service delivery. There must be sufficient scope and space for beneficiaries to share their issues and concerns with public service delivery in real time redressal mode. Discussion with communities and civil society organisations should be a continuous process to ensure that all eligible people benefit from public services and specific emphasis must be put to improve access to services for women, minority groups, and people with disabilities. One of the important key lessons from the project is local NGOs or SHGs and community based organisations can be largely engaged to advocate for improvement in service delivery and train them to enable better access to public schemes. Overall, the sustainability of the activities presented here relies on the dedication and commitment for better public services of all actors involved in these processes.

Conclusion

This project is now completed but it is essential to build on and continue this momentum to ensure long-term sustainability of the activities implemented and presented in this case study. To do so, owners of Common Service Centres should use their knowledge, skills

and equipment provided by the project to continue their awareness-raising services and provide information related to public schemes.

Both service providers and civil society actors should continuously use online dashboard as a tool for improving access to and quality of public services. Service providers should continue to use these findings and to discuss with communities and civil society organisations to improve access to servicesand they should continuously analyse their constraints and weaknesses to take possible corrective actions wherever feasible.

Project Fact Sheet

| | |
|------------------------------------|------------------------------------------------------------------------------------------------------------|
| <i>Project Implementing Agency</i> | ACTED |
| Project Method (s) | Citizens Report Card, Community Score Card |
| Stakeholder(s) | CSO/NGOs; SHGs; CSC micro-entrepreneurs; media organizations, district administrators ,Citizen Volunteers, |
| Site / Field (Exact Location) | Ribhoi district (Meghalaya); Wokha district (Nagaland); and Cachar and Goalpara districts (Assam) |
| Duration | 51 Months |
| Project Partner(s) | Public Affairs Center (PAC), North East India Committee on Relief and Development (NEICORD) |
| Contributing Doner (s) | EU |
| Thematic Area (s) | Social audits, RTI, civil society capacity building |
| Organisation Contact (Web link) | www.acted.org |

Strengthening Community Access to Entitlements with the Assistance of Technology

The 'Soochna Seva' Initiative of Digital Empowerment Foundation in Five Backward Districts in India



Abstract

The Soochna Seva intervention is an initiative of the Digital Empowerment Foundation (DEF) with the support of the European Union. The programme, spread over the sixty-month duration (2014-2018), was spread across India's five backward districts in five States, covering 25 Blocks and 139 Panchayats. The Soochna Seva design evolved as the last mile community based and owned government schemes and entitlement access and delivery programme, covering six critical areas in education, health, livelihood, employment, financial inclusion, and Social Security. The project was implemented with an Information Communication Technology (ICT) based bottom-up and decentralized 'Information Service Model' with local

youth as change agents in the process to reach out and benefit the community. In this entire process, access to schemes information, understanding the availing process, applying the same, submission of entitlement demand and application and enabling the final benefits of schemes for the beneficiaries was the focus. With the technology-based framework including a dedicated mobile application to map and enroll beneficiaries and provide citizen friendly schemes information and processes, the programme helped to reach out to 65,068 households and 2, 60, 274 citizens as beneficiaries over five years. Engaging the local government authorities, enrolling the community in the grievance application and redress process, building the capacity of community and local services delivery agencies and institutions and scaling up the framework with other development agencies have been other highlights of the programme.

Keywords: Social Security, Entitlements, Beneficiaries, Achievements, Soochna Seva, DEF

Introduction

The Project 'Soochna Seva' was implemented across a five years period (from 2014 to 2018) towards serving communities in making them informed and aware of their rights and entitlements with regards to government's schemes and policies. Since its inception, Soochna Seva team had worked to bridge the information gaps in identified communities across 25 blocks in 5 districts in India. Due to the project's intervention, the capacity building of local communities increased to a major extent in regards to the schemes which at one point of time seemed unreachable to them due to multiple hurdles, including lack of awareness, misconceptions, the role of middlemen to name only a few. The project team worked continuously worked towards removing these hurdles. The Soochna Seva Programme empowered underserved communities with their rights, entitlements, grievances and citizen services through last mile connectivity and access, information, and content, digital services, skill enhancement, capacity building, livelihood opportunities, and linkages.

The project, with co-funding support from Wireless Reach of Qualcomm¹, emerged as a citizen entitlement based information services, access and delivery solution based programme developed and rolled out to serve public scheme information services needs of communities, especially in backward districts in India. The programme was launched with an intention of strengthening the Public Scheme information (PSI) delivery and entitlement system to address larger issues of poverty, rural development, social and economic inequality of marginal groups through information empowerment and access to entitlements. This initiative sought to strengthen the governance structure at the district level involving the local public services delivery institutions like the Panchayats, block administrations, grassroots civil society organizations, schools, SHGs, PHCs to effectively deliver critical government schemes and welfare programmes.

The programme developed in 2014 by the Digital Empowerment Foundation (DEF) with the support of the Delegation of the European Union in India sought to enhance capacities of grassroots communities to access and avail information and entitlements in critical areas for their day to day living. It had adopted a multi-pronged approach to the delivery of information services through using ICT and non-ICT tools including mobile camps, toll-free number, SMS newsletter, information vans, Schemes App, and citizen services centres. The programme was implemented in five backward districts of India with very low social and economic indicators. The districts included, viz., West Champaran (Bihar), Guna (Madhya Pradesh), Barmer (Rajasthan), Tehri Garhwal (Uttarakhand), and Ranchi (Jharkhand). The project could make positive dent due to the information and communication model being adopted that has helped in penetrating into the rural pockets and paving the way in bringing substantial change in people's life. The Soochna Sevaks (Information Fellows) visited villages and interacted with locals on spreading awareness about the objectives of Soochna Seva while the

1. Qualcomm Incorporated is an American multinational semiconductor and telecommunications equipment company that designs and markets wireless telecommunications products and services

Soochna Seva Kendras (Information Service Centres) act as hubs for further access to information and helping the people to resolve issues with accessing schemes and entitlements. At the end of the fifth year, the project could evolve out with a low cost sustainable ICT based 'Soochna Seva' model to scale up and replicate at village and Panchayat levels to serve information, entitlement and services needs of local communities at their doorsteps, in a transparent and trusted manner by overcoming the middle level intermediaries and their exploitative 'business'.

Background and Description

Universal access to health care, education and livelihood, and employment opportunities is still a challenge in the national building and growth process of India. Health care access, and access to an adequate level, and access without excessive burden² and the pursuit of quality care and cost-effective is still a challenge and more so in the 250 odd backward districts. The backward districts in India, by all means, are backward in terms of key social and economic indicators. For instance, the 200 backward districts, identified by the Planning Commission of India to implement the NREGA Scheme³ are identified to have special problems⁴. They are the least developed areas of the country comprising mostly marginal farmers and forest dwellers. In many of these districts, poverty has increased despite the consistent focus of several poverty eradication programmes. The Governance has little or no presence in most of these districts⁵. In addition to this, poverty is also one of the prevalent concern in different parts of India. According to the World Bank review, the world had 872.3 million people below the poverty line and India had the third highest number of people living in extreme poverty after Nigeria and Congo

2. HEALTH CARE IN INDIA - VISION 2020 ISSUES AND PROSPECTS R. Srinivasan http://planningcommission.nic.in/reports/genrep/bkpap2020/26_bg2020.pdf

3. NREGA is National Rural Employment Guarantee Scheme is an Indian job guarantee scheme, enacted by legislation on August 25, 2005.

4. The focus five districts under this proposed action project falls within these 200 districts bracket

5. http://nrega.nic.in/Planning_Commission.pdf

in January 2019⁶. On the basis of caste, the poverty in India as out of total population belong to, there is 12.5 percentage of people of Upper Caste, 20.7 percentage of OBC, 29.4 percentage of SCs and 43.0 percentage STs are living in poverty⁷ whereas there are 1.8 million people of India were homeless as per Census, 2011.

The Indian government had launched several schemes to combat the menace of poverty, unemployment, health services but still, these prevails in the country. One of the reasons is the lack of reliable and adequate information and communication channels that have deprived millions in the country from receiving benefits/ entitlements of social welfare programmes in the above critical areas. Poor and weak infrastructure facilities including lack of all-weather roads, lack of information communication technology support in programmes have widened the development deficits. In this context, the “Soochna Seva” initiative by Digital Empowerment Foundation with the support of the European Union (EU) was designed to play an important role as implemented in five backward districts of India. This can be seen as an alternative community based approach to address the issues of poverty, social exclusion, and inequality of marginalized groups through access and delivery of critical schemes information and entitlement gains seeking to demonstrate a positive governance practice. The Soochna Seva action project had been a multi-stakeholders engagement and involvement programme with the programme intervened at the district administration level, and specifically at blocks, and Panchayat level.

The programme deployment was in the form of an integrated information services delivery and citizen entitlement framework in five specified backward region districts. Barmer is the second largest district of Rajasthan which is situated in the western part of the state and forms a part of the Thar-Desert. In Barmer, DEF implemented the Soochna Seva program in five blocks as Barmer, Baitu, Sivana, Dhanau and Kalyanpur. The district population is 2,603,751 where

6. World Poverty Clock, <https://worldpoverty.io/>

7. Working Paper No. 2013-02. Poverty by Social, Religious & Economic Groups in India and Its Largest States 1993-94 to 2011-12, http://indianeconomy.columbia.edu/sites/default/files/working_papers/working_paper_2013-02-final.pdf

male population is 1,369,022 and female population is 1,234,729 as per 2011 census. The district has a population density of 92/km² (240/sq. mi). The average literacy rate is 56.53%. The male-female gap is highest in Rajasthan and in Barmer, it was 57.49 (Census, 2011). Tehri Garhwal is one of the largest districts in Uttarakhand. It is lying on the southern slopes of outer Himalayas. The district had a population of 604,747 of which males were 295,168 and 309,579 were females. The average literacy rate of Tehri Garhwal in 2011 was 76.36%. The total literate in Tehri Garhwal district was 407,994 of which male and female are 227,406 and 180,588 respectively and the Sex Ratio was 1077 per 1000 male (Census, 2011). The district is hilly and most of the population is scattered and residing in very remote areas. There is lack of proper roads, public transportation, and other basic amenities. In Tehri Garhwal, DEF implemented the Soochna Seva program in five blocks namely Chamba, Jakhanidha, Narendranagar, Partap Nagar, and Thauldhar.

District Ranchi is the state capital of Jharkhand. There are more than 60% of the population living in rural areas and depended solely on agriculture and allied activities for their livelihood. About 82% of the households have holdings of less than two hectares with the average holding size being 1.18 ha and only 0.84% of the households have land holdings greater than 10 hectares. According to the 2011 census, Ranchi district had a population of 2,912,022, with the Literacy rate 77.13% and sex ratio of 950 females for every 1000 males. DEF implemented the Soochna Seva initiative in Bero, Burma, Itki, Angara, and Sonahatu, blocks, largely tribal dominated areas and people are mostly based on agriculture and daily wage activities. In Madhya Pradesh, the Soochna Seva programme was implemented in five blocks, namely Guna, Aaron, Raghogarh, Chachora, and Bamori of Guna District. Guna District had a population of 1,240,938 in 2011. This gave it a ranking of 388th in size in India (out of a total of 640). The district had a population density of 194 inhabitants per square kilometer (500/sq. mi). Its population growth rate over the decade 2001-2011 was 26.91%. Literacy Rate of Guna stood at 65.1% and Guna had a sex ratio of 910 females for every 1000 males (Census, 2011). West Champaran is an administrative district in

the state of Bihar and had a population of 3,922,780 (2011 Census), giving it a ranking of 63rd in India (out of a total of 640). The district had a population density of 750 inhabitants per square kilometer (1,900/sq. mi). Its population growth rate in 2001-2011 was 28.89% and the literacy rate was 58.06%. It had a sex ratio of 906 females for every 1000 males (Census, 2011). In this district, DEF had implemented the Soochna Seva project in five blocks namely Baghayi, Ramnagar, Gaunaha, Mainatand, and Sikta.

Principal Issues

The country has undertaken significant policy and programme measures time to time to address the problems and has produced an unrivaled volume of welfare legislation. There are policies and schemes related to education, health, employment, social security, financial inclusion and so on to eradicate illiteracy, poverty, provide good health services, self-employment, and a sound life with social security to each and every citizen. But the problems could not be resolved to a large extent till date due to lack adequate provisions for access to information on different schemes and provision by the beneficiaries/citizens due to rigid services delivery mechanisms, structures, and administrative gaps. Even the beneficiaries are not well aware of the provision/scheme which is meant for them. Among all these reasons, one of the foremost reasons identified is not having timely, reliable and trusted information regarding their rights and entitlements provided by both the central government and state governments. In other words, the lack of reliable and adequate information and communication has deprived millions in the country from receiving benefits of social welfare programs. Thus it can be argued that if the information is power, then this is the missing link that is denying communities to assert and receive their entitlements and benefits.

Objectives

The Soochna Seva programme was initiated with the aim to facilitate and strengthen the last mile access and delivery of public schemes information and benefits for the rural and backward groups

and communities. The program was founded with an intention of strengthening the citizens' capacity in regard to their public entitlements, rights, and benefits.

The broad objective of the Soochna Seva programme was - "To address the larger issues of poverty, social exclusion and inequality of marginalized groups through information empowerment and entitlement gains on public schemes leading towards promoting and strengthening of good governance practices by local administration."

The specific objectives of the programme included:

- a) To facilitate and enable community access and delivery points at village / Panchayat levels of easy, timely, reliable access to government schemes information, documents, and services;
- b) To facilitate the end to end solutions related to access to schemes information, application and documentation processes, and final benefits for the community;
- c) To engage and make aware the community about various schemes, the processes and how to avail those and build their capacities in information and digital literacy to avail online schemes information and resources;
- d) To engage local public authorities to strengthen and improvise their entitlement delivery mechanisms and services for the community;
- e) To demonstrate an alternative community based and owned information and entitlement management towards democratic and decentralized access and delivery mechanism.

Project Methodology

For Soochna Seva the community was the focal point. The local community was engaged on the work, its objectives, and purpose and how the community had to come forward to make it their initiative. In order to manage the communities of the blocks at the district level effectively, in each block, DEF had set up a Soochna Seva Kendra (SSK). An SSK is equipped with desktop, laptops, tablets, LCD, projector, and printer. The main office/Kendra in the district is called 'Hub Office' and the other four are called 'Block Office'. The Hub office

was equipped with a call center facility. Beside this, there was also mobile offices at Panchayat level, which was running by the fellows. The SSKs were used for facilitating all block activities and also used as a center for making the community digitally literate. The Digital literacy, it is believed, was an important and a critical step for the community to understand and demand their basic rights of availing information on various schemes and benefits that have been created for them.

Further, for proper implementation of the programme and dissemination of information regarding benefits provided by the government, the Soochna Seva team had initiated the Call center service in 5 districts with toll-free helpline/citizen call facility is identified as a key project activity component to serve groups and beneficiaries with more openness, decentralized and in ownership mode. This call center facility was helping the citizens to access information on public schemes. Most importantly, this mechanism had helped to reach out to those beyond the target groups and beneficiaries. The Operators guided the callers on schemes and provide further guidance to reach out and avail actual services from Panchayat/block/ district offices. In addition to this a dedicated Mobile App (MeraApp) was created which was having all relevant public schemes information in local language in the critical area of education, health, livelihood, employment, financial inclusion and social security in a crisp, easy and readable manner will serve an important purpose to provide access and gain entitlement services through the access points and other platforms. The App served information to the target group, beneficiaries, and others on regular basis through the Soochnapreneurs. In other words, we can say Soochna Seva have deployment of information services, provide access windows and platforms training and skill development, awareness and advocacy, group mobilization, transparency and accountability measures, progress tracking in beneficiaries availing final entitlements, research and result dissemination; deployment of action methods/ approaches using ICT and non-ICT tools and applications as methods of dissemination of information.

The project supported in having five mobile information and entitlement units in all 5 project districts. The mobile units in mobile vans, equipped with all basic facilities, was to reach out to rural and remote locations in a pre-determined schedules and deliver information, entitlement facilitation and services.



Further, as a part of building capacity of local communities to raise demands, local level Soochna Seva Samitis (Information Committees) were constituted at Panchayat levels with identified active members who were trained to understand the overall schemes and entitlement ecosystems to serve communities. The committees were formed to hold regular workshops, meetings and review of schemes and entitlements and engage local authorities on regular basis.

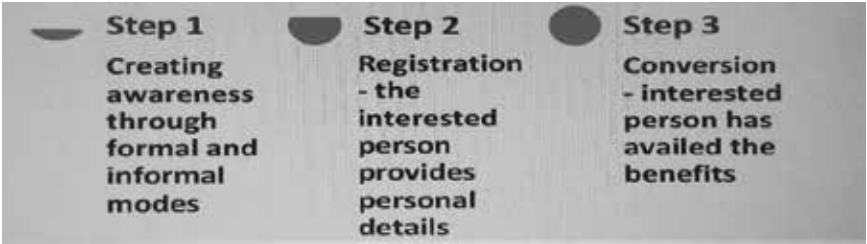
To strengthen supply side of services delivery, engaging local authorities and service delivery agencies was integral to the project. Holding workshops, training program on schemes mapping, IEC design approach, information and communication methods and approaches, content design and dissemination, data management, beneficiary mapping and enrollment, were other aspects of engagement with service agencies. This involved design and following up with a 'Information Entitlement Services Delivery Framework' and using technology.

The focus was also on institutional gap mitigation in terms of strengthening and improving the planning and delivery of schemes and services by local level services agencies like PHCs, Fair Price

Shops, Anganwadi centres. Building the capacities of the Panchayati Raj Institutions (PRIs) and its functionaries in scheme formulations, Gram Sabha meetings in schemes distribution and assessments were conducted as part of the exercises.

Programme Implementation

There were five Panchayats selected in each of the five blocks in each district in Guna, Barmer, Tehri, Garhwal, Ranchi and West Champaran. The selection of Blocks and Panchayat were done with the involvement of stakeholders and partners of DEF. In the programme, the target groups were the beneficiaries including families below the poverty line, women, and youth, unemployed, tribal and minorities, disabled poor citizens, and scheduled caste population. The local schools, public health centers, NGOs, SHGs, women associations, youth clubs, and others are other vital partner stakeholders of the project. During this five year from 2014 to 2018, the staff project had organized different programme which has implemented in the project area. The below illustrated are the key programme activities of the Soochna Seva project which has implemented;



- a) *Scheme Specific Information Communication Design & Dissemination:* On the ground, modes had been developed and used by the ground team to create awareness on the schemes - door to door campaigns, formal and informal meetings, and Yojana Shivirs (Scheme camps). The above model or process had been followed in a pattern. The team began by following a simple process of first creating awareness through formal and informal meetings, workshops, and camps.



- b) *Mapping of Beneficiaries & Enrollment:* After this, Soochna Seva team would map potential beneficiaries for various schemes based on different parameters with the help of 'MeraApp' (Mobile App on schemes). Once mapped, the team registers the names of individuals who are interested and eligible in availing the scheme benefits. Once he/she has availed the benefits, the team then concludes that beneficiaries have availed the benefits through the efforts of Soochna Seva. During this entire process, the Soochnapreneur (Information Fellows) would track the progress of each and every application and 'MeraApp' helps to keep a track of the progress.
- c) *Liaising with Government bodies and elected members:* For proper implementation of the programme, the Soochna Seva team led by the community Information Fellows had initiated the process of establishing an effective relationship with both Government officials and elected members at the District, Block, and Panchayat level. In all the districts, the teams have shared the objective of Soochna Seva and how the team is using it as a model of public service dissemination and delivery. This process had been followed in every district of the programme area. A pattern being followed is regular

and periodic meeting at the Block and Panchayat level with the elected representatives.

- d) *Liaising with Network Groups*: In each district of the Soochna Seva, the team had built a relationship with civil society, NGOs, self-help groups (SHG), ASHA/AWW workers, local stakeholders, and elected representatives. With the first step of building relationships initiated, the Soochna Seva team had been involving them in different program, activities, and engagement with communities.
- e) *Mobile Camp and Road Show*: This strategy was identified to provide channels for awareness, discussions, experience sharing, motivational lectures engaging target groups and beneficiaries on the why and how of availing public scheme information and final entitlements in critical areas of education, health, livelihood, employment, financial inclusion and social security.
- f) *Display boards/wall newspapers*: The display boards (at the block level and at Panchayat level) in various locations were to give greater visibility of schemes and guidelines. The provision of information display through the 'wall' newspaper was to help provide a more accessible window. The wall newspapers were to had updated information on public schemes to serve target groups and beneficiaries and other members of the community within their vicinity/ neighborhood.
- g) *SMS services for target groups and beneficiaries*: Creating SMS communities in all 5 districts involving target groups and beneficiaries was another means to reach out. The Soochna Sevaks were Sending SMS services on public schemes onset time and days which is to help provide information at doorsteps as well as on receiving feedbacks of beneficiaries from information access in terms of entitlements gained.
- h) *SOOCHNA VAHAN (Info Vans)*: The Info Vans functioned as mobile public scheme info access and services delivery platforms. The vans using both non-ICT and ICT tools were to reach out to beneficiaries in Panchayat and villages. The

SOOCHNA VAHANS in 5 districts being equipped with PC, mike, display board, etc. This provision was to engage with focused beneficiaries on tracking gains from the info vans and its services in receiving actual government entitlements.

- i) *Public scheme information handbook/ leaflet*: In this, the team of Soochna Seva had made handbook and leaflet in the local language (Hindi) and circulated among the beneficiaries and villagers to create awareness on different scheme and programs of government.
- j) *Meetings and camps*: In each district of the Soochna Seva, the ground team had organized scheme-wise camps and formal and informal camps to create awareness of the relevant schemes. The team had organized camps on schemes such as Pradhan Mantri Jan Dhan Yojana (PMJDY), camps on Aadhar cards. In these camps, the programme teams had collaborated with elected members, NGOs, network groups. In all the districts, the Soochna Seva field staff did social mapping at the village level where the extensive interactive process was undertaken involving the beneficiaries and stakeholders to layout the various services, issues, resources and to name a few.

Implementation Outcome

The outcome or benefits gained by the local people through the help of project Soochna Seva were positive and progressive. The project benefits could be calculated by the price of benefits after receiving the benefits, as well as by the ultimate outcome of 'feeling of satisfaction' in the face of the beneficiaries and their families which one cannot equate with money. Beside many successful case stories made by Soochna Sevaks, the outcome of the project could be explained on the basis of the key component of the projects.

The scheme or government benefits cannot be easily accessed. To access any government facilities or benefits, you need different documents as the residential certificate, Aadhar Card, Ration Card, Karmkar Mandal Card, disability certificate and etc. The

Soochna Sevaks / Soochnapreneurs / Information Fellows used to verify the documents whether the beneficiaries have necessary documents to avail the benefits. If the documents were suitable as per government prescribe rule then the Soochna Sevaks would register the name of beneficiaries and help him / her to get the benefits. If in the documents there were problems like the spelling mistake of beneficiaries which needed to be corrected, then the Soochna Sevaks would help them to correct the documents. And if the beneficiaries were not having the documents at all to get the benefits, the team would be helping them to get the documents as per government rules.

This way the Soochna Seva had helped the beneficiaries in term of documents access which leads to getting the benefits. The below Table -1 has been prepared which is a combination of project five years (2014 to 2018). The chart illustrates the information, how many documents like Aadhar Card, AvasPatta, BPL Ration Card, Birth/Caste/Domicile Certificate, Aadhar card link with Ration Card, Karamkar Mandal Card and others had been prepared by the support of Soochna Sevaks. In addition to this, other necessary work also included like Survey of landform cremation, Electricity/Drinking water/staff toilet, road construction, seed distribution, and others.

Table 1
Access to Entitlements

| <i>Year</i> | <i>Registration</i> | <i>Availed</i> |
|-------------|---------------------|----------------|
| 2014 | 16501 | 14601 |
| 2015 | 48586 | 40820 |
| 2016 | 25979 | 21213 |
| 2017 | 18000 | 8075 |
| 2018 | 151208 | 49549 |
| Total | 260274 | 134258 |

Project Limitations and Key Lessons

The ‘Soochna Seva’ project had been implemented with positive outputs and outcome in the five backward districts of India from

2014 to 2018. The journey during the implementation period had not been an easy one. The team faced challenges and obstacles, such as unfriendly geographical and climatic conditions, lack of basic infrastructure like roads, and lack of awareness amongst people. There emerged key challenges that affected functioning of the project and ensuring entitlements of beneficiaries:

- a) There were scattered areas and minimal or no public transport and lack of infrastructure such as roads in a certain area which created obstacles to people not to attend the camps. Therefore the SSK team faced extremely difficult to reach these spots or people.
- b) There were lack of basic documents required for availing any schemes, for example, bank account, Aadhar Card, birth certificate and others, which took a longer period for registration and availing benefits.
- c) Non-disclosure of social status (SC/ST/Minority, OBC) by the people made data collation incomplete and inaccurate analysis.
- d) The real deserving citizens below the poverty line actually do not hold any beneficiaries card like BPL card due to benefits going to the wrong people that are APL card holder. However, the SSK team tried linking to the concerned person to other government schemes that do not require BPL cards.
- e) Middlemen charging fees for forms and services and their antagonistic attitude and approach towards the project had been a challenge.
- f) The threat to the ground team by the locals when there was a positive change in some institution because of Soochna Seva;
- g) It was seen that many times government officers were reluctant to approve registration form without the presence of beneficiary and when beneficiaries visited the government department, officers were not present. This led to high level of frustration among beneficiaries.

Overall, the relevance and scope of the project was very much necessary on the ground till the project end. There were still a sizeable population that were not aware of existing and new schemes

and policies of the government which aggravated further due to the government making different new policies which needed facilitations in the community. Due to geographical location, Naxal area and middlemen in the project the relevance of the project was felt more. One key aspect that the project highlighted was it generated a necessity that interventions of the project type and kind is necessary to make people believe in the democratic governance system of India.

Conclusion

The Soochna Seva project a crucial role in ensuring the entitlement of the beneficiaries of the project areas. The Soochna Seva team liaising with various state bodies at district, block and Panchayat level in the target location of the project led to fruitful discussion with all the representatives, elected and government officials and beneficiaries. By looking at the achievement and engagement of the project, the relevance of the project in the area was necessary to tackle or resolve the issues with empowering the community. The project helped to realize people’s rights and entitlements and how and why to avail them despite all challenges and threats. The another focus on digital literacy helped to create a pool of digital and information literates who could now and later avail critical public information and benefits after knowing the sources, links, platforms. The project sustainability component in the self-running one man manned Soochna Seva Kendras at a low cost basis is a key outcome of the project in terms of creating rural information entrepreneurs to aid and assist local communities in meeting their varied information, content and services needs and can eventually help to strengthen rural information ecosystems in coming years.

Project Factsheet:

| <i>Project Implementing Agency(s)</i> | <i>Digital Empowerment Foundation</i> |
|---------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Project method(s) | The project was implemented with an Information Communication Technology (ICT) based bottom-up and decentralized 'Information Service Model' run with local youth enabled as change agents to reach out and benefit the marginalised community. The implementation process entails awareness about government services and schemes, access to schemes information, building understanding about the availing process which includes documentation and submission, submission of entitlement demand and application and availing of final benefits and grievance redressal. |
| Stakeholder(s) | Community, State Department, CBOs, Local delivery agencies, institution |
| Site/ Field (Exact Location) | West Champaran (Bihar), Guna (Madhya Pradesh), Barmer (Rajasthan), Tehri Garhwal (Uttarakhand), and Ranchi (Jharkhand) |
| Duration | 5 years; 2014-2018 |
| Project Partner(s) | |
| Contributing Donor(s) | Delegation of European Union, Qualcomm Wireless Reach |
| Thematic Area(s) | Strengthening Community Access to Entitlements with the Assistance of Technology |

Enhancing Access to Public Services

The Interweaving Civic Engagement and Responsive Local Governance Initiative of PRADAN in the States of Madhya Pradesh and Jharkhand

Abstract

The essence of citizenship emanates from empowering people with basic rights as well as revolves around the indispensability of the state in fostering development of these rights. Scholars have opined that the contribution of the citizen and state together enhances the State's capacity and in turn creates a developmental state. Such an imagination assumes citizens being recognized more than mere consumers. The following case study necessitates one to contemplate if development can be achieved without, fair access to public services or active citizen involvement. The work done by PRADAN exemplifies this symbiosis of civic engagement and responsive local governance in the state of Madhya Pradesh and Jharkhand in India. The aim of the initiative extends to another confrontation, when the study adopts the method of civic engagement to respond to a left-out citizenry such as women and other marginalised, who have to grapple with the realization of being 'citizens' first, to demand efficient services.

Keywords: Civic participation, community centred approach, Citizenship, Women Elected Representatives, Local governance

Introduction

The foremost challenge before India remains its low social indicators; it is off-track on basic MDG¹ goals like eradication of

1. "Millennium Development Goals (MDGs)," World Health Organization, June 25, 2015, accessed February 10, 2019, https://www.who.int/topics/millennium_development_goals/about/en/

extreme poverty and hunger, achieving universal primary education, reduction in child and maternal mortality. PRADAN with support from the European Union proposed to work in the two states of Madhya Pradesh and Jharkhand where the situation is even more acute. PRADAN has a long experience of engagement in endemic poverty regions of India. The learning over the years has also fed into the conception of this project. The programme was built on the foundation created during the UN Women Fund for Gender Equality (UNW-FGE) programme on developing women's consciousness on patriarchy and its manifestations and enhancing their political and economic empowerment. A study of these areas done by an independent organization indicated the results such as 53 per cent of respondents were not aware of whether any Gram Sabha meetings had been held, and 19 per cent of those who were aware of the meetings did not attend the Gram Sabha; Only 9 per cent of women reported being members of village committees, and only one quarter of these said they attend the committee meetings. Likewise, over 70 per cent of respondents did not know if committees have been formed in their village. More so, 84 per cent of households have NREGS card, but only 29% are aware that there is an entitlement to 100 days of work in the year.²

Heller, P 2010, defines horizontal as “associational life”.³ While formal rights exist inequalities between social categories (gender, caste, ethnicity, class) limit the abilities of these social categories to act on their rights and the mandated benefits from the state effectively. This distorts the playing field, and there are wide-ranging exclusions. Citizens need to ummarize themselves and each other as rights-bearing citizens. They also need to engage with the state beyond voting. Vertical dimension refers to weak institutionalisation, in particular, related to poor integration between the state and the citizen – (a) How citizens engage within the state-society relations, which are dominated by patronage and populism, with citizens

2. “Trust Funds: Fund for Gender Equality: About the Fund,” UN Women, accessed February 10, 2019, <http://www.unwomen.org/en/trust-funds/fund-for-gender-equality/about>.

3. Patrick Heller, “Challenges and Opportunities: Civil Society in a Globalizing World,” United Nations Development Programme Human Development Report of Ce, accessed January 8, 2019, https://www.patrickheller.com/uploads/1/5/3/7/15377686/undp_global_cs.pdf

having no effective means of holding government accountable (except elections) or being reduced to dependent clients. (b) Where citizens engage with the state, given that local government is absent in poorly governed areas, or just weekly present, (low will to work and rent-seeking) ending in very few points of contact with the local citizens.

Background and Description

The proposed action “Community Centred Approach to Enhancing Access to Public Services” was implemented in 12 blocks of 5 Backward Districts (as notified under BRGF) in the states of Jharkhand and Madhya Pradesh. The target groups were 40,000 women belonging to tribal (45%), Dalit (20%) and backward (35%) communities⁴ in about 500 villages in 160 Panchayats.

Madhya Pradesh has the highest IMR and U5MR⁵ and Jharkhand only marginally better. MP and Jharkhand have high MMRs of 310 and 278 respectively almost 3-times the India target of 109. Only 2.5% of the MGNREGS job card holders in MP and 1.5% in Jharkhand accessed 100 days of employment in 2011-12. Average number of workdays generated in MP and Jharkhand was 14 and 15 respectively. A recent report published by IFPRI⁶ using multi-dimensional Global Hunger Index finds MP as the worst state in India in terms of hunger – on par with Ethiopia and below Chad and Angola. Not even 1% of the rural households have access to piped drinking water and just 5% of the rural households are using toilet facilities.⁷ Within these states differential engagement according to caste, class and gender is further required as these are most deprived and disempowered.

The target groups suffer from lack of access to basic services and opportunities for enhancing their well-being caused by lack of self-efficacy due to oppression around caste, class, and gender dimensions. Poverty compounded by discrimination against women

4. Census of India, 2011

5. Infant Mortality Rate and Under 5 Mortality Rate (per 1000 live births)

6. International Food Policy & Research Institute

7. National Family Health Survey, accessed February 10, 2019, <http://rchiips.org/nfhs/report.shtml>

and intra-family denial makes women bear the brunt of low quality of living – ill-health, lack of early child care, infant mortality, and morbidity. Lack of education further leads to the loss of confidence and self-esteem while also being the cause for further exploitation. Prolonged exposure to ill-health without the safety net pushes families below poverty line again. Intergenerational nature of this multiple inter-locked dimension is visible in children.

Principal Issues

Grassroots Governance failure is easily the biggest challenge to the delivery of public programmes and access to certain provision of constitutional guarantees. Patron State and Subject Citizenry is at the core of governance deficit, most visible in self-governance institutions, particularly in the Madhya Pradesh and Jharkhand (which till recently had no PRIs). Such governance structures are at the frontline of the Government's public social sector investments. Also, despite women's reservation in PRIs women's accepted leadership in governance remains low. Thus, Women's participation in Gram Sabha meeting is considered as men's bastion (of the influential and powerful), remains low. Similarly, women's information of basic services and entitlements and their access to these remains restricted due to low mobility, lack of literacy, double work burden, and lack of peer forums for the exchange of information about external world and developments therein. Corruption, poor management, leakages are common across governmental agencies, the need for grassroots community mobilisation, monitoring of services and demand for accountability by user increasingly of critical importance. Access of public programs and accountability thereof in the changed scenario requires a more in-depth engagement around strengthening citizenship.

Up taking lack of sufficient measures by public agencies in sharing information with people forms the foremost challenge; Secondly, the inappropriate configuration of services leading to a mismatch between what is on offer and what is required by people; Problematic Attitude of personnel/bureaucracy towards communities as those of providers rather than working towards serving people;

Also, Lack of sufficient accountability measures in public agencies and even where those exist, people are not sufficiently informed or empowered to exercise their power. An underlying problem remains with the Governance mechanisms (PRIs), which function more like extended state hands rather than people's voices

Objectives

Specific objectives of the project were

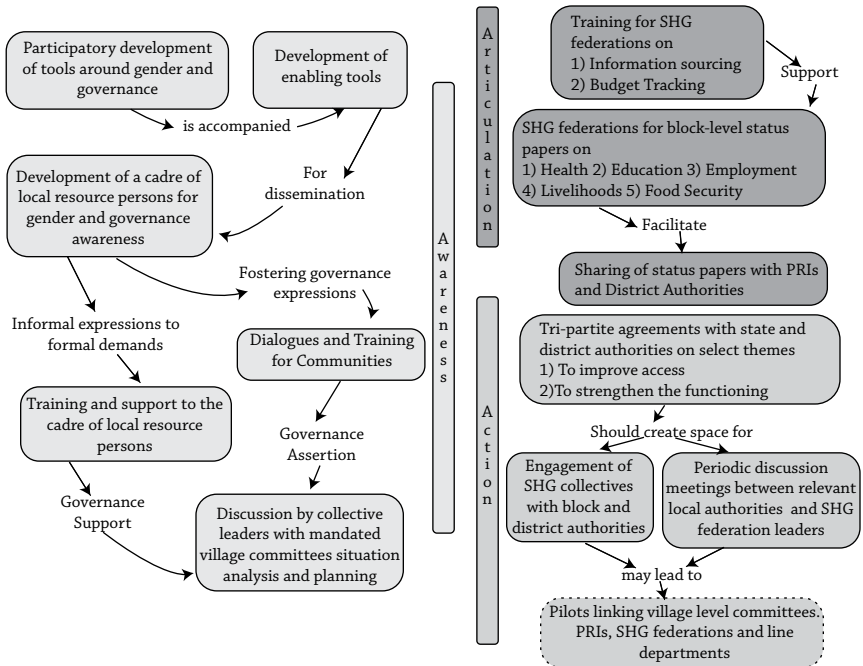
(a) Enhanced leadership of women in village governance and community oversight of public services; (b) Improved response of public service-providers and duty bearers to deliver quality public services.

Specifically, a goal of enhanced awareness of 3000 women groups around their rights and entitlements in various public schemes was expected through the project; Furthermore, creating institutional capacities of Self Help Groups (SHG) Federations in 5 districts covering 500 villages to support member groups in effectively following up claims on public services. Underlying objective remained in holding district administration accountable in responding to the needs and demands of marginalized and excluded communities. Lastly, another specific objective was to strengthen availability of information and procedural protocols of public schemes related to health (NRHM), education (RTE), livelihoods (MGNREGS), social security (PDS, ICDS) in planning, delivery, review and grievance redress.

Project Methodology

The approach entailed identifying gaps due to factors related to how people view themselves vis-à-vis state, their self-esteem, availability of enabling information, level of organization among community, complex procedures, staying power and urgency of aiding people to seek other alternatives. PRADAN, acted as agents of change by closely working with the communities. Methods such as informal and formal interviews were conducted. The teams worked with SHGs and collectives of SHG (Clusters and Federation which were facilitated to engage in local governance forums like Gram

Sabha) and articulate their needs and demands. Women from SHGs were oriented to review and monitor government run basic services facilities in areas, like school committees, local primary health centers, public distribution systems, among others. The project trained women on criteria for voting to elect representatives in formal political bodies, e.g. gram ummarize and state legislature. The Project also encouraged women from these collectives to participate in grassroots democratic processes. Further, to ensure sustainability and scaling up the project a cadre of community based service providers were trained and provided on-field handholding support, and supplemented by technical training provided by PRADAN. The other major means were development and deployment of creative methodologies for extension and dissemination like picture books, games, digital solutions, and mobile applications. Partnerships were also forged with resource organizations having expertise in different areas such as, outsourcing experts in developing specialized mobile application.



The chart summarizes a detailed methodology of the project

Programme Implementation

Major activities undertaken by PRADAN focused on strengthening Gram Panchayats as effective organizations so that they work as citizen-centric bodies with greater collaboration between Panchayats and Community Organizations.

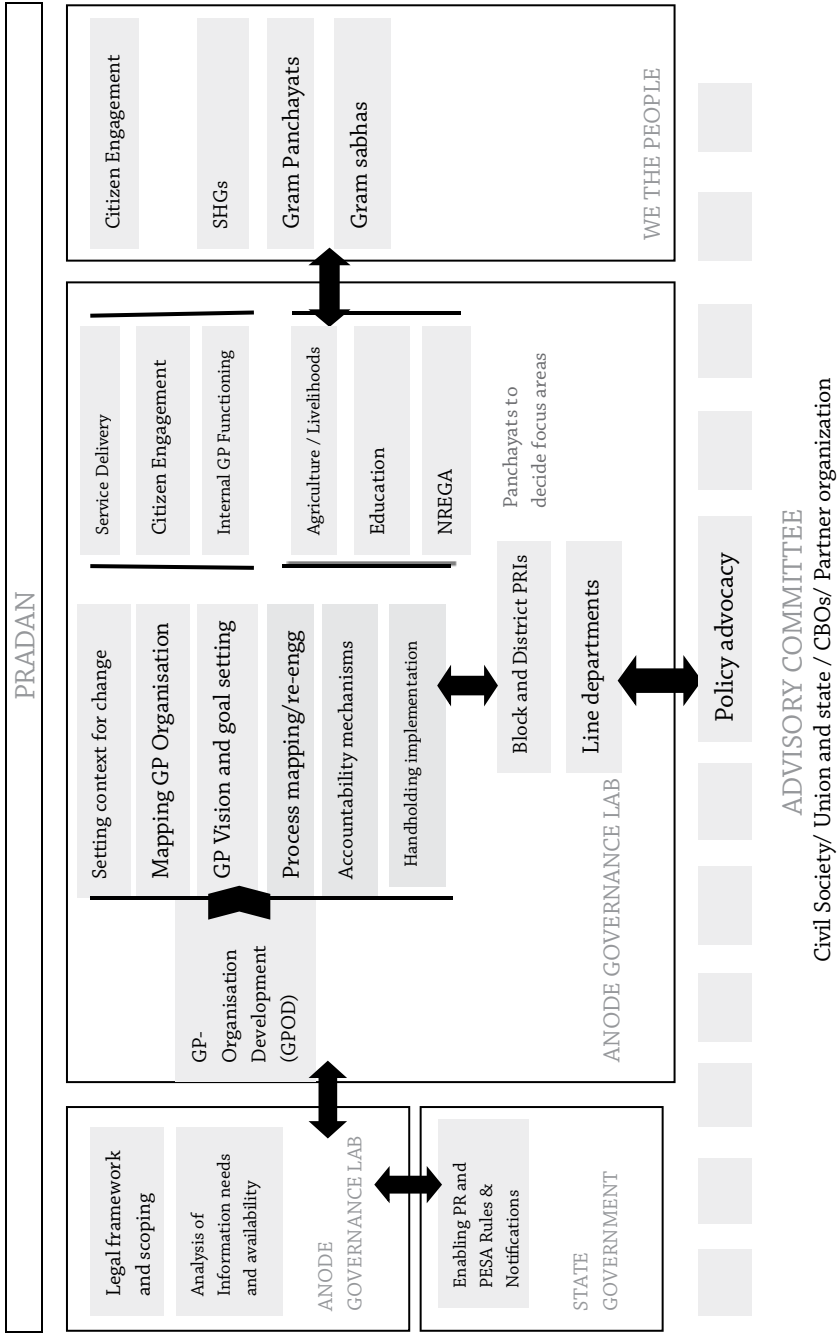
1.1. Panchayat Organization Development Programme at Various Levels-

PRADAN and Anode Governance Lab collaborated to embark on a process of strengthening Gram Panchayats. The idea was to apply principles of organization development in the work with Gram Panchayats. Taking cue from the mid – term evaluation of the project PRADAN commissioned Anode Governance lab to undertake a study to develop an initial understanding of the state of devolution, Panchayat functioning and citizen engagement with Panchayats, in the states of Madhya Pradesh and Jharkhand. Anode was then to help PRADAN conceptualise, design and implement a deeper engagement with Panchayats. The potential of a Gram Panchayat and citizens was grasped which could provide a platform for deepening democratic processes through self-governance.

A pilot study in Jharkhand integrated other efforts including enhancing civic literacy among women collectives and partnering with the state government towards social audit of implementation of key government programs such as MGNREGS and Gram Panchayat Development Planning process. In addition, this initiative had also been integrated as a part of Jharkhand State's Beacon Panchayat project⁸, which provides opportunity to leverage various platforms of the government.

Similarly, the need for engaging with the Panchayats in Shahpur block of Betul district in Madhya Pradesh became relevant after many women members from PRADAN were motivated and elected into the Panchayat. It was seen that many of the women who had been elected into the Panchayat, often with the support of the local SHGs, would

8. The Beacon Gram Panchayat as a project commenced in 2017. Government of Jharkhand endorsed the idea of Beacon Gram Panchayats envisaging role of Women as 'Mukhiyas' to further compliment the targets set for the Gram Panchayat Development plans (GPDP)



often be co-opted by the Panchayat system, however this would not ensure a social change after participation. Thus, engaging with the Panchayat on a level of thought, and to understand the processes that happen in that space, one would have to engage with the institution itself.

To understand how the Panchayat was faring in terms of its work, Constitution, roles, and responsibilities, the project chose some specific indicators to map the internal functioning of the Gram Panchayats. The data was collected in two phases for these Gram Panchayats. In the first phase, the PRADAN team individually met and interviewed all the members of the Gram Panchayat, so as to build a basic profile of the Panchayat, and the second phase was done through a two day long consultative process. This was done only after PRADAN had built a certain amount of trust in the Panchayat by engaging on and facilitating some of their own targets as posed by the state.



Samvidhan Training to Gram Sangthan

The process followed in the meetings was one where a group made up of the Panchayat members sat with some members of the community, especially the women from the SHGs, and carried out a self-assessment against each of the indicators. PRADAN engaged with the Panchayat to firstly build a perspective of local governance, and then view Panchayat as an autonomous institution that had the right and duty of being the representative government at a local level. To facilitate this understanding, PRADAN engaged in certain iterative processes. The first step was to profile the Panchayat so that one could test whether it would be feasible to work in that Panchayat, and take the project forward. This would also ensure that we could understand the Panchayat in terms of its population, geography, assets, and other government institutions functioning in that area, as well as the population of the people. The second step was to sign an MOU with the respective Gram Panchayats. This was done to engage with the Panchayat legally, and also gave them the sense that they are an institution and a body corporate, which could take such measures as signing MOUs. This was also necessary because one of the major aspects of the engagement was discussing a lot of sensitive data such as the budget, funds, and assets of the Panchayats, as well as the processes happening in the Panchayat.

The Madhya Pradesh Panchayati Raj Adhiniyam⁹ states that the Panchayat must meet once in a month to discuss the issues in the Panchayat. To build on this collective for the Panchayat, it was essential to ensure that the Gram Panchayat Executive Committee (GPEC) meeting happens routinely. This had never happened in the history of any of the Panchayats, where all the ward members and the Sarpanch held a meeting together. Fourthly, building a shared understanding of the Gram Panchayat along with PRADAN and some members of the community was essential to sustain long and short-term goals. In terms of service delivery it was important to understand how the Panchayat was performing its role of executing different schemes. Exposure visits were taken in which the members of the Gram Panchayat travelled alongside some federation members

9. Madhya Pradesh Panchayati Raj Adhiniyam, 1993.

and PRADAN professionals to a different Panchayat in a different state to build an understanding of what a successful Gram Panchayat could achieve if it summariz its true. Once the Gram Panchayat had decided the three missions on which they wanted to work, the next step was to collate a map of all the processes and stakeholders involved to achieve that goal. In this step, PRADAN engaged with functionaries at different levels of district, block, and Panchayat administration to build a comprehensive map of activities and share it with the Gram Panchayat. The next step would be to reform the standing committee or start a new ad-hoc committee to oversee work at the Gram Panchayat level.

PRADAN had to engage with different stakeholders where one could build support for the work and build consensus as well. In Gram Panchayat Organisational Development (GPOD) initiative, one of the parallel processes was to engage with the local VO that was promoted by PRADAN. For instance, in Mansinghpura, a meeting was arranged amongst the Upsarpanch, ward members, two SHGs, and the sub engineer from the block to formulate a plan to provide drinking water in the drought like conditions of 2018.

After about two months of engagement with the Gram Panchayat, it was felt that for the ward members to be effective in their role as representatives of the community, they needed to sit with the people from their ward. The first Ward Sabhas happened in the month of January 2018, in preparation for the 26th January Gram Sabha. The issues varied greatly from village to village, hamlet to hamlet. It helped the Panchayat identify many families which were eligible for social welfare schemes such as Pension, Aadhar, Deen Dayal and others. Apart from this, every ward Sabha informed the Panchayat of the kind of infrastructural issues that the Panchayat could work on, and increased a bit the understanding of the Panchayat. This fed into the planning for both Fourteenth Finance Commission, (FFC) and NREGA for the financial year of 2018-19.

1.2. Making government services accessible through Haqdarshak, a mobile application

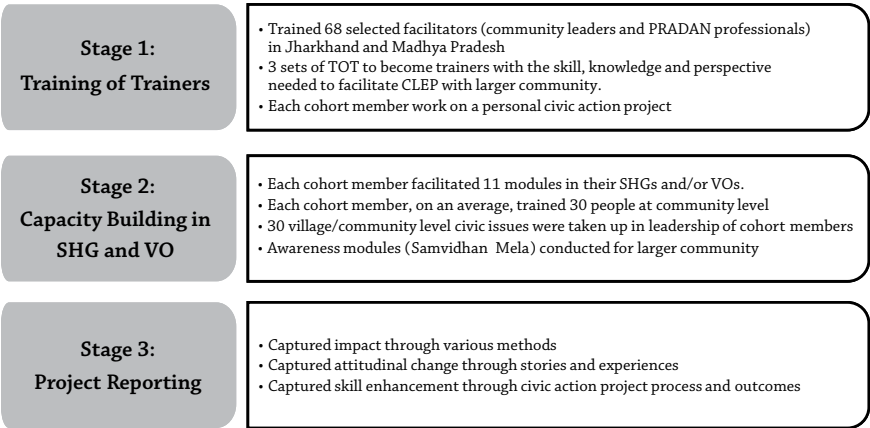
The core idea of Haqdarshak revolves around the implementation of technology to empower people to have access to various entitlements and benefits developed by the government through welfare schemes and scholarships. The schemes are specifically tailored to cater to the people belonging to the weaker economic and social background in both rural and urban areas, but very few people are able to receive the benefits due to information gap and lack of digital accessibilities such as Internet and information centres in villages. Moreover, the local governance system is considered as a source of such information, but in reality, it has become an exercise of unmarized, top-down schemes with a poor focus on people's needs.

Despite the presence of internet facilities in Panchayats, very few people approach it for help due to fear and lack of faith. People travel far and wide to established computer centres in towns to access information, but it poses a financial burden due to repeated travel. To reduce such hassles, the entire repository of more than 1700 government and private welfare schemes are brought to the people in the form of mobile-based application software. Women who are chosen to run it, also known as Haqdarshak entrepreneurs are trained to work within their communities and villages to spread awareness. Ranging between Rupees 40 and Rupees 200, the entrepreneurs offer a variety of different services at an inexpensive fee. Not only does the program brought the end to end service to people but it also allows women to have an additional source of income.

To avail the benefits, first, the beneficiary was asked to fill out a questionnaire that is mapped to various eligibility criteria of schemes, also known as screening. Once the schemes are listed, based on the beneficiary's needs, he/she selects a specific scheme and pays the nominal service fee. Once the transaction is done, the Haqdarshak assisted him/her with the documents collection and further application procedures. With a pool of 22 entrepreneurs, the application was reached out to 6413 citizens as of December 2018.

1.3. Civic Literacy and Engagement Programme

PRADAN focused on building capacities of citizens in understanding and putting to action their role as citizens through the Civic Literacy and Engagement Program (CLEP). The CLEP program was a threefold focused engagement with the citizen through the internal team of PRADAN in the state of Madhya Pradesh and Jharkhand. In its effort to transform Civic Literacy, the project team focused on three main areas: Training of trainers, Curriculum Development, Guiding civic action work in communities. The primary curriculum’s focus was on building perspective on Citizenship through comprehending the Constitutional framework with its Vision and Values, Rights, Duties, Law, and the Structure of State. Using the Constitutional framework on a governance issue selected by the community entailed the Civic Action Toolkit, consisting of methods and tools to work with the State, success stories, practical tips, and learning’s for collective action.



The programme was a focused engagement of three stages with a cascade model of training and outreach support.

Implementation Outcome

The intervention had resulted in several tangible and intangible movements that enhanced a belief in institutions as well as appropriateness and applicability of the framework. Tangible results included the opening of many Panchayat Bhavans, ummarized Gram

Shifts in GP functioning as an institution (Further information on status and shifts in GP wise organisation mapping reports)

| <i>Indicators</i> | <i>2016</i> | <i>Present</i> |
|----------------------------------------------|----------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <i>GP Administration</i> | | |
| Opening of GP office | Most GPs did not open at all/ 7 out of 16 GPs did not have an office | More than 60% GPs opening office at least 2 to 3 days a week. 15 GPs have office buildings. Remaining 1 GP office sanctioned |
| Agenda and Notice before the GP meetings | Meetings were on paper | More than 60% GPs sharing agenda and notice in advance (3 to 7 days) |
| Regular monthly GPEC meetings | | 12 of the 16 GPs |
| Participation of ward members in GP meetings | Mostly only Mukhia and Sachiv present | Above 50% in 15 of the 16 GPs. |
| Records and registers maintained | Not maintained | Of which around 8 GPs having participation ranging between 65% and 95% |
| <i>GP Vision and Mission</i> | No clarity and agreement on vision and mission | More than 60% GPs maintain important registers Monthly funds status being discussed in few GPs |
| <i>GP Structures</i> | | Shared Vision and Mission development in all GPs, through workshops with elected members, staff and invited citizens |
| Activation of Standing committees | None active | 15 of the 16 GPs (above 90%) |
| Appoint of Adhyakshas | No Adhyakshas selected | 12 of the 16 GPs (75%) have selected Adhyakshas for their areas of focus: Agriculture, Education. Monthly meetings of Adhyakshas getting institutionalised |

| | | |
|------------------------------|-------------------------------|---------------------------------------------------------------------------------------------------------------|
| <i>Planning and Delivery</i> | Fire fighting, Adhoc delivery | GPs have plans for their focus areas, and are actively engaged in their delivery |
| | | All GPs have completed their GPP for 2019-20; Basia GPs have undertaken intensive tola-level planning process |
| | | GPs taking lead in social security programs: 1700+ pensions camps |
| | | 9 of the 16 Pragma Kendras functional and regular. |
| | | GPECs monitor status of different activities on a monthly basis |

The table has been compiled to reflect the movement in the Gram Panchayats' functioning as an institution in Jharkhand, where basic administrative requirements and structures have been put in place.

Panchayat (GP) meeting inclusive of recording attendance, setting an agenda, recording the minutes and decisions. There were GPs in both the states that have moved to a stage where they are making decisions and planning actions around larger deliverables that aim for systemic solutions. For instance, GPs have identified deeper intervention and focused engagement with challenges related to education, agriculture, MGNREGA. To resolve these challenges, GPs have been facilitated into establishing and activating corresponding GP structures as prescribed by the law, namely standing and ad-hoc committees. Intangible results include collaborative decisions around recurring issues enhanced by better negotiation skills, while engaging with block and district Panchayats, to ensure better conduct of the Gram Sabha etc.

The program design had also ensured continuous interaction and relationship building with the members and staff of the GP, and to some extent, departments, and functionaries at other levels. PRADAN block team members had been regular invitees to the monthly GPEC meetings of the GPs, exhibiting a deep relationship of trust with the Panchayats. These Panchayats regularly worked on 'Quick Wins' which do not require significant funds to be implemented and are in the locus of control of the Panchayat members. Approximately 50 such quick wins were identified and implemented in Jharkhand. Examples are the issue of NREGA job cards, Wall paintings with relevant information, installing complaint box in the GP and ensuring e-governance centres in the GP premises.

7.1 Changes in internal functioning of Gram Panchayats

Development of a vision statement by GPs: all the GPs developed a vision statement prioritizing areas of interest to the GP and citizens. Development of clarity about roles and responsibilities as per the Act in different programmes and service delivery were exhibited. Up keeping of documents and other internal records and GP members' awareness along with annual planning and budgeting had been few processes better internally aligned.

7.2 Improved Implementation of schemes such as-

- 1.4. Nal Jal Yojna is a scheme to provide drinking water to the homes in different village, by building a pipeline, and is executed under multiple heads, some of which include NREGA, Janbhagidaari, FFC, and some fund from the PHE department itself. Some part of the Janbhagidari is such that those who want to get their individual connections fixed, they have to get their own material: pipe, valve, stopper etc. In Mansinghpura, the Ward Sabha allowed a space where the Panchayat and the VO sat together, and ensured where the pump could be placed, finally arriving at a bore which could provide water to all. The responsibility was shared by the ward members. 35 families are currently accessing the facility. A sub-committee was also formed for managing operation and collecting revenue from the households receiving benefits from the program. The Panchayat built a management committee called the Nal Jal Samiti which overlooked different aspects of the the Nal Jal, from collecting the monthly tax, to getting the bank account made in its name, regular maintenance, and upkeep. We brought the act of sitting together into practice, and where the ward members and citizens owned it, there we saw things starting move faster. Similarly, in Dhasai village of Dhapara Gram Panchayat, 10 families started using the drinking water facility, installed by Gram Panchayat.
- 1.5. *MGNREGA planning under GPDP*: In 3 GPs, land and water conservation work for community and individual land was prepared through ward Sabhas and a total of 75 such plans were uploaded in Plan Plus portal.
- 1.6. *Construction of Cement Concrete (CC) road*: In Dhapara Gram ummarize, after a joint planning meeting between Village organization and GPEC, priorities were assigned for upcoming road construction work and 4 CC roads were approved thereafter.
- 1.7. Construction of High school in Rampurmal Construction of a high school in Rampurmal was a longstanding demand of

community due to unavailability of land, the demand did not materialize, however the Gram Kotwar was unlawfully possessing 35 acres of land in the same village. The case was moved to high court and the GP actively followed it up at all possible levels. Finally, the high court passed an order in favour of the people and the surplus land has been asked to be handed over to appropriate authority.

An overall impact created culminated in over 1700 citizens becoming aware of their role and responsibility as citizens by achieving a higher level of civic literacy and enhanced engagement on governance issues with the State. The outcomes sought are at multiple levels:

For instance, 68 people (selected team members of PRADAN and members of the community) become trainers with the skill, knowledge and perspective needed to facilitate Civic Literacy and Engagement Programme with the larger community. Then, 1700 citizens (at SHG & VO level) achieved a higher level of civic literacy and engagement through training on the Civic Literacy and Engagement Programme. Furthermore, 75 Civic Action Projects were initiated to create a positive impact on local governance issues is achieved through efforts of the trained citizens. Significantly, 31 events to “ignite spark” among the citizens through Samvidhan Mela in Jharkhand and Madhya Pradesh reached around 6,000 people. In CLEP, Storytelling, self-reflection and experiential methodology shifted attitudes of working on an issue (personal and community), improved skills such as summarize the problem, accessing information (using RTI if needed), writing complaints, understanding right authority, and following up the processes.

Below is the analysis of the impact on these three components through this intervention:

| <i>Factors</i> | <i>Change / Impact</i> | <i>Method of Evaluation</i> |
|----------------|-------------------------------------------------------------------|-----------------------------------------------------------------------------|
| Knowledge | 160% increase (avg) | Pre-and Post Tests |
| Skills | 100% cohort members took projects More than 35 success stories | Personal and Community Projects. Process followed and successful resolution |
| Attitudes | Significant change | Experience and Stories |

Project Limitations and Key Lessons

It was crucial to identify challenges to implement similar initiatives in a more extensive policy framework and programme priority. It was often been found that elected representatives at the Panchayat level are not well equipped with knowledge and understanding of the functioning of representatives. They struggle to extract any information from the executives related to different operations of any ummarize and block. Secondly, SHG collectives faced challenges whenever they asked for information related to the functioning of PDS, ICDS or even MDM. In some cases, they have been threatened by the PDS dealers. The culture of withholding information or making the process of accessing information cumbersome had become a norm of the existing bureaucratic system.

Problems faced by Women Elected representatives(ER) have led to uneven performances midst the male-dominated mindset of the institution. Firstly, spouses of these elected representatives' took over their position. At the same time, women representatives found it challenging to carve their space in the political set up which is dominated by male folk. On the other hand, the male bureaucrats also found it difficult to accept these women ER. They further pressurize these ER to send their male spouses. Illiteracy was also playing a major hurdle in their process of learning and exercising knowledge and power. It also came in their way of becoming independent. Grooming of these women ER on the issues of Gender and Patriarchy and time to time focused discussions with them had proven to be helpful. At the same time, counseling sessions had also happened with the men elected representatives to make them sensitive towards these issues. Therefore, advocacy and legal awareness needed to be ummarized with routines initiatives to negate a gender-biased environment.

One of the insights that had emerged from the experiences of first two years of the project was that the villagers should not look into the schemes only in isolation, but should be encouraged to view it from the lens of a life perspective. Such a change in perspective will result in an overall world view of the people towards addressing the problems or deficits for which the scheme designed. Similarly,

constructive interventions are required to build a vision of collectives around the life & livelihood of people by ummarized on the value of living in the villages. Participation of Women collectives taking ownership substantiates the need for such interventions. Similarly, an enhanced understanding of their rights, entitlements, and knowledge around the root cause of malnutrition from a life perspective can lead to reporting critical cases on child marriages. Subsequently, in the case study, instances were seen where marriages were stopped within the families by the women themselves or by the community by complaining to the officials. Similarly, the village organisations of Koderma and Hazaribagh are now discussing with the parent's group of their villages about their roles in improving children's education along with the issues of absentees of teachers, quality of education, MDM issues among others.

The second ummarized is the deeply-rooted belief where State behaves as a Patron and people as beneficiary, diluting the essence of citizenship. Civic literacy plays a vital role in restoring this ummarized . Introduction of Igniting Spark / Samvidhan mela as a mass awareness tool was introduced for the same objective. Cohorts have been groomed to address this notion where these people are going to the SHGs to help them understand the whole construct around citizenship and also assisting the collectives to address the issues of the villages. Issues like electricity, water schools, hand pump repairing, have successfully addressed by following a proper civic action route.

Having a life perspective and understanding of Constitution and Citizenship the participation of the ordinary citizen in the entire development process becomes effective. It enhances the confidence and quality of involvement of the Citizens while they interact with Gram Panchayats. It has also been ummarized that Gram Sabha gives a critical space to exercise the choice of Citizens. The need is to prepare villagers to make this space more democratic and participatory.

It has been found that most of the people perceived Gram Sabha as the meeting point of sanctioning schemes rather than as a forum encouraging for overall development. A lot of petty fights

pave the way for the middleman to intervene that is generally seen to deter people's participation in the Gram Sabha. Such a situation needs an active collaboration with the SHGs who can then restore the lost confidence through ensure constructive discussions. One cannot dismiss the institutional capacity of Gram Panchayat having an impact in the betterment of the services. Panchayats power is the power of the people where people can easily relate to the government. The experience of last year of the project indicated that the increased effectiveness of Gram Panchayat functioning had helped to strengthen the primacy of Gram Sabha where villagers have been able to influence the decisions regarding the selection of beneficiaries of Pradhan Mantri Awas ummar (PMAY), schemes to be taken for irrigation and so on. Thus, the experiences of last year could be ummarized as "Informed Civic engagement complemented with responsive local government is the way forward to define a people-centric inclusive development discourse."

Conclusion

The idea of effective local governance follows the route of strengthening Institutional deliverance as well as building capacity of the citizens availing these schemes. Communicating grievances through active civic engagement also instills a sense of responsibility for being accountable to the citizens. The work done by PRADAN substantiates this collaborative approach in bettering institutions such as Gram Panchayats among others by simultaneously uplifting the marginalised' through their grasp of Constitutional rights. Further, the initiatives undertaken by PRADAN, exhibit the need for community dialogue, which is slowly carved out as a result of adopting group based methodologies and a commitment to community centred approach.

Project Factsheet

| <i>Project Implementing Agency(s)</i> | <i>PRADAN</i> |
|---------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|
| Project method(s) | The approach entailed identifying gaps; closely working with the communities; Methods such as informal and formal interviews were conducted. |
| Stakeholder(s) | Women's Collectives (SHGs, Vos, Federations); Gram Panchayats; block and district administrations |
| Site/ Field (Exact Location) | Districts: Koderma, Hazaribagh in Jharkhand; Betul and Dindori in Madhya Pradesh |
| Duration | 5 years (1st April 2014 to 31st March 2019) |
| Project Partner(s) | nil |
| Contributing Donor(s) | Bill & Melinda Gates Foundation, Axis Bank Foundation, Sir Dorabji Tata Trust, IKEA Foundation, Azim Premji Philanthropic Initiatives Pvt. Ltd. |
| Thematic Area(s) | Women's political empowerment; Citizenship awareness and rights; Gram Panchayat strengthening; Digital information availability |
| Organisation Contact (web link) | www.pradan.net |

Svavritti

SAATHII's Building Spaces Initiative for Mainstreaming Service Delivery Reach for AIDS-affected families, Female sex workers, Sexual/Gender Minorities, and Injecting Drug users

Abstract

Definitions often miss out on the unique discrimination and exclusion faced by certain groups, who first struggle to be recognised as citizens and then contest for inefficient service delivery mechanisms. The difference between the two stages is embedded in ingrained stigma, lack of participative policy frameworks, and failed feedback mechanisms to strengthen implementation processes. The case study discusses Svavritti, a project implemented by SAATHII, envisaging universal access to rights, health, social and legal services by embracing the marginalised, including the AIDSs-affected families, female sex workers, injecting drug users and sexual/gender minorities. The approach adopted by SAATHII embraces targeting gaps such as systemic barriers in service delivery design, along with a lack of sensitisation towards this marginalised section. The project was implemented through SAATHII State level partners in the five states of Manipur, Maharashtra, Nagaland, Odisha and Rajasthan followed by Telangana, Tamil Nadu and West Bengal under the SAATHII state unit. The issue already embedded in previous experiences of stigma and discrimination lead to challenges such as groups and individuals hesitating to disclose gender identity coupled with the difficulty in obtaining essential eligibility documents as many being ostracised from their natal family had no address proof. SAATHII's policy and programme implementation progressed through categorising action plans in Phases, starting with spreading

Scheme Literacy through the Information, Education Materials to organising a platform for hearing out through 'Demand Generation Meetings'. Also, in tracking budget utilisation and sensitising critical stakeholders across sectors, SAATHII undertook training sessions for over 347 community representatives and family members on RTI. The study provides with Good practice documentation, which exhibits practices that can be replicated to ensure unhampered service delivery reach within the existing policy framework — contributing to newer ones by engaging with the ground veracities faced by this end segment of the marginalised.

Keywords: Sensitising Stakeholders, Sexual/Gender Minorities, Common Minimum Package, Legal Literacy, Family Comprehensive Approach

Introduction

Dating back to India's independence from colonial rule, the country has formally tried to balance economic growth with the need for state support to bring impoverished and marginalised groups out of the cycle of exclusion. A variety of central and state-sponsored schemes have recognized areas such as health, employment, education and public assistance, legal aid, living wage, pension, and maternity relief. Despite the availability of many schemes, there are significant gaps in accessing them among rural populations such as, SC/ST communities, women, and children, and other socially marginalised groups. In a further case of exclusion, lack of awareness, as well as difficulty in accessing these services resulting from stigma related to HIV, sex work, sexual discrimination, and gender identity, are contributing to this continuing low access to services. The Planning Commission has acknowledged these voids and recommended that an effective service delivery system needs to be instated to make these schemes reach the unreached.¹

1. The Planning Commission in the Twelfth Five-year plan (2012-2017) has reviewed the progress of the previous agenda, and asserted that despite infrastructure improvements, deployment of personnel and public facilities, health cover needs effective delivery mechanisms. It has also advised the States, to converge governance structures to broaden the health cover for wider social sector programmes, such as ICDS, AIDS control and others.

Background and Description

Project Svavritti, funded by the European Union, was implemented by Solidarity and Action Against the HIV Infection in India (SAATHII). SAATHII, a national level NGO, with the aim of improving social, economic, and legal protection for individuals as well as household among families affected by AIDS, gender and sexual minorities, people who inject drugs, female sex workers, in 30 of the backward districts of eight focal states of India from January 2014 to March 2018.

SAATHII implemented the project through its partners in the five states: Manipur, Maharashtra, Nagaland, Odisha, and Rajasthan; whereas in the states of Tamil Nadu, Telangana, and West Bengal the project was directly implemented by SAATHII's state units. Four of the partners, namely, Manipur Network of Positive People (MNP+), Network of Maharashtra by People Living with HIV/AIDS (NMP+), Network of Naga People Living with HIV and AIDS (NNP+) and, Kalinga Network of People Living (KNP+) are Community Based Organizations (CBOs) of People Living with HIV/AIDS and the fifth, Disha-Roman Catholic Diocesan Social Service Society (RCDSSS), is a faith-based organization with affirming with results of providing social services and health to HIV/AIDS-affected communities. The project worked towards increasing access, information uptake to government schemes by socially and economically excluded groups, specifically; AIDS-affected families, sex workers, sexual/gender minorities, and injecting drug users from focal backward districts of ten states in India. Within this scope, the project further focused on schemes and entitlements that reduce poverty and improve quality of life.

Principal Issues

Svavritti as a project aimed to bracket the target and beneficiary groups that are socially excluded for multiple reasons. For instance, families affected by AIDS, face economic and other forms of hardships because of reduced employability and death of breadwinners, exclusion, and denial of family property (specifically for widows and children) contributing to loss of school days due to illness of

children or need to stay at home and take care of younger siblings. Similarly, stigma and discrimination facing Families affected by AIDS are pervasive, across health, employment, education, and family/community domains. The second principal issue emanates from Sexual and gender minorities who face systematic exclusion within their families, societies and institution because of patriarchal norms and gender-based prejudice. School bullying, sexual violence, exclusion from mainstream employment are other factors, leaving many with very few options for livelihood. Thirdly, Sex workers and injecting drug users face elimination partly because of societal attitudes towards them, besides, laws such as the Immoral Traffic Prevention Act (that penalizes sex works) and Narcotic Drugs and Psychotropic Substances Act which further excludes the marginalised. Subsequently, exclusion and risks are also faced by children because of parental sex work or injecting drug use.

Within this scope, the project further focused on schemes and entitlements that reduced poverty and improved quality of life. The project was thus aligned with the EU's vision of helping service providers increase and improve access to information on public schemes and initiatives, in backward districts. It also supported India's twelfth five-year plan focus on inclusive growth and India's National AIDS Control Programme (NACP-IV). The project also aligned with EU's cross-cutting emphasis on gender and additional cross-cutting issues on promoting human rights by addressing concerns such as HIV/AIDS. Finally, at the district level, the project worked with local authorities across states to sensitise them on the need for making social-legal protection and health accessible as well as address barriers faced in accessing these schemes and entitlements to gender minorities, sex workers families affected by AIDS, and injection drug users and barriers these communities faced in accessing these schemes and entitlements.

Objectives

The overall objective of the project was to improve governance about social welfare schemes in backward districts of India, and enhance the quality of life of AIDS-affected and vulnerable

communities through promoting their uptake of social-welfare schemes. A specific objective was to improve social, economic, and legal protection for individuals and household among families affected by AIDS, sexual/gender minorities, female sex workers and people who inject drugs in 30 backward districts in eight focused states of India, covered under the project.

The action proposed to address information, demand side, supply side and systemic barriers that collectively hinder uptake of government welfare schemes including legal services.. First, aim to achieve increased access to information on schemes and entitlements among families having sexual/gender minorities, families affected with AIDS/HIV, sex workers and injecting drug users. Second, an improved accountability and transparency in the implementation of schemes by target communities in the focal districts. Third, an increased uptake of social protection schemes related to Health, Education, Housing, Shelter, nutrition, and livelihood among these groups and lastly, to provide action results to replicate with relevant stakeholders within, across and beyond action locations for replication and scale-up.

Project Methodology

The project employed strategies such as to partner with other community-based organisations and engage in implementing the project in the selected, most backward districts of India. Strategies were used such as interaction with local authorities through group interface and one-on-one sensitisation events, as well as with members of target communities. Secondly, it involved members of affected and marginalised communities in spreading information on schemes and legal services. Methods were adapted to include members of the household in information transmission and decision making. Thus, the project expanded its focus as a comprehensive poverty alleviation mechanism for entire families affected by AIDS, including adolescents, men, and children. It involved building local capacities with specific reference to enhancing skills, developing an understanding of the district- and sub-district budgets for schemes, using instruments such as RTI, and monitoring governance

practices. The approach also entailed in developing information-education-communication (IEC) material and using it to disseminate information on available schemes and legal services through one-on-one and group sessions. Information was also circulated with respect to case studies and schemes uptake at national and state level experience. Additionally, for building capacity and skills of civil society groups in advocating for access to programmes and services, it was necessitous to be able to build the best project practices and informative documentation to facilitate replication. Such a practice was timely noted by using strategic information about monitoring, process evaluation, operations research, and baseline-end line evaluation to enable tracking of project processes and identify strategies to enhance implementation efficiency.

A baseline survey, with both quantitative and qualitative components, was carried out at the start of the project. The survey had components addressed to the different target groups and assessments were made based on awareness of schemes and entitlements, barriers faced in uptake and suggestions offered for improvement. An end line study with both quantitative and qualitative components was carried out towards the close of the project period in six states and thirteen districts. The study population and the assessment areas were similar as the baseline study. The assessment was made on awareness of schemes and entitlements, barriers faced in uptake, help received from the project, and suggestions offered for improvement from the target groups

Programme Implementation

Result Area 1 - A core component of Project Svavritti was to increase access to information on social protection schemes and entitlements, as well as legal services, to PLHIV, MARPs and their families. The following activities were carried out to achieve this result area.

Analysis of social protection Schemes: During project initiation period in 2014, the existing schemes were analysed based on the available published data including those amended by state governments to be PLHIV inclusive. Scheme specific to other sexual

minority groups as in the case of Tamil Nadu and schemes identified at the time of baseline. In 2015, 2016 and 2017 various types of materials from government departments were collected and analysed at regular intervals to address the needs of the target community members.

Common Minimum Package (CMP) of social protection scheme: Based on the analysis of existing schemes, which aimed for social protection of the target community, the project team developed CMP of social protection schemes for each of the eight states based on the available data. The CMP was designed to address the needs of all target community, including their family members.

Information Education Communication (IEC) materials on schemes and services: Based on the need that arose from the baseline survey and during interaction with target community and their family members at various service delivery points, IEC materials were developed by the project. There was a two pager IEC material used by the Community Resource Persons (CRP) during the time of scheme and legal literacy session. The pamphlet was provided to target community including their family members at the Anti-retroviral therapy (ART), Integrated Counseling and testing Centres (ICTC), Prevention of Parent to Child Transmission (PPTCT), home visits, hotspot, and other places of interaction. Information about the project, various schemes and legal services remained the same, whereas social, economic details of the target community were gathered in details in the revised IEC. IEC material was developed on the landmark 2014 Supreme Court Judgment on Transgender rights in collaboration with the American Jewish World Service (AJWS) funded project. This was translated into all the local languages and made available to the LGBTIQ community. Scheme Directory was developed and printed in English for all the seven states, except for Odisha, which was prepared in the regional language based on the request from Odisha State Aids Control Society (OSACS), accompanied by an exclusive IEC material designed and printed for the target community members across the states of implementation in their respective regional languages except for Manipur and Nagaland which was in English.



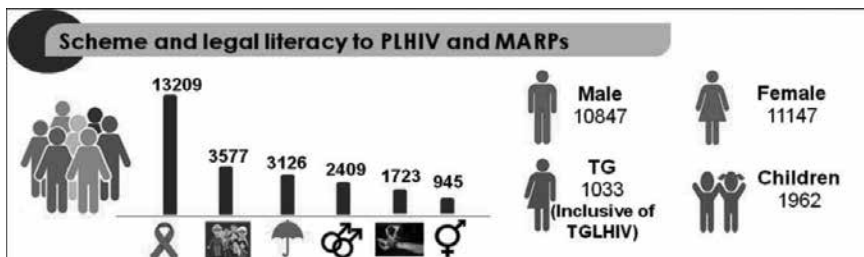
Scheme Directory was developed and printed in English for all the seven states

The posters were prepared on various available schemes for target community including the family members and were displayed at all the service delivery points namely ART, ICTC, PPTCT, PLHIV Networks, CBOs, and NGOs.



[illegible]

Scheme and Legal Literacy: Throughout the project four years, a total of 21412 schemes and legal literacy sessions were held for target community members and 3577 for family members. The states of Telangana, Maharashtra, Tamil Nadu, Odisha, and Rajasthan had a higher reach than the other states of operation.

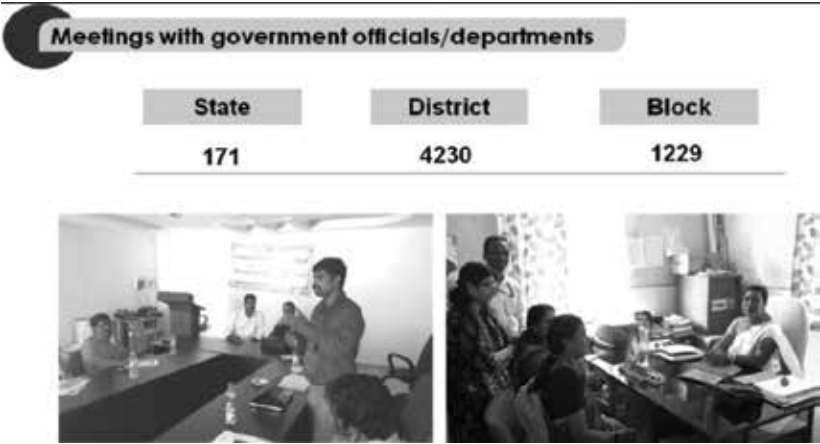


Demand Generation Meetings (DGMs): Demand Generation Meeting was a platform that contributed to the first three results areas. It bridged the gap of information on schemes through direct

interaction, enabled transparency through public disclosure of schemes and budgets and spending and also provided opportunities for the community to submit applications directly in addition to follow up on already applied schemes and services. DGM also dispelled the misconceptions and biases related to community groups and enabled a better understanding of the community needs. DGMs also built capacity among the community members on the process of applying and engendered trust in the government mechanisms.

Result Area 2 – Activities included sensitisation of key stakeholders across sectors, advocacy for inclusive schemes and services, tracking schemes and budget utilisation, and deploying Right to Information Act (RTI) when needed. The accomplishments related to these are described below.

Sensitisation of key stakeholders across sectors: During the initial stage of implementation, the project obtained support letters from State Aids Control Societies (SACS) officials to commence the activities at the state and district level. In the year 2014, the sensitisation meetings, both at the state and district level, were utilised to explain in depth the goals, objectives, activities, and outcomes of the project with the officials. The project team had also used this platform to introduce the CRPs to various government officials and also explained the issues and problems faced by PLHIV, sexual and gender minorities, sex workers and People Who Inject Drugs (PWID). In the year 2015, the project introduced the process of Strengthening Support Visits (SSV) to enhance the support of demand and supply-side stakeholders by further building the relationship, to follow-up regularly to know about the current status of previously submitted applications along with the target community members. At the state, district, and sub-district (block) level, advocacy and sensitisation activities were carried out with the involvement of the community members under the guidance of both the state project coordinators and programme officers.



District level NGO/CBO Coordination Meeting: This was initiated in 2016 as the demand generation meetings began to be organised at the block level. The coordination meetings provided a platform for the NGOs, CBOs and PLHIV networks to share among each other about the long-pending applications of target community members and provided scope for the CRPs to rigorously follow-up with respective departments on the long-pending applications. The meetings also helped avoid duplication of services to the same client and reached out to a larger number of unreached community members.

Training of Trainers (TOT) on Advocacy and Right to Information Act: Training of Trainers in Advocacy and RTI was organised by the project in 16 districts of seven states. A total of 347 community representatives and 19 family members were trained on RTI and Advocacy. The primary objective of the training was to capacitate the target community members/leaders on RTI and Advocacy. The sessions included basics on Advocacy, advocacy methods and the issues for which the target community members can join together to advocate. During the RTI sessions, the community members were given a clear understanding of the purpose, procedures, and ways to file an RTI. As a prerequisite for applying for RTI, the project trained the community leaders and representatives from CBOs, NGOs and TIs on the importance, purpose, and the process to deploy RTI.

Tracking Schemes, Budget Utilization and IEC materials collected from the government: As a result of sensitisation and strengthening support visit with various government departments and key stakeholders, the project staffs were able to track schemes and services at various departments. Including in Department of Social Welfare, Department of Social Justice and Empowerment, Women and Child Development, Rural Development, Labour Department, Consumer Welfare and Civil supply, Judicial Department, Panchayat Raj, Health and Family Welfare, Public Administration, TADHCO, Department of Schedule Caste, Schedule Tribe Welfare, Department of Minorities and other Backward Communities, Urban Development, PRI member, and Charitable organizations. Tracking of the budget was done across all the states. Further, a total of 194 types of IEC materials were collected from various government departments such as leaflets, pamphlets, booklets, forms, and government orders. The project team gathered these from various departments across the implementing districts and distributed to the target community members.

Advocacy for inclusive schemes and services: Over the period of four years, the project was successful in carrying out 7 events at the state level Maharashtra (2), Manipur (2), Odisha (1) and Rajasthan (2); activities at the district level: Ahmednagar (2), Bhandara (2), Amravati (1) in Maharashtra; Kalahandi (1) in Odisha; Bhilwara (1), Sawai Madhapur (2), Tonk (1) in Rajasthan; one each in Cuddalore, Sivagangai and Villupuram in Tamil Nadu; Medak (1), Rangareddy (1), Mahabubnagar (1) and Warangal (2) in Telangana and 02 events at the block level Beguniapada (1) and Polsara (1) in Gajam district of Odisha. The advocacy platform was utilised to advocate for inclusive schemes with the government department. Sensitising Panchayati Raj Institutions members and advocating for rights of the transgender as per the Supreme Court ruling was a message necessary to put across. Generating awareness of National Legal Services Authority (NALSA) judgment on Transgender (TG) rights and increasing the quota in scheme allocation was aided by leveraging linkage between target community members equipped in skill development training. Revised criteria and prioritising target community members in accessing

various social security schemes led to an integration of both, the state and central government to draw the commitment of department officers in ensuring the fast access to the social protection schemes.

Government Official Transfer Tracking Tool: Based on the recommendation of the EU, the project tracked the district-wise government official transfer details in the prescribed format shared by EU. This was updated on a quarterly basis by the programme officers in their respective states and shared with the central team.

Result Area 3- Activities described in Areas 1 and 2 had outcomes which were worked upon to further increase the uptake of social and legal protection schemes.

Demand-side activities: Individuals were met by CRPs at the ART Centre and other service outlets. A detailed need assessment was carried out by those expressing interest in applying for relevant schemes and services. Relevant schemes and entitlements that community members were eligible for were identified during the 'needs assessment' process. Based on the willingness, the individuals were supported by the CRP in completing and filing the applications. The CRP followed up with or helped the concerned community members follow up with the departments for approval and access.

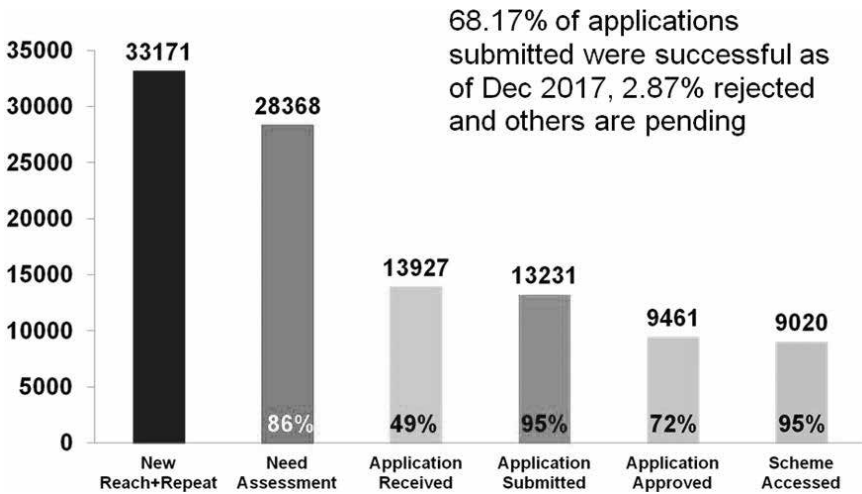
Supply-side activities: As described under Results 1 and 2, demand-generation meetings as well as sensitisations, SSV sessions and advocacy at state, district and block level were held to sensitise and advocate with the government to improve attitudes related to the marginalised people. The emphasis was also laid on the prioritization of the target groups in scheme allocation as most of them were doubly marginalised.

Promoting E-applications: To improve the speedy application process, the project encouraged the use of e-application wherever possible. In Telangana, identity documents and schemes were applied through online across all districts of implementation. In Tamil Nadu, identity documents were applied through online across the districts. In West Bengal, accessing labour card was made online in the districts of East Medinipur and Jalpaiguri. In Odisha, all identity documents were submitted through online across the districts. In Rajasthan, all

identity documents and most of the schemes were applied by the project online.

Legal Awareness Camps: The project team across eight states organised 29 exclusive events on legal awareness. A total of 830 individuals: PLHIV Male-166, PLHIV Female-213, PLHIV TG-20, FSW-206, MSM-99, TG-69, PWID Male-56 and PWID Female-01 had been sensitised on Supreme Court NALSA Judgement and the five schemes for TG community. There were also 56 family members, of which PLHIV (43), FSW (10), and MSM/TG (3) benefitted by the workshops. Seventy-six legal cases were addressed as an outcome of the legal awareness events organised in the states of Manipur (01), Odisha (47), Rajasthan (22) and Telangana and West Bengal (3 each).

- Applications and Access:



The figure demonstrates that 68% of the applications submitted to various government departments were successful and there was only 2.87 per cent rejection, while others were pending for approval when the project officially ended. The figure also presents the overall new reach inclusive of the repeat sessions, was 33171 of which 86 per cent of the members' needs was assessed. Out of 28368 community and family members whose needs were assessed, only 49 per cent applications were received by the project. 13231 applications were

submitted to various government departments of which 9461 were approved, and 9020 community including family members have accessed various entitlements, scheme, and legal services during the reporting period.

It is evident that PLHIV had accessed a greater number of schemes followed by the family members and then FSWs. Among the PLHIV community, women living with PLHIV obtained access to more significant number of schemes in comparison to males living with HIV, TG living with HIV and CLHIV.

Family Comprehensive Approach: The project team made a shift in its strategy in 2016 as an outcome of the Result Oriented Mission (ROM) held in December 2015. The project focused its attention on access to multiple schemes for family and individual members through its comprehensive approach. This was aimed at improving the overall socio-economic condition of the target community members and impacting their lives. In the reporting phase, the project was able to reach out to 1732 (1033 PLHIV, 358 FSW, 244 MSM, 18 TG and 79 PWID) families of which 570 schemes were accessed, namely, child welfare, education, employment, housing, insurance, livelihood support, pension, social assistance security and travel. The accrued value of this access was of Rs.9, 294,050.

Result Area 4 - elaborated on the good practices and dissemination of the same. These included planning, review meetings, experience sharing, monitoring of program, tracking results to ensure quality of data and dissemination events.

Experience Sharing and Review Meetings at various levels

A total of five annual review and planning meetings were organised throughout four years. The primary objective of these meetings was to review the planned versus achieved activities comprehensively. It was imperative to understand emerging scenarios, needs, trends and accomplishments of the state and districts by population category and various indicators. Identifying strategic and implementation gaps to address the needs of the target community and their family members was a prerequisite in developing a comprehensive plan for the new project year. As a result

of these meetings, the national and state team developed a detailed national and state project implementation plan in line with the overall log frame.



Quarterly review and planning meetings were organised at various state headquarters where the project was implemented over a period of four years. The objective of the experience sharing meeting at the regional level was to enhance the capacity of the staff in areas of planning, execution and build their knowledge on the new schemes, encourage cross learning of the states with the field level experiences shared by community resource persons. Driven by the objective of showcasing the achievement of Project Svavritti in the respective states and as the project was coming to completion, the project team organised state level dissemination meetings. Similarly, at the National level, the project team had organised the national level dissemination meeting on 22, March 2018 at New Delhi. The meeting had brought together various critical stakeholders from the district, state and national level who had been part of the implementation, partner organization and project staff namely the programme officers, state project coordinator and community resource persons.

Implementation Outcome

Awareness on scheme/legal information to communities: A total of 33171 beneficiary outreach activities took place during project period, out of which 24989 unique individuals were reached through the scheme and legal literacy sessions, which comprised of 21412 target community members and 3577 family members. In comparison with other demographic groups, women living with HIV/AIDS received the highest proportion of scheme and legal literacy (46 per cent) sessions. A total of 5484 community members were trained to disseminate information on various entitlements, socio-legal protection services and application submission procedures through 144 demand generation meetings and 29 legal awareness workshops. In addition, 366 community leaders /members were trained on advocacy and Right to Information (RTI) Act through 16 trainings in the states of Maharashtra (1), Manipur (3), Odisha (2), Rajasthan (2), Tamil Nadu (4), Telangana (2) and West Bengal (2).

A total of 2002 sensitisation meetings and 3628 strengthening support visits were carried out with the state, district, and block level government departments in the reporting period. These sensitisation meetings and visits helped to update the government departments on the progress of the project activities. Follow-up on previously submitted applications, the invitation to officials for DGM to advocacy events as well as obtaining support letters from SACS and DAPCU was undertaken. Lastly, an approval copy of the schemes was obtained from various departments.

Uptake of schemes and services: A total of 13927 applications were submitted to government departments, out of which, 7329 target community members and 1809 family members accessed schemes (4614), entitlement documents (4333) and legal (76) services, translating into an approximate benefit of Rupees. 131,369,698 (Euro 190,391) including accrued and eligible. The entitlement documents and socio-legal protection services accessed the most during the intervention were Income certificate (All states), Domicile/Residential (All states); Chronic Illness Certificate (Maharashtra), Gender Identity Change Certificate (Odisha), Legal – Domestic Violence (Odisha), Children Welfare-Palanhar Yojana (Rajasthan); Education – HDFC

Educational Crisis Scholarship Support (Maharashtra); Employment-Labour Card (Telangana, Tamil Nadu and Rajasthan); Food and Nutrition-AAY (Telangana, Rajasthan and Odisha); Health- ART Registration (Rajasthan and Odisha); Housing (Odisha, Telangana and West Bengal); Insurance- Bhamasha Insurance Card (Rajasthan), PMJJBY and PMSBY (Tamil Nadu, Manipur and Odisha); Livelihood Support-Schedule Caste and Schedule Tribe Corporation (Telangana); Pension-ART Pension (Rajasthan, Tamil Nadu and Telangana); Social Assistance and Security-Madhu Babu Pension Yojana (Odisha), Single Women Pension Scheme and Travel-Bus Concession, Free Bus Pass and ART Travel (Rajasthan and West Bengal).

Good Practice Documentation and Dissemination-

Some of the good practices in the project are: first, Case Study Documentation which is based on the experience of 4 years, collated together 10 successful case studies in a form of booklet and released during the National Level Dissemination Meeting. Second, Family Comprehensive Approach which relied on the ROM recommendation that focused towards family comprehensive approach, through which 1167 family members benefitted. Third, the Online Rejection Tracking Tool had helped the central team to rigorously follow-up with the respective programme officers to resubmit the applications with required supporting documents. Fourthly, the 'Grid Automation Reporting System' enabled single window entry system to feed the data, create auto generation report feature and present various analyses for program planning. Further the regional experience sharing had facilitated cross learning which helped the community resource persons to improve their outreach activities especially in reaching out to MARPs. Sixth, the Gap Analysis enabled the project to reduce the gaps that were existing in major project indicators. Lastly, the 'Mission Mode' on Labour Card was helpful in looking at the availability of schemes that were existing with the Labour Department. The project had shifted its strategy and focused more towards supporting target community members in accessing labour cards in various states of operation. Additionally, quarterly newsletter, case studies, best practice had been shared through web

services. Project visibility was ensured at stakeholder meetings, displays, and training programs and in IEC materials.

Project Limitations and Key Lessons

The intervention faced challenges, in executing the proposed activities. For instance, because of previous experiences of stigma and discrimination, there was hesitation to disclose HIV status, gender identity, sexuality, or profession as a sex worker to apply to schemes. Secondly, the interventions witnessed difficulty in obtaining essential eligibility documents such as identity cards: as many do not have a residential address. Such a pattern was repeatedly observed as these people are often alienated from their natal families. The third challenge was the requirement of multiple follow-ups with departments and difficulty in following up on submitted applications because of lengthy processing times and the expense involved in travel. Lastly, limited formal literacy made it challenging to fill in complex forms besides the general lack of awareness of available schemes or the process of applying for the same.

In the year 2016 and 2017, two other significant changes slowed down the application process at district level: The government’s move to use the Socio-Economic Caste Census 2011² (SECC) criteria instead of the poverty line to identify recipients for its pro-poor schemes was. By and large, the district officials were not well informed of these changes, and this further delayed the application process. This problem was encountered mostly in Maharashtra, Tamil Nadu, Telangana, Manipur, and Rajasthan. Furthermore, with the launch of newer schemes such as Pradhan Mantri Awas Yojana, the applications filed for the older schemes, such as Indira Awas Yojana were treated as invalid. The process had to be re-initiated under the new format in many places. In some locations, the process was stalled entirely.

The project interventions have set the pathway for a way forward based on the lesson drawn from the project. Significantly, engaging With the Civil society organisations, including community-based

2. The SECC 2011 ranks households based on factors such as socio-economic status and caste-specific education status. It uses these factors to calculate deprivation scores.

groups, State institutions form an essential criterion to enhance access to life-impacting social protection schemes and legal services. Continued engagement with the district and sub-district level government officials to translate the national and state level policy changes into benefits for the community is of paramount importance. Frequent opportunities for an interface between marginalised communities and government officials, especially given turnover/transfers, will help demand-and supply- sides understand each others' context and constraints and needs. Furthermore, a Social Protection Day could be held under the coordination of DAPCU with the involvement of positive networks and Targeted interventions (TI) NGOs. Last of all, reaching out for resources from the private sector emerge as a key lesson which can complement government-sponsored schemes and services.

Conclusion

Sexual/gender minorities, AIDS-affected families, female sex workers and injecting drug users living at the fringes of societies, need to be recognised having a fuller right to citizenship. Project Svavritti, initiated by SAATHII worked towards creating a space for these marginalised, who need to be accepted within the national policy frames of citizenship. SATHIII, showcased that the prevalent policy framework may fail in answering the need of this marginalised group as a result of the societal stigma and exclusion that already engulfs these citizens. While, community advocacy, dissemination of information and ensuring effective service delivery may enhance their chances of being assimilated in the society, SATTHII aimed to absorb maximum stakeholders in shaping strategy and approach, to ensure inclusion of these marginalised as citizens, at different stages of policy, implementation, and feedback.

Project Fact Sheet

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|---------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <i>Project Implementing Agency(s)</i> | <i>Solidarity and Action Against the HIV Infection in India (SAATHII)</i> |
| Project method(s) | Partner with other community-based organisations and engage in implementing the project; Interaction with local authorities as well as with members of target communities; involving members of affected and marginalised communities; building local capacities; developing information-education-communication (IEC); building capacity and skills of civil society groups; baseline survey, with both quantitative and qualitative components; An end line study with both quantitative and qualitative components. |
| Stakeholder(s) | Individuals as well as household among families affected by AIDS, gender and sexual minorities, people who inject drugs, female sex workers |
| Site/ Field (Exact Location) | 30 of the backward districts of eight focal states of India from January 2014 to March 2018. SAATHII implemented the project in Manipur, Maharashtra, Nagaland, Odisha, Rajasthan, Tamil Nadu, Telangana, and West Bengal. |
| Duration | 4 years (January 2014 to March 2018) |
| Project Partner(s) | Manipur Network of Positive People (MNP+), Network of Maharashtra by People Living with HIV/AIDS (NMP+), Network of Naga People Living with HIV and AIDS (NNP+) and, Kalinga Network of People Living (KNP+) and Disha-Roman Catholic Diocesan Social Service Society (RCDSSS) |
| Contributing Donor(s) | NIL |
| Thematic Area(s) | Increasing access, information uptake to government schemes by socially and economically excluded groups, specifically; AIDS-affected families, sex workers, sexual/ gender minorities, and injecting drug users |
| Organisation Contact (web link) | http://www.saathii.org/ |

Strengthening Participation in Local Governance to Enhance Access to Entitlements and Basic Services by Marginalised Tribal Communities

*The Aga Khan Rural Support Programme (India)
Initiative in Gujarat and Madhya Pradesh*

Abstract

The Aga Khan Rural Support Programme (India) had put in place a specific programme aimed at strengthening local governance institutions. The program's goal is to enable Gram Sabha and Gram Panchayat to perform their governance role in local planning, delivery of services and monitoring of public schemes in an effective, transparent and accountable way. The strategy is to bring citizens, Panchayats and government administration on one platform, and to establish a smooth communication – two-way flow of information: data, execution actions, results, and others – among all these three key stakeholders. The program's underlying assumption was that Soochna (information) will lead to Sahbhagita (participation), which in turn will lead to Sushasan (good governance).

The platform promoted was called Nagrik Soochna Kendra (Civic Information Center). It was a physical and institutional space where information and knowledge about decentralised governance, public services, and access to government schemes are gathered and shared. As a resource centre, NSK enables the members of the Panchayati raj institutions to play an effective role in local planning and implementation of schemes and services, and simultaneously facilitate citizens' access to government schemes.

The program had three main components: 1) strengthening of Mahila Sabha (women assembly) and Gram Sabha; 2) Panchayat

capacity building knowledge and information support, vision building, planning and budgeting exercises, financial support, and panchayat level information system; and 3) enhancing of supply side interventions – collaboration with the government administration to bridge the information gap between the Gram Panchayats and the state government as well as develop more collaborative action between different departments.

Keywords: Local Governance, Participation, Service Delivery

Introduction

India is the world's fourth largest economy on purchasing power parity and yet is home to the world's largest number of illiterate people and to a third of the world's malnourished children. In the two states of this action, 55% of under five year old children in Madhya Pradesh are malnourished, and in Gujarat 70% of children under five years are anemic and about 45% malnourished. The project's five districts were among the poorest in the country, with poor infrastructure, virtually no irrigation, minimal links between agriculture services and markets, low access to bank credits and high seasonal migration. These Backward Regions Grant Fund (BRGF) districts have existing PRIs and District Planning Committees mandated to operationalize bottom-up planning and deliver entitlements across sectors, but planning and delivery mechanisms for public services are weak and citizens have little awareness or knowledge about their entitlements or means to access these. Among India's social groups, the Scheduled Tribes, comprising 8% of the population, rank the lowest in human development indicators and in poverty levels. In the six project blocks, 71% of the total population was tribal.

The Government of India has in recent years passed several landmark legislations to empower and enhance the entitlements of the poor and the socially excluded, including the Right to Information (RTI) and Mahatma Gandhi National Rural Employment Guarantee Act (GNREGA) Acts in 2005, the Scheduled Tribes and Other Traditional Forest Dwellers (Recognition of Forest Rights) Act (2006), and the Right to Education Act (RTE), in 2009. Other

reforms include the National Rural Livelihoods Mission (NRLM) and the National Rural Health Mission (NRHM).The UID (Unique Identification Number) promoted for all citizens potentially enables poor and marginalized people to access social security schemes. However, these entitlements have not yet reached the deserving sections of the society in an easy, transparent, effective and efficient manner.

Project Background and Description

At state level, led by Madhya Pradesh, laws have been enacted or measures initiated to bring in Citizens’ Charters and to ensure more accountable, transparent and equitable delivery of public services. The Madhya Pradesh Guarantee of Public Service Delivery Act 2010 was a pioneering law and covers 56 services across 16 departments. The Act provides a clearly defined service, a designated officer responsible to deliver that service, a time limit within which the service will be delivered, penalty in case of delay or denial, appeals and review processes. Gujarat’s Citizen Charter covers over 70 essential services. In Gujarat, accountability measures rely a lot on computer and web-based technology. These include SWAGAT (State-Wide Attention on Public Grievances by Application of Technology); e-gram in all 18,000 villages for single-window delivery of 8 public services; and Jan Sewa Kendras in all district and block headquarters to enable citizens to access information, apply for key services and track their applications on one platform. There is also an emphasis, especially to tackle malnourishment, on collecting more vital data at the district, block and village level to make decentralised district-based plans and take informed decisions, given the large inter-district variations within the same State. However, all these programmes work at minimal capacity and effectiveness. This project aimed to vitalise these opportunities to empower tribal populations, especially women, to demand and access their entitlements and ensure that delivery mechanisms work effectively.

The project action aimed to work at both ends of the governance spectrum: on the rights of poor and marginalised people, especially women, to acquire the awareness, resources, authority and

opportunities to benefit from their entitlements; and on the duties of governance institutions, especially the three-tier local self-governance 'Panchayat' establishment, to become better and more efficient in delivering these entitlements.

Principal Issues

In the project areas, as in most of India, the reality was that Gram Sabha members had extremely low levels of active citizenship; were largely unaware about their entitlements and available government schemes; had inadequate knowledge about the powers and functions of Gram Sabhas; and distrusted their Panchayat bodies. Tribal women have some economic freedom such as greater participation in markets but were politically marginalised. They faced deep socio-cultural barriers to being part of political institutions, traditional or modern, and few women attended Gram Sabha meetings. Empowerment of Gram Sabha members, at least half of them women, and strengthening the functioning of Gram Sabhas was core to the project.

Tribal populations, especially women, were usually unaware of their entitlements and government schemes for a variety of reasons. They lived in far-flung hamlets and villages unconnected by roads and in difficult terrains. Government functionaries and para-workers hardly visited these villages, especially the economically poorer tribal families who lived in hamlets on the fringes of the villages, and mobility was often restricted for tribal people, especially women, who seldom went to the Panchayat office or the block or district office.

Another critical field-level gap in accessing entitlements was citizens' inability to negotiate bureaucratic procedures. This included accessing the correct forms, filling them in, obtaining all the documents to attach, submitting and tracking them and, if there were problems, dealing with them or registering a complaint. Poverty, illiteracy and lack of self-confidence acted as additional barriers.

Objectives

The overall objective of the proposed action was to enable quality delivery of entitlement schemes and basic services in

health, education and socio-economic security to 33,000 poor and marginalised tribal households in six blocks across five districts of Gujarat and Madhya Pradesh through stronger governance institutions.

The three specific objectives were:

- (1) To empower community groups, especially women and other marginalised sections of society, to access and monitor their entitlements and basic services from Panchayats and government agencies;
- (2) To influence and strengthen 85 (90%) of 94 village or 'Gram' panchayats in local planning and supervision to ensure effective implementation of public programmes; and
- (3) To improve transparency and accountability in governance by enabling and advocating effective adoption of e-governance initiatives for panchayats and service delivery departments.

E-governance, fast becoming the hallmark of a responsive government, increases accessibility of information and services to citizens but still does not go down to the last mile. While e-governance faces technological and capacity barriers on the supply side, on the demand side there is an urgent need to increase community ownership and participation and to ensure updated data of beneficiaries and their entitlements. Good data management with updated and real-time records ensure transparency and good administration but Gram Panchayats are not equipped with any tools/software so that they can keep a consolidated view of all the schemes and works undertaken in the Gram Panchayats. These restrict the effectiveness of decision making, especially while preparing Panchayat plans.

Elected Panchayats have the onerous task of ushering in development and have the added responsibility under Panchayat Extension to Schedule Area (PESA) Act to preserve their natural resources. Awareness levels about government programmes and understanding of the different provisions of PESA are however very low among elected leaders, especially among elected women representatives. Few Panchayat leaders possess the technical knowledge needed for administration and even fewer have the

capacity to mobilise additional resources for the development of their villages. This makes them inadequately prepared for their job and they also face innumerable challenges in carrying out their responsibilities. Several training programmes held by the State Panchayati Raj Departments attempted to build these capacities, but such programmes are infrequent, inadequate in coverage of Panchayats and often lacking quality in content and trainers' skills.

Elected women representatives (EWRs) comprise a substantial proportion of elected Panchayat bodies because a third of the seats in Gujarat and half of the seats in Madhya Pradesh are reserved for women. For EWRs, the challenges are gender-based and manifold. Often the EWRs' fathers, husbands, brothers or even uncles become proxy leaders and participate in all decision-making activities. EWRs who attend meetings are less informed and educated and are less mobile. Since they are elected on seats reserved for women, they are insecure about their next term because the seats are rotated and their constituency will go to a male member in the following elections. Voters, therefore, are often happy with proxy male representatives knowing they may be back as elected representatives in five years' time.

Project Methodology

Summarising all these challenges, it can be said that "lack of information" about acts, policies, schemes, budgets, technical know-how is the root of the problem. It is required to see and understand the criticality of the very many dimensions of information – particularly depth and timeliness of information relating to public programmes. Currently government runs much Information, Education and Communication (IEC) programmes for creating awareness amongst citizens for different public programmes. The IEC is of diverse type and used widely in combination by government. It includes audio-visual like radio jingles and television advertisements, newspaper advertisements, wall-painting and sometime street-theatre also. Considering geographical spread of country, diversity of language, low literacy level and low penetration of TV and newspaper in interior parts of country makes it difficult for citizen,

particularly the most vulnerable who needs it, in actually accessing the information. Also, these forms, being centralized in nature, cannot achieve the depth of information regarding documentation, procedure, timeliness etc.

Also, the IEC material is one-way communication and the citizen cannot give feedback or can't share his/her needs. So it's also necessary to build a system where two-way communication can happen and that will really empower the citizen.

The project's analysis had shown that the "information" is key but the meaning of information goes deeper than just knowing the name of scheme or policy or act. A citizen feels empowered only when she or he has full information which means knowing what it entails in terms of benefit, who is responsible for delivering it, when it will be delivered, how it will be delivered and if not delivered then whom to question and even going beyond if not delivered knowing the reasons of it, why it's not being delivered, is it because of leakage or wrong criteria or because of lack of human resources to delivery or because of budget allocation. So this can be termed as 'Information pyramid', which means – knowing, understanding and questioning or three levels of awareness, information and knowledge. The awareness level just about knows the name or benefit followed by information level where the citizen knows the full procedure and has understanding about role of respective offices. The top most and desirable level is where the citizen knows the procedure and also is able to analyse the reasons and factors which affects the delivery of scheme to citizen including knowing about policy or acts and budget provisions.

Beyond this information depth, due to social-economic-political and administrative powers hierarchies, many a times, citizen alone are not able to question the system and there is where a collective of citizens can play a role. Therefore, the last but most important point is collective voice of citizen that can and could play a vital role in above.

The European Union - AKRSP (I) project had undertaken activities around three objectives focusing on three stakeholders, namely, citizen – focusing on access to information and entitlements; local governance institution (LGI) Gram Sabha and Gram Panchayat

body – capacity building for effective functioning of LGI and third is government administration – focusing on sharing of best practices and dissemination of learning of the project for advocacy.

- i) *Access to information and entitlements with citizen:* This involved setting up Nagrik Soochna Kendra (Citizen Information Centre) at block level supported by trained Nagrik Mitra (Citizen Fellow); Training of CBO and volunteers on schemes and services; ICT for access to Information (including digital camps, Mobile Mahiti Karyakram using IVRS and SMS, and helpline for citizen support); and Community monitoring of services and advocacy with government for resolving the issues:
- ii) *Activities for improving participation and effectiveness of local governance institution:* This involved Capacity building of PRI members and citizen on decentralized governance, integrated planning, budgeting etc; Capacity building of Sub-committees of GP; Facilitating mahila sabha and Gram Sabha; Preparing integrated Village Development Plans; Tracking of Mahila Sabha, Gram Sabha and VDP action points; Sushsashan budget for GPs; and Facilitate GP to undertake pro-active disclosure.
- iii) *Learning and sharing of best practices with government for adoption:* This involved training modules on local self-governance, Panchayat planning and budgeting, e-governance and ICT for PRI members; Articles published in mainstream media and development sector magazines on Mobile MahitiKaryakram; Study and documentation of process and impact of intervention on work with local governance institutions; Publication of case studies on good governance practices including mahila sabha, gram sabha, panchayat planning and overall functioning of panchayat; Impact study on contribution of Nagrik Soochna Kendra in improving the performance of public schemes in project blocks; and documentation of processes and key elements of Nagrik Soochna Kendra.

Programme and Implementation

The project had adopted a systematic approach for strengthening the participation of people in decision-making process at GP and GS level. The strategy included: Develop conceptual understanding about local self-governance amongst the project staff; Analyse the status of functioning of Gram Panchayat and Gram Sabha; Community mobilization; Capacity Building as key element embedded with all the interventions designed and implemented by the project; Developing Village Development Plans (VDPs) and using VDP as base for all future interventions in the villages; and Developing institution to act as effective medium of information dissemination and also ensuring peoples access to information. Use of Information Communication Technology (ICT) had been a strategic choice for entire project team to cover maximum population in an around the project area. Capacity Building had been a key element in all the interventions designed and implemented by the project. The Project had treated all interventions as an opportunity to build capacity of the elected representatives, CBOs and Community members.

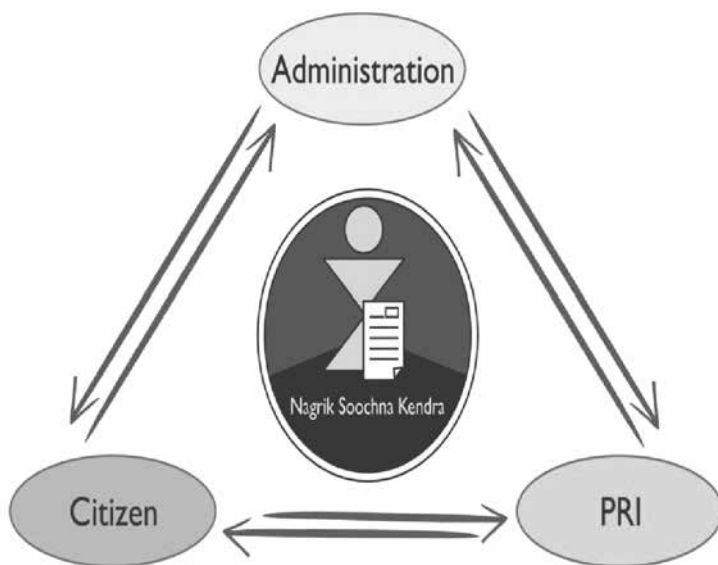
The project worked with the three pillars which are detailed below:

1) *Soochna (Information);*

It was analysed and realised that most of the Gram Panchayats, being direct representatives of their citizen, wanted to deliver services and they often, along-with Gram Sabha resolutions wrote to higher administration but were not able to solve the problems. This actually led to distrust between the citizen and the Gram Panchayat which is an institution of local self-government and actually weakened the constitutional bodies like Gram Panchayat and Gram Sabha. Taking ahead this analysis, the project developed a strategy which was based on building cadre of citizen with awareness, information and knowledge; building collectives of citizen to raise their voice, and building trust between Citizen, Gram Sabha and Gram Panchayat.

For doing this, the project developed an institutional space, which was called as “Nagrik Soochna Kendra” (NSK). The work was spread in 96 Gram Panchayats in 6 blocks of Gujarat (In Narmada and

Aravalli districts) and Madhya Pradesh (Khargone, Badwani and Dhar districts) and jointly implemented by AKRSP (I) and Development Support Center (DSC) in partnership with grassroots women's federation and farmers producers organisations promoted by both the NGOs.



The NSK was not just a physical space but an institutional space for information and knowledge about decentralised governance and public services and to facilitate the citizen about how to access the government schemes. It also worked as resource Center for PRI members so as to enable them for effective role in local planning and implementation of schemes and services. So the strategy revolved around Nagrik Soochna Kendra and Panchayats. The idea was to develop “role model” panchayats to demonstrate importance and effectiveness of panchayat led model of development planning and execution.

The approach/strategy of the project was to bring three stakeholders – citizen, Panchayati Raj Institutions (PRI) and government administration, on one platform and to establish a smooth communication – information flow, data, execution action, results etc, between all these stakeholders. The information than

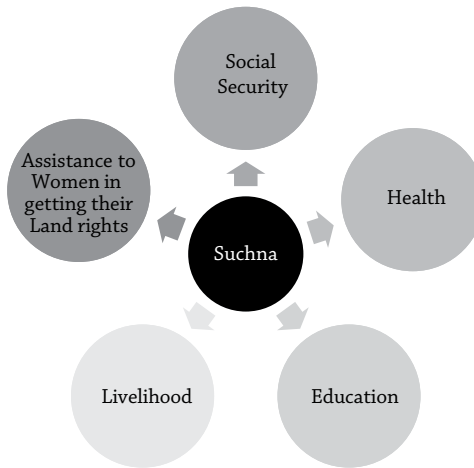
can be used for better governance decision at different levels of government including PRI.

Nagrik Soochna Kendra - NSK (Citizen Information Centre)

In order to spread awareness about the Government schemes, identifying the beneficiaries under those schemes and helping people claim the benefits, information centres (NagrikSoochna Kendra) had been set up. The Nagrik Suchna Kendra or the NSKs used different mediums to ensure that citizens had access to information. At these centres, people could know and enquire about all the details of new and existing schemes brought out by the central and state government. It was very common that in villages, people were oblivious of the schemes made for them due to lack of awareness, or they didn't know who all can benefit from them and even if they knew, they were unable to claim those because of inconsistent paperwork or absence of documents necessary. A lot of times, either the office was very far from the residence or the government officials manipulated the citizens and hence they were bereft of the benefits because they couldn't afford to visit them too frequently that too at the cost of going to work. NSKs also facilitated citizen's access to various schemes and services offered by the government departments. The focus of the work was to ensure that citizens got benefits tied with each schemes and services offered by various government departments. The NSKs provided assistance in key sectors such as nutrition, health insurance and immunization; agriculture and poultry like interventions for livelihood enhancement; Social security schemes (widow, old aged and disable pension); Schemes of School Education Department and Tribal Department; and assistance to women in getting land rights in their name. The diagram below presents the picture of broad support areas of Nagarik Suchana Kendras.

In all the sector the project had listed the schemes where individual beneficiaries were eligible to get benefit or support from the government departments. While providing information and assistance the priority was given to women beneficiaries and other marginalised sections like PVTG, landless etc. The base line data

revealed that people faced difficulty in getting information related to various schemes especially the women; the problem was compounded if visit to government office is important. There was no centralised system of sharing information with people at the government offices; Men somehow managed because they have greater autonomy and mobility; Increased dependency of women for visiting any place and responsibility of household work reduced the chances of accessing benefit of schemes and this also increased their vulnerability.



NSK had two pronged strategy to reach out to citizen and support them in accessing the information and entitlements from public programmes, these included – the human interface through Nagrik Mitra and another one was ICT interface through IVRS, SMS and helpline.

i) Nagarik Mitras (Citizen Fellows or Friends)

The Nagarik Mitras (NMs) were local trained youth from Panchayats only to facilitate accessing of basic schemes and services for citizen. NM was the key of the whole process and they actually worked as citizen facilitator and supported citizen from each village to understand the schemes they are eligible and then preparing all documents and filling the forms. NM became a bridge between citizen and Panchayat and administration. The NM catered to population of 6000 to 7000 citizen across 3 to 4 Panchayats. NM worked closely

with the Panchayat and used to sit in the Gram Panchayat (GP) office or at NSK on designated days. Over a period of time, NM helped the GPs to gain confidence in working on government schemes.

They had been provided training on RTI, RTE, local governance, Panchayati Raj, PESA and other areas. As they were residents of the same village, people trusted them and were more comfortable in approaching and interacting with them; they also understood the situations and issues of the villagers deeply as they were part of it.



In two of the project blocks all the 10 NMs were female and they had got recognition in their community because of their work on such complex issues. One of the Nagrik Mitra, Ms. Sunitaben Padvi from Panchpipri Panchayat of Sagbara block in Narmada district, got elected as Panchayat member and she had now become advocate of Panchayati raj in her Gram Panchayat as well as in the block.

ii) Use of Information Communication Technology (ICT)

Both the virtual as well physical space, it uses different mediums, both human and technological. So the project had three channels of information;

- *Panchayat level Digital Camp*: Digital camps or E-camps were organised to facilitate access to e-governance initiatives of state and central government, in collaboration with local Gram Panchayat (GP) for availing basic documents, submission of applications online and to display information which was available in public domain of GP to citizens for critical analysis.
- *Mobile Mahiti Karyakram*: MMK was one key feature where the project reached to more than 25000 listeners, twice in a week. Each IVR generated call was about one and half minute duration and being in local dialect it overcame barriers of literacy and language. Each voice message focused on any scheme/services or communicated date of events like Gram Sabha or disability certification camp organised by government. Along with MMK, the NM also sent text information of same content so that citizen could store the information also for their future use.

In MMK, there would be a monthly calendar and in one month the project focused on one scheme or service or act so that the depth of the information could be sent.

- *Helpline*: It was understood that the outbound calling had much limitation because of connectivity or other reasons. And people will still need more in-depth information and support also when it comes for them to file an application for availing any scheme and that's where they needed the helpline where they could call and ask any question and seek guidance. It was observed that people called as per their problem, especially there were more queries coming after listening information from MMK, to get more specific details.

2) Sahbhagita (Participation)

Community Participation in Governance processes is the key for effective governance. Once people have information they start demanding their rights and collectively they also feel empowered to raise their questions in governance processes. AKRSP (I) and DSC

both had worked in strengthening women's and farmers' collectives and the same platforms had been now equipped with information about government programmes, Panchayati raj and role of citizen and Gram Sabha. The project facilitated discussion between citizen and Gram Panchayat to resolve issues and create trust. It worked with GPs to follow up the questions and needs raised in the Gram Sabha to take up at block or higher level of administration.

Mahila Sabha:

The project focused on Mahila Sabha in all Panchayats in each block, strengthening which was done prior to Gram Sabha with an objective of confidence building amongst women to represent their voice in Gram Sabha. Initial meetings with women SHGs were held for discussing their issues which culminated into Mahila Sabha where they collectively put up their issues – major issues which had emerged were drinking water, late payment of NREGA and others. Collectively women put their issues in Gram Sabha as written demand and ensured that resolutions on the same be passed by Gram Sabha.



There were key processes being followed for strengthening Mahila Sabha. These included reaching out to each women of the village with information on Gram Sabha – date, day, agenda; mobilize women in the Gram Sabha for participation in large numbers; discuss and dialogue among themselves core issues impacting women; motivate women and support Elected women Representatives (EWR) to take leadership in raising the issues of women in the Gram Sabha and create pressure on the Gram Panchayat to take these issues in planning and get allocation of budget; follow up by women leaders including EWR at GP level and block as well district level so as to ensure timely implementation on their demands; and with an ongoing practice of executing Mahila Sabha, institutionalization of Mahila Sabhas takes place over a period of time.

Gram Sabha:

The focus on Gram Sabha had been to create it as a space for governance with active participation of citizen where the thematic issues gets discussed, debated and decisions taken democratically by all. The project aimed to create understanding amongst citizen about importance of Gram Sabha and provide them information and handholding support to take the Gram Sabha resolutions till executed. The space is also used to build confidence between panchayat body and citizen, overcoming the trust deficit which hinders the vision building and collective decision making.



For this, there were key interventions that were being carried out including awareness about importance of Gram Sabha and role as well powers of Gram Sabha; timely information about date and time of Gram Sabha to ensure higher number of citizen participation; facilitate quality discussion on thematic issues leads by Gram Parishad (GP) or sub-committees; Presentation of issues discussed in Mahila Sabha; Report to citizen by GP about work done and budget expenditures; and volunteers and women leaders ensured written resolutions for Gram Sabha discussions.

3) Sushashan - Enabling Panchayats for Good Governance:

- i. *Capacity building with Knowledge and information support:* The project involved strengthening the Local Governance Institutions (LGIs) with knowledge, attitude and perspective on Democracy and Decentralization and strengthens the spirit and passion of the LGIs to function and perform roles according to the powers bestowed to them in Panchayat Act, 1993 and PESA, 1996. A number of trainings, workshops, exposures and handholding support ensured knowledge support to the LGI members in the domain of their roles and responsibilities, roles of standing committees, spirit of Gram Sabha, administrative and financial powers of the LGIs, role in each of the 29 subjects (in Gujarat 14 are said to be devolved) of schedule XI of the Constitution and most important the true meaning of 'Development' and essence of 'Good Governance'.
- ii. *Visioning exercise of Gram Panchayat (GP) and citizens* – This was done through demonstration to live models of improved governance and vision building; under this intervention, the LGIs had been supported to visit Mendha Lekha Gram Sabha in Gadchilori district, Hirwe Bazar in Amravati district of Maharashtra; Piplantri Gram Panchayat in Rajsamand district of Rajasthan; Punsari Gram Panchayat in Sabarkanth district of Gujarat and the Elected Women Representatives visited Mahila Swaraj Manch of Shihor Block in Bhavnagar district of Gujarat – a elected women representatives

organisation – promoted by ANANDI. Each of these LGIs had distinguished achievements and strategies in the arena of Local Governance. The GPs and Gram Sabha (GS) members were engaged into visioning exercises to have their own vision for their village with a plan to achieve the same.

- iii. *Integrated Planning and Budgeting Exercise* – It has been realized that most of the developmental tasks and programmes are designed by the State and has top to bottom approach. The space between the LGIs and the citizens is less and most of the time space gets activated only during elections. The GSP interventions engaged GPs to build knowledge around needs and strengths and confidence of citizen engagement and participation for defining, designing, negotiating, sponsoring and implementing developmental programmes around their needs and building the capacities of GPs to perform as governing institutions rather than just implementers of government sponsored schemes. The intervention engaged the GPs to develop agendas around ward wise planning and call for citizens to participate in this planning. The planning exercises brought in PRA skills and enabling environment for the GPs member and citizens to plan around areas of citizen centric issues of primary service delivery, occupation related issues, social justice issues, welfare schemes, infrastructures, issues related to natural resources, and other governance related issues of poor GP administration, non-performance of regulatory roles, and others.
- iv. *Sushashan Budget*: In order to empower the GPs to function to its fullest and identify areas which demand financial support and has potentials to improve on their governance aspects, GSP intervention introduced an un-tied fund called as Sushasan Nidhi available and accessible to GPs. Pre-requisite to avail this Nidhi, the GPs needed to undertake participatory planning involving citizens and define areas of development and governance.

- v. *Panchayat Level Information System* – Developing a comprehensive web based application for Panchayats is a useful intervention so that Panchayats can have all data related to all households of the village and other physical-natural resources of the village. This application will also help them to prepare better plans as well to track it. A Web based application was designed to address the information need of Panchayats where it can have detail profile of GP – citizen profile, Household profile, natural and physical profile along with facility to track basic services and entitlements accessed by citizen, Village Development Plan and budget.
- vi. *Facilitating GP to Designing Public Disclosure Tools* – The good governance parameter of ‘transparency and accountability’ is one of the core values of the LGIs which if practiced bridges the gap between citizens and the LGIs. Most of the time LGI do not aspire or do not have ideas around ‘how’ to accomplish or demonstrate this value to the citizens. Under GSP, GPs were supported to have a display board and were trained on contents that should be placed on the display board. The GPs used this board to display information on number of sanitation units approved in their village, schemes related information, aadhar card campaign information, and others. It is envisaged that the GPs shall use this board to display their plans and budgets once they achieve maturity of that level.

Implementation Outcome

One of the major focus of the project had been capacity development of key stakeholders including elected Panchayat Representatives; Gram Sabha members; Active Memembrs of Mahila Sabha; Project Team; Nagarik Mitra; Secretary of the Gram Panchayat; SMC members; and Village Health and Sanitation Committee (VHSC) members. The capacity building programmes had been organized around key themes including conceptual understanding of the local self-governance; Provisions of Panchayat Raj Act; Planning and

Budgeting; Provisions of Extension Act popularly known as PESA; and training on role of SMC in Right to Education.

The process of capacity building or training had adopted two strategies including Class room orientation of concept, provisions and rules; and Organising events to facilitate a process of learning by doing. This is best explained through the process of developing village development plan or the VDP, selecting activities for Sushashan Nidhi, organizing Mahila Sabha and Facilitating Gram Sabha meeting. The participation in actual events like preparing plan or participating in the Gram Sabha meeting gives an opportunity to use the knowledge and information received during classroom trainings.

There are many cases of the work done by Mahila Sabha, Gram sabha, GP and its committees ensuring citizen's access to information and entitlements, GP taking lead in ensuring people's participation in planning and decision making, GP initiating interventions to solve problems in health and education and GP taking steps for pro-active disclosures.

1. Benefits – Data that highlights the success of the project intervention against the problems identified at the beginning of the project

The table below shows the outcomes of the project implementation in the first year whereby through NSK, the project reached to more than 29000 citizen and more than 8500 citizen got entitlements.

Table 1:

| | <i>Overall Achievement</i> | <i>Total</i> |
|---|----------------------------------------------------------------------------------------------------------------------|--------------|
| 1 | No. of citizen accessing information | 91212 |
| 2 | No. of citizen accessing entitlements | 29880 |
| 3 | No. of volunteers | 550 |
| 4 | No. of E-camps | 275 |
| 5 | Demand/Application for residential hostels admission | 1372 |
| 6 | Demand/Sanction for new Anganwadi Centre / KaushlyaVardhan Kendra | 25 |
| 7 | No. of Anganwadis conducting regular Mamta Divas | 205 |
| 9 | No. of beneficiaries in livelihood | 2052 |
| 8 | No. of gram Panchayats where 90% and above eligible beneficiaries are accessing benefits of pension & health schemes | 57 |

There were 57 GPs where benefit of pension and health schemes had reached to more than 90% of GPs by end of March, 2017. In one year, 811 children got benefitted from residential hostel schemes which means they will get free education with food and other benefits for their education till next level, at least for 3 to 4 years and the 2289 persons who got livelihood entitlements can now have more stable income from agriculture, goatry, poultry or small income generation activities for which they got government support.

The project focused on 9 categories of citizen who were most needy and deprived of their entitlements because of lack of information and support. The category wise data of sanctions against their application is presented below.

| <i>No of persons Accessing benefits (Category wise)</i> | <i>Social Security</i> | <i>Health</i> | <i>Education</i> | <i>Livelihood</i> | <i>Total</i> |
|-------------------------------------------------------------|----------------------------|---------------|------------------|-------------------|--------------|
| Pregnant/lactating Women | 402 | 140 | 0 | 0 | 542 |
| Widow/single women | 655 | 32 | 0 | 0 | 687 |
| Women | 947 | 31 | 0 | 2 | 980 |
| Old Age Persons | 776 | 26 | 0 | 0 | 802 |
| PwD | 343 | 10 | 0 | 1 | 354 |
| Landless Families | 14393 | 32 | 0 | 22 | 14447 |
| Farmers and BPL | 5380 | 2306 | 8 | 1946 | 9640 |
| PVTG | 159 | 0 | 0 | 45 | 204 |
| Parents/children | 816 | 0 | 1372 | 36 | 2224 |
| Total | 23871 | 2577 | 1380 | 2052 | 29880 |

Over the project duration, starting from February, 2014 to August, 2018, the project facilitated benefits of different schemes to 29880 citizens. In monetary terms the amount was coming to more than Rs 800 million.

2. From Application to Availing Benefits

A very critical aspect of the facilitation work of NSK was tracking system where each registered case of application was tracked till the time the citizen receives the entitlement. The table below shows the conversion rate from application to availing entitlements.

| <i>Conversion Rate of application to sanctions</i> | | | | | |
|----------------------------------------------------|-----------------|--------------------|-----------------|---------------------------|----------|
| | <i>Sector</i> | <i>Application</i> | <i>Sanction</i> | <i>Receipt of benefit</i> | <i>%</i> |
| 1 | Health | 5516 | 4830 | 4552 | 83 |
| 2 | Education | 4339 | 3298 | 3298 | 76 |
| 3 | Social Security | 1606 | 1457 | 879 | 55 |
| | Livelihood | 8756 | 8408 | 8049 | 92 |
| | Total | 20217 | 17993 | 16778 | 83 |

* This data is for 3 years (2014-15, 2015-16 and 2016-17).

The conversion rate – rate of application to sanction and getting benefits reached to 83% which was very less before the intervention, specially it was too less in social security schemes.

This multi-dimensional approach of empowering community and strengthening Panchayati Raj institutions had resulted in impact positively on overall improvement in public schemes delivery and functioning of Gram Sabha And Panchyats. Few of the impacts of the work included improvements in Schemes and services delivery; Saturation of pension schemes demand in project area; Dramatic increase in applications for residential hostels admissions for children from traditionally low demand pockets; Increased demand and supply in livelihood schemes related to agriculture and poultry; Regularisation of services of Anganwadi and demand for new anganwadis; Increased demand for scheme had created pressure on government for better service delivery; Volunteers accessing online portals and information used to create pressure on GP and departments; SMCs started taking lead in school management to solve children's problem related to class room, drinking water and mid-day meal.

A similar impact had been observed with regards to functioning of Panchayat and its committees and Gram Sabha. In terms of numbers the outcomes are given in following table:

| <i>Sr No</i> | <i>Indicator</i> | <i>Numbers</i> |
|--------------|----------------------------------------------------------------------|----------------|
| 1 | No of GP initiated NSK | 24 |
| 2 | No of GP where written resolutions passed in Mahila Sabha/Gram Sabha | 38 |
| 3 | No of GP/SMC monitoring MDM | 31 |
| 4 | No of GP disclosing information to citizen | 43 |
| 5 | No GP conducting regular GP meeting | 22 |
| 6 | No of GP mobilizing resourced for VDP | 26 |

The overall improvement in citizen participation in governance processes and functioning of Panchayat were: Mahila Sabha is now active and women raised their issues beyond Grams Sabha taking it to block and district administration; ensuring due follow up for their demands; Mahila Sabhas are becoming voice of women under the leadership of elected women Representatives and women's voice is now heard in Gram Sabha and administration; Citizen participation in Gram Sabha had increased and citizen now demands for copy of written resolution and also do follow up of Gram Sabha resolutions passed in earlier GS in next rounds of Gram Sabha.

The Panchyats capacity to plan, implement and manage projects independently had increased and Panchayats also followed up their VDPs with block and district and had ensured that works taken up by GS under VDP are completed. Panchayat offices started providing services to citizen from Panchayat office itself where they provide information, forms and online services and function as Panchayat level NSK. At the end of project period there were 12 GPs which worked as NSKs. Panchayats started taking leadership role in all-round development of village including issues related to social and economic development, specially health, education and livelihood. Panchayats were taking up responsibility for pro-active disclosure through different means like notice board, putting information in Gram Sabha, publishing expenditures in form of calendar and others.

Case Study: Systematic Changes: Panchayats Taking up Role of Access of Information for Citizen and Transparency

Paat Gram Panchayat Started Monitoring and Coordination of Village Level Service Providers:

The Paat Panchayat of Sagbara decided to review all the service providers working in the GP on regular basis. For this, they had written letter calling the service providers; teacher, Nurse, Anganwadi worker, MDM worker, NREGA Rojgar Sevak, Computer operator of E-gram etc for a meeting in presence of GP secretary and a representative of Block Development Officer. The GP was going to do it now on quarterly basis.

Door Step Information through NSK by Gram Panchayat

Chhendiya panchayat of Zhirniya block took an initiative of establishing a full-fledged Nagrik Soochna Kendra for their citizen. The GP, approached AKRSP (I) and asked for support to establish an NSK in GP office. AKRSP (I) provided computer, printer and furniture while GP had decided that they will recruit one youth from the village only to run the center and the cost of the Center will be managed from the fees/charges for different services provided to citizen. The GP will decide the fees for all the services. In the fourth year of the project, Chhendiya NSK had helped 173 citizens in filling and accessing benefit of different government schemes. Now, people from nearby panchayats also come to Chhendiya NSK to access information and filling the forms. This had benefited the citizen in terms of saving of their time and cost which they used to incur when they needed to go to the block office and that too multiple times because of lack of guidance also.

नागरिक सूचना केंद्र का शुभारंभ

मनावर। नईदुनिया न्यूज

विकासखंड की पंचायत बागमूल में नागरिक सूचना केंद्र प्रारंभ किया गया। मसका उद्देश्य गांव के लोगों को जानकारी व निम्नलिखित आशेदन उपलब्ध करवाना है। गौरतलब है कि डेवलपमेंट सपोर्ट सेंटर द्वारा मनावर ब्लॉक की 16 पंचायतों में ग्रामीण सुरासन परियोजना कार्यक्रम संचालित किया जा रहा है। इसके अंतर्गत नागरिक सूचना केंद्र के माध्यम से शासन की योजनाओं की जानकारी व आशेदन निम्नलिखित उपलब्ध करवाई जाती है। बागमूल पंचायत ने परियोजना के सहयोग से इस मॉडल को अपनाया है ताकि गांव के लोगों को आसानी से योजनाओं का लाभ मिल सके। कार्यक्रम में डेवलपमेंट सपोर्ट सेंटर संस्था (राजव) के प्रमुख मोहन शर्मा, सत्यनारायण इस्के, प्रधारी रवि सिंसोदिया व टीम उपस्थित थी।

अंतिम साधना स्थली पर हुई महाआरती

राजगढ़। गुरुदेवश्री राजेंद्र सुरिपर जी अंतिम साधना स्थली की राजेंद्र भवन पर गुरु सत्तमी पर दो दिवसीय भक्तिमय आयोजन जैनिया गुप द्वारा किया गया।

मंडल हैदराबाद- चैन्नई एवं सत्तमी का कमला सोलंकी परिवार बैंगलूरु ने लिया। महाभारती में राजेंद्र जैन नवभुवन परिषद के राष्ट्रीय अध्यक्ष रमेश धरु व महामंत्री अशोक श्रीमाल आदि समाजजन मौजूद रहे। रंगारंग भक्ति गीतों की प्रस्तुति देवेश जैन एंड पार्टी ने दी। इस अवसर पर गुरुदेव की साधना स्थली को गुलाब के फूलों व रंगीत विद्युत की लड़ियों से सजका गया था।



नागरिक सूचना केंद्र का शुभारंभ करते अतिथि।
कार्यक्रम सम्पन्नक धवन गांधी, सरपंच छोट की महाआरती का लाभ राजेंद्र भवन

Good Governance of Kundiamba Juth Gram Panchayat

The Juth Gram Panchayat in Gujarat had three villages viz. Kundiamba, Anjanwai and Motikorvai and 7 wards. Sarpanch and few members of the Juth Gram Panchayat were regular associates in the trainings and exposure visits been organized under the project. Regular contacts, hand holding and inputs to the Gram Panchayat members had positively influenced them to understand their role in wider horizon of citizens needs and improved governance perspective. These members had also influenced other Gram Panchayat members who had apprehensions in associating. The GP engaged citizens to carry out 'Decentralized Planning' in their villages and access un-tied fund from AKRSPI to stabilize drinking water facility in Navinagarfadiya of their village which benefited 30 households to access clean drinking water, whereas earlier women of these households walked 3 km to fetch drinking water.

Ward members had become active, GP general body meeting had been regularized, EWRs had been observed taking interest in monitoring of NREGA and sanitation work under Swachh Bharat

Mission and were executing their roles and responsibilities in true spirit.

Project Limitations and Key Lessons

The major challenges that were faced during the project implementation are as below:

Mahila Sabha

The status of attendance was almost fixed meaning a set of women attended Mahila Sabha meeting and they raised their issues and sometimes mobilised other women when it comes to approaching block or district level offices. There is a need to increase the attendance in Mahila Sabha meeting. Unlike Gram Sabhas, Mahila Sabhas do not have mandate in the Act and hence it is not been institutionalized by the District Panchayat.

Gram Sabha

Gram Sabha is meeting on quarterly basis and the project team was facilitating the meetings. There lies concern among the community members about issues they raise in the Gram Sabha meeting. People have no idea what happens to their proposal and resolutions. Secretary informs that it has not been sanctioned. There need to be a well-designed system of sharing information back with gram Sabha about the status of request, resolution or proposal.

Gram Panchayat

Gram Panchayats were not organizing regular monthly meeting and this depends on the secretary of the Gram Panchayat. Ensuring participation of ward members in the meetings is second major challenge. The third issue is linked with reducing autonomy of the Gram Panchayat as an institution. Another challenge that needs to be addressed is linked with complete illiteracy of Gram Panchayats on the new system of digital transfer and digital payments. Sarpanches, Old secretaries and members are not aware about the system and

mechanism. The GRS takes lead and elected representatives have no clue about payment and procedures.

Planning

Multiple plans are made in the Gram Panchayats, there is GPDP, and there is annual labour budget of MNREGS. Finally what gets implemented is known to the staff concerned with the schemes or programme. Panchayats have no clue about what happened to the activities listed in GPDP or any other plan. The communication gap and multiplicity is a major challenge that is affecting the functioning of the Panchayat Raj in the Project Area. Preparing integrated participatory plans of GP is time consuming while for the VDP/GPDP government gave a notice period of 2/3 days to GP which makes it difficult for them in preparing a quality VDP. Gram Panchayats want to take up holistic development of village but policies, even like FFC at operational level restricts the use of funds to limited activities.

Coordination with Block Level Panchayat

Block level Panchayat is key to get sanction, to get funds, to get payments cleared. In MP there is a system of ensuring representation of the Saparnaches in Janpad Panchayat. The officials have bypassed this legal provision. In Gujarat there is no formal system. The lack of communication and formal interaction between ER of Panchayat and Block is a major bottleneck in smooth functioning of the Panchayat Raj. This also affects the programme planning and execution in the project area. Government offices lack sufficient number of grass root functionaries which leads to delay in processes for service delivery.

Challenges in NagrikSuchna Kendra

The project team and community had found this service very useful yet sometimes there are challenges in sharing the information through NSK. These were, in some cases poor cooperation from service provider such as government departments; Poor net connectivity during the time of the visit of people to NSK also affected operations and services delivery at NSKs.

Conclusion

Information is the key for empowerment of citizen and so its utmost important that timeliness and simple form of communication is ensured. Institutionalization of Mahila Sabha needs District Panchayat and state governments' support and policy change. Gram Sabha resolutions tracking is critical and accountability for implementation of resolution needs to be fixed. Plans must be translated into actions; otherwise it loses faith of citizens. Supply side improvements in service delivery and budget allocation needs equal focus otherwise improving the demand-side conditions are not leading to improvement in delivery of public programmes.

The project had given much learning as an organisation on the whole issue of public programmes and local governance. Good rapport with community had played key role in success of the programme, specially the buy-in from PRI and citizen. Strong women groups and other people's institutions had played significant role as a platform in engaging with both, PRI and administration as well reaching out to so large number of groups. Use of SHGs, Women Groups and Framers Groups as constituent of Gram Sabha had helped a lot in building dialogue and synergy between different constituency of gram sabha and Gram Panchyat.

Citizen Information Centre (NSK) provided information on various government programmes and it also helped community, especially women, in accessing the benefits of various schemes. Nagrik Mitra, who were local youth and trained on different aspects of public schemes and services had proved to be most effective mechanism for creating awareness, demand and facilitation in accessing the government schemes and improving the performance of services. Effective use of Mobile Information Karykram (Mobile MahitiProgramme) - Mobile Information covers current issues and immediately disseminates details of programmes and support available for community under various schemes. NSK and MMK (Mobile MahitiProgramme) had helped project team in developing good relationship with many block level offices of line departments. Community members recognized project team and sought help and support on various issues related to accessing programmes benefits.

Project Fact Sheet

| <i>Project Implementing Agency(s)</i> <i>Aga Khan Rural Support Programme (India)</i> | |
|---------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Survey method(s) | Participatory approaches, FGDs, Write-shops |
| Stakeholder(s) | Gram sabha members, especially women; gram panchayat functionaries; select block and district level officials; |
| Site/ Field (Exact Location) | Gujarat: Sagbara and Dediapada blocks in Narmada District, and Meghraj block in Sabarkantha District; MP: Niwali block in Badwani District, Zhirniya block in Khargone district and Manawar block in Dhar District, |
| Duration | 5 years (March, 2014 to Feb, 2019) |
| Project Partner(s) | Development Support Center |
| Contributing Donor(s) | BRLE, AKF (UK) |
| Thematic Area(s) | Local governance, social-economic development |

Strengthening Maternal Health Care through Swasthya Slate

An Initiative by NJKF in Bihar

Abstract

This chapter aims at understanding Project AIPAD's technology based device 'Swasthya Slate' and the positive shift that this device had brought in the domain of maternal and child health. By drawing experience from the project's intervention area (Bhagalpur district of Bihar), this chapter elucidates the operations, functioning and impact of Swasthya Slate on the ground and its larger impact on maternal and infant morbidity.

Key words: AIPAD, Swasthya Slate, Bhagalpur, Bihar, MMR, District Health Society

Introduction

Maternal and child health care constitutes the two most critical foundational pillars for a growing and emerging society. Any aggravation through undue high maternal and infant morbidity reflects of wider health governance and services access and delivery issues that have wider social and economic impacts in days to come. The 'Action to Improve Public Schemes Access and Delivery' (AIPAD) was a project initiated by The Nand and Jeet Khemka Foundation (NJKF), in Bhagalpur, Bihar, covering 5 blocks namely Kahalgaon, Pirpainti, Sanhoulla, Shahkund and Jagdishpur. The project aimed to improve access to public schemes and services and enhance the wellbeing of citizens in Bhagalpur by using a participatory community based advocacy, monitoring and accountability model.

The project focussed on increasing awareness of public schemes and services, with special focus on women, children and disadvantaged groups. Through community and household level interventions and by working in collaboration with the government, the project made efforts to make people aware of their rights and entitlements and supported the efforts of the people to secure their rights.

District Bhagalpur is one of the least developed districts of Bihar, and also one of the most densely populated districts of the country, where 81 percent of the total population is rural. Being one of the poorest districts, having a population of 2430000¹ and 73 percent² population living below poverty line, ironically this district is relatively underserved and neglected by major developmental interventions in the State. It is one of the BRGF³ districts having literacy rate of 49.5⁴ percent and female literacy as low as 38.8 percent (lowest in the country). The district has recorded a MMR of 430⁵ which was far more than the national average of 200 and an infant mortality rate of 74⁶, above than the national average of 46. The district has a significantly low sex ratio of 878 females to 1000 males, whereas national average being 940. The reason for choosing a single district for intervention was deliberate and to be able to deep dive into various facets of public entitlements and have an in depth outreach and impact.

But this chapter would highlight one of its initiatives, which proved to be a game changer as far as rural maternal health care is concerned as experienced during the project period.

1. Census of India, 2011.

2. Ibid.

3. Backward Regions Grants Fund (BRGF) scheme was launched in 2006-07. The BRGF is implemented in 272 backward districts and aims to redress regional imbalances by providing funds for infrastructure projects.

The programme was designed to address the regional imbalances in the development by providing the financial resources for supplementing and converging existing development inflows into the identified backward districts. Using these funds these districts can bridge the critical gaps in local infrastructure and other development requirements.

4. National Rural Health Mission, State PIP, Bihar 2010 – 11.

5. Ibid.

6. District Health Action Plan, Bhagalpur, 2012 – 13.

Lack of adequate facility for early detection of high risk pregnancies was a leading factor for increasing cases of maternal morbidity. Therefore, in the landscaping exercise done by the AIPAD team during the starting of the project, the team reviewed a few technologies for mapping the data concerning health in general as well as reproductive health in specific. Swasthya Slate was one such device which showed the potential of supporting the rural health care landscape especially for infant and maternal health. It enabled point of care diagnosis at the door steps of women. Therefore after consulting with all the stakeholders in the district and community, Swasthya Slate as a pilot project was launched under AIPAD in the selected health sub centres.

Background and Description

Swasthya Slate as a Pilot project was launched under AIPAD on 14th July 2015 by the District Magistrate of Bhagalpur in a ceremony held at the Block Hospital, Shahkund. The device was launched to be used in health sub centres, primary health centres and additional primary health centres of three Panchayats of Shahkund block. SwasthyaSlate is a mobile tablet attached to a device that empowers frontline health workers to conduct 33 diagnostic tests for prevention diagnosis care and referral of diseases. As a part of national initiative, the National Health Mission (NHM) in consultation with District Health Society (DHS) recommended 13 diagnostic tests for the pilots that are being carried out at the Village Health Sanitation Nutrition Day (VHSND) during ANC and PNC check-ups.

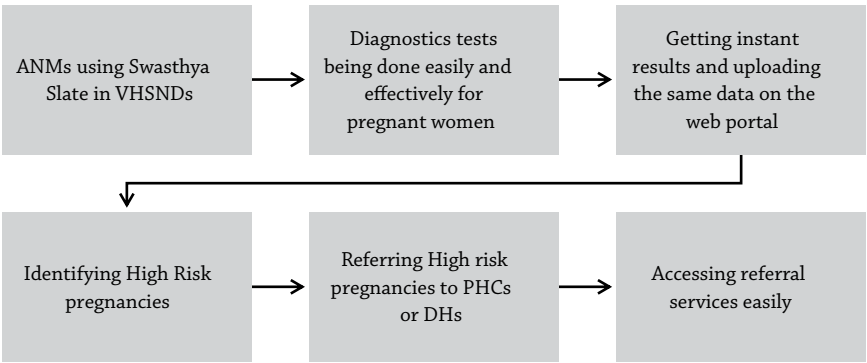
The Swasthya Slate device is an electronic monitor electrocardiogram which measures blood pressure, blood sugar, urine protein, and several other biometrics. It includes specialized applications that help users perform a variety of screenings and health analysis protocols. The system comprises of GPS and camera which facilitate in recording patients details along with their photograph and location. It has connectivity through both Wireless as well as 3G or EDGE connectivity.

After the launch of Swasthya Slate and this device being used during VHSND in the selected Panchayats of Shahkund, the impact

of VHSND underwent a paradigm shift. With usage of Swasthya Slate kit, the registration, ANC and all the diagnostic tests of pregnant ladies were done simultaneously and the result generated could be instantly sent to the Swasthya slate server, from where different monitoring bodies like PHC could check and get the results. The patients could get easy access to their reports whenever they wanted through the swasthya slate portal.

With the Swasthya Slate Kit, the process of registration and entering huge amount of information manually had been converted into a simple and effective process. ANM now could fill up all the information related to the women with the help of a tablet. After filling up the information regarding registration and ANC, ANM uploaded all the information on the Swasthya Slate sever and after performing all the tests such as blood pressure, temperature, haemoglobin, sugar, urine, pregnancy, HIV, syphilis, hepta-B, etc , uploaded the same data on the Swasthya Slate portal. And this data can be viewed online with the other higher level officials at the PHC. And the same process was carried out for the same pregnant women for her second and third ANC.

Working of the Swasthya Slate



Thus, Swasthya Slate had improved the VHSND process and had also made it time efficient. Quick registration of pregnant women, diagnostic tests were being carried out instantly and data sharing

with the officials at the block and district level had made the whole process quite simple and operative.

Principal Issues

The project focused on key issue of improving and enhancing the standard of living of the people by facilitating the process of access of community to the schemes provided by the government in three major themes: Health and Sanitation, Education and Social Security. On specific count, the project focused on the followed key issue based result areas.

- Result Area 1: Improved access to and increased uptake of public schemes
- Result Area 2: Increased accountability towards beneficiaries of schemes
- Result Area 3: Use of technology to collect, track and disseminate information
- Result Area 4: Identification of best practices for replication

Objectives

The purpose of the project was to improve and enhance the standard of living of the people by using participatory and community based advocacy and accountability model that would further facilitate the process of access of community to the schemes provided by the government in three major themes: Health and Sanitation, Education and Social Security. One of the overarching objectives of AIPAD was to identify gaps in the delivery mechanism and to improve the accessibility of health services for pregnant and young mothers. Going by the increasing numbers of MMR, IMR and poor health services for pregnant women specially, Reproductive, Maternal, New-born, Child and Adolescent Health (RMNCH+A) was one of the most needy and sensitive gap area that the project identified. Therefore it aimed at addressing the foremost causes of morbidity among women and infants ensuring accessibility of these services at the local level by using a technology that will make the lengthy process of check-ups and treatments, quite simple and effective.

Project Methodology

The approach used by the project was having a participatory community based advocacy and accountability model, mainly emanated from two reasons: firstly, as a result of poverty and marginalization, communities have limited or no knowledge of existing public schemes that could aid their socio-economic development resulting into lack of information and access to public schemes among communities. Secondly, despite existence of numerous government schemes that have wider potential to transform the landscape, rural people are not able to avail their rights and entitlements due to multi-layered and complex delivery mechanism of these schemes. And this, thereby, resulted in low uptake of these schemes.

Programme Implementation

The Swasthya Slate Pilot project in Shahkund block was launched with an aim to reach every pregnant lady with improved and efficient health care practices. After the successful launch of Swasthya Slate in Shahkund block, the most crucial step for AIPAD was to have an orientation and training program for the health workers in the field so that they are well equipped with the device and can perform diagnostic tests effectively. Therefore, the first round of training was organised at Shahkund block for the government ANMs of 6 sub centres, 1 additional health centre and 1 PHC. In this three day training program, the functioning of the slate was explained to the ANMs by experts from Delhi. The Swasthya Slate Kits for the Pilot project were handed over to the ANMs in the training and a special orientation program for block and district level officials was also conducted for monitoring the progress of Swasthya Slate.

For on-site support, a technical support officer was specially hired to assist in the functioning of Swasthya Slate, the officer underwent one month of extensive training in order to get a nuanced understanding of the hardware and the software applications of the slate. An additional support in the form of a call centre was also established especially for the pilot so that ANMs can get instant help

over phone regarding any kind of issues or difficulties faced during VHSNDs.



Swasthya Slate constituted of a well-designed web portal where all the information uploaded by the ANMs from their respective devices could be stored and tracked. Any information can be easily obtained for a given patient by just clicking on the name of the patient and the medical history of a patient can be easily known. The working of Swasthya Slate device is quite easy and can be handled by a rural woman without much of a hassle. ANMs have to simply open the tablet and connect the peripherals to the interface unit. There is a Bluetooth connection between the tablet and interface unit and by opening it, there are pre feed functions in the tablet just like any application on the mobile phone. The tests and functions available on the device are in Hindi which makes it way easier for ANMs to use it. The device works in the offline mode also so that even if there is no internet connectivity, information can still be easily entered in the device. On entering the internet zone, the same data entered in the offline mode automatically gets uploaded to the web server. Since Swasthya Slate is a GPRS enabled device, therefore it continuously tracks the location of the ANMS.

The second round of training took place at Pirpainti block for ANMs from four panchayats, two APHC (Additional Primary

Health Centre), four HSC (Health Sub Centre) and one RH (Referral Hospital) on 12 and 13th of November, 2016. The two day training talked about working of the slate and how to upload registered data on the swasthya slate server. Apart from the orientation on the functioning of the device, various issues and the problems faced by the ANMs while operating the device were also discussed and the problems were collaboratively addressed.

After successful implementation of Swasthya Slate in Shahkund Block and the device being used for over two years in 27 health sub centres(HSCs), 1 PHC and 6 APHCs, women with high risk pregnancies were now regularly identified early in their pregnancies and duly referred for further treatment in the selected Panchayats of Shahkund block. Women across backward villages were able to access improved and efficient health services with much ease. It had been reported that the functioning of VHSND changed after the usage of Swasthya Slate.

One of the key recommendations of the European Union Results-Oriented Monitoring (ROM) visit report in 2016 was that this pilot should be replicated and up scaled in other blocks of the project areas as well, since it had been giving positive results in Shahkund block. After observing the positive positive results of using Swasthya Slate in Shahkund block, there was a strong push by the District Magistrate and Chief Medical Officer for a wider scale up and to have a proof of concept operationalized on valid sample size. Data from Shahkund Block, where Swasthya Slate was being used, was shared with the DM and he observed the change in MMR and IMR numbers after the usage of this device. Acknowledging the fact that it is a lifesaving initiative, both DM and DHS collaborated with the team to scale it up in Pirpanti and Kahalgaon block too. Understanding the need and addressing the recommendation of the dignitaries, NJKF procured a technologically advanced version of Swasthya Slate , 'Health Cube' and planned on scaling up the pilot with DHS to two complete blocks of Kahalgaon and Pirapinti so that young mothers and women of these remote areas can get maximum benefits from this initiative.

The Health Cube pilot scale up, therefore, was inaugurated on 27th July, 2017 by the District Magistrate of Bhagalpur in the Annual

state consultation held at the Town hall, Bhagalpur. The devices were to be used in all the PHCs/APHCs/HSCs of Kahalgaon and Pirpainti block. A training programme was organized under the AIPAD project for the government ANMs of around 57 Panchayats, 13 APHCs (Additional primary health centres), 76 HSCs (Health sub centres) and 1 RH (Referral hospital). This training programme was organized for four days from 10th to 13th of august 2017 parallel in both the blocks. The Health Cube devices were handed over to the ANMs at the end of the training programme. The block and district level officials as well as resource persons from Health Cubed were present in the training.

Implementation and Outcomes

Swasthya Slate has made a major impact on the overall health scenario for pregnant and lactating women and children in the project area by combating maternal and infant mortality rates. With the use of Swasthya Slate in VHSNDs, women from rural and remote locations could access health services with much ease. A range of diagnostic tests were made available on the device for all age groups. This device made registration and data handling quick and efficient. High risk pregnancies were now being easily identified and duly referred to higher institutions and the information was easily shared with other block and district health officials.

Integration of Swasthya Slate in the maternal health care program has brought a paradigm shift in the delivery mechanism of health care services in the following ways:

Accessibility and Out of pocket expenses: In rural and remote locations, it is extremely difficult to access public health institutions as they are situated very far from the villages. Women therefore find it hard to reach to these hospitals for checkups and or any kind of medical emergencies. And even if they manage to travel, their out of pocket of expenses are so high that they prefer not going for their ANCs and PNCs which further leads to complications and high risk pregnancies. With Swasthya Slate device, the prescribed health care services were being delivered to the women at their door steps without them travelling to far off places incurring high expenses.

Instant Results and Reports: Initially, women had to run back and forth to collect their reports of the tests, but with the swasthya slate, results were generated instantly on screen and could be shown directly to the patient. It was available to the patient anytime through the portal. This not only saved a lot of time and money for these women, but always generated transparency among the patients.

Identifying High Risk Pregnancies and Referral cases: With regularisation of VHSNDs and effective ANCs, PNCs and data management, high risk pregnancies, which are one of the main reasons of increasing MMR, could be easily identified and were duly referred. Thus, timely referrals ensured safe motherhood for women and any complications could be further treated by government doctors.

Empowering Health workers and Combating high rates of MMR: Swasthya slate empowered health workers by making them technology and internet friendly. It made the ANMs confident to do their work effectively and more passionately. Swasthya slate aimed at delivering safe motherhood and ensuring safe deliveries to the women, thereby combating higher rates of MMR and IMR.

Further, in order to have a clear understanding of the improvement in the health care practices with the usage of Swasthya Slate, AIPAD also conducted an impact assessment study in which health data of the Panchayats implementing swasthya slate was compared with a control group. A comparison of the VHSND data in the Swasthya Slate implemented Panchayats and Panchayats not using Swasthya Slate Kit(SSK) from January to December 2016 ,will help to analyse the situation clearly, which is represented by the table given below.

There was a remarkable difference in the numbers of the tests which is represented in table no 1 given below. Apart from this, it was noted that Swasthya Slate implementing panchayats have not reported a single maternal morbidity caused due to health risk in the last two years.

Table no 1*A comparison of VHSND data of Shahkund block (January-December 2016)*

| <i>Reproductive and Child Health</i> | <i>Panchayats implementing Swasthya Slate</i> | | | <i>Panchayats not implementing Swasthya Slate</i> | | |
|---------------------------------------------------|-----------------------------------------------|-------------|-----------------|---------------------------------------------------|--------------------|---------------|
| | <i>Kasba Kherahi</i> | <i>Amba</i> | <i>Jagariya</i> | <i>Belthu</i> | <i>Dindayalpur</i> | <i>Saroni</i> |
| Total population of the Panchayat | 10699 | 9558 | 10519 | 8480 | 7221 | 7456 |
| Total number of pregnant women registered for ANC | 374 | 389 | 423 | 381 | 222 | 187 |
| Number of pregnant women received 3 ANC check ups | 145 | 318 | 290 | 319 | 149 | 110 |
| Number of Urine-Protein tests | 480 | 489 | 559 | 0 | 0 | 0 |
| Number of BP tests | 597 | 759 | 791 | 0 | 0 | 0 |
| Number of temperature tests | 588 | 728 | 779 | 0 | 0 | 0 |
| Number of pulse tests | 607 | 760 | 794 | 0 | 0 | 0 |
| Number of haemoglobin tests | 411 | 467 | 477 | 328 | 186 | 152 |
| Number of sugar tests | 564 | 688 | 665 | 0 | 0 | 0 |
| Number of HIV tests | 304 | 312 | 341 | 0 | 0 | 0 |
| Number of Hepatitis-B tests | 303 | 312 | 341 | 0 | 0 | 0 |
| Number of pregnancy tests | 295 | 282 | 291 | 0 | 0 | 0 |
| Number of syphilis tests | 329 | 312 | 336 | 0 | 0 | 0 |
| Number of malaria tests | 359 | 312 | 336 | 0 | 0 | 0 |
| Number of blood group tests | 375 | 365 | 381 | 0 | 0 | 0 |
| Grand Total Diagnostic Tests | 5533 | 5786 | 6091 | 328 | 186 | 152 |

Source : HMIS of Shahkund and Swasthya Slate kit during VHSND.

Table no 1 shows a comparative analysis of all the tests undertaken at AWCs/HSCs in the Panchayats implementing Swasthya Slate and those not implementing it. As from the table, AWW/HSC's not implementing Swasthya Slate have considerable low numbers of registration and most of the tests like malaria tests, syphilis tests, blood group, pregnancy tests, HIV tests etc. have not been administered at all in these respective centres. Complete lack of diagnostic facilities in the above mentioned Panchayats illustrates the alarming situation of health prevalent in the selected areas. Despite government's efforts to improve the health situations, inadequate

local facilities at the grass root level is one of the many reasons for the disquieting death rates in the rural areas. Late diagnosis leads to higher number of women facing mortality.

Project Limitations and Key Lessons

NJKF's biggest learning was that transformative action in the field was facilitated through establishing and empowering community based institutions at all levels and creating dialogical platforms between government and people. It was extremely important to develop ownership and responsibility among community towards its own rights and entitlements. It was observed that the best monitoring and supervision was done by the community itself of grass root services such as health centres, Anganwadis and schools

In terms of challenges, the action identified flaws in top- down design model of government schemes which further resulted into unrealistic numbers of eligible population not receiving their benefits. Inadequate allocation of funds in some of the schemes demotivated the beneficiaries in availing the entitlements resulting into low uptake of schemes. There was a major gap in the planning and implementation of the government schemes. Planning of these schemes was not inclusive resulting into entitlements not reaching the backward and remote areas, where outreach of schemes was essentially required.

Due to our deeper engagement in the health domain through Swasthya Slate, one of the biggest challenges that the action observed was the grossly inadequate health infrastructure and poorly implemented health schemes. Health services were often affected due to institutional and programmatic delays especially in release of funds adversely impacting the overall health status of rural women in the action area.

Conclusion

The AIPAD Swasthya Slate project demonstrated that easy and accessible provisions using technology can help provision better and quality access to health related entitlement services at community level at doorsteps. Through its innovative approach,

the project could reach out to a major population based with diagnostic tests conducted. The Panchayats having Swasthya Slate had shown significant improvement in spreading awareness about importance of antenatal and post-natal check-ups, reflected through higher registration of women. Additionally, the large number of administered tests indicated that ANC and PNC were being done regularly. The data reiterated that this intervention was positively contributing towards an improved and holistic health status of pregnant women and infants in the project area.

Project Fact Sheet

| | |
|---------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <i>Project Implementing Agency(s)</i> | <i>The Nand & Jeet Khemka Foundation</i> |
| Survey method(s) | Household Survey, Focus Group Discussions, Interviews and Participatory Rural Appraisal |
| Stakeholder(s) | Rural communities in multiple blocks in the district of Bhagalpur especially women, girl children and unorganized workers, SC/ST, Muslims & other disadvantaged communities, Panchayati Raj Institution members, government |
| Site/ Field (Exact Location) | Blocks of Bhagalpur District, Bihar, namely- Kahalgaon, Sanhaula, Pirpanti, Jagdishpur, Shakkund |
| Duration | 5 years (2014-2018) |
| Project Partner(s) | Nidan, The Nabha Foundation |
| Contributing Donor(s) | European Union & The Nand & Jeet Khemka Foundation |
| Thematic Area(s) | Health & Sanitation, Education, Social Security |
| Organisation contact | Ms Shubhra Singh, email- s.singh@thenabhafoundation.org |

Empowering People to Access the Public Schemes

The CESVI Initiative in Five Backward Districts of Karnataka



Abstract

This project by CESVI is one of the 14 Actions awarded by the European Union under the initiative, 'Improving access to information of public schemes in backward districts of India,' with EU thematic programmes Non-State Actions and Local Authorities (LA) in Development whose main goal was supporting civil societies and LA in partnering for more inclusive and sustainable development outcomes. The Government of India (GoI) had committed to poverty reduction through the Twelfth Five Year Plan 2012-2017 for a Faster, More Inclusive and Sustainable Growth that takes as major concern over the capacity of the system to implement the policy Agenda and the Centrally Sponsored Schemes – at the operational level,

above all by devolving functions to the Panchayat Raj Institutions (PRI). In line with the EU Programme goal and in consideration of the commitments taken by the GoI with the Twelfth Five Year Plan, the EU call supported Actions meant to increase and improve the access, delivery and quality of public services for reducing poverty and social exclusion. More specifically, the action aimed to help local authorities and service providers in backward districts to increase and improve access to information of public schemes and fulfilment of their rights and entitlements throughout the planning, budgeting, implementation and evaluation consortium.

Key words: civil societies, sustainable development, EU programme

Introduction

The action 'Empowering people in five backward districts of Karnataka' to access the public schemes by CESVI contributed to the EU call for proposals goal by mobilizing, educating and empowering the marginalized communities to improve access, utilization and monitoring of public schemes for poverty alleviation. Special focus was on Education, Health and Livelihood schemes pertaining to Backward Regions Grant Fund (BRGF) in the selected five backward districts of Karnataka. The process of achieving the set objective was through implementing various activities involving different stakeholders such as Panchayati Raj Institutions (PRIs), Authorities, District level Welfare, Health and Labour departments, NGO networks, Media, Community leaders and members.

The three main results of the project were to ensure: if the people in the targeted areas, especially the most vulnerable, were more aware of the public schemes available for priority sectors; understand better their functioning on a right based approach and the civil society groups predisposed at village level to interact with the schemes were better informed and revitalized, if particularly motivated members of such civil society groups were adequately trained, they can support local authorities, jointly strengthening links and accountability systems at different levels; and, if the management skills of local authorities were developed, the targeted schemes' processes were

really shared at different levels and the methods and successes of this project were structured and transferred at higher levels .

Project Background and Description

The project had its overall objective to “mobilize, educate and empower the marginalized communities to improve access, utilize and monitor the public schemes for poverty alleviation” and Specific objective was to ensure maximum utilization of all centrally sponsored public schemes with a special attention to Education, Health and Livelihood in the targeted backward districts of Karnataka. The focus was on the most vulnerable people with a priority to gender and aiming at fighting poverty in marginalized communities by improving governance of public schemes in the backward districts down to the village level through planning, budgeting, implementation, control, monitoring and evaluation to provide more sustainability to the action and by working closely with local government.

Principal Issues

North Karnataka region, particularly the five districts (Bidar, Chitradurga, Davangere, Gulbarga and Raichur) of the project, is historically characterized by suppression and subordination. There are technical, social and political obstacles in accessing government schemes. Some of the general issues prevalent in these districts are low literacy rate, low levels of employment, high incidence of poverty, loans and indebtedness, low levels of awareness about Government programmes, lack of drinking water and sanitation facilities, gender discrimination, caste discrimination etc.

Project Methodology

The key strategic interventions planned and implemented were: i) Creating awareness in the communities so that they understand to access their rights, ii) organise, strengthen and empower joint groups helping them to link to services and iii) enhance governance capacities of the local governance system.

The most important strategy of the project was not using monetary incentives or material incentives, instead imparting knowledge through awareness and training programme thereby motivating the community to organise themselves to access the public schemes from both Central and State Government. The project had a rights-based approach that was centered on the reinforcement of groups from the civil society, the enhancement of coordination and the increase of system's ownership and efficiency. The project strategy fell under three key interventions-

Awareness Generation: Mass Awareness and Mass Contact Programmes were conducted throughout the community to disseminate the information on the existing schemes and RTI Act 2015, its accessibility and utilization. Different methodologies were used such as street plays, folk theatre and interactions with the relevant PRI members and District Authorities.

Linkage and Accountability Mechanisms: Backward Regions Scheme Support Groups (BRSSGs) at different levels-Village, Gram Panchayat, Taluk, District were created starting from existing civil society organization's likes Self Help Groups (SHGs), Youth groups and other Welfare Committees. Each BRSSG comprised of motivated members from such groups together with community leaders (with caste representation) and PRI representation. BRSSG members' role was to motivate communities, to inform about entitlements and to facilitate the utilization and access to schemes, to monitor funds allocation and to advocate for designing relevant schemes appropriate to their needs. They also played the role of a grievance cell where any community member could place a complaint or grievance.

Local Governance: PRI, District and State level authorities were brought together for constructive consultations and discussions to exchange information and share views and status of implementation of the schemes for positive action by the service providers.

Programme and Implementations

Activities such as Mid-term evaluation, Systematization study, State level Stakeholders Conference and Social Audit were arranged during the different stages of the project in order to share their

outcomes, learnings and best practices in the Final Conference. Data that highlights the success of the project intervention against the problems identified at the beginning of the project

With regard to the impact created through the project in the targeted areas, the changes were not just in terms of awareness and confidence built among the communities but also the benefits received by them. The impact created was measured by equating the benefits to the financial terms which gave the amount accrued against each benefit. The total entitlement / gains accrued through this project were as below:

| <i>Benefits</i> | <i>Beneficiaries</i> | <i>Benefit in terms of amount (INR)</i> |
|--------------------------------------------------------------------------------------------------------------------|----------------------|-----------------------------------------|
| <i>Education</i> | | |
| Dropout children mainstreamed in regular schools | 259 | - |
| Children benefitted from improvement of school's infrastructure (Classroom, Toilets, Building, Compound Wall etc.) | 2737 | 2,73,95,670 |
| Children availed scholarships | 636 | 4,24,300 |
| Children who availed scholarships under Bhagyalaksmi Scheme | 299 | 1,88,83,250 |
| <i>Health</i> | | |
| Malnourished children's health status improved | 64 | - |
| Children benefitted through refunctioning of Anganwadi Centres | 1512 | - |
| Children benefitted through renovation of Anganwadi Centres | 952 | 52,44,000 |
| People availed health facilities through Vajpayee Arogya Shree | 267 | 3,87,00,000 |
| People benefitted from the renovation of Primary Health Centres | 14000 | 4,04,000 |
| People benefitted through drinking water facilities | 17514 | 7,76,20,919 |
| People benefitted through construction of toilets | 15210 | 4,24,32,000 |
| People benefitted through Drainage facilities | 11223 | 19,97,85,702 |
| <i>Livelihood</i> | | |
| People benefitted from renovation and construction of community hall, panchayat gate, street lights | 8578 | 27,71,000 |
| People received job cards | 6497 | - |

| <i>Benefits</i> | <i>Beneficiaries</i> | <i>Benefit in terms of amount (INR)</i> |
|----------------------------------------------------------------------------------------------------------------|----------------------|-----------------------------------------|
| People received jobs | 2696 | 5,07,53,170 |
| SHG people availed loans under Udyogini Scheme | 50 | 13,49,000 |
| Person availed loan under Rajiv Gandhi Chaitanya Yojane | 1 | 50,000 |
| People availed loan under National Rural Livelihood Mission | 82 | 12,73,000 |
| People benefited through Pashu Bhagya Scheme | 131 | 1,09,00,000 |
| Person benefited through Adhara Yojana Scheme | 1 | 50,000 |
| Social Protection | | |
| Women availed maternity benefits | 506 | 3,54,200 |
| People benefited through Housing Schemes | 3075 | 9,62,03,600 |
| People benefited through Pradhan Mantri Ujjwala Yojana | 3483 | 2,98,000 |
| People benefited through Pradhan Mantri Sarkari Yojana | 24723 | 9,68,33,000 |
| Women availed widow pension through Indira Gandhi National Old Age Pension Scheme and Senior Citizen Scheme | 144 | 9,82,500 |
| People availed old age pension through Indira Gandhi National Old Age Pension Scheme and Senior Citizen Scheme | 147 | 26,87,000 |
| People availed disability pension through Indira Gandhi National Disability Pension Scheme | 119 | 16,32,700 |
| | | 67,70,27,011 |

Implementation Outcome

In terms of overall outcome of the project, for 70% of targeted villages, the average increased in the utilization of public schemes related to health was 20% higher than control sample average. For 80% of targeted villages, the average increase in the utilization of public schemes related to education was 30% higher than control sample average. For 75% of targeted villages, the average increase in the utilization of public schemes related to livelihood was 25% higher than control sample average. For 73% of targeted villages, the average increase in the utilization of targeted public schemes by women was 20% higher than control sample average. For 64% of targeted villages,

the average increase in the utilization of targeted public schemes by backward castes was 20% higher than control sample average. 71% of Gram Panchayat conducted Gram Sabha twice in a year stimulated by BRSSG members generating the occasion to share information about the schemes. For 79% of targeted villages there was an increase in notoriety and knowledge of targeted schemes. For 36 villages, it exceeded 40%

Case status in year 1 - Child Labour Rescued and Enrolled in school

D. son of B. hails from Jalibenchi village of Kalapur Panchayat in Lingasugur Taluk of Raichur District. His parents are farmers. D. is 13 years of age and dropped out of school at the age of 10. D. was working in an agricultural land when the RLHP staff met him and collected further information about D. from the community and the school teacher. Then the Staff with sufficient information met the parents to learn more about the reasons for D. dropping out of school. D. was not interested in going to school. The Community Mobilizer discussed with the parents and made them understand the importance of Education of their child. D. was also counseled and was made to understand the need for education for his future and was motivated to go to school. Then the RLHP team met the school teacher and negotiated with him to accept D. in class 7. D. has joined school now and he is studying well. Close follow up is being done.



Case status in year 4: He is Regularly Attending the School and Preparing for the SSLC Board Exam.

Case status in year 1 - Child Marriage Stopped and Got Admission in Pre-University for the Girl

E. is the daughter of M. and H.; she is 17 years old. M. and H. are agricultural labourers. The family lives in Aidanal village of Kalapur



Panchayat of Lingasugur Taluk of Raichur district. The parents discontinued the schooling of E. when she was in the class 10 and were preparing to get her married. RLHP staff, during their field visit, heard about E.'s case and began collecting further information. According to the parents E. was not interested in studying, while E. admitted to the staff team that she wanted to study. The parents were contacted multiple times and were made to understand that education is important for E. and that Marriage before the legal age of 18 is punishable by law. The RLHP staff succeeded in convincing the parents. E. was facilitated to get admission in Pre-University Course and is now continuing her education.

Case status in year 4: She got married at the age of 19

Case status in year 1 - Malnourished child received support from the Anganwadi Centre

S. is the son of J. who hails from Yerandgi village of Yerandgi Panchayat in Basavakalyan Taluk of Bidar District. S. is three and a half years old. His parents are illiterate and from a poor family background. S. was undernourished. Their poor economy deprived them of nutritious food especially for the children. RLHP staff met the neighbors of S. and collected further information about him from the community. Then the Staff met the parents to learn more on the reasons for his undernourishment. The staff members discussed with the parents and made them understand the importance of

child health. Locally available nutritious food, fruits and vegetables were made accessible to them by linking them with the Anganwadi centre. Orientation was given to the parents on Integrated Child Development Services (ICDS) programme. Then the RLHP team met the Anganwadi teacher and negotiated with her to accept S. in the regular monitoring of his health. Now the child is getting nourishment and support from Anganwadi centre and parents are taking care of him. There is an improvement seen in the child's health. Close follow up is being done.

Case status in year 4: The boy is healthy and studying in class 2 at the Govt. School, Yarandgi Village.

Case status in year 2 - Child marriage stopped



S aged 14 years is the daughter of Mr. R belongs to Neralgundi village of Timlapura Panchayat in Honnali Taluk, of Davanagere District. She has a younger sister and a younger brother. During a meeting with the adolescent girls of this village, the field staff came to know that a Child marriage has been arranged in the village. S, out of school from class 8, was about to be the victim. The staff enquired the Anganwadi teacher about this issue but apparently she did not know about it. Therefore, the staff approached the primary school Head Master in the village. The Head Master knew about the case and had tried to convince the parents about the ill effects of child marriage and also that it is illegal. But the parents did not listen to the Head Master. The project staff therefore complained to the Child Development Project Officer (CDPO) department and called CHILDLINE 1098 and informed about this child marriage. For two

days later, there was no action. Therefore, the staff went Sudha's house and discussed with her family members about this issue. After a long discussion she convinced them about the consequences of Child marriage and that it is against the law. Hence the marriage was stopped.

Case status in year 4: The girl is at home helping her parents

Case status in year 2 - Re-enrollment of two dropout school girls in school

On 10th June 2015 a women's meeting was conducted at Takkanalli village of Masadi Panchayat in Honnali Taluk of Davangere District. K, a school dropout and her mother were among those who attended the meeting. During the previous academic year K's elder sister P was identified by the RLHP staff as a school dropout from Takkanahalli school and was motivated to be re-enrolled in the Kammaragatte school in the 6th standard, but P had again discontinued. P and K became school dropouts due to family problems. They are from fishing community and hence work is seasonal. Mr. S and Mrs. H have 6 children. Mr. S was an alcoholic. P who is 18 years and K who is 12 years work along with their mother in the Fisheries, which is a main reason for not attending school. Their father takes money earned by his wife also for drinking. Keeping this background in mind, the staff went to their house and spoke to their parents. At first, they refused to send their children to school but after giving more awareness about the importance of girl's education and stressing benefits, they agreed to send their children to school. After that, special counseling was given to Mr. S regarding disadvantages of alcoholism. Later he agreed to reduce consumption slowly. On 17.06.2015 the two girls were taken to the 'Kunduru' Government Higher Primary School by the staff and enrolled them. Accommodation was also arranged for them at the 'Kasthurabha Girls Hostel Kunduru'.

Case status in year 4: P & K are going to School regularly and enjoying their schooling

Case status in year 2 - Repair work of drinking water tanks

In Gantypura village of Kammargatte Panchayat in Honnali Taluk of Davangere District there is serious drinking water problem. There is no wall and cover for the public drinking water tanks and people take water illegally. In this process the main water pipes are damaged and the water is polluted. During the Mass Contact Programme organized by RLHP, this issue was highlighted before the PDO. The PDO witnessed this problem and assured to do the necessary repair. On the request of the people he also reduced the “DEPOSIT” fee of Rs. 1000/- to Rs. 500/- for individual connections. This encouraged 30 families to apply. The BRSSG is doing a follow up on this problem.

Case status in year 4: The tanks have been repaired and also a new water purification system is installed and the community people are utilizing it.



Case status in year 3 -Malnourished child provided nutritious food through Anganwadi Centre

Kuppigudda village of Sarjapur Panchayat in Lingasugur Taluk of Raichur District has 470 families with a population of 1765 people whose main occupation is agriculture. The village has an Anganwadi and a Higher Primary School. During the home visits, Ms. R, Community Mobilizer, came to know about the 5 years old Ms. K who is physically challenged. Ms. R interacted with the family members and enquired about Ms. K's health condition, her mobility, the status of government facilities accessed. During the discussion, she came to

know that Ms. K was not able to speak or walk and was bed ridden. It was also found that she has not availed any government facilities nor the nutritious food through the Anganwadi centre. Hence, Ms. R approached the Anganwadi teacher to inform her about Ms. K's nutritious needs. Now, the child is regularly provided with nutritious food and the parents are thankful to RLHP



Case status in year 4: The child is provided with the nutritious food regularly and she is healthy and enjoying her childhood

Case status in year 4 - Health Sub Centre cleaned and put to use

Partapur village in Partapur Panchayat of Basavakalyan Taluk in Bidar District has 100 households with a total population of 720. The village has a Health Sub Centre with an appointed Auxiliary Nurse Midwifery (ANM) and located about 5 km from Basavakalyan Taluk. But people were not utilizing the facilities of the Sub-Centre and using the premises for open defecation. The dirty premise was noticed by the staff during the field visit which was brought to the notice of the community members. Awareness was given to them about the facilities they could avail from the sub-centre if it was made functional. The ANM also addressed this issue and submitted a complaint to the PDO, but there was no proper response from the Government. Hence, this issue was taken up during the BRSSG

training in the month of June'17 where the members prepared a petition and submitted to PRI member during the Mass Contact Programme who then forwarded the same to the Zilla Panchayat later. As a result, the premises of the centre was cleaned, people were stopped from using the place for open defecation, were made to apply for individual toilets and finally made to use the services of the sub-centre.



Case status at the end of year 4: The Sub Centre is being used by the community people. First aid treatment facility is available here.

Issues and Challenges Identified for Larger Policy and Programme Priority

In general, there were key issues and challenges that the project identified that would require continuous focus. These included resistance from landlords and local power holders; Caste discrimination; Landlessness; Working with local government; Working with officials; and changing procedures for accessing and benefitting from schemes and transfers of supportive officials.

At the policy level the larger issue of inclusion of vulnerable people will remain and this will not change irrespective of which government or political ruling comes to power either at the Centre or at the State level. Other major factor is that these Central schemes

are incorporated in the Government of India budget and legislated by parliament. Therefore, legally it is binding on both the Centre and State governments to be accountable and in turn strengthen the PRI institutions and hold them accountable for good governance and Development. This policy will continue for future in India. India's Constitution and the RTI Act are definitely the planks for people exercising their rights. Thus, the project's investment on PRIs skill development along with nurturing and strengthening BRSSG structure will go a long way for improved performance and sustainability of the system at different levels.

Project Limitations and Key Lessons

The usage of RTI should be continued to tackle corruption and improve the pace of response from the government. Empowerment through creating awareness, trainings, rights discourse and strengthening the Backward Regions Scheme Support Sanghas (BRSSS- a formal registered structure) will enable the community to address caste discrimination more openly. The issues of landless people should continue to be addressed. The rapport built with the PRIs should be utilized to get their continued support to meet the development target. Participation of BRSSS members in the Gram Sabha and public meetings should continue in order to raise their village issues and prepare memorandums. Further, since Cooperation from the officials is an unpredictable element, the pressure on the system to perform has to be ensured and maintained by the community staying engaged because people's strength and resilience can be strong.

The BRSSS State Forum (BRSSSF) formed at the end of the project had the goal of transforming the five 'backward' districts into 'forward' districts. The State committee members will have to advocate and lobby with decision makers and the executive. They need to present the specific local issues of the five districts so that they can be addressed by the concerned Ministers and senior civil servants. They will have to closely work with the district BRSSS and take up the issues that cannot be solved at the district level. BRSSSF consists of members of the BRSSS from the five districts along with

representatives of the State level Dalit organisations and farmer's federation, members of the State NGO federation, media and legal experts. The State BRSSS will have to lead the advocacy efforts and lobby with the Government of India and the Government of Karnataka.

BRSSSF expects to be recognised by the State and District administration within five years as a community institution and therefore be kept informed of any new schemes and new policies. They are committed to carry forward their collective progress: that all children will be in school, all anganwadis will give good food for children, all villages will continue to be open defecation free, will get good roads, will have more work opportunities and MGNREGA work will be tapped for all in need so that migration will be reduced and the village community becomes more stable and secure to achieve the right to life with dignity as enshrined in Article 21 of the Constitution of India.

The Committee dreams that all five districts will be developed and no longer be classified backward within the next five years so that all stakeholders in this process can witness and celebrate this change. For this, the members need to work together in harmony and be sustainable till they achieve their dream.

Conclusion

This project had demonstrated the practice of investing in people for effective implementation of the project through number of good and relevant trainings. The efforts and approach followed in the project focused on major issues and gaps in relation to service delivery mechanisms, resulting in improved service deliveries, planning preparation and implementation through incremental stages, paving further scope to strengthen and sustain. Use of government space for conducting training and participation of officials to interact on specific schemes and or administration procedures meant, opportunity to establish better rapport between people and officials, and for people to feel less scared and more confident to approach and exercise their rights and seek benefits from government schemes. Repeated training and information sharing to

raise awareness through number of activities had a lasting effect and enhancing people's confidence and awareness of their rights, duties of government and mechanisms to raise their concerns and accessing schemes without any middlemen or other corrupt practices which they had to depend earlier.

Training jointly GP and BRSSG members paved way for positive interaction and had a better scope for mutual understanding and an extent of transparency and accountability on the part of GP which was not the situation before. People believed and trusted when they interacted directly with officials and engaged with them face to face. Staff have also been able to enhance their own knowledge and capacity besides having opportunity to meet and interact directly with high level government officials which was never imagined or done before working on this project . When rights-based approach using constitutional rights and education/awareness was imparted as well as their interactions with local authorities were facilitated, it certainly empowered the vulnerable and most backward communities to exercise their rights without feeling intimidated. The strength of the project came from working with the government/PRI at the source of people's issues as opposed to creating parallel structures.

With government officials and other stakeholders, the BRSSG model was most appreciated for working with Panchayats and embedding empowerment with the local people and their own institution, for building in sustainability of the process beyond the project period. The social audit would support decision makers to understand the impacts of the action and in the eventual replication of its methods. The best practices and challenges would help in designing similar programmes to remove distress in backward regions

Project Factsheet

| <i>Project Implementing Agency(s)</i> | <i>Rural Literacy and Health Programme</i> |
|---------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Survey method(s) | Baseline Survey and Final Client Satisfaction Survey |
| Stakeholder(s) | <p><i>Universities</i></p> <p>Department of Economics and Research Centre, Gulbarga University; Department of Economics of Karnatak University, Dharwad; Hampi University; Department of Studies and Research in Economics of Vijayanagara Sri Krishnadevaraya University</p> <p>National Law School India University</p> <p><i>NGOs/ Knowledge Organizations</i></p> <p>Action Aid; Roopashri; Don Bosco; SICHREM; Spoorthi; SEEDS ;</p> <p>Hiware Bazar, Maharashtra; Open Space, Bangalore; AIKYA; Institute of Social Sciences; Public Affairs Centre; GRAKOOS; Ranagayana Kalamandira</p> <p><i>Networks</i></p> <p>Campaign Against Child Labour ; People Alliance for fundamental Rights of Education ; MYTHRI- Mysuru NGO Network; Right to Food Campaign, Karnataka</p> <p><i>Media</i></p> <p>Voicing Silence Media Unit, Bangalore; Kabes Media, Bangalore;</p> <p>Times of India; Udayavani,; Somyukta Karnataka; Prajavani; Vijayavani ; Vijaya Karnataka</p> <p><i>Federations/Sanghas/Samithis/Committees</i></p> <p>Federation of Voluntary Organizations Karnataka</p> <p>Thiruvengadu Farmers Federation in Tamil Nadu</p> <p>Karnataka Raitha Sangha; Dalit Sangarsha Samithi; Balavikasa Samithi; School Development Monitoring Committee</p> <p><i>Government Departments</i></p> <p>Hyderabad Karnataka Regional Development Board</p> <p>Karnataka State Safai Karmachari Commission</p> <p>Abdul Nazeer State Institute of Rural Development</p> <p>Karnataka Housing Board; Karnataka Road Development Corporation Limited; Department of Women & Child Development; Department of School Education and Literacy</p> |

| | |
|------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | Department of Health & Family Welfare; Public Works Department; Department of Rural Development and Panchayat Raj ; Department of Public Instructions; Department of Forestry; Department of Animal Husbandry and Veterinary Services ; Department for the empowerment of differently abled and senior citizen; Department of Drinking water and Sanitation Karnataka Urban Water Supply and Drainage Board; Public Legal Department |
| Site/ Field (Exact Location) | Bidar, Chitradurga, Davangere, Gulbarga and Raichur |
| Duration | 4 years |
| Project Partner(s) | N.A |
| Contributing Donor(s) | EU and CESVI |
| Thematic Area(s) | Sectors: Education, Health, Livelihood Thematic Areas: Strengthening Civil Society; Education and Awareness Raising Nutrition and Health ; Child Protection; Women Protection and Empowerment; Human Rights and Community Empowerment Water and Sanitation |

Addressing Nutritional and Income Insecurity of Underprivileged Communities by Improving Access to Relevant Government Schemes

The Agramamee Initiative in Odisha

Abstract

The 12th Five Year Plan Document of Government of India emphasizes inclusive growth and recognises, women as major disadvantaged group across caste and class lines. It also points out the need to move rapidly as possible to the ideal of giving every child in India a fair opportunity in life, which means assuring every child access to good health and quality education. The need for addressing the situation of pervasive hunger and starvation had also been underlined by the PUCL Writ Petition to the Supreme Court on 'Right to Food'. The petition had led to several interim orders from the Supreme Court to the Government of India including the order to "Universalize the ICDS for pregnant and lactating women, children under 6 years and adolescent girls". As this order received very little attention for several years, further orders were issued on 7th October 2004, directing the Government to increase number of Anganwadi centers to 14 lakhs from 6 lakhs habitations, raise the norm from Rs. 1/- per child to Rs. 2/- per child and further that all sanctioned Anganwadis were to be made fully operational immediately. Further interim orders passed in 2009, directed courts to raise the cost norms to Rs. 4/- per child and the calories norms from 300 to 500 grams and the protein norms from 8-10 grams to 12-15 grams per child per day. The norms for pregnant and lactating women and for severely malnourished children were also directed to be revised upwards. The Women and Child development Department of the Government of Odisha has a citizen's chapter and publishes regular Annual Reports

with details of the different schemes under the ICDS, and has also published its compliance with the Supreme Court Directive. Other departments also have their e-portals as well, facilitating access to information on programmes, plans and schemes, as also annual reports. This project sought to facilitate the last mile access of these various nutritional programmes and benefits to the children and families in Odisha to deal with malnutrition crisis at early levels.

Keywords: Income Insecurity, Underprivileged Communities, Government Schemes

Introduction

The European Union and Agragamee project worked in around 1000 Villages of 100 Gram Panchayats of 20 Blocks in 10 underprivileged districts of Odisha State covering Rayagada, Koraput, Nabarangpur, Gajapati, Kalahandi, Kandhamal, Mayurbhanj, Malkangiri, Nuapada and Bolangir districts, with largely tribal population. These areas are far away from the reach and delivery of Government schemes. Therefore, the focus and target of the project included benefits of ICDS services reaching the children; school going children have better access to primary education; 20 backward Blocks in 10 districts have better people centred planning; and 10000 women in 20 blocks benefit from women centred Gram Sabha decisions; and overall sustained effort by change agents leads to overall improvement in 20 backward blocks in 10 districts. The Project titled as “Addressing Nutritional and Income Insecurity of Underprivileged Communities by Improving Access to Relevant Government Schemes” is basically focused on five important segment of information i.e., ICDS, Health & Nutrition, Education, Employment (MGNREGS) and E- Governance.

Principal Issues

Mostly upland rain fed region, with destruction of the Natural resource base over the years have forced the local community into bondage, indebtedness, distress migration, and increasing child labour. Several Government programmes, including the Integrated

Child Development Scheme, the Primary Education programme, Child Labour Schools, seeks to address these problems.

Poor Access to Benefits from Different Programmes due to Illiteracy and other Factors: Inherent to many government programme plans is a high level of mystification, and lack of transparency. This includes non-availability of most scheme related documents, information on nutrition, health, or even daily labour attendance records, reports in languages not known to local communities. Even local community members who can read and write are distanced by such barriers, and forced into a fog of ignorance.

Poor Targeting: Much of the Government spending has little impact as there is poor targeting, and little people's participation. Of special importance are those targeting particularly vulnerable sections within the poor, like malnourished children, adolescent girls, widows, handicapped, and aged people. Due to lack of understanding and indifference of lower level government officials, the needy often get left out.



Ignorance Amongst Elected Leaders: About provisions, procedures and allocations, results in excessive controls being vested with government functionaries, who do not want to change and adapt progressive laws, and provisions, including decentralised decisions making, transparency and accountability, and people centred planning. This also leads to poor participation in institutions of local governance.

Women and Children most affected: The problem is more acute, where women are concerned, as literacy levels are the lowest amongst Scheduled Tribal women and girls. Thus, they cannot even effectively

access special programmes. National Literacy missions of the Government have often failed to address these issues, due to poor design, and management.

Objectives

The overall projective was to –“Improve quality of life of poor local communities in remote tribal pockets by enhancing participation in local governance, and improving information and access to Govt. schemes”.

The project identified key Specific objectives, which included, facilitate access to information to different Government Schemes, relating primarily to nutrition, income and employment generation, education and health; Channelizing local youth initiative and energy to effectively reach out to local communities; Increase understanding of the schemes, through appropriate training, and discussion forums; Facilitate interface with Govt. bodies, at different levels to enhance efficacy of schemes; and Mainstream critical issues through appropriate forums for effective Government response

Project Methodology

Agragamee had started the intervention with a base-line survey and collection of Secondary Data from different sources – Government Departments, Websites, and various Academic Studies. The Establishment of a Block Level Information Centre (BIC) was the main centre for collection of base-line data. The Sachetaks (local surveyors) were appointed to collect these Data along with the Programme Co-ordinator. Meeting the ICDS officials, Primary Education Department, the Block and District Administration was very useful in understanding the functioning of ICDS/Anganwadi Centres. In each village, the Matru (mother) and Janch Committee Members as well as the Members of School Management Committee along with the village leaders and Panchayati Raj Functionaries also gave insight into the nutrition programmes undertaken by the Government. On ICDS Scheme and other nutrition programmes, special village meetings especially of women were organised. Various leaflets were distributed and wall paintings were displayed across

villages giving details of nutrition programmes. Attention was given to Haat (Weekly Market day) programme in which information was shared with large number of people through Megaphones and by using local dialects.

Joint Workshops were organised with Anganwadi Workers, Matru and Janch Committee Members, PRI Functionaries, Members of Citizen's Action Group and Civil Society Activists regarding Food and Nutrition Securities to take up various issues for the improvement. The problems of the ICDS, Schools and other issues were highlighted by using local print media. Committee Members and CAG Members were asked to send petitions as well as raise the issues in various Grievance Cells. At times, raising issues on ICDS led to several conflicts which were resolved by the intervention of the higher officials. The collaboration with Odisha State Food Commission on nutrition issues was a key initiative as regards the issue of ration cards was concerned. The intervention by the Food Commission could also mobilise the entire Government Machineries in ensuring food and nutrition securities. Social Media was also used to raise the issues which led to further positive action networks and activities.

Programme and Implementation

With the above issued and objectives in consideration, the project planned for key activities including: Identification and Orientation of local youths as Change Agents; Developing appropriate IEC material; Training and Capacity building efforts; Dissemination through Street theatres and other traditional media and spaces; Interface workshops with Government bodies and representatives; Documentation and dissemination of Best practices; and State and district Level Consultations with stakeholders.

These activities were planned and implemented but among these, the focus had been on ICDS, Health and Nutrition as the project target areas were focused on the backward tribal districts of Odisha where health and nutrition are biggest problems. The local Tribal communities are very much unaware of their health and for the lack of proper knowledge and superstitions they hesitate to go to hospital

for any health issue and instead preferred to visit their priest and practice unusual and harmful practices.

The project quest started with the help of 10 numbers of District Coordinators and 10 numbers of Block Coordinators with a base line survey in 983 villages of 20 blocks of 10 projected districts. The base line reported that 49 per cent villages reported irregularity of Anganwadi workers. In 9 per cent (85 villages) of total villages it had no Anganwadi Centres (AWCs). That was a biggest challenge as well as an opportunity for the project and a key indicator to address the nutritional insecurity of the poor tribal people. The immediate effort was to get involved in the public interaction meeting in village level, GP level, Block level, District level and State level to facilitate best Government schemes which were based on the benefit of the common people. Mal-nutrition, mother and infant health were major focus in that context. The project started to identify best youth to appoint change agent (local area youth who can convey the project objective in their way).

During the project period of five years (2014- 2018), EU-Aragamee project focused on spreading awareness among the tribal communities by providing training and capacity building workshop for Citizen Action Groups (CAG) members, SMC members, Matru (mother) Committee and Janch (investigative) Committee members. Base line survey had given a clear idea of the specific issues faced by the tribal households. This helped to publish IEC material on child and mother health and nutrition requirements that was circulated in different interaction meetings, local market programs, Gram Sabha, Palli Sabha, in awareness camps, street theatre and other public places as well as to government functionaries.

CAG, Matru Committee, Janch Committee members regularly visited AWCs to scrutinise the work and regularity of Anganwadi workers. They checked the regular distribution and quality of cooked food and dry food which were distributed to the mother and infant and water sanitation system of the centres. CAG members, change agents, Block Coordinators and District Coordinators regularly visited the nearby health centres and hospitals and gather information for the used and benefit of the local tribal communities. The SMC

members visited the schools and review quality of MDM, sanitation of school premises, attendance of students and teachers.

Every year on the occasion of the World Women's Day on 8th March, the project team invited members from hospital, CDPO, ANM, ASHA, AWW, CAG members, SMC members, Janch Committee members, Matru Committee members, village women to take part in the discussion of health and nutrition issues. As reported, earlier the ratios of women participation were very little, however, during the project years the participation increased more than 60 per cent from the first year of project period. The project District Coordinator, Block Coordinator and Change Agents attended VHND and provided IEC material, explained and generated awareness.

Through periodic newsletter, the project carried out success stories and best practises of the common tribal people, especially the voice of happiness, achievement and their fight for their rights. They are being published not only for documentation but also to motivate other village members who feel insecure, shy and nervous for their nutritional needs. This seemed sufficient to convince them their fights for their strong and pleasant life and it worked to a greater extent. Workshops were being conducted for health and nutrition of tribal, specially for women, mother and infants, pregnant women. In Block Level, District Level and State Level Women's Conventions, health officers from various level, ANM, CDPO, health workers, AWWs, CAG members, JC and MC members, nutritionists were invited in various sessions for exchange of voices, address issues and finding solutions to nutritional challenges.

Agramee with collaboaration of EU and State Food Commission, Odisha organised Public Hearing on "Nutritional Security" in 3 different districts in Project areas i.e., Kalahandi, Gajapati and Mayurbhanj districts. In Kalahandi, the public hearing was organised at Thuamul Rampur on 5th May 2017. The programme was organized in collaboration with Kalahandi district administration, Odisha State Food Commission, EU-Agramee, project partner Seba Jagat. The subject of discussion and recommendations included review of implementation of key schemes i.e., ICDS, MDM, Mamata Yojana

and recommendations from different stakeholder and PRI leaders for improvement in food security programs of The Rampur Block.

In Gajapati district, a public hearing was organised at R.Udayagiri block on 24th October 2017. The programme was organised in collaboration of Kalahndi district administration, Odisha State Food Commission, EU-Agramee and project partners of Gajapati district SWWS. The scope of discussions included PDS card distribution, Antodoya card distribution, immediate action on nutrition, water and sanitation of all schools and AWC.



In Mayurbhanj district, the public hearing was organised at Kaptipada block of Mayurbhanj district on 11th October 2017. The programme was organised in collaboration of Mayurbhanj district administration, Odisha State Food Commission, EU-Agramee and project partner Agramee, Kaptipada block and Thakurmunda block. The subject of discussions included implication of delayed and new targeted PDS cards for the beneficiaries, immediate action on women and child health and nutrition development, Water and Sanitation system and regular distribution of nutritional food to mother and child by AWC.

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During the project period of five years, in 20 blocks, 3936 tribal women participated in International Women's Day, 3214 women participated in District Level Women Convention and 597 numbers of women participated in State Level Women's Convention for health and nutrition securities for the underprivileged communities. These numbers were unusually high in a remote region where people fear to get interacted with and engage with 'outsiders'. Women interacted with officials but also raise their voices for the issues, diseases they face in nutrition. A tribal woman aged 60 years, named Ms. Jatani Kahanr, from Kandhamal district had been a biggest example. She was aware of all the foods provided for a pre-delivery and post-delivery of a mother and for her infant till the age of six. She knew exact name of cooked and dried foods, duration and varieties of food which was unlikely for a woman from an advanced and developed area.

One of the major focus areas of the EU –Aragamee Project had been in the field of Nutrition Security for the Households in all the

Project Villages including information regarding ICDS, (Anganawadi Centres) and their management, Mid-day Meal Programme in the School, Public Distribution Schemes under National Food Security Act (NFSA). The villagers were mobilized to look at the functioning of Anganwadi Centres including the type of food supplied to children and pregnant women, the enrolment of children in Anganawadi Centre and transparency and accountability of the entire ICDS programme. . New Anganwadi Centres in uncovered villages and hamlets were demanded. There was also demand for construction of Anganwadi Centre Buildings. Every village had identified the most severe malnourished children who were admitted to Rehabilitation Centres. The dialogue with ICDS officials and district administration by the Citizens Action Groups (CAGs) and District Level RTI Forum were on a regular basis so that there was an overall improvement of the ICDS Scheme. The Mid-day Meal (MDM) scheme was a point of discussion with the School Management Committees (SMCs) and regular monitoring had improved the quality and checked a lot of mismanagement.

The project initial Survey indicated that in many Project Villages across all districts, some genuine persons have not got the Ration Card under National Food Security Act. With the help of the Odisha State Food Commission, the project ensured that the genuine beneficiaries could apply for the Ration Cards. With the State Food Commission's interventions, New Ration Cards were given to 128053 numbers of persons. The regular dialogue with the State Food Commission and participation in Public Reviews organized by the Commission had helped the local communities to ask for various entitlements including the Ration Cards.

| <i>Intervention by</i> | <i>Benefit</i> | <i>No. of beneficiaries</i> | <i>Remarks/outcome</i> |
|-----------------------------------------------------------------|---------------------------------------------------------------|-----------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| State Food Commissioner | Ration Card | 6389 | After intervention of State Food Commissioner in public hearing, good numbers of below poverty line beneficiaries were received ration card |
| | Ration card | 128053 | |
| Citizen Action Group | Awareness about various nutrition schemes implemented by govt | 8642 | The members are raising issues on implementation of govt. schemes and exclusion of target beneficiaries |
| Matru Committee, Janch Committee | AWW regularized | 574 | AWW regularized due to active intervention of the MC & JC |
| | Immunization Camp Regularized | 1219 | Active participation of JC and MC |
| | VHND Visit | 815 | Active participation of JC and MC impacting to regularization VHND and its objectives. |
| School Management Committee | MDM regularized | 454 | MDM regularized due to SMC intervention |
| Number of New Anganwadi Centre Created | | 81 | AWC center are maximum regularized. But there are some places where children were available. So, JC & MC, Palli Sabha and Gram Sabha focused on to create new centre. |
| Number of Anganwadi Centers Building Constructed | | 194 | Maximum numbers of AWC building constructed due to intervention of MC and JC, follow up action and complain raised in front of CDPO |
| Number of Children joined the Anganwadi Centre | | 7867 | Intervention of MC, JC the ratio is increased. |
| Number of Schools where Mid-Day Meal Schemes implemented better | | 326 | Food quality is better with and distributed regularly. |

Case Study-1

CDPO Wakes Up After News Reports of Mamata Yojana Scheme Failure in Dasmantpur Block

“Immediately enlist and pay out the left out beneficiaries of Mamata Yojana” Scheme”: CDPO



News Clips and left out beneficiaries of Mamata Yojana, Dasmantpur block, Koraput district

Dasmantpur is one of the most neglected blocks of Koraput district of Odisha. Implementations of all the government schemes are carried out only on pen and paper. Anyone who raises his/her voice got silenced because of the political pressure. The block level ICDS department of Dasmantpur was no different from this infection. As most of the AWWs relatives are in PRI representatives, the working of AWC was appalling in terms of anyone who hadn't had an experience with the department's callousness would not be able to grasp the severity of the negligence of ICDS services. Here, in none of the AWCs the preschool was being conducted by the AWW. The AWW just remained at home for months and years together and only they submitted monthly food bills and other documents and data on pen and paper. The other services like Mamata Yojana, Gaon Kalyan Samiti, Mother's Day, Vaccine Day, Nutrition Day etc. were just neglected by the AWCs.

Under such a scenario the Agragamee project leadership under EU- Agragamee Information project had tried to bring in to the limelight regarding the issue of widespread failure of Mamata Yojana scheme in the block.

This helped to carry forward the better and proper implementation of the scheme in the block.



In one of the interventions two Sachetaks of Dasmantpur block visited the project area villages of Chikamb, Girliguma, Dasmantpur and Dumbaguda GPs and conducted meetings and sensitized them on different government schemes. It was found out that the pregnant women weren't being able to avail the Mamata Yojana scheme in these villages. A survey was conducted to find out how many Mamata Yojana stakeholders have been left out from being benefitted. During the survey it was discovered that these pregnant women had no information about the scheme. Basically, the AWW should let them know all the provisions of the scheme. Besides those who had availed the first installment of Mamta Yojana cash benefit couldn't avail the subsequent installments for past 2 years. The survey findings were share with local media for dissemination and the severity of the problem. Soon after the Agramee staffs and reporters of the published newspaper were threatened and victimized by the AWWs brothers and husband. But there was also a positive effect of this. As the news got published, the CDPO got panicked and called for a meeting of supervisors. A survey format was developed and a survey was conducted in those GPs to ascertain how many beneficiaries have been left out in which village and the details of payments made to

them under the schemes. She instructed the supervisors to identify the beneficiaries who had received payments and those who haven't and immediately include those left out beneficiaries and give them their cash benefits under the scheme.



Case Study-2

Women Came Forward to Regularise Anganwadi Centre (AWC)

Integrated Child Development Scheme (ICDS) is one of the biggest Nutritional programmes run by the government. The objective of the programme is to provide nutritional food to the mothers and children to prevent IMR and MMR in the country. But the implementation of this programme is not as per its parameters. So, the women community action Group members of Padmapur village took steps to regularize the programme.

Padmapur is a small village under Belpada Grampanchayat of Belpada Block of Balangir district. The village is located 4 kms away from GP headquarter, 4 kms from Block Head quarter and 64 Kms away from district head quarter. There are 190 households out of which 18 SC households, 20 ST households and 152 OBC households.

The village has an AWC centre to provide ICDS services to the village. The Anganwadi Worker (AWW) was from a nearby village

that comes 3- 4 days in a month. The villagers have addressed her irregularities but the results were not visible. The Bolangir Bikash Parishad (BBP) intervened in the village through access to information on Govt. schemes in 2014 supported by EU-Agramee project. The core areas of this project were primary Education, Health, ICDS, MGNREGA and Good Governance. Hence, during preparation of household survey, village profile, village meeting and visit to the ICDS centre, the staffs of BBP came to know that the particular AWC used to be open 3 to 4 days in a month. BBP discussed about the role and functions of the AWC and explained how it was helpful for the children and pregnant women to ensure nutrition that are solely meant for them.



One of the CAG members took the leading role to mobilize the village women to functionalise the AWC. They came to the Block Information Centre run by BBP and sought the advice how to regularize the functioning of ICDS centre. Block level information Centre (BIC) helped the women group and a petition was written to the CDPO, the Sub-collector, the DSWO and to the District Collector regarding the irregularities of the AWW. They submitted the complaint to all these authorities and soon the AWC was regularized. The women were happy with this assistance and 25 children and 23 mothers were getting benefit out of this service.

Case study-3

Villagers and Community Members Met the Collector: Got PDS Cards

A meeting was held at village Uparchabri in Mahulipatana GP of Thuamul- Rampur block, district Kalahandi, in 31st January, 2016 in which 40 numbers of men and women participated hailing from the area where the EU supported project of the voluntary organisation, Atragamee was being implemented. In their discussion with the Director and Deputy Director of the organization, the community members complained that they had no PDS card and they were living in misery. They also had the grievance that no mobile health service unit had reached the village. On hearing their grievance, the project team suggested to the participant to meet the district Collector and VDO as a group and put their written complains on the Grievance Day. The next day a survey was conducted in the village and 35 deserving persons were identified who were not issued PDS cards, and individual complains were written to the effect. On 24th Feb. 2016, total 11 numbers of villagers including CAG members of Project met the District Collector. The members put their grievances on the issue of ration card to 35 deserving households. After hearing the case of the members and their written complaints, the collector gave assurance that steps were to be taken on issue of ration cards and within a span of five days, PDS card were issued to 24 beneficiaries. The PDS card beneficiaries felt proud that they exercised their right and get the rice quota under PDS scheme. The youths of the village and CAG members expressed confidence that they can bring changes in the village in coming days by enforcing their rights on the implementation of government schemes.

Project Limitations and Key Lessons

The entire Food and Nutrition Policies and Schemes needed reorientation as regards the Concepts and Practices. The management of Anganawadi Centres, MDM and PDs required greater transparency and accountability. For example, the Daily Food Items were written

boldly in the walls of Anganwadi Centres but there was hardly any question by the villagers or Matru Committee and Janch Committee Members why such items are not given as per the policies. Three eggs a week were to be given but it seems barring a few exceptions, not every Anganwadi centre was following that practice. It is a matter of debate whether cooked food or pre-cooked food would be the right choice. Besides, the locally grown food items in the tribal areas should be part and parcel of the Anganwadi Centres which is yet to be followed. The Assurance of Food and Nutrition, Education, Health Services and Drinking Water around the Anganawadis should be in-built into the ICDS. The Community Participation aspect of the entire ICDS should be restructured. For better Monitoring, there should be GPS Based tracking so that Anganwadi Worker is not defaulting and corruption is minimized.

For Mid-Day Meal (MDM), the policy should be introduction of Locally grown Food items and more powers to the SMCs so that pilferage is minimized. GPS based monitoring is also required. On PDS, the Ration cards must be ensured to each and every eligible and deserving persons and this is possible only if the Ration Cards are withdrawn from the ineligible persons who have got it by coercion or political influences. The strict implementation of policies is called for. The provisions of NFSA and the recommendations of the State Food Commission must be given due importance while restructuring the issue of Ration Cards.

Food and Nutrition Securities of the Children in Tribal Region have a co-relationship with the Food Sovereignty. This means that the families must grow food in conformity with their tradition and culture. The ICDS Schemes should be revamped accordingly. Instead of supply of pre-cooked food, local food items should be preferably in the Menu. The Public Hearing and Social Audit processes should be in place so as to ensure transparency and Accountability. The provisions of NFSA must be implemented at any cost.

Conclusion

While visiting hundreds of Anganwadi Centres to see how ICDS is on the ground, how the SMCs are playing a role in the management Mid-day Meal Distribution and how the poorest of the poor are getting their Ration Cards, it was observed both good and bad situations. It had been observed that wherever the community was aware of the Programmes, Provisions of various ACTs and has a participatory role in the Governance system, the delivery of services were better. The demand for Information is on the rise but the supply side is always poor. The Government does try to provide the basic information on various schemes by various methods including Wall Paintings, Publication of Posters and Booklets, it is still not enough to reach every citizen. Concerted efforts are required by all stakeholders so that ordinary people get the vital information available in the Public Domain.

Project Factsheet

| | |
|--------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Project Implementing Agency(s) | Agramee Odisha |
| Survey method(s) | Base-line Survey Method |
| Stakeholder(s) | Tribal and Dalit Women; Local Youth; Elected Representatives; Government Departments at State, District and Block Level; Civil Society Organizations; NGO Partners; Women's Federations and Professional Agencies. |
| Site/ Field (Exact Location) | 1000 Villages, 100 Gram Panchayats, 20 Blocks, 10 Districts of the State Odisha, India were targeted area. 2 blocks of each district and 5 GP's of each block (near about 50 villages from each block) has been taken as projected area. |
| | 1. Dist.- Bolangir, Block- Belpada, Bangomunda |
| | 2. Dist.-Gajapati, Block- Rayagad, R.Udayagiri |
| | 3. Dist.- Kalahandi, Block- Madan Rampur, Thuamul Rampur |
| | 4. Dist.- Kandhamal, Block- Phiringia, Tikabali |
| | 5. Dist.- Koraput, Block- Dasmantpur, Laxmipur |
| | 6. Dist.- Malkangiri, Block- Korkunda, Mathili |
| | 7. Dist.- Mayurbhanj, Block- Kaptipada, Thakurmunda |
| | 8. Dist.- Nabarangpur, Block- Dabugan, Tentulikhunti |
| | 9. Dist.- Nuapada, Block- Nuapada, Boden |
| | 10. Dist.- Rayagada, Block- Rayagada, Kashipur |
| Duration | 60 Months (1st Jan.2014-31st Dec.2018) |
| Project Partner(s) | Bolangir Bikash Parishad (Bolangir Dist.), Society for the Welfare of the Weaker Sections (Gajapati Dist.), Mahila Vikas (Gajapati Dist.), Seba Jagat (Kalahandi Dist.), Harmony (Malkangiri Dist.), Agranee (Mayurbhanj), Regional Centre for Development Cooperation (Nabarangpur Dist.), Chale Chalo (Nuapada Dist.) |
| Contributing Donor(s) | European Union |
| Thematic Area(s) | We worked on five basic and important themes of Govt. Scheme which were highly essential for the targeted group. These are Education, Health, Nutrition, Governance and Livelihood (MGNREGS) |

Fighting Poverty and Social Exclusion by Improving Access and Governance of Public Schemes and Services

*The Dan Church Aid's Initiative in Backward
Districts of Odisha*

Abstract

In Odisha, regional and social disparities continue to be a major area of concern. Although the state has performed well in terms of economic growth, the benefits of growth have not been shared between the regions equally. The growth is not inclusive and certain areas and certain sections of people are further pushed to the periphery of development. Besides, the government's emphasis on social sector developments has not been adequate to achieve desired results in terms of human development indicators. With a view to addressing the regional disparities and expediting the process of development in the backward areas, particularly the tribal dominated areas, the government has implemented a host of programmes such as Revised Long Term Action Plan (RLTAP), Biju Kalahandi-Balangir-Koraput (KBK) Plan, Backward Regions Grant Fund (BRGF), Gopabandhu Gramin Yojana (GGY) and set up bodies like Western Odisha Development Council (WODC). However, many well intentioned schemes have failed to deliver due to poor governance, illiteracy, social exclusion and geographic isolation of some regions in the state.

Key words: Rajiv Gandhi Seva Kendras

Introduction

High level of corruption and irregularities involved in programme implementation in backward and tribal dominated regions of Odisha have curtailed people's access to government schemes/services in a smooth, transparent and trusted manner. People's participation in planning, implementation and monitoring of schemes and services has been negligible due to illiteracy and lack of enabling environment. Poor implementation of schemes/services coupled with the lackadaisical approach of duty bearers have slowed down the pace of development in the backward regions. The community level monitoring committees such as Jaanch Committees, Mother's Committees, School Management Committees, MGNREGS-Monitoring and Vigilance Committees have remained largely defunct failing to serve the purpose of monitoring of the public schemes and services.

Frontline and mid-level service providers have been lacking the capacities to perform their duties in an effective manner. The limited trainings provided by the government departments have not been enough for them to perform their duties in an effective manner. Although, well laid out grievance redressal mechanisms have been in place at gram panchayat, block district and state levels with toll free help line numbers for telephonic registration of complaints, the redressal procedure takes a long time. People have almost no faith in the grievance redressal system. Besides, the people in backward areas have been taking the help of exploitative intermediaries to fill up forms to apply for schemes and have almost no idea about the process to lodge grievances with appropriate authorities. Thus there has been a whole cycle of ignorance, apathy, denial, exploitation and delay in access and delivery of critical public schemes and services for the poor, vulnerable and excluded groups and communities in a never ending process.

Background and Description

Given the scenario, DanChurchAid (DCA) selected Odisha's two tribal districts, Koraput and Sundargarh, for implementing a project titled "Fighting Poverty and Social Exclusion by Improving Access

and Governance of Public Schemes and Services in Two Backward Districts of Odisha”, with resource support from the European Union (EU). These two districts had been selected for their backwardness, distress migration and high incidence of chronic hunger and malnutrition. The project was implemented by the local NGO partners –SPREAD in Koraput and Disha in Sundargarh – with the Office of State Advisor to Commissioners of Supreme Court providing the required action research and policy advocacy support at the state level. The duration of the project was a little more than four years starting from 1st January, 2014 and continuing till 31st March 2018.

Objectives

The overall objective of the project was to reduce poverty and social exclusion amongst the most marginalised communities in Koraput and Sundargarh districts of Odisha.

The specific objectives of the project included:

- 1) Improved awareness and participation of target communities in governance of food and nutrition Security (F&NS), health and education (H&E), social protection (SP) and employment schemes (ES) of the government implemented in Koraput and Sundargarh districts of Odisha;
- 2) Improved accountability and transparency in F&NS, H&E, SP and ES of the government implemented in both districts;
- 3) Duty bearers from state-to-village level are supported to address pertinent gaps at policy and implementation levels in reference to F&NS, H&E, SP and ES through evidence based advocacy.

Project Methodology

Implemented in a rights and responsibility framework, the project tried to increase the demands of people towards their claim for rights and entitlements on one hand, and to strengthen the supply side by building the capacities of frontline and mid-level duty bearers on the other. The rights based approach adopted in the project had improved the access of communities to targeted schemes and their entitlements. It had also helped holding the duty bearers

accountable through appropriate interventions. The project had thus witnessed incremental changes in knowledge and understanding of government schemes/ services, improved access of people towards them, increased accountability in duty bearers and the governance of the schemes and services in the project locations. These results had created certain lasting impacts towards reducing the poverty and exclusion among the target populations. The impact of the project can thus be viewed in the following broad areas of interventions.

Programme Implementation

| Project Area | | | |
|--------------|---------------|---------------|--------------------|
| District | Name of block | Number of GPs | Number of Villages |
| Koraput | Baipariguda | 07 | 75 |
| | Nandapur | 12 | 130 |
| | Lamtaput | 06 | 54 |
| Total | | 25 | 259 |
| Sundargarh | Bisra | 06 | 57 |
| | Nuagaon | 10 | 90 |
| | Kuanrmunda | 9 | 54 |
| Total | | 25 | 201 |
| All Total | | 50 | 460 |

The project covered 460 villages in six blocks of Koraput and Sundargarh districts. Table 1.1 below gives the details of the geographical spread of the project in both the districts: Table 1.1: Project Geographical Spread

The project covered five key sectors and included some of the important schemes and services falling within it. The following public schemes/ services were targeted by the project to improve its access and governance in the project locations:

Table 1.2
Project key sectors and schemes

| <i>Key sectors and schemes targeted under the project</i> | |
|-----------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|
| <i>Sector</i> | <i>Targeted schemes</i> |
| Food and nutri- tion security | Public distribution system (PDS), Integrated Child Development Scheme (ICDS), National Family Benefit Scheme (NFBS) and Mid-Day Meal (MDM) |
| Health | Janani Suraksha Yojana (JSY), Gaon Kalyan Samiti (GKS), Janani Sishu Suraksha Karyakram (JSSK), Rashtriya Swasthya Bima Yojana (RSBY) |
| Education | Anganwadi and primary school education in line with Right to Education Act (RTE) |
| Social protection | Pension (widow, disabled, old age and people living with HIV/AIDS), Mamata scheme |
| Employment | Mahatma Gandhi National Rural Employment Guarantee Scheme (MGNREGS) |

Against the planned target of 56,000 households, the project reached out to 59,905 households – 29,088 in Koraput and 30,817 in Sundargarh. Out of them, 40,712 were Scheduled Tribe; 8,450 Scheduled Caste; 10,379 Other Backward Classes; 105 minority community; and 259 general caste households. The districts have a total population of 2, 69,794 (1, 35,384 male and 1, 34,410 female).

Implementation Outcome

As a result of interventions by EU-DCA project, the target groups' knowledge and understanding of the targeted schemes had improved substantially. Prior to the project, the target communities were at the receiving end and mercy of the service providers. The project through its awareness generation activities provided information and guidelines on targeted schemes and programmes.

During the four years of the project, there was substantial increase in the number of people who accessed information from the project action. People attended monthly village meetings and availed various kinds of information on the targeted schemes/services. Similarly, people attended the nodal meetings of the gram panchayats/ blocks in increasing numbers and availed different kinds of information. The period also witnessed increase in the number of

people who took part in the various grievance days. Informative wall writings done by the project at strategic and vantage locations like the block offices and gram panchayat walls further helped.

The Rajiv Gandhi Seva Kendras (RGSKs), strengthened under the project at block and gram Panchayat levels served as information hubs for the people. Earlier, the block and gram panchayat offices were using the RGSK buildings as annexes to their office buildings to accommodate work spaces for the officials. The centres were not equipped with trained personnel and gadgets, were not functional to serve their purpose. The project rejuvenated these centers and provided facilitators, computers, furniture and fixtures to make them operational.



Village meeting at Hanumanjar of Koraput/ Photo_01

The 15 RGSKs managed by trained local youth continued to serve as single window information hubs (SWIHs) for all welfare schemes as well as in provided handholding support to the poor people for filing various applications and registering grievances. The centres

continued to distribute printed copies of various scheme application forms to people. The RGSK facilitators continued to help people in filling up different application forms as also in drafting of grievances. The RGSKs were equipped with Odia translations of a series of government circulars for ready reference and education of the RGSK facilitators and the leaders of the gram panchayat level monitoring committees. The RGSKs remained open for four days a week and on the remaining days the RGSK facilitators kept moving around from village to village holding village help camps where they not only disseminated useful information on the targeted schemes and services but also helped people in putting claims.

The RGSK centres and the help camps organised by the facilitators at the village level reached out to around 6,000 people in a month on an average. The centres were especially helpful to people in obtaining the ration cards under National Food Security Act (NFSA). Around 35% of the NFSA applicants – 5,699 out of total gram panchayat level applications of 16,249 – in the pilot 12 gram panchayats received NFSA food ration cards only through help from the RGSKs.

Earlier, the “culture of silence” of the tribals was an added advantage for the unscrupulous officials in the project locations. By taking advantage of the ignorance of people, the frontline and mid-level service providers often manipulated those schemes/ services to their advantage. Leakages and pilferage of funds were reported from the project locations. Even false names were enlisted in different social security schemes and Mahatma Gandhi National Rural Employment Guarantee Scheme (MGNREGS) to benefit the exploitative intermediaries. Following the project intervention, however, the target communities have developed their knowledge on different schemes/ services to question the quality and quantity of provision under each scheme in both the project locations of Koraput and Sundargarh.

Increased Community Awareness and Action

Post project interventions, the local people and communities knew about:

- Which department is responsible for which services, and where to approach for grievance redressal.
- The significance of the various nodal meetings and grievance days at the GP, block and district level.
- The purpose of observing various community level special days like RojgarDiwas, Village and Health Nutrition Day, and the roles and responsibilities of various monitoring committees.
- Their role in verifying various government records and documents for checking irregularities and leakages in the delivery of various services.
- Keeping documentary evidence like acknowledgements/ receipts of their applications/ grievances.

Improved Access of People to Government Schemes and Services

As a result of improved knowledge and understanding, the target communities were able to claim their rights and entitlements under the targeted schemes and services. The interventions had significantly improved the access of people to the targeted schemes and services. Due to increased knowledge and understanding of the target communities, the frontline and mid-level service providers were under compulsion to operate in a transparent manner. Thus, the transition of target communities from passive recipients to active claimant of schemes/ services was a visible impact, which had enabled the eligible beneficiaries to avail the intended benefits of various schemes and services of the government.

| <i>People Benefitted since the Start of the Project</i> | | | | |
|-------------------------------------------------------------------------------------------------|--------|--------|--------|--------|
| | 2014 | 2105 | 2016 | 2017 |
| <i>MGNREGS</i> | | | | |
| Number of households (HHs) that applied for job card registration | 3,410 | 1,642 | 1,465 | 1,532 |
| Number of HHs that got job cards | 1,684 | 1,040 | 970 | 1,164 |
| Number of HHs that demanded for job under MGN-REGS making use of C-1 form | 18,300 | 30,897 | 37,252 | 16,597 |
| Number of HHs that got job for 10-20 days under MGNREGS | 7,836 | 7,900 | 7,550 | 7,338 |
| Number of HHs that got job for 20-30 days under MGNREGS | 5758 | 8729 | 6161 | 5778 |
| Number of HHs that got job for 30-40 days under MGNREGS | 3,981 | 1,709 | 4,831 | 3,943 |
| Number of HHs that got job for 40-70 days under MGNREGS | | | 5,088 | 7,597 |
| Number of HHs that got job for 70-90 days under MGNREGS | | | 3,826 | 6,733 |
| Number of HHs that got job for 100 days under MGNREGS | | | 712 | 1,686 |
| Number of HHs that received their overdue wages for work done long ago (after complaint) | 1,473 | 1,428 | 3,081 | 2,654 |
| Number of HHs that applied for recognition as 'labourers' (labour card registration) | | | 833 | 3,029 |
| Number of HHs that received labour cards (as recognised labourer) | NA | NA | 574 | 1,678 |
| Number of HHs that received benefits on account of recognition through labour card registration | NA | NA | 141 | 1,517 |
| <i>PDS</i> | | | | |
| Number of BPL cards reclaimed/ restored to original owners | 592 | | | 0 |
| Number of HHs that applied for coverage under the newly introduced NFSA | | 59,450 | NA | 3,142 |
| Number of HHs that received the NFSA cards and got included under NFSA | | 52,723 | 7,170 | 2,012 |
| Number of HHs that reapplied (after the first round of denial) for coverage under NFSA | | | 2,906 | 1,355 |
| <i>ICDS/ Mamata/ JSSK/ RSBY</i> | | | | |
| Number of pregnant mothers provided with referral services under ICDS | 768 | 623 | 238 | 205 |

| | | | | |
|-----------------------------------------------------------------------------------------------------------|-------|-------|-------|-------|
| Number of malnourished children provided with referral services to special care units (SCUs) under ICDS | 109 | 197 | 202 | 232 |
| Number of mothers who received Mamata/ JSY benefits | 2,482 | 1,400 | 1,417 | 1,621 |
| Number of HHs that were covered under BKKY (benefited) | NA | 533 | 322 | 406 |
| Number of mothers who gave birth to child at government hospitals (institutional delivery) | 1,652 | 1,559 | 1,417 | 1,626 |
| PENSIONS | | | | |
| Number of HHs that received National Family Benefit Scheme assistance | 144 | 109 | 238 | 259 |
| Number of persons who have been identified and recommended by gram panchayats for social security pension | 713 | 1,613 | 1,590 | 3,957 |
| Number of persons who received Madhu Babu Pension | 345 | 347 | 1,862 | 2,047 |
| Number of persons who received Indira Gandhi National Pension | 1,189 | 285 | 1,034 | 1,353 |
| OTHERS | | | | |
| Number of HHs that received Indira Awas | 1,859 | 1,177 | 1,555 | 4,640 |
| Number of HHs that received Mo Kudia benefits | 224 | 392 | 507 | 756 |
| Number of HHs that newly applied for land under Forest Rights Act | 1,224 | 1,336 | 1,040 | 357 |
| Number of HHs that received FRA land | 474 | 591 | 434 | 78 |
| Number of HHs that received other type of land | 8 | 314 | 24 | 705 |
| Number of hand pumps newly constructed | | 71 | 69 | 189 |
| Number of hand pumps repaired | | 205 | 182 | 548 |
| Number of vulnerable children identified linked to monthly sponsorship of Rs.2,000 under ICPS | 71 | 43 | 60 | 86 |

(Source: Project Overview: SPREAD & Disha)

Case Study

Years ago, the families of Radha Pangti, 58, and Raila Dumta, 48, settled in Talaguda village under Nandapur block of Koraput district after being displaced by Machhkund dam project. Both the tribal women shared similar socio-economic background. Their families were landless. Radha's husband Laxman Pangti and three sons were wage labourers. Radha used to work as a wage labourer but now was

not able to because of disability. On the other hand, Raila's husband expired 10 years ago. She and her sons were wage labourers. Both the family did not have BPL cards. Besides, neither Radha got disabled neither pension nor Raila widow pension. As far as food security is concerned, they grew paddy and mandia (a kind of millet) in small patches of hilly and forested land. The paddy and mandia lasted for about four months in a year.

In 2014, when it took up a project with EU-DCA support, SPREAD helped to form Village Development Committee development committee for the purpose; the latter identified the cases of Radha and Raila on a priority basis. Applications for disabled pension for Radha and widow pension for Raila were processed through palli sabha and gram sabha.



Radha Pangi Raila Dumta and Other Village Women from Talaguda Village of Nandapur Block in Koraput

They each started getting the pension of Rs.300 from 2015. At the same time, the village development committee also helped them get the priority household cards under National Food Security Act that ensured 5 kg rice per head to their households on government subsidised price.

There are 58 families in Talaguda, all of whom are tribals. Like the families of Radha and Raila, most of them do not possess their own land and cultivate paddy, mandia and pulses in small patches of hilly lands. Neither did they have household pattas. Following elaborate meetings in the village development committee, the villagers decided to apply for individual right over forest under the Forest Rights Act. “We attended meetings and training on Forest Rights Act (FRA) held by SPREAD in Koraput. We also went to Bhubaneswar to hold demonstration demanding our rights on forests,” says 35-year-old Ira Dumta, a member of the village development committee.

Conclusion

The DanChurch Aid’s intervention in two of the most backward districts of Odisha and India has been an extraordinary approach in terms of the reach, backwardness, and other cultural, social and institutional challenges and hurdles. The project could reach out to the desired segment of population with information, awareness, linkages, and strengthening services delivery in tribal populated locations that are generally not a priority focus for administration and agencies, as evidences have shown time and again. The project is an example of an integrated approach to deal with tribal rights, entitlements and basic services with increased capacity to demand and ask for the rights by the local community which in turn leads to increased and better performance of local agencies and authorities.

Project Fact Sheet

| | |
|--------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Project Implementing Agency(s) | Dan Church Aid (DCA); The project implemented by the local NGO partners –SPREAD in Koraput and Disha in Sundargarh with the Office of State Advisor to Commissioners of Supreme Court providing the required action research and policy advocacy support at the state level. |
| Survey method(s) | Rights Based Approach; Primary and Secondary methods; Group Discussions; Interviews; Participatory Method |
| Stakeholder(s) | Community, Local Authorities, Media, Women, Local Service Delivery Institutions |
| Site/ Field (Exact Location) | Odisha's two tribal districts, Koraput and Sundargarh |
| Duration | January 1, 2014 - March 31, 2018. |
| Project Partner(s) | NGO partners –SPREAD in Koraput and Disha in Sundargarh |
| Contributing Donor(s) | NA |
| Thematic Area(s) | Awareness and participation of target communities in governance of food and nutrition Security (F&NS), health and education (H&E), social protection (SP) and employment schemes (ES) of the government; Improved accountability and transparency in F&NS, H&E, SP and ES of the government; Gaps at policy and implementation levels in reference to F&NS, H&E, SP and ES through evidence based advocacy. |
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Empowering Tribal Communities to Address their Poverty through Improved Access to Public Services

*The 'Johar' Project Initiative of 'Find Your Feet' in
Jharkhand and Chhattisgarh*

Abstract

Find Your Feet (FYF) and its seven national NGO partners implemented the 'Empowering tribal communities to address their poverty through improved access to Indian public services', nicknamed 'Johar' which was completed in December 2018. The project was about empowering tribal communities/marginalised Adivasis to reduce their poverty and exclusion by improving access to and monitoring of public services in 8 backward districts of Chhattisgarh (Korba, Raigarh, Kanker and Rajnandgaon districts) and Jharkhand (Dumka, Pakur, Jamtara and Godda districts). It was about reducing poverty and social exclusion through access to government services relating to poverty reduction, tribal rights, education, child and maternal health and income generation. Overall, the project could reach out to 9873 women, 8403 men in remote tribal areas who had accessed government schemes and services through the project, relating to health, education, employment, water and sanitation, income generation, housing and social security (e.g. widow's and old age pensions). The partners also reported improvements in the quality of services, such as the maternal and child health services provided through Anganwadi centres. The project had established linkages between tribal communities and their elected representatives, helping to raise awareness of government schemes and enabling government departments to more fully utilise their social welfare budgets. It had formed a network of

village level CBOs and representative Tribal Rights Forums (TRFs) that advocated on tribal issues at all levels. As a result, tribal communities were increasingly monitoring the delivery of public services, through social audits and village committees (e.g. school management committees) at the local level and through public hearings at the state level (in which cases on problems with service delivery were presented in the presence of government officials, CSOs and the media). The project was supporting tribal communities to participate in planning, implementing and monitoring government services, improving the accountability of Panchayati Raj Institutions (PRIs) and service providers.

Keywords: Tribe, poverty, Chhattisgarh, Jharkhand

Introduction

Find Your Feet (FYF)'s 'Empowering tribal communities to address their poverty through improved access to Indian public services', nicknamed 'Johar' Project started 1st January 2014 and until 31st December 2018. The project was about empowering tribal communities / marginalised Adivasis to reduce their poverty and exclusion by improving access to and monitoring of public services. FYF and its seven local partners in the project (four of them headed by Adivasis) were working to mobilise tribal communities in 240 villages from 8 backward districts of Chhattisgarh (Korba, Raigarh, Kanker and Rajnandgaon districts) and Jharkhand (Dumka, Pakur, Jamtara and Godda districts), especially targeting women, to access and monitor public services and advocate for their proper implementation. The project worked in enhancing information, access and delivery in Chhattisgarh and Jharkhand through an integrated approach.

The project delved on reducing poverty and social exclusion through access to government services relating to poverty reduction, tribal rights, education, child and maternal health and income generation. Till March 2018, the project a total of 18,276 people (9873 women, 8403 men) in remote tribal areas had accessed government schemes and services through the project, relating to health, education, employment, water and sanitation, income generation,

housing and social security (e.g. widow's and old age pensions). The partners were also reporting improvements in the quality of services, such as the maternal and child health services provided through Anganwadi centres. The project had established linkages between tribal communities and their elected representatives, helping to raise awareness of government schemes and enabling government departments to more fully utilise their social welfare budgets. The 8 district Public Information Centres established through the project - in partnership with the local panchayats and based in panchayat premises - have been critical in this regard. A total of 406 self-help groups (SHGs) had been established, providing their 5168 members (97% women) with access to information, training and low interest credit through savings and loan schemes. With support from the groups, 3524 SHG members were operating small-scale income generation activities, and many groups had accessed support from external providers such as the National Rural Livelihoods Mission and the National Bank for Agriculture and Rural Development.

The project led to formation of a network of village level CBOs and representative Tribal Rights Forums (TRFs) that advocate on tribal issues at all levels. A total of 240 village community-based organisations (CBOs) with 21,875 members (55% women) had been established across 8 tribal districts, and were pro-actively lobbying government for increased realisation of tribal rights. Elected representatives of the local CBOs had formed district, state and inter-state level Tribal Rights Forums (TRFs). Common issues arising from the CBOs were addressed at the higher levels. Till April 2018, a total of 1703 CBO/TRF members (1028 women, 675 men) had been trained on public schemes and services, giving them a good understanding of the provisions, eligibility criteria and application procedures of a range of government schemes. A total of 688 (361 women, 327 men) CBO/TRF members had been trained on lobbying and advocacy with government, covering a range of approaches and tools, e.g. rallies, public hearings, media engagement, policy advocacy, alliance-building, postcard campaigns and use of legislation such as the Right to Information Act (RTIA) and Public Interest Litigation (PIL). As a result, there were numerous examples of successful

advocacy initiatives at the local level. Tribal communities were increasingly monitoring the delivery of public services, through social audits and village committees (e.g. school management committees) at the local level and through public hearings at the state level (in which cases on problems with service delivery were presented in the presence of government officials, CSOs and the media).

Background and Description

Participating communities have a greater understanding of the important role of the Gram Sabhas (village assemblies) in scrutinising the work of the Panchayati Raj Institutions (PRIs) and influencing the scope and beneficiaries of public schemes. The project's Mid Term Evaluation conducted in 2016 found that the project had led to an increase in the number of Gram Sabha meetings held and the proportion of people attending Gram Sabhas in the project area. The Community Building Organisations (CBOs) and Tribal Rights Forums (TRFs) members played an active role in ensuring the Gram Sabhas fulfil their role in an effective and transparent manner. Through the Gram Sabhas, tribal communities participated in government planning processes such as the Intensive Participatory Planning Exercise (IPPE II) undertaken in 120 of the project villages. The Self Help Group (SHG) and TRF members, particularly women, played an active role in the approval of local plans, resulting in numerous development works being sanctioned in the project villages, such as the construction of ponds, wells, toilets and animal shelters. A total of more than 3,640 government officials and PRI representatives in remote tribal areas were trained on their roles and responsibilities in delivering public services, including local authority workers (e.g. Auxiliary Nurse Midwives [ANMs], Accredited Social Health Activists [ASHAs], Anganwadi/Integrated Child Development Services [ICDS] workers, and technical assistants under the Mahatma Gandhi National Rural Employment Guarantee Act [MGNREGA] and PRI members (elected village heads, ward members and secretaries). As a result, the project met the needs of tribal communities more effectively. The Mid Term Evaluation found that the average annual household income had increased by 11%, the proportion of

food secure households had increased from 30% to 43% and the proportion of tribal families in the project area living in poverty had reduced from 89% to 80% since the start of the project.

Principal Issues

The project activities had succeeded in promoting and developing SHGs as a focus for the dissemination of information on access to services and increased participation with a good level of progress and success, with 406 groups in place, providing 5168 members (97% women) with access to information, training and low interest credit. SHG members received training on management and accounting and have increased access to credit. The groups had increased their confidence and skills of women to participate in decision-making and enhanced their economic independence. A total of 3524 women used group funds to set up individual or collective income generation activities, helping to supplement their incomes.

As part of the strategy to raise awareness among Adivasis of their rights, the project had also established Public Information Centres (PICs) in each of the eight districts. These centres were designed to provide information, advice and support to Adivasis on their entitlements and supported them to access public services and schemes. The eight centres were established through Memorandum of Understanding (MoUs) between the PICs and the local Panchayats, were all housed in premises provided free of charge by the local panchayats and were inaugurated by panchayat and government officials. They were staffed by PIC Counsellors, who were funded through the project. Community mobilisation camps had taken place in all districts, both to mobilise communities and raise awareness of government services/schemes. The camps were largely conducted in local languages (e.g. Santhali) and included cultural activities such as 'Nukkad Natak' (street theatre) and local folk music. The camps helped to increase uptake of PIC services (and to sustain people's motivation to engage in the project).

The centres' opening times varied depending on the times of local markets, but they were mainly opened for 3-4 days a week. On these days, the PIC Counsellors distributed IEC materials on government

schemes, inform community members of their entitlements, and support (often illiterate) community members to complete the necessary application forms. They kept records of all applications submitted and visit/talk to government officials to follow up on any outstanding issues. On the other working days, the PIC Counsellors visited the local communities to conduct outreach, including raising awareness of the PIC services, participating in SHG/CBO meetings, and checking on the status of applications previously submitted.

Objectives

The PICs were intended as an interim measure to raise awareness of services before the CBOs/TRFs were fully active and before government services such as the Common Service Centres (CSCs) to be established under the Government's e-governance programme were functioning effectively. As such, they were not initially intended to continue beyond the end of the project. However, as the project had continued, it had become apparent that the participating communities would benefit from a continued, albeit reduced, service to support people to apply for schemes and remain informed of any new schemes launched.

The different partners of Johar project undertook different approaches to ensuring that reduced PIC services can continue after the end of the project. Measures taken included: requesting written agreements from the local panchayats to continue providing free premises and utilities; charging a nominal fee for each application; using CBO/TRF membership fees, donations and income from group income generation activities to cover PIC costs; and identifying, training and mentoring a cadre of literate community volunteers to fulfil a role similar to that provided by the PIC Counsellors.

Project Methodology

Working with implementing partners who had experience of working in the project areas and good relations with local government greatly facilitated the work. The act of establishing the SHGs in conjunction with the CBOs had been a useful exercise. The SHGs were provided a platform for women's social and economic

empowerment, enabling tribal women to discuss and collectively develop strategies to address social problems for IGAs. They gave the women members the confidence to engage in lobbying and in civic life more generally, such as participating in Gram Sabha meetings, joining School Management Committees and becoming 'Mates' (worksite supervisors) under the Mahatma Gandhi National Rural Employment Guarantee Act (MGNREGA). The CBOs had enabled women and men to work together on advocacy at the local level, and the involvement of men has helped with access to decision-makers.

The establishing of the PICs in partnership with the local Panchayats, that had provided premises for the PICs within government buildings free of charge, was a positive way to build and maintain relationships and ensure the sustainability of the centres after the end of the project (the Panchayats have committed to providing the premises after the end of the project period as well). To Engage the Gram Sabhas, in areas where they were correctly functioning, greatly facilitated the establishment of the PICs. In these cases, written proposals requesting the establishment of PICs were presented in the Gram Sabhas, following which government buildings were provided free of charge for the PICs.

Forming the CBOs before the PICs were established meant that CBO members could play a critical role in advocating for the PICs. Allowing community members themselves to decide on the PIC locations was important to ensure their awareness and continued use of the PIC services.

The PICs were inaugurated in public ceremonies, which helped to enhance their credibility.

Community mobilisation events, corner meetings and street plays raised awareness of the PIC services. PIC Counsellors were required to speak the local languages - this ensured trust and respect of communities. Some PRI members and government officials were initially concerned that the centres would instigate criticism of the local authorities - this issue was addressed by the partners and CBO members explaining the benefits. Finding and retaining educated and skilled PIC Counsellors, who are all graduates, was a challenge in the remote project areas given low salaries. The PICs were acknowledged

and respected by PRIs and block/district level government officials. The outreach programmes by PIC Counsellors helped to attract more people to the PICs.

The submission of applications and continued follow up by PIC Counsellors and CBO/TRF members had enabled thousands of families to access services/schemes. However, applications can take a long time due to government delays and very frequent turnover of government officials, which can lead to dissatisfaction. Middle men or money-lenders at times tried to dissuade community members from attending the PICs, as they stood to lose out on income when community members accessed services this way. At times, large numbers of people attended the centres at the same time, leading to delays and the need for crowd management – this was addressed with community volunteers to assist the Counsellors. In some cases, the PICs had intervened when the community felt that the panchayat had not identified the correct beneficiaries for government schemes, leading to tension at times.

Programme Implementation

The project directly covered around 22000 tribal families spreading over 240 villages in 8 districts of Chhattisgarh and Jharkhand. It provided a platform to the local communities to upstream their voices and build linkages with public service providers. The effectiveness of the Tribal Rights Forum (TRF) under the project was evident from the growing demand and access to public services across the 8 districts. More than 30% of the issues raised by the network had been resolved.

FYF and its partners had implemented a range of processes like community mobilisation, formation of CBOs and platforms at cluster, district, state and interstate levels, trainings and orientation, perspective building, public hearing events, engagement of public authorities to form and strengthen the TRF network. The TRF network used a Community Based Organization or CBO-based model to build collaborative and collective actions to improve the social and economic conditions of tribal communities, particularly women, by enhancing their access to constitutional rights, entitlements and

public service provisions. It began its journey with the formation of CBOs across 240 villages in eight districts in both the states. A core committee consisting of 20 members selected from within each CBO had also been formed in each of the villages. It provided a base for selection of members from core committee to form district level associations followed by state and inter-state level networking of community members originating from CBOs. Monthly meetings of CBOs and core committees were conducted at village level, quarterly meetings at block/district levels and half yearly meetings at state and inter-state levels. Meeting agendas were planned in consultation with stakeholders at all levels. This way, the TRF also demonstrated its relevance and potential in addressing entitlement challenges facing the community.

The TRF network was rooted in community interests, felt needs, resources and initiatives. It has and had evolved its role and functions in a complex context of communities' diverse needs and expectations, and four-layered structure from village to inter-state levels for its operations, service delivery gaps and government working culture and systems. It focused on key role areas including – (i) Building identity and collective strength of tribal communities; (ii) Generating awareness and demand for public service provisions; (iii) Identifying issues restricting access to their rights, entitlements and public service provisions; and (iv) Connecting the community, local governance institutions, and government in order to improve public service delivery system.

Implementation Outcome

Despite being at evolving stage, the TRF network was marked with successes in mainstreaming of community needs and issues like employment and wage payments under the MGNREGA, incentives to mothers for institutional birth deliveries, public distribution system, mother and child healthcare services, housing schemes, and individual forest rights. Network members were closely working with PRIs and frontline workers like ICDS and public health workers. They also had been able to use public resources at village level like use of Panchayat Bhawan for setting up PICs and also using them for

their meetings. Their relations with public authorities at block level were helping in addressing community-level service delivery issues to an extent. However, the key challenges facing the network were relationship building, and communication and advocacy at district and state level.

Women were particularly empowered by their involvement in TRFs. The benefits resulting from project activities, such as increased income and improved access to public services had reduced the initial reluctance by some men to allow their wives to participate in project activities. In addition, the SHGs and CBOs were providing a platform for men and women to work together, on IGAs at the household level and on advocacy initiatives at the community level. The partners had reported that women SHG members were now being invited to all public meetings and their opinions actively solicited on public issues.

“Earlier we never attended Gram Sabhas, even though we were invited. We thought it was for men to participate. But now we not only attend the Gram Sabha, we also propose the names of the eligible people for inclusion under different schemes and demand the approval of development work related to tube-well installation, steps in the pond, an all-weather road and the construction of an Anganwadi centre. We ensure that all the members participate in the meeting,” said Ramabai Kobda, Secretary, Gedagaon Self Help Group.

The project implementation strategy proved efficient in addressing both demand and supply issues by mobilising communities to exercise their rights to access public services while at the same time sensitising relevant government bodies and PRI on their roles and responsibilities and strengthening their capacities and performance through training. The selected implementation mechanisms proved effective in facilitating access to services and bridging the gap between accessibility and availability of services despite existing challenges. This was highlighted by data confirming increased availability and access to the different services in intervention areas.

The project played an effective role in supporting government efforts to build the capacity of its staff. A good illustration of this role was the fact that a total of 9 JOHAR project staff were members

of the State Resource Team (SRT) for the Intensive Participatory Planning Exercise (IPPE) and had played a major role in training the Panchayat Training Teams (PTTs) on this process. The project made progress in empowering tribal communities in 240 villages from 8 backward districts, especially women, to access and monitor public services and advocate for their proper implementation.

The PICs were established in the 8 project districts at the Panchayat level with signed agreements with PRI lending formal support. They proved effective in raising awareness about available schemes, programmes and entitlements. The service figures were encouraging, despite challenges (high PIC counsellor turn-over, limited government support- seems to slightly contradict what's above, unmet community expectations). PICs raised awareness and facilitated access to services, universal identity cards and individual bank accounts, while at the same time reducing the number of middlemen and empowering users.

SHG/CBOs/TRFs were contributing to greater social cohesion and empowerment by establishing clear communication channels for communities, through which to share concerns and address concrete problems in service delivery. They played a positive role in revitalising self-governance bodies such as the Gram Sabha and advocating for increased involvement in PRI structures through the CBOs and TRFs. These concrete achievements were key for convincing villagers of the importance of participation and the changes that their actions can bring about. TRF at all levels played an increasing role in monitoring and tracking of service delivery and government implementation. Social audits proved an effective tool for CBOs and TRFs to review facilities, advocate on any required changes, denounce corruption and ensure transparency. TRFs were working closely with government officials to share concerns quarterly and as a result of the training they had received they were able to vocally raise their concerns and demand entitlements for their communities. The contributions of CBOs to the overall results of the project were not only reflected in increased access to government schemes, but also in areas such as the improvement of school facilities and equipment (more teachers,

better school menu, toilets, etc.) witnessed in various communities. The active participation in meetings with PRI brought about increased access to services for target groups, as well as certain improvements in the quality of services.

Project Limitations and Key lessons

The TRF network with members from various CBOs empowered and brought opportunities for linkages with local governance institutions and government authorities. The TRF network offered collective strength to gain access to rights and entitlements and support implementation of government schemes at community level. However, there are key lessons and limitations that emerged from the project implementation, identifying and documenting those could assist in strengthening existing and any such future interventions. The capacity building approach needed to enhance understanding, knowledge, skills, abilities, linkages of TRF Network members and representatives at different levels about their roles, communication, participation, feedback, PRIs, and government systems. This required a range of processes including role transition, facilitation, leadership development, training, technical support, perspective building and peer learning meetings, documentation, and interface session with stakeholders. Tribal women and youth members were emerging as community leaders. Their knowledge, exposure and experience in rights-based advocacy were gradually emerging to tackle the challenges. Confidence of network members to communicate on community issues in public platforms, meetings, and public hearing events were growing. The members had also learnt to write the applications and discuss problems with service providers. Financial resources for basic requirements of TRF network like travel, stationery, record management, and documentation needed to be developed.

Identification of issues and service delivery gaps were done in CBO and PIC levels but there was no specific system like micro planning, structured review in place. The multi-level structure of the TRF network (village CBOs, district, state and inter-state TRFs) had been integral to the project's success. In cases of corruption or

mismanagement at the local level the TRF members had been able to raise and address the issue at higher levels. However, the TRF structure was more functional at the village, Gram Panchayat and block levels than the district, state and inter-state levels. District level workshops to formally introduce the TRF network to government officials would be helpful.

Communication processes and mechanisms within the TRF structure were limited to meetings only. Greater focus on providing TRF members with access to community media like newspapers, radio and other platforms would have enabled them to amplify their voices and build opinion on their issues. State and inter-state level meetings of TRF were more about their exposure and knowledge building – members were learning about government schemes as well as participation and communication skills. Public hearing events provided a platform for interface with public authorities. Post public hearing follow up mechanisms should be developed. Roles should be clear at different levels of network structure to ensure synergy. Also there is a need for clarity on levels of raising and step wise escalation of the community issues in the given government systems.

A mechanism to track progress community issues raised and resolved is important and encourages follow up actions. There was a felt need to secure sustainability of financial resources for basic requirements such as travel for participation in meetings follow up with public authorities, conducting meetings, stationery requirements, documentation, and record management etc. during and beyond the project period. Network members may be introduced into Gram Panchayat level Task Force and other government level capacity building opportunities available in government schemes. Involving local partner NGOs from the same constituencies as the beneficiaries (i.e., Adivasis-led) are extremely effective. Four out of seven of FYF's partners were from same tribal communities as participants, and this had been a very positive approach to the whole intervention involving tribal communities.

It would have been useful to support CBOs/TRFs to advocate releasing a circular to the block level officials requesting them to provide support to the PICs. The PIC Counsellors were responsible

for covering large areas - recruiting more Counsellors, mobile PICs, or separate timeslots for each scheme to enable the PIC Counsellors to help people in groups could be considered in such situations. Media advocacy can be used in cases where there are long delays or problems with several applications. It could have been useful to involve higher level officials in the functioning of the PICs by, for example, organising grievance redressal camps similar to the annual government Jan Suraj Abhiyan, in order to enhance their credibility. Setting up PIC monitoring committees can help to ensure that the PICs are meeting community needs. The PICs were intended to complement the government Common Services Centres (CSCs), but despite lobbying on this issue by the CBOs/TRFs, the CSCs have either not been established or are not functioning properly in many of the project districts, where there is limited connectivity. For this reason, there was a demand to sustain the services of the PICs beyond the life of the project. Measures taken to this end included obtaining written commitment from the Panchayats to continue providing the PIC premises, and the identification, training and mentoring of community volunteers to take over the role of the PIC Counsellors, albeit at a reduced level.

The main challenge in sustaining a PIC service was the need to raise sufficient funds to cover the PIC costs, notably a small honorarium for the volunteers, the cost of IEC materials and office maintenance. This challenge could be addressed in different ways, for example, by charging a nominal fee for services or by raising community funds through the TRFs.

Conclusion

Tribal women are increasingly playing a meaningful role in local planning and decision-making through increased participation in Gram Sabhas, PRIs and school management committees. The mid-term evaluation found that 1 in 2 women in the project villages had taken part in Gram Sabha meetings compared with 1 in 3 in non-project villages. In 2016, through the Gram Sabhas, women played an active role in the government's Intensive Participatory Planning Exercise (IPPE) undertaken in 120 of the project villages. As a result,

numerous development works were sanctioned in the project villages, such as the construction of ponds, wells, toilets and animal shelters. 9873 tribal women have accessed public services and social welfare schemes relating to healthcare, education, livelihoods, housing, employment and social security. This included schemes directly benefiting women and girls, such as the Janani Suraksha Yojana (JSY) safe motherhood scheme and the Sabla scheme for adolescent girls.

The external project mid-term evaluation found that the proportion of eligible women that had accessed the JSY scheme had increased from 59% to 86%. Many women have become 'Mates' (worksite supervisors) under the MGNREGA and were promoting greater adherence to MGNREGA provisions relevant to women, such as the provision of crèches at worksites. The project's newly created structures were already actively participating in planning and monitoring government services to improve the performance and accountability of both the PRIs and service providers. PICs were the main instrument for bridging the gap between the communities (as rights holders) and the government bodies responsible for ensuring that their rights are respected (as duty bearers). A fully-fledged network of SHG/CBO/TRF was key to raise awareness on tribal issues, access public services, and monitor PRI budget allocations. Capacity building was important for PRI and local service providers ANMs, ASHAs, ICDS/anganwadi centre workers, etc.) on their roles, existing schemes and public sector provisions. At the PRI level, the project recognised service providers' limited capacities and understanding of duties under the Panchayat Extension to Scheduled Areas Act (PESA) and works to strengthen them through training and awareness raising activities.

The government is involved but does not steer the action beyond collaboration on various project components linked to service delivery, public hearings and participation in the IPPE. Regular introduction of new, administratively complex social welfare schemes had been challenging. Media engagement had played an important role in raising awareness and galvanising public support for tribal issues, and also prompting government action on particular issues. The Right to Information Act had been an invaluable tool

for uncovering corruption or mismanagement in the delivery of public schemes (e.g. false beneficiary names, irregular payments). The collaborative approach to working with government had been a key factor in the success of the project. A reciprocal relationship had been developed, whereby government staff had provided PIC premises and support, attended awareness-raising and training events and held regular meetings with CBO/TRF members, while FYF and its partners provided training for government staff on their roles and responsibilities and supported them to reach remote tribal communities and more fully utilise their social welfare budgets. Strategies should be used to address the frequent turnover of government staff leading to partner staff having to invest significant time in building relationships with the new staff.

Case Study: Parbati Murmu

Parbati Murmu lived in Bisunpur village in Pakur district, Jharkhand. Parbati was married with two children. Before the Johar project started, Parbati was very shy. She rarely met with other women and didn't like to speak in public.

When the project started, Parbati joined the local women's self-help group and her husband, Joban, became the Secretary of the Core Committee of the local community-based organisation. Through



these groups, Parbati and Joban had received information and training on government schemes to which they are entitled, such as the employment scheme under the Mahatma Gandhi Rural National Employment Guarantee Act (MNREGA).

Post the intervention Parbati shared: “I now have the confidence to talk with my fellow group members and even meet with block level officials. Since joining the self-help group, I have obtained a ration card under the Public Distribution System, a job card under the MNREGA and when I became pregnant with my son, Radikha, I applied for the Janani Suraksha Yojana scheme in order to get maternity benefits. Now I tell others in the community about these schemes; for example, I helped my father-in-law to claim his widower’s pension. I have a lot more confidence now and I am proud that I have been able to help others. My next aim is to talk to government officials about the lack of supplements for pregnant women in the local Anganwadi centre.”

Project Fact Sheet

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| Project Implementing Agency(s) | Find Your Feet (FYF) and its seven national NGO partners |
| Survey method(s) | Primary and secondary methods |
| Stakeholder(s) | Local Authorities, communities, Tribal communities / marginalised Adivasis; Local CSOs/CBOs and SHGs |
| Site/ Field (Exact Location) | 8 backward districts of Chhattisgarh (Korba, Raigarh, Kanker and Rajnandgaon districts) and Jharkhand (Dumka, Pakur, Jamtara and Godda districts) |
| Duration | 1st January 2014 - 31st December 2018. |
| Project Partner(s) | Find Your Feet (FYF) and its seven national NGO partners |
| Contributing Donor(s) | NA |
| Thematic Area(s) | Access to government schemes, strengthening CSCs, Capacity building of SHGs |
| Organisation contact | fyfindia@gmail.com |

Project ‘Sammalit Vikas Jankari’

Improving Access by People Living With Disability to Information on Public Schemes in Backward Districts in India, Initiative by German Leprosy and TB Relief Association (GLRA) in Five Backward Districts in India



Abstract

GLRA implemented the project ‘Sammalit Vikas Jankari’ for the better access of government schemes by the persons with disabilities (PWDs) in five backward districts in four Indian states of Gujarat, Madhya Pradesh, Bihar and Odisha since January 2014. The main objective of the project was to increase access to information by persons with disabilities about Government disability services, duties to uphold rights and poverty alleviation through Disabled People’s

Organisations (DPOs). During the project period, 48 DPOs and five Disabled People's Federation were formed in five action districts and potential leaders were identified from DPOs who are now leading the activities further.

Keywords: GLRA, disability, DPO, PWDs

Introduction

The delivery of basic public services and specific services is very poor for persons with disabilities in India under the Rights of Persons with Disabilities Act, 2016 and poverty alleviation schemes. Information about these services is extremely hard to come by, both for support agencies and more particularly for the Persons with Disabilities (PWDs) themselves. This is especially so in districts where poverty levels are high. Poverty and disability are closely linked, with each being a cause and consequence of the other; where poverty is high, disability will also be high. For PWDs, the rate of poverty is 70% higher than the average, partly due to limited access to employment. The European Commission Communication recommends that the EU concentrate its development cooperation on support for (i) human rights, democracy and other key elements of good governance; and (ii) inclusive & sustainable growth for human development. In order to perform successfully in these two broad areas, EU development cooperation needs to be 'disability inclusive', that is, to promote the rights of people with disabilities and to make sure that they can contribute to and benefit from the development efforts of their countries. This is also essential to see progress towards the Millennium Development Goals [MDGs] and now towards the Sustainable Development Goals (SDGs) and beyond. This project and its approach had been, therefore, very relevant to the needs of PWD in backward districts where poverty is high to improve access to entitled services in a rights-based approach.

Principal Issues

The project aimed at bridging the information gap in access to critical public and entitlement related schemes and benefits by the PWDs. There existed numerous schemes and services meant for the

PWDs in India, but due to lack of knowledge, most of them couldn't access the benefits. Secondly, due to ignorance and illiteracy, most of the PWDs and their family members trusted on middle men to act on their behalf to get them the benefits of schemes, and thus, end up paying major share of their benefit to the middle men. Thirdly, there is no collective demand for their rights and entitlements on the part of the PWDs. They have been demanding their rights as individuals and not as a group and hence, their voices are not heard by the government authorities.

Objective

The overall objective of the project was, 'To increase access to information by persons with disabilities about Government disability services, duties to uphold rights and poverty alleviation through DPOs. The specific objectives included: (1) To increase quality of delivery of entitled public services to all PLWD according to national legislation; (2) To equip and empower civil society in the form of DPOs to increase their participation in society and promote accountability in Government of India [GOI] systems and other service providers; and (3) To increase equal opportunities, reduce poverty of PLWD, enabling better quality of life & more inclusive development.

Project Methodology

The project was based on operational research with participatory and baseline survey and progress tracking of access to information, benefits received. Interactions were held by IPs with PRI, Block and District officials and NGO SPs to ascertain level of delivery of services, difficulties and preferred communication to PWDs. Mobilisation of new DPOs and strengthening of existing groups facilitated at Block level with District level federations in mind. Trainings were conducted of DPO leaders by each IP on disability causes, prevention and intervention, gender issues relating to disability, disability and gender legislation, poverty alleviation schemes and entitlements, citizen rights inclusive development, communication and advocacy skills.

Further, advocacy by DPO leaders at Block and District for information and make applications with individual PWDs for services was carried out. There was dissemination of information by DPOs with innovative, participatory media to communicate effectively in the community. DPOs and NGOs trained local government members, Block Development and District officials on critical aspects of access and delivery of public schemes and entitlements to the PWDs. As a part of State level advocacy by NGO partners, there was relationship built with State officials and other disability players. The DPOs' were involved in the Project decision-making to the maximum with the support of IP staff.

Programme Implementation

The project titled, 'SAMMALIT VIKAS JANKARI - Improving access by people living with disability to information on public schemes in backward districts in India,' was implemented by the German Leprosy and TB Relief Association (GLRA) India in five selected backward districts in four states in India. The project was being implemented in Banaskantha district in Gujarat, Barwani district in Madhya Pradesh, Balangir district in Odisha and East Champaran and Kaimur districts in Bihar. The project was implemented through five local partner organisations present in the respective district.

The main objective of the project was to increase quality of delivery of entitled public services to all PWDs according to national legislation. The main target groups of this project were PWDs - especially girls/women with disabilities, families of PWDs, DPO leaders and members which covered a population of 1.3 million.

The project focused on increasing access to two types of public service information: firstly, details of schemes; and secondly, statistical information regarding services and the status of PWDs. Effective participatory communication and use of local media were used to promote dialogue with the audience. PWDs were part of the planning process and execution of communication. 'Push' and 'pull' information flows was used: DPOs sought the information they need, pulling it towards them, creating a demand for information. GOs ad

NGOs were assisted to push information out to the target audience of PWDs in a way that is relevant and spread widely to a mass audience. IPs and DPO Federations supported officials to push information into Blocks where there were no DPOs.

Empowering PWDs was a part of an overall CBR approach. IPs formed DPOs at Block level and District level Disabled People's Federations with the main task of communication of information. IPs wane support as the DPOs grew capable to be well-organized self-advocates. DPOs participated in project decision-making and planning, research and data recording, also in implementation of accessing information of public schemes, communicating it to other PWDs and families, and in monitoring and evaluation. Capacity Building of DPOs, GOs and NGO service providers and IPs were major part of SVJ Project methodology. Learning and sharing took place in several platforms, networks and times between all stakeholders, including other similar EU Access to Information project partners.

Improved Access of People to Government Schemes and Services

The project data highlighted the positive contribution against the problems identified at the beginning of the project. A total of 31435 PWDs were identified and profiled, facilitating the formation of 48 Disabled People's Organizations in five districts with 2196 members, including 125 female members. Formation of five Disabled People's Federations in five action districts was arranged for. As a result of DPO advocacy 4860 PWDs had received disability certificate, 2774 received disability pension and 261 PWDs received scholarship in project period. A total of 18926 women and girls with disabilities were trained on disability issues, health and hygiene and livelihood options. 12957 PRI members were sensitized on the rights and entitlements of the PWDs in five districts. This involved the publication of DPO Building Guide publication of Scheme Booklet with relevant schemes' information and guidelines of application procedure.

The project focused on creating and sustaining sustainable, active DPOs and District federations' access to disseminate information on disability services in both existing People with Disabilities Act 1995

and the new Rights of People with Disabilities Act 2016 (RPWDA). The DPOs were advocating effectively for their new RPWDA entitlements and network with other available services. Increased knowledge of and access to services by all needy PWD were focused upon to avail benefits and improve quality of life, especially that of women and children. Accountable PRI members ensured that services were delivered to PWDs, especially those that are poor. Active Block, District and State officials equally ensured inclusive development in this process.

In Barwani district of Madhya Pradesh, SVJ team supported in constructing accessible toilet for PWDs as a model with Support of Swachh Bharat Mission. The advocacy of the DPO leaders in Bihar had resulted in issuing of disability certificate from block in Kaimur and East Champaran districts. As a result of DPO advocacy at the block level, DPO members along with the SVJ team were invited to supervise the quality of the ramps in schools in Barwani district. SVJ members and DPO leaders were invited to participate in Gram Sabhas in Barwani and Balangir districts.

Project Limitations & Key Lessons

Frequent transfer of government officials at the district and block level hampered the pace of the work in the field as most of the activities are with the government authorities. At times, ignorance of disability issues among the block and district government officials had affected the implementation of the project activities. Collective demand generation was the key to success. It was realized that sensitization of the government officials and working with them yields better results in project implementation. Advocacy is the main tool for bringing changes in the system and people's mindset towards the PWDs.

Conclusion

The project ‘Sammalit Vikas Jankari’ was implemented for the better access of government schemes by the persons with disabilities (PWDs) in five backward districts. It could majorly reach its main objective to increase access to information by persons with disabilities about Government disability services, duties to uphold rights and poverty alleviation through Disabled People’s Organisations (DPOs). The efforts in creating 48 DPOs and five Disabled People’ Federation have been instrumental in ensuring sustainability of actions, collective advocacy and working for the needs of the PWDs in project locations. The PWD leaders created through the project is expected to push forward the agenda of inclusive development and entitlement inclusion in days to come.

Project Factsheet

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| Title of the action: | PROJECT SAMMALIT VIKAS JANKARI ¹ - Improving access by people living with disability to information on public schemes in backward districts in India |
| Location(s) of the action: | 5 Backward Districts in India: East Champaran & Kaimur Districts of Bihar, Balangir District of Odisha, Banaskantha District of Gujarat, and Barwani District of Madhya Pradesh. |
| Total duration: | 60 months |
| Objectives of the action | <p>Overall objective: To increase access to information about Government disability services & duties to uphold rights of people living with disability [PWD]² and poverty alleviation through Disabled People's Organisations [DPO]³.</p> <p>Specific objectives: 1. To increase quality of delivery of entitled public services to all PWD according to national legislation. 2. To equip & empower civil society in the form of DPOs to increase their participation in society & promote accountability in Government of India [GOI] systems & other service providers. 3. To increase equal opportunities, reduce poverty of PWD, enabling better quality of life & more inclusive development.</p> |
| Target group(s) | PWDs - especially disabled girls/women, families of PWDs, DPO leaders & members |
| Final beneficiaries | Village communities in 5 Districts, Govt officials & NGO partners who will experience valuable contributions to more inclusive development with more participation in society by PWD. |
| Estimated results | <ol style="list-style-type: none"> 1 Sustainable, active DPOs [at least 10 in each of 5 Districts] & District federations access & disseminate information on disability services in both existing People with Disabilities Act 1995⁴ & new Rights of People with Disabilities Bill 2012⁵ (RPWDA). 2 DPOs advocating effectively for their new RPWDA entitlements & network with other available services. 3 Increased knowledge of & access to services by all needy PLWD to avail benefits & improve quality of life, especially that of women & children. 4 Accountable PRI members ensured services are delivered to PLWD, especially those that are poor. 5 Active Block, District & State officials ensured inclusive development. |

1. "InclusiveDevelopment Information" in Hindi language.

2. People living with disabilities are children and adults with disabilities.

3. Disabled People's Organisations.

4. People with Disabilities Act 1995.

5. Rights of People with Disabilities Bill 2012.

Is the Optic of E-Governance Enough? Case Studies from e-District Implementation in Rural Jharkhand

Abstract

This paper ethnographically explores the shift in state-citizen relationships in the digital governance era using the case study of eDistrict implementation in rural areas in Jharkhand. It follows the routes followed by people, (documents as) data and processes in obtaining certificates that are essential in applying for entitlements and welfare schemes.

In Jharkhand, the mechanism for application has been digitized with access points called Common Service Centres that have been set up each village panchayat level as robust front end delivery system. The certificates are processed digitally through a portal after passing through a sequence of bureaucrats for verification and approval through a digital signature. While digitizing these erstwhile manual applications that have reduced the amount of geographical and social distances travelled by people living in places further away from bureaucratic centres, it has also made process of approaching the state opaque, vague and non-negotiable.

Through first-hand accounts of villager's experiences as well as an observation of the various offices where certificates are processed, this paper takes a grounded approach to highlight the state of the art of the project and the dire need to provide/update provisions and processes to handle digital workflows.

Keywords: E-governance, Rural Development, eDistrict, Certificates, Jharkhand, Pragya Kendra, CSC

Introduction

In the last decade, progress and aspiration of the Indian nation-state has been marked by evoking digital technologies and solutions to address socio-economic challenges. Digitization has been addressed in India as the ideal enabler for the attainment of the Eleventh (2008-2012) and Twelfth Five-Year Plan (2012-2017) and the recently formulated NITI Aayog's "Strategy for India@75 (2018)"¹ that aims for a more inclusive and faster growth². These efforts have crystallised into a variety of policies that aim at a more effective government, particularly through improved digital-technology-based service delivery to citizens; a process commonly referred to as "eGovernance"³. Another collective goal has been to obviate the digital divides, and address the challenge of digital inclusion. This conceptual move from 'divide' to 'inclusion' carries a subtle yet important perception shift. Approaching the task as inclusion implies that we move from a technologically fatalistic account of existing cleavages in terms of access and availability, while also privileging a nuanced understanding of socio-economical conditions that precede physical access to technology⁴. Inclusion prompts us to consider parameters of education, awareness and adaptability for a marginalized section of community to embrace digital technologies; although, it remains to be explored, whether mere inclusion translates to these sections actually reaping the benefits of these technologies. Can we claim digital inclusion to be complete when those typically excluded are given the means and thrust to access or does it also come with a certain consensus of how bureaucratic

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1. NITI Aayog (2018). The Strategy for New India. Accessed online 02 February 2018, http://niti.gov.in/writereaddata/files/Strategy_for_New_India.pdf
 2. Nikelani, N. & Shah, V. (2015) *Rebooting India: Realizing a billion aspirations*. Penguin Books India.
 3. Maddon, S (2009) *eGovernance for Development: a focus on Rural India*, Palgrave Macmillan; Afridi, F. (2017) *Governance and public service delivery in India*. International Growth Centre Synthesis Paper: S-35407-INC-1; Charu, M et. al (2007) *ICT for Rural Development. An Inclusive Framework for e-Governance*. Computer Society of India. Retrieved from <https://www.researchgate.net/publication/228854171>
 4. Nemer, D. (2015). From Digital Divide to Digital Inclusion and Beyond. *The Journal of Community Informatics*, 11(1). Retrieved from <http://ci-journal.net/index.php/ciej/article/view/1030>

service parameters and responsibilities have to be updated to match technological affordances? Does digitising public service delivery through new technologies streamline government processes in practice? If not, how can we attest that these programmes benefit citizens unless there is a fundamental change in the character of our bureaucratic apparatus?

According to the current vision statement of the Digital India initiative, the ultimate objective is “to make all government services accessible to the common man in his locality, and ensure efficiency, transparency, and reliability of such services at affordable costs to realise the basic needs of the common man⁵”. While a lot has been done in the last decade in terms of increasing the statistics of access through the establishment of service access points, the encouraging of local level entrepreneurs, as well as designing platforms that facilitate access to government services, there are still gaps regarding the appropriation and adoption of digital affordances and the re-designing of workflows by the government apparatus. This paper looks at the different ways in which one needs to think about the success of digitizing Government-to-Citizen (G2C) services beyond ensuring their mere physical accessibility. Through ethnographic analysis, it explores the routes travelled by the “common man” and their documents in order to benefit from these now more efficient and reliable services. It draws attention to the question of how the roles of the state and its personnel needs to be more defined and made accountable, in order to achieve a full-scale reform of public service delivery. Only then will qualities of transparency, efficiency, and accountability truly be testament to a more digitally inclusive society.

Principle Issues

Following the National e-Governance Plan (NeGP) in 2006, recent policies drive the implementation of digitally enabled G2C services, state data centres and local delivery outlets that deliver core services. In rural and typically remote locations, increased accessibility is to be enacted by setting up physical points (Common

5. Digital India's vision and vision areas <https://digitalindia.gov.in/content/vision-and-vision-areas#>

Service Centres/ CSCs) that provide basic district services, banking, digital literacy, as well as a host of B2C services. CSCs thus are a “one-stop” computerized service centre in which citizens can apply for and make use of a range of different government services. The latest manifestation of the project, the CSC 2.0⁶, aims to allocate at least one dedicated physical service centre to every Gram Panchayat in the country. For those living in remote areas, the presence of active centres translates to cutting down on time and effort required to access services. By providing a “one-stop” environment for facilities from multiple government departments, CSCs simplify access by effectively taking service delivery out of the hands of the originating department and placing it with centre operators, or Village Level Entrepreneurs (VLE)⁷. These entrepreneurs are given a unique login access to government portals where they can process transactions for citizens. At present, basic G2C services, social welfare schemes and inter-departmental transactions are completely digitized and processed (sometimes solely) through state-developed websites and portals.

This paper acknowledges that new access points disrupt the established channels and routes for citizens seeking essential state services. The implementation of CSCs and the recruitment of a vast network of Village Level Entrepreneurs has ensured a robust front end delivery system that has reduced the amount of geographical and social distances travelled by people living in places further away from bureaucratic centres. For example, a few years earlier in Jharkhand, a young villager who wanted to get a Caste Certificate for the sake of applying for a certain scholarship had to travel to the nearest Block officer to get the relevant form. This process often entailed multiple trips to the offices and the need to financially incentivize the relevant officers – and in some cases middlemen – in order to process the certificate. After the roll out of the CSC projects, as well as e-District/e-Nagrik services in the state, the process of applying

6. MeitY (2015). Implementation Guideline for the Project “CSC 2.0: A Way Forward” http://meity.gov.in/DeitY_e-book/csc/index.html

7. Bussell, Jennifer (2010): “Why Get Technical? Corruption and the Politics of Public Service Reform in the Indian States”, *Comparative Political Studies*, 43: 1230-57;

has been digitized. The villager now only has to travel to the nearest centre and submit the documents to the entrepreneur, who scans and uploads them through a service portal. Although at the surface, the process seems to be dramatically simplified, citizen accounts show, how online applications are often stuck at different stages of approval and verification from various officers. This only situates digitization as a paradox case – that while the implementation has certainly increased the statistics of access for those living in rural areas, it has also made processes opaque, vague and non-negotiable.

What follows are detailed accounts from citizens accessing services (e.g. applying for certificates and welfare schemes) and their experiences of whether taking the system online has made the process easier, faster and more transparent for the ‘common man’. It demonstrates how in many cases, piles of documents lying on the bureaucrats’ desks have only transformed to into unopened files on their desktop computers. For an average villager with limited knowledge of computers and internet, digitizing essential state-citizen relationships has far-ranging consequences, particularly because they lack the means to decode or influence these online processes. The key concern is that the layering of existing governance processes with digital workflows has not (yet) resulted in a radical mutation of typical bureaucratic imaginations, but merely rearranged its resilient forms and hierarchies. Ultimately, it is these piles on the desk(top) that need to be tackled, and the tenacity of typical bureaucratic behaviours that needs to be contested, in order to make sure that India’s eGovernance is also citizen-centric.

Research Methodology

Through ethnographic analyses, this paper explores the question of implementation of the e-district services in Jharkhand. The aspirational districts of Palamu and Latehar were chosen because of the population dynamics (large rural areas, tribal populations, low literacy and economic diversification), as well as an active civil society network that was the first point of contact with the fieldsite. While Jharkhand was the main state where research was conducted, the example of Kerala is used to briefly highlight the differences in the

nature of workflows and processes in both states. Primary data comes from interviews and with government officials implementing the project as well as village level entrepreneurs that are operationalizing access via CSCs. Case studies are further discussed through conversations with villagers who are the end users that benefit from such efforts. Additional data comes from the observation of digital workflows in several block offices (Jharkhand) and village offices (Kerala) where documents are verified and approved by the relevant officers. Secondary research and statistics are pulled together from various online resources (Government of Jharkhand, Digital India, JharSewa, ServicePlus, CSC Project) to gather roll out statuses and statistical data.

Ethnographic Accounts from Jharkhand

1. Updated Application Routes, not Processes:

Most of the villagers interviewed to during the course of the fieldwork explained a similar sentiment. A majority of the applications for welfare schemes, social security pensions⁸ and scholarships require them to submit certificates (like income, caste, residence, birth/death) which have now transitioned from an offline to an online mode of submission. While applying for these forms online has alleviated the burden of travelling to various offices and speaking to various officials, they often expressed that the process had in fact become much more obscure and vague to them since it has been digitized.

Before the routes were digitized, an applicant had to travel to the block office to gather the forms required for the certificate. They then had to get the signatures from all the officials on the form by directly approaching them. Depending on the kind of certificate needed, a request form had to be signed by the Panchayat Sevak or the Revenue Clerk. After this, the form, along with supplementary documents, had to be manually taken to the Circle Office or the Block Office for signature by other officers and later to the District Office or the SDO for further approval, if needed. The long sequence of meetings and

8. A comprehensive list of current schemes accessible to Jharkhand residents is accessible here <https://sarkariyojana.com/jharkhand/>

signatures often meant that for one certificate, it took a few or as much as 15 days of continuously visiting different offices. Although the application was free of charge, an applicant often ended up spending a lot of time and money on travel. Urgent cases were dealt with by getting the help of a middleman (dalal) who had (personal) connections to the offices or by offering to pay the officers a bribe to get the requests approved immediately.

Since the roll-out of e-District services in the state⁹, the application is routed through a web enabled service portal called Jharsewa. This portal acts as an electronic gateway into the Government's portfolio of services. A user can register directly for online services, or submit applications through the state appointed CSCs, also known as Pragya Kendra. Each CSC is directly linked to the state's e-Nagarik and e-District services enabling citizens to request for online delivery of service (fig1). Depending on the kind of certificates or schemes applied for, an applicant brings the required documents to the centre. The entrepreneur fills out the details online, scans and uploads the application along with the supporting documents into the portal. The customer is then given a receipt along with a reference number that can be used to track the status of the application as it travels along the necessary officials for verification and approval through a digital signature. Once cleared through the final stage, the certificate can be downloaded and printed at the same Pragya Kendra the application was made in.

The scope of digitizing this system is immense. As one of the District Managers of the e-governance Society explained in an interview: "Now everything is through digital signature and has become channel-like. As much as the earlier system was registrative in this transparency has come [sic!]. Hierarchy is gone. Certificate from wherever is processed in a serial system. In this however big person you may be, if mine is at number 1 and I am very poor and if I don't have any communication with any kind of senior officer, until my certificate doesn't come, your certificate will not come[sic].".

9. The period of transition was 2013-2015. The sanction for the e-district services is found in the Government of Jharkhand's website: <http://www.jharkhand.gov.in/documents/10179/1d7af381-3211-4486-a0d9-59430a36c066>

Figure 1*JharSewa Manual for Application**Channels through which a Citizen can apply for Certificate Services:*

| | <i>CSC (Pragya Kendra)</i> | <i>Jan Suvidha Kendra</i> | <i>Self registered citizen</i> | <i>Tatkal Sewa</i> |
|----------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|--------------------------------|--------------------|
| Certificates | | | | |
| Caste (ST/SC/BC-I/BC-II/OBC) | Yes | Yes | Yes | Yes |
| Income | Yes | Yes | Yes | Yes |
| Local Resident | Yes | Yes | Yes | Yes |
| Birth | Yes | Yes | No | No |
| Death | Yes | Yes | No | No |
| Social Security Pension (Old Age/Widow/Disability) | Yes | Yes | Yes | No |
| Fee | INR 10/- for Caste /Income/Local Resident certificate services and INR 30/- for Death & Birth Services with INR 1/- extra fine in case of delay | Nil | Nil | |

It would only be reasonable to expect that the online processes have streamlined the application, ridding the applicant of long waiting times and multiple trips to check the status of the application typical to the paper era. This, after all, seems to be the precept of effectively and efficiently delivering services that the State is purportedly committed to: “Simple, Moral, Accountable, Responsive and Transparent (SMART) governance to its citizens¹⁰”. Nevertheless, the process of the application travelling through the portals following the submission is far from seamless. Once uploaded, it takes the same route as the predecessor paper document did, passing upwards from one level of verification to another. Depending on the kind of certificate requested, the digital application goes through a minimum of three different logins corresponding to different levels (RK- Revenue Clerk, CO – Circle officer, CI – Circle Inspector and the SDO – Sub-divisional Officer for special cases). And in each of these

10. <http://www.jharkhand.gov.in/it-dept>

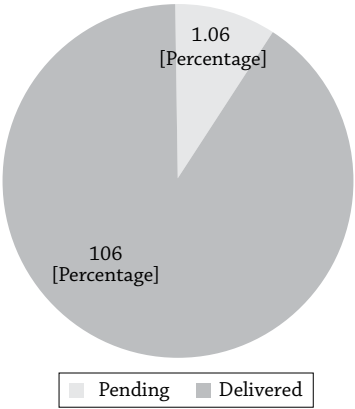
logins, it is not uncommon for an application to remain “stuck” to await clearance for long periods of time. The service level agreement stipulates that certificates take no longer than 30 days to be issued¹¹, but in reality, delays and pendencies are very common (fig. 2 & fig. 3).

Figure 2
Jharkhand State Pendency Report for Services¹²

| Applications Delivered | | | | | | | |
|------------------------|-----------|----------------|-----------|----------------------|-----------|---------------------------|-----------|
| Within SLA | | (SLA + 7 days) | | SLA + (8 to 15 days) | | SLA + (more than 15 days) | |
| Under Process | Delivered | Pending | Delivered | Pending | Delivered | Pending | Delivered |
| 307383 | 8260969 | 2751 | 584230 | 19667 | 484085 | 1040121 | 1291572 |

- Note:
- 1. SLA stands for Service Level Agreement (calculated in working days).
 - 2. In Jharkhand, the SLA is 30 days for most services
 - 3. The delivered columns display the count of all delivered applications, including both delivered and rejected statuses.

Figure 3
Status of Applications (in million)



11. Tatkal is a recent offering from the State Department for a guaranteed delivery of service for urgent cases. The applicant has to get a signature on a paper form from the CI and the CO approving the request, only for this later to be uploaded through a Pragma Kendra and follow the same process of digital verification (RK-CI-CO). In the case of Tatkal, the SLA is 15 Days.

12. These reports are generated from data available on ServicePlus. Last accessed: <https://serviceonline.gov.in/> on Feb 2, 2019.

Figure 4
eService Delivery Framework by type of service

| <i>State Department</i> | <i>Service</i> | <i>Average Score (%)</i> |
|-----------------------------------|-----------------------------------------|--------------------------|
| Department of Labour & Employment | Jharkhand Social Security Pensions | 61.5 |
| Department of Revenue | Issue of Birth Certificates | 54 |
| Department of Revenue | Issue of Caste Certificates | 55 |
| Department of Revenue | Issue of Death Certificates | 55 |
| Department of Revenue | Issue of Income Certificates | 59 |
| Department of Revenue | Issue of Local Residence Certificates | 53 |
| Department of Revenue | Registration of Panchayat Swayam Sewaks | 62.5 |

Note: Service performance analysis is computed based on Key performance indicators (KPI) like:

% of applications with no action taken (not processed), % of applications delivered before/ beyond SLA, Average number of times where supplementary documents are required, and so on.

2. Stuck in a Portal: Piles to Pending Tasks

A closer look at what happens to an application, once it is uploaded into the system, gives a clear indication of how bureaucratic processes and accountabilities are far from updated to match the seamless, transparent and efficient delivery of services conferred by digital processing. The reasons for pendency become clear when observing the routes, places and people the application actually travels to, after entering the eDistrict portal following the submission at the Pragya Kendra. Depending on the kind of certificate, the application either goes to the Panchayat Sevak, or the Revenue Clerk's login for verification. The concerned officer verifies the details of the application along with the supporting documents and forwards it to the next officer for further verification, if the application is satisfactory. Often already at this first stage, the processing time is under the whim of the officer and in some extreme cases, applications were stuck for 30 days and still processing. Once the application is verified and forwarded through all the necessary logins, the last officer digitally signs the form using a Digital Signature Certificate (DSC). Although the Jharkhand State Guarantee of Services Act (RTGS) states that the certificates would be delivered

within 30 days upon direct receipt, several CSC owners reported that it took a minimum of one month for the certificates to be cleared. The following is a first hand account from a villager who lives in MorwaiKalan, one of the panchayats in the Barwadih Block in the west Jharkhand who, at the time of the interview, had been waiting for a death certificate for over a month:

Puniya Devi was a recently turned widow, whose husband, Sagun Ram, had died in his sleep in the beginning of November in 2018. At the time of death, Puniya was not around. She had gone to collect wood for the night, but her son and daughter-in-law were there, along with several other small children from the neighbourhood when they noticed that Sagun had stopped breathing. The husband was declared dead at home due to natural causes. Puniya had to apply for a death certificate in order to claim any benefits that would come, including her own widow pension, as well as the NREGA Compensation of Rs. 35000 offered to anyone who worked for the program for a few years and had died of natural causes. Some days after the death, Puniya had the Proof of Death document signed by the Mukhiya (Village Chief) and the Ward. She could not get the certificate made manually, as in their panchayat, the process for getting it had now been migrated to online, just a few days ago. Puniya had to go to Barwadih, about 7 kilometres away to the only Pragya Kendra centre closest to her village. The request was submitted online on the 9th of November (Photo 1). At the time of the interview (Mid December) there was still no sign of the approval. She expressed her problem this way: “Earlier it used to be possible to get it just in one day, but now because they said it can only be done online I have to wait for it to come. I have been down to check 3-4 times. When we ask him (owner of the Pragya Kendra), he always says that there is a technical problem, and that it is stuck in the system. What do we know?” Just resembling a pile of documents on a bureaucrat’s desk, the certificate was also “stuck” (phas jaana), and “on hold” (latak gaya) at some level of the process with no indication of where or whom to reach out to.

A similar case is that of the elderly villager Devraj Ram, who had applied for the old age pension scheme through a Pragya Kendra in June 2018. In August, he received an acknowledgement form

digitally verified and signed by an officer at the Sub-Divisional Office, which stated that his monthly pension would be disbursed from September 2018 (Photo 2). Since then, Devraj had not received any payments in his bank account. He had come to check the status of the application at the Block office repeatedly, but here, he was asked to submit a written approval form (a Sahmati) and go back to the Pragya Kendra and check in a few months. With no clear indication of where the process was stuck, he was travelling between the two places with the printout of this verification, only to be told at each to go to the other for more information. Finally, a computer operator at the block office checked and found out that his name was not on the list of active pensioners. He could not say why this was the case, or where the process had gone awry, despite the online acknowledgement that the pension was sanctioned. The only resort for Devraj was to submit a new application at the Pragya Kendra and to hope that this time a sanction actually translated to the monthly payments that he needed.

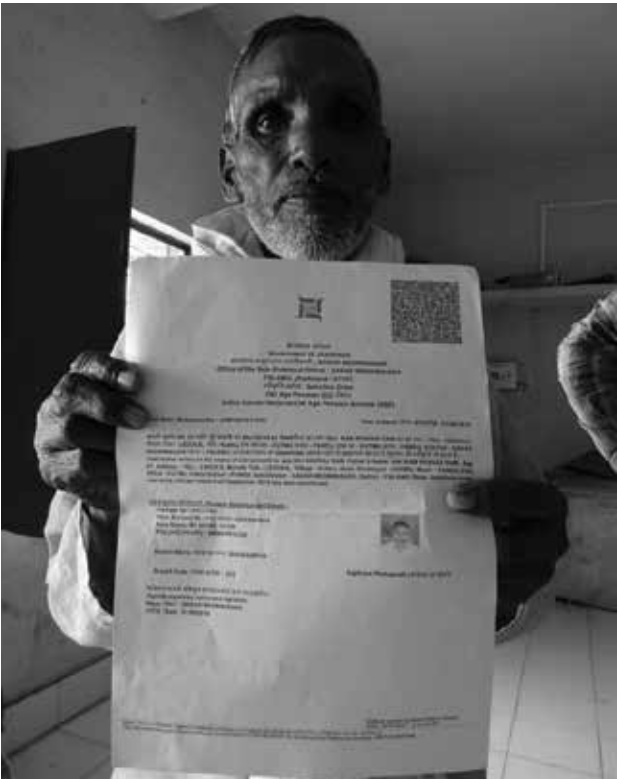
Photo 1

(up) Copy of Receipt Generated at the Pragya Kendra at the Time of Submission

| Government of Madhya Pradesh Acknowledgement Slip (Sahmati) | |
|----------------------------------------------------------------|----------------------------------|
| | |
| Applicant's Name | Pension Type |
| Applicant's Address | Monthly Pension |
| Applicant's Age | Applicant's Date of Birth |
| Applicant's Sex | Applicant's Date of Death |
| Applicant's Religion | Applicant's Date of Marriage |
| Applicant's Caste | Applicant's Date of Application |
| Applicant's Education | Applicant's Date of Sanction |
| Applicant's Bank Account No. | Applicant's Date of Disbursement |
| Applicant's Bank Branch | Applicant's Date of Receipt |
| Applicant's Bank City | Applicant's Date of Submission |
| Applicant's Bank State | Applicant's Date of Verification |
| Applicant's Bank Country | Applicant's Date of Approval |
| Applicant's Bank Pin Code | Applicant's Date of Disbursement |
| Applicant's Bank Account No. | Applicant's Date of Receipt |
| Applicant's Bank Branch | Applicant's Date of Submission |
| Applicant's Bank City | Applicant's Date of Verification |
| Applicant's Bank State | Applicant's Date of Approval |
| Applicant's Bank Country | Applicant's Date of Disbursement |
| Applicant's Bank Pin Code | Applicant's Date of Receipt |

Photo 2

Devraj at the Block Office with his Acknowledgment Slip



For those like Puniya and Devraj, digital processes are opaque and non-negotiable – unlike face-to-face interactions with bureaucrats, where there is still scope for appeasement. Being persistent with a person is something they are used to, but being persistent against a digital process only increased their frustration and helplessness. With only a system generated confirmation at hand, both of them had no indication of how long the certificate should take to arrive and made repeated trips to check on the approval status – each trip costing money and time. The Pragya Kendra entrepreneurs on their part, also complained about not really having any control over the process beyond submitting the documents. Being the only visible human component in the digitized process, they often times have to

deal with disgruntled customers to whom they have nothing more to say than what is revealed in the portal as an approval 'under process' or 'on hold'. Interestingly, some entrepreneurs also explained that they could not put any pressure on the officers and the computer operators, who worked on their own terms. The risk of rejection was also high. One of them noted: "If we create a problem, the operator will reject the form giving any reason they wish. They just give you the assurance that the work is in process. Beyond that, there is no control (Interview PK Jhabhar)" For entrepreneurs as well as users, the processing of online services is opaque, erratic, and often incontestable.

3. New Technologies in Old Places?

The state of affairs in a computer department of the block office is an indication for why delays are to be expected. In most of the blocks observed during the fieldwork, computer rooms are dilapidated, neglected, and under-resourced with one or two operators handling all online and computer related activities for the entire block. There is no broadband connection despite the Bharat Broadband Network's (BBNL) BharatNet device being installed. Operators go online by using their personal mobile phones to create a hotspot. Two of them revealed that they were not compensated for this, but despite that, using their own Jio connection was far better than the broadband connection (Jharnet) they used to have, which was slower than a 2G connection. In one of the block offices that was still using the slower broadband connection, the ServicePlus website took extremely long to load and most of the time was spent staring at the buffering circle on the screen. At another larger block office, the digital signatures at the CO level could not be processed for an entire week owing to a software update from the central servers (National Informatics Centre). This caused a massive backlog and panic, especially as in that particular month certificates were in high demand for time-critical job applications.

Operators are hired on an ad-hoc basis and employed as daily wage workers with no job guarantee. In many cases, they have very little formal qualification with computers and most of their training

happens on the job. Frequent job transfers to other blocks are quite common among the staff in which case adjustments were made in order to re-distribute the workload among remaining operators. In addition to taking care of the verification of certificates on behalf of various block officials (corresponding to different levels), they are also responsible for all kinds of on-demand data entry, photocopying and printing services for the block employees. Designated with all kinds of data input, they also deal with a multitude of grievances from those living in the block who demand to fix the status of their unrequited certificates and entitlements. Operators were frequently intercepted by customers who came to check the status of their application, why it was stuck, and if there was any way they could be convinced to release the forms onto the next stage of verification. In addition to computer rooms being unofficial customer redressal centres, ironically, they also become repositories of documents – consent letters, photocopies of Aadhaar and bank passbooks accreting on desks (Photos 3 /4).

Usually, the operators handle the clearances for the second and third level of the process (Circle Inspector and the Circle Officer) and there is often no designated operator who handles the clearances of the Revenue Clerk. In cases where the clerk does not have the time, knowledge or the motivation to clear the verification online, this results in delays at the first stage of the approval. In Barwadiah, one of the block offices where observation was done, documents were stuck for longer than 30 days at the first stage, owing to an indefinite strike that the officers had been on. In this case, customers had a delay of more than 45 days for getting their certificates done, owing to the lag at this stage. In instances where clerks were uninterested in doing the computer work, they had outsourced the verifications by privately hiring an operator (not the ones sitting in the block) to handle the portal. With the clerk's login details, this operator would then release the application to the next level. Figure 5 compares the data from three different blocks where fieldwork was conducted and the timeline taken for clearances at this first level.

Photo 3

*Inside the computer room of a block office in Laterhar district.
There is only one computer operator.*



Photo 4

A computer room in a remote district of Palamu



Figure 5*Time taken for clearance at the Revenue Clerk's login at three observed Blocks*

| Office of Revenue Clerk | Applica- tions Received | Action Taken | | | | | |
|---------------------------------------|-------------------------------|------------------|--------------|---------------|--------------------------|-------------------------------------------|---------------------------|
| | | Within 7 Days | 8-15 Days | 16-30 Days | Later Than 30 days | Average Pro- cessing Time (in days) | Still Under Process |
| Caste Certificate | | | | | | | |
| Panki Block (Palamu District) | 28068 | 17439 | 5949 | 2956 | 1507 | 14 | 127 |
| Chattarpur Block (Palamu District) | 25839 | 15383 | 5540 | 2665 | 1803 | 14,3 | 726 |
| Barwadih Block (Latehar District) | 20548 | 11079 | 4797 | 3137 | 1242 | 13 | 293 |
| Income Certificate | | | | | | | |
| Panki Block | 17202 | 11132 | 3240 | 1883 | 797 | 11 | 150 |
| Chattarpur Block | 7271 | 4568 | 1381 | 699 | 512 | 14 | 111 |
| Barwadih Block | 9497 | 5615 | 2015 | 1082 | 711 | 13.33 | 74 |
| Local Residency Certificate | | | | | | | |
| Panki Block | 22042 | 11025 | 5053 | 3075 | 2366 | 17 | 523 |
| Chattarpur Block | 20431 | 10722 | 4566 | 3250 | 1167 | 12,33 | 726 |
| Barwadih Block | 16149 | 6174 | 4061 | 3372 | 2049 | 17,3 | 493 |

Note: Data collected for all ServicePlus submissions per block until 06 February 2019.

As can be seen in the table, clearances at this level already average at minimum 11 days with a significant amount of the applications only processed one week after it has been received. The data can be interpreted in various ways. The most obvious is the justification of the delays as a direct outcome of an increased workload on the clerks. But given that the verification of certificates was always under their purview, it could well be interpreted that their inconspicuousness as non-tangible and non-material digital objects, following the shift from piles to processes, has only led to a tendency of accumulation rather than it being a problem of numbers per se. This links well with the second reason – bureaucratic attitude. Robinson¹³ notes in his study of the impact of the Right to Public Service Act on governance

13. Robinson, N: (2012). Right to Public Service Acts in India: The Experience from Bihar and Madhya Pradesh. AI Policy Briefs

processes in Madhya Pradesh and Bihar that – even if services were more reliable – they now could take longer to be delivered, as officials often waited until the end of the maximum allotted time period to complete a process. He hypothesizes different reasons for this: officials creating new opportunities for bribes, especially in time-sensitive cases (e.g. certificates required for a job or university application), as well as the extended timeline given under the act that makes officials feel validated if they take more time to deliver the service. Interviewed officials in this case study did not palpably reveal these reasons, but instead demonstrated a lack of urgency and commitment to allotted time frames. Although one might look at the table and argue that, in most cases, some kind of action was taken within the stipulated time as per the SLA, should there still not be a consensus that digitizing the process ought to make it faster than it used to be when conducted manually? As one villager succinctly noted: what is the point of going digital if it still takes 30 days for certificates to be cleared through? The compounding effects of bureaucratic indifference and infrastructural challenges come together at the office of the Sub-Divisional Magistrate, the verification terminus for many of the certificates. Here it is, where the chain of forwarding from those at the block level ends, following a digital signature on the approved certificates. At the time of the last field visit (February 2019), the office was severely understaffed with most of the computer operators being sourced on deputation from other block offices to help clear the pendencies. Each of these operators had to process approximately 250 certificates each day on an extremely slow internet connection in addition to dealing with several walk-ins who urgently wanted to sort out their pending applications to whom they had to argue with (Photo5). Operators told me that they often had to check the supporting documents all over again because the officers at the block level often forwarded the applications without a proper verification. This drastically increased the processing time at their end with a pending status of over a 3000 certificates till date (Photo 6).

Key Lessons Learnt

The case studies highlighted here are just a snippet of the many different stories collected over the course of the fieldwork. If anything, they highlight the paradoxical nature of the eGovernance implementation qua E-District services in rural areas, where deeply entrenched bureaucratic values and precarious infrastructures (both human and technological) work together, only to make digital processes counterproductive in achieving transparency, accountability and efficiency. All stories echoed the fact that the process used to be simpler and more straightforward when it was carried out on paper. Despite the fact that they had to run around a few different offices, at least they knew whom to approach and put pressure on (*dabaav dena*) in order to get their work done. Villagers often cannot comprehend system generated actions like “on hold”, “under process” and “forwarded” as they gave no indication of processing times or any sense of human agency. For those without a knowledge of the human tardiness of digital processes and their own prerogatives vis-à-vis service delivery, their applications, now moving from paper documents to digital might have made the stages of the process visible to the eye, but also invisible to human efforts.

As more and more entitlements and welfare schemes designed for the country’s most marginalized communities require digitally processed certificates as a part of the application, building a bureaucratic system that is capable of addressing this shift should be bare minimum requirement. All block and district offices should be equipped with functional internet connectivity and a minimum number of computer operators adequate to handle the workload of digital applications and hired on a (reasonable) work contract. Most importantly, there needs to be a reform of the system from within – a system that is still entrenched with a work ethic of pendencies and delays that we well know is endemic to the era of paper based governance.

In Kerala, a state which is often considered as the forerunner of ICT adoption and eGovernance in the country, we see not only a sharp contrast in terms of infrastructural investment and capacity

building, but also the successful decentralization of bureaucratic workflows. In line with the local self governance model typical to the state, digital applications are processed at only one level, the village office, rather than being subject to a scalar movement upwards across various officials for approval. This one-step-verification ensures a moderate number of applications for one single office (e. g. the members of the village corresponding to that village office/r) that it could adequately handle. In many of the observed locations, village officers verify and sign the applications themselves without outsourcing. Processing time is set at a maximum of one week with penalties in place for those that do not take action within that time frame. Besides, the village officers and the CSC owners (in Kerala the Akshaya center entrepreneurs) are also in a good relationship with one another which also ensures that local checks-and-balances are in place. A lot of these outcomes are related to the high level of literacy and a general awareness of rights within the state, but there is also a fundamental difference in attitude towards provision of state services and how these can be enhanced through digital delivery channels. All local government officials (including the Panchayat level) are also given training on basic computer skills, eGovernance best practices, social accountability and citizens Governance through the KILA¹⁴ (Kerala Institute of Local Administration). A joint effort by all levels of state actors over the last decade has ensured that citizens actually reap the fruits of the governments' investments in digitizing access to the provision of public services.

Conclusion

This case study of Jharkhand traces the movements of people, (documents as) data and processes in obtaining certificates that are essential in applying for entitlements. Several vital questions need to be raised as the state has now subscribed a solely digital means of obtaining certificates, and its consequence on state-citizen interactions in rural and remote locations, where provisions and processes have not yet been fully provided for (yet alone updated) to

14. <http://www.kila.ac.in/trainings/>

handle digital workflows. Only when they are, can digital, quoting a high ranking official at the Kerala IT Mission, take us from an era of Red Tape to Red Carpet.

Transcending Digital Exclusion

An Evaluation of Institutional Deliverance through the Study of Rajasthan Sampark Online Grievance Redress Mechanism in Rajasthan

Abstract

Worldwide, the online grievance Redressal mechanisms envisaged as feedback mechanisms aim to foster accountability. These mechanisms have been worded as channels of citizen-state interaction, pertinently by making effective use of the wave of e-governance. However, within the dream of a networked governance paradigm, the contemplation of a technologically enabled citizenry remains delusional. The case study discusses an attempt made by Digital Empowerment Foundation (DEF) with partners who examine the status of digitally excluded citizens in the information dark areas through the case of Rajasthan Sampark portal, an online grievance system which acts as a single-window to register grievances for various departments. Convolved as a result of the technological divide and discontent emerging out of opaque grievance redressal among the marginalised section, citizens marched on the roads in a movement agitating for effective redressal to their grievances. Members of the 'Paardasita Javaabdehi Yatra' investigated the circuit of intermediaries and nodal points within the government network, to understand the failure of existing mechanisms of E-Mitras Kiosks and Information Management System. DEF's role in the yatra remained crucial in providing technical assistance to the citizens through setting up Soochna Seva Kendras. These centres equipped with ICT enabled services also coupled with different surveying institutions such as Primary and Community Health Centres. Atal Seva Kendras and Anganwadi Centres found to be marginally utilised and disorganized. Lack of curative facilities, infrastructure deficits were gathered by

team members during the yatra. DEF continued the movement after the gathered feedback and is currently operating the Information and Service Centre in Barmer. The intervention realised the need for bridging the gap of not only information dissemination but also empowering the citizens by enabling them to raise their voices.

Keywords: Online grievance redressal mechanism, Rajasthan Sampark Portal, Accountability, digital inclusivity, fair access, effective deliverance of benefits and entitlements.

Introduction

In the pre-liberalization phase, 'social programs were seen to be a matter of charity' and shifted to be idealised in a fuller realisation of 'welfare as a right'¹. The change in this fulcrum of understanding led to a set of programs and policies such as, extending Public Distribution systems to below poverty line, providing Pension benefits to the elderly, initiating guaranteed employment-related schemes to the rural households (MGNREGS), providing flagship educational programs to the poor children (Sarva Shiksha Abhiyan), sanctioning aid for persons with disabilities, or even by endorsing 33 per cent reservation for women in local self-governing bodies. These welfare provisions are characterised with a parallel dynamicity in institutional change and personnel. At the local level, this is popularised as ushering in 'democratic decentralization', which was a successful experiment of power and role distribution in fiscal, administrative, and political roles, from Centre to the local levels. The idea was to deepen the democratic and meaningful participation of people in the developmental process. Expanding governance processes to ensure delivery of services and access to entitlements at the district, block and Panchayat levels have not only aimed at percolating benefits but has also deepened democracy. The present case study entails the initiative of a frontline agency Digital Empowerment Foundation (hereafter, DEF) and its account of joining the Paardasita Jawabdehi Yatra, initiated by the Soochna Evam

1. Jayal, Niraja Gopal. 1994. "The Gentle Leviathan: Welfare and The Indian State". *Social Scientist* 22 (9/12): 18. accessed 11 January, 2019, doi:10.2307/3517911.

Rozgaar Adhikar (SR Abhiyan).² The aim of the Yatra is not restricted to just creating awareness amongst people regarding their rights and entitlement but also enhances their 'capability' by empowering them with digital tools in the era of e-governance.

The initiative proceeded with evaluating the transparency in the government functioning through assessing the role of an Online Grievance Redressal System, Rajasthan Sampark Portal. The strategy of the project is to establish a government- citizens' interface, where a consistent dialogue between stakeholders enforces an understanding of ground local realities. DEF's aim to empower people compounds into this assertion of visible percolation of technology. Moreover, the objective was to assimilate voices coming from information dark areas into the national policy expression.

Background and Description

We have stepped in a watershed era of e-governance marking an attempt to mitigate the challenge of the vastness of population, delays in entitlement benefits and opacity in delivery mechanisms. The paradigmatic shift interacting with e-government entails a changed conception of citizens now partaking in changing the system than just acting as mere consumers. Within the model of e-governance, a key development is to address public grievances seamlessly. Therefore, Online Public Grievances Redressal mechanism was established at the Central level³ and the State level so that the citizens-government dialogue improves without the tardy route of approaching multiple ministries to register grievances.

Demographically, Rajasthan, a state with a population of 68,548,437⁴ includes 13 districts in the list of Backward Regions

2. SR Abhiyan is a collaboration of over a hundred citizens groups and civil society organizations who work together on concerns related with employment, information access and social sector.

3. Centralized Public Grievance Redress and Monitoring System (CPGRAMS). Accessed January 11, 2019. <https://pgportal.gov.in>.

4. Census of India, 2011.

Grants Fund (BRGF)⁵. A total of 13 districts identified from the 33 districts of Rajasthan, was categorised on the need for abridging developmental gaps by channeling assistance for institutional capacity building. As per the census, Rajasthan has one of the lowest literacy rates with 67.06 per cent, and further has a detectable differential gap between the male and the female literacy ratio. Despite, the decadal difference of merely 6.65 improvement in the literacy rate⁶, Rajasthan has had many policy interventions to ease access to guaranteed rights and entitlements to the backward and improve last mile delivery. Concomitantly, the digital shift in e-governance has also demanded a “Statum of Digital Rajasthan”⁷ as an IT mandate to harness automation of all government offices at the vertical level of the State, district, block, Zilla parishad, and panchayats. In 2014, the online state redressal grievance mechanism of Rajasthan, known as the Rajasthan Sampark Portal was instated, which acts as the ‘electronic face of the government’⁸ with a single window interface for all kinds of transactional and informational purposes.

The initiative discussed in the study aims to address the gap in the envisioned IT mandate for effective delivery of social welfare schemes and the corresponding setbacks in Rajasthan Sampark grievance portal. Sampark portal offers opportunities for citizens to participate in the decision making by monitoring directly and tracking their complaints without being at the mercy of middlemen for voluminous paperwork, or a government babu to manoeuvre the information and cheat poverty-stricken people. However, the failure of accountable dispersal of welfare benefits, as well as transparent dissemination of de facto status of grievances, seems to impede

5 The Backward Regions Grants Fund List was initiated in 2007 with an aim to uplift the targeted backward districts in India. The list was updated by incorporating 22 new districts, making a total of 272 districts in 2014-2015. Pratapgarh, in Rajasthan was one of the new added districts to the BRGF List.

6. Census of India, 2011.

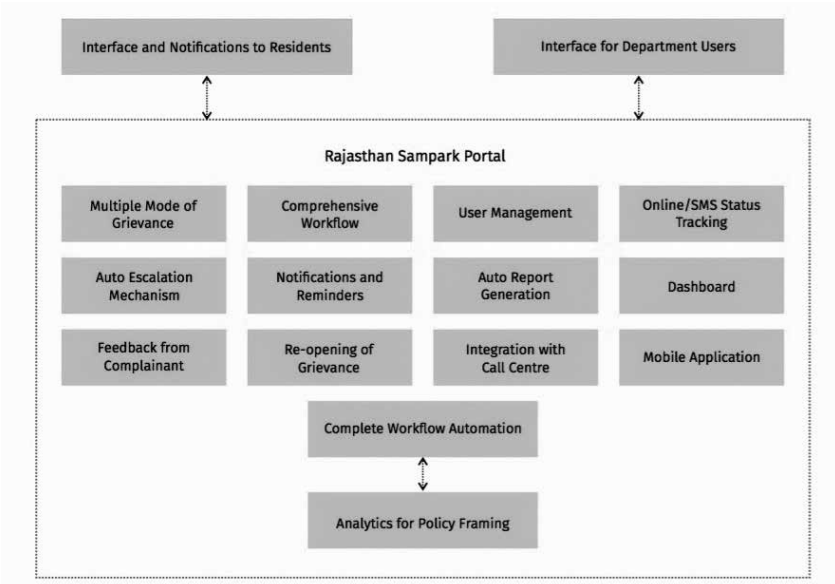
7. Rajasthan E-governance IT and ITES Policy, 2015. Accessed 20 January, 2019. <http://rajasthan.gov.in/wp-content/uploads/2018/08/IT-Policy-2015.pdf>

8. Rajasthan Sampark. Accessed December 30, 2018. <http://sampark.rajasthan.gov.in/SiteGallery.aspx>.

the development of the citizenry. It is vital to acknowledge that the existence of a digital interface in Rajasthan does not promise a digitally empowered citizenry. Instead, it pushes for a commitment to spread digital literacy amongst people towards building an inclusive and participative democracy.

Figure 1

Rajasthan Sampark Brochure, Department of Information Technology and Communication, Government of Rajasthan.



Principal issues

Ensuring effective grievance redressal mechanism hinges on ‘inclusive participation’ at two levels, first, at the legislative stage, availability of an ‘inclusive’ policy framework is crucial for an indiscriminate approach towards the marginalised and secondly, at the implementation stage, here a robust citizen feedback mechanism is also essential in making the process of redressal more inclusive. The efficacy of the traditional model of grievance redressal was time and again rebuked by the citizens on the questions of ‘inclusivity’. The challenge was to tackle the transaction cost of the grievance

redressal system by confronting its 'distant' and non-soliciting redressal mechanism for the people. The initiative was to map the changes as well as appraise if the functioning of the online grievance portal resounds its mandate of being a 'People's Digital platform'.

The impulse behind tracking the effectiveness and efficiency of the online grievance portal in Rajasthan triggered from issues such as the failure of E-mitras portals. These connected the citizen to the service provider which could be the government at the Centre, state, and the local level, as well as financing institutions such as banks. Despite the presence of the E-Mitra kiosks, it was grasped that corruption was reinstated with a shift from offline to the online mode. E-mitras were identified as 'money making companies', and the ideality of effective service delivery remained dismal. Similarly, apart from this depravity, the second major problem identified was the lack of digital literacy and technical support for people. It was observed that the digitization of various services, was a goal half achieved as the aptitude of using digital tools still required people to access middlemen. Such practices also led to an inadequacy in being unable to track the status of the complaint, thus compromising on accountability checks. Thirdly, there was an infrastructure deficit, for basic purposes such as scanning, uploading, Xerox services of documents, among others which led to costly registration of complaints. Additionally, the redressal mechanism demands credentials to submit a complaint and obscurity further convoluted with many beneficiaries being unaware of the entitled social welfare schemes or misinformed regarding the benefits. The Rajasthan Sampark portal is accessed to register grievances, however, vaguely explained delays in NREGA payments and Security Pensions; delay in receiving benefits from Palanhar scheme, absence of answers to claims after the Forest Rights Act or even silicosis patients being unable to avail services despite getting certificates from the medical board were few of the concerns that were explained by just a multiple window file transfer on the centralized grievance portal.

Objectives

The imagination behind the initiative resonates with the overarching theme conceptualised in the following objectives. First, to aim for digital literacy and acquaint people with the boon of technology, to demand effective governance. Inversely, to make technology as an empowering tool which will also enable citizens to safeguard their rights and entitlements. To strengthen the community-based advocacy that would engage in a continuous process of raising awareness regarding access to schemes and benefits. Thirdly, to adhere to a model of participative democracy by socially mobilizing people, that would not only ensure accountability and transparency in the implementing schemes but would also encourage a citizen-centric policy imagination. Lastly, a vital purpose of the project was also to encapsulate a multistakeholder approach by exhibiting the cohesive role of state and non-state actors in taking forward the benefits of e-governance.

Research Methodology

Soochna Evam Rozgar Adhikar Abhiyan, mobilized civil society organisations and different citizens group by calling out for a 100 day 'Paardarsita Jawaabdehi Yatra' (Transparency and Accountability Yatra). The SR Abhiyan was the frontrunner and force behind the yatra. The Yatra started on December 1, 2015, from Shahid Smarak Jaipur and concluded on March 10, 2016, with thousands of people marching from Albert Hall to the Vidhan Sabha. The Yatra aimed at creating awareness among people regarding their rights, to collect their grievances, and submit it to the state. DEF, as an organisation is committed to bringing 'digital inclusivity' and is continuously on the lookout for building multi-sectoral partnership involving multiple-stakeholders that help in implementing its vision. DEF joined the call of SR Abhiyan and vitally marked its presence in the yatra through conducting surveys in target locations of 33 districts in Rajasthan. The methods adopted by the team members in the field included participant observation which was ethnographic in nature through face to face interactions with the people. Based on the area and number of people taking part, the team made use of

the purposive sampling method to bring out the objective of the yatra. Unstructured interviews with people were conducted to record their response on the Rajasthan Sampark portal during the Yatra. Semi-structured interviews were used by the team members of DEF and SR Abhiyan volunteers to track and find the gaps in the existing grievance redressal system. They also held focus group discussions with government officials like District Collectorate and other concerned departments.

Additionally, other strategies and knowledge dissemination workshops were conducted through seminars, clinics, workshops on RTI, RTE, and RTH that aimed to increase awareness and vigilance which results in the safeguarding of people's rights. Further, creative platforms such as showcasing films and nukkad nataks were played out to enlighten people with an aim that people could relate and understand through visuals and performing arts. SR Abhiyan and DEF also carried out activities such as surveys relating to PDS, Community and Primary Health Centers, and collected feedback on the status of schools and toilets, as well as recorded the effectiveness of schemes such as Mid Day Meals. The survey team comprising of dedicated workers, visited Anganwadi centres, Atal Seva Kendras and other established care centres that are endowed with the duty of providing primary facilities and services to the people of these regions. The Accountability Yatra, also organised activities such as raising awareness among people through creative platforms such as showcasing short films, explaining the role of 'shiksha Ka sawaal'. DEF recorded surveys, which showed quantitative differentiation as well as analysed this differentiation qualitatively to design a legislative action around the theme of Accountability and transparency.

DEF's approach in partaking the role of technical support in the movement is also substantiated with its intervention in the village of Chandauli, a rural hamlet in Rajasthan. DEF in partnership with the Ministry of Minority Affairs of the Government of India launched the Minority Cyber Gram Yojana⁹ in February 2014. Identifying the low literacy levels among the backward sections within the village, DEF

9. Cyber Gram Yojana, Ministry of Minority affairs. Accessed January 2, 2019. <http://www.cybergramyojana.in/overview-of-cybergram-yojana.html>

set up CIRC (Community Information Resource Centre) which has culminated in making each household having at least one person who is digitally literate. The proposal to even create a wireless technology infrastructure to connect Chandauli, has help reiterate its mission of digital inclusion. The success story of Chandauli and other areas affirmed DEF's role in aligning its presence on the field in the SR Abhiyan initiated, Accountability Yatra.

Programmes and Implementation

The 12th Five Year plan (2012-17) illustrates the idea of good governance by parameters of effective deliverance of services to the citizens that in turn gives a social legitimacy to the system. Improving the effectiveness of several schemes such as India Awaas Yojana, MNREGA payments, Right to Education Act, Forest Rights, Social Security Pension benefits and many others rest on the 'in-depth review of the administrative process'¹⁰ at various levels of the state. Noticeably, apart from the national vision stated by the Planning Commission, strengthening Local Institutions, and advocating for Social mobilization corroborates with the internationally set Millennium Development Goals. The impetus behind the Yatra fuses with the national mandate of achieving good governance goals and international mandate of civil society participation in achieving an inclusive society.

Figure: The picture is a glimpse of the Paardasita jawaabdehi yatra organized by the SR Abhiyan



10. Planning Commission, 2013. Twelfth Five Year Plan (2012-2017) Faster, more Inclusive & Sustainable Growth. India: Sage Publications

- *Paardasita Javaabdehi Yatra (Transparency and Accountability Journey)- A People's Mandate.*

The yatra commenced with vibrant participation of volunteers, comprising of college students and interns from youth institutions to garner support for 'Shiksha Samwad', a face to face dialogue with the administration and government on the issue of education at State and the district level. During the Yatra, the demand for a transparent and accountable government took into the discussion of addressing citizen grievances. The mandate clearly, garnered support for spreading awareness and a government's response to decisions related to laws, rights, schemes, and policy implementation. For 100 days, a team of 70-80 persons containing networks of SR Abhiyan along with DEF covered three days in each district (2 days in a block and one day in the district), besides assisted in collecting citizens' grievances which were then submitted to the State.

It was crucial to understand citizens' grievances and focus on the demand generation concerning the redressal mechanisms. DEF provided the technical support in recording grievances and played a critical role in assessing if online grievance redressal mechanisms in Rajasthan are optimally utilized. Providing technical support, a team from comprising of 2 to 5 persons from DEF assisted the people in registering grievances. The team scanned the grievances and kept a record of it offline. The grievances were then entered into the Management Information System (hereafter, MIS)¹¹ after organizing into block-wise categories. DEF provided technical support by submitting the copies to the Analyst-cum-programmer (ACP) of the district with the credentials given by the Department of Information Technology, Rajasthan.

11. Management Information system is a system, that is also understood as a collective approach to manage, organize, disseminate, store and processes information in the common parlance. Scholars have also, viewed it as an evidence based tool that monitors progress of any organizational action.

Figure 2
An Example of the Website Interface which Requires the Claimant to Enter three more Pages of Credentials.



The process of issuing separate IDs for all citizens and uploading it on the portal was done by DEF. The team use to submit the hard copies of grievances to the district administration, who then uploaded it on the Rajasthan Sampark Portal. The team then proactively started following up on the registered grievances as well as the ongoing ones.

It was imperative to follow up on the status of the grievances in order to ensure effective allocation as well as the speedy service delivery of benefits. More crucially, it was essential to assess if the established online redressal mechanisms benefited the poor and the marginalised. Subsequently, the Yatra collected a total of 9297 grievances, out of which 5058 grievances established on Sampark Portal as uploaded and the remaining 2312 were in the process of being disposed of. The grievances were recorded on the issues of – Social security, Ration/PDS, Palanhar schemes, MNREGA, Land records, ICDS and Electricity. These complaints drew attention to the realization of violation of rights and citizens’ voices going unheard. It amassed a demand for strong accountability law and made the government departments liable for depriving people of their entitled benefits.

Figure: Shiksha ka neev Abhiyan – District wise and department grievances recorded during the JawaabdehiYatra (2015-2016)

| S.No | District | District Wise Registered Grievances Summary | | | | | | | | | | Total |
|------|--------------|---------------------------------------------|--------------|-------------------------------------|--------------------------------|------|--------------|--------|--------------------|--------------------|--------|-------|
| | | Social Justice and Em-powerment (Pensions) | Public works | Food and Civil supply (Ration, FDS) | Rural Development (NREGA, IAY) | PHED | Forest Dept. | Health | Land Revenue Dept. | District Collector | Others | |
| 1 | Jaipur | 15 | 3 | 3 | 0 | 5 | 0 | 2 | 10 | 0 | 9 | 37 |
| 2 | Ajmer | 146 | 6 | 53 | 53 | 10 | 0 | 7 | 15 | 5 | 54 | 349 |
| 3 | Rajsamand | 53 | 3 | 56 | 24 | 5 | 2 | 2 | 11 | 7 | 30 | 193 |
| 4 | Pali | 86 | 4 | 77 | 21 | 4 | 44 | 4 | 66 | 2 | 46 | 354 |
| 5 | Jalore | 88 | 5 | 41 | 63 | 13 | 0 | 7 | 23 | 1 | 60 | 301 |
| 6 | Sirohi | 121 | 1 | 82 | 23 | 9 | 62 | 0 | 26 | 0 | 101 | 425 |
| 7 | Udaipur | 243 | 26 | 621 | 168 | 73 | 133 | 3 | 59 | 3 | 150 | 1479 |
| 8 | Dungarpur | 138 | 3 | 474 | 90 | 62 | 267 | 0 | 456 | 0 | 46 | 1536 |
| 9 | Banswara | 19 | 0 | 30 | 16 | 19 | 43 | 1 | 3 | 0 | 27 | 158 |
| 10 | Pratapgarh | 11 | 1 | 23 | 15 | 7 | 9 | 0 | 3 | 0 | 19 | 88 |
| 11 | Bhilwara | 80 | 8 | 125 | 118 | 6 | 64 | 5 | 39 | 7 | 84 | 536 |
| 12 | Chittaurgarh | 5 | 0 | 96 | 5 | 0 | 1 | 9 | 2 | 0 | 15 | 133 |
| 13 | Bundi | 10 | 0 | 16 | 4 | 1 | 0 | 0 | 1 | 68 | 6 | 106 |
| 14 | Kota | 94 | 2 | 56 | 15 | 2 | 0 | 2 | 12 | 3 | 43 | 229 |
| 15 | Baran | 27 | 10 | 137 | 95 | 16 | 12 | 1 | 118 | 20 | 21 | 457 |

| | | | | | | | | | | | | |
|-------|-----------------|------|-----|------|------|-----|-----|----|------|-----|------|------|
| 16 | Jhalawad | 9 | 0 | 13 | 10 | 2 | 0 | 0 | 5 | 1 | 0 | 40 |
| 17 | Tonk | 8 | 1 | 27 | 8 | 0 | 0 | 0 | 11 | 0 | 7 | 62 |
| 18 | Sawai Madhopur | 1 | 1 | 2 | 4 | 2 | 0 | 0 | 1 | 1 | 4 | 16 |
| 19 | Karauli | 79 | 2 | 136 | 25 | 1 | 0 | 1 | 6 | 32 | 10 | 292 |
| 20 | Dhaulpur | 102 | 1 | 382 | 128 | 18 | 2 | 1 | 1 | 1 | 17 | 653 |
| 21 | Bharatpur | 30 | 0 | 30 | 21 | 4 | 1 | 1 | 10 | 2 | 28 | 127 |
| 22 | Dausa | 38 | 1 | 16 | 10 | 5 | 0 | 0 | 3 | 0 | 18 | 91 |
| 23 | Alwar | 15 | 1 | 9 | 16 | 4 | 0 | 0 | 0 | 1 | 10 | 56 |
| 24 | Sikar | 16 | 5 | 16 | 5 | 6 | 0 | 1 | 3 | 2 | 20 | 74 |
| 25 | Jhunjhunu | 25 | 20 | 71 | 5 | 21 | 1 | 10 | 0 | 4 | 44 | 201 |
| 26 | Churu | 6 | 3 | 4 | 57 | 3 | 0 | 0 | 1 | 0 | 5 | 79 |
| 27 | Shri Ganganagar | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 28 | Hanumangarh | 0 | 0 | 1 | 1 | 0 | 0 | 2 | 0 | 0 | 2 | 6 |
| 29 | Bikaner | 19 | 3 | 6 | 23 | 2 | 1 | 1 | 25 | 11 | 47 | 138 |
| 30 | Jaisalmer | 2 | 2 | 2 | 15 | 6 | 0 | 0 | 42 | 8 | 24 | 101 |
| 31 | Barmer | 123 | 1 | 220 | 77 | 18 | 0 | 1 | 34 | 7 | 60 | 541 |
| 32 | Jodhpur | 22 | 2 | 84 | 135 | 26 | 0 | 2 | 49 | 9 | 86 | 415 |
| 33 | Nagpur | 5 | 0 | 2 | 5 | 3 | 0 | 2 | 2 | 0 | 5 | 24 |
| Total | | 1626 | 115 | 2911 | 1255 | 353 | 642 | 65 | 1037 | 195 | 1098 | 9297 |

Source: Shiksha ka neev Abhiyan – the table give details of registered grievances received in the yatra, grievances registered on the Sampark Portal and disposal status.

| <i>S. No.</i> | <i>District name</i> | <i>Grievances collected during Yatra</i> | <i>Grievances on Sampark portal</i> | <i>Disposed grievances</i> |
|---------------|----------------------|------------------------------------------|-------------------------------------|----------------------------|
| 1 | Jaipur | 37 | 1 | 1 |
| 2 | Ajmer | 319 | 398 | 3 |
| 3 | Rajsamand | 193 | 196 | 113 |
| 4 | Pali | 178 | 178 | 161 |
| 5 | Jalore | 301 | 107 | 54 |
| 6 | Sirohi | 425 | 436 | 311 |
| 7 | Udaipur | 1291 | 1221 | 804 |
| 8 | Dungarpur | 1536 | 1 | 1 |
| 9 | Banswara | 158 | 220 | 72 |
| 10 | Pratapgarh | 88 | 86 | - |
| 11 | Bhitwara | 536 | 54 | 23 |
| 12 | Chittorgarh | 30 | 39 | 19 |
| 13 | Bundi | 106 | 160 | 53 |
| 14 | Kota | 229 | 227 | 158 |
| 15 | Baran | 456 | 0 | - |
| 16 | Jhalawar | 40 | 44 | 1 |
| 17 | Tonk | 132 | 132 | 62 |
| 18 | Sawai Madhopur | 16 | 0 | - |
| 19 | Karouti | 290 | 275 | 113 |
| 20 | Dholpur | 653 | 470 | 284 |
| 21 | Bharatpur | 127 | 0 | - |

| | | | | |
|----|------------------|------|------|------|
| 22 | Dausa | 76 | 1 | - |
| 23 | Alwar | 54 | 1 | - |
| 24 | Sikar | 64 | 1 | - |
| 25 | Jhunjhunu | 201 | 0 | - |
| 26 | Hanumangarh | 5 | 0 | - |
| 27 | Shri Ganga nagar | 0 | 0 | - |
| 28 | Churu | 72 | 76 | 5 |
| 29 | Bikaner | 161 | 161 | 24 |
| 30 | Jaisalmer | 94 | 6 | 2 |
| 31 | Barmer | 257 | 338 | 26 |
| 32 | Jodhpur | 91 | 328 | 22 |
| 33 | Nagpur | 24 | 1 | - |
| | Total | 9297 | 5058 | 2312 |

Source: Shiksha ka neenv Abhiyan - the table give details of registered grievances received in the yatra, grievances registered on the Sampark Portal and disposal status.

DEF’s role in providing technical assistance to the citizens was also enhanced by its initiative of Soochna Seva Kendras (an Information Service Centre). The Soochna Seva Kendras, a collaboration of the EU with DEF functions at the level of district administration and the lower levels of the Blocks and Panchayats. Soochna Seva Kendras, have ICT enabled services, such as Wi-Fi, Wireless Laptops, Photo printers and others along with programme information regarding citizen services and entitlements. Fields such as health, livelihood, employment, social security, education, and financial inclusion are the main areas that are included within its framework. Among other digital services, Soochna Seva Kendra played a salient role

in recording, tracking, evaluating and disseminating information regarding the grievances registered in the Yatra.

Survey of different institutions was conducted during the Yatra. Surveys of 20 Community Health Centre (CHCs) and 14 Primary Health Centres (PHCs) in various districts were also surveyed. Basic health facilities, in districts such as Karoli, Dhaulpur, Jodhpur, Bargwer, Dausa and Kota were inoperative. Districts of Suvana and Bhilwada had merely five beds along with a dearth of Medical and Investigative facilities. Curative facilities in maternal health and child services in other districts, such as Alwar, Bundli, Sikar, Kota were out of order. Similarly, infrastructure deficits were found in schools in the districts of Churu, Jodhpur, Jaisalmer, Barmer and Bikaner. Other issues, like the functioning of schemes such as Mid-day meal in schools, as well as scrutinizing rules related to mining near the school premises was also examined in the survey.

Similarly, visits made to PDS/Fair Price shops showed that the name and details of beneficiaries were not explicitly listed outside the shop. Anganwadi Kendras (AWCs) and Atal Seva Kendras revealed that due to lack of information display and costly E-Mitra services, these initiatives remained largely ineffective with no community mobilisation. A report on the functioning of PHC/CHC, Government schools, Ration dealers, AWCs and E-mitras, was presented at the end of each day of the yatra, which helped in planning focused activities for the day next.

- Press release and role of 'Shiksha ka Sawaal' Film

DEF partnered with Rough Cut Productions, who were significant stakeholders in the Yatra. Rajasthan Patrika too acted as an influential media partner and published more than 2000 articles on the issue. These stakeholders participated in the movement and were thus able to capture the severity of the issue by collecting footage on the field sites. The three films showcased the value of education and the need to impart entitlements to secure the right to education. These initiatives showed that lack of transparency and accountability exercised by the government needs to be scrutinized.

| | | | |
|----------------|------------------------------------|-----------------------------------------|----------------------------------------------------|
| State level | 1 December 2015 Jaipur | Yatra inauguration and Press Conference | |
| | 10 March 2016 Jaipur | Yatra Completion and Press Conference | |
| District level | 2 December 2015 to 9 March 2016 | 1) | District level community meeting on various issues |
| | | 2) | Facilitation/ registration of grievances |
| | | 3) | Discussion with administrative Department |
| | | 4) | Meeting and press conference on right to education |
| Block level | More than 100 blocks | 1) | Nukkad meeting and Nukkad Natak |
| | | 2) | Facilitation/ registration of grievances |

Source: Everyday main Activities during the Yatra prepared by DEF

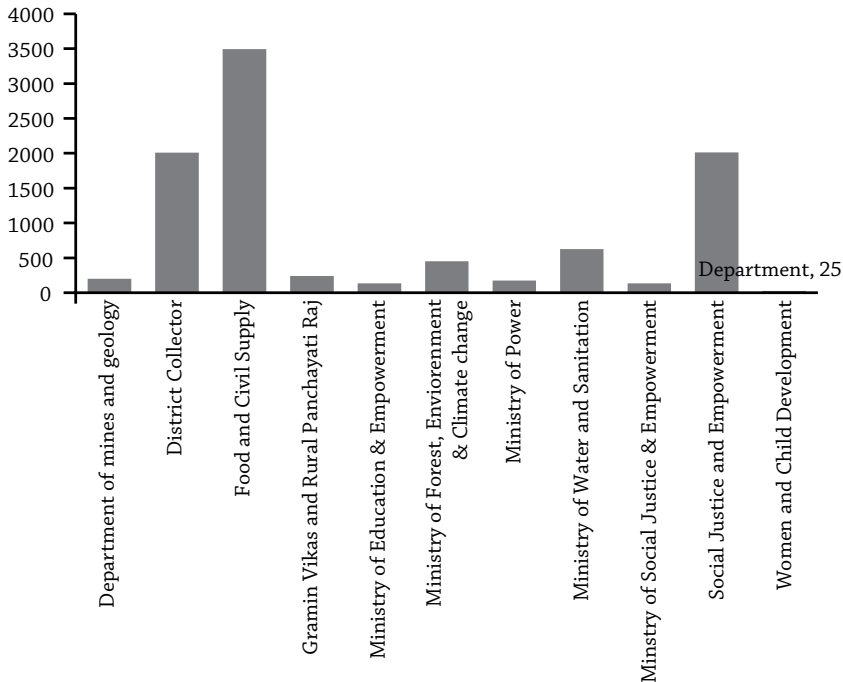
The process of registering, analysing and effectively harnessing opportunities of dialogue with the district administration was followed as a routine of everyday activities. SR Abhiyan, as the force behind the initiative and DEF as the technical supporter, provided the important day to day guidance in reaching the ground-level. DEF played a necessitous role by ‘technologically enabling’ people but more so by exhibiting the potency of technology, by cutting across the digital divide.

Implementation Outcome

The survey conducted during the Yatra, for Rajasthan Sampark portal is an assessment of the working of online grievance redressal mechanisms. It is evaluated by two indicators – efficiency, validated by the number of registered grievances and, effectiveness, validated by investigating the status of grievances in consort with other factors such as ease of registering complaints and implications of cross-sectional biases in recording grievances.

The highest number of grievances reported the failed deliverance of PDS/ Ration schemes (3492 grievances) concerning the Department of Food and Civil supply, with pension grievances (1629 grievances) concerning the Department of Social Justice and empowerment next, with 982 claims concerning land records and followed by the issue of District Collectorate.

Figure
Department



Source: Department wise complaints segregated by DEF

For instance, the highest number of grievances recorded were from Dungarpur district (1536 grievances) followed by Udaipur (1479 grievances) with the lowest number of grievances recorded in Henagar (6 grievances) and no grievances registered in Shri Ganganagar district. The highest number of grievances filed in Udaipur too were on the issue of NREGA, and Indra Awas Yojana (IAY) payments (621 grievances) with Dhaulpur (382 grievances) next under the Department of Rural Development and replicating the same followed by complaints to the District Collector in Dungarpur. In Rajasmand 56 grievances and in Bhilwara, 125 grievances were recorded addressing issues pertaining to NREGA, IAY. Ajmer recorded 146 and Dausa recorded 38 grievances, on the issue of Ration and FDS falling under the Department of Food and Civil supply. During the focused group discussions, the respondents asserted that

complaints have also been misrepresented on failing to be identified in the specific department of grievance.

Factors such as gender intersectionality also surfaced as 74 per cent of the grievances out of the total grievances were registered by the male population whereas only 24 per cent of the female population came forward to report grievances. Similarly, community participation differed with individuals registering 94 per cent of the grievances, and 6 per cent were reported by community-based groups.

The outreach of the Accountability Yatra captured a massive network of volunteers, interns, NGOs, and other institutions who also pressed upon voicing the status of the grievances by formulating a demand letter (Annexure 1). DEF's team was given the role of formulating the demand letter by highlighting issues related to E-mitras. The team proposed a second demand letter regarding the Rajasthan Sampark portal by suggesting ways of ensuring improving accessibility and fair distribution of entitlements. Some of the suggestions are summarized as follows-

- 1) Transparency- Rajasthan Sampark MIS should be openly accessible for the people, which would help in tracking impeding delivery of services along with fostering transparency.
- 2) Accountability- There is no provision in Rajasthan Sampark to establish accountability among government Departments. Once the technical automated MIS is open to all, it would ensure accountability of government officers towards the citizen. Details of any punitive actions against any official should be also be displayed on MIS.
- 3) Participation- These must be a single system to record feedback from a person, which would also make the tracking procedure more streamlined.
- 4) MIS to JIS- Every social field departments should have kept transaction bases online MIS.

The team addressed the letter to the Chief Secretary of Rajasthan, by giving suggestions such as making E-Mitras and Rajasthan Sampark more citizen-friendly. The enthusiasm of the Yatra was

also carried forward to an immediate interaction with the Chief Secretary of Rajasthan. Simultaneously, 'Jan Sunvayi' a meeting witnessing participation of 200 people, selected 20 members to reach the Secretariat with the proposed demand letter. The last day of the Jawaabdehi yatra concluded with a 2-kilometre march of over 5000 people, who passionately demonstrated their demands through sloganeering for an Accountability law.

- Paardasita Jawaabdehi Yatra and the Way forward

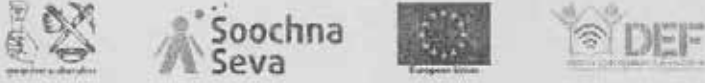
The Paardasita Jawaabdehi yatra culminated into a realisation of continuing the movement to track a persistent evaluation of the momentum generated by the Jawaabdehi Yatra. Soochna Evam Rozgaar team was given the charge to sustain the assertion for an accountability law. In the course of which, DEF was asked to establish a call Centre in Jaipur to provide information in addition to the mere recording of grievances brought by citizens. Thus, an information and service Centre (ISC) by the name of Soochna Seva Kendra which was established in Barmer during the yatra is now set up in Jaipur by the name of Soochna Seva Evam Shikayat Kendra. The DEF team at Jaipur emphasised that the change in the name underscored a step further from the role of being an information disseminator to a grievance hearing body, on consequently being prompted to give information about the portal and social schemes.

The team recorded a surge of grievances from 9297, collected during the Yatra to a 9458 in the subsequent phase. Data revealed that the grievances disposed of online, were dealt in two ways – Either Reject (Disposed) or Relief (Disposed).

The team recorded that out of 9458 registered grievances now, 9174 grievances were recorded as solved by the respective departments. However, on conducting a day to day interaction with the beneficiaries and gleaning into the status of relief provided by the departments, there was an incongruence in the 'actual' (Vastavik) status of the grievance and the listed grievances read under the title as 'Disposed'.

Figure

Pamphlet of Soochna Seva Evam Shikaat Kendra in Jaipur.



0141-2597850 0141-2597850 0141-2597850

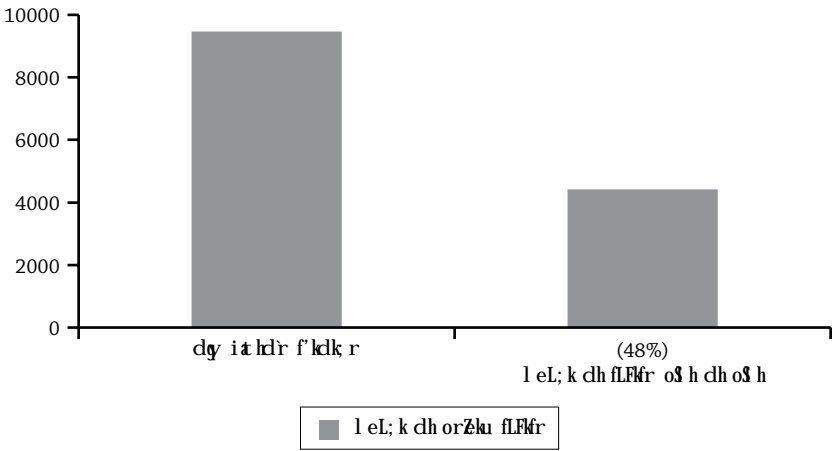
सूचना एवं शिकायत केन्द्र

सूचना एवं रोजगार अभियान और डिजिटल एम्पॉवरमेंट फाउण्डेशन द्वारा जयपुर में सूचना एवं शिकायत केन्द्र की स्थापना की गयी है, जिनमें राजस्थान सरकार द्वारा चलाई जा रही निम्न जानकारीयाँ फोन के माध्यम से ले सकते हैं-

1. वृद्धावस्था, विधवा एवं निःशक्तजन पेंशन की जानकारी उपलब्ध कराना और शिकायत दर्ज करना।
2. राशन (खाद्य सुरक्षा) से सम्बंधित जानकारी उपलब्ध कराना और शिकायत दर्ज करना।
3. नरोगा (जॉब कार्ड, पुराना भुगतान) सम्बंधित जानकारी उपलब्ध कराना एवं शिकायत दर्ज करना।
4. श्रमिक डायरी (कार्ड) सम्बंधित जानकारी उपलब्ध कराना एवं शिकायत दर्ज करना।
5. सिलिकोसिस बीमारी सम्बंधित शिकायत दर्ज करना एवं जानकारी उपलब्ध कराना।
6. स्वास्थ्य विभाग सम्बंधित शिकायत दर्ज करना एवं जानकारी उपलब्ध कराना।
7. अन्य सरकारी विभागों जैसे बिजली, पानी, शिक्षा आदि सम्बंधित शिकायत दर्ज करना एवं जानकारी प्रदान करना।
8. राज्य सरकार व केन्द्र सरकार सम्बंधित योजनाओं की जानकारी आदि उपलब्ध करायी जाती है।

सम्पर्क केन्द्र :
 एफ-14, मधुबन कॉलोनी, टॉक फाटक, जयपुर-302015
 फोन : 0141-2597850, मोबाइल - 8890406072

Figure:
*The present status of grievances recorded by DEF Team in Jaipur
(The graph has been intentionally prepared in Hindi, for a
trouble-free understanding for the beneficiaries)*



The department of Food Civil Supply and Consumer Protection (PDS/Ration related) identified 759 grievances as disposed. Whereas, on surveying DEF found out that 77.8 per cent (584) grievances were Disposed- rejected and 22 per cent (170 grievances) were given the status of Disposed – relief. Other departments followed a similar pattern such as Social Security Pension, Palanhar under the Ministry of Social Justice and Empowerment reported 219 grievances as disposed, out of which 162 stood out as disposed- rejected and 54 as disposed- relief. Grameen Vikas and Panchayati Raj, IAY, MNREGA under the Rural Development and the Panchayati Raj department reported 1284 grievances as disposed, out of which 667 grievances stand disposed– reject and 603 as disposed- relief. The Rajasthan Revenue department reported 121 grievances as disposed, out of which 116.1 were disposed-rejected and 5 grievances were disposed-relief. About the District Collectorate’s office, out of the 5291 grievance reported as disposed, 3175 were disposed- rejected and, 2064 were found to be disposed- relief. Rajasthan Health and Medical department, disposed 95 grievances as disposed, out of which, 66.5

grievances were disposed rejected and, 28.5 grievances were granted the disposed- relief status on the portal.

Therefore, the follow up conducted by the Soochna Seva Evam Shikayat Kendra, DEF in Jaipur exhibited a rise in the number of grievances reported on the Rajasthan Portal but also indicated a discontent among people who remain unconvinced with how their grievances are disposed-rejected. A face to face interaction done by the team as well as information dissemination regarding schemes, benefits, and entitlements, informed the citizens to claim for their entitlement benefits. The role of DEF in digitally recording, counselling, and assisting the process has sustained the assertion for a more efficient and effective deliverance of services.

Scope of Implementation

The Paardasita Jawaabdehi Yatra as a journey also met with challenges which were grasped and understood as opportunities in bridging the gaps. Foremost, on the first day of recording grievances in Ajmer, the turnout of grievances registered outdid the expected numbers. This massive turnout led the team to devise prompt actions such as acknowledging the complaint with a personal receipt number while waiting for the Sampark Portal to register grievances. Furthermore, most of the citizens were without permanent mobile numbers which made the follow up difficult. The DEF team members assisted as a nodal point between the government grievance update and the citizens by providing with their contact details and followed with other local NGOs. It was also observed, that many cases were rejected due to conflict of interest between the government officials and the people, on issues such as damaged roads and infrastructure. Such complaints opined to be critical in assessing the government's motive and profit gains of the construction company. Nevertheless, knowledge dissemination remained a fundamental challenge to overcome, as people lacked proper documentation, for instance, citizens claiming for Pension were unaware regarding the requisite of Aadhar document.

The Yatra sets key lessons for Rajasthan as well as a mandate for a broader policy formulation that envisions digital inclusivity, fair access and effective deliverance of benefits and entitlements.

-Strengthening government portals by proactive information dissemination

The team suggested that E-mitras could play a significant role in information dissemination and should become more citizen-centric without charging any fee. It also underlined on how the 'backbone of local governance', the Panchayat Samhitis, district administration and various levels of government bodies could be sensitive towards the citizens by endorsing the usage of these information kiosks. Similarly, Ration counters should enumerate details regarding ration goods and services which can further make information more accessible to the citizens.

-A need to 'technologically enable' people

Entering into the era of e-governance, efforts should be focused towards making citizens' technologically abled, so that they can avail the benefits of instant services and promptly voice concerns regarding delayed delivery of benefits. Digital Literacy thus should become a pivot in order to combat 'digital aloofness' and ensure maximum utilisation of such online redressal mechanisms.

-Firming the role of Information Facilitation centres

Steps related to strengthening information and facilitation centres needs to be proactively drafted in the public policy agenda. Centres at gram panchayat, Panchayat Samhitis and Zilla Parishad's (block level) should be bolstered by corroborating with Anganwadi centres and Atal Seva Kendras to institutionalise effective aid and support to the beneficiaries

-Organizing Routine Social Audits and Public hearing interaction

It is central to give opportunities to the citizens, to opine on the preferred course of actions by discussing their grievances in front of representatives from various government departments.

For instance, Jan sunvayi, under the Right to participate in a Public hearing proposed a time-bound hearing within 14 days of grievances registration. Such processes will remove opacity behind the status of grievances. Similarly, Social audits, grievance redressal camps and regular public audits can ensure consistent participation of the people, especially the marginalised who are central to any law, policy, and mechanism design.

-Aiming for a wider reach under Multistakeholder interaction model

Evidently, the Yatra emphasises the need to maintain a dialogue with the citizenry at the ground level. NGOs, Community based organisations, Press and Media groups have proved to reach to these citizens effectually. These organisations also play a vital role in establishing an interface between the citizens and the government. For instance, (DEF), Mazdoor Kisan Shakti Sangathan (MKSS), Sookhna Evum Rozgar Abhiyan, Institute of Development Studies and other partner groups on a State-level consultation and dialogue with the government on the issue of ‘digital platforms for democratic governance’. The consultation was organised on the theme of “Strengthening Access & Delivery of Government Schemes Information & Entitlements”. It also witnessed participation from actors such as civil society organisations, community-based organisations, academicians, government departments, social activist groups and beneficiaries. The agenda was to enforce a dialogue with the government of Rajasthan, to open public access to records and move transparently in ensuring optimal utilisation of ICTs for the marginalised.

-Advocating for a citizen inclusive policy formulation

There is a pressing need to create a framework for effective delivery of citizen entitlements and institutionalize mechanisms for the same. Citizens’ participation in a pre-consultative process on the formulation of laws, policies, subordinate legislation, programmes, schemes should be absorbed by clear disclosure of draft policies. The Paardasita Jawaabdehi Yatra, outreach helped in encompassing a framework for a draft on Social Accountability Bill, 2018. It is

modelled on existing provisions on Section 4 and Section 5 on the Right of Citizens for Time Bound Delivery of Goods and Services and Redressal of the Grievances Bill, 2011, with the Right to Hearing Act, 2012, the new policy endorsed for bolstering the existing mechanisms. Binding principles of accountability and participation in one framework, the bill asserts to establish an independent structure at the State and the District level which will provide an overview of the grievance redressal process. Although, processes such as, collective monitoring, through social audits; reiterating the role of independent appellate authority illustrated in the RTI framework; or showcasing the investigative role of the Lokpal/Lok Ayukta in tackling corrupt practices has been included in policy formulations before, the Accountability bill also lays out a cost-benefit analysis of using only 1 per cent current expenditure from the allocated social sector budget for Social audits within programmes like MNREGA. The bill recapitulates, the attempts of various Public Service Guarantee laws that aim towards preparing a Citizen charter whereby citizens determine the basis of filing grievances, as well as monitor through an empowered voice and active community participation.

Conclusion

The outreach of the Paardasita Jawaabdehi Yatra captured the demand for voicing concerns against clogged and inefficient deliverance of entitlements. The outcome of the Yatra revealed that delegating duties and formulating policies is just an onset, not a magic bullet to the problem. DEF's examination of the Rajasthan Sampark portal exemplifies a need to co-opt a multistakeholder approach to strengthen feedback mechanisms and subsequently influence levels of policy formulations, and implementations processes. Demonstrated in carving out a niche for a new discursive space for local governance bodies, frontline agencies, and community-based organizations, the Yatra emphasized the need to converge efforts in also building institutional preparedness to not only carry out the respective organizational roles but to maximize capacity building by digitally empowering people in the era of e-governance.

Project Factsheet

| | |
|-------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Project Implementing Agency | Digital Empowerment Foundation in collaboration with SR Abhiyan. |
| Method (s) | Surveys were held during the Jawaabdehi Paardasita yatra. Providing Technical assistance, Public participatory tools, door to door interaction, campaigning, focus group discussions with other stakeholders - non state and state actors contributed to decide accountability checks by examining the online grievance redressal mechanism. |
| Stakeholder(s) | NGOs and CBOs network within the SR Abhiyan, college students, volunteers, interns. Citizens form the most important stakeholders in reporting grievances and complaining against the online grievance redressal mechanisms. District Administration, Governments at the panchayat level, Rajasthan Sampark Portal team and lastly Department of Information Technology and communication, Rajasthan. |
| Site / Field (Exact Location) | All 33 Districts in Rajasthan- Ajmer, Alwar, Banswara, Baran, Barmer, Bharatpur, Bhilwara, Bikaner, Bundi, Chittorgarh, Churu, Dausa, Dholpur, Dungarpur, Hanumangarh, Jaipur, Jaisalmer, Jhalawar, Jhunjhunu, Jodhpur, Karauli, Kota, Nagaur, Pali, Pratapgarh, Rajsamand Sawai Madhopur, Sikar, Sirohi, Sri Ganganagar, Tonk, Udaipur |
| Duration | The project is up and running in the Jaipur office, DEF. Start Date 1st December 2015 to 10th March, 2016. |
| Project Partner(s) | <ol style="list-style-type: none"> 1. Digital Empowerment foundation (DEF) 2. Mazdoor Kisan Shakti Sangathan (MKSS) 3. Astha 4. Urmul Kejri 5. Urmul Jyoti 6. Wafadar Mazdoor Kisan Sangathan (WMKS) 7. SWRC 8. Sankalp 9. Unnati 10. Jan Chetna Sansthan 11. School for Democracy 12. MLPC and other CSOs 13. Ekal Naari Shakti Sangathan 14. Godwasi adivasi Sangathan |

| | |
|--------------------|--------------------------------------------------------------------------------------------------------------------------------------|
| Thematic Area (s) | Grievance Redressal mechanism- Rajasthan Sampark portal, Service delivery mechanisms, E-governance, Accountability, Digital literacy |
| Organisation | http://defindia.org |
| Contact (Web link) | |

ANNEXURES (Demand letters prepared by DEF)

**माननीय
मुख्य सचिव महोदय
राजस्थान**

विषय :- ई-मित्र सम्बन्धी जवाबदेही तय करने के सम्बन्ध में

महोदय

राज्य सरकार द्वारा चलाई जा रही ई-मित्र परियोजना का मुख्य उद्देश्य ग्रामीण एवं शहरी समुदाय को राज्य सरकार के विभिन्न विभागों से सम्बंधित अधिकतम संभवतः सुविधाओं/योजनाओं को कियोस्क के माध्यम से उपलब्ध कराना है। जनता को विभिन्न तरह की सरकारी योजनाओं तथा उन्हें उनके अधिकारों से लाभान्वित करवाने के लिए डिजिटल माध्यम का उपयोग ई-मित्र कियोस्क की सहायता से किया जा रहा है। जवाबदेही यात्रा के दौरान सर्वे टीम द्वारा राज्य के सभी जिलों में स्थित ई-मित्र कियोस्क तथा उनके द्वारा दी जा रही सुविधा के बारे में जनता से जानकारी ली गयी, जिनमें मुख्य रूप से निम्न जानकारीयों सामने आयी-

- १) ई-मित्र व्यवस्था को यह कहते हुए अस्तित्व में लाया गया था, कि इससे जनता के काम आसानी से हल हो जाएंगे, लेकिन ई-मित्र लोगों की सुविधा के बजाय लोगों पर अतिरिक्त निजी भार बन गया है। आज भी लोगों को अपने सारे दस्तावेज सम्बन्धित दफ्तरों में पेपर में ले जाने पड़ते हैं, उदाहरणार्थ - राशन कार्ड के लिए वोटर कार्ड, सरपंच प्रमाण-पत्र तथा उसके बाद ई-मित्र पर ऑनलाईन करवाना अतिरिक्त भार है, जिसके लिए फीस और देनी पड़ती है।
- २) ई-मित्र कियोस्क पर जाने से यह नहीं पता चल पाता कि उपरोक्त ई-मित्र किस नाम से है ?
- ३) अधिकतर ई-मित्र कियोस्क पर या तो रेट लिस्ट नहीं लगी हुई है या ऐसी जगह चिपकी हुई है, जहां पर आम जन को नहीं दिख सके।
- ४) ई-मित्र कियोस्क पर लगभग सभी ई-मित्र द्वारा प्रत्येक सेवा में तय किए गए शुल्क से अधिक शुल्क लिया जा रहा है। उदाहरणार्थ पालनहार योजना में 200 रुपये, भामाशाह में 20 रुपये प्रति व्यक्ति/परिवार वसूले जा रहे हैं।
- ५) ई-मित्र कियोस्क द्वारा तय कीमत से अधिक शुल्क वसूलने पर विरोध करने पर उनके द्वारा फॉर्म भरने से ही साफ़ मना कर दिया जाता है।
- ६) ई-मित्र कियोस्क पर शिकायत हेतु कोई नम्बर नहीं लिखे होते हैं, जिसकी वजह से आम जन को शिकायत करने में असुविधा महसूस होती है।
- ७) ई-मित्र केन्द्रों पर बैठे हुए व्यक्ति को काफी योजनाओं/ फॉर्म की जानकारी नहीं होने के कारण आम जन को यहाँ वहाँ भटकना पड़ता है।
- ८) ई-मित्र संचालकों द्वारा मुख्य रूप से वही सेवाएं प्रदान की जाती हैं, जिनसे उन्हें अच्छी कमाई होती है।
- ९) अधिकतर अटल सेवा केंद्र बंद पड़े रहते हैं तथा जानकारी पूछने पर पता चलता है कि संबन्धित व्यक्ति ने कही ओर ई-मित्र चला रखा है।

सुझाव -

- १) प्रत्येक ई-मित्र केंद्र पर ई-मित्र केंद्र के संचालक की जानकारी चप्पा की जाए।

- 2) ई - मित्र केन्द्र में जनता से किसी भी प्रकार का शुल्क नहीं लिया जाना चाहिये और प्रोत्साहन राशि सरकार स्वयं वहन करे। शुरुआत में यह व्यवस्था अटल सेवा केन्द्र के ई-मित्र में लागू की जा सकती है। लोगों को सामाजिक सुरक्षा के तहत सेवाएँ देना सरकार की जिम्मेदारी है।
- 3) राज्य के समस्त ई-मित्र सेंटर में सरकार द्वारा निर्धारित शुल्क दीवार पर पेंट होना अनिवार्य किया जाये, साथ ही शिकायत नम्बर भी दर्ज हो और उल्लघन होने पर संचालक का लाइसेंस निरस्त किया जाना चाहिये।
- 4) ई-मित्र केन्द्र संचालकों को समय-समय पर प्रशिक्षण दिया जाना आवश्यक है तथा समय समय पर उनके कार्यों का मूल्यांकन हो।
- 5) प्रत्येक ई-मित्र केंद्र को सूचना केंद्र की तरह होना चाहिए, जिसमें योजनाओं की जानकारी, ग्राम पंचायत में होने वाले केम्प, क्षेत्र विशेष की जानकारी, ऑनलाइन मंडी के माध्यम से अनाज के भाव आदि की जानकारी चस्पा होने से वह व्यापारिक केंद्र होने की अपेक्षा एक सूचना सेवा केंद्र भी लगे।
- 6) प्रत्येक पंचायत समिति/ ज़िले में प्रत्येक वर्ष प्रशासन द्वारा आदर्श ई-मित्र को प्रोत्साहन किया जाना चाहिए

आपसे आग्रह है कि उक्त मुद्दों एवं सुझावों पर गंभीरता से विचार करें और जनहित में नीतिगत निर्णय हेतु राज्य सरकार को अनुशंसा भेजकर अंतिम लाभार्थी तक योजनाओं के लाभ को पहुँचाने की ओर आवश्यक कदम उठावें।

Rajasthan Sampark related demand letter**माननीय****मुख्य सचिव महोदय****राजस्थान****विषय :- राजस्थान संपर्क सम्बन्धी जवाबदेही तय करने के सम्बन्ध में****महोदय**

राज्य सरकार द्वारा शिकायत निवारण व्यवस्था को मजबूत बनाने के लिए चलाई जा रही राजस्थान संपर्क की व्यवस्था एक अभिनव एवं स्वागत योग्य प्रयास है, जिसका मुख्य उद्देश्य बिना कार्यालय में उपस्थित हुए समस्याओं को ऑनलाईन दर्ज करने की सुविधा तथा पंचायत समिति एवं जिला स्तर पर राजस्थान सम्पर्क केन्द्रों पर निःशुल्क रूप से शिकायतों को दर्ज करने की सुविधा दी गयी है, जिससे जन सामान्य की समस्याओं का निराकरण तय में हो सके। सूचना एवं रोजगार अभियान द्वारा चलाई जा रही जवाबदेही यात्रा के दौरान सर्वे टीम द्वारा राज्य के सभी जिलों में स्थित शिकायत निवारण की व्यवस्था का निरीक्षण किया गया। तथा जन समुदाय से राजस्थान सरकार द्वारा दी जा रही शिकायत निवारण व्यवस्था के बारे में जनता से जानकारी ली गयी, जिनमें मुख्य रूप से निम्न जानकारीयों सामने आयी-

- १) सम्पर्क पोर्टल पर ऑनलाईन शिकायत दर्ज करते समय ओटीपी (वन टाइम पासवर्ड) की व्यवस्था को खत्म किया जाना चाहिए, जिससे इसकी पहुँच सहज बन सके।
- २) राजस्थान सुनवाई के अधिकार कानून के तहत शिकायत दर्ज होने के उपरान्त शिकायतकर्ता को सन्देश द्वारा उसकी शिकायत की सुनवाई की तिथि व समाधान की अंतिम तिथि पहुँचाने की व्यवस्था होनी चाहिये।
- ३) शिकायत सम्बन्धी जानकारी जैसे शिकायत संख्या, शिकायत की स्थिति, शिकायत की पूर्णता आदि की जानकारी हिंदी में आना चाहिए, जिससे हिंदी भाषी होने के कारण जन समुदाय को शिकायत की स्थिति आसानी से पता लगा सके।
- ४) जमीनी स्तर पर लोगों की शिकायतें बहुत सारी हैं, अतः उपरोक्त शिकायत निवारण प्रक्रिया को और सरल बनाने के लिए सम्पर्क पोर्टल को और सुलभ बनाने की आवश्यकता है, जिसमें अटल सेवा केंद्रों / ई-मित्र केन्द्रों की सहायता ली जा सकती है।
- ५) शिकायत निवारण प्रणाली में शिकायतों के वितरण के स्थान पर शिकायतों को निपटाने पर ज्यादा ध्यान दिया जा रहा है। जैसे कि शिक्षकों की नियुक्ति करने के सम्बन्ध में यह जवाब दिया जा रहा है जब भी आर पी एस सी द्वारा भर्तियाँ निकाली जाएगी, नियुक्ति कर दी जाएगी।
- ६) जवाबदेही यात्रा के दौरान पेपर में दर्ज की गयी शिकायतों का सम्पर्क में दर्ज की गयी शिकायतों में बहुत अंतर है, जिससे शिकायत की पहुँच पूरी तरीके से प्रशासन तक नहीं पहुँच पाती।

- ७) किसी भी शिकायत के निपटारे के पश्चात मोबाईल फीडबैक प्रणाली सिस्टम को लागू किया जाना चाहिए जिससे शिकायत के समाधान की स्थिति या उसके समाधान की स्थिति का आंकलन किया जाए.
- ८) जन समुदाय सम्बंधित शिकायतों को सार्वजनिक किया जाना चाहिए, जिससे शिकायत निवारण प्रक्रिया को और मजबूत बनाया जा सके .
- ९) संपर्क सभी शिकायतों के अंत में फीडबैक का ऑप्शन नहीं आता, जिससे की शिकायत को री-ओपन किया जा सके .
- १०) सम्पर्क पोर्टल पर शिकायत दर्ज करते समय नए गावों, ग्राम पंचायतों की लिस्ट अपडेट नहीं होने से शिकायत दर्ज करने में परेशानी आती है.

आपसे आग्रह है कि उक्त मुद्दों एवं सुझावों पर गंभीरता से विचार करें और जनहित में नीतिगत निर्णय हेतु राज्य सरकार को अनुशंसा भेजकर अंतिम व्यक्ति तक योजनाओं के लाभ को पहुँचाने की ओर आवश्यक कदम उठाएँ।

Conclusion

This case study publication with fourteen different cases from the ground, emerged out of the European Union supported call, focused on fundamental issues in last mile access and delivery critical public schemes information, services and final entitlement benefits for the poor, vulnerable groups and communities spread across more than dozen states in India. The case studies highlighted vivid contexts, challenges, systems and processes that were hindrance more than facilitators to increase and improve access, delivery and quality of public schemes information and services aimed at reducing poverty and social exclusion and that these CSO led interventions tried intervening in addressing the same with success to a great extent. The cases tried in vivid manners, approaches and strategies to strengthen mechanisms and platforms in ensuring access to quality public services pertaining to basic rights and entitlements like civil registration, health, education, housing, water, sanitation, employment, income generating and savings schemes, food security, nutrition, energy, natural resources, and other social protection schemes. Most importantly in an essential drive to strengthen supply side of services delivery, all the cases in unison worked upon in divergent manners to help local authorities and service providers increase and improve access to information of public schemes and initiatives, in backward districts, down to the village level, throughout the planning, budgeting, implementation, control, and evaluation continuum. In particular, this means ensuring that information is communicated to poor, marginalised and often illiterate populations at the right time, locations and in ways which are meaningful and useful to them. The case examples brought in to the fore a multi-dimensional, multi-sectoral approach to work in

partnership with a variety of actors at different levels, in different sectors and on different issues with strategic participation of final beneficiaries, target groups and partners in improving governance, delivery, transparency, and accountability of government schemes from district to village level.

This multi-sectoral approach sends out a strong message that interventions get closer to people, right down at the community level, the poor and marginalised people's needs, and rights, do not get restricted to a tight one- or two-sector intervention, just the same way as a local authority cannot provide just one or two types of services. The choice of problem areas, methods, tools, techniques, designs are and should be based on where projects can have strongest impact and should be decided based on an analysis of people's expressed needs, local authorities' requests and requirements and the state of various public service providers, including an analysis of the performance and transparency of information of the services they deliver. The logic behind the multi-stakeholder approach is that, as actions target several sectors, they will need to engage with various partners, associates and other stakeholders who bring in their own expertise, networks, influence, and capacity to help ensure the right people access services. The case examples also stressed the vitality of local governance structures in India as the backbone of local governance and prescribed that any action must relate to their functions and involve them actively. Another critical component emerged was on Good governance, Transparency, and Accountability in fighting poverty by improving governance of public schemes, improving the access to, quality and dissemination of information of public schemes, services, and initiatives relevant to poor and marginalised populations. This involves the whole cycle of information sharing from policy making to planning, budgeting, spending, implementing, monitoring, and evaluating, auditing and results dissemination. The actions as supported under the EU project aimed to therefore help improve the transparency and accountability of public schemes and services at district and below district levels, down to village/ward level.

All the 14 CSO interventions substantiated three critical elements of a democratic decentralized information entitlement ecosystem at community level, comprising of (i) improve access to basic information relating to various government schemes and services in formats and ways which can be understood by local communities; (ii) improve the quality, analysis and dissemination of information relating to results and performance of the same public schemes and services; and (iii) improve the coherence, consistency and quality of results-oriented information management systems from village (or lowest point of service delivery) to block to district levels.

The interventions delved on critical issues like Gender. Fighting gender-based discrimination among poorest of the poor and vis-a-vis the other groups in the community was a highlight from each of the cases. There have been case studies that highlighted the essence and need for gender equality and the (multi-dimensional) empowerment of women and girls through adequate, safe, secured and reliable access to schemes and entitlements. Furthermore, focusing on the needs of indigenous peoples' rights, disability, people living with HIV/AIDS have also been encouraged in order to end discrimination of vulnerable groups. That the CSO interventions worked in backward districts brings fore the point that these regions are in real need of targeted public interventions more than by any other stakeholders. And in this direction, concerted efforts is and shall be a continuous necessity to strengthen Panchayat level access and delivery of public programmes and benefits to realize the dream of true 'Gram Swaraj' as espoused by the 'Mahatma'.

