



**Self Employed Women's Association,
Punjab
Programs and Activities Undertaken
from 2017-2020**

Index

S.No	Subject	Page Number(s)
1.	Summary of SEWA Punjab Work, 2017-2020	3-5
2.	SEWA Punjab Report 2017-18	6- 57
3.	SEWA Punjab Report 2018-19	58-94
4.	SEWA Punjab Report 2019-20	95-126
5.	SEWA Punjab Report, Post Lockdown, March 2020	127-139

Self Employed Women's Association, Punjab

Summary of Work Done, 2017-2020

SEWA is a globally recognized multi state trade union of women workers in the informal sector that aims to empower working women holistically through the goals of –

- **Full employment**, work that provides economic security, food security and social security
- **Self-reliance**, to support women towards being autonomous and self-reliant both economically and in terms of their decision-making ability.

SEWA Punjab began its work in **2016 in collaboration with the National Health Mission to train and facilitate the Mahila Arogya Samiti members**, who would take up and plan on action to address various civic and health issues in their localities. Through these trainings it was aimed to build on grass root women's leadership as agents of change who would lead the NHM initiatives. Post the successful culmination of this program, **SEWA Punjab continues to voluntarily work with the MAS, as well as develop several programs, trainings, schemes, and interventions to empower marginalized women in rural and low-income areas in Punjab.**

SEWA signed an **MOU with Government of Punjab** which enabled SEWA Punjab to get in touch with several key line departments and understand the requirements of different areas and plan its work accordingly. The **Department of Social Security and Woman and Child development** has enabled SEWA to focus on linking women in different districts to link to social and security benefits like pensions, basic documents etc and expand its programs and activities.

Our gratitude towards the **Government of Punjab for the funding** which enabled us to start programs like **the Business Correspondent program and training of elderly and child care program (Sangini)** which enabled us to reach out to thousands of women and expanded our reach in urban and rural areas of six districts of Punjab. In this process, we have reached out to thousands of women and have helped empower them in a holistic manner. Following are the statistics of number of beneficiaries of our work reached out to across the years-

S.no	Year	Number of families that benefitted
1.	2017-18	7000
2.	2018-19	10,000
3.	2019-20	40,000

Broadly, the work done by SEWA Punjab from 2017 to 2020 is of the following themes-

Grass root Women’s Leadership and Mobilization-

Through the MAS and mohalla meetings, **SEWA Punjab has trained women to take up the health and civic concerns in their locality.** We also facilitated the training of Agewans, women leaders who would be a link between SEWA Punjab and the community and would also be responsible for mobilizing them. Agewan Vikas Training was conducted in to equip them. **The Indian School of Business (ISB), Mohali conducted an impact assessment of the training of the MAS, results of which are attached in this report.**

Health Awareness and Accessibility

SEWA Punjab conducts **health awareness sessions**, activities and camps on several themes such as **anaemia, nutrition, menstrual hygiene, pre and post-natal health of women** and so on. Health activities and camps were conducted. Further, to promote access to healthcare, overcome administrative barriers and help women reduce expenditure, SEWA Health Saathis directly refer women to government and private healthcare centers. Health Saathis pass on the skills and experience to women members to lead others to medical centers to ensure sustainability.

Livelihood and Skill Training-

To break the cycle of poverty, SEWA facilitates accessible **skill building opportunities along with soft skills** that are necessary to thrive in the workplace for young women and girls. SEWA Punjab has over the years done **outreach to identify the skill sets of women** and conducted workshops and trainings to facilitate their employment. We facilitated the

formation of an SHG, as well as training centres for stitching. A notable project with several success stories has been the **Sangini Project 2019**, an initiative to **train women in elderly and child-care for livelihood.** We also took part in **LAADO 2019- the first SHG Mela in Punjab and conducted an orientation.**

Advocacy and Social Security Linkages through SEWA Shakti Kendras (SSK)-

These are mobile centres run by trained women of the community who provide others with information and resources, as well as assistance to **link them to various government schemes**, other SEWA facilities, and so on, and are fully functioning since 2018. Thousands of women have been **linked to welfare schemes, provided basic documents like Aadhar Card, PAN Card**, and so on. These centres are crucial in making sure that benefits reach out to the poorest of poor women.

Community Outreach

SEWA Punjab visited and conducted sessions across several areas to identify the issues faced by the women as well as interventions to address them. We also conducted trade identification and facilitated the livelihoods of these women. For instance, **we encouraged girls from Jyanti Majri with stitching skills to take part in the Mahila Market in October 2018 and sell their products, which went successfully.**

Financial Inclusion – Business Correspondence Program

In 2019, the Business Correspondence Program began with the aim of **training women of rural remote areas of Punjab to become business correspondent agents to deliver financial services to the unbanked areas at affordable cost**, which empowers both her and the community. We mobilized women more than 2000 women during our field visits to understand the concept and process, identified those keen to work as CSPs and conducted technical training. **Fifteen women** in the community have been trained as SEWA Bank Saathis Around **8000 people are beneficiaries** of the business correspondence program

Self Employed Women's Association,
Punjab
Report, 2017-18

Self-Employed Women's Association, Punjab

(2017-18)

The year 2017-18 has been a significant one in which we carried out the following/ which is detailed in this report-

1. **Completion of Mahila Arogya Samiti (MAS) Training in May 2017** – SEWA began its work in Punjab in collaboration with the NHM to train MAS, or women's local health committees. It successfully completed the sessions- 349 trainings were carried out by the team in total across 11 assigned districts in May, and a review meeting of the same was held. SEWA Punjab continues to facilitate these MAS through mohalla meetings and from June 2017 to June 2018, it conducted 1141 meetings and reached out to 9180 women
2. **Signing of MOUs and putting forth Project Proposals-** this year, SEWA Punjab reached out to various authorities and organizations, and signed two MOUs – one with the **Government of Punjab**, and with the **Punjab University**. Several project proposals were prepared and put forth to government departments, a list of which is provided in the report.
3. **Workshop Conducted with Women Sarpanches** – forty-seven women sarpanches from across Punjab attended this workshop conducted by SEWA Punjab & DCWSD, Panjab University and sponsored by State Institute of Rural Development, Punjab. The long term expected results of the workshop is to build the capacity of upcoming women sarpanch of Punjab and to bring the women's voice in the public sphere.

1. Mahila Arogya Samiti (MAS) Training

In order to address the significant lack of awareness and effective healthcare in low income urban areas in India, the National Health Mission (NHM) launched the program **Mahila Arogya Samiti (MAS)**, an urban slum based women's health committee aimed at actively involving women in the planning, implementation and monitoring of health and other civic services. Central to the MAS is the training of women leaders responsible for leading the NHM initiatives. SEWA collaborated with the NHM in 2016 with the objective of identifying and training the MAS in eleven districts in Punjab. This project was completed in May 2017, post which SEWA Punjab continues to voluntarily work with these group of women in the form of mohalla meetings to discuss and take action on civic and health issues, as well as facilitating women's leadership in their local communities,

1.1 MAS Training Progress 2017

In the month of April 2017, we completed 328 Trainings and crossed the 92% mark of Mahila Arogya samiti trainings. We successfully finished trainings in 19 towns- Jalandhar Cantt, Tarn Taran, Gurdaspur, Batala, Ferozpur, Faridkot, Kotkapura, Moga, Muktsar, Malaut, Sangrur, Dhuri, Sunam, Malerkotla, Patiala, Rajpura, Nabha, Samana and Ropar are complete and we have been issued completion letters by the local health officials. Till April we covered 4165 MAS and reached out to 12617 women.

In May 2017, SEWA concluded its training of Mahila Arogya Samiti members' training by SEWA in 11 districts of Punjab. SEWA has successfully finished the project in all assigned districts. In the concluding month, SEWA had finished a total number of 349 trainings out of 356 assigned in the MoU. The report of the conclusion of the MAS Training Program is attached below-

1.2 Mahila Arogya Samiti Training Report, May 2017



Monthly Project Progress Report MahilaArogya Samiti training (May, 2017)

By SEWA Bharat,
Punjab

Table of Contents

1. Coordinator'sbrief
2. MAS follow up meetingpicture
3. Review MeetingReport
4. Summary ofActivities
5. TrainingStatistics
6. Trainingdates
7. Guestremarks
8. Civic issues raised intrainings
9. PhotoGallery

COORDINATOR'S BRIEF

The month of May was the concluding month for the Mahila Arogya Samiti members' training by SEWA in 11 districts of Punjab. In November 2016, SEWA was awarded this project by the National Health Mission, Punjab and was allocated 6 months to complete it. SEWA has successfully finished the project in all 11 assigned districts. In Jalandhar town 7 trainings were left due to ambiguity on MAS lists and areas where they were formed. SEWA has intimated about this issue to concerned authorities in NHM and received no further instruction till the time of filing this report. Till the month of May, 2017 SEWA had finished a total number of 349 trainings out of 356 assigned in the MoU.

On May 2, 2017 the SEWA Punjab coordinator Sunanda Dikshit along with the office Administrator Assistant Priyanka Bhatnagar visited Amritsar to check the quality of the training in its last leg. They had visited Kala Ghanpur, Chhretta, Guradwara Lakshmi Narayan, Narayangarh, Gumtala PHCs and met with the NHM officials, SEWA trainers conducting training, ASHAs and the participants of the training workshops. In each workshop Ms Dikshit appealed to the participant to keep the MAS alive and strengthen it with their collective effort. SEWA received a very enthusiastic response from the participants. It was heartening to see many well educated and active Mahila Arogya Samiti members in the trainings. The SEWA coordinator appealed to them to take the leadership of their MAS and help other woman to get their entitlements. Mahila Arogya Samiti members assured the visiting team to hold regular monthly meetings and raise the health and civic issue of their area. The participants of this workshop were very happy to get educated about the MAS, its role and responsibilities and various health programs, which they were not aware of previously. Ms Priyanka Bhatnagar discussed some administrative and financial matters with the trainers.

On May 5, 2017 the SEWA Punjab team had held its final review meeting to assess the outcomes of the training held in 21 towns of 11 districts. It was held at the Judicial Academy, Chandigarh in which SEWA trainers from the district had come and shared their field experiences. The review meeting was attended by the NHM Director Dr Shashi Kant and the Nodal Officer UHM and Consultant Policy & Planning Mr Navdeep Gautam. The Head of the School of Public Health, PGI Dr Rajesh Kumar, Associate Professor, Community Health, School of Public Health, PG Dr Manmeet Kaur, Assistant Director, Department of Health and family Welfare, Dr GB Singh and Head of the Department, Public Administration, Panjab University Dr Ramanjitkaur Johal. SEWA's President MsRenana Jhabvala, Director, SEWA's social security, Ms Mirai Chatterjee, SEWA's National head, Programs, MsSanchita Mitra, SEWA's Head for Woman and Child Health, Ms Susan Thomas and National Finance Manager, SEWA, Ms Smarnika Naik also participated in the deliberations. The detailed address of the SEWA Punjab coordinator in the review meeting is attached with this report. The report

FOLLOW UP MAS MEETINGS		
TOWN	APRIL	MAY
Samana	3	3
Malerkotla	2	4
Ferozpur	3	2
Sunam	3	2
Patiala	5	5
Moga	2	2
Kotkapura	4	4
Malout	2	1
Faridkot	1	1
Muktsar	1	0
Rajpura	0	1
Amritsar	0	8
Dhuri	0	2

reflects SEWA's experiences implementing MAS trainings in Punjab. (Please see the note on page no.8)

After completing trainings, the SEWA trainers are now facilitating and encouraging the post training meetings in various towns for hand holding the

newly formed and trained MAS. In several places many MAS meetings have already been conducted. SEWA trainers are keeping in constant touch with ASHAs and other active MAS members in their respective towns. The post training MAS meeting were held in Amritsar, Patiala, Nabha, Rajpura, Samana, Sangrur, Malerkotla, Dhuri, Sunam, Moga, Faridkot, Kotkapura, Muktsar, Malout and Ferozepur.

MAS FOLLOW UP MEETINGS



Moga



Samana



Amritsar



Malout



Batala



Rajpura

REVIEW MEETING

A proud day for the SEWA Punjab team as the review meeting for the first major project in Punjab was held on the 5th of May 2017. The meeting was held at the Judicial Academy in sector 43 Chandigarh and attended by the President of SEWA Ms. Renana Jhabvala, Director Social Security Mirai Chatterjee, Ms. Susan Thomas Coordinator women and child care, National Coordinator-Programs, Sanchita Mitra, Finance Manager Smarnika Naik, and Director of NHM Punjab Dr. Shashi Kant and Mr. Navdeep Gautam head of NUHM Punjab and policy and planning. The meeting was also graced by our partner Choti Si Asha founder Lisa Chawla and Coordinator Jatinder Mann, The PGIMER School of Public Health head Dr. Rajesh Kumar, professor of Health Promotion Dr. Manmeet Kaur and Punjab University Head of Public Administration Department Dr. Ramanjit Kaur Johal. After an auspicious start with the SEWA prayer and introduction of the team, Ms. Sunanda Dikshit gave an overview of the project (attached in the following section) which was followed by a feedback session from the trainers in the field. Each trainer spoke about their experience during the MAS training in different districts and each spoke of the 3 main concerns in the field that they wished to bring to the attention of the NHM. Many of the issues had been covered in the monthly report to the NHM but some personal case studies were shared and appreciated by all. The trainers represented the voice of the women in the urban slums and were the highlight of the day as real life experience, hardships and problems with the health systems was discussed which led into a lengthy Q&A session where the trainers were asked about their opinion regarding the issues raised by them and many innovative ideas were shared.



The main learnings of the project were shared by Harsharan Kaur and Priyanka Bhatnagar. They spoke of the many challenges the team overcame from demonetization, to on-time reporting and the rapid pace of trainings in February and March. Highlighting the efforts made by the team to finish the project on time even in face of uncertainty of MAS committees and the number of active MAS on ground. The SEWA trainers went above and beyond conducting both pre and post trainings to ensure quality and create active committees.

The project would not have been a success without the training and careful guidance of the expert team from Lok Swasthya SEWA Trust- LSST, led by Ms. Susan Thomas. She spoke about the great enthusiasm with which the team had carried out its mandate and also the courage with which they faced challenges. She spoke about the various method employed by the team in Gujarat to empower the MAS committees and how some of the practices can be used in Punjab. She emphasized on the ability of MAS to change the way health system works and improve the deliverables.



The NHM guest, Mr. Gautam was duly impressed by the efforts the SEWA Punjab team had made. He spoke about his research on SEWA and his experience in the field with the MAS trained participants, all with a positive note. He took notes on the feedback from the trainers and assured a follow up on their concerns. He encouraged our team to stay determined in changing the health scenario in Punjab and to keep working and keep in touch with the MAS participants.

Dr. Ramanjit Johal spoke of the issues in policy making and implementation. She congratulated the SEWA team for doing good work in the field and giving such honest feedback. She spoke at length about the bottlenecks in policy making and the gap between the policy makers and the beneficiaries. Dr Johal emphasized on the need for collaboration amongst the various stake holders to see the MAS survive and empowered. The feedback from autonomous bodies such as SEWA, SPH, PGI and PU would help the Health department and other civic bodies to plug gaps and plan their programs on people's feedback. She said that Punjab can learn a lot from SEWA's vast grass root experience and tackle many pressing issues, Punjab facing today. She also spoke of the importance of the creation of an empathic citizenry if all students were made to do social work/ real field experience.



Dr. Manmeet Kaur and Rajesh Kumar of PGI tied the day's proceedings together in their talk on merging academics with grass root health movement experiences for better public health. Using their extensive knowledge and work experience they talked about potential of MAS to create a paradigm shift in the health care system. Dr. Rajesh expressed his strong views on community lead participatory action change

SEWA director of Social security had pertinent questions for the trainers and also some insightful tips for the team going forward. Ms. Mirai Chatterjee then presented the new National Health Policy of 2017 in which SEWA played an advocacy role. In the plan, many opportunities for community action were laid out as the new approach of the government for citizen lead action. This was a great opportunity for SEWA and its members to shine as our expertise in community involvement helped and lead the way for a better health system utilization government policy.



Dr. GB Singh, Assistant Director Health and Family Welfare directorate Punjab, addressed the gathering with fair words of wisdom and warning. He asked everyone to remember the history of the health department and the creation of new titles and committees. He also had a Q&A session with the trainers and pointed out some technical issues relating to the convergence of the water and sanitation department with the health system. His words of caution moving forward made it clear to all that SEWA would have to work not only with the health department but also approach the Water and Sanitation departments to improve the community health.

To wrap up the day of review of work done in Punjab by SEWA and great idea sharing by all attendees. Ms. Renana Jhabvala recapped the day's main points and thanked everyone for their involvement in this and future projects of SEWA!

MORE PICTURES FROM REVIEW MEETING



MAHILA AROGYA SAMITI TRAINING

Review Meeting Punjab Coordinator's Address

A very hearty thank to the National Health Mission and the Department of Health and Family Welfare for trusting SEWA with the training of Mahila Arogya Samiti members in Punjab.

SEWA welcomes all distinguished guests who have spared their precious time to listen to our experience in Punjab.

Poverty is the worst atrocity on humanity. *Insaniyat pe Garibi se badazulm ho hi nahisakta.* SEWA was born 45 years ago to fight against this atrocity. Since 1972 we have been organizing poor women for their self reliance by working for their social security. Health services come as a part of the parcel of the social security for poor women. Health is the most precious asset they have. No health means no work for them.

We all know the evils of the system. Dr. Raman Johal, HoD, Department of Public Administration of the Panjab University, is going to talk about the public policies and the gaps in their implementation. Poor implementation of public programs badly impacts the most marginalized.

What is MAS

We were given task to train Mahila Arogya Samitis' members in 11 districts. Mahila Arogya Samiti or MAS is an urban slum based women's committee, planned to link the slum women to public health services. This committee is also given rights to take up other civic issues related to water, sanitation, education, electricity and Anganwadi etc. In short MAS can take up issues related to health and its other determinants with the local government bodies.

SEWA's work in Punjab

We were to train Mahila Arogya Samiti members for running their health committees. They were to be explained about its formation, role, responsibilities and rights. They were also to be educated about various government health programs and preventive and promotive health care. Our assignment also included building capacity for community awareness, community based monitoring and linkages with the health services.

MAS lists were made 2 years back

- Mahila Arogya Samiti is a National Urban Health Mission's program
- Punjab started creating MAS committees more than two years ago

When we started training in November last year, we realized that mobilization of the MAS members attending the training was not done according to NHM guidelines, our trainers took the initiative to do Pre-trainings and guide the PHC staff on MAS and how to mobilize its members. Our trainers visited the PHCs and explained the concept of MAS to MOs, ANMs, ASHAs, Anganwadi workers and other health staff. ASHAs were informed about the NHM guidelines for selecting MAS members. They were requested to go back to their allocated slums and create a fresh list of members and bring them for training. Unfortunately, mobilization of correct members has been an issue till the very end.

SEWA trainers also reached out to slum women and explained them about the Mahila Arogya Samitis. The women were persuaded by our trainers to actively participate in it.

Pre training and direct community outreach was not part of our assignment. But we realized without it the successful implementation of the program would not be possible.

Government officials' support

The MAS training was done jointly by SEWA trainers and the health officials. Initially in many places local health officials suggested to SEWA trainers to split training funds with them. Refusal invited hostility, non-cooperation and hurdles. When we brought up this issue with the senior NHM officers, the problem was resolved promptly. I must **mention and underline that honest and hardworking health officials were more in numbers than ones who put up hurdles.** The upright and committed officials are the strength of Punjab's Health Department.

We have trained Mahila Arogya Samiti members in **11 districts covering 21 towns and reaching out to about 13 thousand women.** 4278 MAS committees were refreshed, and their members were retrained.

.....

This was our maiden health assignment in Punjab. SEWA believes in taking baby steps. We had come here to start a very small pilot project in Ropar district. We were new and had a very small base here. So we decided to go small. Under this project we had proposed to setup a few SEWA Shakti Kendras or the SSK. The SSK is a one-point nodal centre, disseminating information on government health programs and handholding the marginalized women to access them. SSK is a very successful experiment of SEWA in Gujarat, Madhya Pradesh, Rajasthan, Bihar, West Bengal, Delhi and many other states.

But... we were asked to do MAS training in 21 towns. It was a huge challenge for SEWA. My young colleagues Harsharan and Priyanka will be talking about the challenges in detail, a little later. In the nut shell it was a roller coaster ride for us. A lot of sweat and tears went into implementing this project.

ASHAs- the crucial link with the community

Our review brief can't not be complete without mentioning ASHAs. Urban ASHAs are the most crucial link between the Public Healthcare establishment and the slum population. The success of community based health programs lies on their shoulders. They are liked and are respected by the community... because they connect with poor people on one-to-one basis and help them in whatever manner they can. The success of Mahila Arogya Samitis also rests largely on ASHA's shoulders. They should be respected and their work should be lauded and awarded. It was sad to know that ASHAs were ill-treated at the public health facilities. Hope the health establishment will address this issue.

The issues

During the course of our work and close interaction with the marginalized women and the local health people, we found many gaps in the health delivery mechanism. The programs meant for the poor, particularly women, did not reach them. Health and other civic services in economically weaker localities are poor. These issues were brought up by the MAS members during trainings. We have been documenting health and other civic issues in our monthly reports submitted to NHM.

I would like to mention a few of the issues that emerged during the MAS Training-

1. Inadequate and poor health services and shortage of staff in many Public Health facilities.
2. Shortage or absence of essential medicines
3. Corruption in local health facilities
4. Rude behaviour of the health staff was the standard complaint from every centre. As I mentioned above, ASHAs also complained of ill treatment in government hospitals.
5. Health entitlements under various government programs do not reach the needy
6. MAS members and other grass root health staff in many places lacked awareness about Government programs.
7. Absence of food and irregular staff in Anganwadis was a common problem everywhere
8. Poor supply of clean drinking water was reported from everywhere
9. Choked drains and poor waste disposal system was a common complaint
10. Erratic power supply and high tension cables passing close to slum homes.
11. Drugs and alcohol menace, domestic violence, eve teasing by drug edicts, high levels of stress among women were some issues which were shared with us by the MAS members. In short poverty related all ills were there.

MAS committees' role in monitoring civic services and convergence of various civic services are the most important factors for improving health standards. The issue of convergence needs to be addressed at the decision making level.

The community response to Mahila Arogya Samiti

SEWA trainers are going to share the response they received about Mahila Arogya Samiti. The samiti members are overwhelmingly happy to find a platform to voice their concerns and slowly understanding the power of collective action.

After finishing the training, our trainers are now keeping in constant touch with ASHAs and members of the newly formed MAS. They are encouraging them to hold their monthly meetings.

In several places the first meeting of MAS committees has already been conducted. MAS members are meeting local councillors and other government official with their problems.

The newly formed MAS in Punjab has a success story also. In Dhuri town of Sangrur district, the MAS in Bazigar Basti area had decided to bring back the PHC which was shifted away from their area a while ago, as their first collective intervention. The MAS of Bazigar Basti and SEWA pursued the matter and the PHC was shifted back to the area. Now it is fully operational. We thank the NHM officials for their prompt action in this matter.

Dr Rajesh Kumar, the HoD , School of Public health of PGIMER Chandigarh is going to share his views on the importance of the grass root health movement for better public Health. For decades, he has been witnessing grass root health movements and academically analysing their impact on the lives of poor people.

I would like to thank SEWA leadership for having trust in the capability of the Punjab team. As Renana ji said in the first ToT, that these young trainers are SEWA's investment in Punjab. And I am proud to say, that this investment, is slowly starting bringing rewards now. Our sisters from, Lok Swathya SEWA, Mirai Chatterjee, Susan Thomas, Manglaben and Madhuben were brilliant in training us to communicate effectively with poor women.

We cannot forget the great support and encouragement of honest and upright senior officers of the NHM, Punjab. Without their help, we would have never been able to deliver, what was

expected of us. On behalf of SEWA and LSST, I thank Dr Shabsikant ji and Mr Navdeep Gautam for firmly standing by us.

Women of Chotisi Asha, Liza and Jatinder are our partners. Chotisi ASHA is a Chandigarh based NGO, working for women's skill development and livelihood. Choti Si Asha ensured timely delivery of kits for training. The bags were crafted beautiful and made with love. Our gratitude to all women workers who were involved in this project.

The way forward

Before concluding, I want to share with you what Dr Rajesh Kumar told us when we met him for the first time. He explained us, how rural ASHAs have brought paradigm shift in the rural

health care. SEWA firmly believes that the same paradigm shift can be brought in the urban public health

care system with the help of Mahila Arogya Samitis and urban ASHAs.

MAS committees have just born in Punjab, they are little babies. These babies need to be taken care of, they need to be nurtured and made strong and confident of their collective strength.

Thank you.

List OF ACTIVITIES

District	Date	Activity	Team	Officials	Remarks
Amritsar	2 nd May 2017	SEWA Coordination and Quality check Visit	Sunanda Dixit Coordinator Punjab, Priyanka Bhatnagar Administrative Assistant, Daljeet Kaur Trainer, Sinder Kaur Trainer, Amardip Singh Trainer, Rekha Pasricha Trainer, Sangeeta Rani Trainer, Vinerdeep Kaur Trainer	Parminder Kaur, Deputy MEIO, Rupinderjit Kaur, Depty MEIO and Rachna Kumari, MPHS	Visit to 4 trainings in Amritsar to ensure quality and find out issues being faced by community. Administrative issues and clarifications.
Chandi- Garh	5 th May 2017	Review Meeting	SEWA Punjab team, RenanaJhabwala President SEWA, Mirai Chatterjee Director Social Security SEWA, Sanchita Mitra National Coordinator, Susan Thomas Coordinator Women and child Health, Smarnika Naik Finance Manager, Ranjit Negi finance officer.	Dr. Shashi Kant Director NHM, Mr. Navdeep Gautam Policy & Planning, Dr. GB Singh Assistant Director health and family welfare, Dr. Rajesh Kumar Head PGI School of Public Health, Dr. Manmeet Kaur Professor PGI SPH, Dr. Ramanjit K Johal HoD PU Public Adminstration.	Full day meeting with in- depth analysis and feedback of the project.
Amritsar	12 th May 2017	Last training	Sangeeta Rani Trainer, Rekha Pasricha Trainer, Vinerdeep Kaur Trainer, Amardip Singh Trainer.	Sukhjinder Singh Gill DMEO, Rachna Kumari MPHS, Rupinderjit Kaur Depty MEIO, Sharmila UPC.	Last MAS training conducted in Amritsar

MAY TRAINING STATISTICS

DISTRICT	TOWN	SEWA TRAINER	GOVT. RESOURCE PERSON	NO. OF MAS	TOTAL TRAININGS	MAS COVERED	MONTHLY TRAINING	NO. OF PARTICIPANT
Amritsar	Amritsar	Sangeeta	Ms. Sharmila, Ms. Rachna Kumari, Ms. Parminder Kaur, Mr. Sukhjinder Singh, Ms. Rupinderjit Kaur	1257	25	58	4	180
		Vinderdeep				55	4	160
		Rekha Pasricha				50	4	151
		Amardip Singh				37	3	116
		Daljeet Kaur				13	1	38
Jalandhar	Jalandhar	Pooja Rani	Mr. Vinay Malhan	1130 85	14	28	2	81
		Zoravar Perhar	Mr. Sharandeep			25	2	76
		Parkash Kaur	Mr. Sandeep Mr. Inderjit Bhullar			11	1	32
				4725	354			
Monthly Total						277	21	834
Running Total						4165+277= 4442	328+21= 349	12617+834= 13451

TRAINING DATES

SR NO	NAME	DISTRICT	RESOURCE PERSON	NO. OF TRAININGS	DATE OF TRAINING
1	Vinerdeep	Amritsar	Ms. Sharmila,	4	1/2, 5/6, 9/10, 11/12
2	Rekha	Amritsar	Mr. Amardeep Singh,	4	1/2, 5/6, 9/10, 11/12
3	Sangeeta	Amritsar	Ms. Rupinderjit Kaur,	4	1/2, 5/6, 9/10, 11/12
4	Amardip	Amritsar	Ms. Rachna Kumari, Ms. Parminder Kaur	3	1/2, 9/10, 11/12
5	Daljit	Amritsar		1	½
6	Puja R	Jalandhar	Mr. Vinay Malhan	2	1/2, 8/9
7	Prakash	Jalandhar	Mr. Sharandeep Mr. Sandeep	1	2/3
8	Zoravar	Jalandhar	Mr. Inderjit Bhullar	2	30/1, 2/3
Total				21	

GUEST REMARKS

SR.NO	NAME	DISTRICT	REMARKS
1	Sangeeta	Amritsar	<ol style="list-style-type: none"> 1. Good training. Participation of MAS members is good. Sangeeta is doing well. (Sharmila Gupta, Urban ProjectCoordinator). 2. Sangeeta is a good trainer. Women listen to her very attentively.They discussed the problems of their locality and ask the solutions. (Parminder Kaur, Dy.MEIO)
2	Amardip Singh	Amritsar	<ol style="list-style-type: none"> 1. Amardip Singh, SEWA Bharat, told us about MAS and SEWA. Healso told us about Mahila Arogya Samiti, its Objectives, Roles and importance in detail. Madam Parminder Kaur, Deputy Mass Media Officer told us about untied funds and monthly meetings. Mr. Amardip told us about National Health Mission. (Seema Rani, Participant). 2. Participation of women was very much. They said that they are told of very useful things about health. They said, they come to know of many things about which they were never aware of. They will apply all these in their lives. Refreshment was also given in the training. (Rupinderjit Kaur, DyMEIO).
3	Vinerdeep Kaur	Amritsar	<ol style="list-style-type: none"> 1. Satisfied with training. MAS members are ready to listen what the advantages of Mahila Arogya Samitis are. Good experience. (Sharmila Gupta, Urban ProjectCoordinator) 2. In the training, Women were told about Mahila Arogya Samiti, its need. They were also told about the schemes provided by theHealth Department. Apart from that, Viner ji told everything in a very good way and there is also arrangement of food. (Rahna Kumari,MPHW)
4	RekhaPasricha	Amritsar	<ol style="list-style-type: none"> 1. Good experience. Hope MAS members are active to do work fortheir health & hygiene. (Sharmila Gupta, Urban ProjectCoordinator). 2. Rekha Madam & Sharmila Madam told women of the area about Mahila Arogya Samiti in a very good way. They told women thathow they can take care of their health which will improve our locality. (RajwantKaur,ASHA)
5	Daljeet Kaur	Amritsar	<ol style="list-style-type: none"> 1. In this training, women were told about MAS, its need and its objectives. Apart from this, Madam Dalit &Sinder taught MAS members in a very good manner. In addition, an arrangement for food was also done. (Rachna Kumari,MPHW). 2. Training of Mahila Arogya Samaiti members was done in Satellite hospital. Women were told about the facilities given by the government and What MAS is. An arrangement for food was also done. (Rachna Kumari,MPHW).

6	Pooja Rani	Jalandhar	<ol style="list-style-type: none"> 1. The participants were very active. They were motivated to work for the welfare of their area. The training was conducted very well. (VineyMalhan,DPM) 2. We liked this training of MahilaAroga Samiti. These samitis shouldbe made, we all agree with this. We were given lot of information and govt. schemes of which we were unaware. We will support them. We are very happy. (MASMembers)
7	ZoravarPerhar	Jalandhar	<ol style="list-style-type: none"> 1. With practical approach MAS members were made familiarwith functioning of MAS. (Sandeep,BEE) 2. Training given was quite helpful for the MAS members to make their presence in the area (Sandeep,BEE).
8	Parkash Kaur	Jalandhar	<ol style="list-style-type: none"> 1. Training is going up to the mark. Participation of MAS membersis also very good. (InderjitBhullar) 2. Training is being conducted very well.Health schemes were discussed. Various activities were done.Participants were motivated to work for their area (VineyMalhan,DPM)

CIVIC ISSUES RAISED IN TRAININGS

Sr.No	NAME	DISTRICT	ISSUES
1	Sangeeta	Amritsar	<ol style="list-style-type: none"> 1. BebeNanki Hospital is very dirty and the patients are badly treated. Even ASHA workers and pregnant women are spoken to veryrudely. 2. Talla Colony (Chheharta) has no street lights or proper roads. There are no government skill development centers like the stitching, computer or parlor. There is a problem with stray animals. The empty plots have a lot ofgarbage. 3. Hargobind Avenue does not have an anganwadi center, pregnant women would like to have the facilities provided by the government but do not have access to them. There is problem in getting clean water. 4. Bhalla Colony has to clean water supply and no streetlights. 5. PHC Fatahpur does not have any potable waterfacility. 6. LohrigateKhai Mohalla had sewageproblems. 7. Lohgarhgalligujjra has dirty water supply and are not getting health facilities. BebeNanki hospital staff is very rude and people don't like to go there. There are issues with dirty water, sewage, no aganwadi and this leading to health issues in thearea. 8. Arjun Nagar Chheharta has become a very dirty area, the sewage is always blocked, the water is dirty and the electricity cables break and fall and it is verydangerous. 9. People of Chheharta complained a lot about the Gynecologist department at the Civil Hospital Amritsar. The staff was rude and unhelpful, their concerns were not addressed and where not treated there. Residents of Chheharta have complained to the SMO but nothing has come ofit. 10. Ram Bagh does not have any anganwadicentre. 11. Ram Bagh, Kucha Kher Din gali the garbage collection is not done for 5 days in a row ormore. 12. Residents of Ram Bagh and the ASHAs there do not like to go to the civil hospital as the staff there is very rude and the pregnant women are treatedpoorly.
2	Amardip Singh	Amritsar	<ol style="list-style-type: none"> 1. NaraingarhPishorihaata the streets and drains are never cleaned. The park is very dirty. There are nolight. 2. 21 Quarter there is a problem with water drainage and no access to clean water. 3. Baba Deep Singh Colony has many health issues due to standingwater. 4. Pakka Colony, New Model Town has no sewage facility and people have to drink dirty water. There are is no arrangement to clean thearea. 5. JandPir Colony the streets are broken, there is no light and the water is verydirty. 6. Krishna Nagar JodhaPhatak has very dirty water and their sewage issues as there is nodrainage.

3	Vinerdeep Kaur	Amritsar	<ol style="list-style-type: none"> 1. In Gumtala, there is problem with drinking water. Sewage water is mixed with freshwater. 2. Absence of Street lights in SJS Avenue,Gumtala 3. Sewages are not working inGumtala 4. Lack of cleanliness on roads inTabowali. 5. No water supply in RajAvenue.
			<ol style="list-style-type: none"> 6. In KaaleGhanpur, there is open garbage onroads 7. Problem with water in Chherata, Hukum Chand Colony And Ganda SinghColony. 8. Absence of Anganwari in TirthNagar.
4	RekhaPasricha	Amritsar	<ol style="list-style-type: none"> 1. Chheharta – Bhalla gali has a blocked sewageproblem. 2. Kartar Nagar has no clean water supply and no food supply in aganwadi. 3. Sandhu colony, Dharpura, Jagdish niwas has noanagwadi. 4. Judge Nagar gali has a sewage problem. There is no doctor in that area also. 5. Dharpura does not get watersupply. 6. New Jawar Nagar gets no food in the anganwadi, there is a sewage problem and the water supply isdirty. 7. Hindustani Basti does not get water supply. There are no proper streets and no lighting on the pathways. The mosquitoes fogging machine does not come. Shortage of watersupply. 8. TakiaChannan Shah sewage is full of water andoverflowing. 9. Milap Avenue has a blocked sewage problem and no streetlights. 10. Baba Jeevan Singh Colony gets dirty water supply. There is no lighting on thestreets. 11. Sant Kartar Nagar and Prushotum colony has no anganwadi center. High voltage wires run very close to thehouses.
5	Daljeet Kaur	Amritsar	<ol style="list-style-type: none"> 1. Baba Himmat Singh satellite hospital does not have X-ray facility , women wanted the hospital to have thatfacility. 2. BebeNanki Hospital has two women on one bed duringlabour.
6	Pooja Rani	Jalandhar	<ol style="list-style-type: none"> 1. Raj Nagar has very dirty water supply due to which many people fall sick. Electricity wire just hangs from different places where they are broken. Sewage is blocked. People throw all the garbage in empty plots. 2. Basti Bawa Khel has a big drug and alcohol problem. The women are beaten up after the men getintoxicated. 3. Katehra Mohalla has a lot of straydogs. 4. Gopal Nagar has blocked sewage and water stands on the streets this causes main illness and difficulty in moving about. The water supplied is dirty. Rapid stray dogs in the area have bittenpeople.
7	ZoravarPerhar	Jalandhar	<ol style="list-style-type: none"> 1. Preet Nagar ESI garbage disposal is not up to the mark and there is irregular water supply. There is scarcity of potable water and a nuisance with strayanimals. 2. Excess to potable water lsscarce.

8	Prakash Kaur	Jalandhar	<ol style="list-style-type: none">1. Unemployment and intoxication is causing social problems in Maqsudumpura.2. Drinking water supply is getting mixed with the sewagewater.3. The pathways are full of garbage heaps leading to healthproblems4. Stagnant water and stray animals are causing healthissues.
---	--------------	-----------	--

TRAINER SANGEETA RANI, AMRITSAR



TRAINER REKHA PASRICHA, AMRITSAR



TRAINER VINERDEEP, AMRITSAR



TRAINER AMARDIP SINGH, AMRITSAR



TRAINERDALJITKAUR, AMRITSAR



TRAINER PARKASH KAUR, JALANDHAR



TRAINER ZORAVAR PERHAR, JALANDHAR



TRAINER POOJA RANI, JALANDHAR



AMRITSAR COMPLETION REPORT



ਪੰਜਾਬ ਸਰਕਾਰ
ਸਿਹਤ ਅਤੇ ਪਰਿਵਾਰ ਭਲਾਈ ਵਿਭਾਗ
ਰਾਸ਼ਟਰੀ ਸਿਹਤ ਮਿਸ਼ਨ

ਸਿਵਲ ਸਰਜਨ, ਅੰਮ੍ਰਿਤਸਰ ਫੋਨ:- 0183-2211864,
ਈ-ਮੇਲ: nrhmamritsar@gmail.com



ਨੰ: ਐਨ.ਐਚ.ਐਮ./ਅੰਮ੍ਰਿਤਸਰ/2017/1363

ਮਿਤੀ: 30/05/2017

ਸੇਵਾ ਵਿੱਚੋ,

ਮਾਨਯੋਗ ਮਿਸ਼ਨ ਡਾਇਰੈਕਟਰ,
ਪੰਜਾਬ, ਚੰਡੀਗੜ੍ਹ।

ਵਿਸ਼ਾ:- ਮਹਿਲਾ ਅਰੋਗੀਆ ਸੰਮਤੀਆ ਦੀ ਟ੍ਰੇਨਿੰਗ ਸਬੰਧੀ।

ਉਪਰੋਕਤ ਵਿਸ਼ੇ ਸਬੰਧੀ ਜਿਲ੍ਹਾ ਅੰਮ੍ਰਿਤਸਰ ਵਿੱਚ 1257 ਮਹਿਲਾ ਅਰੋਗੀਆ ਸੰਮਤੀਆ ਦਾ ਗਠਨ ਕੀਤਾ ਗਿਆ ਸੀ ਜਿੰਨ੍ਹਾਂ ਦੇ ਮੈਂਬਰਾਂ ਦੀ ਟ੍ਰੇਨਿੰਗ ਸੇਵਾ ਭਾਰਤ ਵੱਲੋਂ ਪੂਰੀ ਕਰਵਾ ਦਿੱਤੀ ਗਈ ਹੈ। ਇਹ ਆਖ ਜੀ ਦੀ ਸੂਚਨਾ ਹਿੱਤ ਹੈ ਜੀ।


ਸਿਵਲ ਸਰਜਨ,
ਅੰਮ੍ਰਿਤਸਰ।

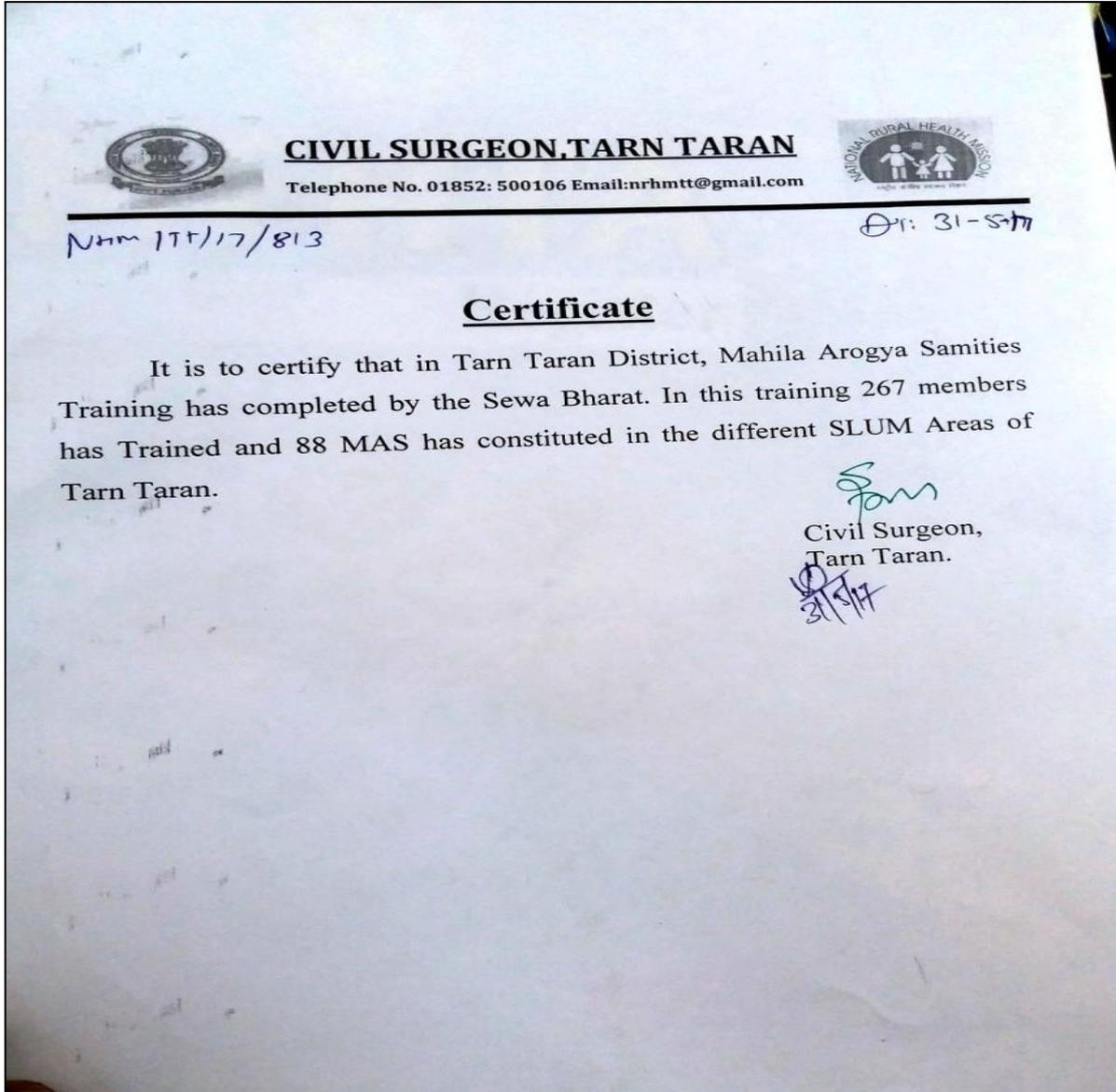
ਨੰ: ਐਨ.ਐਚ.ਐਮ./ਅੰਮ੍ਰਿਤਸਰ/2017/1363

ਮਿਤੀ 30/05/2017

1. ਮੈਨੇਜਰ, ਅਰਬਨ ਸਿਹਤ ਮਿਸ਼ਨ, ਪੰਜਾਬ, ਚੰਡੀਗੜ੍ਹ।
2. ਹਰਸ਼ਰਨ ਕੌਰ, ਸਹਾਇਕ ਕੋਆਰਡੀਨੇਟਰ, ਸੇਵਾ ਭਾਰਤ।


ਸਿਵਲ ਸਰਜਨ,
ਅੰਮ੍ਰਿਤਸਰ।

TARN TARAN COMPLETION REPORT



----- END OF DOCUMENT -----

1.3 Post Training Project- Continued Engagement with the MAS

After the completion of the project, SEWA Punjab continued its work with the Mahila Arogya Samitis, through Mohalla meetings which are informal settings wherein women in the locality come together to discuss their health and civic concerns and take collective action for redressal. SEWA Punjab facilitates these women in the same, and fosters leadership and self-reliance through this process. In this year, we continued the work in six districts namely Gurdaspur, Jalandhar, Moga, Ferozepur, Patiala and Sangrur.

2. Programs and Project Proposals

2.1 MOU with Government of Punjab, August 2017

A memorandum of understanding was signed between SEWA Bharat and the Government of Punjab on **18th August 2017**. With the Chief Secretary of Punjab Mr. Karan Avtar Singh and our President Ms. Renana Jhabvala present at the occasion.



Images from MOU Signing with Government of Punjab, August 2017

The objective of this MOU is to establish a framework for cooperative institutional relations to encourage and promote collaboration SEWA Bharat and Government of Punjab for better empowerment and social and economic development of women in the state.

SEWA Bharat commits to partner with various relevant departments and organisations of the Government of Punjab to help towards the success of their existing and future schemes and objectives. SEWA Bharat would undertake variety of activities as required including mobilising women, forming women groups and organisation, building their capacity , training in skills , activities to improve their health , furthering their economic opportunities , working towards their financial and digital inclusion , helping them secure assets , improving their habitats, reaching out to their children and other such social and economic activities to further their empowerment.

-SEWA Bharat will develop local capacities of poor women in urban and rural areas through formation of groups and capacity building with the aim of forming SEWA Punjab in the near future.

-The Government of Punjab will ensure in enabling environment for working of SEWA Bharat in Punjab by providing introductory letters to the key line departments such as departments of health , Urban development , Rural development , Social Security and Development, Welfare , Finance and any other department which could facilitate the empowerment of women within their schemes and efforts.

Post this; we began meeting various departments for joint collaborations. Selected proposals submitted are given below-

➤ **Department: Health & Family Welfare**

S.no	Project Summary	Estimated Budget
1.	Sewa Shakti Kendra(SSK) – One point linkage centre in the slum areas for all government schemes. 2 year project for Ropar. SSK is a very successful SEWA model for women empowerment and social security programs linkages. We train the community member to run the SSK on a viable basis. SSK also improve the success rate of government social security and poverty alleviation programs	Rs. 36,89,895
2.	MahilaArogaya Samiti (MAS) Handholding . 1 year project in 4 districts. Empowering newly formed MAS by giving them support to be active participants in planning and monitoring local public services and also evolving as urban self help groups	Rs. 98,97,590
3.	Peer Educators training under (Rashtriya Kishore SwasthyaKaryakram) RKSK, NHM program on adolescent health in 6 districts. Training of adolescent leaders, ASHAs and ANMs for peer group education on adolescent health.	Rs. 85,79,038
4.	Non-communicable diseases and maternal and child health awareness project for Patiala, 1 year project in 2 urban and two rural areas. SEWA along with School of Public Health, PGI, Chandigarh will run an integrated family health project to be implemented through MAS in towns and VHSNC in villages.	Rs. 55,13,215
5.	Women’s mental health in Punjab – intervention based study with School of Public Health, PGI for 3 years (Proposal ready, to be submitted) This project includes mapping mental health services,	Rs. 2,71,90,750

	planning intervention strategy, creation & capacity building of front line mental health workers and mental health awareness campaign among health personnel and the community	
	Total	Rs. 5,48,70,488

➤ **Department: Rural Development & Panchayats**

S.No	Project Summary	Estimated Budget
1.	Workshop with outgoing Mahila Sarpanches on their challenges and achievements in collaboration with Department of Women's studies & Development, Panjab University. The observations and learning of this workshop will be the basis of the Capacity building strategy for the newly elected 50% Mahila sarpanches in 2018 Panchayat elections	Rs. 27,000
2.	SEWA in collaboration with Department of Women's studies and Development, Panjab University and SEWA Cooperative Federation will conduct training & capacity building of all newly elected Mahila Sarpanchs over a period of two years with hand holding	Rs 1,91,03,400
	Total	Rs. 1,91,30,400

Department of Social Security and Women and child development

S.no	Project Summary	Estimated Budget
1.	Menstrual Hygiene awareness campaign for 1 year in Mohali district. In this project SEWA will work with adolescent girls in 2 rural and 2 urban government schools for their holistic development with focus on menstrual hygiene. Skill counselling, leadership development & active outreach to parents are 3 major components of this project.	Rs. 12,00,950
2.	Sewa Shakti Kendra in Ropar (Given to Health Dept also)	Rs. 36,89,895
3.	Skill survey & skill development centers for Mohali district for 3	Rs.

	centers. In this project SEWA along with Department of Public Administration, Panjab University, will conduct a skill demand and service supply gap survey in service sector in Mohali district. Outcome of the survey will be used to plan and implement skill development Centers in synergy with the demand side	60,06,450
4.	Pilot project on Low cost sanitary napkin making unit 2 year project. SEWA along with Indian School of Business (ISB) will form a Women's collective to manufacture low cost sanitary napkins in Mohali district. The women will be given financial literacy and will be trained in Business planning, production, marketing and entrepreneur skills. SEWA Bank and SEWA Cooperative federation will be our technical resource partners	To be submitted
5.	Malnutrition in Faridkot district- Mapping & Intervention. In this project SPH, PGI and Baba Farid University of Health Sciences, Faridkot will jointly, design the training module for AWW for data collection, analyze field data and recommend intervention strategy. SEWA will supervise intervention at the ground level.	Rs. 10,56,300
	Total	Rs. 11,953,595

➤ **Mohali Administration**

S.no	Project Summary	Estimated Budget
1.	Menstrual hygiene awareness campaign in 2 rural and 2 urban govt. schools (Submitted to Dept. of Social Security and Women and child development also)	Rs. 12,00,950
2.	Low cost sanitary napkin making unit. (Submitted to Dept. of Social Security and Women and Child development also)	To be submitted (Rs. 21,00,000 approx.)
	Total	Rs. 33,00,950

➤ **Department of Cooperatives**

S.no	Project Summary	Estimated Budget

	Financial literacy and entrepreneur skill development of cooperatives (Concept submitted) SEWA Bank & SEWA Cooperative Federation will be our technical resources	Rs. 15,00,000
	Development of cooperatives in new sectors, including urban service cooperatives, such as care services (e.g., domestic work, elderly care, patient care, and care of young children) SEWA Bank & SEWA Cooperative Federation will be our technical resources	Rs. 35,00,000
	Total	Rs. 45,00,000

➤ **Department of Urban bodies**

S.no	Project Summary	Budget
1.	Implementation of Street Vendor's act in Punjab, 3 year pilot project in Nabha and Mohali districts (Concept presentation submitted)	To be prepared
2.	Recreational center for youth and elderly in slums under innovative program under innovative program (Concept submitted)	To be prepared

2.2 MOU with Punjab University, November 2017



Image from MOU signing with Punjab University, November 2017

An MOU was signed with the Punjab University on 27th November 2017. SEWA collaborated with Punjab University for action-based studies and research for policy analysis and advocacy. This is to involve Social Work and Women's Studies departments in Skill Training & Mahila Sarpanch Training, and Public Administration on the Street Vendors Act. We planned to send students at Punjab University to Ahmedabad to learn about the SEWA movement and experience first-hand the effects of a sustained grassroots movement. This agreement will also help foster an exchange between the academic sphere and fieldwork.

3. Workshop on Women Sarpanch as Agents of Change

On 11 April 2018, a workshop was organized on “Women Sarpanch as Agents of Change” by SEWA Punjab and DCWSD, Panjab University and sponsored by State Institute of Rural Development, Punjab. The report on the same is as below-



➤ Executive Summary

The workshop “Women Sarpanch as Agents of Change- Opportunities and Challenge” was organized in collaboration with Self Employed Women’s Association (SEWA) and Panjab University. The participants included the women sarpanch from various districts of Punjab.

Facilitators of the workshop included experts from the faculty of Department of Gandhian and Peace Studies, Panjab University, Department Cum Centre for Women’s Studies and Development, Panjab University, members of institute of States Institute of Rural Development (SIRD), Punjab, India.

The main objective of the workshop was to bring out motivation, challenges and achievements of the woman sarpanch faced by them during their tenure. The workshop consisted of two phases, the interactive session between the chair and women sarpanch and interactive session between facilitators, rapporteurs and women sarpanch.

The long term expected results of the workshop is to build the capacity of upcoming women sarpanch of Punjab. The workshop will also assist to bring the women's voice in political empowerment.

During the workshop, 47 women sarpanch from all over the Punjab participated. The participants were given the practical knowledge about the technology like PRIA software, Direct benefit software etc.

➤ **Background of the Workshop**

Self Employed Women Association (SEWA) in collaboration with Department Cum Centre for Women's Studies and Development, Chandigarh held its first workshop of women sarpanch to build the capacity of upcoming women sarpanch.

➤ **Planning meeting**

Two day prior to the workshop, a meeting was held by Prof. Pam Rajput, Dean of Arts Faculties with rapporteurs briefing the objectives of workshop. One day prior to the workshop, it was followed by preparatory meeting to plan the standardized procedure-

- Designation of research scholars as rapporteurs divided in four different groups
- Identification of local support staff responsible for assistance during the workshop for availability of security, food etc.

➤ **Introduction**

The program was inaugurated by Chairperson of DCWSD, Professor Ameer Sultana. She addressed the participants by giving brief introduction of department, organization who collaborated for the workshop. Dr. Sultana then welcomes Prof. Pam Rajput to address the participant. Dr. Rajput interacted with the women sarpanch and panch and asked them certain questions such as regarding their training after being elected as the Sarpanch and their access towards the training resources. It was followed by the questions like should minimum educational qualification be criteria for the electoral polls in PRI. The participants were divided on the viewpoint on minimum educational qualification. As a stimulus, to this question, one of the participant states that "*Je ass in padhe likhe na howan ge ta, BDO sanu unгла te nachaun de han*" (Since we are not educated, the BDO takes unfair advantage of that). On the contrary, another women sarpanch said that "Education is not necessary but you should have negotiation and decision making skills. In addition, she requested another

women sarpanch to not act as mere rubber stamps.” Further, When Prof. Rajput asked these women sarpanch about being elected for upcoming polls, only 6 women raised their hands for PRI and 3 women raised for the assembly ticket.

Then, Prof. Rajput welcomed SIRD Director, Prof. Rosy Veid who is in charge of training programs of rural development.



Prof. Veid welcomed all the participants and said that it is right time to conduct such workshop in light of upcoming election. The main objective of the workshop was to build the capacity and enhance their leadership skills. Also, she mentioned that women had always been there in the PRI system. 73rd and 74th amendment came much later and ensured the participation of marginalized women also. Further, if revisit the last 4-5 election periods. 33% reservation for the women representatives was ensured but it was not on equitable level. However, we cannot say the status of women in political empowerment has not changed. It has changed substantially from 90s. She quoted the 2004 study that was conducted on Woman Sarpanches (SC/BC): their Challenges and motivations. The sample of this study was taken from all over the Punjab. Then she shared the incident highlighting “proxy culture” and prevalent ‘gender stereotype’ enrooted in political sphere, where once she went to gave the training to woman sarpanch but on the day of training, husbands/ father/ brother appeared for the training and when asked where are the women sarpanches. One of the young man stood and said “*Je oh ethe a aungia, te sadi chodar kithe jaw*”, that is – “If our women come here then what respect will we have left.” Lastly, she requested all women to actively participate in meetings and not to put the proxy.

Taking over the session again Prof. Rajput stressed on the effective participation of women. On to this, she added the development of any country, state and panchayat could be mapped by the status of women in that particular society. Thus, bringing more women in political arena can lead to Clean and Green Politics because being women, they can make difference.

➤ **Group Activity**

The workshop was further commenced by the dividing the participants into the pairs as the part of their introductory process. As a result, the women sarpanch got to know each other and expanded their network. Most importantly, they shared their experiences and achievements and some of them, honestly came out as their political status as rubber stamp. Their husband did the work and only used their signatures on official documents which they had no clue about.



In next activity, participants were divided into four groups where in each group; they had one facilitator, two rappateur and number of participants. They were given certain questions to discuss. The questions which were taken up by the groups:

1. Being a sarpanch of your village, mention any 3 main achievements of your tenure?
2. Mention any 3 main difficulties that you have faced during your tenure?
3. What is the participation of women in your area in meetings of gram sabhas?

4. What are the issues raised by the local people and what kind of steps has been taken by your panchayat to solve them?

5. Being a women sarpanch has your status in this male dominated political arena been changed?

6. If you look back in your tenure, what you think that what kind of more support you should been given, by which you can work more efficiently?

7. What suggestions do you want to give to the upcoming women sarpanches ?

After group discussion, everybody proceeded for the lunch. After the lunch, each group gave their presentation about the questions they discussed in the activity.



In response to question number one and question number two, the speaker of the group Kuldeep Kaur, a woman sarpanch listed three main achievements of the group i.e. Social development in the form of infrastructure for their respective village, HIV/AIDS and

Drug awareness camps etc. Further, she convened the obstacles faced by women sarpanch i.e. lack of training, funds and attack from opposition party. Lastly, she ended her presentation with giving suggestions like direct transfers of funds to Sarpanch, Education for kids and minimum educational qualification for running for elections.

Similarly, responding to the question number 3 and 4, group 2, the speaker of the group Bina rani addressed the issues of lack of training for women sarpanches, lack of awareness of the rights and duties as a sarpanch and the issues related to the employment generation schemes like the MNREGA as their major challenge/difficulty during their tenure. In few districts, gram sabhas were regularly held and the participation of the local SC women was more than the non-reserved category. She further spoke about the change in the status that occurred during their tenure as a women sarpanch. The change has occurred but is still not visible. For some women, their status has remained static over the years and they have merely remained a rubber stamp due to the patriarchal structure of the society and the family whereas some women have gained more communication skills and confidence to deal with the issues. The concluding remarks focused on training programs and non-interference by the regional political parties along with the awareness generation about the rights and duties as a sarpanch.

In response to question number 4 and 5, group 3 respondents when asked about their status being changed in the society, most of them responded in a positive manner that after being a sarpanch they got more respect, they got more chances to explore. One of them said "*ji bda maan satikar milda hai sanu*", meaning "We get a lot of respect." But surprisingly two of them responded in a negative manner, according to them that people don't like if women being elected for multiple times, as it creates intolerance for males. Because they follow clean and green politics which further creates problems for them. In the response of another question about the issues which has been raised by the local people, they answered that their panchayats have taken steps to solve the problems of the local people, like issues of the panchayati land, cremation land, the problem of drugs among the young boys of their area, they have solved it by making the gyms, playgrounds etc. they have also solved the issues of pension, etc. for women they had given the sewing machines. One of them named Rachna from jalandhar has started the self help group for the economic independence of women. The issue of discrimination with the dalit sarpanch has also been raised by of them.

The conclusion of group 4. In response to question no 1 the sarpanch listed out some common issues such as stagnation of water , electricity problem in the village , no cremation ground in the village. In response to question no 2 the sarpanch agreed that their status has been changed for good . They experienced gain in their knowledge, exposure of things. Lastly they suggested that to be an effective sarpanch one has to acquire full awareness of their rights as a sarpanch and one should not succumb to any kind of pressure.

➤ **Recommendations**

As they have given many suggestions for the upcoming women sarpanches. Like,

- *“jekar reservation ditta hai ta sab ton pehlan apni soch badl ni pavegi, fer hi aurtan hor v dia kamm karsak dian ne”*. they said that if they have given this opportunity by reservation than firstly this society needs to change its perception, and attitude about women, then she will be able to do work more effectively.
- Don't act as “rubber stamps”.
- Work without any fear.
- If you will cooperate with people and make wise decisions for them then people will accept you and will also elect you for the next time.
- You have to be “bold” if you want to survive in this field.
- *“eho ja kamm kro k loktu hade ton inspire hon”*. Means work with that potential so people gets inspire from you.

➤ **Conclusion**

So, the last session of the workshop was the concluding session which was addressed by Professor Pam Rajput and Dr Rozy Veid. Dr. Rozy shared the information that they are going to make certain changes in the system and in the working process by which there will be transparency in the system and by this the chances of corruption will also get low. She requested all the women sarpanch to read the monthly magazine “*Sade Pind*” published by their department, which will give them the more information about the system, new laws and policies. After that professor Pam Rajput encouraged the women sarpanches to work hard for the change. She thanked Dr Rozy for cooperation of their department and assured her that SEWA, DCWSD and SIRD will work together for the further programs. She also thanked all the women sarpanches who have given their valuable time for the workshop and she also said

that they are going to make a women's federation in Punjab and for this purpose they will meet them soon. Renanan Jhabwala also requested all the women sarpanches to be the part of the federation which they are going to make. At last Dr Ameer sultana also thanked the dignitaries of SEWA, team of SIRD, and the teachers and the research scholars of department cum centre for women's studies and Gandhian and peace studies.

- **Annexure 1 of Mahila Sarpanch Workshop**

List of Participants

Name of Sarpanch	Panchayat status	Village/district
Anuradha	General	Hussainpur (Mohali)
Bakshishkaur	Reserved	Chaksadhu (Jalandhar)
Bimladevi	General	Khameda(Anandpur Sahib)
Bindu	Reserved	Jawahar pur (Mohali)
Bindu Kaur	Reserved	Kutbewal (Jalandhar)
Charanjit Kaur	General	Fatehgarh
Charanjeet Kaur	General	Karhali sahib (Patiala)
Gurpal Kaur	Reserved	Kantwepa(Jalandhar)

Harjinder Kaur	Reserved	Kurala (Mohali)
Harpreet Kaur	General	Fatehgarh sahib
Harpreet Kaur	General	Tripni (Mohali)
Jaspal Kaur	General	Rajpura(Patiala)
Jaswinder Kaur	Reserved	Rajpura (Patiala)
Jaswinder Kaur	Reserved	jallandhar
Jaswinder Kaur	General	Main(Patiala)
Kamaljeet Kaur	Reserved	Pepalmajra (Roopnagar)
Kuldeep Kaur	Reserved	Dosanjh khurd (Sbsnagar)
Kuldeep Kaur	General	Khabra (Roopnagar)
Kulwinder Kaur	Reserved	Phukri (Nawanshahar)
Kulwinder Kaur	Reserved	Sanewal(Jallandhar)
Kulwant Kaur	Reserved	Bhodipur(Jallandhar)
Manjeet Kaur	Reserved	Mangwal (Sangrur)

Manjeet Kaur	Reserved	Noorpur(Sangrur)
Manjeet Kaur	Reserved	Bhagwantpur (Roopnagar)
Manjeet Kaur	Reserved	Dhugarh(Jalandhar)
Manjeet Kaur	General	Rampur (Mohali)
Manmohan Kaur	General	Bhagowal(Ropar)
Manpreet Kaur	Reserved	Mangwal (Sangrur)
Paramjeet Kaur	Reserved	Dheriyan (Jalandhar)
Paramjeet Kaur	Reserved	Dhalla (Roopnagar)
Prof parveenarora		Ludhiana
Rachna devi	Reserved	Chaksadu (Jalandhar)
Rajvinder Kaur	General	Khabran(Jalandhar)
Rajwinder Kaur	General	Kurali (Ropar)
Raj rani	Reserved	Kothasadana (Gurdaspur)
Randeep Kaur	General	Uppal khedi (Patiala)
Ranjit Kaur	Reserved	Sahila (Sangrur)
Rashpal	General	Pindikhilwan (Sangrur)
Ravneet Kaur	Reserved	Naringarh(Mohali)
Renu Kaur	General	Jalalabad (Patiala)
Sarbjeet Kaur	Reserved	Latti(Sangrur)
Sarabjeet Kaur	Reserved	Aulakh (Gurdaspur)

Suman	General	Kasauli (Mohali)
Suman	General	Raisinghwala (Sangrur)
Sunita	Reserved	Kadian (Gurdaspur)
Surinder Kaur	Reserved	Haripur (Gurdaspur)
Veena rani	General	Khameda(Roopnagar)

Annexure 2

Workshop on

Women Sarpanch as Agents of Change- Opportunities & Challenges

11 April 2018, Punjab University

Organized by: SEWA & DCWSD, Panjab University
Sponsored by: State Institute of Rural Development, Punjab

Name /ਨਾਮ:

Age /ਉਮਰ:

Address/ਪਤਾ:

Educational Qualification:

ਵਿੱਦਿਅਕ ਯੋਗਤਾ

Contact number (if any):

ਸੰਪਰਕ ਨੰਬਰ

Marital Status:

ਵਿਵਾਹਿਕ ਦਰਜਾ

Name of Panchayat (Reserved or General) :

ਪੰਚਾਇਤ ਦਾ ਨਾਮ: ਰਿਜ਼ਰਵ ਜਾਂ ਜਨਰਲ

Do you have any political Background?
ਕੀ ਤੁਹਾਡੇ ਕੋਲ ਕੋਈ ਸਿਆਸੀ ਪਿਛੋਕੜ ਹੈ?

Is anyone from your family elected in any electoral polls?
ਕੀ ਤੁਹਾਡੇ ਪਰਿਵਾਰ ਵਿੱਚੋਂ ਕੋਈ ਵੀ ਕਿਸੇ ਵੀ ਚੋਣ ਦੌਰਾਨ ਲਾਈਜ਼ ਚੁਣਿਆ ਗਿਆ ਹੈ?

Annexure 3

1. RenanaJhabvala, President of SEWA
2. Prof. Pam Rajput, Emeritus Professor, DCWSD, Panjab University.
3. Dr.RosyVeid, SIRD Head.
4. Dr. Ameer Sultana, Chairperson, DCWSD, Panjab University.
5. Sunanda Dikshit, Coordinator, Punjab SEWA.
6. Dr. Rajesh Kumar Chander, Assistant Professor, DCWD, Panjab University.
7. Manish Sharma, Assistant Professor, Department of Gandhian and Peace Studies.
8. Akanksha , Research Scholar, DCWSD, Panjab University.
9. Anjali Vashishat, Research Scholar, DCWSD, Panjab University.
10. Gurmeet Kaur, Research Scholar, DCWSD, Panjab University.
11. Khushboo Aggarwal, Research Scholar, DCWSD, Panjab University.
12. Nazia Kamboj, Research Scholar, DCWSD, Panjab University.
13. NiyatiGulia, Research Scholar, DCWSD, Panjab University.
14. Sudiksha Bhatia, Research Scholar, DCWSD, Panjab University.
15. Veerdeep Kaur, Research Scholar, DCWSD, Panjab University.

4. Concluding Remarks

SEWA Punjab has thus had a successful conclusion of its first program in Punjab with the National Health Mission, of training Mahila Arogya Samitis to address the various **civic and health issues faced by women in rural and low-income areas**. The engagement with these women will be continued through mohalla meetings wherein SEWA Punjab facilitates organizing and discussing of issues, as well as a plan of action to address them. Further, we will help facilitate grassroots leadership of women from the communities to carry out the intervention programs, which will also ensure sustainability and participation in the programs. The partnering with government authorities and universities has begun this year to increase our reach further. SEWA Punjab will continue its outreach programs and sessions in the districts on health, awareness, livelihoods, skill development and so on. We **thank the Government of Punjab** for supporting our work.

Self Employed Women's Association,
Punjab
Report, 2018-19

Self Employed Women's Association, Punjab (2018-19)

Community Development through Organizing and Promoting Grass root Women's Leadership

The year 2018-19 has been significant for SEWA Punjab in the sphere of facilitating self-reliance, full employment and awareness and accessibility of schemes. We conducted over **2000 meetings wherein more than 10,000 women were reached out to**. We facilitated the following across five districts in Punjab, namely Gurdaspur, Sangrur, Moga, Ferozpur and Patiala, which the report will cover in detail-

- **Mahila Arogya Samiti (MAS)/ Mohalla Meetings** - an urban slum-based women's committee identifying and addressing health and other civic issues in the locality/ mohalla. The women are now change makers in their communities and several success stories have come as a result of the action taken from these meetings. ISB conducted an impact assessment of the training of the MAS, the report of which has been attached. Another significant aspect of the mohalla meetings was the identification and capacity building of local women leaders called *Aagewan*, who serve as a link between the community and SEWA coordinators. Aagewans are responsible for mobilizing the mohalla women and acting as a facilitator to address their concerns. They are appointed through an election system. By March 2019, there were 118 Aagewans - 63 mohalla Aagewans and 5 trade Aagewans.
- **SEWA Shakti Kendra (SSK)** - centres that provide women with resources, support and information for linkages to government welfare schemes, other SEWA programs, and so on. One Aagewan from each district volunteered to help the area in-charge to run the SEWA Shakti Kendra from her house, who was also made responsible for conducting mohalla meetings and visiting government departments. The Aagewans were given capacity building training, and a document consisting of details of all the welfare schemes of the centre and Punjab was explained and handed over to the team of every district. By the end of 2018, SEWA Punjab had established self-sufficient SSKs in five districts- Gurdaspur, Moga, Ferozpur, Sangrur and Patiala. More than 2,500 women have been linked since December 2018.

- **Community Outreach in Mohali-** in which SEWA Punjab visited and conducted sessions across several areas to identify the issues faced by the women as well as interventions to address them. We also conducted trade identification and facilitated the livelihoods of these women- for instance we encouraged girls from Jyanti Majri with stitching skills to take part in the Mahila Market in October 2018 and sell their products.
- **Skills and Livelihood Generation-** this year two significant aspects of skill and livelihood generation by SEWA Punjab was the formation of an SHG of twenty women with stitching skills in Moga District and the opening of a stitching training centre in Ferozepur, wherein women participants are given certificates on completion.
- **Business Correspondence- SEWA Bank Saathi** – it was decided to start the business correspondence program of SEWA Bharat in Punjab, in which women from the community are given training to provide financial services to the community at a low cost. This both empowers the woman coordinator as well as the community in terms of financial inclusion. A team from Uttarakhand where that model is in place came to Chandigarh to train the staff, and this will be carried forward.

1. Mahila Arogya Samiti and Mohalla Meetings

In order to address the significant lack of awareness and effective healthcare in low income urban areas in India, the National Health Mission (NHM) launched the program **Mahila Arogya Samiti (MAS)**, an urban slum based women's health committee aimed at actively involving women in the planning, implementation and monitoring of health and other civic services. Central to the MAS is the training of women leaders responsible for leading the NHM initiatives. SEWA collaborated with the NHM in 2016 with the objective of identifying and training the MAS in eleven districts in Punjab.

Post the MAS project in May 2017, SEWA Punjab through its own initiative continues to engage and expand these groups of women through **mohalla meetings**, empowering women to take up health and civic issues with the local authorities and getting them resolved. In the year 2018, SEWA Punjab has facilitated the functioning of these meetings across the districts of Gurdaspur, Sangrur, Moga, Ferozpur and Patiala.

1.1 About the Mohalla Meetings

The meetings are broadly of two kinds- Health and Civic Issues Related Meetings, and Trade Meetings.

a. Health and Civic Issues Related Meetings

The following were discussed in the mohalla meetings most frequently-

- Water and sanitation issues
- Infrastructure, such as lack of street lights, blocked sewage pipes
- Government schemes, how to register and access them
- Awareness creation on health and allied issues, including nutrition for pregnant women, menstrual hygiene, vaccinations for diseases like measles and rubella, availability of medicine in the aanganwaadi and so on.

Based on the issues and concerns raised in these meetings, action was taken with the concerned civic and local authorities. SEWA Punjab helped the MAS members along with

the mohalla women learn how to write an application and visit officials regarding any issue they are facing. Within a few months, the women became empowered enough to take up issues on their own with the government, enabling civil hospitals and civic authorities to extend their reach to the communities with their health interventions, such as vaccination drives and health camps, addressing the issues of sanitation faced, and so on.

Some images of the meetings and the outcomes are given below-



Images depicting mohalla meetings in Gurdaspur (left) and Patiala (right), 2018



Image of Ambedkar Nagar, Sangrur, before and after action was taken by the mohalla women(April 2018)

b. Trade-Related Meetings

In 2018, training was conducted for the organizers of the mohalla meetings to understand the trades and trade identification of the participating women. Based on the training, the focus of the mohalla meetings expanded to include identifying, organizing and mobilizing women of the mohalla on the basis of occupations like domestic workers, construction workers and home based producers of goods like juttis, parandas and so on. The women were encouraged to form trade-groups to forge a sense of community and a platform to voice their concerns. Information on SEWA and the importance of trade unions were also stressed here.

Another significant aspect of the mohalla meetings was the identification and capacity building of local women leaders called *Aagewan*, who serve as a link between the community and SEWA coordinators. Through the nurturing of grassroot women's leadership, community led mobilization is facilitated as well as better redressal of the issues faced by the community. Aagewans are responsible for mobilizing the mohalla women and acting as a facilitator to address their concerns. They are appointed through an election system. By March 2019, there were 118 Aagewans- 63 mohalla Aagewans and 5 trade Aagewans.

1.2 Mohalla Meeting Success Story

In Batala, a town in district Gurdaspur, the area lacked sanitation and hygiene. The drains were getting blocked because of garbage being thrown into them. During monsoon, the stagnant water causes diseases and bad smell.

This issue was raised by members in one of the Mohalla meetings and they all decided to write an application to Municipal Counselor. It was written and sent but no action was taken by him. Even the second time when the letter was written, there was no response. Then, the women decided to write the letter to the Municipal Corporation. Signatures of every member of the mohalla were taken and an application was submitted. Yet again, however, there was no action taken.

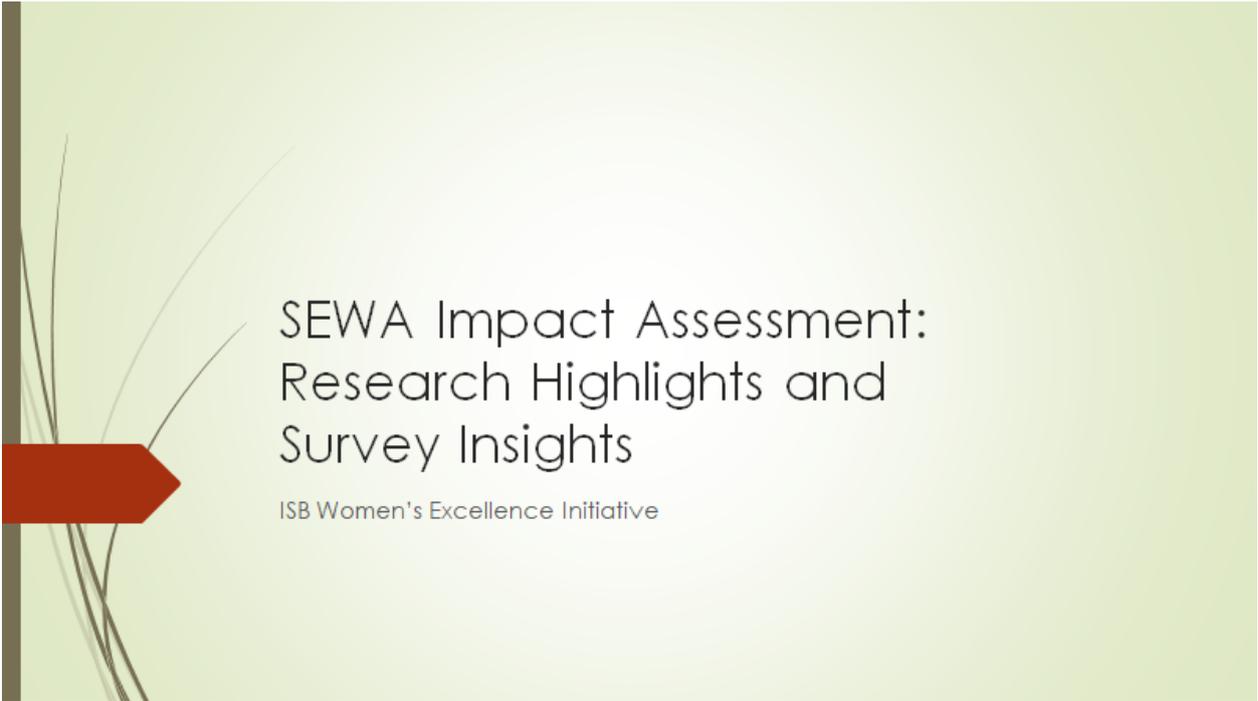
It was decided to take up this issue with the Sub Divisional Magistrate to whom they wrote an application in which the signatures of 741 women were taken. The Sub Divisional Magistrate took the necessary action and this issue was solved with help and support of everyone.



Before and after collective action by women of Batala, Gurdaspur (2018)

1.3 Impact Assessment of SEWA's training to Mahila Arogya Samiti done by Indian School of Business

The Women's Excellence Initiative at **Indian School of Business (ISB)** conducted an impact assessment of SEWA's work in Punjab on the training and capacity building of MAS members. The summary of the findings of the study showed that as per the self-assessment of the women, **they benefited from the training in both awareness and leadership aspects.** Through the sessions, the women were able to identify their skill set. This could then be built upon with appropriate information to increase employment opportunities. It was found that Mahila Arogya Samitis have the potential to act as a pivotal link between the community and public health services. The presentation on the same is given below-



SEWA Impact Assessment: Research Highlights and Survey Insights

ISB Women's Excellence Initiative

2

Training Phase: Building Capacity

- SEWA's main purpose of training was to build capacity in terms of awareness and employment opportunities among MAS members which will further spread in the community.
- During training, women were educated about various government health programs for preventive and promotive health care. They were also explained about the formation, role, responsibilities, and rights of MAS. Keeping in mind the lower literacy level of the participants, training modules were designed in the form of role play activities and games for easy comprehension of topics.

3

Impact Assessment

- Through SEWA, ISB had an opportunity to work at the grass root level in Punjab. Women's Excellence Initiative of ISB signed an MoU with SEWA to collaborate and undertake an impact assessment study with the objective to evaluate the efficacy of the training imparted by SEWA to MAS members.
- Assessment covered questions from multiple dimensions such as increased levels of awareness about the health programs, empowerment and self-reliance, community capacity building and gaining access to local government bodies to raise civic concerns.

4

Statement of problem

- SEWA Bharat, along with its sister organization Lok Swasthya, undertook the challenge to train the members of MAS in terms of awareness and guidance about various government schemes and health programs.
- The next step was to evaluate the efficacy of the training imparted. ISB conducted a study to assess the impact of training imparted to the MAS members by SEWA. Through this study we hope to encourage and promote empowerment along with social and economic development of women in future.

5

Objectives of the study

1. To assess the impact of SEWA trainings imparted to the MAS members in terms of increase in their level of awareness with respect to government health programs.
2. To assess the impact of SEWA work on organizing MAS members towards empowerment and self-reliance.
3. To assess whether SEWA has the potential to build capacity of MAS members so that they can voice their concerns and get them addressed appropriately.
4. To uphold whether SEWA can bring a change in the process of service delivery mechanisms at the grassroots levels.

6

Methodology

A combination of both qualitative and quantitative measures were used, listed as follows:

- Qualitative component: Situation Analysis

The investigators directly interacted with MAS members so that deeper insights could be gathered at grassroots situation. They also had separate sessions with the 'Aagyawans' of the MAS and the district coordinators to ensure high levels of accuracy and reliability.

Methodology

- Quantitative component: Survey Method

Impact assessment was conducted through a standardized questionnaire. These questions assessed the result of SEWA trainings imparted to the MAS members from multiple dimensions such as increased levels of awareness about the health programs, empowerment and self-reliance, community capacity building, gaining access to local government bodies to raise civic concerns etc.

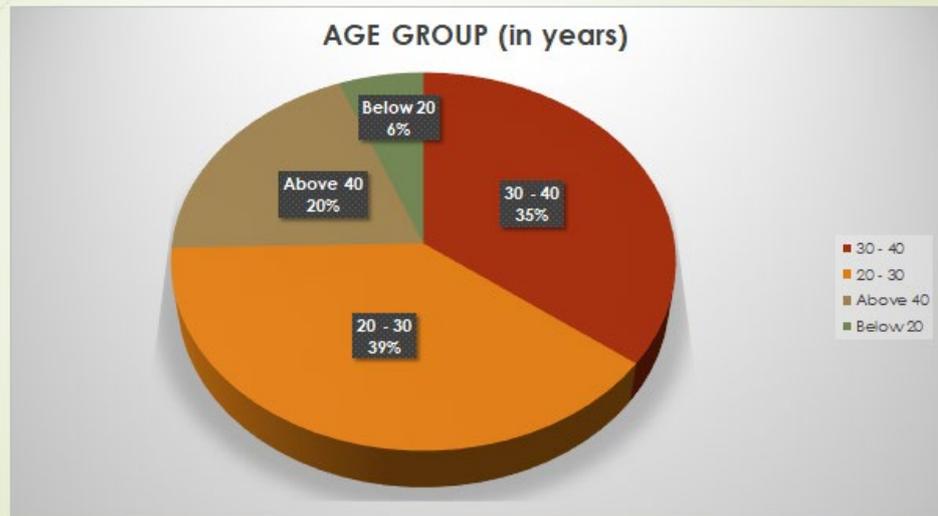
Survey was administered using a software called Qualtrics and it was circulated amongst MAS members with the support of district coordinators of SEWA in each district.

Major stakeholders involved

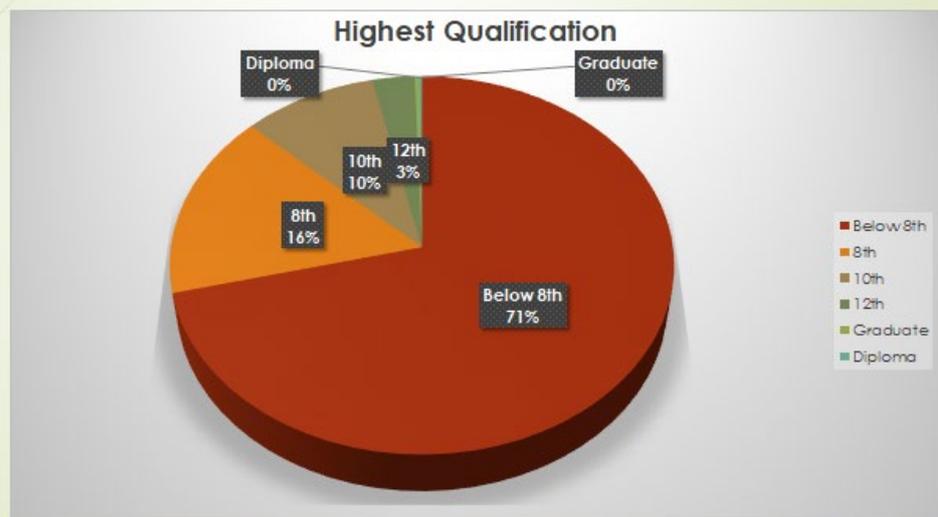
The four key stakeholders in the current study were:

- MAS members
- District coordinators of SEWA
- Investigators from ISB and
- Local government bodies

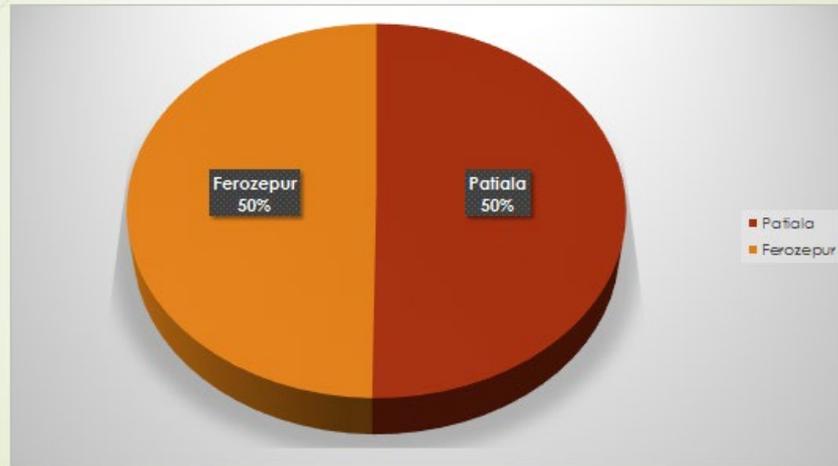
Demographics of the respondents



Demographics of the respondents



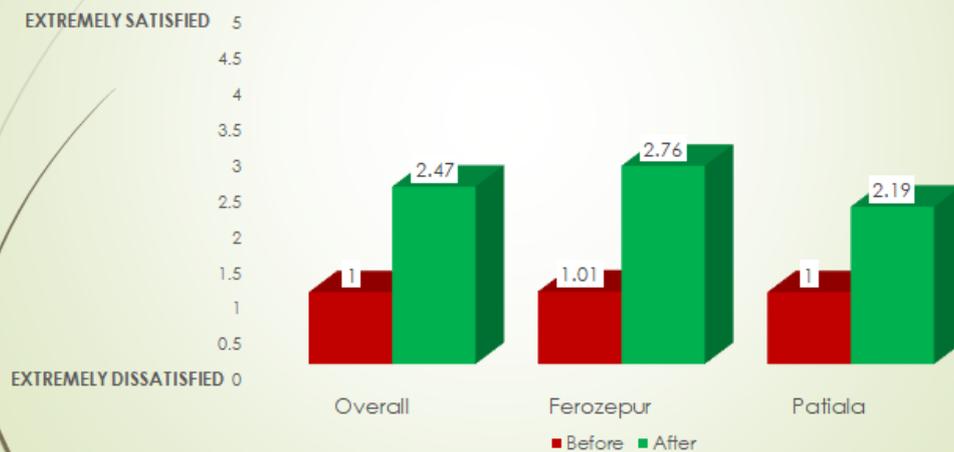
District wise respondents distribution



12

Self assessment before and after engagement with SEWA

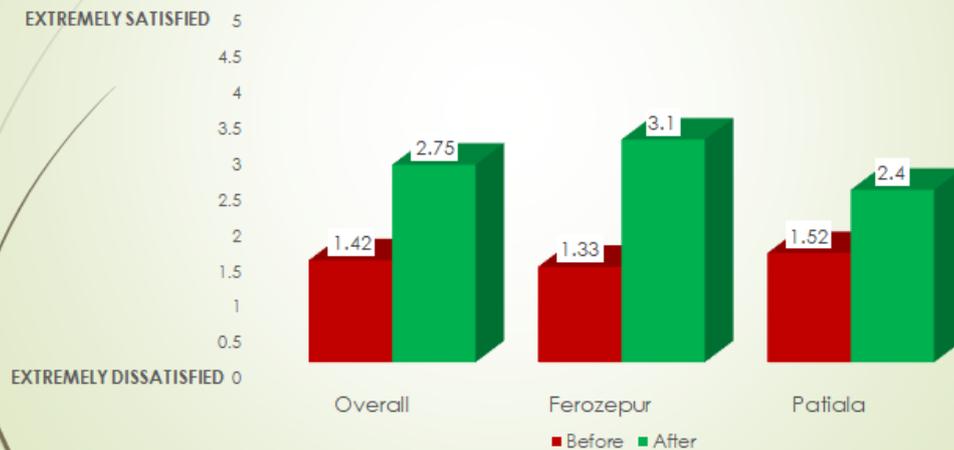
1. Understanding of MAS: Structure, Functions, Need and Rights



13

Self assessment before and after engagement with SEWA

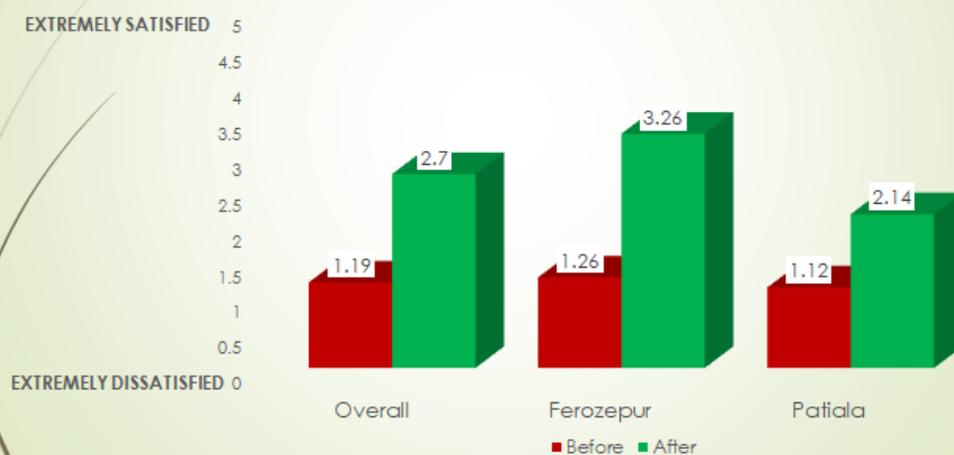
2. Importance of healthy lifestyle and hygiene



14

Self assessment before and after engagement with SEWA

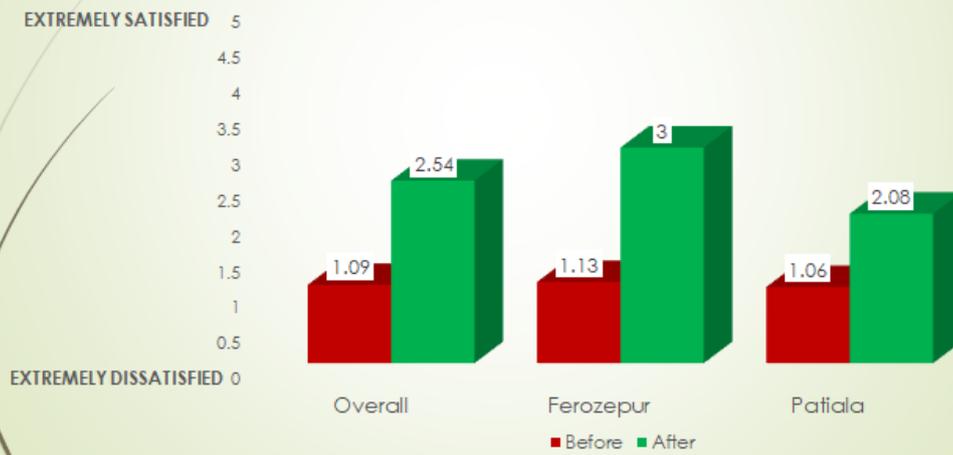
3. Level of awareness about various govt health schemes



15

Self assessment before and after engagement with SEWA

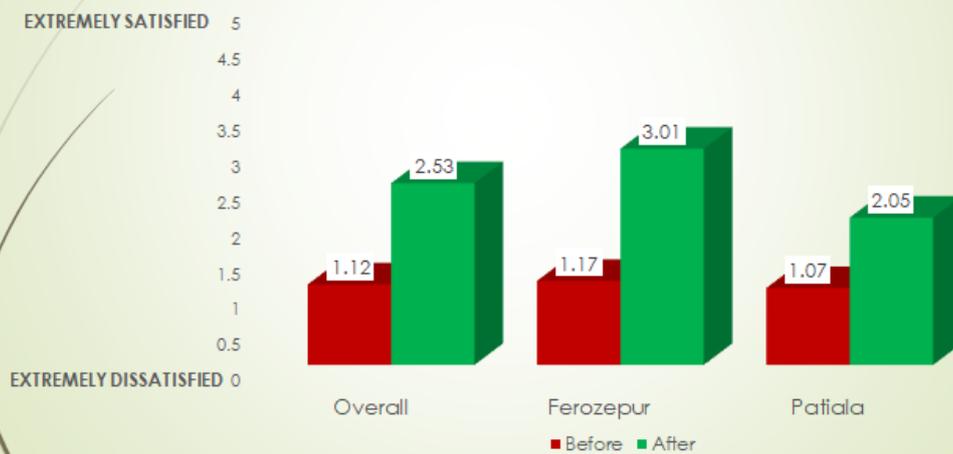
4. Self-empowerment



16

Self assessment before and after engagement with SEWA

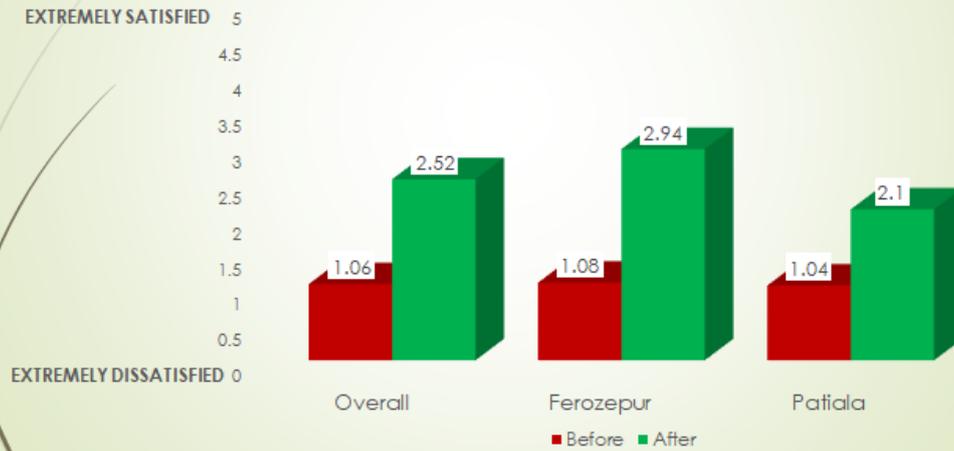
5. Self-reliance



17

Self assessment before and after engagement with SEWA

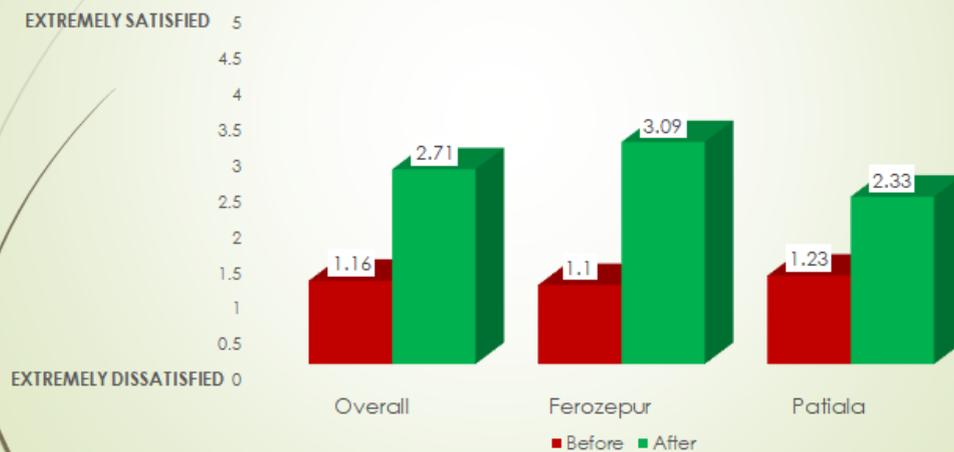
6. Ability to voice civic concerns to local bodies



18

Self assessment before and after engagement with SEWA

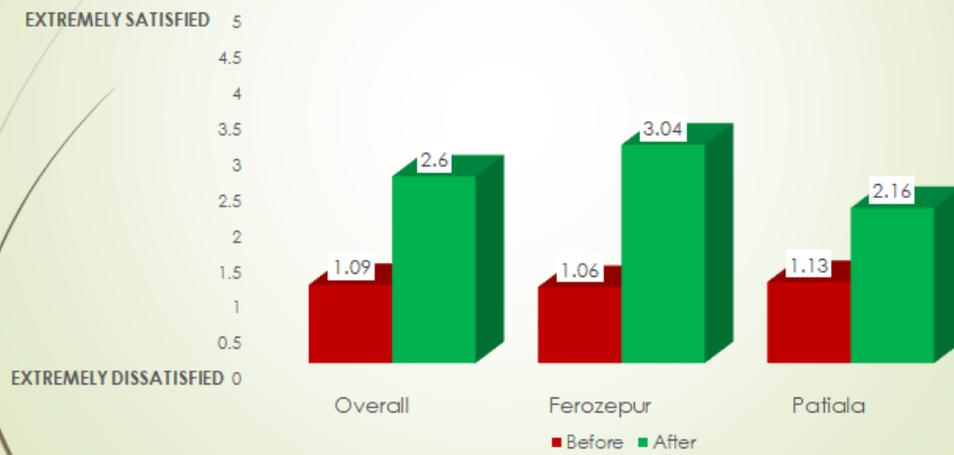
7. Motivation to work for society



19

Self assessment before and after engagement with SEWA

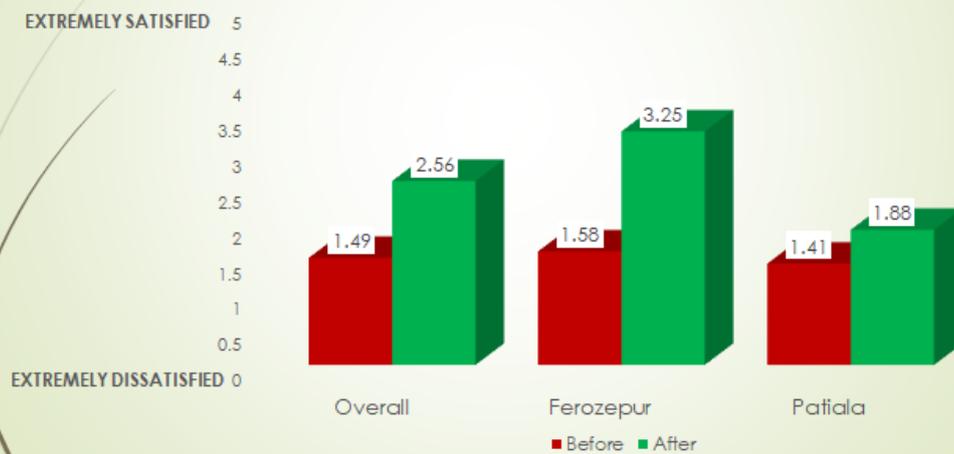
8. Ability to lead the people and other MAS members



20

Self assessment before and after engagement with SEWA

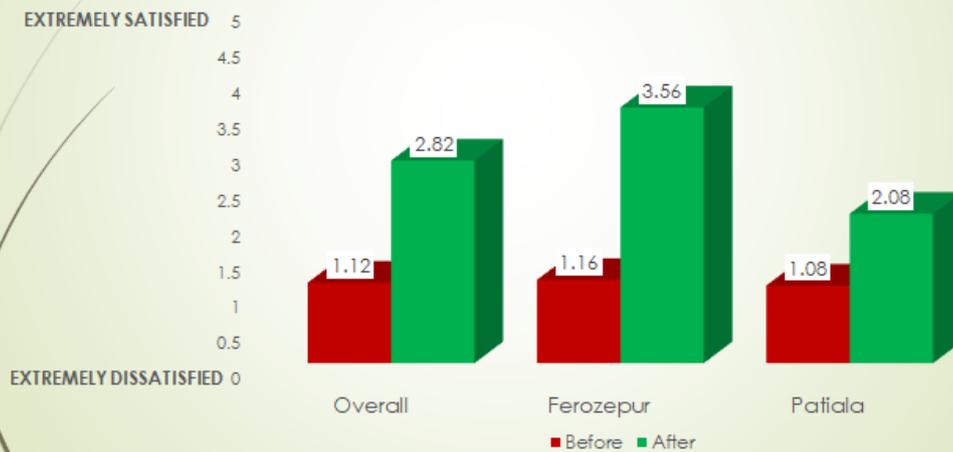
9. Ability to earn livelihood



21

Self assessment before and after engagement with SEWA

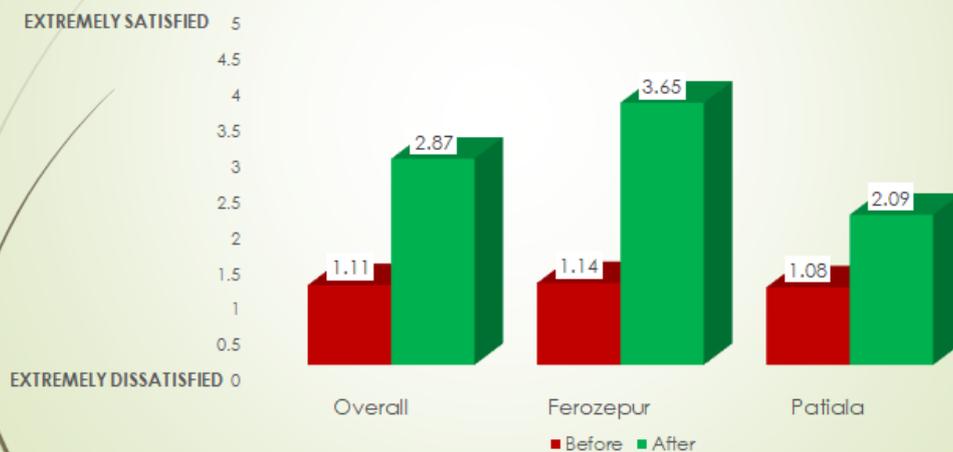
10. Confidence to address the issues properly



22

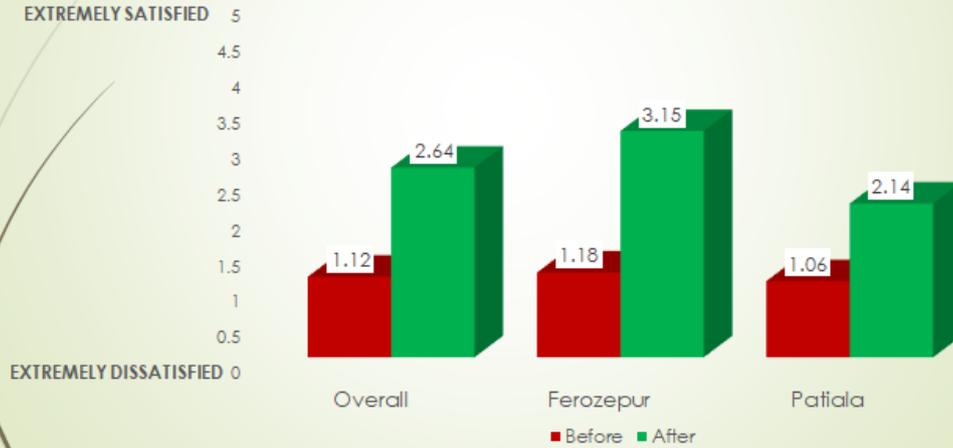
Self assessment before and after engagement with SEWA

11. Ability to get right information on time



Self assessment: Overall rating

Significant difference between before and after rating for each parameter



SEWA Services Evaluation

How satisfied are you:



25

SEWA Hand-holding Evaluation

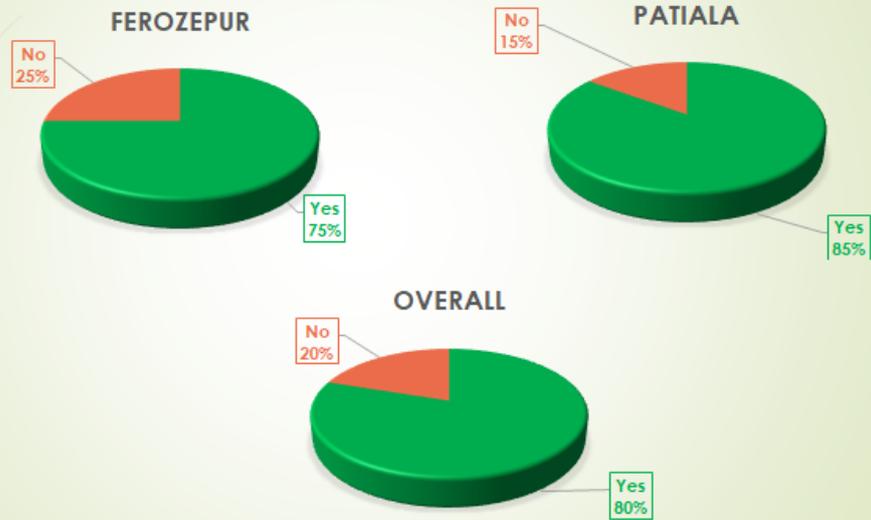


26

SEWA Hand-holding Evaluation

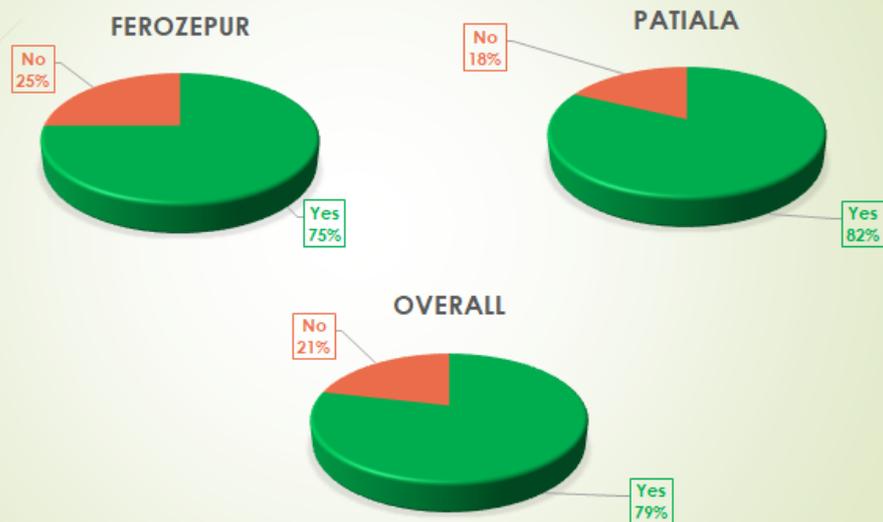


Handholding from SEWA after training?



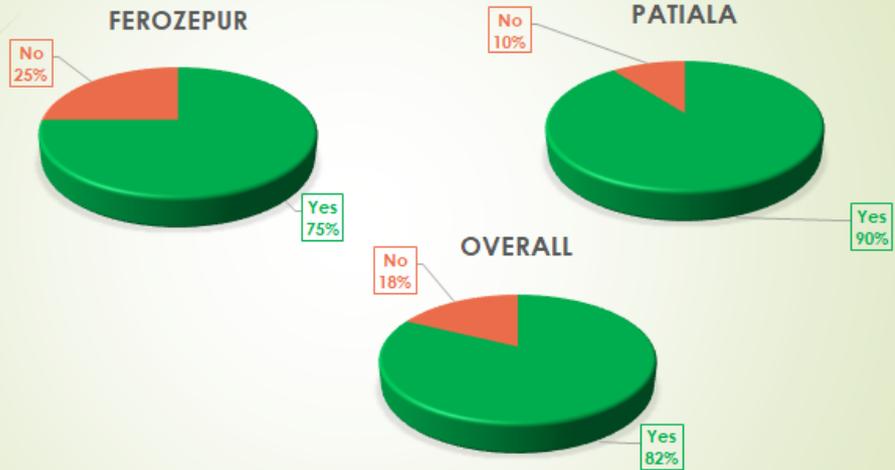
80% responded 'Yes' that they got handholding from SEWA after training

Positive behavioural shift in local officials?



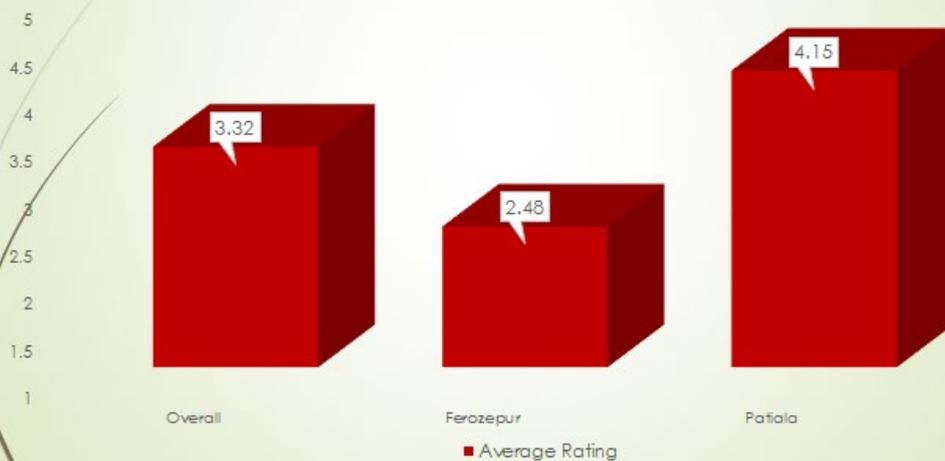
79% members witnessed behavioural shift towards them by officials

Should MAS members have representation in local government bodies?



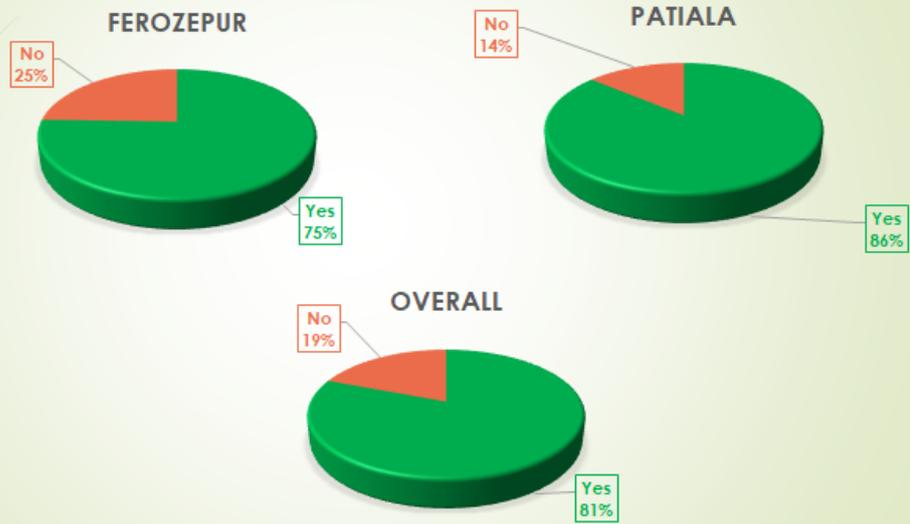
82% members responded 'yes'; strongly implying that democracy should grow from grassroot level

Satisfaction level with SEWA



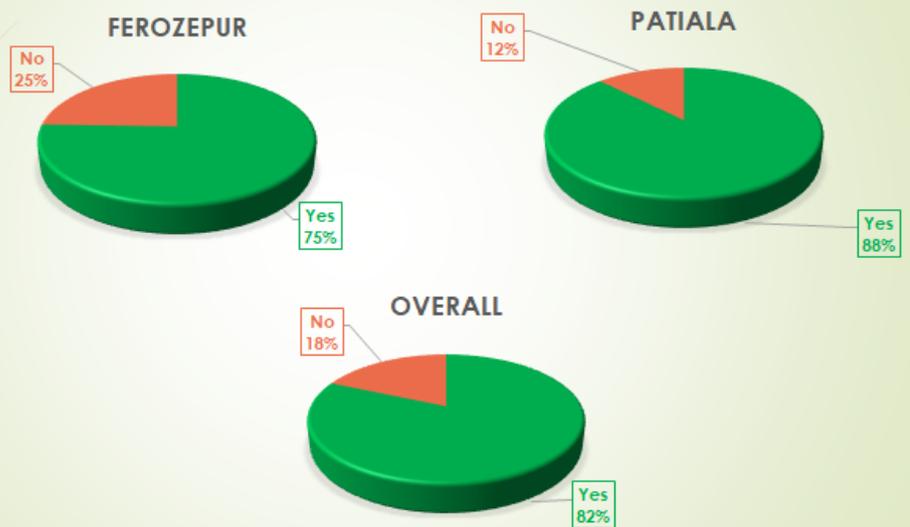
31

Would you recommend other women to get engage with SEWA?



32

Would you actively participate in other programs by SEWA in the future?



82% of respondents are happily willing to engage with SEWA.

33

How has SEWA's impacted your life? Tell us about your experience with SEWA?

- "With support from SEWA, I have registered myself under domestic worker scheme"
- "Now, I am aware of the free medicine facilities available"
- "SEWA provided me employment via SSK"
- "I got to know about women rights"
- "Now, I am aware of the importance of cleanliness and healthcare"
- "With SEWA, we raised our concerns to SMO and problem was resolved"
- "SEWA helped us in writing letters to officials. As a result, they constructed new road in our area"
- "SEWA helped us in getting rid of cleanliness problem in my society"
- "I gained self-confidence"
- "We solved lighting issue in our area"

34

How has SEWA's impacted your life? Tell us about your experience with SEWA?

- "No point of meeting if in the end we are still unemployed"
- "I have lot of work at home. Leaving that work to attend SEWA meeting will not solve my family income problem"
- "There is no monetary incentive for going and attending the SEWA meetings"
- "I got some awareness but no impact on my life yet"
- "I am still unemployed"
- "I didn't attend any SEWA meeting after training"

Please share suggestions on how SEWA can improve its services?

- **“Training should be given regarding how to start our own business”**
- **“We need a local office of SEWA where we can discuss our problems”**
- **“Identity cards should be provided to all MAS members to give us a sense of common group”**
- **“Medical camps should be organized related to the health issues of women and children”**
- **“Multiple groups should be formed within a ‘Mohalla’ as per skills and then collective training should be provided”**
- **“Some money should be given to us for coming and attending the SEWA meetings”**

Insights from the visit

- Upon visiting the jhuggis in Patiala city and nearby areas, it was observed that Mahila Arogya Samitis (MAS) have the potential to act as a pivotal link between the community and the public health services. Empowerment of women can lead them to be change agents in future.
- Many women have wonderful ideas and relevant skills to work, but they lack the knowledge to convert it into livelihood. Therefore, only a few women have been able to see the impact in Punjab. However, if these kind of training programs can be arranged regularly then we will definitely get more fruitful outcomes in near future.
- To setup a few SEWA Shakti Kendras (SSK) in bastis of Punjab. The SSK is a one point nodal centre, disseminating information on government health programs and handholding the marginalized women to access them. SSK is a very successful experiment of SEWA in Gujarat, Madhya Pradesh, Rajasthan, Bihar, West Bengal, Delhi and many other states.
- The way ASHA has changed the way of health delivery system, same accountability we can build for service delivery mechanisms.

Key highlights emerged from study

- Self-assessment scores clearly indicates that MAS members have benefitted from training. Scores improved for both awareness and leadership related factors. Therefore, these training programmes can definitely promote empowerment along with social and economic development of women in future.
- 82% of respondents said 'YES' to the question of need for having their representation in local government bodies, implying that democracy should grow from grassroots. That is people from bottom of pyramid should be a part of policy framework. Those are the target people for which most of the government schemes have been framed.
- The key purpose of Panchayati raj institutions is to empower commonwealth especially women empowerment and poverty alleviation. To achieve this, government should invest in strengthening local bodies like MAS.

Key highlights emerged from study

- Due to lack of information access at right time, women lack livelihood. Before and after results from training clearly indicated the difference. That is, MAS members self-assessment rating improved from 1.12 to 2.64 (on a scale of 1 to 5) after training. Therefore, SEWA as a grassroot body has the potential to build capacity of marginalized women so that they can voice their concerns as well as get these addressed.
- SEWA helped women to identify their skill set. This capacity building along with financial literacy can be leveraged to earn livelihood. Therefore, MAS members can be developed as a pool of audience skilled enough to be employed.

Visit



2.Social Security through SEWA Shakti Kendra (SSK)

SEWA Shakti Kendras are centers that provide women resources, information, and support for economic and social development. They help members with linkages to legal solutions and to other SEWA programs, such as microfinance, health, employment, and skill development opportunities. The SSK is also critical as a mechanism for last mile delivery of social security and welfare schemes. Through this, we can assist marginalized women to have access to these schemes by helping them in providing information, completing and submitting forms for social security and welfare schemes and so on. Staffed by a woman from the local community, these centers provide assurance and support to help women navigate the application process and receive public welfare benefits.

By the end of the year in December 2018, SEWA Punjab established financially self-sustaining Sewa Shakti Kendras across five districts, namely Gurdaspur, Moga, Ferozpur, Sangrur and Patiala. **More than 2500 people have been linked since then.**

2.1 SSK Model, SEWA Punjab

One Aagewan from each district volunteered to help the area in-charge to run the SEWA Shakti Kendra from her house. She was also made responsible for conducting mohalla meetings and visiting government departments. All the Aagewans who volunteered were given capacity building training, and a document consisting of details of all the welfare schemes of the centre and Punjab was explained and handed over to the team of every district.

Several government departments were visited such as the Labour Department, Health and Family Welfare department, Social Security and Women and Child Department, and the concept and intent of the SSK was shared. The SSK Aagewan began conducting regular mohalla meetings 15th December 2018 onwards, spreading awareness about SSK and its services, basic documents like Aadhar and PAN card, etc. Around 7 election cards and 2 labour cards were made, and awareness was given to the mohalla about the importance of basic documents in applying for any government scheme.

2.2 Report of the Punjab SEWA Shakti Kendra since December 2018

Government schemes	Number of people linked
Women reached	2683
Aadhar Card	343
PAN Card	18
Election Card	44
Domestic Workers Registration	629
Old Age Pension	12
Construction Workers Form	61
Sukanya	1
Meetings Conducted	233

Following are some images of the SEWA Shakti Kendra meetings-



Image depicting state team training District in-charge and SSK Aagewan in Moga (left) and in Ferozpur (right)



Images of state team training District in-charge and SSK Aagewan in Gurdaspur (left) and Nabha (right)

3. SEWA Punjab's Community Outreach in Mohali

SEWA Punjab's conducted several visits and community outreach programs in slums and poor villages to understand the issues faced by the women as well as identify ways to empower them both economically and in their decision making capacities, in order to make them self-sufficient. Following is the community outreach done by SEWA Punjab in Mohali, wherein six visits with 10-15 women in each session were held-

➤ Visits and interventions in slums and poor villages in Mohali-

1. *Visit to Anganwadi, Jagatpura-* in which we talked about Mohali Administration's and SEWA's initiative to enhance adolescence health and encourage women and young adolescent school dropouts of Jagatpura colony to come together and work towards self-reliance. Population of Jagatpura was identified as either domestic workers or adolescent girls learning stitching (mostly dropouts). They were told about the importance of vocational training.
2. *Visit to Ambedkar Colony, Balongi-* The women were told about the importance of Mahila Arogya Samiti (MAS) by discussing the success stories of other districts of Punjab. Women were encouraged to get together and form a group and think of ways of employment
3. *Visit to Singha Devi Colony, Nada-* A sizable number of marginalized groups like Banjaras, Valmikis, rag pickers, beggars and baazigars are living here, but many do not have caste certificates. Illiteracy amongst women and girls is high. The women of the area discussed with us their civic issues, the need for a primary health center, Anganwadi, and skill training for livelihood.
4. *Visit to Ambedkar Colony, Balongi-* the importance of forming groups or committees to address the issues of the women was discussed. A general list of skill sets that the women have was made and discussed to enhance their skills, to enable them to earn

livelihood. After the meeting, we visited a few houses and the women displayed their handicrafts



Mohalla meeting in Singha Devi



Mohalla meeting in Balongi

5. *Jagatpura Colony* – we identified two major trade groups here, that of domestic workers and a stitching group.
6. *Jyanti Majri* - we identified a group of drop out girls who are formally trained in stitching. A discussion was held on their common issues as well as the concept of working together to earn livelihood. They showed their willingness to participate in the Mahila Bazaar to be held on October 13th, 2018. We helped them make some products like cushion covers, tray covers etc for the same and have regularly been meeting these women. The images of the same are below-



Mahila bazaar in Mohali administration office

4.Skill and Livelihood Generation

4.1 Formation of “MogaMehila Singh SHG”

The mohalla women in Moga requested us to guide them to start some work so that they can be self-reliant. Regular follow ups by Sunanda ji with Cooperative Department Chandigarh led to issue of letter by Cooperative Department, Chandigarh to all the cooperative departments of the respective district where SEWA is mobilizing women. The letter stated that all the cooperative Departments to help the district coordinators to form SHGs. On 20th September 2018 Jaspreet, our District Coordinator in Moga received a call from Mr. D.R Kuldeep, Cooperative Department, Moga. Mr Kuldeep asked Ms. Jaspreet about SEWA’s scope and what all we have achieved in the last two years. He informed that he was instructed by Ms. Nibha Rana to help us form a SHG to make the women self-reliant. So, it was decided to start with one SHG and see how it performs.

Jaspreet Kaur mobilized a group of 20 women in Ram Nagar who showed interest in learning stitching. One woman from this group attended a training session on forming a co-operative, by the Cooperative Department of Chandigarh. Mr Kuldeep from the that department called for a meeting which was attended by Jaspreet, and Ms. Kulwinder Kaur and Ms. Lakhwinder Kaur were present from the Mehila Singh Society.

It was decided on 25th October 2018 that the group of 20 women would be trained to stitch. The trainer would be provided by SEWA, and the Cooperative Department would provide Rs 4500 to the trainer. It was decided that Ms. Charanjit Kaur, a resident of Ram Nagar has been stitching for a long time, would be the trainer. On the same day, a meeting was called where Mr. Kuldeep addressed them and Ms. Jaspreet explained to these women the importance of this training and how this can make them self-reliant. They named their SHG as “The Moga Mehila Singh SHG”. On 29th October SHG was inaugurated and regular training started.



4.2 Opening of Training Centre in Tanka Wali Basti, Ferozpur-

Several women in this locality were unemployed and wanted to learn stitching. The district in-charge took it up with local administration and requested to open a stitching centre for them. The government donated a few sewing machines and one of the women of the community was hired as a trainer. Stitching classes were started, in which a batch of 25 women were trained for three months. All the women who successfully completed the training were given a certification of completion.

5. Business Correspondence- SEWA Bank Sathi

After our President Shrimati Renana Jhabvala met the Principle secretary Anirudh Tiwari it was decided to initiate Business Correspondence model in Punjab. SEWA had already been doing the BC model in Uttarakhand. So, a team from Uttarakhand came to Chandigarh to train the staff in BC .Training of Area In- Charges of all the districts was conducted by the Business Correspondence team from SEWA Uttarakhand .Finger printing machines were provided to them for their SEWA Bank Saathi who will work for their districts in Punjab.

6. Concluding Remarks

SEWA Punjab in 2018-19 expanded its reach to marginalized women this year through its engagement with the MAS and mohalla meetings. The study conducted by Indian School of Business (ISB) showed the **women had benefited** from the training in both **leadership and awareness aspects**. It was found that these meetings have the potential to act as a pivotal link between the community and health services. The findings of this study helped shape the work for the coming year. Through the SEWA Shakti Kendras that were fully functioning by December 2018, more than **2,500 women have been linked** to various schemes and government welfare services. Our team continues its community outreach to identify the **skill sets of women in rural and low-income areas** in order to facilitate their empowerment and decision-making capacities, such as in Mohali. The formation of an SHG and skill centre has aided **women's financial independence**. The business correspondence project to enhance financial accessibility expanded in the next year. We thank Government of Punjab for supporting our work!

Self Employed Women's Association,
Punjab
Report, 2019-20

Self Employed Women's Association, Punjab (2019-2020)

Self Employed Women's Association is a multi-state trade union which works towards organizing and advocating for the rights of women in then informal sector, who account for more than 90 percent of the total working women force. The informal sector is characterized by several social and economic risks that increase the vulnerability of women workers, such as irregular wages, unsafe working conditions, poverty, and illiteracy and so on. The goals of SEWA are to empower women in the unorganized sector in a holistic manner through facilitating-

- **Full employment**, work that provides economic security, food security and social security
- **Self-reliance**, to support women towards being autonomous and self-reliant both economically and in terms of their decision-making ability.

The year 2019-20 has been a significant one for SEWA Punjab wherein we expanded our activities and programs further in the spheres of health, livelihood, capacity building, financial inclusion, grass root leadership, increasing access to facilities and promoting women's self-reliance. We reached out to approximately 40,000 beneficiaries. This report will cover the following aspects of work carried out this year-

- **Grass root Leadership and Self-Reliance through Mohalla Meetings and Aagewan Vikas-** more than **2,500 mohalla meetings** were conducted across the districts of Moga, Sangrur, Ferozepur, Patiala and Mohali in the year 2019-20, each with approximately 15- 20 women per group. Aagewan Vikas sessions were conducted for capacity building of the local women leaders, that covered the introduction to SEWA and its services, including the process of documentation for schemes, empowerment sessions such as understanding gender relations and technical capacity building such as financial literacy awareness sessions.
- **Facilitating Social Security Linkages through SEWA Shakti Kendras-** promoting access to social security such as welfare schemes. **More than 2000 linkages** of various important documents like Aadhar Card, PAN Card and schemes such as old age pension have been done since January 2019. A document with all the government

schemes of the centre and Punjab, translated from Hindi to Punjabi, was also shared across the districts.

- **Health Awareness (Jagruti) Sessions** – providing access to information and health education, strengthening public service linkages, and reducing health expenditure. In these sessions, several issues related to health were discussed such as nutrition, maternal and infant healthcare, sexual health and reproductive rights, diseases and so on. SEWA Health Saathis were also trained to promote access to healthcare- who would directly refer women to government and private health care centres. **58 Health Sessions were conducted in 2018-19, till March 2020 and more than 850 women were reached out to.**

- **Livelihoods and Skill Training** –several programs were conducted this year in this sphere, and one such important one is Sangini Program of training for elderly and child care, conducted in Mohali. Almost 3000 women were reached out to during our mobilizing, and we conducted our first fifteen-day training program in September. This was done in **collaboration with trainers from SEWA Kerala**, who are successfully running the project as well. Several success stories have emerged out of this project. A mutual benefit trust was also registered with domestic workers on the board of trustees to manage SEWA Sangini and provide assistance. Several placement and outreach activities were carried out this year for the trained women, Sangini also opened a day care centre in RBI Chandigarh, where two women were placed. Apart from this, we worked with artisans in Sanour, Nabha and also took part in the Laado SHG Mela where we conducted an orientation program.

- **Financial Inclusion through Business Correspondence (BC) Program-** this program aims at empowering local women as business correspondents to deliver financial services to the community, which empowers both the women and community. We mobilized women more than 2000 women during our field visits to understand the concept and process, identified those keen to work as CSPs and conducted technical training. **Fifteen women** in the community have been trained as SEWA Bank Saathis Around **8000 people are beneficiaries** of the business correspondence program. All the unbanked areas of the districts we function in have been covered under this program.

1. Facilitating Grass root Leadership and Self-Reliance

Mohalla Meetings and Aagewan Vikas

SEWA believes in empowering women to be agents of change in their local communities and facilitates their collectivizing and capacity building to take up various civic and health issues faced with the civic and government authorities. This is done through mohalla, or community meetings, which are informal settings in which women come together to voice their concerns. Further on, active participants identified in these meetings are trained as leaders, known as Agyawans. Agyawans act as a link between SEWA and the community and facilitate the discussions and actions to be taken. The mohalla meetings and Agyawans are thus central to SEWA's vision of self – reliance of women workers. These are described below-

1.1 Mohalla Meetings

SEWA for years has used the informal mohalla (community) meeting set up for the women to come together and discuss their issues. Mohalla (community) meetings bring communities of women together to voice their concerns and propose solutions to their issues. The aim is for these women to open up and voice their concerns and become empowered to become self-reliant. Several issues such as water and sanitation, infrastructural issues like drainage problems, health issues and awareness, trade meetings, welfare schemes and so on are discussed, and a plan of action is collectively decided in case there is need of redressal. In these meetings, SEWA Bharat, the concept and importance of unions, and the achievements of its members would also be discussed.

Number of mohalla meetings done in 2019-

Districts	No. Of meetings
Moga	600
Sangrur	470
Ferozepur	385
Gurdaspur	600
Patiala	467
Mohali	112

SEWA Saathis, that is, local community workers, organize mohalla meetings for micro-level agenda setting, and to identify and train Aagewans.



Images of meetings by the Punjab team

1.2 Aagewan Vikas

SEWA Punjab's Aagewan Vikas initiative began with the objective to build capacity of the Aagewans to ensure sustainability of its development programs on ground. Aagewans (those who come forward) are SEWA members who exhibit a natural tendency to take on a leadership role in their community. Aagewans are champions of the SEWA philosophy and are the driving force of SEWA's organizing and advocacy efforts. They occupy a unique position in the organizational structure and form the link between SEWA staff and the membership base. SEWA Punjab has a cadre of 50 women Aagewans. SEWA's objective is to build capacity in the Aagewans to ensure sustainability of its programs and lead the change within communities.

The objectives of Aagewan Vikas are as follows-

- Develop Aagewans as champions/ambassadors of the SEWA movement
- Aagewans to be made the driving force of SEWA's organizing and advocacy efforts
- Aagewans to be the problem-solvers, go-to persons for members of respective areas – first point of contact with the union

- Aagewans to be made to feel valuable not only for SEWA, but for society at large
- Aagewans to be developed in a way that they could train and build capacity of SEWA members by propagating SEWA's ideology
- Aagewans to be developed as leaders of community action



Aagewan group, Gurdaspur

The Aagewans identified in the community are provided with training and capacity building. SEWA Delhi organizes diverse training for Aagewans to enable them to carry forward grassroots development to community women. Training sessions help them solve local community issues brought up in mohalla meetings. Regularly voluntary sessions of short durations (2 hours) are conducted to build women's technical capacities. The sessions cover the following-

- **Introductory sessions** - Acquainting them with SEWA programs as well as government schemes that SEWA links members with. This includes training them on documentation required, processes to be followed in government offices and so on.
- **Empowerment sessions** - Economic position of women, contribution of women to the economy, understanding gender-based power relations within family and society at large

- **Technical capacity building sessions** - These are conducted on a variety of issues such as financial literacy and basic health awareness, and are conducted throughout the year.

1.3 Aagewans as Agents of Change – Case Studies

Aagewan- Renu

Area – Shiv Nagar, Gurdaspur

There was an issue of electricity cables falling on the floor in this area and this was brought up in a mohalla meeting. An application was written and submitted to the Municipal Corporation by Renu and twelve other SEWA members. A follow-up was done but the issue was not solved. They told the SEWA members to visit the electricity office and meet JE. Members went to meet JE and told them their issue, and a follow up was done two-three times. Then, JE sent his men and finally the cables were put in place. This issue took almost four months in solving.

Aagewan- Kulwinder Kaur

Area – Shiv Nagar

Kulwinder Kaur is a very active Aagewan who has a good understanding of SEWA. She stitches curtains at someone's shop.

In the month of December, Safai Sewaks were not doing their work in the area, which was causing a mess in the locality. Kulwinder Kaur called a mohalla meeting and talked to all the women regarding this. All of them decided to go the Municipal Corporation but this issue continued. She called for another mohalla meeting and this time the women decided to write a letter to the Sanitary Inspector. They conducted regular follow ups on the issue and finally it was solved. The process took 20-25 days.



Agewan Name - Sarabjit Kaur

Area – Jaimal Singh Colony

Sarabjit Kaur is a highly active Aagewan who also helps in uniting other mohallas. She understands the concept of SEWA well and devotes a lot of time to it. Whenever there is an issue, she takes the initiative to solve it.

There was an issue of drains full of garbage in the locality. Sarabjit went to meet the concerned government worker and told her to clean the drains. She has already written the letter but did not submit it.

Not only did she request her to clean it but also explained to her about SEWA and how it is to work in a union. The woman listened to everything and liked the work SEWA is doing. Cleaning of the drains is also done regularly now.



2. Social Security Linkages through SEWA Shakti Kendras (SSK)

SEWA Shakti Kendras are centers that provide women resources, information, and support for economic and social development. They help members with linkages to legal solutions and to other SEWA programs, such as microfinance, health, employment, and skill development opportunities. The SSK is also critical as a mechanism for last mile delivery of social security and welfare schemes. Through this, we can assist marginalized women to have access to these schemes by helping them in providing information, completing and submitting forms for social security and welfare schemes and so on. Staffed by a woman from the local community, these centers provide assurance and support to help women navigate the application process and receive public welfare benefits.

In 2019, a document containing the compilation of all the government schemes was created by SEWA Punjab to be shared across the districts. This was converted entirely from Hindi to Punjabi by the SEWA Punjab team. This was also shared by the Planning Department which later uploaded the document on the department's website.

The SEWA Shakti Kendra operates via door to door visits or in mohalla meetings by the trained SSK coordinator. The government of India offers a vast number of schemes to promote social security for the marginalized, but the benefits rarely reach those in need. At SEWA Shakti Kendras, poor women are provided assistance to access the same.

➤ **SSK Report since January 2019 -**

PUNJAB SSK REPORT since Jan 2019	
Aadhar card	25
PAN card	23
Election card	11
Domestic Workers Registration	1530
Old Age Pension	11
Construction Workers form	105
Disability Certificate	4
Ayushman Bharat	201
Scholarship scheme	7
Bima Yojana	7
Cycle scheme	3
Baby girl savings Scheme	3
Sukanya	1
Caste Certificate	13
BPL	8
LTC	14
Ration Card	35

- **Mobilization of domestic worker** –Registration of domestic workers was started by the government under the Social Security Board and we were asked by the Labour department to start registering domestic workers. We did door to door visits and registered 1530 domestic workers.

3. Health Awareness (Jagriti) Sessions

The risk of illness for marginalised families is irreversible health damage, inescapable debt, and even early death. Poor, working women's health issues become neglected because of high costs, administrative barriers, overwhelming workloads, and domestic responsibilities. Therefore, the main health activities aim is to provide access to information and health education, strengthen public service linkages, and reduce health expenditure.

SEWA believes that tragic outcomes can be avoided with preventive health awareness. *Jagriti (Awareness) Sessions* thus empower women with knowledge on health-related issues, their bodily rights as well as their entitlements, as the topics listed below-

- Maternal and infant healthcare
- Sexual health and reproductive rights
- Occupational health hazards
- Relevant social security entitlements

About 60 Health Sessions were conducted in 2018-19, till March 2019 and more than 850 women were reached out to. Aayushman Bharat camps were also held in which health cards were made for women and their families.

Referrals: increasing access to healthcare

To promote access to healthcare, overcome administrative barriers and help women reduce expenditure, SEWA Health Saathis directly refer women to government and private healthcare centers. Health Saathis pass on the skills and experience to women members to lead others to medical centers to ensure sustainability.



4.Skill Training and Livelihood

SEWA Punjab's approach to skill development and livelihood of marginalized women is based on the combination of-

1. Integrated Approach

We train women in a combination of both trade specific and life/soft skills, such as garment-making along with computer literacy and confidence building. As a result, our objective goes beyond teaching women one skill – it includes nurturing their well-rounded development, helping them understanding their rights & entitlements and eventually helps them gain the confidence and strength to break-down barriers and limitations within their lives.

2. Entrepreneurship Focus

Women and young girls in India suffer from restrictions on their mobility, which acts as an additional challenge for them to find work outside their radius. Another challenge is the gender wage gap, leaving women exploited at their place of work. In order to tackle both these, our Skill Development programme encourages self-employment through entrepreneurship courses, building of Cooperatives and SHGs, promoting home-based working rights and so on.

4.1 Sangini- Home Care

The aim of the Sangini Project is to ensure financial independence for the most vulnerable members of society by providing Skill Development and Vocational Training in home care – elderly care and child-care. The reason for choosing this skill was that even an uneducated person can learn this skill in a decent framework of time. The project seeks to identify poorest of poor women and empower them by developing their skills & organizing them into a service cooperative in district Mohali. SEWA Kerala has been carrying out this project as well, and the trainings were conducted by their team.

➤ Activities Conducted under the Sangini Program-

Groundwork and creating a team for the project implementation- we interacted with the various agencies and institutes present in the field as service providers. During our research, we met the following agencies: You care agency, Mahindra skills, Angel Care and

Red Cross. We met them to understand their way of working and of reaching out to people for placements. We also went through their courses and modules. It was decided to provide training on elderly and child-care. A team was hired after a screening process and was given an orientation

Setting up of a Training Centre- Kambali was selected as our office locality as we felt it was the closest to our field areas. Kambali village itself was seen as an area for mobilization. The possession was taken on 10th July.

Mobilizing of women in different areas of Mohali- Jagatpura, Matour, Suhana, Kambali, Sector 49, Sector 52, Kumbra, Ramdarbar, Phase 11, Bapu Dham and Amb Sahib were selected as areas from which to mobilize women. The team visited these areas, mobilizing the women explaining them about SEWA and the skill being imparted. Through this, we also worked on the mindset of the women on how by upgrading their skill they can earn more.

Fieldwork Outputs

Month	No. of Meetings	No. of Women	Interested in the Training
July 2019	34	329	26
August 2019	30	240	28
September 2019	22	185	15
October 2019	34	364	31
November 2019	42	494	24
December 2019	35	256	45
January 2020	35	350	47
February 2020	36	515	55
March 2020	10	46	6
Total	278	2779	169

Curriculum designing- SEWA Kerala is doing similar kind of work and Ms. Nalini Nayak from their team, who has experience of more than 30 years was engaged to directly facilitate and supervise the initial training programme. She also guided us on curriculum development. She visited Mohali in end of July to meet the women and make an assessment as to what should be the exact specifics of the training and curriculum. Ms. Nalini Nayak trained the first batch of women to ensure the quality of training. Afterwards the training is being provided by trainer on regular basis.

Several challenges were faced during mobilization and fieldwork, for instance, several felt that taking care of the elderly or domestic work is not reputable, or that they won't be

able to leave their children to go for training / would need husband's permission, that they do not wish to travel far to work in someone else's home, and so on. The team counselled them on several issues and encouraged them by assuring support.



Images from the fieldwork

➤ **Sangini Training Sessions – 12th September 2019 to 26th September 2019**

SEWA Punjab in association with Department of Women and Child Development, Punjab conducted a 15 days training program of Elderly and Child-care for the marginalized women to enhance their skills and organize them into Service Co-operatives.

After an introduction of the team and participants an orientation was given about SEWA and the current project. The participants were explained what it means to be a woman co-operative and the power of unity. They were told about the governments steps to help workers and the rights of domestic workers. Participants were encouraged to bond with each other, they shared their life stories and the difficulties they have faced. Each was applauded for their courage and their willingness to learn. As the day continued the training went from general topics of awareness, cleanliness and hygienic practices towards more technical skills of how to change and bath a bed ridden patient. We had to work hard on their communication skills and role play was enacted by each participant on how they would interview with a potential client. This role play was repeated on the last day of training as well, and we saw a marked difference in their understanding of their role and their ability to speak with confidence.

Each participant was made to practically demonstrate the work. Tasks such as making a bed with or without a patient in bed were repeated by them several times. Ms Nalini supervised the training and Vijala ben demonstrated each step carefully to the participants. Each step was observed, corrected and repeated to ensure that they understood the quality and level of work expected of them.

When discussing the needs of the child, project coordinator's 13-month old was brought in for demonstration of how to deal with children. To understand how a shampoo is given to a patient in bed, how it should be done right or how exercises are to be performed for the elderly, each trainee was made to act as the patient so as to provide first-hand experience of the activity or procedure. Great care was taken in making them understand the needs of the individual they would be taking care off.

In short, this training was an effort to increase income and make women independent, get a good status in the family as well as in the society. In the training the women were engaged in different sessions theoretical and practical. The trainees were provided basic understanding of the organization through video sessions and also were explained about SEWA Sangini process. The trainees were given information about preparation of food, bed etc. for child and elder care. Stress was laid on hygienic practices, proper hand washing, room and bathroom cleaning. The trainees were made to understand basic do's and don'ts with their clients, how to avoid bedsores, exercises, best practices and following routines,

ethics, punctuality, etc. All trainees were trained in both elderly and child-care. At the end of training we had 3 graduates.



Images from the Training Sessions



Images from the Training Session

➤ **Other Sessions under Sangini Project**

After the first training session the team decided to start on-going training sessions on the basis of counselling and need assessment of the women. During mobilization many women showed their interest towards training but after that they did not come for training and the team found that they had started working somewhere. So, it was assessed during mobilization that most of them do not want to wait for training. The women who had showed

interest during mobilization were called for a meeting and were counselled to start training. Training sessions were then conducted at our training centre. After mobilization when they come for counselling, they were explained about the training and placement as well. They were also told to apply for their police verification in the beginning only. Additionally, they were told to ask for the rent agreement from the owner, so that they can apply for police verification. During the training sessions, women were taught about soft skills as well. Sometimes they were also guided about road routes in the Tri-city area if they happen to have no idea about the commuting routes. The trainer also made them understand about phone etiquette adequate, punctuality and grooming. A Skill Coordinator was hired for devoting time to strengthen Sangini by streamlining training, tying up with other stakeholders, ensuring good placements, etc.

➤ **Outreach for mobilization**

1. The Team has succeeded to build a momentum with regular visits to Dispensary and Lions Club in Ram Darbar where weekly sessions/meetings are conducted to give awareness to women engaged with the club.

2. In the month of February a meeting of Sangini was organized to have a detailed discussion about their aspirations, placement expectations, job requirements, issues which the team is facing for their placement, issues Sanginis face during interviews, difficulty in getting leaves etc. Those placed shared their experiences of working, and overall, it was a good opportunity to meet and interact with the Sanginis.

3. All area in-charges of SEWA Punjab are told that during their mohalla meetings they should talk to the women about the Sangini project. In this way, we identified some women from Sanaur, Patiala and Gurdaspur interested in training and placement through Sangini.

4. Meeting with Anganwadi workers, ASHA workers and Panch in new areas including Naya Gaon and Balongi were started in February

5. Sangini Helpdesk number has been made operational

6. Pamphlets for mobilization were printed, to be used as handouts and for pasting near Gurdwaras and other important hang outs , subject to discussion with area panches.

7. Whatsapp poster (for client push), and setting up Facebook/Instagram page is also on the cards.

➤ **Formation of Mutual Benefit Trust**

To ensure longevity of this initiative a Mutual Benefit Trust (MBT) was registered. A trust was registered with domestic workers being on the board of trustees. The purpose of the trust is to manage the SEWA Sangini.

The overall objective of the SEWA Sangini Mutual Benefit Trust is welfare of socio-economic weaker section especially for women; promote livelihood and living status of domestic workers, providing technical, legal and financial support for rural development women empowerment. Through this trust we safeguard the rights of the Sanginis by providing them a institution which will act as a support system and help them in times of conflict with the employer.

➤ **Activities conducted for placement and outreach**

1. A discussion was conducted and talks are on with Healing Hospital, sector 34 to create an agreement for possibility of providing employment to our trained Sanginis.

2. SEWA Sangini Helpdesk number was made operational and Poster was created for the advertisement of services being given by SEWA.

3. Team visited many hospitals with the purpose of putting flyers in the wards so that the patients especially elderly they can take the service after discharging from the hospitals if they require. Team visited Suhana, Grecian, Max, Cosmo, Chawala Nursing Home, 5 Private Wards of PGIMER.

4. The team also advertised among their wider contacts, friends, nears and dears for elder and child care services to be contacted if required by them

5. Messages on SMS and Whats app were circulated widely.

6. A rate card was created after researching the minimum wages in the different location of the tri-city. Comparison was done with competitive agencies rates and a discussion was had with all Sangini members.

7. Each potential client is first dealt with on the phone and then a home visit is made to ensure that the work is clearly understood, and safety checked.

8. Each trainee is prepared on interview process and encouraged to go for client meeting by herself.

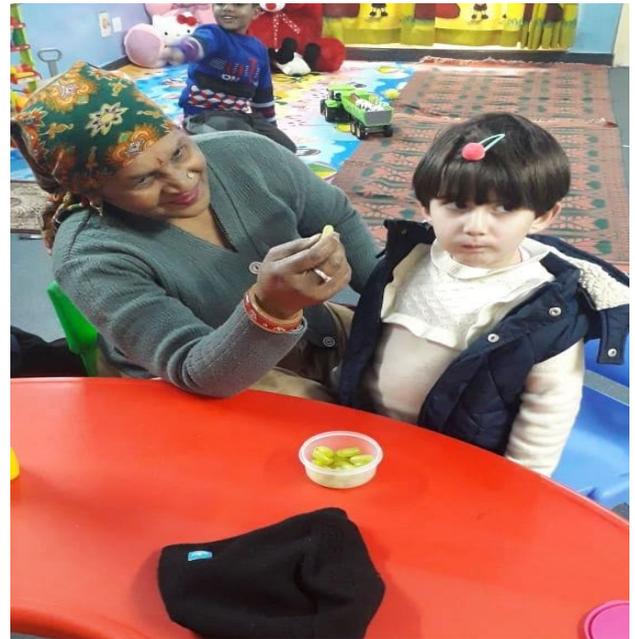
9. Clients are sensitized towards labour wages and laws so they accept the demands of the worker.

➤ **RBI Creche by Sangini**

In December, Sangini MBT started a new venture by opening a Day Care Center. We were in Talks with Reserve Bank of India Sector 17 Chandigarh to provide our services in accordance to the national rules passed. RBI gave us their requirements along with the number of interested parents. We worked with our sister organization Lok Swasthya SEWA Trust in Gujrat and created a module for the Day care center as they are also running the center in Ahemdabad, RBI. After hiring and training two Sanginis specifically for the center, onsite training was also given. The center was successfully started on 17th December 2019 with the signing of an MOU between SEWA Sangini Mutual Benefit trust and RBI, Chandigarh. RBI officers drop their children in the morning and after a day full of activities they receive them in the evening. The children are provided proper day care with sleeping facility. They are taught through learning toys by the supervisor and helper of Sangini.

Running of the RBI crèche is going on successfully. Two women who were placed there under SEWA Sangini Punjab Mutual Benefit Trust, have been working to the satisfaction of the parents and the SEWA Sangini team. They reach there half an hour before kids arrive and leave the crèche half an hour after parents pick up their kids. The whole day kids are engaged with some learning activities as part of their daily routine such as eating, playing and sleeping . The team shared an exhaustive list of age appropriate activity materials required for children to play with and to keep them better engaged at the day care.

Since inception, regular visits are being done in RBI crèche by the team of sangini. There have been some administrative issues, mainly to do with repair and maintenance that the team has brought up with RBI HR for sorting out.



Images from the RBI Creche

➤ **Success Stories of Sangini**



Ranveer Kaur belongs a small village of Nabha(Patiala). She is 21 years and due to financial problem in the family she could not continue her study, so she left schooling after 10th. After that she started to work as daily labourer with her family. During the whole day work she was able to earn only Rs 250 which is not enough income to get bread and butter. One day she met with area in-charge Daljit Kaur who is working in SEWA Punjab from last 3 years. She told her aboutour Sangini project then the team of Sangini interacted with her and she came for training. She successfully

completed the training and then she was placed in sector 15 as a child caregiver to 1-year old kid. She and her family are very happy as she is earning good income and working in safe environment.

Gudiya was working as domestic worker in phase 11, Mohali. She has three children at home, and she felt she was unable to fulfil their requirements such as education, health and others. Her husband is a labourer who got work once in a week. One day she visited our training centre and was convinced to start training. Afterwards she was placed in sector 71 where two elderly people are living and she helps them in household chores.

Taramati lives in Ramdarbar which is located in Chandigarh. She is 51 years old and she is living with their sons and daughters-in-laws but they do not give money to fulfil her requirements. She was in the same occupation of domestic worker where she was not paid according her work and she had to work in many households. She was mobilized and then she came in our training centre. Now she is working as helper in RBI crèche and is happy with her work. She is also getting respect in her family.

4.2 Skill up gradation of domestic workers-

The DC administration, Moga invited us to mobilise domestic workers who were keen on upgrading their skills. We helped mobilise 200 women who were given skill upgradation training by DWSSC to help in increasing their remuneration. The training session was as follows-

Day 1- Women mobilized were taught about health hygiene, and how to work while avoiding any hazards.

Day 2- Women were taught how to operate electronic machines like vacuum cleaner and washing machine, how to make beds, and other skills.

Day 3- Demo session on fire safety was conducted. A trainer from Nestle came and gave a lecture on fire safety. The women were taught how to operate a fire cylinder.

Day 4- An exam was conducted, which included questions on how to take care of your safety and health while working, demo of a washing machine, oven, vacuum cleaner, etc both written and practical

4.3 Work with artisans

SEWA started working in Sanour Block-

➤ Groundwork for Workshop in Sanour

Meeting with ADC - Preeti Yadav.

Briefed madam ADC about our meeting with Maharani. She wanted to know what kind of arrangements we require for the workshop to be conducted on 30th Nov. Daljeet will be reeking the area and after discussing with Sapra ji we will be updating the ADC for the arrangements for the workshop.

Meeting with members of Cluster level federation-

We interacted with over 30 women. Majority of them were Krishi Sakhi and 2 bank sakhi's (SBI bank). The Govt. has done training in catering and agro-ecological training for agriculture and are also supporting the catering group by getting them few orders.

Community meeting in village Pinjole

Only one woman was making phulkari and sweaters. She stopped making them because she was not being paid enough to take out her expenses. Majority of young girls are educated having course done in beauty and computer applications, but families are not comfortable sending them alone to the city.



Sanour Block Images

➤ Workshop in Patiala to explore employment opportunities for women in Sanour block

A workshop was organised by the District Administration and SEWA Punjab, which Maharani Parneet Kaur and MLAs had attended. Our organisation's President Smt. Renana Jhabvala addressed the audience introducing SEWA Bharat and its achievements. She also stressed that we will be starting work in Sanour block.



Workshop in Sanour addressed by Honourable MP Parneet Kaur

After this workshop SEWA started its outreach work activities in Sanour. An office was set up and one of the women from the village was hired and trained as community mobiliser to initiate SEWA's activities.



Organizing and advocacy efforts in Sanour started by SEWA

4.4 Livelihood opportunity for Home- Based Workers (Paranda Makers)

➤ Nabha Pilot Study:

Nabha is the hub of home-based workers making parandas. These women are given raw material by the middlemen to make parandas which are then sold ahead. The concern is that these women are being paid very less as compared to the effort they are putting.

The paranda makers were encouraged to come to Chandigarh and participate in an exhibition, where they earned four times what they get per paranda which helped them boost their confidence.

➤ Exhibition in Kisaan Bhawan

“Pehla SHG Mela - LAADO” was organized by the Department of Social Security and Women and Child Development, where SEWA had volunteered to organise the exhibition. It was held on 23rd and 24th October in which all Self Help Groups from Punjab, Rajasthan, and Jharkhand had participated. SEWA had put up 6 stalls from Ahmadabad, Uttarakhand, Punjab and Lucknow.

We conducted an **orientation session** on how to market their products to maximize their sales. Many SHGs were participating for the first time, so they were also guided on how to price their products, display them in their stalls and package them.

The event was a success. The SHGs learned basics of marketing and also could gauge the trends of a city for the next event.



SEWA giving orientation session to members of SHG about marketing



Images from the Exhibition



5. Financial Inclusion- Business Correspondence Program

SEWA Bharat has signed an agreement with Payworld to work towards women empowerment under financial inclusion program. Under this program SEWA Bharat is establishing the CSP(Customer Service point) in six districts of Punjab in order to make them financial independent and earn their livelihood and at the same time provide banking facilities to the unbanked area. The proposed project aims to ensure financial Independence for the most vulnerable members of society by providing Financial Literacy.

The Business Correspondence (BC) program thus focuses on delivering banking services to the unbanked rural poor in the most interior villages of rural Punjab. With the help of technology; we reach out to the people and enhance the delivery of financial assistance from government schemes like pension and other social security schemes.

The objectives of this program are as follows-

- Empowering women of rural remote areas of Punjab to become business correspondent agents to deliver financial services to the community at affordable cost.
- To facilitate real-time access to formal financial services to unbanked areas in the region.
- Livelihood opportunities for rural poor women.
- Encourage the use of technology for opening Bank accounts and linking people to other banking services through it.
- Capacity building of the women Customer Service Point's / SEWA Bank Sathis on technology and Banking through training
- Training on financial literacy and connecting women to various government schemes of financial inclusion

Capacity and Skill Development Strategy: We are training the service providers (SEWA Bank Sathis) in the blocks on the use of technology to enable them to effectively operate the devices.

Sustainability Strategy: The usage of technology, the quantity of business fetched by the service providers would increase which would thereby help them learn better income,

thus reducing further investments to sustain the model. These service providers are poor women in the villages.

5.1 Activities Conducted -

Survey – before the start of the program, SEWA Punjab carried out a survey which highlighted how more than 60 percent of Punjab’s population is rural and that all rural areas lack proper and efficient banking services.

Mobilization of Community Women - interaction with the Sarpanches and Panches of various villages was done to identify the under privileged women with some basic education to carry out the role of a SEWA Bank Saathi. We conducted the mohalla meetings in 30 villages of 6 districts for the search of the CSPs.

For mobilizing we surveyed areas which are remote and far from banking resources especially the border areas. Regular visits were done to survey the population, its interests, income, women’s occupation and willingness to learn a new skill. The women were identified those were willing to work as CSP in community. The areas identified were in Gurdaspur, Batala, Moga, Ferozepur and Patiala. The CSP was selected on the basis of basic financial knowledge and the basic understanding and will to learn to use gadgets.

Documentation - Post the identification of CSPs some of her documents are required. But most of the women do not have basic documents like pan card and bank account. They are guided on all the steps to be taken to complete the process of documentation.

Technical Training- Once the entire document is completed then the CSPs are given technical training like how to use the biometric device and carry on other banking facilities through their phone like deposit and withdrawal.



Image of Technical Training

Mohalla Meetings - Once a CSP is established Punjab team helps those women to interconnect with pension holders and other beneficiaries. Mohalla meeting is used as an outreach activity to reach out to the community and explain the services which are available to them at their doorstep.

Fieldwork Outputs-

Month	No. of Meetings	No. of women	Interested for CSP
June 2019	20	200	15
July 2019	22	210	10
August 2019	24	240	28
September 2019	30	350	30
October 2019	34	364	31
November 2019	20	200	14
December 2019	18	150	10
January 2020	17	120	10
February 2020	10	106	8
March 2020	3	50	3
Total	198	1990	159

5.2 Challenges Faced

1. While venturing into remote border areas we may face competition from other service providers as Punjab is a plain area with reasonably good banking service. So, the existence of competition can affect our performance.

2. In remote areas, families may not be comfortable for the women of the house to run a banking facility from her home as that can affect the privacy of the house and she will also have male customers to attend to.
3. In remote areas it is difficult to find women who have the initial capital to start BC program.
4. Some of banks changed the norms for these services for example, one customer can use AEPS service five times in a month and there is also a limitation of withdrawal money for AEPS. That is directly impacted on monthly transaction.
5. In villages, most of the people do not have updated Aadhar cards, so we are involving local bank branches for getting this work done. After that, they can use the services of SEWA Bank Saathi without hesitation.
6. All the CSPs from rural areas are not technically trained, and they need constant guidance from the SEWA Punjab team.

5.3 Success Stories and Outcomes

➤ SEWA Bank Saathi Narinder Kaur-



Narinder Kaur lives in Murgi Mohalla of Batala block, Gurdaspur district. She used to run a shop where she sold bindis, churis and seasonal items but she wasn't making enough to sustain her family's expenses.

Post her training as SEWA Bank Saathi, her income has increased by Rs/- 1000-1500 per month. Apart from her earnings, she provides doorstep delivery of financial services like pension, KYC updating, deposits and withdrawal to the population of around 500 people.

➤ **SEWA Bank Saathi Kiranpal Kaur**



Kiranpal Kaur had no work in her district, and she didn't want to migrate out of her village. After being trained as a SEWA Bank saathi, she now earns well and helps the community to link their Aadhar cards with the bank. She also helps elderly people with the disbursement of pension at home, that is, she goes door to door providing pension services. She is earning an extra of Rs 1000-1200 per month.

Some of the overall outcomes of this program are as follows-

- a. An alternative source of income has been facilitated for 15 women in rural areas.
- b. Fifteen SEWA Bank Saathis are able to reach a population of 5000 families and provide banking facilities.
- c. Ten women are under screening process.
- d. There is a marked reduction in the cost of delivery of financial services
- e. As the majority of our CSP's are women, this way we have helped them become self-reliant
- f. The number of women and families who are getting access to banking facilities has increased
- g. All unbanked remote areas of the districts have been covered

6. Conclusion

In 2019-20, SEWA Punjab reached out to about **40,000 beneficiaries**. We continued to develop grass root leadership through Aagevan Vikas training sessions across the districts. More than **2000 social security linkages** were conducted since January 2019, enabling marginalised women to access various schemes. Health awareness sessions and SEWA health saathis aided ease of access to healthcare and awareness. With the beginning of Sangini Project, several women have been **trained in elderly and child-care**, and have found employment. Through the **Business Correspondence Program**, not only have women been trained and employed as CSPs, increasing their financial independence, but also the community was empowered with ease of access to financial services. We thank our donors, the Government of Punjab, without their support this work would not have been possible!

Self Employed Women's Association,
Punjab

Report, March 2020

During Lockdown

SEWA Punjab Report- Post Lockdown Work, 2019

➤ Impact of COVID-19 on women working in the informal economy

The lockdown was announced in Punjab around 20th March which started with stopping public transport within and outside the state as Punjab witnessed many people coming from countries which had the pandemic before us. On March 24, in a speech to the, Prime Minister of India Narendra Modi, announced a 21 –day lockdown. With only four hours’ notice, 1.3 billion people were expected to stay at home and not venture out for three weeks. All buses, trains and domestic air flights were suspended.

The lockdown has resulted in the loss of millions of jobs and livelihoods in India. According to the Centre for Monitoring the Indian Economy (CMIE), 120 million workers lost their jobs or sources of livelihoods during April alone. Of these, around 18 million were salaried workers: the rest were casual labourers or self-employed persons, mainly in the informal economy (which before the crisis accounted for over 90 per cent of employment in the country). By end April, the unemployment rate of India had reached a record high of around 27 per cent.

Since the lockdown, the corona virus has spread slowly across India but began to spike in early May with nearly 4000 new reported cases each day. As of May 10th, there had been 62,939 confirmed cases and over 2,109 confirmed deaths in India (WHO). The rise in number of confirmed cases and deaths in early May followed an increase both in testing and in moves to ease the lockdown in some parts of the country.

➤ Direct impact on livelihood of our members-

The COVID 19 pandemic-cum-lockdown have impacted each of these trade groups, often in quite different ways through unique pathways specific to the trade-

1. Home based workers – all the artisans like paranda makers, phulkari weavers, jutti maker etc have lost their livelihood amidst this pandemic. As there is no demand for non-essential goods there is no chance for these women to get any employment opportunity for another year.

2. Construction workers – With relaxation in the lockdown construction work will start but all of them will not get absorbed as the supply will exceed the demand.
3. Domestic workers- the worst hit will be domestic workers because very few households would like to employ them considering the contagious nature of the virus and many households themselves losing their jobs leading them to reduce their expenses.

Majority of our informal sector workers are struggling to make a living, and many have children to feed, to educate and ageing parents with illnesses.

STEPS TAKEN BY SEWA IN PUNJAB TO HELP OUR MEMBERS SINCE THE LOCKDOWN

As soon as the lockdown began, SEWA began monitoring the impact of the pandemic-cum-lockdown on its members: connecting by phone or through local leaders with as many members as possible to hear their day-today challenges and offer them moral support.

1. **Ration distribution** – SEWA has been in constant touch with the government and helped connect local administration to the needy to help them provide ration.
Apart from that SEWA has done a need assessment by making a list of 350 families in April and another 1800 in June who were not eligible for any social security scheme and distributed them ration kits sufficient to last them for 3- 4 weeks per family and are also working on making any list of needy .
2. **Livelihood generation (mask making)**
SEWA re-trained home-based workers to stitch double layer 3 fold cotton masks. Marketed these and completed the order of more than 5000 masks in less than 15 days. Mask making has helped 50 women earn Rs 2500 every month as livelihood while at home to at least be able to buy ration for her family. We are also looking for future orders by tying up with the market. We have also distributed 500 masks in each district to frontline workers like Police officials, ASHA, ANM, AWW etc .

3. Providing financial services and helping them withdraw their social security benefits

Connected villages to financial services and withdrawal of social security benefits and pension etc thus reducing the burden on many banks. We have also provided door step delivery of financial services to very old and disabled people. 15 SEWA Bank saathis are providing financial services to 5000 families along with door to door services like withdrawal, pension , social security benefits etc.

4. Health awareness and linking to social security benefits

Spread awareness about do's and don'ts of COVID-19 and other health related issues. Informed women to be aware of any kind of domestic violence and helped them connect with "one stop centers". Also, informed many about the social security benefits which the government rolled out and connected them with it. We have a reach of about 50000 population and have imparted information to them through virtual phone calls and via our grassroot workers.

5. Worked with society at large

Requested employers to pay their domestic workers and issues news articles and press releases to increase awareness of the plight of the workers.



Aiding the Self-employed
through the turbulent times
of COVID-19 in
Punjab

April – June 2020

SEWA BHARAT

All India Federation of Self Employed Women's Association

April - June 2020

SEWA worked in 5 Districts of Punjab

- Information sharing and spreading awareness
 - Pre lockdown guidance on precautions for COVID-19
- Relief efforts to mitigate effects of sudden lockdown
 - Liaison with govt. departments and other local NGO to provide rations to the needy.
- Livelihood regeneration
 - Providing alternative income generation methods while working from home



Status in Punjab

- Dry ration or cooked food to **14,000** plus people
- Health awareness to over **20,000** women
- Linked nearly **6,000** women to different government benefits and schemes



Ration Distribution



Masks Distribution



Activities undertaken



- **Health Activities**
 - Telephones and technology used to reach larger numbers
 - E-posters and flyers
 - Awareness of pre cautions to be taken by workers of every trade
 - Sessions on Covid-19, Mental health, menstrual and reproductive health and domestic violence.
 - Referrals to government health services and schemes
 - Door to door awareness drive to ensure each woman of the area is reached

Activities undertaken

- **Referrals – health**
 - Domestic Violence cases – 35
 - Action taken – 5
 - Women quite often share the issue but are scared to report it. Although we had just started work on this in May we received an overwhelming concern
 - Pregnancy cards – 10
 - Women’s health cases- 6



Activities undertaken



- **Social Security Activities**
 - Raise awareness and link community to the existing government schemes and social services
 - Liaison with local resources to ensure that the needy are taken care of

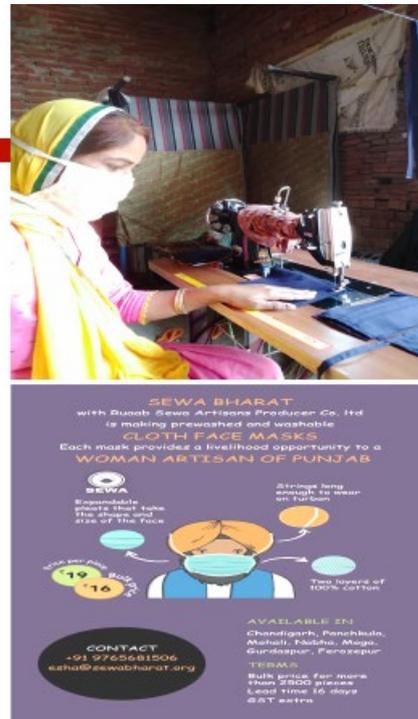
Activities undertaken



- **Mobile SEWA Shakti Kendras (SSKs)**
 - Woman of the community trained for disbursement of Social security benefits and support

Alternate Livelihood

- ❑ Work from home for artisans and domestic workers
- ❑ Quality masks for the Punjabi population
- ❑ Cotton double layer 3 fold masks for comfort & protection
- ❑ Hygiene practices adhered
- ❑ Marketing and fulfilling orders
- ❑ Providing an alternate source of income



Banking facilities during lockdown to villages

- ❑ 17 SEWA bank Sathi's provided banking facilities to 3500 families in remote unbanked areas
- ❑ Gave door to door facility of withdrawal of cash and linking to schemes
- ❑ Border district of Ferozepur and Gurdaspur serviced
- ❑ Awareness on savings and other government schemes



Domestic worker's day celebration & awareness drive



Peaceful demonstrations took place in 5 districts, outside the societies, or homes of employers to create awareness about the plight of domestic workers during the lockdown and their labour rights.

Work with Children

- Pratham early childhood program created WhatsApp interactive messages and SMS in language and math work.
- Dost calling to help parents of newborns to 6 yrs to deal with the current stresses and share things to do with children in a pre recorded phone call 4 times a week.
- Encouraging parents to get involved with the children's activities and finding innovative ways to keep everyone calm.



Grassroots leaders stepping up

- Shakuntala is a **domestic workers** and does stitching on the side to support her family from Ferozpur
- **Taught women stitching** at the centre opening by the govt. with the help of SEWA's follow up
- After lockdown **arranged ration for her mohalla needy** from gurudwara
- **Led the mask making group** of Ferozpur
- Distributed **sanitary pad**
- Conducting **door to door visits to link women to social security benefits**
- Surveying the needy and **distributing ration kits** donated by SEWA



Grassroots leaders stepping up

- Gurdaspur agewan - **Renu**
- She is a **home-based worker** from Gurdaspur district who had lost her husband 20 days before the lockdown . But immediately after the lockdown when it was difficult for SEWA employees to reach the field she came forward and helped all the needy in her area and arranged ration and cooked food for them.
- She has continued to be a pillar of support for the women of Gurdaspur and has helped them get work with **making masks and several women jobs.**



Beneficiaries supported

Linkages	Number of beneficiaries	Remarks
Linkages to Social security schemes , health referrals	5899	Using mobiles and door to door survey
Livelihood linkages	250	Women were taught to make masks from home
Liasoning with Government	14000+	With help of government officials ration was distributed to the needy
Distribution of Ration kits	2000	SEWA raised funds and distributed ration
Awareness about possible linkages and to people to avail the linkage during corona	15924	Like making Labour card , basic documents etc.

Way Forward

Economic Empowerment-

- Employment in rural and urban areas
- **Improved market** - relevant skills for women and teenage girls, as well as increased access to employment opportunities.
- Promoting home based worker's livelihood by connecting them to the market directly
- **Financial inclusion** - Though Business correspondence model in which community women will be employed as financial agents.
- **Youth and skill development:** Enhanced capacity of women and adolescent girls to advocate for gender equality



