

## General information about your group : **GRAM SEVA PRAKALPA OF NANRITAM**

- **When and how did your group start? What are your goals and your vision?**

NANRITAM, a non profit earning welfare organization was started in the year **2001**, when a handful of like-minded professionals came together with a dream to serve humanity. Irrespective of caste, creed, religion or profession, they had one common inspiration behind them... that was Swami Lokeswaranandaji Maharaj of RamaKrishna Mission & his ideal of service to mankind. Our aim is to fight against illness, illiteracy & poverty. Our vision is to see the under privileged wake up and live a healthy, purposeful, and active life, a life they can command themselves...free of the shackles of poverty, ill health & illiteracy.

- **How has your organization grown since its founding, and what is its current size (in terms of number of people or villages reached, funding, number of people working for the organization, etc.)?**

Our organization was initially formed by a small group of 11, of whom 5 were doctors, 5 Educationists and 1 engineer. We started working with a small community of slum dwellers in North Kolkata, through a small health care unit.

In course of time, over 5 years 7 new members have joined in and we now have 18 active member. We are most privileged to have another 15 eminent personaliries as our patrons.

We have with us now:

Dr. Osman Ghani: member, Planning Commission, West Bengal

Prof.P.K. Giri: Renowned Statistician

Dr.K.P. Pappu : Director, CINI

Dr.D.C. Gorai : Ex-Bishop, Kolkata

Prof. Jojneswar Sengupta : Renowned Pathologist

Dr. P.K. Lala : Oncologist, Canada

Mr. Pritimoy Sengupta : Engineer, Germany

Dr.Nandita Chatterjee, Physician

Dr.B.Bakshi, Physician

Ms.Ranjana Sengupta ,Software programmer

Dr.Utpal Chatterjee, Physician

Dr. Shyamal Kanti Datta, Physician  
Mr. Ashok Mohan Chakraborty, Principal Secy, Higher Education, W.B.  
Dr. Prof Rajen Chakraborty, Educationist  
Dr. Amit Chatterjee, Physician  
Mrs. Milika Datta  
Mrs. Jayashree Basu, Educationist

We are now working both at urban and rural levels. We have a Health Unit with diagnostics and clinics in the Northern suburb of Kolkata, running for the last 5 years, which caters to a population of **30,000**. Medical services have been provided to >10,000 people and diagnostic facilities have been enjoyed by >8000 persons till date. Moreover, free cataract surgery is continually being performed by our team of Ophthalmologists, the total no. till date being **500**.

Community health care is continually being provided by our trained health workers in 6 slums in the vicinity, with a population of nearly **30,000**, whereby care of minor ailments, maternal & child health care basics, health education advice etc are regularly provided at their doorstep.

Our rural setup is at Purulia, a remote & backward district of West Bengal, where we have started a primary school, Self employment schemes with training programs, and regular health care programs through health camps, providing free medico-surgical service, low cost medicines, spectacles & pathological tests.

We now have the following man power:

- Specialist doctors (voluntary service) : .....7
- Pathologist (voluntary) : ..... 2
- Paramedical technical staff (employed) :.....2
- Health workers (employed) :..... 4
- Teachers (employed) :..... 3
- Vocational trainers (employed).....4
- Other ancillary staff (employed) :.....2
- Administrators (voluntary) : ..... 6
- Volunteers..... 15



### **Our staff & volunteer profile:**

Our intension is always to employ people from the locality. Thus all our recruited staff are locals.

For the vocational training programs, we had initially brought in professional trainers from outside, but later they have been replaced by the trained local persons, where ever possible.

### **The Proposed Project**

The Gram Seva Prakaalpa aims at a holistic improvement of the life status of the people of Para village, a remote area in the relatively backward district of Purulia. This village has very poor economic resources, with >70% of its population falling below the poverty line. The educational & health status of the people are extremely poor. Hardly 15-18% have a meager primary education. The dismal health status is evident from the wide prevalence of malnutrition & commonly preventable diseases.

We aim to bring about a change in the life quality if these people, without affecting their life style & culture. The objective is to bring about physical, social & moral upliftment by provision of basic needs of health, education, nutrition & social awareness. We also need to bring about improvement of their financial status by making them self supportive, through self employment and self help schemes, by utilizing local resources, thereby leaving their normal life pattern & culture unaffected.

To this aim, we have focused our attention on 3 basic areas:

1. **PRIMARY EDUCATION:** A primary school has been started with a present strength of 48 children. This academic year will see an influx of another 20-30 children. Our vision is to upgrade this to a Secondary School, manned by trained teachers, with modern teaching techniques. A bridge course is also being planned for the frequent dropouts, for their main-streaming

2. HEALTH CARE SERVICES: Comprehensive health care provision has been initiated, through local health workers, under the able guidance of trained physicians. This is re-enforced by regular health checkup camps attended by qualified specialists from various streams, and also provision of low cost medicines. Health education programs are also being planned.
3. SELF EMPLOYMENT PROGRAMMES: The following training programs have been already started:
  - Tailoring
  - Knitting
  - Carpentry
  - Embroidery
  - Batik printing
  - Fabric painting
  - Computer basics
  - Animal-husbandry
  - Incense-Making

Many more are on the anvil, about to be launched.

***The ultimate goal is to see the people of Para happy & self content, full of health, self respect and moral courage. Our motto is complete social and moral upliftment of people by bringing out the best in them, through their own endeavor and active participation.***

### **Implementation of the project**

At present we have 2 classes ( Lower & Upper KG) with a strength of 46 children. We propose to introduce 4 more classes from the 2007 session, for which enrollment is in process. **For this expansion we need to build new classrooms : extension of our infra structure is an immediate necessity.**

Subjects taught now : Arithmetic, Bengali, English, Rhymes, drawing, music & dance coupled with play & fun.

Our teachers are maintaining a strong vigil on the students and also paying home visits to motivate the parents of these **1<sup>st</sup> generation learners**

**Drop out rate over the last 2 years is 0!!**

### **regular activities in vogue with schedule:**

- The school runs **6** days a week from **8 A.M** to **12 NOON**.
- The vocational trainings are time bound courses of 3 to 6 months, mostly held in the afternoons, from 1-4 pm.
  
- The health camps are day long camps from 8am to 3 pm.
- Group meetings are held once a month with all the local volunteers and key persons.
- School administration meetings are also held monthly.

### **Our man-power:**

- For our school we now have 2 full-time and one part-time teacher. We need to employ 4 more teachers in the next academic session, preferably local persons.
- Our volunteers will periodically evaluate the progress and help in implementing newer techniques and training aids.
- Other NGOs are collaborating with us to help in providing vocational training

**Our beneficiaries:**

**For the school** the selection is on merit cum poverty basis. Our first batch of students came from the surrounding locality. 48 children of 4+ to 6+ age group were picked up from the vicinity. The next batch will be selected through an informal screening test, emphasizing on basic merit & socio-economic status.

In the 1<sup>st</sup> phase we intend to make provisions for admission upto 4<sup>th</sup> Grade, with 6 classes in all. Upgradation to Secondary level will come in the next phase.

**The vocational trainings** are imparted to batches of 15-20. They are chosen according to their interest & inclination to a particular skill.

We intend to build an infra structure with at least 4 workshops, for simultaneous training programs. At present we have only the carpentry shed ready,\. The other trainings are being conducted in temporary sheds.

Medical services are now being catered by visiting doctors & local health workers. It is felt that a permanent medical unit must be established to provide proper health care. For this a small unit need to be constructed and equipped. We plan to appoint a medical officer to take charge of the unit & he will be assisted by 3-4 paramedical & ancillary staff. Our senior, visiting doctors will continue to render their support.

- Details of support requested:

**OUR BUDGET:**

**I. ONE TIME EXPENSES**

○ Construction	
↔ Completion of present school building.....	Rs. 25,00,000.00
↔ New construction for vocational training school....	Rs. 8,00,000.00
↔ New Construction for Medical Unit.....	Rs. 6,00,000.00
○ Furniture .....	Rs. 50,000.00
○ Teaching material (blackboard, stationary, toys,books etc)	Rs. 15,000.00
○ Equipment for vocational training ( sewing & knitting	
machine, embroidery kits, colours, tool box, etc).....	Rs. 75,000.00
○ Computers.....	Rs. 60,000.00
○ Basic equipment for medical Unit.....	Rs. 2,00,000.00
<b>TOTAL.....</b>	<b>Rs.43,00,000.00</b>
	<b>i.e., \$ 96,000 approx</b>

**II. RECURRING EXPENSES ( Monthly)**

○ Salary at present.....	Rs. 30,000.00
○ Salary for proposed posts of doctors, nurse, teachers.....	Rs. 50,000.00
○ Establishment (Electricity, water, security, etc.).....	Rs. 6,000.00
○ Travel ( to nearest town & Kolkata, mobile medical camp)...	Rs. 12,000.00
○ Replenishables (medicine, spectacles, stationary etc.).....	Rs. 8,000.00
○ Overhead expenses.....	Rs. 5,000.00
<b>TOTAL.....</b>	<b>Rs. 111,000.00 pm</b>
	<b>i.e., \$ 2400.00 approx</b>

This being our estimated budget, any assistance from your end will be highly appreciated.

#### **4. Evaluation and Follow-up:**

**Do you have a plan to evaluate the effect of this project? Please provide details.**

We propose to follow up the project through annual survey and monitoring. The major parameters will be:

- Per capita income
- Health status through
  1. incidence of malnutrition
  2. immunization
  3. family size
  4. infant mortality
  5. incidence & prevalence of disease
  6. prevalence & incidence of cataract
  7. diet pattern
  
- Social awareness through
  1. sanitation
  2. age at marriage of girls
  3. male:female ratio
  4. family size
  5. no. of school going children

**How is this project going to be followed up once it is complete? For example, if it involves vocational training, are the trainees going to form a cooperative, market their products, etc.? If it is a primary school up to fifth grade, what are the children going to do after they pass that grade?**

**Our** self sustenance program involves vocational training followed by marketing, by the beneficiaries through cooperatives and micro credit schemes, so that they can continue to manage their own industry.

We plan to upgrade the present primary school to a secondary school, so that local children can become high school graduates from their village and we can expect the future teachers to come from among them.

We also have in mind a permanent health unit with employed doctors and paramedics, which will be supported by our visiting team of specialists.

**Thanks for answering all our questions. We are looking forward to receiving your proposal and visiting you.**