**Throwback 2011: 06 Years of Public Health Champion**

Ekjut was among six organizations/individuals to be awarded the Public Health Champions, on April 1, 2015 by WHO India.

**10 Years of Trial of the year Award**

‘The Ekjut Trial in Jharkhand and Odisha’ earned the recognition of ‘Trial of the Year’ (17th May, 2011) by the Society for Clinical Trials (SCT) as an extraordinary cluster randomized controlled trial, conducted with high quality in a very difficult setting, and achieving dramatic results with potential benefits for humanity.

**COVID 19 Relief & Helpline:**

**Support** to vulnerable families with dry ration continued in villages and hamlets of West Singhbhum district of Jharkhand.

**Under** the guidance of District Administration of West Singhbhum to manage COVID 19, Ekjut team handed over pulse oximeters and N95 masks for the 450 testing teams of two members each (ANMs, ASHAs & other frontline members) formed in the district for all the panchayats. This was possible with the generous help from our partners Children’s Investment Fund Foundation, AEIN - Aide à l’Enfance de l’Inde et du Népal and Yumetta Foundation.

**To** address vaccination hesitancy, short videos were developed in 10 local dialects and 2 languages in an effort to mobilize community members for immunisation. Youth leaders, community members and colleagues from different regions shared their experiences of vaccination in these videos.

**In** May 2021 when the number of COVID-19 cases was on the rise especially in the rural areas of Jharkhand, Ekjut extended support to the district administration through helpline calls to COVID-19 positive patients who were in home isolation. This was to provide counselling and additional ration support to vulnerable families, if needed. This was followed by calls to the community members who had received the vaccination to enquire about their health status and providing appropriate information and counselling to avoid vaccine hesitancy for the second dose. Over 3000 calls have been made for vaccination follow-up and it is still continuing.

**Survive:**

More than 3.8 lakh individuals from Particularly Vulnerable Tribal Groups (PVTG) inhabit different districts of Jharkhand (Census 2011). Living in forested areas, mostly dependent on forest products and traditional farming for livelihood, the health indicators like neonatal mortality and maternal deaths are relatively higher among them.
The accessibility to healthcare facilities, affordability, misconceptions and lack of appropriate information regarding health are other major challenges they face. The PVTG initiative started in two blocks each of Sahibganj and Gumla districts where ASHAs (Sahiyas) belonging to the same community were trained on Participatory Learning and Action (PLA) approach to focus on issues of neonatal and maternal health issues to conduct the monthly meetings in their own dialects. To further overcome the language barrier, a pictorial module was designed for easy recall and to enable them to deliver the contents more effectively after their trainings.

**Learning from Participation in PLA Meetings Helps in Neonatal Survival:**

Shanti Paharia had lost 2 children in the past and was pregnant with her third child when PLA meetings started in her hamlet. Both her previous deliveries were at home without availing of any antenatal benefits. While participating in PLA meetings, she learnt the importance of ANC check-up, and registered herself, had the mandatory 4 ANCs, took Iron-folic acid tablets, TT injections and maintained a nutritious diet. They had called for the ‘Mamta Vahan’, but the baby was born on the way. The ASHA took appropriate care of the child before they reached the hospital where the child received immunization and was looked after for the next 2 days. The weight of the child after 15 days was 3 kg and Shanti is thankful to the ASHA for the PLA meetings she facilitated in her village. **Story as told by: Ashutosh, Jharkhand**

**Thrive:**

**CHANCHAL (Childhood Activities for Nutrition, Child Health, and Learning)**

Around 25% of the world’s 250 million children aged 0-5 years who are at risk of not meeting their full developmental potential live in India. Among them, an estimated nine million children under-five who are particularly at risk are from the indigenous communities. Early Childhood Development (ECD) interventions have the greatest benefits for children at highest risk. The CHANCHAL (Childhood Activities for Nutrition Child Health and Learning) initiative aims to adapt creches and participatory nurturing (parenting) groups through components of nurturing care such as safety, nutrition, health, opportunities for early learning, and responsive care delivered to caregivers and children under the age of three for Early Childhood Development with rural, largely indigenous communities in two districts of Jharkhand and Odisha.

**Transform:**

Under the Jharkhand Initiative for Adolescents Health program (JIAH), Yuva Saathis were sensitized about the forest conservation issues and their role in safeguarding the forests where they live.

According to the village elders, three decades back Badaburu near Porlong village used to be a lush green forest. This hilly patch was completely degraded by 2010 because of forest fires and tree felling. Restoration efforts by Yuvasathis, with support from the community and the forest department have started showing results. Responding to the theme of restoring the landscape 500+ adolescents participated in campaigns, trekking activities safeguarding the environment.
Gurubari Mahato: From Realizing the Issue to Plan Her Actions for a Better Life

“I am a survivor of witch branding. My family (two daughters) was targeted after my husband’s death by my neighbour who also happened to be the village headman. We were held responsible for any ill happening in his family. He manhandled my elder daughter and accused us for one of the death in his family. Around this time we attended the participatory meetings on gender based violence in our village.

In one such meeting, I chose the picture card on witch branding as my priority problem and later discussed this with the ASHA. She helped us in lodging a complaint at the police station. The Police threatened the headman, asked him to compensate me and all the accusations have stopped since. My elder daughter is now married and this is my younger daughter.”

Photo Story shared by Dr. Nirmala Nair

Webinars & Conferences

Routes to Scale for Participatory Learning and Action

Rajkumar Gope, Team Leader at Ekjut, presented Ekjut’s experiences of scaling PLA through the public health system across a population of 25 million people in Jharkhand, India. Scale up, in this context, usually means helping to promote adoption of improved practices by government agencies and/or by private providers, and persuading governments or citizens to pay for those services.

Awareness Session with Rural Youth for restore our Earth:Earth Day Festival

Yuva Saathis or Youth Facilitators of Ekjut presented a session focused on the work of young people in the adolescent initiative. They discussed about their contribution towards restoration of earth, their environment, their forests and their experience of working in collaboration with the forest and agriculture departments within the Government system and the community in achieving this.

The Gender In Humanitarian Action WG and GBV AOR For Asia Pacific Present: A Listening Session

Dr Dhanashri represented Ekjut and shared the glimpse of rural and tribal areas’ real scenario for COVID-19 vaccination through gender lens. She highlighted that India has a long history of vaccinating children and pregnant women; the program is free of cost and it happens at village level closer to the communities and there has been door to door mass immunisation campaigns e.g. polio. India has some of the largest vaccine manufacturers in the world. Hence, with that context we know how India can do better.
Anamaya: The Tribal Health Collaborative

The Anamaya Collaborative is a multi-stakeholder initiative of the Tribal Affairs Ministry supported by Primal Foundation and Bill and Melinda Gates Foundation (BMGF). It is bringing together governments, philanthropists, national and international foundations, NGOs/CBOs to end preventable deaths among the tribal communities of India. It has the objective of converging efforts of various Government agencies and organizations to enhance the health and nutrition status of the tribal communities of India. It aims to build a sustainable, high performing health eco-system to dress the key health challenges faced by tribal population of India. Ekjut’s innovative Participatory Learning and Action (PLA) features in this collaborative, along with some other innovations from across the country.

Sorcery Accusations & Related Violence in PNG - the Harm and the Healing

Dr. Nirmala discussed an intervention led by Ekjut that helped to rise above harmful beliefs and practices related to children’s and women’s health that result in women being accused of sorcery in India. She outlined the link between high mortality rates among infants, children and women and accusations of witchcraft and the learning of that encouraged women to discuss, prioritize health and societal issues, and to implement prioritized and feasible strategies collectively.

The aim of this Conference was to take stock of what changes have occurred in addressing Sorcery Accusation Related Violence in Papua New Guinea. The participants appreciated the circular approach of empowerment to understand and address their own problems by the people.

Women Empowerment: Issues, Evidence and Policy Response

On the occasion of International Women’s Day Vikash Nath from Ekjut participated in a panel discussion organized by Women Development Corporation, Govt of Bihar in Collaboration with International Growth Centre of London School of Economics and Asian Development Research among others to stimulate thoughts on experiences of empowerment of women through Participatory Learning and Action Approach.

New Initiative:

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