

1990 – 2020

from a capacity development organisation
to an issue based strategic institution



UNNATI

Organisation for Development Education

Vision

Towards an inclusive and democratic society

Mission

Promote social inclusion and democratic governance so that the vulnerable sections of our society, particularly the dalits, tribals, women and persons with disabilities, are empowered to effectively and decisively participate in mainstream development and the decision-making process

Thematic Areas

Social Inclusion and Empowerment

Governance and Social Accountability

Social Determinants in disaster risk reduction



What we do

Capacity development of vulnerable communities and their institutions for demanding entitlements and enforce accountability

Develop innovative participatory methods, tools and techniques to make social development programs implementation simple, inclusive, transparent and accountable

Influence and facilitate program and policy formulation for the government by collaboration and representation of people's voice and testimonies

Relief support for families in distress (April – May 2020)

Teams stayed at locations coordinating with GPs and adm, identifying and supporting families in need of immediate relief

Dry food rations and hygiene kits arranged for 2887 HHs (support from RCRC, FES and AIF)

Drinking water arranged for 1278 households



June onwards, supporting distressed HHs in intervention areas continued but focus brought back to projects.

Strategies developed to reach out, orient people on safety against COVID, and support for access of public programs and essential services – daily phone contact with citizen leaders, conference calls

Within UNNATI, there were more frequent virtual meetings across levels and offices and communications with facilitators and volunteers at remote locations

Need based short-term projects also developed and implemented

Opportunity for greater networking and coordination with CSOs

Strategies for outreach and information transfer

Permission sought from administration for helping in response. This provided opportunity for coordination of local level support and feedback to administration

Citizen leaders were reached on a daily basis initially through phones. Mapped the availability of smart phones. Later procured tablets. Whatsapp groups. Gradually they were taught to use other platforms – teleconferencing, zoom

Citizen leaders played key role in identifying families in distress and linking them to appropriate support mechanisms.

They helped GPs with registration and quarantining of returning migrants. They supported families to access govt relief, services and lodging grievances

Strengthening Disaster Governance

Decentralised Covid Response Plan - In April, GP Covid-19 response plan was developed for 5 GPs in Bhachau, Kutchch. Based on this a template and guideline was prepared.

The framework and the template of GP Covid Response Plan was adopted by AAPI towards end of May. Eight sets of communication material focusing on safety from COVID 19 was developed and displayed.

On the process of making quarantine institutional facilities more humane and acceptable, online meetings are organized by PRIA and partner organizations (CYSD, Samarthan, SSK and UNNATI) inviting GP representatives from different states

Study on response of GPs and functioning of front-line workers (ASHA and anganwadi workers) during lockdown in Gujarat

reiterated the importance of GP being the coordination point for a comprehensive strategy for response

Dialogues on Building Resilience of Local Communities for effective Response to COVID-19 and alerts on cyclone NISARG

Eight conversations with IAG partners under “Samvaad (Dialogue) Series”. 90 CSOs were reached out. 30 CSOs participated in online SPHERE India programs under Covid Academy.

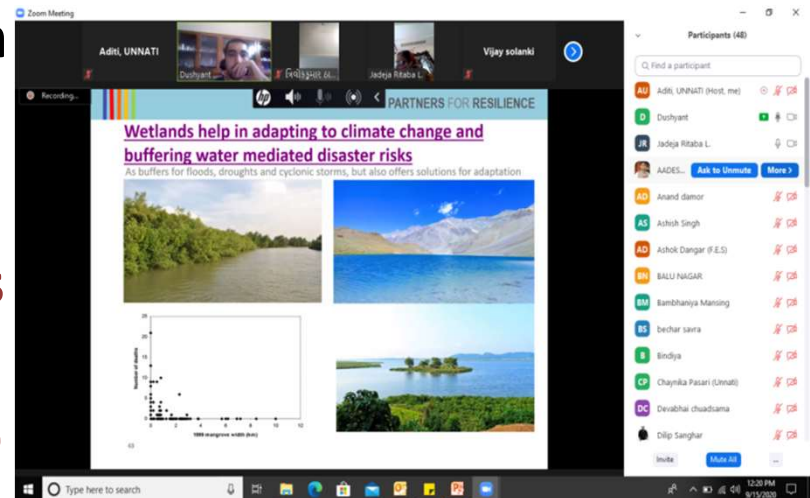
Assessment of basic services and covid response in Urban Slum Settlements

Support extended for study conducted by RedR and Unicef Gujarat covering 82 slum pockets in Ahmedabad, Surat and Vadodara city. It helped in identifying the gaps in waste management, water supply, sanitation and hygiene.

Study to understand conservation and management of wetlands in 10 GPs. Risk profile and a matrix of actions developed for CPR management. Proposed actions are integrated in GPDP. DDMP of Kutch was reviewed and engagement with GIDM on Risk Informed GPDP.

Online training on “Community Resilience Building against Disasters through Integrated Risk Management Approach” during Sep 15 – 17, 2020

Building community resilience against water-mediated risks and enhancing water security



Socio-technical facilitation for owner driven housing reconstruction in Gorkha, Nepal

House Owner's Reflection and Satisfaction Mapping

Field survey to understand owners' financial arrangement on housing reconstruction

Radio live Phone-in programme around Reconstruction and COVID-19

Governance and Social Accountability

Community monitoring of public programs continued extending to PMGKY. Govt portals used to verify whether families were receiving their entitlements in 2 blocks of Gujarat for 11 govt programs

Citizen leaders helped 1090 entitlement holders in application process and grievance. They were trained to use govt web portals for info on status of access of entitlements and initiate SA actions. 225 CLs are engaged through digital media platforms for regular communications.



Awareness campaign on Jan Dhan-ADHAAR-Mobile (JAM) undertaken.

Payment of Palak Mata Pita entitlements not transferred. There are 17,000 children enrolled under the scheme in Gujarat. Issue put up to the state admn. Money transferred within 20 days.



UNNATI is part of multi-round survey to assess the impact of COVID in rural areas initiated by RCRC

In partnership with PRIA, CYSD, Samarthan and SSK consultations around social security of migrant workers, draft policy document, shared with state governments

Women's groups played active role in the protection of CPR which had become more prone to illegal mining, water theft for commercial purposes and encroachment.

After MGNREGA started May 19, they supported returning migrants to get job cards (11,234) and demand for work (49 GPs).

They supported GPs to plan common and individual works in such a way that all those who needed work could be accommodated. They continued to monitor work implementation

In 42 villages, JSG have helped to form Pastureland Development Committees

Water Governance



178 households were supported to access underground rain water harvesting tanks with catchments under MGNREGA.

216 households supported to access LPG through govt program.

Strengthening Quality Education and School Governance

April 15 onwards, efforts made to list children studying in classes 1-8 and smart phone availability to plan for studies in small groups of 4 or 5. Education continued through volunteers (trained on subject content and pedagogy) using mobile phones, tablets, laptops and screens.

Class wise audio-visual content developed. Children taught how to open online links. Whatspp groups of parents used.



Campaign in 30 villages of Bhachau for inclusion of vulnerable children in online learning class (DD Girnar channel of the Govt)

Campaign in 33 villages of Rajasthan for admission of eligible children

Training of govt school teachers on pedagogy and engaging children and parents during lockdown every month using zoom platform

140 girls in secondary class from 6 villages are being provided support in Physics, Chemistry and Biology.

Support for accessing scholarship and benefit of Palanhar yojana



Ensuring Nutrition Security and Strengthening community Resilience against Drought

1000 women are being supported to adopt improved agricultural practices and 77 % improved agricultural productivity per bigha of land despite three continuous years of drought and widespread crop failure.

200 women farmers supported to access zero-interest loans from a NBFC so that they could manage farm inputs. 263 supported with seeds for the kharif

Alternative methodology used for the training of para agriculture volunteers. It involved a mix of remote (zoom based) and classroom facilitation with 126 participants. Audio-visuals and e-materials were used for the sessions.

Through use of mobile phones and other platforms 83 adolescent girls oriented on safety and precautionary measures during COVID, care during home quarantine, sexual and reproductive health, domestic violence and management of stress. They spread the message to 4100 HHs. Along with ASHA and ANM, they helped to train 500 members of VHSNC across 31 GPs

