

Report on ABITA- UNICEF partnership 2018- 20

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We would like to record our thanks to UNICEF for their continued support and guidance in implementation of the ABITA-UNICEF joint initiative in our member gardens on Health, Nutrition, WASH, Child Protection and Child Rights programs. The Covid-19 pandemic has posed a serious challenge for us and I am sure all of us jointly would be able to overcome this challenge for smooth implementation of the project activities in all the areas that we are currently working.

In brief, we are presently implementing this project in 159 ABITA Tea Gardens covering all three ABITA Zones, out of which 114 Tea Estates in Zone 1, 12 in Zone 2 and 33 Estates in Zone 3.

This program has definitely helped in improving the health and nutritional status of the tea garden people and has promoted social harmony, socio economic development, adolescent empowerment, good practices on sanitation and hygiene Issues. After the implementation of this programme, changes in respect of behavioural practices, social norms and taboos, health, nutrition, education, child protection and rights have been noticed. It takes time and patience to bring about these changes amongst the tea garden population and I would say this is quite an achievement.

Health

If we talk about the health sector in tea gardens, promotion of institutional delivery, proper anti-natal check up and full coverage of routine immunization are the key components. The project has brought in the changes in terms of bringing about institutional delivery and reduction of unsafe home delivery in tea gardens. This in turn has reduced maternal mortality in tea gardens.

More importantly many gardens have set an example by reaching 100 per cent institutional delivery target. Regular Ante- Natal check-ups, well-structured awareness generation and the efforts of the adolescent and mothers' groups have been the key behind this achievement.

We have also noticed that in the gardens which are under this project, the routine immunization has improved. Awareness created for early registration for pregnant women and timely pre and anti-natal checkup that is being done has also been largely beneficial for the pregnant women in the gardens.

Nutrition

In regard to the nutrition component, the reduction of anemia amongst the adolescent girls group through proper intervention deserves to be complemented.

The coverage under nutrition and health education and cooking and eating habits and awareness creation of the nutritious locally available food, development of kitchen garden at the

household level has been a key factor towards improving the cooking and eating habits. It is being observed that salt consumption amongst the workers has reduced and garden people now even refuse to take extra salt in their meals and this has become a habit. Under the project, identification of Severe Acute Malnutrition (SAM) is being done and this exercise has been helping the families to take proper care of the children by improving food habits.

WASH

On account of the changes in the WASH behavioural practices, I would say that there has been no outbreak of disease particularly water borne disease in epidemic proportions in tea gardens. It is now being noticed that community people in tea gardens adopt good practices by way of using toilets, hand washing, use of boiled and filtered water on a regular basis. Open defecation is almost nil in our tea gardens now.

Line cleanliness, improvement of drainage system, disinfection of water sources is a regular practice in the labour lines in tea gardens now.

Promotion of menstrual hygiene management is one of the key progress area of this project amongst the adolescent girls as well as all females under reproductive age groups.

Child Protection and Child Rights

As you know, children have the right to survive, develop, be protected and participate in decisions that impact their lives. A study conducted by ABITA in 2006 indicated that 25% of the total respondents felt it was appropriate for girls to marry between the ages of 14 to 18 years.

Now the scenario has been changed. The adolescents and parents clearly know the appropriate age of marriage for girls as well for boys. The adolescents even their parents are now interested for higher education instead of early marriage.

All children below 14 years are enrolled in schools. The children are found to be keen to continue their studies beyond primary and high schools.

It is being observed that the adolescents are able to speak publicly and reduce of culture of silence about sensitive issues amongst girls which I have personally witnessed in one of the street plays by the adolescents in one of our gardens and I was impressed by their performance.

The Child Protection Committees which have been constituted are also playing a vital role in creating a safe environment in tea gardens and provide community support for safeguarding the rights of all children.

Social Protection schemes

Opening of bank accounts by each worker and women in tea gardens is a significant change which has come about for promotion of social security and economic empowerment amongst the tea garden population.

Covid-19 response

The Covid-19 pandemic situation has adversely affected the implementation of this project at one point of time since all ongoing activities had to be stopped since the 2nd week of March and during the lockdown period as a precautionary measure to avoid Covid-19. All tea gardens were fully closed for about 20 days as per government directives. The gardens started functioning after being allowed to do so by the government from mid April. Initially the gardens functioned with 50% workforce. To avoid Covid-19 outbreak in tea gardens which otherwise would have dangerous consequences, continued awareness generation was done amongst community people on hand washing with soap, social distancing, using of mask and other preventive measures in the garden which is still continuing. Fortunately except for a few cases of Covid-19 being reported which are specifically amongst migrant workers who have come from outside the state, no Covid cases have been reported from amongst the permanent resident population.

The garden managements at regular intervals have been sanitizing the labour lines within the garden to protect the community people. During the lockdown period, our project people opened whatsapp groups with the adolescents, Child Protection Committee members and with the parents to be in touch with them. The groups shared information on the preventive measures to be taken to avoid Covid-19 as well as mental support, nutritional and other hygiene related information have also been shared. In fact during the lockdown period our team members frequently communicated with the frontline service providers and block level functionaries to streamline the implementation of the government flagship programs especially Weekly Iron Folic Supplementation (WIFS) program which received a good response from the field. The adolescent girls produced masks for their family members and also for the people of the garden during the lockdown period. The project has been kept going during this crisis period in all the participating gardens.

It would be pertinent to mention here that during the last week of May, the adolescent girls group members observed the Menstrual Hygiene Week and promoted Reddot Challenge Campaign. The adolescent group members also observed the World Environment Day on 5th June and planted more than 2000 fruit samplings in their houses.

Management support

The Management support one of the most significant factors. The Managements as could be seen have been playing a vital role in the successful implementation of the project. The involvement of the management starting from the garden manager is very much required for successful implementation of this project. We have arranged workshops relating to the project implementation for garden managers and this continue and should be held at regular intervals.

Future plan

As you know, the present ABITA-UNICEF partnership is going to end by September this year. We are very much keen to continue our partnership beyond September and for this we need to plan our future course of action with some innovative activities for the next phase if it happens which I am sure it will.

Since we are working for the adolescent groups, perhaps we need to think about people between the age group of 16 to 21 years who are dropouts or not continuing higher education.

Some livelihood skills can be introduced like Carpentry, Electrician, Plumber etc for their training and to make them skilled workers.

Working for awareness on online protection scheme is one of the key areas since misuse of mobile, cyber-crime etc are the common issues in present time.

Though we are working for pregnant women, lactating mothers, a health study is required for the female workers to understand the health status. We have done for the adolescent girls as base line and end line study.

We have to work extensively on family planning to reduce maternal mortality, infant mortality and SAM children in tea gardens. Definitely this will help us.

Under nutrition component we are working for the children especially adolescent groups. We have to work for the age group of 6 to 10 years children and their mothers since this period is very crucial for cognitive development of children.

The Covid 19 pandemic situation give us a signal that we have to work more extensively on communicable and non communicable diseases to make aware the community people.

The Govt has launched the Jal Jeevan Mission (JJM) with an aim to ensure piped water supply to all rural households by 2024. We hope that the tea garden population will be benefited from this Mission and we have to work out on this.

We have to work on Solid Liquid Waste Management in tea gardens. Segregation of waste product in bio degradable and non bio degradable at the household level will ensure proper waste management in community level.
