

## PREM: REACHING THE UNREACHED THROUGH CAMPAIGN FOR EDUCATION AND EMPOWERMENT OF THE MARGINALISED

Jacob Thundyil

### Introduction

People's Rural Education Movement (PREM), a non-government organisation (NGO) operating mainly in southern Orissa and northern Andhra Pradesh in India, has been active over two decades among the scheduled tribes, scheduled castes and fisher people. It has been putting its efforts through various innovative schemes for empowerment of the marginalised, utilising spread of education as the intervention point.

PREM strives for 'creation of a new social order' through education by spreading awareness and developing skills, particularly among the marginalised people. During the past 23 years its development initiatives have been centred on the *adivasi*, *dalit* and fisher people from hamlet and village level to national and international forums. The organisation believes in experimenting innovative approaches in rural development.

PREM's goal, as presented in its mission statement, has been focused at the "creation of a new social order in which the present unorganised and marginalised people have a say in decision making, where education creates awareness and develops skills and fosters the growth of talents, where culture is ever creative, where men and women are totally liberated from all dehumanising and oppressive forces and where the decisions of individuals and communities are based on the values of social justice, equalities, truth, freedom and the dignity of human life."

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## Background

PREM has had its origin in the state of Orissa, which has a large concentration of scheduled tribe and scheduled caste population. The state has a population of 36.8 million spread over 1,55,707 sq. km. Scheduled tribes and scheduled castes constitute 38.7 per cent of the total population of the state. The scheduled tribes in Orissa account for 9.7 per cent of the total tribal population of India and 44.7 per cent of the land in the state is scheduled area, which consists of 118 blocks in 12 districts. There are 62 tribal communities including 13 primitive tribal groups in the state. Literacy rate among the scheduled tribes in the state is 31.5 per cent for the male and 23.4 per cent for the female population.

The tribals in south Orissa, who constitute PREM's major project population, have a distinct culture of their own and believe in the philosophy of caring and sharing. Traditionally each of the tribal villages has been a republic in itself, and the tribals have had their own rules and regulations with regard to control of the common property.

The tribal society of the region faced invasions throughout the history and the alien cultural norms excluded the tribals from the mainstream civilisation. Particularly land settlement rules of the British which were subsequently followed by the state and central governments after independence resulted in land alienation of the tribals. As the tribal society did not have a system of private property norms and was not acquainted with the settlement rules, they did not take part in the process of land registration and ultimately were recorded as landless in government documents.

The tribals of south Orissa resented the entry of the foreign administrative and cultural values. The Ghumsar revolt records the brave fighting tradition of tribals against the British. The continuous social exclusion of tribals resulted in illiteracy and underdevelopment even after several years of independence. The entry of non-tribals into tribal mainland made the situation more complicated. The tribals became helpless. Against this scenario rose nationwide activism for social justice.

## Beginning and Growth of PREM

The social awakening created by activism for social justice among the youth during the 1970s and 1980s resulted in the propagation of Gandhian, Jayapraksah and Naxal movements in the country. The concept of activism through non-government organisations was initiated for protecting the rights of the marginalised communities. In tune with the national awakening a group of young men in Orissa gathered under the umbrella of PREM for uplifting the tribals and the other marginalised communities of the region.

The group of social activists was led by Jacob Thundyil and Chacko Paruvanany, natives of Kerala settled in Orissa as Christian missionary activists during the earlier part of their life, and initiated development programmes in 15 villages of Mohana block of Gajapati district in Orissa state during 1980s. These efforts led to the formal registration of the voluntary organisation, PREM in 1984 under the Societies Registration Act. Initially its development intervention was carried out through propagation of adult education and within two years the programme was extended to Nuagada and Sorada blocks. The entry point of PREM in the tribal areas was Paulo Freire's programme of functional literacy for political education, which had three components: (a) organisation of the unorganised sector, (b) functional up-gradation and (c) literacy. The focus of this process consisted in identifying the problems of the people at the village level through meetings of the villagers both men and women, prioritising the problems, analysing them in terms of the causes and collectively finding the solutions. This is known as 'problem solving education'. This leads to action refracted and action process.

The second phase of this adult education process in the villages has been to form people's organisations at the village level, cluster level, block level and further. Along with the formation of people's organisations and women's organisations, PREM started non-formal education programmes for educating *adivasi* children, and discouraged shifting cultivation and promoted the concepts of agro-forestry and social-forestry. Gradually PREM's project area extended to the R. Udayagiri, Daringibadi, Ramanaguda, Padampur and Raikia blocks. Its development initiatives were introduced among the fisher communities in Gopalpur-on-Sea in 1985, Brahmagiri in 1987 and Chilika in 1990. As the need arose, activities of PREM have been

diversified to include relief delivery programmes to its project population during the drought in 1988 and replicated such programmes in Kalahandi in 1991.

### ACTIVITIES OF PREM

PREM has been working in Orissa and Andhra Pradesh since 1984 as a humanitarian, secular, non-political and non-profit making voluntary organisation. Its primary objectives are to spread education, improve healthcare and implement livelihood programmes among the marginalised communities. PREM utilises education as the intervention point for engineering major development initiatives which include promotion of agriculture, healthcare, livelihood and governance among these communities. In the area of healthcare PREM is making efforts for reducing infant and maternal mortality rates, spreading immunisation, promoting healthcare delivery system through micro-insurance and campaigning for prevention of malaria and HIV/AIDS. In order to improve the livelihood prospects of the marginalised groups PREM implements programmes of vocational training and micro-finance initiatives through formation and management of self-help groups. Another activity of PREM is that of capacity building of the people for active participation in governance through *panchaytraj* institutions, forming community based organisations and linkages at the block, district, state and national level, and engineering issue based advocacy programmes.

PREM also leads national level forums. Notable among them are the National Advocacy Council for Development of Indigenous People (NAC-DIP), the East Coast Fisher People Forum (EC-FPF) and the *Utkal Dalit Mahasabha*. Today PREM with its network partner of 172 independent voluntary and community based organisations (CBOs) reaches out to more than 50,00,000 people in 22 districts of Orissa through various developmental programmes and campaigns.

#### Education as the Focal Point for Development Intervention

PREM initiated its development interventions through adult education and during the 15 years from 1980 to 1995 it strived to promote literacy, non-formal and vocational education among the *adivasi*, *dalit* and fisher people. Adult education has been aimed at functional literacy among the project population. Functional literacy programme has been utilising print, audio, video and folk media for dissemination of development information.

In 1996 PREM conducted an evaluation study in 350 villages of its operational area which revealed that only about 30 per cent of the children were attending schools and about 50 per cent of those enrolled in school dropped out within two years. Therefore in 1996 PREM reorganised its educational policy with children's education as the focal point. During the 10 years from 1996 to 2006 its programmes in school education included (i) day care centre, (ii) bridge course, (iii) student hostel, (iv) vocational education and (v) 'voucher scheme'. PREM encourages the villagers to manage the schools through *gram sabhas* and provides supports such as additional teachers, educational equipment, school uniforms etc. Teachers are trained in various skills and modules are developed to promote quality education in the local schools.

#### ***Day Care Centre***

Day care centres of PREM provide basic educational opportunities in the inaccessible areas where formal schooling facilities are not available. Children in the age group of 3-5 years go to the day care centres and get pre-school education, which prepares them to attend formal schools. Children's health situation is also monitored in the day care centres. Leaving the children under the supervision of caretakers the mothers get the opportunity to attend to livelihood tasks freely. The caretakers who manage the day care centres are selected from the village itself, and most of them are women.

#### ***Bridge Course***

Bridge course is meant for children in the age group of 8-14 years who are not going to school. It serves as a link to formal education for such disadvantaged children. It prepares the older children who have not attended school to join school and also helps the dropouts to rejoin the school. The bridge course helps the children to enjoy their rights for education and special opportunity is created for the girl children to prepare themselves for school education.

#### ***Student Hostel***

As part of its programme of supporting children to go to formal school PREM arranges hostel accommodation for those children who live in such villages where schooling facilities are not available in the neighbourhood. The students admitted at the hostels run by PREM

are provided with school fees, educational materials, food, clothing and healthcare. Separate residential schools are also run exclusively for the girls.

### ***Vocational Training***

Vocational training, aimed at skill imparting for livelihood pursuits, is another educational activity of PREM. It encourages agro-based curriculum which can help the students to go back to the villages and adopt improved cultivation methods. Girls are given vocational training in programmes such as food processing, tailoring and nursing that would enable them to seek alternative livelihood apart from solely depending on agriculture.

### ***Voucher Scheme***

PREM is piloting another approach in children's education, described as 'fund the child and not the school'. This is known as the 'voucher scheme' and gives choice to the child and parents for quality education and healthcare. It is to be noted that for the first time in India PREM piloted a project wherein tribal children are sent to the best English medium schools and central schools (*kendriya vidyalayas*) of the government of India.

In the first phase 300 tribal children — boys and girls — have been given the opportunity to study in reputed English medium schools. For the tribals either Oriya (the regional language in the state) or English is a foreign language. To compete and survive in the globalised world they should have the knowledge in English. Also, the better way to eradicate casteism is to provide the oppressed communities real opportunities for English education than subsidies and quotas. The tribal children under this scheme have been performing very well during the last eight years. If such opportunities are provided, any tribal child can compete in the globalised world and earn a space for his/her existence. PREM is planning to expand this scheme to other tribal areas.

### ***Child Sponsorship***

PREM engineers its child centred development programmes through child sponsorship. Of the two projects devoted to child sponsorship, PREM/Plan Koraput covers 350 villages in Mohana, Nuagada, Rayagada and Gumma blocks of Gajapati district, and

PREM/Plan Chilika covers 120 villages in Konark, Astarang, Brahmagiri and Krushna Prasad blocks in Puri district of Orissa. These projects extend support to 7,000 sponsored *adivasi* and *dalit* children in Gajapati district and 4,000 sponsored children belonging to *dalit* and fisher communities in Puri district. About 30,000 families belonging to the project area have benefited from the development interventions with special focus for the care of children in the age group of 4-18 years. It is part of PREM's endeavours for the development of the marginalised communities.

The major activities of the child sponsorship project include advocacy and lobbying for (i) access to quality education, (ii) health care services at community level, (iii) internalisation of child rights by various stakeholders, (iv) access to safe drinking water and sanitation (v) sustainable livelihood and (vi) political participation through democratic institutions.

### **People's Rural Health Promotion Scheme**

Traditionally *adivasi*, *dalit* and fisher people have been socially excluded. Poverty, lack of awareness and non-availability of facilities result in non-accessibility of health care services for such marginalised communities. For example, Gajapati district is endemic to malaria and about 35 per cent of the population in PREM's project area in this district are recorded vulnerable to the disease, while infant mortality rate and maternal mortality rate registered 141 and 8 per 1000 respectively in 1996. Tuberculosis, sickle-cell, and water borne diseases such as diarrhoea and typhoid are major health hazards among the *adivasis* and *dalits* in the district.

In providing referral medical care to about 10,000 foster children along with their siblings and family members during a period of five years from 1996 to 2001 PREM spent an amount of about Rs.15,00,000 on health care. It was estimated that in a population of 1,00,000, about 14,000 to 20,000 persons in the project area seek medical treatment in a year. In order to provide health care to the rural poor, PREM introduced in 2003 the "People's Rural Health Promotion Scheme", which comprises a programme of health insurance and a three-tier health delivery system.

### *Health Insurance*

The major task related to health care before PREM has been to provide medical care in inaccessible areas and at the same time raise funds to support the treatment of diseases. PREM took the initiative to experiment with a health micro-insurance scheme through village committees. The system of operating the scheme was based on collecting a small amount as annual fees from each and every member of the project population and spending it for the health care and treatment of the needy.

In its pilot project PREM identified 500 villages with 1,00,000 members who paid Rs.20 per year per individual including children. In the process a sum of Rs.20,00,000 was collected per year. An amount of about Rs.15,00,000 was spent for providing healthcare facilities to the project population and a sum of Rs.5,00,000 per year along with the returns from the investments was contributed to the corpus. It is expected that fund raising from external sources will be redundant within a period of time.

### *Three-Tier Delivery System*

A three-tier delivery system was formulated to provide health care at the village, local public health centre (PHC), and referral to district hospitals, medical college and private nursing homes as per need. At the village level pharmacies were developed in each of the 500 villages. Local young men were trained as para-medical activists who distribute medicines deposited at village pharmacies for common ailments. A number of villages are roped into a federation and at the federation level simple pathological services are made available. Those who need further treatment at the two levels above are helped to attend the local PHC run by the government or the district hospital.

It has been recorded that about 75 per cent of the cases of sickness get cured with 15-20 types of medicines available at the village pharmacies. If the sickness continues for 2-3 days, the patients visit the PHC where another 15-20 per cent of the cases are cured. Only 5-10 per cent of the cases are referred to district level hospitals, medical colleges or private nursing homes. The scheme bears the expenditure, incurred for purchase of medicines and fees for hospitalisation, to a maximum level of Rs.3,600 per member per year.

The pilot project of "People's Rural Health Promotion Scheme" is now four years old and it is expected to be self-supporting within a short period of time. Initial success of the scheme has attracted the attention of the network partner NGOs and PREM proposes to scale-up the programme from 1,00,000 members to 5,00,000 members in the near future.

### **Campaign on Health Issues**

PREM has been regularly engaged in campaigns in its different areas of social intervention. Two issues of campaign in the larger area of health are (1) family planning and reproductive health, and (2) HIV/AIDS.

#### ***Family Planning and Reproductive Health Programme***

PREM organises campaign for popularisation of the "standard duration method" as an alternative for couples in its project population previously not using contraceptives. The campaign, engineered with support from the Centre for Development and Population Activities (CEDPA), also focuses on expanding contraceptive options among the eligible couples.

In the initial level a well organised training module was developed and about 30 health workers, stationed at sector level comprising of a number of programme villages in Gajapati and Puri districts of Orissa, were trained. In the second level training of trainers helped to form a group of 6-8 trainers to build up capacity of the grassroots level animators who in turn conducted training sessions for community health workers in the third level.

PREM's communication strategy for spreading awareness on family planning included use of professional street theatre groups, songs and puppetry which are sensitive to socio-cultural milieu. Motivation from opinion leaders, influential groups and SHGs helps in popularising the concept. Wall paintings, flex hoardings, posters, stickers and flyers were used as communication tools in the campaign.

The campaign organised methodical orientation training sessions for trained traditional birth attendants, *anganwadi* workers, holders of 490 village pharmacies and pre-school teachers in the project area. Lobbying strategies were adopted to avail the facilities of acquiring free contraceptives distributed by the government under various schemes.

### ***Campaign on HIV/AIDS***

PREM organises campaigns on HIV/AIDS in Ganjam, Gajapati and Kandhmal districts with the support from the Norwegian Agency for Development Cooperation (NORAD), Plan India and OXFAM Australia. Seasonal unemployment drives rural poor and *adivasis* to migrate to distant towns and cities where they may become vulnerable to HIV/AIDS infection. Ganjam district has been identified as a high risk zone for the epidemic.

PREM's campaign aims at bringing sustainable behavioural change among the target community. It engineers activities related to behaviour change in communication, health and STD camps, condom promotion and awareness creation through folk media. Its target groups comprise of sex workers, drivers, wives of vulnerable groups, migrant labourers, elected members of *panchayatraj* institutions, village committees, youth groups, teachers, members of CBOs and NGOs etc. The campaign also organises sensitisation sessions for secondary stakeholders, orientation programme for peer educators and condom outlet owners. Interpersonal, group communication and village level meetings act as the medium for social marketing.

### **Advocacy for Development**

PREM has a long history of involvement in advocacy for development of *adivasi*, *dalit* and fisher people and rural poor. Two main areas of its advocacy operation are schooling of children and mobilisation of grassroots level initiatives.

#### ***Schooling of Children***

In 1988 the primary and secondary schools run by the state government in the *adivasi* dominated regions of Gajapati and Ganjam districts of Orissa were in a highly neglected condition as the teachers appointed in such schools were remaining regularly absent. Government money was spent, but the *adivasi* students were not getting the opportunity to receive instruction from teachers in the classroom. PREM took the initiative to motivate the *adivasis* through village committees to place their demand before the government for ensuring regular attendance of the teachers in the schools. The representatives of the village committees submitted memorandums to the higher government officials and organised rallies and demonstrations to attract

the public opinion to the issue. As a result the educational officers were sensitised and even the elected member of the legislative assembly of Mohana constituency who was functioning as a minister of state in the government of Orissa personally visited the schools to locate and punish errant teachers. Finally the teachers started attending the schools in the *adivasi* dominated areas. The teachers, appointed in the *adivasi* areas of Gajapati and Ganjam districts, stopped the practice of living in urban localities and indulging in other businesses.

### *Grassroots Level Advocacy*

Since 1990 PREM promoted 42 grassroots level NGOs in Orissa and eight organisations in Andhra Pradesh, and supported them for implementing various projects on community empowerment. In the process advocacy strategies were initiated for (i) land for landless, (ii) assertion of the land rights of small farmers, (iii) protection of minimum wages for labourers, (iv) prevention of atrocities against women and children, (v) protection of environment and (vi) sea ecology. The programme of advocacy included regular organisation of training camps and workshops, lobbying with media and government organisations, and creating public awareness in various corners of Orissa and Andhra Pradesh.

By 1992 the network of NGOs working for development of *adivasis*, led by PREM, organised state-wide advocacy for implementation of the Bhuria Committee recommendations which ensured greater political and administrative power to the grassroots level democratic organisations, such as the *gram sabha*, *palli sabha* and village committees in the *adivasi* areas. On 24 December 1996 the recommendations were adopted by the Parliament and it was a great achievement of people's struggle. The network partners again advocated with the state governments to implement the central legislation. In 1997 the government of Orissa ratified the central rules on village level decentralisation in tribal areas. The process of lobbying with the state government to delegate more powers to *gram panchayats* has continued.

### *Fellowships for Advocacy*

PREM awards fellowships to activists to support advocacy for empowerment of the marginalised. About 50 activists involved in rural development benefited from the fellowships during the past 15 years. Such fellowships helped the activists to concentrate upon their

activities in organising the marginalised till they are able to generate funds both through internal and external sources to build-up their development initiatives financially sustainable. Mostly the fellowships are awarded to activists during their involvement in survey and research initiatives.

### *Experience in Networking*

PREM, with its network partners of 172 independent NGOs and CBOs, engineers development programmes on both short-term and long-term basis. The major programmes implemented through the network partners on long-term continuous basis include micro-credit initiatives through *Utkal Mahila Sanchya Bikas* (UMSB), development of *adivasis* through the National Advocacy Council for Development of Indigenous People (NAC-DIP), development of *dalits* through the United Dalit Network (UDN) and development of fisher folk through East Coast Fisher People Forum (ECFPF).

### *Utkal Mahila Sanchya Bikas*

The UMSB is a federation of women's self-help groups (SHGs) initiated by PREM with the objective to promote micro-credit activities among the rural poor in Orissa state. It covers 20 blocks in the state through 2,240 SHGs with 41,320 members. The SHGs are located in the blocks of Aska, Dharakote, Goudogotho, Sanakhemundi and Gopalpur (in Ganjam district), Gunpur, Adava, Gilakuta, Mohana, Parimal, Nuagada and Gumma (in Gajapati district), Krushna Prasad, Stapada, Brahmagiri and Konark (in Puri district), Daringbadi and Raikiya (in Kandhamala district), and Lanjigarh and Ramapur (in Kalahandi district).

PREM acts as the mentor of UMSB and provides all sorts of managerial support to it. PREM also stands as guarantor for fund generation of UMSB. The donor agencies, including the Small Industries Development Bank of India (SIDBI), National Bank for Agriculture and Rural Development (NABARD), OXFAM Australia, Norwegian Embassy, Plan India and various commercial banks, have provided grants and soft loans to UMSB for promotion of the micro-credit programme.

UMSB's micro-credit network members are concentrated among the rural poor, specifically scheduled tribe, scheduled caste and fisher

folk communities. Traditionally they have been perpetually indebted to the money lenders and as a result remained dependent in the economic, social, political and cultural spheres. Modern banking system is not accessible to such people who have no assets or substantive economic activities. UMSB's initiatives have enabled them to organise SHGs and generate collective strength not only for taking care of their financial needs related to small savings and credit, but also bargain with the commercial banks to acquire benefit of credit as per the government policies. They are in the process of organising the existing financial assets for sustainable economic activities such as social forestry, community managed goat rearing and fishery, collective marketing etc.

#### *National Advocacy Council for Development of Indigenous People*

The NAC-DIP is a country level forum, promoted by PREM, for advocating the cause of the marginalised *adivasi* communities in India. NAC-DIP has registered membership from 92 *adivasi* communities belonging to 18 states in India with a network involving 225 independent NGOs and CBOs. It is an informal platform used by a number of *adivasi* organisations facilitated by NGOs who are active in different states implementing various forms of development programmes among *adivasis*. Between May 2001 and June 2006, it could organise five national conventions and five national consultations of NGOs and CBOs.

The NAC-DIP aims at promoting the rights of the indigenous people through organising capacity building workshops, seminars and conventions raising awareness among indigenous groups and the general public of the situation and living condition of the indigenous people. It strives to build a network of indigenous CBOs and NGOs that will increase information flows at local, regional and national level. It also engineers strategies for promoting understanding and cooperation between indigenous CBOs, NGOs and local authorities through interactions involving all sectors, which will contribute towards preventing conflict between these groups. In pursuit of this issue there have been campaigns under the auspices of PREM for implementation of the *Panchayat* Extension in Scheduled Area (PESA) in true spirit, passing of the Forest Bill 2005 which gives right over land to the tribals in forest area and protecting the people from

displacement due to mining, mega dams, wild sanctuaries and industries.

This network has also taken up the issues of universal birth registration in tribal areas as it was noticed that only 30 per cent of the children in tribal communities got registered and the remaining children did not get opportunities to get birth registration certificate. Tribal network in collaboration with civil societies has completed fresh registration of 52,00,000 tribal children in 25 districts of Orissa in collaboration 225 NGOs, *panchayatraj* institutions and media. The same state level network of tribals has taken up malaria prevention and control programme in eight districts covering 8500 villages with the support of 75 NGOs, civil societies and *panchayatraj* institutions.

This network is continuously involved in the capacity building of *panchayatraj* institution and promoting social watch monitors from village and district level in every tribal district in Orissa. The main tasks of the social watch monitor are sharing the information of government programmes and projects to the villages, informing different problems faced by the villagers to the authorities concerned and using of RTI (right to information) as a tool for empowerment of the community.

### ***East Coast Fisher People Forum***

PREM is active in implementing development programmes among the fisher people, one of the marginalised communities in the society. Though its active participation is concentrated in the coastline of Orissa and Andhra Pradesh, the organisation has also gained experience in working with the fisher communities in Tamilnadu, Pondicherry, Kerala and West Bengal through its network partners. PREM promoted the ECFPF with membership from seven states comprising 28 groups. The ECFPF initiated a micro-finance programme for achieving economic freedom of the target fisher people. At the entry point CBOs were strengthened and SHGs were formed for facilitation of micro-credit system. Such networking of SHGs and CBOs were further promoted at the local and regional level for strengthening the system.

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of tsunami affected population in the coastal belt of Andhra Pradesh, Tamilnadu, Pondicherry and Kerala.

### ***Promotion of Corporate Social Responsibility***

PREM conducted a study aimed at assessing the current understanding and status of corporate social responsibility (CSR) in Orissa state in order to lay the basis for future action to enhance CSR in the state for the benefit of the poor. The study was organised with partnership of (i) Concern Worldwide, Bhubaneswar, (ii) Partners in Change, New Delhi and (iii) Tradecraft, U.K.

The study, which had the objective of capturing and assessing the current understanding of what CSR meant, elicited response from various groups, viz. select representatives of corporate, small business, policy making and regulatory bodies of government, civil society organisations including NGOs and CBOs, international NGOs, trade unions, impacted communities and multilateral institutions which have a stake in working on or influencing CSR in the state along with academic institutions, media and consumers. The study also collected information on cases of good practices pertaining to different stakeholders in the two select sectors of mining and trading in spices. The study was conducted during January–June 2005 and the dissemination workshop was held on 14 December 2005 at Bhubaneswar.

### **Disaster Management**

PREM has been regularly involved in disaster management, especially in relief and rehabilitation works during cyclone, flood and drought. South-Orissa was affected by cyclones in 1985, 1990, 1995 and 1999 where PREM actively participated in relief work, particularly among the *adivasi*, *dalit* and fisher people. During the cyclone of 1995 PREM organised a network of like-minded NGOs working in its neighbourhood and experimented with a larger number of volunteers in providing the services of relief and rehabilitation on a larger scale. The network partners strengthened their efforts by enrolling volunteers from local community based committees, youth clubs and SHGs. Such committees kept close liaison with the district administration for smooth operation of relief and rehabilitation.

The magnitude of the super cyclone of 17 October 1999 that affected South-Orissa was larger than the earlier ones experienced during the last two decades, and more human and other resources were needed for relief operations. Basing on the lessons learnt during the disaster management of 1995 cyclone, PREM initiated a united effort of a few NGOs that resulted in the formation of the 'Ganjam Cyclone Relief Voluntary Action Committee'. In response to the cyclone of 30 October 1999 similar efforts were repeated in Puri, Jagatsinghpur, Balasore and Bhadrak districts to mobilise a common platform of like-minded NGOs to confront the challenging task of rescuing people from the clutches of cyclone. PREM volunteered for information sharing, mobilisation of funds and accountability for such network groups.

PREM constructed 150 cyclone resistant houses in the coastal villages of Bandara, Dharmapur, and Venkatraipur in Ganjam district, and Kakatpur and Terabasa in Puri district of Orissa. Houses were provided for fisher folk who lost their shelters in the super cyclone. The estimated cost of constructing a house was Rs.40,000 and each beneficiary was supported with a grant of Rs.30,000 by PREM while the balance of Rs.10,000 was met from the contribution in form of capital and labour by the family concerned. In addition, cyclone shelter centres were also constructed in these coastal villages inhabited by the fisher people.

In response to the disaster that resulted out of the tsunami on 26 December 2004 in the states of Tamilnadu, Pondicherry, Andhra Pradesh and Kerala, ECDF took immediate steps for relief and rehabilitation. After initial damage assessment through field visits ECDF members organised local fund raising and volunteer mobilisation to help the victims. Community kitchens were set up in the areas not reached by government services, and food supply to affected families, medical assistance, distribution of clothes with special focus on women's need and transport for evacuating people to camps were organised. The rehabilitation work offered by the ECDF included provision of fishing equipment and small grants for income generation activities. It worked in eight locations in the tsunami affected villages in Andhra Pradesh, Tamilnadu, Pondicherry and Kerala, and provided assistance to 11,600 families.

## Rehabilitation of Visually Impaired

PREM's efforts in rehabilitation of the visually impaired have benefited a population over 6,00,000 covering 543 villages in four blocks of the Ganjam district in Orissa. The programme included activities such as organising (i) village level meetings, (ii) eye care training programmes, (iii) cataract surgeries, (iv) integrated education of children and (v) rehabilitation.

Village level meetings are organised for promoting vision care programme. These meetings are addressed by development activists on the subject of eye health and care. The main objective of this activity is to educate the people and facilitate them to access various services rendered by government and non-government sector for vision care. The platform is also used to eradicate superstitions regarding total visual disability.

Eye care training is imparted to (i) elected representatives of *panchayatraj* institutions including *sarapanch*, ward member, *samiti* members, *grampanchayat* secretaries, (ii) ICDS (Integrated Child Development Services) staff such as *anganwadi* workers, (iii) PHC staff including traditional birth attendants, (iv) members of SHGs, (v) members of CBOs and (vi) school teachers once a year.

Eye camps, managed by qualified doctors, are conducted for community eye screening after door-to-door survey. Wide publicity is given to such camps asking the villagers with defective vision to attend the eye camps. Those who need surgery are encouraged to get admitted in the Eye Institute of M. K. C. G. Medical College and City Hospital at Berhampur and the necessary arrangements are provided to the patients.

Assistance for integrated education of the visually challenged school going children is arranged in the project area. Facilities of private teachers for a group of visually challenged children are provided to help them in studies. Such children are also trained on daily living skills and mobility through intensive counselling.

Rehabilitation efforts for the visually challenged within the age group of 16-45 years, provided by PREM, include liaison work for the award of disability pension from the state government, counselling services to the family members, help for mobility and vocational training to undertake economic activities.

## Planning for the Future

PREM's development interventions can be categorised into three different sectors. In the first sector, it organises several development projects under its direct supervision. In the second sector, it implements issue based programmes and campaigns through its network partners. In the third sector, it plans to build up people's institutions with different developmental goals.

PREM proposes to build up three trusts: one for development of a resource centre on *adivasi*, another for development of education and the third for development of health of the marginalised *adivasi*, *dalit* and fisher folk, especially among the women and children. The rationale behind developing separate trusts rests on building up decentralised structures within the organisation, and creating autonomy and space for development of individual activists.

### *Adivasi Resource Centre*

The proposed resource centre for *adivasi* empowerment will be situated at the PREM headquarters in Orissa. The objectives of the centre will be focused on (i) striving for promotion of *adivasi* culture, values and indigenous knowledge, (ii) taking initiatives for documentation and preservation of the rich *adivasi* heritage and (iii) engineering strategies for capacity building of indigenous communities to enable them to accommodate themselves in the new world order of globalisation and liberalisation.

To achieve the above mentioned objectives the proposed resource centre will operate (i) a full fledged training unit on permanent basis, (ii) a library having a documentation unit, (iii) a museum and (iv) a herbal garden. *Adivasi* youth, who have completed some years of formal schooling, will assemble at the centre periodically for participating in workshops and short term courses designed for imparting skill training and enrichment of indigenous knowledge. Efforts will be also undertaken to organise consultations and seminars for documentation, preservation and promotion of *adivasi* culture, folk arts and value systems.

### *Health and Education Trusts*

PREM proposes to create two separate trusts on health and educational fronts. Through the health trust it plans to propagate its learning experiences during the past two decades in delivering healthcare for marginalised sections of the society living in most inaccessible regions of the state. Similarly through the educational trust it plans to propagate its learning experiences in management of continuing and vocational educational innovations. India is completing 60 years of independence in August 2007. Still many tribal and *dalit* villages have not seen rays of development. Government plans a lot of projects for the development of the marginalised people like tribals and *dalits*. On account of deficiency in the implementation process, the tribals and *dalits* are not getting the expected benefits from those projects. PREM's initiative is focussed on reaching these left out and marginalised sections of the people with development.