Theme: COMMUNITY BASED ORGANISATION

Editorial

Communities in both urban slums and rural villages face poverty, low literacy, insufficient knowledge for their own health, lack of access to health services and many more difficulties. Most of these cannot be tackled individually and are better solved through collective efforts. Community Based Organizations (CBOs) and Self Help Groups (SHGs) have become a critically important vehicle of change for the poor and marginalized to come together to solve their individual problems. Building the capacity of the poor and marginalized by providing options for self-employment and establishing microenterprises (income generating activities) means economic development and improved quality of life in rural India. Besides improving the confidence level and self-respect of women, CBO's work together to increase access to health services, education, water supply, sanitation and transport through these efforts and find social and economic empowerment. For EHA, supporting the organisation of SHGs has become an important strategy to improve the standard of living of the poorest in rural areas.

This 20th issue of Safar focuses on the importance of SHGs and CBOs in community development, highlighting success stories of sustainable change in communities through capacitated CBOs. A new column on administration and finance management is also included from this issue onwards, with much needed information for project staff.
Happy reading!

- Feba Jacob

WHAT'S inside...

A publication of:
Community Health & Development
Emmanuel Hospital Association

Chacko's Chai column

Why does EHA focus on community organization (including self-help groups and community based organisations) as the foundation for Community Development? Most of our communities are marginalized, poor and disempowered. The **root causes to be addressed** include: **low status of women, illiteracy, traditional harmful practices, poverty and lack of freedom to make choices, caste system, fatalism and harmful beliefs.**

Principles for sustainable community development in the above context include the following:

1. Development must be INTERNAL before it can be seen externally. There needs to be a change in the mindset of individuals and consequently communities before real development takes place.

This **change** must be in the following areas:

A. Spiritually – a knowledge of the TRUTH which sets them free from FEAR and bondage. Most of the things which bind our village people are related to traditional practices, superstitions, beliefs and customs which are unhealthy.

B. Identity – a Biblical understanding of self – especially for women to know that they are created in God's image and have value in God's sight as people for whom Christ died.

This happens when we focus on women, share God's word, build them up and empower them to do things on their own.

C. Self – confidence and hope for the future - a right understanding of one's self coupled with overcoming fear to do things will result in increased self-esteem and confidence.

A change in understanding from a cyclical world-view to a linear one going towards God's kingdom will enable people to have a vision for the future instead of being fatalistic. This will increase hope which propels development and progress in the community.

2. Ownership and participation by the community is important for long-term sustainability.

Building up of many small organizations and linking them together as cooperatives will enable resource sharing and empower the weak, enabling them to have greater choices, and will make government officials more accountable. This will also increase their bargaining power and enable them to choose from different health providers when available or plan to bring services for their people.

3. Building up new community norms through awareness programs, education and group development.

For example, when large numbers of community members adopt sanitation norms, hygienic practices, healthy lifestyles, it becomes a norm which then continues for generations.

4. Begin by addressing felt needs and later go on to professionally determined needs. E.g. starting with social needs of women to meet together regularly, enabling them to build new relationships and encourage each other; followed by finance needs – access to credit for emergencies initially, followed by productive loans, then going on to various health issues including obstetric care, prevention of disease, etc.

Hence SHGs and CBOs become the fulcrum for community development and health! May we spend adequate time in building strong foundations of community organizations instead of being 'project' focussed!

Dr Ashok Chacko, *Director - EHA's Community Health and Development Programme*

Devotion

Community Based Organizations

[*Rev. Prakash George*]

When we read the Bible, we understand that God, in order to fulfil His plans and purposes or to accomplish His vision, calls individuals and communities. That is the reason he chose individuals like Abraham, Isaac, Jacob, David, Paul, etc. He also created a people called Israel and later the Church. These two could very well be considered as Community Based Organizations. God gave these two CBOs norms to live by and a purpose for their existence. They were not to live primarily for themselves but needed to become a blessing to those outside of them. It is said about the church, that it is the only society that exists for non-members. Reading the Bible and Church history we come to know what God could achieve through these two CBOs when they conducted themselves as per norms God had set for them.

In the NGO sector there is a lot of emphasis on forming CBOs, which is good. You have various types of CBOs like SHGs, Mahila Mandals, Saas Mandalis, Adolescent groups, etc. These groups are good in themselves as they seek to bring social and economic transformation, which is very much needed. They tend to be more or less inward looking. But for a lasting transformation in the community there is the need for a spiritual dimension. God has to become the centre of the CBO. It is good to form CBOs, but as Christians we need to desire Christ being formed in the members of the CBO. We should not shy away from making Christ known to the members. This can lead to lasting transformation and sustainability. Jesus said, "I will build my church, and the gates of hell shall not prevail against it" (Matthew 16: 18).

Building local for local - Community Based Organization

[*Kuldeep Singh, Project Director, Sahyog & Kari Urban Project, New Delhi*]

CBOs - Working together works!

There is long tradition of community based organizations (CBOs) operating at various levels in India. The various development actors have increasingly realized the importance of devoting attention to the economic betterment and development of poor and marginalised communities in India. This can happen only when we realize the actual issues of people who are deprived and at the bottom of the pyramid. Often state authorities and a development agency design plans for poor communities but fail in achieving their goal, as the consultations are done with only partial participation of citizens. If the planning is not done in partnership with the local people then it's a mere dream. Listening to communities is the core strategy of EHA community health and development projects to devise a participatory program. Having worked in EHA for the last two decades I have learned that the ultimate focus must be to build capacity in local communities for sustainable-long term development. This is not as easy as it sound as this involves engaging with local residents (CBOs). There are many success stories of CBOs, when capacitated, not only leveraging government entitlements and facilities for their communities but also facilitating behavioural change in their communities. In development, CBOs are in the best position to assess and analyse the situation. If NGOs facilitate the intervention it empowers the CBOs to plan and act together for a cause.

Whose reality counts?

Development practitioners have been finding that personal behaviour and attitudes are fundamental for true participation. Again and again, we have rushed and dominated, imposing our reality and denying that of the weak and the vulnerable. For the poor to be empowered it requires us to change, to interact in new ways, to become not controllers, teachers and transferors of technology, but convenors, facilitators and supporters, enabling those who are weak and marginalised to express and analyse their realities, to plan and to act. We have to behave differently and our attitudes must change.

There is no substitute for local knowledge

A community-based approach through CBOs can help to prevent social problems and deal with issues locally, rather than through the interventions of external actors. It supports vulnerable groups/persons of concern in re-establishing familiar cultural patterns and support structures. Indeed, the goals of the community-based approach are to reinforce the dignity and self-esteem of people of concern and to empower all the

factors to work together to support members of the community in exercising and enjoying their human rights. Urban and rural CBOs have shown an astonishing ability to express and analyse their local, complex and diverse realities, which are often at odds with the **top-down** realities imposed by professionals. In Gujarat a small group of women, now known as the **Self Employed Women Association (SEWA)**, emerged as a solution for unorganised women workers to get regular income and provide them with social security. The majority of CBOs have immense potential, but unfortunately the CBOs are often considered as object and subject in the development approach. Their skills, knowledge and information cannot be taken from them. In urban slums or rural villages CBOs are initiated by the community to solve short term and long term problems and to address community issues. Working with CBOs became fashionable when it became a criteria of donor agencies and hence NGOs/GOs utilize CBOs for implementation of their program intervention. As CBOs operate at the grass roots it is imperative to **enable CBOs to express their reality, to put that reality first, and to make it count.**

Key characteristics of good CBOs

★ Members are those residing within the community and are from diverse groups (gender, caste, class). The CBO must constitute socially excluded groups (PWDs, Enoch, etc.).

★ Priority issue areas are identified by them.

★ They are transparent and accountable in their functioning.

★ They learn by doing and possess proven problem solving ability, have consistent networks, and build alliances to leverage resources.

★ They have shared vision, commitment and values for the upliftment of socially excluded and poor people in their community.

★ They mobilize local resources for their development.

★ Issues are resolved with the involvement of local residents.

Photo - Shem Raomai

Take away: Critical lesson learned

On the basis of my experience working with CBOs in rural and urban communities, the critical lessons learned about CBOs are:

The role of CBOs can include advocacy for the issue identified by their communities and networking to access services and resources. They are crucial for sharing information, working in partnership, facilitating community mobilisation, and organizing with NGOs.

CBO initiatives are also known as Collective

Action and 'Public Private Partnership' The lesson I drew from the Sahyog Project is that if CBOs function in the form of a Federation, they can do well in advocacy and networking. CBOs significantly contribute to community development.

Key challenges of CBOs: Some common challenges identified are poor communication, lack of group management skills, lack of resources, lack of effective leadership skills, low revenues, lack of support, lack of accountability and transparency, and lack of strategy for capacity building. Particularly in the slum areas CBOs' implementation is jeopardized due to diversity and uncertainty of land status in urban areas.

Enabling factors for CBOs: The critical factors which enhance CBOs are:

★ Facilitating and developing asset mapping of slum communities using simple language and including youth and women in the process.

★ Using adult education methodology and initiating experiential learning.

★ Leadership training of the community at large. Adopting an asset-based community development (ABCD) approach which builds on the assets and skills that people have.

Photo - Anjali Singh

Merry Christmas! We have hope because Jesus was born.

Conclusion

CBOs are indispensable actors as they are at the forefront in their community and are best positioned to engage with all community development interventions. We need to review and evaluate our approach to empowering rural and urban residents in partnership with CBOs. In order to sustain CBOs the team should recognise and limit their role beyond the facilitator to avoid ongoing dependence.

Success Story

SHG the only means for empowerment of poor and marginalised people!

By TUSHAR Project, Herbertpur Christian Hospital, EHA
Contributed by Mr. Nitay Masih, PA- SHIFA MH Project
Mr. Rajeev Singh, PA-SHIFA MH Project
Author: Raj Kamal, Project Manager, CHD

History

In early 1992, the SHG strategy was an important component of the Government and Non-Government sectors overall thrust to mitigate poverty. In 1996 TUSHAR Project was started. This is EHA's standalone project situated at Manduwala Village of Sahaspur Development Block of Dehradun District. One of its strategic directives is to empower the poor and marginalised and curb poverty through improved non-financial services and approaches. The project engaged the community through the promotional, organisational and developmental initiative of self affinity groups called Self Help Groups (SHG).

The project's trained local Village Health Workers (VHW) and staff mobilised the women of each village for initiating Self Help Groups. The main purpose was to bring economic gain at an individual household level, social equality, and women's empowerment. TUSHAR raised awareness through key messages about how self help groups can be a mechanism for poor people

Photo- Mr Raj Kamal

to smooth the effects of income variation; find safe, reliable and affordable repositories for their savings; take greater advantage of profitable investment opportunities; and insure themselves against future calamities and risks.

Intervention

In the early days, group members came together to make monthly and bi-monthly savings contributions of between fifty and one hundred rupees. At first the initiative was promoted by issuing "Gullaks" (earthen containers called piggy banks) to the groups. When the savings became significant the groups were encouraged to open a group account in a bank. The project staff regularly monitored the groups and equipped members in keeping minutes and book records, making decisions for fair inter-loaning, and reinforcing the benefits of timely repayment. The exposure and ongoing training helped members of the groups to reap the benefits in a sustainable

manner. The TUSHAR Project's practice of using SHG for supporting development soon created a SHG movement in the project area. More women's groups were formed as people realised the benefits.

Outcome/Impacts

With support by NABARD (National Bank for Agriculture and Rural Development), the SHGs were linked with the bank for micro credit services and small scale business opportunities. One of the direct impacts of the SHG intervention was that the groups of women collectively initiated four Registered Cooperatives, which were the only Cooperatives managed by women in the area. For both TUSHAR and NABARD it was a remarkable achievement and they show cased this in their annual report. These cooperatives still exist and run businesses of dairy farming, vermi-culture, organic compost, as well as a tailoring training centre for girls and women. **Mr Nitay Masih and Mr Rajeev Singh**, the first staff of TUSHAR, observed that the women have become empowered, group life has become more intensive, and the women's saving rates have increased. It was also reported that there is a measurable improvement in children's higher academic and professional education with better family health, shelter and general welfare. For example, the group supported one girl to do her training in post BSc Nursing and a boy to do work in Malaysia through a group loan.

Challenges:

1. Ongoing management of saving and credit by members.
2. Sharing of skills for the management of finances so everyone becomes equally skilled and confident.
3. Ongoing learning and sharing of information for knowledge building.
4. Ongoing monitoring support and development of leadership.

Lessons learned

Along the path of the SHG intervention many lessons were learnt by the project. However the key for harnessing such groups is to have program transparency, honesty and strong relationships. Only then can real empowerment and prosperity be seen in the life of downtrodden and poor women. At the same time, ongoing follow up visits and monitoring further strengthens the group's collective action.

Replication suitability

The self help group model is still relevant for effective development, women's empowerment and social equality, especially in ending oppressive cultural practices and behaviour in the family environment of our rural communities. SHGs have proved to be the best instrument for bringing change in economic, social, environment, health, political and leadership domains of life.

CBOs cooperative engagement in sustainable development process

Baswaraj, Project Manager, CHDP Champa

Situation

It is a challenge for any project team to form and strengthen CBOs for sustainable community development. CBOs were originally formed for the purpose of implementing programmes and schemes. They were not fully focussed on community based asset development and as a result there was limited interest among the community members.

Story

The project team formed CBOs and cooperatives and currently has 250 CBOs (150 SHGs, 100 FC) and five cooperatives with legal identity.

CPP – Bio fertilizers preparation
Photo- Mr Baswaraj

As mentioned CBOs were not contributing to resource development and were not sustaining their interest and ownership. Hence the CBO leaders and project team conducted an in-depth study using PRA tools. The recommendations

derived from the study were:

★ CBO members should have a clear vision for their own development.
★ CBO members should have IGPs with moral values acceptable to and adoptable by the community.
★ CBO IGPs should be based on community assets (people, water, land, animal and forest).
★ CBO leaders and project teams should develop models of community asset driven development.
★ CBO leaders and project teams should develop working structures to delegate responsibilities.

Therefore the project team worked with CBO members to develop community asset development models. The results were significant as five CBOs were awarded recognition by the honourable Governor, State and Central Agriculture Ministers, and concerned officers at different levels. These models were rapidly adopted by other CBOs in nearby villages. CBO members and farmers from other blocks and states are visiting this block for exposure.

Vermin compost Preparation
Photo- Mr Baswaraj

The models at glance

The vision of the women's self help group was health and respect in the community and that of farmer's club was to save the life of soil and farmer. To build this vision we used various PRA tools and exercises, showing different development models, their end result, impact and sustainability.
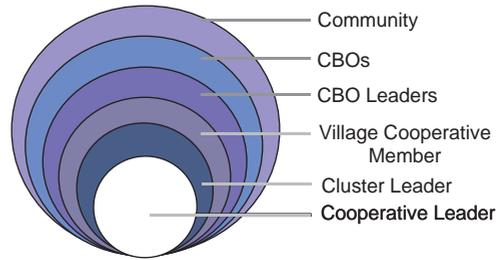

Vegetable field - an initiative by CBO members
Photo- Mr Baswaraj

We came to conclusion that without active participation and mutual support it may not be possible to create community development models, i.e. by bringing their assets together and make them available for the CBO's common development. They also avoided using harmful materials on their farms. The model was created in collaboration with the like-minded people.
To sustain and expand this model we created a community friendly implementation structure.

Community
CBOs
CBO Leaders
Village Cooperative Member
Cluster Leader
Cooperative Leader

Activities

- Mobilise resources from outside and inside the community.
- Prepare and implement micro plans.
- Procure seed and arrange for its treatment.
- Prepare bio fertilizers and pesticides for own consumption and to sell.
- Produce Agriculture integrated products.
- Establish market linkages at local, block and district level.
- Share the profit and reinvest on the model.

Conclusion

These integrated bio farming collectives gave identity, respect and health to women CBO members and saved the life of soil and farmers from the burden of agricultural farming. They started earning Rs 4000 to 5000 / month/ crop/ acre. This led to more work in the villages and availability of nutritious food grains and vegetable. The collectives are self-sustaining for their own development and also support other CBOs and projects. Concerned department officers and nearby village CBOs are adopting and expanding these models.

CBO members,
CHDP Champa
Photo- Mr Baswaraj

:: INTERVIEW ::

A telephone interview with
Ms Esther Chakrapani
Project Director (2002- 2005)
Tushar Project, Dehradun
(Currently working as Admin Director, Metro Delhi International School)

[*By Feba Prakash, Co-editor, Safar*]

Safar- *Could you please share about the project you worked with and its major initiatives?*

Ms Esther Chakrapani - My experience of working with SHGs and CBOs began with EHA. I joined EHA's Tushar Community Health and Development project in Dehradun and worked with EHA from1998 to 2005. The project already had self help groups which were initiated with an objective to save money, to get together, and do something to gain out of it. They knew that being in a group is better than one person. They were able to save, give credit to people in their own community on a very low interest rate, unlike other money lenders. These groups spread like wild fire there, and people started realizing the benefits of such groups. Now as these changes happened successfully, they moved on from credits to a higher step - to be agents of social change and be empowered in other areas. All these were women's group as our objective was to empower the women who were marginalised in the community. Most of the women were uneducated. Likewise through SHGs they were able to identify the problems that existed in their communities.

Formation of cooperatives - The 50-60 SHGs were brought together to a single platform by consolidating these groups into cooperatives through the Self-Reliant Cooperative Act initiated by government. Thus we were successful in forming the first ever women's group under this Self-Reliant Cooperative Act in the state of Uttranchal. The newly formed co-operatives celebrated their success by having a grand inauguration where the Chief Secretary of the State, Mr R S Tolia graced the occasion as chief guest along with Principal Secretary Rural Development and various department secretaries who attended and encouraged the women. The co-operatives were also empowered to build their own position, influence the local governance and tap government resources.

Thus the community realized that the groups were helping them more than their demands and was well functioning. Besides, there were so much trust, no default in repayment throughout, and there was mutual accountability.

Safar - *How important is the role of CBO and SHG in community development and social transformation?*

Ms Esther Chakrapani - Well, bringing women together is a great idea. By influencing women, we can influence the generations. In spite of not being educated or empowered, they are the one who are at home and are inculcating their culture, family values, practice and rituals to their generations. So it's important to organize, empower and build them up with values, so that they are able to pass on these values which are useful for life

skills. By targeting women, we are targeting the future generations. So even if they are not educated, by realizing the importance of education they will educate their children and these children can make changes in the community.

Safar - *What are the key strategies adopted by your project which can be considered as successful, in empowering community through CBOs and SHGs?*

Ms Esther Chakrapani - We help SHGs to help themselves to take their own decisions and influence the community at large. For this we carried out an exercise of discussing with them about the mission and vision of the group for their community, accountability, helped them to develop criteria, rules and regulations of the group, and to be clear about the roles and responsibilities of group members. This created a sense of ownership and accountability among them.

★ Participation of the community at the planning level is important for the success of the project. Instead of being directly involved, we encouraged the community to deliver the activities. Usually the project team develops the vision, but how can a person who hasn't participated in planning own that vision? So we started to help them understand the issues in the community, and encouraged them to think about how they want to see their community in the next 5-10 years. This helped them to take the lead in developing the plan and then to implement it, and developed a sense of ownership.

★ Our role is just to facilitate the group in the implementation of programmes. We had our own planned activities and programmes, but here we transferred our strengths and skills to these groups. So it was them - the SHG or CBOs -who took the lead. As a result the programmes planned for groups in the community were covered and controlled by the SHGs. They themselves took the initiative and mobilized the community for the activities planned, such as life skills for adolescents, adult education, governance workshops for members of panchayat raj, and monitoring of a school health programme.

Safar - *Could you please give few examples of what change/empowerment was brought in the status of women through SHG/CBO involvement in the community, from your experience?*

Ms Esther Chakrapani - Well, there were many examples of change like:

★ Improved life - Changes were seen in their way of living (e.g. more cleanliness than before).

★ Decision making - They were able to make decisions, and participate in group functioning, and became more competitive.

★ Initiated micro enterprises - Every time they came together they discussed more about their vision and based on this they developed small activities like growing mushrooms and started tapping resources, which is another sign of empowerment. When they became confident and developed awareness and knowledge, they were able to go to the respective government departments and talk to the authorities about resources. For example, they went to the horticulture block department and asked for training on mushroom cultivation. They were able to cultivate mushrooms, which were very good

quality, and sell them in the markets. They did this as a cooperative. Apart from this each group started microenterprises like pickle making, jam making and masala making and the earnings were divided among the members.

★ Literacy centers - SHGs found the list of uneducated girls and started literacy groups for them.

★ Financially empowered -They were able to make decisions for their livelihood, financially able to contribute to their home expenses, and give loans to not only the group members but also to non-members. Once a bank in their area approached them saying that they wanted to give them loans. This was to meet the bank's annual target. But the group refused saying that they had enough money and were self-sufficient.

★ Steps against alcoholism - They raised their voice against selling liquor and even raided some places, shut shops, **and** decided not to open homes for any men who come drunk. This had a great impact on the men in the whole community.

Safar - *What are the key challenges you faced while working with SHGs and CBOs?*

Ms Esther Chakrapani-

★ Breaking into the communities, e.g. It was difficult initially to convince the community on the importance of education.

★ Getting support from local government. Sometimes there were clashes as we had a set of activities and the local government had their own activities. So we worked with the CBOs and they talked to the local government. Thus the activities and responsibilities were merged and the issue was dealt with.

★ Availability of government resources for literacy centers. It was difficult to convince them about the illiteracy, as they had already declared the area as 100 percent literate.

Safar - *What are the key roles of NGOs in community development and how can NGOs be more effective as agents of social transformation?*

Ms Esther Chakrapani - NGOs should have an extensive knowledge of the community and a good rapport with them so that they share their issues with us. NGOs should be the facilitators in planning where the communities participate as principal stakeholders.

Communities need to be supported (not always financially) long term till the second generation starts taking responsibilities. This is because they take time to build trust and true relationship within and outside the community.

Any project led and owned by communities needs a 3-4 year cycle (could be financial years) of successful completion before they are left on their own.

Safar - *Could you help us to locate some resources which will be helpful for our project staff in the area of SHG and CBO?*

Ms Esther Chakrapani -

SEEP network - www.seepnetwork.org

Farmers association – (SFSC) www.sfacindia.com

www.accessdev.org

Sa-Dhan - www.sa-dhan.net

NABARD - https://www.nabard.org

Banking Institute of Rural Development (BIRD)

SHGs and CBOs

[Punita Kumar, Programme Manager, Advocacy]

The origin of SHGs and CBOs can be found in Genesis, where God created all things and gave them to man to take care of His creation. God expected Adam and Eve to collectively to do the job and be good stewards with the blessing to multiply.

In Andhra Pradesh, the use of SHGs to route and implement poverty alleviation programmes is an evolution over time of Government initiatives, National and State, as well as NGO efforts. The evolution goes back to 1979, with the national implementation of the Integrated Rural Development Program (IRDP) that targeted the poorest of the poor, under which as a subcomponent in 1982-83, the government of India started the revolution for the Development of Women and Children in Rural Areas (DWCRA) program[1]. Though the concept is more practised with the perception of profit and money handling, it involves group formation, maturity, continuity and functioning, growing to the stage of developing income generation activities, economic independence and a self-generation programme. There are mixed reviews of SHGs and CBOs and their successes and failures. (They have proven to be beneficial not only to the members but also to the community. They continue to provide a better approach to networking and spreading the influence to a larger area.

For advocacy, SHGs and CBOs have been a good tool to function collectively for welfare and development of the communities. It is a strong collective voice of the people dealing with issues affecting their lives. They are better equipped to join in conversation and negotiations with the government agencies and authorities. Their collective efforts have been very influential in the past and we have many successful stories in our project and project areas, despite the failures in sustainability of these groups. By strengthening them we are strengthening democracy.

Usually the formation of CBOs is among the vulnerable groups, to empower them. What is unusual is forming groups of people with diseases or people who need lifelong medical interventions such as those with HIV/AIDS. As we are dealing with the revolution of non-communicable diseases, it would be a good initiative to form groups of people with diabetes, hypertension etc. so they could fight against their health issue with knowledge. It could also improve the way the health system addresses these health issues which are going to dominate the health of rural India. CBOs are a cost effective way to create awareness on the issue. To make it the talk of the town, it is good to talk about it in groups.

What we can do collectively cannot be achieved by an individual. The harvest is much and we need to be united to unite others to cultivate the harvest and be good stewards.

[1]http://www.rd.ap.gov.in/RTI_act/PDF's/RD_RTI_IB.pdf

Administration and finance management- An introduction

[Mr Varadharajan Srinivas, Finance Manager, CH Projects]

A story (May be real): The annual audits were on and auditors wanted physical cash verification with the details of the denomination of the cash that was available. The comment from the manager stumped me, he said there is only one denomination and it was Church of South India in that location!

This incident left me wondering, how can we sensitize and build capacity of senior project staff on administration and finance systems. I realised that one of the possibilities is to interact with you all through SAFAR.

"Is space required in Safar for administration and finance related issues?" was a question posed in the Annual reporting meeting. I was so encouraged to see a unanimous "Yes".

Contemplating what should be here, I listed: 1) Need for having good administration and finance systems; 2) Standards and systems; 3) Donor expectations; 4) Financial reporting standards; 5) Relook at MICAH financial reporting format; 6) How to use the organisational manuals; plus anything else that comes up. This is where I intend to start.

Need for good systems:
A case study; there is a unit that lets its staff use the unit vehicle for personal use. The request is to be made to the administrator and s/he approves the use with a call to the driver or maintenance staff. However, the SAO is allowed to override this approval. All the staff are aware of this process as it was recently introduced and informed in a staff meeting.
It is clear that there is a system in place but it is not specific and the approvals are not communicated to all those involved in the system. This could be interpreted by staff being denied a chance to use it because it was him/her. If the system could have considered this aspect and provided a solution while drafting it, the person would have either been allowed to use the vehicle or not be offended by the denial as the reason for the denial was clearly communicated to him/her.

For all those processes we carry out on daily basis that involve many departments and different levels of staff, it is necessary to have good systems.

A good system is:
★ Dynamic and updated to the needs of the people involved.
★ Standardised to the extent that it is not people specific.
★ Usually communicated to all the people involved in the processes of the system. It is often available in written form as well.

Having good systems would ensure that:
★ The processes are carried out smoothly and quickly
★ It runs irrespective of the who is carrying out the task
★ And so on…

Since it is an introductory session I will stop here and hope to get back to you with more serious issues …

I'd like to hear your comments on the session and also invite suggestions for the contents of this section @ **varadharajan@eha-health.org** and **+91 9560900978**

CHDP half yearly reporting meeting
Photo - Thomas John

CHDP NEWS

★ The Half yearly reporting meeting of CHDP was held from 27th to 29th of October 2015 at Naveenta Retreat Centre, Delhi.

HR MOVEMENTS

New Joinees

Name	Designation	Project
Mr Mayonza Tungshang	Project Coordinator – Safe Migration	Central Office, Delhi
Mrs Shilpa Nitin Thakor	Training & Documentation Officer	Central Office, Delhi
Mr Atul Goodwin Singh	Project Officer	Burans Project
Mr Edison Narzary	Project Officer	ACT, Duncan
Ms Trishna Khadka	Project Assistant	Karuna Project, Duncan
Mr Huidrom Premjit Singh	Physiotherapist	Samvedna, Landour
Ms Lily Rachel Subhash	Occupational Therapist	Samvedna, Landour
R Thavamani	Project Manager	CH, Prem Jyoti
Dama Khillo	Project Officer	MCH, Chhatarpur
Anil Kumar Kuril	Project Assistant	MCH, Chhatarpur

NEXT ISSUE OF SAFAR

Safar Issue 21 is focusing on
Livelihood
Please send contributions to Feba Jacob (fjacob@eha-health.org) by
15th December, 2015
Editor – Kaaren Mathias
Co-editor – Feba Jacob
Layout & Graphic – Suanlian Tangpua

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