



Dear stakeholders,

Sub: Impact Analysis Report in respect of CSR project executed by Praj Industries Ltd.

We take pleasure in enclosing herewith the Impact Analysis Report, by Independent Agency, in respect of women empowerment project executed by the Company at Villages: Torane, Chandrapada, Mhaswal, Zadkhaire, Bandhanpada, Waghepada, Devgaon, Hirvepada, Kakadpada, Umberpada, & Gardanpada (Wada block, Palghar district, Maharashtra state).

It may please be noted that though, the Impact Analysis as contemplated under Rule 8 (3) (a) of Companies (Corporate Social Responsibility Policy) Amendment Rules, 2021 dated 22<sup>nd</sup> January, 2021, is not applicable to the Company for Financial Year 2022/23, as a good governance practice the Company got the Impact Analysis done, on a voluntary basis.

We are sure, you will find the same interesting.

Warm regards,

For Praj industries Ltd

A handwritten signature in blue ink, appearing to read "Dattatraya Nimbolkar", is written over a light blue horizontal line.

Dattatraya Nimbolkar

Compliance officer & Company secretary

Date: 14<sup>th</sup> April, 2023



# Impact Analysis Report

For

Villages:

**Torane, Chandrapada, Mhaswal, Zadkhare, Bandhanpada  
&  
Waghepada, Devgaon, Hirvepada, Kakadpada, Umberpada, Gardanpada**

(Wada, District Palghar)

By

**Kenshin Consultants**

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Release Date

17<sup>th</sup> March, 2023

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## EXECUTIVE SUMMARY

Wada is one of the eight talukas of the Palghar district in the Indian state of Maharashtra. It belongs to the Konkan region; therefore, it has a continuous record of heavy rainfall. The population in the Wada taluka always faces a problem of water shortage especially in the summer season.

Most of the residents of Wada taluka in Maharashtra's Palghar district are tribal, and it is well recognized that the tribal women there are malnourished. Paddy is the main Kharif crop in this region. People living there are unable to cultivate Rabbi or summer crops due to insufficient irrigation facilities. Main staple diet of these tribal women consists of Rice and Dal. Daily consumption of carbohydrate and protein is far less than the recommended. Consumption of other nutritious food items like leafy vegetables, milk, meat, eggs, are almost negligible. This is mainly due to un-affordability and non-availability of such nutritional food. The overall condition of the women indicated moderate to severe malnourishment.

**Need assessment and research done by Sukhbhumi and Praj Foundation resulted in the indication of interventions in following areas -**

### **Parameter 1: Health Status**

- Low HB
- Low immunity & energy level
- Lack of knowledge of improve health
- Issues related to respiratory system
- Issues relating to digestion (acidity, indigestion, etc.)
- Issues relating to reproductive health (irregular menstruation, etc.)

### **Parameter 2: Income Generation:**

Lack of knowledge and skills for undertaking livelihood activities.

### **Parameter 3: Self-Esteem:**

Poor health and lack of livelihood opportunities leading to dependency on the family and thus affecting their self-esteem and confidence level.

Therefore, Praj Foundation and SBIT decided to improve the overall status of tribal women and encourage them to participate in various interventions. Being a tribal area, the interventions were kept simple to adopt, low cost, using locally available. At the same time these interventions had to be acceptable to her and her family members.

**Investment by Praj Foundation for Implementing this Program since 2015 till 2022**

<b>Year of Work</b>	<b>Amount (In Rs. Lakhs)</b>
2015-16	2.15
2016-17	6.41
2017-18	5.15
2018-19	6.65
2019-20	7.30
2020-21	6.42
2021-22	9.63
<b>TOTAL</b>	<b>42.89</b>

## INTRODUCTION

Women's empowerment means women gaining more power and control over their own lives. Women empowerment benefits the individuals, their families as well as the whole society. This social change requires the active participation of others in households, communities, and institutions. However, patriarchy prevalent in Indian society prevents women from contributing in family activities as well as the national economy.

Wada taluka of Palghar district of Maharashtra has predominantly tribal population. Women in the project area suffered from high levels of malnutrition. The major causes identified for malnutrition include incorrect diet and cooking practices due to lack of knowledge. Therefore, most of the population subsisted on a diet based on rice ignoring the vitamin-rich foods such as vegetables, particularly green vegetables. Similarly, they had low education, lack of knowledge and skills and exposure to the outside world. This resulted in economic dependence with low respect and dignity in the family and society at large

In the year 2016, Praj Foundation initiated the program of 'Empowerment of tribal women from Wada block and making them 'Self Reliant'. The project was implemented by Praj Foundation in partnership with Sukhbhumi India Trust and active participation of the villagers.

Health was chosen as an entry point, as Praj foundation strongly believed that positive change in women's health would result in building their trust on them. Therefore, the preventive healthcare strategy of 'Food is Medicine' was identified to improve the entire family's health and nutritional status.

Along with efforts for attaining positive Health Status, efforts were also made to provide livelihood opportunities to them to improve their financial status and improve their self-esteem. During the year 2019, an internal impact assessment was done involving teams for Praj CSR and NGO partners. The results of this exercise were very encouraging.

Since the project has great potential for replication, Praj foundation intends to replicate the same in the surrounding areas.

With a view to evaluate the impact of the programme through a third party, Praj Foundation decided to retain Kenshin Consultants.

### **Objectives:**

- To understand the extent (%) of adoption of interventions among beneficiaries.
- To assess the change in health status as well as economic status which contributes in enhancing self-esteem of the women.
- To assess the change in decision making power with enhanced confidence level in the women.
- To assess the level of people's participation in the project and its implications.
- To understand the factors that could disturb (e.g., Region, the culture/ethnicity, the partnering NGO etc) the replication of the project elsewhere in Maharashtra.

## Methodology:

### ➤ Sample size & area coverage:

- The impact study was confined to the villages where the project is being implemented by Praj Foundation.
- The study covered 11 villages in the Wada cluster. Sampling was done by randomly selecting beneficiary women from each village. Thus, out of a total 500 beneficiaries, **123 beneficiaries** were selected for interviews and **women** were interviewed. The distribution of the samples analysed is **61 beneficiaries for Preventive health care**, **31 beneficiaries for Increased income** and **31 beneficiaries for Enhanced self-esteem**.
- In addition, FGDs were conducted in 2 villages selected out of 11 villages covering a **Total 41 women**. Major points discussed during the FGDs covered, extent of involvement of community, journey of these women in adopting various interventions and the changes observed by them. Interaction with them was also focused to find out the extent of recognition by the family as well as society, improvement in leadership quality and development of commercial activity. A comparative analysis was done based on the information provided by the NGO about the situation of these women before the intervention and our observations on changes observed on various parameters.

### ➤ Analytical Framework:

- Health status analysis: - Pre and post overall habits, hygiene habits, quality & timings of meals in a day, quantity of having Tea in a day, pre-post status of haemoglobin
- Effect of income generation activities: pre-post status of income, utilisation of the income, financial independence, investment of income.
- Self-esteem analysis: - changes in self, change in perspective from family members and society in general, enhanced decision-making power
- Community involvement analysis: - how far the project has involved the community during implementation, women contributing in household decisions.
- Gender sensitivity: - position of the women in the house and society
- Evaluation of implementation partner

### ➤ Resource Mobilisation:

For the impact analysis assignment, all the 11 villages from the Wada block, Palghar were identified by the Praj Foundation. 123 women beneficiaries were interviewed by a team of 5 field investigators over a period of 6 days. The details of villages are as follows,

- Wada block, Palghar District
  - Villages: Torane, Chandrapada, Mhaswal, Zadkhair, Bandhanpada
  - Dates of the Visit: Field visits: 15<sup>th</sup> to 17<sup>th</sup> January, 2023
  - Villages: Waghepada, Devgaon, Hirvepada, Kakadpada, Umberpada, Gardanpada
  - Dates of the Visit: Field visits: 7<sup>th</sup> to 09<sup>th</sup> February, 2023
  - NGO discussion and verifying documents: 9<sup>th</sup> February, 2023 (Ambedi)

➤ **Methods of data collection:**

- Based on the TOR, a questionnaire was designed. As per the sampling, the team interviewed beneficiaries individually.
- Methods of data collection covered interviewing Women beneficiaries and NGO, group discussions and field visits.
- Pre-designed tools were used for the data collection from these stakeholders as below;
- Tool 1: Data received from NGO as well as information collected through one-to-one interviews.
- Tool 2: Field visits to a few houses to observe the kitchen garden as well as backyard Poultry. In addition, cooking practices were also observed by visiting their kitchen. Few plots of Jasmine and Marigold cultivation and vegetable cultivation were also visited.
- Tool 3: Focused Group Discussions (FGD)- Questions for mixed group discussion on enhanced positive health status, increased income and self-esteem covering key areas such as self-confidence, independence, enhanced decision making, etc.

### **WADA, DISTRICT PALGHAR**

#### **Geography:**

Palghar District came into existence in 2014. Total population of Palghar district is around 29,90,116. The district has a total of 8 talukas, Mokhada, Talasari, Vasai, Vikramgad, Palghar, Dahanu and Wada. The main rivers flowing through Wada taluka are the Vaitarna River and Pinjal River. There are mainly Adivasi Tribe, Kunbi Tribe, Agri Tribe, Koli Tribe, Bhanushali Tribe, Vaishya Vani Tribe, Buddhist, and Sonar Tribe residing in Wada block

- **Climate is Hot and Humid (40.6 Celsius max. and 8.3 min.)**
- **Rainfall: 2293 mm**





### **Soil:**

The major portion of earth crust of the Palghar district is synthesised from the basaltic rocks. The soils of Palghar district are divided into two categories. The first one is Vertisol i.e., black soil containing sand which is present Palghar tehsil and second one is brownish black soil mostly observed in the plains of Wada tehsil.

### **Agriculture:**

Palghar district consists of 8 talukas. The major agricultural crop of this region is Rice. The average productivity of the district is 2509 kg per/ha. Rice is a major crop grown in the district. Wada Kolam, also known as Zini or Jhini rice, is a traditional variety grown in Wada taluka of Palghar, with the grain being off white in colour. This variety has been given a 'Geographical Indication' (GI) tag, which has given it a unique identity as well as wider markets. Nagali and Warai are the other cereals grown in the district. But over a period, the area under these millets have considerably reduced. According to the agricultural census the total area under cereals was 90.00%. The total area under pulses was 7.00%. Major Pulses grown are Udid, Tur, Red Gram & Bengal Gram. Area under Oilseed is very low in comparison to other districts.

The Climate of Palghar District is also suitable for fruit & Vegetable crops. Fruits like Mango, Cashew, Papaya etc. Spices like Chili, Turmeric etc.

### **Health Status:**

Wada Taluka in Palghar district of Maharashtra is predominantly a tribal area, where agriculture (Paddy cultivation) provides the primary source of livelihood.

For the tribal population, the government has provided large amounts of subsidies. Despite this, the tribal women who were malnourished were facing serious health issues due to lack of knowledge, affordability, and poor hygienic practices.

## IMPACT ON WOMEN HEALTH STATUS

### Health sessions

Initially focus was given on educating the women on the preventive health care practices that can be incorporated in their daily life. Knowledge about basic anatomy, digestive system, reproductive system, different types of health problems and remedial measures were explained. In addition, information on ideal diet & nutrition, appropriate lifestyle, & cooking practices were covered during health sessions. Focused Group discussions on common health problems relating to digestive system and reproductive system were conducted to emphasise strong link between their food intake and health. To make the discussion more effective and interactive tools such as Role Play, Demonstrations, Photos, videos were used.



**Iron Utensil**



**Chaurangi Aahar**

### Kitchen Garden

An extensive programme of developing 'Kitchen Garden' around their houses where different vegetables including leafy vegetables, fruit and herbs were grown throughout the year was launched. Growing vegetables in the kitchen garden around the house provided the families with direct access to important nutrients. This also addressed the issue of affordability and accessibility to nutrient rich fruits and vegetables.

Native seeds and tuber with high nutrition value were used for planting thereby conserving native germplasm. Seasonal climber vegetable varieties helped in utilising vertical space. The kitchen gardens were protected using old 'sarees' as fences.

In many places due to the shortages of water in the summer season, **use of 'greywater'** (water from household uses) was promoted for irrigating kitchen gardens. It helped in improving sanitation around their household. Women were trained in producing organic inputs such as vermicompost, and *Jivamrut* to provide plant nutrition and *Dashparni Ark* to protect the kitchen garden from pests and diseases. The use of organic farming practices made these gardens

environment friendly as well. 'Best Kitchen Gardens' competitions were organised to encourage & motivate these women. Easy and free availability of a variety of organic vegetables and fruits at their doorstep increased the frequency of its intake.



### Kitchen Gardening

#### Wild vegetables

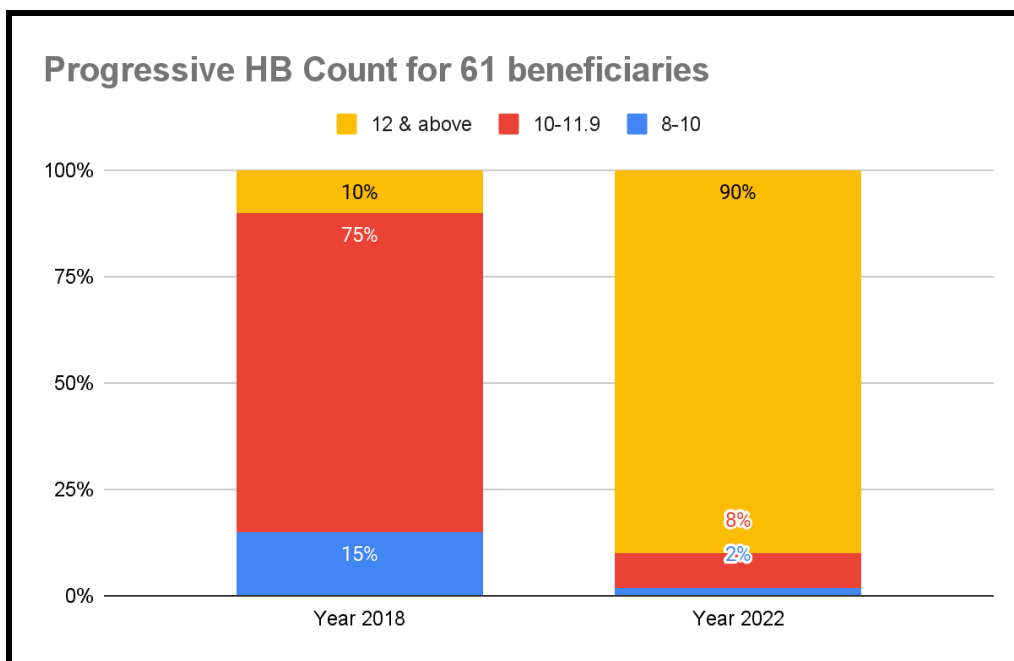
Wild vegetables were freely available during the monsoon around their villages. The nutritious and medicinal benefits of the locally available wild vegetables were explained along with demonstrations of various recipes. These wild vegetables served as an alternative to leafy vegetables during monsoon.



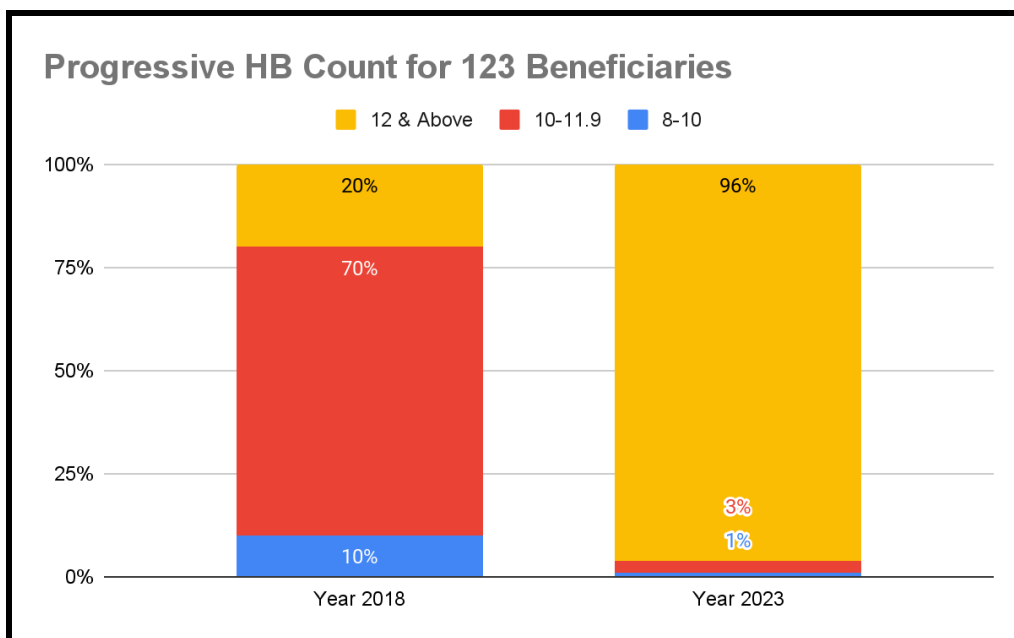
#### Monitoring Haemoglobin levels

The Hb levels were annually monitored through Hb testing.

Following Bar Graph shows the Progressive HB count for 61 beneficiaries:



Following Bar Graph shows the Progressive HB count for 123 beneficiaries:



**NOTE:** First Bar Graph representing Progressive HB count for 61 beneficiaries for Year-2018 & Year-2023 which represents the before-after conditions of the HB count. As, for Health parameter, group of 61 beneficiaries were taken into consideration.

Second Bar Graph representing Progressive HB count of all 123 beneficiaries interviewed which includes 31 beneficiaries from both Income generation and Self-esteem parameters. This HB count for Year 2023 gives clear picture of sustained adoption of all the interventions.

### **Important points shared by the Beneficiaries:**

- “A clear understanding and knowledge about the benefits of ‘Chaurangi Aahar,’ ‘Changes in overall Hygienic Practices and Cooking Practices,’ etc. helped us for easy adoption. Progress of adoption of the interventions was gradual initially due to inadequate participation by some of us. During the follow-up sessions the effect of these interventions on their health were explained by the NGO staff.” Similarly, those who were the first adopters of these interventions amongst us shared their experiences about the positive effects on their health. And rest of us could follow the process of adoption of the interventions without hesitation.”
- “Due to frequent illness earlier, we were not able to contribute in any household work because of which guilt and stress were developed. However, due to inclusion of nutritious food in our diet and adopting majority of the suggested interventions, reduced our frequent visits to doctor and stress too.”
- “Our Improved health reduced the financial burden on the family. Due to enhanced energy level, we could contribute in household work and also had energy to undertake income generation activities such as, poultry, flower cultivation, food processing, etc. Improved health and income, both contributed in gaining confidence.”



## IMPACT ON ECONOMIC ASPECTS

### **1. Training for livelihood activities**

Based on the discussions with the Self-help groups (SHG) and other women beneficiaries, livelihood activities were shortlisted which can be done by them around their house without compromising on their daily household responsibilities. Training and demonstration programs were organised covering various topics such as, developing seed bank of indigenous varieties of vegetables, Floriculture, Vegetable Cultivation, Organic farming practices, permaculture, Poultry Rearing, food processing etc.

### **2. Backyard poultry**

To boost the economic independence, backyard poultry, was initiated which had two pronged benefits of nutrition and income generation. While also being in and around the house were easy for her to manage. Knowledge & skills regarding the same was given to them along with mentoring. Local breeds of poultry were chosen as they need least care and they are less prone to diseases and have great demand in market.



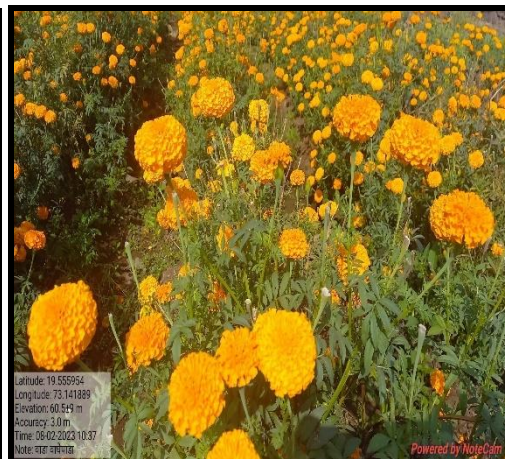
**Poultry**

### **3. Vegetable and flower cultivation**

Growing demand for flowers and vegetables in nearby areas prompted women to initiate vegetable cultivation and open field flower cultivation as income generation activities. Agriculture being the main vocation of these tribal families further helped us in convincing the women to demonstrate cultivation of flowers and vegetables on a small piece of the land. Marketable vegetables and flowers such as Marigold and Jasmine were cultivated by them. Initially few women came forward, however after looking to the success of this initiative many more joined later. Knowledge and skills regarding selection of species, cultivation practices and marketing the produce were imparted to these women.



**Jasmine**



**Marigold**

#### **4. Food processing and solar dehydration**

Food processing was introduced to enhance shelf life of food products and to consume it during off season Women were trained in preparing a variety of food products such as papad, pickles, nachani ladoos dry chutannies, etc. using the locally available materials.

A group of 10 women contributed part amount in purchasing Solar drier while the balance was contributed by Praj foundation. This helped the women to produce variety of hygienic solar dried food products which were consumed by them as well as surplus was sold in the market. This improved their nutritional status as well as economic status. Variety of solar dried products include Karela chips, Drumstick, Mint, Lemongrass and Guava leaf powder, processed and dried products, etc.

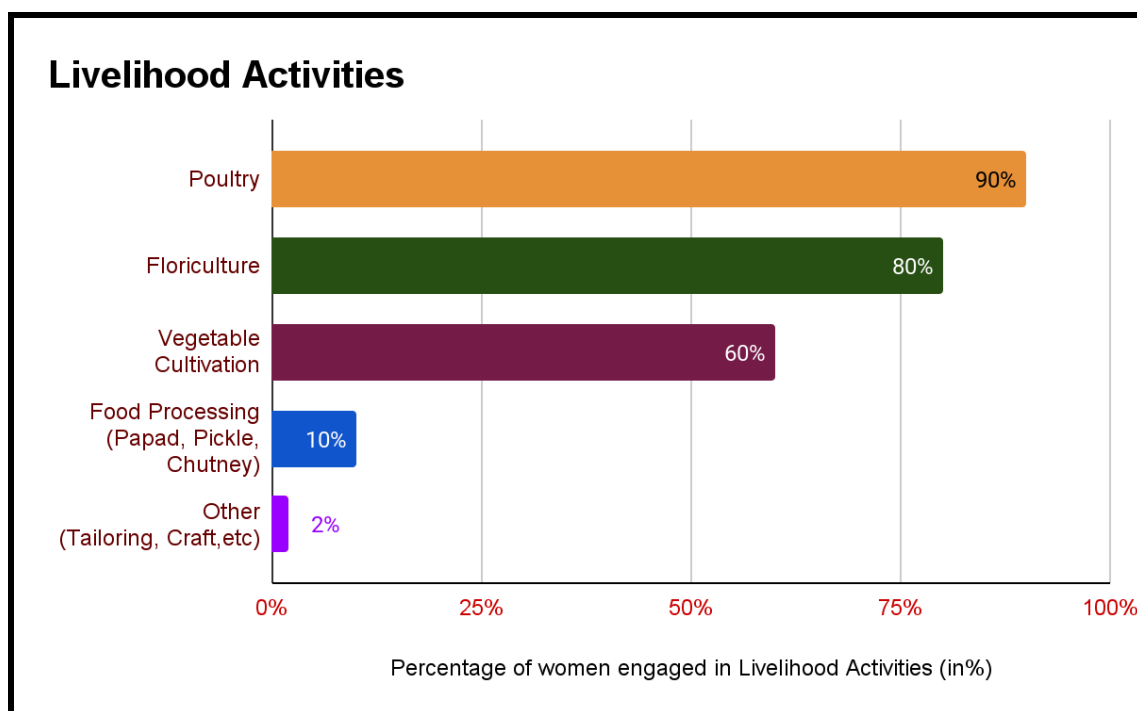


**Products made by SHG**



**Solar Dryer**

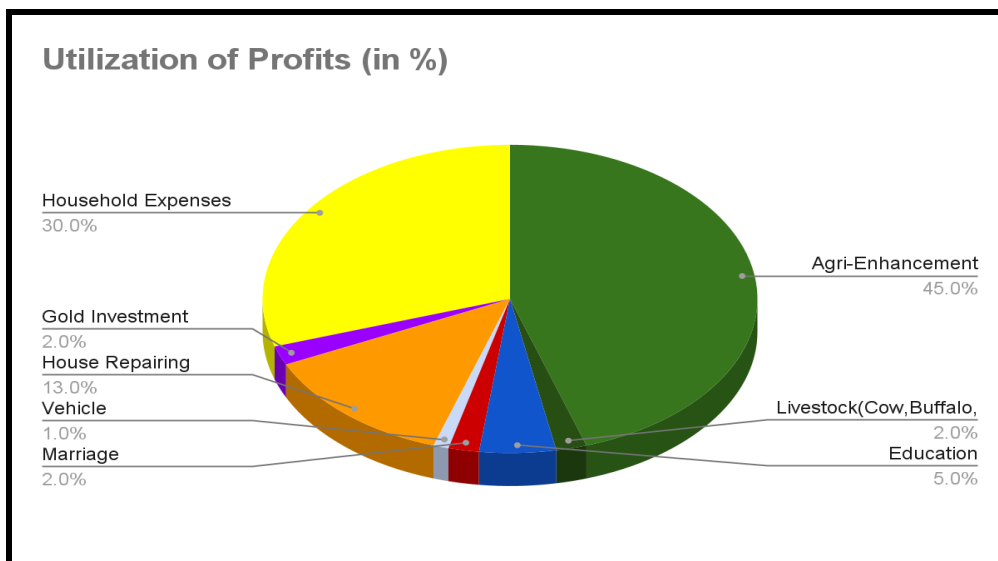
Following Bar Chart depicting percentage of women engaged in different livelihood activities from the sample of 31 beneficiaries:



BUSINESS	SAMPLE SIZE	STATUS OF WORK	
		BEFORE	AFTER
Poultry	31	Not at all	<b>30 Beneficiaries</b> Average income Rs.7,000 to 15,000 per annum
Floriculture		Only few	<b>25 beneficiaries</b> Average income Rs.30,000 to 80,000 per annum
Vegetable Cultivation		Not at all	<b>13 beneficiaries</b> Average income Rs.7,000 to 50,000 per annum
Food Processing		Not at all	<b>09 beneficiaries</b> Average income Rs. Rs. 6,000 to 10,000 per annum
Other		Not at all	<b>06 beneficiaries</b> Average Income Rs.6,000 to 7,000 per annum



Following Pie Chart shows % of utilisation of profits earned from livelihood activities for 31 beneficiaries:



SAMPLE SIZE	PROFIT UTILISING FACTORS	DETAILS
31	Agri Enhancement	Irrigation Equipment
		Seeds for cultivation
		Additional Pesticides
	Household Expenses	Buying kitchen equipment
		Buying additional food grains
		Buying clothes
	House Repairing	Renovating house
Slab for brick houses		

### **Important Points shared by Beneficiaries:**

- “We chose simple livelihood activities as an income generation option such as ‘Poultry’ which were needed low-cost investment with the greater returns, also convenience of operating livelihood activity as it was in the backyard of the house which helped us to looking at the household chores and the activity. We were able to sell the grown-up poultry birds to the customer at the doorstep and no extra efforts were needed for selling it by going to the market. For poultry business, apart from selling eggs and hens to the customer, it was beneficial for our family as a nutritious food.”
- “Similarly, initiative was taken by us for working as a group by forming SHG’s which were including equal financial contribution, getting more profit as well as equal work distribution. Working for this group level income generating activities were possible and convenient for us because it was within the village.”

## ENHANCEMENT IN SELF ESTEEM

Along with empowerment through improved health and income generation, conscious efforts were made to enhance their self-esteem and confidence through recognition, appreciation and providing opportunity to exhibit her leadership qualities.

‘Arogya Samvad’ (‘Health dialogue’), an annual event, was a very effective platform for sharing experiences which they always looked forward to. Women from all the villages came together and presented the knowledge gained so far through ‘Arogya Kirtan’, songs, skits and puppet show. Journey of successful women unfolded through Panel discussion and interviews which immensely motivated them.

### **Women participating in various social events:**



### **Important Points shared by Beneficiaries:**

- “Enhanced health status and the financial condition helped us to understand our own strength which made a positive change in our lives such as taking decisions on our own, pursuing our passions, attending parent-teacher meetings, selling products in local market as well as at the stalls in the different exhibitions by explaining benefits and negotiating with the customers, etc.”
- “As we started exploring and learning new things, we were able to express our opinions in front of the family and society as well. Also, we were able learn and do all the bank related works confidently.”
- “We got a courage for speaking publicly by performing on the stage in the events which was a confident and proud move for us. Also, we were able to explore our skills such as script writing and writing and singing songs in the events.”

## OVER-ALL IMPACT- A SUMMARY OF ANALYSIS

Health related interventions resulted in enhancing their knowledge about functioning of various systems in the body and its cause & effect relationship with respect to health problems. Increasing trend (80%) of participation in the programmes, taking responsibility and making consistent efforts for self-improvement over the last 2 years has borne fruits.

Kitchen Gardens added value and variety along with nutrients to their diet. Appropriate changes in cooking practices helped in retaining and enhancing the nutritional value in food. Nutritious recipes taught during demonstration added taste to their food and thus being consumed regularly.

The consciously nurturing habit of having food together was an enjoyable experience and ensured equitable distribution of food to all family members

Regular and consistent intake of nutritious food contributed in reducing frequency of illness and increased feeling of well-being leading to higher work efficiency. The Hb levels were annually monitored through Hb testing which revealed positive trends in the Hb readings. This helped in improving the positive outlook towards self.

Awareness sessions on the importance and utility of wild vegetables, their recipes and 'Wild vegetable festival' helped in conservation of wild germplasm. Today almost all of them are consuming wild vegetables during rainy season and reaping its benefits.

Backyard poultry and fruit and vegetable processing being in and around the house were easy for her to manage without overburdening her. While the vegetable and flower cultivation started as demonstration plots with a handful of women participating has grown many folds.

These activities resulted in contributing to family income. Regular income (though not very substantial initially) made them confident and they became the ambassadors of change for others; as not all women could take the adventurous step.

These income generation activities enhanced her planning, executing, negotiating, and marketing capabilities. At the same time, it increased her confidence and self-esteem.

Along with economic advancement personal accomplishments and social acceptance is also required to feel empowered- a 'feeling' of capability that comes from within. Conscious efforts were done to enhance her self-esteem and boost her confidence through recognition, appreciation and providing opportunity to exhibit her leadership qualities.

Various events such as 'Aarogya Samvad,' Wild Vegetable Festival were organised to provide opportunities to these women to demonstrate leadership skills.

PARTICULARS	SAMPLE SIZE	DETAILS	BEFORE	AFTER	% Of Beneficiaries
<b>Health Status</b>	61	HB Count	Below 8	Above 12	85%
		Frequency of getting ill	Very Frequent	Very Rare	90%
		Frequency of Visiting Doctor/PHC	Frequent	Very Rare	85%
		Consuming freshly made breakfast	Not at all or eating leftovers	Consuming freshly made breakfast daily	80%
<b>Income Generation</b>	31	<b>Livelihood activities</b> 1. Floriculture 2. Vegetables cultivation 3. Poultry 4. Food Processing 5. Solar Dryer	Not at all involved in any kind of livelihood activity	Women got engaged in 2 to 3 activities at a time simultaneously	91%
<b>Self-Esteem</b>	31	- Financial Independence - Expressing own opinions - Working efficiently in all areas.	- Requesting for Money from family - Mostly Engaged in household chores - Could not express their opinions	- Contribution in Household expenses - Children Education - Investing profit in gold - Taking decision on their own	85%

**Note:** Total count of women interviewed for Health status were different than women interviewed for Income generation and Self-Esteem. Hence, the % count differs according to the beneficiary women considered for each parameter.

- **Community Involvement:**

- ❖ **Health Status:**

- ✓ Women actively participated in –
      - Health sessions
      - Focused Group Discussions
      - Field tours arranged by SBIT
      - Kitchen Garden Training Program
    - ✓ Seed selection and multiplication
    - ✓ Demonstration program for making and use of organic pesticides such as, '*Jivamrut*','*Dashparni Ark*'
    - ✓ Kitchen Garden Competition by conducting '5 Grading Program'
      - Training program for changes in cooking practices
      - Training programs for Healthy Hygiene habits
      - Recipe Competition
      - Wild Vegetable Festival
      - Entire family including Children participated in growing kitchen gardens.

- ❖ **Income Generation:**

- ✓ Seed multiplication Training
    - ✓ Poultry Training
    - ✓ Floriculture Cultivation Training
    - ✓ Participation in all training programs followed by Demonstration sessions
    - ✓ Mentoring and Hand-holding sessions with fixed time interval with Follow-up sessions
    - ✓ Finding out personal interests related to business preferences with the help of FGDs
    - ✓ Guidance and training programs for Market Research, Market identification as well as Packaging of the products.
    - ✓ Demonstration on use of solar dryer for food processing.

- ❖ **Self-Esteem:**

- ✓ Participation in social events such as 'Aarogya Samwad' (Annual Event)
    - ✓ Experience sharing through performing skit or one act play on any topic covered in program
    - ✓ Participation in Panel Discussion
    - ✓ Customer negotiation training program.
    - ✓ Participation in SHG meetings as well as taking initiative for leading SHG in village
    - ✓ Finding out individual skills through SHG meetings and encouraging women by giving responsibilities to them

❖ **Important Points by Beneficiaries in FGD:**

- ✓ “We understood the benefits of adopting and following healthy routine after seeing changes in the lifestyle of the others, for example, one of us lady had a problem of the acidity due to drinking 6 to 7 cups of tea in a day. After understanding and following the changes suggested in the health session, as a result she observed satisfactory change in her health status by seeing the control of acidity and gaining more energy for the work. Such experiences of the others motivated us to adopt these interventions which helped us to progress throughout the life more effectively.”
- ✓ “As adoption of the interventions helped us individually, it ultimately made changes in our family’s health and personality.
- ✓ “Also, we understood the importance of working as a group which contributes in developing healthy relationships with others in the community as well as improving economic condition.”

## IMPACT ON THE SOCIETY ESPECIALLY WITH GENDER SENSITIVITY

- ❖ Enhanced decision-making power by the woman beneficiaries
- ❖ Increased ability to Express their own opinions in front of the society as well as in the family due to financial independence.
- ❖ Taking firm decisions about stepping out of the house for work, participating in social events, etc.
- ❖ Attending meetings in children’s schools independently.
- ❖ Raising their voice against the conditions, decisions they do not agree with.
- ❖ A big change observed at a family level is having women members having meals with the entire family.
- ❖ Taking decisions related to business and handling all kinds of transactions, banking related work as well as profit utilisation related to the livelihood activities.
- ❖ Negotiating with the customer efficiently and confidently in the market.
- ❖ In the society, creating their own space and gaining respect from the others in the society
- ❖ Respectful position in the house and in the society followed by the change in the treatment given by family members as well as community.

### ✓ **Perspective of the Family towards Beneficiaries:**

- ❖ Women used to be compelled to rely on their husbands’ decisions and be financially dependent on them. All the women noticed a decrease in the level of restricting women only to household chores and a slow increase in motivation for the work as women began making decisions for themselves after realising the importance and adopting all the interventions.
- ❖ Women were not initially considered while making decisions about anything in any family. The women’s overall improvement helped them better understand who they are and started participating in various activities. As a result, their families gradually began to understand their potentials and started acknowledging the women by delegating more responsibilities as they understood their position in the family as a separate individual with an independent preferences and opinions.

### ✓ **Perspective of the Community towards Beneficiaries:**

- ❖ In the patriarchal society, women in the community were observed engaged in household duties and were unable to pursue other interests because for people in the society, position of the women was worthless and as a less capable individual to take any kind of responsibility. But, as people started observing women understanding, learning, and progressing in her life with the help of the guidance provided in the sessions, it was an unexpected transformation of the women for them. And people started acknowledging her potential by changing their perspectives. As a result, women were no longer restricted for doing only household chores, and could work effectively by establishing own income-generating opportunities.



- ✓ There was a condition when women had to listen everything without expressing her opinion and was not considered important in any decision. But after, women started participating in the sessions conducted on health, income generation opportunities, people started observing that women are now getting knowledgeable which was helping them to boost their confidence by taking decision for themselves. Which resulted into changed perspective of the people towards them by breaking the typical image of women in the society.

## BEST PRACTICES, LIMITATIONS, LESSONS LEARNT & SUGGETIONS

### - Best Practices

#### 1. Health Status:

- ❖ Kitchen Garden:
  - ✓ Use of 'Greywater' for kitchen garden
  - ✓ Use of organic pesticides such as '*Jivamrut*,' '*Dashparni Ark*'
  - ✓ Composting bio degradable waste material produced within the house area such as, waste food, rotten vegetables, fruits, leaves, etc.
- ❖ Cooking Practices:
  - ✓ Introducing '*Chaurangi Aahar*'
  - ✓ Use of Iron Utensils for cooking food
  - ✓ Use of sprouts
  - ✓ Washing vegetables before cutting

#### 2. Income Generation:

- ❖ Livelihood opportunities around the house. Selling directly to customers.
- ❖ Poultry:
  - ✓ Low investment in housing infrastructure of poultry birds by utilising locally available resources, such as large bamboo baskets.
  - ✓ Low feeding cost due to subsidised rice (Available at Rs. 3 per kilo)
  - ✓ Rearing local breed of poultry which is hardy and disease resistant.
- ❖ Use of Solar Dryer to enhance shelf life of locally available food material and preparing hygienic food products for self-consumption as well as surplus for selling.

#### 3. Self-Esteem:

- ❖ Providing public platform to share their experiences and views
- ❖ Encouraging women to participate in Arogya Samvad, 'Wild vegetable festival', 'Recipe Making Competition', etc.

### - Limitations

1. Though most of the women are able to prevent illness due to lifestyle changes and healthy practices adopted. However, under critical condition, some of them have adopted curative health measures.
2. Difficult to get committed and capable field staff at village level for implementing the program in the village.
3. Remote areas of villages making it difficult to reach during rainy season.
4. Lack of Regular transport facilities.
5. Visible results of Preventive Health care program take time hence it requires patience.
6. Success rate of preventive health care program depends on consistent adoption of interventions by the beneficiaries.

### - Lessons Learnt

1. The preventive healthcare programme if implemented in its true spirit can solve majority of health issues of people in remote tribal or other areas which are difficult to access.

However, the interventions should be simple and easy to adopt with use of locally available resources

2. Providing knowledge and skill on simple livelihood opportunities to women can generate wealth and make themselves economically stronger.
3. Various interventions of the project have a strong positive impact on the area of gender sensitivity. Which helped the women to become confident and realise their potential.
4. Women have successfully started expressing their opinions and decisions in front of the family members as well as in the community.
5. Upgradation of the beneficiary to *Anganvadi Sevika, Aasha Worker* or *NGO Team Member* is possible through such programs.

### - Suggestions

1. In addition to preventive health care initiatives few sessions on mental health for the women can be helpful.
2. To enhance the coverage of programme within the village the existing beneficiary women can consider associating with one non beneficiary woman from the same village and convince her by sharing their own transformational experiences. To encourage her to adopt interventions.
3. Need to have one village health workers per village for effective implementation of the program. These Village health workers can be identified from existing beneficiaries who have displayed leadership qualities and have convincing ability and able to communicate effectively. They can be further trained to take responsibilities.
4. Brainstorming needs to be done for generating ideas for new livelihood activities.
5. Taking initiatives for Community-based programs such as, Cleanliness Activity on the village level.
6. Training in Financial Literacy can be considered for women especially those who are involved in livelihood activities.
7. Even knowledge on consumer product packaging and branding their products can be considered for SHG and NGO.
8. Jasmin oil has great market. There are few companies in Boisar which are procuring Jasmin flowers for extraction of oil. Collaboration with such companies can be considered to sell large quantity of Jasmin flowers.
9. The implementation of initiatives like **Water sheds** and **Rainwater harvesting** in the areas that experience severe water shortages (**villages like Hirvepada, Kakadpada, and Umberpada**) during the summer.
10. Encouraging women to participate in elections for government position will boost their confidence.

## EVALUATION OF THE VILLAGES BASED ON ADOPTION OF THE INTERVENTIONS

### ➤ **Analysed as a Best Villages:**

1. Chandrapada
2. Bandhanpada
3. Mhaswal

#### ❖ Based on:

- Satisfactory level of the adopting interventions
- Active participation in all kinds of activities/programs
- Enhanced communication skills
- Expressing own opinions
- Willingness to try out new interventions/solutions required to enhance the life
- Dedicatedly sustaining the interventions adopted

#### ❖ Why:

- Location proximity was the considerable factor in the process.
- Resource availability required for the program was satisfactory.
- Due to the prior rapport of the NGO built with the women helped in creating positive mindset about the program.
- Follow-up after conducting the sessions and the frequency of the visits were there.

### ➤ **Analysed as an Average Villages:**

1. Torane
2. Zadkhair
3. Umberpada
4. Waghepada
5. Gardanpada

#### ❖ Based on:

- Moderately communicative even the adoption level was satisfactory
- Moderate participation in activities/programs
- Failing to maintain expense records
- Were engaged in selective livelihood activities

#### ❖ Why:

- Resource availability required for the program was moderate
- Unable to share the experiences properly
- Moderate participation in an event due to other responsibilities
- Preference for profitable livelihood activities

➤ **Analysed as a Below-average Villages:**

1. Hirvepada
2. Devgaon
3. Kakadpada

❖ Based on:

- Discontinuity in sustaining interventions due to geographical challenges (such as, discontinuity in doing kitchen gardening due to water shortage)
- Less motivated for trying new things because of the challenges
- Poor condition of expressing opinions and sharing experiences
- Poor condition of sustainability of the interventions

❖ Why:

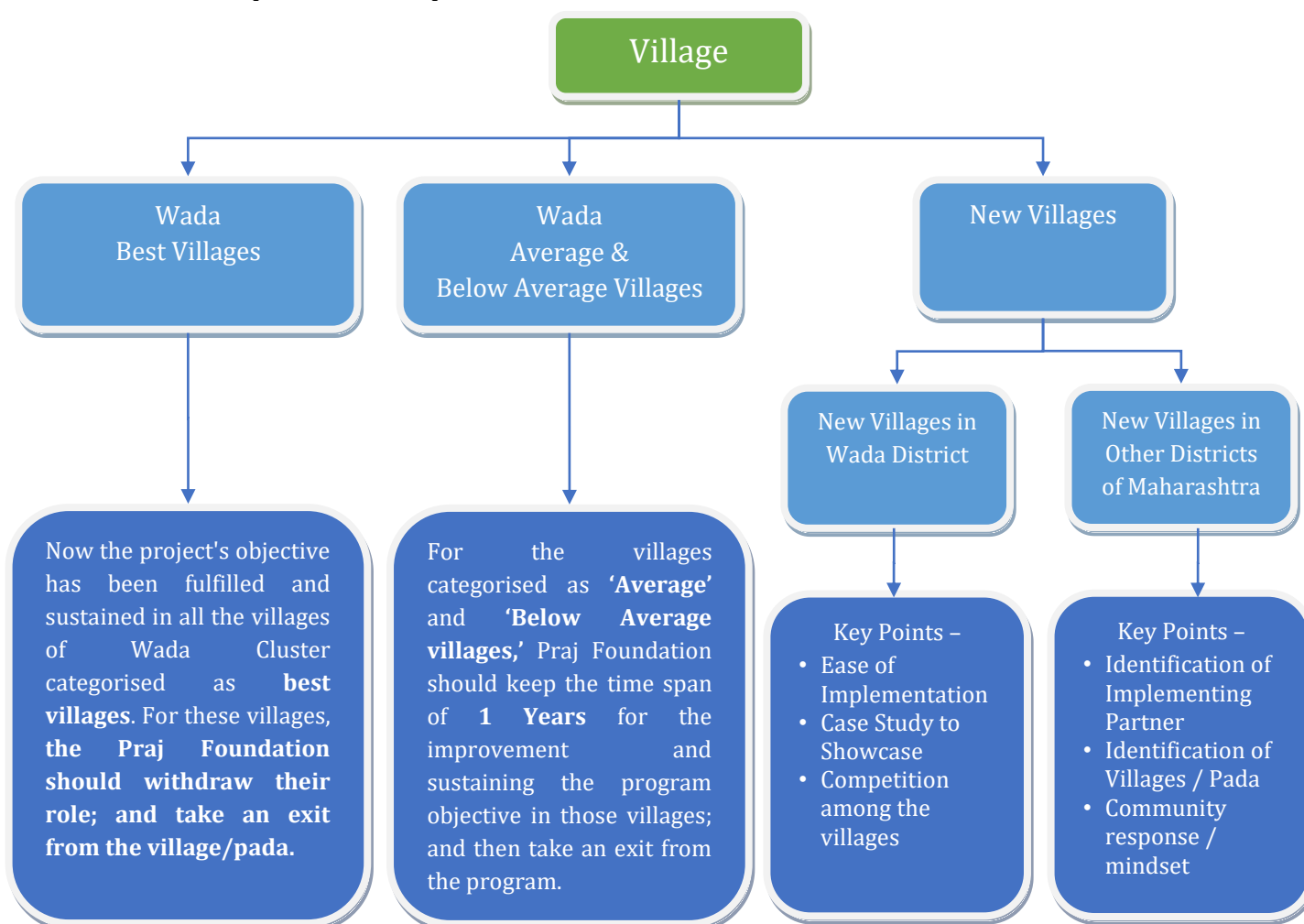
- Villagers are facing major water shortage issues
- Unable to receive satisfactory results after hard work
- Lack of confidence about expressing own opinions

## PROJECT RECOMMENDATIONS

Considering that the main objective of the program is Preventive Health and Income Generation for Women; there is a definite categorization can be done based on performance of the villages.

### Key Recommendations -

- ✓ Two main objectives of this program should remain as to introduce '**preventive health measures**' to the women which will be the part of their daily routine under the tagline "**Food is Medicine**" and to create **Income Generating Opportunities** for the women in "**Close Proximity.**" The peripheral activities will be considered for support according to implementing partner.
- ✓ For the new geographical area other than Wada District, the maximum project time should be 3 years; and for the new villages in Wada District the maximum time for any village or pada should be 2 years as the implementing partners are very well versed with the skills and geography.
- ✓ Considering the total investment from Praj Foundation side; there should be an amount defined per beneficiary to ascertain the target of the project while deciding the deliverables with the implementing partner.
- ✓ Definite exit strategy to be formed and communicated to new villages beforehand irrespective of their performance.



## IMPLEMENTING PARTNER

### (Sukh Bhumi India Trust, NGO)

- ❖ All the staff of the Sukhbhumi India Trust are very knowledgeable and committed to their work.
- ❖ The staff can effectively communicate with the tribal women and convince them
- ❖ The documentation of process of implementation of project and outcomes is very systematic maintained.
- ❖ The entire staff is very well respected in the community due to their knowledge and skills.
- ❖ The most appreciable part of the NGO is upgradation of beneficiaries to NGO staff by appropriate training and hand-holding.
- ❖ Initially the health sessions were conducted by Praj Foundation. The NGO staff took initiative and video documented these sessions and later they are independently and effectively conducting these sessions.





## CASE STUDIES

### ❖ MRS. PUNAM SALKAR (TORANE VILLAGE)

Mrs. Punam Salkar is from Torane village. Before the program was initiated, Punam was having a low HB count of 10.9. She attended all the health sessions but was not convinced that, such preventive health care measure can make drastic change in her Hb level. Due Constant follow-up and convincing by the NGO, she decided to adopt the interventions and improved her health. Her efforts resulting in the improved Hb count of 12.7. She says that she decided to adopt all the interventions because of the knowledge about the nutritious contents of locally available material such as, leafy vegetables, fruits, wild vegetables. She also learnt how to grow these nutritious vegetables and fruits in her backyard through the low-cost concept of 'Kitchen Gardening' (Parasbag).



During the health sessions, the importance of use of Iron vessels as well as ideal cooking practices was emphasised. She was convinced about these interventions and started implementing these practices. Similarly, she adopted ideal hygiene practices and home remedies which ultimately helped her in improving overall health status. This helped her reduce the continuous visits to the doctor.

Improved overall health status contributed in boosting her energy level which helped her to work efficiently throughout the day. She decided to undertake cultivation of Jasmine on a small piece of land. To keep the input cost low, she started preparing and using organic inputs such as 'Jivamrut,' 'Dashparni Ark' to boost the production. Due to adoption of organic practices, she was able to get annual profit of Rs. 16-17000 from Jasmine cultivation.

Overall improvement in health status opened the doors of income generation opportunities because of which a feeling of self-worth started developing within her. Financial independence boosted her self-esteem and she was able to express her own opinions in front of the family members, as well as community. She was also able to take decisions on her own related to utilisation of profit made through Jasmine cultivation. Most of the profit earned was used for children's education as well as renovating her house.

Along with these achievements, she started taking active part in social gatherings, selling products in market, etc.



❖ **MRS. SURAKSHA PATIL(SAMATA) (CHANDRAPADA)**

**Mrs. Suraksha Patil (Samata)** lives in Chandrapada village. She was a project beneficiary who later started working with SBIT. Attending training sessions and understanding the concept and benefits of the interventions she made changes in her cooking practices such as using iron utensils, washing vegetables before cutting, etc. In addition, maintaining good hygiene and appropriate diet helped her to improve her immunity and contributed in boosting energy level required for work. Her family's health also improved because of the healthy diet which included different types of vegetables, fruits in their daily meal. In the beginning she started with 'Kitchen Gardening' because of the water and land availability in front of her house as well as in the backyard, and started growing a variety of vegetables, medicinal plants, and some fruit plants. She took good care of her Kitchen Garden with full dedication by using organic inputs for plants to boost the production.



NGO (SBIT) saw her sincerity and willingness to work, and offered her paid volunteership and thus set an example for other women of the villages. This opportunity gave her the confidence of speaking in front of the community. She took as a challenge to improve herself and made it possible by learning and developing skills. With full support from her family and the SBIT staff, she is more confident and started working efficiently. Initially she received less response from the women, but she reached out to woman individually and explained to them importance of adopting the programme components. Slowly she started getting positive responses from these women and now she can conduct health sessions independently on the subjects like Reproductive, Respiratory, and digestive system.

In addition to this, she was the first woman to prepare Permaculture plot with the support of her mother-in-law and after getting inspired by the study tours organised by the NGO.

❖ **MRS. NAMITA RATHAD (UMBERPADA VILLAGE)**

Mrs. Namita Rathad lives in Umberpada village. Before the program was initiated, she was only a homemaker and would frequently fall ill and had no energy to do even day to day household chores. She said, in the beginning, she kept herself away from attending the sessions. But when she saw a positive change in other women’s health, she actively participated in all activities and consistently adopted the suggested interventions and got desired benefits of the interventions. Her inquisitiveness helped her



to understand importance of interventions and its effect on our health. She adopted suggested Healthy diet, ideal cooking, and hygiene practices. Due to which over a period she started feeling more energetic and was able to work for long hours without getting tired.

In addition, she started taking active part in the study tours arranged by the NGO and trying out new recipes, preparing various types of home remedies (making kadha with available medicinal ingredients), etc.

Her curious behaviour and willingness to try out new things helped her to be more progressive in every aspect. She said, she started experimenting all the things she saw and learnt through the field visits. Which included trying out new recipes, adopting modern cultivation practices for vegetables, establishing kitchen garden using a variety of plants, and even created her own ‘Seed Bank.’

She started taking production of Jasmine and Marigold in her land which worked as an income generation source. She started with 150 plants of Jasmine. She was selling Jasmine and Marigold in nearby markets. To increase the production of both Jasmine and Marigold, she was consistently using organic inputs called ‘Jivamrut’, ‘Dashparni Ark’. She also cultivated *Udid* and *Nachni*, using this as raw material she ventured into food processing and made ‘*Papad*’ and ‘*Nachni Ladoos*.’ To boost the economic status, she started selling her products in shops in different villages She has been regularly supplying *Nachani Papad* and *ladoos* to nearby schools.

The positive change in her health as well as economic status, gave her confidence of undertaking multiple livelihood activities. Though she is not educated, now she can handle all the financial transactions and can take all the decisions related to it.