

**Internship
at
Prayas, Chittorgarh**

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Internship Report

Introduction

Internship is a part of second year program, where we have to observe and learn the work culture of organization. Also it will be necessary to participate in various departments /activities so we could orient our self with different departments that gives first hand exposure.

Internship is the process, through which we can understand process of work and thereafter be able to involve in decision making.

I have completed my dissertation in Prayas, Chittorgarh under the project 'sexual and reproductive health rights' supported by European Union.

Objectives of internship

- a) To understand the work pattern of NGO and its organizational structure.
- b) To learn various managerial and administrative skills needed to work in a NGO system.
- c) To identify existing gaps in human resources, infrastructure, service delivery quality under sexual and reproductive health services in Rajasthan.

Rajasthan State Profile-

Rajasthan state, located in northwest India, has an area 342,239 Km². Its area rank is 1st in India. The state has a population of 6.86 crore (2011 Census) and its population rank is 8th in India. About 75 percent of the state population resides in rural area while in India, 68.84 percent population resides in rural area. The population density of the state is 201/Km² while India's population density is 382 person /Km². About 14.71 percent (2011-12) population of Rajasthan is estimated to be BPL, while SC and ST population of Rajasthan is 70 percent and 12.6 percent respectively (2011 Census) respectively. Socio-economic indicators are in general somewhat lesser than average: 80.5 percent and 52.6 percent of male and female population respectively are literate, the corresponding figures for India being 82.14 percent and 65.46 percent respectively. The state of Rajasthan is diagonally divided into hilly and rugged south-eastern region and the barren Thar Desert. Rajasthan is one of the driest regions in India. The state has 33 districts having population 68.84 crore. Tribal population in the state is 12.6 percent of the total population. (Census 2011). Rajasthan has 33 districts divided in seven divisions. The state has 244 blocks, 185 towns and 44,672 villages.

Organization Profile:

How Prayas Started....

Prayas, is registered voluntary society. Since its formation in 1979, it has been working in the tribal belt of southern Rajasthan. Most of its founder members had medical background and therefore the organization began its operations by setting up a community health care program. The program was initially implemented in fifteen tribal villages of Pratapgarh tehsil of Chittorgarh district. A centre for this purpose was established at village Devgarh also known as Deolia. This village is 12 kms west of Pratapgarh town in the midst of tribal population. The selection of the area was based on its extreme remoteness and complete lack of infrastructural facilities such as drinking water, roads, electricity, schools and health services. The selected area had more than 95% tribal population living in poverty.

Realising this fact that working alone on medical issues of people is not adequate to accomplish sustained health improvements, gradually, the organization diversified to address the other concerns related to people's lives viz. access to education,

improvement in economic status through different livelihood options and above all for community empowerment to eliminate the historically institutionalized discrimination imposed on them which has resulted into wide spread poverty and general backwardness. Some of the specific activities undertaken were like setting up schools for children not being able to attend schools, education centres for adults, mobilization of villagers to seek recognition of their traditional rights for collection of non-timber forest produce from the forest around them. Other activity on which Prayas intensively worked was related to identification, release and rehabilitation of bounded labours, mobilization against corruption in public distribution system and other rural development programs administered by different departments of government. Recognising the health activities carried out by the organization, the government of Rajasthan handed over the local Primary Health Centre (PHC Rampuria) to it in 1982 for three and half years.

Who are we?

Prayas is 36 years old voluntary organization and is working directly with the socio-economically deprived communities to mobilise, advocate for their rights and build the capacities for their sustained growth and development. Prayas in past years has essentially focus on building people's mobilization groups around issues of access to food, health, dalit/tribal land rights, violence against women and people's right to information. It has worked on policy issues such as people's right to quality health care, against the coercive population control policies, for withdrawal of policy of two child norms and abrogation of legislative lacunae in land tenancy protection measures for agriculture land belonging to dalits/tribals. The organization is also engaged in community mobilization for local people's participation in natural resource managements pertaining to common property and forest resources.

Vision:

To build a society free from social, cultural, economic, religious, gender, and geographical discrimination.

Mission:

Prayas believes that only revitalization of self-esteem of the poor can bring about an everlasting improvement in their quality of life.

Objectives:

1. Enable too poor to have opportunities for their social, economic, physical and cultural growth.
2. Create alternative knowledge and mechanisms for community development.
3. Lobby to secure social, economic, political and cultural rights for all.
4. Respond to contemporary poverty related community needs.
5. Campaign for gender sensitive conduct and equity.

Focus of Prayas:

Prayas focuses its work on adivasis (tribal community), dalits and other rural poor people in the community. Its main activities include:

Health-

Despite the UN and UNICEF goals articulated in 1978 of “Health for All by 2000”, India and many other developing countries have yet to see this goal become a reality. Prayas has focused its work on public health since its inception in 1979 and works extensively on the dual issues of empowering people to use available facilities and of strengthening the public health care system so that it is accessible and affordable to the poor. Ill-health can not only cause premature mortality, partial or complete immobility, and physical discomfort, but can also be an economic drain to individuals, family members, and friends who tend to the diseased person. The cumulative effect of high levels of premature mortality and morbidity negatively impacts the overall productivity of a nation. Due to lack of nutritious food, unhygienic conditions, and lack of existing infrastructure, the rural poor are especially in need of health care services. In addition, women, children and adolescents are particularly susceptible to illness and have specific health needs. The failure of top down government efforts and the work of international bodies have led to the emergence of a people centred health initiatives. Prayas’ work in health is focused on putting pressure on decision makers, governments and the private sector to improve health services, as well as on increasing awareness among rural communities about the causes of disease and disease prevention, and promotion of healthy lifestyles.

Main activities in health:

1. Community empowerment for better health and health security.
2. Empowerment of children and adolescents for better health.
3. State level campaign and networking for the Right to Health Care.
4. State level advocacy program for creation and subsequent implementation of state health policy.
5. State level advocacy program against coercive population control policies.
6. Community AIDS Awareness Program.
7. Training for government health care providers on community health issues and epidemiological skills enhancement.
8. Capacity building program for NGO workers.

Gender-

In a country where resources are limited and the basic necessities of life are not easily accessible to most, women’s needs are often the last to be met. Women’s health is not just an outcome of biological, physiological and pathological status, but is also complexly impacted by economic, social, and cultural factors. The secondary status of women in Indian society can be measurably seen in persistently high maternal mortality rates, low educational levels, limited freedom of speech and participation in society, the practice of child marriage, and generally poor health outcomes for women. In Rajasthan especially, traditional practices such as dowry and sati violate women’s human rights. Strict division between the roles of men and women in society persists today. The persistence of the problem has much to do with the fact that most of these harmful customs are deeply rooted in the tradition and culture of society. Prayas is committed to overturning these socially entrenched values through a number of campaigns dedicated

to raising awareness about the issues surrounding gender and working to increase the availability educational and health resources for women.

Main activities in gender:

1. Campaign for gender sensitive conduct and equity.
2. Gender sensitization training program for government health care providers.
3. Organization of workshops and campaigns to stop gender discrimination in society.
4. Initiation of a state level networks to end the practice of female foeticide and declining child sex ratio.
5. Capacity building for NGO workers.

Economic Empowerment and Livelihood Issues-

Due to the inability of agriculture to sustain the large rural population in the Chittaurgarh district in eastern Rajasthan, there is an urgent need to develop non-farm sources of income. While the region has traditionally depended upon agriculture for livelihood, there is potential to develop new sources of income with existing local resources. Prayas has begun a program with village communities to use bamboo resources in handicrafts to be sold for monetary income. Additionally, economic disempowerment and social marginalization of sections of society are tightly interlinked. The inability to control over monetary resources subsequently reduces self esteem, ability to make decisions concerning one's own life and control over health. In an effort to bring about empowerment of women through economic security, Prayas has worked extensively in the formation and facilitation of micro-credit groups in traditionally economically backwards communities.

Main activities in Economic Empowerment and Livelihood Issues:

1. Formation and facilitation of women's micro-credit groups for women's social and economic empowerment.
2. Development of off-farm income opportunities.
3. Program to emancipate bonded labours and to integrate them into the mainstream economy.
4. Promotion of income generation activities for local communities around Sitamata Wildlife Sanctuary.

People's Right-

Prayas, based on its working experience of 25 years, believes that instead of providing direct services, people from the vulnerable sections of the society should be mobilised to demand from the Government what is rightfully theirs according to the constitutional rights of every Indian citizen. Prayas works to generate awareness of human rights and enable people to seek redress for violation of their rights. Within this district in eastern Rajasthan, the denial of human rights to Dalits, tribal groups and women has had measurable consequences in health and educational outcomes. With this view, several advocacy campaigns have been initiated aiming at suitable changes in the government policies and programmes. These human right campaigns focus at ending the discrimination in society which leads to atrocities and exploitation of the deprived

people, cruelties on women, segregation from land, inability to access health care, exclusion from society, and persisting low levels of education.

Main activities in People's Rights:

1. Program to organize mine and agricultural labourers for their rights.
2. Combating the process of land alienation by invoking and advocating for protective legislation.

Community based NRM-

Natural Resources provide important economic resources to village communities and are also tightly linked with community health. In recent years degradation of forest lands have been fuelled by scarcity of agricultural land, encroachment, transfer of land for development activities and high levels of natural resource withdrawal from forest lands. Additionally, due to droughts in the area and inadequate understanding of proper use of natural resources, there have been high levels of deforestation and degradation of forest resources in the Pratapgarh area of Chittorgarh district in south eastern Rajasthan. Across India, Joint Forestry Management (JFM) schemes have been developed which seek to encourage participation of local communities in the management of forests in cooperation with the Forest Department. The struggle to give village communities control over natural resources has the dual purpose of protecting natural resources and providing communities with livelihood opportunities. . Local Forest Protection Committees have been formed through which local communities are given authority over local resources and have access to the economic benefits of resource preservation. Rajasthan adopted the Joint Forestry Management scheme in 1991 and since then Prayas has been working with local communities to spread awareness of the hazards of deforestation and motivate people to form Forest Protection Committees. Prayas has organized re-election and registration of Forest Protection Committees and fought for their recognition by the Forest Department. The focus of this work is to ensure that the benefits of forest protection and regeneration reach the communities and are distributed equitably.

Responsibilities given during internship

- MIS data cleaning of maternal health project of Oxfam.
- Data analysis and report preparation of maternal health project of Oxfam.
- Preparation of concept note for 'assessment of sexual and reproductive health services at 24x7 PHCs and CHCs'.
- Preparation of checklist for the 'assessment of sexual and reproductive health services at 24x7 PHCs and CHCs'.
- Participate in the meetings of Prayas.
- Do field visits which included 24x7 PHCs, CHCs including FRU CHCs and swastha bhavan, Chittorgarh.
- Finding major gaps in sexual and reproductive health services at 24x7 PHCs and CHCs.
- Analysed key data and gave feedback to Prayas about the key issues so that they can file the PIL.

- Medicine audit for the ‘access to free essential free medicines’ project at district hospital, Chittorgarh.

Problems and issues in the organization:

- Attrition rate is more because of less salary.

Observations during field visit:

- During the visit to the 24x7 PHCs and CHCs, the general status of the human resources, infrastructure, equipments and facility services provided related to sexual and reproductive health services was observed.
- Records and guidelines of the services provide were seen.
- Infrastructure including drinking water, toilet, electricity, OT, labour room and janani ward was observed.
- Status of essential drugs including Norfloxacin, Azitromycin, Oxytocin, Nifedipin, Inj. Magnesium sulphate, Inj. Adrenaline, Inj. TT and tab Misoprostol was observed.
- At most of facilities, post of the pharmacist is vacant.
- Health providers are not train in BemOC and RTI/STI management at most of the facilities.
- Most of the facilities don’t have contraceptives at the facility.

Specific project

- Attended two days workshop of Prayas on ‘access to free medicine’ in Jaipur.
- Data analysis and report preparation of maternal health project of Prayas supported by Oxfam.
- Medicine audit for ‘access to free medicine’ project.