



CMI SOCIAL APOSTOLATE NEWS LETTER



DECEMBER 2020-MAY 2021

EDITORIAL



CEVA in solidarity with sixth sustainable development goal (SDG- 6), in which implies vaccines, clean water, sanitation and hygiene has been adopted as theme for programmatic interventions. We are aware that unclean and contaminated water consumption for drinking and cooking is one of the main causes of diarrhea and other water borne diseases. Relevance of the theme has been intensified during corona virus pandemic wave two. Country is struggling hard for complete vaccination against the virus, universal access to clean water and sanitation, personal hygiene and health facilities including life saving medicines and equipment.

As many drops of water make an ocean, we can also contribute to fulfill the goal by initiating innovative projects. Some of our provinces and regions have already initiated activities in this direction. It's a matter of great appreciation and praise worthy!

SDG 6 cannot be achieved without concerted effort and action by civil societies, community-based organizations, non-government organizations and corporates. It is significant to include as policy for programmatic interventions to achieve environmental sustainability on water and sanitation.

As a team let's build long-term water and sanitation solutions with road map of insights to measure and track progress and accelerate action towards meeting the goal. This edition of news letter is a step forward in this milieu.

Wishing you every success for improved coordination and service delivery!

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EDITORIAL



PRIOR GENERAL Message

I am happy to know that CMI General Department of social apostolate has chosen 'clean water and sanitation' as theme for the year and the focus of all the programmatic interventions throughout the year is going to be the same. COVID 19 pandemic has all the more stressed the relevance of personal hygiene, clean water and sanitation for survival. It's a joy that CMI fraternity has already spearheaded diversified activities in order to improve accessibility to clean water and sanitation facilities for the poor people. Even though we have entered the third decade of 21st century, millions of people all over the world are deprived of clean water and sanitation facilities. It remains as a challenge we must overcome together.

The challenges are significant and manifold but it is not impossible for us to overcome in our work place, and at communities for whom we are serving. As countries

around the world have agreed to ensure clean water and sanitation for all as Sustainable Development Goal 6, our Congregation too has the collective responsibility to contribute towards the realization of this goal. As a society, let's rise and pledge to take proactive action beginning in and around our own houses, institutions, and campuses keeping inclusive and sustainable development of marginalized communities in mind. May our actions today transform the future of needy communities by providing access to clean water, sanitation, hygiene and health services.

Let's demonstrate the right blend of policy and programmatic interventions to make a difference wherever we are planted.

May Lord our God bless all our members with His divine grace and compassion.

Fr. Dr. Thomas Chathamparampil CMI
Prior General



GENERAL COUNCILLOR Message

I am delighted to bring out this newsletter edition with theme “clean water and sanitation” envisaged as Sixth Sustainable Development Goal (SDG) UN. As a Pontifical Congregation, we the Carmelites around the world have to take proactive role for contributing to this goal. Let's begin it with our own community and our neighborhood families. Issues like water scarcity, flooding and lack of proper waste water management impede sustainable socio-economic development. As a matter of pride, already we have adopted the issues related to water, sanitation and health as a policy for programmatic interventions.

A large number of people, especially the women and children become vulnerable facing acute health risks due to the lack of facilities for clean water and sanitation. Society's responsibility is to create an enabling and strengthening environment by intervening meaningfully in the creation of infrastructure for clean water and sanitation. Strategic partnership and planning are necessary for improving the situation especially during corona virus pandemic wave two and the foretold wave three.

CEVA under the Department of Social Apostolate and Healthcare support of the Congregation of the

Carmelites of Marry Immaculate (CMI) is planning toward the best performing institutions, NGOs, study houses and campuses associated with us. In coordination with CEVA we are committed to provide water and sanitation accessibility to poor people. One positive note in this regard is that water, sanitation, health and hygiene (WASH) interventions have created a momentum in India during past one decade demonstrating decrease in open defecation and improved accessibility to clean water. But we still need to go a long way as our country is lagging very much behind the goal of “clean water and sanitation for all”, including vaccines, and curbing death due to water borne diseases, corona virus pandemic, and health facilities.

The challenge is all the more difficult amidst on slaughter of COVID 19 surge. Future possibilities of overcoming the vicious circle of poverty, health risks, incomplete education and poor-quality life is through ensuring access to clean water and sanitation for all. It is the right time that we have adopted this theme for development action.

Best wishes!

Fr. Biju Vadakkel CMI
General Councillor for Social
Apostolate and Healthcare
& Moderator, CEVA.

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1 SUSTAINABLE DEVELOPMENT GOAL 6 – WATER AND SANITATION

As the globally agreed upon time to realise the sustainable development goals leaves us with barely a decade, water and sanitation scenario leaves much to be desired. While the number of people with access to safe water has increased, there is every reason for fear of failure to meet this goal. It is also a matter for concern that water and sanitation is such a fundamental goal that has practical implications for the realization of every other goal. In this small article, chiefly based on the insights and data from UN web sources, I am trying to present the Kerala experience and identify practical avenues for local action.

Water Worries – A Kerala Experience as An Indicator

I was born and brought up in the small town of Kochi in the state of Kerala, India. When we grew up in Kochi, water was in abundance, with river Periyar flowing into the back waters of Vempanad, along its borders at several points. The water table was 3 to 4 feet below the ground. In the town area, wells were less. We had heard that there used to be ponds in the backyard of many of the home steads, but by that time, most of them had disappeared. Already, we were dependent on the town water supply from river Periyar, and there was not much to complain about. The traditional '*jeera water*' (water boiled with cumin) was the only drink besides *kanji vellam* (the water used by many house holds as a drink, chiefly along with the meals. Other similar drinks with *karinkali* (*Senegalia catechu*)

or *chappangam/patimukham* (*Caesalpinia sappan*) were gradually becoming fashionable. But, in general, there was no botheration to drink water directly from the supply tap, whether at home or at a public tap. Water was considered safe to drink, and there was no report of instances of water-borne diseases as we see and hear today. It could be that the water was generally less polluted, it could be that immunity was better.

Sri C.R. Neelakantan, a leading social activist in the state of Kerala, recalls that in the late 1980s or early 1990s, he had made an intervention in a seminar on water or development issues, stressing that if the trends of water usage and development continued, the days will not be far when Keralites would be depending on bottled water for their water needs. Though the participants felt that the intervention was an exaggerated statement, today we face the fact – use of bottled water has become a very accepted and common practice for people of Kochi or Kerala or for that matter for many or most of the parts of India. In those days, we could go on long trips by public transport or otherwise to any part of the state, and nobody would bother to carry their water bottle with them. You could approach any shop or any home and ask for some water to drink, and you would get it. Today, such availability itself is doubtful, and even if it is available, whether people would 'risk' drinking water from such sources is a moot question.

In spite of having abundant surface water resources, a state like Kerala is said to be under severe shortage for drinking water and is very much dependent on public water supply. The traditional resources like ponds have been neglected and converted into precious land in the urban areas. The sweet water of the wells is no longer considered safe to drink with the presence of e-coli beyond the prescribed limit. Paradoxically on account of adopting the sanitary measure of toilets without proper attention to the treatment of toilet waste. Built often without a septic tank, or even if constructed with a septic tank, sometimes not adhering to proper standards, leading to seepage in the soil and into the water source, contaminating the water sources across the state (Harikumar & Chandran, 2013).

Past one decade or more, water shortage was experienced in several districts and many institutions that depended on their own water sources had great struggle in managing the months of January to March, in spite of the abundant rains and the 44 rivers that run across this narrow patch of land, that is Kerala. In coastal areas, the same shortage was felt, but more on account of the saline water entering the water table of the wells which are tapped for water needs.

This is the experience of a water rich, abundantly rain fed (with two seasons of Monsoons) region of India, often cited as a development model. The situation is unimaginably worse in most other parts of the Indian sub-continent, and so with several regions of Africa. As the world looks forward to the developmental goals by 2030, a large section of the human population faces threat to survival, with basic water needs not addressed. We need to look at the ambitious goal of providing clean water and sanitation for all by 2030.

Global Trends– Ground Realities Regarding Water and Sanitation Access

In spite of the recognizable improvement and progress in this domain, the reality is that worldwide, one in three people do not have access to safe drinking water, two out of five people do not have a basic hand-washing facility with soap and water, and more than 673 million people (the total of European Population stands at 448 million!) still practice open defecation.

COVID-19 pandemic has demonstrated the importance of safe water sanitation and hand hygiene, which are life savers; however, billions are deprived of access to this.

In combating COVID-19, WASH (water, sanitation and hygiene) would be a primary strategy without which it is less likely that we can overcome it.

There needs to be multi-pronged strategies targeting various groups and communities – urban slum dweller who lack such facilities, rural schools where children gather, rural communities with scarce access to safe water etc.

2. 2. billion lack access to safely managed drinking water, while 785 million are denied even access to basic drinking water.

3 billion people lack access to basic handwashing facilities – found to be a most effective practice to combat COVID.

More than 80 per cent of wastewater resulting from human activities is discharged into rivers or sea without any pollution removal

Each day, nearly 1,000 children die due to preventable water and sanitation-related diarrheal diseases

Approximately 70 per cent of all water abstracted from rivers, lakes and aquifers is used for irrigation

Floods and other water-related disasters account for 70 per cent of all deaths related to natural disasters

By 2030, it is feared that 700 million people will be displaced on account of lack of access to water.

Taking into account the grave scenario, UN has declared 2018-2028 as Water Action Decade.

Sanitation woes

When it comes to sanitation, specifically, the UN agencies point out the following specific crises affecting the sector:

- 1. The sanitation crisis is still massive:** 4.2 billion people still live without safely managed sanitation – more than half the global population – and 673 million people still practise open defecation. (A ‘safely managed sanitation service’ is a hygienic, private toilet that safely disposes of people’s waste).
- 2. Lack of sanitation is a major killer:** Inadequate sanitation is estimated to cause 432,000 diarrhoeal deaths every year and is a major factor in diseases such as intestinal worms, trachoma and schistosomiasis.
- 3. Vulnerable people bear the brunt:** The people who live without safely managed sanitation tend to face multiple forms of discrimination based on factors such as gender, race, religion, caste and economic status

and are generally left behind as they try to access and manage sanitation services or improve their current facilities.

4. **Children are some of the worst affected:** 297,000 children under five are estimated to die each year from diarrhoea as a result of unsafe drinking water, sanitation, and hand hygiene.
5. **Sanitation is a human right:** Right to life implies also the right to sanitation which entitles everyone to have “physical and affordable access to sanitation, in all spheres of life, that is safe, hygienic, secure, and socially and culturally acceptable and that provides privacy and ensures dignity”. International human rights law obliges states to work towards achieving universal access to water and sanitation for all, without discrimination, while prioritizing those most in need.
6. **The sanitation crisis threatens us all:** Ensuring sanitation for those left behind is not only an imperative for their health but also for the community as a whole. The health benefits of sanitation are only fully realised when **everyone** has safely managed sanitation.
7. **The world is off-track:** We are at serious risk of missing Sustainable Development Goal 6: to ensure water and sanitation for all by 2030. Funding is falling short, demand is rising, water pollution is worsening and existing governance structures are often weak and fragmented.

Sustainable Development Goal No. 6: Clean Water and Sanitation

“Ensure availability and sustainable management of water and sanitation for all”

<https://www.un.org/sustainabledevelopment/water-and-sanitation/>

- 6.1 By 2030, achieve universal and equitable access to safe and affordable drinking water for all
- 6.2 By 2030, achieve access to adequate and equitable sanitation and hygiene for all and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations
- 6.3 By 2030, improve water quality by reducing pollution, eliminating dumping and minimizing release of hazardous chemicals and materials, halving the proportion of untreated waste water and substantially increasing recycling and safe reuse globally

6.4 By 2030, substantially increase water-use efficiency across all sectors and ensure sustainable withdrawals and supply of fresh water to address water scarcity and substantially reduce the number of people suffering from water scarcity

6.5 By 2030, implement integrated water resources management at all levels, including through transboundary cooperation as appropriate

6.6 By 2020, protect and restore water-related eco systems, including mountains, forests, wetlands, rivers, aquifers and lakes

6.A By 2030, expand international cooperation and capacity-building support to developing countries in water- and sanitation-related activities and programmes, including water harvesting, desalination, water efficiency, waste water treatment, recycling and reuse technologies

6.B Support and strengthen the participation of local communities in improving water and sanitation management

Right to Life and Right to Water and Sanitation

Access to water, sanitation and hygiene is a human right; it is no more another of the desirables, but a part of the ‘right to life’ itself. The demand for water has outpaced population growth, and half the world’s population is already experiencing severe water scarcity at least one month a year. Water is essential not only to health, but also to poverty reduction, food security, peace and human rights, eco systems and education. Nevertheless, countries face growing challenges linked to water scarcity, water pollution, degraded water related ecosystems and cooperation over transboundary water basins

Sustainable water management have implications to our health, energy management, food production and consumption, decent work and economic growth.

While climate change does impact water availability, water management has also done with mitigating climate change impact. Millions of lives can be saved from water borne diseases like Malaria and diarrhoea if there is proper water management and access to water for the people.

Thus practically, every domain of human existence and almost all sustainable development goals are connected to this – Goals 1, 2 and 3 of no poverty, zero hunger and good health and well-being are evidently bearing direct link to the availability of safe and sufficient water. In most of the so-called developing countries, the task of fetching

water – ensuring water for the family – is part of the tasks of the women of the household. A UN document presents a case study from a Maharashtra village of 'water women' – women being married into the household so as to manage the water needs of the family. The undue burden – both the physical exertion and the mental stress – on women on account of water scarcity makes the goal of gender equality a major challenge (<https://www.un.org/sustainabledevelopment/water-and-sanitation/>). It also gives cases from across the globe by which non-conventional (read, affordable & sustainable) energy related interventions ease the burden on villages to obtain safe water. They serve to prove the WATSAN goal as linked to the goal no. 7. Water and sanitation, evidently and without elaboration, lie at the base of other SDGs – decent work and economic growth (8), industry-innovation-infrastructure (9), reduced inequalities (10), sustainable cities and communities (11), responsible production and consumption (12), climate action (13), life below water (14), life on land (15). Goal 16, on the one hand, finds water as the basis of peace and justice for the many millions on the planet, and the need for strong institutions to ensure that justice, and consequent peace are real for them, starting with the basic necessity of water.

And, goal 17, rightly place the importance of partnerships to ensure that the goal and the targets involved are attained. This requires collaboration at multiple levels – from the local neighbourhoods and local administration this should begin. The success stories of the state of Kerala, in this domain, during the first decade of 21st century, under Kerala Rural Water Supply and Sanitation Agency (KRWSA), is an indicator of the possibility of partnerships, and the resultant success. Sustainability also can be built in, depending on how such partnerships could be developed. From analysing a few of the projects, an integrated approach with a lot of built-in flexibilities, but mission mode management, and a fair scale of the user/beneficiary/primary stake-holder participation, leading to ownership and sustainability, could be observed. The model is worth replicating elsewhere as well. The official website of 'Jalanidhi' (<https://jalanidhi.kerala.gov.in/>) makes tall claims regarding the coverage, if true, is indeed a matter of re-assurance in this regard, that remedies are possible.

Water Literacy and Community Education

There was an effort at water literacy by the government of Kerala and a leading media house, during the first

decade of this century. Such efforts have to be sustained, especially at the level of basic education, making it part of the overall environment education, which, at least, is in place, theoretically.

While it is indeed useful that the two major campaigns in this regard - world water day (March 22) and world toilet day (November 19) – are observed by development agencies, local administration, voluntary organisations and educational institutions, to educate the community in this regard, it is also equally important to look at alternatives, rather than merely transferring technology tested and found useful in one. It is very important to bear in mind the cultural contexts in which water and sanitation needs are addressed and also evolve and devise technologies that would suit the culture and the water availability.

Research, Development and Transfer of Alternative Technologies

It is a sad story the sanitation experiments with minimal water requirements like the ones developed at Integrated Rural Technology Centre (IRTC), Mundur, Palakkad, have not really sustained, nor been transferred to the public through collaboration with the development agencies or local administration. Such experiments which address sanitation needs with minimum taxing on the water resources are to be further promoted, and refined, to make them appealing to the people.

While roof water harvesting has gained popularity over the years, whether they are becoming ornamental is to be examined. Often, they serve as an additional storage or a source during the rainy season, and a building permit requirement. Whether they are designed to address the issues of water scarce period is doubtful. Rather, the already proven technology of ground water re-charging has to gain acceptance with further experimentation and fine tuning of the technology, as well as with policy adaptations in this regard – especially, with respect to the establishment of large-scale housing projects.

Citing again from the Kerala experience, the resources of wet lands and paddy fields which, besides their primary purpose of food production, served as rich resource pool for water needs of the region. These vital resources are in steadily moving in the direction of disappearance or dying out on account of various causes – soil erosion, soil deposit, conversion of wetlands and waterbodies into dryland. The case, may be an indicator of the trends, across the developing world. This has to be tackled on a priority basis, as a national security mission itself. Policies,

budgetary allocation, including 'security personnel' for the sustainable management of such resources are to be evolved.

Lastly, it is now the right time, for decentralized planning of the treatment of water in general and that of the sewage, so that the pollution of water bodies and that of the ground water are checked and water is reused to the extent possible. While it is heartening to observe that the central and state governments of India have initiated several imaginative schemes like 'namami gange', *ini njaan ozhukatte* etc. as part *swacch bharat* and *suchitwa mission*, the effect leaves much to be desired.

A toilet is not just a toilet. It's a life-saver, dignity-protector and opportunity-maker.

Whoever you are, wherever you are, sanitation is your human right. And yet, billions of people are being left behind.

Ask yourself: how could anyone lift themselves out of poverty without sanitation? How can the world achieve the Sustainable Development Goals while so many of our fellow citizens live without something so essential to their health?

Harikumar, P. S. & Chandran, K Madhava 2013. **Bacteriological Contamination of Ground Water due to onsite Sanitation Problems in Kerala State – A Case Study.** *International Journal of Life Science, Biotechnology and Pharma*. Vol. 2, No. 3.

<https://www.un.org/sustainabledevelopment/water-and-sanitation/>

<https://www.un.org/sustainabledevelopment/blog/2019/10/eight-things-you-need-to-know-about-the-sanitation-crisis/>

<https://jalandidhi.kerala.gov.in/>

Fr. Dr. J. Prasanth Palakkappillil CMI

2

ACTIVITY UNDER COMMON INSTITUTIONS

1. DHARMARAM COLLEGE & DASS COVID Interventions During Wave Two New Pedagogy in Covidology

Along with Theology and Philosophy, Dharmaram has evolved a creative Covidology course such as outreach care and experience with COVID patients and their families in hospitals, homes and other centres. Summer vacation has been a time to reach out to the peripheries to evolve a new pastoral theology during COVID and post COVID Church and world.

Pastoral Care in Hospitals

In Dharmaram, Frs. Mathew Attumkal, Wilson Chakyath, Gregory Malayil and Jomon Mularickal rendered pastoral caring for patients admitted in St. Martha's and St. John's Medical College Hospitals. It was very enriching and rewarding experience of their priestly life. Community as a whole offer's prayer support to needy people during the Eucharistic Adoration. Counselling services started for needy people with psychological trauma due to COVID. People from all faiths including Christians seek prayer support and spiritual counselling.

Oxygen Concentrators

Five oxygen concentrators made available for patients in families. With oxygen support many lives saved.

Set up Isolation/Quarantine Centre

COVID positive cases were admitted in the isolation centre set up temporarily. Hundreds of poor people had no quarantine facility at home accessed service. Inmates were provided food, medicine including service of doctor and nurse on call free of cost.



Distributed Food kit For Slum Dwellers

Dharmaram Association for Social Services (DASS) collaborated with ASVAS for distributing food kits with essential groceries for the poor families at the door step following COVID protocol.



Hot Meals Distributed in Hospitals

Apart from distributing food packets at slums, hot and nutritious meals were also served to poor patients in different hospitals. Back at DASS, Fathers and Brothers joyfully involved in cooking, packing and distributing food to needy people. This initiative brought smile on the faces of hundreds of agonised people due to pandemic situation.



Access To Quality Education

Christ University and schools focus on sustainable measures to provide quality education to poor children through fee concession and other outreach programme. Differently abled children are given special care and attention.



Training Session For Battling Corona Virus

Three doctors belonging to Camillian Congregation namely Drs. Mathew, Thomas and Sumesh provided an orientation and training on how to protect oneself from novel coronavirus. Session in sighted everyone to strictly follow all possible care and protective measures while serving COVID positive cases. Experience sharing session was very inspiring and informative to all participants enabling them to serve COVID infected people with utmost care and vigilance.

Pastoral Care And Services Through Parishes

CMI Fathers serving in various parishes in Bengaluru were fully involved in providing care and support to COVID infected parishioners. A team headed by Fr. Reji Koodapattu provided all possible help to corona virus infected people, risking their own health and life. Specially formed Taskforce engaged in COVID services at St. John's hospital and other treatment centres. A team of warriors including Fathers, Deacons, Religious Sisters and a few young lay people served needy people round the clock including performing funeral services and arranging last rites for people of other faith as well.

Sacrificial Donation For COVID Relief Programme

Fathers and Brothers raised fund for COVID cause by sacrificing personal money and served poor communities cutting across caste, creed and religion with dedication. Together with DVK, Christ University, Christ Schools and all CMI managed institutions actively engaged in supporting nearby parishes, hospitals and other agencies with all possible assistance, help and care. With concerted



and coordinated effort, hundreds of people were reached out with timely services like hospital admission, quarantine facilities, care and treatment, medical aid, oxygen cylinders, Personal Protection Equipment (PPE), food, accommodation, ambulance services and funeral arrangements adhering COVID protocol.

2. CHRIST UNIVERSITY, BENGALURU

Urban Slum (Vridhhi) Development Programme

In response to the unprecedented pandemic, Centre for Social Action (CSA) a unit of Christ University supported families in Ambedkar Nagar, Rajendra Nagar, L.R.Nagar, and Janakiram Layout with grocery, medicine, sanitizers, face masks etc. Communities were sensitized about COVID prevention by distributing pamphlets and hand-outs with support of local self-government and people's representatives. Activities carried out in collaboration with agencies like Jagathu, Action Aid, Karnataka Construction Work Association, REDS, and Bangalore Rural Education & Development Society (BREADS). Moreover, adolescent girls and women in the community were provided sanitary napkins provided by Arogya Seva organization.



Food Kits Distributed to Sponsored Children

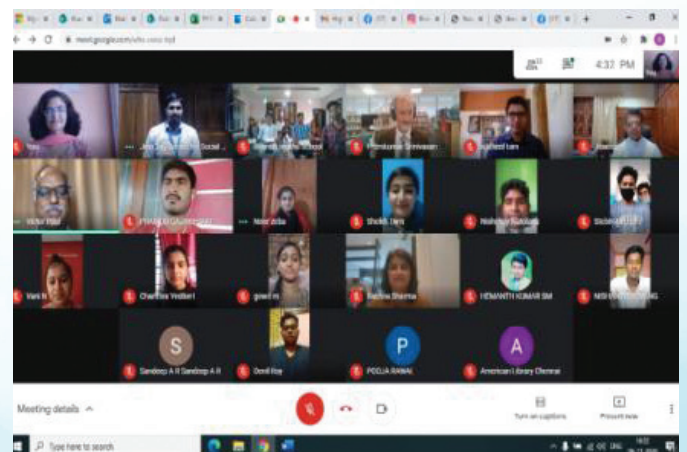
Over 75 young adolescents supported to access quality education. During the pandemic situation, sponsored children were given special care and support services. Food kit and other hygienic items were distributed in

families. Young children were trained through life skills programme. Counselling services provided to improve mental health. Skill development training like arts and crafts making helped students to keep focus on education and career. Online classes were accessed by 250 school-going children during the pandemic. Volunteers from CSA helped children to understand backlog lessons.



English Access Micro-scholarship Programme

English Access Micro-scholarship Program, in short, known as Access program has supported 83 children between the age group of 13-17 from the rural communities of Mysore and Kushalnagar to learn English language and US culture. The selected students were trained to increase their proficiency in the English language based on the designed curriculum. The teachers were trained periodically to engage in activity-based learning. Different enhancement activities were conducted in addition to observe US day. Students were also engaged in community services, development programmes, exposure visits, multimedia learning, intensive training etc. The graduated students were awarded certificates.

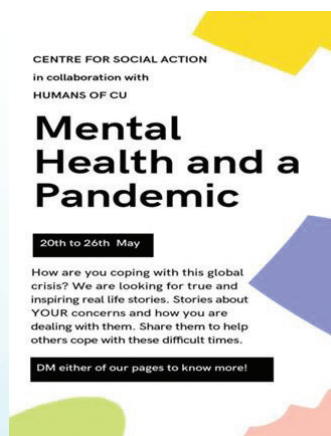


"Unnathi" Project

CSA initiated COVID relief programs in collaboration with panchayath, local donors, and KNH funding agency and distributed most essential items like groceries and sanitary kits to target community. "Unnathi" project community at Bastar and other rural areas benefitted.



Overall Events 2020-2021

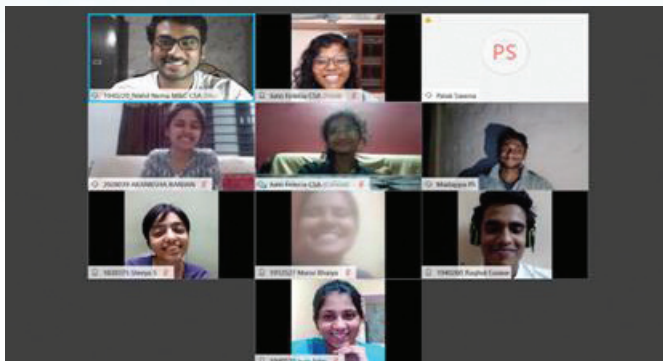


and Praytana together successfully conducted more than 25 events to sensitize and create awareness about various social topics.

The academic year 2020-21 started on a dismayed note. Online classes conducted for students enabled access to quality education. Volunteers conducted more than 175 campaigns to sensitize community people. The four wings of CSA namely Activity Centre, Drishti, Media & Communication,

Women's Day Programme

On international women's day project Mātram organized a webinar in partnership with the Equal Community Foundation (ECF) on "Gender Sensitization". Interactive session was thought-provoking.



COVID-19 Helpline

During COVID wave two, volunteers of CSA extended support to people in dire need of oxygen and plasma. With the support of Covid Help website, team assisted hundreds of poor people in despair to access oxygen cylinders, concentrators, hospital beds, and plasma and oximeter.

3. CHRIST GROUP OF SCHOOLS, BENGALURU

Distributed Food Kits

Christha Vidyalaya team distributed food kits and other essential materials to poor students and their families. Moreover, children lost their parents due to COVID, were supported with educational aid and fees concession.

Free COVID Vaccination Camp

School management jointly organized COVID vaccination camp with the support of local health department. It was conducted with the objective of increasing vaccine accessibility among poor people including parents of Christha Vidyalaya students. Free vaccination camp helped people above 45 years to administer vaccine against coronavirus without much difficulty.



Facilitated Online Classes

Kannada medium school children were facilitated online classes. This initiative helped poor children without internet and smart phones to access online classes. Christha Vidyalaya took it as a challenge to conduct online classes for poor children all throughout previous academic session and continuing with the same.

Christ State & CBSE Schools

Financial Package Offered

School management introduced financial package to assist parents with financial strain due to COVID-19. It included as under:

Fee Concession

Under the scheme, about 80 per cent of school children were given fees concession ranging from 30% to 90% depending upon their financial condition. Over 2000 parents benefitted through fees concession.

Fees Waived Off

With the objective to help parents reeling under crucial financial setback, student's fees waived off completely. Over 30 parents availed the benefit.

Fees in Instalments

Considering the financial burden of parents amidst coronavirus pandemic, students were given option to pay their fees in instalments. Facility helped parents for surviving the crisis at ease.

Extended Financial Assistance

Financial assistance rendered to school staff for conducting COVID test, treatment and vaccination. Staff tested COVID positive benefitted through financial and mental support. Other services offered were free antigen test, vaccination and treatment support for COVID suspected cases of Christ Group of Schools including Dharmaram College.



Counselling Services

Professionally qualified counsellors reached out to affected families with moral support to build confidence to overcome the pandemic situation. Hundreds of students and their family members accessed counselling services to boost their self-esteem for facing the challenges courageously. It was coordinated by a team of counsellors.

Adoption Scheme

Under this, most needy students who lost their parents were adopted. Selected beneficiaries can access quality education from Christ Group of Schools free of cost.

Food Kit Distribution

Economically weak families residing nearby school campus were identified for food kit distribution. Over 400 families including staff benefitted.



Fund Raised For Social Action

School management voluntarily raised fund for social activities especially during COVID pandemic period. Self-motivated team generated fund worth Rs. 2, 38,000/- to support poor people in dire need. Initial fund utilized to assist needy students and their family. So far, an amount of Rs. 35000/- spent for cancer treatment.

Christ Kindergarten

Christ Kindergarten actively engaged in various charitable deeds during the time of COVID-19. As a mission staff and management carried out distribution of food kit, sanitary items, and personal protection equipment. Over and above, proactive steps initiated to ease out financial suffering of all staff and parents. As a result, salaries of both teaching and supporting staff were given their full salary along with additional financial help to coronavirus infected staff, parents and students.

Christ Special School

Support To "PALANA"- A Group Of Differently Abled Children

Christ Special School supported by DASS (Dharmaram Association for Social Services) launched PALANA. During

raged COVID wave differently abled children and their families were reached out with food kit, medicine, rental charges and other family maintenance expenses. Concerted effort helped differently abled children and their families to scale up their quality life.

Christ Task Force Served Beyond Borders

During the pandemic when people were crying out for food and basic necessities, Christ Group of Schools distributed food packets in the neighbouring areas. Task force team served communities beyond boarder with assistance like food, medicine, ambulance and funeral services.

Christ School, Kengeri

At Kengeri, Christ School Management and staff actively supported pandemic affected people in various ways including monetary assistance. Education concession package was offered to students up to 30% fee concession. School adopted nearby villages for possible pastoral care and social support.

4. CARMEL VIDYA BHAVAN TRUST SUPPORTED CHRIST COLLEGE, PUNE

Distributed Groceries

Christ College affiliated to Savitribai Phule University Pune, distributed free grocery items to under privileged families. Beneficiaries included 30 families infected with HIV/AIDS and corona virus. Side by side, awareness campaign in the wake of COVID -19 pandemic was organised for communities living in the neighbourhoods. Material support like rice, wheat flour, oil, sugar, pulses, tea-powder etc, coupled with awareness generation activities helped suffering people to survive during pandemic wave two.



Provided Assistance To Access Online Classes

With growing change in the pattern of education in view of pandemic situation, Christ College Pune extended financial help to 45 underprivileged school going children. Financial assistance to students of class VIII - XII was rendered to access online classes. Support enabled underprivileged parents to ensure quality education for children.

Organised Free COVID Vaccination Camp

On 18th of June, 2021, organised free COVID vaccination camp in which hundreds of people were administered free vaccine with the support of Weikfield IT City Park, Viman Nagar. Management, staff and student volunteers motivated senior citizens to avail free vaccination against novel coronavirus variants.



Expectant mother battled COVID

Carrying mother Kavitha (*name changed to protect identity*) in her thirties, contracted with fatal novel coronavirus. Knowing her poor economic condition, Christ college management extended helping hand for treatment. Timely intervention, proper care and treatment enabled young woman from COVID and also for safe delivery and child survival.

5. COVID CARE PROGRAMME AT SAMANVAYA, BHOPAL

With the support of CEVA, Samanvaya team brought relief to worst affected brethren in Bhopal. Food items rice, wheat, vegetables such as pumpkins, black chickpea, beans, maize, garlic, onion, mustard and mangoes distributed among daily labourers, farmers and migrant workers near to Samanvaya including parishes. Moreover, vitamin tablets, face masks were given to deserving people including hospitalisation and treatment for COVID positive cases.

6. CYRIAC ELIAS VOLUNTARY ASSOCIATION (CEVA), KOCHI

CEVA Board Meeting

On 19th of December 2020, CEVA Board Meeting was held at Kochi Office. Important decisions were taken



in view of changed FCRA rules and regulations on social entities by the Ministry of Home Affairs (MHA), Government of India (GOI). Meeting was attended by all the Board members.

Rejoice 2020

Christmas was celebrated with staff and communities. During this occasion, Mr. Johnson, Executive Director, Chavara Matrimony handed over glucometer to all members of "Pranamam". Elderly members put up cultural programme while sharing sweets and happiness with each other.



Sandals for Sanitation

CEVA in association with SEED, Sargakshetra, Sahrudaya, Rajagiri distributed pair of BATA shoes and sandals to health workers engaged in containing COVID-19 pandemic. Beneficiaries included health staff working in both private and Government hospitals in and around Ernakulam. Grassroots level health workers of Kochi



Corporation, inmates of home for the differently abled and destitute children at KRIPA and Valsalyam (Sisubhavan) benefited.

Community Need Assessment Survey

Community need assessment survey was carried out at Kainakary from 15th to 18th January 2021. Survey was conducted with the support of MSW students from Rajagiri College of Social Sciences (RCSS), Kalamassery. Project staff facilitated study team for survey covering 500 families.

CEVA Core Committee Meeting

On 18th of February 2021, the core committee meeting was held at CEVA office, Kochi. Frs. Biju Vadakkal, Prasant Palakkappillil, M.K Joseph, Mathew Kiriyanthan and Dr. M.P Antoni participated. In the meeting, organizational issues were discussed to chalk out future course of action in line with Board decisions.

International Women's day Observed

On 8th of March, 2021, International women's day was celebrated. Dr. Megha S, delivered a lecture on





therapeutic dance and yoga for women's group associated with Cyriac Eliyas Voluntary Association (CEVA). More than 20 members actively participated in the productive live demonstration.

Solar Lamps Distributed

In our effort to save energy consumption, CEVA distributed 25 solar lamps to members of GEMS and YUVA. Children delighted with excitement as solar lamp with power storage capacity useful for study purpose.



Solidarity Response to COVID Second Wave

During raged novel coronavirus variants and subsequent lockdown, CEVA team reached out to families of various



community-based groups such as women, youth and young children living in and around Karikkamuri, Kochi. Solidarity response to families suffering from pandemic situation directly benefited all families belonging to Pranamam, YUVA and GEMS.

New Dwelling for Homeless Urban Poor

As part of CEVA's commitment towards homeless people, a new house was constructed and handed over to Mrs. Mini Sanjose.



“Pranamam” - Caring Elderly People

Despite wide spread of novel coronavirus and its variants, CEVA managed to continue with routine activities. Under “Vayomitram” a project implemented in collaboration with Kochi Corporation provides free essential medicines and periodical health checkup. CEVA ensured routine medicines reached to all Pranamam members every month including lockdown period. Keeping the surge in mind, medical camp was anticipated for routine checkup and follow up; prescribed medicines were delivered at their door step. In addition to these, members were provided with glucometer, food kit and sanitary items for their immediate survival. Ensured all members administered with COVID vaccine to contain corona virus.

YUVA & GEMS

As a routine activity, weekly meeting of both YUVA and GEMS were organized. Saturday meetings provided exposure to children for coming together and opening up in group dynamics. Project staff facilitated group activities. Young budding children and youth got to know about their rights and innate qualities based on moral values. Ample opportunities were given to children for focusing studies with quality. Moreover, needy children were given access to tuition, study materials and scholarship. Periodical home visits were conducted to assess family environment and overall performance especially in academics.



6.1. Integrated Community Development Project (ICDP) Niravilpuzha, Wayanad

Course Certificate Distributed

Fr. John Panamthottom, Superior of Aranyasram, Niravilpuzha distributed certificates to trainees who have graduated tailoring course successfully.

Conducted Awareness Classes

In order to relief stress and tension of parents regarding future life, project team led by counsellor facilitated awareness classes in Kunhomeand Kootappara Anganwadi



for mothers and adolescent girls on various sexual and reproductive health topics.

Youth Awareness Class Organised

In collaboration with Anganwadi and Health Department, Mattilayam series of awareness classes for adolescent children were conducted. Hundreds of youth were sensitised about various health issues.



Computer Course Successfully Completed

Fr. Mathew Kiriyanthan, CEVA Secretary, issued certificates to aspirants who have completed computer course successfully.



Provided Counseling Services

Amidst COVID-19, in order to address concerns of parents and students, project counselor provided online counseling services.

Tuition Centre Opened For Tribal Children

Tuition Centre opened for Paniya and Kurichia tribes near Kunhome. Fr. Joby, Vicar of St. Antony's Church has given consent to use parish hall as Tuition Centre. Tribal children from primitive tribes started accessing special tuition with great enthusiasm with the support of qualified tutor. Similarly, tuition centre as a cradle for multi skills offers computer, stitching, tailoring and embroidery training twice in a week. Children are very enthusiastic and curious to learn new skills.



Life Skill Development Training Programmes

Over and above, life skill development training programme organized as extra-curricular activities. Tribal children access services such as spoken English, news paper reading, story writing, conversation and motivational class, internal assessment, physical exercise, yoga class, cultural activities and counseling services.

Distributed Fresh Vegetables



In order to encourage natural farming among young generation and importance of eating fresh poison free vegetables, children were given awareness on natural farming method. Motivated children started cultivating vegetable garden at home and produce vegetables for their own use. During pandemic surge, families of all tuition children were provided vegetables cultivated in the garden.

Chavara Kids Feast 2021

Under "Chavara Kids Feast" summer camp organized mainly for tribal children. During the feast children were given individual attention and exposure for talent hunt. Based on an action plan for each day, kids were given special activities such as new games and thoughts for the day. Games and other creative activities made children more energetic and relax. Other activities included like techniques to deliver a speech with confidence. Group activities improved their team spirit and knowledge sharing. Kids put up cultural activities and folk songs in different group with competitive spirit.



Conducted Special Camp for Tribal Children

On 10th April 2021, a special camp was conducted for tuition children at St. Antony's parish hall. Main purpose of the camp was to create interest and positive attitude towards education. Facilitators used various types of games to attract them. Each game carried a particular message and participants were encouraged to discuss about it and prizes were given as encouragement. Initially children were reluctant but slowly began to come out of it with ice breaking session. Information about combating COVID -19 pandemic like tips about right use of sanitizers and masks were disseminated. Small kit consists of soap; sanitizer and masks were distributed to each one of them. Participants enjoyed the camp and demanded such programs in future.



Christmas Celebration

In order to share peace and joy, Christmas celebration was organized for project staff and communities. Children with the gown and face shield of Santa clause sang songs and put steps of dance wonderfully. Youth and children prepared a beautiful Christmas tree on this occasion and enjoyed sumptuous meals, cake and sweets.



Interactive Meeting with Health Inspector

Health inspector of Thondernaduprimary health center interacted with project staff and review functioning of tuition centre amidst COVID-19 second wave and satisfied about the arrangement taken to combat pandemic crisis. During the interactive meeting in the second week of February, health inspector inspected all project centers such as tuition, tailoring and computer and its various functions. Health officer observed how classes being conducted, seating arrangements etc. After interaction with tutors and trainees he gave some suggestions and tips for fighting the virus.

Special Camp for Differently Abled Children

On 8th of February 2021, a special camp for differently abled children was organized. Dr. Ramakrishnan, a retired doctor from Thiruvananthapuram medical college with, experience of working among differently abled children for more than 25 years interacted with children and their parents. During the interaction with parents of differently abled children, he explained scientific reason for present situation. Also given tips about physical deformities, its



causes and available treatment to be followed. Parent's doubts, misconception and fear regarding treatment were eroded. It helped many parents with children with physical problems to go for surgery and physiotherapy for improving their deformities. Special health camp helped many parents to get correct information and seek timely medical help from specialist hospitals. As a result, now some children are back to normalcy after undergoing minor surgery as advised by consulting doctor.

Celebrated feast of St. Kuriakose Elias Chavara

St. Kuriakose Elias Chavara's feast was celebrated with due importance. Fr. John Panamthoom, Superior of Niravilpuzha, Araniyashram gave an inspirational message about life and activities of St. Chavara including welfare measures like midday meal, special care towards poor and downtrodden. Even after one and half a century the teachings has great significance, relevance and meaningful in this modern world. "Chavarul" as oxygen for life, distributed to all staff for leading happy and peaceful life.

Elevate 2021- Youth camp

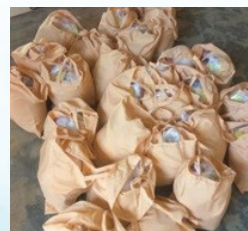
In order to bloom dreams and aspirations, youth camp namely ELEVATE 2021 was organized. It built their confidence, reduced fear and anxieties to face life realities boldly.



Block placement

In collaboration with Don Bosco College, Bathery, Mr. Abin Abraham, final year BSW student successfully completed field work placement at ICDP project. During the placement student social worker visited tribal settlement and interacted with tuition children and participated in the special camp.

Special programmes during COVID -19 second wave Food kit distributed



Food kit distributed to over 200 poor families. Food materials packed in cloth bag prepared by tailoring aspirants. Cloth bags used for promoting environmental friendly materials and reduce use

of plastics. It can be reused for shopping and other domestic purposes in future.

“Chitrashalabhagal” online special camp

Online program for children namely “Chitrashalabhagal” meaning butterflies was started with the objective to improve physical, mental and social well-being of students. COVID-19 situation during wave two has affected children very badly especially growth and development of education. Online camp helped children to share experience and show case their skills and talents. Over 20 children benefitted.

Online yoga classes started

During lockdown period on all alternative day's online yoga classes uploaded to students and their parents. Sixteen students and their parents participated in live yoga class. For more parents and children to access its link was made available in you tube to practice according to their convenience. A total of 5 yoga classes uploaded along with some tips for meditation and exercise to improve their physical and mental health. Response was overwhelming, quite a number of parents also started to participate in yoga classes.

7. CEVA, NRO OFFICE, NEW DELHI Launched Slum Development Project

With the objective to restore children living at Kirbi place slum in New Delhi through improving access to quality education, a novel project was initiated. Under this, school dropout and never enrolled children below 14 years, provided access to informal and remedial education. Thrust is given for mental, physical and emotional/spiritual restoration by realising their rights including formal education.



Skill Development Training Conducted for Poor Children

Time to time children at Kirbi slum exposed to skill development training programme in order to scale up their skills. Skill development training like quilling art was promoted. Under this art, strips of paper are rolled, shaped and glued together to create decorative designs. The paper is then glued at the tip, shaped and arranged to form flowers, leaves and various ornamental patterns. Skill development training program has refrained children from begging and rag picking rather earning decent income through different other vocational skills.



Enhanced Women Livelihood Through Tailoring Centre

As an alternative source of earning, tailoring Centre was opened for poor women. Vulnerable women availed basic skills in stitching and embroidery work. Project has enabled women to take up stitching profession as a means of income. Empowered women live a decent life with dignity. Moreover, encourage their children to go to school instead of rag picking and begging.



Distributed Winter Clothes

A team of volunteers and staff at CEVA, New Delhi distributed winter clothes to rag pickers and foot path dwellers at Harinagar area. It was indeed a great help for poor people for protecting from extreme cold weather condition.



8. CHAVARA CULTURAL CENTRE, KARIKKAMURI, KOCHI

Served Hot and Nutritious Meals

Chavara Cultural Centre with the support of local stakeholders and people's representatives set up community kitchen for serving meals amidst lockdown due to COVID second wave. Daily Lunch was distributed to frontline workers engaged in Coronavirus Prevention Services and other needy people. Through this initiative, over 300 lunch packets on daily basis for 21 days were distributed among frontline health workers and poor people stranded at railway station, bus stand and streets. On Eid, Biryani was prepared specially for all. Community kitchen activities were coordinated by a team of dedicated staff, volunteers and Fathers of CMI Bhavan led by Fr. Biju



Vadakkal. Mission was successful with generous support by a team of stakeholders including MLA and MP, Mr. T.J. Vinod MLA and Mr. Hybi Eden MP respectively.

Vitamin Tablets and Medicines Provided to Jail Inmates

As a gesture of compassion and caring for prisoners, vitamin tablets and medicines were distributed to all inmates at Ernakulam district sub jail amidst coronavirus wave two. Jail Superintendent Dr. Vijayan and team appreciated the effort.

Smart phones Distributed to School Students

Chavara Cultural Centre in association with Lions Club, Cochin South, distributed 12 smart phones to poor students to access online classes. Selected children with their parents attended the function by strictly following COVID-19 protocol.



Observed National Doctor's Day

Chavara Cultural Centre honored Ernakulam district medical team on the occasion of National Doctor's Day.

On this occasion, over 2000 surgical gloves were handed over to Dr. Vivek kumar, ADMO in the presence of Dr. Anitha A.A, Superintendent of District Hospital.



3

WORKING TOWARDS WATER AND SANITATION

Confederation of Kerala State NGO Meeting

On 28th of January 2021, Meeting of Confederation of Kerala NGOs was coordinated at Chavara Cultural Centre Hall, Karikkamuri, Kochi. Purpose of the meeting was to revisit issues and bottle necks faced during *Jala Nidhi* Project implementation and address these problems with Government stakeholders concerned before signing the Memorandum of Understanding (MoU) for implementing *Jala Jeevan* Mission Project as supporting partners. Taking a lead role CEVA arranged meeting with representatives of more than 16 NGOs from Kerala State. During the consultation meeting new office bearers were selected and also chalked out a concrete plan of action to take forward the project.

Working Towards Clean Water and Sanitation for All (SDG – 6)

CEVA as an umbrella organization coordinated diversified projects for improving water and sanitation facilities cutting across various States in India over a period of three decades. Partner organizations such as Rural Development Service Society, Silwani, Voluntary Organization for Social Action & Rural Development (VOSARD), Idukki and St. Thomas Association for Rural Service (STARS), Kozhikkode, Kuriakose Elias Service Society (KESS) and Rajagiri Outreach were champions for the cause. These agencies successfully completed diversified projects on water and sanitation including tribal districts in India in partnership with national and international funding

agencies. Through concerted effort millions of rural people especially in tribal villages with acute water shortage for domestic purpose and cultivation have been provided access to clean water for domestic and irrigation purposes. With major and minor WATSAN projects, hundreds of thousands check dams, water sheds, bore well, open well, drift irrigation, rain water harvesting, pipe water connection and construction of low-cost toilets constructed. As an impact millions of families accessed eco-friendly cultivation facilities and started sustainable agriculture across communities in India.

VOSARD COMMITTED TO IMPROVE CLEAN WATER AND SANITATION FACILITIES

Enhanced Access to Sustainable Clean and Safe Drinking Water

VOSARD implemented *Jalanidhi* project in partnership with Kerala Rural Water Supply and Sanitation Agency (KRWSSA), GoK with an objective to provide access to sustainable clean and safe drinking water to hundreds of thousands of families deprived off clean water and sanitation facilities. Provided rain water harvesting to 1350 households and 895 water supplies through different 21 projects became sustainable by accessing clean water for cooking and other domestic purposes.

Integrated Watershed Program

At Vathikudy Panchayat, Idukki District integrated watershed programme was implemented with an aim to

improve quality lives of rural people through sustainable natural resources management.

- **Rain water storage.** Constructed 98 open tank of Ferro cement contain 25,000 liters for rain water storage.
- **Contour trench:** a total of 545 rm of contour trenches has been made in the project area. The size of the trench was: length 1.5 m, width 0.5 m and depth 0.5 m. The length of the trench varied between 1.5 m to 3 m according to the terrain.
- **Stone bund:** 3,507 running meters of stone bunds constructed in the area against 3000 rm of stone bunds planned in the project
- **Gully Plugging:** 48 gully plugs (2014 – 15, 2015 – 12, 2016 - 13 and 2017 - 8) were constructed.
- **Stream bank protection:** 1,265 running meters of stream bank protection constructed in the proposed area.
- **Water percolation pit:** There were 177 water percolation pits constructed so far, each with the measurement of 0.5 m length, 0.5 m depth and 0.5m width.
- **Live fencing:** 5,350 running meters of live fencing was completed till end of the project period in the areas of 45 farmers.

Promoted Sustainable Agriculture and Food Security

With the objective of achieving food and nutritional security, mixed farming technology was promoted. Trained farmers group adopted mixed farming method as a solution to overcome low agriculture productivity and low income. Activities undertaken under natural resource management such as watershed, soil conservation, rainwater harvesting and organic farming helped farmer community to live quality life.

- Constructed 45 water harvesting units
- Built 36 sanitary latrines in Vandanmedu and 21 sanitary latrines in Chakkupallam

Through Other Project

Provided 50 rain water harvesting units through CAPART project and 50 Rain wather harvesting schemes through KKS project in Kanchiyar Panchayat.

STARS ON WATER & SANITATION PROJECTS

St. Thomas Association for Rural Service (STARS) has always been organizing water and sanitation projects in collaboration with many government and non-governmental agencies and remains at the peak of its confidence always ready to take the plunge ahead.

The Government of Kerala had entrusted second phase of *Jalanidhi* rural water supply scheme to STARS in 2013 for the sustained delivery of adequate quality of water and sanitation services being implemented in the rural areas of Aralam and Villiappally Grama Panchayats in Kozhikode district. Having a strong wide network of STARS in the Malabar Region, KRWSA selected STARS in mobilizing communities towards the participatory, community driven water supply and sanitation facilities in the intervention areas. In connection with this project, the organization had an exceptional obligation to develop drainage facilities, setting up toilets and creating water reservoirs in rural areas of the selected Panchayats.

Aralam Grama Panchayat

The prestigious Jalanidhi project was started in 2013 and was completed in 2016. Twenty-six water users' groups that included 3519 members were formed in the Panchayat. The project successfully provided drinking water facility reach to 1000 families who became the direct beneficiaries of this project. In addition to these, 651 toilets were constructed. 6 check dams were constricted in different areas of the Panchayat for ground water charging. Now Aralam Grama Panchayat which was comparatively a dry area in Northern Kerala enjoys drinking water and other facilities provided by STARS.





Villiappally Grama Panchayat

The Jananidhi project in Villiappally Gram Panchayat was started in 2015. By the end of March 2019 STARS was able to complete the project successfully.

- twenty-two water users' groups which included 1356 members were formed.
- For supplying the water adequately eight check dams were set up in different places. As a result, 1356 families were getting safe drinking water for their households' needs and other purpose.
- In addition to water supply schemes alone other components like ground water charge activities, latrines, environmental sanitation measures, Rain water Harvesting etc.
- constructed 293 toilets in different locations of the Grama Panchayat. Ground water recharging and source protection systems were set up in 3 water sources.
- Toilets were constructed in all the schools and in every common places of the Panchayat.



Jal Jeevan Mission

With a goal to provide functional house hold tap connection to every household by 2024, the Kerala state government has selected STARS to undertake Jal Jeevan Mission project in 16 Panchayats (10- Panchayats in Kozhikode, 4 - Panchayats in Kannur & 2 - Panchayats

in Wayanad districts) in Malabar Region. STARS with this initiation will make drinking water facility for 80,000 families and almost 4 lakh people will become direct beneficiaries of this project.

RAJAGIRI outREACH JALANIDHI PROJECT

Rajagiri Outreach Kalamassery (SO) has implemented Jananidhi project i.e., Kunnamthanam Grama Panchayath in Pathanamthitta district, Arakulam Grama Panchayat in Idukki District, Puthenchira, Varavoor and Annamanada Grama Panchayats in Thrissur District, Perumatti Grama Panchayat in Palakkad District.

- **Kunnamthanam Grama Panchayath**, Pathanamthitta District, Mallappally block, is having an area of 17.57 km with apopulation of 18489. Rajagiri outREACH, the Supporting Organization of Jalinidhi Project has implemented 27 small Water Supply Schemes successfully, and supplying drinking water to 1553 families across the Kunnamthanam Grama Panchayath, even during the peak summer season.



- **Arakulam Grama Panchayat** Idukki District. Rajagiri outREACH, the Supporting Organization has implemented 35 small Water Supply Schemes and providing drinking water to 2202 families across the Panchayath including 670 exclusively ST families. Among the total 35 schemes, 32Schemes have been exited from KRWSA and obtained exit orders.
- Eight school toilets were constructed in the premises of St. Thomas school Arakulam, it was a relief to school management and Grama panchayat.
- In the total 35 water supply schemes, we have implemented 8 RWH schemes among 315 Households. Constructed RWH Units with a capacity of 10000 Liters.
- Rajagiri outREACH had constructed RWH tanks for household beneficiaries in different districts of Kerala. Rajagiri outREACH has also prepared Watershed Development Masterplans for Edayur, Valanchery and Marakkara Grama panchayats of Malappuram District.

been implemented at Thekkumkara, Madakkathara & Nadathara Panchayaths by KESS, which helped successfully, tackle the water scarcity in the community house holds. Intervention includes providing underground pipe connection facilities to the beneficiaries, Facilitating repair and restoration of damaged pipes, provision of water and maintainace of the water Sources. Here we are including the details of Jananidhai project implemented in Nadathara Grama Panchayath.

- The project implemented in 19.30sqkm in 17 wards at Ollukara block, Thrissur District. The total number of populations covered 31352 and 55% have pre water supply coverage. Through the project KSS covered 2698 house hold (213 SC families, 22 ST families and 2463 general families)

IMPLEMENTING UNDER KURIAKOSE ELIAS SERVICE SOCIETY (KESS)

The World Bank –assisted “Kerala Rural Water Supply and Sanitation Project” better known as “Jalanidhi”, has

	No of Schemes	No of BG Covered	HHs Covered
Small –Grama Panchayath Rehabilitation Schemes	3	3	257
Large Water Supply Scheme- New	1	53	2441
Total	4	56	2698

- Under the Nadathara Sudhajala Vitharana Samithi scheme, 2441 house hold are the beneficiary of L W S.





4 TRACKING INDIA'S PROGRESS ON SDG 6: WATER AND SANITATION

This paper discusses the progress of implementation of the Sustainable Development Goal-6 at the global level as well as in India. The paper starts with the conceptual evolution of the SDGs and concludes with a critique of the SDG 6 progress assessment in India. The four aspects covered include:

1. *THE ROAD TO AGENDA 2030*
2. *TRACKING SDG GLOBAL ACHIEVEMENT - WATER AND SANITATION*
3. *SDG 6: TRACKING PROGRESS IN INDIA*
4. *PROGRESS ASSESSMENT IN INDIA - A CRITIQUE*

1. THE ROAD TO AGENDA 2030

A 'Decade of Action' to deliver the SDGs

The Decade of Action initiated by the UN calls for dedicated efforts by people and nations to achieve the Sustainable Development Goals (SDGs) by 2030. Introduced during the Rio Summit in 1992, the concept of sustainable development encompassed human progress on three dimensions - social, economic and environmental. At the Rio Earth Summit in Brazil, over 178 countries adopted Agenda 21, a comprehensive plan of action to build a global partnership for sustainable development to

improve human lives and to protect the environment.¹

As a follow up measure, UN Member States adopted the Millennium Declaration in 2000 at UN Headquarters in New York and committed themselves to eradicate extreme poverty by 2015 through a programme involving eight Millennium Development Goals (MDGs). Encouraged by the outcome of the MDGs, the UN General Assembly began in January 2015 the negotiation process on a post-2015 development agenda. The negotiation process culminated in the Sustainable Development Summit in September 2015, where the member nations adopted the 2030 Agenda for Sustainable Development, with 17 Sustainable Development Goals (SDGs) at its core.

2020 marked the beginning of the 'Decade of Action for Sustainable Development Goals'. The 17 goals, adopted by all countries in 2015, represent our shared vision to end poverty, safeguard the environment and build a peaceful world. We have only nine years left to achieve the Sustainable Development Goals (SDGs) by 2030. The urgency persuaded world leaders, at the SDG Summit in September 2019, to call for a Decade of Action, pledging to mobilize financing, enhance national implementation and strengthen institutions to achieve the Goals by the target date of 2030.²

The UN Secretary-General called on all sectors of society to mobilise for a decade of action on three levels: (1) global action to secure greater leadership, more resources and better solutions for the Sustainable Development Goals; (2) local action for changes in policies, budgets, institutions and regulatory frameworks of governments, cities and local authorities; and (3) actions by stakeholder such as youth, civil society, media, private sector, unions, academia and others, to generate an unstoppable movement pushing for the required transformations.³

Remarkable progress has been achieved; extreme poverty and malnutrition have been reduced; child mortality rates are falling; and access to water, sanitation, energy, education and employment is improving. However, hunger is still on the rise, carbon emissions continue to increase and the world's most vulnerable continue to be excessively affected by conflict, inequality, injustice and climate change. The 2030 Agenda is our road map for a transformed world and the Sustainable Development Goals are our best hope—for people, planet, prosperity, peace and partnerships.

Progress has been recorded in respect of several goals, but, overall, actions to meet the SDGs are not yet advancing at the speed or scale required. Accelerated efforts are needed to deliver the Goals by 2030.

UN development interventions

The UN development interventions have a long history. The United Nations and its technical agencies and funds have been promoting the international development agenda ever since their establishment in the late 1940s. The programmes were initiated, by and large, by the individual UN agencies or funds at different World Summits and Conference and the approaches were rather fragmented and disjointed till 1990s.⁴

The last century saw many efforts by the UN agencies, developed countries and bilateral and multilateral institutions to inspire and engage developing countries to plan and implement appropriate interventions to reduce poverty, improve food security and enhance health and nutritional status of the citizens, with focus on women and children. Any integrated global efforts were, however, lacking with a view to improve the quality of life of the poor in the developing and the least developed countries. Formulating strategies and programmes with specific goals to be achieved within defined time frame was lacking.⁵

The MDGs

At the Earth Summit in Rio de Janeiro, Brazil in June 1992, more than 178 countries adopted Agenda 21, the first comprehensive plan to build a global partnership for sustainable development to improve human lives and protect the environment.

In September 2000, at the Millennium Summit, the UN General Assembly, with the largest gathering of world leaders in history, adopted the Millennium Declaration. Eight Millennium Development Goals, with 21 targets and 60 indicators to be achieved by the end of 2015 were adopted. The Millennium Declaration, which forged a global partnership to reduce extreme poverty in the developing and least developed countries, was the first ever global strategy with quantifiable targets to be agreed upon by all UN member states. The world leaders committed their nations to an unprecedented global partnership to achieve the basic human rights to food, health, education and improved quality of life. The Millennium Declaration saw the convergence of development agenda of different institutions under the UN such as United Nations Development Programme (UNDP), United Nations Environment Programme (UNEP), World Health Organization (WHO), United Nations Children's Fund (UNICEF), United Nations Educational, Scientific and Cultural Organization (UNESCO) and other development agencies.

The programmes were limited in scope and focused on eradication of poverty and hunger, development of women and children and control of communicable diseases, besides sustainable development and partnership of countries for economic and social development. The programme was to be implemented in the developing and least developed countries with the support of the developed countries. For the first time, the agenda provided a goal-oriented global framework for development policies and articulated around eight goals to be achieved by 2015. They included: 1. Eradicate extreme poverty and hunger; 2. Achieve universal primary education; 3. Promote gender equality and empower women; 4. Reduce child mortality; 5. Improve maternal health; 6. Combat HIV/AIDS, malaria and other diseases; 7. Ensure environmental sustainability; 8. Develop a global partnership for development.

The Road from MDGs to SDGs

The MDGs created a new and innovative global partnership, spurred public opinion and demonstrated

the immense value of setting ambitious goals. By placing people and their basic needs at the forefront, the MDGs redefined development paradigms in the developed and the developing countries alike. Several countries made considerable progress towards achieving the MDGs. The MDGs helped to lift more than one billion people out of extreme poverty, to make inroads against hunger, to enable more girls than ever before to attend school, and to protect the planet. Some goals were, however, not on track. The progress has been uneven and inequalities persist. Rural and urban disparities remain pronounced and progress tends to bypass women and the disadvantaged. Further efforts were required to advance the development agenda beyond 2015.

Emergence of the Sustainable Development Goals (SDGs)

The SDGs were built on decades of work by the UN and its agencies. Agenda 21, adopted at the Earth Summit in Rio in 1992 offered the first comprehensive plan to develop a global partnership for sustainable development. The MDGs adopted in 2000 gave an impetus for the global development agenda. The World Summit on Sustainable Development in South Africa in 2002 adopted the Johannesburg Declaration on Sustainable Development and the Plan of Implementation, and reaffirmed the global community's commitments to poverty eradication and to the environment and advanced the Agenda 21 and the Millennium Declaration by including more emphasis on multilateral partnerships.

At the United Nations Conference on Sustainable Development (Rio+20) in June 2012, member nations adopted the document "The Future We Want." With this a process was launched to develop a set of Sustainable Development Goals (SDGs) to build upon the MDGs and to establish the UN High-level Political Forum on Sustainable Development. The most significant development was the establishment of a 30-member Open Working Group by the UN General Assembly in 2013 to develop a proposal on the SDGs. India was a member of the OWG. After deliberations in thirteen sessions convened by the OWG from March 2013 to July 2014, OWG submitted its final report which was adopted by the UN General Assembly at its 69th Session held in September 2014.

The UN General Assembly began the negotiation process on the post-2015 development agenda in January 2015. The process led to the adoption of the document "Transforming our world: the 2030 Agenda for Sustainable

Development" at the UN Sustainable Development Summit in New York in September 2015. The 17 SDGs and 169 targets came into force with effect from January 1, 2016. The Sustainable Development Goals (SDGs) represent an unprecedented agenda embracing economic, environmental and social aspects of the well-being of societies and a declaration of an ambitious commitment by world leaders for social transformation. The aim was to take forward the success of Millennium Development Goals. The Agenda was endorsed by 193 Member States, including India. The Agenda and the SDGs are for all countries, including the rich, not just for the developing and the least developed.

The SDGs cover a comprehensive set of global goals integrating social, economic and environmental dimensions of development. The Goals are interconnected and indivisible. As a result, they necessitate comprehensive and participatory approaches in bringing everybody together so that no one is left behind.

The vision of the 2030 Agenda integrates five components of sustainable development – People, Planet, Prosperity, Peace and Partnership. It envisages a just, rights based, equitable and inclusive world. All stakeholders need to commit themselves to work together to promote sustained, inclusive and sustainable economic growth, social development and environmental protection which would benefit all, including women, children, youth and future generations and would ensure that no one will be left behind.⁶

The SDGs have been broadly divided into three categories. The first group that includes the first seven SDGs are extensions of the MDGs. The second group covers Goals 8, 9, and 10 and includes jobs, infrastructure, industrialization, and distribution. The third group is on sustainability and urbanisation and covers the last seven goals: sustainable cities and communities, life below water, responsible consumption and production; climate action; resources and environment; peace and justice; and the means of implementation and global partnership for it.

The results framework developed for Agenda 2030 includes 17 SDGs, which set quantitative and qualitative objectives across the social, economic and environmental dimensions of sustainable development to be achieved by 2030. The SDGs are further disaggregated into 169 targets. The targets are indeed global in nature and universally applicable. But at the national level they have

to take into account the national realities, capacities and levels of development and to respect national policies and priorities. Each country can set its own national targets, considering local circumstances, and can decide how these global targets are incorporated into national policies and strategies.

The implementation of the Agenda requires the involvement of a wide spectrum of partners, including governments, civil society, private sector, the UN system, and other actors such as national parliaments, regional and local governments, academia, NGOs, beneficiaries and communities. Follow-up and review are integral part of the implementation and countries are committed to monitor the implementation of the SDGs. A set of 232 indicators and a monitoring framework had been developed at the global level by the Inter-Agency and Expert Group on SDG Indicators (IAEG-SDGs) and presented to the UN Statistical Commission in March 2016. These global indicators are to be complemented by indicators at the national and regional levels by each country.

The SDGs are not legally binding. However, they have become de-facto international obligations and countries are expected to reorient domestic spending priorities to achieve the goals. Countries have to take ownership of the programme and establish appropriate national framework for achieving the goals. Further, they are responsible for monitoring the progress made in implementing the goals and targets at the national level till 2030.

At the global level, designated agencies of the UN oversee the implementation of the SDGs. The High-level Political Forum on Sustainable Development serves as the central UN platform for monitoring and follow-up of the SDGs. The Division for Sustainable Development Goals (DSDG) in the United Nations Department of Economic and Social Affairs (UNDESA) provides basic support and capacity building for the SDGs and their related thematic issues, including water, energy, climate, oceans, urbanization, transport, science and technology and so on. DSDG plays a cardinal role in the implementation of the 2030 Agenda and provides advocacy and outreach activities.

2. TRACKING SDG GLOBAL ACHIEVEMENT - WATER AND SANITATION

Impact of SDG-6 on other goals

Progress on Sustainable Development Goal 6 is very critical for the achievement of several other SDGs. SDG

6 calls upon all countries to “ensure availability and sustainable management of water and sanitation for all”. Agenda 2030 places water and sanitation at the core of sustainable development, cutting across sectors and regions.

There exist robust synergies between the targets of Goal 6 and the other goals of the Sustainable Development Agenda. The interventions to achieve the targets of SDG 6 extend far beyond achieving SDG 6 since they contribute to the success of other SDGs. The Sustainable Development Goal 6 has direct impacts on at least eight other SDGs. These include: poverty eradication (SDG 1), ending hunger by improved nutrition (SDG 2), ensuring healthy lives and promoting well-being (SDG 3), education (SDG 4), gender equality (SDG 5), inclusive cities (SDG 11), life below water (SDG 14), and terrestrial ecosystem (SDG 15).⁸

In order to analyse the achievement of India on SDG 6 in the right perspective, it would be appropriate to track the achievement of the different targets on water and sanitation during the past five years at the global level. The analysis further provides the details of the targets and indicators associated with the Goal on water and sanitation.

Eight targets have been set for SDG 6. Each of these targets has been analysed based on selected indicators. The targets and indicators are mentioned at the outset of the analysis of each target. The main source of information for tracking global achievements in SDG 6 is the document titled “Summary Progress Update 2021 – SDG 6 – Water and Sanitation for All (Version: 1 March 2021)” by UN-Water.⁹

GOAL 6: ENSURE AVAILABILITY AND SUSTAINABLE MANAGEMENT OF WATER AND SANITATION FOR ALL

6.1 Safe and Affordable Drinking Water

6.1 “By 2030, achieve universal and equitable access to safe and affordable drinking water for all”

Indicator 6.1.1 monitors the proportion of population using safely managed drinking water services. A safely managed service denotes an improved drinking water source that is accessible on the premises, available when needed, and free of faecal and chemical contamination. Improved water sources include piped water, boreholes

or tube wells, protected dug wells, protected springs and packaged or delivered water. Access to safe drinking water in homes, healthcare facilities, schools and workplaces effectively reduces water-borne disease and malnutrition, which are leading causes of death among children under five.

Globally, billions have gained access to safe and affordable drinking water - 1.6 billion people since 2000. Seven out of ten people used safely managed drinking water services in 2017. However, too many have been left behind. In 2017, around 2.2 billion people – 29 per cent of the world's population – still lacked drinking water services on premises, available when needed and free from contamination. Most regions are off track. Seven out of 8 SDG regions are currently off track to achieve universal coverage by 2030. 785 million people still lack even basic drinking water services. Among these, 8 out of 10 live in rural areas and nearly half live in least developed countries.

Achieving the SDG global target 6.1 by 2030 will require a four-fold increase in the current rate of progress. Achieving universal access to basic drinking water by 2030 will require a doubling of current rates of progress, and achieving universal access to safely managed drinking water by 2030 will require a four-fold increase in the current rate of progress.

6.2 Sanitation Facility

6.2 By 2030, achieve access to adequate and equitable sanitation and hygiene for all, and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations

Indicator 6.2.1a measures the percentage of the population using an improved sanitation facility that is not shared with other households, and where the excreta are treated and disposed of in situ or transported through a sewer with wastewater and treated off-site. Improved sanitation facilities denote flush/ pour flush to piped sewer system, septic tanks or pit latrines, etc. If the excreta are not safely managed then people using those facilities will be classed as having a basic sanitation service, or limited service if shared with other households. Adequate sanitation and hygiene services at home, in schools and at workplaces are required to ensure that the females can participate in society on equal terms.

More than half the population of the world (55 %) lacked access to adequate sanitation, according to data available

in 2017. Proportion of population using safely managed sanitation services was 44% in 2015 and 45% in 2017. At the same time, 1.7 billion people have gained access to safely managed sanitation since 2000. Over two billion people did not have basic sanitation services. Seventy per cent of them lived in rural areas and 30 per cent lived in least developed countries. Open defecation remains a serious problem. Over 673 million people still practised open defecation in 2017 and more than 5 per cent of the population practised open defecation in 61 countries.

Hopefully the world will be able to eliminate open defecation by 2030, but achieving universal access to basic sanitation by 2030 will require a doubling of current rates of progress, and achieving universal access to safely managed sanitation by 2030 will require a four-fold increase in the current rates of progress. This calls for a substantial increase in investment in sanitation services.

6.2. 1b Hand washing facility with soap and water at home

Indicator 6.2.1b tracks the proportion of population with a hand washing facility with soap and water at home. Hand washing is a cost-effective intervention to improve public health by drastically reducing the spread of infectious diseases. Hand washing facilities may be fixed or mobile and include a sink with tap water, buckets with taps or basins designated for hand washing.

Sixty per cent of people have access to a hand washing facility at home. About 4.5 billion people had basic hand washing facilities with soap and water at home in 2017. But three billion people – 40 per cent of the world's population – still lacked a basic hand washing facility with soap and water at home in 2017. Around 55 per cent of people in rural areas and nearly three quarters of the population of Least Developed Countries lacked hand washing facilities with soap and water in 2017.

Achieving the SDG global target 6.2 by 2030 will require a four-fold increase in the current rate of progress. No SDG region is currently on track.

Wastewater treatment

6.3 By 2030, improve water quality by reducing pollution, eliminating dumping and minimizing release of hazardous chemicals and materials, halving the proportion of untreated wastewater, and increasing recycling and safe reuse globally

The proportion of domestic and industrial wastewater flow, safely treated before it is disposed to lakes, rivers, ocean or soil is a major indicator of sanitation (6.3.1). The domestic wastewater includes both sewage and faecal sludge, treated on-site and off-site. Wastewater collection and treatment help to protect freshwater systems and human health, as detrimental pathogens, nutrients and other types of pollution are prevented from entering the environment.

There is insufficient data to assess global progress in the treatment of domestic and industrial wastewater. In 2015, 75 countries had adequate data to produce estimates on the treatment of domestic wastewater. Most of these countries are high-income countries, representing only a quarter of the world population, and as such not globally representative. Even in these 75 countries, only 59 per cent of the domestic wastewater is safely treated, but the situation varies across countries. More than 90 per cent is safely treated in one third of the countries and less than 50 per cent is treated in another one third. The remaining 41 per cent of the untreated domestic waste water is let out into the environment. Data coverage is very poor outside Europe and North America. Improving data coverage is an essential first step to accelerating efforts in wastewater collection and treatment.

Industrial wastewater

Data on industrial wastewater discharges are seldom aggregated at the national level. In 2017 only two countries in the world reported on the proportion of industrial wastewater safely treated.

Disaggregation of data on wastewater generation by source assists in identifying heavy polluters and applying the 'polluter pays' principle to incentivize wastewater treatment and enforce water quality standards. Currently data coverage is very poor and wastewater monitoring is an essential requirement in wastewater collection and treatment and in ensuring water quality around the world.

Water quality

6.3.2 Proportion of bodies of water with good ambient water quality

Measures to protect, restore and monitor water quality will have positive effects on the health of the ecosystems on land and water. The proportion of water bodies with good ambient water quality is a major indicator (6.3.2) that inform on the most common pressures on water

quality at the global level. In all regions of the world and in most countries including low, medium and high-income countries, many water bodies are still in good condition. In 63 out of 89 reporting countries, over 60 per cent of water bodies have good quality. Of the 75,458 water bodies assessed in 89 countries, 44,937 water bodies (60 %) have good ambient water quality.

Data coverage is inadequate. Out of 48 countries reporting both in 2017 and 2020, 21 are on track to improve water quality. These are countries that have a good monitoring system.

Lack of groundwater data is a major handicap. Of the 89 countries reporting water related data, only 52 have information about groundwater and groundwater represents the largest share of freshwater in a country. Information on the hydrogeological environment, the pressures on water sources and measures to monitor them effectively are not available in many countries.

Untreated wastewater and agriculture pose the greatest threats to environmental water quality globally. Release of excess nutrients into rivers, lakes and aquifers damages the ecosystems. Low-, middle- and high-income countries alike report on bad water quality, but the underlying drivers are likely to be different. In many countries water quality data are not collected regularly. The consequence is that over three billion people are at risk, as the quality of their freshwater ecosystems is unknown.

It has been observed that data on water quality reported by developing countries lacked details, with the indicator calculated using relatively few measurements and without suitable environmental water quality standards. This lowers the reliability of the reporting.

Protection is easier than restoration. Efforts to protect the water bodies must be initiated. Urgent action is required to improve monitoring systems for both surface and groundwater and to define water quality standards. Enhancing farming management practices and increasing wastewater treatment are imperative. The policy actions required urgently include capacity building to expand country monitoring networks and to establish national water quality standards.

6.4 Water-use efficiency

6.4 By 2030, substantially increase water-use efficiency across all sectors and ensure sustainable withdrawals and supply of freshwater to address water scarcity, and

substantially reduce the number of people suffering from water scarcity

Increasing water-use efficiency, by measures such as repairing leaking water distribution systems, using less thirsty crops and investing in new technology, results in more sustainable food and economic production systems. Water saving essentially implies energy savings.

Between 2015 and 2017, water-use efficiency increased by about 4 per cent globally, to 23.4 USD/m³. The above estimation is based on data from 88 countries, representing 59 per cent of the global population. Accelerated efforts are needed in agriculture, the thirstiest economic sector. Lack of data remains one of the main constraints to assess water-use efficiency.

6.4.2 Level of water stress:

Water stress means freshwater withdrawal as a proportion of available freshwater resources. Generally, 72 per cent of all water withdrawals are used by agriculture, 16 per cent by municipalities for households and services, and 12 per cent by industries. When a territory withdraws 25 per cent or more of its renewable freshwater resources, it is said to be 'water-stressed'.

Indicator 6.4.2 tracks the quantity of freshwater being withdrawn by all economic activities, compared to the total renewable freshwater resources available. Globally less than 25% of available water resources are being withdrawn, and they are not considered water-stressed. In the Northern Africa and West Asia region, many countries withdraw all their renewable water resources (100%) or even more (up to 1000%), relying on non-renewable resources that eventually will run dry.

At the global level, 17.3 per cent of total renewable freshwater resources available are being withdrawn. However, this value hides large regional variations. It is pertinent to note that five out of 11 regions have water stress values above 25 per cent. Between 2000 and 2017, 3 out of 11 regions slightly reduced their water stress, whereas 2 increased their water stress significantly. In 2017, five out of eleven regions had water stress values above 25 per cent. Only three regions reduced their water stress during the period between 2000 and 2017.

Healthy ecosystems are essential to stabilize the water cycle, allowing more recharge for aquifers and a steadier runoff in surface streams. Improving farming systems will help reduce the demand for water and alleviate the pressure on ecosystems. Unsustainable usage of water

is a major challenge. Globally, over the past 10 years, 84 countries – 42 per cent of reporting countries – are not consistently reporting water stress data, most of them in Sub-Saharan Africa.

Besides an efficient water distribution system and a sustainable agriculture, reuse of wastewater must be a key strategy in reducing water stress, together with water saving technology throughout the economy and awareness campaigns to reduce the use of water in households.

6.5 Integrated Water Resources Management

6.5 By 2030 implement integrated water resources management at all levels, including through trans-boundary cooperation as appropriate

6.5.1 Degree of integrated water resources management implementation

Sustainable, integrated water resources management is vital for long-term social, economic and environmental well-being – the three pillars of the 2030 Agenda. It helps to balance competing water demands from across society and the economy.

Indicator 6.5.1 tracks the degree of integrated water resources management (IWRM) implementation, by assessing the four key dimensions of IWRM: enabling environment, institutions and participation, management instruments and financing.

The extent of implementation of integrated water resources management was 49% in 2017 and 54% in 2020. This shows a modest increase of 5 percentage points in the global average implementation of IWRM. About 129 countries are not on track to meet the global target of achieving sustainably managed water resources by 2030. Speed of implementation is slow in Central and Southern Asia, Latin America and the Caribbean, Oceania and Sub-Saharan Africa.

To meet the global target, the current rate of implementation needs to double. Countries must strengthen their multi-stakeholder monitoring systems to understand main barriers and to identify priority action areas to accelerate progress.

6.5.2 Arrangements for trans-boundary basin water cooperation

Trans-boundary basins are rivers, lakes or aquifer systems shared between two or more countries. The indicator used (6.5.2) assesses the extent to which trans-boundary

basin areas are covered by operational cooperation arrangements. Many rivers, lakes and aquifers in transnational boundaries are lacking operational arrangements for water sharing in several countries, especially in Asia, Latin America and North Africa. However, trans-boundary cooperation is advanced in countries of Europe, North America and Sub-Saharan Africa.

This is an area that has generated high levels of engagement. Of the 153 countries sharing trans-boundary basins, 128 submitted national reports in 2020 on the status of their cooperative arrangements. The need for reporting itself has given some countries the impetus to negotiate new cooperative arrangements.

The indicator value is available for 87 countries and an average of 59 per cent of countries' trans-boundary basin areas (2020) have an operational arrangement for water cooperation. However, only Europe, North America and Sub-Saharan Africa are on track to meet the global target and 22 countries have met the target as of 2020.

6.6 Change in water-related ecosystems

6.6 By 2020 protect and restore water-related ecosystems, including mountains, forests, wetlands, rivers, aquifers and lakes

6.6.1 Change in the extent of water-related ecosystems over time

Protecting and restoring water-related ecosystems will strengthen resilience to climate change. Wetlands, for instance, trap carbon from the atmosphere and protect coastal areas from storm surges and inland areas from both floods and droughts by retaining water.

Indicator 6.6.1 tracks changes in water-related ecosystems over time. Earth observations and satellite imagery are used to trace changes to surface water bodies such as lakes, large rivers, flooded wetlands and reservoirs.

Proportion of river basins showing high surface water extent changes was 12% in 2015 and 21% in 2020. Rapid changes in freshwater ecosystems have been observed recently. In all countries and regions some river basins are experiencing significant changes in the extent of their surface water. Increases or declines in surface water area have been observed in Latin America, Sub-Saharan Africa and all parts of Asia. Over a fifth of the world's river basins have recently experienced either rapid increases in their surface water area, indicative of flooding or

rapid declines in surface water area indicating drying up of lakes, reservoirs, wetlands, floodplains and seasonal water bodies.

Poor quality lake water with significant turbidity conditions is found in several countries. Lakes with high turbidity can adversely impact human and ecosystem health. High turbidity indicates water pollution. Of the 2,300 large lakes assessed, nearly a quarter of them recorded high to extreme turbidity readings in 2019.

Another major change is the steady loss of coastal and inland wetlands. Over 80 per cent of wetlands are estimated to have been lost since the pre-industrial era. What remains is only 10-12 million km². Mangroves have declined globally by 4.2% since 2000. The targets set for 2020 have not been achieved. Massive loss of all types of water-related ecosystems over centuries calls for accelerated efforts to protect and restore them.

6. An Official Development Assistance (ODA)

6.a. By 2030, expand international cooperation and capacity-building support to developing countries in water and sanitation related activities and programmes, including water harvesting, desalination, water efficiency, wastewater treatment, recycling and reuse technologies.

The indicator (6.a.1) used is the amount of water and sanitation-related official development assistance (ODA). ODA includes both grants and concessional loans, with a grant element of at least 25 per cent.

Development assistance to the water sector has been increasing. ODA disbursements increased 3 per cent from 8.98 billion USD in 2015 to 9.25 billion USD in 2019. ODA commitments to the water sector rose 11 per cent during the same period. Gaps in commitments and disbursements are growing. The gap between ODA funds committed and those disbursed for the water sector had narrowed to US\$ 100 million in 2016. The gap increased to US\$ 2.6 billion by 2019. Sub-Saharan Africa receives one third of water sector ODA and the disbursements to the region increased from US\$ 2.5 billion in 2015 to US\$ 3.2 billion in 2019.

6. b. Participation of local communities in water and sanitation management

Target 6.b: "Support and strengthen the participation of local communities in improving water and sanitation management."

Participation is defined as a mechanism by which individuals and communities can meaningfully contribute to management decisions. Participation of users and communities will ensure sustainable solutions to most aspects of SDG 6.

The indicator (6.b.1) used to track the participation of local communities in water and sanitation management within a country assesses the existence of procedures in law or policy for participation, as well as the actual level of participation. The data on the indicator can be disaggregated by six sub-sectors: drinking water (rural and urban), sanitation (rural and urban), hygiene promotion and water resources planning and management. Of the 109 reporting countries, two thirds have participation procedures that are defined in laws or policies in all water and sanitation sub-sectors. However, the level of community and user participation is low.

High levels of community and user participation for collaborative management and decision-making was reported by only 14 of the 109 reporting countries. Most countries report medium levels of user and community participation in respect of rural drinking water and sanitation and water resources management. Users and communities are occasionally or regularly consulted, but not to the extent of collaboration or representation in the decision-making processes.

The reasons attributed for low involvement of target users and communities are financial and human resources constraints for capacity building programmes. Among the reporting countries, 60 per cent reported that human and financial resources were less than 50 per cent of what was needed to support community participation.

3. SDG 6: TRACKING PROGRESS IN INDIA

SDG Implementation in India

The Government of India has proclaimed strong commitment to Agenda 2030, which covers the Sustainable Development Goals. At the Sustainable Development Summit in New York on 25th September 2015, the Prime Minister of India strongly affirmed India's commitment to Agenda 2030 and the SDGs. He drew attention to the fact that we live in "an age of unprecedented prosperity, but also unspeakable deprivation around the world" and pointed out that "much of India's development agenda is mirrored in the Sustainable Development Goals".

NITI Aayog is the nodal institution in the country to coordinate all the SDG efforts at the national and sub-national levels. However, SDG implementation cannot be limited to the national level. The federal structure of the country, with the Constitutional division of powers and responsibilities between the Central and State Governments, mandates that SDG implementation is a shared responsibility. For SDGs implementation in the country, the States must play the leading role.¹⁰

States and Union Territories have created appropriate institutional structures for implementation of SDGs. All States and UTs have identified and tasked nodal departments for implementation of SDGs, often departments dealing with planning and finance. In several states there are nodal mechanisms within every department and at the District levels to make coordination, convergence and data management more precise and predictable.

High-level committees have been established at the State level for SDG implementation and monitoring. The committees are normally chaired by the Chief Secretary, with all departmental heads as members. In a few cases, these committees are also headed by the Chief Minister, which lends more thrust to the SDG initiatives. Some states have established SDG cell in the nodal department engaging professionals with technical expertise. NITI Aayog conducts capacity building programmes for state government officials on SDG adoption, implementation, and monitoring and the states in turn organise capacity building programmes for stakeholders at different levels.

SDG India Index

An SDG India Index has been developed, largely at the initiative of NITI Aayog and the Ministry of Statistics and Programme Implementation. The SDG India Index measures the progress of all States and Union Territories in their implementation of programmes to achieve SDGs. The first edition of the index was launched in December 2018; the second edition on 30 December 2019; and the third edition in February 2021.

The 2018 edition of the index covered 13 SDGs and the 2019 edition covered all the 17 goals. Whereas the 2018 edition used 62 indicators, the 2019 edition included 100 indicators; to improve coverage of the SDG targets, more indicators are to be included in future.

India's Progress in SDG 6: An Overview

India's progress in respect of SDG 6 (water and sanitation) during the past five years has been significant, as per the multi-stakeholder evaluations reported by NITI Aayog and the Ministry of Statistics and Programme Implementation. While the progress evaluations by NITI Aayog¹¹ are rather broad and general, progress report by the Ministry of Statistics and Programme Implementation (MoSPI)¹² provides detailed information on specific targets and indicators. The assessment of India's Progress in SDG 6 presented here starts with the evaluation by NITI Aayog and proceeds to a detailed analysis in line with the assessment of the MoSPI.

As of July 2019, about 96 per cent of households had access to an improved source of drinking water. Over 81 per cent rural households had access to 40 litres of drinking water per capita per day (LPCD) and another 15.71 per cent had partial access. The objective is to ensure full access to water for all. The target is to supply every rural household with piped water at the rate of 55 litres per capita per day by 2024 under the Jal Jeevan Mission (Water as Life Mission).

The recently launched campaign Jal Shakti Abhiyan aims at improving water conservation, rainwater harvesting and renovation of traditional and other water bodies. The campaign has undertaken over 3,50,000 water conservation projects in 256 districts in India. A new and unified ministry – the Ministry of Jal Shakti – has been established to ensure effective water management challenges.

On the sanitation front India has been implementing a well-targeted and time bound strategy called Swachh Bharat Mission (SBM) since 2014. Open defecation has been a major issue confronting India. Hardly half the Indian households had access to latrine facilities in 2014 and only 30 per cent of the waste water and sewage originating in urban India was treated. With the success of Swachh Bharat Mission, on October 2019, the country was declared open defecation free (ODF). According to official estimates, 100 % of rural households and 97 % of urban households had individual household toilets by that date.¹³

SDG 6 Index Score

For SDG 6 and its seven national indicators, the overall Index Score for the country was 88, on a scale 0 -100 in

2020. The Index Scores range between 69 and 96 for the States, and between 61 and 100 for the Union Territories. The significant variation across states indicates the need for identifying factors responsible for such divergence in some states.

Sanitation and Hygiene for All

The Swachh Bharat Mission (SBM or Clean India Campaign), started on October 2, 2014, has achieved the target of making India open-defecation-free (ODF) by constructing over 109 million household and community toilets. The programme was implemented in 6,03,175 villages in 706 districts across the country. Rural households with individual household toilets increased from 38.7 % in 2014-15 to 100 % in 2019. Urban households with individual household toilets increased from 88.8 % to 97.22 % during the same period.

Conversion of unsanitary toilets to pour-flush toilets, municipal solid waste management and awareness generation for positive behavioural change were part of the SBM programme. The Clean India Campaign succeeded in effecting a behavioural transformation towards better sanitation and hygiene. The use of toilets has increased dramatically over the five-year period with 97 per cent of rural households using them. Separate toilets for girls have been built in 97.43 per cent schools across the country as part of SBM. The improvement in sanitation has had a positive influence on the life and health of women and girls.

The government of India has initiated a 10 Year Rural Sanitation Strategy (2019-2029), which focuses on sustaining the sanitation behaviour change and increasing access to solid and liquid waste management. The strategy incorporates a framework to guide relevant stakeholders such as local governments, policy makers and implementers in their planning for ODF Plus, where everyone uses a toilet, and every village has access to solid and liquid waste management.

Water Sources and Water Quality

Several programmes have been initiated by the government for protection and rejuvenation of water sources as well as to ensure the quality of water. Across the country, 351 polluted river stretches have been identified on 323 rivers. Under the National River Conservation Plan, several programmes are being implemented to clean the rivers. One of the leading projects is 'Namami Gange',

which is an Integrated Conservation Mission launched to accomplish the twin objectives of pollution abatement and conservation and rejuvenation of the river Ganga.

Major ground water quality issues include salinity and contamination. Water salinity affects 212 districts and the presence of nitrates impact 386 districts. Several districts have multiple toxic contaminants in their ground water. Surface water pollution is also a challenge. A comprehensive strategy has been implemented to monitor water quality by the Central Water Commission, which assesses water quality at 552 key locations and covers all major river basins of the country.

The quality of ground water is monitored by the Central Ground Water Board through a network of about 15,000 observation wells located all across the country. Polluting industries are identified and effluents are monitored through control and compliance measures.

SDG 6 Progress in India – Targets, Indicators and Outcomes

This section tracks the achievements of India in the implementation of programmes for SDG 6. Eight targets have been set and several indicators have been framed for seven of these targets. Goal 6 specifies: “Ensure availability and sustainable management of water and sanitation for all.” The detailed analysis is based on the different reports of the Ministry of Statistics and Programme Implementation, etc.

Access To Safe And Affordable Drinking Water

Target 6.1 aims at the following: “By 2030, achieve universal and equitable access to safe and affordable drinking water for all.” Two indicators are used to measure the relevant programmes implemented. The indicators and the outcome, based on available data, are as follows:

Indicator 6.1.1: Percentage of population getting safe and adequate drinking water within premises through Pipe Water Supply (PWS). This has increased from 35.76 % in 2015 -16 to 50.66 % in 2019-20.

Indicator 6.1.2: Percentage of population using an improved drinking water source (Rural). The percentage of population using an improved drinking water source in the rural sector has increased from 94.57 % in 2015 -16 to 96.96 % in 2019-20

Sanitation Facilities

Target 6.2: “By 2030, achieve access to adequate and equitable sanitation and hygiene for all and end open

defecation, paying special attention to the needs of women and girls and those in vulnerable situations.”

Three indicators are used and the outcomes measured are as follows:

Indicator 6.2.1: Proportion of households having access to toilet facility in rural areas: This has increased from 50.90% in 2015 -16 to 100.00 % in 2019-20

Indicator 6.2.2: Percentage of Districts achieving Open Defecation Free (ODF) target: Open

Defecation Free districts have increased from 0.72 % in 2015 -16 to 100.00 % in 2019-20

Indicator 6.2.3: Proportion of schools with separate toilet facility for girls, (in percentage): Schools with separate toilet facility for girls was 96.90 % in 2015 -16 and 94.38 % in 2019-20.

Waste Water Treatment And Water Quality

Target 6.3: “By 2030, improve water quality by reducing pollution, eliminating dumping and minimizing release of hazardous chemicals and materials, halving the proportion of untreated waste water and substantially increasing recycling and safe reuse globally”

Three indicators are used to assess the extent of waste water treatment and the quality of water available.

Indicator 6.3.1: Percentage of sewage treated before discharge into surface water bodies: This was 27.96 % in 2020

Indicator 6.3.2: Proportion of water bodies with good ambient water quality: Water bodies with good water quality have increased from 87% in 2015 to 90% in 2019.

Indicator 6.3.3: Proportion of waste water treatment capacity created vis-a-vis total generation: Data was not available at the time of assessment.

Water-Use Efficiency

Target 6.4: “By 2030, substantially increase water-use efficiency across all sectors and ensure sustainable withdrawals and supply of freshwater to address water scarcity and substantially reduce the number of people suffering from water scarcity”

The three indicators used and these relate to ground water withdrawal and per capita availability of water.

Indicator 6.4.1: Percentage of ground water withdrawal

against availability: Ground water withdrawal has increased slightly from 61.50 % in 2011 to 63.33% in 2017.

Indicator 6.4.2: Per capita storage of water (in m³/person): Per capita storage of water in m³ /person has increased from 198.02 in 2015-16 to 253.39 in 2019-20.

Indicator 6.4.3: Per capita availability of water (in m³ / year): This has declined from 1,508 in 2015 to 1,486 in 2021.

Integrated Water Resources Management

Target 6.5: “By 2030, implement integrated water resources management at all levels, including through trans-boundary cooperation as appropriate”

Indicator 6.5.1: Percentage area of river basins brought under integrated water resources management: This has not been assessed as information was not available

Protecting Water-Related Ecosystems

Target 6.6: “By 2020, protect and restore water-related ecosystems, including mountains, forests, wetlands, rivers, aquifers and lakes”

Three indicators have been identified, but information is not available in respect of two indicators.

Indicator 6.6.1: Percentage of blocks/mandals/taluka over-exploited: There has been only a modest increase in the percentage of over-exploited areas and it increased from 16.20 in 2011 to 17.00 in 2017.

Indicator 6.6.2: Percentage sewage load treated in major rivers: Information was not available for assessment.

6.6.3: Biological assessment information of surface water bodies: For want of information, this has not been assessed.

International Cooperation And Capacity-Building Support

Target 6.a: “By 2030, expand international cooperation and capacity-building support to developing countries in water- and sanitation-related activities and programmes, including water harvesting, desalination, water efficiency, wastewater treatment, recycling and reuse technologies”

National Indicator for this target is under development and therefore this target was not tracked.

Participation Of Local Communities

Target 6.b: “Support and strengthen the participation of local communities in improving water and sanitation management”

To assess the extent of participation of local communities in the implementation of SDG-6, one indicator has been developed.

Indicator 6.b.1: Proportion of villages with Village Water & Sanitation Committee [VWSC]: Relevant information was not available to track the extent of local participation in implementing SDG-6.

4. PROGRESS ASSESSMENT IN INDIA - A CRITIQUE

Reports on the progress of implementation of SDGs in India are the reports of two government agencies: NITI (National Institute for Transforming India) Aayog and National Statistical Office under the Ministry of Statistics and Programme Implementation. The SDG evaluation reports of these organisations makes tall claims on the achievements of the country in terms of drinking water and sanitation. However, the very same organisations dispute these claims in their other reports. NITI Aayog, in their report titled “Composite Water Management Index, 2018’ highlights the drinking water crisis in India. National Statistical Office contradicts their SDG 6 findings on sanitation facilities in rural households in their sample survey report titled “Drinking Water, Sanitation, Hygiene and Housing condition in India: NSS 76th Round (July –December 2018).” This section provides critical comments on the SDG progress assessments on water and sanitation in India.

Critique on Sanitation

Prime Minister Narendra Modi had announced on October 2, 2019 that rural India was Open Defecation Free (ODF). The implication was that every household in India had access to a toilet. The Swachh Bharat Mission database had showed that rural India had achieved 100% toilet coverage. According to the NSO survey report on ‘Drinking Water, Sanitation, Hygiene and Housing Condition in India’, 29% of rural households and 4% of urban households did not have access to toilets.

Water and NSS 76th Round

The NSS survey on ‘Drinking Water, Sanitation, Hygiene and Housing Condition’ in India (NSS 76th round) conducted during July - December 2018, brought out some significant information on the provision of drinking water in the country. The coverage of the sample survey was very comprehensive with a sample size of 1,06,838 households (63,736 in rural areas and 43,102 in urban

areas) drawn from 5,378 rural areas and 3,614 urban areas.

Some of the key findings of the NSS 76th round survey on water is given below.¹⁸

1. There are two major sources of drinking water for the Indian households - hand pump in the rural areas and piped water into dwelling in the urban areas. The major source of drinking water of the household was hand pump in the rural areas and piped water in dwelling in the urban areas. In the rural areas 42.9 per cent of the households used hand pump as the principal source of drinking water. In the urban areas 40.9 per cent of the households used pipe water connected to their dwellings as the principal source of drinking water.
2. While 48.6 per cent of the households in the rural areas had exclusive access to the principal source of drinking water, it was 57.5 per cent for the households in the urban areas.
3. The survey revealed that 87.6 per cent of the households in the rural areas and 90.9 per cent in the urban areas had sufficient drinking water throughout the year from the principal source.
4. Whether the households had drinking water facilities within the household premises is an important factor and a significant difference exists in the rural and urban sectors in this respect. While 58.2 per cent of the households in the rural areas had drinking water facilities within the household premises, 80.7 per cent of the households in the urban areas had it within the household premises.
5. The survey revealed that 94.5 per cent of the households in the rural areas and 97.4 per cent of the households in the urban areas used 'improved source of drinking water'.
6. Whether the households used improved source of drinking water located in the household premises which was sufficiently available throughout the year is a pertinent question. This was the case for 1.4 per cent of the households in the rural areas and 72.0 per cent of the households in the urban areas.
7. Access to bathroom is another significant factor. Over 56.6 per cent of the households in the rural areas and 91.2 per cent of the households in the urban areas had access to bathroom.

8. Whether the bathrooms were attached to the dwelling unit is another significant factor. Among the households which had access to bathroom, 48.4 per cent in the rural areas and 74.8 per cent in the urban areas used bathroom attached to the dwelling unit.

Some of these findings call into question the conclusions of the official review reports on SDG 6 implementation in India. They further reveal a significant rural - urban divide regarding the progress in providing clean water to the households. The rural households are at a definite disadvantage. Access to water remains a challenge in India. The NSS survey data show that only one in every five households have access to piped water connections and rural areas continue to lag behind in terms of access to piped water.

The NSS 76th round data shows that groundwater is the most reliable source of drinking water for 43 per cent of the rural population. Over 58.3 per cent of households still rely on hand pumps, tube wells, public taps, protected or unprotected wells, piped water from neighbour and private or public taps for their water. As high as 48.6 per cent rural households and 28 per cent urban households have to survive without access to an improved source (devoid of contamination/safe) of drinking water throughout the year. Further, 11.3 per cent households do not get sufficient drinking water from their primary sources throughout the year. The national health survey NFHS-5 (2019-2020) also shows that while access to drinking water from safe and improved sources has increased in the 22 states surveyed, as compared to NFHS (2015-2016), rural areas still continue to lag.

There are several reports which indicate that the claims in the SDG 6 progress reports are unrealistic. A CAG Audit Report on the subject came to similar conclusions. The Comptroller and Auditor General (CAG) of India submitted its report on 'National Rural Drinking Water Programme' on August 7, 2018. The audit was conducted for the period 2012-17.

Launched in 2009, the National Rural Drinking Water Programme (NRDWP) was aimed at providing safe and adequate water for drinking, cooking and other domestic needs to every rural person on a sustainable basis. Total allocation of Rs 89,956 crore (central share of Rs.43,691 crore and state share of Rs 46,265 crore) was provided for the programme during 2012-17. NRDWP aimed to achieve certain objectives by December 2017.

However, these objectives were not attained. One objective was to provide all rural habitations, government schools, and anganwadis access to safe drinking water. However, only 44% of rural households and 85% of government schools and anganwadis were provided access. Another objective was to provide 50% of rural population drinking water (55 litres per capita per day) by piped water supply. Only 18% of rural population was provided piped drinking water. Another objective was to give household connections to 35% of rural households. Household connections were given to 17% of rural households.¹⁹

Water Resource Management Problems

The present review of the India's progress in SDG 6 implementations brings out some pertinent issues. Some of these are not officially recognised. However, in the country's journey towards achieving Agenda 2030, some of these issues need to be recognised and tackled.

Water Resources in India

Freshwater is a rare and valuable resource. Drinking water is mostly derived from surface water sources like rivers, streams, ponds and lakes and from groundwater that is pumped via hand pumps from borewells, tube wells and dug wells. The Central Water Commission (CWC) has been periodically assessing the country's overall water resources development. The water resources potential of the country, which occurs as a natural runoff in the rivers, is about 1999.20 Billion Cubic Meters (BCM). This is almost equivalent to 4% of the total river water of the world. Due to various constraints of topography and uneven distribution over space and time, only about 1123 BCM of the total annual water potential can be used. This consists of 690 BCM of utilizable surface water and 433 BCM of ground water.²⁰

Demand- Supply Gap

India remains home for over 17 per cent of the world's population, but the country depends on just four per cent of the planet's freshwater resources. Water demand in the country is estimated to be twice the available water supply by 2030. Based on estimates by the Ministry of Water Resources, the total demand for water in India was 813 BCM in 2010, which was estimated to increase to 1,093 BCM by 2025 and 1,447 BCM by 2050. Some projections show that between 2025 and 2030 the total water demand of India will surpass the total available

water. As indicated by a report of the Union Water Resources Ministry, total water demand in the country is estimated to increase by 34 per cent by 2025 and over 78 per cent by 2050, indicating a major gap of around 30 per cent with respect to the replenishment rate capacity, signalling a serious water crisis in the nation.²¹

The present gap between demand and supply for drinking water both in rural and urban areas is large. Providing minimum 40 litres per capita per day (lpcd) to all in rural areas has been a problem. The standard water requirement in urban areas is 135 lpcd and the current total urban supply is merely 69 lpcd. According to a report of the Ministry of Drinking Water and Sanitation, of the total 17,26,031 rural habitations in the country, only 77 per cent have access to drinking water.

As per Government records, just 1% of India's rural areas had access to safe, usable water in 1980. By 2013, it had increased to 30%, but the majority of rural India continues to live without proper access to safe drinking water.²² A WaterAid report in 2016 ranked India among the worst countries in the world for the number of people without safe water. An estimated 76 million people in India had no access to a safe water supply in 2017, and the situation has been getting more serious. The Asian Development Bank has forecast that by 2030, India will have a water deficit of 50 per cent. The Union Ministry of Water Resources has estimated the country's current water requirements to be around 1100 billion cubic metres per year, which is estimated to be around 1200 billion cubic metres for the year 2025 and 1447 billion cubic metres for the year 2050.

Water scarcity

Water scarcity affects hundreds of millions of people across the country. A significant portion of the population does not have a reliable source of water for their daily needs. In June 2019, 65% of all reservoirs in India reported below-normal water levels, and 12% were completely dry. In the absence of water, farmers are unable to produce. The scarcity of water has rendered several valuable farmlands completely useless. The drought in 2019 even destroyed both the winter crops and the supplementary crops. Such reduced job opportunities in rural areas push farmers to migrate to the cities in search of jobs. This trend adds pressure to the already strained infrastructure in cities, where the demand for water continues to increase.

Since sufficient tap water is not available in many cities, residents rely on alternative water sources. People are forced to spend money to buy drinking water and the poor cannot afford it. The water crisis in India is exacerbated by the emergence of the so-called water mafia or 'tanker mafia'.

Reasons for scarcity

Climate change could be one of the reasons for water scarcity. Monsoon provides the primary source of water in India. While the South-West monsoon provides over 80% of rainfall in India, the North-East monsoon provides 10%-20%. In recent years, monsoons in India have become more sporadic, reducing the total rain in the country. In 2018, the North-East monsoon decreased by 44% and the South-West monsoon was deficient by 10%. During the first half of 2019, 91 major reservoirs in the country recorded a 32% drop in their water capacity, resulting in disasters such as the Chennai Water Crisis. On account of the lack of a long-term water management plan, many of the country's rivers either run dry or have been polluted.

Even though climate change has resulted in a reduction in rainfall and the water supply, the country still receives enough rainfall to meet the needs of over 1.3 billion people, according to the Central Water Commission. However, the country captures and stores only 8 per cent of its annual rainfall due to poor rainwater harvesting. Owing to rapid urbanisation and inefficient implementation of city planning, a lot of the ponds used to capture water have been lost. Treatment of wastewater for reuse has been an area almost not attempted in India. Over 80 per cent of domestic wastewater is drained out as waste and ends up flowing into other water bodies, including rivers and lakes.

The continued exploitation of groundwater caused the groundwater level in India to decrease, for instance, by 61 per cent from 2007 to 2017, according to the Central Ground Water Board (CGWB). As per the 2018 report of NITI Aayog, "the country was suffering from the worst water crisis in the history" and that 21 Indian cities will run out of ground water by 2020. Over 89% of the groundwater extracted in India is used for irrigation and indiscriminate and excess extraction of ground water for agriculture is unviable. The unregulated extraction of groundwater for farming has diminished the water resource, and therefore threatens the people who depend on these water sources for their daily needs.

Water Crisis in Large Cities

According to the report of Niti Aayog, 21 major cities, including Delhi, Bengaluru, Chennai, and Hyderabad, are expected to deplete their groundwater by 2020 and this would directly affect 100 million people. The Composite Water Index Scores published by the Niti Ayog show that only Gujarat, Madhya Pradesh, and Andhra Pradesh have efficient water resource management.

In general, large cities of India are facing water shortages, and many cities such as Mumbai, Jaipur, Bhatinda, Lucknow, Nagpur, and Chennai are facing acute water shortages. Urbanisation has been growing in India and the number of people living in urban areas has increased since 2001. This will lead many Indian cities to water crisis. Cities such as Mumbai, Jaipur, Nagpur, Bhatinda, and Lucknow have already started water rationing during the summer months. Cities impose cut on the daily water supply, especially prior to the onset of monsoon. Instead of daily cut in water supply, some cities, such as Chennai, provide water to its residents every alternate day.

Groundwater Exploitation

Ground water is the water that seeps through rocks and soil and is stored below the ground. The rocks in which ground water is stored are called aquifers and are typically made up of gravel, sand, sandstone or limestone. The overall contribution of rainfall to the country's annual ground water resource is 68%. The share of other sources such as canal seepage, return flow from irrigation, recharge from tanks, ponds and water conservation structures taken together will be around 32%.

India is the world's biggest groundwater user. The country extracted about 251 billion cubic metres of groundwater in 2010, compared to 112 billion m³ of groundwater extracted by the United States. According to a NITI Aayog report, 54 per cent of India's groundwater wells are declining. The indiscriminate extraction of groundwater, largely for irrigation, has resulted in decreasing levels of India's groundwater wells. The estimated total replenishable ground water is 433 BCM. Currently more than 85 per cent of India's rural domestic water requirements and 50 per cent of its urban water requirements are being met from ground water resources.

As of April 2015, the annual water availability of the country in terms of natural runoff (flow) in rivers is about 1,869 Billion Cubic Meter (BCM)/year. However,

the usable water resources of the country have been estimated as 1,123 BCM/year. Constraints of topography and uneven distribution of the resource in various river basins make it difficult to extract the entire available 1,869 BCM/year.²³ Of the 1,123 BCM/year, the share of surface water is approximately 690 BCM/year and the share of ground water is 433 BCM/year. Setting aside 35 BCM for natural discharge, the net annual ground water availability for the entire country is estimated as 398 BCM. Over exploitation of ground water is a major problem and the extent of over exploitation varies across the states. Groundwater development has increased from 58% in 2004 to 62% in 2011. Over 89% of groundwater extracted is used in agriculture, 9% is for domestic use and 2% is for industrial use.

Over 85% of rural domestic water requirements and 50% of urban water requirements are met by groundwater. India uses almost twice the amount of water in agriculture, compared to China and the United States. The number of over exploited districts has increased by five times between 1995 and 2011. In Delhi, Haryana, Punjab and Rajasthan, groundwater development is more than 100%, and this means that the annual groundwater consumption is more than the annual groundwater recharge. As reported by NITI Aayog (2018), Punjab and Rajasthan among the States and Delhi among UTs have the highest percentage of over-exploited blocks in the country, with more than three-fourths of the blocks falling under the over-exploited category.

Ground water contamination

Reportedly, almost 60% of the districts in India has issues related to availability or quality of groundwater. Ground water contamination implies the presence of some pollutants in ground water that are in excess of the limits prescribed for drinking water.

The common contaminants include arsenic, fluoride, nitrate and iron and these are geogenic in nature. Bacteria, phosphates and heavy metals are among the other contaminants and these are the result of human activities including domestic sewage, agricultural practices and industrial effluents. The contamination occurs through pollution by landfills, septic tanks, leaky underground gas tanks and through overuse of fertilizers and pesticides.

Water Pollution

Waste water treatment and water pollution are major issue that confronts SDG-6 implantation in the country.

Pollution levels have increased in surface water as well as ground water. Surface water sources are highly contaminated. Poor sewage disposal leads to most of the untreated sewage being drained into rivers and lakes and these serve as reservoirs of microbial contamination. Groundwater in the country has also been polluted and the presence of fluoride, arsenic, nitrates, iron, heavy metals and residues of harmful pesticide and fertiliser has been beyond permissible limits. Toxic materials from untreated industrial wastes and landfills add the pollutants.

During assessment of the SDG 6 progress in India, several observations have been made: "Fluoride contamination in groundwater has been found in 184 districts in 19 States; high levels of arsenic contamination in 26 districts of 4 States (Bihar, Chhattisgarh, West Bengal and Uttar Pradesh); high concentration of iron in groundwater in more than 1.1 lakh habitations in the country; and high concentrations of nitrates are found in many districts of 15 States." ²⁴ A major reason for pollution is the limited treatment of waste water and industrial effluents.

River pollution has been a major issue. Dumping of sewage waste and industrial effluents and abuse of the rivers have led to large sections of important rivers like Ganga and Yamuna becoming unfit for use. The Ganga, which flows through 11 states of India and provides water to more than 500 million people, is a classic case. Many areas of the Ganga in Bihar and Uttar Pradesh have become completely unfit for use. Incessant waste disposal, ranging from dead bodies and to industrial waste, makes the river highly polluted.

Approximately 500 million litres of wastewater from industrial sources are dumped into the Ganga, according to official data. Similarly, the Yamuna receives 850 million gallons of sewage every day from Delhi alone. It is significant to note that in 2018, the Central Pollution Control Board and National Green Tribunal of India reported that only 7% of the water in Ganga River was drinkable and only about 10% of the water could be used for bathing.

Public awareness and capacity building of local people are imperative to keep water bodies free from contamination. At the same time, it is also important to find policy solutions to ensure sustainable use of chemicals fertilizers and proper treatment of sewage and industrial waste.

NGO Involvement

Agenda 2030 has bestowed special attention on NGO involvement in the planning and implantation of SDGs.

While there was little role for NGOs in the formulation of MDGs, NGOs played significant role in developing the goals, targets and indicators of the SDGs. Participation of NGOs and local communities are included among the targets to be achieved and indicators have been developed to measure the extent of their participation. However, the progress reports of SDG implementations at the global and national levels explicitly state that the space provided for NGOs and the local communities is limited both at the global and the national levels.

Water and sanitation are areas where the NGOs have traditionally been active for several decades at the international, national and local levels. However, national governments show considerable reluctance to involve the civil society, as evidenced by the SDG progress assessment report. In India the SDG assessment reports mention that this target was not assessed. However, several NGOs in the country have created their own space for involvement in providing drinking water, in water conservation and in facilitating the creation of sanitation facilities. Awareness generation in particular is critical for successful community adoption and implementation of water and sanitation projects and that is the area where the civil society actors are eminently successful.

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Dr. Antony Gregory
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1. ST. JOSEPH'S PROVINCE, THIRUVANANTHAPURAM

Provided COVID Second Wave Fund for Caring the Needy

Province along with CMI managed institutions reached out to poor and needy people with immediate medical needs, food materials and sanitation facilities worth Rs.38,43,168 during COVID wave two. It was a great relief for thousands of families including over 2000 migrant laborer.

Provided New Dwelling for Needy Families

A new house was constructed to Ms. Susheela a widow with two kids with support from social work department. New dwelling is a blessing for her entire family amidst coronavirus pandemic. Housing construction work for other beneficiaries is under progress.



Disbursed Medical Aid for Deserving Families

Medical aid in cash worth lakhs of rupees provided for deserving families with cases of chronic ailments including parents of scholastics. Medical support helped poor families reeling under COVID crisis in a big way.

Tauktae Cyclone Relief Activities

Distributed Food Items and Sanitary Kits

Team of volunteers and staff working in social work department distributed food items and sanitary kits to hundreds of Tauktae cyclone affected families around Kochuthoppu, Vallakkadavu, coastal areas in Thiruvananthapuram.

Solidarity Response with COVID Pandemic

In solidarity with COVID pandemic hundreds of thousands poor families were reached out with food stuff, sanitary kits and financial help. Beneficiaries included affected families of parishes and student families of CMI managed schools in Kanyakumari district especially in Anjugram, Pilankalai, Kaliyal, Pallikonam, Muzhukode and Netta. Moreover, food kits were distributed among patients



and health workers in Kanyakumari Government Medical College and Hospital, Asaripallam, Nagercoil.

Villages Adjoining To CMI Houses Reached Out

During the pandemic wave two, team of volunteers and staff reached out to villages adjoining to CMI houses with sanitary items and food materials. Moreover, arrangements for student scholarships and fee concessions put in place at all CMI run schools in Kolkata Sub-Region.



Constructed New House

Under project KECSAP and CMI sub region jointly constructed and handed over a house to one the most deserving families in Amthala, Kolkatta.



Sargakshethra, Chethipuzha

Sarga Kshethra Charitable Trust essentially reaches out to affected families with all types of disasters. It also promotes activities related community-based disaster risk reduction programmes with diversified activities for disaster mitigation and community resilience. With support of the organisation, hundreds of thousands of families were supplied food materials, sanitary items and shoes. Beneficiaries included Taukte cyclone and COVID wave two affected people and grassroots level health workers.



2. ST. JOSEPH'S PROVINCE, KOTTAYAM

Community Care and Support to Senior Citizens

Project for community care and support to senior citizens implemented to address the needs and issues of elderly people living in five Panchayat of Idukki District, Kerala. Target area included Chakkupallam, Vandanmedu, Erattayar, Kanchiyar, Kamakshy and Kanjikuzhy panchayats. Chakkupallam panchayat has become self-sustaining under the guidance of VOSARD. Various schemes undertaken for senior citizens on eco-farming, seed money, goat rearing, medical aid, marriage assistance, and business enterprise.



Community Based Rehabilitation Programme

With the objectives of promoting welfare activities for the people with disabilities (PwDs), a state level networking namely Kerala Confederation of the Differently-Abled (KCDA) was started and registered under society's act. Number of PwDs identified through state level agency included 13,480 and with the active support of networking





organization differently abled people have been served through various welfare activities. VOSARD in association with CHAI-LF supported 212 children with various types of disabilities. Assistance included education aid, surgery and treatment support, medication and distribution of assistive devices.

CHILDLINE Centre, Kattappana

Kattappana, ChildLine centre in collaboration with VOSARD supported over 272 children in crisis. They were rescued and rehabilitated. Moreover, centre organized diversified training programme which included Anganwadi and ASHA workers issues, POCSO Act, and COVID-19 related issues.



Conducted Awareness Training Programme

Awareness class conducted for students and teachers on cybercrime. Hundreds of participants benefitted out of this session. Besides these, conducted series of training programmes for Anganwadi and Kudumbasree workers. Topics included suicide prevention, POCSO Act, compassion fatigue, cyber safety and drug addiction and healthy parenting techniques etc.



Open House Program

An open house program was organized for teachers and non-teaching staffs of St. Mary's school, Marikulam and St Mary's school, Vazhavara. It helped participants to know each other and their mode of working. It also replicated best practices, resolved issues and bottlenecks. Other stakeholders included PRI officials and child rescue officers.



Family Counselling Centre (FCC)

FCC started in 2004 with the support of Central Social Welfare Board, New Delhi and Kerala State Social Welfare Board (Social Justice). Through the centre hundreds of families were provided counselling enabling to live a happy life. During last six months, 164 cases were registered and follow up of old cases were done. Centre provided counselling services on problems such as depression, lockdown related issues, anxiety, marital maladjustment, family problems, property issues, alcoholism, personality problems, mood change and relationship conflict.

Service Providing Centre (SPC)

Service providing centre is functional since 2008 in collaboration with VOSARD to provide services related to domestic and other human rights violations. It is a project supported by Kerala State Social Welfare Board under Domestic Violence (Prevention) Act, 2005 for protection of women from domestic violence. With the support of a lady advocate legal hurdles and domestic related violation issues have been addressed and resolved free of cost. Hundreds of women suffering from domestic violence has been benefitted through the centre during the reporting period.

Jeevajyothi Apex Federation of The Disabled (JAF)

Federation is functional under district level disabled persons organization (DPO). VOSARD facilitate and promote the federation with support from Community Based Rehabilitation Programmes. Now, DPO has started functioning independently and addressed the needs of 1989 differently-abled persons within the district. At present, over 89 village level disabled persons organization



and 14 panchayat level organizations associated with the federation.

VOSARD Appointed As Local Level Committee (LLC)

Social Justice Department has appointed VOSARD as an NGO Member representative in Idukki district. Local Level Committee (LLC) has been constituted under National Trust chaired by the District Collector. LLC coordinates and facilitates range of issues pertaining to PwDs and link them with various government schemes and welfare programmes.



KAVAL Project

Kaval project was launched in January 2019 with support from Social Justice Department, Government of Kerala. Project activities are implemented and monitored by DCPU (District Child Protection Unit). It is to address psycho social care and reintegration of Children in

Conflict with Law. Over a period of time hundreds of children restored in life.

Women Empowerment and Child Development Project Supported By KKS

Project has been initiated with the support of Karl Kubel Stiftung (KKS) in Kanchiyar Panchayat. It is aimed at holistic development of marginalized families of target area through women empowerment and child development programme. As the project is at its first phase, women self-help groups and child clubs have been formed so far. All activities have been facilitated by community-based groups. It helps them to be more responsible and come to the mainstream. Project is to generate sustainable livelihood activities for the marginalized communities through group formation and income generating programmes.



Community Managed Projects at Vathikudy

With the support of revolving fund community has initiated integrated watershed programme at Vathikudy. Disaster relief works were carried out with the funding support by Bensheimhilft Germany and Karl Kubel Stiftung Germany). Under community initiatives schemes such as dairy unit, goat farming, biogas unit, nutrition garden, cattle shed, rain harvesting, vermi-compost unit and nursery garden going on well.



Food Security Program at Vandanmedu Panchayat

Here the people are greatly depending upon Tamil Nadu for cereals, pulses and vegetables which are expensive and grown using chemical fertilizer and toxic pesticides. With the support of VOSARD natural food crops have

powered by Kochi Province. Under the project, children from CASP community were given thousand rupees each as an interim support. It was a great relief for suffering families due to COVID crisis.

Distributed Food for Needy People

Night meals were distributed for poor patients admitted in Muvattupuzha general hospital. Hundreds of needy people were fed through this activity undertaken on every Thursdays.



Carmel Services and Charities (CSC)

In view of COVID second wave and review by the executive committee, onetime cash support worth Rs.15000/- each were given to each house under the province. Each house was directed to execute a project for the poor with local contribution. All recipients have submitted action taken report ensuring allocated project fund reached in to the hands of most needy families.

Constructed House for A Homeless Poor

A house was built at Pandipara parish in Idukki Diocese for a poor family. We could finish the work in one and a half month time with eight lack rupees with the cooperation of parishioners and province.



Started Carmel Ayurveda Project

Carmel ayurveda project in Bhoothathankettu was started in collaboration with Kalarikal Ayurveda hospital. During the inauguration held on 7th of February, 2021, managing director, of the hospital Dr. Shibu Varghese and other dignitaries were present. Carmel ayurveda hospital and tourism is a joint venture project envisaged to bring quality health care services to people in need including tourists through ayurvedic medicine and treatment method. Project would attract many tourists as the hospital would provide range of health services at an affordable rate.



Provided Health Insurance Cover For The Needy

In collaboration with star health insurance company, Fr. Rinoj Vattakanayil renewed policies of health insurance policy holders. Side by side, a greater number of needy people were motivated and enrolled to access quality health care and treatment services. This initiative helped poor people to meet their medical emergencies without any problem.

Launched C 30+ Matrimony.Com web site

In order to find suitable life partners for eligible youth C 30+ Matrimony.Com was launched.

As of now, there are number of youngsters in our society who could not enter into married life even in their 30's. In order to commemorate the celebration year of St. Joseph, the project was launched with an aim to helping young people who are in their 30's to enter in to marital life. With this project, so far 6150 men and 860 women were registered free of cost in the Google form. Web site is very much useful for registered members to find out a suitable life partner. Candidates registered their names can access details of contact and get in touch with potential partner's family.

COVID 19 Relief Activities

During the pandemic and lockdown period we could supply food and medical kits for the poor and needy with support from our houses and institutions. We could reach out to more than 750 families with essential food materials and sanitation items worth Rs.6.80 lakhs. Project was kick started with initial funding support of rupees one lakh from the general department.



Carmel COVID Care (CCC)

In order to transport COVID affected people to hospitals Carmel social work department arranged free vehicle service for the needy. This noble initiative was supported by Fr. Johnson Palappally.



Constructed Toilet Facilities

Under toilet construction project, a toilet was constructed and handed over to a poor family in our ward at Muvattupuzha. Toilet was constructed with the support of our scholastics and local volunteers as they joined for manual labour. With this effort now the family members

have got access to clean and comfortable sanitation facility.

4. SACRED HEART PROVINCE, KOCHI

Opened Skill Development Training Centre at Manppuram

'Ministry of Skill Development and Entrepreneurship, Government of India' supported training centre "Jana Shikshan Sansthan" (JSS) was launched to impart poor rural women skill training on stitching and embroidery for their livelihood. Project expected to train over 30 tailoring aspirants from poor families as means of their livelihood initially.



"Akshaya Paathram" Joyful Kit Distributed

Under scholarship project, Sahrudaya, Rajagiri is assisting over 300 students in various centres. On January 2021, distributed "Akshaya Paathram" joyful kit for all. Items in the kit included cookeries, plates and other domestic utensils. Amidst pandemic situation, it was a gesture of sharing joy with suffering families.



Supported Health Workers

Sahrudaya, Rajagiri distributed 730 pairs of Bata sandals and shoes to health workers of Ernakulam District in collaboration with SEEDS and Cyriac Elias Voluntary Association (CEVA). Grass root level workers fighting



coronavirus were selected from 13 primary/ community health centres. Fr. Paul Nedumchalil and staff coordinated the programme.

VAYOVANDANAM - Distributed Health, Hygiene and Sanitary Items

During COVID lockdown period, Sahrudaya distributed masks and sanitizers among elderly people. Project team distributed multipurpose thermo flask to all group members.



5. DEVAMATHA PROVINCE, THRISSUR

Devamatha COVID Cell



Entire staff and volunteers of Amala Hospital under able leadership of Department of Social Work, Devamatha province worked day and night to curb COVID-19 wave two. Virtual interactive sessions were conducted for post COVID infected people. It helped to identify their psychological, physical and emotional issues related to quarantine, isolation, treatment and aftercare. Professionals from relevant field like mental health, general medicine, nursing and social work handled each session. A team of professionals at COVID cell stationed at Amala hospital provided telephonic counselling to panic ridden people round the clock along with other monetary and material help.

Centre Opened for Addressing Shadow Pandemic Violence

At KESS, socio-legal service centre opened to address issues related to domestic violence. Centre is providing free counselling and legal services to reduce atrocities against women especially in the wake of COVID-19 situation. Adv. Reena John N and team render legal services to poor clients in order to ensure justice and peace in the family.



Medical Support

Families infected with novel coronavirus, HIV/AIDS and other killer disease like cancer, kidney and heart ailments were supported with medical aid, care and treatment services. All programmes implemented and coordinated with support from Social Department.



Distributed Wheel Chairs to Differently Abled People

KESS distributed wheelchairs to differently able people. Beneficiaries were crippled due to illness or handicaps.

Dharsana Club

With a very humble beginning, Dharsana Club is addressing issues related to differently abled people. Today it is making its presence felt in social welfare services with diversified activities. Services include, running non-formal education, formation of community-based organizations, running institutions like orphanages, physically challenged, health care centres, organizing cultural and sporting for empowering people with disabilities. Projects are supported by Social Work Department of Devamatha Province.



Constructed Houses for Destitute Families

Poor families without proper shelter were selected for housing project. A new house was built to hand over to most needy family. Other remaining house construction work is going on in full swing.



Observed Days of Importance

Together with Social Work Department, KESS, Amala, Paalana, Snehagiri, Colleges and Schools observed days of importance. Series of events socially relevant days conducting webinars, online debates, virtual competitions and various programmes. World AIDS day, cancer day, international women's day, health day, disability day, Human Rights Day were observed in collaboration with various government departments such as police departments, legal & women cells, departments of medical & psychiatric social work, home sciences and nursing.



Distributed Gift Packets to Families





Province brought a wave of cheer during festival seasons such as Christmas, Easter, Vishu and Ramadan to by distributing gift packets to poor families. Celebrated feasts with inmates of care homes, domestic workers and staff, chronically ill, marginalised and poor families amidst pandemic. Gift packet with cash support brought a positive energy and smile on the faces of poor people.

Launched LIC Micro Bachat (Saving) Plan for Poor Families



KESS in collaboration with LIC's micro *bachat* plan insured families and inmates of all care homes and ashrams. Under this plan with a nominal premium a larger benefit in long run can be covered. As per norm, KESS initiated insurance coverage for poor families by depositing very low premium. With the support of LIC micro *bachat* plan all staff, workers, beneficiaries of all ashrams and related institutes have been provided insurance coverage as a boon for their families in long run.

Skill Development Training Programme

YUVA- Youth Development Programme

KESS supported youth development project offering 5 short term courses namely DTP, Hotel Management, Multimedia, Fashion Designing and Computer Accounting for six months with the objective of providing employment opportunities. Second batch successfully completed their final examinations in April despite pandemic caused mayhem situation. Skill development programme is benefiting youth from economically backward families. KESS support the programme and mobilised gadgets, provided sponsorship, organised internship and placement for them. YUVA day was observed where in group members deeply acknowledged the support given by KESS for empowering and capacitating unemployed with various skills. Online "*vidyarambam*" of the next batch has been completed on 5th of May, 2021 with more than 100 students enrolled.



Chavara Youth Centre

Snehagiri's youth development initiative functions as a centre for coordinating, preparing poor youth to become independent and responsible citizens. Collaborated with academic and social institutions, centre is providing online sessions for preparing them for competitive exams. Moreover, youth can access to services like soft skill training, finishing school programmes, free coaching for PSC, net, cadet, counselling, help desk, orientation and library facilities. *Femina* is a project implemented, to nurture and empower young women as per the vision of St. Chavara. Project motivates young people for savings in order to meet various contingency expenses including marriage. Under the scheme, girl children provided life skill trainings and counselling services to mould them into better pillars of their families.



Chavara Bhavan

Snehagiri society has a novel intervention program to resolve issues of conflicting and dysfunctional families. Elderly parents who often get trapped in joint family disputes are side lined and undergoing great suffering. In order to ease out the situation and release their mental agony elderly people in crisis are given an opportunity to visit Snehagiri Chavara bhavan to rejuvenate and revive their spirits through customised care, counselling sessions, therapeutic and spiritual approaches. Chavara bhavan functions as a restoration centre for elderly parents in difficult situation to transform houses into heavenly homes through family counselling and other allied services.

"Annadanam"

Under the scheme food kits distributed at regular basis for the poorest of the poor, who are incapable of work, severely ill and have to depend others for their basic survival. Social work department of the province reaches to such families on a monthly or bi-weekly basis, sourcing food provisions and nutritious food kits at their doorsteps. Together with the support of KESS, Paalana, Snehagiri and other institutes, volunteers and staff of social work department distributed hundreds of thousand kit in their respective region.



Medical Interventions

Paalana and Amala hospitals based in Palakkad and Thrissur respectively are the medical gems of the province, with many productive and heart-warming social interventions. Both hospitals are prominent in treatment, care and support of COVID affected, often taking in more patients than beds available for the job and providing free treatment to the poor. Free dialysis is being offered to the deserving needy, apart from the concession provided to others. 'Ashraya Project' supported by Paalana is renowned for this, setting apart two dialysis machines for COVID patients as well. The treatment sponsorship program of the hospital, for more than 100 poor pregnant women till labour, is also praise-worthy. *Paripalanam* is the hospital's reserve fund for extremely poor patients who cannot afford to pay medical bills.



Interventions Through Sister Concerns

Societies for The Welfare Of HIV/AIDS Infected People

KESS continues to support societies formed in the districts of Palakkad and Kozhikode even after it has withdrawn its HIV/AIDS projects-HAPPI AND KARE. The 5 Societies in each district were created back then with local well-wishers consisting of members of the panchayat, congregations, physicians, academicians and so on. These community-based organisations are now thriving in each region of these districts; providing education, housing, medical and other support to the affected under each one's jurisdiction. Under the regular guidance of KESS, the executive and general bodies meet, plan and execute programs to better the lives of the affected around them. During the Christmas season, they were visited, issues addressed and future programs charted. The beneficiaries were gifted cakes on this occasion.



FAWECOP- A Society for Organic Farming

FAWECOP is a society aimed for the welfare and uplifting rural families depending on agriculture. KESS coordinated interventions to boost their livelihood options during this pandemic, providing support and mobilising materials needed for the same.



Employment Opportunities Generated

Stabilizer assembly units created employment opportunities for poor women, functional at Nadathara and Puthur under the patronage of KESS. Almost 60 women and their families have been supported with this venture, jointly collaborated with V-Guard. Both units are independently functioning; all women administered Societies, under the patronage of KESS. KESS supported them recently in improvising infrastructure, coordinating return benefits, auditing and other aspects as required, from time to time.



'Mithra' - Projects for Fulfilling People's Aspirations

KESS revived mitra project such as Bhavanamithra, Yuvamitra and Vadhumitra for encouraging savings among poor communities. Community based groups started saving for constructing or owning a house of their own, school education or higher studies, marriage with the support groups named after Bhavanamithra, Yuvamitra and Vadhumitra respectively. Project is implemented in collaboration with all ashrams of the province. Neighbourhood community is encouraged and motivated to start savings through group formation as means of sustainably. Group is supported financially by a certain percentage, mobilised with the help of benevolent sponsors. Project has impacted lives of so many poor people and helped families to get out of debt trap.

"Prior Mavu" Cultivation Promoted

In order to commemorate St. Chavara's 150th death anniversary, province started green initiative by promoting mango (*prior mavu*) sapling for every house'. Launch was as an evergreen souvenir for founder Saint Kuriakose Elias Chavara. Social Department made sapling available for every Ashram to plant it as a gesture of brotherhood, support and unity following the footsteps of our former "Prior" who planted mango (*mavu*) seedling in Kerala for the first time.



Promoted Organic Farming for Healthy Living

Paddy fields at Padavarad started yielding. Land was given for lease to a group of farmers. Farmers revived traditional way of cultivating rice and other agriculture products. Indigenous farming art yielded good crop of rice grains from the land. This effort has transformed lives of poor farmers as they started earning good income besides eating fresh pollution free rice and vegetables. Moreover, organic food produced such as rice, vegetables and fruits used by all inmates of Ashrams and care homes in the province. Natural farming yields were included in the food distribution programs.



Gethsemene Garden – For Empowering Communities

Through nursery sales namely Gethsemene garden product, a poor family has been empowered for earning a decent income. KESS extended support to poverty-stricken family to start a nursery by giving nursery products. With this effort, family started generating income on their own as proud partners of environment friendly income generation program.



6. ST. THOMAS PROVINCE, KOZHIKODE

Vocational Training Programme

Conducted Soft Skill Training At DDU-GKY

On 8th Feb 2021, St. Thomas Association for Rural Service (STARS) had organised one day soft skill training program for the ending batch i.e., advance Welding and Gas cutting students at Ashakiran Special School. Mr. Saji Narikuzhi was the resource person for the training program. All the students of the ending batch participated in the event. The objective of this session was to introduce the students with the concept of soft skills and to make them understand its importance in today's competitive world.



Celebrated International Women's Day At DDU-GKY Centre

To honour womanhood, STARS DDU-GKY staff and students celebrated International women's day on Monday, 8th March 2021 at the Ashakiran Auditorium. On this day, female automotive trainees organised a program called "ZENA 2K21" along with this year's theme "Choose to Challenge" by the UN. Rev Sr. Sandra Sonia SFN a well-known artist was the chief guest who inaugurated the women's day by painting a meaningful picture along with an inspiring message.



Health Promotion

Organised Webinar for Healing Touch

With a special effort by Ashraya CMI Holistic Counselling Centre, Kalleri, and an effective coordination by STARS organised a webinar named "HEALING TOUCH" on 6th December 2020 at 7.00 PM. The webinar was conducted in Malayalam using the Zoom tool including screen sharing. 250 participants including professionals, counsellors, youths and students participated.

Inaugurated STARS Pain & Palliative Care Unit

St. Thomas Association for Rural Service has started a new venture named "STARS Pain & Palliative Care Centre" Vellad, functioning from at the premises of Naduvil Grama Panchayat, Vellad in Kannur District. STARS Pain & Palliative Care Services provides home-based palliative care for bedridden patients with terminally ill and with



advanced cancers and other life-limiting conditions living in Vellad, Pathanpara, Thermala, Ashankavala and Mavumchal villages in Kannur district of Kerala. Shri. Baby Odambally, Naduvil Grampanchayat inaugurated STARS Pain & Palliative care Service. A highly skilled team of doctors, nurses and other support staff provide services free of cost.

Organised One-Day Training for The Pain & Palliative Volunteers

Social work department of CMI St. Thomas Province organized one day workshop on "Addressing the needs of elderly and people under palliative care related emergencies" involving as many palliative care volunteers that work in the field of elderly care in Naduvayal Gram Panchayat Kannur. 50 volunteers from nearby parishes participated in the programme.



Treatment Support for Cancer Patients

As COVID-19 pandemic has made it difficult for many people with cancer to cover their treatment expenses, STARS supported 19 cancer patients with a financial aid from Muthukad village in Chakittapara Panchayat, Kozhikode. Fr Rajesh Choorapoikayil launched new initiative by generously funding Rs. 1, 50,000 towards the noble cause. Supported beneficiaries included cancer patients from economically backward families as recommended by community volunteers and staff after assessing their family background. It was a great solace for affected families to meet their immediate needs as most of them were struggling to buy medicines for treatment.

Ambulance Service- Home to Hospital Scheme

Ambulance service started during golden jubilee year of St. Thomas Province, Kozhikode. Now service reach expanded to Kannur Naduvil gram panchayat with the objective of providing emergency support to STARS pain & palliative care service. Home to hospital service bridged the gap between the needy patients and treatment service.

Community Development Programme

Home for The Homeless- “Love Your Neighbour”

With the aim of assisting poor people really in need STARS initiated building a new house for Ms. Sarojini and her 60-year-old differently abled sister Ms. Leela Ayyapankavil. They were not in a position to construct a house of their own. Two bed room dwelling with 620 square feet built at a cost of Rs 4 lakh. Construction work completed in collaboration with Ameen Rescue Team, Koorachundu. House was blessed and key handed over to beneficiary.



Formed Joint Liability Group (JLG)

After promoting women's self-help groups, social department of Kozhikode province has now started formation of joint liability groups at Muthukad village in Chakittapara grama panchayat. So far 25 tenant farmer Joint Liability Groups (JLGs) have been formed in a bid to make them eligible for crop loans from banks. For the last few years, these farmers faced capital funding crisis as they were not eligible to get crop loans from the banks as they did not have own land to mortgage. With this initiative, 100 farmers got Rs 75 Lakh (Rs. 3 Lakh for each group) from Canara Bank Koothali.



Project for Improving Livelihood of Tribal Farmers

With an objective to make goat rearing as means of sustainable livelihood among tribal farmers STARS distributed 5 local breed goats to beneficiaries at Thazhekappu colony. A total of 5 goats worth Rs. 25,000 distributed to 5 tribal families. Project helped them enhancing their monthly income.



Started Paper Recycling Unit

As a waste management initiative STARS set up a well-equipped waste management unit at St. Joseph's college campus, Devagiri. Unit has created a sense of waste management among students and staff. Practising daily waste management has improved healthy environment. Unit operated by differently abled persons of Ashakiran special school has enhanced income of their family. In order to provide training, organised three days file making workshop at the unit from 25th - 27th March 2021. Special school staff and teachers actively participated in the training programme

Women's Day Celebration

On 8th of March 2021, at Ashagram psycho social rehabilitation centre, Chelannur, Kozhikode international women's day was organized. During the special programme all women working at STARS Mahila Samajam Unit were felicitated. Mrs. Mary Paul, a renowned counsellor cum motivational speaker inaugurated the event. STARS director Fr. Jose Prakash and Ashraya psycho-social rehabilitation centre director, Fr. Binoy delivered messages.



Distributed Uniforms to the Labourers

Adhering working policy for bringing uniformity, distributed a set of uniform to each and every staff employed at STARS Mahila Samajam Unit, Chelannur.



Education Promotion Distributed Scholarship

Under SALT project, 28 catholic students from poor background were given scholarship for their studies. Project envisages their holistic development through value added skill development programme. Fr. Jose Prakash, director and Fr. Shajan visited their houses and distributed education scholarship worth Rs.4000/- each to their parents for improving quality education. Amount will be utilised for the purpose of buying study materials.

Online Classes for SALT Students

Social work department has arranged online classes for 28 students on every second Saturday during COVID pandemic. Various motivational and inspirational topics were selected for every class. Mrs. Mary Paul recognised motivational speaker conducted classes for these children along with many other great personalities simultaneously.

Online Classes for Parents

In an attempt to empower parents to changing needs amidst coronavirus pandemic, STARS arranged online meeting and classes for parents. Online counselling and talks person to person cultivated skills to provide an extra care for their children. Online session enlightened parents to accumulate values in their lives. Every parent seized the opportunity as a platform to gain skills and values for dealing their children during the COVID crisis.

Happy Vacation Summer Camp 2021



COVID -19 crisis has caused most things like work, school and everything to move online. Since mask-wearing, frequent hand washing and social distancing remain the best ways to decrease family's chances of getting coronavirus, STARS organized a virtual happy vacation summer camp 2021 for 28 children from SALT project. Camp was organized in three days from 15th - 17th of May 2021. Mr. Justin Thomas & Team led 3 days happy vacation camp effectively. Fr. Thomas Thekkel, provincial inaugurated the session after delivering a short message.



Chavara Academy of Excellence

With an objective to provide ample opportunity for youths to appear PSC competitive examination, Chavara academy of excellence started free coaching for aspirants. Fr. Thomas Thekkel provincial, inaugurated the centre. Fr. Biju Vellakada, Fr. Jose Prakash, Fr Mathew Kalarickal, Fr. George Punchayil, Mr Rajeev N.J, students and their parents were present. First batch consists of 40 students started undergoing PSC coaching.

Water, Sanitation & Hygiene Programme Jal Jeevan Mission (JJM)

With a goal to provide functional house hold tap connection (FHHTC) to every household with service level at the rate of 55 liters per capita per day, State Government of Kerala has selected STARS to implement Jal Jeevan Mission project in 16 Panchayats of Kozhikode, Kannur & Wayanad districts. Project is implemented with the support of local stake holders such as grama panchayats and water authority department. Collaborative project is to improve access to quality water for rural households.

7. PRESITHA PROVINCE, COIMBATORE

Preshitha Province, Coimbatore

Preshitha province is directly involved in various social welfare undertakings for destitute, economically backward and downtrodden people. Many of our members contribute to social well-being of people through diverse ministries. When COVID-19 pandemic shattered lives of thousands, Preshitha province, Coimbatore, with the

support of our members and institutions, assisted at least a few families both physically and materially. Some of our members stepped directly into the places of contracted people and cared them even by risking their lives. Social work department team wholeheartedly engaged in solidarity response to COVID crisis during second wave.

Organised Social Workers Meet

Two meetings were held incorporating members of the department of social apostolate to assess pandemic situation and to plan for various means to support affected people. Based on the suggestions from members, to a certain extent we could implement as planned when and where the need aroused.



Go-Green Project

In order to commemorate 150th death anniversary of St. Kuriakose Elias Chavara, under the go-green project, 150 saplings of 'Prior Mavu' were distributed to all houses of our province and Fr. Provincial inaugurated the scheme by planting a sapling at the provincial house.



Distributed Medicinal Plants for Attappady Tribal,

With the objective of promoting cultivation of medicinal plants called *Aswagantha* among tribal communities of Attappady a special fund was allocated to carry out the project. Tribals were given herbal saplings as in long run it would support enhancing their income.

Scholarship for Higher Studies

Through the department of social apostolate, deserving candidates from poor families pursuing their higher studies like engineering, nursing and other professional courses were given financial aid.

Marriage and Housing Support

A few deserving families were given financial assistance for the construction of houses and marriage of their children.

COVID -19 Help Desk Opened

Under the auspices of department of social apostolate, number of supports were given to COVID-19 contracted people and their families. Food kits were distributed to poor families affected by pandemic in the surrounding areas of our institutions. Medical assistance was also provided to social work centres and institutions with financial support from our members working abroad and others.

Set Up COVID-19 Task Force

Task force, consisting of 6 members each, one from Palakkad zone and the other from Coimbatore zone have been formed. Task force team at the disposal of needy families on mere telephonic call. When inmates of *Akasaparavakal* were contracted with the COVID-19, task force team volunteered help until they were all safe from the grip of virus.



Provided Aaruthal (Tele-Counselling)

A group consisting of our fathers and staff was formed to give free telephonic counselling to stressed and strained due to pandemic in three languages viz, English, Tamil and Malayalam.

Transformed Preshitha Rural Hospital as COVID Care Hospital

Process of converting Preshitha hospital situated at Pollachi into COVID care and treatment has been completed and waiting for the permission from health department.

CMI Educational Institutions and Parishes Responded to COVID Second Wave

Our educational institutions and parishes sprang into action, amidst their own financial crisis taking extra steps with help of well-wishers and alumnae. It reached out to hundreds of COVID positive cases with financial, medical and material helps.

Preshitha Service Society (PSS) Distributed Food Kit

In Collaboration With CHAT, PSS Distributed Food Kit To 150 Poor People At 5 Tribal Hamlets Of Anamali Area In Pollachi. Fr. Biju Mapranathukaran And Team Visited All Five Tribal Hamlets Namely Annanagara, Chinnarpathy, Puliyanakandipathy, MGR Pudur, Semmedu For Distributing Food Materials Worth Rs. 1000/-In Each. Tamilnadu Special Task Force Accompanied the Team In Two Hamlets.



Conducted Mobile Medical Camp

With the financial support of TNHSP, PSS conducted medical camps in 26 tribal villages in Anamali and Aliar areas in Pollachi, Coimbatore District. Mobile team consists of qualified doctor, nurse, pharmacist and driver provided quality health care and services at the door step of tribal villages. More than 600 men, women and children benefitted.



Preshitha Rural Hospital Gearing Up For COVID Treatment

Preshitha Rural Hospital Has Been Converted As COVID Treatment Centre with The Support of German Missionaries. Sufficient Beds With Oxygen Facility Has Been Arranged For Needy Cases. Other Logistics All Set To Start Treatment After Final Approval By The Government.



Provided Helping Hand During COVID Wave Two

Preshitha service society (PSS) with the funding support from general department of social apostolate distributed food and medical kit to over 100 families at Anamala village.





Kaval Plus Project Awarded

Kaval plus project implemented with the support of Ministry of Health and Family Welfare, Government of Kerala (GoK). On an experimental basis project is implemented in two selected districts namely Thiruvananthapuram and Palakkad. ASSO has been earmarked for project execution in Palakkad district along with Mercy College. It is aimed at providing psychological support to abused children under 18 years old. Activities include home visit, counselling, personality development class, guidance class for their parents etc. Professionally qualified and experienced social workers have been appointed and started to carry forward project activities.

Started Aswagandha Cultivation

Aswagandha as a medicinal plant mainly used for making different types of ayurvedic medicines. M/s. Sumindhar India Pvt Ltd, Pune after a research study found out that eastern part of Attappady region is suitable for cultivating this medicinal plant in larger scale. Roots of this plant is being used for bi-products. Cost of the root is Rs.200 per kg in the local market and 350 to 400 kg can be produced from 1 acre of land. ASSO has selected 20 tribal families from the area and distributed 4 kg of (Rs.800 x 4) aswagandha seeds free of cost with Rs.5000/- to each family as subsidy for cultivating the same in one acre of land.

Distributed Agri Machineries

AVIDO, AFSO, and FPO community based independent sub societies of Attappady Social Service Organization (ASSS) distributed agri machineries to 130 members including tribal families and general category in Attappady region. Government of India in collaboration with Sub-Mission of Agriculture Mechanization (SMAM) provide 80% subsidy to each agri- machine. ASSO in solidarity distributed bush cutter, tiller, wood cutter, sprayer etc at subsidized rate. Machines were distributed by Mrs. P.T Usha, DGM, NABARD, Thiruvananthapuram and Mr. Lalu DGM NABARD Palakkad respectively.



Organised Skill Training

ASSO conducted training program for selected 30 women belonging both tribal and general category. Training programs was mainly to equip skills to make soap for bathing & washing, different types of washing powder, sanitizer, phenoil, lotion etc. Training session was inaugurated by Mr. Lalu DGM, NABARD, Palakkad.



Organised Internship Programme

Internship and out-reach program for MSW and BSW students from different colleges of Kerala and Tamilnadu was conducted in ASSO in the month of February and March. Students placed included Mercy college Palakkad, IDEAL college Malappuram, Amrutha college Ettimadai CRE, Karunya Institute of MSW, CBE. Students successfully completed their internship with exposure to various indoor and outdoor activities conducted under following COVID-19protocol.



Social Apostolate Through Baraka Community Care Centre (BCCC), Kenya

'Baraka' means Blessing. Ever since inception in 2010, Baraka Community Care Centre, has been contributing for overall development of poor communities in the region especially children, challenged persons and elderly people. BCC is implementing diversified projects with the support of donor agency called 'Chalice' Canada. Organisation is reaching out to hundreds of thousands needy people with the support of untiring, dedicated and selfless services by committed staff and Preshithites working here. Fr. Jose Martin Kaithavalapill, previous director, has led the BCCC to be rated as one of the best development organisations in African region. Presently, Frs. Varghese Kokkadan and Michael Nadakalan leading the organization in Kenya.

Community Aid and Sponsorship Programme

Under the project 18 villages and 4 slums of Laikipia County of Kenya has been adopted. Over 624 families have been adopted for their holistic development. Community based organisations such as Self-Help Groups (Micro Finance Groups) have been formed and given training to start income generating activities. Families adopted are given financial support for children's education, and marriage for their children. Apart from this, more than 20 challenged persons and 19 elderly people supported for their food, medicine and livelihoods. Moreover, with the support of Chalice, BCCC is supporting school kitchen for mid-day meal, construction of meeting hall, housing, toilets, solar lamps and water tanks etc. During COVID pandemic, separate financial aid was given for self- help groups for starting income generating activities worth KSH 450,000. Needy families were distributed hygiene kits and food materials for their immediate survival. Beneficiaries included young children, differently able and elderly people.



Samagra – Multi Purpose Centre for Integrated Human Development

Established in 2002, Samagra is reaching out to people in need through various programmes such as personality development training, counselling services for adolescents, teachers and parents, organising inter religious meets, prayer sessions, music classes with recording facilities etc. Services of multi - purpose centre is accessed by people from all walks of life especially budding talents from poor strata avail opportunities to grow and flourish in their life. Centre is providing basket of services for aspiring youth.

Childline Centre At Samagra

Palakkad district centre of child line India foundation is functional at Samagra since February 1, 2008. Over a period of 12 years, centre has restored more than 8500 children in crisis with the support local government machineries. Range of issues handled by the ChildLine included physical abuse, child sexual abuse, child marriage, emotional abuse, child labour and child beggary.

Routine Activities Jointly Conducted by Childline And Samagra

Open House

It's an open forum for children to raise issues faced by them. This platform also allows children to be heard and seek support of government systems. During this period Childline Palakkad has conducted one open house programme through virtual platform at Kuthanur panchayath in view of COVID-19 outbreak.

Conducted Awareness Generation Programme

With the support of Childline Palakkad, Samagra conducted awareness programmes for children and adult, covering topics related to issues of children. In a series, six awareness programmes were conducted during the last six months in virtual platform in different panchayath. Programmes generated awareness among adults regarding available legislations concerned with Children and their rights. And enabled participants to improve their knowledge about Childline-1098 and laws existing for children.

Organised Sensitization Programme

Sensitization programme focused to make awareness regarding the legislations concerned with children and their rights, protection issues etc. among the stakeholders in the district. It included, ICDS, health department, school teachers, police etc. During the last six-months, Childline Palakkad conducted three sensitization programmes the programmes conducted on virtual platform due to the COVID -19 pandemic. The active participation from the stakeholders was helped to reach more than 150 members who are working in the field of care and protection of children in the district.

Conducted Staff Capacity Building Training Programme

Childline Palakkad arranged a training programme for staff regarding “psycho social support for children during COVID-19 pandemic”. Training programme enabled participants to handle children in stressful situation. Session was handled by Sr. Sali Vazhappanadi OSF, psychologist Palana hospital, Palakkad.

Organised Training Programme

With the objective of enhancing knowledge of Para Legal Volunteers (PLV) regarding POCSO act and child rights a one-day training was organized at Palakkad. Topics covered included POCSO Act 2012 and Rights of children and sessions delt by Adv. Aneesha V.L, Legal cum Probation Officer, DCPU Thiruvananthapuram. Training was conducted in virtual platform with the support of District Legal Services Authority, Palakkad (DLSA). Training inaugurated by Smt. Anupama V.G (Secretary, Sub-Judge, DLSA, Palakkad) and 40 PLV members actively participated virtually.

Observed International Child Helpline Day

On 17th May 2020, international child helpline day was observed at Childline centre, Palakkad. It was jointly conducted by Childline, Samagra in collaboration with labour and excise departments. Aim of programmes was to generate awareness about the day and convey messages to public regarding child issues and to enhance reach of Childline helpline - 1098.

Observed Anti-Child Labour Day

Together with labour department, excise department on 12th June 2020, Samagra observed anti-child labour day with the support of Childline centre. Online drawing competition on the theme was organized and about 34 children participated. Online drawing competition conducted as part of celebrating Anti Child Labour Day,

many children participated in the competition on the theme shared by Childline.

Observed International Day Against Drug Abuse

On 26th June 2020, Childline Palakkad and Samagra jointly observed international day against drug abuse at Palakkad exercise office. Excise office, Childline and Samagra staff participated and in order to mark the occasion poster on the theme was also released.

8. ST. PAUL'S PROVINCE, MYSORE

Organized Chavara Cup Cricket Tournament

To commemorate 150th death anniversary of St. Kuriakose Elias Chavara, we organized a two-day cricket tournament in Goddinapura Marloor village, Nanjanagudu taluk, Mysore. Sukanya madam, president of Goddinapura, Marloor grama panchayat offered inauguration speech. Then provincial Fr. Varghese K J addressed the gathering. He inspired youths to quit bad habits and engage in productive activities such as sports so that they can develop and grow physically and emotionally. Around 16 teams from 12 different villages participated in this tournament. Thandya Boys from Thandavapura and Rocky boys from Goddinapura entered the final. It was Thandya boys who won the final against Rocky boys. Through this tournament we have reached out to hundreds of youths, children and villagers.



Distributed Christmas Grocery Kit

On the occasion of Christmas celebration on December 25, 2020, we distributed grocery kit with essential items for most deserving families in 4 different places viz. Kollegal, Nanjanagudu, Maradiyur, and Sreerampura. Many kind





hearted people and philanthropists contributed for this initiative which brought joy and celebration in the lives of poor people.

COVID-19 Relief Distribution Activities

It's an on-going project initiated by the department of social apostolate, St. Paul's Province, Mysore. Project has impacted many poor families in view of nation-wide lockdown and contracting economic activity. Losers were vulnerable and disadvantaged sections of people. Reduced incomes and resultant poverty pushed people into a humanitarian crisis where there were deprivations of food, medicines and healthcare. This initiative helped to reach out to poor families and mitigate their suffering to a great extent amidst sudden loss of livelihood and increased food insecurity, hunger and starvation. It has been resolved to continue these activities till COVID-19 situation becomes normal. During coronavirus pandemic wave one and two, hundreds of thousands deprived people were consoled with essential food and sanitation items at their door step.



Essential Grocery Kit Distributed for The Needy

COVID 19 pandemic affected each and everyone's life adversely especially marginalized sections the most. Thousands of people lost their jobs, source of income and were pushed into starvation. Keeping this in mind, on the occasion of Kannada Rajyotsava we distributed essential grocery kit for needy and poor families living in N R Mohalla. Rev. Fr. Suraj welcomed the gathering and

gave a message on value of helping and sharing each other. Then provincial Rev. Fr. Varghese K G distributed grocery kits for poor families. Presence of sisters from nearby convents and Vincent de Paul members made the event more memorable.



Financial Help Rendered to People Infected With HIV

Most of people who got infected with HIV are from poor families. Infected people face huge financial burden to buy medicines which are inevitable to keep their immunity strong and live a longer life. Keeping this in mind, we organized a programme under the name "celebration of love" with support of Chaitanya network of people living with HIV/AIDS in Bramaramba layout, Chamarajanagara district. Rev. Fr. Sebastian P and Rev. Fr. Pratheesh interacted with people affected by HIV. A few people with HIV positive shared their story, struggle and how did they overcome suicidal thoughts. They were given medical support worth Rs. 2000/- each. It was great help during pandemic and they expressed their gratitude for CMI fraternity.



Conducted HIV/AIDS Awareness Programme

Social work department is working in three remote villages in Kollegala to create awareness on HIV/AIDS

through street play, training, discussion and home visits for attaining following project objectives:

Distributed Midday Meal

Initiated a midday meal program named “ruchi ariyadavarigagi” which means nutritious food for those who haven’t tested nutritious food at a time of COVID-19 pandemic. Under this initiative we have been distributing free midday meal on every Friday for the poor and marginalized such as homeless, street dwellers, slum dwellers, beggars, old aged, migrant workers etc. Our effort to feed the hunger at a time of coronavirus crisis has been very much appreciated by the media and general public.



“Prior Maavu” Campaign

Provincial day celebration on 14th January 2021 marked distribution of mango saplings at Carmel Bhavan, Mysore and all centers of Dharma Deepthi Samthe (DDS) and St. Joseph Charitable Institutions (SJCI). Event was as part of mega project of distributing 150 saplings in different parts of Mysore district in the coming days in honor of 150th death anniversary of St. Kuriakose Elias Chavara, the founder of CMI congregation. An indigenous sapling called “prior maavu” named after St. Kuriakose Elias Chavara himself, because as a Prior of the congregation he first planted the same sapling a century ago. Fr. Romulus distributed it to all CMI fraternity in Mysore including newly ordained priests (2020-21).



Reaching the Unreached: Free Midday Meal for Bedridden

Social apostolate of St. Paul's province, Mysore initiated free midday meal for bedridden as ongoing project. “Food for the hungry, water for the thirsty, blankets for the cold and bed for the weak is the meaning of freedom,” Although all sections of the society are affected by COVID-19 pandemic, old aged and bedridden people face significant risk of facing hunger and starvation. Under this scheme, we have resolved to supply free cooked food kit to bedridden patients, old aged, disabled every day at their residence in slums and backward areas in the vicinity of N R Mohalla, Mysore.





Abstract

"Clean water is a basic human need, and one that should be easily accessible to all. There is sufficient fresh water on the planet to achieve this. However, due to poor infrastructure, investment, and planning, every year millions of people especially children die from diseases associated with inadequate water supply, sanitation, and hygiene."-United Nations. Although clean water and sanitation is the core element in human health and wellbeing, it has not yet received the global achievement. It remains a challenging factor among millions of people and places a heavy strain on the economy and it has got raised due to the covid-19 pandemic. From the kinds of literature, this research primarily focuses on understanding the progress of the sixth sustainable development goal in India.

Introduction

The entire globe was struck before the devastating situation which was created by the pandemic COVID-19 as it is declared as a public health emergency. The impact of the epidemic is visible in every sector which leads to

the serious destruction of the economy. Countries with massive packages could safeguard their economies, but it's quite difficult for those developing and emerging markets. The unexpected rise of the virus created a greater impact on the sustainable development goals which work to end poverty and to build a peaceful world. The travel towards achieving the sixth sustainable development goal of water and sanitation to all by 2030 was not easier.

Safe drinking water, sanitation, and hygiene are indispensable to health, survival, growth, and development which aids in the creation of resilient communities in a healthy environment as well as it's a basic human right. In our world, some people considered these basic amenities luxurious especially those living in poverty, in informal settlements, and rural populations. According to World Health Organization (WHO), 2.2 billion people do not have access to safe drinking water especially the poor and marginalized whereas 4.2 billion do not have adequate sanitation facility and 3 billion people lacked a basic hand washing facility with soap and water. More than 673 million people defecate in open areas and 2.3

billion people lived in water-stressed countries. The effect on infant mortality rates is catastrophic, with over 2, 97,000 children under the age of five die each year from diarrheal diseases as a result of inadequate sanitation and hygiene. Safe drinking water and sanitation are essential elements of a human's life; otherwise, people's lives would be jeopardized. Consequently, water is instrumental in managing risks associated with famine, disease epidemics, inequalities, political instability, and natural disasters (UN-Water, 2016)

Clean Water and Sanitation for All

To eradicate poverty, hunger, disease, gender inequality, from our world, the United Nations Headquarters in New York adopted a comprehensive and focused framework goal in the year 2000 called Millennium Development Goals (MDGs) with eight goals and targets to be achieved by the year 2015. In the year 2015, Sustainable development goals (SDGs) are formulated to address the root cause of poverty. The 2030 Agenda expands the Millennium Development Goal focus on poverty reduction, protection of biodiversity, and ensuring peace and prosperity to cover all aspects of sustainable development in all countries and thereby ensuring that no one is left behind.

In 2019, the heads of state and government came together in SDG summit and implement the 2030 agenda for sustainable development. They altogether implemented the next ten years as a 'Decade of Action' which force countries to accelerate their effort to achieve SDG by 2030. This brings a commendable change in some countries in some areas like reduction in poverty, maternal mortality, child mortality as well as increase in the supply of electricity. Countries also developed environment protection agreements and formulated national policies for sustainable development. Nevertheless, progress had been reversed in some areas. The number of people suffering from hunger had been risen, climate change and inequalities has been continued to increase much faster. The sixth sustainable development goal addresses to "Ensure availability and sustainable management of water and sanitation for all by 2030". The targets include safe drinking water, sanitation and hygiene, water quality and waste water treatment, water use and scarcity, water resource management, restore ecosystem, cooperation and support to developing countries in water and sanitation related activities. Achievement of this goal enables the countries to upgrade nutrition, prevent diseases as well as ensure the proper functioning of schools, workplaces,

and other institutions with the inclusion of women, girls, and marginalized sections of the society. When a nation achieved clean drinking water and sanitation then it paves a way for unlocking the economic growth and productivity as well as a concerned support for the struggling health and education sector.

Global Perspective

The UN report reveals that the world is not on a good track to achieve the sustainable development goal 6. Presently, thousands of people worldwide lack basic water and sanitation facility, especially in rural areas and in less developed countries. To achieve the target by 2030, the countries need to double their effort along with this pandemic situation. Sub Saharan Africa region remains in a devastating situation. The number of people without clean drinking water and proper sanitation increased to 40% (UN water, 2020). By the year 2017, 63 million and 84 million people gained access to water and sanitation in Europe but 16 million people yet to be in the severe stage. Intensive, realistic targets and effective action should be taken in these regions to achieve the goal. Water pollution has become a serious problem in Latin America, Africa, and Asia since 2000. Recycling, reusing, and recovering waste can alleviate water stress from the globe. Water is essential for the better health of the ecosystem and the world has lost 70 % of its natural wetland in the last century.

Waste water is the combination of human waste, household sewage, agriculture waste, medical waste, and those chemical wastes from the industrial sector. The studies revealed that more than 80% of the waste water resulting from human activity are disposed into the closest water supplies or drainage channel without any pollution treatment. 1.8 billion people use a source of drinking water contaminated with faeces, which resulted in cholera, dysentery, typhoid and polio (WHO/UNICEF 2015). Water shortages weaken the food security and the income of agriculture workers. While the better water management makes the economies, irrigation and food industry more resilient to rainfall fluctuation and able to meet the needs of growing population.

National Perspective

Demand for drinking water has always been rising in India due to the increase in population. According to the NITI Aayog in 2019, 75% of households do not have drinking water on premise and about 84% of rural households do not even have piped water access. The disparity between

rich and poor in India can also be seen in the supply of drinking water. The inequality in consumption of water is not only in the domestic sector but also in agriculture, industrial and other sectors. In comparison with other countries, India has the worst performance in basic sanitation services. Open defecation remains a challenge for the country. Government initiatives Programme like Central Rural Sanitation Programme (CRSP), Nirmal Bharat Abhiyan and the Total Sanitation Campaign is working successfully in India.

The study reveals that based on caste, religion, there exists a significant difference in sanitation. Scheduled castes (SCs) and scheduled tribes (STs) suffer from poor household sanitation and drainage. ST households have the lowest ownership of toilets (18%) Moreover, only 23% of ST households have access to any form of drainage. SC fare slightly better, with access at 32% for toilets and 46% for drainage. Based on religion, Hindu households have the lowest percentage of households with a toilet (41%), followed by Muslim households (60%). Christian and Sikh households fare much better, at 70% and 74% respectively (Nagla, B. K.2020). Sanitation facilities are alarmingly low, particularly in the states Assam, Bihar, and Madhya Pradesh (Agarwal Manmohan,2021). The inadequacy of such services in India has led to many waterborne diseases, school dropouts, and loss of productivity. These have resulted in not only premature mortality, healthcare costs, and health-related productivity losses but also GDP losses. The unavailability of water prevents people from washing hands before eating and after using the latrine. And this will be a serious threat to humanity, for losing their life. The 2030 agenda will not succeed by the government if the inequalities among the marginalized and disadvantaged group exist based on water and sanitation.

To address the sanitation problems, the government of India launched the Swachh Bharat (Clean India) mission. The Programme claims to have built more than 100 million household toilets and created more than 700 open defecation-free districts across India. In Kerala, the water supply programs include schemes are undertaken by Kerala Water Authority, Jeevadhara, Jananidhi project, Giridhara, and all the programs are implemented with the support of non-governmental organizations, corporates, and other sections of society.

Discussion

The outbreak of Covid-19 and it's spread over the world in 2020 prompted fast assessment of progress

of sustainable development goals. This study gives an outline regarding the sustainable development of water and sanitation in India. The 2030 Agenda for sustainable development acknowledges the inequalities, climatic changes, loss of natural resources and environmental degradation that are occurring throughout the world. All these challenges have an interconnection with the water resources. The inability to maintain water resources brings a drastic impact in the ecosystem as well as affects the potential of the countries to attain sustainable development. In order to tackle with this challenge, UN environment suggest countries to efficiently use water, treatment of waste water to eradicate pollution and to eliminate inequalities based on availability and quality of water related resources. The studies revealed that 70% of the global freshwater is withdrawn by the agricultural sector. Efficient irrigation system and rain-fed cultivation saves fraction amount of water which would significantly alleviate water stress and increase water use efficiency. It's estimated that the waste water is released into the water supplies without proper treatment, which leads to water pollution. Hence to tackle with the pollution, the waste water should treat at its source and its treatment will protect the public health and environment. The uncertainty occurring in the climatic condition leads to the frequent and intense occurring of flood and drought. The intensity of these natural disasters can be reduced by protecting and restoring water related ecosystem.

The risk associated with water and sanitation disproportionately affects the most vulnerable and marginalized sections of the society. While focusing on the importance of clean drinking water and sanitation the afflicted population is women and children. Women along with the household works spent tons of hours fetching water and protecting the health of the family due to appropriate sanitation. Therefore, community-based programmes should implement to sensitize women regarding the relevance of water and sanitation (Dickin, 2021). As well as the decision-makers should prioritize the investment and the first priority should be given to those without access and should ensure that no one is left behind. Since the number of projects and models running in the country, successful models must be replicated and scaled up to serve those who cannot provide for their own needs under existing service delivery systems.

As India is a populous country, the interventions should be done cost-effective, which will enable to reach out to maximum needy people. Higher cost projects will affect

the overall growth of the economy and will only reach out to a limited number of people. Single penny should be utilized appropriately and the authorized authority should ensure the investment is not unexploited. Hence the government can create and implement creative funding instruments to improve, rehabilitate and expand the water and sanitation infrastructure. These mechanisms can be implemented with the help of government funds or with the partnership from multi-lateral organizations.

In the rural and poor slums of India, it's challenging to convince people to avoid open defecation. Traditions, misconceptions, lack of knowledge resist these technologies (Dueñas, Christina. 2009). Hence, the use of IEC campaigns from the grassroots levels can reduce these misconceptions and can accelerate change. On the other hand, instead of prescribing different solutions for a latrine, the people should empower to think themselves about their unhygienic environment. This grassroots approach helps citizens to recognize that they need sanitation facilities. It will reflect them to build their toilets and will consider it as their responsibility to part in the planning, implementation and monitoring. While implementing innovative technologies and solutions, the responsible person should reach out to the needy, humble and open engagements could enable to understand the actual condition of the communities who are lacking services. And the project should run and sustained with the assistance of local people. Thus, a sense of responsibility, people's participation guaranteed.

The reason behind the increase of solid waste and the unhygienic situation is due to the rapid increase in population, economic growth, urbanization and industrialization (Kumar, A., & Agrawal, A. 2020). The countries should have adequate infrastructure for the collection, transportation, treatment and disposal of waste. Therefore, the countries should adopt policies to reuse, recycle the waste especially in low-income countries or underdeveloped countries.

In the present scenario of the Covid-19 crisis and lockdown, there has been reported less pollution of water and dumping of waste and also a positive impact on climate. It's due to the reduced operations in the industrial and economic sectors. However, after the present crisis recedes, countries might increase their production processes which will further lead to water pollution. Covid-19 also accelerated some of the projects became clearer. For example, South Africa has setup water supply

points across the country during these pandemics. Ghana and Peru also adopted the similar measures.

Conclusion

Water and sanitation are crucial components for a citizen's wellbeing, which must be provided by the government. Since India is the world's second-most populous country, providing clean sanitation and drinking water to the country's millions of citizens is challenging. Due to the outbreak of epidemic, the achievement of goal by 2030 is demanding high effort. In the state of Orissa 80% of the population do not have drainage facility; half of the population does not use toilets and the situation is similar for many other states. This pathetic condition worsens the overall sustainability and hinders the achievement of SDG6. The reports show that 200 million hours are lost every day by women and girls to sourcing water (water for people, 2017-21). Time spent in search of water forces children to miss school and women to forgo potential opportunities to engage in small business endeavors. Getting girls to school and women to work and away from fetching water is critical to their empowerment, to the sustainable development of the global economy. Achieving the SDG 6 is a national responsibility. Each government must establish its targets and the policymakers should set bolder priorities. But it doesn't mean the whole responsibility rest with the government. Each individual has a vital role to play. Dramatic improvements in the field of SDG 6 are possible when government, business, civil society, health care and other agencies stood together. In Pune, ward 40 has achieved the state of zero waste and has maintained recognition for the last six years (Mastakar, 2019). They adopted the zero-waste model in which the waste is completely recycled. And this model has ensured economic and social inclusiveness. And this model can be replicated in other states, countries for the attainment of a sustainable economy.

India still considers waste as a problem of despite. As India is a developing country, needs to focus more on the sustainable development goal during this tragic situation. The country can adopt successful models for providing clean water and sanitation. Appropriate waste management technologies will bring a positive impact on the ecosystem. The organic type waste can be reused for compost and biogas generation. The inorganic could be used as refused derived fuel and innovative technologies can be introduced in rural and urban areas. The local self-government implemented a policy for waste management through municipalities, which develop a kind of door-to-

door collection of waste. But the storage of solid waste is becoming problematic as the collection vehicles were not able to collect daily. By the outbreak of Covid-19, a large amount of waste is surrounded in public places and dumped around the water supplies. Waste dumped in the allotted bins gets over overflowed and surrounded by rag pickers, struggling with other animals such as street dogs, rodents, etc.

Due to the pandemic, there has been an immediate increase of assistance from international organizations like WHO, UNICEF, UN-Water and Red Cross, and Red Crescent to less developed countries towards better water supplies and access. Washing hands is the first line of defence to prevent the spread of COVID-19. This

statement is contradictory to some countries and rose the valuable question "What if you don't have enough clean water to meet the needs?" This question creates serious thoughts all over the world. Therefore, Covid-19 has reinforced the importance of access to safe water and sanitation around the globe. The government should take measures not only to increase water availability but also to create more resilient communities without the problem of water stress or water scarcity. The countries could attain the Decade of Action by the unified effort of all united nation, all governments and all partners in an integrated and networked manner which interlinks action from global to the local level.

Fr. Dr. Jose Antony CMI

7

RELIEF ACTIVITY THROUGH NORTH INDIAN PROVINCE

1. MARY MATHA VICE-PROVINCE, HYDERABAD

Jeevadan Seva Samaj (JSS) Served Meals for Coronavirus Infected People

JSS provided meals to over 30 COVID positive cases in Area Hospital, Bellampally on 30th May 2021. As requested by Mr. Durgaprasad, COVID-19 Supervisor of Area Hospital, JSS volunteers distributed food to coronavirus contracted people. Meal's packet included plain rice, daal, *sabzi* and boiled egg. Hot meals were cooked nutritiously and hygienically at home kitchen and made available to needy persons. Isolated people with COVID positive were grateful and thanked JSS volunteers for heart-filling treat.



Distributed Food Kits at Kootapalli

Under the banner of Jeevadan Seva Samaj, social work and health care department of Mary Matha Province, Hyderabad distributed food kits to poor families residing in Kottapalli on 25th May 2021. Pandemic COVID 19 has

ripped apart lives of people at Kottapalli. Many were tested positive and put in isolation. Many families were even struggling to get a square meal each day. JSS came forward to help these families. Food kits consisted of rice, daal, oil, flour, and fruits were distributed to each family every month. Kind gesture of JSS as a sign of Christian witnessing and compassion for poor people was deeply appreciated by everyone. Beneficiaries were non-Christians but all of them joined monthly prayer sessions conducted by JSS.



Transformed Lives of Ailing Children

Jeevadan Seva Samaj helped Raju (name changed for protecting identity) to undergo Endoscopic Pancreatic duct stent placement. Boy hailed from a very poor family and COVID pandemic worsened financial condition of the family. Rajus's parents were given monetary aid for replacing the stent that was placed in his pancreas. After stent replacement boy is now very happy and leading healthy life.

Shibi (name changed for protecting identity) a girl of 5 years residing at Dignoor village of the Adilabad District, Telangana been suffering from mental retardation with low IQ below 20. Financial backwardness of family made the situation even worse. At this juncture, JSS came to the family's help with all necessary medications and instruments that would make the child's life a little easier. After treatment at Rajiv Gandhi Institute of Medical Science, Adilabad, girl is doing well as parents deeply appreciating the kind gesture.

Caring Vegetable Vendors

Jeevadan Seva Samaj staff and volunteers provided masks to vegetable vendors to protect from spread of pandemic. Vendors come from nearby villages can't afford to buy quality masks. Many a time they forget necessity to protect themselves from snare of pandemic. Mr. Nelli Ramesh, Ward Councillor flagged off distribution of masks in the market area. Beneficiaries were grateful for goodwill extended towards them.



Distributed Fruits

Jeevadan Seva Samaj periodically renders generous support to nearby orphanage "AMMA" situated at Bellampally. Recently every month, JSS team distributed fruits and food materials to all inmates.

Supported Needy Staff

Jeevadan Seva Samaj received numerous applications from staff working in our schools and institutions as COVID-19 has affected their lives so badly. According to merit of each case needy employees were helped with financial assistance worth lakhs of rupees.

Spiritual and Pastoral Help

JSS was at the forefront to offer spiritual and pastoral support to needy villagers, especially poor people at Kottappilly and Kalyani villages. Besides, material help like food and medical aid, families were supported with pastoral care and spiritual healing by a team dedicated Fathers.

Week-Long Holy Hour and Divine Mercy

Jeevadan Seva Samaj organized a week-long holy hour and Divine Mercy for the healing of the world at CMI Provincial House. Numerous prayer requests came from all corners of the world; with Divine Mercy many were healed during the adoration.

2. MAR THOMA PROVINCE, CHANDA

COVID Response During Wave Two

Amidst COVID-19 second wave, Social Apostolate of Chanda province reached out to poor villages. Team of volunteers and staff distributed food materials and sanitation items. In addition to these, all CMI managed institutions like colleges and schools converted its facilities as quarantine center. Spiritual and counselling services, assistance for funeral services cutting across religion were provided to COVID affected families. Medical aid and other services including ambulance services were provided to coronavirus infected people as per need.



Carmel Ashram, Gadchiroli





Provincial House, Bamni



Carmel Academy, Wadsa



Careml Academy, Kalmeshwar
Carmel Academy Waddhamna



3. NIRMAL PROVINCE, JAGDALPUR

Organised Village Level Women's Day Celebration

Village level women's day programme conducted at Kapsi and Chhottabetta area of the Kanker district. Members of women Self Help Group (SHG) actively participated during women's day observation programme.



Conducted health awareness programme at Chottabettia

With the help of Pushpa hospital, Dalli Rajhara, *Bastar Dharma Kshema Samiti* (BDKS) conducted health awareness programme for teenage girls. Young adolescent girls were given awareness about personal hygiene and other puberty related health issues. Girls were encouraged to raise their fear and doubts. Facilitator cleared their myths and misbeliefs emphasized the need for personal



hygiene especially during menstruation. Around 30 girls benefited out of the programme.

Tuition Canters For Students Week in Studies

Tuition canters at Karpawand and Bastar area is functioning well. At present 24 centers providing tuition for about 150 children with the support of Kinder Mission Germany.



Provided Medical Help

As an on-going programme, BDKS provided medical helps to poor village people living in remote areas. Our volunteers and staff accompanied poor uneducated patients to hospital and ensured their quality health check-up and treatment. Linkages with government machineries have been strengthened for this purpose. In addition to these, families with chronic ailments were assisted financially for routine check-up and treatment.



Skill Development Training Programme

Skill development trainings were conducted in order to equip unemployed youth especially women with various skills required for income generating activities. Under the scheme, a good number of people were trained and started earning. Meanwhile, graduated batch was assisted for employment in various sectors.



Chavara Housing Programme

Under the scheme, a new dwelling construction completed and handed over to selected beneficiary. In addition, financial support was provided for house repairing work.



Educational Support Provided

Inspired by Saint Kuriakose Elias Chavara, BDKS provided educational support to poor children at the grass root level.

COVID Response During Second Wave

During COVID wave two, BDKS supported good number of people at various levels. Services like hot meals, quarantine facilities, medicines and other essentials were provided to needy people. Community kitchen was set up to deliver free food and building infrastructure converted as quarantine facilities.

Organised Youth Camp

In the month of January 2021, BDKS conducted three-day youth camp. Young people were given exposure to cultural activities and range of topics for deliberation. About 60 youth actively participated in the programme.



4. ST. PAUL PROVINCE, BHOPAL

Aragami Ashram - Caring For The Differently Abled People

Aragami Ashram, Surlakhapa, has been receiving manifold blessings from God to reach out to the needy in and around our Ashram. We have started this mission in 2011 with a focus to provide services to differently abled people in a community-based rehabilitation model. Target area for the activities included mainly Harrai block of Chhindwara District of Madhya Pradesh. Aragami has supported persons with disabilities and migrants with various help such as income generating activities, medical support, education aid distribution of food materials and other items especially during the pandemic.



Programme For Differently Abled People

Ashram mainly caters to persons with disabilities who are residing in far and near villages and remote areas. Pandemic worsened life situations of villagers who returned from cities due to COVID-19. During the reporting year we have undertaken monitoring of recently completed project and extended partial support to beneficiaries for their ongoing income generation programme.

Income Generating Programme for COVID Migrants

Ashram provided some basic facilities to start up income generating programme for migrants. Daily wage programme was initiated for those who returned home. Accordingly, over 35 home returned migrants' availed opportunities to work in farm including cleaning common places and repairing village roads. Some people got engaged in door-to-door sale of groceries and vegetables. Ten persons with motor bikes or bicycles were assisted to sell vegetables in the villages as there are no weekly markets. Many came forward as they were given initial cost to start the business. Impact of this initiative was tremendous, slowly and gradually they started getting profit out of it. Eight of them still continuing the same work and supporting their family with a decent income. The help that we extended during COVID -19 made them to work in their own village and earn Rs.250/- daily while carrying out their own farm works and family duties. Employment opportunities for jobless migrants created through engaging in production of masks, brooms, ropes and rakhis. Aspirants were provided with raw materials and basic training. As an impact, out of 15 persons trained, five are still continuing with it and earning a steady income. Others have gone back to city to search livelihood opportunities out there. Over hundred needy families identified and provided with essential food materials and sanitary items during COVID. It was a great help for poor neighborhood families.

Health And Sanitation Programme

Another area of our focus was to improve sanitation and health environment. Patients with serious illness were assisted to have proper diagnosis and treatment in government facilities. With our accompaniment, hundreds of poor people with various chronic ailments were facilitated to undergo advanced treatment and lead a happy life.

Ashakiran Rehabilitation Centre

Ashakiran has two main programme, namely Ashakiran Hostel for children with physical disabilities and Day School for children with intellectual disabilities:

Ashakiran Hostel for Children with Physical Disabilities

At present, 30 children with physical disabilities have been provided care and support. Besides medical care, inmates have given access to nearby English Medium School, Saint Chavara National Academy, Chandametta. Constant accompaniment by dedicated staff brought students slowly to the mainstream of society. During this time of difficulties, classes are conducted through online for children. Separate online teaching for one to one is arranged for students of Ashakiran. Mobile Phones have been made available to children for this purpose. School is conducting online examinations. Poor hostel children from remote villages with illiterate parents were not in a position to follow directions of the schools; hence through regular home visits ensured children attend online session. Children with physical difficulties are doing fairly well with constant monitoring and handholding support.

Ashakiran Special School

Special school caters to the needs of those children who are afflicted with mental illness. Various methods are used to train them. Their parents are also given counselling and training to cope with their wards. Regular survey is conducted in the nearby areas to study problems in the field of disability. Research study is carried out keeping COVID Protocol, over 130 families having children with intellectual disabilities.

Celebrated National and Religious Feasts

Important national and religious feasts with target community were celebrated virtually. Days of importance like Independence Day, Republic Day and Diwali were colourfully celebrated. On this occasion cultural programme for children were conducted. Over online platform children performed dances, songs and speeches. Most of the children participated with great enthusiasm and parents were excited about seeing talents of their own children.

Finding Joy In Feeding the Needy

In order to share the joy of Our Lord's Nativity with neighbours, food kits worth Rs.1000/- were provided to poor families during Christmas season.

Aanchal, Bhopal – For care and protection of children

'Aanchal' is a frontier mission of CMI St. Paul Province, Bhopal initiated in 2010 for rehabilitating Street/ Slum/ Railway Platform Children. The major thrusts of this initiative are to address various issues related to street children, care and protection of needy children, reinstate

their lost childhood and provide wings to their dreams. Presently Aanchal is collaborating with the Government, Non-government organizations, Well-wishers and Guardians who are engaged with similar activities for children especially those who are in need of care and protection, and juveniles in conflict with the law. Other concern such as health, hygiene, shelter and education in view of accomplishing real social rehabilitation is also taken care with dedication.

Childline, Bhopal Railway Station

Childline team consists of 12 staff; provide services at Bhopal Railway round the clock. Under the project, Child Help Desk is functional at the platform number one. Children in crisis are traced rescued, restored and rehabilitated with support of police and other Government welfare departments as per need. Project is supported by the Ministry of Women and Child Development Department. Over a period of time, more than 1500 children in difficult circumstances were rehabilitated through this programme.

District Child line Centre, Narsinghpur

Childline centre is covering five tehsils and 1052 villages in the district of Narsinghpur. Helpline functional since 2018 has rescued and rehabilitated over 900 children from crisis situation.

"Aanchal" - Programme for Slum Dwellers

"Aanchal" a project implemented at seven slums covering Bhopal and Narsinghpur to ensure rights and protection of children. Through diversified activities, needs of children are catered including special focus on education, health and nutrition.

COVID Relief Work Programme

Provisions kit for inhabitants of seven slums and railway stations at Narsinghpur and Bhopal distributed respectively. Food was prepared at Community Kitchen to feed nutritious and hot meals to over 400 poor people for 20 days. Mask and Sanitizers were distributed through Child line and other agencies coordinated by the Department of Social Work.



Rural Development Service Society (RDSS), Silwani Mahatma Gandhi Old Age Home

RDSS managed old age home situated at Raisen with 25 destitute, running well with proper care and assistance by OSF Sisters and staff. Out of these, twelve inmates reached their eternal abode happily this year. Centre has rehabilitated and restored lives of five inmates through counseling services to embrace their own family. Counseling services provided to elderly people and their family members as and when needed for restoration purpose. Old age home is indeed a happy abode for all as proper food, shelter, medical care and treatment including recreational facilities provided. All the national and religious feasts celebrated with inmates made them feel at home and live a life with dignity.



Pauline Academy for Competitive Exams (PACE)

A novel initiative, PACE since July 2020, provided regular coaching classes to 85 students to appear in various examinations for government jobs like police constable, teacher etc. Centre was opened based on the community need assessment survey conducted in 35 villages to find out educational status of youngsters and aptitude for higher studies. Some of the aspirants have just got into government jobs with this effort.

Pushpa Boarding House

The boarding house with 40 tribal boys did not function due to COVID-19. But however, team of staff and volunteers were in regular contact with students to guide them to fulfill all academic requirements. Special tuition class conducted for 16 students in class X. Hostel building got renovated to upgrade it as per new rules for running hostels by the Government of India.

Sanjeevani Multi Skill Training Center

Sanjeevani multi skill training center for dropout girls were closed in the wake of COVID second wave. However, their families were reached out with food materials and

other necessary assistance to overcome the crises. Over a period of 6 years, more than 200 tribal girls supported with life skills to transform their lives. Some of them got into government jobs, after free quality education with skill training rendered by the centre.

COVID Relief Work During The Second Wave

With the support of CEVA, COVID relief work has been undertaken at many of our centers in the form of food and medical kit distribution and financial assistance. Some of the main centers included Silwani, Bhamori, Guna, Bhopal and Narsinghpur. We could reach out to over 300 families with a Samaritan heart. Poor families and children associated with schools in the Province, Sanjeevani, Childline centres also benefitted through this programme. COVID related activities were carried out in collaboration with the hospitals and district administration. Under the guidance of department of social work, entire staff, volunteers, fathers and sisters worked relentlessly day and night.



Housing Programme

It is our conscious effort to support families to have a house of their own. Focus on marginalized families living in the neighborhood communities to be included in the list of beneficiaries. Under the initiative, eight families were supported to refurbish houses. During the reporting period, four new houses are under construction nearing completion. Project supported by Fathers and well-wishers.

5. ST. XAVIER'S PROVINCE, RAJKOT

Undertaken COVID Second Wave Relief Activities

At Anjar, COVID second wave relief centre was set up to feed the hungry during lockdown period. Services delivered included distribution of grocery items with monetary aid to poor families. COVID positive cases,

including infected children isolated at quarantine centre were provided story books and stationary items.



Succor to Differently Abled People

Gandhi Dham (Shinai) centre extended succour to differently abled people. Support included essential food to people living with HIV/AIDS, differently abled people, widows and families with single parent. Over hundred families were assisted with survival kit during pandemic crisis.



Caring for Hostel Children and Family

Hostel children situated at Gondal, Jamjodhpur and Vinchiya were put under close watch. Inmates were rendered with proper healthy food, monetary aid for education with study materials. Children were giving pen, pencil; note books, uniform etc., and their parents recovered from coronavirus infection were also reached out with cash and food kit. Likewise, hostlers were well protected from getting infected while their families benefited through both financial and material support to overcome the emergency situation.



6. CHAVARA VICE-PROVINCE, BHAVNAGAR

Launched "Chavara Annakshetra" – Community Kitchen

Chavara Annakshetra -community kitchen was initiated to provide free meals to widows, elderly people, differently abled, and members of poor families. Within a short time, Annakshetra was helpful for many people in crisis. Chavara Annakshetra continued with services, meanwhile all other Annakshetras at different places in the city were closed down. It was really a blessing for needy people as hot meals served free of cost at their door step. Over hundreds of thousands poor people accessed services of community kitchen supported by good Samaritans.



Distributed Provision Kit

Every month provided more than 120 food kits to needy families around CMI Institutions and monastery. Supporting families with provision kit continued throughout COVID crisis.

Organized COVID Vaccination

With the support of Fulcher and Chitra, primary health centre (PHCs) and community health Centre (CHC) at Bortalav, COVID vaccination camp was organized. Many poor people including staff, teachers of schools were vaccinated during the camp.

Organized Mahila Mandal meetings and Celebrated International Women's Day

Series of *mahila mandal* meetings were held during the reporting period. Eight *mahila mandals* are very active and



functional. Sr. Agnet S.H. facilitated regular meetings, discussion on various topics, collected monthly savings, and provided loans to needy members. International women's day was celebrated on 10th March, 2021 at SH Hostel, Bhavnagar. Dr. Bhavya and Dr. Meera were guests for the day. They highlighted the importance and role of women in the family. During deliberated session health, hygiene and women empowerment related issues were discussed. After discussion there were some entertaining programs and games for participants.

Visamo Ashram for Aged People and Orphanage Boys

Visamo ashram for aged people and orphanage boys taking care 24 old people and 43 orphan boys. With the help of Almighty, none of inmates were affected by pandemic, rather they are healthy and doing well. For the time being we have stopped admitting new members to Ashram because of special circumstances. Even though visitors were not allowed in the Ashram due to pandemic family members longed for wellbeing of inmates by providing essential things required with great concern. Construction of extension works for dining room, kitchen and living rooms for sisters are in progress.

7. ST. JOHN'S PROVINCE, BIJNOR

CSS Foundation Day Celebrated

The 21st, establishment day of Chavara Seva Samaj (CSS) was celebrated with great enthusiasm. Entire staff members and inmates of provincial house attended the celebration.

General Councillor for Social Apostolate Visited CSS, Bijnor

Fr. Biju Vadakkal, General Councillor for Social Apostolate visited CSS, during the visit to St. John's Province. CSS staff accorded a warm welcome and congratulated him for being elected as the General Councillor. While addressing, Fr. Vadakkal appreciated all staff for their work and encouraged to be commitment and dedicated for the cause of marginalized people.

Observed Republic Day

On 26th of January 2021, 72nd Indian republic day was observed. On this day, national flag was hoisted to commemorate the day with enthusiasm. Entire staff and management reiterated to work with devotion and dedication for building a progressive nation.

Observed International Women's Day

International women's day was observed at Nagina with great enthusiasm. Around 150 adolescent girls and more than 100 women from 10 villages gathered at St. Mary's School, Nagina. On this occasion, CSS honoured 75 tailoring students by distributing graduation certificates and sewing machines for their living. Chief guest for the function, Fr. Benny Thettayil, provincial addressed the gathering and conveyed best wishes to all.



Organized Veterinary Medical Camp

One day veterinary medical camp was organized at Nathewali block. It was a different and unique camp for the benefit of remote villagers. Around 150 animals were brought for medical check-up and 250 villagers benefitted to it. It was arranged in collaboration with the block veterinary department.



COVID Second Wave Response

CSS jumped into action with its limited resources to reach out to COVID -19 positive cases. Infected cases were administered alternative medicine at quarantine centre set up. In addition, counselling services were given to students affected by the pandemic, spiritual needs of the infected people were met, transportation of dead and funeral services were organized. During the long lockdown, those people who were in need of food materials were located and food materials were distributed among them. CSS reached out to around 1500 COVID positive cases with

alternative medicine. Sanjo CMI Bhavan accommodated several COVID positive patients, mainly priests and religious who were not able to find beds at the hospital nearby. A quarantine centre was also set up with 50 beds at Sanjo CMI Bhavan and St. Joseph Academy, Ghaziabad. A few oxygen concentrators were procured in order to assist the patients. Considering our response to COVID second wave, the city administration has ear-marked our centres for dealing wave three, agreeing to supply 10-15 oxygen cylinders for positive cases with breathing problem.



**“ Water is life's
mater and matrix,
mother and medium.
There is no life
without water.”**



SDG 6

A HUMAN RIGHT

Access to clean water is a **HUMAN RIGHT**.

Ensuring access to clean water and sanitation is usually a responsibility of local governments, and relies on management, and urban planning



ANNOUNCING SHORTLY!!!

CEVA EXCELLENCE AWARD

FOR

BEST PERFORMERS TOWARDS SUSTAINABLE
DEVELOPMENT GOALS (SDG)

THEME FOR THE YEAR 2021-22

“CLEAN WATER AND SANITATION”

ELIGIBILITY

ALL CMI PROVINCES, VICE PROVINCES, REGIONS
&

SUPPORTED INSTITUTIONS AND NGOs

ENTRIES: MAXIMUM THREE ENTRIES FROM EACH ENTITY

SELECTION BY A PANEL OF PROFESSIONALY QUALIFIED EXPERTS!!!

NB: AWARD POLICY DETAILS SHALL BE COMMUNICATED SOON



Happy Onam



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