

PROMOTING PEOPLE'S CENTERED DEVELOPMENT-

**ANNUAL REPORT
2012-2013
BINOBA AROGYA EVAM
LOK SIKSHAN KENDRA**



**At: Jaikrishna Nagar, P.O. Baday, Via: Islampur
Dist. Nalanda-801303
Bihar (India)
Phone: 9934718741, E-mail: balskraj@gmail.com**

Contact Person: Mr. Binod Sharma, Secretary

FROM THE SECRETARY'S DESK

I am happy to present the Annual Report for the period 2012-2013. This is the 26th Annual Report that I am presenting to you and I am extremely happy to point out that BALSCK has grown in confidence and strength during this period. It gives me immense satisfaction that from a humble beginning our activities has now spread to 11 blocks, 86 Panchayats and 463 villages in Bihar and 01 block, 03 Panchayats and 10 villages in Jharkhand. Our activities reached to some of the most marginalized section of the society with more than 64000 beneficiaries of various natures. Before I describe some of the changes, I would like to complement all the members of the General Body of BALSCK, and thanks the members of the Executive Committee for their complete support and guidance. I would also like to congratulate the staff and volunteers for their perseverance and their commitment to the BALSCK's vision and mission and the effort and hard work that they have put in the development of the organization.



In 2012-2013, BALSCK has taken up some of the most challenging development tasks on multiple development issues of the region. We concentrated on working on different development issues like health (general & reproductive health, homeopathic treatment, leprosy treatment, treatment to mentally ill person, mobile health clinic and emergency services), women empowerment through self-help groups, agriculture development through infrastructure development, education among illiterates and reducing human sufferings at the time of natural disasters. Disaster management committees have been formed in Supaul, Pratapgang, Islampur and Rajgir districts in Bihar to help community fight disasters with right techniques and at right time. In the meantime, BALSCK has also been associated with like minded social groups and networks in Bihar like Lok Samiti, Swaichik Manch, Peoples forum in Bihar to strengthen voluntary action for the people's cause. Exposures and our constant learning process has helped us in adopting better modules and practices for the integrated development of the community in need. BALSCK is a learning organization and is constantly innovating based on experiences that are based on experiences that are being generated in this field. We will hope to continue doing that.

In coming years, BALSCK would like to keep strengthening its activities in different parts of Bihar and Jharkhand. We would like to see that the poor rural people (men, women children, disabled and aged) would lead a life of socio-economic stability and respect. Lastly, I express my gratitude to all our donors- Misereor, Pathfinder International, CASA, Basic Needs, Nav Bharat Jagriti Kendra, Swayam Sikshan Prayog, Damien Foundation and to the individuals who trusted us and always equipped us with required resources and capacity to help deliver various development work for the progress of the community at large.

Binod Sharma
Secretary

ANNUAL REPORT

2012-2013

ORIGIN

A group of youth having strong faith in the ideologies of Shri Jayprakash Narayan established BALS K in 1982. These youths were the part of the youth wing called “Chhatra Yuva Sanghars Vahini”. Initially, the group worked as a community volunteers for years with continuing efforts for community empowerment. In the initial stages, formation and strengthening of the village level institutions was the basics of the intervention. BALS K got registered as a NGO under the Society Registration Act in 1987 and under the FCR Act in 1988.

VISION

To establish a self-sustainable society based on the values of equal opportunity, balanced growth, dignity and self-respect.

MISSION

To organize, capacitate and empower the rural poor in order to invigorate their potential towards socio-economic, cultural and political entitlements and materialization of organizational vision.

LEGAL STATUS

- Registered under Society Registration Act, 1860 by I.G. Registrar, Govt. of Bihar, Patna. Registration No. 195 dated 14.08.1987.
- Registered under FCR Act, 1976 by Ministry of Home Affairs, Govt. of India, New Delhi. Registration No. 031340012 dated 06.07.1988.
- Registered under 12(A) of Income Tax Act, 1961. No. VIII-OSD/51-1992-93.
- Registered under 49(A) of Income Tax Act, 1961. PAN No. AAATB4110E.

TARGET GROUP

Women, Children, Adolescents, Mentally Challenged People, Leprosy Patients, Disaster Affected Population and Farmers.

HUMAN RESOURCES

BALS K has a committed team of professionals, social activists and volunteers who have been entrusted with the tasks to implement different activities of the organization. At present, 331 experienced staff and volunteers are serving for BALS K. The details of the staff and volunteers are as follows:

<i>Type</i>	<i>Male</i>	<i>Female</i>	<i>Total</i>
Full time staff	19	11	30
Part time staff	18	5	23
Social activists	5	3	8
Volunteer	55	65	120

OPERATIONAL AREA

<i>State</i>	<i>District Coverage</i>	<i>Block Coverage</i>	<i>Panchayat Coverage</i>	<i>Village Coverage</i>
Bihar	Nalanda	5	45	162
	Gaya	5	64	256
	Supaul	3	9	45
TOTAL	03	13	118	463

MEMBERS OF THE EXECUTIVE COMMITTEE

<i>Sl. No.</i>	<i>Name</i>	<i>Address</i>	<i>Gender</i>	<i>Designation</i>	<i>Experience in Rural Development</i>
1.	Bhagwan Singh	NBJK, Korrah, Hazaribagh, Jharkhand	M	President	36 years
2.	Binod Sharma	At: Baday, Via: Islampur, Nalanda, Bihar	M	Secretary	31 years
3.	Srikant Sharma	Vill. Utarama, P.O. Maksudpur, Gaya, Bihar	M	Treasurer	15 years
4.	Girija Nandan	NBJK, Korrah, Hazaribagh, Jharkhand	M	Member	36 years
5.	Prabhu Nath Sharma	NBJK, Korrah, Hazaribagh, Jharkhand	M	Member	36 years
6.	Banke Bihari	At: Shivanagar, Ekangersarai, Dist.Nalanda, Bihar	M	member	31 years
7.	Pano Devi	Vill. Sonawa, P.O. Chandhari Islampur, Nalanda, Bihar	F	Member	20 years
8.	Chourasi Devi	Vill. Guljarbag, P.O. Barday, Islampur, Nalanda, Bihar	F	Member	20 years
9.	Sujita Devi	Vill. Bauridih, P.O. Bauri Sarai, Via: Islampur Nalanda, Bihar	F	Member	13 years
10.	Satyendra Singh	At: Baday, Via: Islampur, Nalanda, Bihar	M	Member	28 years
11.	Hans Raj	Old Rajendra Nagar, New Delhi	M	Member	36 years

12.	Arvind Kumar	Vill. Momindpur, P.O. Hilsa, Dist. Nalanda, Bihar	M	Member	24 years
13.	Anthony Das	Pukur Road, Kolkata	M	Member	20 years

INFRASTRUCTURE/FACILITIES

BALSK has a well equipped registered office at Islampur, Nalanda with all necessary basic facilities like phone, fax, computers and internet along with meeting halls, demo halls, vocational training center and library. The field offices of the BALKS are at Rajgir in Nalanda district, Pratapganj in Supaul district and at Fathepur, Tankuppa and Khijarsari blocks in Gaya district in Bihar.

AUDITOR

Parsad and Santosh
Madhuri Bhawan, Jamal Road
Patna, Bihar

OUR DONORS

<i>Name</i>	<i>Place/Country</i>
Ministry of Human Resource Development	New Delhi
Oxfam India Trust	Kolkata
Council for Advancement of People's Action and Rural Technology (CAPART)	New Delhi
Canadian high Commission	New Delhi
Forrad	New Delhi
Caritas India	New Delhi
CASA	Kolkata
Pathfinder International	U.S.A.
Misereor	Germany
DFID	U.K.
Bread for the World (BFW-GERMANY) Through NBJK	Hazaribagh
Cord Aid	Netherlands
Terre Des Homes	New Delhi
Basic Needs Through NBJK	Bangalore
Nav Bharat Jagriti Kendra (NBJK)	Hazaribagh
Pratishesh	Patna
Bihar Voluntary Health Association (BVHA)	Patna
Trickle Up Program	U.S.A.
Give India	Mumbai
Swayam Sikshan Prayog (SSP)	Mumbai
Damien Foundation	Patna
Mamta	Patna

ACTIVITIES DURING THE YEAR

HEALTH & DISASTER MANAGEMENT

BALSK with the support of MISEREOR, GERMANY is implementing a project for “Improving the Socio-Economic and Health Status and Disaster Management Techniques of Women and Underserved Population, Nalanda, Bihar” covering 43 villages of Islampur and Rajgir blocks in Nalanda district, Bihar. The project goal is to improve the reproductive health enhancing knowledge and bringing desirable changes in the sexual behavior increased access/control over resources better equipped for claiming of rights and entitlements and better disaster management capacity of the target groups. The target groups of the project are:

- Adolescent of age group 14-19 (male & female).
- Young unmarried male & female.
- Newly married couples.
- Eligible couples with first pregnancy/one child.
- 2nd time pregnancy and 2nd child during post partum period.
- Parents in law of eligible couples, influential Person of the target community, local administration and democratic bodies.
- Poor women, youth groups, NGO groups, PRIs and poor general communities as a whole.

PROJECT PROGRESS

a. ***Orientation Training to Project Staff:*** Orientation training to project staff is an important activity of the project for the knowledge update of all project staff on project goal, objectives and their roles and responsibilities on reproductive health, social analysis, disaster management, SHG, community mobilization, Panchayati Raj, Govt. facilities and programs, so that they can work effectively and provide quality inputs to the project implementation in the area. The process of orientation training was participatory with an emphasis on group sharing. Qualified and experienced resource persons attended the orientation training to provide right information to the trainees with equal participation of one and all. The training was held on 20-21 August, 2012 at BALSK training hall in Rajgir, Nalanda. 24 participants participated in the training program and get informed on important topics/issues like health, SHG promotion, Govt. welfare schemes and programs, panchayat raj and project management.

b. ***Training on Disaster Management:*** Bihar have inseparable history of disaster, with the river being responsible for some of the most devastating floods caused in the state. The effect of flood is such that people always remain in fear of it which hampers their socio-economic development process to a large extent. The govt. disaster management resources are in poor state therefore people remain helpless when flood comes. In view of this problem following programs were organized:

c. ***Technical Training to Project Staff:*** Technical training to project staff on disaster management was imparted in order to improve technical skills of the project staff on disaster management, so that they can help poor people come out from the affects of the disaster and rehabilitate themselves to live. As Nalanda district is disaster prone therefore this training is of great importance here. The details of the training are as follows:

<i>Date</i>	<i>Venue</i>	<i>Participant</i>	<i>Topics Covered</i>
06-07/09/2012	BALSK training centre, Islampur, Nalanda	26	<ul style="list-style-type: none"> - Identification of vulnerable groups. -Pre and post disaster preparedness. -How to use local resources at the time of disaster. -How to minimize the effects of disaster.



d. **Training to SHG Leaders on Disaster Management:** In order to provide support to Disaster Management Committees, BALSK provided training and empowered the SHG leaders to come forward to know about the disaster management techniques and prepare for disasters. The details of the training are as follows:

<i>Date</i>	<i>Venue</i>	<i>Participant</i>	<i>Topic covered</i>
28-29/04/2012	Islampur, Nalanda	44	<ul style="list-style-type: none"> -Preparation of pre-disaster management techniques. -Role & responsibility during disasters. -Prevention from diseases during and after disasters.
08-09/05/2012	Rajgir, Nalanda	41	-do-
Total		85	-

e. **Meetings with PRI members, NGO groups, youth groups, Govt. functionaries, community influencers, NGO groups, youth groups, Govt. functionaries, community influencers etc. on Disaster Management:** This is an important activity of the project to disseminate information to the above stakeholders on disaster management to spread right messages and preparation of different groups and stakeholders towards the better management of disasters. As a result, the target group has now being sensitized on the issue and this has become a general discussion of their daily life. The details of the training are as follows:

<i>Date</i>	<i>Venue</i>	<i>Participant</i>
20/09/2012	Islampur, Nalanda	26
17/09/2012	Rajgir, Nalanda	28
Total	-	54

HEALTH PROGRAMS

Health is a major concern for the poor people in Bihar. BALKS'S intervention in health under the Misereor project is based on its understanding that health concerns are the root of vicious cycle of poverty that restrains communities from realizing their true potential in Bihar. The organization's health intervention is cantered towards reproductive health that is primarily ignored till now. The thrust systems, motivating and capacitating them to serve people better. At the same time, BALKS promoted use of low cost but effective homeopathic treatments to meet their different health needs. The details of the activities undertaken are as follows:

(a) **Training of SHG Members and Swasthya Doots:** In order to provide economical treatment to the poor patients with larger effects, a training program for the members of self-help groups was conducted. The idea is to popularize low cost homeopathic treatment to active members of SHG as well as other literate women of the villages, so that their understanding on reproductive health may improve. The training was instrumental in building capacity of the target group in a right direction. The "Swasthya Doots" were also encouraged to participate in these mobile health camps of the BALKS to improve their learning and experiences in a right manner.

Date	Venue	Participant	Topics covered
15-16/04/2012	BALKS training centre, Islampur, Nalanda	39	<ul style="list-style-type: none"> -Why homeopathic medicines? Cost effectiveness and its relevance in rural set ups. -Types of diseases, their identification, medicine etc. -Doses and process of taking homeopathic medicine. -How to make prevention from seasonal diseases. -Contraceptives and its uses.



(b) **Training of Dai/Mamta/Asha:** BALKS believe that training of traditional birth attendants like Dai/Mamta/Asha is essential to minimize health casualties in the villages and minimize health risks at large. The objective of the training is to provide them basic knowledge of health care. The results of the training were good that helped in improving the health services and delivery mechanism which resulted in improving

the mother and child health scenario and improving the percentage of institutional deliveries in the target area.

<i>Date</i>	<i>Venue</i>	<i>Participant</i>
20-22/04/2012	Islampur, Nalanda	41
24-26/04/2012	Rajgir, Nalanda	38
Total	-	79



(c) **Organization of Cultural Programs:** Cultural programs in the form of street plays were regularly organized by BASK in the intervention villages on reproductive health issue. The duration of one play was of 1-2 hrs on an average with maximum three plays in a day. These street plays started with community mobilization through folk songs. The plays started when villagers gather at one place. In 2012-13, 45 such plays and 10 wall paintings were done in different villages of Islampur and Rajgir blocks covering important messages on the issue concerned.

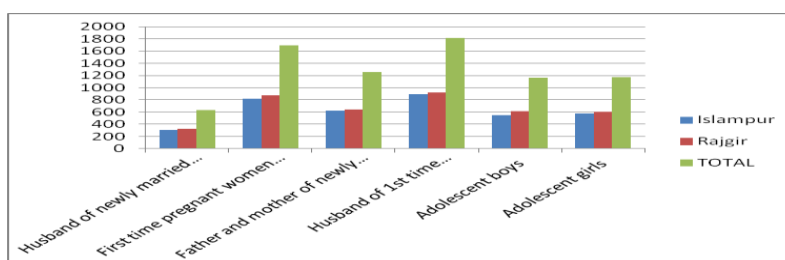


(d) **Home Visits:** Regular home visits were also made to motivate, mobilize and counsel the target group like men having 0 child, women having 0 child, 1 child mother, first time post partum women, first time pregnant women and second time pregnant women by the use of IEC materials focusing on spread of knowledge and education to them on the key aspects like delaying first child, use of contraceptives, safe abortion, medical check ups during pregnancy, importance of spacing between two child, reproductive health and family planning, breast feeding etc.

(e) **Group Meetings:** Group meeting is an important approach for making community agree and development of discussion habits and reach up to a conclusion unanimously. It is quite helpful in minimizing community myths and misconception in terms of reproductive health and ARH issues. In 2012-13, group meetings were conducted with following groups:

- . Newly married couples.
- . Adolescent boys and girls.
- . First time pregnant women and post partum women.
- . Men with 1 child and in the way to became father first time.
- . Father and mother- in- law of newly married couples.

GROUP MEETING DETAILS



During group meetings discussion were made on following RH topics:

<i>For newly married couple</i>	<i>Adolescent boys and girls</i>	<i>First time pregnant and post partum women</i>	<i>Men with 1 child and in the way to became father 1st time</i>	<i>Father and mother of newly married couple</i>
Delay in first child until the wife does not attain 21 years, Regular use of contraceptives before the pregnancy	Right age of marriage, Reproductive health and family planning, Menstruation period, Nutrition, Misconception, Delay in first child, Use of contraceptives.	Importance of spacing between first and second child., Regular use of contraceptives after the pregnancy, regular checkup during pregnancy period, administration of TT injections.	Regular checkup during pregnancy period. Administration of TT injection, Importance of spacing between first and second child, Regular use of contraceptives after the pregnancy.	Do not put pressure for first child on couples, benefits of the birth of first child as the age of 21 years, Provide motivation for the same.



(f) **Establishment of Grain Banks:** In order to provide regular supply of grains to poor people in the target area, a grain bank has been established at Islampur and Rajgir blocks. Farmers, PRI members and people of the local community provided their full support in establishment of grain banks. As it was decided that the quantum of grain donation will be minimum of 1 kg at the production of 40 kg of grain is playing a vital role in sustainability of these grain banks. This has not only making these grain banks used for meeting the needs of poor people but also maintain the banks to be used during disasters and emergencies.

(g) **Mobile Health Camps:** In 2012-13, 245 mobile health camps were organized in 43 intervention villages periodically. The mobile health camps were headed by a homeopathic doctor supported by ANMs, and Compounder. The objective of organizing the mobile health camps was to provide proper and timely homeopathic treatments to the poor people for their improved health status. 8,790 patients were successfully benefited by these mobile health camps.



In 2012-2013, BALSKE was also been supported under the **PRACHAR PROJECT OF PATHFINDER INTERNATIONAL, USA** in Fatehpur and Tankuppa blocks in Gaya district in Bihar. Under this project, 160 villages were covered by BALSKE. The goal of the project is to put a significant impact on youth fertility for delaying and spacing birth by implementing a more focused Prachar model through a government and civil society partnership. The project has following specific objectives:

- a. To promote supportive environment among the families and community to encourage young couples to change reproductive behavior for delaying and spacing birth.
- b. To change the belief of young couples of 0 and 1 parity regarding RH/FP issues and change their reproductive behavior to delay the first child until the mother is 21 years and space and subsequent birth by at least three years.
- c. To change attitudes and beliefs related to RH and FP issues of adolescents by providing essential information and skills to adopt healthy and risk free Sexual and Reproductive Health (SRH) behavior when they enter into adolescence, adulthood and marriage.
- d. To advocate the program with local government functionaries so that they appreciate the need of a program that address issues of youth fertility.

ACTIVITIES HIGHLIGHTS

(a) Home Visit by ASHA

<i>No of ASHA Involved</i>	<i>Beneficiary</i>	<i>Total Home Visits</i>
150	0 child and 1 child mother	11,546

(b) Group Meetings by ASHA

<i>No of ASHA Involved</i>	<i>Beneficiary</i>	<i>Total Group Meetings</i>	<i>Total Participants</i>
150	Mother of 2 child and above	1,208	14,419

(c) Group Meetings by Male Communicator

<i>No of MC Involved</i>	<i>Beneficiary</i>	<i>Total Group Meetings</i>	<i>Total Participants</i>
27	0 child and 1 child father	2,364	14,566

(d) Group Meetings by Male Communicator

<i>No of MC Involved</i>	<i>Beneficiary</i>	<i>Total Group Meetings</i>	<i>Total Participants</i>
27	Father of 2 child and above	1,964	12,843

(e) HSC Meetings at Panchyat Level

<i>No. of Meetings Held</i>	<i>No. of ASHA Participated</i>
189	1,017

(f) Sector Meetings at Block Level

<i>No. of Meetings Held</i>	<i>No. of ASHA Participated</i>
48	1,158

(g) **Wall Paintings:** Total 135 wall paintings were done covering different health issues.

PROGRAMS FOR DALITS PROMOTION

BALSK with the support of **CASA** is implementing a project for “improving the participation and status of Dalits in the society” covering 10 villages of Pratpganj block in Supaul district, Bihar. The project objectives are to:

- To increase women role, access and control over family level decisions, income and savings for 500 Dalit/marginalized families through gender based training, exposure visits and follow-up activities.
- To ensure active participation of 500 Dalit/marginalized women and their male counterparts in Panchayati Raj events (Local governance, planning and decision making process) to finalize village micro plan (common issues like road, school, health care, drinking water, community hall etc.) and family based (benefits/entitlement) demand note through a 2 tier capacity building program at Partner NGOs and women SHG level (community level).
- To prepare village communities to manage future disasters especially floods through DRR/CBDP training, developed tools and structure.

PROJECT PROGRESS

(a) **Interface Meeting with SHG members, Govt. Officials and PRI Representatives:** An interface meeting was organized with the SHG members, govt. officials and PRI representatives to prepare strategy and planning for improving the status of Dalits in the society. The details are as follows:

Date	Venue	Participant
July 13, 2012	Pratapganj	26

(b) **Environment Awareness Meetings with SHG Members and their Male Partners, Farmers and Youth Groups:** The details are as follows:

Date	Venue	Participant
June 06, 2012	Pratapganj	48

(c) **Formation of Disaster Management Committees and Disaster Management Task Force:** 10 DMCs at village level were formed in Pratapganj block in Supaul district. The DMC will act as a catalyst to disseminate regular and timely information to the villagers on disaster management. They were also capacitated for doing hazard mapping. It has also been decided during the training that DMC will form a Disaster Management Task Force (DMTF) comprising 6 persons in each 10 villages that will be responsible for a. Timely and correct information at the time of disasters b. Rescue precautions c. Relief measures d. Livestock management e. Administration of first aid f. Shelter preparation. The DMTF members were amicably trained by BALS, so that they can readily use their expertise/skills during disaster.



DMC & DMTF MEMBER ARE PREPARED MICRO PLAN AND VULNERABLE ANALYSIS

(d) **Promotion of Sustainable Agricultural Practices:** 45 small and marginal farmers were involved in the demonstration of SRI Vidhi in 2 Panchayat in Pratapganj block. The purpose behind it is to mobilize farmers to adopt SRI Vidhi of Paddy cultivation as it gives additional yields in lesser time in comparison to the conventional method. The

progress is good and farmers have started farming through this process and able to generate more crop yields. In the meantime, grain banks were also established in each



10 villages that may benefit at the time of disaster.

MENTAL HEALTH CARE PROGRAM

BALSK with the support of BASIC NEEDS/NBJK has been successfully involved in rehabilitation and normalization of the mentally ill person in their own environment. In 2012-2013, 195 mentally ill persons were helped through regular medication and rehabilitation. 35 persons were also provided economic support for rehabilitation by linking them with small economic activities.

ACHIEVEMENTS HIGHLIGHTS

<i>Activity</i>	<i>Achievements</i>
Identification of mentally ill person	199 patients were identified.
Field consultation meeting/community meetings	15 field consultation/community meetings were organized.
Formation of Self-Help Groups	5 SHGs have been formed.
Training to the community volunteers	24 volunteers were trained.
Formation of block and district level federations	1 block and 1 district level federations were formed.
Counseling of mental ill patients and his/her care taker.	Regular counseling of mental health patient and his/her care taker were organized.
Distribution of revolving fund for small business.	34 Beneficiaries are benefited
Organization of health camps	<ul style="list-style-type: none"> ▪12 health camps were organized and 169 patients were regularly treated and given advices. ▪117 mentally had shown sign of improvements. ▪58 patients were involved in income generation activities.



SDM HILSA IS ADDRESSING THE WORKSHOP

COMMUNITY RESILIENCE BUILDING

BALSK is supported by **SWAM SIKSHAN PRAYOG (SSP), MUMBAI** to build community resilience to overcome natural disaster and hazards on its own. Under the intervention, 10 villages of Supaul district in Bihar were selected where local community of the area underwent different activities like training, resilience demonstration and learning exchange visits. Local NGOs and grass root communities of the area ably participated in these activities to make it a success. The details of the activities are as follows:

Sl.No.	Name of Activity	Outcome
1.	Village identification and SHG formation	SHG were formed in Chhitha, Mansinghchakala, Imampatti, Suriari, Tapara Tola, Aadiwasi Tola, Bhawanipur (North), Surjapur, Bhawanipur (South) and Dhumania villages of Pratapganj block in Supaul district.
2.	Training on mapping by Master Trainers with selected partners and community	10 Master Trainers were selected to provide training to the community members.
3.	Facilitation of vulnerability and hazard mapping	Hazard mappings were completed in 10 villages through community participation.
4.	Sensitization workshop with grassroots community and NGOs on the role of community in DRR	3 Workshops were organized in Pratapganj block which were participated by NGO representatives, PRI members, SHG members and community members.

5.	Resilience demonstrations in 3 villages by grassroots community	3 Demo units were completed. 1 Vermin compost unit and 1 acre of maize crops cultivation in Imampati. 2 Potato crops in ½ acre in Chhitha. 3 Potato crops in ½ acre in Mansinghchakla.
6.	Learning exchanges visits	4 learning exchanges visits were organized from Pratapganj to Birpur & other internal places.

PROGRAM FOR LEPROSY PREVELANCE

“Leprosy” is probably the oldest disease afflicting the mankind. Possibly it was originated in Africa and spread very early to India and from there to China. There are references in Buddhist literature. In Vedic reference it is mentioned as "Kushth Rog". It has the maximum social stigma attached to it. A common belief that leprosy is due to past sins committed by the person. There is a belief that leprosy is hereditary and incurable. There are many misconceptions about disease that causes social aversion and ostracism against leprosy patients leading to the high deformity. But due to scientific inventions leprosy has been identified a disease that can be eradicated. With the introduction of Multi-Drug Treatment (MDT) during 1981 this disease is very well under control and may be eradicated.

Despite the extensive implementation of multiple drug therapy (MDT) in most leprosy-endemic countries world-wide since 1982, bringing about a remarkable reduction in prevalence, there are still regions at the sub-national level where the implementation of MDT remains difficult. The state of Bihar (population 86.3 million) in India is a good example of such a region. Previously rated as one of the most highly endemic states, it still contributes about 21% of the total caseload in India and about 12% of the global caseload. For various reasons, case-finding and drug treatment have lagged behind the progress made in most other states in the country.

In 2012-2013, BASK has been supported by Damien Foundation India Trust,, implemented different activities with good community participation and support. The details are as follows:

- A survey was completed for the identification of Leprosy patients in 5 blocks of Gaya district i.e. Fatehpur, Tankuppa, Mohanpur, Wazirganj and Barachatti. A total of 58 leprosy patients are identified.
- Organized self care training in Fatehpur and Wazirganj blocks in Gaya district. In the training program, leprosy patients, ASHA and ANM participated.
- Follow up of the self-care was done.

INFORMATION DISSIMINATION INITIATIVES

BALSK believes that information dissemination is important for the progress of the society. In 2012-2013, workshops were organized in Islampur block in Nalanda district in Bihar covering different topics of relevance. These programs were held with the support BALSK and community contribution and donation. Experienced resource persons and eminent personalities of the area participated in these workshops to share their views with the participants. The details are as follows-

(a) **Workshop on Child Labor Act:** The Child Labor (Prohibition and Regulation) Act, 1986 is one the most debated acts regarding children in India. It outlines where and how children can work and where they can not. In order to disseminate information on the Act a workshop was organized by BALSK in Islampur on 18.05.2013. 48 people participated in the workshop to get in-depth information of the Act.

(b) **Workshop on HIV/AIDS:** HIV/AIDS epidemic is emerging as a major challenge to the developing countries as the infection is targeting the productive age group of the population thereby directly affecting the development of the nation. Till date no cure is available for HIV/AIDS and therefore promoting preventive measures is the only way out to protect ourselves against the virus. The knowledge about HIV/AIDS not only protects against the infection, but it also helps us in understanding various myths and misconceptions related to it. Awareness leads to informed choices and sensitizes us to create a stigma and discrimination free environment. In order to do that a workshop was organized by BALSK in Islampur on 10.01.2013. 62 people participated in the workshop and got benefitted.



(c) **Workshop on Water and Sanitation:** According to the latest estimates of the WHO/UNICEF released in early 2013, 36% per cent of the world's population – 2.5 billion people lack improved sanitation facilities, and 768 million people still use unsafe drinking water sources. Inadequate access to safe water and sanitation services, coupled with poor hygiene practices, kills and sickens thousands of children every day,

and leads to impoverishment and diminished opportunities for thousands more. Lack of awareness on these vital aspects of life making the situation worse. In order to sensitize people on this aspect, a workshop was organized by BALS K in Islampur on 22.02.2013. 51 people participated in the workshop and got benefitted.



(d) **Climate Change and DRR:** Climate change and disaster risk reduction are closely linked. More extreme weather events in future are likely to increase the number and scale of disasters, while at the same time, the existing methods and tools of disaster risk reduction provide powerful capacities for adaptation to climate change. As these issues are new, people lack awareness on it. In order to sensitize people on this important issue, a workshop was organized by BALS K in Islampur on 16.09.2012. 34 people participated in the workshop and got benefitted.



■

