Summary

This reporting year saw important changes in DLR PRERNA CHAI PROJECT Darjeeling project implementing strategy as it advances in streamlining its core issues into WASH and Livelihood. These year projects with similar objectives and addressing similar issues were put under one project management team as opposed to having segregated grant wise teams. Two project management teams under the broad issue of WASH and Livelihood has been identified and projects from various donors are being implemented within these new structure. During the year more than 6288 number of people were reached through Water, Sanitation, Hygiene Promotion and various livelihood projects. This year DLR PRERNA CHAI PROJECT Darjeeling received Grants from Tazo/Starbucks Foundation for Wash and Livelihood projects, TWINING Tea of London for Wash Projects, VISTA Hermosa Foundation for Livelihood projects for Spice Farmers, Broadleaf HEA for Hygiene promotion in Primary Schools Two
Private Donors for Dairy Project. All of these grants have been awarded through Mercy Corps US and UK. This report describes in detail the project’s activities in each location including community involvement, public health, economic advancement and youth participation.

**Progress in Numbers**

<table>
<thead>
<tr>
<th>DLR PRERNA CHAI PROJECT Darjeeling</th>
<th>Progress this FY 2012-13</th>
</tr>
</thead>
<tbody>
<tr>
<td># of Latrines Constructed</td>
<td>467</td>
</tr>
<tr>
<td># of Catchment improved</td>
<td>13</td>
</tr>
<tr>
<td># of Water System Completed</td>
<td>11</td>
</tr>
<tr>
<td>Total # of People reached through Hygiene promotion</td>
<td>5285</td>
</tr>
<tr>
<td>Village Primary Schools Implementing Hygiene Program</td>
<td>22</td>
</tr>
<tr>
<td>School Children Participating in Hygiene Program</td>
<td>700</td>
</tr>
<tr>
<td># of School children referred for medical support</td>
<td>132</td>
</tr>
<tr>
<td># of International events observed</td>
<td>4</td>
</tr>
<tr>
<td># of Ginger Farmers supported</td>
<td>235</td>
</tr>
<tr>
<td># of Dairy farmers supported</td>
<td>212</td>
</tr>
<tr>
<td># of Training on Dairy and Spice management</td>
<td>9</td>
</tr>
<tr>
<td># of SMVG established</td>
<td>44</td>
</tr>
<tr>
<td># of Vermi compost unit established</td>
<td>9</td>
</tr>
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</table>
Water Sanitation and Hygiene

-Latrines

Year 2012 started with an assessment on Water & Sanitation situation of 31 rural tea estate communities of Darjeeling. Where it was found that at an average 66% of these community lacked proper sanitation, out of which 12% household still practiced open defecation. The remaining 54% had kuttcha latrines where the sewage was directly dumped into the nearby streams. This was not only a health concern for those communities but a serious concern for the communities downstream as it was directly contaminating the water sources for the downstream communities. With these finding and resources available DLR PRERNA CHAI PROJECT Darjeeling started mobilizing and sensitizing the communities on advantages of having a sanitary latrines and its health benefits. By the end of the year 2012-13 DLR PRERNA CHAI PROJECT Darjeeling has been successfully completed 467 two pit composting latrines in 26 community and 3 schools through various projects. Another important aspect of the latrine construction was that DLR PRERNA CHAI PROJECT Darjeeling was able to motivate community members to contribute for the construction of these latrines, through the intensive community mobilization methodology of DLR PRERNA CHAI PROJECT the community has contributed at an average of 50% for the construction of these latrines.

Figure 1 Completed latrine at Singell
Prevalence of water borne diseases like diarrhoea, and dysentery, is high in the Darjeeling hills. 15% of all morbidity is due to diarrhoea. A DLR PRERNA CHAI PROJECT sample survey showed 41.6% of the population were found to be affected by water borne diseases at least twice a year, as per a sample survey conducted by DLR PRERNA CHAI PROJECT in 2008 in areas where water systems and sanitary latrines do not exist. This leads to school and work absenteeism as well as extra financial burden due to health expenditure. Lack of access to potable water is one of the major causes of this high prevalence. Communities in Darjeeling depend on nearby streams (source) for their water. The average time taken daily to collect water from such a stream is about an hour’s of uphill and downhill walk. Carrying of water is mostly done by the women and children in pots and pans. A few economically better off families have linked pipes to the streams and have built their own small reservoir. Another area of concern is high contamination of the water sources. Dumping of waste including human excreta and open defecation near streams pollutes the water. The water discharge substantially diminishes during the dry season between December and May, which compels people to walk further to fetch water. This scarcity also often creates conflict within the communities at collection points. Many springs are threatened by poor or inadequate drainage which can destroy the springs through contamination and erosion. Various studies conducted by individual and organization and observation by the elderly has shown in drastic decrease in natural spring outlets which is the primary source of water for the hilly area, one of the major reason pointed out has been unorganized tapping and mismanagement of the catchment areas.

During this year DLR PRERNA CHAI PROJECT Darjeeling has successfully completed 11 water systems. These water systems will provide potable water to 441 Families [2440 people]. 11 Watsan committees were formed in these communities to plan, implement and monitor the construction of these water systems. These watsan committees are also responsible for the operation and maintenance of these systems. A post project assessment revealed that there has been an increase of 254% in water availability and a decrease in 81 % in water collection time in these communities as shown in the graph below. Catchment areas has been developed and improved in these communities which feds water to the system by planting trees of various species.

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1 'Area and Issue Profile of Darjeeling’ by Mashqura Fareedi & Pasang Dorjee Lepcha, Indo German Social Service Society, 2003.
species, constructing recharge pits and cross drainage so that excess surface runoffs are tapped and fed into the ground water in order to conserve water.

**Water Status**

![Water Status Chart]

**Hygiene Promotion and Awareness**

When the Watsan teams first visited the project areas during assessment & baseline survey, it was observed that the community people's awareness on the ill-effects of unhygienic habits and living was quite low. Majority of the population were not aware about the benefits of healthy and hygienic habits in their daily lives and they rarely practiced proper hand washing in their daily routine.

It was found that people were consuming water without purifying or boiling. Many of the villagers practiced open defecation and did not want to invest on constructing toilets. Even those who had toilets in their area did not keep it hygienic and clean. The women in the communities were not aware about the importance of covering the cooked food while children in the communities were not versed with the knowledge of healthy and hygienic habits in school or at home.

The Watsan field Team started the ground work in the communities. The Team spent substantial amount of time in the field, spreading awareness on health and hygiene. Various awareness programs were organized within the community and a task force was created by recruiting youths from the community to be a direct source of contact. This initiative was strengthened by

![Figure 3 Awareness by Watsan Volunteers]
partnering with neighboring schools and tea gardens and establishment of Health clubs to assist implementation of the project.

The community appreciated these initiatives and started to bring new changes in their lives by adopting healthy and hygienic habits. Education and awareness was conducted through the use of IEC materials which comprised of Flipcharts, Calendars and Posters. Behaviour change was noticed in the community whereby people started performing activities like regular hand washing, water boiling for 20 minutes, construction of toilets and regular cleaning of toilets & water containers. The community has shown increased awareness on water-borne diseases which was affecting their normal course of life.

From Table 1.1 we see that there has been 50% increase in the knowledge of people on the knowledge on water purification while there has been 76% increase in the knowledge about prevention of water borne diseases amongst the community members. There has been an increase of 92% of people accessing information on health and hygiene which is one of the achievements of the project.

Global Handwashing Day: On 15 Oct 2012 Global Handwashing Day was observed at various communities to spread and increase awareness and understanding of handwashing with soap for prevention of diseases. The Theme for this year’s Global Handwashing Day was “Help more children reach
their 5th Birthday”. Global Handwashing is endorsed by a wide array of governments, international organizations, private and public sectors and individuals. The message on Handwashing with soap is one of the most effective and low cost ways to prevent diseases like diarrhea in the developing countries.

Messages on importance of Handwashing, safe water use, conservation of water sources, open defecation and its eradication, water borne diseases and its prevention were conveyed by the students throughout the program.

**Hygiene Promotion in School**

Comprehensive Health & Hygiene Improvement Program is a health education and improvement program with the following three interrelated components implemented and/or facilitated by trained, community-level School Health Activists: 1) health education curriculum taught in partner schools, 2) health monitoring and early intervention, and 3) improvements to the school health environment.

CHHIP works with 7 partners schools in three communities in Darjeeling District (Lingten, Singrimtam, and Marybong). These schools receive the complete package of CHHIP services. CHHIP also works with 9 control group schools (Nezi, Maneydara, Lingia). Control group schools participate in monitoring and evaluation surveys, but they do not receive any CHHIP interventions.

**CHHIP Health & Hygiene Curriculum**

The CHHIP Health & Hygiene Curriculum includes a total of 120 lessons covering concepts of basic health and hygiene. SHA’s were trained to implement the Health & Hygiene Curriculum, 100 lessons were implemented in 668 classes from March 2012 to December 2012. 5 lessons were implemented in March 2013 in CHHIP partner schools.

**Student Health Knowledge Acquisition**

CHHIP devised a Student Health Knowledge Test to assess student knowledge acquisition as a result of the CHHIP Health Curriculum. Three separate tests were created for combined Nursery/Kindergarten (N/KG), Class I /II, and Class III/IV students. A baseline pre-test was given to students in March 2012 and March 2013 prior to implementing the curriculum. A post-test was given in December 2012 after SHAs had finished teaching the curriculum for the year. Student Health Knowledge Test base line pre-test was given to Control Group School students on March 2013.

**CHHIP Annual Exercise Day**
In addition to implementing the CHHIP Health Curriculum, partner schools commit to conducting an annual “Exercise Day.” The Exercise Day took place in each community in October 2012.

**CHHIP Health Attitude & Behavior Survey Nursery/KG/Class I/II and III & IV**

Two separate tests were conducted for classes N/KG I/II and III & IV for CHHIP partner and control group schools in March 2013.

**Improvements to the School Health Environment**

In 2012, based on the budget and the prioritized needs of each community which included toilets, access to a water supply, first aid kits, sports equipment for recess and physical activity, and structural improvements to existing school buildings, CHHIP completed 18 health-related infrastructure projects.

In Lingten Cluster, 6 toilets and 1 water system in Bal Sai Academy, 2 toilets and 1 water system in Divya Jyoti school and 2 toilets in Padeng Primary School. In Marybong Tea Estate, physical activity Kit and First aid kit in Marybong and Kyel Primary School, 2 toilets in Calvary English Academy. In Singrimtam Cluster, physical activity kit and First aid kit in Lower Singrimtam Primary School.

**Livelihood**

**-Spice**

During this year Market DLR Prerna CHAI Project n Intervention project was able to successfully mobilizes the community into producer and value addition groups. 3 value addition units collectively known as “Darjeeling Spice” was established by farmers from Pulungdung, Babukhola and Upper Mamring who came together to form the spice value addition units located in these location with its packaging and marketing unit at Batasia. This units are producing Ginger, Tumeric and Round chilly powder packets.

A pilot initiative seed bank consisting of 3 groups and 80 farmers were mobilized by the project for the preservation and rotation of healthy and indigenous seeds. The objective is also to provide cashless seed access to farmers as the price of ginger seeds continues to fluctuate.

**-Dairy**

During the reporting period the project successfully helped mobilise the community members and members of the Dairy Value Addition Unit at M1 Sittong area. The dairy value addition unit was successfully established where one of the member of the VAU donated land for the
establishment of the same. A small outlet was also provided by the project for selling raw milk and dairy products at Kurseong town which is approximately 1.5 hours (on vehicle) away from the diary VAU at M1.

As a result of the intervention at M1 the quality of the milk has increased and at least 200 farmers now provide quality milk and access better milk prices.

-**SMVG**: A Pilot project on Square Meter Vegetable garden has been initiated by the DLR PRERNA CHAI PROJECT project taking farmers from both Agriculture and tea estate communities who has small land holdings and are deprived of large agriculture farms. This projects looks at two ways to benefits this group of farmers one it will provide them with an opportunity for additional household income and two will provide them with some nutritional foods. This year 20 units was established in various community as pilot.

-**Vermicompost**: Following up on the huge success and interest shown by farmers from last year DLR PRERNA CHAI PROJECT continued to mobilize and train farmers to set up vermi Compost units. This year DLR PRERNA CHAI PROJECT has taken the vermi composting programs to Singrimtam and Sitong cluster where it is presumed to be highly successful as the communities are amongst those few community in the hills where agriculture is the primary source of income for majority of the families.