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for the lost, the last AND the least

annual newsletter 2013-2014



couples training, SDTT

sochum kids





sustainable livelihood project







surgery camp, April '14 LSE for

adolescent boys

people's bridge

Mrs. Amina interacting with SHG members











From the secretary

As the year ends; the board and the staffs of ECS sincerely thank all the partners and well-wishers for the support rendered. We are delighted to inform that the year saw many note-able changes and one of them being the expansion of the project into new areas, both geographically and also thematically. Initially most of the programmes were limited to the district and by and large the beneficiaries were from within the block immediate to Tuensang town. Today the work has expanded not only within the district but also beyond.

Besides the many achievements, the recognition by the (IAS academy) LalBahadurShastri National Administrative Academy in Musoorie is a great mile-stone. Of the seventeen best practices from across the country, the work by ECS on 'comprehensive health' was nominated as one of the ten best selected for documentation as a curriculum in the academy. This will be a book which will be an integral part of the academy curriculum and is due to be published by the end of the year in 2014.

The past two years have been gravely marred by the sudden demise of Mr. Makum and Mr. Mongko. They both were active members of ECS and contributed much to the collective effort of the organisation. The death has bound the team closer and we hope the families of the deceased will be pleased by the work and mission which continues to grow and bring hope to many. The organisation has instituted the 'Mongko Memorial Fund' to help staffs of ECS in need and to support in case of sickness, accident and in death.

The National CSR Hub which is instituted by the Government of India and monitored by the Tata Institute of Social Sciences (Mumbai) has recently empanelled ECS to receive funds from business enterprise and from Corporates. The scrutiny process was intense and yet I am glad to inform that the Institute has acknowledged ECS' work and we hope this will enable ECS to undertake many more initiatives in the state.

The year ahead appear challenging and yet we are assured of the fact that with the support by the community and the Funders such as the NABARD, the Tata Trust, NEIDA, Action Aid, NRHM,SBI, NSCB, Caring Friends and all allied agencies, the journey would be covered in safe time.



Sincerely; Rev. Dr. ChingmakKejong Secretary, ECS

Secy. message

The Microfinance Mile-stone (NABARD)

The Women SHG programme is funded by NABARD and supported by the Ministry of Finance. Under this we have formed 300 groups covering all blocks of Tuensang. This year we plan to expand to another 450 groups. The lending rate by the SBI will be at 7% and if return is timely than the bank has assured waiving 3% against the total. The credit linkage is taking time but we hope to speed up the process by September 2014. The current total loan by ECS SHGs has exceeded Rs 3 crores and there has been 100% recovery by the SHGs and the JLGs. The track record of all the groups are encouraging and this we hope will encourage the banking institutions to render greater support to the members. Beginning with small savings and loan circulation among themselves, the WSHG are now able to loan higher amount to group members to enter small time business and take care of their personal economic needs.



The Story of Besung

Mrs. Besung, a young mother of 2 children is a member of the SHG in Hakchang village. Though a very promising and brilliant student, she had to give up her studies owing to poverty. Marriage then seemed to be the only easy way out for her to escape the poor economic condition at home. Since they married young, she and her husband Beso Chang had to depend on her in-laws for their basic needs. This arrangement seemed very convenient in the initial years, but their children were adversely affected as they had to attend poorly managed government schools.

When SHGs was initiated by ECS in the Village on 16th May 1997, Mrs. Besung was among the first of the members to join the group. Mrs. Besung's group became the first SHG group to buy a community bus in the area. Along with the different livelihood projects implemented by the project, intercropping of ginger with other crops was also introduced. Through the production and selling of ginger, Mrs. Besung's family earned Rs. 80,000 in 2012 and Rs. 50,000 in 2013. They invested this proceeds into the buying of a paddy field worth Rupees1,60,000/-, which yielded 5 metric tons of paddy during the last harvest. Today, Mrs. Besung's family not only has enough resources to live comfortably but many of the villagers borrow about 10-15 tins of rice during lean season and return the same without interest after harvest. The family who had been dependent on the income from SHG in the past is today the recipient of the award for highest paddy harvest in the village. Her children who had earlier dropped out of government schools because of economic reasons are now pursuing their education in private schools. It is indeed remarkable that this young family who had been struggling with poverty is now contributing back to the community.

The First "Edou" (Co-operative Farmers saving) was launched in Hakchang village, Tuensang village and Tuensang town on 6th October 2003. This has now extended to Noklak Block and Sipongsang village respectively, 10 groups under Noklak Block with a total saving of Rs. 1,34,000/- was launched on 21 March 2014 initiated with prayer from the local church and Khiamnungan Baptist Churches Association (KBCA). The "Edou" (co-operative farmers saving Under Sipongsang village, 7 groups joined the "Edou" with a total saving of Rs. 2, 05,000/- which was launched on 20 March 2014. At present there are 19 Edou Federations involving 324 groups registered under the federation. The given chart shows the cash flow as the result of small group savings and income generated under SHG different federations.

Joint Liability Group

The first JLG Loan was quite successful with 175 beneficiaries accessing loan from NSCB, Tsg Branch under different farming sector. The loan account was closed with 100% recovery in the month of October 2013 amounting to Rs. 36,35,000/-. The project is again proposing the NSCB Tuensang Branch for another loan for the successful beneficiaries. *Mrs. Nasen recounts how she was supported through the JLG loan. Being a member of JLG No. 9, she took a loan amount of Rs. 20,000/- for 2 unit piggery farming. Her husband, Mr. Eboulomchu was very supportive in this venture; in fact he monitored the whole process. Firstly they bought 5 pigs about 5-6 months old (3 boars and 2 sows). The first breeding produced 18 piglets which was sold along with the Boars whereby he earned 72,000/-. The second breeding gave 16 piglets from which two piglets were retained and 25,000/- was earned by selling the remaining ones; another 50,000/- was added through the selling of the two sows. With these earnings, he constructed a new building. Nasen's husband is one among many men who comes himself for loan recovery every month instead of her. During these 2 years of loan period, he was also able to do extension from Bamboo sty to pucca concrete Pig Sty. Nasen and Eboulomchu are very satisfied with the JLG project and thankful to the supporters. Eboulomchu says with pride that, "I have 5 children who are still studying. Though I am a government employee under the PWD Department with a fixed pay of Rs.3000 per month, I have to wait five to six months for salary, but still then I am able to manage my family. He adds that if we maintain the habit of honesty and sincerity, we can achieve everything".*





Micro Finance Mile-stone (NABARD)











Exposure visit from Prodigal's home, Dimapur

| SHGs Savings in Edou from 6 Oct 2003 to 31 March 2014 | | | | |
|-------------------------------------------------------|----------------------------|-----------------|---------------|-------------|
| Sl.no | Name of the Edou | Edou Investment | Edou Dividend | Total |
| 1 | Tuensang Town Edou | 42,44,035 | 26,97,580 | 69,41,615 |
| 2 | Tuensang Village Edou | 21,40,250 | 15,47,130 | 36,87,380 |
| 3 | Hakchang Edou | 14,15,000 | 1,17,780 | 15,32,780 |
| 4 | Chendang Edou | 5,77,400 | 3,14,050 | 8,91,450 |
| 5 | Changsang Edou | 6,44,200 | 2,84,698 | 9,28,890 |
| 6 | Chingmelen & NgangpongEdou | 13,12,330 | 5,09,239 | 18,21,569 |
| 7 | Chingmei Range Edou | 12,99,415 | 4,70,614 | 17,70,029 |
| 8 | Sangshen Range Edou | 8,30,985 | 3,66,198 | 11,97,183 |
| 9 | Noksen Range Edou | 8,37,740 | 3,97,084 | 12,34,824 |
| 10 | Sekei Edou | 5,88,600 | 2,14,571 | 8,03,171 |
| 11 | BYN Edou | 6,30,730 | 2,26,071 | 8,56,801 |
| 12 | Khudei & Haak Edou | 11,64,370 | 4,63,775 | 16,28,145 |
| 13 | Hauhpung Edou | 4,78,195 | 1,34,175 | 6,12,370 |
| 14 | Longkhim & Angangba Edou | 2,08,500 | 53,910 | 2,62,410 |
| 15 | NAP & Tuensang Town Edou | 6,64,600 | 1,79,189 | 8,43,789 |
| 16 | Longsa Edou | 3,63,800 | 36,420 | 4,00,220 |
| 17 | Lotisami Edou | 6,51,725 | 2,70,220 | 9,21,945 |
| 18 | Sipongsang Edou | 2,05,000 | Nil | 2,05,000 |
| 19 | Noklak Edou | 1,34,000 | Nil | 1,34,000 |
| | TOTAL | 1,83,90,875 | 82,82,704 | 2,66,73,579 |

SHCs Savings in Edgy from 6 Oct 2003 to 31 March 2014

Sochum: A Traditional Concept Re-defined Through formal Education

In an attempt to reinstitute the traditional system of of Ngangpong were motivated to start their own sochum without any community educational support eleven villages revived governmental or non- governmental support. Thus in Jan 2014, the the traditional 'morung' or sochum in Chang, to define community renovated the small unused house which is the Government education as a 'centre for learning skills for progressive living'. Middle School of the village. Today there are 34 students in the sochum looked after by a warden who is paid a salary of Rs.5000/ fully by the This learning method is Activity Based Learning (ABL) and community. While there is an improvement in their performance at values which are fast eroding are being revived through the school, the cultural practices have been revived through the cultural active participation of the entire student community. Most activities in the sochum. 'sochums' have their own farm reiterating the concept of self-In May 2014, the Ngangpong Sochum conducted a social analysis using the method of sochum inquiry model (SIM). They collaborated with the reliance and make children responsible as intra-generational elder students who conducted a survey and came out with the findings guardians of the soil and the forest, protect the ecosystem that, out of 75 youths in the village, 33 are in school, 31 were drop outs by engaging in conservation practice at a very early stage and 11 of them never attended school. They submitted this report to the Through formal education, health is being taught more from students' union, the church and the village council urging them to take necessary steps to ensure 100% enroll ment in the future. In this way, a preventive aspect. Children in the Sochum practice SIM Ngangpong sochum is going "Way Ahead" of many other sochums even (Sochum inquiry model) a modified form of Social Studies though they started only this year. The Sochum Council Chairperson is Inquiry Model and children are encouraged to present their Miss Ason, and even at this tender age of 13 she is beginning to take the report for example how digging 3x3 feet deep was required for role of a leader. This in a sense is changing the perception of her peers at a very young age, who otherwise see only men taking the role of a leader. oranges to grow to its full potential.



Child Initiated Enguiry: Nangpong Village Sochum

Ngangpong village is 3 Kms away from Tuensang Town with a total population of 650 members and 100 Households. When the success of ECS on Sochum spread across the Changsang range the villagers







An Interview with Alem, Sochum Lombou (Warden-Lokong)

ECS -Hi Alem, Tell us something about 'Sochum' in lokong

Alem - Sochum is a dorm where the school children come in the evening hour. Children of classes 1-5 are in the sochum. They sleep there and study, do their homework, also engage in activities like singing and other cultural activities.

ECS - What changes have you seen in the children after they have come to sochum?

Alem - Before coming to sochum many of the children were dirty and unhygienic. They were shy and did not communicate openly. The first thing they learn in sochum is cleanliness. When they came to sochum eventually they learnt to be clean and tidy. Various programs and activities compel them to be expressive and one can notice their improvement slowly.

ECS - How does being in sochum help them in their studies? Alem - Every evening we maintain study hour. I help them do their homework. I try my best to give them remedial teaching because not all student fare well in their studies in school.

ECS - What is the response of the community?

Alem - When I first joined I didn't know how the community would be involved. But later on I saw that the involvement of the community was enormous. It is because of the community contribution that sochum is in existence till today. Building and other necessary infrastructures are provided by the community. During exams the parents especially the mothers would come and provide tea and firewood as well.

ECS - You were saying activities besides their studies. What are those 'activities' in the sochum?

Alem - They are taught art and craft. We engaged a man from a village who comes once a month and teach basket making and other cane and bamboo products. A woman is also engaged who would come once a month to teach them weaving and knitting. Every month we elect council chairman from within the sochum's inmates interchangeably. He/she is assisted by the council members. They maintain discipline and orderliness in the Sochum. We have other committees like flower committee, health committee etc. But since the number of students in Lokong village is less we don't have many committees. A Sunday service each month is taken up by the inmates of Sochum. We take this opportunity as a platform to tell our parents and the community what has happened in the sochum that particular month. Petty issues of the village and its remedies are suggested by the sochumers that Sunday in the congregation. These issues are findings concluded technically called "SIM" or Sochum Inquiry Model.

ECS - Who pays you the Salary?

Alem - The community pays me. I take this as an opportunity to infuse knowledge and mould the lives of the younger generation. In the villages, children don't have many amenities like the town children have yet when I see their performance I am encouraged that someday they will grow up to be effective and useful citizens of our village and country in general.

ECS - Alem thank you so much for your time. All the best! Alem – Thank you so much ECS.

Community Action for Health

NPCC in the RoP 2010-11 under 'Weaving a Dream: a Linkages With Other Agencies/Institutions People's Initiative for Health care', approved the initiative. Linked to CIHSR (Referral Hospital), Dimapur to Thereafter an MoU between DoHFW and Eleutheros Christian provide quality health care services to the poorest patient, Society (ECS) for the management of the Longpang Health referral of acute and complicated cases for specialized care and Centre followed. The main objective of the collaboration was treatment at subsidized cost, assist training of PHC staffs to to promote and provide universally acceptable, accessible, enhance health related knowledge and skills and procure drugs/ equitable and quality health care services for the population of medicine at low cost. Changsang range and Tuensang district in general by providing Linked with ASHA and Anganwadi workers for basic all "Assured Services" as envisaged in the India Public Health health care and referral to PHC's and district hospital. ASHA Standards (IPHS) for PHC. During 2010, an MOU was signed can assist to identify pregnant women to the health centre and the hospital is now the first public private partnership and Linked to Department of Health & Family Welfare primary health centre (PPP/PHC) in the state of Nagaland and Tuensang for information and services. all manpower support is provided under NRHM. The PHC Linked with RSBY for Health Insurance for people has now more community based schemes and is also aiding the living below the poverty line families. governmental programmes to run more efficiently.

Services Provided by PPP/PHC Longpang

- Canteen facility
- Immunization service for mother and child

50% discounted rate for in-patient and 20% discount for out-patient

24 x 7 medical service .

"Onou" scheme for institutional delivery and ASHA worker for linkages

Referral services to District hospital and CIHSR Dimapur

Honorarium for ASHA worker for period of 6 ٠ months.



Community action for Health

One initiative which has acquired a lot of good-will from the entire district is the surgery camps that are conducted twice each year at the health centre. We have so far screened 6000 patients for surgery and have till now conducted 560 on site surgeries with no post surgery complications till date. During April'13 – April'14 three surgical health camps were conducted. The 3rd Surgical Camp was held from 23rd -27th April 2013 led by Dr. George Varghese Super specialist from Manali, 4 Surgeons and OT staffs from CISHR, Dimapur. During this camp, a total of 700 OPDs were registered, out of which 43 underwent surgeries. Another surgical camp was conducted from 6th – 12th November 13 in collaboration with the Chang Baptist Churches Association, the Phom association and the Khiamniungan Baptist Churches Association along with 4 Churches namely City Church Kohima, Tuensang Town Baptist Church, Khiamniungan Baptist Church Tuensang and Phom church Tuensang at Noklak Community Health Centre. It was a joint initiative of these churches to help the people living in Naga Burma Areas under the banner "LOVE BURMA PROJECT". The MO, CHC, Noklak and the Staffs assisted in the camp where 745 patients were treated and 72 patients underwent operations.



The Longpang PHC undertook yet another surgery camp conducted over a span of almost three weeks in the month of April 2014. This camp was different from the previous ones in the sense this was a solo undertaking by the ECS. This camp would have not been possible but for Dr. Laji Varghese, the specialist surgeon who had committed his time despite his busy schedule to come to the health centre at Longpang and carry out the surgeries. This camp was conducted with the assistance of doctor, nurses, staff of Longpang PHC and other thematic staffs of ECS. The surgery camp held this time saw various cases ranging from minor toe nail removal (not minor for the patient who find it immensely painful) to massive ovaries and thyroids. Around 500 OPD cases and 104 surgeries were performed during this camp. Forty four major surgeries were performed in a span of three weeks with just the most basic equipments, limited resources and staff capacity. According to the surgeon some surgeries could have cost around rupees 60000 to 70000 thousand if they were undertaken in private hospitals but at the camp the operation cost was rupees 2000 for the whole surgery. These camps not only saved lives but also saved money for the patients. Our initiative is one where concerned individual doctors from as far as Mumbai, Manali and Kolkata have volunteered to give their time, effort and medical expertise during these surgery camps. Most of them come on their own expense and have committed to do so twice every year.







Secretary with he health worker trainees from "Love Burma Project'



Health Through Outreach Services: (Sir Dorabjee Tata Trust)

Ever since the concept to converge services to acquire health care was conceived, the community was very clear that health care has to happen in the village setting and not in the serene location of a far-flung hospital. The entire energy was therefore to be able to evolve a strong outreach component and to one day make the rural hospital a fully functional unit providing adequate health care facility to villagers within the vicinity. The SDTT in 2010 came to support and aid the process and the organization has been making a conscientious effort to fulfill its objective of providing comprehensive health care services to the rural population at their door step. This second year was eventful as many people opened up to the new concept of being responsible for their own wellbeing and positive feedbacks and suggestions came back from the project village. The activities during the past one year focused on systematic thematic campaigns for ten months, Couples' training, SHG trainings and LSE for adolescent boys. Exposure program for the Village Health Committee (VHC) of program villages was also organized in two clusters to 2 of the program villages, viz Konya and Chendang on the 27th and 29th May 14 respectively. A noteworthy thing that was observed in both the host villages is that they did not wait for government allotted funds but the village council and the VHC took it upon themselves to make basic medical amenities available at the sub-center.



Mothers' Club Hakchang: A Case Study of 100% institutional delivery.

Hakchang village is located 26 kms away from the district headquarters and the nearest health centre is the ECS and community managed PHC which is 3 kms away from the village. The introduction of mothers' club after the intervention of the project has truly served to promote the health seeking behaviour of the mothers especially during pregnancy and deliveries. There are 5 mothers' clubs in Hakchang with a total of 75 members. These clubs under the initiative of the health worker meets once on the 14th of every month and discuss health related issues within the group. In addition, the health worker helps them to ascertain the EDD with the help of menstrual calendars distributed to every member of the mothers' club.

While appreciating the remarkable response and positive impact of ascertain the EDD with the help of menstrual calendars distributed to the health program in Hakchang village, it is also pertinent to pause every member of the mothers' club. and look at the person behind the scene; which in this case is the village Along with health discussions, the members of the mothers' club health worker. Ms. Anok, representing the SDTT project under ECS encourage each other to go for institutional deliveries. During the second begin her journey as the health worker in the month of August'13. In just project year, out of the total of 26 mothers registered at different health ten months as health worker, she was able to change the health scenario as units (ECS PHC-23, sub-center - 3), 21 of the mothers had institutional can be seen through the case study discussed here about Hakchang. For the deliveries. Thus compared to the baseline record of 0% hospital delivery, success of any program, the attitude and dedication of the people involved 95% had institutional deliveries within the past one year. When the matters a lot. She realized that the project is very crucial not only for the project was implemented, the Outreach workers and the health workers present but also for the future. This realization encouraged her to invest had to continually motivate the pregnant mothers for ANC checkups and more time and energy in her responsibilities as a health volunteer not only deliveries. But now many of the women go to the health centers on their towards the prospective mothers but also for the well being of all the sick own without the need of anyone telling them. Today discussions within people irrespective of age and gender. This attitude has indeed borne fruit the mothers' club are not only about reproductive child health but the and today Hakchang village has become the only village in the area to importance of cleanliness and many other diseases are being imparted show a record of 100% institutional delivery. here.



About the health worker:



couples training, SDTT

sochum kids





sustainable livelihood proiect







Mrs. Amina interacting with SHG members

rgery camp,

pril '14

Visit of GM, NABARD

people's bridge

LSE for

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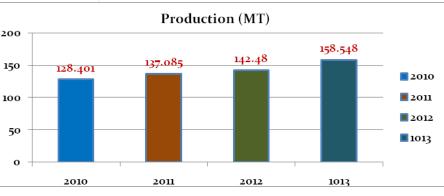




As per the post impact survey, January 2014, out of the total 167 household/farmers who were practicing Jhum before technology intervention has decreased to 47 household/farmers during the last three years. Within a period of three years, the total percentage engaged in Jhum cultivation among the household/farmers has decreased by 71.85% (till 2013). Another important benefit which every farmer expresses is the amount of seed saved during nursery raising. Under conventional TRC practices a farmer at an average uses 30kgs of seeds. As per the survey the quantity of seed use has reduced to an average of 1-5kgs per farmer, saving to a quantity of 3000-4000kgs of seeds in their village annually.

Longra village has become a model SRI village for other villages in the district as well. Replication of this programme is on in project villages with assured terrace fields which can serve as a step for other many potential areas. These successful intervention has not only increased food security to maintain healthy and active life for the farmers but also pushed agriculture a step forward and closer to acheiving the vision of technology driven agriculture and self sufficiency for the rural community.







Case Study: Windows to Technology

Chongshi is the Local service provider (LSP) in Longra village under the NRTT sponsored livelihood programme since 2011. When front line demonstration for the System of Rice Intensification (SRI) method was first initiated in Longra village, farmers were reluctant to take the risk as it entailed changing the traditional system which has been meticulously followed for years. However, Chongshi took the risk and donated his entire agricultural plot for the demonstration of the technology. The production that year showed an increase of 20% as compared to the previous year's harvest. Consequently, many farmers started adopting the SRI technology and today 100% of the farmers are practicing this method.

Along with the technological improvement in wet cultivation, the introduction of new machinery to improve jaggery production has also enhanced the income of the families. During the 70's only a handful of people were involved in this but today 100% of the population are actively engaged in this activity. With intensive training provided by the ECS and KVK for making sugarcane cultivation productive, the villagers are investing

more land for this. The total income from jaggery was 13 lakhs in 2013, while the estimated income in 2014 is 14 lakhs; while individual family in the village earns a minimum of Rs. 10000 up to Rs. 60000 every year. Since 2011, intercropping in the orchards has enabled the farmers to earn cash from bananas and other vegetables. As 20% of the trees will be harvested this year, the income from oranges is expected to increase the overall income of the villagers. While appreciating the intervention of ECS and NRTT, Chongshi says that Longra being a far flung village, there were no government initiated programmes in the village. But over the years many governmental projects are being implemented in the village. He goes on to say that, 'Earlier when any project come to our village, we were more concerned about the project cost but now we asked about the policies; whether it is farmer friendly or not'.



Water and Sanitation Project: (Navajbhai Ratan Tata Trust)

When the epidemic occurred in the Changsang Range, it was obvious to all that water and unclean habitat was the primary cause of the epidemic. This resulted in a meeting where the villagers unanimously passed a resolution to house all stray pigs in the village and to build temporary make-shift latrines in all houses. They realized that open defecation was the root cause of all diseases and the stray animal littering at the water source was the secondary cause. However, the makeshift latrines did not merit much credit since monsoons are usually for a long period and as a result the mud walls often cave in and cause graver health concerns. The community therefore initiated a dialogue with the NRTT to raise 40% from the Tata Trust and the individual households would then contribute 60% of the cost to be raised.

Water is the essence of life and sanitation a necessity for wellbeing of human race. Therefore, the project had envisaged that the best possible way of make the community "open defecation free and provide water for all" a reality for all. Eight villages have been selected in Noksen Block under Tuensang District of Nagaland for the Water and Sanitation program. The villages have been divided into two clusters namely Noksen, Yangpi, Litem and Longra villages in cluster -1 and Sangdak, Yonyu, Yokumsang and Kumpung villages in



Water & Sanitation project

Cluster -2. The water and sanitation program (WATSAN) has been initiated with the support from NRTT. The project is assessed on the basis of detail technical report-1; (DTR -1) means toilets are completed and DTR-2 if it is in the process of completion. In the first phase of DTR-1, a total of 873 household in Longra, Noksen, Yangpi, Litem and Sangdak along with 16 institutional toilets will be covered in the above mentioned villages. The remaining three villages with a total of 204 toilets will be covered in the second phase of the project. In DTR-2, 706 households will construct a Roof Rain Water Harvesting (RRWH) tank of 7000 litres in Noksen, Yangpi, Longra and Litem villages. Sangdak village with 178 household will be covered through pipeline connection. The remaining three villages' namely Yonyu, Yokumsang and kumpung villages will be connected through pipeline in the second phase of the project.

The project has completed its pre-feasibility study and the planning phase and is currently in the implementation phase. An ongoing awareness programmes are conducted on various issues of health, hygiene and sanitation. In addition there is an ongoing monthly collection of discharge measurement and rainfall data and this is analyzed on monthly basis. This new method enables the team to understand the whole process of water availability and facilitates the process in planning for the RRWH System. A community contribution of 60% for sanitation unit per house hold had been raised in terms of locally available materials such as timber for structure, stone chips and boulders etc. An honorarium of 40% from the TATA TRUST will bear the cost of sand, cement and steel etc. Further, RRWH trust will contribute 90% of the total cost and the remaining 10% will be borne by the village councils of the project villages.

SHGs Mothers Contribute WATER PUMP AT KHUDIE VILLAGE

Khudei village is located 10 kilometres away from the main Town of Tuensang with 140 households. Since the village is located at a higher altitude from that of the perennial water source, it hardly reaches their reservoir tank. Only 30% of the house hold gets water from government water supply and that too only on alternate days. The SHGs from this particular village decided to approach ECS office to help them look for ways in which they could get sufficient water and for which they were willing to bear the expenses from their savings. After a detailed discussion and consultation. ECS decided to give them a revolving assistance of Rs.30000/- which they have to revolve for 4 months and return the capital amount. It was finalized that the profit earned will be utilized for purchasing a water pump. Within 4 months the groups earned Rs.38240/-. Water pump was purchased by Rs 21140/- and a plastic sheet at the cost of rupees 15000/-. Other miscellaneous expenses were contributed by the village council and ECS. A pit measuring 15X15X8 was dug by the community to store water. The pump was installed in the water storage pit and the main pipeline was connected to the tank. The water is pumped up to the main reservoir tank after which it is distributed to each sector on alternate days. Each sector is given 4-5 stand post with pipes according to the number of the households present in the sector.

A People's Bridge (Innovation Fund/Caring Friends-Mumbai)

People visiting the health centre often comment on the grave condition of the road in which one has to travel and the distance from their villages. The terrains are harsh and often because of these adverse road conditions ailing people don't go to hospital because they are convinced beyond a reasonable doubt that it is not worth going to a town for treatment or availing medical support. Though the hospital is within the vicinity, there is no connecting road to the health facility. During the usual annual meet of the village partners in 2012, one dominant issue raised was the inaccessibility of the hospital from villages located beyond the river Yijung. The villages through ECS put-up several appeals to the Government and all visiting dignitaries were appraised the situation but none was forthcoming.

Despite repeated assurances, the community resolved to raise its own resources since government is known to take its time with procedural clearance. In the one of the discussions, one Village Council member from Hakchang Village said, "the government will join us as they did with the hospital only when we initiate the process and only when they find it attractive enough will they join us". This was out of personal experience by all villagers who had taken the initial step because only after having set up the hospital did the NRHM join the health initiative. The concept to build a community link road of 6 kms and a 45 feet span bridge was unanimously accepted. The village councils of the seven villages on both the sides of the river resolved to donate stones, boulders, timber and logs for the bridge construction. The councils also resolved to dedicate 10 days each from





MNREGA fund towards the road construction.

The earth cutting work began in earnest on 27 April 2014. The SHG mothers from Hakchang village came in groups, carrying their own day meal and sat along the banks of the river to chip stones as part of their contribution. The men-folks from Momching village carried six huge logs, each log spanning 50 feet to put across the entire span of the proposed bridge. 170 Young men from Sangsangyo town came to break boulders to lay stones at critical portions of the link-road. The voluntarism of the community motivated the Deputy Commissioner of the district to contribute from the State Innovation Fund. Mr Nimesh from Mumbai representing the 'Caring Friends' came all the way to the bridge site and donated towards construction of the bridge. Engineer L. Choba volunteered to design the bridge and also supervise the construction. Various unanticipated individuals, members of the Naga Blog, the Tuensang Voice and neighboring village councils also extended their support. Zynorique Initiative headed by Richard Belho along with friends came to the bridge site to set-up a watch tower made of pre-fabricated bamboo.

The combined effort and concern of the community culminated in the successful completion of the bridge. The 'Peoples Bridge' over River Yijung, was officially inaugurated by Nagaland Chief Secretary, Smt. Banou Z. Jamir on 11th July2014. Describing the bridge project as 'unique' which surpassed all others, she said similar initiatives should be carried out. With the bridge, there is even talk of patients coming from other districts like Longleng across the river which is hoped to bring many others to take up similar community-led development initiatives. What began as a small initiative of 7 villages will eventually benefit more than10 villages across the river Yijung.



Events

1.Dr. Dinesh, Program Officer Health, SDTT visited ECS for review of the project on 24th April 2013. He visited Tuensang Village SHGs and interacted with the participants regarding the availability of health services in the village and encouraged the SHG members to motivate and support the prospective mothers within and outside the group. He also visited the PHC for discussion with the project staffs, Health workers and members of mothers' club and girls' club of neighboring villages.

4.Dr. Ashwani Kumar, the then Governor of Nagaland prospective mothers within and outside the group. He also visited ECS on 31st January 2014 and a special program in visited the PHC for discussion with the project staffs, Health his honour was held at House of Hope, Longpang. He was workers and members of mothers' club and girls' club of accompanied by the Deputy Commissioner, Tuensang and neighboring villages. Officials from different departments. A traditional parade lead by the Hakchang villagers welcomed the then hon'ble governor 2.Shri. Chelladurai General Manager, NABARD visited of Nagaland. The program was attended by all the village ECS on 24th October 2013 to review the overall activity of councils, GBs, SHGs, Mothers' club, girls' club and village projects funded by NABARD. He visited TDF-1 Onglak leaders of neighboring villages. Dr. Kumar has heard about project site in Longpang, interacted with the field staffs and ECS and had come to see how civil societies are participating farmers and also distributed Bio-vita to the farmers. He also had in rural areas. In his address the Hon'ble Governor said, discussions with the SHG Executives and Finance members "When I came to Nagaland, there were many questions, these along with the Bank Officials from SBI, Tuensang Branch and are answered here in Longpang." Branch Manager NSCB, Tuensang.

3.Mrs. Amina, Education Program Officer, SDTT visited ECS on 27th November 2013. She visited the Sochum (Traditional Dorms) in Hakchang and Kejok Villages to review the activities that have been undertaken through community contribution. Mrs. Amina engaged in a detailed discussion and interaction with the students, teachers and parents in both the

villages. She appreciated the confidence level of the children and their skill motivation through different trainings in the sochum. She further encouraged the community and teachers to look ahead and be more focused in the quality of education imparted so as to meet future challenges more resourcefully.





9. Livelihood
10. WATSAN Team
11. Microfinance Team
12. Health Team

6.Shri. Tijender from UNICEF, India visited the organization for 2 days from 14th – 15th April 2014. He interacted with the village elders, pastors, Life Skill Education participants of Tuensang Town Baptist Church and members of the mothers' club and girls' clubs of villages in and around the vicinity of Longpang PHC. He also visited Hakchang and Maksha villages, met with the members of the mothers' and girls' club and discussed various issues of health related to prospective mothers, adolescent girls and also post natal care. He also visited Chendang village on 15th April 2014. The main purpose of his Visit was to understand the health scenario and see possible partnership with ECS so as enhance Health services in the rural areas.

7.The NBCCWD retreat on the theme, *Women and Justice* was held at Longpang PHC from 21st- 24th April 2014. All the participants except for Sangtam attended the retreat. The arrangement for this was initiated Rev. Narola Secretary, Women department. The Changsang Range Pastors' Union looked into the overall arrangement of food and lodging. The main speakers were Shri. Jay Chandran(J.C) and Dr. Varghese. The Bible study sessions were led by the participants. Dr. Varghese spoke on "My Journey to Understand Christ"; all the sessions by J.C, was followed by discussions. The one hour session by Dr Laji stretched to almost two hours. All the participants were moved by emotions on hearing his life testimony and they all committed to re-look into their ministry perspective.

8.On 14th June 2014, Dr Fedrico and his wife visited Nagaland and 'House of Hope' to understand the indigenous way of life of the Nagas. He is professor at the university of Sienna and Rapporteur to the UN on indigenous people's Affairs. He also co-authored on a book with Mrs Phutoli, the Managing Director ECS. This book was published by Oxford University Press in 2012.

